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Progress in the Care and
Colonization of Epileptics.



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presented by the author

PROGRESS IN THE CARE AND COLONIZATION OF EPILEPTICS.¹

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DURING some years' residence as First Assistant Physician at the Hudson River State Hospital for the Insane, I became deeply impressed with the necessity of separate provision for epileptics. I had in the neighborhood of thirty or forty epileptics under my charge, some of whom could scarcely be called insane, although legally committed as such, for the reason that there was no other sort of hospital which would receive them. I noted at the time the unpleasant effects such patients would often have upon my other patients who were convalescing from various forms of insanity, and I believed it wrong in every way that cases of mental disease should be subjected to intercourse with persons who were often peevish and disagreeable and mischievous, and who also often caused general excitement and distress by falling in convulsions in the wards or in the sitting-rooms, or at the tables at meal time. Afterward I grew to feel the need of separation on their own account. I saw that something had been done for the care or improvement in greater or less degree for almost every defective class, for the insane, for idiots, for the deaf and dumb and blind, for the sick and the crippled, for the aged and infirm, for young malefactors in reformatories, for the negro and for the Indian. But the sufferer from epilepsy had been left to shift for himself, often an outcast from his family, usually expelled from the schools, denied industrial employment, shunned to a great extent by his fellows, left to grow up in igno-

¹ Read before the American Neurological Association, June 22, 1892, and before the Association of Superintendents of the Poor of New York State, at Utica, August meeting, 1892.



rance and idleness, companionless and friendless, a prey to one of the most dreadful and hopeless of maladies, refused admission to general hospitals, and only at last given refuge in either an almshouse or insane asylum.

He was driven to find shelter in an asylum, not, as a rule, because he is deprived of reason, but because there is no other place for him to go. There are thousands of epileptics in insane asylums to-day who do not belong there, for many will be found among them who are not insane, and it is an injustice to them as well as a detriment to the insane, to associate the two classes.

The question of separate provision for epileptic patients deserves, therefore, at our hands particular consideration, since, from the peculiar nature of the disease, it involves not only their treatment by skilled experts, but also their education for the ordinary pursuits of life; for epilepsy is a remarkable malady. It robs the victim of his mental and physical powers for a comparatively small period of time, sometimes but for a few minutes in a week or a month, and at the most but for a limited proportion of the patient's daily activity. It is not a continuous disease; and terrible as are the few moments of fainting and spasm that come upon the sufferer unexpectedly, they do not necessarily incapacitate him for all of the duties and pleasures of life.

It is, indeed, true, that in the course of years epileptics may become mentally enfeebled by the frequent recurrence of these seizures; but this is often due not so much to the ravages of the malady itself as to the unfortunate social conditions to which the invalid becomes subject. His attacks do not permit of his being among his fellows in school, and when he has grown to manhood no one will give him employment. He cannot go to church, he is excluded from the schools, no one will bear him company, work is denied him, and as he grows in years he is a burden to his family. Small wonder, then, that he degenerates morally, that his intellect is stunted, that he learns no trade, and that he finally drifts to the only places that our public charities afford him for shelter,

to almshouses and insane asylums, where the hapless creature sinks into deeper apathy and profounder mental decay.

This is no overdrawn picture, nor does it concern a very limited number of persons. There are at this present moment over 1,000 epileptics who are inmates of insane asylums and almshouses in this single State of New York; and there are many thousands more in the State who, more fortunate than their brethren, are, through the help of friends and relatives, or because of the infrequency of their attacks, permitted to support themselves or to remain in their families. It is estimated that there are fully 120,000 epileptics in the United States.

There is but one kind of institution which can meet the case of those who suffer from this disease. No asylum, no large hospital, no single vast building in a great city, is appropriate for the purpose. It must be an establishment combining many unusual features. It must have schools and teachers for the education of the young epileptics; it must have offices, shops of all kinds, stores, dairy, farm, gardens, granaries, for as they grow up these patients should acquire trades or professions; it must have a group of small hospital and asylum buildings where such as are sick or mentally infirm may be cared for; it must have skilled physicians; it must have a church, a theatre, a gymnasium, and a bathing establishment; it must have, finally, a pathological laboratory presided over by the keenest pathologist obtainable, so that in the course of time a cause and a cure may be discovered for this terrible disease. Such a place would not be a hospital in the ordinary sense of the term; it would be a village in itself, a colony for epileptics.

In 1886 I was granted a leave of absence for some months from the Hudson River State Hospital, to spend in the examination of European Hospitals and Asylums,² and among these institutions one interested me above all

² Some European Asylums: *Am. Journal of Insanity*, July, 1887.

others, viz., one that seemed to realize my ideal of what separate care of the epileptic should be—the colony for epileptics at Bielefeld, in Hanover, Germany. As soon as I returned home I published a description of it in the *N. Y. Medical Record* for April 23, 1887, afterward elaborating it in the *Journal of Nervous and Mental Disease* for December, 1889.

This deservedly famous colony was founded some twenty-six or twenty-seven years ago by a Lutheran clergyman, Pastor von Bodelschwingh, who by the way is not only known for this wonderful charity, but stands in high repute among social economists for his attempts to rescue the tramp in his *Arbeiter-Colonien*.

This wise and beneficent man began his epileptic colony with four patients on a small farm near Bielefeld. To him, as to others doubtless also, had occurred some of the ideas mentioned above, and he determined to carry out practically his conceptions of what proper provision for this class should be.

It seemed to this benignant man that it was feasible to create a refuge where these sufferers might be cured, if curable; where their disease might be ameliorated, their intellectual decay prevented; where they might have a comfortable home if recovery were impossible; where they might develop their mental faculties to the utmost; might acquire trades, or engage in whatever occupation they cared to choose; finally growing into a community of educated, useful, industrious, prosperous and contented citizens. From that small beginning there has been a gradual evolution and expansion of the colony. In 1878 it had 250 epileptics; in 1880, 458; in 1882, 556; in 1886, 830; and at the time of this writing considerably over 1,200.

During the twenty years from 1867 to 1887, 2,407 epileptics had been received and treated at the colony. Of these 156, or 6½ per cent., were discharged recovered, and over 450 improved.

One of the chief features of the colony is the system of decentralization, the division of the patients as much

as possible into small families, occupying cottages, the separation of the sexes, of the feeble-minded from those with normal mental faculties, separation according to age, social standing, former occupations, etc.,—a system likewise applicable, I may say, to the insane in the ideal psychopathic hospitals of the future, and already to some extent applied in the Saxon institution Alt-Scherbitz, and in the new *Manicomio di Roma*.

For the purpose of securing a sufficient number of male and female nurses, and of a superior order of kindly and sympathetic care, it was deemed expedient to found at the Bielefeld colony also nurses' training schools, and as a result of this, not only have they well-trained brothers and sisters forming an order of deacons and deaconesses for their own use, but they have been enabled to supply various hospitals and insane asylums with a high class of care-takers. For my own part, and from my experience in institutions, I shall always feel that the highest order of care and nursing for such unfortunates as the insane and epileptics can only be obtained by the employment of those who enter upon these most arduous of duties from a deeply religious motive.

When I visited it it consisted of fifty-five houses and cottages scattered in pretty gardens over some three hundred and twenty acres of beautiful woodland and meadow. It was like a country village.

Here schools are to be found in which instruction is given in all the branches usually taught in ordinary public schools, and opportunities are afforded for even higher studies in the languages, arts and sciences for those who desire them.

Here are stores and shops of many kinds, such as a seed store, grocery, drug store, joinery, bakery, tailor shop, paint shop, locksmith shop, blacksmith shop, foundry, tin shop, shoe shop, saddlery, dairy, brickyard, printing office and bookbindery. Floriculture, agriculture and fruit-raising require large numbers of epileptic employees.

Some of the houses have been planned by epileptic

architects, the brick made by sixty epileptic patients at the brick-kiln, the masonry done by epileptic workmen, the woodwork made by their own carpenters, the iron work by their own smiths, the painting, glazing furnishing by their own adepts in these various trades.

For men alone there are over thirty different callings.

The women are busied with the manifold cares of the households, manufacture of wearing apparel and bed-linen, and the rearing of flowers and garden produce.

Thus it will be seen how nobly philanthropic has been the conception and carrying out of this project. And it is not only in the multiplicity of occupations that the genius of its conceiver has been made manifest, but also in all those avocations that tends to divert the minds of the patients from contemplation of their misfortunes. Games and amusements are many; walks in the groves and gardens; out-of-door sports; evening entertainments; singing schools; an orchestra made up from their own number; a museum for the collection of stamps, coins, gems, autographs, bronzes, antiquities, articles of ethnographic or historical interest, and specimens from the animal, vegetable and mineral kingdoms—all have been carefully thought out for the perfect evolution of this little social world.

When the evil disorder attacks one in the field or garden, willing hands are near to attend to him, and every workshop and schoolroom has its cushions within convenient reach on occasions of emergency.

Taking the Bielefeld colony as a model, nine other epileptic colonies have been established in Germany, one in Holland; one in Switzerland; and one institution for epileptics was created by a French clergyman, John Bost, near Lyons, in France, some forty years ago, but it has not the model village character of that of Bielefeld.

Up to the time that I began the propaganda for such an establishment on the colony, or at least villa system, in April, 1887, absolutely nothing had been done for the special care of this class of dependents in this country—either privately or by State authorities, but it is fair to

say that as long ago as 1869 the Board of State Charities of Ohio had the matter in mind and wrote thus in their second annual report:

“In view of the foregoing statements—for the sake of the epileptics as a class, as well as for the sake of their immediate friends and society at-large—the Board feel that some provision ought to be made whereby the comfort of the one and the safety of the other could be secured. . . . An asylum consisting of a farm, ample in size and productive in character, upon which plain, neat and substantial pavilions might be erected, under the general direction of an accomplished agriculturist and of good administrative ability, aided by efficient skill and competent foremen and attendants, would fully meet the demand.”

In 1890 Governor Campbell appointed a committee to select a site and prepare plans for an institution for epileptics, and this commission visited me in New York in that year for suggestions as to these matters. On Nov. 12, 1891, General Brinkerhoff, President of the Ohio Board of State Charities, laid the corner-stone of the first special separate State Hospital for epileptics in this country at Gallipolis. Here a good farm site had been selected and plans for a model institution on the pavilion plan have been made, in which as many of the ideal details mentioned above as possible have been carried out.

The Board of Trustees of the California Home for the Care and Training of Feeble-Minded Children, at Santa Clara, has caused to be erected the first of a series of separate pavilions for epileptics (Sixth Annual Report for the year 1890, by Dr. A. E. Osborne).

Massachusetts and Pennsylvania have also interested themselves in the movement.

In New York excellent progress has been made. In 1890 I was able to secure the influence of the N. Y. State Charities Aid Association, and Dr. Jacoby and myself were appointed a sub-committee to report to that body upon the subject of State Provision for Epileptics. From this report I make the following abstracts:

Of the various plans which have been suggested as useful for the care of epileptics, the following only are worthy of consideration :

- (1) The creation of special colonies.
- (2) Special hospitals for epileptics.
- (3) Epileptic wards in existing insane asylums.

It has been practically shown that the first mentioned of these plans is not only the most feasible one, but can be made to fulfill all legitimate demands.

That hospitalization is impracticable is the opinion of all who have investigated the subject ; those epileptics who are only slightly affected by their disease will not remain in a hospital without occupation and systematic employment, and those who are severe sufferers with marked mental affection cannot be kept there. Even the care of simple epileptics without any insanity differs greatly from that of any other class of patients, and makes their care in any hospital a difficult matter. With the organization of epileptic wards in general asylums matters are in the same unsatisfactory condition. The plea of certain supporters of the asylum system, that every epileptic should be legally placed in confinement, because he is either insane or may become so eventually, is a plea which is contrary to every principle of right and wrong. If a hospital for epileptics were consolidated under one management with an asylum, it would be necessary to make a distinction between temporarily mentally deranged epileptics and purely convulsive ones, a distinction which is decidedly artificial, as thus the temporarily mentally disordered epileptic would be constantly transferred from hospital to asylum and from asylum to hospital. On the other hand, the entire question can be solved by the creation of colonies, the admission to which is not to be regulated by the mental condition of the patient, but in which after admission a classification could be made of those afflicted with severe mental defects, of those who are able to work, and of those requiring education. Further classification, according to general aptitude, frequency of attack, tempera-

ment and educational status, would, of course, be advisable. The main principles to be observed in the organization of such a colony would be :

(1)—Land.—To consist of at least 200 or 300 acres of farm and woodland, well adapted to agricultural and horticultural pursuits. This land should be situated near a large city, not only on account of convenience of access, but on account of facilities for obtaining expert advice and study.

(2)—Small buildings, cottages.—These to be arranged into separate divisions for the male and female patients ; each of these divisions to make provision in separate cottages for the demented, the feeble-minded, the convalescents, the school children, the workers and private patients of the higher classes.

(3)—Larger buildings.

(a)—A hospital or infirmary for the sick, injured and mentally affected, Every patient, without exception, should be placed under medical care, and at least a systematic attempt should be made to cure the disease.

(b) An educational building for epileptic children.

(c) Workshops for adult epileptics.

(d) Farm buildings, dairy and granaries.

(e) A special laboratory for the study of epilepsy by an expert pathologist.

The State Commission in Lunacy in their third annual report spoke very favorably of the subject, and although a bill failed to pass the New York Legislature in the winter of 1890 and 1891, I am happy to say that this last spring a law has gone into effect giving power to the State Board of Charities to select a site and prepare plans for the establishment of such an institution as is required by these wards of the State. The following is the law in question :

HOSPITALS FOR EPILEPTICS.

CHAPTER 503 OF THE LAWS OF 1892.

AN ACT providing for the appointment of a Commission to locate an institution for epileptics in the State of New York.

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

SECTION 1. The Commissioners of the State Board of Charities are hereby directed to select a suitable site in the State of New York, on which to establish an institution on the colony plan for the medical treatment, care, education, and employment of epileptics.

SEC. 2. The said Commissioners of the State Board of Charities shall have power to receive by gift or to contract for the purchase of such site for the location of buildings of said institution, subject, however, to the approval of the next Legislature, to whom they shall report their action in the premises within ten days after the commencement of the session, together with plans and estimates for constructing buildings suitable for the purpose named in section one of this act; such site to include not less than three hundred acres, and such plans to provide for the accommodation of six hundred inmates and to admit such further extension of the buildings as may be necessary to meet future requirements of the State in providing for the epileptics.

SEC. 3. The said Commissioners shall be entitled to the payment of their traveling expenses while engaged in the performance of their duties under this act, and their account for such expenses shall be audited and paid out of the treasury, but they shall receive no compensation for their services. And the sum of one thousand five hundred dollars, or so much thereof as may be necessary, is hereby appropriated out of any moneys in the treasury not otherwise appropriated, payable on the warrant of the Comptroller, for the purposes of this act.

This act shall take effect immediately.

Thus within a very short period of time a great advance has been made, and soon the hundred thousand and more epileptics of this country who hitherto have had none of the advantages of their brethren in the social struggle for education, livelihood and happiness will rejoice in the existence of several places where they can learn trades, acquire knowledge, be treated, perhaps be cured of their malady, and in any event have a pleasant asylum wherein to spend the years allotted to them. Who knows what benefit some of them may not confer in return upon humanity? These new opportunities given

them may well bring out in time talents and even genius that otherwise might have fallen into fatuity and decay.

Although it is not given to every epileptic to describe his own sufferings as Dostoiewsky does in his novel, "The Idiot," or to delight the world with music as did the epileptic Handel, or with comedy as did Molière, or with poetry as did Petrarch, or with military exploits as did Cæsar and Napoleon, or with religion as did Mahomed and St. Paul, still it is a consolation to those afflicted with this malady to know that epilepsy and genius may co-exist, and that the possession of the disease does not necessarily lead to mental or moral degeneration. The patient may not reach the highest position among mankind, but under the new dispensation he will not be debarred from any attainment in education, nor prevented from exercising all of his capabilities for his own support and for his own welfare and happiness.

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