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Bulletin
OF THE
Toronto Hospital for
the Insane

*A Journal devoted
to the interests of
Psychiatry in Ontario*

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THE IMPORTATION OF DEFECTIVE CLASSES.

In spite of the fact that a system of medical inspection takes place, at sea ports, it is only too evident that defectives are reaching us in large numbers. If the penitentiary and prison statistics are anything like those of Toronto Asylum, they will furnish interesting reading for the enthusiasts who are bound to have immigrants at any price. Of course it is obvious that immigrants will naturally include a large proportion of those who have failed in the Old World, because of want of capacity, but there is a suspicion that many defectives are deliberately shipped to Canada, with the idea of getting rid of them.

Fortunately the new deportation law enables us to return the defective classes who break down within two years after their arrival, but those who are able to pass the probationary period are a menace, the importance of which is not understood by the masses.

As facts are worth so much more than theories, a few statements regarding what we know, rather than what we suppose, will not be without interest. Taking the admissions at Toronto Asylum during December, 1906, January, February, and the early part of March, 1907, we find that they included thirty-four men. Of these, eleven only were Canadians; four of the eleven were shipped to us by the United States and other Pro-

vinces; in other words we should have provided accommodation for seven, had a stringent rule been applied.

Here are the facts:—

T. K.—Scotch. Insane when he came to Canada; a paranoiac; dangerous, and probably homicidal. Deported.

F. A. R.—Australian. Faranoid dementia; insane when he came to Canada; dangerous and suicidal. To be deported.

A. B.—Irish. Insane when he came to Canada; married; has two children, instinctive criminals. Cannot be deported.

W. W.—Irish. Cannot be deported.

S. B.—Canadian. Belongs to a Western Province. To be returned.

J. J.—English. Imported defective. Made desperate attempt to commit suicide. Cannot be deported.

J. F.—Scotch. Imbecile; sexual pervert. Father and brother defective and criminal.

S. F.—Scotch. Alcoholic; degenerate. Cannot be deported.

D. D.—English. Insane shortly after arrival. In English asylum. Deported.

W. K.—Canadian.

S. A.—Canadian. Sent here from Assiniboia, where he had resided for ten years.

P. M.—Canadian. Lived for fourteen years in the United States. Deported from United States to get rid of him.

J. B.—English. Sexual pervert and exhibitionist. Defective. Cannot be deported.

J. F.—English. Insane in England and in asylum. To be deported.

A. W.—Irish. Cannot be deported.

C. W.—English. Slum degenerate; has spent much of his brief life in gaol, as a vagrant. Cannot be deported.

W. T.—Canadian.

A. W.—Canadian.

E. C.—Canadian.

J. M.—Irish. Cannot be deported.

G. P.—Canadian.

S. W.—English. Imported defective. Bad heredity.

K. C.—English. Imported defective; wife defective. Wife, husband and three children to be deported.

D. P.—Immigrant. Became insane shortly after arrival in Canada. To be deported.

G. B.—English. Congenitally defective. Became insane shortly after arrival in Canada. Bought revolver to shoot his imaginary enemies. To be deported.

H. F.—English. Sent from England to get rid of him. A general paretic.

R. S.—Canadian.

S. K.—Defective. Jew from Poland To be deported.

J. S.—English. Slum degenerate of the sexual pervert type. Brought here by philanthropist. Has been followed by alcoholic father and mother and three sisters. One sister an inmate of a Canadian asylum; a brother insane. None of these can be deported.

M. K.—German. Criminal. Cannot be deported. Came from Central Prison to Toronto Asylum.

E. H.—German. Came here from United States.

A. J. H.—Canadian.

J. B.—Irish. Imported criminal. Has spent most of his life in gaol. Has a gaol record of more than twenty years.

S. K.—English. Defective. Has been in asylum twice; mother, maternal uncle and maternal aunt in asylums.

If we can gather together such a collection in a few months, what will the accumulation of years mean, and what are the descendants of such degenerates likely to be?

The difficulties in the way of deportation are great, and in some instances insuperable. To take a common instance: a family consisting of husband, wife and children comes to the country; the wife becomes insane, is in fact a degenerate of the most marked kind. What is to be done in such an instance?

The result is that the whole family, which may be of the most undesirable class, is retained.

To take another instance to illustrate the way our defectives are developed: *C. J.*, female, has been in the country but a few years. Came from England, with a family of six; all but one are insane. This woman, who was admitted to Toronto Asylum recently, married an alcoholic who is old enough to be her father; they have four children. What can be expected of these unfortunate descendants of criminality and degeneracy?

The American Government long ago learned that the weakest part of their medical inspection of immigrants was that pertaining to the detection of mental weaklings. As a matter of fact this work should be done by men who are specially fitted and qualified for the work by experience among the insane. And what would be better still would be to have the inspection made at the port of sailing, rather than in Canada.

THE PSYCHIATRIC HOSPITAL.

At the meeting of the Ontario Medical Association in Toronto in May last, the establishment of the Psychiatric Hospital was thoroughly discussed, and met with the hearty approval of the representative members of the general profession present. On all sides the progressive spirit displayed by the Hon. Provincial Secretary and the Ontario Government was commended, and the Hon. Dr. Reaume voiced the sentiments of the community when he said that Ontario was no longer content to follow, but was determined to lead.

Many editorials have appeared in leading papers commending the scheme, and while some of these have fully recognized the excellent work that has in the past been done in most of our Hospitals for the Insane, but possibly magnified the expectations in regard to cures, still on the whole these editorials have been of the greatest educational value. They called attention to the pressing needs of the Province and developed a widespread intelligent interest on the part of the public.

The various medical journals have taken up the cause in an enthusiastic way, and the American psychiatric world is showing the keenest interest in a development that means a momentous stride forward. In some quarters the fear has been expressed that in the search after the unknown, the care of chronics will be forgotten, but such criticism only emanates from those who are beyond a knowledge of the facts and whose point of view is not the best possible.

The building of the Psychiatric Hospital means the beginning of a new era in the treatment and care of the insane in Ontario, and the Government is to be warmly congratulated on the courage and intelligent spirit shown in undertaking this work. The expenditure will of

course be great, but the results are likely to be so far-reaching and important that the people at large recognize the necessity for it and applaud the enterprise of the Cabinet. No labored justification is required for such humanitarian undertakings.

THE BULLETIN.

THE BULLETIN has been received with such kindly comment and criticism that the editors feel encouraged to continue the work with increased enthusiasm. From far and near letters of approval have reached us, and it is gratifying to feel that the general practitioner is in sympathy with us; we require his help just as much as he needs ours. Recognizing the fact that some of the Provincial Institutions are adding much of value to psychiatry, it has been thought well to keep the profession in touch with this. The material for the next issue of THE BULLETIN will be supplied by Dr. Edward Ryan, of Rockwood Hospital, Kingston, and his Assistants.

HYDRO-THERAPEUTIC APPLIANCES.

Toronto Asylum has now been well equipped with modern hydro-therapeutic appliances, such as spray and douche apparatus of various kinds, continuous baths, etc. Continuous baths, while advocated and employed forty or more years ago, with a good deal of enthusiasm, have once more come to the front, and certainly have a place in the treatment of some forms of excitement.

Dr. E. N. Brush, of the Sheppard and Enoch-Pratt Hospital, Baltimore, writing on foreign Hospitals for the Insane in 1905, sums up the hydro-therapeutic situation very fully. He says: "The use of hydro-therapy, and more especially prolonged bathing, has had, like many other therapeutic procedures, a curious periodicity. About 1847 Brierre de Boismont reported the use of prolonged, six to ten hours, warm baths in calming maniacal excitement. He was followed by other writers and observers, and for a time the method was in more or less general use. About 1863-5 attention was again called to the use of prolonged warm baths, with various modifications and again in 1882-3. The period has again come around and a method which has undoubted advantages, and only passed into abeyance because introduced, exploited and used with more enthusiasm than good judgment and discrimination is, or rather has been, for a few years past growing in favor."

THE POSITIVE DIAGNOSIS OF GENERAL PARESIS.

To physicians in hospitals for the insane it is a matter of surprise that paresis is so seldom diagnosed by the general practitioner. The physical and mental symptoms of this disease are, as a rule, so well defined that little difficulty should be experienced in detecting them. There are cases, though, in which the symptom pictures are not clear, and as it is important that a positive diagnosis should be made, lumbar puncture is advisable. If this is properly done and the cerebro-spinal fluid carefully examined, an intelligent opinion may be expressed and the proper course to be followed mapped out with some degree of certainty. It is embarrassing for the family physician to diagnose a case as one of neurasthenia giving a favorable prognosis, and then learn that his patient is suffering from general paresis.

The technique of lumbar puncture is not difficult.

LUMBAR PUNCTURE.

Lumbar puncture, the operative procedure by means of which the cerebro-spinal fluid is extracted, was introduced in 1891 by Quincke, as a means of reducing the greatly increased tension which is known to exist in certain of the meningitides.

The fluid varies in amount; 5 to 10 c.c., however, can often be obtained (Emmerson). In paresis the fluid is always greatly increased in amount, as it is also in alcoholic and senile psychoses.

In regard to the normal fluid, it is as a rule of pale limpid color, alkaline in reaction, specific gravity 1006-1010. Of the solid constituents, urea is present in small quantities, 0.01 to 0.05 per cent. (Emmerson); the proteids, globulin, nucleo-proteid and protalbumose are normally present, and under pathologic conditions, to be spoken of briefly later, serum albumin is also found.

Another element present, the exact nature of which is still sub-judice, may be designated the reducing substance, because it causes reduction of the copper salts. It was formerly looked upon as glucose, and such a good observer as Coriat still holds to this opinion. However, other investigators insist that it is not glucose, but allied to pyrocatechin (Halliburton).

The solid elements in the fluid, the lymphocytes, are of a very considerable interest. They are normally present in small numbers, probably 2 to 4 in a cubic millimetre of fluid, but are greatly increased in any condition where there is a subacute or chronic periarthritis or pia-arachnoiditis (Farrar); and chiefly of interest to the student of neurology and psychiatry, because, in paresis, tabes dorsalis and luetic cord lesions, there is a marked lymphocytosis.

It is not the intention of the writer to go extensively into the very broad question of the condition of the fluid

in all pathologic states in which its nature is modified, but rather to deal briefly with the matter of technique of lumbar puncture itself, and of the method of examining the fluid obtained in cases of paresis.

The operation is best performed with the patient sitting upon a chair, the back of the chair being turned to the front and the patient leaning over it. All preparations in the way of cleansing the skin and hands, and sterilizing needles, are made as for any operative procedure. The skin about the lumbar region having been thoroughly cleansed, the spine of the fifth lumbar vertebra is next located, and the needle is inserted about 2-3 c.m. to the right or left of the spinous process, and slightly above it, being turned so that it will cut the skin in an upward and inward direction, passing through the small spinal foramen. It is most essential that the patient be well bent over the chair so that the convexity of the spine is very marked in the lower lumbar region, and the spinal foramen will then be wide open. The needle being inserted, the fluid can be received in a small sterilized test tube. If the puncture is done at night, and the patient put at once to bed, troublesome post-puncture symptoms often do not appear (Cornell). One might just mention here that these symptoms are as a rule nausea or vomiting, very severe frontal headache and occasionally a feeling of weakness and collapse. Cornell has noted that many cases in which there was a lymphocytosis the post-puncture symptoms are not so severe, and cases in which a positive count was not obtained often complain of many symptoms. This is not, however, an invariable rule.

In regard to the needles used for the puncture, long hollow platinum needles of fine bore are probably the best. If these are not available, steel needles may be used, they should, of course, be of fine bore, sharply pointed so that the mark of the puncture is very small. Local anæsthesia with ethyl chloride often facilitates the operation.

In obtaining the fluid one should note the pressure, and it requires some experience before it can be estimated approximately whether the pressure is above normal. An instrument has been devised for registering the pressure, but it is not as yet in very common use. It may be obtained of Messrs. Allen & Hanburys, the manufacturers. When, however, one does not use such an instrument, a number of punctures must be done and the investigator establishes a norm for himself, and any degree of variation he is, of course, able to recognize; that the personal equation enters in here, one can readily imagine.

In a large percentage of the cases of paresis, the pressure of the fluid is increased, there is a marked lymphocytosis, 6-145 cells per c.m.m. (Kramer). Plasma cells are occasionally found (Cornell), the toxicity of the fluid is increased (Coriat) and the reducing substance is also said to be increased. The presence of serum albumin is perhaps one of the most characteristic alterations in the fluid. The serum globulin is precipitated by adding a saturated solution of magnesium sulphate, removed by filtering and the serum albumin precipitated by adding a solution of ammonium sulphate; the degree of clouding of the fluid is a fair index to the quantity of the serum albumin present.

Cholin, a product which is invariably present when there is a degeneration of nerve tissue, is also present in the fluid in paretics.

As an early diagnostic sign of the utmost importance in suspected paresis, lumbar puncture is one of the most valuable possessed by the psychiatrist of to-day.

That untoward symptoms occasionally follow lumbar puncture should be kept in mind, and the patient should always be advised to go at once to bed after the operation, and rest for from 12 to 24 hours. Cases are known where a condition of delirium with considerable clouding of consciousness has appeared in patients allowed to go about as usual after the operation.

To those interested in psychiatry in Ontario, it may not be known that Webster, working at Rockwood Hospital in 1896, did a considerable series of lumbar punctures in cases where the tension of the fluid was increased.

STUDIES IN PSYCHOPATHOLOGY. *

In each issue of the BULLETIN it is the intention of the editors to present one or more cases of mental disease, giving the history as ascertained from the patient or his friends, when possible; then giving an analysis of the case pointing out the patient's abnormal manifestations, and where possible their prognostic significance. It is the aim to first adduce all the evidence, avoiding classification if the case is seen to require "fitting" in order that it may be so grouped.

The great difficulty in making individual disease pictures fit into a certain division is that, though the most conspicuous elements in the psychosis may be clearly indicative of a given group, there will be others equally important, though possibly less noticeable, symptoms that point in another direction. So it may happen that the case will not always receive a formal label even though a prognosis be given.

The interesting case that has been chosen for the first study illustrates certain features that are not solely of psychiatric interest. In the first place, it is seen that we have to do with an alien, one of the undesirables in the immigrant class. An article in another page of this number points out very clearly some facts in this connection.

The patient's family history is, as we see, fairly good, no alcoholism, no history of any of the neuroses or psychoses, nor any evidence of eccentricity in either parent, neither was there any consanguinity.

Coming to the personal history, it is at once obvious that we have to deal with an extremely interesting character. As the patient expresses it, he was, even as a child, greatly impressed by the unknown, which he looked at through a veil of mysticism strongly tinged with the supernatural. He was naturally shy and retiring, more

interested in dreaming than doing, one to whom the humdrum and monotonous sides of life were extremely irksome.

An individual, even at an early age inclined to be impractical, tending more to the literary and artistic side than to the eminently exacting process (for the patient) of earning a livelihood. We see that his early education was fair and that in the branches in which he was interested he made very good progress, but it was early evident that he was *neuropathic* (see *Stigmata*), he would become greatly upset if he happened to be the central figure, even in a gathering where his presence was necessary, only because of certain services he could render. A morbid introspectiveness, always analyzing his own motives and those of the person in his immediate environment and an inclination to be unduly self-conscious.

Patient's habit of mind was of the wandering, disorderly type, goal ideas were not lacking, but tempting by-paths in the form of subsidiary associations appeared to him more strongly than the essential ones, and entered more largely into the sum total of his mental activities. Here we have a ready explanation of his frequent change of occupation, his inability to reach any position of importance in any vocation he made his own.

The outward expression of his inward unsettled state found vent in his various wanderings, first in England, and later in foreign lands. The lack of depth in the serious vein is also very striking, no situation, however trying, that did not have its major share of the absurd and ludicrous. In connection with this one element (ever so conspicuous in the child mind), we have a second, the inability, in his work, to ever rise above a mediocre dead-level, and a constant expectation of supervision from elders and superiors, and an acceptance of this as being naturally due him. Another point was his recognizing the inadvisability of marrying. This fact had impressed itself upon him quite strongly, not only because his earn-

ings were quite insufficient to support two individuals, but also because he believed that the extra stress of becoming head of an establishment, however humble, might prove to be too great a burden.

Possessed of an affect tone, mercurial in its fluctuations, heights and depths being ever more in evidence than an even sameness with slight variation. It is probable, however, that the emotional coloring was of some considerable intensity, and that very often association processes were more markedly influenced by emotional considerations than by those of reason and judgment. Volition was never lacking, but its direction was often wanting in orderliness. There is good breadth of ideation, attention is fairly strong and is dirigible by events or incidents meriting consideration. We see that the normal psyche was one lacking chiefly in stability, that this instability was not sufficient, however, to cause definite psychopathological manifestations until an unusual strain was applied.

The rather trying work, long hours, striving to please with the additional (probably quite important) factor of excessive alcoholic indulgence, must be regarded as playing leading roles in the precipitation of patient's first attack, in which, as he mentions, he was markedly depressed, had ideas of unworthiness, vague sin delusions, and probably also thought he was to be made pay the penalty for some imaginary wrong. Here we have the *depressive feeling tone* becoming so marked as to be *pathologic*; with the overwhelming gloom came reasoning as to the avenues of escape, suicide looms up most prominently, is attempted but not successfully. Following this, a fairly well drawn out period of depression, a gradual clearing up, and a return to normal.

From the time that patient was discharged from the English asylum, where he had been treated during this first attack up until November or early December of 1905, he apparently was in normal mental health. No

conspicuous reduction manifested itself, and this long period was more or less negative so far as our history is concerned.

In the fall of 1905, however, a second attack developed, and from what we can learn in regard to it, the chief characteristics were: first, a falling off in patient's physical condition, coincident with this, quite marked insomnia, and then definite manifestations of mental alienation, considerable elation, psycho-motor restlessness, etc. Patient showed a very unusual degree of insight at this time, this being evidenced by his giving up certain habits which he believed to be deleterious to his welfare, absenting himself from the young woman to whom he was probably at this time engaged to be married, and finally retiring to the country for rest with the hope that he might recuperate his strength.

That patient went on to recovery after this mild hypomaniacal attack he is certain. His friends at this time believing that physical work out of doors might benefit him, secured a small place where patient worked until the time when he embarked for Canada.

He left England with no means whatever of support in a new field, realizing that he was only one in a great flood of immigrants thrown into a country to be more or less dependent on their own efforts for maintenance. The prospect was not alluring, but the necessity for separating himself from his fiancée was great and the apparent anxiety on the part of his relatives to be rid of him he does not hesitate to mention. This was doubtless due to the recognition of the fact that at any time patient might develop another mental attack, and be a burden on their hands. Therefore it is not to be wondered at that patient came to the country in a rather depressed frame of mind.

His strenuous labors to make both ends meet, the difficulty in securing suitable employment, the advent in the country of the young woman to avoid whom he had

considered perhaps his chiefest reason for leaving London, their early marriage, his poor physical condition at the time, the extra struggle, and the indulgence to excess in sexual pleasures in his early married life, must all be counted as exciting causes of the present breakdown, the predisposing factor being, as before, patient's neuro-pathic taint.

The initial symptoms that attracted attention in this his third attack were, as in his first, vague persecutory ideas, but along with these went very evident motor restlessness, considerable elation, open rupture with his landlord without cause, suspicions directed against his wife, also foundationless, and all the time marked insomnia.

The summing up of patient's condition on admission is recorded elsewhere. His progress is evidenced by his letters.

John F., æt. 36, admitted January 23rd, 1907.

Following information obtained from patient:

Family History: Father, T— P—, is living; age 73; has had fainting spells for some time, probably arterio-sclerotic. He is a retired relieving officer, on a pension; is a total abstainer.

Mother is living; age 77; she is in feeble health; possibly senile.

Three brothers; aged 44, 40, 39; all quite well to do, living in England.

Patient is next in the family and he has three younger sisters; aged 33, 31, 25; all in good health.

He has two brothers dead; one died at the age of 7, cause not known. This child stuttered and one sister and one brother died in infancy.

Patient is fifth in a family of ten.

There is no consanguinity between the parents. No family history of neurosis or psychosis, as far as the patient knows. There is, however, a family history of rheumatism.

Personal History: Patient's mother had rheumatic fever when patient was born and patient had attacks of this until he was sixteen years of age.

The patient was born in B——, England. Describing his youthful characteristics, he says he was a full-blooded, healthy boy, robust, always very active; he went to school from the time he was four up to the age of fifteen; he made fair progress at school; was quite good at English and allied subjects, but did not do so well in the exact sciences. As a boy he was nervous and bashful, somewhat seclusive, disliked meeting strangers. After leaving school he went into a solicitor's office, where he remained for about three years, when he went into another office, his new employer being a brother of his former one. He was three years also in this second office, remaining there until his employer died. For three years he was assistant to the town clerk. He then went to the town clerk of C——, as manager, and he remained there for six months. Patient says that his work was extremely irksome to him, that he was required to attend council meetings and listen to the petty bickerings of small officials and, because of his ability to give opinions on certain legal matters, his services were fairly valuable, but he disliked the work and took no interest in it. Further, he did not try to conceal this and it became apparent to his employers and they dispensed with his services.

From C—— he went to London. Here he also did clerical work, in different places. After remaining in London probably six months, he came to America, going to St. Nora, Texas, which is on the Mexican border. He came *via* New York and New Orleans. This was in 1894. He remained there eight months. Here he was occupied herding and driving sheep; his life was an extremely lonely one; he lived in the hills; often saw no one for three or four weeks at a time. Toward the end of eight months he became run down, and was in

the hospital for a short time. After leaving there he again went back to London; this was about the end of September, 1895. He had various clerical positions, possibly in a dozen different places; many places he left because of the pressure of work. He was in London approximately three years. He went to Southampton, for a short time, then to M—, where he was clerk to the superintendent of a hospital; here he remained one year. During this time he became very friendly with the druggist of the hospital, and it appears that this man's habits were not of the best, and patient, for one year, drank quite hard. He says that every night, for quite a long time, he would drink a pint of whiskey straight, he and his friend doing it against time. It is probable that during all this year, at M—, patient was run down somewhat in health. Just at the end of the year he began to feel very nervous and somewhat depressed. He went home to rest up and had only been there a day or so when he made a suicidal attempt; this was August, 1898. He attempted suicide by picking up a knife which he saw handy and slashing his throat with it. The wound was not a deep one and he made a good recovery. He was then sent at once to the Three Counties Asylum, near Hichen, where he remained from August until December, 1898. He says that at this time he was very depressed; was below his normal weight; was troubled with insomnia, and, apparently appreciated his condition very well. He says that when he was discharged he had gained in weight; sleeping well; had no worries and was discharged "recovered."

After leaving the asylum he went home, for a couple of months, and then back to London, where he had different clerical positions. He says he seemed never to be able to get a hold anywhere, that is, to obtain a permanent position. He went down to Tunbridge Wells, and also Eastbourne. He was with the General Electric

Company, in Manchester and in London. He then worked in a small town in Wales. After this he was with a firm in Birmingham. During all this time he would go back to London whenever he was out of employment and for a couple of years before coming to Canada he resided in London.

It appears that about November, 1905, he again became run down and had some sort of a nervous attack, when he showed marked motor restlessness; walking about; singing a great deal. At first had some insomnia and was run down in weight. The attack lasted probably until early in February. He went home and improved. At this time he had no suicidal thoughts and apparently the attack was only a mild one.

Before this he had met a girl in London to whom he had become engaged. Knowing as he did his unfortunate mental make-up, patient was rather averse to marrying and this suggested his going to Canada. He also believed that if he were able to get out and do manual work, rather than office work, it would be well for him, and a third factor also entered in, viz., that he had no work to do for the last two or three months in London. Patient himself lays most stress on the fact that he was anxious to get away from his fiancé, as his father had advised him strongly against marriage.

He sailed from Liverpool to Quebec, on the Lake Champlain of the C.P.R. line; landed May —, 1906. He went directly to W—— over the C.P.R. He remained there from May until he returned to Toronto.

While in W—— he held various positions, in offices and also at some outside work. The reason of his return was the fact that the girl to whom he was to be married had come to Canada despite the fact that patient had written her advising against it and had told her that because of the fact that he was going into the far West she probably would not be able to communicate with him for two or three months. This letter, instead of having

the desired effect, seemed to precipitate her coming to Canada. Although the patient is now inclined to regret the fact of her coming, he in no wise lays any blame on her, he says they were extremely attached to one another.

Patient was married September 22nd, 1906; since his marriage he has been living in Toronto.

Present Illness: History of the present illness and certain other features in connection with patient were obtained from his wife, who tells us that she has known patient for the past two years, having met him in London when he was a clerk in the office of D——. While she knew him he also worked for T——, where he earned about thirty shillings or two pounds weekly.

She says that she regarded patient as quite a normal man; appeared quite well; not at all nervous, but he had told her that he had been very nervous as a child.

Our informant then recited briefly the events recorded above, in connection with patient's attack in November, 1905, the subject of which in the main coincided with what patient had already told us. He was talkative, restless, complained of insomnia, and as he grew worse he did not go to see her. He was not in the hospital at this time, but gave up his work and went home for a couple of months. His wife states that patient recognized the nature of his trouble and did all in his power to help himself. He gave up drinking beer and stopped smoking because he believed these things might aggravate his condition. About the first of February, 1906, he came back to London from the country and his wife thought at this time that he was quite well. She did not see him from the time he left England, in May, when he seemed perfectly well, until she met him in Toronto in September.

She does not think he was very well in September, when they were married, although he was not at all nervous, but seemed to be somewhat below par physically.

He had various positions after coming to Toronto; was first assistant caretaker in a school, and then did clerical work for a few weeks, the last place being with C— Co. He was sent by this firm to H—, to go over the books of the firm there. He remained in H— three weeks; this was just before Christmas. As soon as he came back from H— his wife saw at once that he was not well and that he was acting queerly and he told her this was the reason of his coming home. He had vague persecutory ideas, at this time; thought people were trying to harm him, and, at times, accused her of not being true to him; he was sleepless; showed marked motor restlessness; talked a great deal in a rambling way; his appetite was poor. He gave up his work and remained at home. Then went to work for the C— Co., where he was for about three or four weeks. He had not been there long before he commenced working overtime; three nights in the week he worked until ten. He did not work New Year's day, and January 2nd he again acted peculiarly; talked in a rambling way and was in much the same condition that he had been in a few weeks before. He thought another employee had insulted him and he resented this insult by walking up to the man and spitting on his foot. This incident patient now recognizes as being quite absurd and admits that if he had been perfectly sane he would not have done it. His condition gradually grew worse; finally towards the end of the week, that is about January 5th, he was no longer able to go to work. He walked about a great deal; he accused his landlord of harming him; displayed marked antipathy towards his wife. His condition continued much the same the following week: he was very talkative, showed considerable elation and did many foolish things, one of which he himself told of: he took a felt hat and made a rosette of it and pinned it on his coat. Certain other bizarre acts, at this time he also recollects and says that they clearly indicate that

his mental health at this time was not good. The same week patient went out for a walk one evening with his wife and happened to be passing the Union Station; he went in and bought tickets for H—, with the idea of finally reaching N— F—. He arrived there about 11 p.m. Next day they walked back to B—. Here patient's mental condition grew much worse and it was necessary for his wife to call in a physician, who gave the patient some morphia. The following day they walked to O— and took the train back to Toronto. The evening of their arrival patient continued to grow worse and he said to his wife that he felt he would have to kill some one. She grew frightened lest he would do her harm, and because of his violent language she went into a neighbor's, who had a policeman come in. Patient was arrested and taken to No. 6 police station; next day he came up in the police court and was remanded to the gaol, from there he was brought to the Hospital.

Before coming to Canada patient's wife tells us that the patient would often become down-hearted and depressed at times, but, as far as she knows, this only lasted one day, and he never had a definite attack of pathological depression since she has known him.

Patient's wife knows his brothers, one of whom is a book-seller, in London, and has socialistic leanings. The other one is manager for a prominent London publisher.

Sexual History: Patient says that for many years, probably from the time he was 14 years old, he masturbated two or three times a week, but gave the habit up about two years ago. When about 19 years of age he began to have sexual relations and has led a more or less irregular sexual life up until two years ago. Since his marriage he has probably indulged in sexual relations to excess, and he attributes part of his present breakdown to this, coupled with the fact that he was in poor physical condition at the time of his marriage.

He gives an account of an attack of tripper eight or nine years ago. Denies lues or any sexual perversions.

Alcoholic History: Patient's alcoholic history has been partially dealt with in his personal history. Further information is given when he tells us he was a total abstainer until he was 17 years of age. From that time he took an occasional glass of beer and would, as he expressed it, sometimes spend a convivial half-hour Saturday afternoon, after receiving his pay.

The history of his alcoholic excess, while in Manchester we have already noted. Patient attributes his mental attack of ten years ago to his alcoholic habits at that time, but he says that he was also run down and that the alcoholism was doubtless only one factor.

Mental Status: On admission patient did not show marked excitement, he remained in bed quietly; his greeting was pleasant and his reaction a fairly normal one. It seemed from all the information obtained above that the present condition was doubtless superadded to a congenital neuropathic disposition. Patient says that even as a child he was always greatly interested with the mystic, and, apparently, had dipped more or less into things metaphysical and philosophical. One incident which he related was characteristic and serves well to illustrate the point in question: it appears that some time ago a man in London expressed the opinion that individuals of a certain temperament often found themselves attracted by certain colors. Patient was greatly interested in this idea, as he apparently had had somewhat similar views himself because he said often as a child he would be attracted by anything of a violet color. He wrote to the man who had expressed these views, and was invited to attend meetings to discuss the matter, which, however, he never did.

Patient's characteristic in his general reaction at the present time is his marked tendency to lose sight of the goal idea and wander down by-paths. This is not

due to the fact that he finds difficulty in expressing himself, but it is probably due to the increased psycho-motor discharge and to patient's distractibility of attention so that he finds it difficult to continue for any length of time on one subject. He does not show the typical maniacal syndrome in that there is no flight of ideas; the busy activity and the psycho-motor restlessness also being absent at times, but the increased psycho-motor discharge would seem to be due to the hypo-maniacal condition which he appears to be in at the present time. His psychosis is modified to such a great extent by the congenital defect on which it is implanted that the picture is not a perfectly clear one. There are certain other features, also, which enter in and are not at all characteristic of maniacal excitement. The first is the striking insight which patient has into his condition, past and present. He talks perfectly freely of his sanity and insanity and says that, at the present time he is *not* perfectly sane, but believes he is approaching a sane condition quite rapidly. He gives logical reasons for his believing that he has been insane and also good reason why he is better than he was.

Patient's affect accompaniment is a pretty normal one except that he perhaps discusses rather more freely his condition than one would expect, showing also slight elation. Never at any time has he shown apathy or indifference, and he is keenly interested in his own future welfare and that of his wife. He feels, further, that he has made a serious mistake in marrying, but says that it is too late to correct this mistake, and the only thing to do is to make the best of the situation as he finds it.

Patient's memory is good; he recalls all facts easily and readily. At present time there are no fallacious sense perceptions and it does not seem probable that they have been any present at any time during the psychosis. Patient has elaborated no delusional fabric and certain ideas that he has had at other times he has recog-

nized as being delusions and has called them such. Judgment and critique are not very much impaired when one considers patient's normal mental make-up.

Physical Examination: Patient is a well developed young man, 5 ft. 10 in. tall; weight, 145 (normal 154), fairly well nourished. Vertex well formed, symmetrical. Hair dark brown, abundant. Complexion medium; small white scar above the right eye (this the patient received in Three Counties Asylum). Small scar at outer canthus of left eye. Features symmetrical. Ears 7 c.m., symmetrical. Antihelix is not well marked; helix is broad, flat, 2.3 c.m. in width at middle. Lobules not adherent; no discharge from ears.

Hearing: Possibly slight defect in hearing in left ear.

Fibrillary twitching of orbicularis palpebrarum.

Eyes: Straight; move freely in all directions; no nystagmus; sclera slightly injected. Irides, hazel. Pupils, in ordinary daylight about 3 m.m. in diameter, unequal, left larger than right; irregular in outline, right eccentric, left concentric. Pupils react to light D. and C.; rather slow contraction, with good excursion. No arcus. Vision said to be good. Does not wear glasses.

M. M. slightly pale. Tongue protruded straight, broad, moist, clean; shows fine tremor. Palate quite high, narrow, distinct central torus.

Pharyngeal reflex active; pharynx and tonsils slightly reddened; thyroid not enlarged. Long linear scar, about 9 c.m., on left side of neck. Acne spots on shoulders.

Chest quite well formed; good expansion, percussion note clear; breath sounds normal.

Heart: On inspection impulse seen in 6 I. S. 8 c.m. from M. S. L. R. C. D. from 3 I. S. downwards and from M. S. L. 9 c.m. to left; not made out to right. Heart sounds clear and distinct. Pulse 17 to the quarter; regular in F. and R.; compressible, not high tensioned.

Abdomen: Panniculus poorly developed; no tenderness on deep palpation. R. H. D. extends 4 c.m. in P. S. L. to costal margin. Abdominal skin reflex active. Genitalia negative. Cremasteric lively. Extremities cold and moist.

Reflexes: McCarthy's present, mechanical irritability of facial present, masseter active; arms quite active, equally so; K. J. active; Achilles lively; plantar present; no Babinski.

Motor functions: No ankle clonus. Station good. No Romberg; gait normal; speech normal; no weakness on either side.

Cutaneous Sensibility: No disturbance; stereognosis normal. Organic reflexes normal. No tremors, except those noted.

Subjective Complaints: None. Taste and smell not tested.

The patient was requested to write an account of himself, his personal history, and an account of his illness up to date. He complied and the following is what he wrote:

"J.T.P.'s memoirs previous to 1879, when he was ten years of age. World was palpable—*very*. His was a great little belly. His a cavernous mouth. His a cavernous ear—for music. Aye, a very drunkard—his the singing keyhole on a wintry night in gloomy passage. But Fear Oh. little white mouse—such a timorous thing was this (only one of God's many Bairnies). Shy, so very indignant, from his mother's arms at strange approach. Flattery, cajolement, praise or blame ne'er touched him—only this little Heart he nursed alone. But there were whispers among the grown ups, those older children, about ghosts and sin and the dark bedroom fed his Timidity and his *imagination* fed his Timidity. People, Brothers, Sisters, Mother and Father were to him *his self* secondary. Mother had many children, many illnesses, and much *much* misery, and little time even to

devote to her children, that is to specially notice one. So I had no playmate. But few amusements except watching the worm casts on the dank earth pathway "in our backyard"—what a rush filled my heart when pleasure came—with an occasional rough and tumble with burly country cousins. When I expect their well-meant horse play often found me in tears at my inability to understand its meaning. I suppose I had all the natural Measels, Chicken Poxes, etc., flesh is heir to. I know I had Scarlet Fever for some protracted time, and my mother had Rheumatic Fever at my birth, and that occasioned my worst suffering once or twice before I was ten. I had this Fever for months, and had once more to go back to the perambulator and be wheeled about. Oh, Hang it, Doctor. This is a dry job. By gum, I have tried to bring a little musical coloring into these little notes to help me on. But by the love of cats to warmth, I cannot help seeing the hollow mockery of all these details, and apart from the fact that I know it is your very sound wish to keep me quiet I would not write at so great a length about myself. By the way, *re J—*, you were more than right, I was misled by my hopes. But at the same time this swagger patient is awfully like *J—*, and I had been looking at the light too much and when I went out to the corridor. There was Mr. *J—* as I thought, only not *J—*, very likely his brother, who knows? I don't. At any rate he is a meek and mild man like me, and when I saw him thinking I was *J—*. He saw me, and I supposed, Lunatic as I was, thought to himself what a wretched looking object."

(In regard to the incident in connection with the Mr. *J—* mentioned, this was simply a case of mistaken identity; the only evidence patient showed of any clouding of consciousness, if this might be taken as such.)

"Then I asked the attendant could I go and make water—not really meaning, of course, to manufacture that commodity—but simply to dispense it. He complied

with the easy grace so natural to a Lunatic Attendant *i.e.* (before his superiors). I went and did what I was ordained to do. Here came the J—— problem again—thought I saw how it was. He had been waiting for the Doctor's consent to see me—well I said I am sorry I am considered too swell at present for you to talk with me. I would not wait too long, as the Doctor may not be round t'ill Dinner time. So after I had placed myself once more under the care of my Retainer. He got out—lower down the corridor and wondering in his poor heart how to fit my delusions in with his own. He not being J——.

“J. T. P——, born 1869.

“School. Bedford modern until age of 15. ‘a strange boy.’ (This is written at the request of Dr. ——, who thinks that the writing of a short history of my life may amuse me and so help my cure. Being always a little self-conscious I am a little inclined to gratify him in this matter, as he wishes first of all to cure me, and then always to remember the fact that this was his first motive with me, (and this is a *good* idea to keep me quiet and out of mischief).

“Now there is for the time being another rather more important thing that interests *myself* and that is the present conveniences (ordinary) of life. I am in bed with no shoes, slippers, coat or anything (perhaps I want to escape thro' the window?— Put the ‘Bars up’) and to go to the lavatory with a shirt open at the back is a discourtesy even the other Lunatics do not deserve, not to mention a chance female passer. Give me the liberty to go to the closet as a man and not a heathen and I will be more strenuous to keep the peace between attendant, lunatic and lunatic. Not that Dr. C—— needs any assistance in that way, only that a lunatic has no responsibility for either love or hate and Dr. C—— has.)

“Sorry, Dr. F——, I so digress. Now to revert for a few *moments*, to the affair of my wife's heart, *i.e.*, *my-*

self. I naturally desire her happiness continued and would certainly not look forward to leaving this asylum if her happiness were at all jeopardized. I fancy it might be jeopardized if I were released too soon, as my responsibility of life would be too great during the winter in Toronto for our joint maintenance. Perhaps it would be possible to live together without danger of disorder if we possessed a mutual restraint. L'homme propose le Bon Dieu disposé but in plain English, which is much to be preferred, being blunt, *honest* and open Mother tongue of me. The restraint of course refers to matters intersexual—as far as good healthy desire goes, of course, at the present time I am bankrupt. My wife therefor is a dismembered *bride*. This being so, what are her prerogatives. 'Echo' answers still *Love* to place where and when she will on whom she will—as a woman free born of Love should in heart be free to follow its monitions. Now undoubtedly the Heart is to an extent mortgaged in my interest—and she is evidently much perturbed at my excited distrust of my surrounders and surroundings. These days will pass. She is a Lioness in heart, as I a lion. other days will come and will find me still at 999 Queen west—nor need she for her own peace of mind be afraid. These days will pass as soon as I am considered sane. I am discharged. My wife's address is known to me, *perhaps*—anywhere in the world—I seek her—or do I not seek her—I seek self or I do not seek self. Gentlemen, I have which I should *not deny* of cruelty to her. In the meantime, that is at any rate from now—should she find one she can truly Love and co-operate in Life with, I certainly being selfish and having high distaste for the Melo Drama, should not at all be displeased with. Should she get half a hint, however, that I am inclined to encourage separation, being so womanly, will probably want me back as husband more than ever. So that it must be painted to her the real dangers of the business, and her own views taken as to

remedy, so that her own mind or *individuality* is pleased and pacified. Correspondence only if she urgently wished in case of need during the two years through either my people—her people—or a joint and wise confidant—and if she married again she would not write me and my allowance would not be required. So far as my personal ability in association with her goes to help her as a companion, I feel that she must for a time submit herself to her Lady friends as much as possible, taking their counsels and advice—instead of mine, and either hope to be with me again when it is best for both—or try to accustom herself to the acceptance of an absolute separation. Should her love for me be an insurmountable difficulty—to a separation—long and continued that my detention as a Lunatic renders necessary for her safety. Then I am prepared to submit to the opinion of Medical Doctors as to both safety and my being allowed to live again with my wife as a best thing for her and me.

“By the way, if your treatment of my case includes that of experiment to make me talk or write excessively, when I might be taking a *little* natural exercise and so assisting nature to remedy the unnatural, indeed of the unnatural Pill regarding by its impatience or time explosive properties the normal *nervosity* of *J. F. P*——. I say if all this is the case—*Goodbye* to memoirs. But my wife's interest is still at stake, Gentlemen, and I still have a *heart*. Her working hours are very trying, especially in her overwrought state, and I am very sensitive of the fact of pressure of business on a wounded heart having been so long at the Mercy of Tiberius myself. Now, *Gentlemen*, what can we do for this little one, B—— B——, of London, Mrs. P—— of Toronto. Thou or You'se and I—I am willing to *do* what I can—I fancy myself. She could be consulted with in her own interests, which are really, as mine, very material ones (the wind being cold and stomachs get empty). *Love* sometimes must wait, when *Pain* lingers. I believe my

father, Mr. T. P——, would like to help her a little—if necessary until I am well—if appealed to by a gentleman of standing as Dr. C—— or Dr. R——. When I am well *I will help her* all I can and increasingly first by absence and a little *money*, and then by more money and by more absence—or within two years of my discharge if still sane would hold myself free to re-marry her or annul a separation which I believe now is desirable on an affidavit of my lunacy and inability to rear citizens of a character suitable to the state in which I live—their own social responsibilities and charges or on her affidavit.

“J. F. P——.”

The life of the “Grate” J. F. P—— in Canada as he vouches:—

1. Passed by Canadian doctor in the St. Lawrence without hesitation.

2. Landed in Quebec and knocked about all night with other cattle in the Immigration Sheds, was struck by many things, especially the very American officialism of the officials, in their don't give a —— style—as to whether you are going to ——, or to ——. Receiving I suppose their salary naturally rather than perfunctorily accordingly.

3. Train journey to W——, great discomforts, insufficient information as to stopping places and duration for purchases and refreshments—sufficient, though, I suppose, for cattle.

4. Arrival at W—— with about three dollars, find rooms expensive, boarding also. Nevertheless get a bed for a week in a Scotch house and sleep in one room with a Fine Scotchman and an Irishman. I was too utterly out of joint and tired to enter into the spirit of their very whisky and metallic fellowship.

5. Rushed round neighborhood next day, got offers to start from O—— and other large people, if I could not

get on anywhere else. Clothes much worn so could not attempt to apply for clerical post of which there seemed more vacant.

6. Started 2nd day. Ploughing for the City new boulevards out of the Prairie, also using Scraper or Slusher dumping out superfluous earth. Indian Half Breed drove team—we got along pretty well, he was, however, very much imbued with the anti-English Prejudice and I could not guide him carefully out of it—only I think at the end he loved me personally and forgave my nationality, as I loved him and could not forgive him his nationality, he not boasting any particular one. However, out of pure love for me and prowess of skill, he succeeded in throwing me over the handles nearly every time we struck clay or a stump—then I had to get up and cut the tree stumps out with an axe. Oh, my! “why did I leave my native land” Poor Robinson did say. Well, I dug, I shovelled up dust in the road for the W— authorities, but I suppose I did it too well and was gently let down at the end of six days (shalt thou labor) no pay until I had gone through all the procedure lasting two or three days of filling up forms and seeing the clerks.

7. I then struck a Philanthropic firm of Tinsmiths and was appointed at seven dollars per week to exert myself as a monkey in climbing scaffolds on new houses with Spirit Lamp, Soldering Irons, spouts and tools, to assist a master journey man. Oh! dear what a small world it is, and how far below it looked. Well, I succeeded so well—in frightening that master journeyman with hairbreadth escapes by clumsiness that he said he had no heart for the business if I stayed with it. So I relinquished and drew at the end of the fifth day some 5 Dollars. Things were rising in the estate of the great J. F. P—.

8. Got a job unloading coal from the cars at a Soap works, piece work, so many cents for so many tons—made \$1.25.

8. Answered and got a job in the N—— Y—— U—— more complications, Boss was insane. Used to come in, look at the clock, wind it up and then go to the front door and bask in the sun till a drinking pal, equally soft brained, came along and drew him off; meantime his books were intrically mixed and he was too far gone to counsel me to a desirable method of clearing up and would not give me carte-blanche to proceed—always “tomorrow” Mr. P—— we will go into that.

10. I was in a false position, not being able to proceed and drawing his money. I said to God—what shall I do, I went out into his sunshine and held further parley with him; went back and told Boss I did not feel sufficiently interested in his concerns and could not stay with him. He was as far as possible I believe was as sorry to lose me as he was to part with the miserable \$5 he gave me for over a week's work, leaving a balance unpaid of \$5.00.

11. The B. Co. offered to send me out to the Prairie digging post holes with an augur; in the meantime I was in a treaty with the G—— W—— Co. for clerkship and in this dilemma—no money—Board paid, however—Train to start in an hour's time with food and lodging sure and work in wet sloughs, unaccustomed; too much a venture. I consulted Dr. Mc—— and he said, Do not go. Do a little of anything and wait better things turning up. Go to the N—— Y—— U—— and ask for further payment on account of salary. This I did, got \$2, and subsequently—clerkship with G—— W—— Co.

12. Just previously, I served 5 days on a Dairy Farm herding cattle on the Prairie, on bread and butter diet with fulsome prayers by mine host at each meal—at the end of an especially long and hard day's work; fencing, herding, milking, bread and butter supper. Nothing else all day and an especially big prayer of thanksgiving. I turned round on my chair and asked the Boss “Had he quite done with God.” Then we parleyed, and I came

out minus pay, and only humanity for my friends instead of inhumanity for my master.

13. The G—— W—— S—— Co. President Eastern Canadian. Fine specimen of gentleman; surrounded by relatives who act as kindly Parasites looking after his interests, of course, naturally, but never for a moment forgetting their own (also naturally) and never being in doubt if his or her own interests happen to clash, as to which were of most importance.

I had charge of a Department. Bad debt hunter, by correspondence. Debtors of many seasons all over the West and N. W. Provinces. I had full power of operation, until any one of the relations' interests were touched upon, and they were also interested, and if I worked very hard, then they got the credit and I escaped maximum malediction. At last I could do nothing right and so simply sat and waited events. Another relative was appointed in my stead. I was deposed and transferred to another department, most irksome, handling their goods. My lady love was landing in Canada, I knew. I expected her at W—— and met many trains; sitting up at night once or twice. "She *came* not." I thought well, Sunshine will help me, so went straight out of my place into it and so got a little health and quietness. Did a day or two's threshing in the country. Applied to H. B. Co. for Ledger clerkship. Too late. Thinking it would be best for me to send more money to my girl and ask her to come to W—— as she had got so far as Toronto. I tried still to get a place in W——. But as delays often prove dangerous, I at last made up my mind to go to her, and so started.

You will observe that my life and interest during my 5 months' stay in W—— were mainly devoted and confined to question of work and getting something together for a rainy day. Of pleasures I had a few. 1. Swimming in the Red river. 2. Exploring W—— and environs. 3. An occasional row on the river. 4. Thinking about my girl. 5. Reading.

Result : about 30 dollars saved, new clothes bought, absolute purity of life, wider knowledge, still greater finesse of application of brain in earning my living among adverse surroundings.

6. I start for T—-. Get free passage on C. N. to P. A. as they want Dock hands there did not care to take this work when I got there, and did not wish to spend money needlessly hanging about, so took service with a Baker and drove his rig for a week and generally assisted him, until I secured a working passage before the mast on the "M—" to S—. Rather ill during voyage. Reached S— Sunday morning. Took train to T—. Here events began at once to happen and have not yet ceased to happen for the good of Mr. and Mrs. P—.

All these things J. P— did at the end of all resources of hope, pride, fear and love.

Sayings of John P—.

St. Paul said at *Mars Hill*.

"Him declare I" "openly to you".

What seek you then "Curiosity".

"Mongers" or "Soul".

"Saviours" Power.

Temporal Power.

Spiritual or both.

I do not object to go in and win.

"Ora Pro Nobis.

Toronto Asylum,

Oct. 4th, 1907.

You appear a gentleman—

My Compliments to you.

Dr. C— Ditto.

Dr. F— Ditto.

Dr. C— Ditto.

Gentilhommes des Plus Grande Maitres de l'inquisition.

Dear Friends all,

I am not allowed to write to you because the Doctors and Local Inquisition Board do not think it will agree with their methods—to allow it. I quite concur in such operations in fact pat 'em on the back—and say “well done my boy” and did he strike you first, or was he pushed or did he but say—good morning to a friend. In that I believe the latter. It were well the young man should not say good morning to a friend. I take your kind advice Doctor and lay low, until the morning when Darkness flees away.

But go and hang yourself all the same your part and lot in the business.

"CURIOSITY the MOTHER OF DEATH.

"Dr. F——.

How are you. I am getting better, thank you. I do not expect much longer to be on my bed here in ward 6. Do you know whether the sun shines outside. Eh! my bonny boys. I do not anticipate that I am at all a fit subject for analysis either dead or alive. Being a mere suicide and therefor to be buried at the Cross Roads. At least this was held a custom necessary and *open* in the middle age. Why are not the warp of men so open to-day. Is it because the Church of God on Earth which is Christ. "Lo I am with you always even to the end." Is it because the Church lacks the power (through persecution) of open persecution or do they with their manufactured Purgatories try to inflict on this poor one—a crucifixion of mental torture worse I suppose than ever could be pardoned by any Church that ever was Pagan or otherwise.

The Church naturally is flesh as well as spirit and flesh is weak and it hankers after its old abominations and whoredoms of inquisition God stamped flat; and nearly destroyed the Church in many lands 3 Centuries ago. *Cowards, dogs, murderers, sorcerers, idolators* of Time, of Place, of Circumstance,—God *I think* is something Grander than his Church who daily sell their birth-right, for, a mess of Pottage."

This letter was written by the patient and handed to physician at rounds, in explanation of certain ideas expressed; patient said that he believed there were a group of men that were trying to harm him, and he always refers to these persons as the "five men." It is probable that he refers to the attendants on the wards.

Patient misinterprets all extraneous sounds that he hears during the night and thinks it is men coming to do him harm; apropos of this he writes the letter which is below:

Please send the letter only to my wife.

Toronto Asylum.

Dear B—

I am at present quite beside myself with fear of violence which very evidently threatens me by (10 to 1) trickery at all hands, on all sides, except for the fact that I very truly recognize my friends. I do not suppose I should long be able to battle without sleep—much nutrition, or warmth—against Lunacy, Melancholia or *There is a gang here paid by Church and science.* some other idiocy. but calmly (fairly so) I await orders of Doctors, Attendants, Aye and even fellow patients without a murmur knowing well that spoon handle or broomsticks may at any time be used against me and for Cause—God knows what, but it seems to me that men are to an extent puppets of this Ordering—Puppets by fear—That is of course with many exceptions—and I naturally am only plucky because I must be.

The following, patient voluntarily contributed as material for his history, handing it to physician (with a little explanation) at rounds this morning:

Dr. F—,

“May I once more talk straight” History of P—’s 1st. Lunacy. You did not owing to sparsity of time, I suppose, examine or cross question me quite fully on admission. The whole truth regarding one’s complex self takes much time in telling—and part truth misleads.

For instance, the Doctor at the gaol who examined me after you had seen me on the 4th day from admission extracted “masturbation” from me. This was fearless truth altho’ I had not done so for a year or so, and at that time I answered Yes. I understood that they who confessed had a hot time at 999—if they got thro’ twas a marvel. Now that I am much more solid in Brain matter—altho’ always excitable from a boy, and most untowardly enthusiastic, generally about nothing, I

think perhaps some little profit to myself, *first*, may accrue relating a few *true* details of my life from 10 years of age.

The main damages to my nervous system in the most sensitive age, *i.e.*, *previous* to the age of *puberty*, was owing to the fact of my father's trying to save his pocket at the expense of the reputation of my Form masters. He alleged to the Board that they by semi gymnastic exercise on curtain rods in the school were responsible for damages to them—They having previously reported me to the Board for the final tumble down of the iron frames, and the Board having claimed compensation (a small sum) from my father. He fought them and the Teachers were fixed up—They doing a term of five or six years while I passed through each of their forms persistently went for me, caned me and knocked me about. I was always laughing when any boy committed a prank and was so simple that altho' none of the other boys smiled when the master looked around. I still went the whole hog and smiled my smile out. The masters wondered "did I smile at them" and started smiling at me and finished by caning me. I was absolutely in terror best part of my first years of school. The second great damage to my nervous system I attribute, and rightly I think (wild and scaring nightmares of the experiences when I was taken to the English Asylum years after prove it.

My father was Relieving Officer for a large country district and was responsible for the certification of lunatics and their transfer to the asylum. I sometimes acted for him when I was 11 or 12 years of age I had sometimes in the dark night to visit alone magistrate's houses in by dark parks, and dogs were my terror, sometimes I found the house all dark & windows unlighted and had to return with the lunacy papers. These experiences came out years after in the Asylum in Dreams and mania Dogs chasing me—and country halls with feasting ser-

vants in jack boots—and the dogs would snuff at my stockings and I would feel my time was come. Then the black shiny noses would dance right off their bodies, freely into the air & reel about like Will O' Wisps.

I do but enter into these childish expressions to show you the relation of all things to all things—also my Texan experiences were present in this Asylum, and the Texan experience was a very rough one. Even the crows in the asylum grounds resembling the Buzzards became my enemies, and threatened me in imagination as they really did when I herded sheep in Texas & laid down to sleep—and types in faces of Attendants or Lunatics became to me links in connection with the face of similar types I had met outside earlier, so that I even called them by other names—*Type* is a strong indication to the “wholeness” of humanity, man & spirit as an organism.

My 3rd. great damage to my nervous system I believe laid in the fact of the paucity of sociality of my progenitors arising in the generations immediately preceding my own to poverty and consequent and abnormal frugality my grandmother's Father & brothers being taken away to the Napoleonic wars & kept prisoners for years. While their families at home starved and were reared in the lap of privation.

Gentlemen, we need not look for First causes when causes are at hand for nearly every effect we see of difference or divergence from the normal nervosity of man. Admitted that personality is but a difference in the degree of lapse from the state of the perfect or ideal of a specie, and you have a prima facie case for the ideal state in a united state of Heaven. But this is mere chortling and Playthings to please me. Wot I ses, Bill, is to be a man, if you can, if you can't why be d—d.

Apart from Theology—apart from Science, apart from friendship, I am a mass of flesh, and you are another. You are healing my flesh well, and I hope in turn your own is treated will and that you have strength of

mind so to shape your present environment animate & inanimate to fit your best interest, especially the ultimate. I rather fancy you have not a good hobby apart from your work to provide your mind sufficient recreation, I should think that although you are not by any means of sporting tendency that skating or toboganing even *should* be moderately indulged in.

Now to continue my *Boyography*—(in detail would require many volumes) but the events in my life leading up to my first Lunacy I will enumerate shortly.

1. My lack of ambition and prospectiveness, my insufficient idea or education as to the ends of school work, etc., and what really I was at school for, and what at work. I was taught to work thro' fear, and the results of unemployment were always presented to my youthful brain with insistent argument.

2. I was placed in an office and had not sufficient character or knowledge to strike away from this—and patiently bore 9 years of arduous & dull routine of solicitor's office, with the awful and fearful public work at Town meetings, assize, etc. increasing with years.

3. I was reared unsociable and developed in like manner my chief boy friend was a Huntchback painter and we built a Canadian Canoe & were fellow hermits on the river for 2 or 3 years, when he died—thro' exposure.

4. I was always very active and if sent an errand, usually ran there and back.

5. I went to Canterbury town, Clerks office, after 25 years at home & in 4 months got dismissed thro' bashfulness, went to London & worked hard as engrossing clerk, at low salary.

6. Went to Texas—Very rough time.

7. Returned to London, more *sweated* Drudgery—sweated by the fellow clerks to a fine point of speed & nervous ability.

8. Masturbation fairly continuous, many ideas—as :o being in some cases naturally hereditary and therefor warrantable, also that it was sleep producer, etc., etc. The Devil is a very specious friend.

9. Opportunity offered in the form of a landlady's niece, who had previously a child & was in promiscuous intercourse with several lodgers I had connection. (Please Doctor value my honesty) You will never discover a moral radium to upset the element of P——'s honesty and new Primers will not be urgently required as they are now in schools scientific.

10. My mother says Fred did you do this, and I said no, I was too weak, and I think so still.

11. More cause of unsettlement.

12. Towns, Situations, men & manners went past me and I them like the change of configuration of a kaleidoscope.

13. Then after a plain application, unparalleled, in history, of 12 months duration—where I taught new clerks duties & sat up till 12 night after night doing so & my work, all figures and difficult. I broke down and thought I was persecuted, I had no intercourse with women, and worked on with the altruistic idea of making myself worthy of my first love. Delusion mounted on delusion and when I took up a knife and went into the Lavatory I know that I was absolute governor of my minutest action.

14. Hospital then Asylum increased much my excitement but they had grassy yards and I ran my excitement out & danced and sang and talked myself into better harmony and the necessary discrete action of the insulated sane.

When I left school my life was given over to unnature, my father being "too mean" (naturally so thro' generations) to apprentice me to a trade, altho' his father did apprentice him. I became a Lawyer's office boy and became as cobwebby and worm eaten in my sensibilities

as some of the old Law Books on his shelves. I sustained a legal life for 9 years and then for the first time experienced dismissal and failure at the hands of the Town Clerk of C——, and my idea of nervously Sticking to my tack from the altruistic motive of first love became a stick in my hands.

“*Scientific versus* Simplicity’s knowledge and treatment of Lunacy. The state rear Lunacy. “Society” let them see to it, and it will decrease.

1. All round—the wide globe, are the evident demonstrations of the attempt of Science to cope with and cure the Lunatic, also other diseased, & even the ambition is evident to resuscitate life where “death” itself is “apparently” evident.

2. Of the Lunatic in the many states & stages of his weakness I would as a Layman and Fool treat first.

3. I am in great weaknesses subject to mania.

4. The cause of weakness in my case is evident.

5. The principles chief of natural life, apart from which is danger in man, are—

1. To be the product of and by his Progenitors in gentleness and purity.

2. To be the natural inheritor and participator from infancy in as wide a portion of the human family (including his own) as possible.

3. To be plainly fed as a child.

4. In some cases to be encouraged to physical exercise, in some cases to be deterred from too much.

5. To be assisted materially as much as possible—with money, charity of heart—whip or kiss.

7. To believe and trust in God—and the monitions of the Churches. Then will Boyhood Blossom into Manhood with a great knowledge of good and evil in contact then will he have larger courage and knowledge in dealing with his subsequent & different environments and regarding things sexual. He will by a wide correspondence have more chance, and if he falls in love early will

have something in his nut to keep him straight. I fell in love with a Myth, a girl I never saw but once or twice and had no opportunity to converse. And when I had to attend "Church" 3 or 4 times of a Sunday she sat in front of me and I always in the "Chapel" thro' nervousness held down my head, only getting up to sing and never by accident even turning my head or raising it. This was 1st. evident at Day School, when the head master, Rev. R—— B—— P—— in his morning touched closely on the morals nobility and manhood and my sensibility was thus assaulted.

Treat a lunatic as a child—Whip and Kiss method.
Bring mother Nature as Nurse.

Asylum, Tuesday morning 5/3/07.

Dearest B——

I am pretty well. You are, I hope, quite well, I trust you have not had lately any of your old attacks of sickness. Remember September and October how bad you were.

There is to me, even of a morning in the close warmth of our ward, a feeling of Spring's arrival. Perhaps tho' it is the lighter mornings, early. I got up to breakfast this morning, and with my tongue made a little bigger space for my increasing sanity and pressure among the lunatics, that is by pure bluff keeping the fools in their place, so that I am not mixed up in their foolery and so reported.

Back to bed directly after breakfast to avoid, as the Supervisor says (a man six feet high) getting him into "trouble" (Irish). Spring rains are "grateful and refreshing." But those tears oh! B—— dry them up. Surely you can see the Sun shining, to be good, is good, to be religious is to be religious. To be good is best of the two. Creeds and Churches Spiritual are but symbolical of the Spirit and its workings, they are the necessary coloring matter and the only means of conveying

to our material minds, the facts of Love, Mercy and the Infinite Tenderness, Sweetness and Forgiveness of the Everlasting Father of His Infinite Majesty. I rest in His arms, my spirit, my body I have commended to the Doctors.

Forgive, Dear one, this "seriosity."

The past "is dead" Praise or blame for Sin or Enduring Victory. I attribute not myself, nor should any one I believe. See that you cry not. If you want to cry, sing and always sing. "In the garden of sleep" and that old Spanish love song, your father used to sing, about the weird love which never culminated on this earth. To revert once more to "what I *have* said." How fine to think the Spirit requires no language, for its own workings, it is only for we poor mortals, that even the language of such gross things (in comparison to the unrevealed) as color and music, this earth and all its creeds and languages are, as I said, necessary only for the comprehension and good of we "poor human folk." One of my old manias.

Now kiss me, if you don't I shall kiss you, that is where I spoil myself, I always run after you, and you know it, proud Miss. This life's a dream. Now last night as in "Hamlet," there was a play within a play. A Dream in the Dreamy Life of your little Weary Willie. Here it is that with your interpretation Daniel.

Persons—*My Father and his clerk.*

A Wife (mine).

Her Sister.

A Dining room Girl not visible.

Interior.

Scene I. *J. F. P.*— confronted by woman, ugly as *sin*, who was understood to be his wife. He much demurring, was informed by her Sister, it was a fact and he also learned for the first time, that his reputed wife was a widow. Her first having drowned himself.

Scene 2. Parish Relief Pay Station. My father's clerk at the entrance, resembling in appearance and dress a young city Jew, tall and with top hat. He was as affectionate in manner as most Jews can be, and said in a tone, as if he could do anything for me, what do you want with your Father. I used subtlety and got by him without telling, I reached my father and there was an atmosphere of genial greyness pervading him and his immediate surroundings, and "sympathy" was evident *and he said* "What do you think of the Dining Room Girl, I said "What dining room girl? and it seemed as if it was a Dining Room Girl attached to his office, and her charms being unknown to me, and she not visible, He (my father) appeared to be picturing her charms mentally and monopolized thereby all the satisfaction. Grand Finale—My father smiling.

I puzzled.

Curtain Drops.

No calls for the actors.

Dear B——

Aint I funny, *I don't think*. You resemble the great Mrs. Siddons. She was a great Queen of Tragedy, as you know, and all men and nearly all women went mad after her. Such were her Charms. You are, I should say, as charming and what wonder that you have, and do enchain my fancy. Do you know that Mrs. S—— was married to a Mr. S—— and that "He was no where and nothing." Poor Mr. S—— and yet as God's our Judge, His, as we all may think, may have been by far the better character. Now Mr. and Mrs. S—— being dead, let us heap more earth on their memories, so that their graves be not desert. This I have done this Spring winter morning just a handful of earthly language on his memory, on hers. "Sic transit gloria mundi" and then? "Henry Irving" "Into thy hands." Such is sublimity as we know it, where this frail mortality catches hold on God. So then Great, Great Father, Thy hand ☉

my shoulder. Thy beard tickling my neck. Thy heaped up kindness of eye. I catch hold of thee, and thou shalt say, Go on, Go on, and I shall say Whither? Father Whither? Into the Night? Into the Storm? and ne will laugh and say Go on, Go on, and I shall stumble and weakly cry, and He will say Go on, then, "when I am gone" others will come, others will go, and He will say Go on, Go on.

My patient wifey, "working and suffering all the ills that flesh is heir to, away from Home, the Far Countree. It is your Fred talking to you, from his clean white bed, this Sunny Tuesday morning, and always hoping and looking forward to our re-union. Remember Bond of Union? you sent me at W——, smoking his pipe. The old John Bull and Wife—your debt to Church Army, I will see about, also your dress and boots, when I get out, as for your home going "we must trust in God" a little for the future and as Dr. C—— told me, I must keep my powder dry, That was the first day He saw me. I wish poor Mrs. C—— would trust a little. She cannot expect to watch every breath that her daughter draws or know every word passing between "Griff" and Celia. But I suppose a mother's jealousy is akin to a Husband's or Wife's and she thinks sometimes Her daughter's love, may alienate her daughter's very affections from her mother and she being the woman's only child, you can well see how she cherishes her, knowing full well how many daughters do turn from their mothers, when there are other arms open to them, also husbands, also wives and Toronto is no exception, nor is it more of an earthly Paradise than London, New York or Paris.

Give my best regards to Mrs. Cant and tell her that God keeps, that he breaks and makes anew. Love, Love, Love to

Yourself,

Fred.

Toronto, Thursday, March 7/1907.

"Asylum," March 7. 1907.

Dearest B—,

I am again with you, never having left you, in fact yet since I first met you. Your presence yesterday prevented me kissing your mother's photo, but I have since made up for it. Fancy your receiving the photos on your Father's Birthday. My Mother's day is the 12th. of this month. The figs is all ate up, and were without doubt fine 'uns. Please do not repeat the joke too often tho' or I shall perhaps *have* to offend you by refusing them, and I should hesitate to hurt you, and perhaps again should accept perforce. Please when you do see Mrs. C— give her my best wishes. I wish she for her own sake had a higher range of Philosophy than respectability for her own peace of mind and that of her daughter. As to any one placing themselves on a pedestal. Being, poor souls, in miserable isolation thereby. I say not. Some are placed on pedestals, Some by reticence place themselves there. Love and matrimony I should say include *all* confidence, and so I still would be on the bottom rung, with companie than at the top in miserie. Knowing that you are well is everything to me.

Listen!

There is sound—Look!!

There is light—Smell!!!

There is scent—Taste!!!!

It is Lent--

A season with reason set apart.

So reason the season.

Then season your reason, with act of particular art.

What rubbish, Now B— suppose you and I were rich, and had no turning to one another in our hearts. Would it be well? I trow not. Now we are poor and there is a turning are we not rich, I know I am. Suppose we

yield each of us to the stern law of the better expediency of life and its twinge, and you go in for wealth, ease and a man, and I go in for wealth, ease and a woman, what do we gain, I, yours or us. Freedom from worry and pain, Yes, Yes, "My masters," and then shall we want, Nothing, only Love.

Give it us, "our Masters."

Fred.

"Digressions."

With respect & gratitude to Dr. F——.

"Bare Facts." Bearing on Pathology of P——.

Dreams 1 week ago of wounded dogs following me, could not shake them off—huge pieces of raw flesh falling from them, could not kill them out of misery. Similar dreams earlier in life. Blood being very evident in dream.

Dream 2. a few days ago, I laid on my back in bed—from head to foot of me was a long figure of a youth seeming to weigh me down. I was sensible to the fact of his eyes being closed and in fact saw all sides of his body at once. I was sleeping for first time in shirt of previous patient. The impression was one of horror at the circumstance and the fact of being weighed down.

My chief and most recurrent dreams in life have been 2.

One of a broad river at night with a regularly and well lighted embankment with stone rails at the side. I always crossed a bridge to the other side and brought up in a kind of old disused and dirty barn, hideous in its darkness and foulness.

A dream of terraces, gardens and inner courts, finishing with a closed and horrible Gothic old tomb sanctuary, which seemed always to repel me.

Details of all my automatic and quaint acts whilst weaking to breakdowns if desired.

Again Digressing, for pastime and from nature.

I do strongly maintain that my father was greatly weakened by over cupping for fever previous to marriage. Thus influencing the health, mental & otherwise, of his children. Also I believe that my brother's health & character were greatly affected by my mother having sustained an arterial severance just previous to his birth. His memory & hearing are becoming affected after a short married life.

I should like if I only work for pleasure to ascend to Poetry and Philosophy. But perforce must descend to Science as far as my limited knowledge goes.

I shall now state towns I have lived in, worked in, giving always satisfaction, played in, sometimes giving satisfaction, sometimes getting.

| | |
|---------------------|---------------------|
| 1 Bedford. | 11 Southampton. |
| 2 Canterbury. | 12 London. |
| 3 London. | 13 Tunbridge Wells. |
| 4 Texas. | 14 Eastbourne. |
| 5 London. | 15 London. |
| 6 Newtown. | 16 Market Harbor. |
| 7 Birmingham. | 17 Birmingham. |
| 8 Manchester. | 18 Redditch. |
| 9 Bishop Stratford. | 19 London. |
| 10 London. | 20 Toronto. |

London repeats as a centre where more vacancies occur daily and chances of work for a hustler more certain.

Birmingham repeats for the same reason.

County towns for the sake of health are well to the front.

My (my love is Truth) first liason with a female sexually, and openness, occurred (that is to say my first intercourse) whilst I was only about 17. This fact may help you Doctor to understand my case absolutely. Undone by the eyes of a woman (fallen) at that age. Nature was strong. Details are not necessary. Sparks are dangerous in a young full blooded community.

Now I always wrote "Balderdash" and I have a hard job to restrain my pencil.

My fellow clerks in the first office I worked in hailed my arrival with delight as an "original conceited mouther of vanities" and under their patronage I succeeded fairly well as an office boy. But, how in the many, many long hours of idleness at the age of 15 in an office by myself did I look at the blue sky outside, play with the parchment chalk, count the flies, and finally continually warmed by tales and talk of other clerks, and occasionally their wine. I fell into a desuetude of desire. and as King David saw the woman washing from his window, sent her husband to the front and got her. So I saw a woman washing herself a .ays in front of the office window, when I was alone, she had a husband I could not send to the front, and in fact I was caged off. But I am sad to relate that I took her with my imagination and unnecessary to tell you how. I do so much digress that really, unless I know whether you would prefer a kind of Dated Names & addresses history I am in a Dilemma—or by relating other facts of my life I could make it read like that of some Hero from "Homer."

Give me your order, please.

999 Queen St. West, Toronto,
April 26. 07.

Dear Father and Mother:—

I am so much improved that the Doctor informs me it will not be long before I am sent back to England.

I understand there is no exception to the rule. I agree with some of your letters to B——. But as there is no chance of my being discharged here, and England in climate especially in the summer being more likely to help me to a permanent cure (the heat at Winnipeg affected me very noticeably) I think it is for the best I am sent back. The Doctor the other day took my photo, he said so that they would have it when I left.

I feel that the voyage will help me much, and as Dr. C—— says I shall not be detained in an English Asylum, I shall once more be in a position as starter, and a little dependent necessarily for a week or two. B—— is coming with me, so far as she has at present decided, and if her passage is arranged as it has been stated, it would be, she travelling here by the same Company "Empress of Britain."

She will, I have no doubt, go straight to her home. If I am taken to London my point of departure. I may also go with her and see her mother, before coming to you. If I am only taken to Liverpool, I should propose, if I am discharged there, Resting a week and looking out for some country occupation say on a Dairy or Poultry Farm. Of course I could not do so unless you were willing to help me by sending me £1 or two.

But all this is very previous, and I only write in this way, in case I am sent off earlier than we expect. My wife will consent to live separate for some time in order to give me a fair chance, and when I am all right, and she desires, we could come together again.

I think distance would better ensure this separation, I accordingly suggest, as a suitable place for me to live, the North Midlands. B—— would probably be at her own home. This is the best thing I can see for the present

In case, however, you don't think these are good plans, I could come right on to B——, and talk the matter over with you. I daresay I shall see something

of Ned and Charl, and could call at Maitland Street on the way. I will let you know when I expect to be sent later, and in the meantime, look forward earnestly to seeing you all again soon, nearly if not quite so well as I left you. May 24th. is coming, Good luck to you. B——'s was the 24th. April, and she had lots of presents.

Love from

Fred.

999 Queen St. West,
Toronto,

April 28. 07.

Dearest B——:—

You did not come up to-day, I suppose you did not have time. You have done your utmost I know to see me often, so I do not miss one day. Mrs. C—— and her daughter came. I don't know what the daughter was wearing, but the mother was immense in blue-violets *ad lib.* in her hat, and she was the same as ever, but there, I have only had the pleasure of seeing her 3 times. She regretted much your going, spoke of many things—at length, gently touching on her own matrimonial trouble and how with a master hand she managed it and her old spouse. Well, she makes many suggestions, as to our future and the methods to be observed, etc., etc.

Dear B——, you know me, better than Mrs. C—— ever will, and we surely can, be kind to one another and forbearing without the monition or the viragoes of our acquaintance. If it is anything for you to know, I will tell you in secret that there is a new feeling in my heart concerning you, apart from love, that is one of dependence on your strength of mind and heart, not so much a physical dependence, as a dependence of initiative in my plans, &c., waiting, as it were, for your opinion.

Three boys formerly of London, and whom I know well, called to see me, and we had quite a jolly chat.

I am getting out more now, I find by speaking up for myself the attendant gives way a little more, and the Doctors have always agreed to exercise twice a day, that is during the past month.

You may bring my bag up if you will, next Wednesday, if it is not too heavy. The rug you had better keep with your own bag, as you will probably ride to station, and we would not want it till we got to ship, do not hesitate to throw anything of mine away you do not think of service, otherwise you will not have room for your other things.

Remember if you want any information or advice concerning my removal Dr. C—— is the best one to ask, no one else except his medical colleagues need be listened to or consulted.

Now, Goodbye, my love, whatever the future has in store for me, remember that I shall never let you take any of the strain of my temporary incompetency on your little shoulders.

Believe me, my dear wife,

Yours in very truth and love,

Fred.

— —

In closing this case, it is only necessary to state briefly that J. F. P. continued to show quite marked improvement in many directions, as his last letter indicates. The conspicuous elation had largely subsided, the psycho-motor restlessness was much less in evidence and the only symptom of note was a feeling of subjective uncertainty which led to the patient being suspicious to a quite marked degree (this would suggest slight allopsychic disorientation) of those about him, particularly the attendants. With this exception patient appears to be almost back to his norm.

From the history we have, it would seem, to do with a patient suffering from the maniac-depressive psychosis, and the prognosis, while good for the present, is only fairly favorable for the future, as the liability of patient's developing another attack must be kept in mind.

Patient having been deported, his subsequent history may not be ascertainable.

BRIEF HISTORICAL NOTES.

The development of the asylum system in Ontario has been a short and rapid march from ignorance, superstition and fear, to knowledge, science and hope. This journey is not yet by any means completed, but it is well begun, and we can safely predict that those of the next generation who are so unfortunate as to be mentally afflicted, will never experience the inhuman treatment that was meted out to the same class in the last generation. Until the year 1840 the only thought given to these poor sufferers was, to provide legal machinery to lock them up when they were thought to be a menace to life or property. As late as 1835, when some who are still alive were fully grown men, an Act was passed by the Legislators of Canada providing that two magistrates could issue a warrant ordering that a lunatic or mad person be locked up in some secure place named by them, and if they deemed it necessary the warrant ordered that he be *chained*. At that time the places in which these mad people were locked, were usually gaols or lock ups, but gaols being situated at great distances from each other, often these people were chained for days and weeks in old stables or in any unoccupied building that was considered strong enough to hold them.

At this time only those were admitted who were considered dangerous to the lives or property of their neighbors. Later on this class was enlarged so as to include those who might do injury to themselves, and still later those who because of their peculiarities might be considered a nuisance when allowed full liberties, but it was only recently that it has been considered necessary to build and equip institutions for the treatment of those who are suffering from mental or nervous disease.

These old fashioned gaols soon become crowded, and in 1841 the first building was opened for the reception of

the mentally afflicted in Upper Canada. This was a building that had, even at that early date, become obsolete as a gaol. The recently abandoned gaol of York which stood on Toronto Street was opened as a temporary asylum. It is distressing to think that a building which had become unfit for the shelter of criminals was made use of for the treatment of the sick and afflicted. This building continued to be used for some years, but in 1844 Dr. Widmer, Mr. Ewart, Mr. J. G. Chewett, Sheriff Jarvis and Dr. King were appointed a committee to superintend the erection of the first asylum of Upper Canada. This is the present Asylum of Toronto, on Queen Street West. It was begun in 1845, and was so far advanced that patients were admitted in 1850.

The demand for accommodation was increasing so rapidly that before the new institution was opened patients were confined in the old gaol on Toronto Street, in the wing of the Parliament Buildings, and also in a house at the foot of Bathurst Street. When the new building was occupied these branches were closed as soon as possible, and in 1853 Dr. Jos. Workman was appointed Superintendent. To him Ontario owes a debt of gratitude. He was really the first to devote time and study to the care and treatment of the insane, and to him we must give credit for much that is good in our present institutions. About this time a new asylum was born in a stable in Kingston. In 1856 this stable was fitted up to receive twenty-four female patients. Only 50 years ago, and a made-over stable was good enough for the treatment of the excited nerves of a delicate woman. Think of it!

In 1862 the present Rockwood Hospital was opened, but it, like its predecessor, was intended for the reception of the criminal insane, and was owned and managed by the Federal Government, as a part of the Kingston Penitentiary. In 1877 the Ontario Government took it over, and it has since been used as a hospital for all classes of insane.

Still the accommodation for the insane of the Province was insufficient, and in 1859 the old Military Barracks at Fort Malden were used. Patients were kept there until about 1870, when the present London Hospital was ready to receive them. And yet the demand grew, and in 1879 the Hamilton Institution was opened, and again in 1890 one at Mimico, and yet again in 1894 the Eastern Hospital of Brockville. Since that time the old Victoria College of Cobourg has been made to accommodate a class of senile women patients, and the old Reformatory of Penetanguishne has also been made a home for senile cases.

All these institutions are for the care and treatment of the insane, but besides these Ontario opened in 1876 the Orillia Asylum for Idiots, and in 1906 the Hospital of Epileptics at Woodstock.

Sixty years ago the public institutions for the care of the mentally afflicted in Ontario were two or three scattered houses in Toronto.

Now we have:—

| | |
|---|-------|
| Toronto Hospital for Insane, accommodating... | 850 |
| Hamilton | 1,100 |
| London | 1,050 |
| Mimico | 650 |
| Rockwood | 625 |
| Eastern Hospital | 675 |
| Cobourg | 150 |
| Penetanguishene | 250 |
| Orillia—Imbeciles | 800 |
| Woodstock—Epileptics | 180 |
| | <hr/> |
| | 6,280 |

Again, instead of bolts and bars, straight jackets, muffs and solitary cells, we now have continuous baths spray baths hot and cold packs, and other modern scientific equipment for the treatment of our patients.

Instead of the old time guards, we now have male and female nurses, who are taught the essential principles of nursing, and who are all able to keep clinical records and charts; who are able to administer the different baths, who give massage, and who are taught that every patient coming to the hospital is sick and requires special care and special attention.

Although some of these old buildings that were built (when to be insane was to be a criminal or an outcast) do not provide facilities for all the late and modern developments of psychiatric therapeutics, still it is a far cry from work of fifty years ago to that of to-day.

To-day we have in Ontario ten institutions, officered by twenty-seven men. Most of these have spent their whole lives in trying to devise new methods for treatment of this particularly difficult class of patient, and also to try and find new ways to brighten and cheer the lives of those who have to live in these places.

Some are young in the work, but others have grown old in it, but all are earnest, all are looking forward to the dawning of a still brighter day, when our institutions will be furnished with all the best modern equipment. Then we will know that the people of this Province realize that the treatment of nervous and mental diseases is of as much importance as the treatment of rheumatism and dyspepsia.

The Medical Officers of the Ontario Institutions are :

TORONTO.

C. K. Clarke, - - - *Superintendent.*
W. K. Ross, - - - *Asst. Superintendent.*
H. Clare, - - - - *Asst.*
J. G. Fitzgerald, - - *Pathologist and Clinical
Director.*

HAMILTON.

Walter M. English, - - *Superintendent.*
 Frank Beemer, - - - *Asst. Superintendent.*
 John Webster, - - - *1st Asst.*
 Wm. T. Wilson, - - *2nd Asst.*

LONDON.

Geo. A. McCallum, - - *Superintendent.*
 H. E. Buchan, - - - *Asst. Superintendent.*
 W. J. Harris, - - - *1st. Asst.*
 Geo. McNeill, - - - *2nd Asst.*

MIMICO.

N. H. Beemer, - - - *Superintendent.*
 James M. Forster, - - *Asst. Superintendent.*
 P. A. McNaughton, - *Asst.*

EASTERN.

T. J. Moher, - - - - *Superintendent.*
 J. C. Mitchell, - - - *Asst. Superintendent.*
 Eric Sutherland, - - - *Asst.*

ROCKWOOD.

Edward Ryan, - - - *Superintendent.*
 W. C. Barber, - - - *Asst. Superintendent.*
 W. C. Herriman, - - *Asst.*

COBOURG.

Charles E. Hickey, - *Superintendent*

PENETANGUISHIENE.

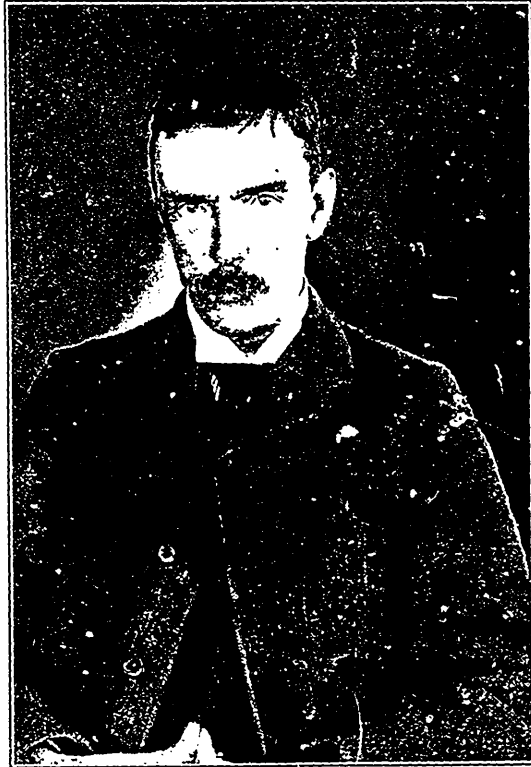
Philip Spohn, - - - *Superintendent.*

CRILLIA.

A. H. Beaton, - - - *Superintendent.*
T. J. Norman, - - - *Asst. Superintendent.*

WOODSTOCK.

J. J. Williams, - - - *Superintendent.*
Geo. Biggs, - - - - *Asst.*



(To illustrate Case of J. F. P.)

