

the opening of the fiscal year, December 1, 1888, there were 109 patients in the asylum—57 males and 52 females; admitted during the year, 62—35 males and 27 females. Total number under care and treatment for the year ending November 30, 1889, 171—92 males and 79 females. Discharged, 10 males and 12 females. Died 13 males and 6 females. One eloped and not returned. This man was a transient, a miner by occupation, and had no friends or relatives in the territory. He was so far recovered that I contemplated discharging him in a short time. He was allowed to work around outside for several months, and finally taking advantage of the liberty accorded, eloped. We have heard nothing of him since. Number in the asylum at this date, 129, a gain of permanent population for the year of twenty patients.

It will be seen from the above that sixty-two patients were admitted this year, as against thirty-four for the year ending November 30, 1888; also that twenty-two had been discharged as against ten for the preceding year. The deaths were nineteen for the year, as against four for the year preceding. A number of the deaths are of persons over sixty years of age, one being sixty-four, four ranging from seventy to seventy-four years, one eighty-four and one eighty-six—these cases being all senile-demented, dying from old age, general debility and senile decay. A number of cases were brought to the asylum in a dying condition, only living a short time after admission. Thus our death rate is largely augmented by causes over which we have no control.

The percentage of discharges, as against the number recovered, during the year was 33½ per cent. This is not as large a percentage of discharges as is credited to the asylums where every facility for treatment is at the disposal of the management; but it must be deemed a very favorable showing, considering the disadvantages here labored under from lack of room to properly classify the cases.

The steady increase of the permanent population of the asylum suggests forcibly the necessity of making provision for the future. The population of the territory is rapidly increasing, and with that increase will come a corresponding increase in the number of insane, to be cared for in institutions provided by the commonwealth. The number of patients in this institution today is about one to 2000 of the population of the territory. How many there may be throughout the territory over whom private care is exercised; I have no means of ascertaining, but taking the data that is obtainable from other sources, there must be a large number. The ratio of insane to population in California is as one to 370; Massachusetts, one to 370; New York, one to 380; England has one in 362; Australia one in 369. Thus it will be seen that should the number of insane to number of population in this territory anywhere nearly approximate the figures here given, there must

be a large number of the unfortunate class within our borders who, sooner or later, will require the care of an asylum.

In my report for the year 1887, I stated our needs fully and emphatically, as was my duty. Permit me to refer again thereto, and to earnestly reiterate the statements therein contained. Since the report here mentioned was formulated, our population has increased steadily and the limit of numbers that could be properly cared for in this inadequate building has long since been exceeded. The following will inform you as to the condition of our wards:

Ward A, the female ward, must furnish accommodation at the present time for sixty-nine people—sixty-two patients and the female employees of the asylum. These are distributed as follows: In the room formerly occupied by the medical superintendent as an office, twelve beds; on across corridor, twelve beds; one associate dormitory, six beds; in unfinished lavatory, bath room and clothing room, three beds; the eighteen small rooms, intended to accommodate one patient each, are all occupied by not less than two patients in each, and several by three, with one exception—a case we dare not trust in a room with another patient at night.

The male ward B, has to furnish accommodation for seventy-three persons—sixty-eight patients and five attendants. These are distributed as follows: During the day all are upon ward B; at night, twenty-four of the quieter cases are taken up stairs to ward C to sleep; they occupy the different rooms on that ward as an associate dormitory: attendants sleep in the ward with them, the balance of the patients are retained on ward B, twelve sleeping in one associate dormitory and six in another. Of the eighteen small rooms, ten are occupied by two patients each. The others by one patient in each. These cases are such that we dare not trust them together, but are obliged to isolate them at night. The above explains our condition as to room, and patients who are received now must have beds made for them on cross corridors, all of our sleeping rooms being fully occupied.

Such crowding in a hospital for sane people would be considered dangerous from a sanitary point of view. How much more dangerous it is with insane and irresponsible beings. Not only from sanitary reasons, but from many other reasons which you will readily understand. We are at the present time taking, and must continue to take, chances that could only be justified by the fact that these poor unfortunates must be cared for, and that we have not greater facilities to do other than we are doing, trusting to providence and a constant vigilance that no calamity may occur. The evils of this over-crowded condition are: That it impairs the usefulness of the asylum, handicaps good treatment, interferes with the proper moral and hygienic treatment of the patients and lessens their chances for recovery; it reacts upon their physi-

cal health as upon their mental progress. No class of people are more readily influenced by their surroundings; close contact with one another makes them uneasy, irritable, and is provocative of quarrels and violence. Especially is this the case where there are no facilities for proper classification.

During the first year, as in former years, our aim has been to keep patients employed at some form of labor or occupation, so far as practicable. This is done as a means of treatment rather than from any profit to be derived from their labor, and to get patients inflicted with a mild form of insanity, or those that are improving, from off the crowded ward, and give them the benefit of outdoor exercise and quiet from excitement and noise.

During the past year, we have not been able to give our patients amusement in the way of music or concerts, as we have no place available for that purpose. This deprives us of a great help in diverting the mind and breaking the monotony of asylum life. We have, whenever the weather has been suitable, taken out walking parties of all such parties as were able to go, and could be trusted, three or four times a week, for the double purpose of giving them exercise in the open air, and of enabling us to more thoroughly ventilate the building. The question of keeping the building in good sanitary condition is one of great importance, and considerable difficulty is experienced owing to this over-crowded condition. During the summer months, we can partially meet this need by constantly keeping the windows open, day and night; but as severe winter weather approaches, to do this and at the same time heat the building and keep up a comfortable temperature is almost an impossibility. It then almost comes to the question of which is the worse evil—to freeze or to be poisoned by the breathing of so many persons. Only those who have the care of the insane can fully realize what is meant by the odor arising from the breath of a number of such unfortunate persons congregated in places not thoroughly ventilated. We, therefore, keep open windows as much as possible, although it gives rise to a good deal of complaint from the patients at times, and also subjects them to the taking of colds, coughs, etc.

Another trouble experienced is the constant use of closets, intended to accommodate a given number of persons, by double that number. This gives rise to vile odors, despite the constant flushings and free use of deodorizing materials. We have spared no effort, however, to keep every part of the building scrupulously clean and maintain a good sanitary condition, and so far have succeeded fairly well. How long that can continue under existing circumstances, remains to be seen. Our best efforts, however, will always be put forth to that end.

The general health of the inmates of the asylum for the past year is as good as could reasonably be expected. We have had no epidemic or disease, nor any accidents of any