

Evans (C.)

ACCOUNT OF THE ASYLUM

FOR THE

RELIEF OF PERSONS

DEPRIVED OF THE USE OF THEIR REASON,

NEAR FRANKFORD, PENNSYLVANIA;

WITH THE

STATISTICS OF THE INSTITUTION

FROM ITS FOUNDATION TO THE 31ST 12TH MONTH, 1838.

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BY CHARLES EVANS, M. D.,
ATTENDING PHYSICIAN TO THE ASYLUM.

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ACCOUNT OF THE APPLICANT

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W. J. COLLIER & SONS

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OF all the maladies to which the human system is obnoxious, those which affect the manifestations of mind have undoubtedly the strongest claim upon our sympathy and care. Notwithstanding this is now generally acknowledged, yet it is comparatively of but recent time, that the public sympathy has been effectively demonstrated, by providing adequate and appropriate means for the cure of persons afflicted with those diseases; or for alleviating the distress and securing the comfort of such as may be beyond the reach of remedial aid. All experience has proved, that in the great majority of cases, separation from friends, and seclusion from society, are indispensable to the recovery of the insane; besides which the peace of their families, and the well being of society, demand their restraint; hence, places for their reception have been common in all Christian countries: but until the present century, these institutions appear to have been conducted, mainly, with a view to the security of their wretched inmates; provision for their medical and moral treatment, being altogether unheeded, or made of very secondary consideration. Left to the conduct of the ignorant, the selfish, and the unfeeling, whose principal aim was to escape trouble and secure their own emolument, the mad-houses (as the English termed them,) embraced more heart-sickening degradation, and more unheeded suffering, than could be

found in any other receptacles of human misery. The real state of the houses for the reception and treatment of the insane, in Great Britain was first disclosed to the public by the report of a committee of the House of Commons, published in 1816. Credulity itself is staggered at the recital, of the before unheard of cruelty practised, and misery endured, within the walls of most of those institutions, many of which, the public had been accustomed to regard with pride, as monuments of their liberality and benevolence. There were, however, a few honourable exceptions, and conspicuous among these was the Retreat near York, which was projected by the Society of Friends as early as 1792, the same year in which Pinel commenced his celebrated reform in the Bicêtre at Paris. The plan of that Institution originated with a few individuals in the society, who, having accidentally become acquainted with the manner in which the insane were habitually treated, resolved to rescue such of their fellow professors as suffered under that pre-eminent affliction, from the misery which surrounded them, and to place them in a situation where they would be subjected to a totally different course of management from that pursued in any of the existing establishments. Accordingly grounds were purchased, buildings erected, and in 1796 a considerable number of patients received, and a course of treatment carried out, such as had never before been practised towards the insane, and which gave a rational ground to hope that their cure would be effected, or, at all events, their comfort and welfare secured. The Retreat was soon resorted to by others than Friends; and in a short time the success obtained there, demonstrated beyond contradiction, the superior efficacy, both in respect of cure and security, of a mild and humane system of treatment in all cases of mental disorder. To the philanthropic members of that religious society, who founded and conducted the Retreat, belongs (together with Pinel, who made some reformation in the horrible abuses of one of the Paris hospitals,) the credit, whatever it may be, of changing the course of treatment long pursued toward those deprived of the use of their reason, and restoring to them that sympathetic kindness and control which their affliction peculiarly demands. The example thus set was slow in extending its influence, as is evident from the state of the institutions throughout Great Britain, when the investigation before alluded to, took place. That it had, however, a decided effect in awakening the public mind to the importance of a reformation in the insane hospitals, is shown by several parts of the evidence given before the committee of the House of Commons. Dr. Weir, Inspector of Naval Hospitals, states in his testimony, that "the object of almost every insane institution, whether of a public or private description, had been the *security* of those pitiable objects; comfort, medical and moral treatment being in great measure overlooked; happily, however, for that class of society, the Quakers' Retreat at York, has at last

convinced the world, how much may be done towards the amelioration of their condition."

From the time the subject was thus brought before the public, the arrangement and economy of asylums for the insane have become the subjects of attentive study and experiment, until, under the influence of an enlightened philanthropy, they have been radically changed, so that within the walls of every such institution properly conducted, are congregated, not only the various resources of medical science and art, and every thing calculated to divert the mind from its erroneous associations, and give new vigour to its powers; but also all that needful care, decided control, and well-directed kindness, which, owing to perverted feelings, the sufferer rejects, or cannot appreciate while within his own domestic circle, but which are generally accepted with thankfulness from the hands of a stranger, and contribute powerfully to lessen his distress and restore his health.

In 1812, motives, similar to those which actuated the founders of the Retreat in England, induced a large number of the members of the same society in Pennsylvania, to attempt the establishment of a similar institution. They associated themselves together under the title of "The Contributors to the Asylum for the Relief of Persons deprived of the use of their Reason," for the purpose (as expressed in their constitution,) of providing for the suitable accommodation of that afflicted class of our (their) fellow members, and professors with us, (them) who are or may be deprived of the use of their reason; as well as the relief of their families and friends." Subscriptions were opened, and in the course of a comparatively short time, a sufficient amount of funds having been collected, the institution which I am about to describe was built, and in 1817 opened for the reception of patients. At that time there was no asylum in this country which could serve as a model for an institution of the kind, those existing only answering to show how entirely inappropriate for the accommodation of the insane were the plans upon which they were constructed.

The Asylum for the Relief of Persons deprived of the use of their Reason, is situated in a healthy and retired part of Oxford township, distant about five miles north from Philadelphia, and one mile westward from Frankford. The whole building, which faces the north, is three hundred and twenty-two feet eight inches in length, being made up as follows:

The centre building is sixty feet square and three stories high above the basement; having two wings standing back about eighteen feet from its front, each one hundred feet long by twenty-four feet in depth, and two stories high; terminating in end buildings, which project four feet in advance of each wing, and are thirty-one feet four inches in front, by twenty-eight feet four inches in depth, and three stories high, exclusive of the basement. From each of these end buildings, a wing, running south, at right

angles with the front, extends twenty-six feet eight inches in length, by twenty-two feet six inches in depth, and corresponding in height with the front wings.

The first story of the centre building contains four large rooms, divided from each other by halls running at right angles, one of which leads directly through the building from north to south, and has the staircase in it, while the other opens into each wing. The two front rooms are appropriated, the one as a parlour for the superintendent, the other as an office and receiving room; the two in the rear, which respectively communicate with the wing of the side on which it is situated, are used as day-rooms for the patients. The second story of this building also contains two large rooms, situated with respect to the wings like the two below, and like them appropriated as day-rooms for the patients, besides which, there are four smaller rooms used by the family of the superintendent. There are four large, and three smaller rooms in the third story. One of the larger is occupied by the resident physician, and one as a sitting room for the convalescent female patients; the apothecary shop is also on this story. The wings each contain twenty good-sized rooms for patients, with a lobby or passage ten feet wide, running the whole length in front of them, at the extremity of which is the staircase. The end buildings, or lodges, as they are called, though united to the wings by the front wall, yet have their other walls entirely distinct; and in the lower story, are separated from the wings by a passage five feet wide, leading to the airing yards. Immediately over this passage, is the staircase leading from the second to the third story of the lodge. The rooms, both in the body of the lodges and their wings, are on the west side, with an entry six feet wide running in the rear of them on the east side; these entries are lighted by a window at each end, the wall on the side next the wings being unbroken and of extraordinary thickness. This separation of the two lodges from the rest of the building, is for the purpose of preventing the transmission of sound, and is found effectually to prevent the convalescent and quiet patients, who are kept in the wings, from being injured or annoyed by the noise of the violent and unruly ones, who are confined to the lodges. The first story of the lodges contains the bath rooms, a day room and two rooms for patients; the other rooms in the different stories, for the accommodation of the patients and their care-takers, are about twelve feet square.

In the centre building are the refectory, kitchen, ironing-room, and store-room; rooms for cooking, washing, &c., are adjoining under the wings, where also are the furnaces; furnaces are likewise located in the basement of the lodges. The whole building is covered with slate, and may be said to be nearly fire-proof. The basement story is paved with brick or flags, and arched, while the bottoms of the floors, and the joists in all parts

of the house are thickly plastered with mortar, and then ceiled in the usual manner. In all parts of the building accessible to the patients, the window sash is of cast iron, and stationary. The lower one in each window is glazed, and outside of the upper is a wooden sash, glazed, which is hung, so as to be raised or lowered at pleasure. This arrangement, while it ensures security from escape, prevents the appearance of a place of confinement. The rooms in the centre building, and the patients' day rooms, except those in the lodges, are warmed by means of stoves and grates. The wings and lodges have heated air, conducted from the furnaces before mentioned, as located in the basement story, into the lobbies and each room. The openings for the admission of the warm air into the rooms, are near the ceiling, and covered with wire-gauze, and the air can be stopped off at any time by means of dampers, situated so as to be regulated only by the attendants. Some of the rooms are provided with shutters for the exclusion of light when required, as also with wire protection to the glass.

Immediately under the roof in each wing is a large reservoir for water, supplied by means of a forcing-pump, from a never-failing stream, which issues forth a short distance from the house. From these reservoirs the water is conveyed to the bath rooms, and various other parts of the building.

The great extension of front in a building intended for the accommodation of but sixty-five patients, was deemed necessary in order to give to each, a separate, well proportioned room, having all the advantages to be derived from the free admission of light and air. Where the rooms are arranged on both sides of an entry of the usual width, these two essential requisites to health and cheerfulness cannot be commanded; added to which, the patients occupying opposite rooms are very liable to be mutually annoying, and in every respect (unless it be that of saving money), that mode of building for the insane is highly objectionable. On this account the plan adopted at the Friends' Asylum is worthy of imitation.

On one side of the wings are situated the chambers, ten feet square, each having a window, four feet six inches in height, by two feet ten inches in width. These rooms open on to the lobby, ten feet wide (as before mentioned), and directly opposite the door of each room is a window corresponding in size with that in the room. Over each door is fixed a cast iron sash, thirty-two by twenty inches in size, fitted with a moveable glazed sash, to be opened or shut at pleasure. By this arrangement, a full supply of light and a free circulation of air are secured, and the lobbies being comfortably warmed in cold weather, they afford pleasant places for walking and exercise of different kinds.

The kitchen and refectory, situated on the back part of the basement story of the centre building, open on to an area, which is fifteen feet wide

opposite the centre building, and connects with one ten feet wide running the whole length of the western, and past that of the eastern wing. These areas are paved with brick, and have a well, fitted with a pump in them. The outside of the area is sodded, and rises regularly to a level with the garden and yards in the rear.

A neat vestibule, having its sides enclosed with Venetian shutters, sixteen feet in length, and corresponding in width with the large hall running through the ground floor of the centre building, is thrown over the widest part of the area, and leads directly into a flower-garden. In the rear of the wings and lodges are the airing yards, each surrounded by walls ten feet in height, enclosing about half an acre of ground, for the use of such of each sex, as are not well enough to be allowed to walk, unattended, in the gardens and pleasure grounds. Each yard is subdivided by a board fence, cutting off about one-third of it; into which the idiotic and filthy patients are put, that they may not offend those who take more care of themselves. These yards are made pleasant with trees and summer-houses, the passages leading to them, as before mentioned, are between the wings and end-buildings. The entrances to the privies are from these yards: a door opening through the wall into them; there are no water-closets or other accommodation of the kind, within the buildings. Between these yards is a large flower-garden, and immediately beyond them the vegetable garden; the two containing about two acres of ground. At the termination of a gravel walk leading directly from the house through these two gardens, at the distance of about three hundred feet, is an ornamental house, surrounded on all sides by a piazza, fitted up as a library and reading room, and containing numerous specimens of natural history, maps, drawings, &c. &c., affording a most agreeable resort for such patients as may be considered by the physician well enough to enjoy it.

Over the spot where rises the stream that supplies the institution with water, at a short distance from the eastern end of the building, is erected a stone house, two stories in height, beside a basement; the lower story of which contains a forcing-pump so arranged, as to be easily worked by four of the patients; while the upper one is fitted up as a work-shop, with a turning lathe, tools, &c. Here many of the patients find interesting employment.

Connected with the various buildings described, is a farm of sixty-one acres, the greater part of which is under cultivation, and by giving the patients the opportunity for various agreeable and active out-door employments, affords the most powerful means for their restoration to health and reason. The woodlands cover about eighteen acres of ground, and are made up principally of the chestnut, beach and oak, affording a deep and delightful solitude and shade. A broad serpentine walk, more than a mile

in length, winds throughout them, and a large summer-house and seats in various situations, are provided for the accommodation of the patients. Near the entrance to the woods, and enclosing a small part of them, is a park containing some fine deer.

Experience having proved that the comfort and cure of the insane are materially affected by the construction of the building in which they are placed, numerous plans have been suggested and acted upon, each of which has its admirers. All however who have had any practical knowledge of the treatment of those labouring under the disease, and their liability to be acted upon by the objects which surround them, unite in the sentiment, that that plan will prove the best, which, with equal conveniences, combines the most means for introducing well-adapted employment and exercise, with the best arrangement for an extensive classification which can be kept permanently distinct.

Where the conveniences for classification are wanting, the most lamentable consequences must necessarily be witnessed even in institutions which may otherwise be conducted in the most unexceptionable manner. The employment of moral remedial means, is either absolutely precluded or rendered nugatory, when the patient upon the first dawn of reason feels the horror of being constantly surrounded by his pitiable associates, in all the different gradations of maniacal phrenzy and idiotic imbecility. These evils are guarded against at the Asylum by such a classification as is allowed of by the arrangement of the building.

The male patients occupy the eastern, and the female the western side of the house, both sides being arranged alike. The end buildings, or lodges, are occupied (as before mentioned), exclusively by the noisy and imbecile. Such of them as are fit to be out of their own rooms, have the liberty of a well-lighted and cheerful day room, situated in the southern extremity of the lower story of the wing of the lodge. Another class of patients occupy the lower story of the main wing, and have for their sitting room the large room described as forming part of the lower story of the centre building. The upper story of the wing is devoted to a third class who are more nearly well, and such as show no violence, and conduct themselves generally with propriety; they likewise have a day room for their peculiar accommodation, situated on the second story of the centre building, corresponding with the one below. All these patients, however, have access to the same yard, excepting that the worst are confined to a small part of the yard, which is boarded off, as before described.

For the accommodation of such of the females as are nearly restored, there is a large room in the third story of the centre building fitted up as a drawing room, where they can pursue their various amusements and employments entirely undisturbed by the other inmates of the house. There

is no such room for the men, but the same class of patients among them, usually resort to the library, when circumstances will not admit, or they are not disposed to walk abroad. Such of the patients as do not eat in their own rooms, take their meals in the day rooms attached to the respective parts of the building where they are placed.

The government of the institution is lodged in the hands of a steward and matron, and resident physician, whose whole time is devoted to fulfilling the various duties of their respective stations. An attending physician visits the patients regularly twice a week, and as much oftener as the urgency of a case may require. A Board of twenty Managers, appointed yearly by the Association, have the supervision of the whole, and by a committee of three, inspect every part of the establishment once in each week.

In the treatment pursued at the Asylum, endeavours are used, so to combine medical and moral agents, that each shall render the other its most efficient aid, and jointly exert their remedial powers with the greatest certainty and effect. The therapeutical treatment of course varies according to the disease, which by affecting the brain, disturbs the manifestations of the mind. An accurate account of such treatment and its results, is constantly kept, and at some future day may afford data for ascertaining the relative advantages of the course pursued.

The moral means employed are various. Where it is found necessary, mild and gentle yet firm restraint is imposed, while the earliest gleams of returning reason are watched and cherished.

In the house, there are provided, games of different kinds; reading, writing, drawing, &c. The females sew, knit, quilt, &c. The library is furnished with books, periodicals, drawings, &c. Exercise in the open air is always promoted, and the patients encouraged, whenever the weather will permit, to engage in walking and riding. A carriage and horses are always in readiness, morning and evening, for their accommodation. In the lawn fronting the house, is located a circular rail-road about four hundred and fifty feet in circumference, with a pleasure-car on it, large enough to accommodate two, which is moved by hand. Riding upon this road is a very favourite amusement, and as it is attended with considerable exercise, it is found highly advantageous. Every exertion is made to interest the male patients in gardening, and in the various employments afforded in the cultivation of the farm. The diet of the patient of course varies according to the prescription of the physician, but in general it is plain and nutritious; fresh meat and a variety of vegetables being served up every day. Tea, coffee, and milk are all abundantly supplied.

The Asylum was opened for the admission of patients in the 5th month of 1817, and the following table exhibits the number, sex, and social state of those received yearly, up to the conclusion of 1838.

Year.	Whole number.						Year.	Whole number.							
	Men.	Women.	Single.	Married.	Widows.	Widowers.		Men.	Women.	Single.	Married.	Widows.	Widowers.		
1817	18	9	9	13	5	0	0	1828	18	8	10	9	6	3	0
1818	21	13	8	9	9	2	1	1829	19	10	9	11	7	0	1
1819	17	10	7	10	5	0	2	1830	19	12	7	11	6	0	2
1820	23	13	10	14	8	1	0	1831	28	14	14	15	10	2	1
1821	22	13	9	15	5	2	0	1832	33	21	12	15	18	0	0
1822	20	6	14	13	5	2	0	1833	24	10	14	10	5	9	0
1823	18	10	8	10	7	1	0	1834	40	20	20	16	21	3	0
1824	18	10	8	10	5	2	1	1835	53	24	29	25	16	8	4
1825	28	13	15	12	9	5	2	1836	56	31	25	30	22	4	0
1826	26	15	11	12	8	4	2	1837	49	29	20	24	24	1	0
1827	21	10	11	10	8	3	0	1838	63	30	33	32	25	5	1

Whole number of admissions,	-	-	-	-	-	634
“ Men,	-	-	-	-	-	331
“ Women,	-	-	-	-	-	303
“ Single,	-	-	-	-	-	326
“ Married,	-	-	-	-	-	234
“ Widowers,	-	-	-	-	-	17
“ Widows,	-	-	-	-	-	57
Of these there were below 20 years of age,	-	-	-	-	-	28
From 20 to 30 years,	-	-	-	-	-	187
“ 30 to 40 “	-	-	-	-	-	141
“ 40 to 50 “	-	-	-	-	-	126
“ 50 to 60 “	-	-	-	-	-	83
“ 60 to 70 “	-	-	-	-	-	48
“ 70 to 80 “	-	-	-	-	-	15
“ 80 to 90 “	-	-	-	-	-	5
“ 90 to 100 “	-	-	-	-	-	1

634

Of these 634 admissions, 127 were re-admissions granted to 81 individuals, and leaving 507 *persons* who have been under care.

The following table shows the duration of the disease at the time of admission of these 507 cases, and the results of treatment.

Duration.	Number.	Restored.	Much Imp.	Improved.	Stationary	Remaining	Died.
Less than 1 year,	261	152	26	27	18	4	34
From 1 to 2 years,	57	18	8	8	9	7	7
From 2 to 3 years,	36	17	3	3	4	5	4
From 3 to 5 years,	45	14	7	6	9	3	6
From 5 to 10 years,	47	13	7	3	8	11	5
Over 10 years,	61	0	7	5	22	13	14
Aggregate,	507	214	52	52	70	43	70

The proportion of cures in these cases is 42.21 in every hundred; but if we deduct the sixty-one cases, which at the time of admission had been deranged over ten years (and which included twenty who either were idiots, or had been imbecile from puberty), five cases complicated with epilepsy, and five which entered the institution with the paralysis peculiar to the insane, it leaves 436 cases, properly subject to treatment, and the cures are in the proportion of 49 in every hundred.

The per centage of cures in cases of less than a year's duration, taking the whole twenty-two years is 58.23. Within the last six years, it has been 66. Nearly all of this class, discharged as "much improved," were almost well; but either pecuniary considerations, or the anxiety of their friends, occasioned their removal as soon as the disease was so far overcome as to render their perfect restoration probable; and in many instances information was afterwards received of their perfect recovery.

Of the seventy deaths, six occurred within a week of the time of their admission; nine within two weeks; seven within three weeks; and three within four weeks; these were mostly cases of acute inflammation of the brain, or its meninges, many of them being brought to the Asylum after all hope of relieving them at home was abandoned. Ten died between a month and a year's residence, and the remainder varying from one year to twenty.

Of the eighty-one patients re-admitted, there were discharged

Restored,	-	-	-	-	-	-	36
Much Improved,	-	-	-	-	-	-	4
Improved,	-	-	-	-	-	-	6
Stationary,	-	-	-	-	-	-	7
Died,	-	-	-	-	-	-	17
Remaining in the House,	-	-	-	-	-	-	11

Twenty-two returned a third time; of whom there were discharged—Restored, 14. Improved, 3. Stationary, 3. Died, 3—and one remains in

the house. The other re-admissions, were of three individuals, who being liable to periodical insanity, have been accustomed to resort to the Asylum at the commencement of an attack, and to remain there until again restored to the use of their reason.

The following table exhibits the ages of the persons re-admitted, and the duration of the attack at the time of their first admission.

Age.	No.	Duration of Disease.	No.
Below 20 years,	2	Less than 1 year,	39
From 20—30	24	From 1 to 2 years,	7
From 30—40	21	From 2 to 3 years,	7
From 40—50	15	From 3 to 5 years,	7
From 50—60	10	From 5 to 10 years,	10
From 60—70	4	Above 10 years,	11
From 70—80	4		
From 80—90	1		
	81		81

Forty-one of the eighty-one had been originally discharged cured. The interval between the discharge and re-admission, was as follows.

Less than three months,	17	of whom 8 had been discharged cured.
Between three and six months,	9	of whom 2 do.
“ six months and 1 year,	14	do. 11 do.
“ 1 and 2 years, -	11	do. 8 do.
“ 2 and 3 years, -	8	do. 2 do.
“ 3 and 5 years, -	7	do. 4 do.
“ 5 and 10 years, -	13	do. 5 do.
Over 10 years, - -	2	do. 1 do.

In some of the cases where this interval was so short as to be within three months, the second indisposition should no doubt be considered as a *relapse*; the organs not having been restored to perfect soundness after the original attack. But when we recollect how prone an organ which has once been diseased, and especially the brain, is, to resume the morbid action upon the occurrence of even a trivial cause, and also that that organ is liable to be affected not only by the causes which produce disease in other parts of the system, but likewise by the moral feelings and emotions of the mind; it is not to be wondered at, that a *recurrence* of disease should often be witnessed where persons are taken from the seclusion and regular habits of an Asylum, and ushered into the cares and excitement of society, as soon as healthy action is believed to have been restored. It is a difficult

matter to convince a patient, or his friends, that prudence dictates his stay should be prolonged for a considerable time after he is apparently well, yet it cannot be doubted, that where such a course is pursued, the security of health is greatly increased.

As has been before observed, the Asylum was originally intended for the accommodation of those in membership or profession with the Society of Friends alone; and it continued thus exclusive, until the year 1834, when the contributors withdrew the restriction, and opened the institution for the benefit of all, with the proviso, that "in no case should a member or professor be excluded."

An accurate record of the place of nativity of each patient, and whether member or not, has been kept from the opening of the institution. By this it appears that the average number of the members of the General Meeting of Friends held annually in Philadelphia, which were under care (including idiots) during the first ten years in which the Asylum was opened, was thirty-one. That meeting includes the greater part of Pennsylvania, New Jersey and Delaware, and during those ten years was composed of between twenty and twenty-three thousand members; which, taking the medium, twenty-one thousand five hundred, which I believe is nearly correct, gives the proportion of one in every six hundred ninety-three and a half. In 1827, a large body seceded from that meeting, and its numbers are not now so accurately known; the ratio, however, has not increased.

Dr. Burroughs in his Commentaries, gives currency to the opinion that insanity occurs in a greater proportion among the members of the Society of Friends, than the population generally, and assigns as a reason, their intermarriage with each other. This however would be entirely insufficient to account for the greater prevalence of the disease among them, if such were really the case, as in Great Britain, from whence he draws his data, there are nearly if not quite twenty-five thousand members; a number so large as to do away the probability of its being attributable to hereditary taint.

As the records of the two institutions for the insane, belonging to the Society, show that intemperance and want, so productive of mental derangement among others, cannot be assigned as the causes of it, in more than one case in every hundred and fifty occurring in the members of that society, and as they are known to be exempted, at least equally with others, from the sources of anxiety which disturb the social state; there would appear to be no other causes for the disproportion of diseases affecting the manifestations of mind, did it really exist, than either defective cerebral organization, or some peculiarity in their religious principles or practices. The former, no one will believe to be the case, and religious mania, as it is commonly but improperly called, is a form of the disorder which so rarely occurs among them, that as a community they may be said to be almost exempt from it.

The true reason of the apparent disparity in the proportional number of those afflicted with derangement in that society, and the community at large, lies in the very defective statistical information obtained of the latter relative to a disease which the ignorance and prejudices of the people lead them to conceal, and upon which incorrect data, a false estimate has heretofore been made. While in the Society of Friends, an accurate knowledge of all the members, liberal provision for the support of their poor, and institutions for its cure under their own care and government, bring nearly every case of idiocy or insanity which occurs among them, under notice.

