

Wm. Bennett

# Traumatic Insanity

1.

I propose to analyse 1429 Cases of insanity occurring in males, & forming the total admissions during the last 17 $\frac{3}{4}$  years in a County Asylum in Kent, with a view to seeing what effect injury has had in the causation of their mental disorders.

Of these 1429 Cases traumatism, in some form or other, was believed to be the cause, or one of the causes, of their insanity, in 57 instances.

Of these, twelve were Cases of General Paralysis of the Insane. Twelve were epileptics, including two epileptic idiots. Two were idiots not epileptic, whilst the remaining thirty-one were Cases of ordinary insanity, & included four Cases of acute mania (not including all recent Cases under this head); four were suffering from melancholia, eight were chronic maniacs. Such Cases of mania with delusions (not necessarily chronic as regards duration on admission), & the remaining eight were in a more or less advanced state of dementia.

Taking the whole fifty-seven Cases, twelve were transferred from other Asylums, including one epileptic, one epileptic idiot, two idiots not epileptic, and the eight Cases of chronic mania. Their insanity had lasted for variable periods before admission into this Asylum, but they were all first attacks.

Of the other 45 Cases, in two instances the patient had been in another Asylum & recovered from an attack



of insanity, altogether remote from, and many years previous to, the injury, which was believed to have been the exciting cause of the attack for which he was admitted here. There were Cases 50 & 52 (numbered in order of admission), the former of whom had been in an Asylum 19 years, & the latter 26 years, previous to detention here, & had recovered from an attack of <sup>(insanity)</sup> insanity. In three other instances, the first admission here, is not entered as the first attack, viz. in Cases 30, 36 & 49.

Case 30 had been discharged from another Asylum (in which he had been placed three years previously, for melancholia & attempted suicide, & of which an injury was believed to be the cause) a few months before admission here, & had begun to relapse almost directly. In Case 49, although entered as the third attack, the patient had not been in an Asylum before. He is still alive, & from the history and nature of his insanity it is probably more correct to regard it as one attack with exacerbations. These same remarks also apply to Case 36, said to have had another attack shortly before admission.

With the exception therefore of Cases 50 & 52, all the remaining fiftyfive were practically admitted for their first attack of insanity, although some of the epileptics had had more or less severe outbreaks of mania, when fitly, which did not necessitate their being brought to an Asylum.



Heredity, direct or collateral, was ascertained in one general paralytic, one epileptic & in 6 other instances, making a total of eight, or a percentage of only just over 14, which is very small.

Intemperance complicated five Cases, viz one general paralytic, one epileptic & three others.

All the four melancholics were actively suicidal on admission; three had actually attempted self-destruction, & the other had obtained the weapon for doing so. Two other Cases 33 & 36 attempted suicide during detention in the Asylum.

There was a history of sunstroke in one general paralytic, & a family history of intemperance in another, although the patient himself was said to be temperate.

In three Cases the injury was to the spine. No. 14 being a general paralytic. No. 26 a transfer from another Asylum, & No. 40 a case of melancholia, the injury having been caused by a waggon wheel passing over the body & causing spinal paraplegia.

In three instances the injury was neither to the head nor the spine, but resulted in the loss of an important organ, thus No. 8 lost the fingers of the left hand & became melancholic suicidal, there being a strong history of heredity in this case.

No. 35 lost the sight of one eye & became moody, irritable & suspicious. He was discharged one year after admission, but readmitted the following year, his certificate stating that he had been insane all the time he was out, & dangerous.

No. 49 was caught in machinery, this left arm was

mangled so that it necessitated amputation through the upper third of humerus. This was the case, who was entered on admission as having had two previous attacks, the history, however showing, that soon after the injury he became pellen & more with outbreaks of passionate excitement in which he struck his daughters, these outbreaks had evidently <sup>been</sup> called the attacks.

In all the other cases the injury was either direct violence to the head such as blows on the head, or falls on the head, from horses, carts, scaffold, down a ship's hold, downstairs &c, or else indirect, not specially injuring the head externally, but being proof of the nature of a general shake, although in some instances these resulted in intracranial injuries such as hemorrhages, & included falls from stacks, scaffold, horses, cowyards &c, there being no comparison between the amount of visible injury & the effect on the mental condition.

In twenty cases there were records of the injury in the shape of fractures of the skull, & in four others in the loss of one eye, arm, fingers, in their respective cases, & in the spinal paraplegia. There is no doubt that sometimes signs of injury were unrecorded.

Including the Global Paralytic and Epileptics, thirtythree cases showed at some period of their insanity, either paralysis, loss of power, defects in speech or convulsions, & in many instances a combination of two or more of these. Deafness also was present in two of these cases, & in one other having no other accompaniment.

The deafness in all three cases seemed to be the result of the injury.

Of the 57 Cases, all the global paralytic are dead (12); this is also the case with 4 of the epileptics, (including one idiot) & with 14 of the other forms of insanity, including one idiot not epileptic. In all a total of 33.

Attention will be directed to anything noticeable regarding the deaths when considering each individual case.

Six were transferred to other asylums. Four of these were transfers on a demission here; one was an epileptic & the other an idiot not epileptic. One case was removed by friends <sup>not improved.</sup> Three recovered. No 31 aged 34. First attack, duration

one month, following six weeks illness and delirium, the result of a blow on the head. Temperate. Was excitable & irritable & had exalted delusions. Ordered special train for himself went to the Bank of England to see after his money.

In less than a month he had erysipelas over right eye & an inflammation of the same nature in the left leg, with abscess round the hip. He was ill for 3 months, & then gradually recovered & lost his delusions, & was discharged recovered 6 months from admission. Nothing more is known of him.

No 52, age 43. Police Prisoner. Was in an asylum at the age of 17. Five years previous to admission he sustained a fracture on the right side of his head, (parietal) through jumping out of the window of a railway carriage after a prison. Complained a good deal of headache over the site of injury &

had been pronounced off as unfit for the service. He gradually became moody, suspicious of being poisoned, violent & irritable. He also developed delusions with regard to being acted on by electricity. These had lasted some little time before admission. Four months after admission it is noted that he had unequal pupils & that his speech was slow. Twelve months after admission he had lost his delusions & his speech had improved. He was always complaining of his food or letters or something else. He was transferred to another asylum fifteen months after admission almost well, & was discharged recovered in two months time.

His previous attack no doubt rendered him more liable to mental derangement, after such a severe shock as his injury must have caused him.

Case 57 age 44. 1st attack, duration 1 month. Went on father's side was insane. Eight years previous to admission he fell from a scaffold & had concussion of the brain. A small quantity of drink has since this injury, been sufficient to upset him. He was suffering from melancholia & was suicidal on admission. He was discharged recovered in 2 months time having promised to take the pledge, but 2 months later he committed suicide by hanging, after having a little beer, not enough to intoxicate him. The injury in this case was of course only the indirect cause of his insanity. Fourteen of the cases are still alive in the Asylum. Ten of them are ordinary insaniates & have been here for periods varying from 4 to 24 years. Four are epileptics including one idiot. Six show signs of fracture of the skull & two of other injury.

Under the recoveries, it should have been mentioned that in three other instances the patient was discharged but readmitted again; in numbers 33 & 47 within one month of discharge, in number 35 in one year, after, the Certificate stating the patient had never been sane all the time. None of these can therefore be counted as recoveries, their readmissions being part of the original attacks.

I shall now briefly review the different forms of the disorder, beginning with the General Paralytic, the tables assisting in following the remarks being intended for no other purpose.

There were 12 general paralytic out of 57 Cases, or a percentage of 21.05. Compared with the number of general Paralytic admitted during the same period this would be about 6 per cent.

The average duration of each Case from the date of the injury to death was 4 years & 3 months, & varied from 1 year & 11 months up to 9 years.

It is probable however, that in several of the longer Cases, the period that elapsed between the injury & death, was a good deal in excess of the duration of the actual disorder. Thus in Cases 23, 25, 40 & 45 the duration on admission is uncertain. Number 23 is stated to have been queer over 5 yrs. He died 10 months after admission. Number 25. Had had nervous debility for 2 years. He died 5 years after admission. Number 40 had never been the same man since injury 7 years ago. He died 2 years

after admission. Number 45, had been changed for 2 years. He died 4 years & 7 months after admission. It may have been, that in some of these Cases the injury acted only, indirectly, & that some other Cause undetermined had been at work. That the injury had some effect seems probable. Number 40 ~~the~~ having the most indefinite of all the statements; there was in this Case a family history of intemperance, although the patient himself is said to have been temperate.

Case 42 had a cousin insane & was also intemperate.

Case 11 had a history of sunstroke & injury, & is interesting from having been diagnosed two years before admission as a patient, when he applied for engagement as an attendant.

No 53 is noticeable on account of the large size of the so called bacilliform cyst found on post mortem examination. In the Case of 45 there was a thin membrane representing the same pathological condition.

In Cases 15 & 18 six & 9 months only had elapsed on admission since the injury. It may have happened that the fall was in reality a symptom of the disorder & not the cause. With regard to diagnosis I shall have a word or two to say later on.

Two only of the general Paralytic's have been under my own observation viz Cases 45 & 53.

# Summary of General Paralytics.

9.

Case	AGE ON ADMIS <sup>n</sup>	attack	Duration of insanity on admission	History of	Total duration of insanity	Duration from date of injury to death
11	41	1	about 2 yrs	Stroke & injury from fall 1 yr. ago	between 2 & 3 years	about 3 yrs
14	35	1	Nearly 2 years	Injury to spine thrown from a County Jail	over 2 yrs	2 3/4 yrs
15	32	1	about 6 months	Injury from fall on head 6 months ago	about 2 yrs & 7/10 months	about 2 yrs & 7/10 months
18	30	1	Duration 3 months	Fall from a building 9 months ago	1 year & 5 months	1 year & 11 months
23	45	1	Just over 5 years	Fell & injured head 7 yrs ago. Unconscious for 3 days	about 6 years	7 years & 10 months
24	36	1	4 months	Thrown from a cart on to head a few months ago.	2 yrs & 4 months	2 yrs & a few months
25	49	1	Had nervous debility 2 yrs	Injury from fall on head 2 yrs ago	died 5 yrs after admission	just over 7 years
40	30	1	?	Injury to forehead by brick 7 yrs ago. Family history of Intemperance	Died 2 years after admission	9 yrs
			Never been the same person since the injury			

Case	Age	Attack	Duration of insanity on admission	History of	Total duration of insanity	Duration from date of injury to death
42	45	1	about 2 years	Injury due to fall down stairs Course was insane & irritable Ante-temperate Ten of his 13 children died of phthisis	about 2 years & 2 months	2 years & 3 months
45	51	1	? Disposition changed some time	Injury to head by fall off a stack 2 years ago	4 years & 7 months after admission	6 years & 7 months
48	38	1	18 months	Injury to head by fall 2 years ago	2 years & 10 months	3 years & 4 months
53	40	1	? about 12 months (in Union 6 months)	Injury to head 1 1/2 years ago	about 3 years	3 years & 5 months

# General Paralytics

11.

Case 11. P. B. age 41. Soldier. Admitted Jan. 6th 1877  
attack the first. Duration about 2 years. On May 17th 1875  
this man applied personally for engagement as head  
attendant at the Asylum. He came from the military  
hospital at Douv. Had been in the army service corps for  
22 years. He was diagnosed as a general paralytic, having  
unequal pupils, a hesitancy in his speech, & being atonic in  
his movements. Had had sunstroke abroad & had been  
invalided on account of a fall on his head received a  
year previous to ~~admission~~ <sup>application</sup>. He was not engaged as an attendant  
but was admitted Jan 6th 1877 in an advanced stage of  
General Paralysis having ptosis of left eyelid. He died  
on March 19th 1877. Duration of disease between 2 & 3 years.

Case 14. P. L. B. age 35. Lodging house keeper. Admitted  
Sept 12th 1877. Attack 1st. Duration 2 yrs. He received  
an injury to his spine through being thrown out of a  
conveyance two years ago. He was admitted in a state  
of great excitement. Talked of being possessed of millions & of  
having messages from the Queen. Previous to admission he  
had been violent & had assaulted his friends for trying to  
control his extravagant wishes. He had inequality of  
pupils, loss of control over his articulation, & was in an  
advanced stage of General Paralysis. He soon became  
quieter & was discharged into the care of his friends May  
1st 1878. He died at the end of June in the same year.  
His disease had lasted between two & three years.

Case 15. S. C. C. age 32 Coachman. admitted Oct 9th 1877. Attack the first. About 6 months previous to admission he had a fall on his head. He has been forgetful dull & heavy, & disinclined to talk & has used threatening expressions towards his child.

On admission was suffering from General Paralysis. He had the physical signs of this disease & was demented. He died Nov. 25. 1879. after a convulsion.  
Duration of insanity, between two & 3 years.

Case 18. F. J. F. F. age 30. Carpenter. admitted Jan 7th 1878. Attack the first, duration 3 months. Nine months previous to admission he had a fall from a building. For last few months (three or four) has neglected his work, quarrelled with his neighbours, then lavish with his money, & had to go to the workhouse where he was unmanageable. He had inequality of the pupils & a hesitancy of speech & was diagnosed as a General Paralytic. The case progressed rapidly, & he died March 7th 1879.  
Duration of disorder between 1 1/2 & 2 years.

Case 23. J. P. age 45. Army Pensioner. admitted Oct. 17th 1879. First attack, duration over 5 years. He sustained an injury to his head 7 years ago, & was unconscious for 3 days. Has been queer about 5 yrs. Sometimes loses the use of his limbs on admission. He was diagnosed as suffering from General Paralysis, being demented, & he died on Aug. 19th 1880. The duration of the disease having been between 5 & 6 years.

Case 24. R. W. P. age 36. General Dealer. admitted Nov 29th 1879. First attack, duration 4 months. a few months previous to admission, (date uncertain) he was thrown from a cart on to his head. He has complained of severe headache & giddiness. Has loss of memory. Has had fits while walking in the street, & will assault women & girls whom he meets. His father died in a 'paralytic' fit. On admission, he was diagnosed as a General paralytic. On Nov 26th 1881 he had a series of convulsions in which he died. Duration of disease about 2 1/2 years

Case 25. C. G. age 49. Boilermaker. admitted Jan 14th 1881. First attack, duration 2 years. Since having a fall in which he injured his head has been unable to work from nervous debility. On admission, had inequality of the pupils, & was rather deaf. He had delusions of his wife's fidelity & was mentally imbeciled. He had slight attacks of paralysis at times. On Oct 15th 1883 had a fit. His speech became very drawing, & he was tremulous in his movements. On Oct 6th <sup>1884</sup> he had a succession of convulsions. On Feb 2nd 1886 he also had another series, & died on the 4th of the same month, having been diagnosed as a General Paralytic. The disease having lasted between 6 & 7 years. A P. M. was objected to.

Case 40. J. G. age 30. Captain of a barge. admitted Dec 7th 1885. Family history of intemperance. Has been temperate himself. Had a brick thrown at him in 1878 which injured his forehead. Has never been the same person since. On admission was demented. A General Paralytic. Had ideas of wealth & grandeur. Habits dirty. Gait feeble & tottering. Articulation impaired. Pupils unequal. 1886 July 23rd. Lost power in his right arm & leg. Aug 25th 1887. Had an attack of Convulsions. Died Dec 21st 1887.

Case 42. S. J. S. age 45. Married. admitted Jan 13. 1886. A cousin was insane. Has been intemperate at times. Ten of his thirteen children have died of Plethoria. Attack the first. Two years ago he fell down some steps at a station & his present attack dates from this event. Has had one or two fits. On admission was suffering from General Paralysis. Was demented. Speech & gait affected. Died on March 24th 1886. Duration about 2 1/4 yrs.

Case 45. J. B. age 51. Labourer. admitted Nov 1st 1887. First attack. Fell off a straw stack & injured his head 2 yrs. ago. His disposition has been changed since. Subject to severe headache. Has recently been in prison for stealing a gun. On admission. Had delusions of wealth. Was worth millions. Memory impaired. Speech tremulous. Violent at times. April 17. 1892. Fell & fractured his right femur, being very feeble his speech almost unintelligible.

The fractures united. He died June 13th. 1892.  
 There was a thin membrane beneath the dura, a  
 so-called pachymeningitis haemorrhagica.

Case 48. C. W. age 38. Bookbinder admitted Feb.  
 1888. Injured his head by a fall 2 yrs ago. Is  
 very irritable. Suffers much from headache. The  
 least noise upsets him. Attack first duration, 10  
 months. When first ill endeavored to shoot his mate.  
 Reached the house for money.

On admission. Was suffering from General Paralysis.  
 Gait was ataxic. Articulation thick Phasitatis. Was  
 excited & destructive. By the end of the year any  
 attempt at speech ended in failure from the tremors  
 of facial muscles. Died June 5th 1889. Duration about  
 3 years.

Case 53. R. O. M. 40. Sailor, admitted Dec 28th.  
 1889. Received an injury to his head about 1 1/2 yrs.  
 ago. Has been in Union 6 months.  
 On admission, was suffering from General Paralysis.  
 Was restless and noisy. Had delusions that he had large  
 sums of money. That he was a Colonel & that the Queen  
 was coming to see him. His gait was feeble & his  
 articulation impaired. Died Nov 5th 1891.  
 On post mortem examination beneath the dura mater

on the left side, stretching from frontal to occipital bone was a large cyst or bag.  $5\frac{1}{2}$  inches long. 2 inches wide top varying thickness from  $\frac{3}{4}$  inch downwards. with thick tough walls, containing some clear fluid & some yellowish white gelatinous material with here & there red patches in it. It weighed 5 oz.

As called arachnoid cyst or pachymeningitis hemorrhagica.

The usual evidences of general paralysis were present, the left hemisphere being grooved by this cyst, the frontal lobe especially being compressed & was thinned anteriorly & more wedge shaped.

# Epileptics

17.

Taking next the epileptics of whom there were twelve; in the instances the epilepsy preceded & was the direct cause of the insanity. Case 13 did not have any fits until after admission. With regard to number 43 there is some doubt as to whether he had had fits before coming here, if so, they were only a few.

Cases 4 & 28 were transfers from other asylums & the latter was transferred again from this asylum.

Seven of the patients are now dead, in 4 the direct cause of death was epilepsy; the remaining three died of Phthisis, Bronchitis, & Cardiac failure & Bronchitis.

Four of the original number are still in the asylum these are Cases 22, 39, 44, & 54.

None of the epileptics recovered. Case 39 has however been in the asylum twice before. He was admitted at the age of 42 for the 1st time. He had been epileptic sixteen years, following on an injury to the head by a butcher's cleaver, of which he shows the effects in an indentation on the left side of the skull 4 inches above the external auditory meatus. He had had outbreaks of mania before, when fitly, but had always been managed by his wife. After admission he showed no symptoms of insanity & was discharged in 6 weeks time. After a lapse of 2 years he was readmitted, & discharged after 2 months detention. After another interval of 3 years, he was admitted again, & still remains here. When not fitly, he is intelligent, useful & well behaved. He is a finely built powerful man, but intervals has maniacal attacks in which he is dangerous, generally beginning by knocking down

anyone in his immediate neighbourhood. Although he has been epileptic for so many years (25) he shows little prominent mental deterioration. Why was he not trephined years ago & why should it not be tried now? It is true that his fits are not unilateral or localised in any way but typically epileptic.

All the four epileptics now in the asylum show signs of old fracture of the skull.

The father of Case 22 was insane. This patient was also suicidal before admission.

Case 43 was intemperate.

In the patients who died, the insanity had lasted from two to  $11\frac{3}{4}$  years & averaged about  $6\frac{1}{2}$  years.

The epileptics that have been under my own observation at some period or other of their insanity, are Cases 22, 39, 43, 65, 54 & 44 of whom the last is an idiot.

# Epileptics

19.

Case 4. F. K. age 15 admitted June 5th 1875. Transferred from another Asylum in which he had been 6 years. The cause of his attack was an injury to the head followed by epilepsy. He was very violent at times during the fits striking those around him. An imbecile. Died June 11th 1876 of Phthisis.

Case 7 J. K. K. age 25 admitted Nov 30th 1875. Attack the first, duration 5 1/2 years. He received an injury to his head the date of which is uncertain about 4 yrs ago. Epilepsy followed soon after & is now frequent. He had paroxysms of excitement & violence, following, & also preceding, the attacks. He eventually died after a succession of severe fits Dec. 14th 1880. Duration of insanity, between 8 & 9 years.

Case 13. A. K. B. age 36, male, admitted Aug 16. 1877. Attack the first, duration 3 weeks. Cause, supposed fracture of base of skull from injury to head. Was very excited & irritable threatening to murder his relatives. Required restraint before admission to prevent his injuring his mother with whom he lived. On April 19th 1878 (9 months after admission) he had a series of fits lasting about 24 hours for which he nearly died. These were the first he had had. From this date he had fits every few months sometimes accompanied by frenzy when he shouted about & gesticulated. He died Nov. 27th 1888 in an epileptic attack. Duration of insanity 11 1/4 yrs. P.M. the dura mater was firmly adherent all round to the skullcap & there was evidence of an old inflammation of the meninges over the vertex in the occipital region.

Case 16. J.K. age 61. Locksmith. admitted Oct 10th 1877. First attack, duration 1 month (?). He was subject to epilepsy which followed an injury to the head. Had been violent & unmanageable. On admission, his articulation was imperfect. Had paresis of the right leg. Was demented. His fits were frequent & severe. At the end of April 1878 he had bronchitis which left him very feeble, & he died May 11th of the same year of cardiac failure. Duration of insanity about 2 years.

Case 22 J.W. Borglund. admitted Oct 6th 1879. His father was insane. He has been epileptic since receiving an injury to his head from a fall, the date of which is uncertain. On admission, he was a prematurely old man, had a tottering gait & had loss of power of left arm. His skull showed signs of old fractures. Previous to admission he had three times attempted to drown himself. He is still in the asylum. He is demented & childish. The fall was a severe one, being down a ship's hold. His skull has been fractured in several places. He has had no fits of late years. He is now quite demented. Age on admission 58.

Case 28. A. P. age 35. Cornman. Admitted Feb 2nd 1882.  
 First attack, duration 13 years. He has suffered from  
 epilepsy, which came on after he sustained an injury  
 to head in a fall from a horse. Has been in another  
 Asylum. On Admission he was suffering from dementia  
 with epilepsy. He had fits frequently & convulsions. He was  
 transferred 9th April 1884.

Case 32. W. W. age 73. Sailor. Admitted Nov 17th 1882.  
 First attack. He received accidentally, a blow on the head  
 when at sea, subsequently had fits. Has been three years in  
 the workhouse that became noisy, troublesome & violent.  
 On admission, he was suffering from dementia. Was  
 deaf & irritable. He had frequent attacks of epilepsy,  
 & died March 2nd 1884 of bronchitis.  
 Duration of insanity about 8 years.

Case 39. G. A. D. Age 42. Labourer & Naval pensioner.  
 Admitted Nov 14th 1883. Temperate. At the age of 24 he  
 received accidentally, a blow on the side of the head from  
 a butchers cleaver. Has been epileptic since a few  
 months after the injury, when he was pensioned out  
 of the naval service. Has often been violent during the  
 epileptic attacks but this is the first time he has been  
 in an Asylum. At the police station before admission he  
 stripped himself naked & knocked several men down.  
 After admission, he showed no signs of insanity & was  
 discharged in 6 weeks time on Dec. 19th 1883.

He was readmitted on Oct. 23rd 1887 after having been very violent the previous day at a funeral. He was discharged after two months detention on Dec. 17th 1887.

He was admitted for the third time Sept 20th 1890 in a state of violent maniacal excitement. He is still in the Asylum, tho' had many outbreaks of epileptic mania in the last two years. He is a finely built powerful man. When free from fits he is intelligent & well behaved shows no signs of mental deterioration. Over the left parietal bone 4 inches above the external auditory meatus he has an indentation running from behind forwards for 3 inches.

Case 43. J. C. A. age 62. Carter. admitted Aug 13. 87. Has been of intemperate habits. Has been bad in the head for some months past, yesterday was very violent & was running about with only his shirt on in the street. Is blind of the right eye & is deaf on the same side; These followed a fall on the occiput the exact date of which is not known; it was some months previous to admission & before the appearance of any symptoms. On admission, he was excited & violent. It was uncertain whether he had had any fits. The optic disc of right eye was atrophied & there was a slight deposit of pigment round it. The pupil did not react to light. On Oct. 6th. Had two severe epileptic fits during the night on Dec 24th. Had a series of unilateral convulsions. During the next year he became demented, memory impaired, speech thick, slow in answering.

Fits continued severe & frequent.

On Nov. 1st 1889, had another series of attacks & gradually became weak on the right side & almost paralyzed, a few slight movements remaining.

On the latter part of the year twitching of the right side (leg & arm & face) were frequent, & he died Feb 3rd 1890 after some more convulsions. All through these affected almost entirely the right side. No post mortem examination was allowed. Duration of insanity about 4 years.

Case 51. J. C. Age 65. Bricklayer admitted July 1st 1889 Temperate. Fell accidentally about 3 years ago & injured his head. Epilepsy followed the injury & has occurred at intervals since. His mind has been failing about a year, & his fits have increased in severity, and it has been necessary to restrain him to prevent him injuring himself & others. On admission, he was demented. He was quiet and inoffensive generally, but often very violent when fits, tearing his clothes & refusing food. His fits chiefly affected the left side of the body beginning in the face. He was dangerous at times. He died in an epileptic attack on Nov 7th 1891. Duration of insanity between 3 & 4 years.

Case 574 J. A. age 41. Ex policeman. Admitted June 27. 1890. Attack the first duration some years. In 1882 he was struck on the head by a soldiers belt & has been epileptic since. On admission, was suffering from dementia with epilepsy. His fits are frequent and severe. He is quiet but capable of employment. Still in the asylum. He has a depression over left parietal bone 3 inches above external auditory meatus, on the site of injury.

Case 444 (omitted) M. V. P. age 8 yrs. admitted Aug 27th 1887. An epileptic idiot. Very spiteful, mischievous wet & dirty. Cannot talk. Still alive. His condition is ascribed to a fall in babyhood, injuring his head.

Of the remaining thirtythree cases, 2 were idiots not epileptics. Beyond the fact that one died of Pulmonary Tuberculosis & the other, a tramps, was transported again, there is nothing to remark.

The other cases included 4 acute manics, 4 suffering from melancholia, & with chronic mania, & with mania with delusions, whilst the remaining eight were demented on admission.

Dealing first with the acute manics (not including) all recent cases under this head).

Number 9 settled down into a chronic case, became demented & died after 12 years insanity. His father had been insane.

Number 37 became chronic with exalted delusions & was removed by his friends after 3 years.

Number 41 died in sixteen months.

Number 47 was discharged in 4 months, but readmitted again in six weeks, & is now in the Asylum with no chance of recovery.

Of the melancholics, all 4 were suicidal, 3 having attempted suicide previous to admission, & the other one prohibited from doing so.

Case A was due to the effect of an injury by which he lost the fingers of the left hand. He had a marked history of heredity, his mother, sister & brother being insane. He lived in the Asylum for  $15\frac{3}{4}$  years. & then died.

Case 30 had been discharged, a few months previous to admission, from another Asylum, in which he had

been confined for melancholia, having cut his throat badly before admission there. It is probable he had not perfectly recovered as he relapsed so soon. He died in less than 2 months of meningitis.

Case 50 Followed Spastic paraplegia, due to a waggon passing over the body. The patient is alive. He had had a previous attack of insanity 19 years before admission here.

In Case 57 the exciting cause was drink. A very little upsetting the patient since he had a fall from a scaffold 8 years previously. He recovered in 3 months, but hung himself 2 months afterwards, after indulging in a little beer.

Of the Chronic manias none were first admitted here. All eight were transfers from other asylums, 4 of these 4 were transferred again. Two are still alive having been insane 24 & 20 years respectively, being now demented, these are numbers 6 & 46.

Numbers 1 & 3 are dead after 13 1/2 & 12 3/4 years insanity. The latter (3) having had parsonia of the eye.

Dealing next with the 7 Cases of mania with delusions, Case 31 with exalted delusions recovered in 6 months, & previously recovered, after erysipelas.

Case 33 with delusion of suspicion & persecution was discharged in 4 months, but readmitted again in a month. He tried to commit suicide soon after, & died having been insane 8 yrs.

Case 35 was due to an injury to the eye, after which he became moody, suspicious. He was discharged in 1 year & readmitted in the year following, his certificate stating that he had

been insane all the time. He is still alive after 10 1/2 years insanity.

Case 36 attempted suicide 5 years after admission & died shortly after.

Case 49 was due to the shock injury, received by being caught in some machinery necessitating the loss of one arm. Still alive. As explained before, although stated to have had other attacks before admission, since the injury, it is probably only one & the same.

Case 52 had been in an Asylum 26 years previously for an attack of insanity. He was transferred to another Asylum in fifteen months much improved, & recovered 2 months later. His case is given in detail before.

Case 55 is still alive. Has been insane between 6 & 7 years. Eight patients were in a demented state on admission. In Cases 12 & 21 there was a history of heredity & in both cases the injury probably only produced an exaggeration of their <sup>normal</sup> weakness. This was certainly so in Case 21. Both are alive after 18 & 13 yrs detention.

Cases 5 & 34 were complicated with intemperance, they died in 2 years & 6 months respectively.

In Cases 17 & 38 the injuries were severe causing loss of power & other symptoms.

The others call for no comment.

Of these last 31 Cases the following have been under my own observation at some period of their insanity, numbers 6, 10, 12, 21, 35, 38, 47, 49, 50, 52, 55, 56, 57.

Case	Age on admission	attack & duration	Cause	mental state	Result
1	51	1st 6 years. Transfer	Injury to head	C. mania	Delusions as to conspiracies. Attempted to destroy himself. Died after 13 1/2 years
3	40	1st. 1/2 yrs. Transfer	Injury to head	C. mania	Delusions. Sometimes depressed. Died after 12 3/4 years. Dementia of the eye.
5	77	1st 13 months	Fall from a horse. Fracture	Dementia	Died in 2 years
6	40	1st 7 years. Transfer	Injury to head	C. mania	Soon demented. Deaf & speech affected. Alive after 24 years
8	56	1st 4 months	Hereditary & injury to head	melancholia	attempted to drown himself. Died after 15 3/4 years
9	61	1st. 1 month	Hereditary & injury to head	acute mania	Soon demented & deaf. Died after 12 years
10	46	1st. 3 1/2 years. Transfer	Fall on head	C. mania	Soon demented. alive after more than 20 years
12	30	1st. 2 years	Hereditary & Fall	Demented	Alive after 18 years

# Summary of ordinary forms of Insanity.

Case	Age on Admission	Attack & duration	Cause	Mental State	Result
17	49	1st 4 months	Fall from top of a house	Dementia	Paralysis of one side Speech affected. Loss of power. Died after 6 1/2 years
19	57	1st duration 7 years Transfer	Blow on head with a hammer	C. Mania	Transferred after 13 yrs. insane. Twice attempted to poison himself
20	37	1st duration 5 years Transfer	Injury to head	C. Mania	Transferred after 11 yrs. insane Wish to explore the world fractured. Delusion of poisoning
21	25	1st duration 4 weeks	Heredity Fall on head	Dementia	Still alive after 13 years
26	50	1 duration 9 years. Transfer	Injury to Spine	C. Mania	Transferred after 11 1/4 yrs. Insane. Delusions.
27	30	1st duration 2 years. Transfer	Injury to head	C. Mania	Transferred after 3 1/2 years insane. Delusions about electricity
30	40	2nd duration 1 month	Injury to head	Melancholia	Suicidal. Died after 3 1/4 yrs from 1st attack

Case	Age on Admission	Attack & duration	Cause	Mental State	Result
31	34	1st one month	Blow on head	Mania	Exalted delusions. Recovered in 6 months
33	50	1st 13 months	Injury to head	Mania	Delusions of suspicion. Discharged 4 months after admission apparently recovered. Re-admitted in one month, attempted suicide soon after. Died after 8 yrs in care.
34	53	1st 1 month	Injury to head from fall & interference	Dementia	Died in 6 months. Had a fit.
35	35	1st 6 months	Injury to eye	Mania	Delusions that others were working his destruction. Discharged in 1 yr after admission. Re-admitted in 1 year. Still alive after 10 1/2 years.
36	59	2nd (?) duration 6 weeks	Wound of head	Mania	Hallucinations of hearing, want to take his life. attempted suicide 5 yrs after admission. Died after 5 yrs.
37	23	1st 19 days	Injury to head	Acute mania	Afterwards had exalted delusions. Removed by friends in 3 years.
38	64	1st a few months	Injury to head	Dementia	Hemiplegic speech affected. alive after 7 years

Case	Age on admission	Attack & duration	Cause	Mental State	Result
41	50	1st 7 days	Injury to head	acute mania	Exalted delusions Died in 16 months
46	57	1st 3 months	Fall from a cart	Dementia	Paralytic Speech affected Died in 8 months
47	26	1st 5 days	Heredity. Thrown from a cart	acute mania	Discharged in 4 months Readmitted in 1 month. Still alive after 5 years
49	75	3rd duration 2 yrs.	<del>Injury to head</del> Loss of ear	mania	alive Third attack has lasted 6 years
50	43	2nd 5 months	Injury to spine	melancholic	Spastic paraplegia Speech affected. Alive after 4 years
52	43	2nd duration ?	Injury to head	mania	Electrical delusions. Speech slow & thick Recovered 2 years after admission
55	36	1st 4 years	Injury to head	mania	Hallucinations of hearing Suspicious. alive after nearly 7 years
56	52	1st 2 years	Injury to head	Dementia	Died after 3 years
57	44	1st 1 month	Heredity. Fall from Scaffold. Intemperance	melancholia	Recovered after 3 months Committed suicide 2 months after

Case 2. J. A. W. a transfer from another Asylum. At the age of 16 months he received an injury to the head, which produced Concussion of the brain. Since that he has made no mental progress. Was admitted at the age of 3 to the Asylum. An idiot, mischievous, restless, with no sense of avoidance of injury, dirty in habits, fat limbs excised. Not epileptic. He died Jan 15th 1890 of Pulmonary Tuberculosis, aged 26 years.

Case 29. J. C. age 25. No occupation. Has been in another Asylum. Had a fall shortly after birth. Has always been weak-minded. He was never excitable. Not epileptic. Transferred April 8th 1884.

Case 1. J. M. admitted April 26<sup>th</sup> 1875. A transfer from another asylum. Cellotman. Duration 6 years. The cause of his attack was an injury to the head. On admission, he had delusions as to conspiracies to try him for some crime which he cannot describe, & that he should be taken up for something he knows not what. His delusions remained until his death on Sept. 16<sup>th</sup> 1882 of heart disease. His insanity had lasted 13 1/2 years. His age at beginning of attack was 45.

Case 3. M. A. age 40. Wheelwright. admitted June 5<sup>th</sup> 1875. transfer from another asylum, where he had been 1 1/2 yrs. Cause of attack, injury to his head. On admission he had delusions that his children did not belong to him. That it was ordained that he should die the death of our Saviour. He remained in much the same condition for 4 yrs., subject to paroxysms of excitement followed by depression. In 1879 he had a delusion which continued until his death, viz. that he had a black woman in his abdomen. In Feb 1885 something was first noticed about his right eye, which turned out to be a melanotic sarcoma. His liver became enlarged & he had oedema of the legs & scrotum & was jaundiced. He died Sept 9<sup>th</sup> 1886. His liver weighed 250 oz. being studded with centres of melanotic sarcoma. No post mortem of the head was allowed. Duration of insanity 12 years & 9 months.

Case 5. D. E. age 77. admitted July 17th 1875. Attack the first, duration 13 months. Was formerly of intemperate habits. He had a fall from a horse & gradually became demented. He was taken to the workhouse, & removed to the Asylum because he became violent & abusive & assaulted the other inmates. He was very infirm & died April 26<sup>th</sup> 1877 duration of insanity about 2 years.

Case 6. D. G. age 40 admitted Sept 23rd 1875. First attack duration 7 years. Transfers from another Asylum. Was restless & violent at times. Laughed & cried inordinately, refused to work. He soon became quiet & orderly & very reserved seldom speaking at all. His speech was defective. He obtained the reputation of being deaf & dumb. He is still in the Asylum. Apeful, quiet & morose. Seldom speaks, but can do so & apparently hears a good deal better than is supposed. Has been insane 25 years

Case 8. J. S. age 56. admitted Feb 3rd 1876. First attack, duration 4 months. His mother & sister were insane, & his brother was afterwards admitted into the Asylum & is still there. The patient received an injury to his left hand in a machine, by which he lost the fingers, fourteen months ago. He appears to have forgotten about this a good deal, & eventually became melancholic. Said he had committed some enormous sin, that his soul was lost & nothing could save him. He attempted to drown himself in a pond & also down a well. The acuteness of the attack

passed off but he remained depressed & taciturn for some years. He afterwards had a delusion that there was a vessel in his abdomen. He had dropsy on several occasions eventually died Aug 2nd 1891 of congestion of the lungs from chronic heart disease. Duration of insanity 15 years & 9 months.

Case 9. D. C. age 61. Admitted April 4th 1876. Labour. His father was insane. Attack the first, duration 1 month. Cause. Injury to head. His condition was one of acute mania. He was very violent smashing everything he could lay his hands on. He settled down into a chronic mania with recurrent attacks. He was useful & worked. Afterwards became deaf & feeble & demitted & died May 5th 1888 aged 73. Duration of insanity being over 12 years. Post mortem. The dura mater was adherent to other membranes over posterior cerebral lobes. The pia-arachnoid was thickened somewhat & dematous. Vessels at base attenuated to some extent. Brain weighed 480g. Firm. The rgt. <sup>superior</sup> parietal lobe was atrophied near the longitudinal fissure leaving a cup shaped depression. There was also marked atrophy of the left corpus striatum. Duration of insanity over 12 years.

Case 10. J. J. age 46. Mania. Admitted May 2nd 1876. Attack the first, duration several years. Transfer from another Asylum. His insanity was attributed to a fall. He had delusions that parties contemplated taking his life. He was quiet & was usefully employed. His memory became much

impaired. He is still in the Asylum. He is a hopeless idiot. Has a habit of touching everything made of wood that he passes. Has been insane more than 20 years.

Case 12. J. K. W.P. age 30. admitted Jan 17. 1877. Grocer. Attack the first, duration 2 years. Two uncles were insane. The onset of symptoms date about two months after an accident.

His mental power had failed gradually, he was at times threatening in his manner. Was always doing foolish things, such as trying to empty a large pond with a pail &c. He is still in the Asylum. During most of the time he has been a regular worker at manual labour. He is sometimes noisy & talkative but hopeless. Quite unable to hold any rational conversation or to take care of himself. Has been insane only 18 years.

Case 17. J. S. age 49. Painter. admitted Oct 26th 1877. Attack the first duration 4 months. On the 29th June previous to admission he fell from the top of a house. He was unconscious for three weeks. Had paralysis of the right side & of the bladder. These symptoms passed off, & he became very irritable. Called persons by their wrong names. Was unable to hold any connected conversation & became very angry excited if those about him did not understand him or agree with him. Was unable to feed himself properly, used to pass his motions & urine wherever

he happened to be.

In twelve months he had improved. The loss of power over movements was less marked, & his habits were clear; he was however irritable quarrelsome & deluded.

He died Sept 22nd 1883, of Congestion of the lungs.

Duration of insanity over 6 years.

P.M. There had been a fracture of the skull involving the posterior superior angle of the parietal bone. The dura mater was not adherent at this spot. The membranes were adherent at the base over the right frontal & temporo-sphenoidal lobes. There was extensive atrophy of both these lobes which were soft & pulpy. There was a large quantity of cerebrospinal fluid present. Weight of brain  $4\frac{1}{2}$  of.

Case 19. D. B. age 37 years. Blacksmith's labourer. admitted Nov 1st 1878. First attack. Had been in another Asylum for 7 years. Three years previous to being in an Asylum he received an injury from a blow on the head with a hammer. He became irritable & suspicious, would get out of bed & examine the doors. Said he was kept awake by persons who would not let him sleep. He had delusions that he was going to marry the Queen & that he had money. He twice attempted to poison himself. He became very deaf. After remaining in this 2nd Asylum for 6 years he was again transferred, having been insane more than 13 years.

Case 20. S. C. age 37. Builder admitted Nov 21 1878.  
 Attack 1st. Duration 5 years. Had been in another Asylum.  
 His insanity followed on an injury to his head. He  
 remained for 6 years thro' the transfered. Now, he  
 insane 11 years. He had delusions that he had been  
 poisoned. That he was emperor of the world & imperial  
 dynasty of China, & that he had between two & three hundred  
 a year.

Case 21. S. C. age 25. Milkman. admitted Sept 13<sup>th</sup>  
 1879. First attack duration 4 weeks. He received an  
 injury to his head from a fall a month previous to admission.  
 Was in the infirmary at Folkestone, removed to workhouse  
 & then sent to the Asylum. He has a brother in the workhouse  
 who is weak-minded, & who was subsequently admitted to the  
 Asylum. The patient is not epileptic or violent in any way.  
 Simply deluded & weak-minded. He is still in the  
 Asylum & is useful. Has been insane for 13 years

Case 26. J. T. J. age 50 Rope maker. First attack, duration 9 years. Admitted Dec 5th 1881. Had previously been in another Asylum. The cause of the attack is said to have been an injury to the spine. On admission he was suffering from chronic mania. He had delusions that the Earl of Shaftesbury had given money to his wife of which she had been robbed. These continued until his transfer on 5th April 1884.

Case 27. J. C. age 30 Boot maker. Admitted Feb 2nd 1882. First attack, duration 2 years. Had previously been in 2 other Asylums. Cause of his attack was injuries to his head. On admission. Had delusions that electricity affected him at night according to the way he lay in bed. He was dangerous to his mother. He was transferred unimproved Aug 9th 1883.

Case 30 J. D. age 48. Wheelwright. Admitted April 24th 1882. Attack the second, duration one month. He received an injury to his head soon afterwards became depressed & melancholic & cut his throat badly. He was taken to an Asylum (3 years ago) & was discharged a few months back. Since this he has relapsed & now appears worse than he was before. On admission, He was suffering from melancholia was very depressed & taciturn. On May 29th He had a fit & was unconscious for 48 hours, & from June 12th to his death on June 17th he had many convulsions of a high temperature & other symptoms. P.M. showed a purulent meningitis with a much atrophied brain weight 36 1/2 oz.

Case 31. P. D. age 34 yrs. Auctioneer's Clerk, admitted July 27th 1882. First attack, duration 1 month. Habits temperate. He had a blow on the head followed by six weeks illness & delirium. This was some little time before admission. On admission he had many excited delusions. He was excitable & irritable. Previous to admission he had gone to the Bank of England to get a cheque book & to see about his wealth. On Aug 10th he had erysipelas over rgt. eye & left knee; abscesses formed round the hip & he was very ill. He recovered however, & with the improvement in bodily condition which took place his mental symptoms passed away & he was discharged recovered Dec 29th 1882. Duration of insanity 6 months.

Case 33. W. S. age 50 Dockyard labourer. admitted Feb. 9th 1883. Attack the first, duration 13 months. Cause injury to head. On admission. He had delusions that he was watched by detectives and girls, & threatened to knife anyone he caught doing so. Was restless & excitable. He appeared to get rapidly well, & was discharged June 18th 1883. He was readmitted in less than a month on July 12th. He had del. violent. Thought he had murdered his wife, but was not quite sure. Complained of having a knife blade in his head. Had lost fifteen pounds in weight during the short time he was out. On Sept 1st. he attempted suicide by cutting his throat with a carving knife. He ultimately died of pneumonia on March 10th 1890. Duration of insanity over 7 years.

Case 34. J. D. age 53 Labourer. admitted Feb 17<sup>th</sup> 1883.  
 First attack, duration 1 month. Shortly before admission  
 he was injured in taking cargo on board a ship by fall of a  
 block. His leg interrupted. On admission. He was  
 delirious, dull, never speaking, dirty in habit.  
 He resisted feeding, & required the stomach tube for  
 a week or two at a time. He rapidly got feeble &  
 died July 13<sup>th</sup> 1883. No p.m. allowed.  
 On May 28<sup>th</sup> He had a fit apparently of an epileptic  
 nature. The only one he was known to have had.

Case 35. J. N. age 35. Farm Labourer admitted March  
 20<sup>th</sup> 1883. Cause injury to eye. First attack, duration  
 6 months. Temperate. Three years ago his eye was injured  
 by a stone. He was in the hospital some time. For some  
 months he has not worked, saying all around him were  
 working his destruction, & that his eye was destroyed  
 by his enemies. He was in this condition on admission,  
 & was excited & passionate. He improved a good deal  
 & was discharged Feb 25<sup>th</sup> 1884. He was readmitted  
 June 19<sup>th</sup> 1885 & his certificate stated that ever since  
 his discharge he had been excitable & violent, destructive,  
 & had illused his wife, & that he had an idea that he  
 was conspired against. He has remained in much  
 the same condition to the present time. He now works  
 his passionate & violent & has delusions of suspicion.  
 Duration of insanity 10 1/2 years.

Case 36. W.L. age 59. admitted Aug 30th 1883  
 Naval Pensioner. Duration 6 weeks. Had had a  
 previous attack shortly before admission, which was  
 supposed to have been due to a wound of the head.  
 On admission, he was excited & troublesome. Was very  
 restless & dangerous to other patients. He had delusions  
 of suspicion fancying he had been robbed &c. In 4  
 years he was demented. In May 1888 he made an  
 attempt at suicide by hanging, & died on July  
 7th of the same year of Pericarditis.  
 Duration of his 2nd attack of insanity, 5 years.

Case 37. J. T. P. age 23. Shop Assistant. admitted June  
 11th 1884 First attack. Duration 19 days. His illness was  
 ascribed to a fall in which his head received a slight  
 injury. On admission he was in a condition of acute  
 mania, noisy, talkative & violent. He soon settled down,  
 & then had an idea that everyone wanted to kill him.  
 He then developed delusions of a galled nature. Wrote  
 letters to the Queen &c. He was removed by his friends  
 May 18th 1887

Case 38. J. P. age 64. Painter. admitted March 27th  
 1885. First attack. A few months ago the patient  
 was injured on the head by a strap flying off an engine  
 wheel. Two days after, he had a fit & became hemiplegic  
 on rgt. side. He remained in this condition up to the last  
 week when partial power returned in the leg. At the

same time he began to get excitable, noisy, troublesome. Threatening those about him particularly his wife & family. On admission he was suffering from dementia.

On July 19. 1883 He had an apoplectic attack. after which his right side was totally paralyzed again & his speech was unintelligible. He is still alive in the asylum. His skull shows signs of an extensive injury.

Case 41. J. W. age 50, Labourer. admitted Dec 20th 1885.

Attack the 1st duration 7 days. Father died of phthisis.

Cause of attack, injury to head received 4 months ago.

On admission. Was noisy, excited & had delusions that he had large sums of money. Refused food. Was a good deal exhausted. March 2nd/86 Still very noisy, destructive, habits dirty. Afterwards became quiet but no improvement otherwise. Died of diarrhoea April 25th 1887.

Duration of insanity 16 months.

Case 46. J. J. age 57. Labourer admitted Nov 2nd 1887.

1st. attack, duration 3 months. Fell from a cart twelve months ago, & has appeared to fail since. He is quiet with occasional fits of violence. On admission. Was hemiplegic on right side. His articulation is imperfect. Pupils unequal. Demented. He gradually became feebler & died May 4th 1888. Duration of insanity about 9 months.

Case 47. W. L. age 26. Farmer. admitted Nov. 22/87.  
 First attack, duration 5 days. In well and decent before  
 insane. Cause of insanity, injury, through being thrown  
 out of a cart 3 weeks ago. In admission was in a  
 condition of acute mania, chattering incoherently.  
 Sleepless & refused food. He soon improved, but complained  
 a good deal of neuralgia. Was allowed out on trial  
 Feb 2nd 1888 & his discharge made absolute March 2nd/88.  
 He was readmitted the next month viz on April 16th. He  
 still in the asylum. He is depressed at times & very taciturn.  
 At other times he is noisy & excited. He is destructive & given  
 to selfmutilation. He hears voices & they torment him a  
 good deal. Has been insane out 5 years.

Case 49. J. P. P. age 75. admitted April 5th 1889.  
 Road surveyor. Third attack. First attack due to an  
~~head~~ injury. In admission. Was very taciturn. Replying  
 only occasionally in a whisper. At times he is sudden and  
 excitable. Takes food badly. He is still in the asylum  
 will seldom speak & never does so to his friends. Now  
 quiet. His injury was caused by being caught in some  
 machinery, in which his arm was crushed so that it  
 had to be amputated through the upper part of the  
 humerus. He will never speak about the accident  
 his taciturn & dull. Although this is said to be the  
 third attack of insanity, he has never previously been in an asylum,  
 when he was violent & excited before admission he was considered  
 insane, when quiet, although dull & taciturn, he was thought to be  
 better.

Case 50 G. B. age 43. First admitted May 15th 1889  
 Second attack. Was in an asylum 19 years ago.  
 Had an accident 5 months ago. Was thrown from a cart  
 injured his spine. Has bought a revolver to shoot himself.  
 On admission. Was very depressed & emotional. Says he is  
 tired of living. Says he is watched & followed. Suffering  
 from Spastic paraplegia. His speech is abrupt & staccatoed  
 soon lost his depression. Is still in the Asylum. He  
 has many delusions concerning the people around him  
 Has been insane over 4 years.

Case 52 G. F. age 43. admitted Nov 5th 1889.  
 Police Platoon. Was in an asylum at the age of 17.  
 Sustained an injury to his head 5 yrs. ago through  
 jumping out of a railway carriage after a prison.  
 Has been unfit for service since. He has a scar on the right side of the  
 head & complains of localized headache over it.  
 On admission, he was suffering from mania. He had  
 delusions that people were trying to poison him, and  
 also that electric wires were fixed to his head. Was  
 violent and dangerous.  
 March 10th 1890. His speech was slow & his pupils unequal.  
 Continued to suffer from unilateral headaches until the  
 end of 1890, when he <sup>completely</sup> continued to improve. He was  
 transferred to another Asylum Feb 1/2 1891 & was  
 discharged recovered in 2 or 3 months. His speech improved.  
 Was insane between 5 & 6 years.

Case 55. A. N. age 36. Carpenter. admitted July 18<sup>th</sup> 1890. First attack, duration 4 yrs. Temperate. A little beer or spirit affecting him. Cause, Fall on the head. On admission. No delusions of suspicion, that people are against him. That he is called a murderer. No hallucinations of hearing. Tried to murder his sister with a hatchet before admission.

He is still in the asylum His mental condition is unchanged. Has been insane between 6 & 7 years. He has a round depression, like a puncture, on the side of his head where he fell

Case 56. J. C. age 52. Blacksmith, admitted Sept. 31<sup>st</sup> 1890. First attack, duration 2 years. Has been in Union nearly 2 years. His mind failed, following an injury he received by a blow from a hammer.

On admission. He was rather furiously excited, kept repeating a few words over & over again.

He died on Aug 22<sup>nd</sup> 1891 of Cancer of the sigmoid flexure. His mental state undergoing no change.

Case 57. J. S. age 44. admitted June 17<sup>th</sup> 1892.

Attack 1<sup>st</sup>, duration 1 month. Aunt on father's side was insane. Fell from a scaffold 8 yrs ago suffered from Concussion. Since this, a little drink has easily upset him. On admission. Was melancholic & threatened suicide. Discharged recovered Aug 22. 92. Committed suicide 2 months after, having indulged in a little beer.

With regard to postmortem appearances, Of the thirtythree deaths twentyone have occurred since 1884. The records are available only since that year. In 13 instances examinations were made; in eight of these there were changes which might have had some connection with the injury.

In Case 3, there was melanotic sarcoma of eye & this an examination of the head was not allowed.

In Case 9, the dura mater was adherent to other <sup>depression</sup> membranes posteriorly. There was a cup shaped <sup>depression</sup> in the right superior parietal lobule & the left corpus striatum was atrophied.

In Case 17, there was an old fracture of parietal bone. Membranes adherent over base of right frontal & temporo sphenoidal lobes. Extensive atrophy of both these lobes which were soft & pulpy.

In Case 30. Skull was very thin. Purulent meningitis. A thick cream coloured layer of purulent lymph beneath dura.

In Case 56, Extensive atrophy in parts.

In Case 46. Signs of old localized meningitis.

In Case 45. A subdural membrane a general paralytic.

In Case 53. A large arachnoid cyst. A general paralytic.

The short histories attached, are not intended in any way to be used as a help to diagnosis. They are merely short general accounts of each case. In all matters connected with diagnosis, a personal element must arise. It is sufficient therefore to say, that it was made after as full a history as it was possible to obtain from friends & relieving officers. All the cases occurred under one medical superintendent, & twentyone were at some time under my own observation.

With regard to statistics. Fifty-four of the cases occurred in patients of the ordinary pauper class, & three were private cases. This gives the percentages for the two classes as follows—  
3.9 & 14.10.

Of all the epileptics admitted into the Asylum 5 per cent were due to injury (including idiots). Twelve out of two hundred & eighty.

Of the General Paralytic 6 per cent were believed directly or indirectly to be caused by trauma.

As percentages, these figures are probably high, from the fact that a good many transfers were received when the Asylum was opened, from boroughs & unions in this district who had patients boarded out in other Asylums, & who were removed here when this Asylum was built. These were of course accumulations of chronic cases extending over many years. Amongst these were 6 due to injury, & 6 more were included in another batch of patients received here under contract from another district. These 12 cases, passed as some

of them had been, from Asylum to Asylum, should be eliminated, as in any global classification they would be counted in all the Asylums through which they had passed. Transfers ought therefore to be excluded from either side. The percentages given include all persons admitted ~~during~~ up to the 31st Dec. 1892 during the last 17 3/4 years, refer only to this Asylum, without any attempt at global classification.

From a consideration of all the Cases, the following facts & conclusions seem justifiable, -

In this Asylum, Traumatism is believed to have had a direct or indirect effect in the causation of 3.98% of the insanities occurring in men, admitted during the last 17 3/4 years.

Traumatism may give rise either directly or indirectly to any form of mental disorder.

Indirectly it predisposes to insanity, 1st. from its liability to be followed by epilepsy, 2nd. because in many cases after head injuries the patient is easily influenced by alcohol in any form. 3rd. Head injuries are liable to be followed by headaches &c., and patients are often unable to stand the same amount of mental strain as formerly.

After the loss or injury of important organs or parts of the body, insanity may follow, in persons with marked heredity, or where the injury has entailed a severe shock.

or scars behind it a sense of mutilation.

An injury to <sup>the</sup> head, not necessarily severe, may in weak-minded persons increase their mental inefficiency.

Insanity following traumatism is often gradual in its onset, a failing of the mental powers, which increases with time, being a common history.

Irregularity, suspiciousness, delusions of persecution, leading to violence, were frequent.

Exalted delusions & Electrical delusions were not rare. Out of the 57 cases only 6 were discharged. Three of these were readmitted almost immediately, & one committed suicide two months after discharge, leaving two whose recovery was perfect so far as we know. This is only 3.50%. Prognosis therefore is not very hopeful.

Motor symptoms were present, such as Paralysis, loss of power, impaired articulation or convulsions, in 57.89% of the cases, generally in combination.

Fractures of the skull are the most common signs of the injuries recorded.

Post-mortem examination, whilst in many cases showing lesions which may have been the result of the injury, in other cases reveals no special feature.

With regard to recoveries, it should be noted, that excluding the idiots, only three cases were under 30 <sup>old</sup> yrs. on admission, viz. cases 21, 37, & 4. The 1st had been weak-minded all his life, & the latter was an epileptic. Doubtless the age is a factor of importance in prognosis.

Dealing next with women. Out of 1574  
 females admitted during the last 17 3/4 years, in  
 12, Traumatism was believed to have had some  
 effect in the causation of their insanity.

A short account of each case is attached.  
 Six of them were transfers from other Asylums.  
 Three of the cases were suffering from Epilepsy  
 on admission, two being idiots, & two more had  
 fits after admission.

Case 7 which recovered had what appeared to  
 be one epileptic fit after began to improve.  
 Whilst Case 8 had attacks described as epileptiform;  
 from the history, it is possible she imitated the  
 epileptics in the ward, as she seems to have been  
 quite to this.

Two of the cases recovered, No. 7 & 10, the latter being  
 left a little weak-minded.

Case 11 was intemperate & Case 12 <sup>had</sup> a history of heredity,  
 the former had also some loss of power.

Of the 12 cases, 2 recovered, 2 were transferred, 4 are  
 dead (two of them of Epilepsy), & 4 still remain, of whom  
 3 were originally transfers, & the other is an epileptic idiot.  
 Traumatism is believed therefore to have caused .76  
 per cent of the insanities in the women admitted. Eliminating  
 the transfers, this figure would be reduced one half.  
 The recoveries equalled 16.6 per cent of the admissions  
 from this cause. These figures are a striking contrast  
 to those shown by the men. Both the cases that recovered  
 were under 20 yrs. old on admission. This age factor is of  
 importance probably, as none of the men were so young (excluding epileptics & idiots)

Case 1. S. G. age 69. Admitted May 18th 1878, from another Asylum. Duration of attack 5 years. On admission, was suffering from Chronic Mania, had delusions that people were twisting her bowels and injuring her. She had periods of excitement. Delusions continued until her death in Feb 1888 of Senile Decay. She had been insane 18 years. Cause of attack, a fall.

Case 2. S. K. age 49. admitted May 18th 1875, from another Asylum. Duration several years. On admission was demented. She has outbreaks of passion when she is violent to patients & nurses. She is still alive in much the same condition. Cause of attack, an injury to the head.

Case 3. M. W. admitted May 18th 1875. Housekeeper. From another Asylum. Age 59. Duration 4 years. On admission, was suffering from Chronic Mania. Had delusions that she was possessed of property of which she is robbed. She is still alive & is getting demented. She is irritable & passionate at times. Has been insane 22 years. Cause of attack injury to head.

Case 4. A. S. age 30. admitted June 14<sup>th</sup> 1875, from another Asylum. Duration 6 years. Cause. Injury to head followed by epilepsy. On admission, was demented. Very violent at times. She died on 23<sup>rd</sup> Jan. 1880 of Epilepsy. Had been insane 11 years.

Case 5. S. S. Paine. age 33. Killiney. admitted Sept 21<sup>st</sup> 1876. From another Asylum. Duration 2 yrs & 3 months. On admission, she was suffering from chronic Mania. Was full of morose. At times excitable & violent. She is still alive. Mentally unaltered. Has exalted delusions, calls herself Queen Eleanor. Very violent. Has been insane over 18 years. Cause of attack was injury in a railway accident.

Case 6. J. A. J. age 45. Nurse in Asylum. admitted Dec 18<sup>th</sup> 1876. Duration 4 months. Cause of attack Fall down stairs. On admission. Was suicidal & dangerous. Said she was a devil come to destroy the world, & had committed enormous crimes. After a years residence she was transferred unimproved.

Case 7. F.O.B. age 13 years. admitted March 5th 1877.  
 12 months ago she was blown off her feet, & fell on the  
 back of her head. Between two & three months afterwards  
 she complained of giddiness & blurred mental symptoms.  
 About the same time it was noticed that her right eye  
 was affected. She gradually became worse & quite blind  
 in the right eye. About a month ago she was taken  
 to an Ophthalmic Hospital, but her mind became so  
 much degraded that she was brought away & sent  
 here. On admission. She was acutely maniacal.  
 Three months after admission she had a severe epileptic  
 fit (the first). She improved, had no more fits  
 & was discharged recovered on Dec. 31st 1877 after  
 9 months residence. Beyond blindness, the exact eye condition is  
 not given.

Case 8. M. M. age 28. admitted Feb 1st 1882. from  
 another asylum. Duration 5 years. On admission  
 was demented. Entire loss of memory. She imitated  
 whatever was going on near her. If a patient screamed  
 she did the same. She had fits of an epileptiform  
 nature. She was transferred unimproved July  
 3rd 1883.

Case 9. A. W. age 12 yrs. admitted July 11th 1882.  
 When 2 yrs of age she had a fall which injured her  
 temple. She has had epilepsy since. On admission was  
 an epileptic imbecile. She is still alive. She is  
 spiteful, noisy, & of degraded habits.

Case 10. L. S. P. age 19. admitted August 5th 1883.  
 Infant School Teacher. Seven months ago she received  
 an injury to the back of her head through a chair  
 being withdrawn as she was sitting down. Has had  
 headache then dull pain, much worse the last  
 3 weeks. On admission, was in a condition of  
 acute mania, singing, talking disconnectedly &  
 refusing food. She soon improved & was  
 discharged Dec 17th 1883, 4 months after  
 admission, being then somewhat weakened.

Case 11. A. R. age 65 admitted Feb 8th 1886.  
 Duration 4 months. Cause. Injury to head.  
 Of intemperate habits, formerly of immoral habits.  
 On admission, was demented, memory much impaired.  
 Habits dirty. Was parietic & tumbled about.  
 She died Oct. 29th 1886 of acute pleurisy.  
 Had been insane 1 1/2 months.

Case 12. M. S. C. age 10 yrs. admitted June 9th  
 1889. She appeared to be an intelligent baby until  
 18 months of age, when she fell down stairs & hurt  
 her head, since which she has shown no sign of  
 reason. Puts her hands in the fire & has no sense  
 of danger. Is epileptic. Mother's uncle was insane.  
 She died 1 1/2 days after admission in a condition  
 of status epilepticus

Table I (Dr. Lombard.)

Proportion of deaths from Phthisis to 1000 deaths.

at London	121	at Rome	114	at Edinburgh	102
" Paris	143	" Milan	132	" Dresden	147
" Brussels	163	" Lisbon	115	" Turin	83
" Vienna	208	" Athens	183		
" Berlin	109	" New York	167		
" Stockholm	160	" Rio de Janeiro	186		
" Christiania	172	" Lima	171		

From Milroy Lectures 1890

Table II

Philadelphia registers 29 deaths per 100 from Phthisis  
 Moarsville " 25 " " 100 " "  
 Paris " 25 " " 100 " "  
 London " 23.6 " " 100 " "  
 New York " 19 " " 100 " "

German Soc. Bacillary Phthisis P. 51

Table III  
 Scotch Asylums 1872-89

Period	Average numbers Resident		Total average number Resident	Deaths from consumption		Total deaths from consumption	Number of deaths		Total number of deaths.
	Males	Females		Males	Females		Males	Females	
1872-77	14525.0	15259.5	29784.5	171	213	384	1277	1117	2394
1878-83	17445.6	18220.1	35665.7	178	244	422	1423	1361	2784
1884-89	18828.0	19816.5	38644.5	194	222	416	1542	1470	3012

Table IV  
 Seven English Asylums.

Period	Average numbers Resident		Total average number Resident	Deaths from consumption		Total deaths from consumption	Number of deaths		Total number of deaths.
	Males	Females		Males	Females		Males	Females	
1880-84	11296.2	11487.0	22783.2	177	164	341	1264	943	2207
1885-89	12668.6	12964.3	25602.9	185	209	394	1270	1013	2283

Table V  
 Gartlands Asylum, Carlisle

Period	Average numbers Resident		Total average number Resident	Deaths from consumption		Total deaths from consumption	Number of deaths		Total number of deaths.
	Males	Females		Males	Females		Males	Females	
1863-72	1738	1404	3142	15	17	32	140	100	240
1873-82	2223	2078	4301	25	18	43	234	146	380
1883-88	1741	1559	3300	22	20	42	153	160	313
1883-92	2936	2688	5624	30	36	66	265	238	503

Table VI  
Scotch Asylums.

Period	P. C. of deaths from consumption on average nos. resident	P. C. of deaths from consumption on total nos. of deaths.	P. C. of male deaths from consumption on total nos. of male deaths	P. C. of female deaths from consumption on total nos. of female deaths.
1872-77	1. 289	16. 0	13. 3	19. 0
1878-83	1. 183	15. 1	12. 5	17. 9
1884-89	1. 076	13. 8	12. 5	15. 1

Table VII.  
Seven English Asylums

Period	P. C. of deaths from consumption on average nos. resident	P. C. of deaths from consumption on total nos. of deaths.	P. C. of male deaths from consumption on total nos. of male deaths	P. C. of female deaths from consumption on total nos. of female deaths.
1880-84	1. 496	15. 4	14. 0	17. 3
1885-89	1. 538	17. 2	14. 5	20. 6

Table VIII  
Furlands Asylum

Period	P. C. of deaths from consumption on average nos. resident	P. C. of deaths from consumption on total nos. of deaths	P. C. of male deaths from consumption on total nos. of male deaths	P. C. of female deaths from consumption on total nos. of female deaths.
1863-72		13. 3	10. 7	17.
1873-82		11. 3	10. 6	12. 3
1883-88		13. 4	14. 3	12. 5
1883-92		13. 1	11. 3	15. 1



Table IX.

Asylums		P. C. of deaths from consumption on average nos. resident	P. C. of deaths from consumption on total nos. of deaths	P. C. of male deaths from consumption on total nos. of male deaths.	P. C. of female deaths from consumption on total nos. of female deaths.
Borwall	1st. 5	1. 037	14. 3	13. 5	16. 4
"	2nd. 5	1. 002	13. 7	9. 8	18. 4
Three Counties	1st. 5	1. 822	19. 5	20. 3	18. 7
"	2nd. 5	1. 468	14. 5	14. 1	15. 0
Glamoynau	1st. 5	1. 633	16. 6	14. 7	20. 6
"	2nd. 5	1. 516	16. 7	15. 1	18. 7
L. & Rutland	1st. 5	. 763	9.	8. 5	9. 6
"	2nd. 5	1. 430	14. 0	17. 5	9. 2
Stafford	1st. 5	1. 761	11. 3	8. 3	16. 3
"	2nd. 5	1. 810	15. 1	9. 3	22. 3
Hants	1st. 5	1. 344	15. 3	15. 1	15. 4
"	2nd. 5	1. 181	19. 4	17. 8	*21. 0
Northumberland	1st. 5	1. 845	25. 6	24. 3	27. 0
"	2nd. 5	2. 766	37. 0	28. 5	47. 1

Table X.

Form of Disease	Numbers
Mania	65
Melancholia	26
Dementia	8
Sp. Dementia	4
C. Imbecile	8
Sp. Mania	5
Monomania	1
Total cases examined	117

Table XI.  
Causes of Insanity in the Tubercular cases

Cause	Number	Cause	Number
Hereditary Predisposition	29	Disappointed Affection	1
Drunk	5	Ovarian	1
Conjugal	7	Religion	1
Overwork	8	Puerperal	5
Epilepsy	7	Masturbation	5
Traumatism	3	Poor Living	1
Blindness	2	Unknown	38
Previous Attacks	4	Total cases examined	117

∴ Where a cause was ascertainable 36.7 p.c. due to H.P.  
 ∴ " " " " 10. p.c. " " Overwork

Table XII.

State of Lungs	Number
Phthisical on admission	17
Suspected " " " "	28
Healthy as far as ascertainable	72
Total Cases Examined	117

∴ 14.5 p.c. Phthisical on admission  
 ∴ 23.9 p.c. Suspected Phthisical on admission  
 ∴ 38.4 p.c. " or known to be Phthisical

Table XIII.

State of Lungs	Died within 1 year's residence	YEARS			
		1-2	2-3	3-4	4-5
Phthisical	8	3	0	1	0
Suspected	8	5	6	1	3
Healthy	2	10	12	12	10
Totals	18	18	18	14	13

XIII (cont.)

YEARS	5.6	6.8	8.10	10.12	12.15	15.20	Totals
	2	1	1	1	0	0	17
	1	3	0	1	0	0	28
	4	9	3	6	3	1	72
	7	13	4	8	3	1	117

Table XIV.

Dead within year of Commencement of symp.	1.2	2.3	3.4	4.5	5.6	6.7	Total
35	14	7	3	1	1	3	64
Total cases 72, No appearance of Phthisis before death, 8							

Table XV.

Delusions	Nos.	Delusions	Nos.
Persecution	29	Religious	2
Fleeting	18	Hall. of hearing etc.	2
Visceral	9	No delusions	52
frandiosè	5	Cases Examined	117
∴ 55.5 p.c. had delusions			
∴ 44. p.c. had no delusions			
∴ 44.6 p.c. of the delusions were delusions of persecution			

Table XVI.

Attempted suicide	16
Threatened suicide	15
Not suicidal	86
Total	117
∴ 13.6 p.c were suicidal	
∴ 12.8 p.c " threatened	

Table XVII

Disease	Average age at death
Mania	40.4
Melancholia	42.2
Dementia	49.2
Ep. Dementia	34.1
C. Imbecile	34.6
Ep. Mania	39

Table XVIII

Classes	Number
Slight Tub. deposit	13
Extensive " "	101
Tub. deposit & cicatrix	3
Total cases examined	117

Table XIX

Organ	Frequency	Organ	Frequency
Tub. Ulcers of Intestine	17	Tub. of Liver	2
" Mesenteric glands	17	" " Peritoneum	1
" Bronchial "	8	" " Mesenteric { and Bronch- -ial glands	2
" Spleen	1	Total	48

Table XX

Cases examined	178
No signs of Phthisis	143
Phthisis present	35

Table XXI.

Non-Phthisical males	107
" " females	36
Phthisical males	29
" " females	6
Total cases examined	178

Table XXII

Delusions of grandeur	17
" " persecution	8
" absent	6
" Unascertainable	4
Total examined	35

Table XXIII

Disease	under 1 year	YEARS						Total
		1. 2	2. 3	3. 4	4. 5	5. 6	13. 14	
Maniacal	4	12	5	0	0	0	0	21
Melancholic	1	4	3	4	1	0	1	14
Totals	5	16	8	4	1	0	1	35

Table XXIV

Average age of	Tubercular G. P.	YEARS
" " "	" " "	45. 6
" " " Male	" " "	45. 4
" " " Female	" " "	46. 6
" " " Maniacal	" " "	46. 6
" " " Melancholic	" " "	45. 6

Table XXV

Cases Examined	178
Non Tubercular	143
Tubercular	35
Slight deposit	11
Extensive "	18
Slight deposit with cicatrices	6

Table XXVI

Organ	Frequency
Mesenteric Glands	1
Peritoneum	2
Liver	1
Kidneys	3

Table XXVII

Periods	Average nos. Resident		Total average Resident	Deaths from Phthisis Tuberculosis		Total deaths from Consumption	Number of Deaths		Total number of deaths.
	Male	Female		Male	Female		Male	Female	
1861-70	-	-	4688.6	39	53	92	347	235	582
1871-80	2381	2324	4705	57	36	93	387	197	584
1881-90	2796	2938	5734	55	41	96	389	252	641

Table XXVIII.

Periods	P. C. of deaths from consumption on average nos. Resident	P. C. of deaths from consumption on total nos. of deaths.	P. C. of male deaths from Consumption on total nos. of male deaths.	P. C. of female deaths from Consumption on total nos. of female deaths.
1861-70		15.8	11.2	22.5
1871-80		15.9	14.7	18.2
1881-90		14.9	14.1	16.2

Table XXIX. A.

Periods	Total number of deaths from Phthisis developed in Asylums.	P. C. of Asylum developed Phthisis on total nos. of deaths.
1861-70	53	9.1
1871-80	49	8.3
1881-90	50	7.8

Table XXIX. B.

Periods	Numbers of deaths from Asylum developed Phthisis		P. C. of Asylum deaths from Phthisis on total nos. of	
	Male	Female	Male deaths	Female deaths
1861-70	21	32	6.0	13.6
1871-80	30	19	7.7	9.6
1881-90	30	20	7.7	7.9

Table ~~XXX~~

Mental state on admission	Number
Mania	149
Melancholia	54
Congenital Imbecility	24
Epileptic Dementia	24
Dementia	21
Epileptic Mania	9
Total	281

Table ~~XXXI~~

Mental state at death	
Dementia	99
Mania	83
Melancholia	42
Congenital Imbecility	24
Epileptic Dementia	26
" Mania	4

Table ~~XXXII~~

Cause of Insanity	Number
Hereditary Predisposition	33
Previous Attacks	41
Congenital	34
bodily Health	30
Domestic Trouble	23
Epilepsy	19
Alcoholic Excess	12
Puerperium	10
Injury	4
Obstetric and Uterine	4
Overwork	3
Business Worry	2
Religion	2
Sexual Excess	2
Other Causes	5
Unknown	57
Total Cases	281

Table XXXIII

State of Lung	Did within 1 Year Residence	YEARS 1-2	YEARS 2-3	YEARS 3-4	YEARS 4-5	YEARS 5-6	YEARS 6-8	YEARS 8-10	YEARS 10-12	YEARS 12-15	YEARS 15-20		YEARS Above 20	Totals
Historical on Ad.	44	6	1	3	1	1	0	0	0	0	0		0	56
Suspected " "	18	18	12	11	2	4	4	3	1	0	0		0	73
Apparently Healthy	2	1	24	9	21	12	30	15	13	12	9		4	152
Totals	64	25	37	23	24	17	34	18	14	12	9		4	281

Table XXXIV

Delusions	
Persecution and Suspicion	44
Various	20
Fleeting	8
Fraudulent	7
Hallucinations of hearing, etc.	7
Religion	4
Visceral	5
Vague Suspicion	3
Total	98
No delusions	183
Total cases examined	281

Table XXXV

Suicides	
Attempted	38
Threatened	23
Not suicidal	220
Total cases	281

Table XXXVI (Healthy.)

Disease	MONTHS	MONTHS	Years	Years	Years	Years	Years	Years	Years	Years	Totals
	Under	From	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8	
Mania	25	18	20	9	3	0	1	1	1	2	80
Melancholia	9	9	6	3	0	0	0	1	0	0	28
Congenital Imbecility	2	4	2	1	3	0	0	0	0	0	12
Epileptic Dementia	4	3	4	0	0	1	0	0	1	0	13
Dementia	5	3	4	1	0	0	0	0	0	0	13
Epileptic Mania	3	1	0	0	0	1	0	0	0	0	5
Puerperal Mania	1	0	0	0	0	0	0	0	0	0	1
Totals.	49	38	36	14	6	2	1	2	2	2	152

Table XXXVII (Suspicious.)

Disease	MONTHS	MONTHS	Years	Years	Years	Years	Years	Years	Years	Years	Totals.
	Under	From	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8	
Mania	16	9	9	1	0	0	1	0	0	0	36
Melancholia	5	4	4	4	0	0	0	0	0	0	17
Congenital Imbecility	2	1	3	0	0	0	0	0	0	0	6
Epileptic Dementia	2	2	1	0	0	0	0	0	0	0	5
Dementia	1	0	1	1	0	0	0	0	1	0	4
Epileptic Mania	2	0	0	1	0	0	0	0	0	0	3
Puerperal Mania	2	0	0	0	0	0	0	0	0	0	2
Totals.	30	16	18	7	0	0	1	0	1	0	73.

Table XXXVIII.

Average age at death.	P.	N.P.
Dementia	42.1	55
Melancholia	40.2	50
Mania	37.0	43.7