

WM
28
AN 6
U857

IN SENATE,

April 23, 1844.

REPORT

Of the minority of the Committee on Medical Societies and Medical Colleges on the Bill in relation to the State Lunatic Asylum.

Mr. Backus, as one of the committee on medical societies and medical colleges, to whom was referred the engrossed bill from the Assembly affording relief to the Lunatic Asylum at Utica, respectfully

REPORTS:

Dissenting from the views of the majority of the committee on this subject, with permission of the Senate I will briefly give my reasons for such dissent.

I believe, Mr. President, that since the introduction of this bill into the House, there has come over the public mind quite a change of sentiment. That the discussions in the other House have led to a general investigation of this subject. The public have been led to doubt, seriously to doubt, the policy of large institutions for the relief of the insane; and these investigations have led many to believe that the ground taken by the advocates of large asylums is not tenable, is not in accordance with reason or common sense, and with the experience of medical men in this country, nor as far as known, with the *private opinions* of the heads of the great insti-

tutions for insane in Europe. It is not any evidence of the fact that because these illustrious men are the heads of these *great* institutions, that they are opposed to *small* ones. These large establishments, it is true, have had the most celebrated and most learned men in matters of lunacy at their head. It was a matter of course to give the largest asylums to the ablest men. It is not to be expected that an able man should reject the control of an establishment, because it is very large. But we have yet to learn that a single one of these celebrated men has ever expressed an opinion, that *large* institutions for the relief of the insane were better than *small* ones.

I allude to this branch of the subject at the outset, because Dr. Brigham in his communication of the 30th of March last, (a communication which was read to the Assembly,) derives his principal argument in favor of large establishments, from the fact that these establishments exist, and are well managed. Speaking of the large establishments which exist in England and France, he says: "From these large institutions have emanated all the great improvements of modern times in the treatment of the insane. Pinel, Esquirol, Georget and Ellis, and many others, who are considered the very highest authorities on everything relating to insanity, have been conductors of them, and no one of them has *ever said a word against* these institutions being *too large.*"

Unfortunately for Dr. Brigham this statement was made a little too sweeping in its character. I am enabled positively to contradict it. For Esquirol, one of the gentlemen named by the Doctor, and who is acknowledged by him to be the highest authority of any age or country on this subject, gave it as his opinion, after he had successively been at the head of the largest institutions in France—the Bicêtre, with its 800 patients; the Salpêtrière, with its 1,500, and the hospital at Charenton, with its from 400 to 500, *repeatedly* gave as his opinion, the result of his long experience, to Dr. Jas. McDonald, the former able superintendent of the Bloomingdale Asylum: "That no establishment for the insane should contain more than 250 patients, for no man can comprehend and carry in his mind more than this number, and that Charenton was altogether too large, which contained from 400 to 500 patients. To Dr. Alexander H. Stevens of New-York, who was often with Esquirol, and visited him purposely to acquire information on this subject, (he having charge of Charenton at this time)

he repeatedly expressed the same opinion in nearly the same words. And it is not a little remarkable that the Doctor did not re-examine the works of Esquirol before he should have made so broad an assertion concerning him. For I find in the great work of Esquirol "Maladies Mentales," vol. 2, page 428, the following opinions relating to this subject, and fully concurring in opinions expressed to Messrs. McDonald and Stevens: "Considering the number of the insane received into the public and private establishments in France, it may be supposed that twenty asylums are sufficient. They should be located near the centre of judicial districts; each asylum is established where a royal court is sitting, and will receive the insane of the department embraced in that judicial district. It should be constructed so as to contain from 400 to 500 *patients*." This was written by Esquirol in 1818; see page 399 of the same work and addressed to the Minister of the Interior. The work is republished in 1838 (after ten years experience,) with the following note; see page 428: "*Further reflection induces me to consider this number, 400 or 500 quite too large; I would reduce it one-half.*"

Dr. Jacobi also expresses himself strongly on this subject. The Dr. is first physician of the establishment at Seigburg, for the Prussian provinces of the Rhine—a model institution. And Dr. Tuke says of him, that the character of his mind, no less than his professional attainments and his conscientious zeal in the faithful discharge of his trust, entitles his opinion to much consideration and respect. In his fine work "*On the construction and management of the Hospitals for the Insane,*" after alluding to small county or small district asylums, he says: "Whatever may be the disadvantages which these establishments labor under when they are too small, an excessive and disproportionate magnitude is certainly not less extremely pernicious. Many writers have believed, that four or six hundred patients, or even a greater number, are not too many to be received into the same establishment. *For my part, I entirely dissent from this opinion; since my own experience convinces me, that the maximum number of patients to be admitted into one and the same establishment, ought never to exceed two hundred.*"

But why should we attempt to imitate these large institutions. They are in the midst of a very dense population. They have become large from force of circumstances; from their peculiar situa-

tion ; from the desire to economise in the bare support of this unfortunate class of our fellow beings. These institutions in France have taken possession of buildings that were already erected to their hands ; they were some of the prisons or convents ; or, as in the case of the Salpetriere, have taken possession of a large manufacturing establishment ; it was formerly occupied as a manufactory of saltpetre, hence its name ; it is 1,680 feet in length and 1,164 in breadth, and in 1662, contained 10,000 paupers. These institutions, in the midst of such a dense population, would fill up quickly ; the difficulties of transportation would not exist ; they would assemble from a great capital containing a population half equal to the State of New-York.

But why need we go to Europe for all our information on this subject ; we have had institutions in this country for many years ; our physicians have visited Europe ; have consulted with the most prominent men of Europe on that subject. The insane of this country are generally well managed in our institutions ; our reports as regards the number of cures, will bear comparison with any in the world ; why then should we deviate from the course commonly adopted in this country, which has been upon this *fundamental principle*, that the head of the establishment should be resident in the same house with his charge, constantly among them, knowing them, their history, their troubles, their hopes, their moral and mental habits, as he would those of his own immediate family. He has no avocations, interests, or feelings, beyond the little world of which he is the perpetual sentinel. I do not think that it is in the power of man to propose a more sound fundamental principle of action than this. This must be acknowledged to be a correct organic law in this matter. And how are we supported in this opinion by the experience of Esquirol ? To no man's opinion in Europe should we attach so much confidence. Few had the experience and success in treating the insane ; few possessed with him the natural talent peculiarly adapted to their treatment. He was the successor of the great Pinel in the Bicêtre at Paris. It is only about fifty years since, Pinel in France, and the institution in York, England, which latter contained some 200 patients, simultaneously commenced a correct course of treatment for the insane. They first presumed to *unchain* their patients and adopt moral means ; and it is more than probable that Esquirol might have derived support in his opinion of the great ad-

vantages of *small* over *large* asylums, from his illustrious predecessor. It is about fifty years since institutions sprang up in this country. In 1796, a building was appropriated in Philadelphia for the use of the insane, and soon after in New-York.

The American physician has been actively engaged in investigating this subject, until our institutions are inferior in their reports to none in the world. What is now the opinion of the physicians of this country on this subject? Great, very great unanimity of opinion prevails throughout its whole length and breadth. The physicians of Boston, New-York, and Philadelphia, are, without an exception, as far as I know—as far as I can learn, in favor of small asylums. Communications recently from Dr. Bell, of the McClean Asylum near Boston; from Drs. Hayward and Channing, of Boston; from Dr. McDonald, of New-York; from Dr. Wilson, the present superintendent of the Bloomingdale Asylum, all concur in this opinion—which opinions I have engrafted into this report, oftentimes in the very words of the writer. Dr. Brigham, the superintendent of the Ohio Institution, and Dr. Woodward, are alone, as far as I know, in their peculiar opinions on this subject; and the latter only consented to the present enlargement at Worcester, from force of circumstances, being well assured of the fact, that a large number of *incurables* were in the jails and alms-houses of that State, and should be admitted into the asylum; and that the incurable already in that institution might not be sent back again to the alms-houses and jails, to make room for more recent cases. I presume the enlargement of that institution would never have taken place, had the State Lunatic Asylum not have had a fund, a bequest from Mrs. Johonnot of Salem, of \$44,000, subject to a life annuity of \$2,500. The State, by their Legislature, assumed the payment of this annuity; and as this money could be used no where else, and the State had no funds to spare, they allow this fund to be used for the erection of a building that will accommodate 150; and it is only for this class of patients that large institutions could be tolerated even by Dr. Woodward. Why then should we rest on so important a question as this, on uncertain *foreign evidence*, and that of a *negative character* as far as it goes. The friends of this bill have not given us the *private opinions* of the heads of these several large institutions on this matter. While we are able to give directly the valuable opinion of Esquirol and Jacobi on this subject,

which is directly at variance with this whole plan; and I presume, that if the private opinion of the other heads of the great institutions were known, it would be in accordance with that of Esquirol.

The information disclosed of the great amount of insane persons in the remote districts of this State, have led the Assembly to pause before they would adopt the provisions of this bill, believing, and truly as I think, that the money might do more good, and be more profitably employed elsewhere. I think, if the amount proposed to be expended in enlarging the asylum at Utica, should be used in building two other establishments in different parts of the State—for the sum required to *complete* the present establishment at Utica, would build two good establishments elsewhere for 200 patients each—for it is my opinion, that this appropriation of \$70,000 does *not* complete this asylum.

The question is, whether it is better to have one large mad-house for the State, or to have a number of moderate sized ones, scattered over the State in different localities.

Small asylums are better than large ones, from the much *greater care and attention* which the individual case would receive from the superintendent, when a small number only are entrusted to his care, than could possibly be the case when five or six hundred cases have an equal claim. It is the opinion of the principal physicians of this country, who have had much to do with the treatment of the insane, that no physician can take charge of more than from 150 to 200 patients, and do anything like justice to them or himself, particularly if any considerable number of them have been recently affected. This remark, of course, does not apply to chronic, confirmed and hopeless cases of insanity, in which very little more is often required, than strict attention to their physical wants. But when the disease is recent, there is, under ordinary circumstances, a fair prospect of recovery under treatment. But in order to give the patient this chance, his medical attendant must make himself familiar with the case, understand its peculiarities, and observe from day to day, the changes that take place. It is perfectly obvious that no one man can do this to a large number of patients, and of course, no one would be justified in assuming the charge of many recent cases at any one time. In another point of view also, consider the *moral treatment* that is

so inseparably connected with the *physical*, and a *double* burthen is thrown upon the medical superintendent.

The great object of these institutions, is for *cure*—for restoration. Numbers become oppressive, however careful the classification, whenever the individuals are so numerous as to occupy most of the time of every day in the service they require. It does not alter the case to add to the number of assistants. These make demands on the superintendent more and more onerous, as the number increases, until at length he must act almost entirely by *delegation*.

The comfort of the patients would also be promoted in the smaller institutions, from the ability and ease with which their wants might be attended to by nurses and others—the avoidance of noise and confusion, almost necessarily inseparable from the congregating of a large number of the insane, in any one building however large.

Small asylums, in different localities of our State, would no doubt create a local interest in different sections of the State; would diffuse a more general information in relation to the treatment of the insane among the people; would tend to do away many objections that exist in the minds of the great mass of the people against sending their friends to these institutions, and sending them there early; for many, very many, think there is something of disgrace in some way attached to a residence in an asylum. This distribution of small asylums would tend much to correct the opinion of the *sane* on this subject. It would also afford fields of usefulness to a large number of physicians, who would thus acquire a greater practical acquaintance with the character and treatment of insanity. These are to my mind, very important effects, arising from the multiplication of small asylums; individuals would, of course, be better treated at home, in the incipient stages of insanity, and they would, of course, better understand how long it might be well to have them remain at home before removing to the asylum.

The physicians of Massachusetts are decided in their opinion that the three institutions of that State are mutual helpers of each other, and that the inmates of each are much better provided for, than if they inhabited a single house. You have, say they, three men, equally responsible, and without any possible interference in the

performance of their separate duties, placed over as many establishments; and who can, for a moment, doubt that the whole is better done, than if it devolved on a single individual in a single establishment?

The principal advantages supposed to be derived from large institutions, are *economy* in their management and the *imposing character* of large and splendid buildings.

But are not the benefits, after all, rather found in *theory*, than the result of experience? Would not the advantages possessed by small asylums be likely to result in the restoration of the greater number of patients, and thus actually enforce the propriety of considering *them* as the *most economical*? For the asylum that should be the instrument of restoring the *largest proportion* of its patients, must, beyond question, be considered as more useful and more economical than one which should maintain a much larger number at the same, or even less expense, if the recoveries did not bear an equal proportion to the number of inmates.

There may, in the *first place*, be more expense in the *smaller* than in the *larger*, (although as regards the Utica asylum, that cannot, by any possibility, be the case,) but when you consider in our large State, how far many parts of it are from this great central institution, from 200 to 270 miles, it cannot but make the charges of taking patients to and from the one institution and removals, quite balance the additional expense of two or more establishments.

We are seeking in our insane asylums to accomplish the noblest work of humanity, the restoration of human reason, of human responsibility to God and to man. We may be seeking for that which we ourselves may need.

How important and truly interesting is this subject? How necessary is it that every facility be offered to him or to them who have in charge the offices of kindness and of care for such sufferers? We believe that this claim will be more fully met and responded to in the smaller than in the overgrown, unmanageable asylum.

But there is a class of insane that should interest us much; and I would for a moment call the attention of the Senate to them distinctly. I mean the *pauper incurables*. They are becoming daily

more and more numerous. It is very desirable to restore the blessings of reason to a disordered mind, and no expense nor exertion for accomplishing this object should be spared—should be accounted too great. But we should not forget that those unfortunate persons in whom the light of reason has been quenched, perhaps never to be lighted again, have claims upon our attention, which we are to admit by every principle that should actuate an intelligent and Christian mind. Some of them, the severity and duration of their disease, aided perhaps by unskilful management, have converted into the most wretched and repulsive objects that bear the human form. They are now confined perpetually in cages, or dungeons; in the jails and poor-houses, and in private houses, in this State. Their number is *legion*? it is much greater than is generally supposed. I feel desirous of arousing the attention of this body to this unfortunate class of our fellow beings, so that when they return home they shall make such definite enquiries in their respective districts as shall enable us to view the whole question in all its magnitude. They should all of them find a resting place within the walls of a hospital. There are undoubtedly many difficulties attending it, there is great ignorance of the magnitude of the evil, yet this subject will have to be met sooner or later, and something efficiently will have to be done.

It will not do to have an institution solely for *incurables*. Both classes should be in every institution, for in such an institution both receive more care. The incurable will not be neglected when there is secured to them the same vigilance and care which it is the privilege of the curable to receive; and again, who can settle beforehand exactly which are curable and which not. There have been oftentimes strange recoveries, disappointing every one.

We need more asylums, and these unfortunates should be found in them. This subject opens up a wide field for philanthropic movement; the reports of our poor-houses show them in a very abject condition. Is it not evident that the insane cannot be kept in our almshouses and jails without great physical suffering, abuse and degradation; without becoming worse themselves, and presenting a demoralizing picture to others?

But to return to the subject of the bill before us. It proposes to build two buildings of brick and stone, 250 ft. long, and 38 ft. wide,
[Senate No. 128.]

with a high basement, 3 stories of 10 ft. each, with an attic of 8 feet. Two other buildings of brick and stone, 130 ft. in length, by 25 ft. in width, two stories high; each story 9 ft. in height. Also two frame buildings for wood and store-houses, 70 ft. in length, by 20 ft. in breadth, each having cellars 7 feet in height. Also an ice-house, 22 ft. by 22. The present building is 550 ft. long, by 60 ft. in width, four stories high. This altogether will make an enormous establishment; altogether too great for one man to manage profitably. It will accommodate, with the present room, about 500 or more lunatics; an attendant is required for every ten patients. This will give us 50 attendants. In addition, we calculate cooks, washing-women, and domestics generally—something like 50 more—making an household of 600 individuals, and 500 of them *mad*; a large household for one man to govern.

I have no doubt but the honest opinion of the present amiable and talented head of this institution is, that there are as many patients there at present as he ought to have committed to his charge. But the building is not arranged as it would have been had it been intended for 250 patients. It was a part of a large establishment. In his communication read to the Assembly, before alluded to, we may find a solution of this matter; the actual reason why he recommends this addition. He says: "When I accepted the appointment of superintendent, I understood, as every one else did, that the additional buildings the size of the present one, the foundations of which were already laid, were to be completed, thus forming one of the most magnificent establishments in the world. After several months examination and reflection, I came to the conclusion that the plan of four separate buildings was not a good one; that they would form too colossal an establishment; one that *no man, not endowed with uncommon mental and physical power*, could long superintend in a proper manner, and that I should hereafter be condemned for having aided in its completion. Knowing, therefore, that I should have to encounter the *opposition* if not the *displeasure* of many, *especially* of those in the *immediate vicinity*, and perhaps of the *managers*, I ventured to recommend its entire abandonment and the erection of a *cheaper structure* connected with the present building, by which we could well accommodate from 200 to 250 more patients."

Finding, therefore, that this colossal establishment, very like those

in Europe, which he says are the best in the world, was too much for him, in order to avoid "the *displeasure* of *many*, especially of those in the *immediate vicinity* and *perhaps* of the *managers*, I *ventured* to recommend, &c." Is there any doubt what influenced the recommendation ?

The contemplated establishment is too large ; it is adopting the *worst features* of the European asylums ; and I believe it may with great truth be said of this as Dr. Brigham said of the other: "*that no man, not endowed with uncommon mental and physical power, could long superintend it in a proper manner.*"

Such an establishment under the control of any man, however able, is against the spirit and feeling of the age on this subject. It does not accord with the admitted truth that *moral means* are required in the treatment of the insane, *predicated upon a close and accurate search* for the cause of the mental alienation, and implying constant and familiar intercourse with the unhappy patient on the part of the physician, if possible

"To probe the hidden wound,
And search out the rooted sorrow."

This is the peculiar duty of the physician for the insane. He must possess a talent for it by nature. He cannot communicate that talent, nor can he delegate that duty to others. He must do it himself or it is not done at all.

I am opposed to the present bill, but in favor of appropriating twelve thousand dollars ; the amendment of Mr. Stevens in the other House.

Faint, illegible text at the top of the page, possibly a header or introductory paragraph.

Second block of faint, illegible text, continuing the document's content.

Third block of faint, illegible text, appearing as a distinct section.

Fourth block of faint, illegible text, possibly a list or detailed notes.

Fifth block of faint, illegible text, located in the lower middle section.

Sixth block of faint, illegible text, near the bottom of the page.

Final block of faint, illegible text at the very bottom of the page.