

REPORTS

OF THE

MEDICAL SUPERINTENDENT

OF THE

Provincial Lunatic Asylum,

TORONTO,

FROM 1st JULY, 1853, TO 1st MARCH, 1857.

TORONTO, JANUARY, 1858.

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1852/57

COMMISSIONERS OF THE ASYLUM.

HON. SAMUEL MILLS,
JAMES BEATY, Esq.,
ROBERT ARMOUR, Esq.,
WILLIAM CAWTHRA, Esq.

OFFICERS :

JOSEPH WORKMAN, M. D., *Medical Superintendent.*
BENJAMIN WORKMAN, M. D., *Assistant Physician.*
JAMES MCKIRDY, *Bursar.*
COLIN S. EASTWOOD, *Steward.*
MARY PARKES, *Matron.*
ROBERT BLAIR, *Steward of Branch Asylum.*
ELIZA BLAIR, *Matron of Branch Asylum.*

R E P O R T

(19th JUNE, 1854,)

Of the Medical Superintendent of the Provincial Lunatic Asylum, Toronto, as required by the Act 15 & 16 Vic. cap. 188.

To the Honorable the Legislative Assembly of the Province of Canada.

May it please your Honorable House :

Pursuant to the requirements of the Act 15 and 16 of Her Majesty, cap. 188, "For the better management of the Provincial Lunatic Asylum at Toronto," the undersigned, the Medical Superintendent, most respectfully submits the following Report :—

In conformity with instructions from His Excellency the Governor General, the undersigned was invested with the temporary medical charge of the Asylum, on 1st July, 1853. The number of patients at that time in the Institution was found to be 345 ; of whom 187 were males, and 158 females.

The general health of the establishment was unsatisfactory, and the appearance of the patients too clearly indicated that serious defects in the sanatory provisions of the house existed. Only a cursory examination of the several parts of the Institution was required to establish the conviction, that

a variety of nuisances existed in it, and called for prompt attention and removal.

Every apartment abounded with foul air; and it was found that beneath the basement floors, covering a space of six hundred feet in length by thirty to one hundred feet in breadth, there had, from some undiscovered cause, accumulated a mass of filth and impure fluids, the stench from which, when first exposed, was so insufferable and overpowering, as instantly to sicken several of those, who, including the Visiting Commissioners, chanced to inhale it.

The undersigned could not obtain from any available source of information, whether architect, builders, or operatives, who had been employed in the erection of the House, or officers and servants in the establishment, any adequate explanation of the existing evil. There could, however, be no doubt, as to the pestilent influences of the nuisance; and no physician having a due regard for the lives and health of his patients, or for his own reputation, could tolerate its continuance.

In the eastern division of the house, beneath the kitchens and adjoining parts, the filth was found to measure from three to five feet in depth; and was of varying consistence, from that of dense mud to thin molasses. The superjacent floors and joists were so rotten as to yield under every passing foot, and in several places had given way, leaving openings from which issued the most offensive effluvia. A rank fungous vegetation hung from the under surface of the decayed timbers. The dry-rot had seized the wood skirtings, and other parts above, and extended into the upper stories, where it is likely to continue its ravages.

But however pressing was felt to be the necessity for an early exploration and cleansing of the foundations, it was deemed exceedingly hazardous to undertake the work during the summer or autumnal months. No greater evil could

probably result from the continuance of the nuisance, in its present state, than from its exposure and agitation in the process of removal. This conclusion was amply verified, even in the cold weather of November, December, and January, when at length the accumulated filth was disturbed and carried to a proper distance outside.

The health of the inmates, as well the lunatic patients as the officers and servants of the Institution, was much affected, and continued so until the whole work of cleansing, repairing, and altering the basement was completed.

The cause of the bad state of the foundation was discovered to have been a defect in the deep drainage, of a most unaccountable character. The interior drains from the kitchens, laundries, and other parts, being followed from their sources to the points of emergence from the building, were here found to be further impenetrable, having never been carried out to the main sewer, which was at the short distance of 22 feet. The remedy for this evil was palpable, and was promptly applied.

A commencement of purification and improvement having been made, fresh requirements from day to day, became apparent. The removal or mitigation of great nuisances afforded better opportunity for the discovery of minor, or less obvious ones. It was found that the foundations of the numerous compartments of the building were unprovided with openings of communication with each other, or with the exterior; so that the foul air, generated in them, remained undiluted and stagnant, passing off occasionally in concentrated virulence, in hot weather, through the chinks and accidental apertures in the floors, and diffusing itself throughout the house.

With a view, alike to the preservation of the building, and the safety of the inmates, the establishment of a free sub-

ventilation, (a provision too generally overlooked by architects,) was manifestly indispensable.

This work was carried on concurrently with the cleansing of the foundation, and the repairing and completion of the drains.

About eighty distinct compartments were connected with each other, by openings of large size, beneath the doors and other parts; whilst the external walls were penetrated, and descending flues, obliquely passing down from the level of the surface without, to about eighteen inches above the ground within, and provided each with a strong cast iron grate, were constructed, to the number of twenty-six, at proper distances apart.

By this plan of free atmospheric communication, the ventilation of the foundation has been secured; and in future, however foul it may become, from obstructions in the drainage, the impure air will find speedy and constant egress. In order to render the circulation as extensive and free as possible, and to remove all existing sources of pollution, it was deemed expedient to remove, by a tedious and laborious process, the earth beneath the floors, to the extent of several hundred cart loads, which had been saturated by the dirty suds and kitchen slops of five years accumulation. The improvements above mentioned could not be effected without considerable expense; but no outlay ever made in connection with the Institution, was more imperatively demanded, or could be more valuable in its results.

The provision originally made for the ventilation of the Asylum, from the basement upwards, was so manifestly useless and absurd, as to render it a matter of surprise that it had ever been adopted. In the corridors and apartments connected with them, orifices about five inches in diameter, at the junction of the ceiling with the partition walls,

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indicate the commencement of ascending vertical flues, which terminate in the attic, in zinc tubes, about eight inches in diameter. These tubes run horizontally, and terminate, in each division of the house, in a large round chimney, the inferior openings or fire-places of which, are in the basement, some sixty or seventy feet below the entrance of the zinc tubes mentioned. By means of these chimneys, with fires kept burning briskly at the bottom of them, it was supposed that a free current of air from the corridors and bed-rooms would be induced.

Observation has attested the fact, which a very slight acquaintance with the simple laws of pneumatics might have anticipated, that the foul air flues serve as often for the conduction of air and smoke from the round chimneys into the interior, as from the interior into the chimneys. The fire at the bottom of the chimney rarifies the column of air in it, and causes an ascending current. This current is kept up by fresh accessions of air from beneath, rushing through and over the fire. The chimney, as if to render it more useless when most required, is surmounted by a large copper cowl, which, being of great weight, does not turn unless under the force of a pretty brisk wind. Should the cowl, on days of light wind, chance to have stood in a wrong direction, it remains so; and whatever slight current of air, or occasional puffs of wind, may obtain, must enter it, and resist the emerging current of heated air and smoke proceeding from the fire. Under such circumstances, the inmates of the Asylum often find their rooms full of smoke, without being able to account for its source.

Had the foul air tube in the attic, been made to deliver its contents beneath the fire in the chimney, instead of sixty feet above it, the shaft might have served as an efficient air pump to the parts of the house connected with it. It was

certainly an unreasonable expectation that the moving fluid would be drawn into the pump, not from beneath the piston, but above it.

It has appeared to the undersigned, that, at a very trivial additional expenditure, the existing ventilating flues and pipes might be rendered properly operative, were the receiving zinc tube which enters the chimney at the top, carried down through the several floors to the basement, and made to deliver its contained air beneath the fire, (the latter being so enclosed as to prevent any other supply reaching it;) the rarefaction of the air above the fire, would induce a supplying current from the zinc tube, and thus render its connected vertical flues in the corridors and other parts effective in carrying off their contained air.

It is, however, very questionable, whether the plan of ventilation, by means of which the warmer or lighter stratum of air in apartments is carried off, to be replaced by accidental supplies, perhaps as foul as that discharged, should be regarded as an eligible mode of atmospheric purification.

In the summer, when a free ingress of pure air, through doors and windows, is to be wished for, no inconvenience would result; but in the winter, when it is desirable to keep the temperature of the interior as high as possible, and when, too, ventilation is most required, it could hardly be employed without serious disadvantage.

The subject of ventilation of large public institutions, is one of great importance; and is acknowledged by modern practical authorities to be involved in much obscurity. That arrangement, by which a sufficient quantity of pure air of a sufficient density, and a proper temperature, is thrown into a building, whilst, at the same time, the previously contaminated air is expelled, must be the most appropriate.

Rarefied air is well known to be depressive of nervous energy, and debilitating on muscular power; two physiological results, above all others, to be deprecated in the treatment of insanity.

The water supplied to the Asylum by the forcing pumps on the bay shore, is not less impure than the air of the rooms. It is drawn from the lake, at the distance of only sixty yards from the mouth of the main sewer, which carries off all the filth of the privies, laundries, and sinks of the establishment.

The presence of the laundries within the building, is a source of perpetual nuisance in this Asylum. The erection of suitable buildings for these indispensable conveniences, together with an Hospital for the sick, should be proceeded with at an early date.

The present building, being only the trunk of the contemplated plan, is so defective in arrangements for the proper classification of Lunatics, as to render the Institution comparatively inefficient as a curative establishment.

The whole of the patients of each sex are provided with only three corridors, or divisions, in each half of the house. It must be manifest to any one acquainted with the organization and management of Lunatic Asylums, that this division of over one hundred and ninety insane persons of each sex, of every degree and form of mental alienation, must be almost useless for sanative purposes; and cannot, even under the most vigilant and discreet supervision, fail to be attended with disagreeable, and, occasionally, untoward consequences.

Until the Wings, originally designed to constitute an indispensable portion of the Asylum, shall have been erected, it must be regarded as quite unfit for the purpose for which it was intended.

The windows of the Asylum, though considered by the building committee, and the architect, as unexceptionable in their construction and strength, have twice within the last year been found inadequate to the prevention of casualties

An evil of inconceivable magnitude, and distressing results, in the working and present condition of this Institution, has been the introduction into it, of criminal Lunatics from the Provincial Penitentiary, and the County Jails. It is an outrage against public benevolence, and an indignity to human affliction, to cast into the same house of refuge with the harmless, feeble, kind-hearted and truthful victims of ordinary insanity, those moral monsters, which nature sometimes seems to have formed, for the purpose of teaching us the inestimable value of the constitution with which the species has been blessed; or, yet worse, those villians who affect insanity as a means of evading the just punishment of the most atrocious crimes.

In several cases of convicts, reported to His Excellency the Governor General, hardly a doubt could be entertained as to the imposture which had been practised; and it is a fact too well known in this Asylum, that one such inmate gives more trouble, and affects more moral detriment, on both patients and keepers, than twenty real mad-men. So long as only three wards are at the command of the Medical Superintendent, and the law which orders the transmission to the Asylum, of Penitentiary and Jail Patients, whether real Lunatics or impostors, continues to exist, it must be impossible to preserve that salutary discipline and mild management, which are indispensable to the successful operation of the Institution. Such has been the result in other places in which the same evil has obtained; and such it must continue to be here, until other and more appropriate provision is made by the Legislature for the disposal of the class of cases referred to.

Much attention has been given, during the past year, to the securing of free and regular exercise to all the patients fit to be sent out of doors. Before last July, no planked, or other walks had been laid for the accommodation

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of the patients. This defect has been supplied at a trivial outlay, the only disbursements having been that for lumbe and nails. The garden has, this spring, been brought into better condition and form ; its present state is indeed creditable to the Institution. The farm requires drainage ; but is, nevertheless, worked to considerable advantage. The benefits to the patients, resulting from the tillage of this piece of ground, are incalculable.

It is customary to introduce into the Reports of Lunatic Asylums, extensive and numerous details of a statistical character, the utility of which may be questioned. The undersigned deems it expedient, on this occasion, merely to furnish such a numerical exposition of the state of the Asylum, as may be found of practical value.

The following statement shews the number of patients admitted in each year, from the opening of the temporary Asylum on the 21st of January, 1841, till 17th June, 1854, together with the number of the same remaining in at the latter date.

Y E A R .	ADMITTED.	REMAIN IN.
1841	59	4
1842	91	9
1843	58	4
1844	64	6
1845	78	7
1846	107	19
1847	143	20
1848	134	16
1849	144	36
1850	128	30
1851	130	37
1852	170	46
1853	183	77
1854, Five and a half Months.....	79	62
Totals.....	1568	373

Of the above 1568 patients admitted, 893 are recorded as males, and 675 as females. Of the 373 patients remaining in, 193 are males, and 180 are females.

The number of males admitted has exceeded that of the females by thirty-two per cent; but the number of males at present remaining in exceeds that of the females by only nine per cent.

Of the 893 male patients admitted, the discharges have been 528; or about fifty-nine per cent.

Of the 675 female patients admitted, 378 have been discharged; or fifty-six per cent.

Of the 893 male patients admitted, 158 have died; or about seventeen and two-thirds per cent.

Of the 675 female patients admitted, 122 have died; or about eighteen per cent.

In the first nine years, the admissions of males exceeded those of females by over fifty per cent; but in the last three years, the excess has been only about ten per cent; and in the last twelve months of the latter period, the female admissions have exceeded those of the males by about twelve per cent.

It is not, however, from these figures, to be concluded, that female insanity is increasing in Canada; the comparative incidence of insanity, with reference to sex, is probably alike.

The true explanation of the disparity is sufficiently obvious. Male Lunatics, being usually more ungovernable and dangerous, when at large, than females, are, from necessity, sent in with more promptitude. Females have, until recently, been detained at home; hence the great excess of male over female patients in the first years of the Institution; and the contrary fact, of late years, when not only the fair propor-

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tion, but also a large arrearage of females has begun to enter.

The ages of 373 patients remaining in, are as follows:—

Under 20 years.....	8
From 20 to 30 years.....	98
30 to 40 do	130
40 to 50 do	70
50 to 60 do	42
Over 60 do	25
	373

The Statistics of all Lunatic Asylums shew a continual increase of cases remaining in. In new Institutions, and especially those of districts previously unprovided for, this fact is of course very prominent. A great disadvantage connected with the influx of patients into new Asylums, is the long-standing, and consequent hopeless condition of a large proportion of those entering. This Institution has had more perhaps than the usual average of such cases; as its foundation was deferred until many of the County Jails had become largely peopled with maniacs.

Of the 373 patients now in the Asylum, 121 have been in four years, and upwards; and 67 from two to four years; making together over one-half the entire number.

Of these 188 cases, probably less than ten per cent. will end in recovery; whilst from the remaining 185, a considerable number will pass into the increasing list of incurables.

The Institution contains 28 cases of Epilepsy, six of Idiocy, and three of Paralysis; making, together, one-tenth of the whole number in it.

It can hardly be over estimating the hopeless cases, to put them at three-fifths of the whole now under treatment,—say 224.

The non-completion of the building is a great public evil, but surely it requires only to be made known, in order that

the proper remedy may be speedily applied. The consequences of the over-crowded state of the Asylum have already been disastrous ; and no amount of vigilance, or professional skill, on the part of the medical superintendent can avert those periodic visitations of disease, which have ever been found to be the result of this error. The improved state of the basement may, it is hoped, contribute much, in the future, to improve the general health of the Institution ; but the fact must not be concealed, that unless additional accommodation is early provided, much evil will result to a helpless and suffering class of the community.

The attention given to the relief of insanity, and the liberal provision made for the requisite expenditure, in other countries, but especially in the neighbouring States, contrast unpleasantly with the indifference and parsimony of this Province in this department of public benevolence.

The following statement, shewing the average number of patients, and the expenditure on their support, in a few of the Lunatic Asylums of the United States, in the year 1853, may be interesting, if not instructive :—

A S Y L U M .	No. of Patients.	Expenditure in 1853.	Average per Patient.
Hartford.....	178	\$33,622	\$188.33
Pennsylvania.....	229	53,044	231.63
Utica.....	435	79,334	182.37
Butler.....	136	25,590	188.16
Worcester.....	520	53,636	103.15
Richmond.....	377	47,936	126.65

The Parliamentary Grant of last year for the support of this Asylum was equal to about twenty-one pounds for each patient, or eight shillings per week. It is quite impossible for this pittance to furnish in an Asylum, that support and comfort which the peculiar wants of the insane require.

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The expense of such establishments is not comprised solely, nor indeed chiefly, under the heads of diet and clothing. When other items of necessary disbursement are provided for, the balance left for food and clothes, must be quite insufficient; and to carry into effect retrenchment in these, must be disastrous economy. Of the incurable lunatics at present encumbering this Asylum, and cast for life a burthen on the public funds, it is difficult to say how many might have been restored to reason and usefulness, had more liberal provision been made for their appropriate treatment. Insanity will not improve under light diet and defective clothing; it is never cured unless bodily strength and enriched blood are secured for its victims.

The number of patients found in the Asylum by the undersigned,
on July 1st, 1853, on assuming charge, was. 345
The number since admitted up to 17th June inclusive, has been. . . 184

Total under treatment in last 11½ months. 529

The numbers for the preceding twelve months, from 1st July, 1852,
to 1st July, 1853, were:—

Remaining 1st July, 1852 325
Admitted from 1st July, 1852, to 1st July, 1853. 155

Total under treatment. 480

Of the 529 patients under treatment in the last eleven and a-half
months, ending 17th June, 1854,—

There have been discharged. 110
There have died. 44
There have eloped. 2
There remain in. 373

Total. 529

Of the 480 patients under treatment in the twelve months ending 1st
July, 1853,—

There were discharged. 81
There died. 51
There were unaccounted for. 3
Remained, 1st July, 1853. 345

Total. 480

The number of cases of re-admission since 1st July 1853, has been 22,—

Of whom there had been discharged prior to 1st July, 1853.	11
And had been discharged since 1st July, 1853.	11
Total.	22

In the 44 cases of death occurring in the last 11½ months, with one exception, *post mortem* examinations have been made, and fully recorded, with the view of ascertaining the cause of death, and of acquiring additional knowledge of the structural lesions connected with insanity.

The following brief outline of the morbid appearances presented by forty-three cases, may not be uninteresting:—

CASE 1.

A Male, aged 61.—Duration of Insanity, before admission, six weeks.—Time in Asylum, one month and five days.—Acute mania, ending in exhaustion.

P. M.—Softening of brain.—Chronic peritonitis.

CASE 2.

A Male, aged 41.—Duration of Insanity, before admission, six weeks.—Time in Asylum, ten months.—Acute mania, ending in exhaustion.

P. M.—Chronic peritonitis.—Intestinal ulceration.—Chronic cystitis.

CASE 3.

A Female, aged 49.—Duration of Insanity, before admission, unknown.—Time in Asylum, three years and ten months.

P. M. Intestinal ulceration.—Pulmonary tubercles.—Polypus uteri.—Atrophy of ovaries.

CASE 4.

A Female, aged 30.—Duration of Insanity, before admission, six weeks.—Time in Asylum, three months.—Melancholia.

- Cerebral vascularity.—Liver and spleen enlarged.
 —Diseased mesenteric glands.—Intestinal ulceration.

CASE 5.

A Female, aged 18.—Duration of Insanity, before admission, some weeks.—Time in Asylum, seven weeks.

Cerebral effusion.—Intestinal ulceration.

CASE 6.

A Male, aged 38.—Fracture of skull by a convict lunatic.—Patient survived eight days.

P. M.—Suppuration and ulceration of brain, with extensive extravasation.

CASE 7.

A Male, aged 31.—Duration of Insanity, before admission, a year and a-half.—Constant stridor dentium, and muttering delirium, partial paralysis.—Diagnosed by his former medical attendants to be softening of the brain.

P. M.—About a pint of clear water in the head.—Brain compressed.—Great meningeal vascularity.

CASE 8.—(Bell's Disease.)

A Male, aged 60.—Duration of Insanity before admission, two weeks.—Habits intemperate and irregular.—Time in Asylum, one month.—Treatment, generous support.

P. M.—Great meningeal vascularity.—Cerebral softening.—Adherent pericardium.—Bladder inflamed, and much thickened.

CASE 9.

A Female aged 42.—Duration of Insanity, before admission, seventeen years.—Time in Asylum, three months.—Obscene and profane.—Greatly emaciated.

P. M.—Meningeal thickening, and adhesions.—Slight cerebral effusion.—Marks of chronic carditis.—Intestinal inflammation.

CASE 10.

A Male, aged 64.—Duration of Insanity before admission, several years.—Time in Asylum, five weeks.

P. M.—Cutaneous marks of tertiary syphilis.—Cerebral effusion.—Hypertrophy of heart.—aortic dilatation.—A second caput coecum, appended to ileum.

CASE 11.

A Female, aged 27.—Duration of disease, before admission, six months.—Time in Asylum, two years and a-half.—Melancholia, with constant ptyalism.

P. M.—Gangrene of both lungs.—Retroflexion of uterus.—Intestinal inflammation.

CASE 12.

A Female, aged 35.—Duration of Insanity, before admission, unknown.—Time in Asylum, fourteen days.—Habits irregular.—Mental alienation slight, but moral perversion remarkable.

P. M.—A large exostosis attached to crista galli, and extending backwards, obtruded on the anterior lobes of the brain, producing softening and disorganization.—Pulmonary tubercles.—Gonorrhoeal ulceration.

CASE 13.

A Male, aged 14.—Duration of Insanity, unknown.—Epileptic.—Died in a fit.

P. M.—Apoplectic fulness of all the vessels of the brain and lungs.

CASE 14.

A Male, aged 35.—Acute mania, followed by exhaustion and bodily and mental torpor.—Persistent diarrhea.

P. M.—Chronic meningitis.—Intestinal inflammation.

CASE 15.

A Female, aged 17.—Idiotic and epileptic for last nine years.—Time in Asylum, five weeks.

P. M.—Cerebral effusion.—An osseous spine about half an inch long, projecting from base of skull.—Hydropericardium.

CASE 16.

A Female, aged 45.—Duration of disease before admission, three months.—Time in Asylum, two and a-half months.

P. M.—Thickening of left ventricle of the heart.—Softening of intestinal mucous membrane.

CASE 17.

A Female, aged 47.—Concussion of brain, from a fall.

P. M.—Cerebral extravasation.

CASE 18.

A Female, aged 75.—Duration of Insanity, unknown.—Time in Asylum, four months.

P. M.—Meningeal thickening.—Cerebral effusion.—Enlarged liver.—Intestinal inflammation.

CASE 19.

A Male, aged 55.—Duration of Disease, before admission, two weeks.—Time in Asylum, three days.

P. M.—Cerebral effusion.—Meningeal thickening, and great vascularity.

CASE 20.

A Female, aged 40.—Duration of Insanity before admission, three weeks.—Religious mania.—Treated by her medical attendants by very active depletive measures.—After reaching Asylum, typhoid symptoms supervened.

P. M.—Rupture of left epagastric vein, with very copious extravasation.—Nothing besides.

CASE 21.

A Female, aged 45.—Duration of Insanity, before admission, five days.—Time in Asylum, four weeks.—Symptoms of gastric inflammation throughout.

P. M.—Hour-glass stricture of stomach.—Gastro-enteric mucous membrane inflamed and softened.

CASE 22.

A Male, aged 60.—Time in Asylum, five and a-half years.—Had cervix femoris fractured six months before death.

P. M.—No osseous union.—Head of femur disintegrated.—Cervix soft and crumbly.—Ischium similarly affected.—Grey matter of brain soft, pale and wasted.—Softening and dilatation of heart.—Great dilatation of aorta and pulmonary artery.—Intestinal mucous membrane softened.

CASE 23.

A Male, aged 45.—Duration of Insanity before admission, two weeks.—Time in Asylum, one month.

P. M.—Meninges highly vascular.—Grey matter of brain soft, and much wasted.—Gastro-enteric inflammation.—Nephritis.

CASE 24.

A Male, aged 58.—Time in Asylum, seven years.—Died suddenly.

P. M.—Two ruptures in left lung, from which a large escape of blood into the chest had taken place.—Bronchi extensively ossified.—Meninges of brain very vascular.—Vertebral, internal carotid, basilar, cerebral and cerebellar arteries, all ossified.

CASE 25.

A Female, aged 75.—Duration of attack, before admission, one month.—Had six previous attacks.—Time last in Asylum, ten weeks.

P. M.—An abscess, opening at 1st rib, was traced by sinuous extension to the ileum.—The 1st, 2nd, 3rd, 4th and 5th ribs were carious.—Liver enlarged.

CASE 26.

A Female, aged 40.—Duration of Insanity, before admission, two months.—Time in Asylum, 5½ months.

P. M.—Softening of brain.—Gangrene of lungs.—Hypertrophy of the uterus, and right ovary.

CASE 27.

A Male, aged 32.—Duration of Insanity, before admission into the Asylum, six months.—Time in the Asylum, 2½ years.

P. M.—Pulmonary tubercles, and numerous cavities.

CASE 28.

A Female, aged 34.—Epileptic.—Time in Asylum, 7 years.—Died in a fit.

P. M.—Cerebral congestion, and hobnailed liver.—Enlarged spleen.—Hypertrophy of uterus.

CASE 29.

A Female, aged 30.—Epileptic.—Duration of Insanity before admission, several years.—Time in Asylum 2 years.—Died in a fit.

P. M.—Meningeal effusion.—Softening of brain.—Dilatation of both sides of heart.—Enlargement and ante-flexion of uterus.

CASE 30.

A Male, aged 44.—Time in Asylum, 2 years.—Died of diarrhoea, and bed-sores.

P. M.—Nothing remarkable.

CASE 31.

A Female, aged 47.—Duration of Insanity, before admission, 2 weeks.—Time in Asylum, 5 months.—Persistent raving mania.

P. M.—Slight meningeal effusion.—Heart small and soft.—Gastro-enteric mucous membrane inflamed and softened.

CASE 32.

A Female, aged 60.—Very helpless and infirm.—Time in Asylum, 6 months.

P. M.—Softening of brain, with slight effusion.—Liver tawny and soft.

CASE 33.

A Male, aged 20.—Idiotic.—Time in Asylum, 6 months.

P. M.—Slight hardening of brain.—Grey matter scanty. A small encysted tumour on anterior of corpus callosum.—Old traces of meningeal inflammation.—Liver much enlarged.—Gastro enteric mucous membrane gangrenous.

CASE 34.

A Male, aged 65.—Duration of Insanity, 20 years.—A wandering and harmless lunatic, brought into the Asylum in a dying state.—Time in Asylum, 1 day.

P. M.—Recent severe peritoneal inflammation,—A large adherent scrotal hernia.

CASE 35.

A Male, aged 34.—Time in Asylum, 8 years.

P. M.—Softening of brain.—Cerebellar effusion.—Pulmonary tubercles.—Gastro-enteric mucous membrane ulcerated.

CASE 36.

A Male, aged 36.—Duration of Insanity, before admission, 2 years.—Time in Asylum, one year and a-half.—Sullen and taciturn.

P. M.—Cancer of stomach, terminating in rupture of blood vessels, and copious hemorrhage.

CASE 37.

A Male, aged 39.—Duration of Insanity, before admission, several months.—Time in Asylum, 4½ months.—Previous habits, irregular.

P. M.—Meningeal effusion.—Cerebellum and medulla spinalis very hard.—Pulmonary tubercles, and cavities, (though neither cough nor spitting.)—Ulcerated intestines.—Mesenteric glands much enlarged.

CASE 38.

A Female, aged 40.—Duration of Insanity, before admission, 2 months.—Time in the Asylum, 1½ months.—Much emaciated when admitted.

P. M.—Pulmonary tubercles.—Enlarged liver.—Nephritis.

CASE 39.

A Male, aged 23.—Duration of Insanity before admission, 1 year.—Time in Asylum, 1½ year.

P. M.—Pulmonary and mesenteric tubercles.—Laryngeal ulceration.

CASE 40.

A Female, aged 53.—Time in Asylum, 13½ years.—(Exciting cause, Jealousy.)

P. M.—Cerebral and meningeal effusion.—Grey matter wasted.—Pulmonary tubercles.—Hydropericardium.—Hypertrophy of heart.—Dilatation of aorta.—Mesenteric tubercles.—Uterus enlarged, and its cavity obliterated by a fibrous adherent tumour.—Hardening and atrophy of ovaries.

CASE 41.

A Female, aged 38.—Duration of Insanity, before admission, 8 months.—Time in Asylum, 8 months.—Tore out an iron window in the fourth story, and leaped to the ground.—Survived 11 hours.

P. M.—Comminuted fracture of shaft and neck of femur.—Fracture of 2nd, 3rd, 4th and 5th left ribs; and of 3rd, 4th and 5th right, with laceration of intercostal vessels.

CASE 42.

A Male, aged 30, of very intemperate habits.—Duration of Insanity before admission, one month.—Time in Asylum, $3\frac{1}{2}$ months.—Halting in speech.—Great propensity to tear clothes and bedding.—Comatose for several days before death.

P. M.—A false membrane of two distinct layers between dura mater and arachnoid, covering nearly the entire surface of the cerebrum, and containing a considerable quantity of bloody serum.—Several old callosities of fractured ribs.

CASE 43.

A Male, aged 58, third attack.—Duration of Insanity, before admission, eleven months.—Time in Asylum, one year.—Noisy and profane.—Exciting cause, said to have been religious.

P. M.—Meningeal thickening, and effusion.—Cerebrum healthy.—Ophthalmic arteries ossified.

NOTE.—In at least four-fifths of the preceding 43 cases, old or recent pleuritic adhesions were found, though not noted in the details here given. In a majority of the cases of long standing Insanity, effusion of organized lymph on the surface of the brain, has been found.

JOSEPH WORKMAN, M. D.,

Medical Superintendent P. L. A.

PROVINCIAL LUNATIC ASYLUM,
Toronto, 19th June, 1854.

REPORT

OF THE MEDICAL SUPERINTENDENT OF THE PROVINCIAL LUNATIC ASYLUM, AT TORONTO.

TORONTO, 18th February, 1856.

To the Honorable the Legislative Assembly of the Province of Canada.

May it please your Honorable House.

In conformity with the provisions of the Statute thereto relating, I have the honor of submitting to your Honorable House, the following Report on the state of the Provincial Lunatic Asylum, at Toronto:

Having in numerous preceding Reports to the Visiting Commissioners, and to His Excellency the Governor General, for the time being, (all of which are now in the possession of Government,) represented the various requirements of this Asylum at much length, it may not be necessary, on the present occasion, to reiterate many of the statements which have already been brought under the notice, and have received the attention of His Excellency, and of his predecessors.

The measure adopted by His Excellency, early in the past summer, of removing from this Asylum to Kingston, the male criminal lunatics confined in this Asylum, under warrant, in accordance with the Statute relating to such cases, has been a blessing to the Institution, the true value of which can be appreciated only by those who were cognizant of the extent of evil caused by their presence here. In

addition, however, to the comfort thus secured to the remaining inmates of the house, must be mentioned the very important fact, that mainly by the resulting vacancies created by the removal of the above patients, has it been found practicable to grant prompt admission to nearly every male lunatic on behalf of whom application has since been made. When the great importance of having the insane placed under proper treatment, at an early period of their malady, is duly considered, the benefit derived from His Excellency's wise decision in the establishing of a distinct Asylum for criminal lunatics in the Province, will be denied by none.

The number of patients at present in this Asylum is 370, consisting of 183 males, and 187 females; the great majority of these are confirmed incurables,—the accumulation of a period of 15 years. Many of these poor people are perfectly harmless, and not a few are very industrious, but they are friendless and houseless, and in the absence of any public provision for their comfortable lodgment and support elsewhere, their detention in the Asylum is not only a matter of necessity, but of simple christian benevolence. It is very questionable indeed, if the incurable insane, however trivial may be their remaining mental incompetence, or however docile and useful they may be found under the mild and peculiar discipline of an Asylum, should ever be removed from the establishments in which so happy a change in their tendencies and condition has been effected. In several of the neighboring States, in which, notwithstanding all that is said of the munificent provision made for the insane, the extent of accommodation afforded by their Asylums falls very far short of the requirements of the population, and is certainly inferior in the aggregate to that of Canada, legal provision has been made under which the authorities and medical superintendents of Asylums may discharge,

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and send back to the places from which they may have come, such patients as remain uncured after a certain period of treatment. This harsh measure is had recourse to under the allegation that Lunatic Asylums should be paramountly regarded as hospitals for the cure of insanity, and not as alms-houses for the permanent support of its victims. I have met with no medical superintendent of any Asylum in the United States, who has not deplored the necessity of having recourse to this measure. The community, or the Legislature, which permits such a necessity to exist, is guilty of a heinous offence against the laws of the Divine Ruler of the world, and shews a reckless disregard of the moral obligations of the christian dispensation. In Canada, it is to be hoped that for the sake of humanity, and of the honorable fame, which in so many other aspects of our public character, we have already fairly earned, we shall never permit so dark a spot to blemish our reputation. I would not advise the dislodgment of a single incurable lunatic, who has resided for any length of time in this Asylum. Here they are as happy as it is possible for them to be in this life. Here only can this happiness be afforded them; true, the Asylum is full,—over-crowded, and cannot offer admittance to all who call for, and require it; but it is a question of money against humanity; of public benevolence against public apathy; of God's charity against man's avarice. Is not our country rich? Is not our public revenue redundant? What then is wanting? Nothing but a little sympathy, a little thinking, a little reflection: but unfortunately, so far at least as regards the insane, these are not met with in redundancy.

Those reputed as sane in Canada have all so much to do in thinking of their proper business,—are all so eagerly engaged in the pursuit of that wealth, which here so seldom fails to reward, though it may not always bless, its votaries, as

to afford them but little time to extend their observations on the state of society, far beyond the circle of their own firesides. Many persons in this Province have lived half a century and have not seen a madman ; some have heard of one in the back part of their Township ; the cities believe there are few in the country. When instant admission is not granted at the Asylum to a Toronto lunatic, the newspapers are all up in arms and amazement, and much wisdom, with the usual measure of truth, is sent forth. It is only 15 years since Western Canada had no Lunatic Asylum, and yet the public seem to have forgot that there were many lunatics before that time ; they forget too, that the population has increased much since that time, and that the want of accommodation for the insane must now be greater than it was fifteen years ago ; that is to say, a greater number of insane persons for whom Asylum lodgement does not exist, are now spread over Canada, than in the year 1840.

The wealth of Canada has increased more rapidly than the insane part of its population. Let that wealth, which has its privileges, perform its duties ; and neither the insane, nor any other class of the afflicted, will be left without that provision for their wants, to which, as fellow-beings, they are entitled by every sanction of sound political economy, common decency, and christian obligation.

Visitors to this Asylum seldom fail to admire its architectural beauty, and the amplitude of its dimensions. It is a large building, therefore it should hold a great many people. But Lunatics require more space than other people, and the largest house has its limits of accommodation. Lunatic Asylums may be overcrowded. Crowds have never been proverbial for good order ; and a crowd of insane men or women should not be expected to constitute the exception. To huddle into one house, without those means of subdivi-

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sion and classification, which are essential to order and discipline, a multitude of lunatics, every one of whom, before admission, required one or more persons to guide or control him, is certainly not a promising part of the course of treatment, under which the passions are to be quieted, tranquility and comfort to be secured, and reason to be restored. This building is large, and so is the half of any large house ; but it is yet only the half of a Lunatic Asylum. The three long halls, in each division, for males and females, with their connected rooms and dormitories, were not designed for all sorts of patients. They were intended for the three best classes ; whilst the wings, which have not yet been erected, were to be devoted to the lodgment of the worst classes. At present classification is almost impossible. Numerical necessity is absolute. When a patient in the best ward becomes noisy or violent, it is often impracticable to effect removal, and the whole ward becomes disturbed in consequence. Even in the worst, or uppermost ward, all are not noisy or violent. Sixty or seventy patients may have amongst them eight or ten who are frequently troublesome, or two or three who are always so.

These, and especially in the female division, are found sufficient to throw all the rest into uproar ; and when a whole ward of female lunatics set about making all the noise they can, the task of reducing them to quietude is certainly not an easy one. Were the Asylum completed, and separate and appropriate divisions for the reception of noisy, violent, obscene and filthy patients, at command, the general order and discipline of the establishment might be expected to be much better than they now are ; and the curative efficiency of the Institution would certainly be much increased.

It seems to be the opinion of some, who have perhaps not given the subject full consideration, that it would be better

to build a new Asylum in some other locality, than to complete this one. The Country requires both, and it will require several years to erect a new Asylum and complete this one.

In point of architectural device, excellence of workmanship, and the general suitableness of its interior arrangements, the Toronto Asylum is inferior to none on this Continent; whilst its location, considered with a due reference to all the circumstances which should be had in view in fixing on a site, is perhaps the best that could have been selected at the time it was founded.

Should the erection of another Asylum be determined on, I would strongly recommend that the selection of a competent Architect be made, concurrently with that of the destined Medical Superintendent. This has been the course adopted in the erection of some of the latest and best Asylums in both England and America. Lunatic Asylum architecture, like Lunatic Asylum management, and the treatment of lunacy, is a specialty; and the Medical Superintendent who is to direct efficiently and satisfactorily all the affairs of an Asylum, cannot too thoroughly understand the plans and intentions of the Architect; whilst the latter cannot fail to derive much useful information, and to receive numerous practical hints from a properly qualified Medical Superintendent. It is a serious mistake to suppose that the duties of the Physician in Chief of an Asylum, are mainly comprised in his professional relations to his patients, as the minister to their bodily and mental maladies. He should be well qualified for both these duties; but these constitute only a small part of the labor which he finds required of him. From the foundation to the cupola, he should know the entire anatomy of his establishment, and be ready and able to set right promptly whatever goes out of order.

As a few persons manifest much interest in what are called the statistics of insanity, and appear to form their conclusions as to the utility of the institutions founded for its cure or relief, rather from arithmetical results than from any very profound sentiment of christian duty, it has become customary in the framing of Asylum Reports, to introduce numerous tabular statements, chiefly perhaps with the view of meeting the requiremenis of this class of philanthropists. The most able and candid members of the faculty of psychology, at the present time, hold these tabular statements in slight respect ; and some of the best institutions in America, have almost ceased to furnish them in their Annual Reports.

The Records of this Institution do not afford reliable numerical data, from which to deduce correct conclusions, either as to its efficiency in comparison with other Asylums, or as to its own comparative efficiency in various periods of its history.

In the early years of the Institution, the proportion of discharges to the total admissions, appears very favorable, and the periods of treatment seem brief as compared with the results of later years ; but a close examination of all the facts entirely dissipates the belief.

In the first ten years, for example, the total admissions were 1006, and the total discharges 615 ; or, say, discharges equal to 61 per cent of admissions. It is however found that out of the 615 Patients discharged, no less than 230 re-admissions, from relapses, within the ten years took place ; no doubt chiefly in consequence of the patients having been discharged prematurely, before the consummation of their recovery. The actual number of persons admitted was, therefore, not 1006, but 776 ; and a large proportion of the discharges represented abortive cures.

In the two and a half years of Dr. Scott's incumbency following the first ten years, and immediately preceding my appointment, the proportion of discharges to admissions, appears to have been only $47\frac{1}{3}$ to 100 ; but in this time Dr. Scott had only 14 relapses from the patients admitted and discharged by himself in the above two and a half years ; and he made 40 re-admissions from the relapsing patients of his predecessors.

These 40 added to the 230 above noted, amount to a large drawback on the discharges, or recorded cures of the first ten years, and very materially change the ratio between discharges (properly so called) and admissions.

The relapsing patients re-admitted as above shewn, 284 times, up to the end of the first $12\frac{1}{2}$ years were 188 in number, and of these 57 are at present living in the Asylum.

In the 2 years and $7\frac{1}{2}$ months since 1st July, 1853, the date at which I assumed the medical charge, 45 patients of the relapsing class have been re-admitted, the majority only once, and a few twice or thrice, the total re-admissions amounting to 66.

Of these 45 patients, 12 had been first admitted and discharged by myself, and 33 were derived from the stock of discharges prior to my incumbency.

Of the above 45 relapsing patients, 20 are now in the Asylum, 17 are at home, 3 are in the Asylum for criminal lunatics at Kingston, and 5 are dead.

The decrease in the re-admissions of discharged patients in the latter years of the Institution, as compared with the earlier period of its existence, is attributable to the greater circumspection which has been exercised in abstaining from discharges before recovery has been confirmed. A certain proportion of recurrent cases will always be met with ; but it is more than probable that many of those relapses which

took place in the first ten years might have been avoided, had the patients been longer detained under treatment after their first admission.

Since the date of my last report in triplicate to His Excellency the Governor General, to the Honorable the Legislative Council, and to Your Honorable House, on 17th June, 1854, being a period of one year and eight months, there have been admitted into this Asylum 167 patients, consisting of 97 males and 70 females.

The deaths have amounted to 40, of which 27 have occurred in males and 13 in females.

The discharges (including elopements) in same period, have been 129, of which 84 have been of males, and 45 of females.

The general health of the establishment has been uniformly good. In the months of July, August and September, 1854, when malignant cholera so severely visited Toronto, and almost every other town in Canada, the Asylum entirely escaped the disease; this was a merciful dispensation of Providence for which the inmates and their friends cannot but be most thankful.

About 60 females lunatics, for whose admission application has been made, await the occurrence of vacancies; but from the present full state of the female wards, the large number of incurables lodged in them, and the confirmed and hopeless character of the great majority of female cases, for some time past admitted, there is every reason to apprehend a large increase on the above arrearage within the current year.

The Asylum requires many little improvements to render it more suitable to its curative purpose than it has yet been.

In the winter season the want of employment and amuse-

ment for the male patients is a serious drawback against their mental improvement.

This might be remedied to some extent by the erection of appropriate galleries detached from the main building, in which exercise in various enlivening games could be enjoyed.

In the neighboring States no Lunatic Asylum is without a library, and a few of them have large and excellent collections which have chiefly been received from benovolent persons interested in the condition of the insane.

Neither in this, nor in any other respect, has the Toronto Asylum been placed under obligations to our philanthropic citizens ; probably the reason of this oversight has been the want of correct information as to the utility of books in promoting the improvement and comfort of the inmates.

Religious service has been regularly held every Sunday afternoon by the various Clergymen of the City, in rotation, and has been joined in by those Patients who have desired to attend, or whose mental condition warranted their being brought to it. The Reverend gentlemen who have gratuitously officiated, deserve the best thanks of the community, and I am sure they have the gratitude of their congregation ; to affirm that no religious auditory in the city conducts itself more decorously than does that of the Asylum, is to speak within the limits of truth.

To the Press of Canada the patients have, during the past year, since the abolition of newspaper postage, been indebted for the most liberal supply of papers enjoyed by any Asylum in America. About sixty publications consisting of daily, tri-weekly, semi-weekly and weekly issues, with two monthlies, have been regularly received and distributed.

Last summer, the large room in the centre building, for-

merly used as a ball room, was, at a very trivial expense, fitted up for a sewing room; the walls being covered with a large number of beautiful and instructive pictures and lessons, and several maps, obtained from the department of Public Instruction. This room is airy, cheerful and elevated, and commands a pleasant view. From twenty to thirty patients assemble and work in it daily, under a directing seamstress, at various branches of household needlework.

The coats of the male patients, alone, have, last year, been made out of the Asylum. All other needlework has been done in the house by the female patients, and some males directed by a jobbing tailor.

The introduction of gas light, in the past year, has been a great source of comfort, cheerfulness and safety.

Nothing contributes so much to the improvement and cure of the male patients of this Asylum, as the employment afforded by the farm; the products of which in the past season have been, in a pecuniary point of view, very valuable. About 1750 bushels of potatoes, much superior to any usually purchased for the Asylum, were raised and safely taken in. A very large quantity of Beets, Mangol Wurtzel, Turnips, Carrots and Parsnips was produced; and has saved much disbursement for feed for the milch cows. The crop of Oats, and of Tares for green feed, was excellent. Hay alone was light. The garden products were numerous and very abundant.

I am persuaded that no farm in this district was, last year, better cultivated, or gave, from the same extent of surface, a heavier crop.

JOSEPH WORKMAN, M.D.,
Medical Superintendent, P.L.A.

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REPORT

OF THE MEDICAL SUPERINTENDENT OF THE PROVINCIAL LUNATIC ASYLUM AT TORONTO.

TORONTO, 1st March, 1857.

To the Honorable the Legislative Assembly of the Province of Canada in Parliament Assembled.

May it please your Honorable House,—

In conformity with the requirements of the Act, cap. 188 of 15 and 16 Vict., I beg to submit to your Honorable House the following Report of the state of the Provincial Lunatic Asylum at Toronto.

During the period which has elapsed since the date of my last report in triplicate to His Excellency the Governor General, and to each branch of the Legislature, the general health of this Asylum has been very satisfactory. An extended and minute examination of nearly all the best Asylums in the United States, made in the last two years, enables me to state that the sanatory condition of our Provincial Institution for the insane, is not inferior to that of any in America ; and is much better than that of the majority.

It is my belief that the chief cause of the comparatively vigorous health of the patients of our Asylum is to be found in the simplicity, and the superior nutritive properties of their diet, as contrasted with the more varied and less digestible fare, with which the inmates of American Asylums are indulged. Our system of heating by hot water, which is circulated by

radiating pipes throughout the establishment, no doubt contributes much to the equable health of the inmates. Coughs and colds, in the severest temperature of the winter season, are almost unknown in this Asylum. I am able also to state, that in point of expense, the Toronto Asylum is more cheaply heated than any which I have visited.

On my assumption of the duties of Medical Superintendent, dysentery was, and I believe long had been, a very formidable enaemic of the Asylum. Erysipelas had been a regular and very perplexing winter visitant. An indigenous cholera, not less malignant and fatal than that of India, had found, in the substratum of filth by which the whole foundation was underlaid, a genial soil. Were proof at this day wanting of the fact, that cleanliness is the surest safeguard against pestilence, it might be had in a comparison of the present and the former state of the basement and other parts of this house. Since the general cleansing of the establishment, and the completion of the drainage, not a single case of fatal dysentery has occurred, and very few cases, even of the mildest form, have been observed. Erysipelas has entirely disappeared ; and under the blessing of Providence, in the last visitation of Asiatic Cholera in this city, the Asylum entirely escaped this dreadful scourge.

The deaths which now occur in the Asylum are not ascribable to any morbid agency peculiar to the house or the locality. They are the result of pre-existing, and, frequently, long continued formidable organic disease. This fact I am able to state upon the reliable evidence afforded by *post-mortem* examinations, which, with only three or four exceptions, have been held in every case of death during my incumbency. It is my belief that insanity is never associated with perfect bodily health ; in the majority of cases it is certainly dependent on physical debility.

It is very much to be desired, with reference to the latter fact, that the true character of the malady, and its most appropriate treatment, were better understood by the medical profession at large, but especially those of the more remote country settlements. Many patients come to this Asylum in a very reduced state, and not a few have been placed beyond the reach of curative means in consequence of the active and depressing therapeutic measures which have been adopted by their physicians. Blood-letting, purging, vomiting, salivation, blistering, cupping, setons, low diet, and the whole battery of medical destructives have been exhausted, and it is fortunate if the patient has fallen into the hands of only one of this class of psychologists. The most promising cases are generally those for which least has been done.

Were generous diet, well directed kindness, exemption from bodily restraints, moderate exercise, and in many cases a judicious allowance of wine or alcoholic beverages, substituted for the present erroneous medical treatment, a very large proportion of those who are now sent to this Asylum would recover at home, and many who are rendered incurable for life might be saved from so melancholy a doom.

In expressing this opinion I am well aware that I am sustained by the unanimous voice of the entire body of medical superintendents of Lunatic Asylums, both in America and Europe; scarcely a report from any institution for the cure of insanity reaches me, in which the subject of inappropriate treatment before admission is not alluded to, and the evil result deplored.

A Lunatic Asylum is, in many respects, the best place for the treatment of the insane; but the transmission of every case of the malady to an institution of this character

is neither necessary nor advisable ; under no consideration other than that of unavoidable necessity should any fellow-being be cast into a mad-house. The retrospect of even the most fortunate of those who have been subjected to this alternative must be distressing. No one who has carefully and with christian commiseration examined even the best wards of our most celebrated modern Asylums will fail to shrink from the apprehension of so dire a calamity befalling himself, as that of becoming an inmate.

The absence of adequate Legislative provision for the support of the poor in this Province, has led to the introduction into this Asylum of many destitute and harmless people, who, under other circumstances, might have been more economically, if not more comfortably, supported in suitable almshouses in their own localities ; and some of them indeed might, with a sufficient out-door allowance, have been permitted the continuance of that most prized of all human privileges, personal liberty.

The repeal of the present Lunatic Asylum Tax, a measure recently proposed by His Excellency the Governor General, will, if followed, by the institution of liberal Municipal provisions for the support of the destitute of all descriptions, be productive of good results.

Were our various Counties and Towns required to contribute to the support of the Asylum, exactly in the proportion in which they make use of it, the outcry against the Executive and the Legislature, because of defective accommodation for lunatics, would cease.

When I visited the Lunatic Asylum at Augusta, in the State of Maine, in the year 1855, about one hundred beds were vacant ; though the estimated insane population of the State amounted to 1365, only 155 of this number were in the Asylum. The Medical Superintendent, in his report

for the year, deploras the parsimony of the Municipalities in abstaining, from motives of economy, from sending their insane poor to the Asylum; and as a remedy for the evil, suggests "that the State pay one dollar per week for each insane person whom the Towns, (Townships,) and Counties send to the Hospital, (that is, the Asylum,) the other moiety to be borne by the localities sending them."

The additional accommodation provided by His Excellency for the insane, by the opening of the University building in this city as an Auxiliary Female Asylum, and by the annexing, at a trivial expense, of five rooms in the centre building of this institution to the wards, has afforded much relief to the numerous applicants pressing for admission.

The Female auxiliary Asylum at present lodges 55 female and 6 male patients, all of whom are quiet and harmless; a majority are incurable and have been Asylum inmates for many years.

I have not deemed it prudent at the outset to fill the University building to its utmost capacity. Not having originally been planned for the lodgment of lunatics it is wanting in many of the peculiar requirements of an Asylum, and especially that of spacious and lofty corridors and day rooms.

It would be altogether inappropriate for acute and violent cases of insanity; but as a branch of the chief Asylum, it will I trust be found of great value.

The total number of patients at this date under my charge, in both institutions, is 428; of whom 198 are males, and 230 are females. About one-fifth of the above number are of the patients admitted since the opening of the auxiliary Asylum.

The total admissions from 18th February, 1856, the date

of my last report to your Honorable House, to the present time, has been 134.

The discharges in the above period have been 51.

It is to be observed that as three-fourths of the admissions for the year have been recent, the discharges of recovered patients from the new stock have not yet, unless to a trivial extent, come into account.

The number of deaths in the above period has been 25 in a total of 504 patients under treatment.

Of the 428 patients now remaining in,

		4 have been inmates over	16 years.
20	"	"	12 a 16 "
59	"	"	8 a 12 "
54	"	"	6 a 8 "
66	"	"	4 a 8 "
48	"	"	3 a 4 "
40	"	"	2 a 3 "
39	"	"	1 a 2 "
14	"	"	$\frac{1}{2}$ a 1 "
84	"	"	under $\frac{1}{2}$ "

The present ages of the above 428 patients remaining in, are as follows :—

		6 are under	20 years.
93	"	from	20 a 30 "
153	"	"	30 a 40 "
108	"	"	40 a 50 "
45	"	"	50 a 60 "
23	"	"	over 60 "

The total number of patients admitted from the opening of the Asylum, in January, 1841, has been 1867; consisting of 1045 males, and 822 females.

The total number discharged has been 1091; consisting of 646 males, and 445 females.

Having in my two former reports to your Honorable

House alluded to various improvements required in this institution, in order to render it more efficient as a curative establishment, and particularly to the necessity of completing the building according to the original design of the Architect, with a view to the securing of a proper classification of the patients, I abstain, on the present occasion, from pressing on the attention of your Honorable House for a due consideration of these matters.

I avail myself of this occasion to express, on behalf of the inmates of this Asylum, my acknowledgments to the various clergymen of this City who have, on every Sunday, gratuitously held Divine Service in the Institution; attendance upon which is always left for the decision of the patients themselves.

Religious exercises are, in all insane institutions, regarded as valuable curative auxiliaries; and I have no doubt they contribute materially to the consolation and comfort of many patients, and tend to imbue all who participate in them with a spirit of order and decorum.

The press of Canada has continued to the Asylum a liberal supply of newspapers, which are read by a great number of patients with much interest.

To that indefatigable philanthropist and firm friend of the insane in all lands, Miss D. L. Dix, we are under obligations for a renewed visit and a close examination of every part of both Asylums.

We have also to thank this lady for a valuable present of colored engravings for the decoration of our rooms and corridors. It is, however, by no means flattering to our own community to have to state that a foreigner has had the honor of setting so good an example.

Canada is advancing in many public and social virtues; and it is to be hoped that our insane will yet command that

kind attention, which, in other countries, is largely bestowed on them.

The Asylum farm was, in the past year, cultivated to very great advantage, and the products have been very valuable.

I have the honor to be,
Honorable Gentlemen,
Your obedient and faithful servant,

JOSEPH WORKMAN, M.D.
Medical Super't P. L. A.



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APPENDIX.

General Summary of operations, from the commencement of the Institution
21st January, 1841, to 1st January, 1858.

Total admissions, Males, 1112.....Females 905—2017
Of whom, were Married, 1021.....Single .. 996
Total discharges, Males, 661.....Females 486—1147
Total deaths, Males,.... 219.....Females 160— 379
Eloperments, from January, 1851,
Males..... 23, Females 8— 31

NOTE.—Prior to 1851, elopements were entered as discharges.

Total remaining in the Asylum

1st January, 1858, Males, 209....Females 251— 460
Of whom 62 Females, and 7 Males, are in the Branch
Asylum.

The discharges in the above 17 years (including elope-
ments) have been equal to 58.4 per cent. of the admissions.

The deaths, in the same period, have been equal to 18.8
per cent of the admissions.

The rate of mortality, on the whole number under treat-
ment, in each of the last four years, ending 1st July, has
been as follows:—

Year ending 1st July, 1854; total cases treated, 537;
deaths, 44, or 8.19 per cent.

Year ending 1st July, 1855; total cases treated, 463;
deaths, 23, or 4.89 per cent.

Year ending 1st July, 1856; total cases treated, 450; deaths, 28, or 6.22 per cent.

Year ending 1st July, 1857; total cases treated, 563; deaths, 24, or 4.25 per cent.

Average of the above 4 years 5.91 per cent.

NOTE.—From Parliamentary returns for five years, from 1852 to 1856, inclusive, it appears that in 22 County Asylums in England, the recoveries were to admissions, as 42.9 to 100; and the annual average of deaths on the total cases treated, was 11.27 per cent.

It could hardly have been expected that our Provincial Institution should compare so advantageously with those of the mother country.
