

ADMINISTRATION PART OF MAIN BUILDING.

THIRTY-THIRD ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

OF THE

New Jersey State Hospital

AT

MORRIS PLAINS

For the Year Ending October 31st

1908

PATERSON, N. J.
The News Printing and Publishing Company
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MANAGERS.

PRESIDENT.

JOHN C. EISELE.....Newark

VICE PRESIDENT.

JAMES M. BUCKLEY, D.D.Morristown

JOHN A. McBRIDE.Deckertown

DAVID ST. JOHN, M.D.Hackensack

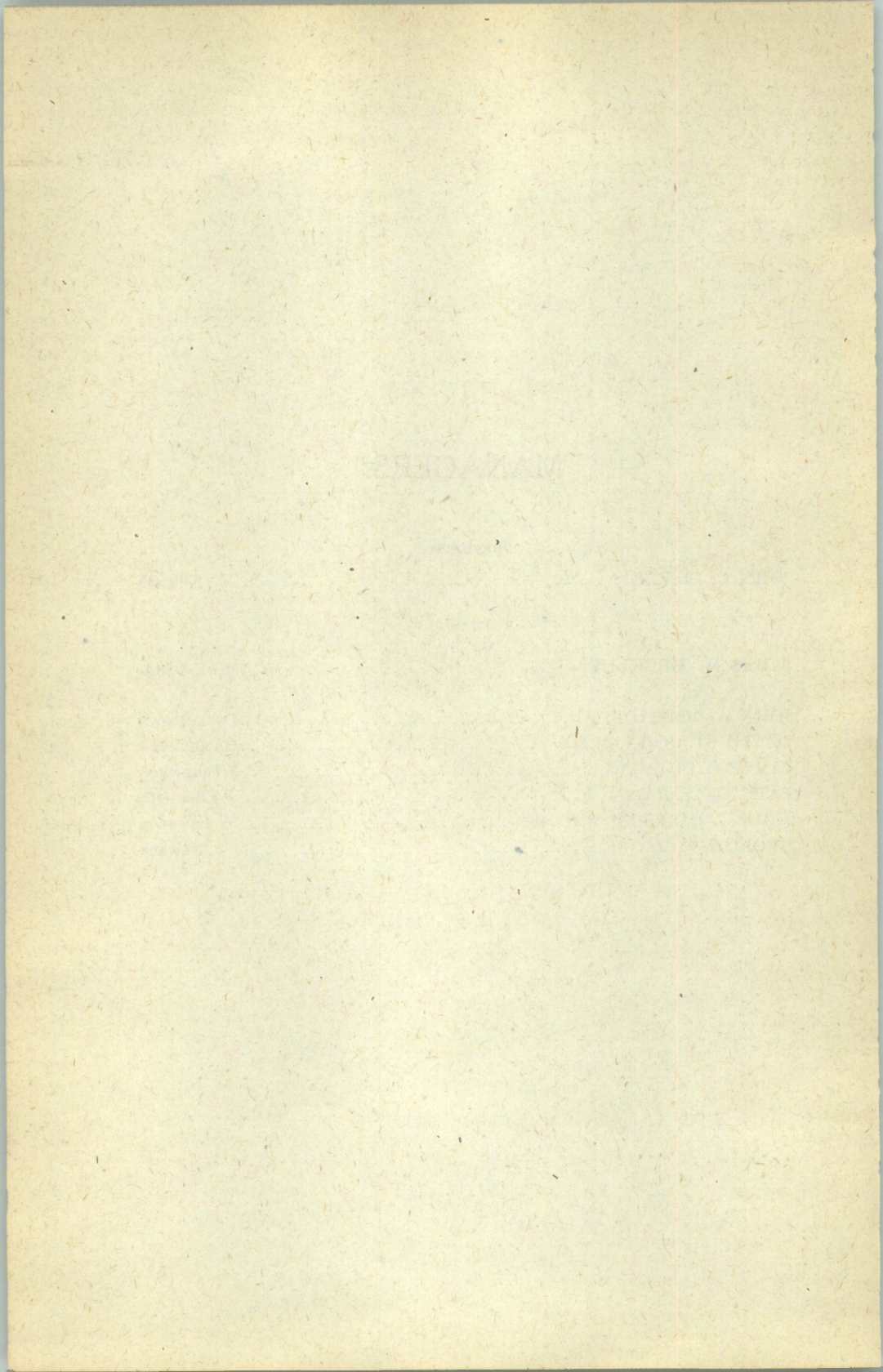
JAMES G. MORGAN.Weehawken

PATRICK J. RYAN.Elizabeth

JOHN T. GILLSON, M.D.Paterson

GEORGE W. JAGLE.Newark

(3)



OFFICERS.

MEDICAL DEPARTMENT.

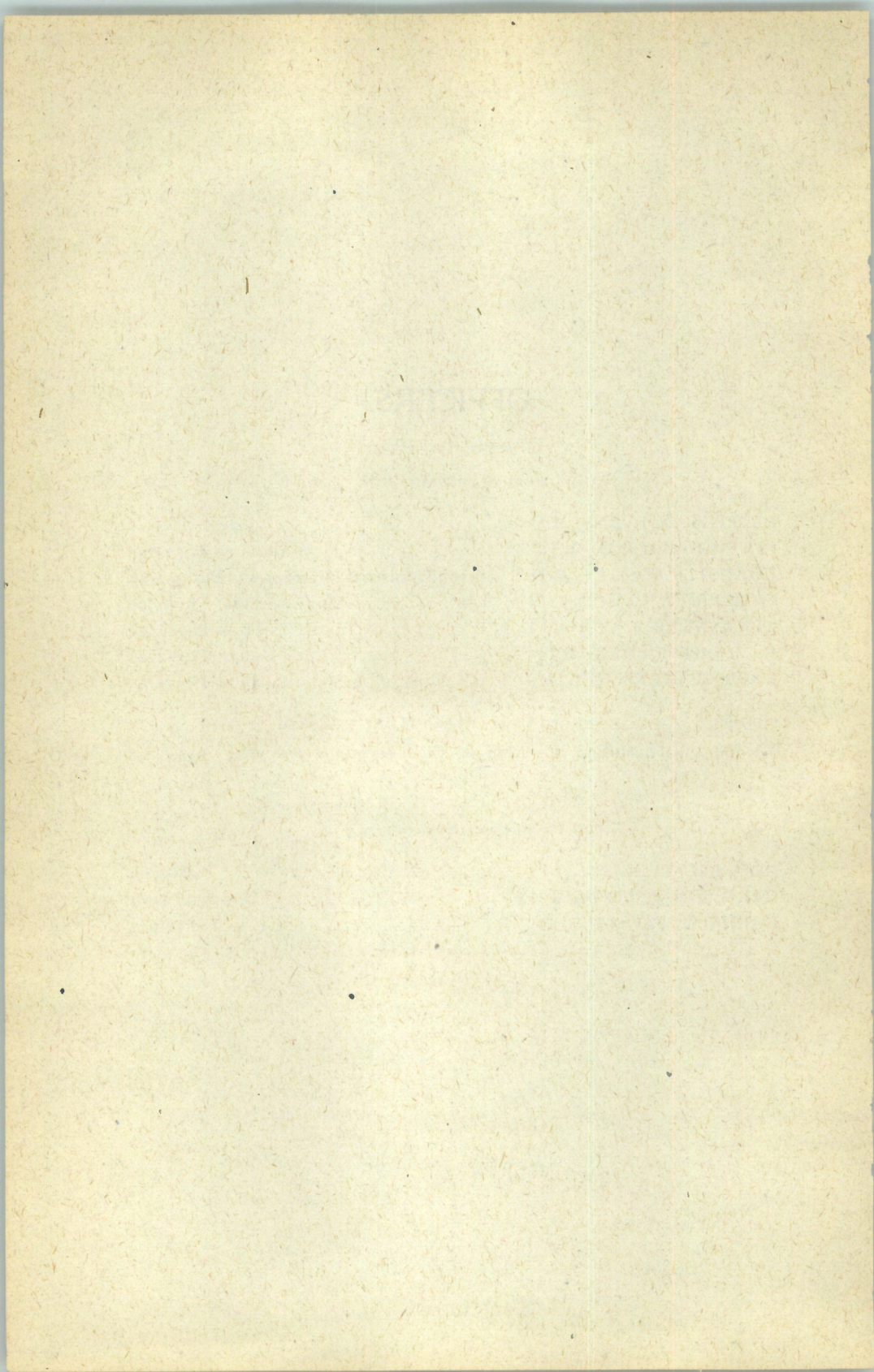
BRITTON D. EVANS, M.D. Medical Director
PETER S. MALLON, M.D. First Assistant Physician
H. AUSTIN COSSITT, M.D. Second Assistant Physician and Pathologist
FREDERICK C. HORSFORD, M.D. Third Assistant Physician
ALEXANDER J. CARROLL, M.D. Fourth Assistant Physician
E. MOORE FISHER, M.D. Fifth Assistant Physician
LOUIS K. HENSCHER, M.D. Sixth Assistant Physician

L. L. MIAL, M.D.

Visiting and Consulting Physician on Diseases of the Eye, Ear, Nose and
Throat.

BUSINESS DEPARTMENT.

MOSES K. EVERITT. Warden
HARRISON P. LINDABURY. Treasurer
HARRY A. VAN GILDER. Secretary



Report of the Board of Managers

Report of the Board of Managers

REPORT OF THE BOARD OF MANAGERS.

To His Excellency, John Franklin Fort, Governor of the State of New Jersey

In conformity to the laws of the State, the Board of Managers of The New Jersey State Hospital at Morris Plains herewith respectfully submits its thirty-third annual report, which covers the period from November 1st, 1907, to October 31st, 1908.

The report of the Medical Director shows that the year closed with 1,943 patients in the Hospital; 993 men and 950 women. The greatest number of patients in the Hospital at any one time was 1,955. There were 495 admissions; 271 men and 224 women. This is the largest number of patients admitted during one year since the opening of the Hospital. The percentage of recoveries, 26.22 per cent. is gratifying and the death rate lower than usual.

The record book of the Hospital shows that the Managers held 12 regular meetings, 2 special meetings, 6 committee meetings and made 154 individual visits during the year. On the occasion of these visits the Hospital was frequently inspected and records of the findings made in each case.

The Treasurer's report shows that the financial condition of the Hospital has markedly improved during the past year. This report, together with the reports of the Chief Officers of the Institution, have been carefully examined and are herewith presented to you for your consideration.

We desire to suggest to your Excellency the advisability of making it one of the duties of the State Department of Charities and Corrections to supervise, visit and report upon the County Hospitals for the Insane, and in order that this may be done we respectfully suggest that an act of the Legislature be passed relieving this Board of the duty and responsibility of having a general supervision over these insti-

tutions and placing the responsibility where it seems to us it properly belongs.

The employment of help at this Hospital has to a considerable extent been placed under the Civil Service Commission, and while it has not been in operation long enough to determine its effect we hope that it may be attended with good results.

THE DANGEROUSLY CROWDED CONDITION OF THE HOSPITAL.

The overcrowding of the Hospital, as shown in the report of the Medical Director, is unanswerable evidence that further addition to it would make it unwieldy and its proper supervision extremely difficult if not impossible.

Substantial relief may be given for several years if the Institution were relieved of the convict and criminal insane, who are a demoralizing element in the Hospital and an imposition upon those patients who are unfortunate, but not guilty of crime. The greatly needed home for male nurses would also make room for as many patients as nurses are thus provided for.

NEEDS OF THE STATE HOSPITAL AT MORRIS PLAINS.

The population of the New Jersey State Hospital at Morris Plains has greatly increased in numbers, and it is the judgment of the Board of Managers that in order to protect properly the interests of this institution and give the patients the medical care and treatment they are entitled to, at least two Assistant Physicians should be added to the Staff. We therefore request your Excellency to approve such addition to the Staff.

The Board of Managers after due consideration have concluded that the service demanded of the various members of the Medical Staff of The New Jersey State Hospital at Morris Plains is entitled to a larger salary than they now receive. We therefore ask your Excellency to recommend to the Legislature to authorize that a substantial advance be made in the salary paid to these respective officers.

In view of the fact that the duties of the Secretary and The Treasurer of this Board have steadily increased since their election to their respective offices and have especially become more arduous because of recent legislation which imposes additional duties and responsibilities upon them, it is our united judgment that these officers by an act of the Legislature be given a salary which will adequately compensate them for the valuable and satisfactory services which they render this Institution. We therefore deem it our duty to ask the Legislature that action be taken to approve the paying to each of these officers one thousand dollars per annum and legitimate expenses incurred in the performance of their duties.

The Warden recommends that an addition of 50 feet be built to the dairy barn. The amount of milk required from the dairy under the revised Dietary is over 1,100 quarts per day. To go into the market and purchase the necessary quantity of milk would cost the Hospital \$23,000 per year. The addition we deem necessary.

He also asks for an increased water supply. During the past year for a period of about four months a severe drought prevailed and still continues. It is important that provision be made for greater storage capacity or for a supply of water from some other source.

A new store house is indispensable, and a cold storage plant would increase receipts and lessen expenses. If the latter is not furnished it will be necessary to rebuild and enlarge the present ice houses for the purpose of storing more ice, as the consumption of ice increases with the increase in the population of the Hospital.

THE MOST URGENT NEEDS.

After careful consideration and a close inspection of the buildings referred to, the Managers without exception, are convinced that a new store house is an absolute necessity, and that the enlargement of the dairy barn is required for the proper housing and care of the increased number of cows

necessary to provide sufficient dairy products for the increased population.

Also a most important and needful improvement is a new kitchen building. The kitchens, for general and special diet, including the rooms in which the kitchen utensils are washed, are located in the basement and the apartments used for these purposes are small, dark, poorly ventilated and were intended to provide for *about one-third of the present population of the hospital*. They lack means of ventilation and owing to the crowded situation and intense and unavoidable heat the condition of the cooks and other employes therein become almost unbearable, especially in the hot weather, and seriously interferes with the securing of proper persons for such services. As the kitchen is in the lower part of the Main Building, if there were no other reason for this requested improvement the great danger of fire should be sufficient not only to warrant, but to compel the speedy erection of a new kitchen building.

Notwithstanding the great amount of water for cleanliness cooking and health necessary to such an institution, we think that it is too great, amounting to 600,000 gallons for twenty-four hours. This is the result of continuous flushing. It can only be remedied by replacing the present urinals with others having an automatic pull flush. This would reduce the waste water to the extent of 50,000 to 100,000 gallons per twenty-four hours. This change would save to the institution in one year many times its cost.

Estimates of the cost of these essential improvements will be presented at a later date.

THE COUNTY HOSPITALS.

PASSAIC COUNTY HOSPITAL FOR THE INSANE.

Passaic County sends nearly all of its insane to the State Hospital at Morris Plains, but for a number of years past it has been the custom to care for a small number of that class of patients which can be easily managed in the almshouse under a contract between the City of Paterson and the County of Passaic. The members of our committee on closely inspecting the buildings and the patients confined in them found the former adequate to provide for the inmates a clean, warm and comfortable home. The patients—9 male and 30 female—were neatly dressed, cleanly, tidy in appearance and evidently well cared for. They are of the incurable, demented class which give little or no trouble and do not require any restraint.

ESSEX COUNTY HOSPITAL FOR THE INSANE.

In its provision for its insane Essex County gives promise of being up-to-date in every particular. The Managers visited this Hospital and made a general inspection of the new hospital at Cedar Grove. In the building in Newark there are 283 male and 506 female patients, and in the Cedar Grove buildings 271 male and 227 female patients, making a total of 1,287 patients being taken care of by Essex County.

There is at present under construction at Overbrook a group of hospital buildings which, when completed will do credit to this County and the State.

This hospital is under the management of Dr. D. M. Dill, Superintendent, and an adequate corps of assistant physicians. It has a well appointed pathological laboratory, the patients are scientifically and humanely cared for and everything connected with the institution and the management of the patients seems worthy of commendation.

HUDSON COUNTY HOSPITAL FOR THE INSANE.

This hospital is very seriously overcrowded. Four hundred would be a liberal estimate of its normal capacity, and on the date of our visit it contained 375 female and 270 male patients, making a total of 645 patients. Dr. George W. King, the Superintendent, has done and is doing all that he possibly can to improve the conditions existing, but unfortunately he is powerless to make any marked change.

Last year the authorities governing the hospital contemplated using the old County Almshouse, adjoining the present hospital building, for the reception of insane patients. Close investigation into this matter developed the fact that it would be dangerous to do so for the reason that contagious diseases of all kinds, including typhus and typhoid fever, have from time to time broken out among the inmates of the almshouse and subsequently the building had been used as a hospital for contagious diseases.

Hudson County greatly needs an entirely new hospital for the insane, constructed upon scientific principles and modern in character. The overcrowding of this hospital is so serious a matter that the Commissioner of Charities and Corrections should use the authority of this Department to bring about a change in existing conditions.

EVIDENCES OF PUBLIC APPRECIATION.

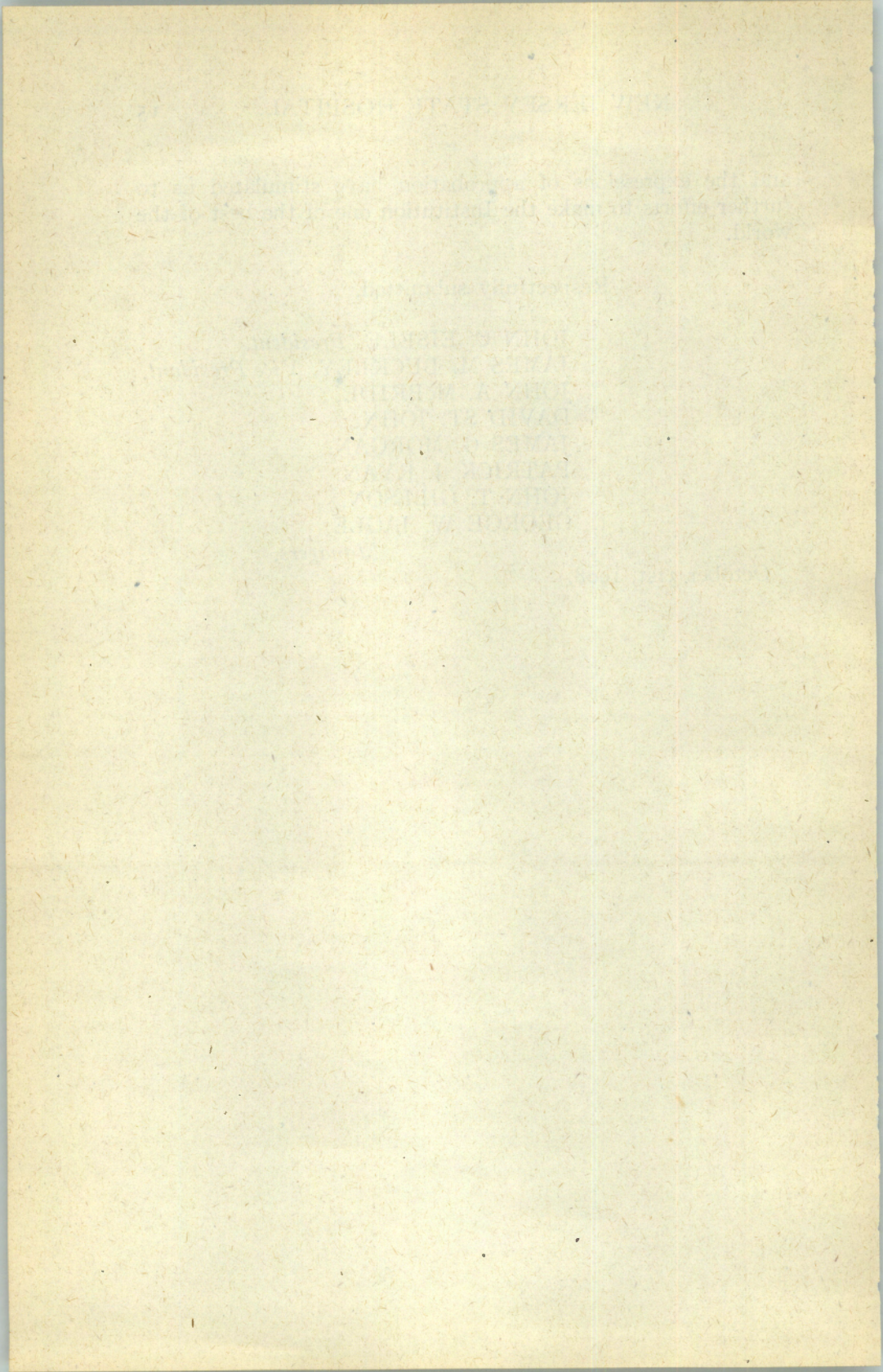
During the last year The New Jersey State Hospital at Morris Plains has been visited by various Boards of Freeholders of the Counties in the Northern Hospital District, quarterly and monthly, and delegates from various charitable societies, by an increasing number of persons from this and other countries and a Legislative Investigating Committee of the State. These inspections have been satisfactory

and the expressions of approbation have stimulated us to further efforts to make the Institution one of the best of the world.

Respectfully submitted,

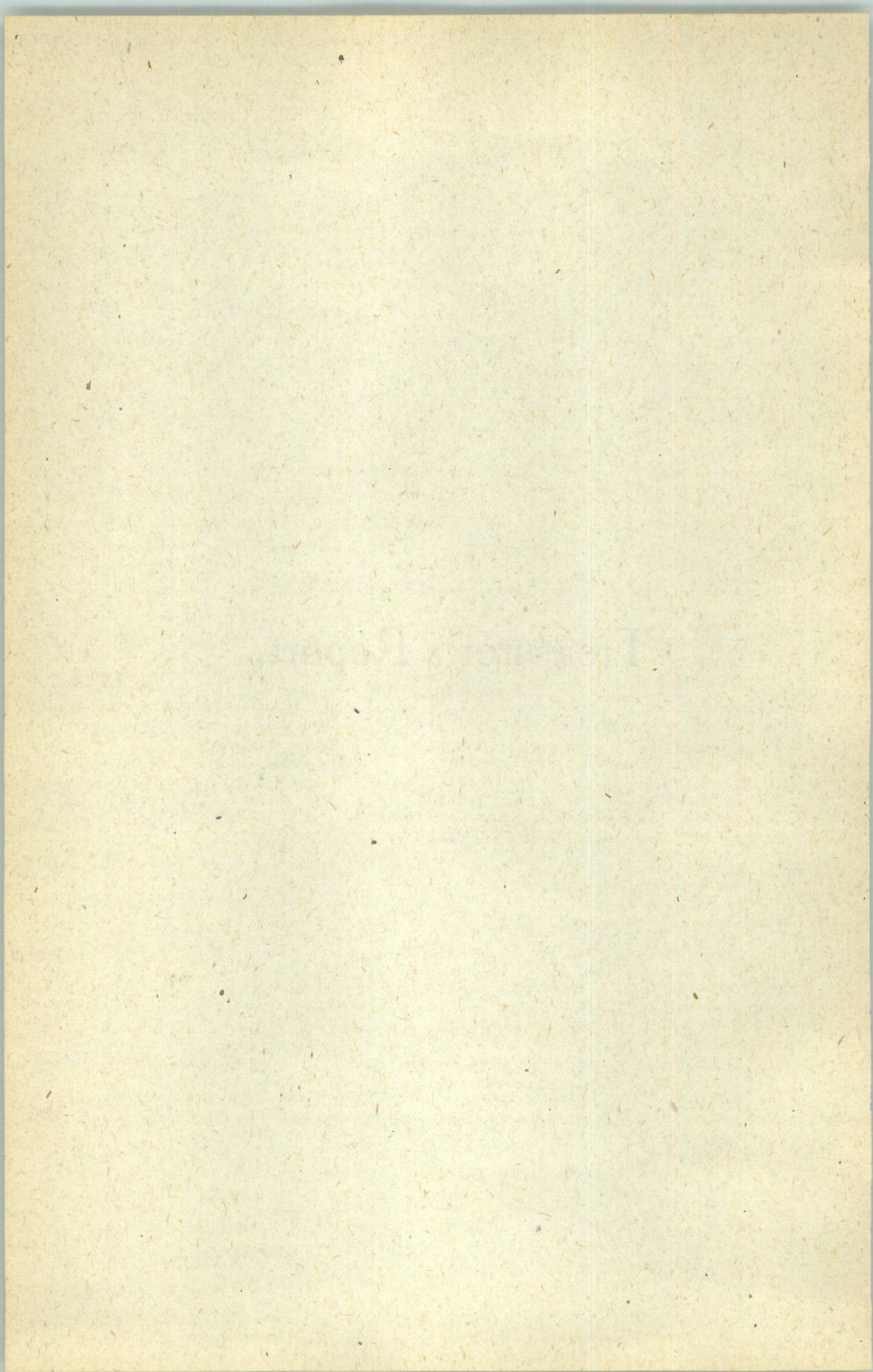
JOHN C. EISELE, *President.*
JAMES M. BUCKLEY, *Vice President.*
JOHN A. McBRIDE,
DAVID ST. JOHN,
JAMES G. MORGAN,
PATRICK J. RYAN,
JOHN T. GILLSON,
GEORGE W. JAGLE,
Managers.

October 31st, 1908.



Treasurer's Report.

(17)



TREASURER'S REPORT.

To the Managers of the New Jersey State Hospital at Morris Plains, N. J.

GENTLEMEN—The Treasurer of The New Jersey State Hospital at Morris Plains, N. J., respectfully submits the following abstract of the receipts and disbursements from November 1st, 1907, to October 31st, 1908, inclusive:

RECEIPTS.

Balance on hand, November 1st, 1907.		\$2,438.63
From State Treasurer for convict patients.	\$17,082.12	
From State Treasurer for County patients.	126,594.00	
From State Treasurer for State indigent patients.	/ 90,475.88	
	234,152.00	
Less deficiency in appropriation for fiscal year.	5,952.00	
	228,200.00	
From State Treasurer from funds collected by the Institution and deposited with State Treasurer and special appropriation of \$15,000.	124,411.68	
From sundry counties for maintenance of county patients.	146,249.82	
From private patients.	70,667.50	
From hides, tallow, etc.	13,107.80	
Interest on bank balance.	124.77	
	582,761.57	
		585,200.20
Amount transferred from special account to meet November, 1907, payroll.		11,000.00
Refund of over-payment by New York World.		3.00
		\$596,203.20

DISBURSEMENTS.

Bills paid.	\$452,737.48
Moneys collected and paid to State Treasurer prior to October report.	109,447.46
Collections for October, 1908, paid to State Treasurer received by him in November, 1908.	22,901.90
Amount transferred from insurance fund restored.	11,000.00
Check of Hoffman & Marks returned, no funds.	65.00
Check of Elizabeth Motor Car Co. protested.	51.36
	<hr/>
	\$596,203.20

Respectfully submitted,
H. P. LINDABURY,
Treasurer.

THE NEW JERSEY STATE HOSPITAL AT MORRIS PLAINS, N. J.
November 12th, 1908.

We hereby certify that we have examined the Treasurer's accounts, and compared the same with his books and vouchers, and find them in accordance with the above statement and correctly stated and balanced.

GEORGE W. JAGLE,
P. J. RYAN,
JOHN A. McBRIDE,
Auditing Committee.

Report of the Medical Director

(21)

Report of the Medical Director

REPORT OF THE MEDICAL DIRECTOR

To the Board of Managers:

GENTLEMEN —I have the honor to present to you the thirty-third annual report of the Medical Department of The New Jersey State Hospital at Morris Plains. This report covers the hospital year beginning November 1st, 1907, and ending October 31st, 1908.

The records of this Hospital show that on August 17th, 1876, seventy-five patients were admitted. These were the first patients received into the custody of this institution. They were transferred from what is now The New Jersey State Hospital at Trenton, then bearing the legal title of The New Jersey State Lunatic Asylum, Trenton, N. J.

On October 31st, 1908, this institution had been receiving patients for thirty-two years, two months and thirteen days. During this period 8,953 persons were admitted for care and treatment, and 2,173 were discharged recovered, showing that more than 24 per cent. of all under treatment were restored to mental health.

A concise review of the statistical tables appended gives a good general idea of the results obtained during the year. At the end of the Hospital year there were in the institution 1,943 patients; 993 of whom were men and 950 women. The whole number admitted during the year was 495; 271 men and 224 women, which is the greatest number admitted during any year since the opening of the hospital.

The highest census was reached on August 15th, and again on August 20th, when there were 1,955 patients under treatment. Of the 1,943 remaining at the end of the year, 1,654 were indigent, 179 were private or pay patients, 71 were convicts and 39 criminals. The 495 admissions consisted of 241 classified as County indigent, 160 as State indigent, and 94 as pay patients.

The number of patients of foreign birth admitted was 182, or nearly 37 per cent. of the whole number admitted. That such a large percentage of those admitted were of foreign birth is worthy of the careful consideration of students of statistics, and of all who are interested in the problem involved in the increase of the State's insane population. Both the laxity of our immigration laws and our methods of inquiry into the mental condition of immigrants furnish a legitimate and interesting field for investigation.

The question most frequently asked by visitors to the Institution is, "What percentage of your patients recover?" This question clearly indicates the deep interest taken by the public in the number of insane persons restored to normal mental health during the year. It is highly gratifying to report the recovery of 26.22 per cent. of the number of patients admitted during the past year, which is in excess of the percentage of recoveries for the previous year.

A history of hereditary taint was obtained in 22 per cent. of those admitted. While this percentage is larger than that obtained in previous years, had it been possible to obtain a full and complete history in all cases I am confident this percentage would be much greater. The hereditary basis of insanity is acknowledged each year as becoming more entitled to first thought in the etiology of mental affections.

The occupation of insane patients previous to admission is thought by many to play an important part in the causation of their mental aberration. Of the number admitted during the past year 160 were housemaids and domestics, which is 30 per cent. of the total admissions. This is interesting, but not in harmony with the contention of numerous statisticians.

From the table showing the nature of the mental disease of those admitted, we find that 21 per cent. had some form of mental depression, commonly classified as melancholia, 28 per cent. mental exaltation or mania in some form, and 24 per cent. the mental deterioration known as dementia and including paretic dementia.

The insanity in 81 cases was complicated by disease of the circulatory system, arteriosclerosis being a prominent symptom in 49 of these cases.

During the year 157 patients died. This is a decrease in the rate, since in the preceding year 177 deaths occurred with the population one hundred and twenty-three less. The death rate for the year, based upon the total number under treatment was 6.77 per cent., as contrasted with 8.06 per cent. for the year previous. Twenty-one per cent. of the number who died had suffered from senile dementia, and an equal percentage from parietic dementia. The direct causes of death in most of these were pulmonary complications and exhaustion. Tuberculosis, pneumonia, the various forms of nephritis and the several inflammations, acute and chronic, of the cardio-vascular system were the most prominent contributing causes of death.

Two patients—one man and one woman—were admitted according to law on regular commitment papers and the Judges who reviewed these papers did not find sufficient data upon which to issue orders of approval. Upon receipt of orders of disapproval setting forth that the Court had insufficient evidence, the patients were discharged.

LAWS GOVERNING COMMITMENTS AND JUDICIAL ACTION ON COMMITMENTS.

The most recent act regulating the commitment of insane persons and providing for judicial approval is not void of defects which work much unnecessary inconvenience to State Hospital officers and complicate Hospital records. The laws which in some parts have force in regulating the commitment, admission, the judicial approval, source of maintenance, legal classification, manner of discharge from custody, residence, legal settlement, transfer of patients from one institution to another, continuance of Court orders, etc., etc., are numerous, cumbersome, conflicting and often misleading. Even experienced lawyers have difficulty in advising their clients relative to these matters. There is clearly need for the passage of a law which will embody in a condensed form all the essential features of the now existing statutes, and this Act should repeal all other Acts relative to the insane,

in toto. To accomplish this it may be necessary for the Governor to appoint a Commission for this specific duty.

A detailed criticism cannot be consistently made in this report, but a cursory study of the "Poor Laws" of 1846 and the following up of the various Acts now having force and relating to State asylums, County asylums, State hospitals, County hospitals for the insane, etc., will give convincing proof to any man with a legal mind that he is in the midst of complications which need attention.

A few specific references may serve to make more clear my contentions. It is now a common practice of the Courts to decline to make an order of approval or disapproval in the case of a legally admitted insane person if the patient has died or has been discharged before the Court has found it convenient to review the case. This leaves the Hospital authorities without a legal classification of such patient; it further leaves in doubt in many cases the legal settlement and the proper source of maintenance. This state of affairs has frequently obtained when the patient remained in the Hospital for a period longer than fifteen days after the receipt by the Justice or Judge of a certified copy of the written request and physicians' certificates as provided by law, and without a Court order of continuance being issued.

The law directs that the "said justice or judge shall conclude said inquiry within fifteen days after the presentation to him of said application and certificates, or copies thereof, certified as aforesaid, if he can conveniently do so, but if said inquiry cannot be conveniently concluded within that time, then said justice or judge shall certify that a longer time than fifteen days is necessary to conclude said inquiry, and shall certify how much longer time is required * * *."

The law does not seem to contemplate repeated continuances, but implies that the first continuance shall be of such reasonable duration as will enable the Judge to complete his inquiry before the expiration of the time named in such continuance.

There does not appear to be anything in the law which warrants a refusal to issue an order of approval or disapproval in cases where the patient dies or is discharged before inquiry

is held or during the time covered by a continuance, but the Act seems to be sufficiently indefinite to permit it.

Numerous continuances have been issued under such conditions and where patients have died or been discharged Court orders have not been issued on the ground that the last continuance completed the record. This has frequently been the practice of the Essex County Court. For example: In the case of Henry Vozna, admitted July 16th, 1907, ten consecutive continuances were issued by the Court or the officers representing the Court and these various orders of continuance were issued to have effect until September 30th, 1908, when an order was finally made. This order was dated September 24th, 1908, more than one year and two months after the patient was admitted.

CONVICTS AND CRIMINALS.

I have with only negative results so frequently, in detail, called attention to the pernicious influence which insane convicts and insane criminals exert among the non-criminal sick of this Hospital, that only the extremely imperative nature of the duty impels me to again make official record of this perplexing and objectionable state of affairs.

There were at the close of this Hospital year 71 convicts and 39 insane criminals on the wards of the Hospital. No citizen of the State wants his sick relatives or friends subjected to the associations and influence of convicts and criminals. Other States provide for the segregation of this class, and it would be a credit to New Jersey to follow their good example.

A separate building should be constructed for this class and located in the central part of the State. The taking away of such patients would to that extent relieve the over-crowded condition or, if deemed proper, make room for the admission of an equal number of non-criminal patients.

FIRE AT NURSES' COTTAGE.

On the twenty-sixth day of November, 1907, just at the retiring hour for the nurses, a fire was discovered in the dust-chute at the Nurses' Cottage. The fire spread so rapidly that it was a difficult matter for the nurses to escape. Several who were cut off from the stairway by the flames jumped from the second story windows. Three of them sustained painful injuries. The Hospital Fire Brigade responded to the call, but was unable to extinguish or control the flames and the Morristown Fire Department was notified and responded promptly. They, in conjunction with the Hospital corps and the local fire company at Morris Plains depot, finally succeeded in extinguishing the fire, after the building was destroyed to more than one-half the extent of its value.

This fire, which occurred among persons in full possession of their reason, and placed them in great peril, served to impress all who are responsible for the care of the insane in this Hospital with the grave responsibility and danger of fire in the Hospital buildings proper.

The new spiral fire escapes now being constructed for the use of the Main Building and the Dormitory Building will be a source of much comfort and a matter of decided protection. These fire-escapes along with the new fire alarm system will afford the institution much greater protection than it has ever had.

TUBERCULAR PATIENTS.

The Sixth International Congress on Tuberculosis was held in Washington, D. C., in September and October, 1908. Practically every nation was represented and the Congress was composed of the distinguished and able physicians of the world. Mr. Homer Folks, in a paper before this Congress, estimated that the cost per annum to the State of New York by death from tuberculosis is fifteen millions of dollars, and by sickness an additional sixty millions. This estimate in dollars forcibly presents the extensive ravages this disease is making in the human family, and impresses upon us the im-

portance of making a vigorous effort to protect our fellow-men by an endeavor to stamp it out wherever it may be found.

Among the cardinal principles which that Congress laid down to guide us in the protection of the public and the stamping out of the disease, are to provide: (1) Isolation; (2) pure air and sunshine; (3) nutritious diet; (4) judiciously selected outdoor exercise. Every State Hospital should be equipped to provide these.

Tuberculosis is such a dread disease and has played such havoc with the human race that the whole world seems ready to act in concert in an effort to exterminate it.

I deem it proper to again direct your attention to the fact that no provision is made for the proper isolation of our tubercular patients. The crowded condition of our wards makes satisfactory isolation impossible. I advise the purchase or construction of canvas tents in which such patients may be kept and given all the advantages of outdoor life, pure air and sunshine, and the great danger of general ward contamination and infection be minimized.

The State Board of Health now requires a report of all tubercular patients under treatment in or admitted to this Hospital. This shows that this important Commission fully recognizes the dangerous and infectious features of this disease and desires that provision be made to properly care for patients so afflicted with a view to protecting others against infection. Isolated cottages or tents appeals to me as being the most economical solution of the problem.

TREATMENT.

The treatment of our patients with a view toward their cure or the amelioration of their mental condition has received studious attention and has chiefly consisted of assigning suitable employment to those capable of engaging in any form of industry; supplying indoor and outdoor amusements in such variety as our means would permit; prescribing nutritious and properly selected diet; the use of hydroth-

erapy and electrotherapy, and such drugs as have been indicated in each particular case.

The work done in the newly equipped hydrotherapeutic and electrical departments has been of a gratifying character. More than two thousand electrotherapeutic treatments were given during the year and uniformly good results obtained. In the department of hydrotherapy for women 4,896 treatments were given, and in the department of hydrotherapy for men, which has only been in operation since June 1st, 1908, 1,340 treatments were given.

These treatments mainly consisted of baths in the hot-air cabinets, circular, jet and electric light baths, the Scotch douches, the perineal standing and the perineal sitting baths, the sitz bath and general massage.

LABORATORY WORK.

Dr. H. Austin Cossitt has submitted to me a written report of the work done by him and his assistants in the laboratory. The work of this department has been conducted in studious connection with bedside observations of the sick and has been of much value in making diagnoses and guiding treatment.

The popular idea seems to be that a pathological laboratory of a hospital for the insane is devoted to making autopsies and the examinations of specimens taken from the brain substance or other parts of the nervous system of patients who have died. A laboratory conducted upon such restricted lines would fall far short of the true standard, and be of comparatively little value to an institution of this kind.

Dr. Cossitt's report shows that during the year eighteen autopsies were made and that in addition to these, the following scientific examinations or investigations were conducted in connection with his work: Urinalyses, 978; blood examinations, etc., 185; throat examinations, 36; examinations of pus, 52; examinations of body fluids, 29; examinations of pathological tissue specimens, 58; cytodiagnoses, 19; examinations for tubercle bacilli, 209; ophthalmic reactions, 27; miscellaneous examinations, 105—making a total of

1,716. The character of these examinations makes clear to all who are faintly familiar with laboratory work the fact that the relations of this department and clinical bedside studies have necessarily been very intimate.

Dr. Cossitt calls attention to the incomplete equipment and unsatisfactory condition of the photomicrographic room. This room needs gas, water, tables, sinks and shelving. The proper fitting up of this room would call for an appropriation of one thousand dollars and the disuse of the valuable apparatus therein is operating seriously towards its depreciation.

OVERCROWDING OF THE HOSPITAL.

I feel that the attention of the Governor and the Legislature should be directed to the crowded condition of this Hospital, and the importance of taking this matter under serious consideration at once.

This institution was taxed to its full normal capacity on July 20th, 1904, when the insane population was 1,600. Since that time it has been a matter of crowding patients in wherever a place could be made. This manner of disposing of patients admitted is at the expense of the welfare of those already in the hospital and gives unhygienic and unscientific conditions to those newly admitted.

In view of the fact that a hospital for the insane cannot be built in a few days or in a few months, I have in my previous reports called attention to the matter of building a third State Hospital in another part of the State. If action were immediately taken in this matter, under ordinary conditions relief would not come to this Hospital, and to the one at Trenton for at least two years. With both these institutions overcrowded, it is clear that with the rapidly increasing insane population, the conditions at that time will be more than simply serious. This is a problem too important in character to be overlooked. The results of delay are too serious to provide reasonable excuses for inattention.

The laws governing the admission of patients to the State Hospitals of New Jersey make it obligatory upon the institution authorities to receive all patients coming with prelim-

inary commitment papers executed in accordance with the legally prescribed form. Under these legal conditions overcrowding may continue indefinitely whatever may be the disastrous results. In numerous States patients are only admitted when vacancies exist. This order of procedure protects a State Institution against the disastrous results of being over-populated and impresses upon the public the imperative duty of providing suitable accommodations for the insane.

Under our system of admission and detention of insane patients, the State Hospital can be overcrowded until the cardinal principles of hygiene are violated, sanitary laws ignored, reasonable classification made impossible and scientific treatment a matter not to be considered. The officers of an overcrowded hospital for the insane are unable to isolate those patients suffering from contagious or infectious diseases, or properly separate the violent and dangerous patients from such as are entitled to quiet quarters or incapable of protecting themselves from the attacks of those violently excited and agitated.

The further enlargement of this Hospital would be unwise. I therefore suggest that relief should be provided by the construction of a hospital for the insane in the Southern part of the State.

COTTAGE FOR MALE NURSES.

I feel it my duty to again call your attention to the urgent need for a cottage for men nurses, on the order of the one built in 1905 for women nurses. The overcrowded condition of the hospital makes it imperative to occupy every available space that offers a place for a patient. Under such conditions the State must either at once build for patients or in some way make room for them. The construction of a cottage for nurses will give relief more promptly and bridge over the situation commendably and satisfactorily for the time being.

This cottage is needed because it will vacate about one hundred beds and give place to that number of patients. The Hospital is now overcrowded and patients are arriving

daily. There is no way of the State avoiding its obligation to provide for its insane. It will be more economical to build for the nurses than to build for insane patients.

Nurses are entitled to separate living quarters. Their duties are arduous, their hours long and pay small; they should at least be given something in the way of homelike life during their sleeping hours and the time they are off duty.

To build for one hundred patients would cost about sixty thousand dollars; the construction of a nurses' cottage which will give us the one hundred beds vacated by nurses will cost about thirty thousand dollars. This plan of relief is therefore advisable on the grounds of economy and the proper consideration for our nurses.

IMPROVEMENTS.

A hydrotherapeutic department has been established and fully equipped in the Men's Department of the Main Building. It has been in active operation for five months and during that period 1,340 baths have been given in the treatment of such forms of mental disorders as are benefitted by hydrotherapy. These baths are prescribed by the physicians as scientific remedial measures and carefully recorded. The results have been highly gratifying. In the treatment of agitated patients these have proved to be markedly beneficial.

A special room has been fitted up and fully equipped for the treatment of diseases of the eye, ear, nose and throat.

A number of other minor improvements have been made to meet the demands of the rapidly growing institution.

The United States Post Office Department has established an office in the Main Building of the Hospital. It is a money order office and is a source of much convenience to the Institution. The name given this office is "Greystone Park." The Hospital now has four outgoing and four incoming mails.

WASTEFUL AND UNSANITARY TOILETS.

The present method of flushing the urinals in the Male Department of both buildings by a continuous flow of water

is very unsatisfactory from the standpoints of hygiene and economy. The constant flow in these toilets is an enormous drain upon our water supply at all times, but particularly serious during the dry season, when it requires much care to make the supply scantily meet the demand. Moreover, the present system does not accomplish the desired purpose—that of thoroughly flushing and cleansing so that unpleasant odors shall not pervade the lavatories and the wards into which they open. A system for intermittent flushing would be a great improvement in that it would more thoroughly flush the urinals, and at the same time greatly protect the limited water supply. Compared with the advantages to be gained the cost entailed by making such alterations would be small. The amount expended in making such a change would be returned manyfold yearly to the Hospital by the amount of water saved.

INCREASE OF MEDICAL STAFF.

The year has been an unusually trying one. With the steadily increasing insane population of the house there are proportionately presented additional responsibilities and perplexing problems. The work of my department has greatly increased and I am of the opinion that in order to give to the patients the professional attention they need and are entitled to, at least two more physicians should be appointed upon the medical staff. There are at present seven physicians upon the staff, including the Medical Director. These seven have to make elaborate clinical notes, supervise and dictate the extensive Hospital records, such as are required by law to be kept, respond to the numerous inquiries made by persons visiting patients, as well as those made through letters of inquiry and over the phone. To these must be added the daily routine professional work.

In six months there will be an average of 300 patients to each physician. In the State of New York a physician is appointed to every 150 patients. Upon this basis six additional members would be added to our staff.

CHAPEL SERVICES.

The following clergymen conducted religious services in the chapel according to the schedule, and to them or their successors a similar schedule will be sent, so that the religious services will be provided for officially:

Rev. Edward J. Ellard, Roman Catholic, Morris Plains.
 Rev. Dr. Ralph B. Urmey, Methodist, Morristown.
 Rev. Dr. William H. Hughes, Episcopalian, Morristown.
 Rev. Oliver C. Horsman, Baptist, Morristown.
 Rev. W. W. Hammond, Presbyterian, Morris Plains.

SCHEDULE OF CHAPEL SERVICES FROM NOVEMBER 1st, 1908

November	1st.—Roman Catholic.	May	2nd.—Methodist.
"	8th.—Methodist.	"	9th.—Baptist.
"	15th.—Baptist.	"	16th.—Episcopal.
"	22nd.—Episcopal.	"	23rd.—Presbyterian.
"	29th.—Presbyterian.	"	30th.—Roman Catholic.
December	6th.—Roman Catholic.	June	6th.—Methodist.
"	13th.—Methodist.	"	13th.—Baptist.
"	20th.—Baptist.	"	20th.—Episcopal.
"	27th.—Episcopal.	"	27th.—Presbyterian.
January	3rd.—Presbyterian.	July	4th.—Roman Catholic.
"	10th.—Roman Catholic.	"	11th.—Methodist.
"	17th.—Methodist.	"	18th.—Baptist.
"	24th.—Baptist.	"	25th.—Episcopal.
"	31st.—Episcopal.	August	1st.—Presbyterian.
February	7th.—Presbyterian.	"	8th.—Roman Catholic.
"	14th.—Roman Catholic.	"	15th.—Methodist.
"	21st.—Methodist.	"	22nd.—Baptist.
"	28th.—Baptist.	"	29th.—Episcopal.
March	7th.—Episcopal.	September	5th.—Presbyterian.
"	14th.—Presbyterian.	"	12th.—Roman Catholic.
"	21st.—Roman Catholic.	"	19th.—Methodist.
"	28th.—Methodist.	"	26th.—Baptist.
April	4th.—Baptist.	October	3rd.—Episcopal.
"	11th.—Episcopal.	"	10th.—Presbyterian.
"	18th.—Presbyterian.	"	17th.—Roman Catholic.
"	25th.—Roman Catholic.	"	24th.—Methodist.
		"	31st.—Baptist.

"Each clergyman has an equal representation and is responsible for the services on the date set apart for him. If, for any reason, he is unable to attend, it is understood that he will provide a substitute, with whom he is to arrange,

so that the account of the Hospital can be kept with the clergyman responsible for the date, not with the substitute."

Adopted by the Board of Managers at a regular meeting, September 1st, 1896.

CHANGES IN THE MEDICAL STAFF.

Dr. H. A. Cossitt, Second Assistant Physician and Pathologist, after a faithful service of eight years, resigned in August, 1908, the resignation to take effect November 1st, 1908.

At a meeting of the Board of Managers held August 13th, 1908, Dr. Frederick C. Horsford was promoted to the position of Second Assistant Physician and Pathologist, made vacant by Dr. Cossitt's resignation. Dr. A. J. Carroll was made Third Assistant, Dr. E. Moore Fisher was made Fourth Assistant and Dr. Louis K. Henschel was made Fifth Assistant.

After a competitive examination held in the Hospital September 30th, 1908, Dr. Blase Cole, of Hainesville, N. J., was at a regular meeting of the Board of Managers, elected to the position of Sixth Assistant Physician.

CONCLUSION.

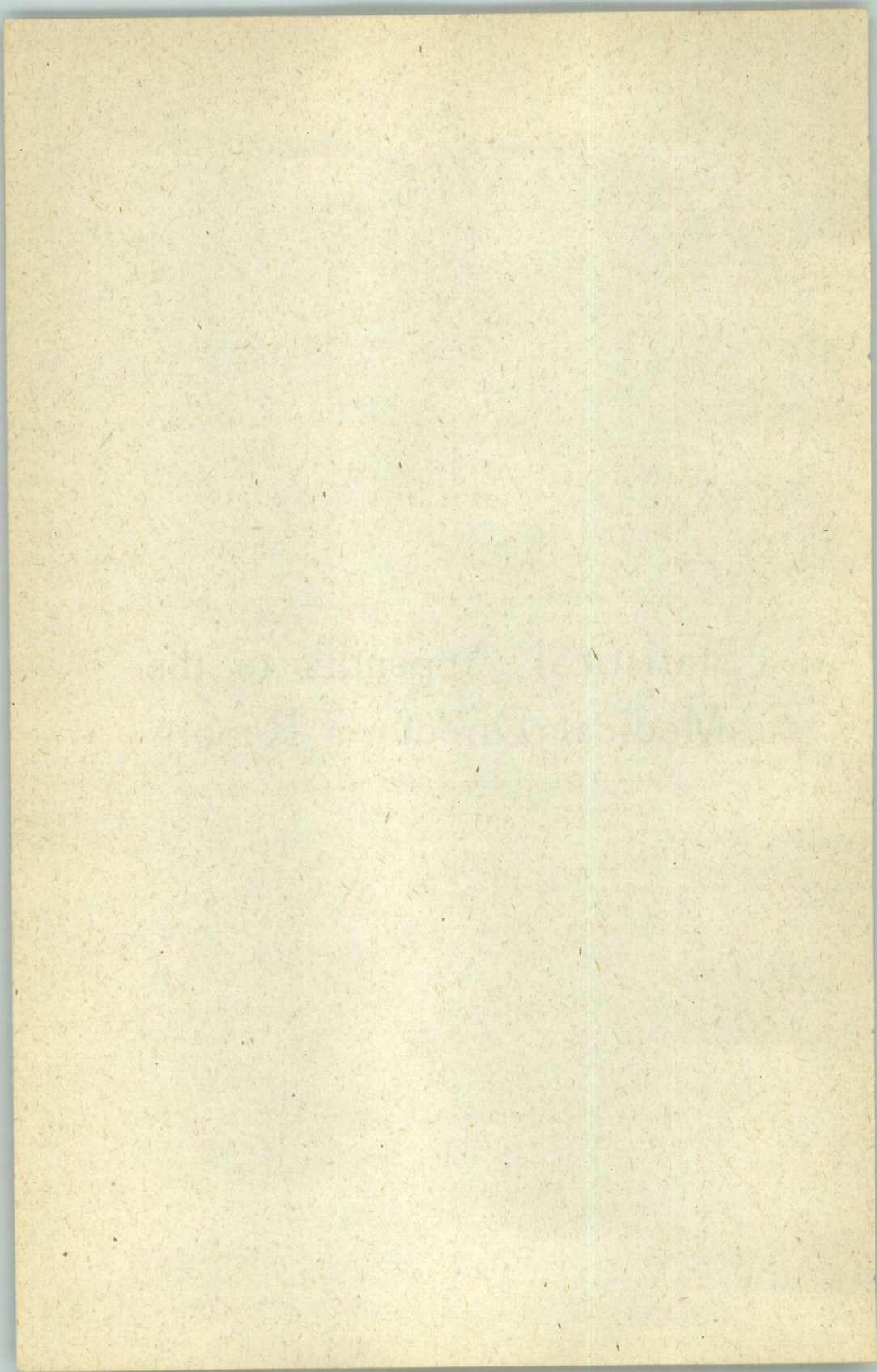
I desire in conclusion, Gentlemen, to record my appreciation of your wise counsel and encouragement in the performance of the duties of my post. I have had your support in all that tended to advance the best interests of my work and promote the welfare of the patients under my care. With grateful acknowledgement of your advice and guidance, this report is

Respectfully submitted,
BRITTON D. EVANS,
Medical Director.

October 31st, 1908.

Statistical Appendix to the
Medical Director's Report

(37)



STATISTICAL APPENDIX TO MEDICAL DIRECTOR'S REPORT.

TABLE I.

SHOWING THE ADMISSIONS, DISCHARGES AND DEATHS DURING THE YEAR ENDING
OCTOBER 31ST, 1908.

	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
In the Hospital, October 31st, 1907.	917	907	1,824
Patients admitted—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
First admissions.	243	191	434
Re-admissions.	28	33	61
Total.	271	224	495
Total number under treatment during the year.	1,188	1,131	2,319
Patients discharged—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Recovered.	67	63	130
Improved.	33	44	77
Unimproved.	10	.	10
Died.	84	73	157
Not insane.	1	1	2
Total.	195	181	376
Remaining in Hospital—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Public.	907	857	1,764
Private.	86	93	179
Total.	993	950	1,943
Whole number admitted from August 17th, 1876, to October 31st, 1908.	4,628	4,325	8,953
Whole number discharged during the same period of time—	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Recovered.	1,088	1,085	2,173
Improved.	662	740	1,402
Unimproved.	272	310	582
Died.	1,581	1,239	2,820
Eloped.	31	.	31
Not insane.	1	1	2
Total.	3,635	3,375	7,010
Remaining October 31st, 1908.	993	*950	1,943

*One female patient carried on elopement.

TABLE II.

MONTHLY ADMISSIONS, DISCHARGES AND AVERAGES.

	ADMISSIONS			DISCHARGES AND DEATHS			DAILY AVERAGES		
	Men	Women	Total	Men	Women	Total	Men	Women	Total
1907.									
November.....	19	14	33	8	12	20	921.34	905.70	1,827.04
December.....	26	16	42	12	15	27	933.64	908.37	1,842.01
1908.									
January.....	28	17	45	11	8	19	948.19	909.74	1,857.93
February.....	28	13	41	15	9	24	960.75	919.43	1,880.18
March.....	24	28	52	14	12	26	973.42	928.51	1,901.93
April.....	16	21	37	21	23	44	974.13	933.62	1,907.75
May.....	13	18	31	13	12	25	972.89	936.69	1,909.58
June.....	26	24	50	22	18	40	972.68	939.07	1,911.75
July.....	30	23	53	15	14	29	980.58	950.15	1,930.73
August.....	22	13	35	22	16	38	995.50	954.09	1,949.59
September.....	19	16	35	20	19	39	990.70	947.10	1,937.80
October.....	20	21	41	22	23	45	994.70	949.06	1,943.76
Total.....	271	224	495	195	181	37			
For the year.....							968.21	931.79	1,900.00

TABLE III.

NUMBER OF ATTACKS OF THOSE ADMITTED.

ATTACK—	MEN.	WOMEN.	TOTAL.
First.....	198	155	353
Second.....	26	34	60
Third.....	5	10	15
Fourth.....	2	9	11
Fifth and over.....	8	7	15
Unascertained.....	32	9	41
Total.....	271	224	495

TABLE IV.

AGE WHEN ATTACKED OF THOSE ADMITTED.

AGE—	MEN.	WOMEN.	TOTAL.
Under fifteen years.	15	3	18
Fifteen to twenty years.	16	15	31
Twenty to twenty-five years.	23	34	57
Twenty-five to thirty years.	28	32	60
Thirty to thirty-five years.	18	21	39
Thirty-five to forty years.	35	20	55
Forty to forty-five years.	27	24	51
Forty-five to fifty years.	26	16	42
Fifty to sixty years.	20	16	36
Sixty to seventy years.	7	17	24
Seventy to eighty years.	10	5	15
Eighty years and over.	3	..	3
Unascertained.	43	21	64
Total.	271	224	495

TABLE V.

NATIVITY OF THOSE ADMITTED.

NATIVITY—	MEN.	WOMEN.	TOTAL
California.	1	..	1
Connecticut.	1	2	3
Georgia.	2	..	2
Illinois. . . . .	..	1	1
Indiana. . . . .	..	1	1
Iowa.	1	..	1
Michigan. . . . .	..	1	1
Maryland.	1	1	2
Massachusetts.	3	2	5
New Hampshire.	2	..	2
New Jersey.	72	40	112
New York.	23	10	33
North Carolina.	1	..	1
Pennsylvania.	11	5	16
South Carolina.	1	2	3
Virginia.	2	2	4
United States.	50	62	112
Armenia.	1	..	1
Austria.	6	10	16
Belgium.	1	..	1
Bermuda.	1	..	1
Bohemia.	1	2	3
Canada.	2	2	4
Central America. . . . .	..	1	1
Denmark.	1	..	1
England.	4	6	10
France.	5	1	6

NEW JERSEY STATE HOSPITAL.

NATIVITY—	MEN.	WOMEN.	TOTAL.
Germany.....	28	25	53
Holland.....	4	3	7
Hungary.....	2	4	6
Ireland.....	14	17	31
Italy.....	6	6	12
Norway.....	1	..	1
Poland.....	2	..	2
Roumania.....	..	1	1
Russia.....	4	7	11
Scotland.....	3	3	6
Spain.....	1	..	1
Sweden.....	1	1	2
Switzerland.....	3	2	5
Wales.....	1	..	1
Unascertained.....	8	4	12
Total.....	271	224	495

TABLE VI.

RESIDENCE OF THOSE ADMITTED.

COUNTIES—	MEN.	WOMEN.	TOTAL.
Atlantic.....	..	1	1
Bergen.....	43	39	82
Camden.....	1	1	2
Cumberland.....	1	..	1
Essex.....	62	49	111
Hudson.....	40	22	62
Hunterdon.....	..	1	1
Mercer.....	1	..	1
Middlesex.....	2	..	2
Morris.....	24	18	42
Passaic.....	46	45	91
Somerset.....	1	2	3
Sussex.....	5	5	10
Union.....	38	28	66
Warren.....	6	12	18
New York.....	1	1	2
Total.....	271	224	495

TABLE VII.

CIVIL CONDITION OF THOSE ADMITTED.

CIVIL CONDITION—	MEN.	WOMEN.	TOTAL.
Single.....	106	84	190
Married.....	129	95	224
Widowed.....	26	39	65
Divorced.....	3	2	5
Unascertained.....	7	4	11
Total.....	271	224	495

TABLE VIII.

OCCUPATION OF THOSE ADMITTED.

OCCUPATION—	MEN.	WOMEN.	TOTAL.
Actors.....	..	1	1
Agents.....	4	..	4
Apprentices.....	3	..	3
Architects.....	1	..	1
Artisans.....	5	..	5
Artists.....	..	1	1
Auditors.....	1	..	1
Bakers.....	1	..	1
Barbers.....	1	..	1
Bartenders.....	1	..	1
Beer bottlers.....	1	..	1
Blacksmiths.....	3	..	3
Bookbinders.....	1	..	1
Bookkeepers.....	3	..	3
Booksellers.....	1	..	1
Brass finishers.....	2	..	2
Brokers.....	2	..	2
Butchers.....	2	..	2
Butlers.....	1	..	1
Cabinetmakers.....	1	..	1
Carpenters.....	13	..	13
Carriagemakers.....	2	..	2
Chemists.....	2	..	2
Clergymen.....	1	..	1
Clerks.....	19	2	21
Coachmen.....	1	..	1
Conductors.....	1	..	1
Confectioners.....	2	..	2
Decorators.....	1	..	1
Domestics.....	..	65	65
Druggists.....	3	..	3
Electrical engineers.....	1	..	1
Engineers.....	3	..	3
Expressmen.....	1	..	1
Farmers.....	8	..	8
Firemen.....	3	..	3
Gardeners.....	1	..	1
Glaziers.....	1	..	1
Horsemen.....	2	..	2
Hotel keepers.....	1	..	1
Housekeepers.....	..	6	6
Housewives.....	..	95	95
Inspectors.....	1	..	1
Iron estimators.....	1	..	1
Ironworkers.....	1	..	1
Laborers.....	37	..	37
Lawyers.....	3	..	3
Live stock dealers.....	1	..	1
Machinists.....	13	..	13
Managers.....	1	..	1
Masons.....	2	..	2

OCCUPATION—	MEN.	WOMEN.	TOTAL.
Manufacturers.....	1	..	1
Merchants.....	6	..	6
Mill hands.....	5	10	15
Miners.....	1	..	1
Motormen.....	1	..	1
Musicians.....	1	..	1
Nurses.....	..	5	5
Office boys.....	2	..	2
Painters.....	10	..	10
Peddlers.....	1	..	1
Photographers.....	1	..	1
Physicians.....	3	..	3
Pianomakers.....	1	..	1
Playwrights.....	1	..	1
Plumbers.....	3	..	3
Porters.....	1	..	1
Printers.....	1	..	1
Ranchmen.....	1	..	1
Reporters.....	1	..	1
Salesmen.....	9	..	9
Saloonkeepers.....	1	..	1
Seamstresses.....	..	3	3
Shoemakers.....	3	..	3
Silkworkers.....	1	..	1
Silversmiths.....	1	..	1
Soldiers.....	1	..	1
Surveyors.....	1	..	1
Students.....	3	1	4
Tailors.....	1	..	1
Teachers.....	..	4	4
Teamsters.....	3	..	3
Telegraphers.....	1	..	1
Typewriters.....	..	1	1
Waiters.....	1	..	1
Watchmen.....	1	..	1
Weavers.....	8	..	8
No occupation.....	26	30	56
Unascertained.....	9	..	9
Total.....	271	224	495

TABLE IX.

MENTAL DISEASE OF THOSE ADMITTED.

MENTAL DISEASE—	MEN.	WOMEN.	TOTAL.
Mania, acute.	16	44	60
Mania, chronic.	1	2	3
Mania, epileptic.	3	2	5
Mania, puerperal. . . . .	..	5	5
Mania, recurrent.	4	7	11
Mania, toxic.	47	12	59
Melancholia, acute.	22	49	71
Melancholia, agitata.	4	13	17
Melancholia, chronic.	3	4	7
Melancholia, hypochondriacal.	3	..	3
Melancholia, recurrent.	1	7	8
Dementia, epileptic.	7	1	8
Dementia, organic.	5	3	8
Dementia, parietic.	49	7	56
Dementia, senile.	26	15	41
Dementia, terminal.	5	5	10
Imbecility.	15	..	15
Imbecility, with mania. . . . .	..	1	1
Imbecility, with epilepsy.	1	1	2
Insanity, adolescent.	44	36	80
Paranoia.	14	9	23
Not insane.	1	1	2
Total.	271	224	495

TABLE X.

MANNER OF SUPPORT OF THOSE ADMITTED.

How SUPPORTED—	MEN.	WOMEN.	TOTAL.
State.	95	65	160
County.	123	118	241
Private.	53	41	94
Total.	271	224	495

TABLE XI.

ALLEGED CAUSES OF INSANITY OF THOSE ADMITTED.

CAUSES—	MEN.	WOMEN.	TOTAL.
Physical:			
Apoplexy.....	2	..	2
Arrest of cerebral development.....	1	..	1
Cerebral embolism.....	..	1	1
Cerebral hemorrhage.....	1	2	3
Childbirth.....	..	7	7
Climacteric.....	..	4	4
Congenital.....	3	4	7
Epilepsy.....	7	2	9
Exposure.....	1	1	2
General ill health.....	6	12	18
Goitre.....	..	1	1
Heatstroke.....	1	..	1
Heredity.....	10	20	30
Infantile eclampsia.....	1	..	1
Insomnia.....	1	..	1
Intemperance and other excesses.....	53	12	65
La Grippe.....	1	2	3
Masturbation.....	10	..	10
Overwork.....	10	2	12
Predisposition.....	6	13	19
Pregnancy.....	..	3	3
Puerperium.....	..	9	9
Scarlet fever.....	1	..	1
Senility.....	12	6	18
Spinal meningitis.....	1	..	1
Sunstroke.....	3	..	3
Syphilis.....	18	2	20
Traumatism.....	13	1	14
Typhoid fever.....	..	1	1
Total.....	162	105	267
Moral:			
Disappointed affections.....	1	6	7
Domestic troubles.....	2	2	4
Financial reverses.....	4	3	7
Grief.....	3	4	7
Religious excitement.....	1	3	4
Shock.....	..	5	5
Worry.....	19	14	33
Total.....	30	37	67
Total physical.....	162	105	267
Total moral.....	30	37	67
Unassigned.....	79	82	161
Total.....	271	224	495

TABLE XII.

COMPLICATIONS OF THOSE ADMITTED.

COMPLICATIONS—	MEN.	WOMEN.	TOTAL.
Abscess.....	1	1	2
Acne.....	..	4	4
Alopecia areata.....	..	1	1
Amenorrhoea.....	..	6	6
Anaemia.....	..	7	7
Antiflexion of uterus.....	..	1	1
Aphasia.....	..	1	1
Apthous ulcers.....	..	1	1
Arteriosclerosis.....	17	32	49
Arteritis, chronic.....	..	1	1
Blindness.....	1	2	3
Bronchitis.....	..	6	6
Cardiac hypertrophy.....	..	1	1
Cataracts.....	1	1	2
Cervical erosion.....	..	1	1
Cholelithiasis.....	..	1	1
Conjunctivitis.....	..	1	1
Constipation.....	..	4	4
Deafness.....	3	..	3
Dermographia.....	..	6	6
Dysmenorrhoea.....	..	2	2
Eczema.....	..	2	2
Emphysema.....	..	3	3
Endarteritis.....	1	..	1
Endocarditis.....	..	21	21
Endometritis.....	..	2	2
Epilepsy.....	9	7	16
Erythema.....	..	1	1
Fracture.....	..	1	1
Gingivitis.....	..	1	1
Goitre.....	..	2	2
Gunshot wound.....	..	1	1
Hemiplegia.....	6	3	9
Hemorrhoids.....	..	1	1
Hernia.....	7	5	12
Herpes zoster.....	..	1	1
Hypertrophic cirrhosis.....	1	..	1
Ichthyosis.....	..	1	1
Laryngitis.....	..	1	1
Lentigo.....	..	1	1
Leucorrhoea.....	..	6	6
Lipoma.....	..	1	1
Locomotor ataxia.....	1	..	1
Menorrhagia.....	..	2	2
Muscular atrophy.....	..	1	1
Myocarditis.....	..	3	3
Myopia.....	..	1	1
Nephritis.....	14	23	37
Obstipation.....	..	4	4
Oophoritis.....	..	1	1
Organic heart disease.....	1	4	5
Osteomyelitis.....	..	1	1

COMPLICATIONS—	MEN.	WOMEN.	TOTAL.
Otitis media.	1	..	1
Paralysis agitans. . . . .	..	1	1
Peripheral neuritis. . . . .	..	6	6
Pharyngitis.	1	4	5
Pleurisy.	2	..	2
Pregnancy. . . . .	..	2	2
Presbyopia. . . . .	..	10	10
Pressure paralysis. . . . .	..	1	1
Prolapsus uteri. . . . .	..	1	1
Pulmonary tuberculosis.	5	3	8
Retinitis. . . . .	..	1	1
Retroflexion of uterus. . . . .	..	1	1
Rheumatism.	1	..	1
Rhinitis. . . . .	..	1	1
Sclerosis, disseminated.	1	..	1
Serpiginous syphilide. . . . .	..	1	1
Strabismus. . . . .	..	1	1
Syphilitic arthritis. . . . .	..	1	1
Syphilis.	6	..	6
Tabes dorsalis.	1	..	1
Tachycardia. . . . .	..	1	1
Tubercular laryngitis.	1	..	1
Ulcers of legs. . . . .	..	1	1
Uraemia. . . . .	..	1	1
Uterine fibroid. . . . .	..	1	1
Varicose veins.	1	3	4
Varicocele.	1	..	1
Homicidal tendencies.	56	39	95
Suicidal tendencies.	52	45	97
Without complications.	140	65	205

In this table patients who had a number of complications have been noted more than once; therefore the total would have no significance.

TABLE XIII.

HEREDITY OF THOSE ADMITTED.

HEREDITY—	MEN.	WOMEN.	TOTAL.
Insanity in family.	46	67	113
Hereditary taint denied.	125	48	173
Hereditary history unobtainable.	100	109	209
Total.	271	224	495

TABLE XIV.

DURATION OF DISEASE BEFORE ADMISSION.

DURATION—	MEN.	WOMEN.	TOTAL.
Under one month.	57	56	113
One to three months.	35	43	78
Three to six months.	36	28	64
Six to twelve months.	29	24	53
One to two years.	27	14	41
Two to three years.	16	10	26
Three to four years.	12	7	19
Four to five years.	5	3	8
Five to ten years.	9	13	22
Ten to twenty years.	11	10	21
Over twenty years.	5	3	8
Unascertained.	29	13	42
Total.	271	224	495

TABLE XV.

AGE WHEN ATTACKED OF THOSE RESTORED.

AGE—	MEN.	WOMEN.	TOTAL.
Under fifteen years.	2	..	2
Fifteen to twenty years.	3	3	6
Twenty to twenty-five years.	10	8	18
Twenty-five to thirty years.	8	9	17
Thirty to thirty-five years.	6	7	13
Thirty-five to forty years.	11	8	19
Forty to forty-five years.	8	7	15
Forty-five to fifty years.	7	9	16
Fifty to sixty years.	6	3	9
Sixty to seventy years.	1	3	4
Unascertained.	5	6	11
Total.	67	63	130

TABLE XVI.

DURATION BEFORE ADMISSION OF THOSE RESTORED.

DURATION—	MEN.	WOMEN.	TOTAL.
Under one month.	23	25	48
One to three months.	11	11	22
Three to six months.	6	9	15
Six to twelve months.	9	5	14
One to two years.	5	3	8
Over two years.	8	7	15
Unascertained.	5	3	8
Total.	67	63	130

TABLE XVII.

DURATION OF TREATMENT OF THOSE RESTORED.

DURATION—	MEN.	WOMEN.	TOTAL.
Under one month.	1	1	2
One to two months.	7	2	9
Two to three months.	9	8	17
Three to four months.	9	6	15
Four to five months.	8	4	12
Five to six months.	4	8	12
Six to nine months.	10	10	20
Nine to twelve months.	4	7	11
Twelve to eighteen months.	6	7	13
Eighteen to twenty-four months.	4	3	7
Over two years.	5	7	12
Total.	67	63	130

TABLE XVIII.

MENTAL DISEASE OF THOSE RESTORED.

MENTAL DISEASE—	MEN.	WOMEN.	TOTAL.
Mania, acute.	10	16	26
Mania, puerperal. ....	..	1	1
Mania, recurrent.	1	7	8
Mania, toxic.	34	10	44
Melancholia, acute.	7	17	24
Melancholia, agitata.	2	2	4
Melancholia, chronic.	1	..	1
Melancholia, hypochondriacal.	4	..	4
Melancholia, recurrent. ....	..	4	4
Insanity, adolescent.	8	6	14
Total.	67	63	130

TABLE XIX.

AGE AT DEATH.

AGE—	MEN.	WOMEN.	TOTAL.
Ten to twenty years. ....	..	1	1
Twenty to twenty-five years.	4	1	5
Twenty-five to thirty years.	5	1	6
Thirty to thirty-five years.	3	5	8
Thirty-five to forty years.	9	9	18
Forty to forty-five years.	11	3	14
Forty-five to fifty years.	13	9	22
Fifty to sixty years.	14	14	28
Sixty to seventy years.	10	15	25
Seventy to eighty years.	10	10	20
Eighty to ninety years.	4	5	9
Over ninety years.	1	..	1
Total.	84	73	157

TABLE XX.

MENTAL DISEASE OF THOSE WHO DIED.

MENTAL DISEASE—	MEN.	WOMEN.	TOTAL
Mania, acute.	4	6	10
Mania, chronic.	2	2	4
Mania, epileptic.	2	..	2
Mania, recurrent. ....	..	2	2
Mania, toxic.	1	1	2
Melancholia, acute.	4	4	8
Melancholia, agitata.	2	3	5
Melancholia, chronic.	1	2	3
Melancholia, recurrent. ....	..	1	1
Melancholia, stuporous.	1	..	1
Dementia, epileptic.	1	1	2
Dementia, organic.	3	5	8
Dementia, parietic.	27	7	34
Dementia, senile.	16	17	33
Dementia, terminal.	13	18	31
Imbecility. ....	..	1	1
Insanity, adolescent.	5	2	7
Paranoia.	2	1	3
Total.	84	73	157

TABLE XXI.

CAUSES OF DEATH.

CAUSES—	MEN.	WOMEN.	TOTAL.
Mania:			
Acute, with acute nephritis.....	..	2	2
Acute, with exhaustion.....	2	1	3
Acute, with hypostatic pneumonia.....	..	1	1
Acute, with myocarditis.....	..	1	1
Acute, with pulmonary tuberculosis.....	2	1	3
Chronic, with edema of lungs.....	1	..	1
Chronic, with exhaustion.....	1	..	1
Chronic, with generalized tuberculosis.....	..	1	1
Chronic, with pleural empyema.....	..	1	1
Epileptic, with chronic nephritis.....	1	..	1
Epileptic, with convulsions.....	1	..	1
Recurrent, with chronic endocarditis.....	..	1	1
Recurrent, with pulmonary tuberculosis.....	..	1	1
Toxic, with hypertrophic cirrhosis.....	1	..	1
Toxic, with hypostatic pneumonia.....	..	1	1
Melancholia:			
Acute, with arteriosclerosis.....	..	1	1
Acute, with chronic endocarditis.....	..	1	1
Acute, with exhaustion.....	2	1	3
Acute, with pulmonary tuberculosis.....	2	1	3
Agitata, with exhaustion.....	1	3	4
Agitata, with pulmonary tuberculosis.....	1	..	1
Chronic, with chronic endocarditis.....	..	1	1
Chronic, with exhaustion.....	1	..	1
Chronic, with pulmonary tuberculosis.....	..	1	1
Recurrent, with pulmonary edema.....	..	1	1
Stuporous, with broncho-pneumonia.....	1	..	1
Dementia:			
Epileptic, with pulmonary tuberculosis.....	..	1	1
Epileptic, with status epilepticus.....	1	..	1
Organic, with arteriosclerosis.....	..	1	1
Organic, with cerebral hemorrhage.....	1	1	2
Organic, with exhaustion.....	1	2	3
Organic, with hypostatic pneumonia.....	..	1	1
Organic, with lobar pneumonia.....	1	..	1
Paretic, with acute catarrhal dysentery.....	1	..	1
Paretic, with apoplexy.....	2	..	2
Paretic, with chronic endocarditis.....	..	1	1
Paretic, with chronic nephritis.....	1	..	1
Paretic, with convulsions.....	4	1	5
Paretic, with exhaustion.....	12	1	13
Paretic, with gangrene of legs.....	1	..	1
Paretic, with general arteriosclerosis.....	..	1	1
Paretic, with hypostatic pneumonia.....	3	..	3
Paretic, with locomotor ataxia.....	1	..	1
Paretic, with organic heart disease.....	1	..	1
Paretic, with pneumonia.....	1	..	1
Paretic, with pulmonary edema.....	..	2	2
Paretic, with sub-dural hemorrhage.....	..	1	1
Senile, with acute lobar pneumonia.....	..	1	1

CAUSES—	MEN.	WOMEN.	TOTAL.
Senile, with acute catarrhal dysentery.	2	..	2
Senile, with acute peritonitis.	1	..	1
Senile, with arteriosclerosis.	1	..	1
Senile, with aspiration pneumonia.	1	..	1
Senile, with cellulitis.	1	..	1
Senile, with chronic arteritis. . . . .	..	1	1
Senile, with chronic endocarditis. . . . .	..	1	1
Senile, with chronic nephritis.	3	..	3
Senile, with exhaustion.	4	3	7
Senile, with hypostatic pneumonia.	1	10	11
Senile, with mammary carcinoma. . . . .	..	1	1
Senile, with pulmonary congestion.	1	..	1
Senile, with pulmonary tuberculosis.	1	..	1
Terminal, with acute intestinal obstruction.	1	..	1
Terminal, with carcinoma uteri. . . . .	..	1	1
Terminal, with cerebral hemorrhage.	1	..	1
Terminal, with chronic endocarditis.	1	3	4
Terminal, with chronic nephritis.	3	2	5
Terminal, with diabetic coma. . . . .	..	1	1
Terminal, with exhaustion.	3	1	4
Terminal, with gastric carcinoma. . . . .	..	1	1
Terminal, with hypostatic pneumonia. . . . .	..	1	1
Terminal, with locomotor ataxia.	2	..	2
Terminal, with pneumonia. . . . .	..	1	1
Terminal, with pulmonary edema.	1	..	1
Terminal, with pulmonary tuberculosis. . . . .	..	6	6
Terminal, with uremia. . . . .	..	1	1
Terminal, with uremic convulsions.	1	..	1
Paranoia:			
With apoplexy.	1	..	1
With chronic endocarditis. . . . .	..	1	1
With lobar pneumonia.	1	..	1
Imbecility:			
With sarcoma of rectum. . . . .	..	1	1
Insanity of adolescence:			
With apoplexy.	1	..	1
With exhaustion.	1	..	1
With lobar pneumonia. . . . .	..	1	1
With pulmonary congestion.	1	..	1
With pulmonary tuberculosis.	1	1	2
With tubercular laryngitis.	1	..	1
Total.	84	73	157

TABLE XXII.

SHOWING YEARLY INCREASE OF POPULATION SINCE OPENING OF INSTITUTION

YEAR—	MEN.	WOMEN.	TOTAL.	INCREASE.
October, 31st, 1876.....	159	183	342	..
October 31st, 1877.....	216	229	445	103
October 31st, 1878.....	227	253	480	35
October 31st, 1879.....	248	279	527	47
October 31st, 1880.....	277	309	586	59
October 31st, 1881.....	310	331	641	55
October 31st, 1882.....	321	346	667	26
October 31st, 1883.....	330	377	707	40
October 31st, 1884.....	371	374	745	38
October 31st, 1885.....	415	414	829	84
October 31st, 1886.....	415	441	856	27
October 31st, 1887.....	434	439	873	17
October 31st, 1888.....	463	441	904	31
October 31st, 1889.....	427	430	*857	...
October 31st, 1890.....	450	436	886	29
October 31st, 1891.....	455	443	898	12
October 31st, 1892.....	471	478	949	51
October 31st, 1893.....	509	500	1,009	60
October 31st, 1894.....	520	530	1,050	41
October 31st, 1895.....	541	575	1,116	66
October 31st, 1896.....	538	550	†1,088	...
October 31st, 1897.....	593	584	1,177	89
October 31st, 1898.....	618	618	1,236	59
October 31st, 1899.....	658	644	1,302	66
October 31st, 1900.....	696	693	1,389	87
October 31st, 1901.....	707	683	†1,390	1
October 31st, 1902.....	729	732	1,461	71
October 31st, 1903.....	744	761	§1,505	44
October 31st, 1904.....	789	812	1,601	96
October 31st, 1905.....	834	840	1,674	73
October 31st, 1906.....	872	907	1,779	105
October 31st, 1907.....	917	907	1,824	45
October 31st, 1908.....	993	950	1,943	119

*One hundred patients transferred to Essex County Hospital.

†Eighty-five patients transferred to Hudson County Hospital.

‡Twenty-five patients removed by Hudson and Passaic Counties.

§Nineteen private patients removed to Sailors' Snug Harbor, N. Y.

The Warden's Showing of
Resources and Liabilities with
Disbursements and
Requirements

(55)

The following showing of
the amount of the
the amount of the
the amount of the

WARDEN'S REPORT

*To the Board of Managers of the New Jersey State Hospital
at Morris Plains, N. J.*

GENTLEMEN—I have the honor to present to you as a part of the annual report of the business department for the fiscal year ending October 31st, 1908, the financial report, which shows an improved condition over that of last year and although slight, is worthy of mention. This financial report consists of a concise statement of our resources and liabilities, an abstract of accounts, with disbursements, and a schedule of requirements.

RESOURCES.

Due from Atlantic County as per bills rendered.	24.17
“ “ Bergen “ “ “ “	1,624.80
“ “ Camden “ “ “ “	40.91
“ “ Essex “ “ “ “	725.40
“ “ Hudson “ “ “ “	181.56
“ “ Hunterdon “ “ “ “	1,317.32
“ “ Morris “ “ “ “	1,634.90
“ “ Mercer “ “ “ “	23.26
“ “ Passaic “ “ “ “	7,248.57
“ “ Union “ “ “ “	2,847.10
“ “ Warren “ “ “ “	816.74
“ “ State Treasurer for support of County patients.	11,176.57
“ “ “ “ “ “ “ “ State Ind. patients.	8,101.72
“ “ “ “ “ “ “ “ Convict patients.	1,533.57
Credit balance with State Treasurer.	22,901.90
Due from State for support of patients, deficiency in appropriations.	5,952.00
Due from private patients as per bills rendered.	6,957.54
Clothing furnished patients since bills were rendered.	1,610.89
Clothing carried in stock in store room	5,173.82
Due for hides, grease, etc.	871.88
Petty expense account.	648.74

LIABILITIES.

Bills payable.	\$51,040.93
Pay roll for October.	12,515.95
Private patients, accounts paid beyond Oct. 31, 1908	8,547.20
Private patients, accounts unearned	2,948.96
Unclaimed wages, patients moneys and vouchers on which payment was stopped.	428.59
Excess resources above liabilities.	5,931.73
	<hr/>
	\$81,413.36
	<hr/>
	\$81,413.36

ABSTRACT OF ACCOUNTS

FOR THE FIVE MONTHS ENDING MARCH 31st, 1908.

HARRISON P. LINDABURY,

Treasurer.

Dr.

To balance October 31st, 1907.		\$2,438.63
To amount received for board, clothing and incidental expenses of county patients.	\$71,036.22	
To amount received for board, clothing and incidental expenses of private patients.	22,497.78	
To amount received from State Treasurer for county patients.	30,970.00	
To amount received from State Treasurer for board of convict patients.	3,947.14	
To amount received from State Treasurer for board and clothing of State indigent patients	21,159.43	
To amount received for hogs.	2,233.27	
To amount received for hides, fat, grease and bones.	1,513.02	
To amount received for hay.	519.78	
To amount received for incidentals.	555.83	
To amount received for interest.	69.00	
To amount received from John C. Eisele, President, Account of Fire, Nurses' Cottage.	11,000.00	\$165,501.47
		\$167,940.10
For seven months from April 1st, to Oct. 31st, 1908:		
To amount received from Counties	\$75,213.60	
To amount received from private patients.	48,104.72	
To amount received for hides, etc.	2,012.19	
To amount received for hogs.	2,971.22	
To amount received for hay.	1,278.25	
To amount received for tar.	894.87	
To amount received for incidentals.	1,132.37	
To amount received for interest.	55.77	
To amount received from appropriation for clothing furnished State Indigent and Convict Patients.	15,000.00	
To amount received from State Treasurer for board of County, Convict and State Indigent Patients	149,134.39	
		295,797.38
		\$463,737.48

Cr.

DISBURSEMENTS.

Amusements.	\$427.33
Beef.	24,523.44
Books, stationery, printing and office supplies	1,920.19
Bedding, linen, etc.	12,143.25
Clothing (suits, dresses, underwear, shoes).	22,189.65
Coach stable.	3,054.64
Crockery and cutlery.	1,322.60
Clerical services.	433.00
Dairy (includes stock, feed, labor).	18,374.55
Electrical (wages and supplies).	1,881.34
Farm (wages, tools, fertilizer, seeds, etc.).	8,261.22
Furniture and carpets.	6,463.60
Fuel.	28,423.95
Flour.	14,587.21
Freight and train service.	355.89
Fruit.	4,932.03
Garden.	6,750.54
Gas fixtures, plumbing and plumbers' supplies.	4,971.42
Green house.	1,557.07
Gas plant.	13,531.55
Grounds.	1,200.52
Grading, Annex building.	2,896.50
Household goods.	9,139.36
Heating and power plant.	12,775.75
Hogs (includes wages and cost of pigs).	2,965.18
Insurance.	5,147.36
Ice.	902.13
Improvement of buildings.	144.22
Improvement of Farm Lands.	376.59
Laundry (wages and supplies).	10,651.14
Medical supplies.	3,467.92
Miscellaneous expenses.	1,781.33
Medical library.	367.05
Newspapers.	83.43
Oil.	948.42
Pathological laboratory (wages and supplies).	715.39
Postage.	665.54
Provisions and groceries.	106,158.54
Repairs to buildings.	13,088.26
Railroad repairs.	597.49
Refunding for unexpired time (of private patients discharged).	1,827.36
Repairs' to Nurses' Cottage.	589.68
Smith and wheelwright.	1,723.94
Sewers.	1,527.22
Snow.	55.81
Tinware.	1,145.99
Telephone rental and tolls.	784.52
Telegrams.	163.76
Teaming.	2,938.94
Undertakers' charges.	1,565.00
Vegetables.	3,981.45
Ward supplies.	2,224.25

Water supply.	1,726.11	
Wages.	79,359.37	
Counsel fees.	23.00	
Gas fixtures and plumbing (10 new toilet rooms adv.)	6.00	
Discount.	6.22	
Petty expense account.	500.00	
Cement.	202.50	
Advertising.	982.25	
John C. Eisele, President, Insurance.	11,000.00	
Fire apparatus.	1,227.52	
		<u>\$463,737.48</u>
		\$463,737.48

REQUIREMENTS.

For the annual appraisalment.		\$150.00
For the salaries of resident officers.		16,050.00
For the maintenance of county patients based on an average of 1,325 patients for the year.		137,800.00
For the maintenance and clothing of insane convict patients, based on an average of 70 patients for the year:		
Maintenance.	\$18,200.00	
Clothing.	1,050.00	
		<u>19,250.00</u>
For the maintenance and clothing of State indigent patients, based on an average of 600 patients for the year:		
Maintenance.	\$124,800.00	
Clothing.	10,800.00	
		<u>135,600.00</u>
Clothing furnished State indigent and convict patients covering a period of three years for which payment had not been allowed (as stated in report for 1907).		\$20,617.52
Appropriation received (1908).		15,000.00
		<u>\$5,617.52</u>
Balance.		8,987.62
Clothing furnished since last report.		
		<u>\$14,605.14</u>

Respectfully submitted,

M. K. EVERITT,

Warden.

The New Jersey State Hospital at Morris Plains, October 31st, 1908.

96182

