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A

NINETEENTH ANNUAL REPORT

OF THE

WORCESTER INSANE ASYLUM,

AT

WORCESTER,

FOR THE

YEAR ENDING SEPTEMBER 30, 1896.

BOSTON :
WRIGHT & POTTER PRINTING CO., STATE PRINTERS,
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1897.

OFFICERS OF THE ASYLUM.

TRUSTEES.


SARAH E. WHITIN,	WHITINSVILLE.
FRANCES M. LINCOLN,	WORCESTER.
A. GEORGE BULLOCK,	WORCESTER.
THOMAS H. GAGE,	WORCESTER.
HENRY S. NOURSE,	LANCASTER.
ROCKWOOD HOAR,	WORCESTER.
FRANCIS C. LOWELL,	BOSTON.

RESIDENT OFFICERS.

ERNEST V. SCRIBNER, M.D.,	<i>Superintendent.</i>
HARTSTEIN W. PAGE, M.D.,	<i>Assistant Physician.</i>
ABBIE S. FAY,	<i>Matron.</i>

NON-RESIDENT OFFICERS.

ALBERT WOOD,	<i>Treasurer.</i>
GEORGE L. CLARK,	<i>Auditor.</i>
MARIAN D. CUDWORTH,	<i>Clerk.</i>
FREDERICK H. BAKER, M.D.,	<i>Pathologist.</i>
WILLIAM SHERMAN,	<i>Engineer.</i>



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Commonwealth of Massachusetts.

TRUSTEES' REPORT.

To His Honor the Lieutenant Governor, Acting Governor, and the Honorable Council.

The trustees of the Worcester Lunatic Hospital, having the care of the Worcester Insane Asylum, present the nineteenth annual report of the institution, together with statistical tables prepared by the superintendent.

The additions that were commenced last year in the northern part of the building on the women's side are nearly completed and portions are already occupied. By the changes made in the past two years the character of the old building, which was dark and cheerless, has been entirely altered, and is now as bright and attractive as a modern hospital. Thus to increase the capacity of a long-established institution is a practical way of providing for the insane, at a comparatively small cost per bed per patient, as our experience proves.

The personnel of the staff continues the same as last year. Dr. Scribner and his assistants have evinced the same interest in and assiduous care of the inmates as heretofore. In their earnest endeavor to treat all as though cure were possible, they have been rewarded, notably, in the case of a patient who had been a sufferer for fifteen years, and has been discharged. Such results are encouraging, and we trust that the cure is permanent.

The management of the house has been most satisfactory; neatness, order and cleanliness prevail, and the conditions are conducive to health and comfort.

SARAH E. WHITIN.
FRANCES M. LINCOLN.
A. GEORGE BULLOCK.
THOMAS H. GAGE.
HENRY S. NOURSE.
ROCKWOOD HOAR.
FRANCIS C. LOWELL.

OFFICERS AND THEIR SALARIES.

ERNEST V. SCRIBNER, M.D., <i>Superintendent</i> ,	\$2,500 00
HARTSTEIN W. PAGE, M.D., <i>Assistant Physician</i> ,	1,300 00
FREDERICK H. BAKER, M.D., <i>Pathologist</i> ,	100 00
ABBIE S. FAY, <i>Matron</i> ,	400 00
ALBERT WOOD, <i>Treasurer</i> ,	400 00
GEORGE L. CLARK, <i>Auditor</i> ,	50 00
MARIAN D. CUDWORTH, <i>Clerk</i> ,	600 00
WILLIAM SHERMAN, <i>Engineer</i> ,	1,000 00

VALUE OF STOCK AND SUPPLIES.

OCT. 1, 1896.

Live stock,	\$375 00
Produce of the garden on hand,	1,067 74
Carriages and agricultural implements,	500 00
Machinery and mechanical fixtures,	9,000 00
Beds and bedding in inmates' department,	9,000 00
Other furniture in inmates' department,	3,500 00
Personal property of State in superintendent's department,	9,500 00
Ready-made clothing	2,154 64
Dry goods,	623 00
Provisions and groceries,	2,279 59
Drugs and medicines,	425 00
Fuel	3,500 00
Library	550 00
Other supplies undistributed,	1,146 25
	\$43,621 22

TREASURER'S REPORT.

To the Trustees of the Worcester Lunatic Hospital, acting for the Worcester Insane Asylum.

I herewith submit my nineteenth annual report on the finances of the Worcester Insane Asylum for the year ending Sept. 30, 1896.

RECEIPTS.

Cash on hand Sept. 30, 1895 :—		
Cash belonging to the asylum,	\$10,475 07	
Deposits of inmates,	1,187 39	
	_____	\$11,662 46
Amounts received :—		
From the Commonwealth for support of patients,	\$20,003 49	
From cities and towns for support of patients,	54,476 06	
From other sources,	684 19	
From inmates	51 43	
	_____	75,215 17
		\$86,877 63

The expenditures for the year have been as follows :—

Salaries and wages,	\$23,124 14	
Provisions and supplies :—		
Meat of all kinds,	\$3,018 59	
Fish of all kinds,	656 79	
Fruit and vegetables,	1,799 00	
Flour,	1,981 35	
Meal for table,	31 10	
Hay and grain,	421 81	
Tea and coffee,	486 27	
Sugar and molasses,	1,046 92	
Milk, butter and cheese,	7,120 84	
Salt and other groceries,	386 90	
All other provisions,	1,954 01	
	_____	18,903 58
Clothing and material,	\$3,167 05	
Fuel,	4,226 41	
Lights,	823 17	
	_____	\$42,027 72
<i>Amounts carried forward,</i>	\$8,216 63	\$42,027 72

<i>Amounts brought forward,</i>	\$8,216 63	\$42,027 72
Medicine and medical supplies,	375 23	
Furniture and furnishings,	4,069 76	
Crockery,	62 24	
Beds and bedding,	902 83	
Transportation,	273 82	
Travelling,	104 11	
Trustees' expenses,	25 03	
Soap,	297 88	
Water,	393 45	
Stationery,	109 12	
Undertaking,	187 00	
Repairs (ordinary),	8,887 42	
All other current expenses,	2,522 80	
	<hr/>	26,427 32
Total current expenses,		\$68,455 04
Repairs and improvements (extraordinary),	\$10,000 00	
Refunded inmates (on deposits),	64 26	
	<hr/>	10,064 26
Total amount expended,		\$78,519 30
Cash on hand Sept. 30, 1896,		8,358 33
		<hr/>
		\$86,877 63
RESOURCES.		
Cash on hand,	\$8,358 33	
Due from Commonwealth for support,	4,725 32	
from cities and towns,	13,062 33	
from other sources,	32 40	
	<hr/>	\$26,178 38
LIABILITIES.		
Due for supplies and expenses,	\$2,943 00	
for salaries and wages,	1,937 67	
inmates (cash on deposit),	1,174 56	
	<hr/>	6,055 23
Total surplus,		\$20,123 15

Respectfully submitted,

ALBERT WOOD,

Treasurer.

WORCESTER, MASS., Oct. 1, 1896.

WORCESTER, MASS., Oct. 24, 1896.

The undersigned has this day carefully compared the treasurer's statement of expenditures for the year ending Sept. 30, 1896, with the vouchers which are on file at the Worcester Insane Asylum, and finds it to be correct. He has also compared the amount of bills rendered for the board of patients with the estimated earnings of the institution for one year, and finds them to agree.

GEO. L. CLARK,

Auditor of Accounts.

SUPERINTENDENT'S REPORT.

To the Trustees of the Worcester Lunatic Hospital, acting for the Worcester Insane Asylum.

I respectfully submit to your board the nineteenth annual report of the superintendent of this institution.

Oct. 1, 1895, 447 persons were inmates of this asylum, — 225 men and 222 women. There have been admitted since 20 women, making a grand total of 467 cases under treatment, — 225 men and 242 women. There have been discharged 1 woman recovered, 2 men and 2 women improved and 2 women not improved. Death has removed 16 men and 19 women, making a combined total of deaths and discharges of 42 persons, — 18 men and 24 women. Sept. 30, 1896, there remained 425 patients, — 207 men and 218 women. Of those admitted, the whole number, 20 women, came from Westborough. Of those discharged, 1 man was removed by an officer of the city of Boston, 1 man escaped and was never returned, 1 woman was sent out of the State by the Board of Lunacy and Charity, 1 woman went on a visit and was not returned, 2 women were transferred to the Medfield Asylum and 1 woman recovered.

The small number of patients admitted during the year renders it difficult to draw any specially valuable deductions from this source. Some estimate as to the prospect for final recovery in these cases can be made when we learn that the average duration of insanity, before admission here, was nearly eight and one-half years. Epilepsy and heredity lead in the assigned causes of disease, a finding, perhaps, not so surprising in cases of such long standing, when we remember that these patients are the accumulation of other institutions, and a selected accumulation at that. Of this number, considerably over 50 per cent. were hopelessly demented and 25 per cent.

were epileptic. Three or four were inclined to be somewhat helpful, and an equal number were quite as inclined towards destructiveness. The average age was that of middle life, and there was less than the usual proportion of extremely feeble cases.

One woman recovered, and was discharged to the care of her friends. This was a case of mania, with occasional outbursts of excitement. She had been insane for about fifteen years. Five years ago she was discharged to the care of her brother, as much improved. It was thought then that she might continue to improve in her new surroundings, and eventually complete her recovery without a return to a hospital. It proved, however, that she had not regained sufficient mental stability to endure the strain of personal responsibility, and she was very soon returned to an institution, a little later being again transferred here. After a more or less eventful experience she again improved to such an extent that she was once more discharged to the care of her brother, this time as recovered. She has now remained well for some months, and possibly may continue so, though the probability of relapse in recoveries from mental disease of long standing is greater than in acute cases. Recovery from mental disease may be complete, so far as any evident manifestation is concerned, and yet the predisposition remain, and be even strengthened, rendering a relapse perhaps probable, and from slighter provoking causes than in the case of the first attack. Bearing this fact in mind, it has been claimed that a continued high rate of recovery among the insane would eventually exert an unfavorable influence upon the increase of insanity, by returning to the ordinary walks of life persons whose impress upon posterity would lead to the perpetuation of an unstable mentality.

Some special investigation has been undertaken during the past year, looking to establish the value of certain remedial measures in their influence upon the course of chronic mental disease. The somewhat striking success which has followed the administration of the thyroid extract in certain forms of acute insanity has led to the hope that something might also be accomplished by its use in the chronic stage of disease. A thorough trial of this remedy has given, in my hands, nothing

but negative results, a finding not wholly unexpected. Much more of promise has seemed to attend a more careful regulation of the diet, and an attempt to correct faulty digestive processes, — a fact which shows the importance of always providing good, wholesome and nutritious food for the insane. The slight success which too often follows treatment in the chronic class should prove rather an incentive to renewed investigation than a discouragement to further effort. The large and constantly increasing numbers of these most unfortunate people demand that every measure shall be taken which gives any hope of relief. The establishment here of a laboratory furnishing increased facilities for the study of disease and for the scientific investigation of the medical problems of the institution would greatly further the work of the hospital, and increase its efficiency for the relief of its patients. Though the study of disease in its chronic forms is not usually as attractive as in its acute manifestations, I believe that the results of investigation are more than sufficient to reward the effort. The division of mental disease into acute and chronic forms is, to a certain extent, artificial, as many acute cases are practically incurable when admitted, while, on the other hand, many cases of long standing are susceptible of improvement, or even recovery, as the experience of this institution shows.

The policy has been continued of granting as great personal liberty to patients as seemed consistent with the proper management of the institution. This freedom has been very generally appreciated by our people and abused by but few, as is evidenced by the fact that only one successful escape occurred during the year. Notwithstanding the fact that the more helpful patients are seldom transferred here, much valuable work has been accomplished, nearly two-thirds of our number having been profitably employed during the greater portion of the time. Pecuniary result has not been the sole measure of effort, and many persons have been encouraged to work solely for the benefit which would accrue to the individual, sometimes at a direct money loss to the institution. Recognizing, also, the fact that out-of-door exercise is an essential requisite for the proper maintenance of health, constant effort has been made to keep our patients as much as possible in the open air.

Ratio of Deaths from the Opening of the Asylum to Oct. 1, 1896.

OFFICIAL YEAR.	Whole Number of Patients.	Daily Average Number of Patients.	DEATHS.			Per Cent. on Whole Number of Patients treated.	Per Cent. on Daily Average Number of Patients.
			Males.	Females.	Totals.		
1877-78,	429	382.98	18	8	26	6.05	6.78
1878-79,	422	367.41	22	11	33	7.82	8.98
1879-80,	413	363.15	15	8	23	5.56	6.33
1880-81,	401	363.09	18	6	24	5.98	6.62
1881-82,	439	375.59	21	11	32	7.28	8.51
1882-83,	461	384.33	37	24	61	13.23	15.84
1883-84,	438	390.69	22	20	42	9.58	10.75
1884-85,	448	391.12	20	14	34	7.58	8.69
1885-86,	476	400.28	23	15	38	7.98	9.49
1886-87,	444	393.52	21	17	38	8.55	9.65
1887-88,	451	393.95	23	14	37	8.20	9.39
1888-89,	431	385.56	27	11	38	8.81	9.85
1889-90,	428	330.23	27	4	31	7.24	9.38
1890-91,	464	394.66	22	12	34	7.32	8.61
1891-92,	499	427.82	22	15	37	7.41	8.64
1892-93,	519	446.94	38	20	58	11.17	12.97
1893-94,	515	442.23	22	21	43	8.35	9.72
1894-95,	504	460.68	22	24	46	9.13	9.99
1895-96,	467	427.36	16	19	35	7.49	8.19

The death rate, reckoned upon the daily average number of patients, is lower than it has been before at any time for fourteen years. I ascribe this to three causes: a less number of feeble cases than usual having been received during the year; the fact that the weaker ones of our old cases had earlier succumbed to the ravages of disease; and, finally, the constantly improving sanitary condition of the institution. There has been very little acute disease in the house. The chief cause of death has, as usual, been phthisis. There has been a remarkable freedom from those annoying cases of severe tonsillitis which were formerly so prevalent among the help, a fact doubtless due in great measure to the admission of more air and sunshine to the wards.

The new building, which was in process of construction at the time of my last annual report, is nearly completed, and for some time has afforded sleeping accommodations for patients. The water section alone remains unfinished. This building not only increases the capacity of the institution, but also furnishes

water-closet and bathing facilities for three of the old wards. The construction is of the most substantial kind. The entire water section and the stairway are fireproof; the remainder of the building is slow-burning construction. Provision is made for the rain bath on every floor, a room of moderate size being set apart for this purpose in each ward. This arrangement is adopted in preference to one large room for all, as being far more convenient and securing greater privacy and personal attention for patients. I doubt the expediency of bathing large numbers of the insane at the same time in the same room.

The opening of this new building has afforded almost complete relief from the crowding which has existed here for so many years. The numbers in the female department are now nearly at the normal capacity and in the male department a few vacant rooms exist. The very favorable showing as to per capita cost in the erection of this building would seem to indicate that the enlargement of already existing institutions furnishes, to a certain limited extent, an economical and efficient way of providing for a future increase of the insane. When, however, numbers greatly in excess of one thousand are grouped under one administrative head, the wisdom of a still further enlargement of that particular institution seems to me problematical.

It is greatly to be regretted that we have not as yet been able to equip the asylum with electricity for lighting purposes. Our revenues have not been sufficient to complete the work already in hand and to undertake so expensive an operation as the installation of an electric plant. The experience of other institutions leads me to believe that the change from gas to electricity would be productive of most desirable results, both in a sanitary and a financial way, and would give a lighting agent far safer and easier to control. Our new building has already been equipped with iron-armored conduit for the passage of electrical wires. The engine which furnishes power for the laundry and for the general purposes of the hospital has been long in service, and is of an antiquated type. While, under our present conditions, it is fairly efficient in operation, it is wasteful of steam, and, with the introduction of the electric light, would probably not respond in a satisfactory manner to the added burden of a dynamo. This engine should be replaced with a modern

machine at such early date as the finances of the institution will warrant.

The work of enlarging the windows in the older wards has been continued slowly, and much general work of repair has been accomplished. Several changes have been made in the wash room of the laundry building, which have added greatly to the efficiency of the service. The last of the old wooden washers has been discarded, and replaced with a modern metallic machine. That portion of the plumbing which was beneath the floor has been removed, heavy iron being substituted for the old cement pipe, which has been in place for many years. Some necessary furnishings have been added to the public reception room and the business offices.

Earnest and faithful work has been done by the officers of the institution, and the employees, with few exceptions, have shown an attention to duty which has been commendable.

The usual services and amusements have been held in the chapel. Our winter entertainments have been eagerly looked forward to by the patients, and largely attended.

I desire to thank your Board for the cordial support which has been at all times given to me.

E. V. SCRIBNER,
Superintendent.

REVISED TABLES

FOR

UNIFORM STATISTICS

IN THE

MASSACHUSETTS HOSPITALS AND ASYLUMS
FOR THE INSANE.

APPROVED BY THE STATE BOARD OF LUNACY AND CHARITY,
MARCH 10, 1891.

I. — General Statistics of the Year.

	INSANE.			HABITUAL DRUNKARDS.			VOLUNTARY PATIENTS.			AGGREGATES.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
	Patients in asylum Oct. 1, 1895,	225	222	447	—	—	—	—	—	—	225	222
Admitted within the year,	—	20	20	—	—	—	—	—	—	—	20	20
Whole number of cases within the year,	225	242	467	—	—	—	—	—	—	225	242	467
Discharged within the year,	18	24	42	—	—	—	—	—	—	18	24	42
Viz.: as recovered,*	—	1	1	—	—	—	—	—	—	—	1	1
as much improved,*	—	2	2	—	—	—	—	—	—	—	2	2
as not improved,*	—	2	2	—	—	—	—	—	—	—	2	2
as not insane,	—	—	—	—	—	—	—	—	—	—	—	—
Deaths,	16	19	35	—	—	—	—	—	—	16	19	35
Patients remaining Sept. 30, 1896,	207	218†	425†	—	—	—	—	—	—	207	218†	425†
Viz.: supported as State patients,	58	56	114	—	—	—	—	—	—	58	56	114
as town patients,	149	162†	311†	—	—	—	—	—	—	149	162†	311†
as private patients,	—	—	—	—	—	—	—	—	—	—	—	—
Number of different persons within the year,	225	242	467	—	—	—	—	—	—	225	242	467
Persons admitted,	—	20	20	—	—	—	—	—	—	—	20	20
Persons recovered,	—	1	1	—	—	—	—	—	—	—	1	1
Daily average number of patients,	214.93	212.43	427.36	—	—	—	—	—	—	214.93	212.43	427.36
Viz.: State patients,	60.18	53.75	113.93	—	—	—	—	—	—	60.18	53.75	113.93
town patients,	154.75	158.68	313.43	—	—	—	—	—	—	154.75	158.68	313.43

* At the time of leaving asylum.

† Includes one on visit.

2. — Monthly Admissions, Discharges and Averages.

MONTHS.	ADMISSIONS.			DISCHARGES.			DEATHS.			DAILY AVERAGE OF PATIENTS IN THE HOUSE.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
1895.												
October,	-	-	-	2	2	2	2	2	2	225.00	220.23	445.23
November,	-	-	-	1	1	1	-	-	-	223.53	219.50	443.03
December,	-	-	-	2	2	4	2	2	4	222.00	219.16	441.16
1896.												
January,	-	-	-	3	3	3	2	2	2	220.42	218.00	438.42
February,	-	-	-	3	2	5	3	2	5	217.96	217.38	435.34
March,	-	-	-	3	3	6	3	3	6	214.23	214.32	428.55
April,	-	-	-	2	2	4	2	1	3	210.93	211.37	422.30
May,	-	-	-	1	4	5	1	3	4	210.49	208.03	418.52
June,	-	-	-	-	3	3	-	3	3	210.00	204.50	414.50
July,	-	-	-	2	2	4	2	1	3	208.81	203.42	412.23
August,	-	-	-	1	1	1	-	1	1	208.00	201.42	409.42
September,	-	20	20	1	3	4	1	1	2	207.77	211.83	419.60
Total of cases,	-	20	20	18	24	42	16	19	35	-	-	-
Total of persons,	-	20	20	18	24	42	16	19	35	-	-	-
Daily average,	-	-	-	-	-	-	-	-	-	214.93	212.43	427.36

3. — *Received on First and Subsequent Admissions.*

NUMBER OF THE ADMISSION.	CASES ADMITTED.			TIMES PREVIOUSLY RECOVERED.		
	Males.	Females.	Totals.	Males.	Females.	Totals.
First,	-	20	20	-	-	-
Total of cases,	-	20	20	-	-	-
Total of persons,	-	20	20	-	-	-

4. — *Relations to Hospitals of Persons admitted.*

HOSPITAL RELATIONS.	Males.	Females.	Totals.
Never before in any hospital for insane,	-	-	-
Former inmates of this asylum only,	-	-	-
Former inmates of other hospitals only,	-	20	20
Total of persons,	-	20	20

5. — *Parentage of Persons admitted.*

PLACES OF NATIVITY.	MALES.		FEMALES.		TOTALS.	
	Father.	Mother.	Father.	Mother.	Father.	Mother.
Unknown,	-	-	20	20	20	20
Total,	-	-	20	20	20	20

6. — Residence of Persons admitted.

PLACES.	Males.	Females.	Total.
Massachusetts :—			
Suffolk County,	-	12	12
Middlesex County,	-	3	3
Essex County,	-	3	3
Norfolk County,	-	1	1
Bristol County,	-	1	1
Totals,	-	20	20
Viz.: cities and towns,*	-	17	17
country districts,	-	3	3

* Containing not less than 10,000 inhabitants.

7. — Civil Condition of Persons admitted.

NUMBER OF THE AD- MISSION.	UNMARRIED.			MARRIED.			WIDOWED.			UNKNOWN.			TOTALS.		
	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.	Ma.	Fe.	Tot.
First,	-	9	9	-	9	9	-	2	2	-	-	-	-	20	20
Totals,	-	9	9	-	9	9	-	2	2	-	-	-	-	20	20

8. — Occupation of Persons admitted.

FEMALES.

Housewives,	9	No occupation,	7
Domestics,	3-	Total,	20
Dressmaker,	1		

WIFE OR DAUGHTER OF

Unknown,	20
Total,	20

II. — *Ages of Insane at First Attack, Admission and Death.*

AGES.	PERSONS FIRST ADMITTED TO ANY HOSPITAL.						PERSONS DIED.					
	AT FIRST ATTACK.			WHEN ADMITTED.			AT FIRST ATTACK.			AT TIME OF DEATH.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
Congenital,	-	-	-	-	-	-	-	-	-	-	-	-
15 years and less,	-	-	-	-	-	-	-	-	-	-	-	-
From 15 to 20 years,	-	-	-	-	-	-	-	-	-	-	-	-
20 to 25 years,	-	-	-	-	-	-	-	-	-	-	-	-
25 to 30 years,	-	-	-	-	-	-	-	-	-	-	-	-
30 to 35 years,	-	-	-	-	-	-	-	-	-	-	-	-
35 to 40 years,	-	-	-	-	-	-	-	-	-	-	-	-
40 to 50 years,	-	-	-	-	-	-	-	-	-	-	-	-
50 to 60 years,	-	-	-	-	-	-	-	-	-	-	-	-
60 to 70 years,	-	-	-	-	-	-	-	-	-	-	-	-
70 to 80 years,	-	-	-	-	-	-	-	-	-	-	-	-
Over 80 years,	-	-	-	-	-	-	-	-	-	-	-	-
Unknown,	-	-	-	-	-	-	-	-	-	-	-	-
Not insane,	-	-	-	-	-	-	-	-	-	-	-	-
Total of persons,	-	-	-	-	-	-	16	19	35	16	19	35
Mean ages,	-	-	-	-	-	-	26.07	29.67	27.93	45.37	44.47	44.89

12. — *Reported Duration of Disease before Last Admission.*

PREVIOUS DURATION.	FIRST ADMISSION TO ANY HOSPITAL.			ALL OTHER ADMISSIONS.			TOTALS.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
Congenital, . . .	-	-	-	-	1	1	-	1	1
Under one month, . . .	-	-	-	-	-	-	-	-	-
From 1 to 3 months, . . .	-	-	-	-	-	-	-	-	-
3 to 6 months, . . .	-	-	-	-	-	-	-	-	-
6 to 12 months, . . .	-	-	-	-	-	-	-	-	-
1 to 2 years, . . .	-	-	-	-	-	-	-	-	-
2 to 5 years, . . .	-	-	-	-	3	3	-	3	3
5 to 10 years, . . .	-	-	-	-	6	6	-	6	6
10 to 20 years, . . .	-	-	-	-	7	7	-	7	7
Over 20 years, . . .	-	-	-	-	-	-	-	-	-
Unknown, . . .	-	-	-	-	3	3	-	3	3
Not insane, . . .	-	-	-	-	-	-	-	-	-
Total of cases, . . .	-	-	-	-	20	20	-	20	20
Total of persons, . . .	-	-	-	-	20	20	-	20	20
Average in years, . . .	-	-	-	-	8.47	8.47	-	8.47	8.47

13. — *Form of Mental Disease in Cases admitted or discharged, with Condition on Discharge.*

FORM OF DISEASE.	CASES ADMITTED.			CASES DISCHARGED.																							
	Males.	Females.	Totals.	RECOVERED.			MUCH IMPROVED.			IMPROVED.			NOT IMPROVED.			NOT INSANE.			DIED.			AGGREGATES.					
				Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.			
A. — Insane: —																											
Dementia, chronic,	1	11	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	16	26
epileptic,	—	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	3
paralytic,	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
General paralysis,	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	4
Mania, chronic,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Melancholia, chronic,	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Paranoia,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Congenital mental de-	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
ficiency,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Habitual drunkards,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Voluntary patients,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Not insane,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total of cases,	—	20	20	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16	19	35
Total of persons,	—	20	20	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16	19	35

14. — Discharges, classified by Admission and Result.

NUMBER OF THE ADMISSION.	RECOVERED.			MUCH IMPROVED.			IMPROVED.			NOT IMPROVED.			NOT INSANE.			DIED.			TOTALS.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
First,	—	—	—	—	—	—	2	2	4	—	2	2	—	—	—	16	17	33	18	21	39
Second,	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	—	3	3
Total of cases,	—	1	1	—	—	—	2	2	4	—	2	2	—	—	—	16	19	35	18	24	42
Total of persons,	—	1	1	—	—	—	2	2	4	—	2	2	—	—	—	16	19	35	18	24	42

16.—Recoveries, classified by Duration of Disease and of Treatment.

PERIOD.	LAST ATTACK.						ALL ATTACKS.								
	DURATION BEFORE ADMISSION.			HOSPITAL RESIDENCE.			WHOLE DURATION FROM THE ATTACK.			WHOLE KNOWN PERIOD OF MENTAL DISEASE.			WHOLE KNOWN PERIOD OF HOSPITAL RESIDENCE.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
A.—Insane:—															
Congenital,															
Under 1 month,															
From 1 to 3 months,															
3 to 6 months,															
6 to 12 months,															
1 to 2 years,															
2 to 5 years,															
5 to 10 years,															
10 to 20 years,															
Over 20 years,															
Unknown,		1	1											1	1
Totals,	—	1	1	—	1	1	—	1	1	—	1	1	—	1	1
Average of known cases,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
B.—Habitual drunkards,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
C.—Voluntary patients,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

17. — Deaths, classified by Duration of Disease and Treatment.

PERIOD.	LAST ATTACK.						ALL ATTACKS.								
	DURATION BEFORE ADMISSION.			HOSPITAL RESIDENCE.			WHOLE DURATION FROM THE ATTACK.			WHOLE KNOWN PERIOD OF MENTAL DISEASE.			WHOLE KNOWN PERIOD OF HOSPITAL RESIDENCE.		
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
A. — Insane : —															
Congenital,	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—
Under 1 month,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
From 1 to 3 months,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
From 3 to 6 months,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6 to 12 months,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1 to 2 years,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2 to 5 years,	2	2	4	3	4	7	1	—	1	4	1	5	4	5	9
5 to 10 years,	2	5	7	1	5	6	1	3	4	1	6	7	2	6	8
10 to 20 years,	2	3	5	5	4	9	3	4	7	5	6	11	7	4	11
Over 20 years,	2	—	2	3	3	6	5	3	8	6	5	11	3	4	7
Unknown,	8	8	16	4	3	7	6	8	14	—	—	—	—	—	—
Totals,	16	19	35	16	19	35	16	19	35	16	19	35	16	19	35
B. — Average of known cases (in years),	15.89	8.53	11.81	12.67	11.54	12.02	23.92	14.47	19.20	19.84	15.04	17.24	11.91	11.69	11.82
C. — Habitual drunkards,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Voluntary patients,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

18. — Annual Admissions since the Opening of the Asylum, with the Discharges and Deaths within the Official Year, and the Number of Each Year's Admissions remaining Sept. 30, 1896.

YEARS ENDING SEPT. 30.	NEW CASES (FIRST ADMISSIONS TO THIS ASYLUM).												
	ADMITTED.			DISCHARGED AND DIED IN 1895-96.						DIED.			
	Males.	Females.	Totals.	Males.	Females.	Totals.	Much Improved.	Improved.	Not Improved.	Not Insane.	Males.	Females.	Totals.
Previous years,	496	424	920	—	—	—	—	—	—	—	—	—	—
1888,	46	13	59	—	—	—	—	—	—	—	—	—	—
1889,	31	4	35	—	—	—	—	—	—	—	—	—	—
1890,	32	13	45	—	—	—	—	—	—	—	—	—	—
1891,	40	95	135	—	—	—	—	—	—	—	—	—	—
1892,	53	28	81	—	—	—	—	—	—	—	—	—	—
1893,	39	30	69	—	—	—	—	—	—	—	—	—	—
1894,	30	29	59	—	—	—	—	—	—	—	—	—	—
1895,	19	20	39	—	—	—	—	—	—	—	—	—	—
1896,	—	20	20	—	—	—	—	—	—	—	—	—	—
Totals,	786	676	1,462	—	—	—	2	2	4	—	—	—	—
										16	17	33	

18. — *Annual Admissions, etc. — Concluded.*

YEARS ENDING SEPT. 30.	READMITTED CASES (READMISSIONS TO THIS ASYLUM).												REMAINING OF EACH YEAR'S ADMISSIONS SEPT. 30, 1896.						
	ADMITTED.			DISCHARGED AND DIED IN 1895-96.						DIED.			Males.	Females.	Totals.				
	Males.	Females.	Totals.	RECOVERED.		MUCH IMPROVED.		IMPROVED.		NOT IMPROVED.		Males.				Females.	Totals.		
Previous years,	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	73	63	136
1888,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11	4	15
1889,	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	13	—	13
1890,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12	—	12
1891,	2	28	30	—	—	—	—	—	—	—	—	—	—	—	—	—	20	64	84
1892,	4	3	7	—	—	—	—	—	—	—	—	—	—	—	—	—	25	11	36
1893,	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	22	22	44
1894,	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	18	19	37
1895,	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	13	13*	26*
1896,	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	20	20
Totals,	9	36	45	1	1	2	1	1	1	1	1	1	1	1	1	1	207	218*	425*

* Includes one on visit.

