

THIRTIETH
ANNUAL REPORT

NOVA SCOTIA

HOSPITAL FOR INSANE

FOR THE YEAR 1887



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ANNUAL REPORT
OF THE
NOVA SCOTIA
HOSPITAL FOR INSANE,
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HALIFAX, N. S.:
COMMISSIONER OF PUBLIC WORKS AND MINES, QUEEN'S PRINTER,
1888.

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Nova Scotia Hospital for the Insane.

HALIFAX, N. S.

1888.

COMMISSIONER.

HON. CHAS. E. CHURCH, M.P.P., M.E.C.,
Commissioner Public Works and Mines.

R. T. MURRAY, Secretary to Commissioner.

RESIDENT OFFICERS.

ALEX. P. REID, M.D., L.R.S.C., Edin., &c., Medical Superintendent.
GEO. L. SINCLAIR, M.D., Assistant Physician.
AUBREY S. HUNT, Bursar.
R. D. DICKSON, Engineer.
MRS. R. D. DICKSON, Housekeeper.
MISS H. SAMPSON, } Head Attendants, Female Wards.
MISS E. C. OGILVIE, }
ALEX. NICHOLSON, } Head Attendants, Male Wards.
ALEX. GRAHAM, }

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TWENTY-NINTH ANNUAL REPORT

OF THE

MEDICAL SUPERINTENDENT

OF THE

Nova Scotia Hospital for the Insane,
1887.

TO THE HONORABLE CHARLES E. CHURCH,
Commissioner of Public Works and Mines.

SIR,—

I have the honor to submit the Annual Report of the operations of the Nova Scotia Hospital for the Insane.

Number of patients on Register Dec. 31st. 1886...396
" " admitted during year 1887112

Whole number under treatment 508

Daily average 405

Greatest number at one time on Register—Nov. 1..426

Least " " " April ...381

Discharged as recovered 38

" " improved 36

" " unimproved 7

Died 20

Whole number discharged 101

Remaining on Register Dec. 31st., 1887 407

Number out on trial 23

ADMISSIONS.

There were 112, of whom 16 had formerly been inmates—12 once, 3 twice and one five times.

Of these re-admissions, twelve had been discharged as cured, and four as relieved.

There have been many more applications for admission than we had space for, and to a great extent we were compelled to adopt the necessity foreshadowed in last year's report. "From appearances this increase of applications is likely to continue, and we will be reduced to the necessity of confining admissions to the number of vacancies that may arise from discharges."

Many of our admissions were of the chronic or incurable classes, and as a result, we have a much less favorable cure rate the past year than we are accustomed to have. 34 per cent. in place of 45 to 50, the running average, for overcrowding militates against recovery.

It also tends to restrict the benefits of early treatment, of so much importance in recent cases, while retarding the convalescence of inmates.

Had it not been for the relief furnished our crowded wards by the Halifax City and Pictou County authorities, our ability to receive would have been much less—but unless further aid is given, our admissions must be too much curtailed.

We have put additional columns at the end of Table IV. which will show at a glance the number at present under charge who have been resident here for the past 29 years of the operation of the Hospital, with the number (residue) of each year (since 1859, the beginning) who still are inmates.

A number have been re-admitted more than once (about 10 per cent on an average); the great many, however, have been continually resident.

Of four men and one woman admitted the first year (5), four have been continuous residents for 29 years. Of the admissions of 1865 but one man and one woman remain;—of 1883, one man, but thirteen women.

In all the other years there is a varying number of 3, 5, 7, 11, 15, etc., until 1874, since which time considerable numbers remain.

The half of our patients were admitted prior to 1882.

Over 10 per cent of the inmates came here in the first 10 years (nearly 20 years ago); 20 per cent in the next 7 years, and 20 per cent in the next 6 years, leaving 50 per cent admitted since six years.

Of the admissions of the past year, 88 remain, (counting 13 re-admissions) only 24 (three of which were re-admissions) out of the 112 admitted being discharged this year—and as above referred to the greatest number are of a class not probably curable, and they will go to swell the already large number that fill up the institution and clog the work of the Hospital.

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DISCHARGES.

There were 101 discharges, of which 38 were classed as recovered, 36 improved, and 7 stationary.

There were 20 deaths, from the following causes :

	men	women	Total.
General Debility and old age ...	2	3	5
Phthisis	2	3	5
Paralysis	1	5	6
Paresis	1	0	1
Pulmonary Congestion	0	3	3
	6	14	20

There was no death from suicide or accident, or any form of zymotic or infectious malady, the general health being very good the whole year, there being no epidemic of even a mild type.

The death rate was less than our usual low average (6 per cent.) being under 5 per cent (4.9) on general average resident, and less than 4 per cent (3.9) on the whole number treated for the year.

We have had a great many out on trial for the past year (there now being 23) because in order to accommodate the many applicants, we tried to make room in every way possible, and let all who had an apparent chance, go on trial at home; some were returned, but the great majority have remained.

RECOVERIES.

There were 38 recoveries, being about 34 per cent. on admissions, much less than last year (47) or our general average (46). This has been previously referred to.

IMPROVEMENTS.

In last year's report I referred to the great improvement in ward comfort as well as fire protection from the verandahs, &c., that are now attached to every ward.

This year we have still further perfected our fire protective system by placing a double pathway along the ridge of the roof from one extreme of the building to the other, and where it was necessitated, the pathways were connected with iron ladders securely fixed to the roof.

With our present arrangements, a man who is unaccustomed to move about on the roof of a house, can, in frosty or slippery weather

travel without danger from one extreme to the other of the building on the outside along the ridge of the roof and carry a length of hose as well.

It has also been so arranged that access to the roof is attained without difficulty from the top of any one of the verandahs that are placed at each of the main sections into which the building is divided.

There are also spare lengths of hose at the top of each of these verandahs with a hose attachment, and as well a skylight which can be opened from the outside to permit entrance to any of the attics at any time.

As a result we have independent access from the outside by (iron) apparatus always in place to any part of the building outside or inside with hose connections conveniently situated, so that one man (with his ordinary ward key) can reach any place with a hose and be a completely equipped fire brigade.

There has been a great deal of painting and general repair carried on, which a building as old as this always requires.

The roof on the centre building has been renewed and all the old wooden ventilators (being discarded) have been removed.

The pathway over the roof of the building (above referred to) was found very convenient for the workmen who were conducting extensive repairs on the roof, so that this addition was desirable, apart altogether from its probable service in case of fire. Its appearance is rather an improvement than otherwise.

New cast iron water gutters have been put around the south end of the building to replace the worn out zinc ones that had been in use.

We have had two pieces of our very stony land cleared the past year—one lot of four or five acres partly by contract—and another of two acres (a very difficult job) was done by the patients—we had from 50 to 70 men out daily at work.

REQUIREMENTS.

Lake Maynard (our water supply) was unusually low all last summer and has not yet filled—and it is plain to any one who examines into the question that we must supplement our supply.

This may be done in various ways, four of which I will suggest:—

1st. If the run or stream coming from the south into which the overflow of Lake Maynard at one time passed, were to be dammed, a supply of water from a comparatively large watershed could be thrown into Lake Maynard.

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This would entail but little engineering expense, but it would necessitate the purchase of all the land that would be overflowed and required for this purpose. Again, the Sugar Refinery Company and others, who have the privilege of Lake Maynard water, would be equally benefited, and should correspondingly contribute, but of this we cannot report. We could in this way get a large supply.

2nd. On our own grounds, about 300 yards from the boiler house, there is a very good supply of water that is 10 feet above the level of the boiler house floor. This independent supply we could easily obtain, the principal expense would be for pipe, as we could do the excavation by the labour of the patients.

3rd. There is another water supply about 100 yards farther back, which has been tapped by the Sugar Refinery Co. for their private reservoir.

4th. By making a reservoir on our own grounds to the south of the main building and collecting in it all the rain waters, overflow from the lake when it is full, condensed water, etc., and storing it there in case of defective supply.

We are now solely dependent on the efficiency of the water pipes from the lakes, and the possibility of a defect, that would prevent our supply even for a short time, would be more than serious, as we have at present no other source to fall back on.

Of the four suggestions above offered, I would recommend the second to be at once proceeded with, as it would cost the least, could be most quickly done, and would afford a very fair independent supply. Since the pressure on the pipes would be very little, we could use those that were least costly.

This water would supply all demands unless for culinary purposes, and for this it would answer until the increase of dwellings in the vicinity might contaminate the supply.

Its only disadvantage is that for general purposes it would need to be pumped to the reservoir in the Main Building, and this is minimized comparatively, for we have had to pump our water from the Lake, owing to the diminished head due to low water, with the prospect of this condition continuing.

I have not referred to wells, as geologically the indications are unfavorable for a supply of any amount of water that would be of service.

ACKNOWLEDGMENTS.

The Rev. C. Underwood, P. P., has service on every second Sunday, and Revd. Mr. Raven of Dartmouth, the third Sunday of each month.

At other times we have been favoured by the Revds. Dr. Burns, P. M. Morrison, Robert Laing, T. W. Smith, J. McMillan, R. Brecken, J. C. Cattanach, L. Daniel, W. H. Cline, E. J. Grant, W. C. Brown, J. Wier, J. L. George, J. Strothard, Dr. Lathern, Mr. Sutherland.

Miss Adams, of Dartmouth, as usual presides at the organ on Sunday, and to Mrs. Whidden we are much indebted for her very frequent services during Miss Adams' absence.

Mrs. Whidden and H. McD. Henry gave a most enjoyable concert to the inmates. Mr. John Cruikshank and family of London, Ont., gave also a most enjoyable entertainment.

Colonel Montague (as usual for years past) continues to contribute regular donations of newspapers.

The directors of the Halifax and Dartmouth S. S. Co., and their obliging Secretary, Mr. VanBuskirk, placed S. S. "Mic-mac" at our service for an excursion on the harbor last summer, which was as usual much enjoyed.

To Messrs. Wood Bros. and W. C. Silver we are indebted for Christmas Cards.

To Mrs. Wilbry for donations of papers.

To Clergymen of all denominations, who always come at the request of any of the inmates who desire their services; and we have many such visits.

The press of Halifax and throughout the Province contribute their regular issues; and, in common with the world outside, our patients are most interested in this form of literature.

The following papers are regularly received:

- "Acadian Recorder," (tri-weekly).
- "Wolfville Acadian."
- "Christian Messenger and Visitor."
- "Church Guardian."
- "Colchester Sun," (Truro).
- "Colonial Standard," (Pictou).
- "Courier," (Digby).
- "Clarion," (S. of T. organ).
- "Eastern Chronicle," (New Glasgow).
- "Morning Chronicle," (daily).

"Morning Herald," (daily).
"North Sydney Herald," (Cape Breton),
"Progress," (Lunenburg).
"Weekly Monitor," (Bridgetown).
"Spectator," (Annapolis).
"Wesleyan."

The annual sleigh ride was, as usual, appreciated, and as well the regular dance evenings.

THE PAST YEAR.

Our work during the past year has been as satisfactory as we could anticipate with the class of patients under our care.

We admitted a lot of chronic insane (life boarders) with the understanding that their residence would be only temporary, pending arrangements that were to be made for their care elsewhere.

This had the effect of filling our wards, and to some extent lowering our recovery rate, but we hope very soon to be relieved.

We would wish to be able to recommend the admission of every patient for whom application is made, for we have no reason to believe that any would not be, to some extent at least, benefited by treatment. This could be done, if provision were made for the proper outside care of the many incurables within our walls, who need such care as should be given to children. In the Acts of the Legislature of 1886 are advisory and permissive laws to this end, which it is hoped will soon prove effectual.

To fulfil our duties to the Province we should admit every one needing treatment, but as regards this subject I would refer to previous reports.

Dr. Page, at the instance of the executive, made a careful examination of the institution, a duty which he performs in a most gentlemanly manner.

The Commissioner of Public Mines and Works and the Secretary pay their regular visits of inspection, and advice in the general and financial management.

The Deputy Commissioner of Public Mines and Works made a special visit in reference to the water supply above referred to.

My thanks are due to Mr. W. P. Finn who kindly acted as assistant during the alternate leave of the Superintendent and assistant Physician.

My thanks are due to all our officials for prompt, willing and satisfactory service, without which our efforts would fail, and to the Assistant Physician as usual for his valued assistance and as well for aid in preparing the statistical tables included in this report.

To you, Sir, I desire to express my appreciation of the assistance, courtesy and kindness always manifested in our official intercourse and in your visits of inspection.

I am, respectfully,

Your obedient servant,

A. P. REID,

Medical Superintendent.

NOVA SCOTIA HOSPITAL FOR INSANE, }
January 2nd, 1888. }

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STATISTICAL TABLES.

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LIST OF STATISTICAL TABLES.

- Table 1. The Admissions, Re-Admissions, Discharges and Deaths for the year 1887.
- " 2. The Admissions, Re-Admissions, Discharges and Deaths since opening of the Hospital.
 - " 3. Mean Annual Mortality and Proportion of Recoveries.
 - " 4. History of Annual Admissions.
 - " 5. Causes of Death.
 - " 6. Length of Residence.
 - " 7. Duration of Disorder on Admission.
 - " 8. Ages on Admission and Discharge.
 - " 9. Civil Condition in Admissions, Discharges and Deaths for the year 1887.
 - " 10. Assigned Causes of Insanity.

OTHER TABLES.

- " 11. Monthly Admissions.
- " 12. Alleged Ages, &c.
- " 13. Civil Condition of all admitted.
- " 14. Former Residence.
- " 15. Former Occupation.
- " 16. Re-Admissions.
- " 17. County, Provincial and Private Patients.
- " 18. Balances due the N. S. Hospital.
- " 19. Income.
- " 20. Expenditure.
- " 21. Statement for the year.
- " 22. Garden Produce.
- " 23. Articles made by Patients.

APPENDIX.

Admission of Patients.
Discharge of Patients.
Forms of Certificates.

TABLE I.
Showing the Admissions, Re-Admissions, Discharges and Deaths for the Year 1887.

	MALES.		FEMALES.		TOTAL.
	M.	F.	M.	F.	
In Hospital 1st January, 1887.....			198	198	396
Admitted for the first time during the year.....	60	36			96
Re-admitted during the year.....	8	8			16
Total admitted.....	68	44			112
Total under care during the year.....	266	252			508
DISCHARGED OR REMOVED.					
Recovered.....	24	14			38
Relieved.....	21	15			36
Not improved ..	1	6			7
Not Insane	0	0			0
Died.....	6	14			20
Total discharged and died during the year.....	52	49			101
Remaining in Hospital December 31st, 1887.....	214	193			407
Average number during the year.....	211.2	194			405.1

• TABLE II.

Showing the Admissions, Re-admissions, Discharges and Deaths, from the opening of the Hospital to the present date, December 31st, 1887.

	DISCHARGED OR REMOVED.			MALES.	FEMALES.	TOTAL.
	M.	F.	T.			
Persons admitted during the period of twenty-nine years				1010	846	1856
Re-admissions				195	171	366
Total of cases admitted				1205	1017	2222
DISCHARGED OR REMOVED.						
Recovered	527	463	990			
Relieved	167	135	302			
Not improved	27	24	51			
Not inane	1	0	1			
Died	269	202	471	991	824	1815
Remaining December 31st, 1887				214	193	407
SUMMARY OF TOTAL ADMISSIONS, 1859 TO 1887.						
Percentage of Cases	MALES.	FEMALES.	BOTH SEXES			
Recovered	43.75	45.52	44.55			
Relieved	13.86	13.28	13.59			
Not improved	2.82	2.35	2.34			
Died	22.32	19.86	21.19			
Remaining	17.76	18.97	18.31			
Total	100.	100.	100.			
Mean Annual Mortality—1859 to 1887	6.8	5.1	5.8			

TABLE III.—Showing the Admissions, Re-admissions, Discharges and Deaths, with the Mean Annual Mortality and Proportion of Recoveries per cent. of admission for each year since the opening of the Hospital.

YEAR.	ADMITTED.			RECOVERED.			RELIEVED.			DISCHARGED.			REMAINING 31st DECEMBER IN EACH YEAR.			AVERAGE NUMBER RESIDENT.			PERCENTAGE OF RECOVERIES ON ADMISSION.			PERCENTAGE OF DEATHS ON AVERAGE NUMBER RESIDENT.								
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
	Not Improved.			Died.			Recovered.			Relieved.			Discharged.			Remaining 31st Dec. in each year.			Average number Resident.			Percentage of Recoveries on Admission.			Percentage of Deaths on average number resident.					
1859	39	31	70	3	1	3	1	0	1	0	1	0	0	0	0	28	27	55	21	21	42	20.5	9.7	17.7	.0	.0	.0			
1860	32	31	63	8	6	14	2	0	3	3	3	3	3	3	4	4	4	34	36	70	25.0	19.3	22.2	8.8	2.8	5.7				
1861	38	22	60	14	9	23	4	1	0	0	0	0	0	0	0	6	5	11	55	50	105	38.8	40.9	38.3	5.0	14.0	9.5			
1862	31	12	43	12	9	21	1	1	1	1	1	1	1	1	1	7	5	13	69	52	121	18.7	75.0	48.8	5.8	1.9	4.1			
1863	30	17	47	17	5	22	6	0	2	4	4	4	4	4	4	7	6	13	80	71	151	34.8	43.4	39.1	5.0	1.6	4.5			
1864	23	23	46	8	10	18	1	2	3	3	3	3	3	3	3	8	7	15	81	74	155	50.0	73.7	60.9	11.1	6.6	9.0			
1865	24	22	46	12	16	28	5	2	7	1	1	1	1	1	1	8	7	15	91	73	163	47.6	33.3	40.5	1.2	4.1	2.0			
1866	21	21	42	12	10	22	7	1	4	1	1	1	1	1	1	4	8	12	86	81	167	48.0	38.0	44.0	4.6	1.2	3.0			
1867	25	18	43	12	7	19	1	4	5	1	1	1	1	1	1	6	8	14	111	105	216	99	97	195	20.0	26.0	23.2	6.0	8.7	7.3
1868	40	46	86	8	12	20	1	2	3	1	1	1	1	1	1	2	6	8	14	114	284	53.6	29.0	41.8	5.8	5.2	5.5			
1869	41	38	79	22	11	33	2	2	2	2	2	2	2	2	2	11	12	24	120	114	234	53.6	29.0	41.8	5.8	5.2	5.5			
1870	43	27	70	12	12	24	3	2	5	1	1	1	1	1	1	14	11	25	135	128	263	57.6	56.2	62.1	15.5	6.5	10.7			
1871	34	32	66	23	18	41	3	2	5	0	0	0	0	0	0	20	8	28	129	131	260	67.6	56.2	62.1	15.5	6.5	10.7			
1872	44	33	77	20	19	39	3	1	4	0	0	0	0	0	0	13	14	27	125	133	258	45.5	57.6	50.6	10.4	10.5	10.4			
1873	36	38	74	24	20	44	3	1	4	0	0	0	0	0	0	14	28	42	128	140	268	66.5	52.6	59.4	8.5	4.3	6.4			
1874	34	33	67	17	19	36	6	0	6	0	0	0	0	0	0	10	10	20	144	156	300	50.0	57.5	53.7	7.5	2.7	5.0			
1875	68	46	114	22	21	43	2	3	5	0	0	0	0	0	0	12	8	20	162	173	335	62	169	331	51.1	48.9	50.0	7.4	4.7	6.0
1876	45	43	88	23	21	44	4	3	7	0	0	0	0	0	0	14	11	25	171	176	347	47.1	55.8	51.1	8.2	6.2	7.2			
1877	51	43	94	24	24	48	4	5	9	1	1	1	1	1	1	13	8	21	178	183	361	43.5	74.3	55.9	7.3	1.9	4.4			
1878	54	39	93	23	29	52	5	5	10	3	4	4	4	4	4	13	16	29	183	187	370	63.9	44.7	54.3	6.9	2.1	3.5			
1879	36	38	74	23	17	40	9	4	13	2	2	2	2	2	2	16	18	34	183	187	370	63.9	44.7	54.3	6.9	2.1	3.5			
1880	44	45	89	21	22	43	14	14	28	1	1	1	1	1	1	12	8	20	183	187	370	63.9	44.7	54.3	6.9	2.1	3.5			
1881	37	43	80	19	29	48	2	0	2	0	0	0	0	0	0	19	9	28	176	192	368	47.7	48.8	48.3	4.9	4.2	5.4			
1882	51	40	91	21	20	41	2	0	2	0	0	0	0	0	0	10	13	23	176	204	382	47.7	48.8	48.3	4.9	4.2	5.4			
1883	50	46	96	26	26	52	14	13	27	0	0	0	0	0	0	19	23	42	187	212	399	39.2	50.0	45.0	5.5	6.1	5.7			
1884	39	47	86	29	20	49	15	20	35	1	1	1	1	1	1	16	16	32	190	214	404	52.0	56.0	54.0	5.2	2.3	3.9			
1885	70	42	112	25	22	47	1	4	5	1	1	1	1	1	1	17	17	34	190	214	404	52.0	56.0	54.0	5.2	2.3	3.9			
1886	57	57	114	29	25	54	28	5	33	1	1	1	1	1	1	14	9	23	206	216	422	50.8	43.8	47.3	6.8	7.4	7.1			
1887	68	44	112	24	14	38	21	15	36	1	1	1	1	1	1	14	20	34	211	194	405	38.3	36.8	33.9	2.8	7.2	4.9			
Total	1205	1017	2222	527	463	990	167	135	302	28	24	52	219	202	471	Mean of twenty nine years.	43	6	45	4	44.4	6.8	5.1	5.8						

TABLE IV.—Showing the History of the Annual Admissions since the opening of the Hospital, with the Discharges and Deaths, and the number of each year remaining on 31st December 1887.

TABLE V. — (CONTINUED).

Showing the cause of Death for each year, from the opening of the Hospital to the present date, December 31st, 1887.

CAUSES.	1860.	1861.	1862.	1863.	1864.	1865.	1866.	1867.	1868.	1869.	1870.	1871.	1872.	1873.	1874.	1875.	1876.	1877.	1878.	1879.	1880.	1881.	1882.	1883.	1884.	1885.	1886.	1887.	TOTAL.																											
	M.	F.																																																						
ABDOMINAL DISEASES.																																																								
Inflammation of Stomach,																																																								
Intestines or Peritonæum,			1			1					1					1	1																																							
Disease of Kidney.....				2																																																				
Acute disease.....																																																								
Chronic disease.....																																																								
Diarrhœa and Dysentery																																																								
Cancer.....																																																								
Fever.....																																																								
Erysipelas.....																																																								
General Debility & Old Age																																																								
Homicide.....																																																								
Suicide and Accident.....																																																								
TOTAL.....	3	1	3	7	4	1	5	1	4	6	9	5	1	3	4	1	6	8	8	6	13	11	20	8	13	14	11	6	10	4	12	12	8	14	11	13	3	9	4	12	8	10	9	10	13	11	5	9	8	14	9	14	16	6	14	47

TABLE VI.
Showing the length of Treatment of those Discharged, Recovered, and those who Died, in the year 1887.

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	M.	F.	T.	M.	F.	T.
From one to three months.	1	0	1	3	4	7
“ three to six months.	1	3	4	0	1	1
“ six to nine months.	10	1	11	0	0	0
“ nine to twelve months.	3	2	5	0	0	0
“ one to two years.	7	7	14	1	2	3
“ two to three years.	2	1	3	0	0	0
“ three to five years.	0	0	0	0	4	2
“ five to seven years.	0	0	0	0	1	1
“ seven to fifteen years.	0	0	0	1	3	4
“ fifteen to eighteen years.	0	0	0	0	1	4
“ Over eighteen years.	0	0	0	1	0	1
Total.....	24	14	38	6	14	20

TABLE VII.
Showing the duration of the Disorder on Admission, of the Admissions, Discharges and Deaths, in the year 1887.

CLASS.	DURATION OF DISEASE, &c., IN FOUR CLASSES.											
	The Admissions.			The Discharged.						The Deaths.		
				Recovered.			Removed, Relieved or otherwise.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
FIRST CLASS.												
First Attack, and within three months of Admission.....												
21	18	39	11	6	17	4	3	7	1	4	5	
SECOND CLASS.												
First Attack, above three and within twelve months of admission.....												
10	10	20	3	3	6	3	3	6	0	1	1	
THIRD CLASS.												
Not first Attack, and within twelve months of admission.....												
9	3	12	4	1	5	5	5	10	1	3	4	
FOURTH CLASS.												
First Attack or not, but of more than twelve months' duration on admission.....												
28	13	41	6	4	10	10	10	20	4	6	10	
68	44	112	24	14	38	22	21	43	6	14	20	
Total.....												

TABLE VIII.
Showing the Ages of Admissions, Discharges and Deaths during the year 1887.

AGES.	THE ADMISSIONS.			THE DISCHARGES.						THE DEATHS.		
	M.	F.	T.	Recovered.			Removed, Relieved or otherwise.			M.	F.	T.
				M.	F.	T.	M.	F.	T.			
From 15 to 20 years	6	1	7	2	1	3	0	0	0	0	0	0
" 20 to 30 "	17	14	31	7	4	11	2	3	5	0	1	1
" 30 to 40 "	12	13	25	1	6	7	11	4	15	1	5	6
" 40 to 50 "	16	8	24	7	2	9	5	3	8	2	1	3
" 50 to 60 "	11	6	17	6	0	6	3	3	6	0	3	3
" 60 to 70 "	4	1	5	1	1	2	1	5	6	1	3	4
" 70 to 80 "	2	1	3	0	0	0	0	3	3	2	1	3
Total	68	44	112	24	14	38	22	21	43	6	14	20

Total 68 | 44 | 112 | 24 | 14 | 38 | 22 | 21 | 43 | 0 | 14 | 20

TABLE IX.
Condition as to Marriage in the Admissions, Discharges and Deaths during the year 1887.

	THE ADMISSIONS.			THE DISCHARGES.						THE DEATHS.		
	M.	F.	T.	Recovered.			Removed, Relieved or otherwise.			M;	F.	T.
				M.	F.	T.	M.	F.	T.			
Single.....	36	20	56	11	4	15	18	14	32	1	4	5
Married.....	28	20	48	11	9	20	3	6	9	4	7	11
Widowed.....	4	4	8	2	1	3	1	1	2	1	3	4
Total.....	68	44	112	24	14	38	22	21	43	6	14	20

TABLE X.

Showing the probable causes, apparent or assigned, of the Disorders, in the Admissions, Discharges and Deaths of the year 1887.

CAUSE.	The Admissions.			The Discharges.						The Deaths.			Not Improved.		
	M.	F.	T.	Recovered.			Relieved.			M.	F.	T.	M.	F.	T.
				M.	F.	T.	M.	F.	T.						
Ill-health from—															
Religious excitement..	4	2	6	1	1	2									
Fright.....															
Failure in business...	3		3	4		4	2		2	1		1			
Domestic trouble ...							1		1						
Disappointment ...															
Grief.....		2	2						1	1					
Anxiety.....		1	1												
Old Age.....	2		2							1		1		1	1
Cause unknown.....	8	7	15	5	1	6	1	1	2		5	5		3	3
Hereditary predisposit'n	17	16	33	5	9	14	10	6	16	1	3	4	1	1	2
Intemperance	4		4	1		1	1		1						
Overstudy & overwork	2	1	3	3		3									
Injury.....	4	1	5				1		1						
Onanism.....															
Epilepsy	8	1	9				1		1						
Sunstroke.....	2		2												
Fever.....	2	1	3												
Lactation															
Puerperal		2	2					1	1		2	2			
Climacteric.....		2	2					1	1		3	3			
Unknown & re-admiss'n.	10	5	15	5	3	8	3	4	7	2	1	3		1	1
Paralysis										1		1			
Syphilis		1	1												
Congenital	2	2	4				1	1	2						
Total.....	68	44	112	24	14	38	27	15	36	6	14	20	1	6	7

TABLE XII.

Alleged Ages of All Admitted.

	1887.	1859 to 1886.	TOTAL.
From 5 to 10 years	0	4	4
" 10 to 20 "	7	150	157
" 20 to 30 "	31	587	618
" 30 to 40 "	25	499	524
" 40 to 50 "	24	342	366
" 50 to 60 "	17	243	260
" 60 to 70 "	5	119	124
" 70 to 80 "	3	40	43
" 80 to 90 " .....	.....	1	1
Unknown .....	.....	125	125
Total	112	2110	2222

TABLE XIII.

Civil Condition of All Admitted.

	Married.	Single.	Widowed.	Unknown.	Re-Admitted.	TOTAL.
1859—1886 { Males....	356	634	40	20	187	1137
{ Females..	363	369	68	10	163	973
1887..... } Males....	26	31	3	0	8	68
} Females..	16	16	4	0	8	44
Total.....	771	1050	115	30	366	2222

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TABLE XV.

Former Occupation, so far as ascertained.

	1887.		1859-86.		TOTAL.	
	M.	F.	M.	F.	M.	F.
Agent			1	....	1	....
Architect and Wife			1	1	1	1
Barrister and Wife			2	1	2	1
Bailiff and Wife			1	1	1	1
Bakers and Wives			1	4	1	4
Blacksmiths and Wives	1	....	16	11	17	11
Barbers			4	....	4	....
Basket Makers .....			....	2	....	2
Brewer			1	....	1	....
Book-Binder			5	1	5	1
Brass Founder			2	....	2	....
Brakeman	1	....	1	....	1	....
Butchers and Wives			4	2	4	2
Cook .....			....	2	....	2
Carriage Makers and Wives	1	....	2	1	3	1
Carpenters and Wives	3	1	43	38	46	39
Conductor's Wife .....			....	1	....	1
Clerks, Book-Keepers and Wives	2	1	24	4	26	5
Officers of Customs			5	1	5	1
Cabinet Makers and Daughters			6	3	6	3
Colliers and Wives			10	5	10	5
Coopers			10	....	10	....
Coachmen and Wives			3	3	3	3
Dyer			1	....	1	....
Druggist	1	....	2	....	3	....
Domestics		8	....	30	....	38
Engineers and Wives			8	9	8	9
Farmers' Wives, Sons and Daughters	25	12	363	186	388	198
Fishermen, Wives, Sons and Daughters	4	2	63	41	67	43
Gardeners and Wives			1	3	1	3
Gentlemen and Women			12	43	12	43
Governess .....			....	1	....	1
Grocers and Wives	1	....	6	2	7	2
Hotel Keepers, &c	1	....	6	3	7	3
Hatter and Wife			2	1	2	1
Hostler			1	....	1	....
Housewives		10	....	67	....	77
Lumbermen			5	....	5	....
Labourers and Wives, Servants	11	2	131	177	142	179
Masons, Wives and Daughters	1	....	15	14	16	4
Ministers, Wives and Daughters			4	6	4	6
Millers and Wives			3	2	3	2
Merchants, Wives and Daughters	5	1	25	21	30	22
Milliners .....			....	14	....	14
Mechanics and Wives			3	1	3	1

TABLE XV.—(CONTINUED.)

Former Occupation, so far as ascertained.

	1887.		1859-86.		TOTAL.		
	M.	F.	M.	F.	M.	F.	
1							
1							
1							
4							
11							
2							
1							
2							
1							
39							
1							
5							
1							
3							
5							
3							
3							
38							
9							
198							
43							
3							
43							
1							
2							
3							
1							
77							
179							
4							
6							
2							
22							
14							
1							
	Miners and Wives	3	2	7	2	10	4
	Moulders and Wives			2	2	2	2
	Nurse			2	2	2	2
	Physicians, Wives and Daughters			6	2	6	2
	Priests			5		5	
	Printers			11	1	11	1
	Painters and Wives		1	11	5	11	6
	Pensioners and Wives and Daughters			2	6	2	6
	Pedlars and Wives	1		8	2	9	2
	Photographers			2		2	
	Plumbers, Tinsmiths, and Wives	1		5	1	6	1
	Reporters			2		2	
	Rope Maker			1		1	
	School Teachers, Wives and Daughters			23	19	23	19
	Ship Captains, Wives, Stevedores	1	1	13	13	14	14
	Sextons			2		2	
	Seamen and Wives and Daughters	1		60	37	61	37
	Soldiers, Marines and Wives			17	1	17	1
	Shoe Makers and Wives			23	9	23	9
	Saddlers			3		3	
	Seamstresses		1		16		17
	Students			7	2	7	2
	Shipwrights and Wives	2		8	2	10	2
	Surveyors			1		1	
	Shop Keepers			2	3	2	3
	Sailmakers and Wives		1	3		3	1
	Stone Cutters			4		4	
	Tailors, Wives and Daughters	1		2	3	3	3
	Tanners and Wives	1	1	4	4	5	5
	Teamsters and Wives			9	3	9	3
	Tobacconists			1		1	
	Traders and Wives			7	3	7	3
	Telegraph Operators			1		1	
	Tramps			1		1	
	Wool Sorters			1		1	
	Wheelwrights			1		1	
	Washerwomen				6		6
	Watchmen and Wives			3	2	3	2
	Watch Makers			1		1	
	Weavers				1		1
	Unknown			4	1	4	1

TABLE XVI.
Re-admissions from 1859 to 1887.

	1861.	1862.	1863.	1864.	1865.	1866.	1867.	1868.	1869.	1870.	1871.	1872.	1873.	1874.	1875.	1876.	1877.	1878.	1879.	1880.	1881.	1882.	1883.	1884.	1885.	1886.	1887.	TOTAL.	Admitted twice.	" 3 times.	" 4.	" 5.	" 6.	" 7.	" 8.
Males	5	6	0	2	7	1	2	5	6	11	5	10	8	8	7	8	11	11	9	12	9	5	7	5	15	11	8	193	148	29	9	4	2	1	1
Females	2	1	2	3	2	2	5	6	10	9	4	5	7	6	5	7	7	8	13	12	9	8	8	8	12	8	172	123	28	8	7	4	1	1	
Total	7	7	2	5	9	3	4	10	12	21	14	14	13	15	13	13	18	18	17	25	21	14	15	13	23	16	365	271	57	17	11	6	2	1	

TABLE XVII.

Maintenance of Patients in Hospital, December 31st, 1887.

COUNTY.	Males.	Females.	Totals.
Annapolis.....	8	10	18
Antigonish.....	2	1	3
Cape Breton.....	13	8	21
Colchester.....	25	17	42
Cumberland.....	12	12	24
Digby.....	8	6	14
Dartmouth (Municipality).....	6	5	11
Guysborough.....	6	6	12
St. Mary's District.....	3	1	4
Halifax.....	22	18	40
" City.....	24	24	48
Hants, West.....	3	5	8
" East.....	2	2	4
Inverness.....	14	12	26
Kings.....	8	17	25
Lunenburg.....	3	7	10
Chester District.....	4	2	6
Pictou.....	14	9	23
Richmond.....	6	7	13
Shelburne.....	0	1	1
Barrington District.....	3	1	4
Victoria.....	4	2	6
Yarmouth.....	2	1	3
Argyle District.....	0	0	0
Queens.....	3	1	4
Province.....	11	7	18
Private.....	8	8	16
Brown and Bell Fund.....	0	3	3
Totals.....	214	193	407

TABLE XVIII.

Balances due Hospital, December 31st, 1837.

	Instalment Acct.	Current Acct.	Old Balances, due 1878.
Annapolis	1875 54	2693 99	3620 21
Antigonish	809 00	1137 05	47 78
Cape Breton	2809 90	5900 36	6166 53
Colchester	781 45	2584 95	459 27
Cumberland	1019 44	3780 19	.....
Digby	1339 93	7314 92	895 79
Guysborough	840 73	1761 97	.....
St. Mary's District .....	.....	25 11	809 77
Halifax County	10114 63	29679 38	615 43
Halifax City—Claims on County .....	.....	.....	5819 09
Halifax City .....	.....	6708 32	.....
Dartmouth Municipality .....	.....	.....	.....
Hants, West .....	.....	247 01	.....
Hants, East .....	.....	988 78	.....
Inverness	1744 48	6255 12	19 91
Kings .....	.....	.....	.....
Lunenburg .....	.....	343 92	.....
Chester District .....	.....	443 46	2896 73
Pictou	949 86	1550 18	.....
Richmond	1413 84	5714 46	1869 53
Shelburne	316 24	440 31	.....
Barrington District	628 78	687 91	117 70
Victoria	761 58	2160 97	2504 57
Yarmouth	1033 16	3892 47	.....
Argyle District .....	.....	821 14	.....
Queens	777 75	1804 96	2547 33
Funds .....	.....	558 34	364 31
Private Patients .....	.....	4805 81	3833 02
	\$27216 31	\$92551 08	\$32586 97

TABLE XIX.

Showing the amounts received from Counties and other sources during the year 1887.—(Income.)

Annapolis.....	\$	
Antigonish.....		844 48
Cape Breton.....		3000 00
Colchester.....		4500 00
Cumberland.....		3300 00
Digby.....		
Dartmouth (Municipality).....		1582 15
Guysborough.....		1500 00
St. Mary's District.....		500 00
Halifax.....		3000 00
" City.....		6000 00
Hants, West.....		1086 68
" East.....		
Inverness.....		3500 65
Kings.....		5919 72
Lunenburg.....		1301 63
Chester District.....		1154 28
Pictou.....		949 86
Richmond.....		1298 72
Shelburne.....		
Barrington District.....		1148 54
Victoria.....		1000 00
Yarmouth.....		
Argyle District.....		
Queens.....		
Funds.....		676 80
Private Patients.....		2624 62
Provincial Government.....		12000 00
Water Rates.....		48 00
Sundry Sales.....		1419 11
Rebate on Coal.....		293 60
		<hr/>
		\$58648 88

TABLE XX.

Expenditure.

FOOD.			
Allspice.	\$ 19 20	Nutmegs	3 44
Apples	193 50	Oatmeal	366 42
Arrowroot	80	Onions	120 36
Baking Powder	22 56	Oranges	7 00
Barley	59 50	Oysters	2 60
Beans	23 94	Partridges	10 20
Beef.	4600 32	Peas	118 76
Berries	56 68	Pepper	21 12
Biscuit	107 31	Pork	18 00
Froma	9 00	Potatoes	998 64
Buckwheat.	2 35	Rabbits	1 70
Butter	2173 82	Raisins	54 50
Cassia	1 20	Rice	129 06
Cheese.	123 51	Rhubarb.	78
Cocoa	3 25	Sago	11 04
Coffee	158 70	Salmon	18 87
Corn Meal	105 84	Salt	37 10
Corn Starch	16 00	Sauces.	6 50
Currants.	36 60	Sausages.	1 21
Ducks	7 35	Shad	75
Eggs	105 40	Soda	20 96
Evaporated Vegetables	101 90	Saur Kraut.	16 85
Fish, Dry	436 14	Sugar, Brown	762 37
Fish, Fresh.	600 66	Sugar, White.	83 26
Flour.	2696 80	Syrup	1 20
Fowls	41 43	Tapioca.	12 00
Geese	84 02	Tea	1193 29
Ginger	10 88	Tomatoes	50
Hams	58 78	Tongues	1 90
Herring	84 00	Tripe	3 60
Lamb	56 94	Turkeys	68 82
Lard	50	Turnips.	20 72
Lemons	30	Veal	7 47
Lobsters	13 90	Vinegar	57 20
Mackerel	50		
Malt	25 00		18542 14
Milk	1561 52		
Molasses	404 26	Less, sundries sold, bbls, &c.	40 00
Mustard	11 70		
Mutton	344 89	Carried forward	\$18502 14

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TABLE XX.—(CONTINUED.)

<i>Brought forward</i>		18502 14	
SALARIES.			
Officers.....		5150 00	
The Pay List		13335 77	
		18485 77	
		18485 77	
MEDICINE.			
Wine		7 50	
Whiskey		26 00	
Drugs		500 62	
		534 12	
		534 12	
HOUSE EXPENSES.			
Blue	14 40	Pipes, Clay	8 25
Boots and Shoes	888 40	Razors	3 37
Brooms	120 50	Recreation.....	56 32
Brushes	68 59	Scissors	15 00
Buckets	57 33	Shoe Blacking.....	24 75
Butter dishes	6 25	Shoes repaired	31 08
Candles	4 50	Soap	714 97
Clothes Pins	1 00	Soap, Toilet.....	3 70
Coal,	4065 82	Soda, Washing.....	7 98
Crockeryware	202 71	Spoons	43 45
Dishes and Pans	10 65	Stamps.....	102 00
Dry Goods	5760 84	Starch	15 40
Entertainment.....	77 88	Stationery	235 84
Ferriage	186 75	Straw	583 29
Furniture	587 28	Telegrams	1 31
Gas-making	574 62	Thermometers	6 21
Harness and Repairs. 31 40		Tinware and repairs .	249 13
Ice	1 80	Tobacco	385 77
Knives and Forks ..	12 28	Tubs	3 75
Matches	33 30	Ward Books	276 00
Oil, Kerosene	20 21		15494 08
<i>Carried forward</i>		\$53016 11	

TABLE XX.—(CONTINUED.)

<i>Brought forward</i>		53016 11
MISCELLANEOUS.		
Return Maintenance.	6 86	Covered Waggon..... 130 00
Cab Hire	4 01	Photos of fire escapes 10 00
Recapture	8 60	Repairs to organ..... 13 50
Clearing land.. .. .	576 00	Babcock Bottles..... 89 00
Incidental..... .. .	1 37	Shrubs 15 75
Advertising..... .. .	24 75	Statute Labor. 20 00
Advances to patients.	72 00	Ice chest..... .. . 14 25
Medical Certificates...	15 00	Hose 114 00
Medical Books	14 35	Clocks and repairs. .. 9 10
Insurance..... .. .	1235 00	2 Heaters 400 00
Telephone.	100 00	Directory 2 50
Industrious patients .	41 66	Marking Ink. 8 00
Printing	220 00	Paper, wrapping .. . 9 00
Wheelwright..... .. .	166 00	Iron Zinc 16 75
Funeral expenses .. .	33 00	Baskets..... .. . 8 40
Hair clippers.. .. .	4 25	Exhibition Ex..... . 3 75
Rent P. O. Box.. .. .	1 88	Survey of Property... 21 15
Type for marking.....	11 76	Freight on box .. . 35
Lanterns	34 50	Sweeping chimneys . 10 00
Organs	165 05	Testing water pipes . 12 00
Nets..... .. .	1 00	Veterinary Surgeon . 55 50
3 Oil Paintings of		Dying Blankets .. . 1 50
donors to Inst.....	255 00	Tuning piano.. .. . 8 00
Scoops	1 00	Organist. 40 00
		4005 54
FARM.		
Oats		184 44
Hay..... .. .		776 00
Implements—Seeds, &c		29 36
Cows		242 00
Pollard		397 32
Bran		90 75
Mangolds		19 80
		1999 67
Less Sales Pigs, &c		879 11
		1120 56
<i>Carried forward</i>		58142 21

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Extra

TABLE XX.—(CONTINUED.)

Brought forward..... 58142 21

REPAIRS.

Smith-work	63 94	
Lumber	526 76	
Carpenters—Wages.....	644 60	
Engineer's Assistant—Wages.....	480 00	
Masons—Wages.....	628 00	
Repairs.....	5058 77	
		7402 07

EXTRAORDINARY.

Heating apparatus	1422 90	
Painting	161 04	
Repairs to Roof	2215 07	
Govt. work acct. fire escapes	395 96	
		4194 97

SUMMARY OF EXPENSES FOR YEAR 1887.

Food	18502 14	
Salaries and wages	18485 77	
Medicine	534 12	
House Expenses	15494 08	
Miscellaneous	4005 54	
Farm	1120 56	
Repairs.....	7402 07	
Extraordinary	4194 97	
		<u>\$ 69739 25</u>

TABLE XXI.*Statement for year.*

1887.		
Jan. 1,	Stock on hand	4266 71
"	Warrants drawn	4700 20
Feb.	Warrants drawn	4862 28
March.	Warrants drawn	7531 79
April.	Warrants drawn	4584 89
May.	Warrants drawn	4071 56
June.	Warrants drawn	6386 09
July.	Warrants drawn	4899 96
August.	Warrants drawn	4221 50
Sept.	Warrants drawn	9001 42
Oct.	Warrants drawn	6611 72
Nov.	Warrants drawn	8344 00
Dec.	Warrants drawn	7089 10
		<u>\$76571 22</u>

EXPENDITURE.

1887.		
Jan. 1.	Stock on hand	4266 71
Dec. 31.	Warrants drawn for the year	72304 51
		<u>\$76571 22</u>

TABLE XXI.—(CONTINUED.)

Amount Expenditure as per Table 20	69739 25
Amount deducted from Food Account	40 00
Amount deducted from Farm Account	879 11

Dec. 31. Stock on hand	5912 86
	<u>5912 86</u>
	<u>\$76571 22</u>

EARNINGS.

Maintenance and Clothing	51222 01
Interest acct., old balances, &c	5646 53
Sales Account of Farm	879 11
“ “ of Food	40 00
Deficiency	12870 66
Dec. Stock on hand	5912 86
	<u>5912 86</u>
	<u>\$76571 22</u>

TABLE XXII.*Farm and Garden Produce, 1887.*

Potatoes	400 bush.	Radish	8 bush.
Beets	140 "	Spinach	39 "
Turnips	500 "	Lettuce	22 "
Mangolds	540 "	Cucumbers	10 "
Peas	22 "	Tomatoes	20 "
Beans	32 "	Squash	25 "
Onions	13 "	Celery	51 doz.
Rhubarb	42 "	Corn	85 "
Parsnips	173 "	Cauliflower	15 "
Plums	2 "	Cabbage	116 "
Pears	4 "	Gooseberry	178 q'rts.
Carrots	166 "	Currants	360 "
Crab Apples	1 "	Raspberries	85 "
Herbs	14 "	Hay	5 Tons.
Beef		1657 lbs.	
Pork		4158 "	
Milk		30038 q'ts.	

TABLE XXIII.*Articles made by the Female Patients, 1887.*

752 Shirts,	440 Sheets,
292 Drawers,	13 Table Cloths,
2 Mitts,	370 Bolster Cases,
24 Socks,	565 Pillow Cases,
275 Hose,	142 Pillow and Bolster Ticks,
259 Collars,	100 Bed Sacks,
323 Chemises,	47 Mattress Covers,
185 Night Dresses,	195 Rollers,
344 Petticoats,	11 Sofa and Chair Covers,
258 Dresses,	78 Window Blinds,
169 Women's Drawers,	465 Towels,
316 Aprons,	15 Ottoman Covers,
208 Waists,	51 Clothes Bags,
53 Tea Bags,	12 Matts,
12 Braces	8 Chair Covers,
44 Hats (trimmed),	20 Curtains.
Mending for Male and Female Patients.	

APPENDIX.

Regulations for the admission of Patients to the Nova Scotia Hospital for the Insane.

Whenever the admission of a patient is desired, application should be made to the Medical Superintendent, who will at once transmit a blank form (the Statement). This form may be made out by the Physician, nearest relative, or friend, and the answers to the questions therein carefully and accurately written out, as it is the chief source on which reliance can be placed, in so far as the previous history and present condition of the patient is concerned, and is entered on the records of the Hospital. It must be sworn to before a magistrate.

On receipt of the statement, an answer will be transmitted. If the case be one suitable for admission, two blank forms of Medical Certificate, and a blank Warrant in case of Patient chargeable to the County, or Blank form of Bond for private Patient, will be sent to the applicant.

The Medical Certificates must be made out by duly qualified Medical Practitioners (those whose names are annually published in the "Royal Gazette,") or they cannot be received. See *Clause 21, Chap. 38, Revised Statutes, Fifth Series.*

These Certificates empower two County Magistrates to make out the Warrant and commit the insane person to this Hospital.

N. B.—In any county in which the Municipal Council has appointed Magistrates to commit insane paupers to the Hospital for Insane, two of those so appointed must sign the Warrant.

Upon presentation of proper Medical Certificates and Warrant, or Bond, at the office of the Commissioner of Public Works and Mines, an order of Admission may be furnished, with which order and other papers accompanying the patient, admission at the Hospital follows.

In a crowded state of the Hospital, the commissioner must give the preference of admission to presumably curable cases.

Two good suits of clothing at least, should be sent with every patient. A third suit for occasional use is very desirable.

Those about to be committed to the Hospital should *invariably* be informed of it *before leaving home*. Everything like deception must be scrupulously avoided. No promises as to the precise time of their return should ever be made.

In order to be benefitted by hospital treatment, patients should be placed under care at an early stage of their disease.

The following clauses of Chapter 38 of Revised Statutes, Fifth Series, are appended for the information of those desiring the admission of a patient:—

CLAUSE 21. In every case where admission is sought for a patient, a statement in writing in the form of Schedule A shall be filled up and sworn to before some justice of the peace by a party cognizant of the facts therein contained, and forwarded to the medical Superintendent for examination; *and his answer and approval shall be received before the patient is forwarded*. No person shall be received into the Hospital for the Insane as a patient without a certificate as in Schedule B, from two qualified medical practitioners in actual practice in the Province, of whom the one shall not be the son, brother, partner or assistant of the other, the examination therefor having been made not more than 30 days before admission.

CLAUSE 22. In case of private paying patients, a bond shall be given to the Commissioner of Public Works and Mines, with sufficient sureties for payment of expenses, and a payment of one quarter's board shall be made in advance. Such bond may be sued on as often as shall be necessary, and recovery had in the supreme or county courts, according to the amount sued for and according to the ordinary practice of the court in like cases.

CLAUSE 26. In case such person shall have been certified to be insane by only one medical practitioner, before his apprehension, he shall be again examined and certified, as in Schedule B, by two duly qualified practitioners, to be appointed by the Commissioner of Public Works and Mines, before he shall be admitted into the Hospital.

CLAUSE 30. The Commissioner of Public Works and Mines, in the case of patients now in the Hospital for the Insane, or on whose behalf admissions are sought, and where in his judgment there are circumstances justifying a departure from the ordinary rates, may make special agreements for the amount and payment of board; and where a patient from violence or otherwise requires a special or extra attendant, such extra attendance shall be charged and paid for in the same manner as the ordinary charges.

N. B.—The Superintendent has no power to admit a patient without the order from the Commissioner of Public Works and Mines.

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DISCHARGE OF PATIENTS.

When a patient recovers, the friends are notified, and upon their application, with the Medical Superintendent's certificate, the order for discharge is granted by the Commissioner of Public Works and Mines.

In cases of doubtful recovery, after six months' residence, it is now customary to grant leave of absence "on trial." If a relapse occur before final discharge, the patient is at once readmitted without any new formalities.

SCHEDULE A,—STATEMENT.

To be forwarded to the Medical superintendent when application is made for the reception of a Patient.

Some member of the 'family or acquaintance (assisted by the attending physician, if practicable) should give a full and complete answer to each question—all facts thus given will be regarded as private or professional communication.

1. Name of patient (in full),
2. Where born.
3. Son (or daughter) of. Give names of parents, and state whether they are or are not blood relations.
4. Residence , County of
5. Age , last birthday.
6. State as to marriage. Single, married, or widowed.
7. Number and age of children. If female, give date of last childbirth.
8. Occupation (or that of father or husband).
9. Personal characteristics. Give any physical defects or peculiarities. Habits as a child and since then; disposition and tastes; success in business or condition of life. Has the patient any vicious habits or always led a regular life; is he addicted to the moderate or immoderate use of alcoholic beverages, or if a total abstainer.
10. Family history. Give all facts pertaining thereto—if any relations have been insane, hysterical, nervous, or have had fits, convulsions or syphilis, and whether on paternal or maternal side. Have either been addicted to intemperate use of stimulants or narcotics.
11. Education.
12. Religion.

13. Previous attacks. State if patient has ever had convulsions, fits, or any previous attack of insanity. The age at time of attack, its character, duration and treatment employed. If sent to an asylum, state where, and the result of treatment. Give particulars of any subsequent attacks, if any.

14. Previous health. Has the patient ever had sunstroke, or any injury of head, or any other serious injury, or any serious disease, such as fevers, ague, syphilis, gout, rheumatism, consumption, or affections of lungs, heart, brain, kidney, or other organ. Has patient ever been delirious, and if so, give supposed cause.

15. Present attack. Give date of any change in the usual condition of habits, disposition or temper. What was the change? Has he been rash or speculative of late in business, or has he exaggerated notions of his ability, strength, power, &c. What has been done so far as regards care or treatment.

16. Assigned causes. Give supposed cause or causes, predisposing or remote, and the exciting or present cause.

17. Duration of present attack. Give date of its commencement.

18. Whether subject to epilepsy. State if subject has falling sickness or fits of any kind.

19. State as to sleep. Sleepless or restless at night?

20. Appetite for food. Natural, depraved, fastidious or absent.

21. If dangerous to others, how. Give full particulars. State every attempt to injure others. Was it from sudden passion or premeditation? Has the patient been subjected to mechanical restraint or confinement, and if so, where and in what form, and for how long a time?

22. If suicidal, in what manner. State whether attempted or threatened, and how often?

23. Present condition. Whether in usual health, or feeble and emaciated, is the voice natural, or is there hesitancy or stammering in speech? Is there any paralysis, or loss of power of limbs? Is sight and hearing natural? Is patient excited or quiet, pleasant or moody and irritable? What is the occupation during the day or night? Is there failure in memory, or are his ideas exaggerated?

24. What delusions. Give their characteristics. Are there false impressions concerning the individuality or surroundings? Are the ideas connected, or is the mind continually wandering? Is a word dropped or forgotten in conversation, or misspelled or absent in his writing?

25. Present habits and propensities. Is the patient filthy in habits or language, or destructive of clothing, furniture or glass? Is there indulgence in secret vice, and if so, how long?

26. Pecuniary circumstances, and to whom chargeable. Answer both questions.

27. Names and addresses of

I. Physicians.

II. Party giving the history.

III. Correspondent to whom letters may be addressed.

IV. Telegraphic address.

I, A. B., make oath and say that to the best of my knowledge the above particulars are correctly stated, and I hereby request you to receive the above named _____, whom I saw at _____, on the _____, day of _____ (being within one month from this date), as a person of unsound mind, as a patient into the Nova Scotia Hospital for the Insane.

Sworn to before me, one of Her Majesty's justices of the peace for the County of _____, this _____ day of _____, 18—.

Name,

J. P.

Address,

Degree of relationship (if any) or other circumstances of connection with the patient.

N. B.—If any of the particulars in this statement be not known, the fact is to be stated. *No patient to be sent to Hospital until a reply shall have been received to this statement.*

NOTE.—All letters of enquiry will receive a prompt reply. Severe illness, or the occurrence of anything of moment, will be immediately communicated. Stamps must be enclosed to prepay replies.

SCHEDULE B.—CERTIFICATE.

(a) Name in full. I, the undersigned^(a)
 (b) Qualification. being^(b) and in actual practice,
 hereby certify that I, on the day of
 (c) Locality. 18 at^(c) in the County of
 separately from any other Medical Practitioner, person-
 ally examined^(d)
 (d) Name in full. of^(e) (f) and that the said
 (e) Residence. is a person of unsound
 (f) Occupation. mind, and a proper person to be taken charge of, and
 detained under care and treatment; and that I have
 formed this opinion on the following grounds, viz :

1. Facts, indicating insanity, observed by myself :*

1. Appearance.
2. Conduct.
3. Conversation.

2. Facts, indicating insanity, communicated to me by

(g) State the in- others :^(g)
 formation, and
 from whom.

Name,

Place of Residence,

Date.

N. B.—Two Certificates (dated within one month of the commitment) are required in every case. The second should not be signed by the father, brother, son or assistant of the Medical Practitioner who signed the first certificate.

*The facts upon which (from personal observation) the opinion of insanity has been formed, should always be specified.