

Document No. 16.

---

FIFTY-FOURTH ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

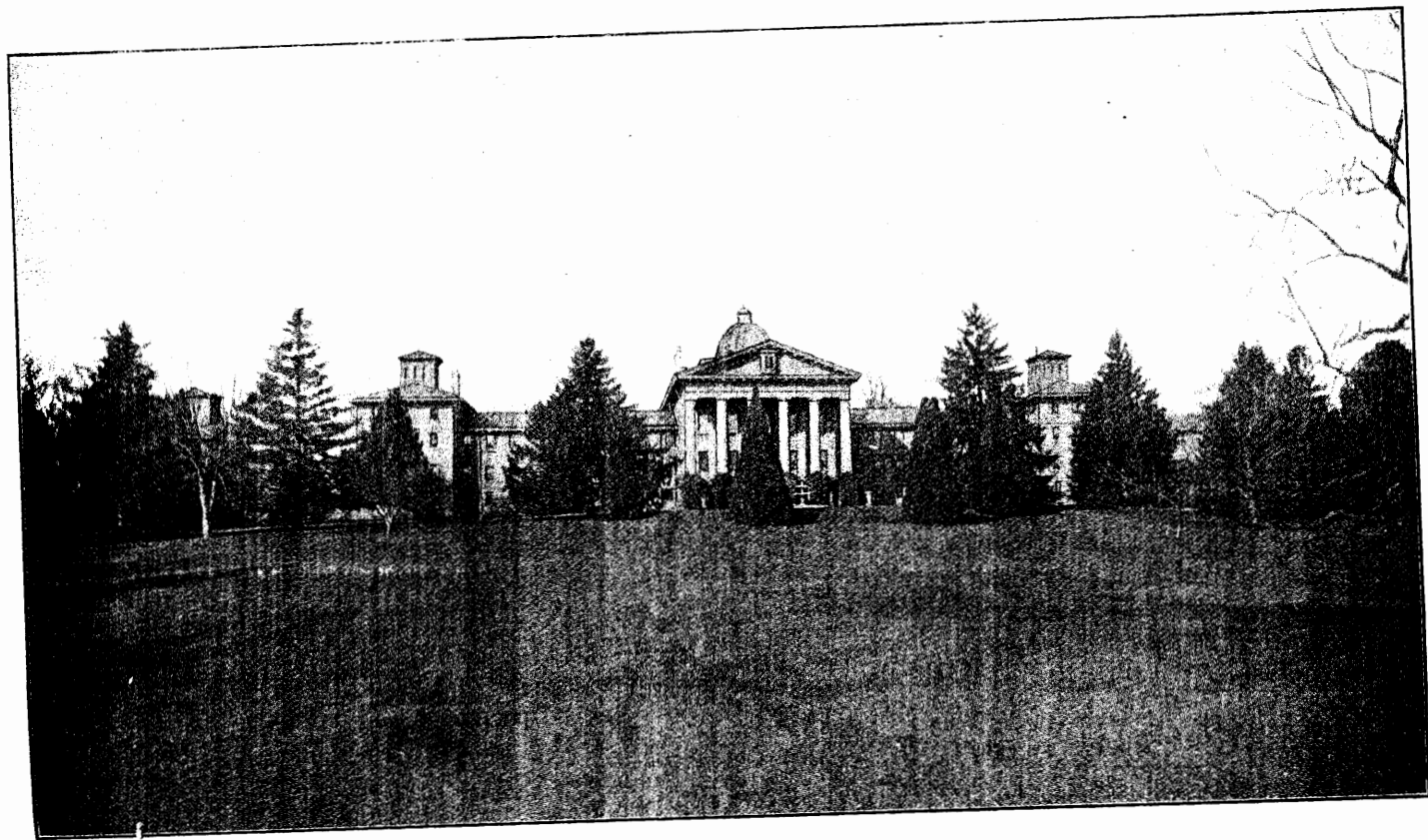
NEW JERSEY STATE HOSPITAL

AT TRENTON,

*For the Year ending October 31st, 1901.*

---

New Jersey State Library



MAIN BUILDING.



## MANAGERS.

---

GARRET D. W. VROOM, *President*.....TRENTON.  
N. NEWLIN STOKES, M.D., *Vice President*.....MOORESTOWN.  
HENRY R. BALDWIN, M.D.....NEW BRUNSWICK.  
B. W. ANDREWS.....WOODBURY.  
JOHN TAYLOR.....TRENTON.  
JOSEPH RICE.....TRENTON.  
C. S. HOFFMAN.....SOMERVILLE.  
JOSEPH THOMPSON.....ATLANTIC CITY.

---

SCOTT SCAMMELL, *Secretary*.....TRENTON.

## RESIDENT OFFICERS.

---

### MEDICAL DEPARTMENT.

JOHN W. WARD, M.D.....*Medical Director.*  
JOHN C. FELTY, M.D.....*Assistant Physician.*  
CHARLES L. ALLEN, M.D. ....*Second Assistant Physician and Pathologist.*  
PAUL L. CORT, M.D.....*Third Assistant Physician.*  
C. P. FRISCHBIER, M.D.....*Fourth Assistant Physician.*

---

### BUSINESS DEPARTMENT.

WILLIAM P. HAYES.....*Warden.*  
HARVEY H. JOHNSON.....*Treasurer.*

## REPORT OF THE BOARD OF MANAGERS OF THE NEW JERSEY STATE HOSPITAL AT TRENTON.

---

*To His Excellency Foster M. Voorhees, Governor of New Jersey:*

The Board of Managers of the New Jersey State Hospital at Trenton beg leave to present this, their annual report, as required by law.

The report of the Medical Director shows that during the past year there were under treatment in the Hospital thirteen hundred and seventy-one patients, two hundred and fifty-four having been received between October 31st, 1900, and November 1st, 1901.

During the year ninety-four patients were discharged as recovered; twenty-three as improved; nine as unimproved; ninety-one died; one escaped, and eighty-nine were removed to other institutions, leaving remaining under treatment in the Hospital at the close of the year one thousand and eighty-four patients. This number is far in excess of the normal capacity of the buildings.

The health of the institution during the year has been good, and, as reported by the Medical Director, the year has been passed with but very little acute disease of a serious nature, and none whatever of an epidemic nature.

Notwithstanding the establishment of the State Village for Epileptics at Skillman, no effort has been made to remove the epileptic class from the Hospital. It is understood that the Managers of that institution are unable to effect the removal of these patients for want of necessary funds to properly house and care for them. The attention of the Legislature should be given to this important subject at an early day.

The annual inventory, made in accordance with the provisions of the statute, shows the following appraisement:

Buildings, grounds, &c., valued at \$770,000. Personal property, appraised as per inventory, \$159,523.32.

Since our last report the work of lighting the buildings and grounds

with electricity has been completed, and the electric lighting has been in operation for the past six months. It has proved a vast improvement over the old system of lighting with gasoline gas.

The repairs and improvements that have been satisfactorily made to the institution and grounds during the past year by the Warden are set forth in detail in his report. At the last session of the Legislature an appropriation of \$22,500 was authorized for the purpose of connecting the sewerage system of the State Hospital and the Industrial School for Girls with the general sewerage system of Trenton. At the time this appropriation was made it was not only thought advisable, but necessary, for the purpose of making such connection, to construct a sewer from the Hospital grounds north of and along the feeder of the Delaware and Raritan canal easterly; thence, after crossing said feeder, to connect said sewer with the West State street sewer, at or near Philemon street. This would, necessarily, have been an expensive work. During the year the municipal authorities of Trenton have determined to extend the city sewer system to the annexed territory, which includes the Hospital, and the plan adopted for the sewerage that section of the city obviates the necessity of incurring the large expense of the projected sewer above mentioned. For this reason no demand was made upon this appropriation, save for the making of necessary surveys, and the cost of the later plan will be laid before the Legislature at its coming session.

The complaint made in the matter of the food-supply at the Hospital during the past summer, and which led to an investigation on the part of a committee of the Board of Managers, in which investigation your Excellency, at the request of the Board, took part, excited, at the time, considerable comment and some criticism, in certain quarters, of the Hospital management. The report of the committee of the Board has been made, and it presents, as we believe, fairly and truly the results of the investigation, and a copy thereof is transmitted herewith, together with the accompanying documents. The recommendations of the committee have been adopted by the Managers, and we feel satisfied that the changes in the management suggested by the committee will prove to be of great benefit to the institution.

As was distinctly stated in the report of the committee, and we desire now further to emphasize the statement, no complaint whatever, of either food-supply or the service of the food, had ever been made theretofore to this Board.

The visits made to the Hospital by the members of the Board during the year, and the examination made of the condition of the patients and of the buildings and grounds, demonstrate the untiring efforts, both of the Medical Director and Warden, to promote the comfort of the patients, and the Managers desire to express their appreciation of the manner in which these officers have performed their respective duties.

The Managers very earnestly call upon your Excellency and the members of the Legislature, as well as all citizens, to visit the Hospital and to critically examine and inspect the arrangements made for the comfort of the unfortunate persons committed to their care.

The various county institutions for the care of the insane, located in this Hospital district, have been visited by members of the Board of Managers, in compliance with the act approved May 17th, 1894, and we beg leave to submit the following report as to their condition and management:

Asylums have been established in the counties of Atlantic, Burlington, Camden, Cumberland, Gloucester and Salem.

The total number under care in these institutions at the close of the year will be seen by the following table:

<i>Counties.</i>	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Atlantic .....	34	27	61
Burlington .....	58	83	141
Camden .....	85	94	179
Cumberland .....	63	60	123
Gloucester .....	8	6	14
Salem .....	10	8	18
Total .....	258	278	536

Number admitted, discharged and died during the year:

<i>Counties.</i>	—ADMITTED.—			—DISCHARGED.—			—DIED.—		
	<i>M.</i>	<i>W.</i>	<i>T.</i>	<i>M.</i>	<i>W.</i>	<i>T.</i>	<i>M.</i>	<i>W.</i>	<i>T.</i>
Atlantic .....	14	6	20	5	3	8	4	1	5
Burlington ....	67	96	*163	5	6	11	3	6	9
Camden .....	19	15	34	10	10	20	3	17	20
Cumberland ...	18	17	35	6	7	13	5	2	7
Gloucester .....	2	..	2	..	..	..	..	2	2
Salem .....	..	2	2	1	..	1	1	2	3
Total....	120	136	256	27	26	53	16	30	46

\* Includes transfers made from State Hospital of eighty-nine patients (forty men and forty-nine women), in May last, and those already under care in the almshouse.



FRONT ENTRANCE.



A very decided improvement is noticed in several of the counties in the arrangements made for the care and treatment of their insane patients. Until quite recently, in all of the counties of this Hospital district, except in Atlantic and Camden, the county asylum formed a part of the almshouse, the insane being cared for in a portion of the almshouse set apart for that purpose, and, in the main, looked after and cared for by the ordinary resident pauper. These places were designated as asylums, and received from the State treasury a weekly allowance of two dollars (\$2) per capita for their care and maintenance, and yet they were without any organization whatever, without ample medical supervision, without nurses or attendants in any way qualified to care for the insane, and with scarcely any condition or requirement found in any ordinary hospital intended for the care and treatment of those laboring under mental diseases. In all of the counties except two—Gloucester and Salem—this condition of things has been remedied. The counties of Atlantic, Burlington, Camden and Cumberland have, at an aggregate cost to the counties of upwards of three hundred thousand dollars, erected buildings especially designed for the care of the insane. These buildings are well constructed; have all of the modern appointments considered necessary in such hospitals; are apparently under the immediate supervision of intelligent Superintendents, who seem interested in their work; have a regular corps of attendants, and are visited, in each case, daily by competent physicians, who, in addition to their daily visitations, are subject to call at any time their services may be needed. We much regret that we have to report that we found the old methods still in existence in the counties of Gloucester and Salem. Apparently no effort has been made whatever in either of these counties to institute better methods, notwithstanding the fact that attention has repeatedly been called to these defects from time to time in our annual reports. So far as could be ascertained, the insane confined in these places are supplied with sufficient food and are kept warm during the cold weather of winter, but, beyond this, nothing whatever has been done for the care and treatment of the unfortunates confined there. They are under no systematic supervision, having no nurses or attendants except such as are furnished by the inmates of the almshouse, and apparently nothing is done except to provide for them a place to stay until death removes them.

In conclusion, we can only repeat the opinion expressed upon this subject in our former annual reports, "that in those counties that

have erected suitable buildings and provided them with modern appliances of a well-constructed and well-appointed hospital, the demands and intentions of the State in authorizing the several counties to organize asylums for the care and treatment of their insane have been fully met."

We cannot conceive, however, than an almshouse in which the insane and paupers commingle in common, and is entirely without any organization or any provision made for their special care, does, in any manner, fulfill the idea especially intended by the State in authorizing the establishment of county asylums.

GARRET D. W. VROOM,  
N. NEWLIN STOKES,  
HENRY R. BALDWIN,  
B. W. ANDREWS,  
C. S. HOFFMAN,  
JOSEPH RICE,  
JOHN TAYLOR,  
JOSEPH THOMPSON,

*Managers.*

Dated Trenton, N. J., November 7th, 1901.

---

---

REPORT OF THE WARDEN.

---

---

(18)

## WARDEN'S REPORT.

*To the Board of Managers of the New Jersey State Hospital at Trenton:*

GENTLEMEN—I beg leave to present herewith my annual report for the year ending October 31st, 1901, including therein a statement of the cash receipts and disbursements, the improvements and important repairs made, a list of the farm and garden products, with the market value thereof, and a memorandum of the work done in our flour mill, sewing-rooms and upholstery department. In addition I have given an estimate, as required by law, of the moneys required from the State for the year beginning November 1st, 1902.

The cash receipts and disbursements have been as follows:

### RECEIPTS AND DISBURSEMENTS.

Balance in hands of Treasurer November 1st, 1900..	\$12,194 16
Cash receipts from all sources.....	238,243 30
	<hr/>
Cash payments during the year.....	\$250,437 46
	232,527 93
	<hr/>
Balance cash October 31st, 1901.....	\$17,909 53

This balance is about sufficient to pay our present outstanding bills and pay-roll, and if some of the counties do not pay more promptly than recently, the institution will not be able to comply with the law, which requires all purchases for the use of the Hospital shall be made for cash and not on credit or time. In fact, the Treasurer had not, during a period in September, a sufficient amount of cash on hand to pay the outstanding accounts.

## INVENTORY.

The law governing the Hospital requires that annually during the third week in October, the Warden and two suitable persons appointed by the Managers shall make an annual appraisement of the personal property of the institution. This was done by Messrs. Horace G. Hough and Frank H. Wilson, who have performed the same duties very efficiently for the past three years, and the Warden desires to express his thanks to them for their services.

## APPRAISEMENT.

Buildings, grounds, &c., valued at.....	\$770,000 00
Personal property, appraised as per inventory.....	159,523 32

## FARM AND GARDEN, &amp;C.

In the appendix to this report is given a statement in detail of the results of the farm, dairy, flour mill, garden, upholsterers' department and the sewing-rooms; also the amounts of fruits and vegetables canned and preserved. The results have been satisfactory when we take into consideration the weather during the season. Our reports show three thousand five hundred bushels of potatoes, eight hundred bushels of corn, eighty-five tons of hay, four hundred tons ensilage, &c., from the farm, and the results from the garden were equally good. The dairy continues in excellent condition, and results from same are very satisfactory. At the cow barn, all the old stalls have been torn out and replaced with new ones. The stalls formerly were very inconvenient, taking up a large amount of unnecessary space without corresponding advantages, and obstructing the light, making the entire interior very dark. We have reduced the size of the partitions between each stall and shaped same so that all the cows can be reached from the center passageway, making the feeding of same more convenient, and giving the animals more light and air, and adding four extra stalls to the original number.

## ELECTRIC LIGHTING.

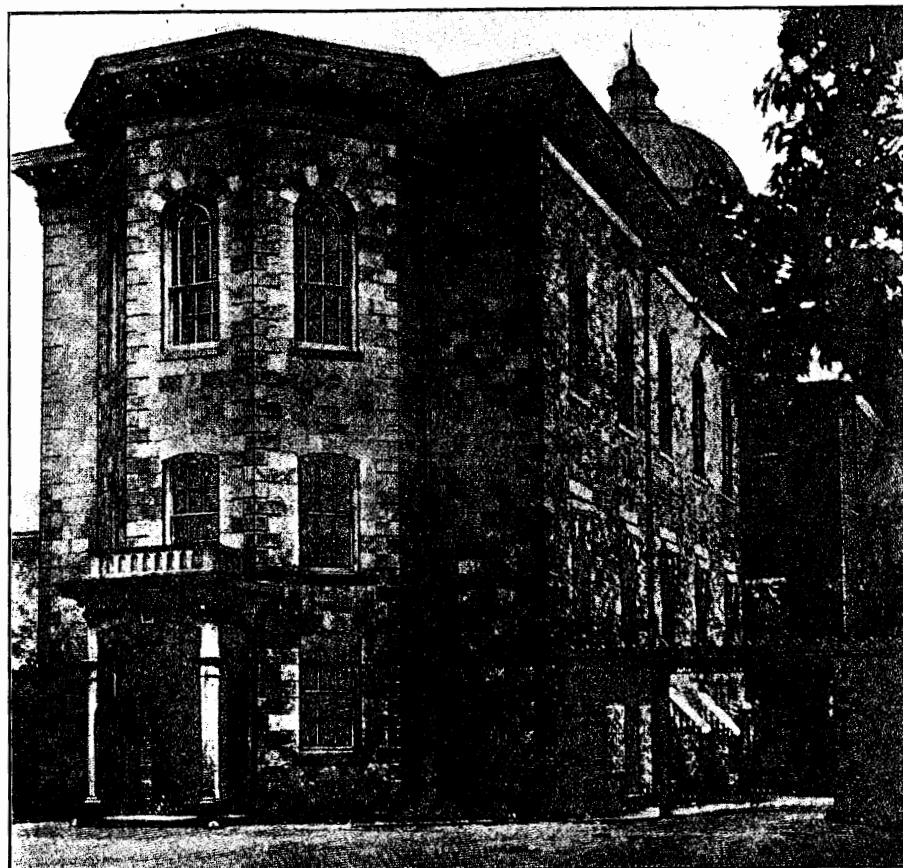
In my report for last year I mentioned that arrangements had been entered into for the lighting of the grounds and buildings with electricity. This work has been completed, and we have had the electric lighting in operation for the past six months, and the improvement in the illumination of the institution is very noticeable. There are ten arc lights in the grounds and over sixteen hundred incandescent lamps in the buildings. The cost of wiring the entire plant was a trifle over \$15,000.

The old system of lighting with gasoline gas had become very unsatisfactory, from the fact that the plant was entirely too small for the needs of the institution. The gas machine, having been installed while the Hospital was not as large as at present, was inadequate for the demands made upon it, and, for the same reason, the entire piping was not large enough to carry the proper amount of gas.

## GENERAL REPAIRS AND IMPROVEMENTS.

There has been added a new catch basin for the waste from the bakery, made in three compartments, similar to all the catch basins in our sewerage system, and will no doubt catch the small particles of dough from the bakery, which prove a great nuisance.

The floorings of the hog-pens have been renewed, and new troughs, lined with galvanized iron, have been placed the entire length. The building is divided into eight pens, each twenty by twenty-eight feet. The flooring in the bakery, having been in use for over thirty years, was entirely renewed with cone-grained, yellow pine flooring, the same material that is used on our halls. This quality of lumber is rather higher priced than the ordinary flooring, but, when considering wearing qualities of same, it is more economical. The plastering at the intersection of the side walls with the ceiling, on the east side of the Annex, had cracked and separated by the gradual settling of the building, and to remedy same we have placed mouldings around the three halls, three alcoves and twelve dormitories on that end of the building, requiring thirty-two hundred feet of moulding, which, in addition to being an improvement, adds to the appearance of the halls and rooms. The penstock of the water-supply to our flour mill



EAST ENTRANCE.

has been completely renewed, the stone walls around same were increased to two feet in thickness and the complete structure made much stronger than formerly. This was very necessary, as the same was leaking badly, and, being less than four feet from the tracks of the Pennsylvania railroad, would have caused considerable damage if same should have given way.

The usual necessary repairing has been done during the year, including the building of one thousand feet of new fencing, to replace the old, over three hundred feet boardwalk, painting hall, one Annex, east, with adjoining dormitory rooms, &c.

#### RECOMMENDATIONS.

I again desire to call attention to our capacity for the storage of coal during the winter months. As situated at present, we have not sufficient capacity to store one month's supply during the cold weather, and we have, for the past two years, been compelled to unload and carry over two hundred tons of coal on the grounds outside of our buildings. If our storage capacity were increased sufficiently to store the winter supply, we would be enabled to procure a much cleaner, and therefore superior, quality, and would save the extra labor of unloading during the freezing weather.

#### REQUIREMENTS.

Herewith is given, as required by law, an approximate and detailed estimate of the several amounts required from the State for the support and maintenance of the Hospital for the year ending October 31st, 1903:

#### ESTIMATES.

For the annual inventory.....	\$75 00
For the support and clothing of insane convicts.....	10,000 00
For the support of State indigent patients.....	11,000 00
For the salaries of resident officers.....	12,000 00
For allowance of \$1 per week for each county patient..	50,000 00

These amounts are the same in each item as appropriated by the last session of the Legislature, with the exception of that for "the support and clothing of insane convicts," which is increased only \$1,000, and the amount will be inadequate if the number of patients be increased by two only over the present number. During the past year our appropriation for this class of patients has fallen short \$635.

In many cases of commitment of patients we are compelled to wait a considerable time for the final papers, and thus ascertain to what class the patient committed belongs. This occurred during the last year, and several cases who were supposed to be county patients were properly classed as State patients after the close of the State financial year, and the appropriation for that class having been exhausted, we are without the amount for their maintenance to the beginning of the present year. This amount is \$1,358.64, and should be included in a deficiency bill with the other shortages at the coming session of the Legislature.

Chapter 130, Laws of New Jersey, session of 1898, part of section 5, reads as follows: "If such judge or justice shall find the person, concerning whom such inquiry is made, to be insane, but not indigent, then he shall so certify, and shall likewise file said proceedings had before him with the clerk of said county, and the said clerk shall forthwith forward to the medical director of the hospital where such insane person is confined, a like certified copy of said proceedings and certificate, and the county from whence his admission is requested shall not be chargeable with his support, but his estate, or the person chargeable by law with his support shall maintain him in said hospital, and if his support cannot be procured in that way, then a like certified copy of said proceedings and certificate shall be sent by said county clerk to the state treasurer, and the state shall support him in such hospital." We have had several patients committed under this act, and are unable to collect for same from their estate or relatives, and as there is no State appropriation for this class of patients, we have been unable to collect from the State Treasurer.

The amount due at this time is \$882.52, and this amount should also be included in the deficiency bill of the Legislature.

## NEW JERSEY STATE HOSPITAL.

## SUMMARY OF DEFICIENCIES.

For support and clothing of insane convicts to 1901....	\$1,925 68
For support and clothing of insane convicts during 1901,	635 00
For support of State indigent patients to 1901.....	3,664 53
For support of State indigent patients as above.....	1,358 64
For support of patients as above.....	882 52
Total deficiencies to this date.....	\$8,466 37

These amounts have been earned by the Hospital and should be provided for by this year's Legislature.

To the Medical Director and his assistants I desire to acknowledge the courtesies shown during the past year, and in conclusion permit me to again express my thanks to the several members of the Board of Managers for the support and consideration shown me during the year.

Respectfully submitted,  
WILLIAM P. HAYES,  
Warden.

## ABSTRACT OF RECEIPTS AND DISBURSEMENTS.

For the Year Ending October 31st, 1901.

## RECEIPTS.

Balance in hands of Treasurer October 31st 1900.....	\$12,194 16
State Treasurer, for county patients.....	\$47,639 13
State Treasurer, for convict patients.....	8,000 00
State Treasurer, for State patients.....	11,357 99
Burlington county.....	7,570 03
Cape May county.....	2,677 38
Cumberland county.....	302 65
Gloucester county.....	7,171 73
Hunterdon county.....	6,057 91
Mercer county.....	47,367 47
Middlesex county.....	31,515 08
Monmouth county.....	11,131 19
Ocean county.....	7,332 69
Salem county.....	7,786 66
Somerset county.....	10,277 30
Private patients.....	27,578 01
Sundries .....	4,478 08
	<hr/>
	238,243 30
	<hr/>
	\$250,437 46

## DISBURSEMENTS.

Amusements .....	\$723 00
Books and stationery.....	504 60
Bedding, linen, &c.....	3,120 82
Clothing .....	6,859 83
Crockery and cutlery.....	733 66
Counsel fees.....	40 95
Electric lighting system.....	4,211 83
Farm and garden.....	6,291 61
Fixtures .....	946 74
Flour .....	1,155 90
Feed. ....	2,208 66
Fencing .....	142 56
Fruit .....	7,473 29
Freight .....	241 01
Furniture .....	2,861 08
Fuel .....	19,399 08
Funeral expenses.....	337 00

Fire apparatus .....	\$315 44
Gas and steam pipes, &c.....	714 56
Grounds and gradings.....	1,628 78
Hay and straw.....	414 55
Harness, wagons, &c.....	385 40
Household goods.....	2,479 48
Ice and cold storage.....	778 31
Improvements of buildings.....	395 84
Insurance .....	646 00
Incidentals .....	959 16
Laundry .....	6,570 58
Light .....	5,036 43
Medical supplies.....	5,688 72
Newspapers .....	271 61
New buildings.....	1,238 17
Provisions and groceries.....	81,757 12
Postage .....	284 13
Refunding .....	749 45
Repairs .....	9,043 39
Smith and wheelwright.....	489 92
Stock .....	3,029 80
Traveling expenses.....	56 80
Tinware and fixtures.....	299 62
Tools and supplies, boiler-house and machine shop..	770 62
Telegrams, telephone rentals, &c.....	625 31
Vegetables .....	1,236 29
Wages .....	46,084 45
Wheat .....	3,326 38

232,527 93

Balance in hands of Treasurer October 31st, 1901..... \$17,909 53

## APPENDIX TO WARDEN'S REPORT.

## Farm and Garden Products.

FARM AND GARDEN.			
800 Bushels corn .....	@ \$0 60	\$480 00	
3,500 Bushels potatoes .....	75	2,625 00	
860 Bushels wheat .....	65	559 00	
3,000 Bundles cornstalks.....	03	90 00	
400 Tons ensilage .....	3 50	1,400 00	
85 Tons hay .....	15 00	1,275 00	
30 Tons wheat straw .....	9 00	270 00	
135,583 Quarts milk .....	04½	6,101 24	
			\$12,800 24

## STOCK.

Cows slaughtered (16,990 lbs.).....@ \$0 67 61/100	\$1,270 11	
Calves sold.....	21 00	
Hides and tallow.....	991 42	
Hogs sold.....	2,126 45	
	<hr/>	4,408 98

## GARDEN.

758 Bunches asparagus .....	@ \$0 10	\$75 80
6,889 Bunches onions .....	02	137 78
807 Bunches parsley .....	04	32 28
4,329 Bunches radishes .....	02	86 58
707 Bunches rhubarb .....	06	42 42
300 Bunches herbs .....	10	30 00
1,200 Bunches leeks .....	03	36 00
900 Bundles cornstalks.....	03	27 00
53 Bushels apples .....	60	31 80
287 Bushels beets .....	45	129 15
132 Bushels string beans.....	60	79 20
50¼ Bushels lima beans.....	1 00	50 25
40 Bushels carrots .....	50	20 00
33 Bushels cucumbers .....	60	19 80
25¼ Bushels grapes .....	1 50	37 88
92¼ Bushels peas .....	1 50	138 38
30½ Bushels onions .....	60	18 30
2¼ Bushels okra .....	75	1 68
33 Bushels peppers .....	35	11 55



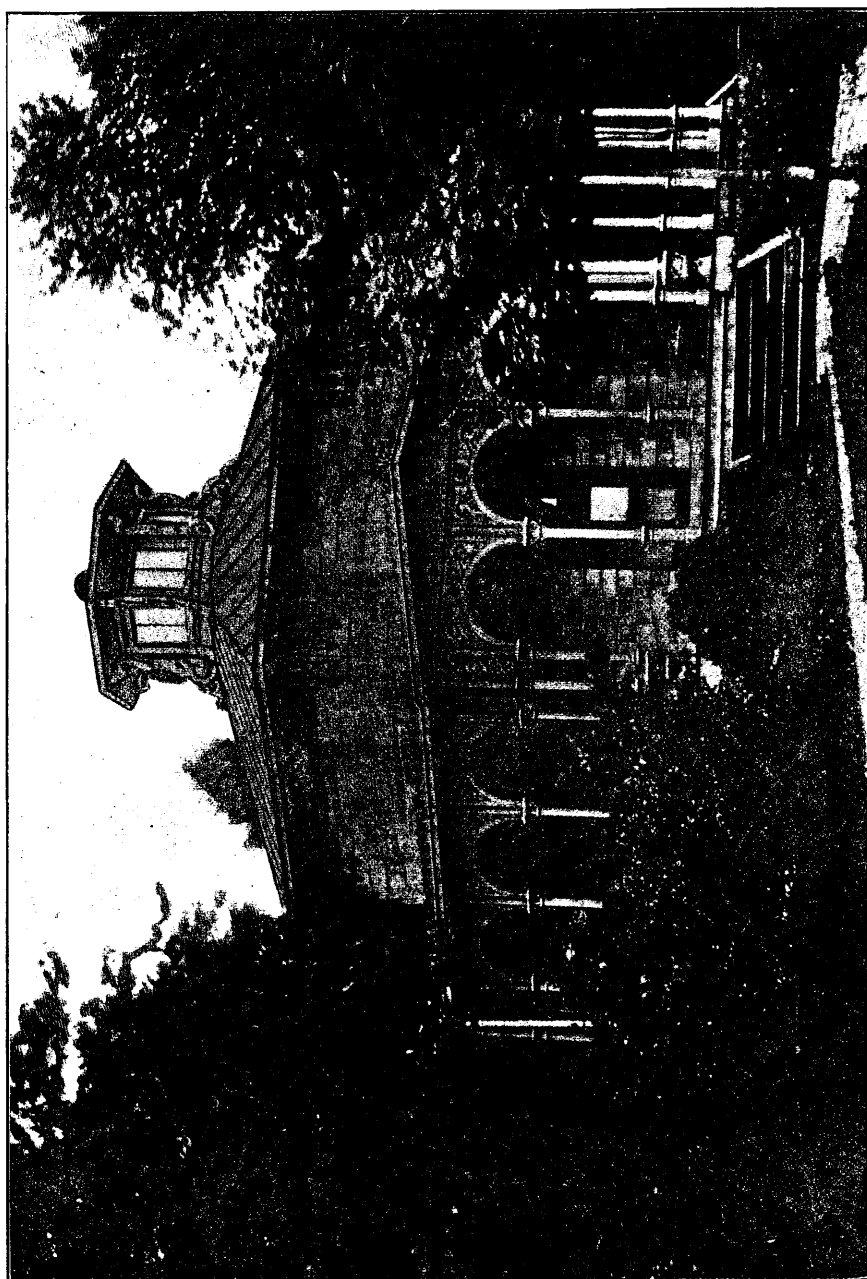
95½ Bushels spinach .....	@ \$0 50	\$47 75
25 Bushels squashes .....	45	11 25
664 Bushels tomatoes .....	65	431 60
35½ Bushels green tomatoes.....	65	23 08
12 Bushels egg plants.....	60	7 20
20 Bushels onion sets.....	3 00	60 00
170 Bushels turnips .....	40	68 00
50 Bushels rutabaga turnips.....	40	20 00
350 Bushels parsnips .....	50	175 00
50 Pumpkins .....	05	2 50
35,935 Ears corn.....	01	359 35
2,523 Heads cabbage (early) .....	04	100 92
7,000 Heads cabbage (late) .....	04	280 00
220 Heads cauliflower .....	06	13 20
4,397 Heads lettuce .....	02	87 94
517 Heads endive .....	05	25 85
18,000 Heads celery .....	03	540 00
1,000 Heads celeriac .....	03	30 00
500 Pounds horseradish .....	07	35 00
		<hr/> 3,324 49
		<hr/> \$20,533 71

## Work Done at the Mill.

Corn meal, ground.....	38,500 pounds.
Cracked corn.....	47,500 pounds.
Flour, ground .....	289,200 pounds.
Hog feed.....	21,500 pounds.
Bran .....	72,350 pounds.

## Fruits Canned and Preserved.

Apple jelly.....	59 quarts.
Blackberries .....	230 quarts.
Blackberry jam.....	80 quarts.
Blackberry jelly.....	42 quarts.
Cherries .....	338 quarts.
Cherry jelly.....	135 quarts.
Cherry preserves.....	53 quarts.
Crab apple jelly.....	16 quarts.
Crab apple preserves.....	24 quarts.
Currant jelly.....	167 quarts.
Grape jelly.....	52 quarts.
Grape marmalade.....	144 quarts.
Green gages.....	95 quarts.
Huckleberry preserves.....	74 quarts.
Peaches .....	7,256 quarts.
Peach butter.....	984 quarts.
Peach jam.....	908 quarts.
Peach marmalade.....	356 quarts.
Peach jelly .....	14 quarts.
Peaches, spiced .....	80 quarts.
Peach preserves.....	435 quarts.



MUSEUM.

# NEW JERSEY STATE HOSPITAL.

25

Pears .....	838 quarts.
Pears, spiced .....	500 quarts.
Pineapples .....	50 quarts.
Pineapple preserves.....	52 quarts.
Plums .....	70 quarts.
Quince jelly.....	33 quarts.
Quince marmalade.....	24 quarts.
Quince preserves.....	195 quarts.
Raspberry jelly.....	6 quarts.
Strawberries .....	474 quarts.
Strawberry jelly.....	19 quarts.
Gooseberry jam.....	27 quarts.
Tomato preserves.....	18 quarts.
Tomatoes .....	1.445 gallons.

## Work Done in the Mattress-Room.

Single mattresses made, new.....	74
Single mattresses made over.....	144
Three-quarter mattresses made, new.....	3
Single mattress ticks made, new.....	278
Three-quarter mattress ticks made, new.....	10
Hair pillows made, new.....	60
Feather pillows made, new.....	25
Hair pillows made over.....	70
Feather pillows made over.....	15
Pillow ticks made, new.....	145
Sofa pillows made, new.....	15
Chair cushions made, new.....	30
Chair cushions re-covered.....	25
Pieces of furniture upholstered.....	17
Large hall carpets made, new.....	5
Large hall carpets repaired.....	8
Room carpets made, new.....	40
Room carpets repaired.....	80
Carpets taken up.....	291
Carpets laid .....	295
Tables covered .....	15
Rooms laid with new matting.....	none
Rooms laid with old matting.....	8
Art squares .....	10
Rugs made .....	70
Yards carpet hemmed.....	395
Awnings made, new.....	2
Awnings hung .....	19
Window shades made, new.....	137
Window shades repaired.....	121
Feather bolsters made, new.....	6
Lace curtains hung.....	38
Yards oil-cloth and linoleum laid, new.....	188
Yards oil-cloth and linoleum laid, old.....	150
Stools covered .....	67
Cuspidor mats made, new.....	60

Shoe boxes covered.....	2
Head rests re-covered.....	7
Double mattresses, new.....	2
Double mattress made over.....	1
Double mattress ticks, new.....	3
Three-quarter mattresses made over.....	4

### Report from Sewing-Room.

Petticoats .....	336
Pillow slips .....	2,005
Ladies' aprons .....	538
Chemises .....	541
Sheets .....	1,806
Gents' undervests .....	414
Ladies' undervests .....	609
Pairs stockings .....	10
Gents' shirts .....	877
Ladies' drawers .....	162
Window curtains .....	18
Burial drawers .....	60
Camisoles .....	36
Towels .....	2,907
Pairs wristlets .....	17
Holders .....	72
Dresses .....	765
Pairs bakers' gloves.....	48
Clothes bags .....	26
Gent's vest .....	1
Burial robes .....	27
Burial chemises .....	24
Table cloths .....	128
Men's drawers .....	243
Men's aprons .....	279
Sets bed ties.....	43
Bolster cases .....	79
Hemmed blankets .....	346
Dress waists .....	5
Oil-cloth collars .....	12
Trimmed hats .....	33
Linen muffs .....	12
Attendants' caps .....	154
Jelly bags .....	6
Bibs .....	148
Ladies' nightgowns .....	47
Burial skirts .....	24
Dress skirts .....	11

---



---

## MEDICAL DIRECTOR'S REPORT.

---



---

(27)

New Jersey State Library

## MEDICAL DIRECTOR'S REPORT.

*To the Managers of the New Jersey State Hospital at Trenton:*

GENTLEMEN—The fifty-fourth annual report of the operations of the Medical Department of the New Jersey State Hospital at Trenton for the year ending October 31st, 1901, is respectfully submitted.

	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Patients in the Hospital October 31st, 1901.....	552	565	1,117
Received since, to November 1st, 1901.....	128	126	254
Under treatment during the year.....	680	691	1,371
Discharged recovered during the year.....	45	49	94
Discharged improved during the year.....	12	11	23
Discharged unimproved during the year.....	5	4	9
Died .....	40	51	91
Escaped .....	1	...	1
Removed to other institutions.....	40	49	89
Total discharged, died, &c., during the year...	143	164	307
Remaining October 31st, 1901.....	537	527	1,064
Whole number of cases received and treated from the opening of the institution, May 15th, 1848, to November 1st, 1901.....			
	5,088	5,026	10,114
Discharged recovered .....	1,682	1,762	3,444
Discharged improved .....	927	1,056	1,983
Discharged unimproved .....	175	183	358
Escaped .....	23	5	28
Not insane .....	19	11	30
Died .....	1,403	1,163	2,566
Removed to other institutions.....	322	319	641
Total discharged, died, &c.....	4,551	4,499	9,050
Remaining October 31st, 1901.....	537	527	1,064

## RESIDENCE OF THOSE COMMITTED DURING THE YEAR AND HOW COMMITTED.

Counties.	—INDIGENT.—			—PRIVATE.—			CRIMINAL.		CONVICT.	
	M.	W.	T.	M.	W.	T.	M.	W.	M.	W.
Atlantic .....	..	1	1	1	1	2	..	..	1	..
Bergen .....	..	..	..	1	..	1	..	..	..	..
Burlington ...	8	6	14	..	3	3	..	..	..	..
Camden .....	9	7	16	1	..	1	..	..	1	..
Cape May....	4	4	8	..	2	2	..	..	..	..
Gloucester ...	2	7	9	1	..	1	..	..	..	..
Essex .....	..	..	..	1	..	1	..	..	..	..
Hunterdon ..	4	15	19	1	..	1	..	..	..	..
Mercer .....	24	22	46	4	3	7	..	..	1	..
Middlesex ...	21	16	37	3	2	5	..	..	..	..
Monmouth ...	13	16	29	4	1	5	..	..	..	..
Ocean .....	2	6	8	2	..	2	..	..	..	..
Salem .....	5	3	8	..	1	1	..	..	1	..
Somerset .....	9	5	14	..	3	3	1	..	..	..
Union .....	..	..	..	1	2	3	..	..	..	..
Total...	101	108	209	20	18	38	3	..	4	..

Admitted during the month of—	Men.	Women.	Total.
November, 1900.....	7	7	14
December .....	4	6	10
January, 1901.....	15	12	27
February .....	7	3	10
March .....	9	14	23
April .....	13	15	28
May .....	13	16	29
June .....	19	14	33
July .....	8	10	18
August .....	10	7	17
September .....	11	7	18
October .....	12	15	27
Total.....	128	126	254

## PATIENTS REMAINING IN THE HOSPITAL OCTOBER 31st, 1901, AND THE COUNTIES FROM WHENCE SENT.

Counties.	Men.	Women.	Total.
Atlantic .....	6	4	10
Bergen .....	1	1	2
Burlington .....	6	2	8
Camden .....	24	18	42
Cape May .....	10	19	29
Cumberland .....	1	1	2
Essex .....	2	3	5
Gloucester .....	22	33	55

Counties.	Men.	Women.	Total.
Hudson .....	3	2	5
Hunterdon .....	12	34	46
Mercer .....	133	112	245
Middlesex .....	119	108	227
Monmouth .....	64	89	153
Morris .....	..	1	1
Ocean .....	27	24	51
Somerset .....	53	40	93
Union .....	1	4	5
New Jersey .....	31	3	34
New York .....	..	1	1
Pennsylvania .....	..	1	1
Total .....	537	527	1,064

## GENERAL RESULTS.

The number of patients at the close of the last fiscal year was eleven hundred and seventeen—five hundred and fifty-two men and five hundred and sixty-five women. The number received since, viz., from November 1st, 1900, to October 31st, 1901, inclusive, was two hundred and fifty-four—one hundred and twenty-eight men and one hundred and twenty-six women; making a total of thirteen hundred and seventy-one—six hundred and eighty men and six hundred and ninety-one women—under care during the year. Of this number, three hundred and seven—one hundred and forty-three men and one hundred and sixty-four women—have been discharged, as follows: Recovered, ninety-four; improved, twenty-three; unimproved, nine; escaped, one; ninety-one have died and eighty-nine have been removed to other institutions.

At the close of the year there remained under care ten hundred and sixty-four patients—five hundred and thirty-seven men and five hundred and twenty-seven women. We close the year with fifty-three less patients in the institution than we had under care at the close of the last fiscal year. This is chiefly due to the fact that a large proportion of the number discharged has been transferred to other institutions, principally to the new asylum in the county of Burlington. The largest number under care in the Hospital at any one time during the year was eleven hundred and twenty-six—five hundred and forty-six men and five hundred and eighty women; the smallest number, two hundred and twenty-nine—five hundred and nine men and five hundred and twenty women. The daily average

for the year was, for men, about five hundred and thirty-three, and for women, five hundred and forty-six; the general average was a little more than ten hundred and seventy-nine.

Death resulted in ninety-one cases—forty men and fifty-one women. The death rate, in proportion to the whole number under care, was a little more than six and one-half per centum. The number of recoveries during the year was a little more than thirty-seven per centum of the whole number of admissions. This result is a little more than the average during the last decade.

## CAUSES OF DEATH.

	Men.	Women.	Total.
Pulmonary consumption .....	8	9	17
General paresis .....	6	1	7
Paralysis .....	4	5	9
Apoplexy .....	3	2	5
Epilepsy .....	6	8	14
Typhomania .....	3	4	7
Old age .....	3	6	9
Bright's disease of the kidneys .....	2	1	3
Pneumonia .....	1	2	3
Organic disease of the heart .....	1	3	4
Typhlitis .....	..	2	2
Senile gangrene .....	..	2	2
Progressive locomotor ataxia .....	2	..	2
Syphilis .....	..	1	1
Arterial sclerosis .....	1	1	2
Heat exhaustion .....	..	1	1
Abscess of brain .....	..	2	2
Chronic diarrhœa .....	..	1	1
Total .....	40	51	91

Deaths in—	Men.	Women.	Total.
November, 1900 .....	5	2	7
December .....	4	2	6
January, 1901 .....	1	4	5
February .....	5	10	15
March .....	3	2	5
April .....	4	4	8
May .....	2	4	6
June .....	5	5	10
July .....	4	5	9
August .....	1	4	5
September .....	3	5	8
October .....	3	4	7
Total .....	40	51	91

## AGES OF THOSE WHO HAVE DIED DURING THE YEAR AND THE LENGTH OF TIME UNDER CARE IN THE HOSPITAL.

Age.	M.	W.	T.	Length of Time.	M.	W.	T.
Under twenty years.....	..	..	..	Less than one week.....	3	4	7
Twenty to twenty-five....	1	..	1	One to two weeks.....	2	1	3
Twenty-five to thirty....	4	2	6	Two weeks to one month,	1	2	3
Thirty to thirty-five.....	2	4	6	One to three months....	3	7	10
Thirty-five to forty.....	2	5	7	Three to six months....	1	5	6
Forty to forty-five.....	4	7	11	Six to nine months.....	4	3	7
Forty-five to fifty.....	2	3	5	Nine months to one year,	..	2	2
Fifty to fifty-five.....	8	4	12	One to two years.....	4	4	8
Fifty-five to sixty.....	3	2	5	Two to three years.....	2	2	4
Sixty to sixty-five.....	4	4	8	Three to four years.....	3	2	5
Sixty-five to seventy....	2	4	6	Four to five years.....	4	4	8
Seventy to seventy-five..	6	7	13	Five to ten years.....	4	5	9
Seventy-five to eighty...	2	5	7	Ten to fifteen years....	4	3	7
Over eighty years.....	..	4	4	Fifteen to twenty years..	1	4	5
				Twenty to thirty years..	4	..	4
				Over thirty years.....	..	3	3
Total.....	40	51	91	Total.....	40	51	91

## AGES OF THOSE DISCHARGED AS RECOVERED AND LENGTH OF TIME UNDER CARE IN THE HOSPITAL.

Age.	M.	W.	T.	Length of Time.	M.	W.	T.
Under twenty years.....	2	9	11	Less than three months..	8	11	19
Twenty to thirty years..	9	12	21	Three to six months....	12	15	27
Thirty to forty years....	15	10	25	Six to nine months.....	4	4	8
Forty to fifty years.....	11	7	18	Nine months to one year,	7	8	15
Fifty to sixty years.....	6	10	16	One to two years.....	6	7	13
Sixty to seventy years...	2	1	3	Two to three years.....	5	2	7
				Three to four years.....	2	1	3
				Four to five years.....	1	1	2
Total.....	45	49	94	Total.....	45	49	94

## AGES OF THOSE ADMITTED DURING THE YEAR AND DURATION OF INSANITY PRIOR TO ADMISSION.

Age.	M.	W.	T.	Duration of Insanity.	M.	W.	T.
Under twenty years.....	9	3	12	Less than one week.....	12	4	16
Twenty to twenty-five....	12	8	20	One week to one month..	29	11	40
Twenty-five to thirty....	15	19	34	One to three months....	25	13	38
Thirty to thirty-five.....	13	10	23	Three to six months.....	12	21	33
Thirty-five to forty.....	17	15	32	Six to nine months.....	5	10	15
Forty to forty-five.....	11	15	26	Nine months to one year,	12	16	28
Forty-five to fifty.....	10	12	22	One to two years.....	14	13	27
Fifty to fifty-five.....	9	14	23	Two to three years.....	2	16	18

Age.	M. W. T.			Duration of Insanity.	M. W. T.		
Fifty-five to sixty.....	7	4	11	Three to four years.....	3	6	9
Sixty to sixty-five.....	8	6	14	Four to five years.....	2	5	7
Sixty-five to seventy....	4	5	9	Five to ten years.....	3	7	10
Seventy to seventy-five..	5	4	9	Ten to fifteen years.....	1	1	2
Seventy-five to eighty...	4	5	9	Fifteen to twenty years..	6	..	6
Over eighty years.....	3	4	7	Over twenty years.....	..	1	1
Unknown .....	1	2	3	Unknown .....	2	2	4
Total.....	128	126	254	Total.....	128	126	254

## FORM OF MENTAL DERANGEMENT.

	Men.	Women.	Total.
Mania, acute.....	22	18	40
Mania, chronic.....	14	15	29
Mania, recurrent.....	7	6	13
Mania, puerperal.....	..	4	4
Dementia, acute.....	9	6	15
Dementia, chronic.....	11	13	24
Dementia, senile.....	13	16	29
Melancholia, acute.....	12	17	29
Melancholia, chronic.....	10	15	25
General paresis.....	7	..	7
Epilepsy .....	8	5	13
Congenital .....	4	5	9
Alcoholism .....	7	4	11
Opium habit.....	3	2	5
Post-febrile insanity .....	1	..	1
Total .....	128	126	254

## ALLEGED CAUSES OF INSANITY.

	Men.	Women.	Total.
General ill-health .....	12	15	27
Domestic affliction—loss of friends.....	2	8	10
Domestic trouble .....	2	10	12
Business troubles—loss of property, &c.....	7	5	12
Loss of sleep, overwork, &c.....	6	4	10
Puerperal state .....	..	6	6
Old age .....	11	10	23
Epilepsy .....	7	8	15
Vicious habits and indulgences.....	18	..	18
Specific disease .....	6	3	9
Intemperance in the use of alcohol.....	13	6	19
Sunstroke—heat exhaustion .....	4	2	6
Injury to head.....	9	2	11
Congenital .....	4	1	5
Disappointed affections .....	1	1	2
Menopause .....	..	6	6

	Men.	Women.	Total.
Menstrual trouble .....	..	8	8
La grippe .....	1	..	1
Opium habit .....	3	2	5
Overstudy .....	1	3	4
Unknown .....	21	24	45
Total.....	128	126	254

## NATIVITY OF PATIENTS ADMITTED.

	Men.	Women.	Total.
New Jersey .....	78	72	150
New York .....	6	8	14
Pennsylvania .....	8	8	16
Connecticut .....	1	..	1
Massachusetts .....	1	..	1
Maine .....	1	..	1
Maryland .....	1	..	1
Delaware .....	..	1	1
North Carolina .....	1	..	1
Virginia .....	2	4	6
Illinois .....	..	1	1
England .....	2	3	5
Ireland .....	11	11	22
Germany .....	5	6	11
Norway .....	1	..	1
Sweden .....	2	..	2
Denmark .....	1	3	4
Austria .....	1	1	2
Hungary .....	2	1	3
Russia .....	1	2	3
Switzerland .....	1	1	2
Italy .....	1	..	1
Scotland .....	..	1	1
Poland .....	..	1	1
Unknown .....	1	2	3
Total.....	128	126	254

## HEREDITY.

In eighty-four cases—forty men and forty-four women—of those admitted during the year there was acknowledged hereditary predisposition to insanity. In forty-three cases—twenty-two men and twenty-one women—the hereditary taint was in the paternal; in thirty-five cases—fifteen men and twenty women—in the maternal, and in six cases—three men and three women—in both the paternal and

maternal lines. In one hundred and seventeen cases—fifty-six men and sixty-one women—hereditary predisposition was denied as existing, and in fifty-three cases—thirty-two men and twenty-one women—the history of the family of the patient was unknown or could not be ascertained.

#### SUICIDAL TENDENCY.

In twenty-four cases—fifteen men and nine women—there existed a decided suicidal tendency, and in thirty-four cases—sixteen men and eighteen women—suicide was threatened, but no actual attempt was made at self injury.

#### HOMICIDAL TENDENCY.

In thirty cases—twenty-one men and nine women—there existed a decided homicidal tendency, and in forty-two cases—twenty-three men and nineteen women—homicide was threatened.

#### INTEMPERANCE IN THE USE OF ALCOHOL.

In forty-six cases—thirty-three men and thirteen women—there was acknowledged intemperance in the use of alcohol, and in seven cases—three men and four women—the opium or cocaine habit existed.

#### INTEMPERANCE IN PARENTS.

In eighteen cases—ten men and eight women—the father of the patient was intemperate in the use of alcohol, and in one case—woman—the mother was intemperate.

#### CIVIL CONDITION.

Of the two hundred and fifty-four cases admitted during the year, one hundred and fifteen—sixty-one men and fifty-four women—were married, and ninety-four—fifty-five men and forty women—were

single. Eight were widowers, twenty-four were widows, six were divorced, and in six cases the civil condition was unknown or unascertained.

We have passed through the year with but very little acute disease of a serious nature and none whatever of an epidemic character. In the main the health of the household has been good and remains so at the close of the year.

Your attention is especially called to the report of the Special Pathologist. Much work has been done in the laboratory of a clinical nature, examinations of the blood, urine, &c., have been frequently made, and autopsies performed in all cases in which permission could be obtained to make them. A few more autopsies have been made than during the preceding year, but, as truthfully stated by the Pathologist, "the number is very small in proportion to the deaths occurring annually in an institution of this size. It is earnestly hoped that we may be able to do more work in this direction during the coming year.

In conclusion, I would respectfully call attention to the fact that we are yet without an infirmary, and consequently have no proper facilities whereby we can isolate cases of contagious disease should they occur.

The convict insane still continue to be sent, from time to time, to the institution, and we are compelled to care for them on the ordinary corridors of the Hospital instead of having some separate provision made for their custody and care. The argument formerly urged, that the State was not warranted in incurring the expense of erecting a separate building for the care of this class on account of their small numbers, no longer obtains. There are at present under care in the two State institutions considerably over one hundred of the convict insane, and the number is steadily increasing.

The epileptic class, also, is still with us, and from present prospects is likely to remain with us for some time to come. The great injustice of this, both to the ordinary insane as well as to the epileptic himself, has been frequently pointed out, and a feeble effort has been made to, in part, remedy it by the establishing of the State Village for Epileptics at Skillman. The Managers of that institution, however, find themselves unable to relieve us because of scarcity of funds with which to erect suitable buildings for their proper care and treatment. Attention has frequently been called to the various subjects in



our former annual reports, and the matter discussed fully and in detail, but thus far nothing has resulted favorably toward making the desirable changes.

Respectfully submitted,

JOHN W. WARD.

NEW JERSEY STATE HOSPITAL,  
TRENTON, November 1st, 1901.

## REPORT OF THE SPECIAL PATHOLOGIST.

---

*John W. Ward, M.D., Medical Director:*

SIR—I herewith submit my report of work done at the laboratory during the year ending November 1st, 1901.

The laboratory has been conducted upon the same general plan as was indicated in my report of last year. A number of clinical examinations of urine, blood, sputum, &c., have been made. and fourteen autopsies have been performed. While more than last year, this is still a small number in proportion to the deaths occurring annually in an institution of this size. The complaint that autopsies cannot be secured in many interesting cases is still justified, and this fact stands as a bar to the accomplishment of satisfactory work in this laboratory.

Of the autopsies performed, eleven were complete; in two the spinal cord was not removed, and in one, permission to open the thoracic and abdominal cavities was all that could be obtained. Sections from the more important organs were prepared and examined microscopically in all cases.

The following is a summary of the results of these examinations:

Case No. 11.—Male. White. Age, forty years. In Hospital four months. Mental disease, epilepsy. Died hemiplegic, after convulsions, under symptoms of exhaustion. Examination showed chronic meningo-encephalitis, shrinking of the convolutions, thickening and adherence to the pia-arachnoid, with round cell deposit in the perivascular spaces, slight degeneration in the columns of Goll of the spinal cord; otherwise nothing abnormal in cord or brain axis. Tubercles in upper portion of lungs. Chronic gastritis; congestion of liver; slight interstitial nephritis. Cause of death, exhaustion from general paralysis.

Case No. 12.—Female. Colored. Age, seventy-six years. In Hospital four months. Mental disease, senile dementia. Death under symptoms of exhaustion. Examination showed chronic pachy-meningitis and lepto-meningitis. Pigmentary degeneration of nerve cells of the cortex, a tumor occupying the left anterior horn and antero-lateral ascending tract of the spinal cord in the middle cervical region (histologically a tubercle). The cells of the an-

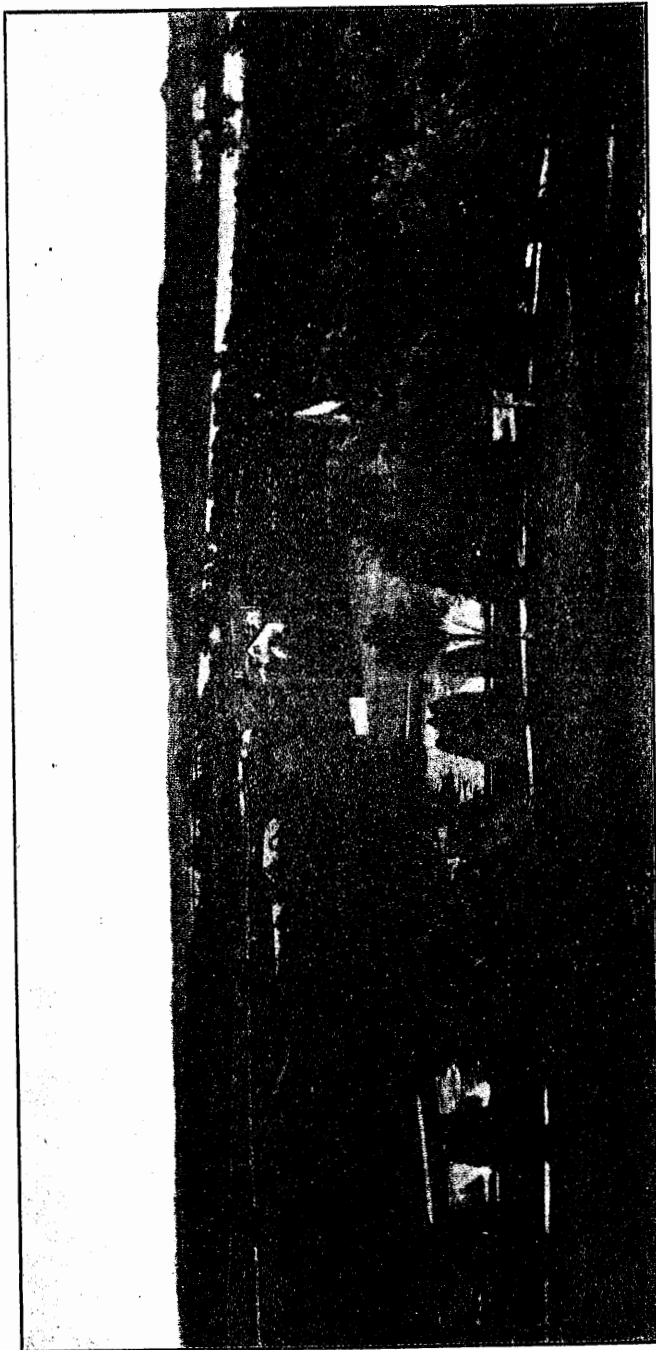
terior horn contain much pigment and stain badly. Emphysema (senile) of the lungs, and chronic broncho-pneumonia. Heart hypertrophied, and shows slight fibroid myocarditis. Congestion of liver. Hemorrhages into the spleen. Chronic interstitial nephritis. Fibromyoma of the uterus. Cause of death, exhaustion, chronic nephritis.

Case No. 13.—Female. White. Age, sixty-five years. In Hospital thirty years. Mental disease, "chronic mania." Died hemiplegic after an apoplectic attack. Examination showed chronic pachy-meningitis and lepto-meningitis. Softening of the right hemisphere of the brain; plugging of both middle cerebral arteries; intense atheroma of vessels. The cells of the cortex show atrophy; cells of cord contain much pigment and stain badly. There is descending degeneration affecting both anterior and both lateral pyramidal tracts. Broncho-pneumonia and hemorrhagic infarcta in lungs. Congestion and increase of connective tissue of the liver. Marked fibroid myocarditis and heart wall thickened; atheromatous ulcers in the aorta; hemorrhages into the spleen; chronic interstitial nephritis. Cause of death, cerebral thrombosis.

Case No. 14.—Female. Colored. Age, seventy years. In Hospital ten months. Mental disease, "epilepsy." Died after repeated convulsions. Examination showed cerebral hemorrhage, destroying the basal ganglia on both sides and filling the ventricles; peripheral chromatolysis of the cells of the cortex; descending degeneration of both lateral pyramidal tracts of the cord, most marked on the left. Heart hypertrophied and shows slight fibroid change. Congestion of the liver, increase of the connective tissue and thickening of the arteries of the spleen, with small hemorrhages into the parenchyma. Chronic interstitial nephritis. Cause of death, cerebral hemorrhage.

Case No. 15.—Female. White. Age, seventy-eight years. Mental disease, "senile dementia." Death from exhaustion and gangrene of foot. In Hospital twenty-five years. Examination showed chronic lepto-meningitis, thickening of the walls of the cortical vessels, great deposit of pigment in the cells of the cortex and of the cord. Atheroma of vessels of central nervous system and of the nerves, especially of those of the affected limb. Congestion and increase of fibrous tissues of liver, pigmentation of spleen, chronic interstitial nephritis, right femoral artery entirely calcareous thrombosed up into Scarpa's triangle, aneurismal dilatation of right popliteal artery. Right leg gangrenous up to the knee. Cause of death, exhaustion from gangrene of leg.

Case No. 16.—Female. White. Age, fifty-seven years. In Hospital twenty-nine years. Mental disease, "epilepsy." Died under symptoms of exhaustion. Examination showed chronic lepto-meningitis, pigment deposit in cells of cortex and of spinal cord. Chronic broncho-pneumonia, old pleural adhesions, fatty degeneration of the heart muscle. Slight fibroid changes in liver, congestion of spleen, chronic interstitial nephritis. Cause of death, fatty degeneration of the heart, chronic pneumonia.



EXERCISE GROUNDS AND FARM BUILDINGS.

Case No. 17.—Female. White. Age, thirty-four years. In Hospital two years. Mental disease, terminal dementia. Died under symptoms of exhaustion, after a period of excitement. Examination showed slight lepto-meningitis, broncho-pneumonia and hemorrhagic infarcta in the lungs, hemorrhages into the spleen. Cause of death, exhaustion, broncho-pneumonia.

Case No. 18.—Male. White. Age, forty-eight years. In Hospital five years. Mental disease, "general paresis." Died after being bed-ridden for some time under symptoms of marasmus. Examination showed shrinking of brain convolutions and increase of fluid in the subarachnoid space, thickening of membranes and vessel walls, with infiltration of round cells into the perivascular sheaths. Degeneration and atrophy of nerve cells of the cortex, ascending degeneration in the posterior columns of the cord. Chronic broncho-pneumonia, chronic interstitial gastritis, congestion and increase of fibrous tissue in the liver, pigmentation and increased fibrous tissue in the spleen, chronic diffuse nephritis. Cause of death, exhaustion, uræmia.

Case No. 19.—Female. White. Age, eighty-two years. In Hospital fourteen years. Mental disease, "senile dementia." Died under symptoms of asthenia, from valvular disease of the heart. Examination showed slight degeneration and deposit of pigment in cells of brain cortex and spinal cord. Atheroma of vessels of brain, old area of softening in right internal capsule, thickening of mitral and aortic valves and fibroid myocarditis, great enlargement of the heart, pericardial adhesions, general arterial atheroma, chronic broncho-pneumonia and pleural adhesions. Congestion and increase of fibrous tissue in the liver, chronic interstitial gastritis, fibroid changes in the spleen, chronic interstitial nephritis. Cause of death, asthenia from valvular and fibroid disease of the heart.

Case No. 20.—Male. White. Age, twenty-seven years. In Hospital nine days. Mental disease, acute delirium. Died under symptoms of exhaustion. Examination showed thickening of the pia-arachnoid, cells of cortex stain badly and show slight chromatolysis, slight round cell infiltration about vessels of cortex, chronic broncho-pneumonia and hemorrhagic infarcta of lungs. Congestion and slight increase of connective tissue of the liver, congestion of the spleen, chronic gastritis, acute diffuse nephritis. Cause of death, exhaustion from acute delirium and broncho-pneumonia.

Case No. 21.—Male. White. Age, twenty-three years. In Hospital one month. Died after repeated convulsions. Examination showed tumor occupying the greater portion of the left frontal lobe, protruding on inner surface, and in one spot, in second frontal convolution is just below the surface. Cells of cortex seem, in some places, to have lost their processes and show deposit of pigment, broncho-pneumonia, congestion and slight increase of fibrous tissue in liver, slight interstitial nephritis.

Case No. 22.—Male. White. Age, sixty-eight years. In Hospital two months. Mental disease, "organic dementia" (injury to head). Died under symptoms of exhaustion. Examination showed dural adhesions,

chronic pachy-meningitis and lepto-meningitis, thickening of aortic valves and general arterial atheroma, chronic broncho-pneumonia and old pleurisy, chronic gastritis, congestion and increase of fibrous tissue in the liver and spleen, chronic interstitial nephritis. Cause of death, exhaustion and chronic nephritis.

Case No. 23.—Female. White. Age, seventy-three years. In Hospital fifteen years. Mental disease, "terminal dementia." Died under symptoms of apoplexy. Examination showed dural adhesions, plugging of left middle cerebral artery, red softening of basal ganglia, internal capsule and part of the centrum ovale. Cells of cortex and cord show deposit of pigment and stain badly. Marked atheroma of cerebral vessels, slight fibroid myocarditis, chronic broncho-pneumonia, chronic gastritis, increase of fibroid tissue of liver, infarcta of the spleen, chronic interstitial nephritis, chronic cystitis. Cause of death, cerebral embolism.

Case No. 24.—Female. White. Age, fifty-one years. In Hospital thirteen years. Mental disease, terminal dementia. Death after appearance of spinal curvature and chronic diarrhoea. Only thorax and abdomen allowed to be opened. Examination showed beginning tuberculosis of the lungs, pleural adhesions, tubercular ulcers of the intestines, tuberculosis of the mesenteric glands, spondylitis of the last dorsal and first lumbar vertebrae, chronic catarrhal gastritis, sub-acute parenchymatous nephritis. Cause of death, intestinal tuberculosis.

Some comments on several of these cases may not be out of place. Case No. 11 of our list was that of a man of forty, who was brought in without any history. He was apparently demented, and had, from time to time, epileptiform convulsions. In his case no definite physical symptoms were noted, and the diagnosis of epilepsy had been made. He had, about a week before his death, several severe convulsions, and when he came out of them, presented a right hemiplegia. He laid in a semi-conscious condition for about a week, and died apparently from exhaustion. The autopsy showed shrinking of the brain convolutions and diffuse meningo-encephalitis, but no focal lesion. There was also slight degeneration in the columns of Goll. Considering together the symptoms and the post-mortem findings, the conclusion that the case was one of general paresis and not one of epilepsy seems justified.

In case No 12 an interesting finding was that of a tumor of about the size of a split pea in the mid-cervical region of the cord. This tumor proved to be a tubercle and was entirely solitary, there being no evidence of tuberculosis in any other part of the body. The tumor was sharply limited to the cervical enlargement affecting the anterior

horn and antero-lateral tract on the left side, and must, in all probability, have caused some motor disturbance in the left arm, but unfortunately no record of the symptoms in the case is accessible.

Case No. 13 is interesting on account of the condition of the cerebral arteries. These were intensely atheromatous. The right middle cerebral was completely occluded by a thrombus, which had become organized. The portion of the right hemisphere supplied by it had undergone softening, undoubtedly dating back to a "stroke" which had occurred some six weeks before. The left middle cerebral was nearly, but not quite, occluded by an unorganized thrombus, which had evidently been deposited there shortly before death. The anterior and lateral pyramidal tracts of the cord showed degeneration on both sides, but much more marked on the left.

In case No. 15 a very careful study of the nervous system was made, in order to observe what changes, if any, were connected with the gangrene of the right foot. The nerves from the neighborhood of the gangrene (sciatic, peroneal and anterior tibial) showed great thickening of their vessels, and in one or two sections there appeared to be degeneration of a few fibers, though this was perhaps due to over-differentiation in staining. The autopsy was made so long after death—seventeen hours—that it was impossible to decide how much of the alteration observed in the cells of the cord was due to post-mortem change. The large motor cells, especially those of the lumbar region, showed chromatolysis, and in some places displacement of the nucleus and deposit of pigment, but no difference between the two sides could be made out. No degeneration of fiber tracts was found. The cells of the cerebral cortex showed degenerative changes and some pigment deposit, but nothing different from what was to be expected in a person of advanced age. There was marked atheroma of most of the arteries and especially manifest in the femoral of the right side, which was so calcareous that it could not be cut with a knife.

Case No. 18 was one of dementia with marked ataxic symptoms, which were fully explained by the intense degeneration found in the posterior columns. The question as to whether this case was one of tabetic dementia has been raised, but the anatomical findings in brain and cord, together with all the clinical symptoms, speak decidedly for general paresis.

Case No. 21 is of great interest, both on account of the obscurity of the diagnosis and since it presents a rare pathological condition. The patient, a friendless man of about thirty-three years of age, was brought

to the Hospital with no other history than that he was said to have been struck in the head shortly before (exact date could not be ascertained). He did not speak, appeared to be entirely demented and had frequent epileptiform convulsions. He steadily grew weaker until his death in status epilepticus, twenty-eight days after his admission. No focal symptoms are noted in his history. The autopsy was performed two and a half hours after his death. Upon turning back the dura mater the brain was noticed to bulge in the left frontal region. The consistence was firmer than normal, and in an area of about one cm. in diameter, in the middle of the second frontal convolution, a greyish-white mass was noticed to be protruding, covered only by the pia-arachnoid. Upon separating the hemispheres, a mass presenting an appearance like cooked cauliflower or sago pudding, and having a rather dull but pearly luster, was found to have broken through the median surface of the left frontal, to have indented the right frontal lobe and to have pushed the corpus callosum downwards. The protruding portion was about four cm. in diameter. Upon separating the hemispheres and making incisions into the left frontal lobe, the mass was found to occupy a cavity measuring sagittally eight and five-tenths cm., frontally five and five-tenths cm., and horizontally three and seven-tenths cm., taking up a greater part of the frontal lobe. The mass was soft and friable, fell apart easily and was encapsulated. Upon dissecting down the tumor was found to arise from the body of the left lateral ventricle. Its median portion was much firmer than the external portion, seemed to be arranged in lamellæ, was glistening white in color and of a pearly luster. Portions of the protruding mass, crushed under a cover glass and examined in salt solution, showed a great number of large, flat, epithelial cells, most of them without nuclei, a stroma of loose, fibrous tissue and a large number of crystals of cholesterin. Repeated attempts to secure microscopical sections of the mass have so far failed, the alcohol used in both the celloidin and the paraffin-embedding methods apparently dissolving the cells and the cholesterin crystals, leaving behind the stroma. Judging from its general appearance and from the results of the examinations of teased preparations, the tumor appears to be a cholesteatoma, an exceedingly rare form. These tumors were first observed by Cruveillier; later examined microscopically and given the name cholesteatoma by Muller. In 1855 Virchow made a study of the subject and described six cases. Since that time a number of articles have appeared, the most comprehensive

being that of Bostrom, in 1897. As to whether these tumors arise from epithelial cells congenitally displaced, or are of endothelial origin, is disputed. Bostrom is a very decided partisan of the former view. It seems a fact that they always grow from a structure having a covering of pavement or cubical epithelium, usually from the pia mater. The above-mentioned case is no exception to this rule. The tumor seems to have arisen from the ependyma of the lateral ventricle and to have extended into the brain substance proper. It can hardly be thought to have had more than an accidental association with the injury to the head.

Respectfully submitted,

CHARLES LEWIS ALLEN, M.D.

LABORATORY, NEW JERSEY STATE HOSPITAL,  
TRENTON, November 1st, 1901.

---

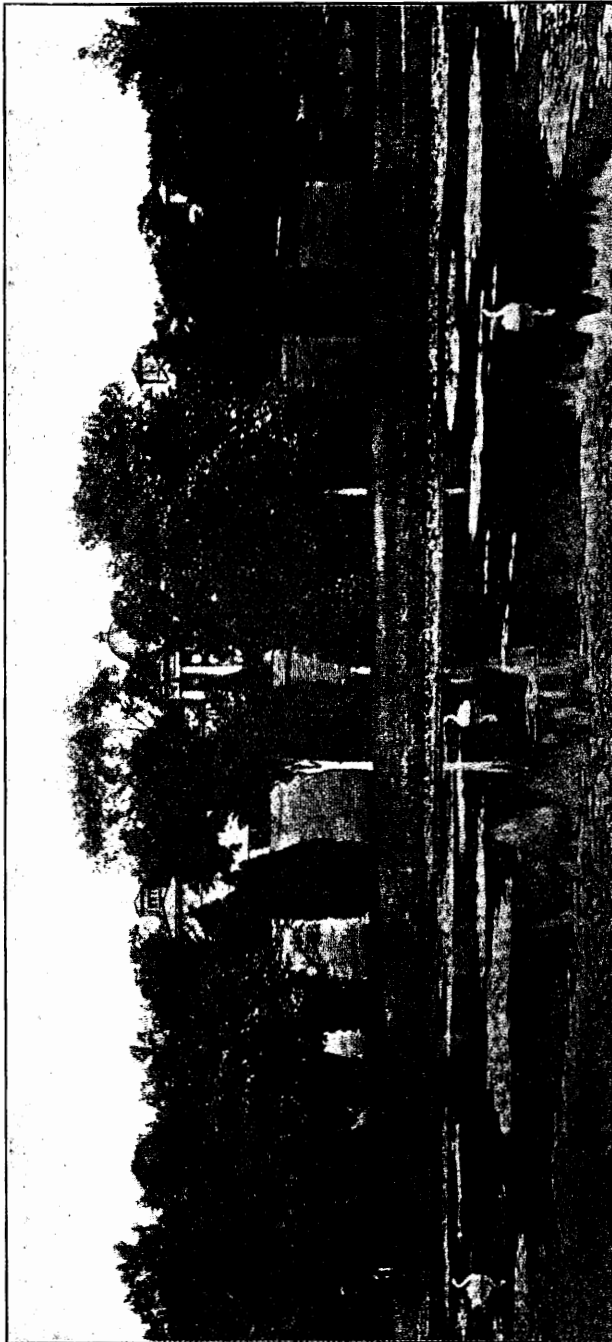
---

BY-LAWS, FORMS, ETC.

---

---

(47)



BUILDINGS AND LAKE.

## EXTRACTS FROM THE BY-LAWS.

### ADMISSION OF PATIENTS.

#### ORDER OR WARRANT FILED.

1. Whenever a patient is sent to the Hospital by the order of any court, justice or judge, the order or warrant, or a copy thereof, by which such person is sent, shall be lodged with the Medical Director.

#### CLEANLINESS.

2. Each patient, before admission, shall be made perfectly clean, and be free from vermin or any contagious or infectious disease.

#### CLOTHING FOR MEN.

3. Each male patient shall be provided with at least two shirts, a new and substantial coat, vest and pantaloons, of strong woolen cloth, two pairs of socks, a black cravat, a good hat or cap, and a pair of new shoes or boots, together with a comfortable outside garment.

#### CLOTHING FOR WOMEN.

4. Each female patient, in addition to the same quantity of undergarments, shoes and stockings, shall have a flannel petticoat, two good dresses, also a cloak or other outside garment. In case the patient is so much excited as not to admit of being thus clothed, other clothing that can be kept on, that is comfortable and in sufficient quantity, with a change thereof, may be substituted.

It is very desirable that extra and better apparel should be sent

with those accustomed to it, that when they become better, and when they attend religious worship, walk or drive out, their self-respect may be preserved.

In all cases the patient's best clothing should be sent; it will be carefully preserved, and only used when deemed necessary for the purposes above mentioned.

#### JEWELRY, ETC.

5. Jewelry and all superfluous articles of dress, knives, &c., should be left at home, as they are liable to be lost.

#### HISTORY OF CASE.

6. A written history of the case should be sent with the patient, and, if possible, someone acquainted with him should accompany him to the Hospital, from whom minute, but often essential, particulars may be learned.

#### BOND, ETC.

7. A bond, with satisfactory sureties, will be required for the payment of the board and expenses, and for the removal of the patient when discharged, of all persons, except those sent at the expense of the counties.

Those who bring friends should be prepared to give such bond, and, if strangers, bring evidence of their responsibility.

## REQUIREMENTS FOR ADMISSION OF PATIENTS

To the New Jersey State Hospital at Trenton.

*Same Procedure Necessary in Case of Either Private or Indigent Patients, Except that a Bond with Proper Sureties Must be Executed in Case of Private Patients.*

STATE OF NEW JERSEY.

REQUEST FOR COMMITMENT OF A PATIENT TO STATE HOSPITAL  
FOR THE INSANE.

*To the Medical Director of the New Jersey State Hospital of  
Trenton:*

The undersigned, of ....., in the county of ....., and

City or town.

State of ....., being desirous of having ....., an

Full name of patient.

insane person of the county of ....., and State of ....., committed to and confined as an indigent patient in The New Jersey State Hospital at Trenton, hereby requests the admission therein of the said ....., for the purpose aforesaid. Said .....

Full name of patient.

Full name of patient.

was born at ....., on ....., resides at .....

City or town.

Date of birth.

State patient's resi-

....., and is a ..... The under-

dence with particularity.

Profession, trade or calling of patient.

signed is a ..... of the said

State degree of relation or other circumstance of connection  
between patient and person making request.

.....

Full name of patient.

Dated....., 19....

Name of person making request, .....

P. O. Address, .....

Street and number, .....

City, .....

County, .....

State, .....



**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I ....., of ....., in the county of ....., and State of New Jersey, do hereby certify that I am a graduate of ..... and a permanent resident of the State of New Jersey, and have been in actual practice as a physician for at least five years last past; that I have made a personal examination of ....., alleged to be insane, and whose admission into The New Jersey State Hospital at Trenton has been requested by ....., of ....., in said State, and I am of the opinion that the said ..... is insane, and a proper person to be committed to, and confined in said Hospital; that I am not superintendent, proprietor, or an officer, or a regular professional attendant, or financially interested in said Hospital, nor am I a near relative either by blood or marriage, or guardian or trustee of the said .....

The following is a description and identification of, and the facts I have been able to ascertain concerning hereditary taint, previous attack and serious nervous disorder of the said .....

1. Patient resides at ....., county of .....; age, ..... years; nativity (if foreign, how long in U. S.) .....; sex, .....; color, .....; occupation, .....; single, married, widowed, divorced. (*Strike out words not required.*)

2. Birthplace of father .....; of mother, .....

3. Number of previous attacks, .....; present attack began ....., 19.... (*If patient has ever been an inmate of an institution for the insane, state when and where.*)

4. Was the present attack gradual or rapid in its onset?

5. What is the patient's general physical condition?

(*If afflicted with any infirmity or disease other than insanity, state it.*)

6. Is the patient cleanly or uncleanly in personal habits?

7. Is the patient violent, dangerous, destructive, excited or depressed, homicidal or suicidal? (*If either homicide or suicide has been attempted or threatened, it should be so stated.*)

8. What is the supposed cause of the insanity? (*State both predisposing and exciting causes, if known.*)

9. Has the patient insane relatives? If so, state the degree of consanguinity, and whether paternal or maternal. (*State any hereditary taint of insanity that can be ascertained.*)

10. State the patient's habits as to the use of liquor, tobacco, opium or other drug, and whether excessive or moderate:

The following are the facts as to the insanity of the said ....., upon which my opinion is founded:

(1) The patient said (*state what the patient said, if anything, in the presence of the physician*):

(2) The patient (*state what the patient did, in the presence of the physician, and also describe his or her appearance and manner*):

(3) Other facts perceived by me indicating insanity:

(4) Facts indicating insanity communicated to me by others: (*State what, if any, significant change there has been in the patient's disposition, mental condition, business or social habits, or bodily health.*)

....., Physician.

**AFFIDAVIT.**

State of New Jersey, county of ....., ss.—....., being duly sworn according to law, on his oath says that he is the physician named in and who made and subscribed the foregoing certificate; that he has read the same and knows the contents thereof, and that the facts, matters and things therein set forth are true to the best of his knowledge, information and belief.

Sworn to and subscribed before me this..... day of....., 19...

**Certificate of Insanity of Patient by Physician Resident of  
New Jersey.**

I, ....., of ....., in the county of ....., and State of New Jersey, do hereby certify that I am a graduate of ..... and a permanent resident of the State of New Jersey, and have been in actual practice as a physician for at least five years last past; that I have made a personal examination of ....., alleged to be insane, and whose admission into The New Jersey State Hospital at Trenton has been requested by ....., of ....., in said State, and I am of the opinion that the said ..... is insane, and a proper person to be committed to, and confined in, said Hospital; that I am not superintendent, proprietor, or an officer, or a regular professional attendant, or financially interested in said Hospital, nor am I a near relative either by blood or marriage, or guardian or trustee of the said .....

The following is a description and identification of, and the facts I have been able to ascertain concerning hereditary taint, previous attack and serious nervous disorder of, the said .....

1. Patient resides at ....., county of .....; age, ..... years; nativity (if foreign, how long in U. S.), .....; sex, .....; color, .....; occupation, .....; single, married, widowed, divorced. (*Strike out words not required.*)
2. Birthplace of father .....; of mother, .....
3. Number of previous attacks, .....; present attack began ....., 19.... (*If patient has ever been an inmate of an institution for the insane, state when and where.*)
4. Was the present attack gradual or rapid in its onset? .....
5. What is the patient's general physical condition? .....  
(*If afflicted with any infirmity or disease other than insanity, state it.*)
6. Is the patient cleanly or uncleanly in personal habits? .....
7. Is the patient violent, dangerous, destructive, excited or depressed, homicidal or suicidal? (*If either homicide or suicide has been attempted or threatened, it should be so stated.*)

8. What is the supposed cause of the insanity? (*State both predisposing and exciting causes, if known.*)

9. Has the patient insane relatives? If so, state the degree of consanguinity, and whether paternal or maternal. (*State any hereditary taint of insanity that can be ascertained.*)

10. State the patient's habits as to the use of liquor, tobacco, opium or other drug, and whether excessive or moderate:

The following are the facts as to the insanity of the said ....., upon which my opinion is founded:

(1) The patient said (*state what the patient said, if anything, in the presence of the physician*):

(2) The patient (*state what the patient did, in the presence of the physician, and also describe his or her appearance and manner*):

(3) Other facts perceived by me indicating insanity:

(4) Facts indicating insanity communicated to me by others: (*State what, if any, significant change there has been in the patient's disposition, mental condition, business or social habits, or bodily health.*)

....., Physician.

**AFFIDAVIT.**

State of New Jersey, county of ....., ss.—....., being duly sworn according to law, on his oath says that he is the physician named in and who made and subscribed the foregoing certificate; that he has read the same and knows the contents thereof, and that the facts, matters and things therein set forth are true to the best of his knowledge, information and belief.

Sealed with our hands, and dated this ..... day of ....., 19....

## FORM OF BOND.

Know all men by these presents, that we ....., of the township of ....., in the county of ....., are held and firmly bound unto ....., Treasurer of the New Jersey State Hospital at Trenton, and his successors in office, in the sum of one thousand dollars, for the payment of which we jointly and severally bind ourselves firmly by these presents.

Sealed with our hands, and dated this ..... day of ....., 190..

Whereas, ....., of the township of ....., in the county of ....., a lunatic, has been admitted a boarder in the New Jersey State Hospital at Trenton; now, therefore,

The condition of the obligation is, that if the said obligators shall pay to the said Treasurer, or his successors in office, the sum of ..... dollars and ..... cents per week of the board of said lunatic, so long as ..... shall continue a boarder in said Hospital, with such extra charges as may be occasioned by ..... requiring more than ordinary care and attention, and shall provide for ....., suitable clothing, and pay for all such necessary articles of clothing as shall be procured for ..... by the Warden of the Hospital, and shall remove ..... from the Hospital whenever the room occupied by ..... shall be required for a class of patients having preference by law, or in the opinion of the Medical Director, to be received into said Hospital; and if ..... should be removed at the request of relatives or anyone authorized to make such removal, before the expiration of six calendar months after reception, then if such obligators shall pay board for twenty-six weeks, unless ..... should sooner be cured, and if they shall also pay not exceeding fifty dollars for all damages ..... may do to the furniture or other property of the Hospital, and for reasonable charges in case of death, such payment for board and clothing to be made quarterly, in advance, from date of admission, and at the time of removal, with interest on each bill from and after the time it becomes due, then this obligation to be void, otherwise to remain in force.

Signed and sealed in the presence of

.....	.....	.....	.....	[L. S.]
.....	.....	.....	.....	[L. S.]



PATIENTS' CORRIDOR.

## FORMS AND DIRECTIONS.

JUDGE'S ORDER APPROVING CERTIFICATES OF INSANITY, AND  
FINDING OF INDIGENCE AND LEGAL SETTLE-  
MENT, AFTER INQUIRY.

STATE OF NEW JERSEY,  
County of .....

I, ....., Judge of the Court of Common Pleas of the county of ....., to whom have been presented copies of the request in writing for the admission to, and confinement as an indigent patient in, the New Jersey State Hospital at Trenton, of ....., and of the certificates of ..... and ....., physicians who certify to the insanity of the said ....., which copies are certified by the Medical Director of said Hospital, under the seal thereof; and having examined said request and certificates, and duly considered the same, and being satisfied with the form and sufficiency of said request and certificates, and having, pursuant to the statute, instituted inquiry and taken proofs as to the indigence and legal settlement of the said ....., but not having deemed it necessary to call a jury, did call before me ....., credible witnesses, and examined them and each of them, upon their several corporal oaths touching the indigence and legal settlement of the said ....., and it appearing satisfactorily to me from the certificates aforesaid, and the testimony of the witnesses aforesaid, that the said ..... is insane and an indigent, and has not sufficient estate to support himself (and his family) under such visitation of insanity, and that he has a legal settlement in the county of ....., from whence his admission to said Hospital is requested, all of which I do hereby certify; and I do hereby order that the said certificates be and are hereby approved, to the end that the said ..... shall be confined in the said Hospital at the expense of said county, pursuant to the statute in such case made and provided, until he shall be restored to reason, or removed or discharged according to law; and this shall be a sufficient warrant and authority for such confinement and detention.

Witness my hand and seal, at ....., this ..... day of .....,  
nineteen hundred and .....

..... J. [L. s.]

## JUDGE'S ORDER APPROVING CERTIFICATES OF INSANITY.

## STATE OF NEW JERSEY.

I, ....., Judge of the Court of Common Pleas of the county of ....., to whom have been presented copies of the request in writing for the admission to, and confinement as a patient in, the New Jersey State Hospital for the Insane at Trenton, of ....., in the county of ....., and of the certificates of ..... and ....., physicians who certify to the insanity of the said ....., which copies are certified by the Medical Director of said Hospital, under the seal thereof; and having examined the said request and certificates, and duly considered the same, and being satisfied with the form and sufficiency of said request and certificates, do hereby order that the same be and are hereby approved, all of which I do hereby certify, to the end that the said ..... shall be confined in said Hospital, pursuant to the statute in such case made and provided, until he be restored to reason, or removed or discharged, according to law; and this shall be a sufficient warrant and authority for such confinement and detention.

Witness my hand and seal, at ....., this ..... day of ....., nineteen hundred and .....

....., J. [L. s.]

New Jersey State Library