

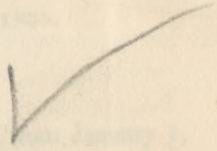
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REPORT
ANNUAL REPORT

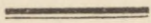
TO THE

BOARD OF TRUSTEES

OF THE



MASSACHUSETTS GENERAL HOSPITAL.



THE Committee of the Trustees of the Massachusetts General Hospital, who were appointed for that purpose, respectfully submit the annexed Reports, shewing the condition of the General Hospital in McLean Street, Boston, for the year 1835, and that of the McLean Asylum for the Insane, in Charlestown, since May last, when the present Superintendent of that Institution entered on the duties of his Office.

By order of the Committee,

F. C. GRAY, *Chairman.*

January 27, 1836.

Dup.

REPORT

OF THE

SUPERINTENDENT OF THE GENERAL HOSPITAL IN McLEAN STREET, BOSTON, FOR THE YEAR 1835.

Admitted at the Massachusetts General Hospital, from January 1, 1835 to January 1, 1836.

	Males.	Females.	Total.
Patients paying board	160	34	194
Do. do. do. part of the time	20	10	30
Do. entirely free	144	137	281
Whole number	324	181	505

Discharged during the same period.

	Males.	Females.	Total.
Well	132	61	193
Much relieved	48	48	96
Relieved	46	33	79
Not relieved	41	26	67
Died	34	10	44
Removed as unfit	2	3	5
Do. for improper conduct	3		3
Eloped	5		5
Whole number	311	181	492

Proportion of Deaths to whole number of results this year,—1 to $11\frac{1}{5}$, nearly.

Do. from commencement of operations in 1821 to the commencement of this year—1 to 14, nearly.

	Private.	Ward paying.	Free.	In the whole house.
Greatest number of patients at any visit	4	27	46	64
Least do. do. do. do.	1	7	21	35
Average weekly population	2.5	14.6	33.2	50.3

The number of beds being 67, the last table shews that the house has been sometimes nearly full, in both departments, at the same time, and on the average has been three quarters filled. The average population has been about 10 per cent. greater than during the six or seven former years. But the number received being not much over what has been usual, the difference in this particular would seem to arise from the patients remaining longer—which the tables shew must be principally the case with the free patients; since the proportion of admissions of free to paying patients is, in round numbers, nearly as 3 to 2, while the share of the former in the average population, is to the latter nearly as 2 to 1.

The annual expenses for 1835 were,

For Stores	\$5195 10
“ Wages	3153 64
“ Fuel	1560 11
“ Furniture	952 99
“ Stationary	78 89
“ Grounds	105 11
“ Medicine	928 53
“ Repairs and improvements	2750 43
	<hr/>
	14,724 80
Less credit to contingent account	4 67
	<hr/>
	\$14,720 13

If from the amount of annual expense	14,720 13
be deducted the charges of repairs and grounds, as not necessarily current	2855 54
and the balance	11,864 59
be divided by 52, equal to	228 19
and this again by average population, 50.3, there remains for weekly expense of each patient	\$4 53

GAMALIEL BRADFORD, *Superintendent.*

REPORT

Of the Superintendent of the McLean Asylum for the Insane, from May 1st to December 31st, 1835, inclusive.

No.	Time of Admission.	Sex.	Married or Single.	Age, 1835.	Supposed Cause.	Duration of the Disease, May, 1835.	Residence in the Asylum.	Discharged or Remains.	State.	Remarks.
110	1821 April 14	M.	Married	53	Intemperance	16 years	189 months	Remains	Improved	
287	1824 June 12	M.	Single	50	Intemperance	20 years	144 months	Remains	Not improved	Imbecile.
301	1825 April 25	M.	Single	45	Disappointed Affection and Intem- perance	17 years	141 months	Remains	Not improved	Periodical.
348	1825 Feb. 6	M.	Single	43	Masturbation	14 years	131 months	Remains	Not improved	Imbecile.
375	1826 Sept. 17	F.	Married	73	Repelled Eruption	14 years	124 months	Remains	Not improved	
415	1828 May 5	F.	Single	41	Unknown	17 years	116 months	Remains	Not improved	Imbecile.
554	1828 Aug. 29	F.	Married	35	Parturition	10 years	89 months	Remains	Not improved	Imbecile.
577	1829 Nov. 23	M.	Single	40	Unknown	10 years	86 months	Remains	Not improved	Fatuitous.
600	1829 April 18	M.	Married	54	Unknown	16 years	81 months	Remains	Not improved	
602	1829 April 28	M.	Married	52	Unknown	15 years	81 months	Remains	Not improved	
635	1829 Sept. 9	M.	Married	73	Unknown	20 years	76 months	Remains	Not improved	Periodical and Imbecile.
650	1830 Dec. 7	F.	Single	40	Unknown	8 years	73 months	Remains	Not improved	Imbecile.
666	1830 March 17	M.	Married	38	Intemperance	6 years	70 months	Remains	Not improved	Imbecile.
683	1830 May 2	F.	Single	39	Death of Friends	6 years	68 months	Remains	Not improved	Imbecile.
706	1830 Aug. 9	M.	Single	47	Intemperance	6 years	65 months	Remains	Not improved	
735	1831 Dec. 20	F.	Widow	50	Unknown	6½ years	61 months	Remains	Improved	
739	1831 Jan. 12	M.	Single	25	Masturbation	4½ years	60 months	Remains	Not improved	Imbecile.
760	1831 April 25	M.	Single	48	Unknown	24 years	57 months	Remains	Not improved	Fatuitous.
767	1831 May 27	F.	Married	37	Disappointment	4 years	56 months	Discharged	Not improved	
790	1831 Aug. 10	F.	Married	34	Following Parturition	5½ years	53 months	Remains	Much improved	
792	1832 Aug. 15	M.	Single	31	Intemperance	4 years	36 months	Discharged	Recovered	
886	1832 Aug. 15	F.	Married	50	Unknown	6 years	41 months	Remains	Not improved	Imbecile.
887	1833 Aug. 17	F.	Single	20	Unknown	4 years	41 months	Remains	Improved	Imbecile.
930	1833 March 9	M.	Married	40	Unknown	5 years	34 months	Removed	Not improved	
940	1833 April 20	M.	Single	37	Unknown	6 years	33 months	Remains	Not improved	
960	1833 June 4	M.	Married	36	Intemperance	5 years	31 months	Remains	Improved	

SUPERINTENDENT'S REPORT.

No.	Time of Admission.	Sex.	Married or Single.	Age. 1835.	Supposed Cause.	Duration of the Disease, May, 1835.	Residence in the Asylum.	Discharged or Remains.	State.	Remarks.
965	June 21	M.	Single	50	Intemperance	9 years	31 months	Remains	Not improved	Imbecile.
966	June 25	F.	Married	49	Unknown	6 years	31 months	Removed	Improved	
972	July 5	M.	Married	37	Inflammation of the Brain	3½ years	30 months	Remains	Improved	Imbecile
976	July 19	M.	Single	34	Intemperance	6½ years	30 months	Remains	Not improved	
996	Sept. 28	F.	Married	33	Ill Health	2 years	28 months	Discharged	Recovered	
1005	Nov. 21	M.	Single	37	Repelled Eruption	10 years	25 months	Remains	Much improved	
1010	Dec. 9	M.	Married	45	Unknown	6½ years	18 months	Removed	Improved	
1011	Dec. 10	M.	Single	23	Chagrin	20 months	25 months	Remains	Improved	Imbecile.
1013	Dec. 20	M.	Married	54	Intemperance	3½ years	18 months	Removed	Much improved	
1834										
1019	Jan. 8	M.	Single	25	Unknown	2 years	24 months	Remains	Improved	Imbecile.
1046	April 18	M.	Widower	75	Age	2 years	21 months	Remains	Not improved	Imbecile.
1048	April 23	M.	Single	60	Unknown	5½ years	20 months	Remains	Improved	
1051	May 15	M.	Single	36	Sedentary habits, inducing ill health	3 years	15½ months	Removed	Improved	[years.
1054	May 19	M.	Single	22	Epilepsy	15 months	19½ months	Remains	Not improved	Periodical. Epileptic 10
1062	June 12	F.	Married	32	Following Parturition	6½ years	18½ months	Remains	Improved	Imbecile.
1068	June 24	F.	Single	51	Matrimonial Perplexity	11½ months	18 months	Remains	Recovered	Suicidal.
1070	June 26	M.	Single	37	Intemperance [ed with Palsy	11 months	17½ months	Remains	Not improved	Periodical.
1081	July 20	M.	Single	38	Organic disease of the Brain, attend-	35 months	15 months	Died	Epilepsy	Periodical.
1084	Aug. 1	F.	Married	53	Unknown	10½ months	12½ months	Removed	Improved	
1101	Oct. 16	F.	Married	51	Religious Excitement	11 months	8 months	Discharged	Convalescent	Discharged as well, but
1102	Oct. 17	F.	Single	20	Unknown	6 years	7 months	Removed	Much improved	relapsed after return-
1104	Oct. 22	F.	Single	57	Great Mental and Bodily Exertion	8 months	14 months	Remains	Much improved	ing to her friends.
1105	Oct. 25	F.	Married	38	Loss of a Parent	2½ years	14 months	Remains	Not improved	
1106	Nov. 5	M.	Single	31	Masturbation [Business	7 months	13½ months	Remains	Much improved	
1109	Nov. 7	M.	Single	28	Ill Health, and Perplexity about	2 years	7 months	Removed	Recovered	Suicidal.
1114	Nov. 28	F.	Married	57	Ill Health	14 months	9 months	Died	Water in chest	Suicidal. Asthmatic disease of long
1115	Dec. 4	M.	Single	45	Intemperance	8 months	6 months	Removed	Convalescent	standing was suspended by the attack
1117	Dec. 11	M.	Married	58	Unknown	8 months	5 months	Discharged	Recovered	of insanity.
1118	Dec. 16	M.	Single	25	Inflammation of the Brain	13 months	8 months	Removed	Not improved	Fatuitous.
1121	Dec. 22	M.	Single	27	Masturbation	17 months	12 months	Removed	Not improved	Fatuitous.
1835										
1125	Jan. 17	F.	Single	23	Ill Health	10 months	11 months	Remains	Recovered	
1126	Jan. 17	F.	Married	32	Domestic Trouble	5 months	11 months	Remains	Much improved	
1127	Jan. 20	M.	Single	33	Masturbation	6 months	11 months	Remains	Not improved	
1128	Feb. 2	M.	Single	21	Hepatic Derangement	13 months	5 months	Removed	Convalescent	Relapsed, after return-
1129	Feb. 7	M.	Single	22	Excessive mental & bodily Exertion	3 months	6 months	Discharged	Recovered	ing to his friends.
1130	Feb. 9	F.	Single	22	Ill Health	10 months	11 months	Remains	Recovered	
1132	Feb. 21	F.	Married	53	Unknown [Exercise	3½ years	11 months	Remains	Not improved	
1133	Feb. 24	M.	Single	18	Sedentary Labour, and Want of	6 months	4 months	Discharged	Recovered	
1134	March 2	M.	Single	40	Unknown	15 months	5 months	Removed	Improved	

SUPERINTENDENT'S REPORT.

No.	Time of Admission.	Sex.	Married or Single.	Age. 1835.	Supposed Cause.	Duration of the Disease, May, 1835.	Residence in the Asylum.	Discharged or Remains.	State.	Remarks.
1135	March 2	F.	Married	22	Nursing and Confinement	7 months	3½ months	Died	Suicide	
1136	March 13	M.	Married	60	Intemperance	6 months	5½ months	Discharged	Recovered	
1132	March 18	M.	Single	28	Intemperance	9 months	5 months	Removed	Recovered	
1138	March 20	M.	Married	85	Loss of Property	12 years	9 months	Remains	Not improved	
1140	April 1	F.	Single	40	Ill Health	7 months	5½ months	Removed	Recovered	
1141	April 7	M.	Married	48	Fall upon the Head	9 months	9 months	Remains	Not improved	Fatuitous.
1142	April 10	M.	Single	30	Intemperance	13 months	9 months	Remains	Much improved	
1143	April 11	F.	Single	18	Fright	3 months	9 months	Removed	Recovered	Paroxysmal.
1144	April 12	F.	Single	34	Ill Health	2 months	2½ months	Discharged	Recovered	
1145	April 13	F.	Married	26	Ill Health, and Religious Anxiety	15 months	1½ months	Died	Consumption	Suicidal. Paroxysms al-
1146	April 13	M.	Single	22	Ill Health	3 months	2½ months	Discharged	Recovered	ternating with disease
1147	April 17	M.	Single	21	Dyspepsia	1 month	4½ months	Discharged	Recovered	of the lungs.
1148	April 21	F.	Widow	46	Hard Labour and Care	7 months	8 months	Remains	Much improved	
1149	April 26	M.	Married	40	Ill Health	2 months	7½ months	Discharged	Recovered	
1150	April 27	F.	Married	27	Typhus Fever	3 weeks	5½ months	Discharged	Recovered	
1157	April 28	M.	Married	35	Close Application to School teaching	2 months	7½ months	Discharged	Recovered	
						Duration before Admission.				
1152	May 8	M.	Widower	67	Intemperance	4 months	5 months	Discharged	Recovered	
1153	May 9	F.	Widow	28	Following Parturition	21 months	8 months	Remains	Convalescent	
1154	May 9	F.	Single	32	Ill Health, and Religious Anxiety	2 months	8 months	Remains	Improved	
1155	May 12	M.	Single	28	Unknown	1 month	6 months	Discharged	Recovered	
1156	May 13	M.	Single	18	Ill Health [sick Husband	9 months	5 months	Removed	Recovered	
1157	May 13	F.	Widow	29	Anxiety and long watching over a	6 weeks	3 months	Removed	Improved	
1158	June 4	M.	Single	35	Want of Occupation	6 weeks	3½ months	Discharged	Recovered	
1159	June 4	M.	Married	35	Religious Excitement	2 months	4½ months	Removed	Recovered	
1160	June 5	M.	Single	52	Anxiety about Property	1 month	3 months	Discharged	Recovered	Suicidal.
1161	June 8	M.	Single	22	Unknown	17 months	7 months	Remains	Improved	
1162	June 10	M.	Single	28	Religious Skepticism	7 years	5 months	Removed	Improved	
1163	June 12	M.	Widower	30	Loss of Wife	5 months	2 months	Discharged	Recovered	
1164	June 13	F.	Married	52	Hard Labour and Perplexity	1 week	2½ months	Removed	Recovered	
1165	June 18	M.	Married	35	Over Exertion and Anxiety	6 months	3 months	Discharged	Recovered	
1166	July 15	M.	Single	25	Epilepsy	2 days	20 days	Discharged	Recovered	Epileptic for many yrs.
1167	July 15	F.	Married	29	Ill Health and over Exertion	3 months	2½ months	Removed	Recovered	
1168	July 22	F.	Widow	58	Hereditary Tendency, excited by ill	4 months	5½ months	Remains	Convalescent	
1169	July 23	F.	Single	55	Unknown [Health	3 years	5½ months	Remains	Improved	
1170	July 23	M.	Single	52	Unknown	6 years	5½ months	Remains	Improved	
1171	July 27	M.	Single	27	Disappointed Affection	2 years	5 months	Remains	Improved	
1172	July 28	F.	Single	52	Ill Health [15 years duration	3 weeks	4 months	Discharged	Recovered	
1173	Aug. 1	M.	Married	35	Ill Health and Hypochondriasis of	1 month	5 months	Remains	Convalescent	
1174	Aug. 7	M.	Married	54	Intemperance	10 months	2 months	Discharged	Recovered	

SUPERINTENDENT'S REPORT.

No.	Time of Admission.	Sex.	Married or Single.	Age. 1835.	Supposed Cause.	Duration of the Disease.	Residence in the Asylum.	Discharged or Remains.	State.	Remarks.
1175	Aug. 19	F.	Married	38	Ill Health	2½ months	4½ months	Remains	Convalescent	
1176	Aug. 19	F.	Single	16	Unknown	2 years	3 months	Removed	Improved	Periodical.
1177	Aug. 20	F.	Married	33	Ill Health	1 month	3 months	Remains	Convalescent	
1178	Sept. 10	F.	Single	27	Repelled Eruption	5 years	1½ months	Died	Erysipelas	
1179	Sept. 16	F.	Married	32	Anxiety for her Children	3 months	3 months	Discharged	Recovered	
1180	Sept. 23	M.	Married	33	Unknown	2 years	3 months	Remains	Much improved	Periodical.
1181	Sept. 26	M.	Married	46	Disappointed Expectations	1 month	3 months	Removed	Recovered	
1182	Oct. 2	F.	Single	23	Ill Health	2 months	3 months	Remains	Much improved	
1183	Oct. 2	M.	Single	25	Intemperance	2 days	1 month	Discharged	Recovered	
1184	Oct. 3	M.	Single	21	Chagrin and Disappointment	18 months	3 months	Remains	Not improved	
1185	Oct. 9	M.	Single	29	Masturbation	5 years	2½ months	Remains	Improved	Imbecile.
1186	Oct. 10	F.	Married	35	Hard Labour	3 months	2½ months	Remains	Convalescent	
1187	Oct. 12	F.	Married	29	Following Parturition	3 years	2½ months	Remains	Much improved	
1188	Oct. 13	M.	Married	47	Intemperance	4 months	2½ months	Remains	Recovered	
1189	Oct. 17	M.	Single	26	Injury of the Head	5 months	2½ months	Remains	Recovered	
1190	Oct. 31	M.	Single	17	Typhus Fever	2 weeks	1½ months	Discharged	Recovered	
1191	Nov. 3	F.	Single	42	Trouble with Domestics [Labour	11 months	1½ months	Discharged	Recovered	
1192	Nov. 5	M.	Married	54	Change from active to sedentary	3 months	2 months	Remains	Convalescent	
1193	Nov. 5	F.	Single	34	Ill Health	8 months	24 days	Died	Erysipelas	Suicidal.
1194	Nov. 5	M.	Widower	58	Intemperance	2 months	2 months	Remains	Recovered	
1195	Nov. 7	M.	Single	19	Masturbation [and vegetable diet	5 years	2 months	Remains	Not improved	
1196	Nov. 10	M.	Married	35	Change from ordinary to abstemious	1 year	5 weeks	Discharged	Recovered	
1197	Nov. 16	M.	Married	44	Ecclesiastical Troubles	6 months	6 weeks	Remains	Convalescent	Suicidal.
1198	Nov. 19	M.	Single	35	Constitutional Tendency, excited by Death of Brother	1 month	5 weeks	Remains	Much improved	
1199	Nov. 19	M.	Single	27	Ill Health, caused by a Fall	5 months	5 weeks	Removed	Improved	
1200	Nov. 27	M.	Married	32	Religious Anxiety	6 weeks	4 weeks	Remains	Convalescent	
1201	Nov. 29	F.	Single	20	Typhus Fever	2 weeks	4 weeks	Remains	Recovered	
1202	Dec. 12	M.	Married	34	Abstemious and vegetable diet	5 months	3 weeks	Remains	Not improved	
1203	Dec. 15	M.	Single	34	Disappointment in Business	6 years	2 weeks	Remains	Not improved	Imbecile.
1204	Dec. 18	F.	Single	25	Matrimonial Perplexity	3 weeks	13 days	Remains		
1205	Dec. 29	F.	Single	21	Ill Health	1 year	2 days	Remains		
1206	Dec. 31	M.	Married	46	Anxiety about Business	10 months	1 day	Remains		

SUMMARY.

Patients remaining in the Asylum, May 1st, 1835. Males 50.

Females 31. Total 81.

Of these there had been insane more than 20 years . . .	3
“ 10 years . . .	11
“ 5 years . . .	16
“ 2 years . . .	15
“ 1 year . . .	9
Not more than 1 year . . .	27
Old cases 54, Recent 27.—Total 81	

There have been received Dec. 31st, Males 34, Females 21—55

Of these there had been insane more than 1 year . . .	15
Less than 1 year . . .	40—55

There have been in the Institution,—Old cases . . . 69

Recent “ . . . 67—136

Upwards of 70 years of age . . .	4
Between 60 and 70 “ . . .	3
“ 50 and 60 “ . . .	24
“ 40 and 50 “ . . .	21
“ 30 and 40 “ . . .	40
“ 20 and 30 “ . . .	38
Under 20 “ . . .	6—136
Married Females . . .	24
Unmarried “ . . .	23
Widows . . .	5—52
Married Males . . .	29
Unmarried “ . . .	51
Widowers . . .	4—84—136

Supposed Remote or Exciting Causes.

Ill Health of various kinds	26
Intemperance	16
Masturbation	7
Disappointment and Mortification	6
Religious Excitement and Anxiety	5
Following Parturition	5
Excessive bodily or mental Labour	8
Repelled Eruptions	3
Inflammation of the Brain	2
Falls, and other Injuries	3
Death of Friends	3
Matrimonial Perplexities	2
Change from ordinary to vegetable and abstemious diet	2
Other Causes	48—136

	Admissions.	Removals.	Average No. of Patients.		
May	6	4	82½		
June	8	8	86½		
July	7	5	84½		
Aug.	5	10	83		
Sept.	4	7	79½		
Oct.	9	8	81½		
Nov.	11	6	82½		
Dec.	5	11	80½		
Annual	55	59	82½		
			Male.	Female.	Total.
Removed—Unfit,			0	0	0
Eloped,			0	0	0
Died,			1	5	6
Not improved,			2	1	3
Improved,			6	4	10
Much improved,			1	1	2
Convalescent,			2	1	3*
Recovered,			25	10	35
			—	—	—
			37	22	59

Of these 39 were recent, and 20 old cases.

Of the recent cases, there were—	Recovered,	32
	Convalescent,	2*
	Improved,	3
	Died,	2—39
Of the old cases, there were—	Recovered,	3
	Convalescent,	1
	Much improved,	2
	Improved,	6
	Not improved,	4
	Died,	4—20—59
Of those remaining, there are—	Recovered,	7
	Convalescent,	9
	Much improved	10
	Improved,	15
	Not improved,	36—77

Since the first of May (now eight months) there have been in the Institution one hundred and thirty-six patients,—there have been fifty-five admissions, and fifty-nine removals. Of the latter, six were by death, three not improved, three convalescent, and thirty-five recovered. Of the deceased, one Hydrothorax, one Phtisis Pulmonalis, one epilepsy, one suicide, and two erysipelas. Of those who were not recovered, eight were considered incurable, and ten had insufficient trial.†

There are now remaining, seventy-seven patients, thirty-six of whom are considered incurable.

There are in the left wing sixty-one rooms appropriated to patients; in this number are included four lodge rooms, and the four rooms under the dome.

There are (January 5th) fifty male patients; should the number of admissions exceed the discharges, we shall soon be in want of room. The propriety of anticipating such an occurrence by the removal of some of the hopeless cases, is suggested as worthy of consideration.

* One recovered, the others relapsed.

† Appendix A.

The system of moral management which we have adopted, is still successfully pursued. In addition to the means of diversion and occupation formerly named, the better class of patients are now invited once a week to a dancing party in the oval room, the evening is spent in dancing, marching, and cheerful conversation. The presence of all the officers, and as many of the nurses and attendants as can be spared from the wings, who engage with them in the amusements of the occasion, is security against any improper conduct or occurrence.

We have also introduced religious service on the Sabbath, and have made arrangements by which we hope to continue it every other Sabbath during the present year. For eight months, from thirty to forty have daily attended on our family worship; and in no instance has there been any disturbance, nor have we known of any injurious effect; on the contrary, the influence has been highly salutary, and many who have recovered have spoken of these exercises, as having contributed to their restoration.*

The following is a brief statement of our present system of occupation, diversion, and moral management. The patients rise and dress about half an hour before breakfast, which is at sunrise in the winter, and six o'clock in the summer. After breakfast they are taken out to walk, or to ride, or are engaged as far as possible in useful labour, as farming, sawing, splitting and piling wood, or assisting their attendants; and a few are engaged in mechanical employments. A large number are occupied more or less in the amusements of bowling, quoits, throwing the ring, and in chequers, chess, back-gammon and other games,† and in the interval of these amusements, reading books from the library, newspapers and writing serve to fill up the time.‡ After tea they are assembled in the oval room, for family worship, which consists in reading a chapter from the Bible, singing two hymns, and a prayer. These are the occupations of the day. During the past summer, the bowling alley building was fitted up for a shop by the patients, and we have yet to find some simple

* Appendix B.

† Appendix C.

‡ Appendix D.

mechanical labour in which most can be engaged. This is highly desirable, and we do not despair of ultimate success.*

Once a week all the female patients who are well enough, assemble in the house, and spend an afternoon in sewing; while thus employed, some interesting book is read, or they are engaged in conversation, and are indulged in occasional relaxation and amusement; these stay to tea with the family, and to attend the "Belknap‡ sewing society," is a privilege, which nearly all are anxious to enjoy; the work for which they received pay the last quarter, amounted to sixteen dollars and thirty-nine cents, this and their future earnings they propose to appropriate for their own benefit, and that of those who may hereafter be members of this Institution. The female members of our family have interested themselves to provide occupation and amusement for the female patients, they have visited the wing for this purpose, and to read to them interesting books, they have also to some extent engaged them in domestic labour.

I have already stated the weekly dancing parties and the religious service on the Sabbath; these stated observances are of incalculable benefit to our patients, the mind is thus provided with something to fix upon, and to anticipate, and the labour of preparation is seen, and heard for days in advance; the females in preparing their dresses, and both males and females in practising the figures of the dance. Many interesting and highly gratifying anecdotes might be mentioned in connection with these remarks, respecting our religious and social meetings, but it is unnecessary; the propriety and advantage of these things will appear at once to all. Our quiet and convalescent patients, are also taken with us to church; to visit places of interest and amusement, are taken into our family, dine at our table,† and sit in our parlours; they are made to feel as far as possible, that in coming here, they have only found a new home, new friends, new brothers and sisters; and that we are interested to promote their comfort, welfare, and

* Appendix E.

† Appendix F.

‡ So named, in honor of Miss MARY BELKNAP, a munificent donor to this Institution.

happiness. In the location of patients, this object is constantly kept in view, and they are brought forward as fast as possible, and are deprived of privileges and returned to the lower stories, only when they have proved by their conduct that they cannot exercise proper self control.* No punishment is in any case permitted, and the only measures which can be regarded as corrective, are, the deprivation of some accustomed privilege; change in location, and the occasional use of the shower bath with the noisy and filthy. Personal restraint is in no case made use of, except with those disposed to destroy clothing or other property; and with the furious to prevent injury to themselves or others;—the number is always small who require any personal restraint.

To carry on this system of moral management, it has been necessary to increase the number of attendants and nurses.† We trust that this increase of the current expenses of the Institution, will not be regarded otherwise than with satisfaction. We have not asked with how small a number can we get along? but, how many can be advantageously employed? We have spared no pains to secure those of intelligence and character. Many of them have formerly been engaged as teachers of schools.

We will not continue any male or female attendant, whom we cannot invite into our family, seat at our table, and with whom we could not confidently place our own wives, sisters, and brothers. We do not consider their service as servile, they are the companions of the unfortunate; engaged in the same employments with ourselves, they shall command our friendship and respect.

I have on a former occasion expressed my entire confidence in the individuals associated with me in the management of the Institution. I ask not for the Institution or myself more devoted fellow labourers.

I have been thus particular in detailing to you our system of management, that you might know the reasons for, and the results of, any changes from the system pursued by my highly respected predecessor. No change has been made, until after the most careful consideration I was convinced of its utility.

* Appendix H.

† Appendix G.

We have now commenced another year, and whether the result will be prosperous or adverse, is known only to that Almighty Being, to whom we constantly commit our Institution and ourselves. But whatever may be the result, it shall leave me with the consciousness that I have endeavoured to discharge my duty.

THOMAS G. LEE,

Physician and Superintendent.

MCLEAN ASYLUM, JAN. 5, 1836.



APPENDIX.

(A.)

One of the greatest trials the Physician of an Insane Asylum has to endure, is the premature removal of patients, and interference in other respects, in the means of cure. A patient is placed under his care, suffering with the severest calamity to which man is liable:—he enters upon a course of treatment, the disease yields to remedies, and he becomes confident of success. At this stage, the friends call and learn his state, see him walking, riding out, and apparently “clothed in his right mind,” insist upon visiting him, or conclude that “he is so quiet and comfortable, they can get along very well with him at home.” Facts and arguments avail nothing against this reasoning, and he is compelled to see his patient cruelly sacrificed to,—and the reputation of the institution for success, and his own for skill, endangered by,—these blind but well meant measures of the friends of the patients. I cannot forbear to state a few cases from our last year’s experience. Case 1068, was brought here anxious, despairing and suicidal, she could obtain no rest day nor night; she walked

to and fro, wrung her hands, tore her hair, screamed, &c. &c. She was put under a course of treatment, she improved, and in the course of a few months was apparently recovering; her friends now concluded to take her home on a visit; they were advised of the almost certain consequences of such a step: the experiment was tried, and in five days the patient was returned to us worse than ever. The labor of months was lost; our house was subjected to a renewal of her disturbance, and she to another four months of suicidal horror. She again began to improve, became quiet, engaged in work, and was quite comfortable: and again it was concluded to make another experiment. I could not forbear telling them, that they were sacrificing their sister; they yielded to my advice and allowed her to remain. She has since recovered, has been discharged (Feb. 3, 1836,) and remains well. I have no doubt the same result might have been obtained ten months earlier, if the friends had listened to the advice of those, who ought to have known best, what was for the good of the patient.

Case 1115, was brought here in a state of chaotic madness, regardless of personal cleanliness, noisy and excited. He improved, became neat, quiet, engaged in labour and amusements, and was getting well; in this state he was removed.*

Case 1125, was apparently idiotic, paid no regard to personal cleanliness, tore her clothes and bedding, was noisy, &c. At the end of six months she was so far improved as to ride out with our best class of patients, and was doing well. In this state she was removed on a visit; at the end of a fortnight she was returned much worse than ever, more filthy and troublesome, tore and ate her clothes, blankets, and indeed, would swallow every thing she could get into her mouth. After being subjected to the trouble of attending her another six months, we have the satisfaction to believe she is again recovering, and if not removed, will soon be well.

Case 1128, was sullen, obstinate, irascible and dangerous. He had been deranged thirteen months; and was getting worse. He remained with us five months, had become pleasant, cheerful, and

* NOTE.—I have just learned by letter, that the convalescence in this case continued, and resulted in perfect recovery six weeks after his removal.

engaged in amusements and labour; on only one point did he manifest any insanity, and of this he seldom or never spoke, unless he was addressed upon it. In this state he was removed. In a few weeks his disease returned, he wandered about the country for several months, and was finally committed to the State Hospital by the Court, as dangerous to be at large.

1129, was a case of chaotic madness, noisy, filthy, &c. After he began to get better, his friends twice came to remove him, but he became so much excited, that they were prevented from accomplishing this purpose. Three months afterwards, six months from his admission, he was discharged recovered.

Case 1173, was brought here bound hand and foot, noisy, profane, and highly excited. In a few weeks he became quiet and apparently rational, attended family worship, and took his meals with the family. He was now visited by his brother, who talked with him for half an hour about his affairs at home, and three hours after he was a raving maniac; it was some weeks before he recovered from that half hour's visit; he has since been doing well.

I do not mention these cases because I suppose we are more troubled than other institutions, which are dependant upon the confidence of the public for patronage; on the contrary, I suppose we are less so; we are situated in an intelligent community, where the advantages of judicious management are probably better understood than in any other; but friends will be solicitous, and some will be influenced by their feelings, or by reports of the success of a "patent doctor," or some "patent medicine," and will be anxious to try if they cannot hasten recovery. Very often these experiments are made, and some months after we have a patient returned to us, a confirmed and incurable maniac.

Now with these facts before me, I wish to say to those who are about to place friends under our care; first, try all the experiments you intend to do; then satisfy yourselves that you can confide in our skill, discretion, and kindness; and when your friend is placed here, leave him with confidence to our direction, until we discharge him well. If you cannot do this, do not bring him here. We wish to receive only such as we can have an opportunity to restore.

(B.)

The experiment of allowing the patients to attend the worship of the family, has far exceeded our expectations, and has been attended with the best results.

Ninety-five, out of the hundred and thirty-six, have attended upon these exercises, and a large part of them with great regularity. It has been with a few exceptions entirely voluntary. It is regarded as a privilege and as such is eagerly sought. The slightest irregularity of conduct has been followed by the omission of the individual from the list for a few evenings, and this deprivation has secured order and propriety. Patients, who could not otherwise be kept decently clothed, have exerted their powers of self control to be allowed to attend.

One female, who was habitually noisy, obscene, and profane, after having repeatedly solicited this privilege, was told one morning that she should attend that evening, if she kept quiet during the day. She provided herself with a stocking which she rolled into a ball, carried in her hand, and pressed into her mouth whenever she felt her propensity active ; and thus guarded, she attended prayers and conducted with becoming propriety ; she is now a regular attendant upon these and other exercises of the family ; is quiet, industrious and rational. When from any cause the service is omitted, there is a very general expression of disappointment. The supervisor of the male wing, has often stated the case of a patient in a state of imbecility, who, when the exercise has been omitted, has opposed going to bed, taking him by the hand, and dragging him to the door, has repeated, "let us go to prayers, let us go to prayers."

It is now about two months since we commenced service on the sabbath. The clergymen in this vicinity upon whom we have called, have very cheerfully consented to officiate ; their remarks to us have corresponded with those of other strangers who have been

present at these exercises—"how perfectly quiet." Several have observed that it was the most interesting audience they had ever addressed.

Fifty of the patients have been permitted to attend church on the sabbath, in company with the officers and attendants; the effect of these exercises, is, not only to break in upon the monotony of their lives, and to induce habits of order and regularity, but, to soothe the feelings, awaken the affections, and carry the mind back to the memory of other and better days; and also to cause them to recollect the infinite goodness and all-wise Providence of God. If all are not edified, most are interested, and all are attentive and respectful.

(C.)

Idleness is the greatest evil we have to fear, it opens the way to every other, and no one can know, who has not had experience, how very difficult it is to provide constant occupation for the patients in an Insane Asylum. *Useful labor is always the best employment*; but they can be thus engaged only a small part of the time, and besides, there are those who will not be thus occupied, and we are obliged to seek other employments. The various amusements named are among our resources, and they serve to beguile many an hour which would otherwise be spent in idleness, or the indulgence of diseased feeling. From the records kept by the Supervisors, I find that some of the patients in visiting objects of interest in the vicinity, &c. have walked more than one hundred miles a month. From ten to sixteen have weekly attended the meetings of the "Belknap Sewing Society," since its organization, and from sixteen to twenty-six the family parties, and most engage either in the dancing or marching.

Suitable refreshments are provided for these occasions, and a stranger while looking upon the happy faces about the room, would hardly suspect it was a party of insane patients.

(D.)

In June last, two hundred dollars were appropriated for purchasing a library for the patients, a part only has as yet been expended. The library now numbers one hundred and sixty volumes.

We take two daily papers, and once a week receive from an Editor's table, from twelve to sixteen weekly papers and magazines, for the use of the patients.

(E.)

We have seen the very best results from labour. Patients, who without it were noisy and troublesome, have become quiet with it; one patient who was brought to the Institution in irons, and who until employed, was constantly raving and excited, when furnished with occupation, became quiet; he braids and sews four or five cane hats a week besides spending his evenings at games, and except when interrupted by the entrance of strangers, is peaceable and quiet.

Most of our farming, the sawing and splitting of nearly all our wood, has been done for the last eight months by patients, and our only difficulty has been, that we could not find enough for them to do.

The influence of labour has been most salutary upon all engaged, no instance of a contrary tendency and no accident has occurred to my knowledge.

Eighty-three have been more or less engaged in useful labour. No patient has been permitted to labour more than six hours a day, and most, a much shorter time. No record of the labour of the females was kept until quite lately. During one month they made twenty-five shirts, two dresses, two night-gowns, four pairs of

drawers, one apron, two caps, pieced and quilted four bed quilts, knit five pairs of hose, mended sixty-five garments, marked twenty-one articles, and folded and ironed clothes sixty-four hours, besides assisting the attendants in sweeping, making beds, &c. We shall always be pleased, if the friends of patients will furnish the means for occupying them, an important object will thus be accomplished, and in some cases they may assist towards their own support.

(F.)

Forty patients during their convalescence regularly dined, and some others occasionally took their meals with the family.

(G.)

On the first of May, our number of attendants was 11. We have since averaged $14\frac{1}{2}$. Supposing our number of patients to have averaged eighty-two, which is not far from the fact, then there has been an attendant for every six patients. We have not found this number too large. No patient with active suicidal propensity, is now permitted to be without a separate attendant. A most laudable ambition has existed among them, especially among the female nurses. There has been a rivalry to see who could keep things in the best order, and who could succeed best in the management of the patients. This has been the cause of many interesting occurrences, alike honorable to them, and gratifying to myself. As an illustration I will state one case.

No. 1182, was brought here in a cataleptic state. She appeared idiotic, was inattentive to cleanliness, and indeed in every respect was as helpless as an infant. She was put under a course of treatment and began to improve, but was still filthy in her habits, and of course made a great deal of very unpleasant labor. A nurse

on one of the other stories, who had charge of the worst class of patients, and who had been quite successful in correcting their bad habits, expressed to different members of the family, the wish that I would let her have this patient in her story. Anxious to cultivate this spirit among them of selecting out the worst cases, and making them the object of their special efforts, I directed the change in location to be made. The most unremitting attentions were given by the nurse. The patient was taken at regular and short intervals to the water closet, and solicited to perform there the offices of nature. Her habits were soon corrected, and from being a very troublesome, she became a very comfortable patient. She was also engaged in sewing and knitting, and though she has only been three months in the Institution, she is now so far improved as to be able to attend the family worship and parties, and engage in various kinds of light labour.

Such attentions, will seldom fail to correct the most filthy habits, while neglect, solitary confinement, and the want of occupation, will often cause them. The success of any institution will depend very much upon the class of individuals engaged as attendants. "There ought to be a sufficient number by whom the patient's confidence or good opinion is to be cultivated, and in whom mildness and command of temper are indispensable." Dr. Cox well observes, "the idea which has too much prevailed, that it is necessary to commence an acquaintance with lunatics by an exhibition of strength, or an appearance of austerity, has been found to be extremely erroneous, and to be a part of that cruel system, dictated perhaps by timidity, which has too long prevailed, and unhappily still prevails in many of the receptacles for the insane. Let it be remembered, that in most instances of mental depression, the behaviour though it ought to be firm, cannot be too kind, conciliating and tender." It is only by employing attendants of intelligence and elevated moral feelings, that such conduct can be secured: and while there are in our country more than one million, who profess the religion of Jesus, it must never be said, that a sufficient number of this class cannot be found who are willing to devote themselves to this work of love and mercy.

(H.)

MORAL TREATMENT.

The advantages of cultivating the affections, consulting the taste and feelings, and even indulging to a certain extent the freaks and fancies of the insane, will be best illustrated by cases.

Case 110, has been insane seventeen years, and for sixteen years a resident of this institution. He was the most habitually excitable, and irascible patient I ever knew; it was seldom he would speak pleasantly; he walked to and fro with great impetuosity, threatened, stamped and beat violently with his fists. Even when alone, he would work himself into a state of furious excitement.

He believed himself to be God, and any compulsion, roused his indignation and wrath; he was indulged in his fancies, allowed to wear whiskers, long hair, &c. and treated with uniform and studied respect. He soon became mild. For many years he had not been without the enclosure of the courts. He was now taken to ride, and invited into the family; he occasionally attends family worship, and has in one instance attended the weekly parties, and on all these occasions has conducted with propriety. He is still "a god," no longer a god of vengeance, but one of kindness and mercy. He calls the physician and others "my lord," and offers to escort them on a journey with a million of troops:—it has now been several months since I have seen him angry or excited. He is comfortable himself, and no longer an annoyance to those about him.

No. 1013, was also located with the worst class of patients, he had been insane three and an half years, and in the Institution sixteen months, and like the former case was highly irritable and irascible, and much of the time in a state of vindictive excitement. His self-respect was cultivated; he was invited to family prayers,

to take his meals with the family, and removed to the upper story. He became pleasant and cheerful, and for several weeks had manifested no insanity, when he was removed to his friends. His diseased feelings have since returned, and he is still insane.

No. 1148, is ordinarily cheerful and happy, her mind is weak, but slowly recovering its vigor. In two instances, the unintentional neglect of the physician to pay her his accustomed civilities, has thrown her into a state of anxiety and depression. In both cases, she was for several days disconsolate, neglected her employments and wept much. Assiduous attentions soon soothed her feelings, and restored her to her usual state.

Facts contained in this appendix, and many others of the same character, remind us of the necessity of constantly treating the insane with the utmost delicacy, attention and respect. Visitors should always be introduced, and should receive them as they would their friends; their peculiarities should not be noticed, and they should be engaged in the ordinary topics of conversation. They shew the necessity of employing attendants and nurses of cultivated minds and feelings, who will engage in their labours with much of that spirit of patience and self-denial, which should characterize the missionaries of the cross. And they teach us the necessity of pursuing a consistent course of treatment, of cheering the desponding, soothing the irritated, and allaying every rising storm — and the importance, also, of securing their confidence, respect and affection.

They should teach the friends to exercise patience and prudence, to avoid improper interference, and having committed their friend to his charge, they should throw the responsibility of every measure upon the Superintendent, by following his advice. And when he fails to satisfy the just expectations of the public, he will leave this for some other field of labour.

CONCLUSION.

I need not apologize for this detail of facts. Happily, there prevails in our country at this time a spirit of inquiry respecting the treatment of the insane. This State has set an honourable example in the establishment of its Hospital for the pauper lunatics, the results of which are cheering to every benevolent and philanthropic heart. Other States are waking up to the importance of this subject, and the time is not far distant, when every district of our country will have its insane asylum. The present, then, is a critical period. The site, the plan of building, the arrangements and the system of treatment which will be adopted by new institutions, will depend very much upon the facts presented to the public by those now in existence.

Very little has as yet been done in this country in the way of giving useful employment to the patients of our insane hospitals; and so far as I know, no institution has been established, where any considerable provision has been made for this purpose. Those to be hereafter erected, should be well provided with these facilities for the recovery of patients; pasturage, meadow and tillage land, should be had in abundance. The farm should be well stocked, cattle, sheep and swine raised for the use of the inmates, should be fed from the produce of the farm. Corn, potatoes, grain, flax, all kinds of garden sauce, &c. &c. should be cultivated by the patients. There should be a dairy room, workshops, and store houses, all arranged for the particular object of employing them. They should be engaged (in the times and seasons for the several labours) in cutting, making and loading hay, planting, sowing and getting in garden and field crops, collecting and storing away fruit, sawing, splitting and piling wood, husking and shelling corn, dressing flax, tending stock, milking cows, making butter and cheese, washing, ironing, kitchen labor, spinning, weaving, knitting, sewing, &c. &c. in fine, all the labour of a large farming establishment, besides various kinds of mechanical labour. With us this experiment has not been fully tried, but our limited expe-

rience justifies us in using the strongest language in its favor. In Europe the experiment has been tried, and the results are conclusive.

I cannot do better service to the public, than by publishing the following statements from the reports of some of the European Institutions.

Mr. Pinel says,

“That at the principal hospitals in Spain those of the insane capable of working, are distributed every morning into separate parties, an overlooker is deputed to each class, who apportions to them individually their respective employments, directs their exertions, and watches over their conduct. The whole day is thus occupied in salutary and refreshing exercises, which are interrupted only by short intervals of rest and relaxation. The fatigues of the day prepare the labourers for sleep and repose during the night. Hence it happens, that those whose condition does not place them above the necessity of submission to toil and labor, are almost always cured; whilst the grandee, who would think himself degraded by exercise of this description, is generally incurable.”

The following facts are from Mr. Halliday's valuable work on the insane hospitals in Great Britain.

“It is not by seclusion and mystery, that they can be properly watched over, or by confinement in the wards or cells of an hospital that they are to be cured.—Experience has shown that a regulated intercourse with the world, and constant employment of the mind and body, are the best aids to medical treatment, and in the construction of every Asylum, these ought to be kept constantly in view. The great objection to the generality of the public Asylums in England, is their want of space for different work shops, and *of a sufficient quantity of ground on which the patients can be employed in agricultural labour.*

“At Wakefield, the patients have uniformly been kept employed at their various trades, and in agricultural labor, and the best results have followed this judicious system. Dr. Ellis in a report remarks, that no accident has ever occurred from allowing the insane the use of instruments necessary for their trades or occupation, and that while labour has tended greatly to lessen the expense of the establishment, it has also aided in hastening their cure.

“At the Lancaster Asylum, all who are in a fit situation are employed in such occupations as are adapted to their abilities and previous habits: some in husbandry and gardening, getting stones and making roads upon the waste grounds adjoining the house, under the direction of attendants, and the women are employed in sewing, washing, and all household work.

“At the Stafford Lunatic Asylum, with one hundred and twenty patients, they cultivate thirty acres of pasturage, pleasure and garden grounds. The labour is performed entirely by the patients, assisted by two attendants, and all the making of linen and mending of clothes is done by the females — and the number of cures bears ample testimony to the judicious arrangement and proper treatment established in the Asylum.

“At the Gloucester Asylum, many of the men are regularly employed in cultivating the ground, and, notwithstanding they are entrusted with spades and other garden tools, no accident has occurred, not even among those who as carpenters are allowed the free use of edge tools. The females assist in all the household duties, and in needle work which, as the report states, is found not only useful to themselves, but also, most beneficial to the establishment.

“At the Richmond Lunatic Asylum, Ireland, the average number for 1827, was about two hundred and sixty; seventy-three were discharged recovered, thirteen relieved, and twenty-seven died. At the close of the year, twenty-five were convalescent, one hundred and thirty-two curable, and one hundred and twenty incurable. Eighteen patients were employed in garden labour, sixteen in spinning, twelve in knitting, and eighteen at needle work; twenty-six were employed in keeping the house clean, twelve in washing, and sixteen in other employments, such as carrying coals, white washing the wards, weaving, tailoring, &c., and twelve were learning to read, so that of two hundred and seventy-seven, not less than one hundred and thirty were actively and usefully employed. During the year not less than 3188 skeins of yarn were spun, 406 pairs of men's, and 349 pairs of women's stockings were knit, and of linen woven in the establishment, there were made by the female patients for the use of the inmates, 140 shirts, 180 chemises, 115 pillow cases, 56 pairs of sheets, 53 rollers, 83 bodices, 80 night-caps, besides the whole clothing of the male and female attendants.

“The Armagh District Asylum, Ireland, had been in operation about two years. Average number of patients about 76. Had received in that period 140 patients, of whom 41 had been discharged cured, 9 relieved, 6 not relieved, 8 died, and 76 remained in the Institution at the close of the second year. There are thirteen acres of land attached to the Institution, which is cultivated by the patients, and furnishes potatoes and vegetables for the consumption of the whole establishment. All the linen for the house consumption is woven by the patients in the Asylum, and all their clothing is made by themselves. The average number of patients employed during the second year, is thus stated by the Superintendent, Mr. Jackson. Of the males in garden labour 12; weaving 3; tailoring 3; mat making 2; household work 6; white washing 1; and of the females in spinning flax 6; making female clothing 8; washing 3; and in household duties 4. Total 48. Taking 76 the number at the close of the second year as the average number, though it was not probably so large, nearly two thirds were employed. ‘As employment,’ adds this intelligent Superintendent, ‘is now generally allowed to be one of the best restoratives, every means has been used to promote it. Such as are at all capable among the females, are constantly occupied at plain work, spinning, &c. and the division in which these are most regularly carried on, is remarkable for its regularity and cheerfulness. The patients, with few exceptions, seem happy and grateful. Avoiding all compulsion, I mostly find a small premium has the desired effect.’—*Halliday*.

“Among the lower classes of the people, it will generally be found that useful occupation in the pursuits to which they have been most accustomed, is their best amusement, and such employment, the most salutary mode of recreation that can be resorted to. One of the principal objects kept in view in the direction of this (the Wakefield) Asylum, has been to obtain for the patients constant and regular employment; and for that purpose, not only farming and gardening, but all trades, have been forced into the service — we have spinners, weavers, tailors, shoemakers, brewers, bakers, blacksmiths, joiners, painters, brick layers and stone masons, all employed. All the clothing is manufactured and made by themselves; we bake our own bread, brew our own beer, and nearly one half of both male and female patients are constantly engaged in some kind of labour. The moment there is convalescence, the patient is *enticed* to occupy himself with his usual healthy pursuits, and indeed many never begin to amend until we have induced them to engage in such employments. I am thankful to say, that all this has been done, hitherto, without an injury of any consequence from one patient's striking another when they are employed; and besides the great and evident benefit which such a system has had in the recovery of the patients themselves, it is a source of great saving to the institution; for notwithstanding that we have for many years received only seven shillings a week for a pauper, a fund has accumulated, which by the end of the year will exceed three thousand pounds.”

Director Doctor Ellis, to Doct. Halliday.

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