

FIFTH BIENNIAL REPORT
OF THE
VISITING COMMITTEE

TO VISIT THE
HOSPITALS FOR THE INSANE.

1883.

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BIENNIAL REPORT.

HON. BUREN R. SHERMAN, *Governor of Iowa*:

THE visiting committee for Iowa Hospitals for Insane beg leave to submit this, their fifth biennial report, for the year ending June 30, 1883:

The usual monthly visits, provided for by law, have been regularly made, and a thorough inspection of the wards has been made at these visits, as also at the regular meetings of the full committee, and their condition closely observed. The wards, as a general rule, are kept clean and in good order, taking the class of patients into account; beds are clean and comfortable, and their quality is improved from year to year, as the appropriations render possible an increase in the stock of woven wire and hair mattresses and other first class bedding. The food furnished has been of good quality and abundant in quantity, and very little complaint has been made by the patients in either Hospital concerning it. Your committee have, at nearly every visit, been careful to observe the patients at their meals, and the condition of the dining-room and tables, and find the latter uniformly clean, and furnished with a fair variety and excellent quality of food; it could not be made better upon the present allowance per month.

The members of the committee have, as far as practicable, cultivated a personal acquaintance with patients, and talked freely with them about their condition and prospects; most of them are satisfied with the life they are leading, others are persistently dissatisfied and declare that they never ought to have been brought there, and regard their detention as imprisonment, and that they are not now and never have been insane; and there are all grades of feeling and opinion among them, as there are among sane people. No general charge of bad management in either Hospital has been made to the committee during the last biennial period.

RECOMMENDATIONS

AS TO THE FUTURE POLICY OF THE STATE IN THE MANAGEMENT OF
THE INSANE.

The present number in hospital is about 1,040, of which Independence hospital has 580, that at Mt. Pleasant 460. We have in this State one insane person in every 639, according to the last United States census, and we have the lowest percentage of insane of any State in the Union. There were, in 1880, in this State, 2,544 insane persons, of whom 913 were in hospital, 69 in other institutions, 323 in county poor-houses, 7 in jails, and 1,232 at home; and it is thus shown that only 36 per cent of our insane are cared for in hospitals, while Illinois has 43 per cent, New York 57, and Massachusetts 60. On an average in the whole Union, 44½ per cent are under treatment in hospitals. The design of our present hospitals being mainly for the *cure* of insanity, it is manifest that more hospital room must be provided for the relief of this afflicted class of our fellow citizens; the present hospitals being constantly crowded with the chronic cases, we regard it as an imperative duty of the coming legislature to make an appropriation for locating and building a new hospital in the western part of the State; the location, in our opinion, should be to accommodate the southwestern and central western part of the State, and the institution should be of the same general character as the present ones; it should be a first class brick building, and not built as expensively as the present hospital structures. This should be the third of our series of hospitals, and will necessarily be followed by a fourth, eventually, of about the same kind, located in the northwestern part of the State. As the population of the State increases the percentage of insane will undoubtedly continue at least as large as at the present time; and our State does not, in the opinion of your committee, desire to be behind other States in its provision for these unfortunates.

After our State has been well supplied with curative institutions, other structures may be provided on the hospital farms, where, under the same general supervision, the chronic cases can be cared for more cheaply and in a better manner than they could be in county institutions for the same purpose. Your committee, in their report at the end of the biennial period two years since, inclined to the belief, for special reasons given at that time, that a state institution for the care

of what are styled "chronic and incurable cases of insanity" would be the better mode; but, after further investigation and further thought on the subject, we think it simply better than sending them back to their counties; and our opinion is now firmly fixed that there should be no *separate* institution for such a class, but that they should be provided for in and about our hospitals on the plan indicated above. The following opinions on this subject are given by some of the most distinguished alienists in this country:

Dr. Brigham says: "No one can determine with much accuracy which patients are, and which are not, incurable. Of this asylum (Utica), we cannot say of at least one third, to which of these classes they belong. We still indulge hopes of their restoration, but will probably be disappointed in a majority of them. But the hope we have, and which encourages us in our efforts to cure them, would be destroyed by sending them to an 'incurable' establishment. The fact that the chances of recovery would be diminished to even but a few is enough to make us hesitate before we establish such asylums. Many who are incurable are deranged on but one or two subjects, and sane on others. Such, surely, should not be deprived of any comforts that are offered the curable class, among the greatest of which is the hope of again being restored to society, which would be destroyed if they were sent to an asylum for incurables. Among the incurable insane there would be no certain means of ascertaining the neglect or abuse of them. In all, the fact that some are well and soon to leave the asylum is the greatest safeguard against abuse. No possible good would arise from such distinct asylums, except they might be conducted at less expense. But how so if they are to have proper officers, physicians, etc. And if they do not, why are they better than poor-houses? There are no facts in favor of such establishments. We hope never to see such institutions in this country. On the contrary, let no asylum be established but for the *curable*, and to *this*, the *incurable*, the *rich* and the *poor*, should be *admitted*; let *all* have the *same kind of care*, and let *all* *indulge* the *same* hope, even if delusive to many, of ultimate recovery; but do not drive any to despair, and destroy the little mind they still possess, by consigning them to a house, over the entrance of which Dante's lines on the gates of hell might well be inscribed: 'Leave hope behind, all who enter here.'"

Dr. Gray, the present distinguished superintendent of Utica asylum, says these opinions are as sound and comprehensive as ever, and embrace the whole philosophy of the subject.

Dr. Bell, so eminent by reason of his investigations into the organization and management of insane hospitals in Europe, declares as the fruit of his experience: "The principle is, there is no such thing as a just and proper and curative or ameliorating treatment of the insane in cheaply constructed and cheaply managed institutions. If it is worth while to have any institutions beyond these receptacles in which the worst patients, or rather the worst sufferers, can be crowded together at the least charge, it is worth while to establish such as will accomplish all of cure or relief which is practicable."

In reference to this subject, Dr. Kirkbride, for forty years superintendent of the Pennsylvania hospital for the insane, at Philadelphia, says: "I have been trying for years how we are to keep the chronic insane more cheaply in separate institutions than we have been keeping them where all classes were received. Why, they have got to have the same amount of air, fresh air I mean, and warmth; the same amount of clothing and the same amount of food. How, then, are you to keep them cheaper? I have never seen any mode suggested by which you are to reduce the expense, except by lowering the scale of treatment. You must give them room; what is necessary in one institution is necessary in another. I do not know that it is necessary to say one word more, only to remark that I do not believe it can ever be economical to do wrong. And to revoke the decision of the association, or to put up institutions for incurables would be a wrong step. It is better and cheaper to cure a man at any cost than to support him as an incurable."

The Association of Superintendents, after years of effort to obtain the most reliable data, and after full and free discussion, resolved: "That insane persons considered curable, and those supposed incurable, should not be provided for in separate institutions or establishments."

In the *Medical Record* of the 23d of December last, Dr. C. R. Agnew, of New York, in an article upon the care of the chronic insane, says: "The idea at present in full operation in this State, of gathering the acute insane in one institution and the balance in another, is both unscientific and inhuman, as bad as it can be in an economic point of view. An asylum for chronic cases comes to be considered

by the popular mind as a place for incurables, a place on which may be inscribed, 'no hope enters here,' and the influence of that consideration, sooner or later, pervades the asylum itself, and scientific interest in the scrutiny of the inmates case by case dies out, and you have a mere poor-house, with scarcely a vestige of a hospital or sanitarium about it."

INVESTIGATIONS.

The investigations made by your committee during the biennial period are now in the executive office, and to be printed as a part of this report.

Your committee are much pleased to see an effort made in both hospitals to do away with mechanical restraints as far as possible in the management of violent cases of insanity; and as one means of accomplishing this purpose they encourage all male patients who are able to go out to work on the farm; these patients perform a large amount of labor, to their own benefit and that of the hospitals, when under proper management; many help do the ward work; in the female wards a large number do ward work; others go to the sewing and ironing rooms, and are benefitted by such labor; all work off their nervous disturbances, and rest better at night, and like to do such labor as is assigned them. We recommend the establishment of such shops as are asked for by the superintendents in their reports, so as to have a diversity of labor as needed.

Your committee have carefully looked over the list of appropriations asked for, and find that what the boards of trustees and superintendents of both hospitals have asked for are of vital necessity to the successful management of the hospitals; especially would we recommend the addition of the "Gray farm" to the hospital grounds, for reasons given in reports from Independence hospital; and we think it economy to add to the farms of each hospital as opportunity offers; each of the present hospitals could work one section of land with a very small increase of expense in labor above what they now have.

In the Mt. Pleasant report, the following items asked for should have the necessary appropriations, being absolutely needed for the successful working of the Institution and safety of the property, viz.: Heating and ventilating, including the same changes in the west wing already nearly completed in the east wing and front center; this im-

provement is a very valuable one, and has made a great change for the better in the heating and ventilation of the parts already completed. In fact, there is no single item asked for which can be left out without damage to the building or diminishing the capacity of the management to take good and efficient care of the inmates. We call attention especially to the superintendent's plan for adding to the capacity of Mt. Pleasant hospital, and think that it is the most feasible and rapid method of increasing our accommodations for the insane, but it should not interfere with appropriations for a new hospital; both objects should be provided for at the coming session of the legislature. A plan should be adopted for increasing our number of hospitals until all our insane are cared for in State institutions, and appropriations should be made at every session of the legislature until the system is complete.

Your committee again call your attention to the criminal insane, and protest against their admission to our hospitals; and as there is a good opportunity for the State to provide hospital accommodations for this class within the penitentiary walls, we most earnestly recommend that such provision be made for them with as little delay as practicable.

We ask your attention to the call from both hospitals for new steam mains and radiators, and recommend that the appropriations be made for larger mains, so that what is called the "low pressure" plan of heating can be adopted, which is both the best and the most economical.

We also recommend that the appropriations asked for from both hospitals for woven wire mattresses, and bedsteads, be continued from year to year until a full supply is obtained.

The appropriation desired at Mt. Pleasant for the continuance of the work on sub-basement walls is absolutely necessary to the safety of the building.

The improvements in the wash, drying and ironing rooms, in both hospitals, are positive necessities in each.

We need not particularize further, for there is not one item asked for either hospital which can be omitted without damage.

At the close of the last biennial period your committee regarded the water supply at each hospital as uncertain and inadequate; since that time the arrangements made at Independence Hospital will render the supply of water abundant and certain, we believe, if the

appropriation is made for the purchase of the land asked for and for "completing the water supply," and it will be of excellent quality for all purposes. That at Mt. Pleasant is assured in their contract recently made with the city.

Your committee beg leave to call your attention to the non-resident insane accumulating in our hospitals, and recommend that authority be granted to send such patients to their residences, when they can be ascertained, and an appropriation be made to carry out this purpose.

We take pleasure in saying that in our opinion our hospitals are well managed and are reasonably efficient as compared with other institutions of the same kind in this country.

All of which is respectfully submitted.

S. B. OLNEY, *President.*

L. C. MECHEM, *Secretary.*

MRS. L. S. KINCAID,

Committee.

OLMSTEAD INVESTIGATION.

HON. B. R. SHERMAN, *Governor of Iowa*:

SIR—In obedience to your order of October, 1882, I called my committee together at Iowa Hospital for Insane; present: S. B. Olney, President, J. C. Mitchell, Secretary, and proceeded to examine into the charges brought of mismanagement and want of care of one L. M. Olmstead, late a patient in said hospital from Clarke county, Iowa. Said charges were made by Mrs. L. M. Olmstead, and corroborated by others, that said Olmstead was discharged from said hospital in an extremely filthy, lousy condition, on or about September 19, 1882; your committee proceeded to take the testimony of the then superintendent, Dr. H. M. Bassett, who is a very competent physician in his specialty, and an exceedingly careful and painstaking officer, who made a full statement under oath as to said Olmstead's case, and and as to the condition, care and treatment of said patient during his residence in said hospital, showing conclusively that said Olmstead did not want for care, and was not filthy when he left the hospital; the charge of his family or wife not being kept properly informed is shown not only by Dr. Bassett's statement to be without any foundation, but by the regular letter book it is shown that his wife had regular reports of his case by mail; and that finally, on the seventeenth day of September, 1882, Dr. Bassett, by a critical personal examination of the said patient, became satisfied that a decline had set in that was not likely to be arrested, wrote to his wife of his apprehensions and suggested his removal to his home, as he supposed that his friends would rather have him die there than at the hospital, in the event of such a contingency. Dr. B. further says in reference to the charge that Mr. Olmstead was in such a notably filthy condition as to be obvious to casual observation, that less than forty-eight hours before said Olmstead left the hospital he made a thorough personal examination of his body, during which he had occasion to see his legs as high as his body, and see exposed the whole of his head, face, neck and chest, and although he had no reason to suspect such a state of lousiness as his friends allege, such a condition could not have escaped his notice had it existed. His testimony is also to the effect that the said

Olmstead had organic disease that was necessarily fatal, and that his residence and treatment in hospital not only did not shorten his life, but that he was better and his life prolonged by said treatment and care.

The testimony of Dr. Max E. Witte, in charge of the male wards, who saw Olmstead every day and had charge of his medical treatment, is positive as to his being well cared for and cleanly, and knows that he was clear of vermin when he left the Hospital.

Mr. Francis Braderick is supervisor of the male wards, and sees all the patients in his department every day; is confident that Olmstead left the Hospital in a cleanly personal condition, that his clothes were clean and that he was free from vermin; he saw that he was prepared for leaving, as he had charge of patients' clothing.

Gilbert Lyon, assistant supervisor of male wing, testifies to the same purport as the supervisor.

Elmer Alton, attendant in ward number ten, the last ward that Olmstead was in, says: "I do not think it possible that he was lousy while in my ward nor when he left it, when he went away. I feel positive about it, for he had good care and attention. We had to be in his room frequently; had to take his meals to him for two weeks before he went home, because the physician directed that he be kept in bed. We bathed him every week when he could go to the bathroom; we sponged his body frequently while he was in his room and confined to bed."

Mr. Alton says: "We examine patients quite frequently to see if any have vermin upon them." He says, "I do not believe Mr. Olmstead had vermin on him when he left the Hospital, for we made special effort to have him clean and nice when he left. We sponged off his whole body the morning he went away, and tried to induce him to put on some underclothing, but he refused to do so."

Many of the patients in this ward say that there had been no lice in this ward for six or eight months.

C. L. Simmons, attendant on ward six, was acquainted with Lewis Olmstead, who came to his ward from ward three the first time, as also the second time he came to the Hospital. He was in a rather weakened condition when he came; personally he was in a cleanly condition. He said he came from a back ward and might be lousy, and wanted a fine comb. "I gave him one, and also examined him, and found one louse on his beard; did not find any more; he was thereafter in ward six more than two months; do not think it possible

he could have had vermin all that time without its being discovered. When he asked me for a fine comb the first time, he requested me to trim his hair and beard, and I did so. I feel quite confident he had no lice when he left my ward to go to number ten, which was about August 23d.

C. F. Kueney, attendant on ward three, does not think Olmstead was lousy when he was in his ward, and is quite sure about it.

I remember of seeing this patient myself, when in ward ten, and remember that he had a nice, clean room, and was to all appearances, well cared for; and, from all the evidence we can find, we do not believe this said patient Olmstead was ill used, but that he was well cared for and well treated, and we do not believe that he left the hospital in a "filthy" or lousy condition.

The attendants who have testified in this examination we are well acquainted with, and believe them to be truthful, reliable, and faithful attendants, who would not allow a patient to get into such a condition as charged in this case.

Neither do we believe Dr. Witta, the assistant physician, who had direct charge of the male wards, and of the said Olmstead, would allow any patient under his charge to get into such a condition as charged in this case, as my observation of him is that he is faithful in the performance of his duties in hospital.

Respectfully submitted,

S. B. OLNEY,
President of Committee.