

to recommend that the expense of the same be paid by the State, subject to the approval of the General Assembly. Accordingly, twelve citizens of the vicinity agreed to furnish the land. It has all been procured, and is held by the State now, but five lots, and two of those the owner is willing to convey whenever matters are adjusted. Some *refuse*, and ask exorbitant prices, and the property may have to be condemned by law.

It should be noted that the sixty acres of farm land and ten acres of ground for the site originally thought to be sufficient, and furnished by the request of the commissioners as such, was all the law required, and *all* that was asked from the citizens until after the *views* of the commissioners as to the *amount* of ground for site of prison necessary had been enlarged, after their tour of inspection, for which no one is culpable, but which has worked a hardship, or will do so, unless the State comply with the recommendation, and the twelve men who agreed to undertake the task, relying on a *recommendation* of the allowance of the claim rather than a written contract, as had once been the case.

It is prayed that the sum of \$2,500.00, or so much thereof as may be necessary, be appropriated to condemn so much as may be necessary of said lots, and to reimburse those who have paid out funds to procure the title to that already vested in the State by deed, or to purchase that which may now be sold to the State, if any, willingly.

It is believed that a description of said five acres, consisting of about twenty lots, may be as follows: South half of block three, and north half of block one, and all of block two, Gibbs' addition to Anamosa, including streets and alleys between same.

NINTH BIENNIAL REPORT

OF THE

TRUSTEES, SUPERINTENDENT AND TREASURER

OF THE

IOWA HOSPITAL FOR THE INSANE

AT

MOUNT PLEASANT,

FOR THE FISCAL YEARS OF 1876 AND 1877.

DES MOINES:
E. F. CLARKSON, STATE PRINTER,
1877

IOWA HOSPITAL FOR THE INSANE, }
AT MT. PLEASANT, NOV. 1, 1877. }

TO HIS EXCELLENCY, J. G. NEWBOLD, *Governor of the State of
Iowa:*

SIR:—I have the honor herewith to transmit to you, on behalf of the Board of Trustees of the Iowa Hospital for the Insane at Mt. Pleasant, their Ninth Biennial Report, together with the report of the Superintendent, and statistical and other exhibits, showing the operations of the period, and the present condition of the institution.

I have the honor to be,

Very respectfully,

Your obedient servant,

E. M. ELLIOTT, *Secretary.*

OFFICERS OF THE HOSPITAL.

BOARD OF TRUSTEES.

T. WHITING, *President*.....*Mount Pleasant.*
MRS. E. M. ELLIOTT, *Secretary*.....*Mount Pleasant.*
WM. C. EVANS.....*West Liberty.*
L. E. FELLOWS*Lansing.*
SAMUEL KLEIN.....*Keokuk.*

TREASURER.

M. L. EDWARDS.....*Mount Pleasant.*

RESIDENT OFFICERS.

MARK RANNEY, M. D.....*Medical Superintendent.*
H. M. BASSETT, M. D.....*1st Assistant Physician.*
M. RIORDAN, M. D.....*2d Assistant Physician.*
JENNIE McCOWEN, M. D.....*3d Assistant Physician.*
J. W. HENDERSON.....*Steward.*
MRS. MARTHA W. RANNEY.....*Matron.*
REV. MILTON SUTTON*Chaplain.*

TRUSTEE'S REPORT.

IOWA HOSPITAL FOR THE INSANE, }
AT MT. PLEASANT, OCT. 18, 1877. }

To His Excellency, JOSHUA G. NEWBOLD, Governor of Iowa :

In compliance with law, the Trustees respectfully submit their Ninth Biennial Report, accompanied by the biennial report of the Medical Superintendent, and the exhibits of the Steward and Treasurer.

During the last biennial period, all the regular meetings required by law have been held, as well as special meetings, and numerous visits of several of the trustees for the purpose of advising with and aiding the superintendent in expending the special appropriations and the extraordinary labor and responsibility of rebuilding that portion of the hospital building unfortunately destroyed by fire on the 18th day of April, 1876.

The superintendent in his report has so fully given the details of the expenditures of the appropriations and the improvements made, that we need add but little. The improvements and repairs have been made under the special supervision and direction of the superintendent, but with a free conference with and unanimous approval of the Board, and we commend his work in this regard as having been prudently, economically, and well done. By reason of the fire, necessitating an expenditure of money and labor not anticipated, it has been deemed best to leave undrawn the appropriation of \$5,000, "for materials and labor in replacing and repairing sub-basement." There did not appear to be any danger in deferring the work for another year when, as we suppose, the money can be drawn and expended, for that purpose, without further legislation. The amount estimated by Messrs. Piquenard and Finkbine to fully perform this work, as shown by our last report, was \$16,237.50. Of this amount, \$5,000 was appropriated at the last session of the legislature. It would be better and more economical to complete the work when all the machinery and tools are upon the ground, and we recommend that the balance of said estimated sum be appropriated.

The burning of the engine-house of the hospital was a calamity unforeseen and of course unprovided for. It placed upon the board of trustees what they felt to be a grave responsibility, and which would admit of no evasion, but must be met. The boilers, engines and machinery, were either destroyed or left without an inclosure or covering. They felt that there was but one course to pursue, and that was to rebuild. It was not a matter of convenience, but of absolute necessity. The erection of a temporary structure was canvassed, and rejected, as being impossible to meet the indispensable wants of the hospital during the winter season, as well as being a useless expenditure of money, and as endangering the entire institution. After mature consideration, and advising with Governor Kirkwood, and other state officers, it was determined to proceed at once to rebuild in a substantial manner, leaving the building unfinished, except so far as necessary to finish, to meet the immediate pressing needs of the hospital. The superintendent, assisted by Mr. George Josselyn, who had superintended the building of the hospital at Independence, prepared plans which were approved by the board; and the work proceeded under the personal supervision of the superintendent, who consented to assume that great addition to his duties and responsibilities; and there has been expended the sum of \$32,046.43, the details of which are appended to this report.

It will be seen, by reference to the itemized account, a considerable amount of the sum was not expended upon the building, but was for replacing and repairing machinery destroyed and damaged and other items. It is believed that for economy in building, strength, and durability, as well as for convenience and safety, this structure will compare favorably with any public work in the State. To complete it will require an expenditure of \$5,500.00, for which an appropriation is asked.

How to meet this expenditure was a most perplexing question. Of the appropriations made by the last session of the legislature, were the following, which it was believed could be used with unquestioned propriety, viz:

"For enlarging washing and ironing rooms, \$2,000.00." "For replacing partition walls and contingencies, \$3,000.00." The washing and ironing rooms were located in the part of the building destroyed. These amounts were drawn and used upon this work. Of the fund "for providential contingencies," placed under the control of the executive council, \$5,000.00 was appropriated for this building. The ex-

cess over the sum thus provided, viz: \$21,373.43, has been paid from the money drawn to defray the current expenses of the hospital. This has been done without drawing the full amount authorized by law to be drawn for current expenses. The board feel that the necessities of the case justifies their action in this matter, and will meet the approval of all who understand the facts.

In this connection the board desire to direct special attention to the suggestions and recommendations of the superintendent for a reconstruction of the rear center of the hospital building. If there were no other considerations than the improvement of this part of the building, for convenience and increasing its capacity for usefulness, it would be a judicious expenditure of money; but a far weightier consideration is: the safety of the building demands it. This part of the building, from its manner of construction and its use, is peculiarly liable to take fire, and with a fire under much headway the destruction of the entire building would be almost inevitable. The appropriation for this purpose, and also for replacing wooden partition walls with brick, and for water-pipes for fire purposes, is urgently recommended. The expenditure of a few thousand dollars ought to weigh but little against the chances of the loss of hundreds of thousands of dollars, and probably of many lives, by fire.

The superintendent makes suggestions in reference to the enlargement of this hospital for the better accommodation of the patients. That much more room is needed for the accommodation of the number of patients here is true. The hospital is over-crowded. It was not designed for so large a number, and so many cannot be so well cared for as could a less number, or the same number with more room. The State needs, and to properly care for the insane must have, more hospital room. Whether this hospital shall be enlarged, or some other plan adopted, is a matter that demands careful consideration by the legislature. The proposed enlargement is no doubt feasible. As to how the wants of the State shall be fully met, is an important question for legislative action, upon which this board does not feel called upon to express an opinion. It is certain that the completion of the hospital now in process of erection at Independence will fall far short of meeting the wants of the State.

The trustees join the superintendent in calling attention to the necessity for providing for the care of insane criminals. Several dangerous men have been sent here from the state prison. The fact that the hospital has no facilities for properly caring for such persons seems

to have been overlooked. They constitute a dangerous element here, and it is impossible to prevent their escape. Several have already escaped, and have not been recaptured. It is a wrong to the officers of the institution, to the attendants who are required to take charge of them, and to the patients with whom they are placed, to send here, vicious, dangerous men—disposed to commit crime; all the more dangerous because unrestrained by sound minds. It is hoped the legislature will provide some means for a prompt correction of this evil.

To provide for the wants of the hospital for the ensuing biennial period, we recommend the appropriation of the following sums, based upon careful estimates, none of which can in our opinion be omitted or reduced without detriment to the institution.

Completion of new building.....	\$ 5,500.00
Balance to complete sub-basement.	11,237.50
For protection against fire by reconstruction of rear center.....	10,000.00
Replacing wooden partition with brick walls.....	8,500.00
Water pipes.....	1,000.00
Additional boiler.....	2,000.00
Addition to heating apparatus for utilizing exhaust steam.....	1,200.00
Improvements of grounds and new fences.....	1,500.00
New kitchen furniture.....	1,200.00
Contingencies.....	2,000.00
Total.....	\$39,137.50

By reference to the accompanying exhibits it will appear that the current expenses of the biennial period amount to the sum of \$263,076.03, and that the daily average of patients for the period has been five hundred and eighty-one. These figures show that the cost of maintaining such patients has been within a fraction of \$4.52 each per week.

At the date of our last biennial report, Dr. H. M. Bassett, who had been elected first assistant, had signified his non-acceptance of that office. He afterward decided to accept the position, and has since served in that capacity.

On the 15th day of December, 1875, the second assistant physician, Dr. M. Abby Cleaves, tendered her resignation, to take effect three months thereafter. At the March meeting, 1876, her resignation was accepted, and on the recommendation and nomination of the superintendent, Dr. Jennie McCowan, a graduate of the Medical Department of the Iowa State University, was elected to fill the vacancy, and has since filled the position in an efficient and acceptable manner.

On the 7th day of June, 1877, Mr. A. R. Wickersham, steward, and Mrs. E. M. Wickersham, matron, each tendered their resignations, which were accepted by the board, to take effect on the 7th day of September. At the September meeting of the board, on the nomination of the superintendent, Mr. Joseph W. Henderson, was elected to the office of steward, and Mrs. Martha W. Ranney was elected matron, and both at once entered upon the duties of their offices.

By a change in the law made at the last session of the legislature, the biennial period now closes with the month of September, instead of October, as before, and the reports of the trustees of this and various other State institutions are required to be transmitted to the Governor on or before the first of November preceding each regular session of the general assembly. This change of the law makes it necessary to hold a special meeting of the board of trustees in October. We would suggest the propriety of changing the times of the regular meetings of the boards of trustees to the fourth Wednesday in January, April, July, and October of each year.

In closing this report the board takes pleasure in bearing testimony to the able and efficient manner in which all the resident officers are performing their respective duties, to the harmony that prevails between officers and employes, and to the general good condition of the hospital.

Respectfully submitted,

T. WHITING,
SAMUEL KLEIN,
E. M. ELLIOTT,
L. E. FELLOWS,
WM. C. EVANS.

SUPERINTENDENT'S REPORT.

TO THE BOARD OF TRUSTEES.

In presenting to you the Ninth Biennial Report of this Hospital, I feel I may say, while some obstacles have arisen in our path and we have met with some discouragements on the way, a fair degree of success has attended our best efforts to make the period a prosperous one in general. The obstacles and discouragements have been in part the same that I have remarked upon in former reports—the uncomfortable overcrowding of the hospital and the lack of facilities for treating or properly caring for so large a number—amounting to, at the close of this period of twenty-three months, six hundred and eight persons—a number representing more than twice the capacity of the hospital. Still we have got along without any serious accident or epidemic, though constantly exposed to both, for which immunity some credit may be fairly claimed to be due to all who have had the care of patients, in the watchfulness that has prevented collisions and violence, and the high degree of cleanliness that has been maintained, so necessary to preserve health.

Another obstacle, and one that added much to the cares and perplexities inseparable from the management of a large and crowded hospital, one that has caused much anxious thought, was the occurrence of a destructive fire, to which all institutions of the kind seem peculiarly liable. On the afternoon of the 18th of April, 1876, a fire was discovered by one of the patients upon the roof of the original engine-house, over the ironing and drying-rooms, near the bell tower and the ducts through which air was supplied to the ventilating fan. How the fire originated is not known, but if it was not an incendiaries' work it must have taken from a spark from the ironing stove chimney, some twenty-five feet distant, though there had been no fire in the ironing stove for three or four hours. This building was forty feet distant from the principal rear, and main center buildings, and was connected

with the former by what is called the market hall, over which is a room used for an ironing or drying room, as required. Originally insufficient in dimensions for all the needs of the administrative department it had been added to on the south at three different times, till it was at the time of the fire one hundred and thirty-eight feet long by a general width of about sixty feet. Within were the boiler, pump, engine, fan, washing, ironing, engineers' fitting rooms, and storage room for coal and a paint shop. The roof was shingle, and many partition walls and all the floors were wood, and no brick partition wall afforded any protection against the spread of fire. By reason of its uses it was very dry and in a condition favoring rapid combustion. The alarm was promptly given, but the fire, apparently small at first, quickly burned through the roof into the attic and involved the bell tower and assumed formidable proportions. The wind was fresh from s. s. e., blowing sparks and burning cinders in the direction of the rear and main center buildings and the wing occupied by the female patients, while the fire tended strongly to spread in the same direction. Fortunately the fireman had a good head of steam, and hose being quickly attached to the Niagara and Worthington pumps, but a few minutes elapsed till two strong streams of water were playing on the fire. For a half hour or thereabouts it seemed as if the fire would overcome all efforts to control it, reach the main building and end only in the destruction of the whole or a greater part of the edifice; but, thanks to the whole corps of employes, some of whom worked heroically to stay the fire, while others rendered scarcely less efficient aid in other spheres, the fire was subdued at the point where it endangered the main building and the female wing before it had reached the pump-room and rendered them useless; after which efforts were chiefly confined to saving what could be saved, while the remainder of the building burned down rapidly. The engineer filled his boilers and let off steam, to which foresight is due the fact that the boilers, exposed to the greatest heat of the fire, came out but little injured. One pump was also but little injured, and so we were able with slight repairs to the jacket of one boiler and the least injured pump to have steam and water again in forty-eight hours after the breaking out of the fire.

There was, of course, for a time a state of consternation among portions of the female patients, which was happily kept subdued by the judicious exertions of the doctor's assistant and the female supervisor, efficiently aided by the attendants.

The building was only two stories high, and consequently the roof

was easily reached and hose raised to play upon the fire in the most effective manner. Had the fire been less accessible the result might have been very different, and the loss far greater. So it may be fairly said, I think, that to a comparatively small outlay for pumps and hose a large destruction of property, and even worse consequences have been prevented.

Soon after the fire one bath room in the basement was turned into a wash-room, and several hand washing machines were brought into use, while many articles were washed in the wards. Having been deprived of the inadequate facilities we previously had for drying clothes in cloudy weather, they now had to be carried up five stairs into the attic to be dried, and brought down again to be ironed. All ironing was done by hand in the single room left that could be used for that purpose; and both washing and ironing were carried on with great discomfort to all engaged in this work during both summer and winter. Steam was made during the summer following the fire in the open air, while the engineer and painter improvised places in which to carry on their operations. Active or propulsive ventilation was of course dispensed with, for the fan had been destroyed. But we had remaining the exhaustive ventilation of the most crowded wards, and those in which patients with dirty habits are lodged, by means of the great chimney stack, and so with great care to avail ourselves of all external currents of air, the household was kept pretty healthy.

As soon as practicable, upon authority granted by your board, plans for rebuilding were prepared by Mr. George Josselyn, and after being adopted were carried out as rapidly as possible with the means at command. The result has been, that before the winter following the fire a new building was enclosed, affording suitable protection from frost and weather for the boilers, steam and pumping apparatus; and in nearly one year from the date of the fire, the boiler, machinery, washing, ironing, drying, fan and engineers' fitting-rooms, and a spacious coal house, were about complete for use. The plan of the new building is much better than the plan of the old one, and will afford much better facilities for doing certain kinds of work. Besides affording better facilities for doing all the work that was done in the old building, provision is made for a new bakery, which is much needed, a work room also much needed, a room for pathological investigations, whenever the means may be afforded, a mortuary, with suitable conveniences, two sleeping rooms for firemen near the boilers, and a clock-tower which can be seen from all parts of the hospital occupied

by patients. The bakery, paint shop, mangling, work and pathological rooms, an upper hall and the tower are uncompleted, but it is very desirable they should be finished for use at an early day.

It was decided to rebuild in a fire proof manner, and the work has been well done. The new building is a little larger than the old one. This was necessary in order to carry out the plan embodying what we regarded as needed to afford proper facilities for the work to be done, and afford some additional conveniences much needed, which we had never had, and which could not be provided in any other way. This moderate enlargement added but little to the cost of rebuilding, and is of a value to us far exceeding the additional outlay. In the plan, the fan is located about one hundred feet further south than before, and the cost of constructing a new fan or fresh air duct for that distance, as well as the cost of a separate engine for driving the fan, is included in construction account. A cistern for receiving the condensed steam, about sixty feet long and four feet in diameter, constructed under the floor of the first story, added somewhat to the cost of rebuilding, but it is a much needed improvement, and a great convenience, as it is of ample capacity, and brings the boiler water supply in close proximity to them. In the machinery room are placed the large engine, altered and repaired by Royce & Hopping, of this city, making it a finer and more effective piece of machinery than it was before the fire, the Niagara pump, skillfully repaired by Mr. Charles Prince, also of Mt. Pleasant, the old Worthington pump, a Sturtevant hot-air blower, and a tank for hot water to supply the wash-room and kitchen. Exhaust steam from the engine and pumps, of which there is a much greater supply than is needed for the purpose, is used to heat the water in the tank, and for the hot-air blast for drying clothes in wet and cloudy weather. With this apparatus, which drives a powerful current of air at one hundred and twenty to one hundred and thirty degrees Fahrenheit into the drying-room, articles that have just passed through the wash-room can be dried with great rapidity.

The wash-room is supplied with three hydraulic washers, with shifting gear, a Weston centrifugal wringer, galvanized iron rubbing tubs, soap vats, etc. An elevator takes the clothes to the drying-room above, from whence they are taken to the ironing-room adjoining.

The outer walls of the building are built of a sand-limestone, of a blueish-gray color, in rock-faced broken range work, and present a pleasing appearance. The water table, window caps, sills and corbels, door caps and sills, are of magnesian limestone of a very durable

quality. It is two stories of eleven feet six inches in height, above water table, except the boiler and coal rooms, which are of one story of nineteen feet in height, about four feet of which is below the water table. The engine, fan, engineers' fitting room and the paint shop are on a level with the boiler-room, and are about sixteen feet between floor and ceiling. The floors and ceiling of the second story are brick arches, resting on iron joist, levelled with concrete. The first or basement floor is laid with two-inch limestone flags, and the second story with single flooring, resting on concrete. Over the second story is a light frame roof, covered with tin and painted. The roof over the boiler and coal storage room is wholly of iron, and furnished with two Emerson ventilators. All the ventilating and smoke flues of the two-story building are carried up independently through the roof, to prevent any local fire communicating with it. All the partition walls are of brick. Mr. James Cullan was foreman of the stone masonry, and Mr. Elwood Pyle of the brick masonry; and much credit is due them for the manner in which they carried on their work. The whole is about as fire-proof as a building can be; and while I still shudder when recalling the excitement and risk attending the fire, and deplore the loss to the State, I can but feel it has not been without its compensation in the increased facilities thus secured for doing certain things that probably could not have been in any other way provided. And we can but be thankful that the fire occurred just after the season was so far advanced steam was no longer required for heating the wards for that season. Had it occurred in the winter, the hospital must necessarily have been closed, if it had escaped the greater risk of being consumed, and its patients sent home till the following season, or till boilers, water and steam pipes and machinery could have been protected, and thus much trouble and inconvenience and expense, if not suffering, have ensued. Now this particular accident can never happen again here, and thus one source of danger of a great calamity is forever removed.

EXPENDITURE OF APPROPRIATIONS.

The Sixteenth General Assembly made appropriations for sundry purposes named in the act, amounting to twenty thousand one hundred dollars. This money, with the exception of five thousand dollars for replacing and repairing sub-basement walls in accordance with the recommendation of Messrs. Piquenard and Finkbine, printed in the last report, has been drawn, and I believe wisely and judiciously expended.

Twelve water-closets and sink-rooms hitherto enclosed with lath and plaster walls, and having wooden floors, affording a harbor for rats, and well calculated to receive, retain or emit unsavory odors not conducive to health or comfort, have been reconstructed, brick taking the place of the old partition walls, and marble and slate or limestone flags resting on brick arches being substituted for the old floors, while better ventilation has been secured, and better soil pipes, sinks, etc., have taken the place of fixtures imperfect from the beginning, and in time became almost useless.

New soil pipes and water-closets have been put into several associate dormitories which avoids the danger arising from the use of common night utensils in such rooms, a danger that has heretofore caused some unpleasant accidents in the night.

In several of the wards—twelve—the openings of the heating flues which were near the floor, have been raised to a point about nine feet above it, and the ventilating flues which led from the upper part of the wards and rooms to the attic, brought down to a point within a few inches of the floor. By this change the coolest instead of the warmest air of the wards is exchanged for fresh air, and the fresh air cannot be contaminated as before by the dirty habits and mischievous propensities of many patients it is impossible to eradicate or correct, while such fresh air flues remained within their easy reach. At the same time many fresh and warm air flues were turned from the wards into those rooms occupied by maniacal patients, or those who will not keep their beds in cold weather, who will thus be protected from suffering.

As the foregoing described works were designed to accomplish in part the same purpose—purer air and better ventilation—the sums appropriated have been used without an exact account of the amount expended for each, for as the works were carried on more or less together, a workman would necessarily be partly engaged on one and partly on another. And besides the cost of some portions was greater, and some less than was estimated. The sum total appropriated for these purposes, however, was nearly sufficient to cover the outlay. In making such alterations and improvements it is well nigh impossible to foresee every obstacle and contingency and accurately estimate the cost; and my aim has been to estimate as nearly as possible the cost without over-estimating it, and how well I have done it I leave it for you who have scrutinized the expenditures to say.

The sum appropriated for airing courts—one-half the sum asked for

was quite insufficient to carry out the design and increase a sufficient area. The appropriation for new and improved kitchen apparatus was also less than it was estimated was needed to provide facilities for the preparation of food for so much larger a household than the present apparatus was intended for, and it could not be used to advantage. But by putting those two sums together, with a small surplus of the appropriation for enlarging the well, unexpended in that work, we have constructed a very good fence enclosing a fine area of several acres adjoining each wing, thus supplying a much felt want—the more felt as the number of patients has increased from year to year. The area of these courts is so ample and spacious they will afford all classes of patients much more out-door air and exercise than they possibly could have without such enclosures. The fence is nine and a half feet high, and more than forty thousand feet of lumber was used in its construction. The posts are tamarack poles, set in rubble and grouted.

Well knowing the value of airing courts as they are used in connection with the best hospitals of this and other countries to afford all classes of patients greater freedom in the open air, and prevent the easy escape of the considerable number always so inclined, I feel more fully prepared than ever before to realize the great boon they will prove to be to the patients of this hospital. Ever since the airing court for women was enclosed last summer, during every pleasant day their wards have for many hours each day been almost depopulated, and they were to be sought with their attendant in the shady grounds so pleasantly occupied with out-door sports or social intercourse as to appear to almost forget their surroundings, or the suffering attending mental disease. General observation and experience appear to show that many of the excited and restless and complaining patients are more comfortable and more susceptible of improvement through hospital treatment if permitted to be a good deal abroad in the open air; the dull and opathetic, and those whose condition strongly tends to chronic insanity and dementia are also benefited, apparently or really, and made more capable of enjoying some of the blessings and pleasures of living, even though short it be; and thus are kept raised, perhaps, somewhat above the low level to which all uncured insanity inevitably tends. If such patients are kept the greater portion of the day in crowded wards, as they must if they cannot be suitably guarded abroad, this tendency to mental degradation proceeds with greater rapidity. Prepared as we now are, or soon shall be, to afford patients far more out-of-door freedom, residence in the hospital will be divested

of some features that render it to many more or less irksome and tedious.

The enlargement of the strong well in front of the hospital has been made and the water is pumped into a separate tank and thence distributed to where it is wanted. The water is of excellent quality. It is drawn through fifteen hundred feet of three inch pipe with much greater facility than I expected; but the pumps will not draw it from a depth much below sixteen feet; but as the supply is between two and three hundred barrels a week, and the water will rise near the surface of the ground, there is practically little difficulty in using its full supply. At present there is no doubt the well will afford more than a supply of drinking and cooking water during the portion of the year when the reservoir water is unfit for such uses. It will also do away with the trouble and annoyance attending the carrying of water in buckets from our small wells for these purposes for several months each year.

The estimates for its enlargement were based upon a diameter of twenty or twenty-five feet, but the ascertained difficulties and dangers of sinking so large a well in the treacherous clay that abounds here, led me to advise that it be enlarged to only fifteen feet in diameter, and the difficulties we encountered to avoid dangerous caving appears to show that the size was wisely diminished. This reduced the cost a little below the estimate and appropriation, and made available a small sum for another purpose as before stated.

The appropriation for trees and shrubbery, and caring for the same, has been expended in grading, and under-draining a portion which is flat and wet, and planting with trees and seeding with lawn grass ten or twelve acres adjoining the entrance gate and bordering the avenue of approach to the hospital. The work has been done in accordance with Mr. Cleveland's plan, and will doubtless give to this portion of the grounds a very attractive appearance in the course of a few years.

The appropriation for new kitchen furniture being less than it was believed could be used to advantage for the purpose appropriated, not being sufficient to supply the new and improved apparatus really required, and that sum being needed for the completion of another important work, it was drawn and so used as before stated.

The appropriation for enlarging the washing and ironing rooms as they were before the fire, together with that for replacing partition walls and for contingencies, have been drawn and used in reconstruction. Without the aid of these sums, amounting to five thousand dollars, we could hardly have completed the new building so far as to make it of much use.

The appropriation for replacing and repairing sub-basement walls as you are aware, has been left undrawn, partly because I have had so many pressing duties and cares I could not well give the matter sufficient oversight, and partly on account of the necessity of drawing from the state treasury a sum much larger than used. It is, however, more apparent now than it was two years ago that this work should be done as soon as practicable, and I would recommend that a sum representing the estimated cost be placed at your disposal during the next biennial period. I believe it will be better when the work is once commenced to carry it on to completion as fast as possible.

PRESENT NEEDS OF THE HOSPITAL.

Every institution of the kind demands from year to year considerable outlays for repairs, alterations and improvements, to meet the requirements of progress if it is not to be allowed to fall behind and become second rate. Some of these needs, or necessities as they might well be called, are based on experience here, and some on progress and experience in this specialty elsewhere. Psychological medicine and the art of treating and caring for the insane is as progressive, probably, as any department of medical science, and all public institutions especially, should be provided with the means and facilities for helping along and adding to the general progress and advancement of knowledge. To have such facilities afforded, and use them aright, is to share in the honor that comes through any improvement in the healing art. And the benefit is not alone that honor is thus conferred upon the State or some individual, the general public who are no less interested than individuals in medical or general progress are greatly benefited for whatever throws any new light upon the causes of disease, or points out any new or better method of treatment must operate to benefit all. None have a right to sit still and simply avail themselves of the labors of others—all should work, looking forward to possible improvement and the increase of knowledge that shall be for the advantage of mankind. And this will always bring good returns for any outlay necessary for such progress in the attainment of such knowledge of disease as may facilitate recovery or lead to its diminution or prevention. But progress in any direction is slow and difficult without liberal pecuniary aid, and still an aid that need not be felt to be burdensome. A little this year and a little the next year is all that is asked for, till in no distant time perhaps equipment will be com-

plete. Every one connected with the hospital is willing to work, I believe, and only ask for proper means and facilities for carrying on work. Most public institutions, where in their construction a paramount idea of economy and cheapness has prevailed, require a considerable outlay from year to year for repairs or alterations to remedy original defects, and this hospital is no exception to the too general rule. A great deal of work of this kind has been done here as reference to previous reports will show, but a good deal remains to be done for some years if a respective rank is to be maintained. To do nothing in the general direction of progress is to fall behind into a position of mediocrity. And first of all I would call your attention to a consideration of better

PROTECTION AGAINST FIRE.

The narrow escape from total destruction of the hospital by fire above alluded to, leads me to strongly urge that some efficient steps be taken to prevent a like occurrence, and possible or probable loss of life that might follow.

I suppose no class of public buildings are so exposed to destruction by fire as hospitals for the insane. Experience in this country at least, where a large proportion have been destroyed or extensively damaged, appears to show it to be a fact. There are always a considerable number of patients who are prone to mischief through design or impulse, and we have several times narrowly escaped great loss. It is a simple thing for a patient, at a moment when an attendant's attention is engaged in some other direction, to light a taper by the gas burner, which cannot be kept out of his reach, and set a bed on fire. This has been done several times here, twice within the last biennial period; and this was the origin of the fire, I believe, which destroyed the Central Ohio Hospital, and perhaps others. And among any class of employes, numbering seventy-five or eighty, some one will at some time be grossly careless in their use of matches or the care of fire. Consequently if a fire should get under headway in any of the several portions of the building, as it might, especially if occurring in the night, the loss would almost certainly be very great—a hundred thousand dollars or more—a loss that could hardly be computed in dollars and cents at this time, when the accommodations for the insane in the State are so inadequate to their needs, for it might leave five hundred or more insane persons houseless, rendering it necessary to return

them to the community from whence they were sent to the hospital, where it is well enough known no sort of provision exists for their care. There are certain portions of the hospital where the breaking out of a fire, crowded as we are, would almost certainly be attended by a deplorable loss of life, and this most assuredly ought to be guarded against. And there is one portion in particular where a loss by fire, not amounting to a large sum, would seriously embarrass our work, if not put a stop to it altogether, and necessitate the closing of the hospital for a time. This portion is the rear center building, in which are the kitchen, the bakery, sitting and lodging rooms for all employes not engaged in the care of patients. Unquestionably this building or portion of the structure is much exposed, and perhaps our source of greatest danger. It certainly has caused me much anxiety in past years till now. A fire here would destroy the cooking apparatus, and it would be many weeks—perhaps months—before it would again supply such a family with food; and of course the patients could not be taken care of here during that time. It is from this point also that a fire would be most likely to spread and do the most pecuniary damage. This rear center is directly connected with the main center, and the wings of the hospital occupied by patients with the latter, while there is no wall that would oppose the least obstacle to the spread of a fire in any direction, and so should a fire get started in this quarter it would be impossible to foretell where it would stop or the consequences thereof.

I therefore earnestly recommend, after careful consideration, that this rear center portion of the hospital be made fire-proof, at a cost, I estimate, of about ten thousand dollars. Then should any considerable damage be done to other portions of the building by fire, we would have our cooking apparatus safe, and thus we might go right on without the least interruption—perhaps without discharging a patient. Besides, this improvement will permit a desirable rearrangement of some portions of this rear center, whereby, among other things, more single sleeping rooms can be made for employes. The present arrangement whereby five or six persons have to occupy the same room, is a most unfortunate one, sometimes demoralizing in its effect upon individuals, and ought to be abandoned as speedily as practicable. I feel that the expenditure of nearly as large a sum for this purpose alone would be justifiable.

For further protection from fire, a pipe should be carried from the steam pumps to the main building with a branch to each rotunda and

each ward, to which hose should be kept constantly attached and in a serviceable condition. With such an apparatus ready for use, water could be forcibly thrown upon a fire at its very outset if discovered, and prevent it from getting under headway, as it ordinarily would do in the time usually required to do anything effective towards checking a fire by the methods in common use. I estimate this could be done for about one thousand dollars.

To still further lessen the danger to which we are constantly exposed, brick walls should be built between the rotundas of the center building and each wing, and between the first and second sections or blocks of each wing, in place of the present lath and plaster partition walls, as I have recommended in previous reports. The opening in these walls in each story should have an iron space-door ready to be closed in an emergency. This work was begun between the rotundas and the wings a little more than two years ago, and carried up to the second story. About three thousand five hundred dollars will be necessary to complete this work, and I earnestly hope the means will be afforded, as it will not only afford additional security from spread of fire, but remedy an important original defect.

With this expenditure of a not very large sum, when the magnitude of the interests to be protected is considered, I think the hospital will be about as well protected as it can be without being made absolutely fire-proof throughout. Doubtless a steam fire-engine would be a valuable possession, and probably should sometime be provided, but I now think the previous suggestions are of paramount importance, and should be first carried out.

It is important the new building should be completed according to the plan. We need the unfinished portions every day, and their use really cannot be dispensed with much longer. And no one, I believe, who can fully appreciate the disadvantages of inadequate facilities for carrying on a large and crowded hospital will withhold a moment the means for furnishing what we lack in this unfinished building. For this purpose it is estimated five thousand and five hundred dollars will be required.

An additional boiler must be provided. We have no more steam generating power than we had when there were but one-half as many patients as we now have under care, and it was then no greater than was needed. To supply the steam for washing, cooking, and heating the water for bathing for three hundred patients, our present surplus number, is not less than equivalent to the power of an ad-

ditional boiler, and more steam generating power is required to give us the more active ventilation needed in order to maintain the proper standard of health and comfort while the hospital is so crowded. The brightest side of hospital life is hard enough, but a crowded, ill ventilated hospital is something to recoil from.

With the room for another boiler provided, and at the present low price of iron, and low rate of labor, such a boiler as we need it is estimated can be procured and set up for two thousand dollars.

From the opening of the hospital till now the exhaust steam from the engine and pumps has not been utilized except to heat water for the wash-room and kitchen, and latterly to heat the air passing through the Sturtevant hot air blast, because we had no means of utilizing it, consequently a large amount of heat has been lost. It is estimated the heat thus lost, if the fan engine is running, is sufficient to warm the hospital in moderately cold weather during the time the engines and pumps are in use. The present boiler capacity is not sufficient to keep the wards warm and run the ventilating fan except in moderate weather unless we can utilize the exhaust steam. While the wards are so crowded with patients the fan is almost a necessity for the maintenance of air fit to breathe, and it should be worked day and night. This we were not able to do during the last two winters because the boiler I asked for was not provided for, and we suffered in an unusual degree from erysipelas. Happily no death, I think, was wholly attributable to this cause, but a good many suffered the distress attending that disease, because, I believe, our ventilation was defective through preventable causes. I expect a repetition of that experience during the coming winter.

Believing it would be better to raise the temperature of the cold air of winter somewhat, by means of the exhaust steam heretofore lost, and by live steam if that should prove insufficient in the coldest weather, before it passes the fan into the ventilating duct, instead of blowing the fresh cold air required for ventilation into the basement under the wards to be heated there, the new fan room has been arranged with that end in view, and I would recommend that suitable heating apparatus be set up to accomplish this purpose. I estimate that about twelve hundred dollars will carry out this plan. From an economical point of view alone, I believe the outlay would be a wise one. Probably a large part of this sum would be saved every year in the diminished amount of fuel consumed to generate the steam we need for proper ventilation, comfort and warmth. Without these

additions to our steam generating, heating and ventilating power, the air of the wards cannot be kept in that condition of purity fit to maintain health and conducive to comfort that it ought to be, or that is creditable to any public hospital.

Some more work needs to be done to grade and plant the grounds according to the plan; some new fencing will be required, including a division fence in each of the new airing courts and enclosing a field for tillage in the Knox pasture; some dry walks should be built in the womens' airing court, for which I respectfully request the appropriation of fifteen hundred dollars.

A gate lodge is much needed to protect our grounds and trees from damage by the incursions of stock through the gate which is sometimes left open through carelessness or design in the night. A good family could be selected to live there and keep the gates closed in lieu of paying rent. This arrangement would probably render it unnecessary to keep a person at the gate as we must now do in the day time at a cost of one hundred and eighty dollars a year. A suitable lodge with needful conveniences, well, etc., could probably be put up for about two thousand dollars.

The kitchen apparatus, much of which has now been in use more than sixteen years, must be renewed in part, and the capacity in part enlarged. It is not sufficient for our present work, and we cannot well get along with it much longer. Some portions are cracked, and worn, and leaky. And more modern apparatus will afford superior facilities for the preparation of food in such large quantity, while improving the quality, and enable us to afford more variety. I presume none can feel otherwise than that in this department the most approved appliances and facilities should be provided, when upon proper food the health so much depends. To afford the needed additional facilities in this department, and to renew some worn out apparatus, it is estimated the sum of twelve hundred dollars will be required.

Now that we can have, for the first time in the history of the hospital, suitable facilities for the study of pathology, and to make investigations into the nature and cause of the physical disease that gives rise to insanity, I beg that the necessary facilities may be afforded for the purpose. Researches of this kind elsewhere are producing some striking results. It seems to me the enlargement of our knowledge of brain pathology is likely to prove most valuable to the profession and to the public. The more thorough our knowledge of the nature of disease, and of the changes effected by it in the organism, the bet-

ter will we be able to prevent or successfully treat it. The superficial view of cerebral pathology that was only possible by means of the scalpel and unaided vision, has been far transcended within a decade or two by means of the microscope and micro-photograph. By the former method, all had long ago been learned that could be learned; but researches by the latter method, though promising much, are yet in their infancy. The field is a broad one, and will give employment to many workers; and ample pathological material is to be had here each year. But the necessary appliances for carrying on these investigations are too costly to be borne by individuals, and are properly a part of the equipment of any institution undertaking the work. Prepared as we are to make a beginning, I would respectfully request the fitting up of a laboratory, at an estimated cost of about three thousand dollars.

As no biennial period has yet passed without the occurrence of some unforeseen contingency, and the necessity for the expenditure of a sum or sums that ought not to be drawn out of current expense funds, I would recommend that two thousand dollars be appropriated for such purposes.

It is possible some may think the foregoing recommendations uncalled for and extravagant, but to think so is to be not well informed of what is really necessary to equip and conduct a hospital for the insane in such a manner as to merit and command the approval of the public. Something more is required to properly treat and suitably care for the insane than simply to live. If this were otherwise, if insanity were only a bodily disease, to be grappled with as most other diseases are by members of the profession at large, requiring no extraordinary or peculiar care, the hospitals specially devoted to its treatment would be unnecessary, at least far less numerous, and even these of much reduced capacity. But insanity differs from most other diseases. Not only is the brain involved and disordered in its action, but through it the mind also, rendering the individual generally incapable of management by the ordinary methods applicable to the management of the sick. The insane persons' own will and power of self control being perverted or destroyed, the will of others must be substituted instead, and that often for months and years.

It was long since found by experience that generally the will or judgment of others than those of the patients own household and kin could be beneficially substituted, and any needful restraint be more beneficially applied by strangers than by near friends; that removal

from the surroundings in the midst of which the nervous and mental disorder arose, and by which it might be kept active, to such as conduce to orderly habits and systematic ways of life is a necessary step for its most successful treatment; that wide experience in the management of this as of some other diseases gives rise to special skill that aids success, hence has arisen the modern hospital which has been multiplying all over the country; and having been generally well managed have obtained a deservedly high reputation. These institutions and the sums necessary for their maintenance appear to be a costly burden when viewed in the concrete, and in a certain sense they are so, though the individual burden is small, but they are a necessity nevertheless and must continue to exist, and must be supported till some other way can be devised and tried and found to be a better way. I have little faith to believe a much cheaper way is to be discovered, nor any very much better way outside of the general principles that form the organic basis upon which the present hospital system of the country rests. These institutions are not for the immediate present only, but for generations to come also. This and these institutions are not for paupers only, and their provisions and furnishings and general equipment should not be measured by what is considered simply necessary for the pauper class. For them shelter wholesome, and plain food may be about all that is necessary—about all the public are called upon to afford. But pauperism and insanity are widely different, and require widely different means and appliances for their treatment and care. The pauper may become insane and the insane may be of the pauper class, and the concurrence of insanity and pauperism renders it necessary as a general rule that it shall have the treatment and care humanity and philanthropy demand for the insane as a class. But required as these hospitals are by the tax-paying portion of the community chiefly, they should be well and cheerfully supported and maintained to a standard satisfactory to all. Not one of the numerous tax-paying friends of the three thousand and more patients who have been treated in this hospital, or of the one-half or more of that number who are or who have been tax-payers, I believe, will say the scale of expenditure has been too liberal, or the means and appliances greater than has conduced to reasonable comfort and welfare. Nor will the thousands say so who in all probability will receive shelter and treatment here during the period of a generation or two to come. The mental standing and equilibrium of all is insecure,—the rich, the well-to-do, those contending with adversities and poverty yet possessed of high moral worth,

and the pauper, are all alike liable to this dread affliction,—and the true spirit of philanthropy which regards all such unfortunates as the “Wards of the State,” demands that they shall be cared for with no less than a liberal economy—withholding nothing that can contribute to their recovery or proper comfort, or prevent or retard that pitiable mental degradation which is the inevitable doom, when life is much prolonged, if uncured insanity. Therefore, upon the grounds embodied in these brief views alone, the foregoing recommendations should be carried out because they are all needed as set forth. If this is done the hospital will in just that degree be better fitted for its appointed work, for everything which tends to make it complete in every department directly or indirectly affects the welfare of patients,—assists to cure those who can be cured, and alleviates the sad lot of those who must pass the remainder of their days in some degree of mental darkness.

FURTHER ACCOMMODATION FOR THE INSANE.

The fact that this hospital contains three hundred more patients than it has lodgings for, and that you have ordered the discharge of between eighty and ninety apparently incurable and harmless patients in accordance with the provisions of the Code, in order to keep our number within its present limit, while twenty-six more have been removed to Independence, is conclusive in showing that the State has not provided accommodations to meet the natural increase of insanity as the population increases from year to year. A larger number have been admitted and under treatment than during any previous biennial period though the district from which we receive patients is smaller than before, embracing scarcely if any more than one-half the territory of the State. This fact alone shows very clearly the rapid increase of the population and the inevitable increase of the number of the insane that need to be provided for, the ratio being not less than one to one thousand of the population, while a careful census would perhaps reveal a higher proportion. So much has been said in previous reports about the want of more hospital room that I would fain keep silent; but it is becoming every year a matter of greater importance, and I feel it a duty to speak briefly of the neglect of duty to provide adequately for the insane, show the urgency of the case, and suggest the remedy.

It is not probably a fact, as it is supposed by many, that insanity

within the State is increasing more than in simple ratio to the population. With the diffusion of knowledge and the increase of the facilities of communication, cases of insanity come to the light at once that formerly were kept hidden from the public view. And the fact that the brain affection which is the foundation of insanity has been shown to be more amenable to treatment in hospitals and by persons who thus acquire the skill that may be derived from opportunities of wide observation and experience of its protean shapes and ever varying phases, has also tended to bring the affection to the public notice. Here insanity is seen in the aggregate while in the township it is rarely seen, and hence it is sometimes supposed to be greatly on the increase. This may be the case by and by here, as it possible is the case now in the older States and older countries, but ours is yet a sturdy and vigorous people, selected, as it were, from the country at large for qualities that chiefly compose physical and mental vigor. But from this lookout it is plain to be seen that causes are at work that during the present, and more perhaps during succeeding generations, may increase the proportion of insanity to the population at large.

But in supposing it possible or probable that insanity is on the increase, the fact seems to be forgotten or overlooked that the population of the State is increasing at the rate of fifty thousand or more each year, and that this great increase of population alone adds fifty or sixty each year to the insane hospital of the State. This is not a light estimate, probably, for the ratio of the insane to the population throughout the country is higher than one to one thousand; but supposing the ratio to be one to one thousand in this State, and it will not in my opinion fall below it, there are about fourteen hundred insane persons within our boundaries, a large proportion of whom must have some kind of care, few private homes can afford them, or they must suffer. And not only they, but their families may suffer also. The presence of an insane person in a household may be just the element that may convert that happy, prosperous, or at least self-supporting family, into anything but what is conducive to their other public interests. Those who have no acquaintance with the inharmoniousness caused by the presence of insanity in a family,—the interruption to the usual routine of family organization, the care and anxious watchfulness added to daily cares and duties, the confusion and even violence that often attend—can form no adequate conception of the necessity of ample hospital room to relieve the pinch that so often comes when one member is transferred from the producing to the

dependent class; but there are a great many families in the State who can—who have been called to feel all the pain that can spring out of any of the adverse circumstances in life.

In 1865 this hospital was considered complete, with room for three hundred patients, and toward the close of that year its beds were all occupied. Since that time, while the population of the state has increased by about seven hundred thousand,—has about doubled,—and the number of the insane has increased by about seven hundred, the increase of hospital accommodation has been only about two hundred and seventy-five beds. The result has been an irresistible pressure for room that has crowded the two hospitals with accommodations for only five hundred and seventy-five with over nine hundred patients, while some five hundred more are scattered over the state in jails or poor houses, or in families, some of whom are illy able to bear the burden of their care. This may seem an old story, an oft repeated tale to be passed over lightly, and not a matter for legislative consideration, especially if the ratio of taxation is low and revenue inadequate to provide more room for the insane; but let any person—citizen or legislator—have this calamity befall their own household, as it at any time may, then the real importance of this matter can but be seen in the strongest light. Those who have fortunately been saved from any such calamity should feel willing to act liberally towards those who have these heavy and distressing burdens to bear.

It is true, I suppose, that while this crowding of our hospitals affects some injuriously, it affords others a better home and care than they otherwise would have. I cannot doubt, however, that the injury to some by overcrowding the hospitals, and consequently resulting in the impairment of their usefulness by preventing recovery, and the increase of the insane population that follows from placing obstacles in the way of cure, far outweigh the benefit to others who are chiefly of the chronic incurable class. It is unquestionable that recovery, the first and highest function of a hospital, cannot be promoted, if that hospital is much crowded, as in one that contains only its proper complement of patients. The friction, and irritability and collisions that crowding inevitably engenders and cannot possibly be avoided, may render our best efforts ineffectual, and are the very things sought to be avoided in the hospital treatment of insanity. If such conditions do not prevent cure directly, they may prolong disorder till a cerebral condition is established that forbids complete return to health, and is

favorable to future attacks that at no distant day may end in continuous disorder. And I am certain I see these results here every year.

Conditioned as we are, classification according to mental states, stage of disorder, social habits and tastes—all important in treatment—is most imperfect, and the refined and pure minded cannot avoid contact to an unpleasant or injurious extent with the vulgar and profane, the convulsed epileptic, and even the convict, on account of which many have just cause for complaint. It is not right or creditable to any community to permit such things to be.

A good deal might be said of the greater economy in doing all that can be done to cure insanity instead of neglecting the means of cure, and afterwards spending large sums of money to support the uncured insane persons, for this is what crowded hospitals tends to; but any one can see plainly enough the difference between two or three hundred dollars, the usual cost of taking care of those who recover, and two to three thousand dollars, the usual cost of support of those whose disorder runs into the chronic, incurable form. These are almost trite sayings by reason of their frequent repetition, but it is necessary to occasionally report them to the public, who are peculiarly prone to overlook them if they are not urged upon their attention, if they do not overlook their importance when they are. I hope, nevertheless, this is the last time it may be necessary for me to plead for more room, proper comforts, and purer air in wards for the insane in this State.

Now a simple remedy for this want of needful provision for the insane, is the speedy completion of the hospital at Independence, and the enlargement of this one. The enlargement of this hospital can be readily effected at a less cost, probably, per head, than the same amount of room can be provided in any other way, on account of the abundance and cheapness of building material close at hand; and if this hospital is enlarged so as to accommodate a portion only of its three hundred surplus population, and the hospital at Independence is completed within the next biennial period, their united capacity will still be inadequate to accommodate the insane that really need hospital care, to say nothing of even then not meeting the needs of the future. And, as before urged, this hospital, built at a time and under circumstances which made it felt to be necessary to economize, and curtail, and sacrifice some things well enough known to be important, yes, even essential architectural provisions in a well arranged hospital for the successful treatment of mental disorders, ought to be enlarged, aside from the relief such enlargement will afford, for the purpose of

improved classification, affording, as it will, a great benefit to those who become insane and are sent here for treatment so long as it shall be used for its present purposes. This alone is of sufficient importance to justify the outlay. The room is needed now, and will be needed for generations to come, and must be provided with the least delay. An appropriation of a hundred and fifty thousand dollars will enable us to provide, during the next biennial period, suitable room for at least one hundred and fifty persons, and afford immense relief, while doing only simple justice, called for by every principle of humanity to a suffering class of our people.

The particular plan I would suggest for enlargement is the extension of the wards now numbered from eight and twelve in each wing, containing rooms for only four patients each, to a size corresponding to the other wards, and then they will accommodate about thirty patients each. These wards would then have what they have not now, a separate entrance and exit-way as other wards have; while as it now is—many patients having to sleep on the floor of these small wards—if a fire should occur so as to prevent a passage to the adjoining wards the loss of life would be deplorable. This enlargement, this provision of suitable room for the most afflicted class in our community, not the result, as a rule, from censurable departures from a correct conduct of life against light, most of whom are tax-payers themselves, is simply what the well and strong and fortunate owe to those who are less fortunate in the great struggle of life. No thinking person will hesitate to say that insanity is a deplorable affliction under the most ameliorating circumstances; but to be so afflicted and need to be consigned to surroundings that too nearly approach a typical “bedlum” is what no christian people should permit. Rather let the State at once make haste at whatever cost to retrieve by a liberal outlay, a position corresponding to sister States who have generally allowed a place in provision for the insane higher than ours at present. Failing to make provision for our insane, local provision must be made at an enhanced cost, and without that supervision and the safeguards that can but prevail in hospitals for the insane as now organized and supervised by intelligent and critical boards of trustees. On the contrary, ordinary or public provision for the insane, which means poor house care, has been unfortunate and reproachful elsewhere, and it is to be hoped it may never obtain a footing in this as it has in some of the older States. To this end we have worked in permitting the hospital to become so crowded, hoping the counselors of the State would take

such action as will only add to her renown. And when it is considered that so small a sum is asked for in the name of humanity and philanthropy, of a people numbering nearly a million and a half, it seems hardly possible it can be refused. Shall a proud and prosperous people be thus appealed to in vain?

CONVICTS.

For the fifth time, I believe, I feel it my duty to protest against the practice of sending insane convicts to the hospital. We have now received in —— all from the penitentiary, and with two or three exceptions they have been vicious, violent, or dangerous persons. They have delusions and hallucinations; all or nearly all are addicted to masturbation, and they are totally unfit to be associated with decent people. One was in my opinion a case of simulated insanity, and just before I was ready to ask that he be remanded to the penitentiary, he broke out and escaped. And the last case was one of at least doubtful insanity, who has escaped while I am writing this report. One other, an unquestionably insane convict, escaped, and none of these elopers have been heard from. The hospital affords no barrier to their escape that they do not hold in derision; and personal vigilance is all that keeps them here over night. Considering the fact that these persons never get well, it would seem as if the attention we have to give them would be better bestowed upon worthier subjects. A ward or wards connected with the penitentiary hospital should be prepared for them where they can be secure and receive all the medical and other attention they need; or else a separate building should be erected here for them, so that they may be isolated from other patients. A plain, substantial brick structure could be built without great expense, and perhaps be on the whole the cheapest way for their proper disposal. If this suggestion should be adopted, this class could probably be provided for within a year, and probably earlier than in any other way.

This method is to be preferred if it is felt that they should be under the supervision of one of the superintendents for the hospital for the insane; and in such an annex, those persons who are found insane by the courts, or are acquitted on the ground of insanity and deemed improper persons to go at large, could be detained. Such a building should have all the necessary facilities for cooking, and be essentially a separate department; bread could be supplied by the bakery, and

washing done in the general wash room. Whatever course is adopted, if any action is taken, and I deem it so important I can but earnestly urge it, will receive such consideration as to lead to some definite action, and I hope the removal of this class from our wards will be effected within the shortest practicable period of time.

THE INCURABLE INSANE.

The question has often been asked if the incurable insane, who comprise the large majority of this class of the population of the country—at least ninety per centum of the patients in this hospital—cannot be suitably provided for and supported at an outlay much below the present cost? It is suggested that cheaper buildings, plainer fare, and diminished personal attention, will suffice and satisfy their friends and the public, as soon as medical operation has pronounced a person incurably insane. The subject is an important one, and deserves careful and full consideration. I have hardly time to more than briefly allude to some points without considering them at length. Unquestionably a cheaper building than most of our hospitals are would afford comfortable shelter and suitable facilities for carrying on hospital work. A good deal of money has been everywhere expended for ornament, or an imposing appearance—notably in several of the latest structures—that might as well have been left out, or what would have been better, perhaps, expended in part at least, in perfecting the interior that has been too often arranged and furnished as if regarded of little importance. Scarcely any hospitals have had any needless expenses lavished upon their interiors; and the plain, almost unbroken, rather monotonous, not very cheerful corridor has been the rule, each looking pretty much like the other, with little departure from or improvement upon the models of a quarter of a century ago. If some one supposed to know something of the value of cheerful wards and apartments, or of the folly of piling up three, four or five stories surmounted by an expensive dome, or cupolas, has ventured to suggest a better and cheaper way he has been quickly silenced by some ambitious architect or commissioner, intent upon personal reputation, or the adornment of some village or neighborhood, at whatever cost.

The fine stone structures of which so many have been built, have cost much more than brick, without affording any better places for curing insanity, or any better, or more comfortable homes for the uncured. It is true, stone will be more durable than brick, but well selected brick

will last as long, perhaps, as any one hospital should be used for the purpose, or till it will be superseded by the demands of another century or age. In workmanship alone little can be saved and secure anything worthy the name of hospital, consequently little can be expected in an economical point of view, beyond a choice of materials. The additions to our hospitals can be made at a less cost per head for lodgings, than was expended in the original structure, for the reason that there is but little outlay demanded for the administrative department, usually about one-third or one-fourth of the whole cost. Therefore, it is, in my opinion, proper to enlarge our hospitals so as to care for both together, to the extent of the ability of one superintendent to give them proper attention. The association of superintendents, or some members of it during its sessions, have expressed the opinion that as many as six hundred may be properly looked after and cared for by one superintendent. In that opinion I concur. But it does not mean that six hundred shall be lodged in the room designed for one-half of that number.

The incurable insane may be maintained, perhaps, for less than is a necessary outlay to promote recovery during that period when, by judicious treatment, it can be brought about; but I think it is yet to be shown that the treatment of the curable in one building, and caring for incurable in another, will lessen the cost of managing both classes together. Food, and raiment, and warmth, and pure air, are as essential for the incurable as the curable, and must be as abundant, and can cost but little less. They may need less medicine and less personal attendance, but if they need less, those in the acute stage, if treated separately, will need more.

If it is objected that the presence of the incurable insane in a hospital engaged in the treatment of curable insanity is injurious to the latter, I have to answer, out of my own experience, that, with certain exceptions, I do not know it is so. Indeed, I am not certain but the effect is just the reverse. No inconsiderable portion of the incurable insane are quite tranquil, well disposed, and more or less attached to their home and the hospital—far more so than those in the acute stage of the disorder. The presence of this class, at least, is seldom injurious, and has often been, in my experience, beneficial. The noisy, the disorderly and dirty, and the epileptic, undoubtedly should be kept from the presence of those upon whom they might make an injurious impression—those whose sensitiveness has been heightened by the invasion of nervous disease. All this is easily accomplished by suitable classification, such as we have been pleading for for several years;

and, as a rule, the better the facilities for classification—and they can be better in large hospitals than in small ones—the better are the facilities for caring for mental disease. So it seems to me all the separation of the curable from the incurable insane required, may be afforded by classification in the same hospital, under the same management. Neither class should be too far removed from their friends, for there is sometimes danger attending the removal of acute mania, or fasting melancholia, a long distance from home, while friends are put to needless expense and trouble to visit loved and cherished members of the family circle, whose misfortune has separated them from home. Rather, then, let the State provide accommodations for the insane, recent and chronic, in hospitals as large as will admit of proper supervision, located at geographical centres having the best sites and facilities for access.

REMARKS.

Appended to the report are the usual statistical tables, now for the first time complete. During the period Dr. Bassett has with patient, laborious research, gone over the records, case-books and admission papers from the beginning, and tabulated all the admissions and facts of importance in the most careful manner, which are now among the permanent records of the hospital. To make his work as accurate and reliable as possible, he has conducted a considerable correspondence. And so far as statistical tables are to be regarded as having a positive value, these I know will compare with any. And if they are prepared with due care to correct the misinformation often given us, as there has been, they may be taken as worth something. The two tables most likely to be of little worth, probably, are those relating to causes of mental disease, and duration; and much care has been taken to correct mistakes of opinion of those who send patients here, and of the friends of patients often. Nothing is more common in our experience than to find the given or assigned cause to be only a symptom of the disease arising not till after insanity was unequivocally established. "Religion," or "religious excitement," for instance, is sometimes given as a cause, when the insanity was more clearly—largely if not entirely—due to ill health, or poverty, hardships, etc., which is the lot of so many, the religious element only coming in as a form of melancholia. It is more common that insanity is the result of several than of a single cause. Everybody knows that intemperance, masturbation,

sudden loss of property, any strong moral shock, often does act singly to unsettle the mind, even in persons apparently entirely healthy. And all these are fruitful sources of insanity. The two former often act as predisposing as well as direct and exciting causes. It is probable they are to be credited with far more mischief than appear by our tables—certainly not less. Such things are apt to be kept concealed beyond the possibility of finding out, though often the physical symptoms are as clear in their revelations as any testimony. But given the operation of these agencies, even in no very marked degree, and the way is prepared for the easy production of serious mischief from almost any other cause. Ill health of all the various kinds, usually more or less protracted and as often grossly neglected, appears to be prominent as a causative agent. Why it should be so I don't know, but I find that a great many of these persons have taken bottle after bottle of the nostrums that are so prominently displayed upon the shelves of every druggist and apothecary in the country. I believe it to be true, that a large part of the insanity that is to be attributed to this cause—neglected ill health—is preventable through a little timely advice, and rigid regard for the commonest laws of health. But probably it is too early in the history of insanity or of medical science to expect a warning voice will be heard and heeded.

Insanity is apt to be concealed by friends, or the effort is made to conceal it from the world, and even the family physician, till it has become potent to almost every looker on, during which period valuable time has been frittered away and disorder so fixed in its seat that months at least are required for its removal. To this delay is due a good deal of the chronic insanity that burdens the country and carries sorrow to many a family circle. A little timely medical aid would prevent a good deal of this, if applied in that period before disordered action in the brain has proceeded so far as to give rise to unequivocal insanity. I feel that I have occasionally been called so early to advise about insanity or threatened insanity as to have cut it short in its infancy. It is surely unaccountable that the disorders of the most delicate, complicated and important organ of the body should receive so little consideration till it may be too late to be of any avail. And this frequent disposition to put off any proper action in such cases appears to lead to self deception, and so we are frequently receiving patients whose mental disorder, or cerebro-mental disorder, had its origin months anterior to the date assigned to it by the friends, clearly enough revealed by a searching inquiry.

It is this delay during which nothing is done, or if anything, nothing effectual, and disorder is allowed to proceed almost unchecked till overt insanity is the result. And even then there is often most unaccountable delay through the vain hope that a chance change for the better will take place. At length resort to the hospital is had in the confident expectation, early destined, perhaps, to be shocked by disappointment, that recovery will be both speedy and easy.

It seems hard to be learned and never to be remembered that insanity is only curable in its early stages, within a few weeks or months only after it is fairly made out. Yet such is the case, and it appears to be settled by universal experience. Insanity is a highly curable disorder in its early stages—in its first beginnings—but its curability rapidly diminishes with lapse of time. If brought under treatment in the modern hospital within a few weeks a large per cent. recover, but if neglected for only a few months, but few will recover. Here as elsewhere recovery has been found to bear a direct ratio to the recent character of the disorder. If this important fact could be widely known, believed and become a governing principle perhaps the ratio of insanity to the population at large would diminish.

AMUSEMENTS.

Hospital life is not that almost solitary, monotonous, dreary or cheerless state or stage it has sometimes been pictured. If it has its dark and suffering shadows, as what severe illness has not, it has its shades of lighter hue also, and its periods of real enjoyment. Temper and temperaments of different individuals differ widely, and persons differ in their estimates of their personal experience here and in other hospitals, I suppose, as they differ in their temper and temperaments, or their estimates of anything else. The optimist and the pessimist are here found side by side, and neither, as usual, are quite right. While some stay with us cheerfully and willingly—even sometimes desiring to stay even longer than we feel it quite necessary to do, and thankfully acknowledge the benefit they have derived and the kindness they have received—others, with no more occasion for complaint, are dissatisfied with everything and grateful for nothing, and are chiefly occupied with schemes for obtaining their release or return home. And unfortunately they sometimes promulgate the grossest misrepresentations and misconceptions for solid truths. But for all those who will there is a way for much enjoyment. In the summer the men who are

capable and willing, have opportunity for light work on the farm and in the garden, or about the administrative department; and the women have opportunities for doing some work in the sewing or ironing-room or in the kitchen. All classes are encouraged to assist in the general work of the wards. Some thus work in the forenoon and some in the afternoon, some on one day and some on another. A large number engage more or less every week in croquet, and base-ball. Walking parties of both sexes are abroad every pleasant day, and when it is unpleasant or inclement abroad, large numbers visit the green-house, to enjoy the exotic, tropical and rare foliage and bloom always to be found there. During the winter evenings, or the long evenings from October to May, five or six each week are occupied with social gatherings or assemblies of some kind. On Monday, a social party of patients and their attendants in the officers' parlors; Tuesday and Friday evenings are devoted to exhibitions with the magic lantern, and an explanatory lecture of views from most parts of the civilized world, of which we have a very good collection; Wednesday evening is occupied with a social dance, which amusement is kept up most of the year round. On Thursday evening is a meeting of the debating society, varied sometimes by music, recitations of poetry or humorous prose, and sometimes by dramatic entertainments. This is also kept up during most of the year, and its success as a source of interest and amusement, it is proper to say, is largely due to the efforts of Dr. Riordan.

The hospital library continues to be source of unfailing interest to the large number who have a taste for reading. From this rapid sketch it may be seen that there may be some pleasant variety in hospital life, and that it may be made, and is made by many persons, highly useful to themselves.

FARM.

The farm has been reasonably productive, though the last two seasons have been unfavorable for field crops. But the supply of garden vegetables have been nearly sufficient for our use. These products are really worth tons more than the market price, and if we had to procure them in the market I doubt not they would cost more than the price carried out. And moreover, they are fresh and of a most excellent quality, which enhances their value to us. A complete list of the products of the farm and garden for 1876 is appended to the report.

The products of the year 1877 are not yet all in, but it is estimated they will be somewhat larger than for the preceding year. A list of them will be published with the next report. The two past wet seasons have afforded abundant grass, which has given us abundant milk of the best quality, an article most indispensable for the household.

CHAPEL EXERCISES.

Religious services in the chapel on Sunday afternoons have been regularly conducted by the chaplain during the period, with one or two exceptions. The chaplain continues to give the same satisfaction, and to manifest the same interest in his work as in the past. The services are attended often by nearly one-half of the household. A good choir is maintained by the officers and attendants, occasionally assisted by some patients, and the services are much enjoyed by all.

EXPENSES.

The cost during the biennial period has been about four dollars and fifty-two cents per week. This cost has been somewhat augmented by the sum used in the construction of the new building in place of the one destroyed by fire, and replacing machinery, tools, piping and various mechanical fixtures also destroyed. And when it is considered that besides this outlay, the cost of board includes clothing for a large proportion of patients, and salaries and wages, it cannot be deemed extravagant. In this cost is also included repairs and furnishing, to keep the hospital in good order, and providing for the steady increase of patients. During the ensuing biennial the cost per week will doubtless be considerably less.

ACKNOWLEDGMENTS.

I gratefully acknowledge on behalf of the patients, to whom they have possessed a peculiar interest, the receipt of the following newspapers, which have been gratuitously furnished during the whole or some portion of the biennial period: Muscatine Weekly Journal; the Standard, Chicago; Dubuque National Democrat; Friends Review, Philadelphia; Vinton Eagle; Ottumwa Democrat; De Witt Observer; Glenwood Opinion; Gate City; Chariton Patriot; Chariton Republican; Ft. Madison Plain Dealer; Daily Hawk-Eye; Iowa Tribune; State Press; Henry County Press; Mt. Pleasant Journal; Marysville Union; Davenport Democrat; Van Buren Democrat; Monona Gazette.

Hon. George W. McCrary sent us a box containing one hundred choice and rare plants.

Mr. T. Mount, as carpenter, and Mr. John Thomas, as engineer, continue in the positions they have held so long, and to both I am indebted for much valuable assistance in carrying on the work of rebuilding, and in other ways. Mr. Patrick O'Connell continues the efficient and trusty first fireman, the place he has held since the opening of the hospital.

Miss Meno Trope has completed ten years of valuable service, during eight years of which she has held the responsible position of female supervisor, with untiring devotion to the patients under her charge.

Mr. Joseph Sutton is efficiently performing the duties of male supervisor.

Mrs. M. A. Blower has entered upon her tenth year of service in charge of the sewing-room, and continues to be remarkably efficient. And it is only simple justice to say that she is ever ready and inclined to do all in her power to alleviate the sufferings and promote the welfare of all patients with whom she becomes in any way associated.

Mr. J. W. Williams has performed the duties of clerk and accountant between four and five years with accuracy, neatness and dispatch.

Mr. Thomas F. Kellaher has been dispensary clerk, performing his duties with entire acceptance since March last, succeeding Mr. Henry G. Brainard, who had performed the same duties for a year to my complete satisfaction.

Early in the period Mr. Daniel O'Neill, who has been the efficient baker for about fifteen years, and all that period faithfully attentive to duty, found it necessary to relinquish work on account of failing health, and he retired with the best wishes of the whole household.

In December, 1875, Dr. M. Abbie Cleaves resigned the office of assistant physician, and her place was filled by Dr. Jennie McCowan.

In June last Mr. and Mrs. Wickersham resigned the offices of steward and matron, and their places have been filled by the election of Mr. Joshua W. Henderson as steward and Mrs. Martha W. Ranney as matron. To the retiring officers the hospital is indebted for valuable service.

The attendants and other employes have generally performed their duties in a considerate, faithful and humane manner, that merits the approval and confidence of the public, and I hereby tender them my thanks.

Of my official staff I can only speak in terms of praise, and to thank them for their hearty and efficient co-operation.

Finally, to you, members of the board of trustees, I beg to tender my sincere thanks for the courtesy and kindness extended to me by each of you on all occasions, and for your judicious counsels which have materially lightened my labors and tended to make my administration successful.

Again commending the hospital to the favor of Providence, I enter hopefully upon another period of service, and I hope of success.

MARK RANNEY,

Iowa Hospital for the Insane, at Mt. Pleasant, Iowa, Oct. 1st, 1877.

STATISTICAL TABLES.

TABLE I.

Movement of the Population.

	Males.	Females.	Total.
Number at the beginning of the period.....	294	257	551
Admitted in the period.....	324	232	556
Total present in the period.....	618	489	1,107
Discharged—Recovered.....	97	58	155
Improved.....	41	34	75
Stationary.....	83	56	139
Died.....	78	51	129
Not insane.....	1	.....	1
Discharged in the period.....	300	199	499
Remaining at the end of the period.....	318	290	608
Average present during the period.....	312.73	268.45	581.18

TABLE II.

Admission and Discharges from the Beginning of the Hospital.

	Males.	Females.	Total.
Admitted.....	1,985	1,599	3,584
Discharged—Recovered.....	629	512	1,141
Improved.....	276	229	505
Stationary.....	317	272	589
Died.....	444	296	740
Not insane.....	1	.....	1
Total number discharged.....	1,667	1,309	2,976

TABLE III.

Number at each Age when admitted in the Period.

AGE.	WHEN ADMITTED.			WHEN ATTACKED.		
	Males.	Females.	Total.	Males.	Females.	Total.
	Under fifteen.....	3	4	7	15	9	24
Fifteen to twenty.....	22	18	40	28	34	67
Twenty to twenty-five.....	57	38	95	47	41	88
Twenty-five to thirty.....	47	44	91	38	45	83
Thirty to thirty-five.....	41	35	76	37	26	63
Thirty-five to forty.....	46	32	78	41	18	59
Forty to forty-five.....	30	13	43	24	9	33
Forty-five to fifty.....	29	18	47	17	14	31
Fifty to sixty.....	27	24	51	19	10	29
Sixty to seventy.....	14	4	18	10	2	12
Seventy to eighty.....	7	2	9	4	1	5
Eighty and over.....						
Not insane.....				1		1
Unknown.....	1		1	43	23	66
Total.....	324	232	556	324	232	556

TABLE IV.

Number at each Age from the Beginning of the Hospital.

AGE.	WHEN ADMITTED.			WHEN ATTACKED.		
	Males.	Females.	Total.	Males.	Females.	Total.
	Under fifteen.....	27	15	42	103	60	163
Fifteen to twenty.....	145	120	265	200	186	386
Twenty to twenty-five.....	340	242	582	309	266	575
Twenty-five to thirty.....	278	262	540	252	259	511
Thirty to thirty-five.....	246	254	500	206	226	432
Thirty-five to forty.....	249	197	446	170	149	319
Forty to forty-five.....	176	153	329	121	94	215
Forty-five to fifty.....	144	123	267	86	80	166
Fifty to sixty.....	203	140	343	137	76	213
Sixty to seventy.....	89	44	133	47	17	64
Seventy to eighty.....	28	13	39	14	6	20
Eighty and over.....	6		6	1		1
Not insane.....				1		1
Unknown.....	56	36	92	338	180	518
Total.....	1,985	1,599	3,584	1,985	1,599	3,584

TABLE V.

Nativity of Patients Admitted.

NATIVITY.	WITHIN THE YEAR.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
	Maine.....	1	1	2	21	14	35
New Hampshire.....		1	1	8	8	16
Vermont.....	2	2	4	20	19	39
Massachusetts.....	4	1	5	30	19	49
Rhode Island.....		1	1		6	6
Connecticut.....	3	2	5	14	9	23
New York.....	20	9	29	146	119	265
New Jersey.....	2	1	3	13	6	19
Pennsylvania.....	22	17	39	172	113	285
Delaware.....				1	2	3
Maryland.....	3	1	4	19	9	28
Virginia.....	11	5	16	52	37	89
North Carolina.....	3	1	4	16	9	25
South Carolina.....		1	1	4	5	9
Georgia.....				2	1	3
Alabama.....		1	1	1	1	2
Mississippi.....		1	1		1	1
Louisiana.....	1		1	2	1	3
Ohio.....	57	34	91	335	299	634
Indiana.....	31	32	63	147	126	273
Illinois.....	12	14	26	65	83	148
Kentucky.....	9	2	11	52	34	86
Tennessee.....	5	2	7	20	20	40
Missouri.....	6	6	12	33	19	52
Michigan.....	1	1	2	8	6	14
Wisconsin.....	3		3	7	8	15
Iowa.....	46	34	80	175	136	311
Minnesota.....				1		1
Kansas.....					1	1
California.....	1		1	1		1
District of Columbia.....					2	2
New Mexico.....	1	1	2	1		1
Canada.....	3	1	4	25	12	37
Nova Scotia.....	1	2	3	1	4	5
New Brunswick.....				1		1
Great Britain.....	31	20	51	234	173	407
Germany.....	22	23	45	166	160	326
Austria.....				4	1	5
Prussia.....	3	3	6	12	14	26
Holland.....	1	1	2	5	4	9
Denmark.....	3	1	4	7	3	10
Norway.....	1		1	23	15	38
Sweden.....	8	5	13	39	20	59
France.....	2	1	3	12	6	18
Portugal.....				1		1
Belgium.....				2		2
Switzerland.....	1	2	3	17	13	30
Netherlands.....	2	2	4	9	13	22
Bohemia.....				1		1
New South Wales.....				55	47	102
Unknown.....	2	1	3			
Total.....	324	232	556	1,985	1,599	3,584

TABLE VI.

Residence of Patients Admitted.

RESIDENCE—COUNTY.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
State at large.....	61	10	71	174	49	223
Adair.....	1	1	2	4	5	9
Adams.....	3	2	5	7	6	13
Allamakee.....				13	20	33
Appanoose.....	8	6	14	24	19	47
Audubon.....		1	1	1	3	4
Benton.....				17	19	36
Black Hawk.....				14	13	27
Boone.....	5	3	8	12	12	24
Bremer.....				10	11	21
Buchanan.....				7	5	12
Buena Vista.....				1		1
Butler.....				4	5	9
Calhoun.....				1		1
Carroll.....		1	1	7	2	9
Cass.....	2	4	6	5	8	13
Cedar.....	3	4	7	23	32	55
Cerro Gordo.....				5		5
Cherokee.....				2	1	3
Chickasaw.....				8	7	15
Clarke.....	3	1	4	11	4	15
Clay.....				3	1	4
Clyton.....				27	17	44
Clinton.....	6	9	15	48	44	92
Crawford.....	2	4	6	10	5	15
Dallas.....	5	1	6	19	5	24
Davis.....	3	3	6	34	23	57
Decatur.....	2	4	6	20	17	37
Delaware.....				13	7	20
Des Moines.....	14	13	27	72	75	147
Dickinson.....				2	1	3
Dubuque.....				47	53	100
Emmet.....				2	1	3
Fayette.....				16	14	30
Floyd.....				6	5	11
Franklin.....				2	4	6
Fremont.....	3	7	10	9	12	21
Greene.....	1	3	4	7	12	19
Grundy.....					2	2
Guthrie.....	3	2	5	10	8	18
Hamilton.....				1	5	6
Hardin.....				7	9	16
Harrison.....	5	3	8	12	17	29
Henry.....	7	7	14	58	50	108
Howard.....				1	6	7
Lumboldt.....				2		2
Iowa.....	9	3	12	26	25	51
Jackson.....				21	19	40
Jasper.....	11	3	14	43	40	83

TABLE VI—CONTINUED.

RESIDENCE—COUNTY.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Jefferson.....	7	4	11	48	43	91
Johnson.....	8	4	12	47	21	68
Jones.....				13	24	37
Keokuk.....	5	7	12	45	34	79
Kossuth.....					1	1
Lee.....	14	18	32	100	97	197
Linn.....				29	28	57
Louisa.....	6	2	8	30	24	54
Lucas.....	3		3	16	9	25
Lyon.....					1	1
M. dison.....	8	6	14	30	18	48
Mahaska.....	4	6	10	35	32	67
Marion.....	7	6	13	61	34	95
Marshall.....	7	1	8	26	16	42
Mills.....	4	3	7	27	11	38
Mitchell.....				2	1	3
Monona.....	3	1	4	6	7	13
Monroe.....	4	2	6	33	14	47
Montgomery.....	4	2	6	16	7	23
Muscatine.....	6	6	12	36	29	65
O'Brien.....					1	1
Page.....	3	4	7	19	10	29
Palo Alto.....					2	2
Pocahontas.....				2	3	5
Polk.....	13	9	22	54	58	112
Pottawattamie.....	5	9	14	28	26	54
Poweshiek.....	2	7	9	12	24	36
Ringgold.....	2	2	4	6	5	11
Scott.....	7	10	17	46	68	114
Shelby.....	1	1	2	7	2	9
Story.....	2	1	3	7	7	14
Tama.....				11	6	17
Taylor.....	4	3	7	12	10	22
Union.....	2	3	5	6	7	13
Van Buren.....	9	6	15	48	47	95
Wapello.....	3	6	9	45	41	86
Warren.....	9	3	12	29	15	44
Washington.....	12	5	17	59	36	95
Wayne.....	3		3	11	9	20
Webster.....				5	5	10
Winnebago.....					1	1
Winneshiek.....				20	12	32
Woodbury.....				6	3	9
Worth.....				5		5
Wright.....				2		2
From elsewhere.....				73	52	125
Total.....	324	232	556	1,985	1,599	3,584

TABLE VII.

Occupation of those Admitted.

OCCUPATION.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Agents	3		3	14	1	15
Apothecaries	1		1	1		1
Artists	1		1	2		2
Attorneys				3		3
Bakers	1		1	2		2
Bankers				1		1
Barbers				3		3
Basket makers	1		1	1		1
Blacksmiths	5		5	23		23
Brewers				1		1
Bridge builders	1		1	1		1
Broom makers				1		1
Butchers				4		4
Cabinet makers	1		1	6		6
Carpenters	12		12	39		39
Chair makers				1		1
Cigar maker				1		1
Clerks	5		5	31		31
Colliers				4		4
Confectioners				2		2
Coopers				4		4
Dentist	1		1	1		1
Domestic duties		185	185		1384	1384
Druggists				2		2
Editors				1		1
Engineers	1		1	3		3
Engravers				1		1
Farmers	138		138	916		916
Gardeners	2		2	5		5
Grain dealers				1		1
Grocers				4		4
Gunsmiths	1		1	2		2
Harness makers	1		1	5		5
Hat braiders					2	2
Hotel keepers	1		1	7		7
Hunters				2		2
Iron moulders				2		2
Jewelers	1		1	2		2
Laborers	71		71	394		394
Laundress					1	1
Lawyers	3		3	7		7
Machinists	2		2	6		6
Masons	2		2	17		17
Mechanics				1		1

TABLE VII—CONTINUED.

OCCUPATION.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Merchants	4		4	26		26
Millers	2		2	4		4
Milliners		4	4		8	8
Millwrights	1		1	5		5
Miners	2		2	12		12
Musicians				3		3
No occupation	34	35	69	205	122	327
Not ascertained	2		2	44	19	63
Nurserymen				1		1
Pastry cook	2		2	4		4
Painters				4		4
Peddlers				6		6
Photographers				2		2
Physicians				7		7
Plasterers	1		1	9		9
Pork packers				1		1
Potters				2		2
Preachers	2		2	12		12
Printers	2		2	5		5
Saddlers	1		1	4		4
Sailors	1		1	5		5
Salesmen				3		3
Saloon keepers	1		1	4		4
Seamstresses		1	1		11	11
Servants		5	5		25	25
Ship steward				1		1
Shoemakers	4		4	18		18
Soldiers				2		2
Speculator				2		2
Stage driver				1		1
Stock dealer	1		1	3		3
Students	2		2	13		13
Surveyors				1		1
Tailors				14		14
Teachers	4	2	6	13	25	38
Teamsters	1		1	6		6
Tinners	2		2	6		6
Traders	1		1	8		8
Wagon makers	1		1	2		2
Watch makers				1		1
Weavers				2	1	3
Total	324	232	556	1,985	1,599	3,584

TABLE VIII.

Civil Condition of those Admitted.

	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Single.....	174	74	248	1,022	561	1,583
Married.....	135	140	275	857	875	1,732
Widowed.....	10	16	26	69	139	208
Divorced.....	4	2	6	13	17	30
Unknown.....	1	.....	1	24	7	31
Total.....	324	232	556	1,985	1,599	3,584

TABLE IX.

How Committed.

	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
By Commissioners of Insanity.....	314	232	546	1,130	854	1,984
By Judges of the Circuit Court.....	.....	.....	.....	65	46	111
By Clerks of the Circuit Court.....	.....	.....	.....	36	26	62
By Judges of the County Court.....	.....	.....	.....	490	462	952
By Judges of the District Court.....	3	.....	3	11	.....	11
By friends.....	.....	.....	.....	174	169	343
By Governor's order.....	7	.....	7	20	.....	20
Private patients from other States and Territories.....	.....	.....	.....	59	42	101
Total.....	324	232	556	1,985	1,599	3,584

TABLE X.

How Supported—Of those Admitted.

	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
By the State alone.....	61	10	71	171	48	219
By counties.....	263	222	485	1,577	1,340	2,917
By friends.....	.....	.....	.....	179	169	348
By other States and Territories.....	.....	.....	.....	58	42	100
Total.....	324	232	556	1,985	1,599	3,584

TABLE XI.

Supposed or Assumed Causes of Insanity.

CAUSES.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Connected with general ill health.....	20	14	34	95	135	230
Puerperal condition.....	.....	43	43	.....	209	209
Disappointment.....	2	2	4	8	10	18
Sun-Stroke.....	6	1	7	24	1	25
Epilepsy.....	24	16	40	186	82	268
Injuries of the head.....	15	1	16	49	2	51
Excessive study.....	2	.....	2	7	1	8
Hereditv.....	16	8	24	76	78	154
Vaccination.....	.....	.....	.....	2	.....	2
Concussion.....	1	.....	1	3	.....	3
Spiritualism.....	.....	.....	.....	5	5	10
Bodily injuries.....	2	.....	2	12	3	15
Business anxieties.....	4	1	5	32	2	34
Jealousy.....	1	.....	1	3	2	5
Exposure to cold.....	.....	.....	.....	5	1	6
Fright.....	2	1	3	10	10	20
Masturbation.....	23	.....	23	182	6	188
Political excitement.....	1	.....	1	4	.....	4
Meningeal inflammation.....	.....	.....	.....	.....	1	1

TABLE XI—CONTINUED.

CAUSES.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Domestic trouble.....	6	3	9	36	86	122
Religious excitement.....	8	9	17	71	49	120
Ill treatment.....	1	4	5	4	19	23
Blindness.....	1	.....	1	2	1	3
Use of tobacco.....	1	.....	1	1	1	2
Uterine disease.....	.....	4	4	.....	48	48
Novel-reading.....	.....	.....	.....	.....	1	1
War excitement.....	.....	.....	.....	3	.....	3
Over-exertion.....	13	4	17	55	22	77
Spermatorrhoea.....	.....	.....	.....	1	.....	1
Scarlet fever.....	.....	.....	.....	1	1	2
Grief, loss of friends, etc.....	.....	17	17	11	54	65
Constitutional.....	9	10	19	49	39	88
Nostalgia.....	.....	1	1	1	3	4
Lactation too long continued.....	.....	2	2	.....	6	6
Syphilis.....	7	3	10	18	3	21
Loss of property.....	5	2	7	21	7	28
Typhoid fever.....	1	1	2	16	11	27
Disordered menstruation.....	.....	8	8	.....	81	81
Change of life.....	.....	4	4	.....	30	30
Pecuniary anxiety.....	4	3	7	34	7	41
Intemperance.....	30	5	35	171	21	192
Disease of the brain.....	1	.....	1	1	.....	1
Paralysis.....	.....	.....	.....	6	3	9
Hemiplegia.....	.....	.....	.....	3	6	9
Apoplexy.....	.....	1	1	3	3	6
Hysteria.....	.....	1	1	.....	4	4
Measles.....	.....	.....	.....	2	1	3
Senility.....	6	1	7	13	4	17
Original defect.....	1	3	4	19	6	25
Disappointed affections.....	5	1	6	14	23	37
Loss of health in military service.....	2	.....	2	29	.....	29
Loss of sleep.....	.....	.....	.....	1	1	2
Scrofula.....	.....	.....	.....	.....	1	1
Abortion.....	.....	.....	.....	.....	2	2
Veneral excesses.....	1	.....	1	1	.....	1
Poverty, hardships, etc.....	8	11	17	6	11	17
No satisfactory cause assigned.....	96	47	143	688	496	1,184
Not insane.....	1	.....	1	1	.....	1
Total.....	324	232	556	1,985	1,599	3,584

TABLE XII.

Form of Disease in those Admitted.

	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Mania, Acute.....	140	82	222	866	569	1,435
Mania, Chronic.....	76	54	130	532	428	960
Mania, Epileptic.....	21	15	36	165	83	248
Mania, Puerperal.....	.....	28	28	.....	156	156
Mania, Homicidal.....	3	.....	3	15	.....	15
Melancholia, Acute.....	39	41	80	218	253	471
Melancholia, Chronic.....	9	4	13	64	68	132
Dementia, Acute.....	3	.....	3	14	3	17
Dementia, Chronic.....	26	7	33	99	36	135
Dementia, Senile.....	6	1	7	10	2	12
Kleptomania.....	.....	.....	.....	1	.....	1
Dipsomania.....	.....	.....	.....	.....	1	1
Not insane.....	1	.....	1	1	.....	1
Total.....	324	232	556	1,985	1,599	3,584

TABLE XIII.

Complications in those Admitted.

	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Epileptic.....	32	17	49	209	94	303
Apoplectic.....	.....	.....	.....	7	5	12
Paralytic.....	.....	.....	.....	20	7	27
Suicidal.....	15	22	37	92	111	203
Homicidal.....	4	2	6	52	16	68
Hereditary.....	32	35	67	226	252	478
Chorea.....	.....	.....	.....	.....	3	3
None.....	240	156	396	1,375	1,111	2,489
Not insane.....	1	.....	1	1	.....	1
Total.....	324	232	556	1,985	1,599	3,584

TABLE XIV.

Number of the Attack in those Admitted.

NUMBER.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
First	231	165	396	1,350	1,078	2,428
Second	32	28	60	203	209	412
Third	10	11	21	51	50	101
Fourth	2	2	4	15	7	22
Fifth	2	2	4	5	4	9
Sixth	1	1	2	2	3	5
Seventh	1	1	2	1	1	2
"Several"	18	15	33	120	115	235
Unknown	28	10	38	237	133	370
Not insane	1	1	2	1	1	2
Total	324	232	556	1,985	1,599	3,584

TABLE XV.

Duration of Insanity before Entrance of those Admitted.

DURATION.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Less than one month	59	42	101	296	186	482
One to three months	53	56	109	329	324	653
Three to six months	29	21	50	173	188	361
Six to nine months	21	20	41	137	139	276
Nine to twelve months	9	5	14	42	42	84
Twelve to eighteen months	25	11	36	127	94	221
Eighteen months to two years	7	7	14	35	42	77
Two to three years	23	10	33	103	91	194
Three to four years	21	9	30	79	61	140
Four to five years	7	3	10	52	44	96
Five to ten years	13	19	32	111	103	214
Ten to fifteen years	5	4	9	58	30	88
Fifteen to twenty years	6	3	9	36	16	52
Twenty to twenty-five years	3	1	4	12	6	18
Twenty-five to thirty years	1	1	2	6	2	8
Over thirty years	1	1	2	9	4	13
Unknown	41	19	60	379	227	606
Not insane	1	1	2	1	1	2
Total	324	232	556	1,985	1,599	3,584

TABLE XVI.

Recovered of those Attacked at the several ages, from the Beginning.

AGE WHEN ATTACKED.	NUMBER.			PER CENT. RECOVERED OF THOSE ATTACKED AT EACH AGE.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under fifteen	10	9	19	9.70	15.00	11.65
Fifteen to twenty	95	78	173	47.50	41.93	44.82
Twenty to twenty-five	117	103	220	37.86	38.72	39.49
Twenty-five to thirty	90	96	186	35.71	37.06	36.39
Thirty to thirty-five	71	78	149	34.46	34.51	34.49
Thirty-five to forty	40	46	86	23.52	30.87	26.95
Forty to forty-five	43	24	67	35.53	25.53	31.16
Forty-five to fifty	34	19	53	39.53	23.75	31.92
Fifty to sixty	49	20	69	35.76	26.31	32.39
Sixty to seventy	6	1	7	12.76	5.88	10.94
Seventy to eighty	3	1	4	21.42	16.66	20.00
Unknown	71	37	108	21.00	20.55	20.84
All ages	629	512	1,141			

TABLE XVII.

Recovered after various durations of the Disease before Treatment from Beginning.

DURATION OF DISEASE BEFORE TREATMENT.	NUMBER.			PER CENT. RECOVERED AFTER EACH PERIOD OF DURATION.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under one month	175	105	280	59.12	56.45	58.09
One to three months	173	164	337	52.58	50.61	51.60
Three to six months	77	82	159	44.50	43.61	44.04
Six to nine months	57	51	108	41.67	36.69	39.13
Nine to twelve months	10	16	26	23.80	38.09	30.95
Twelve to eighteen months	26	26	52	20.47	27.65	23.52
Eighteen to twenty-four months	3	7	10	8.57	16.66	12.98
Two to three years	4	3	7	3.83	3.29	3.60
Three to four years	6	3	9	7.59	4.91	6.42
Four to five years	2	1	3	3.84	2.27	3.12
Five to ten years	1	2	3	.90	1.94	1.40
Over ten years	1	1	2	.82	1.00	.91
Unknown	94	52	146	24.80	22.02	24.09
Total	629	512	1,141			

TABLE XVIII.

Duration of Treatment of those Recovered from the Beginning.

DURATION.	NUMBER RECOVERED.		
	Males.	Females.	Total.
Under one month.....	24	5	29
One to two months.....	36	24	60
Two to three months.....	51	40	91
Three to six months.....	196	153	349
Six to nine months.....	128	111	239
Nine to twelve months.....	71	55	126
Twelve to eighteen months.....	68	75	143
Eighteen to twenty-four months.....	22	17	39
Two to three years.....	25	22	47
Three to four years.....	4	6	10
Four to five years.....	1	2	3
Over five years.....	3	2	5
Unknown.....			
Total.....	629	512	1,141

TABLE XIX.

Whole duration of Disease of those Recovered from the Beginning.

DURATION.	NUMBER RECOVERED.		
	Males.	Females.	Total.
Under one month.....		2	2
One to two months.....	25	1	26
Two to three months.....	21	22	43
Three to six months.....	125	80	205
Six to nine months.....	126	120	246
Nine to twelve months.....	75	70	145
Twelve to eighteen months.....	90	85	175
Eighteen to twenty-four months.....	36	39	75
Two to three years.....	25	33	58
Three to four years.....	8	8	16
Four to five years.....	1	2	3
Over five years.....	8	5	13
Unknown.....	89	45	134
Total.....	629	512	1,141

TABLE XX.

Form of Disease of those Recovered from the Beginning.

FORM OF DISEASE.	NUMBER RECOVERED.			PER CENT. RECOVERED OF EACH FORM ADMITTED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Mania, acute.....	482	288	770	55.65	50.61	53.65
Mania, chronic.....	35	18	53	6.57	4.20	5.52
Melancholia, acute.....	95	115	210	43.57	45.45	44.58
Melancholia, chronic.....	6	11	17	9.37	16.17	12.87
Mania, puerperal.....		75	75		48.07	48.07
Mania, epileptic.....	5	3	8	3.03	3.61	3.22
Mania, homicidal.....	3		3	20.00		20.00
Dementia, acute.....	2	1	4	21.42	33.33	23.52
Dipsomania.....		1	1		100.00	100.00
Total.....	629	512	1,141			

TABLE XXI.

Alleged Causes of Disease of those Recovered from the Beginning.

CAUSES OR CLASSES OF CAUSES.	NUMBER RECOVERED.			PERCENT. RECOVERED OF EACH CLASS ADMITTED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Connected with ill health.....	28	61	89	29.47	45.18	38.69
Heredity.....	32	29	61	42.10	37.17	39.61
Disordered menstruation.....		34	34		41.97	41.97
Religious excitement.....	39	22	61	54.93	44.89	50.83
Business anxieties.....	16	1	17	50.00	50.00	50.00
Grief, loss of friends, &c.....	4	15	19	36.36	27.77	29.23
Masturbation.....	49	2	51	26.92	33.33	27.11
Novel reading.....		1	1		100.00	100.00
Domestic trouble.....	12	25	37	33.33	29.06	30.32
Puerperal condition.....		86	86		41.14	41.14
Loss of health in military service.....	16		16	55.17		55.17
Pecuniary anxiety.....	12	4	16	35.29	57.14	39.02
Disappointed affections.....	7	8	15	50.00	34.78	40.54
Spermatorrhea.....	1		1	100.00		100.00
Over exertion.....	27	9	36	49.09	40.90	46.75
War excitement.....	3		3	100.00		100.00
Loss of Sleep.....	1		1	100.00		100.00
Excessive study.....	3		3	42.85		37.50
Intemperance.....	64	11	75	37.42	52.38	39.06
Loss of property.....	5	2	7	23.80	28.57	25.00

TABLE XXI—CONTINUED.

CAUSES OR CLASSES OF CAUSES.	NUMBER RECOVERED.			PERCENT. RECOVERED OF EACH CLASS ADMITTED.		
	Males.	Females.	Total.	Males.	Females.	Total.
	Typhoid fever.....	6	4	10	37.50	36.36	37.03
Meningeal inflammation.....		1	1		100.00	100.00
Senility.....	1		1	7.69		5.88
Hysteria.....		3	3		75.00	75.00
Epilepsy.....	4	3	7	2.15	3.65	2.61
Injury of the head.....	20		20	40.81		39.21
Vaccination.....	1		1	50.00		50.00
Excessive use of tobacco.....	1	1	2	100.00	100.00	100.00
Constitutional.....	39	19	58	79.58	48.71	65.90
Uterine disease.....		13	13		27.08	27.08
Spiritualism.....	2	1	3	40.00	20.00	30.00
Fright.....	3	2	5	30.00	20.00	25.00
Disappointment.....	4	2	6	50.00	20.00	33.33
Change of life.....		9	9		30.00	30.00
Ill treatment.....	1	6	7	25.00	31.59	30.43
Original defect.....	2		2	10.52		8.00
Political excitement.....	2		2	50.00		50.00
Exposure to cold.....	2		2	40.00		33.33
Sun-stroke.....	9		9	37.50		36.00
Syphilis.....	4		4	22.22		19.09
Bodily injuries.....	2	3	5	16.66	100.00	33.33
Protracted lactation.....		1	1		33.33	11.11
Paralysis.....	1	1	2	50.00		33.33
Measles.....	1		1	50.00		33.33
Poverty, hardships, &c.....		2	2		18.09	11.76
Blindness.....	1		1	50.00		33.33
Nostalgia.....		1	1		33.33	25.00
Jealousy.....	1		1	33.33		20.00
Concussion.....	1		1	33.33		33.33
Disease of brain.....	1		1	100.00		100.00
No satisfactory cause assigned.....	202	130	332	29.36	26.20	28.04
Total.....	629	512	1,141			

TABLE XXII.

Nativity, etc., of those Recovered from the Beginning.

COUNTRY.	NUMBER RECOVERED.			PERCENT. RECOVERED OF EACH CLASS ADMITTED.		
	Males.	Females.	Total.	Males.	Females.	Total.
	Maine.....	8	6	14	38.09	42.85	40.00
New Hampshire.....	3	2	5	37.50	25.00	31.25
Vermont.....	4	5	9	20.00	26.31	23.07
Massachusetts.....	10	6	16	33.33	31.57	32.65
Rhode Island.....		2	2		33.33	33.33
Connecticut.....	2	1	3	14.28	11.11	13.04
New York.....	42	34	76	28.16	28.57	28.67
New Jersey.....	2	3	5	15.78	50.00	26.31
Pennsylvania.....	51	37	88	33.13	32.74	30.87
Maryland.....	4	2	6	21.05	22.22	21.42
Virginia.....	16	13	29	30.76	3.13	32.58
North Carolina.....	8	2	10	50.00	22.22	40.00
South Carolina.....	2		2	50.00		22.22
Louisiana.....	1		1	50.00		33.33
Ohio.....	117	115	232	36.00	38.46	36.59
Indiana.....	55	42	97	37.41	33.00	35.53
Illinois.....	28	31	59	43.07	37.34	39.86
Kentucky.....	13	12	25	25.00	35.29	29.06
Tennessee.....	7	6	13	35.00	30.00	32.50
Missouri.....	7	3	10	57.00	15.78	19.23
Michigan.....	3	2	5	37.50	33.33	35.71
Wisconsin.....	4	7	11	57.14	87.50	73.33
Iowa.....	66	57	123	37.71	41.91	39.54
Minnesota.....	1		1	100.00		100.00
District of Columbia.....		2	2		100.00	100.00
New Mexico.....	1		1	100.00		100.00
Canada.....	9	6	15	36.00	50.00	40.54
Nova Scotia.....		1	1		25.00	20.00
Norway.....	5	4	9	21.73	26.66	23.68
Sweden.....	14	3	17	35.89	15.00	28.81
Holland.....		2	2		50.00	22.22
Belgium.....	1		1	50.00		50.00
Bohemia.....	2	2	4	22.22	15.38	18.18
France.....	4	1	5	33.33	16.66	27.77
Portugal.....	1		1	100.00		100.00
Switzerland.....	4	3	7	23.52	23.07	23.33
Netherlands.....	5	1	6	100.00	100.00	100.00
Germany.....	37	36	73	22.28	21.08	22.39
Austria.....	1		1	25.00		20.00
Prussia.....	1	4	5	8.33	28.50	19.23
Denmark.....	3		3	42.85		30.00
England.....	15	17	32	29.41	36.17	32.65
Ireland.....	43	28	71	27.38	23.93	25.91
Scotland.....	8	2	10	44.44	40.00	43.47
Wales.....	3		3	37.50		25.00
Unknown.....	18	12	30	32.70	25.53	29.41
Total.....	629	512	1,141			

TABLE XXIII.

Deaths and the Causes.

CAUSES.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Chronic insanity.....	12	10	22	82	54	136
Exhaustion from acute mania.....	7	7	14	30	23	53
Typho-mania.....				7	6	13
Acute delirious mania.....	3		3	9	7	16
Melancholia with abstinence from food...	1	4	5	12	10	22
Softening of the brain.....				2		2
Congestion of the brain.....				8	2	10
Organic disease of the brain.....				2		2
General paralysis.....				13	3	16
Apoplexy.....	8	6	14	25	15	40
Hemiplegia.....				3	1	4
Epilepsy.....	19	6	25	85	33	118
Puerperal mania.....		1	1		6	6
Suicide.....	2		2	8	6	14
Consumption.....	13	16	29	85	80	165
Congestion of lungs.....				1	2	3
Abscess of lung.....				2		2
Bronchitis.....				1		1
Typhoid fever.....					2	2
Intermittent fever.....				1		1
Congestive fever.....					1	1
Dysentery and diarrhœa.....				25	23	48
Cholera-morbus.....				1	1	2
Chronic gastritis.....				1	3	4
Chronic hepatic disease.....				1	1	2
Strangulated hernia.....					1	1
Peritonitis.....					1	1
Diabetes.....				1		1
Dropsy.....				1		1
Disease of the heart.....	1		1	3	4	7
Uterine hemorrhage.....					1	1
Uterine disease.....					1	1
Erysipelas.....				3	1	4
Syphilis.....	3		2	6		6
Sentility.....	5		5	11	4	15
Accident.....				1	1	2
Enteritis.....				1		1
Scrofula.....				1		1
Pneumonia.....				1		1
Obscure brain disease.....	1		1	3	2	5
Paraplegia.....				1		1
Cancer.....				1		1
Paralysis.....				3		3
Cerebro-spinal meningitis.....		1	1		1	1
Pleurisy.....	1		1	1		1
Anæmatosis.....	1		1	1		1
Injuries received before admission.....	1		1	1		1
Total.....	78	51	129	444	296	740

TABLE XXIV.

Ages at Death.

AGE.	IN THE PERIOD.			FROM THE BEGINNING.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under fifteen.....	2		2	4	3	7
Fifteen to twenty.....	3		3	19	18	37
Twenty to twenty-five.....	10	6	16	46	32	78
Twenty-five to thirty.....	4	5	9	60	32	92
Thirty to thirty-five.....	9	12	21	49	52	101
Thirty-five to forty.....	10	7	17	63	39	102
Forty to forty-five.....	8	5	13	40	29	69
Forty-five to fifty.....	6	4	10	42	18	60
Fifty to sixty.....	12	6	18	47	41	88
Sixty to seventy.....	7	1	8	39	15	54
Seventy to eighty.....	5	2	7	18	7	25
Eighty to ninety.....				2		2
Unknown.....	3		3	15	10	25
Total.....	78	51	129	444	296	740

TABLE XXV.

Ratio of Deaths from the Beginning.

PER CENT.	Males.	Females.	Total.
Of all admitted.....	22.36	18.51	20.64

TABLE XXVI.

Duration of Disease of those who Died from the Beginning.

	FROM ADMIS'N INTO HOSPIT'L.			FROM THE ATTACK.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under one month.....	65	42	107	16	15	31
One to two months.....	26	24	50	11	13	24
Two to three months.....	27	15	42	9	4	13
Three to six months.....	53	33	86	17	21	38
Six to nine months.....	39	19	58	17	24	41
Nine to twelve months.....	28	21	49	17	12	29
Twelve to eighteen months.....	37	23	60	41	20	61
Eighteen to twenty-four months.....	29	14	43	18	16	34
Two to three years.....	46	33	79	40	25	65
Three to four years.....	34	22	56	23	14	37
Four to five years.....	18	13	31	19	11	30
Five to ten years.....	37	31	68	64	42	106
Ten to twenty years.....	5	6	11	71	36	107
Over twenty.....				16	3	19
Unknown.....				65	40	105
Total.....	444	296	740	444	296	740

TABLE XXVII.

Remaining in the Hospital at the end of the Period.

AGE	Males.	Females.	Total.
Fifteen to twenty.....	12	12	24
Twenty to twenty-five.....	49	34	83
Twenty-five to thirty.....	39	38	77
Thirty to thirty-five.....	47	30	77
Thirty-five to forty.....	41	52	93
Forty to forty-five.....	38	37	75
Forty-five to fifty.....	32	24	56
Fifty to sixty.....	29	48	77
Sixty to seventy.....	14	8	22
Seventy to eighty.....	4	2	6
Unknown.....	9	3	12
Total.....	318	290	608

TABLE XXIX.

Remaining at end of the Period—Prospect.

PROSPECT.	Males.	Females.	Total.
Incurable.....	287	260	547
Total remaining.....	318	290	608

DAILY AVERAGE OF PATIENTS.

1875 AND 1876.		1876 AND 1877.	
November, 1875.....	547.96	November, 1876.....	591.10
December, 1875.....	546.02	December, 1876.....	564.54
January, 1876.....	560.92	January, 1877.....	574.02
February, 1876.....	563.44	February, 1877.....	585.51
March, 1876.....	578.33	March, 1877.....	585.24
April, 1876.....	589.03	April, 1877.....	567.66
May, 1876.....	592.70	May, 1877.....	574.44
June, 1876.....	602.39	June, 1877.....	573.80
July, 1876.....	596.09	July, 1877.....	591.54
August, 1876.....	589.51	August, 1877.....	594.54
September, 1876.....	595.16	September, 1877.....	607.83
October, 1876.....	595.19		
Daily average for the period.....			581.18

EXHIBIT

Of Special Appropriation by the Sixteenth General Assembly from February 1, 1876, to September 30, 1877.

RECEIPTS.

From Auditor of State.....\$10,100.00

EXPENDITURES.

For water closets.....	\$ 3,743.95	
For trees, shrubbery, and caring for same.....	502.24	
For soil pipe.....	619.74	
For air flues.....	960.20	
For enlarging well.....	1,486.75	
For airing courts.....	2,054.45	9,367.33
Balance on hand September 30, 1877.....		732.67
Total.....		\$10,100.00

NOTE.—The balance of \$732.67 in the above statement has been expended in paying the October pay-roll on the first of November, and the vouchers are on file in the office of the Auditor of State.

CURRENT EXPENSE FUND.

Exhibit of Steward for Year ending October 31, 1876.

RECEIPTS.

From balance on hand Nov. 1st., 1875.....	\$ 6,877.36
From Auditor of State.....	\$12,700.00
From articles sold.....	2,832.30
From private patients.....	1,848.61
From interest on warrants.....	227.50—\$131,908.41
	<u>\$138,785.77</u>

EXPENDITURES.

For meats and fish.....	\$10,833.93
For breadstuffs.....	5,867.44
For fruits and vegetables.....	1,679.40
For coffee and tea.....	2,517.08
For sugar and syrup.....	2,364.42
For groceries	1,683.85
For butter.....	6,369.60
For cheese and eggs.....	1,110.10
For mortuary expenses.....	228.50
For medicinal supplies.....	2,833.34
For postage and stationery.....	931.43
For dry goods and clothing.....	6,078.49
For library and diversions.....	1,064.35
For furniture and furnishing.....	4,325.50
For repairs.....	12,025.26
For hardware and queensware.....	1,766.73
For contingencies.....	2,556.61
For visiting committee.....	443.05
For painters' supplies.....	569.90
For farm.....	3,039.06
For feed.....	3,402.65
For fuel.....	10,193.15
For lights.....	3,396.77
For salaries and wages.....	38,428.09—\$123,708.70
Transferred to new building.....	13,914.04
	<u>\$137,622.74</u>
Balance on hand October 31, 1876.....	1,163.03
	<u>\$138,785.77</u>

CURRENT EXPENSE FUND.

Exhibit of Steward for Year ending September 30, 1877.

RECEIPTS.

From balance on hand, Nov. 1, 1876.....	\$1,163.03
From Auditor of State.....	\$120,000.00
From articles sold.....	2,217.27
From interest on warrants.....	1,534.99
From private patients	845.50
*From transferred from building...	1,567.70—126,165.46
	<u>\$127,328.49</u>

EXPENDITURES.

For meats and fish	9,969.10
For breadstuffs	6,310.78
For fruit and vegetables.....	1,707.86
For coffee and tea.....	2,244.46
For sugar and syrup.....	4,149.92
For groceries	1,898.46
For butter.....	5,334.47
For cheese and eggs.....	1,354.35
For mortuary expenses.....	123.40
For medicinal supplies.....	3,512.02
For postage and stationery	767.85
For dry goods and clothing.....	5,125.98
For library and diversions	715.62
For furniture and furnishing	4,246.44
For repairs	7,540.18
For hardware and queensware.....	2,285.91
For interest.....	3,277.17
For contingencies.....	3,332.20
For visiting committee.....	451.10
For painters' supplies.....	544.61
For farm.....	3,651.11
For feed	3,343.55
For fuel	7,783.43
For lights.....	3,244.00
For salaries and wages.....	35,080.36—117,994.33
Transferred to new building.....	7,458.96
	<u>125,453.29</u>
Balance on hand, Sept. 30, 1877.....	1,875.20
	<u>\$127,328.49</u>

*NOTE—This amount was originally paid out of the current expense fund, but by order of the Board of Trustees was subsequently transferred to the building account.

EXHIBIT OF NEW BUILDING.

RECEIPTS.

Enlarging washing and ironing room.....	\$ 2,000.00
Replacing partition walls and contingencies.....	3,000 00
Providential fund.....	5,000.00
Old iron sold.....	673.43—\$10,673.43
Transferred from current expense fund.....	21,373.00
Total.....	\$32,046.43

EXPENDITURES.

For labor.....	\$12,189.88
For iron contract and iron	5,999.17
For roof contract.....	1,360.00
For cut stone and building stone.....	3,008.69
For replacing machinery, destroyed, (in part).....	1,696.10
For hauling stone from quarry.....	705.14
For lime.....	588 50
For sand.....	375.20
For cement.....	716.24
For brick.....	2,523.00
For lumber.....	602.47
For shafting and pulleys.....	326.77
For repairing engine and pumps.....	728.50
For repairing tools.....	112.89
For chimney tops.....	199.17
For compensation, M. L. Edwards	160.98
For freight.....	753 73—\$32,046.43

TREASURER'S EXHIBIT.

Current Expense Fund from November 1, 1875, to November 1, 1876.

Balance on hand November 1, 1875	\$ 6,877.86
Amount of receipts to November 1, 1876.....	181,908.41—\$188,785.77
Amount of payments to November 1, 1876.....	123,708.70
Amount transferred to building fund.....	13,914.04— 137,622.74
Balance on hand November 1, 1876.....	\$ 1,163.03

Current Expense Fund from November 1, 1876, to October 1, 1877.

Balance on hand November 1, 1876.....	\$ 1,163.03
Amount of receipts to October 1, 1877.....	124,597.76—\$125,760.79
Amount of payments to October 1, 1877.....	118,428.63
Amount transferred to the building fund.....	7,458.96— 123,885.59
Balance on hand October 1, 1877.....	\$ 1,875.20

IMPROVEMENT FUND.

Amount of receipts to October 1, 1877	\$ 15,100.00
Amount of payments to same date.....	\$ 9,367.33
Amount transferred to building fund.....	5,000.00— 14,367.33
Balance on hand October 1, 1877.....	\$ 732.67

BUILDING FUND.

Amount received from providential fund.....	\$ 5,000.00
Amount received from improvement fund.....	5,000.00
Amount received from current expense fund.....	21,373.00
Amount received for old iron sold	673.43—\$ 32,046.43
Amount of payments to October 1, 1877.....	\$ 32,046.43

The foregoing is a true exhibit.

M. L. EDWARDS, *Treasurer.*

OCTOBER 18, 1877.

PRODUCT OF THE FARM AND GARDEN FOR 1876.

Asparagus, 377 dozen, at 8 cents.....	\$ 30.16
Beans, Lima, 48 gallons, at 40 cents.....	19.20
Beans, string, 82 bushels, at 75 cents.....	61.40
Beets, 139½ bushels, at 75 cents.....	104.62
Beets, "greens," 37 bushels, at 75 cents.....	27.75
Beef 12,154 pounds net, at 8 cents.....	972.32
Cabbages, 5,224 heads, at 10 cents.....	522.40
Currants, 284 quarts, at 5 cents.....	14.20
Celery, 1,711 bunches, at 5 cents.....	85.55
Cucumbers, 1,201 dozen, at 6 cents.....	72.06
Corn, 480 bushels, at 40 cents.....	192.00
Corn, sweet, 453 dozen, at 10 cents.....	45.30
Corn stalks, 160 shocks, 10 cents.....	16.00
Egg plant, 17, at 6 cents.....	1.02
Grapes, 7,359 pounds, at 3 cents.....	220.77
Gooseberries, 32 quarts, at 6 cents.....	1.92
Hay, 200 tons, at \$8.00.....	1,600.00
Hay, slough, 80 tons, at \$5.00.....	400.00
Horse radish, 7 dozen roots, at 15 cents.....	1.05
Lettuce, 2,987 heads, at 1 cent.....	29.87
Milk, 68,056 quarts, at 5 cents.....	3,402.80
Oats, 300 bushels, at 25 cents.....	75.00
Onions, 132 bushels, at \$1.00.....	132.00
Pork, 25,920 pounds, at 7 cents.....	1,944.00
Potatoes, 1,107 bushels, at 75 cents.....	830.25
Potatoes, sweet, 41½ bushels, at \$1.25.....	51.87
Parsnips, 310 bushels, at 75 cents.....	232.50
Peas, 60 bushels, at \$1.50.....	90.00
Parsley, 960 bunches, at 2 cents.....	19.20
Pasturage for 74 head of cattle and other stock 6½ months, at \$1.50 per head per month.....	721.50
Raddishes, 89 dozen, at 6 cents.....	5.34
Raspberries, 295 quarts, at 12½ cents.....	36.88
Rhubarb, 310 dozen, at 6 cents.....	18.60
Rye, 150 bushels, at 50 cents.....	75.00
Sage, 74 pounds, at 40 cents.....	29.60
Sweet pumpkins, 3,360 pounds, at 5 cents.....	16.80
Squash, 10,336 pounds, at 1½ cents.....	155.49
Stock and produce sold during year.....	1,192.73
Strawberries, 355 quarts, at 12½ cents.....	44.38
Turnips, 154½ bushels, at 30 cents.....	46.35
Tomatoes, 244½ bushels, at 75 cents.....	183.3
Total.....	\$13,721.268

REPORT

OF THE

JOINT COMMITTEE

OF THE

SEVENTEENTH GENERAL ASSEMBLY,

OF THE

STATE OF IOWA.

APPOINTED TO VISIT THE

HOSPITAL FOR INSANE

AT

MT. PLEASANT.

DES MOINES:
R. P. CLARKSON, STATE PRINTER,
1878.