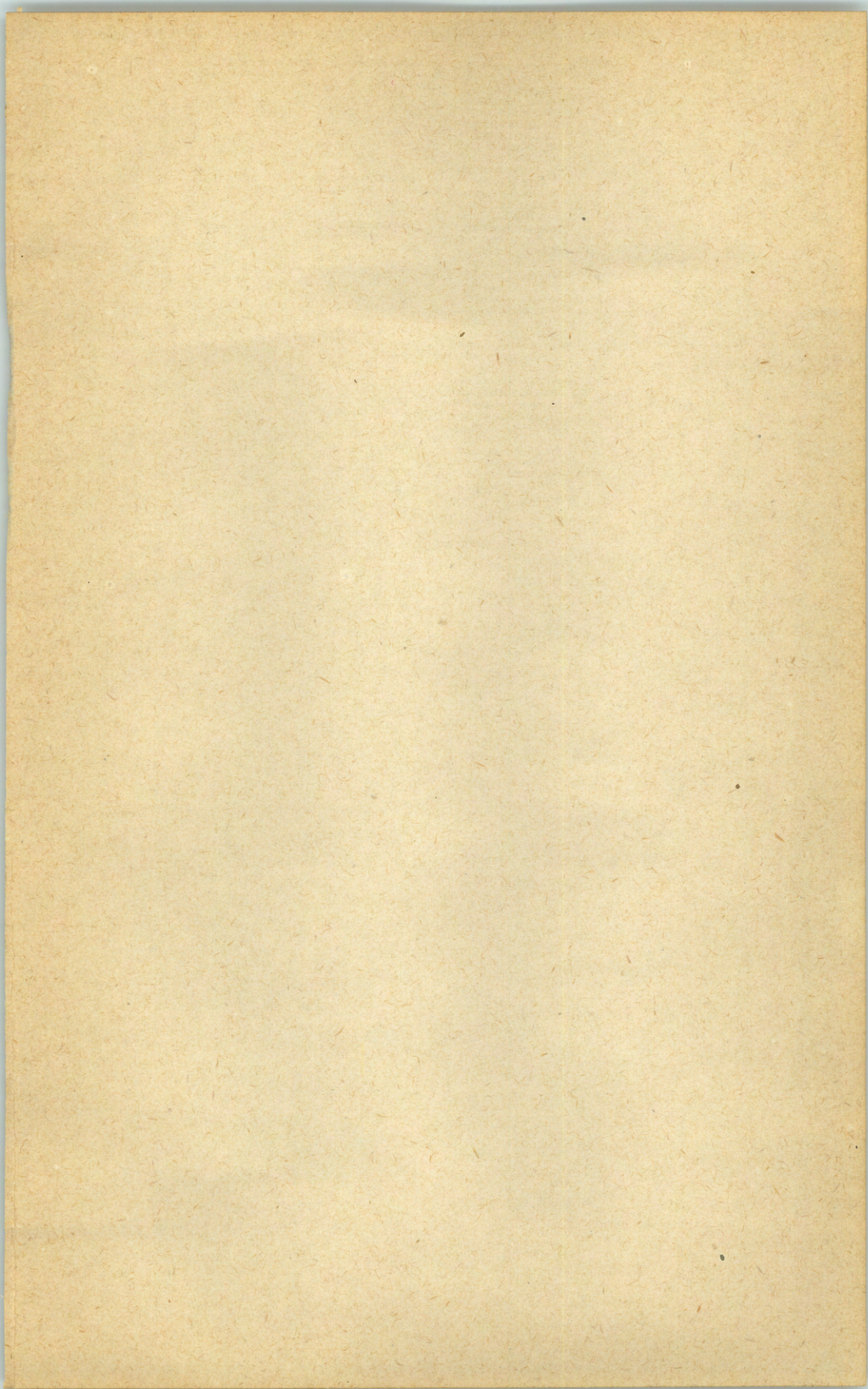


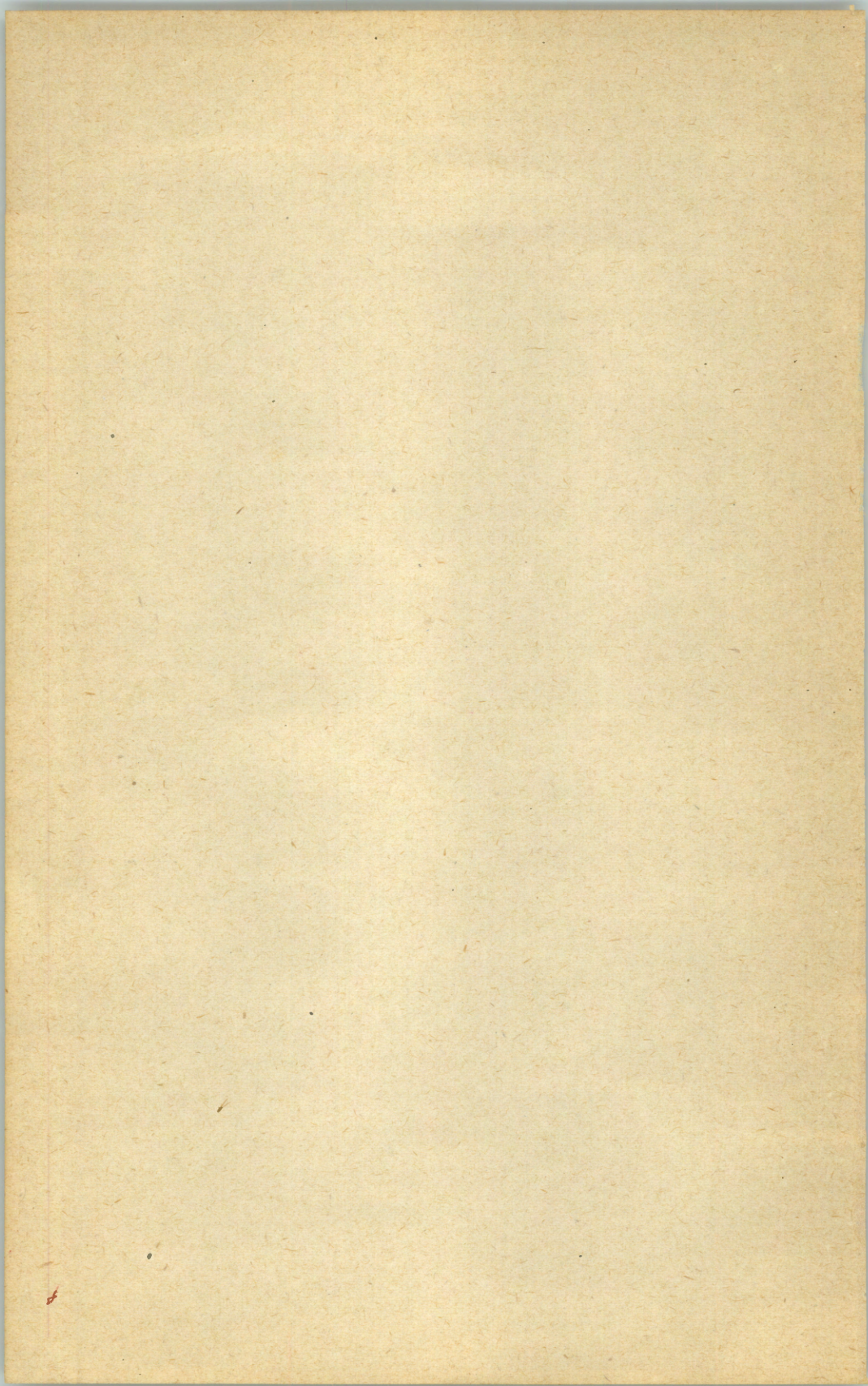


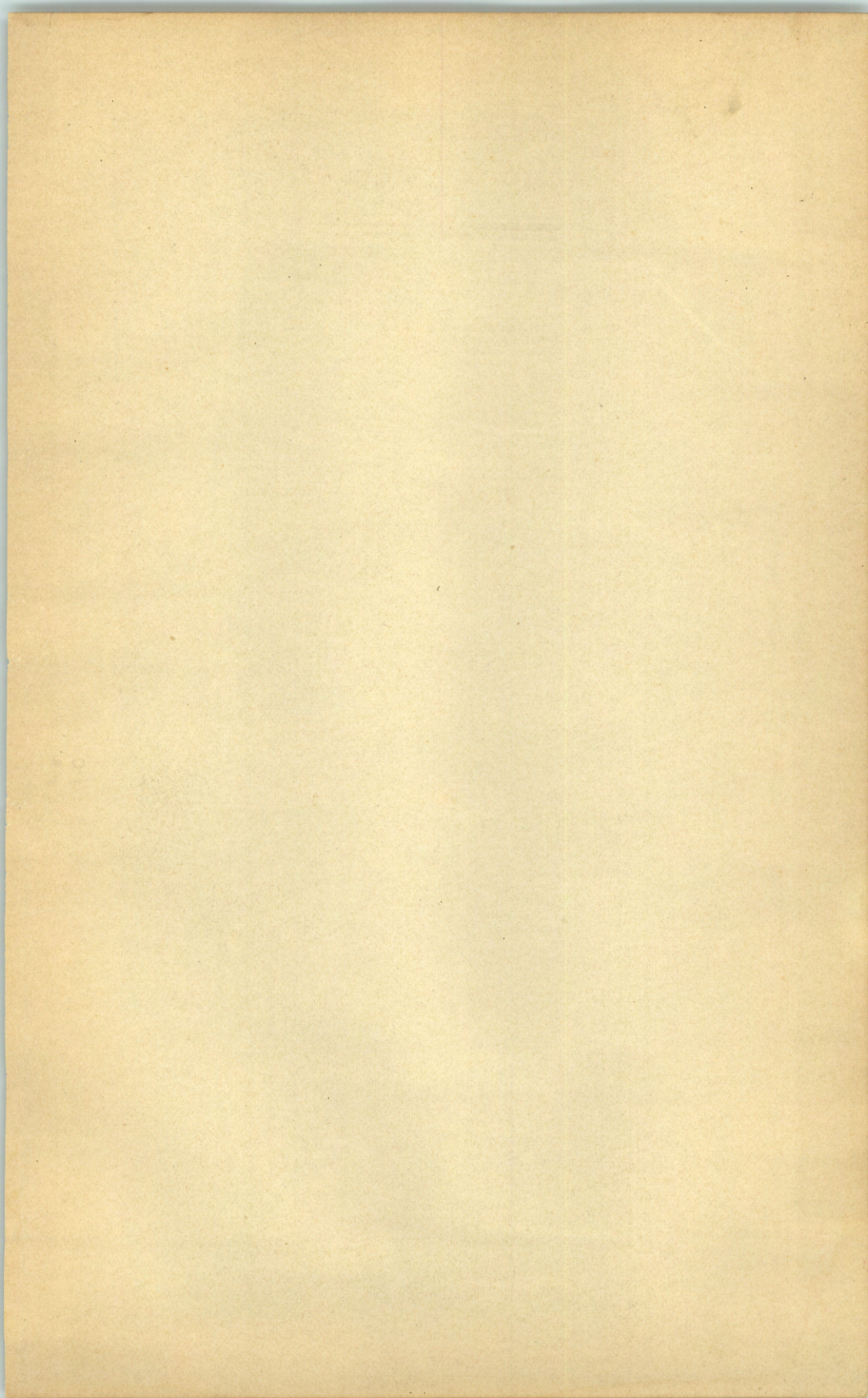
New Jersey State Library

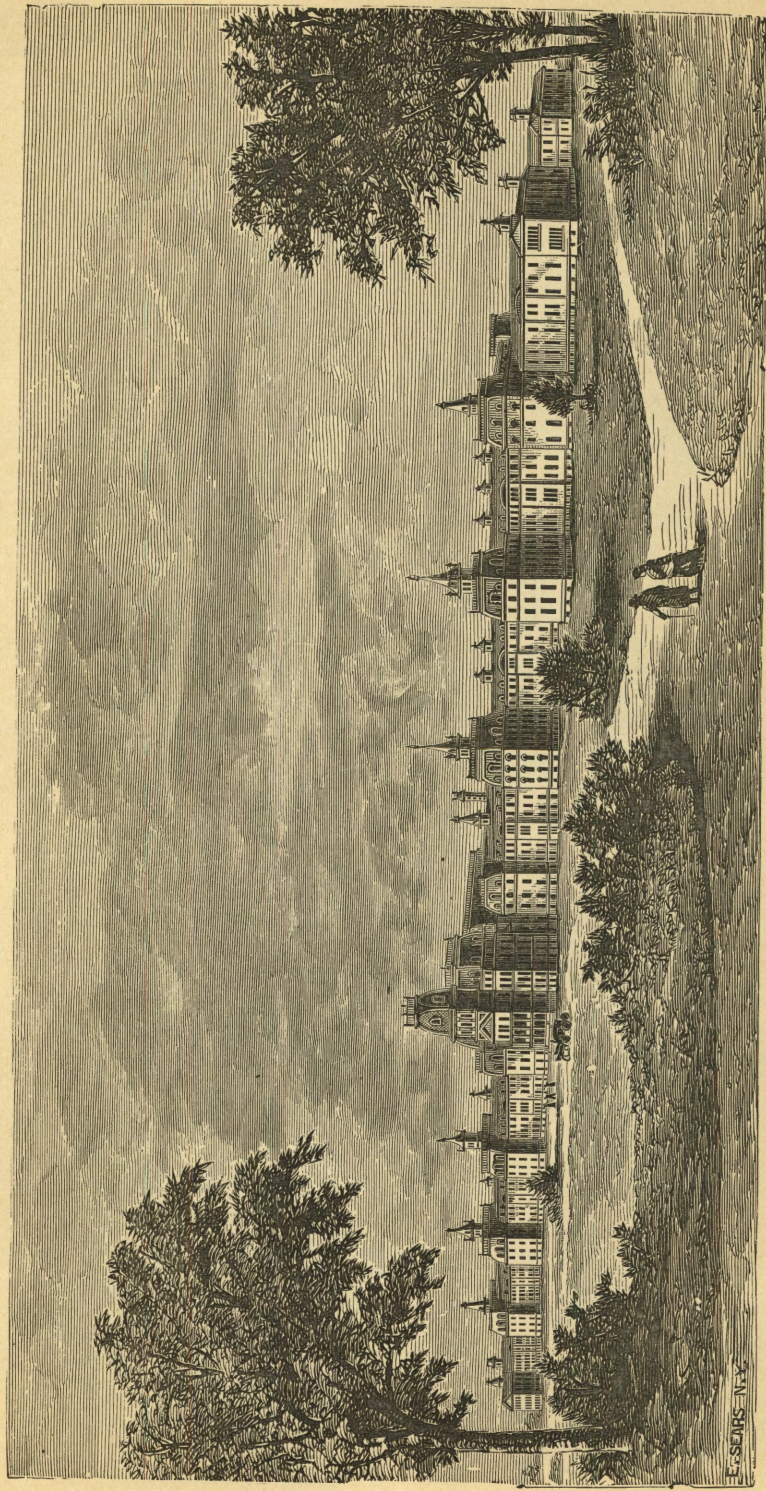
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NEW YORK

1881









NEW JERSEY STATE HOSPITAL, AT MORRIS PLAINS, N. J.
(PERSPECTIVE VIEW.)

TWENTY-SECOND ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS

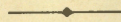
OF

The New Jersey State Hospital at Morris Plains

FOR THE

Year Ending October 31st,

1897.



TRENTON, N. J.:
THE J. L. MURPHY PUB. CO., PRINTERS.

1897.

Transcript of the Proceedings of the

WATERS AND WILKES

The New Jersey State Hospital at Trenton

THE BOARD OF MANAGERS

1887

Printed by the State Printer, Trenton, N. J.

MANAGERS.

PRESIDENT.

GEORGE RICHARDS, Dover.

VICE PRESIDENT.

PATRICK FARRELLY, Morristown.

JAMES M. BUCKLEY, Morristown.

ROMEO F. CHABERT, M.D., Hoboken.

JOHN C. EISELE, Newark.

JOHN A. MCBRIDE, Deckertown.

DAVID ST. JOHN, M.D., Hackensack.

JAMES W. SMITH, M.D., Paterson.

MANAGER

PRESIDENT

John

James H. [unclear]

VICE PRESIDENT

William

James H. [unclear]

John

James H. [unclear]

Robert

James H. [unclear]

John

James H. [unclear]

Robert

James H. [unclear]

John

James H. [unclear]

John

James H. [unclear]

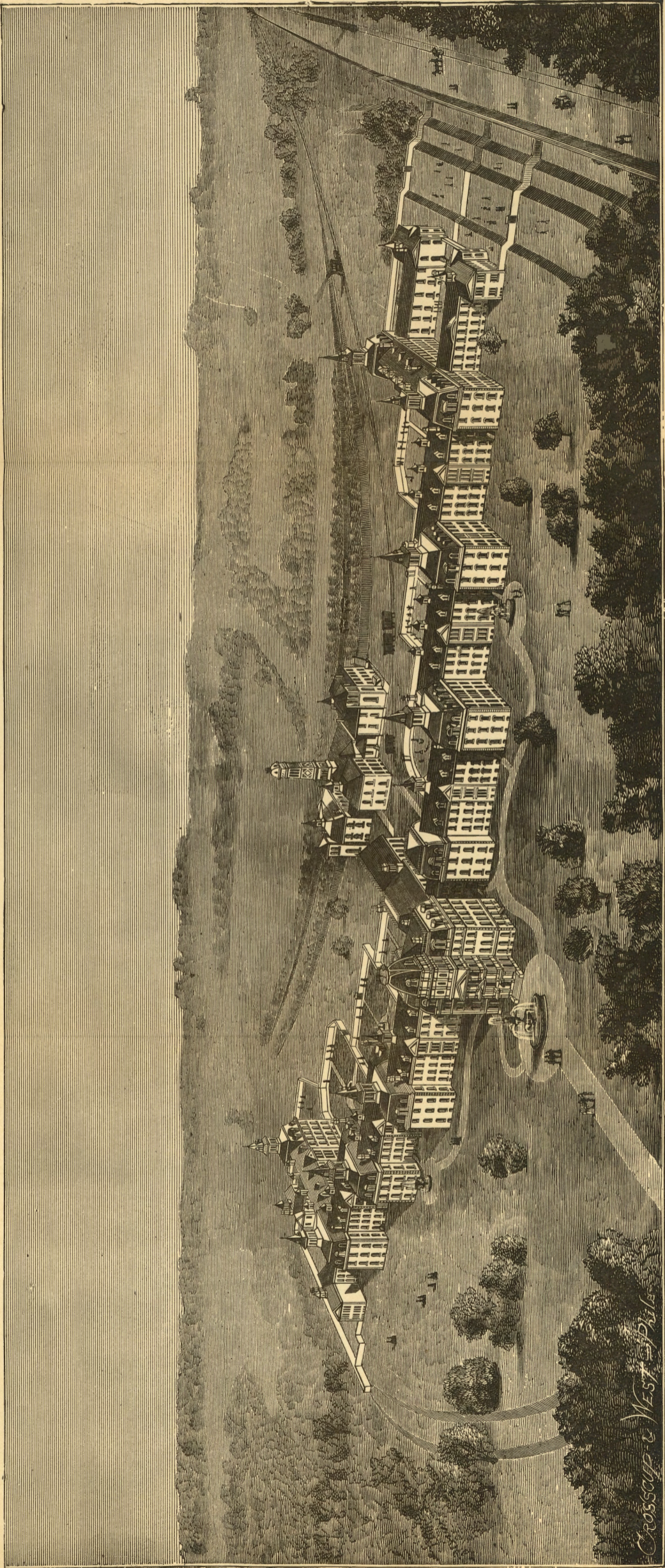
RESIDENT OFFICERS

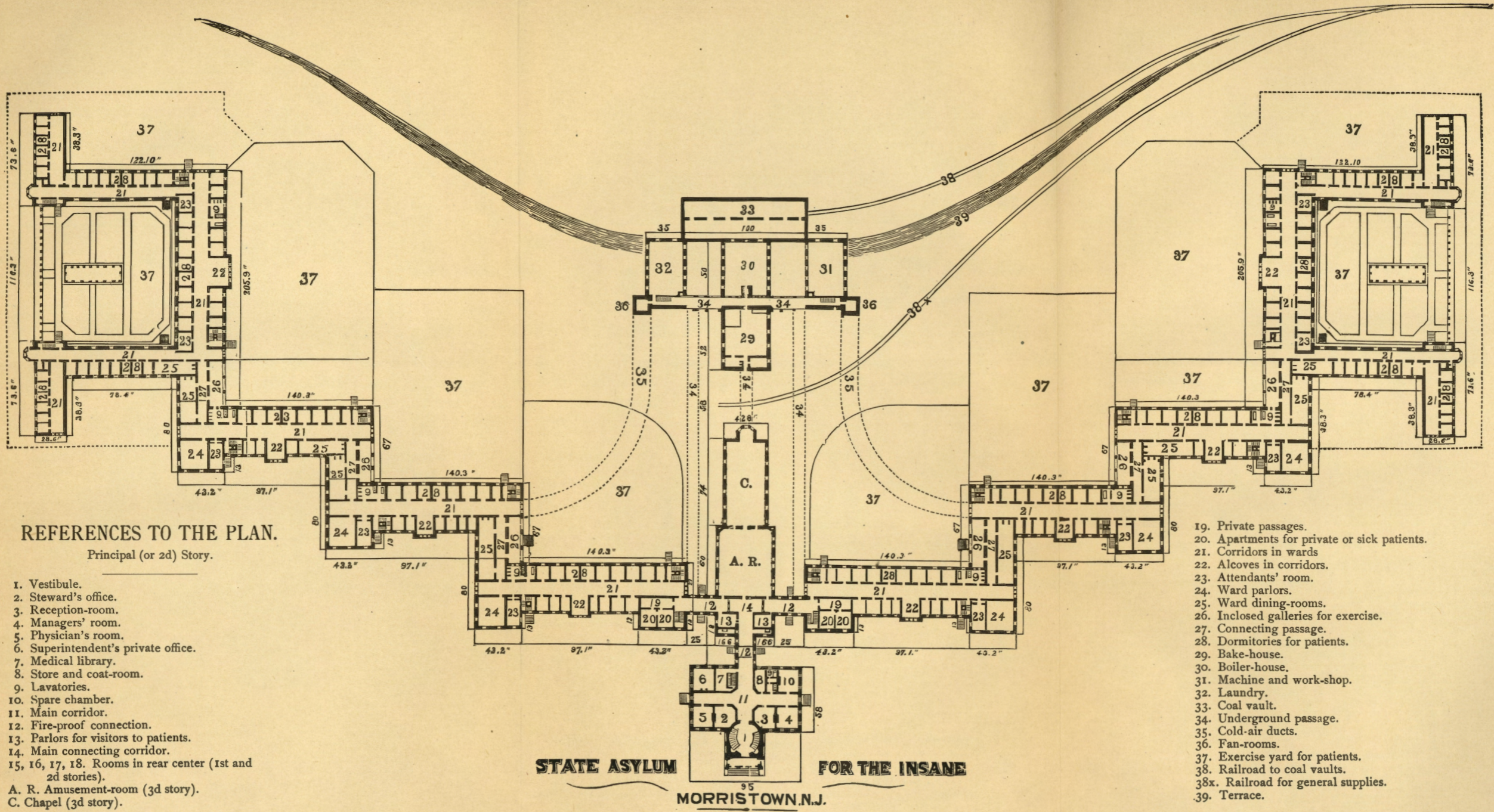
GENERAL DEPARTMENT

| | |
|---------------------|---------------------|
| John H. Frank, M.D. | John H. Frank, M.D. |
| John H. Frank, M.D. | John H. Frank, M.D. |
| John H. Frank, M.D. | John H. Frank, M.D. |
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| John H. Frank, M.D. | John H. Frank, M.D. |

GENERAL DEPARTMENT

| | |
|---------------------|---------------------|
| John H. Frank, M.D. | John H. Frank, M.D. |
| John H. Frank, M.D. | John H. Frank, M.D. |





REFERENCES TO THE PLAN.

Principal (or 2d) Story.

- 1. Vestibule.
- 2. Steward's office.
- 3. Reception-room.
- 4. Managers' room.
- 5. Physician's room.
- 6. Superintendent's private office.
- 7. Medical library.
- 8. Store and coat-room.
- 9. Lavatories.
- 10. Spare chamber.
- 11. Main corridor.
- 12. Fire-proof connection.
- 13. Parlors for visitors to patients.
- 14. Main connecting corridor.
- 15, 16, 17, 18. Rooms in rear center (1st and 2d stories).
- A. R. Amusement-room (3d story).
- C. Chapel (3d story).

- 19. Private passages.
- 20. Apartments for private or sick patients.
- 21. Corridors in wards.
- 22. Alcoves in corridors.
- 23. Attendants' room.
- 24. Ward parlors.
- 25. Ward dining-rooms.
- 26. Inclosed galleries for exercise.
- 27. Connecting passage.
- 28. Dormitories for patients.
- 29. Bake-house.
- 30. Boiler-house.
- 31. Machine and work-shop.
- 32. Laundry.
- 33. Coal vault.
- 34. Underground passage.
- 35. Cold-air ducts.
- 36. Fan-rooms.
- 37. Exercise yard for patients.
- 38. Railroad to coal vaults.
- 38x. Railroad for general supplies.
- 39. Terrace.

STATE ASYLUM
FOR THE INSANE
 MORRISTOWN, N.J.

REPORT OF THE BOARD OF MANAGERS OF
THE NEW JERSEY STATE HOSPITAL
AT MORRIS PLAINS.

To His Excellency John W. Griggs, Governor of New Jersey :

In harmony with the provisions of an act passed by the Legislature and approved by Your Excellency, May, 1897, so soon as the three additional managers, James W. Smith, M.D., of Passaic county; David St. John, M.D., of Bergen county, and Hon. John A. McBride, of Sussex county, were appointed by Your Excellency, the Board of Managers, thus completed, assembled on June 3d, 1897, and organized by the election of George Richards as President, and Patrick Farrelly as Vice President; Charles H. Green was re-elected Secretary of the Board, and Guido C. Hinchman was re-elected Treasurer.

The regular meetings of the Board, required by the law, have been held and the visitations made. If the interests of the State have not been faithfully looked after in any particular it is not chargeable to inattention on the part of the Managers, whose interest in the State and in the most unfortunate class of its population is the sole motive, rendering them willing to accept the performance of an onerous task, the pecuniarily uncompensated character of which does not relieve it either from great responsibility or the liability of adverse criticism.

The elaborate reports of the Medical Director and the Warden, herewith submitted, are supposed to furnish all the facts necessary to a full understanding and proper estimate of the work attempted and accomplished by this institution. The Warden's report shows that the Hospital has been fitted with a system of telephone communication which, as a means of security against fire and the speedy summoning of medical and other aid, has worked admirably.

The old pianos purchased in the early days of the house and worn out in the entertainment of the patients, have been replaced by new

ones, and their effect upon the cheerfulness of the wards is so marked as almost to rival the influence of David's harp upon Saul's evil spirit.

Within the last two years over two thousand feet of stone walk have been laid to give a dry walk at all times of the year, thus furnishing the patients opportunity for exercise when it cannot be taken elsewhere out of doors.

In September, 1896, the dairy barns and sheds were destroyed by fire. New edifices have been completed during the past year. Great success has attended the methods employed for keeping the dairy up to a high standard. Only such cows are used as are large and young, and when it is no longer profitable to use them for milk they are well fed and are in good condition for slaughtering, the meat being used for the house. By this means evidence is constantly furnished of the freedom of the animals from tuberculosis and other diseases, not an instance among the cattle slaughtered having been found during the past four years.

On a representation to the Legislature of 1895, concurred in by every member of the Board, which at that time had charge of both Hospitals—they being present in a body before a committee to present the needs of the institution—an appropriation was made for the erection of a new building sufficiently large to accommodate six hundred patients selected from among those generally considered incurable, and to furnish places for necessary adjuncts to a large institution, for which, owing to the crowded condition of the existing buildings, there is no room. Further appropriations have been made but they now seem insufficient for the completion of the building.

In the meantime there has been a steady increase in the number of the patients. On the 31st of October, 1895, there were in the Hospital 1,116 patients, showing an increase of 66 patients over the preceding year, the largest increase, with one exception, up to that time in the history of the Hospital, not including the transfer of a large number of patients to it from another institution. During the succeeding year 85 patients were transferred to the Hudson County Asylum, showing on October 31st, 1896, in the institution 1,088 patients, which reveals the fact that there would have been an increase of 57 patients if the 85 had not been transferred. But during the past year there has been an increase of 89 patients, and on October 31st

the whole number of patients was 1,177, or 61 more than there were before the removal of the 85 patients above mentioned.

This statement, however, does not fully measure the pressure upon the institution, for had the year ended upon September 25th, the census would then have shown 1,189, but during the following month of October an unusually large number was discharged as a natural result of the excellent health of the patients during the preceding spring and summer months.

When it is considered that the Hospital was built to accommodate only 800, and that this increase is constant, the exterior magnificence of these buildings, and the spectacle of a great unfinished structure is not honorable to the State. In his graphic description of the situation the Medical Director states only plain facts, and by no means all of them. Patients are necessarily herded in dormitories and sleeping-rooms, regardless of hygiene. A hospital for the insane is unworthy its name unless it admits of the scientific classification and treatment of patients. Though everything possible is done for the patients that can be done under the circumstances, in comparison with what might be done if the unfinished building were ready for use, the institution as it now is, is but little more than a place for the safe custody of the patients. The violent and the vicious cannot be separated from those afflicted with a milder form of mental trouble. It is an outrage that dangerous patients should be placed with innocent and inoffensive ones.

The danger is so great that the Board of Managers and the officers of the Hospital are in constant fear that a homicide will be committed. Fortunately this has not occurred during the past year, but the unavoidable crowding has resulted in numerous bruises, and on more than one occasion in the breaking of bones.

Another cause of constant apprehension is the possibility of fire. The wards, the dormitories and the rooms are crowded and the halls filled with low cots, which, in case of fire, would act as stumbling-blocks and barriers to rapid egress. From a sanitary point of view those cots are an abomination.

In presenting to Your Excellency these facts we are aware of the liability of being misunderstood and of seeming to furnish ground for an estimate that the Hospital is not a proper place in which to entrust patients. This is far from the fact. The evils that we describe are real. The condition is similar to that of a private residence with six

rooms, capable of accommodating only twelve persons, with kitchen and other arrangements upon a small scale, yet permanently occupied by twenty, several of them being ill, requiring trained nurses and greater force in the kitchen. The rooms naturally occupied by servants and nurses would be filled by the extra guests.

By superhuman attention and a constant strain the patients might recover their health, but there would be a delay and a constant danger of accident, and the average results could not be what they would be if the number which the house was built to accommodate, and that only, were beneath its roof. Multiply this situation by the number of patients in this institution and add the fact that they are all insane, and many of them violently so, besides being liable to ordinary physical diseases, and, without concluding that the place as a whole is pernicious in its influences, it is necessary to conclude that it must fall much below what the State and the friends of the patients have a right to expect.

The invasion of an infectious or contagious disease under such circumstances would take on the proportions of a genuine pestilence on account of its being impossible to establish a satisfactory and effective isolation. During the past year the Hospital has escaped serious difficulty, though two male attendants had a mild form of measles, and two female patients were attacked with what seemed to be pronounced symptoms of typhoid, and a child in the family of the upholsterer was attacked with scarlet fever.

If the new building were completed the possibility of isolation in certain parts of the main building or of the new in case of an epidemic would give ground for the hope of being able to grapple with such an invasion.

Two classes of patients that ought not to be there account in considerable measure for the pressure. At the close of the last Hospital year there were 82 epileptics in the Hospital. The year covered by this report closes with 92. "Practically no hope," says the Medical Director, "can be offered for the treatment of epileptics in a hospital for the insane." Once placed there, there they will remain until removed by death. The outlook for them there is progressive mental deterioration. Their presence puts in peril the interests of the convalescent insane and the epileptics themselves. It is impossible to classify them by themselves, and if it were possible it would be an outrage upon the more sane of the epileptics.

The other class consists of criminals and convicts. The convicts consist of those who were living a criminal life, who were not insane when they committed the deeds which secured their incarceration, but who are said to have become so while in the State Prison. These are transferred from the State Prison to the State Hospitals, and thus the innocent unfortunate victims of insanity are compelled to associate with abandoned criminals who bring to the institution all their original instincts and accumulated experience. In a crowded institution they have ample opportunity to make trouble. During the past year necessity has compelled the construction of three strong rooms for the most turbulent and troublesome male convicts. But as it is impossible to put more than one of these in a room, only three can be taken care of. The Medical Director has applied for the construction of several more and demonstrated the necessity for them; but to construct a sufficient number of rooms to prevent this class of patients from escaping would be to give a large part of the house the appearance of a prison, and even then the other patients would not be protected from the contaminating influence of associating with them.

Other States have found it necessary to build institutions for the convict insane. The erection of such an one at Trenton would relieve the pressure on both the State Prison and the State Hospitals, and if it were thought best to place it on the grounds of the State Hospital at Trenton, it could be erected and managed at a very limited expense.

The Managers earnestly hope, in view of the crowded condition of this institution, that an appropriation will be made sufficient to complete the building at once. In view of the size and the purpose for which it is designed, its proposed cost is not large, and when finished it will be devoted to the class in whom degeneration has progressed so far that little hope for improvement is to be expected.

The death-rate in the institution is now very low, and while some utilitarians are disposed to take the ground that in incurable cases it is a misfortune that their lives should be systematically prolonged, it is a sufficient answer to this conclusion that no one can be positively certain in any particular case, except in extreme age or physical disease, that there will not be a recovery; and that which keeps the death-rate low in an institution is a condition of cure for those who are susceptible of it. Before the enlightened methods of treatment

which now prevail were introduced, a cure was not expected, and such were the conditions that many curable cases were made hopeless within the first six weeks after they were thrust into the dark dungeons, where they were left like beasts to wallow in their own filth, or bound with ropes and chains to shriek through the long night in rage or fury.

During the past year the recoveries among those admitted have been 25 per cent. Of the 294, 248 were admitted after the first attack, 32 after the second, and 10 after the third. From the foundation of this Hospital to the close of the present year 4,916 patients have been treated. Some hundreds of these were incurables, brought to the Hospital from other institutions when this was first opened. During that time 1,043 have been discharged restored to reason. To these should be added 916 improved. But little more than one-third of the whole number have died in the institution. The incurable cases accumulate. The common method of computing the proportion of cures upon the proportion of inmates, therefore, misleads the public. In ordinary general hospitals incurables are discharged as soon as that fact is put beyond question. The average stay of patients is but three weeks in general hospitals. In hospitals for the insane, after recovery has taken place, an additional detention is requisite to prepare the patient for the attrition of the outside world. A too early removal by anxious friends often causes relapses.

The present law regulating the commitment of persons to institutions for the insane is so lax in its provisions that it affords opportunity for serious abuse and is, therefore, not a sufficient safeguard to individual liberty. We are strongly impressed with the importance of the changes suggested to Your Excellency in the last report, and which Your Excellency recommended to the consideration of the Legislature, but upon which no action was taken by that body.

We beg to reiterate our recommendations relative to this law.

The law with respect to the examination and licensing of private asylums is complied with. The number within the jurisdiction of this Board is four, situated respectively in Paterson, Morristown, Plainfield and Newark.

COUNTY ASYLUMS.

Essex County Asylum.

This institution is situated in Newark, N. J., on South Orange avenue, and is in charge of L. T. Hinckley, M.D., with a staff of three medical assistants. It contains 732 patients, of whom 297 are male and 435 female. It is well arranged and in all respects will compare favorably with any in the country. When the new buildings in process of construction are completed the inconvenience resulting from the present overcrowded condition will disappear and ample opportunity for labor service and outdoor amusements will be afforded. The Training School for Nurses has enabled the institution to supply itself with competent attendants for both night and day service. The number of attendants at the time of our visit was 37 male and 33 female in day service, and 3 male and 3 female attendants at night. Everything possible for the care and cure of the inmates is being done. The fact that the Freeholders give the Medical Director power to discharge incompetent help contributes greatly to the maintenance of the excellent condition here found.

Hudson County Asylum.

This institution contains 496 patients, 213 white males, 282 white and 1 colored females. George W. King, M.D., is Resident Physician, and in charge of all the departments. There are 12 male and 12 female day attendants and 4 male and 4 female night attendants. No amusements are afforded the patients, except such as is occasionally given when some of the patients play the violin while others dance. There is no assistant physician, so that when Dr. King is occasionally absent there is no one to take his place; he has no authority to hire or discharge attendants, which, he informs us, makes it impossible for him to have at all times competent nurses. The building is well adapted to the purposes for which it was built. But we record our judgment that no county institution should receive State aid unless it be provided with more than one resident physician, be properly equipped with a drug-room and all needful appliances for the relief of the patients. This institution is not so equipped. Moreover its close proximity to the county almshouse and prison will render it impossi-

ble to give the inmates the necessary labor and exercise without bringing them into contact with the inmates of the almshouse, among which there are many children, some of whom have been born and raised there. While it is not within our province to criticise the management of the county poor, we can but deplore the conditions which exist here, brought to our notice by the fact that the almshouse immediately joins the grounds of the asylum for the insane.

Passaic County.

The place in which the unfortunate insane of this county are kept is not worthy of being classed either as a hospital, an asylum or an institution for the insane. It is simply a county poorhouse, in which there are many children, and all sane and insane are allowed to commingle freely except at night. It has no Resident Physician and is in no respect equipped for the custody or treatment of the mentally deranged.

The Warden appears to be doing his best; but he has no skilled help, and but little of any other kind. When he is absent, his wife, who is Matron, is in charge. The City Physician visits the place daily if necessary and oftener if called upon. There were at the time of our visit, 29 female patients and 13 male patients.

The Aldermen and Freeholders are responsible for this situation, and an arrangement so economical is made between the city and county authorities, that it is doubtful if all the money paid by the State toward the support of these insane patients is expended upon them.

GEORGE RICHARDS,
PATRICK FARRELLY,
J. M. BUCKLEY,
ROMEO F. CHABERT, M.D.,
JOHN C. EISELE,
JOHN A. MCBRIDE,
DAVID ST. JOHN, M.D.,
JAMES W. SMITH, M.D.,
Board of Managers.

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 receipts and disbursements from November 1st, 1896, to October 31st, 1897:

| RECEIPTS. | |
|--------------------------------------------------------------------------------------------|--------------|
| Balance on hand November 1st, 1896..... | \$20,312 17 |
| From State Treasurer for convict patients..... | \$13,129 67 |
| From State Treasurer for county patients..... | 47,284 55 |
| From State Treasurer for State indigent patients | 6,700 00 |
| From sundry counties for maintenance of county patients, | 159,766 72 |
| From private patients..... | 58,200 83 |
| From hides, tallow, &c..... | 12,261 74 |
| From First National Bank, Morristown, for interest..... | 71 35 |
| From sundry insurance companies for loss by fire of cow- barn, sheds and contents..... | 15,680 93 |
| From Treasurer's acceptance, No. 96, of November 30th, 1895, returned and canceled..... | 2 44 |
| | 313,098 23 |
| | \$333,410 40 |

| DISBURSEMENTS. | |
|-----------------------------------|--------------|
| On order of Warden..... | \$323,080 66 |
| Balance in Treasurer's hands..... | 10,329 74 |
| | \$333,410 40 |

G. C. HINCHMAN,
Treasurer,

New Jersey State Hospital at Morris Plains, November 11th, 1897.

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 RICHARDS,
JOHN A. MCBRIDE,
JOHN C. EISELE,
D. ST. JOHN,
Auditing Committee.

RECAPITULATION.

State Treasurer—Convict Patients.

| | | |
|---------------------|------------|-------------|
| First quarter | \$3,662 21 | |
| Second quarter..... | 3,749 63 | |
| Third quarter..... | 2,077 83 | |
| Fourth quarter..... | 3,640 00 | |
| | | \$13,129 67 |

State Treasurer—County Patients.

| | | |
|---------------------|-------------|-----------|
| First quarter..... | \$11,556 85 | |
| Second quarter..... | 11,768 86 | |
| Third quarter..... | 11,925 28 | |
| Fourth quarter..... | 12,033 56 | |
| | | 47,284 55 |

State Treasurer—State Indigent Patients.

| | | |
|---------------------|------------|----------|
| First quarter | \$2,197 94 | |
| Second quarter..... | 1,518 42 | |
| Third quarter..... | ..... |  |
| Fourth quarter..... | 2,983 64 | |
| | | 6,700 00 |

County Collectors.

| | | |
|---------------------|-------------|------------|
| First quarter | \$38,976 60 | |
| Second quarter..... | 33,648 78 | |
| Third quarter..... | 43,667 81 | |
| Fourth quarter..... | 43,473 53 | |
| | | 159,766 72 |

Private Patients.

| | | |
|---------------------|-------------|-----------|
| First quarter..... | \$17,501 97 | |
| Second quarter..... | 12,789 70 | |
| Third quarter..... | 15,646 90 | |
| Fourth quarter..... | 12,262 26 | |
| | | 58,200 83 |

Hides, Tallow, &c.

| | | |
|---------------------|------------|-----------|
| First quarter..... | \$2,918 11 | |
| Second quarter..... | 2,952 59 | |
| Third quarter..... | 2,951 08 | |
| Fourth quarter..... | 3,439 96 | |
| | | 12,261 74 |

Interest.

| | | |
|---------------------|---------|-------|
| First quarter..... | \$18 72 | |
| Second quarter..... | 20 75 | |
| Third quarter..... | 12 61 | |
| Fourth quarter..... | 19 27 | |
| | | 71 35 |

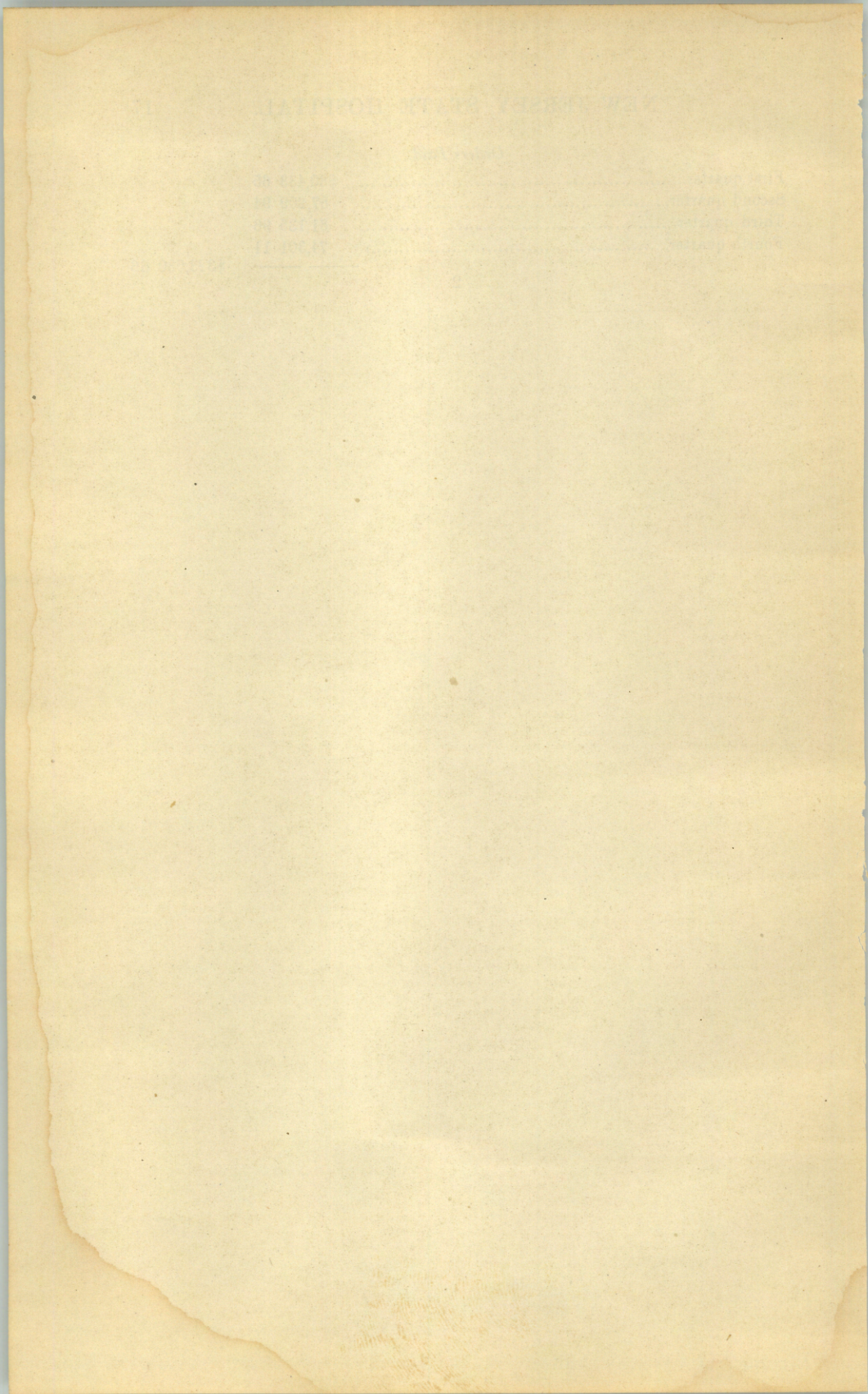
Fire insurance on cow-barn, sheds and contents in first quarter..... 15,680 93

Treasurer's acceptance, No. 96, of November 30th, 1895, returned and canceled..... 2 44

\$313,098 23

Orders Paid.

| | | |
|---------------------|-------------|---------------------|
| First quarter..... | \$80,433 65 | |
| Second quarter..... | 87,209 94 | |
| Third quarter..... | 81,185 96 | |
| Fourth quarter..... | 74,301 11 | |
| | | <u>\$323,080 66</u> |



SUPERVISING ARCHITECT'S REPORT.

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

GENTLEMEN—I have the honor to submit the following in connection with the new building for the insane partly erected at Morris Plains, New Jersey.

The foundations for the entire building were completed in November, 1895, and were covered to protect them from damage by frost or rain.

The center part of the building, containing physician's residence, dining-rooms, kitchen, sewing-room, storerooms, amusement hall, main corridors and attendants' bedrooms, &c., was erected and put under roof in the summer and fall of 1896, being completed in January, 1897. The work included the walls, beams, floor arches and roof, but no finishing of any kind.

The covering of the foundation walls of the center part of the building was repaired and put in good shape during the summer of 1897.

The approximate estimate of the cost of carrying on the work would be as follows:

| | |
|-------------------------------------------------------------------------------------|--------------|
| To build walls and roof of the right and left wings adjoining center building | \$65,000 00 |
| To finish same for occupancy, including elevators, plumbing, &c..... | 40,000 00 |
| To finish center building for occupancy..... | 20,000 00 |
| Heating the center building and two wings..... | 25,000 00 |
| | <hr/> |
| | \$150,000 00 |

Making an approximate cost of \$150,000 for the erection of the two side wings adjoining the center building, with the adjoining infirmaries, and the finishing ready for occupancy of these two wings, together with the center part of the building, the walls and roof of which are already erected.

These parts of the building would comfortably house 400 patients, together with resident physicians, attendants and servants of all kinds.

To finish the remaining two end wings would cost approximately \$50,000 additional and would provide accommodation for 200 more patients.

Respectfully submitted,

ROBERT C. WALSH,

Supervising Architect.

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Total amount expended on the new building..... | \$103,331 70 |
| Total amount expended on the construction of new lavatories in the old building, and on the tearing out of the old plumbing, and changing the old lavatories into dormitories..... | 44,181 52 |
| Total amount expended on reservoir, &c, for new water supply..... | 34,676 63 |
| Total..... | <u>\$182,189 85</u> |

The vouchers for these payments are on file in the Comptroller's office.

REPORT OF THE WARDEN.

(21)

REPORT OF THE WARDEN

WARDEN'S REPORT.

To the Board of Managers of the New Jersey State Hospital for the Insane, at Morris Plains:

GENTLEMEN—In compliance with established regulations the annual report of the financial status of this institution for the year ending October 31st, 1897, with an account of what has been accomplished during the year past, is herewith presented.

The receipts and disbursements are as follows:

| | | |
|---------------------------------------------------------------------------------------------------|--------------|--|
| Balance on hand November 1st, 1896..... | \$20,312 17 | |
| Receipts from November 1st, 1896, to November 1st, 1897, not including insurance..... | 297,417 30 | |
| | \$317,729 47 | |
| Receipts from sundry insurance companies for loss by fire of cow-barn, sheds and contents..... | 15,680 93 | |
| | \$333,410 40 | |
| Total disbursements from November 1st, 1896, to November 1st, 1897... | 323,080 66 | |
| | \$10,329 74 | |
| Cash balance on hand November 1st, 1897..... | \$10,329 74 | |

Of the above receipts, \$15,680.93 was received from an unusual source, that of insurance for loss on dairy buildings and contents, which were burned September 6th, 1896.

The disbursements are augmented by paying to the State Hospital for the Insane at Trenton \$10,000 for a loan contracted in 1893.

The resources and liabilities at this date are presented in the following schedule:

RESOURCES.

| | | |
|------------------------------------------------------|-------------|--|
| Balance in the hands of Treasurer..... | \$10,329 74 | |
| Due from Hudson county, as per bill rendered..... | 743 82 | |
| Due from Hunterdon county, as per bill rendered..... | 3,883 99 | |
| Due from Passaic county, as per bill rendered..... | 8,733 36 | |
| Due from Union county, as per bill rendered..... | 9,268 55 | |

| | | |
|-------------------------------------------------------|------------|-------------|
| Due from State Treasurer for county patients | \$4,011 18 | |
| Due from State Treasurer for convict patients | 3,262 87 | |
| Due from State Treasurer for State patients..... | 2,321 09 | |
| Due from private patients, as per bills rendered..... | 5,669 14 | |
| Due from Sailors' Snug Harbor..... | 3,544 66 | |
| Petty expense account..... | 281 05 | |
| Due from clothing issued..... | 3,113 75 | |
| | | \$55,663 20 |

LIABILITIES.

| | | |
|------------------------------------------------------------|------------|-------------|
| Bills payable | \$6,963 63 | |
| Pay-roll for month of October, 1897..... | 7,966 46 | |
| County patients paid beyond..... | 2,632 99 | |
| Private patients paid beyond | 5,910 43 | |
| Amount of bills rendered counties not yet earned | 3,415 78 | |
| Amount of bills rendered private patients not yet earned.. | 1,899 33 | |
| | | 28,788 62 |
| Balance above liabilities..... | | \$26,874 58 |

The annual appraisalment of the personal property of the institution, taken as usual, amounts to one hundred and fifty-one thousand six hundred and twenty dollars and forty cents (\$151,620.40). Thanks are due Hon. Chas. A. Baker, of Ledgewood, N. J., and Mr. Eugene S. Burke, of Morristown, N. J., appraisers appointed by your honorable Board, for their efficient assistance rendered in taking the same.

The improvements recommended in the report of this department made one year ago, and consisting of the new shops for the painters and masons and their supplies, the fitting of the Hospital with a system of telephone communication, the equipment of the gashouse with new benches of retorts of the Fleming pattern and the placing of sinks with hot and cold-water connections in the ward dining-rooms, the latter to the number of twenty (20), have been carried out in accordance with the plans there suggested, and have in each case proved to be a greater advantage than it was anticipated they would be. In addition to these improvements then contemplated, the following may be mentioned as among the most noticeable and beneficial betterments accomplished during this same time ;

PIANOS.

During the past year the wards have been furnished with six new pianos. The old pianos were purchased in the early days of the house and were past use as musical instruments. The new ones add much to the entertainment of the patients and cheerfulness of the halls.

BOILERS.

The nest of eight boilers which furnishes steam for the house has been reset. It was hoped to defer these repairs until another year, but, considering the dependency placed upon these boilers, it was thought best to do the work this year. The work was done by the mechanics employed by the Hospital, and at a cost considerably below the figures of a bid for this work submitted by the firm which originally placed the boilers in position.

Two new feed-pumps to the boilers have been placed in the boiler-house to take the place of those which had been in use from the opening of the house and had worn out.

STONE WALKS.

One thousand (1,000) feet of stone walk has been laid in the rear of the south wing. Sawed Ohio bluestone flagging, four feet wide, has been used. A larger part of the high board fence which inclosed these yards has been removed and the ground graded. The addition of the walks and other improvements will make this part of the grounds as attractive as any other. This will make a pleasant recreation ground for the patients.

Last year one thousand (1,000) feet of stone walk was laid on either side of the main avenue, between the double rows of trees. This walk is much appreciated from the fact that it is a good dry walk at all times of the year, and gives the patients opportunity for exercise at times when it cannot be taken elsewhere outdoors.

GRAND STAND.

During the summer a very substantial grand stand was built at the ball ground, with a seating capacity for easily five hundred people. Part of the space beneath the seats has been made into dressing-rooms and a washroom for the ball teams. The building is so arranged that the remainder of this space can be utilized for bowling alleys.

NEW BARN AND SHEDS.

The dairy barn and sheds which take the place of those burned in September, 1896, have been built during the past year. The general plan as described in the last report was carried out. This was that of a barn 62 x 124, with the cow stable, rootroom, feed bins and silo on the first floor, and hay loft and storage-rooms on the second, and two sheds, one on either side of the yard, 164 x 25 feet, with four box stalls each in the end next to the barn. The remainder of the shed is open, with a hay loft overhead. The sheds afford shelter in the inclement weather. Particular attention has been paid to the drainage and sewerage of the yard and buildings. The yard is 254 x 210 feet, graded so that it is drained through three traps built in a line in the center of the yard. The storm drainage is separate from the sewage, and is carried to the brook near the barn in a twelve-inch drain pipe. The sewage from the yard, the manure pit and the stables is carried to a settling tank about five hundred feet from the barn. Into this also flows the sewage of the slaughter-house and hog pens. The solids are collected in the settling tank, and the liquids flow from here in a six-inch pipe to the land in front of the building lying to the south and west of the main drive. Here, by a system of outlets, it is controlled so that it can be made to irrigate forty or fifty acres. At the point where the pipe crosses the stream which flows to the south of the main building, a trap has been made so that the water can be turned in with the sewage, and also used in irrigating the land. The six-inch pipe line which carries the sewage is three thousand one hundred and fifty (3,150) feet long. The ground floor of the barn, excepting the platforms on which the cows stand, is made of cement. At both ends of the stable are stand pipes with hose attached, to be used both for fire and for cleansing purposes. The six

large doors opening into the stable are provided with both a slat door and a solid door. The slat door makes it possible to have the barn closed and still have excellent ventilation. The buildings are supplied with water from a six-inch main connecting with both the upper and the lower reservoirs. There are two fire plugs, one at either end of the barn.

DAIRY.

In order to keep the dairy up to a high standard, no cows are used but that are large and young and show good points. These are bought either with calves at their sides, or as near-by springers. Such cows will yield milk for more than one year. The system of slaughtering the cows when it is no longer profitable to milk them is still followed, and being well fed when they go dry they are in good condition for slaughtering. The meat is used in the house. During the year the number of cows milked has averaged fifty-eight, with the average 11.20 quarts from each cow. The milk is at present cooled in a box in the barn. The water from a spring near the barn is used to cool the milk and supply the watering trough.

NEW RESERVOIR.

The new reservoir, the contract for which is paid for by an appropriation made by the State, is about ready for use. It has a capacity of six million two hundred and fifty thousand (6,250,000) gallons. The elevation of the surface of the water when the reservoir is full is one hundred and forty-four (144) feet above the water table of the new annex and two hundred and thirty-three (233) feet above that of the main building. This reservoir was built to supply water to the new annex, the elevation of which is too high to be supplied by the old reservoir, and to supplement the supply for the main building from the surplus. With the exception of one season, it has been necessary to pump every year since the opening of the house from the stream on the north of the Hospital into the reservoir supplying the Hospital. The appropriation was enough to build the reservoir, but not sufficient to buy all the pipe. The balance of the pipe and laying it will cost about two thousand five hundred dollars (\$2,500).

FARM AND GARDEN.

The crops from the farm and garden have been very good, with the exception of potatoes and tomatoes. The potatoes, like all grown in this vicinity, suffered from the potato rot. Under usual circumstances the crop would have yielded five thousand (5,000) bushels; as it was, less than a thousand bushels were gathered. The reclaiming of waste and swamp land has been carried on as in former years. This has increased the amount of tillable land so that it is possible to do more general cropping than formerly. Three thousand (3,000) bushels of corn in the ear have been raised this year in addition to the usual crops. The aim is to keep increasing the corn yield until enough is raised to supply the dairy with meal.

DITCHING AND IMPROVEMENT TO FARM LANDS.

Twenty-five acres of land have been underdrained and cleared of brush and stones. This took six thousand nine hundred and forty-two (6,942) feet of ditching. The system of underdrains on this ground is so arranged that all the water is gathered at one outlet. From a very recent test, these drains run eighty thousand (80,000) gallons per day. When the whole system is completed, they will run one hundred thousand (100,000). This water is gathered mainly from lasting springs. The outlet of the drains is thirty-seven feet above the floor of the boiler-house. Some valuable use could be made of this water in the future. By placing a power-pump in the boiler-house, the water could be pumped in the reservoir supplying the house at a very little increase over the original cost of the pump, as the engines have the power and could supply it with but small additional expense. The land gained by this underdraining is as fertile as any on the property. The object of this line of work is to increase the acreage of tillable land and to raise the standard of fertility, so as to get the best possible results from the property.

REQUIREMENTS.

The following is an approximate estimate for the amounts of money required from the State for the subjects herein mentioned, for the fiscal year ending October 31st, 1898 :

| | |
|---------------------------------------------------------------|-----------|
| For the annual appraisement..... | \$75 00 |
| For the salary of resident officers.. | 12,300 00 |
| For the maintenance of county patients..... | 53,000 00 |
| For the support and clothing of insane convicts | 16,500 00 |
| For the support and clothing of State indigent patients | 16,000 00 |

Respectfully submitted,

M. K. EVERITT,

Warden.

New Jersey State Hospital at Morris Plains, October 31st, 1897.

ACCOUNT STATEMENT

The following is a statement of account for the period from 1/1/1921 to 12/31/1921 for the patient of the name of _____

The total amount of charges for the period mentioned above is \$100.00. The amount of cash received from the patient is \$50.00. The amount of cash received from the State is \$50.00. The amount of cash received from the Hospital is \$0.00. The amount of cash received from the _____ is \$0.00.

Respectfully submitted,

M. K. KARRER

Manager

New Jersey State Hospital at Morris Plains, October 31st, 1921

ABSTRACT OF ACCOUNTS.

For the Fiscal Year Ending October 31st, 1897.

G. C. HINCHMAN, Treasurer.

DE.

| | |
|---------------------------------------------------------------------------------------------------------|--------------|
| To balance October 31st, 1896..... | \$20,312 17 |
| To amount received for board, clothing and incidental expenses of private patients.. | 58,200 83 |
| To amount received for board, clothing and incidental expenses of county patients. | 159,766 72 |
| To amount received from State Treasurer for county patients..... | 47,284 55 |
| To amount received from State Treasurer for convict patients. | 13,129 67 |
| To amount received from State Treasurer for State indigent patients.... | 6,700 00 |
| To amount received for hides, tallow, &c..... | 6,457 48 |
| To amount received for sundries, rags, &c..... | 1,644 78 |
| To amount received for hogs and pigs | 4,075 48 |
| To amount received for rents..... | 84 00 |
| To amount received for interest.. | 71 35 |
| To amount received from Treasurer's acceptance, No. 96, of November 30th, 1895, returned and canceled.. | 2 44 |
| To amount received from sundry insurance companies from loss by fire of cow-barn, shed and contents.. | 15,680 93 |
| | \$333,410 40 |

CR.

| | |
|---------------------------------------------|------------|
| Amusements | \$1,126 47 |
| Books and stationery | 1,407 63 |
| Bedding, linen, &c..... | 5,733 88 |
| Clothing | 10,461 32 |
| Crockery and cutlery | 796 63 |
| Counsel fees..... | 20 00 |
| Dairy | 6,459 97 |
| Ditching and improvement to farm land... .. | 3,449 49 |
| Farm | 11,446 61 |
| Fire apparatus | 352 00 |
| Flour | 6,250 90 |
| Fencing... .. | 567 20 |
| Fruit | 1,514 26 |

| | |
|--------------------------------------------------------|--------------|
| Freight..... | \$5,182 12 |
| Furniture..... | 3,948 99 |
| Fuel | 14,660 14 |
| Funeral expenses..... | 705 00 |
| Garden..... | 3,558 81 |
| Greenhouse | 1,173 75 |
| Loan of New Jersey State Hospital at Trenton | 10,000 00 |
| Grading | 5,667 72 |
| Grounds..... | 1,499 31 |
| Hay and straw..... | 1,475 36 |
| Harness, wagons, &c..... | 627 38 |
| Household goods..... | 2,442 17 |
| Improvement of buildings..... | 9,995 56 |
| Insurance..... | 643 00 |
| Incidentals..... | 3,650 55 |
| Laundry machinery and plumbing | 520 00 |
| Laundry..... | 6,005 13 |
| Light | 7,629 52 |
| Medical supplies..... | 4,412 19 |
| Medical library..... | 102 89 |
| Newspapers | 66 25 |
| New pianos | 1,015 00 |
| New buildings, new barn and sheds | 16,568 85 |
| Provisions and groceries..... | 90,318 95 |
| Postage..... | 712 20 |
| Petty current expenses | 500 00 |
| Pathological | 60 05 |
| Refunding | 1,623 59 |
| Repairs..... | 17,344 61 |
| Smith and wheelwright..... | 1,408 33 |
| Water mains (new barn) | 1,063 91 |
| Stone walks..... | 444 05 |
| Tinware and fixtures | 782 86 |
| Tools and supplies, boiler-house and machine shop..... | 545 70 |
| Telegrams, telephone rental, &c..... | 2,530 17 |
| Vegetables | 2,204 86 |
| Wages | 52,397 33 |
| | <hr/> |
| | \$323,080 66 |
| Balance in hands of Treasurer, October 31st, 1897..... | 10,329 74 |
| | <hr/> |
| | \$333,410 40 |

APPENDIX TO WARDEN'S REPORT.

FARM AND GARDEN PRODUCTS.

DAIRY AND FARM, 1897.

| | | | | |
|---------|-------------------------------------------------------|--------|-------------|--|
| 237,135 | Quarts milk (average number of cows milked, 58).....@ | \$0 04 | \$9,485 40 | |
| 100 | Dozen eggs..... | 20 | 20 00 | |
| 235 | Tons hay..... | 12 50 | 2,937 50 | |
| 30 | Tons rye straw..... | 15 00 | 450 00 | |
| 600 | Bushels rye..... | 40 | 240 00 | |
| 3,045 | Bushels corn (in ear)..... | 22 | 669 90 | |
| 365 | Bushels potatoes..... | 75 | 273 75 | |
| 1,000 | Bushels cow-horn turnips..... | 30 | 300 00 | |
| 200 | Bushels winter apples..... | 65 | 130 00 | |
| 60 | Bushels windfall apples..... | 50 | 30 00 | |
| 572 | Bushels cider apples..... | 10 | 57 20 | |
| 12 | Bushels crabapples..... | 50 | 6 00 | |
| 6,000 | Bundles cornstalks..... | 03 | 180 00 | |
| 1,200 | Bundles cornfodder .. | 03 | 36 00 | |
| 26 | Weeks' pasture for 65 head stock..... | 50 | 845 00 | |
| | | | \$15,660 75 | |

STOCK.

| | | | | |
|-------|-----------------------------------------|--------|-------------|--|
| 4,523 | Pounds veal (33 calves)@ | \$0 10 | \$452 30 | |
| 50 | Fowls..... | 50 | 25 00 | |
| 43 | Cattle slaughtered (25 845 pounds)..... | 07 | 1,809 15 | |
| | Amount received for hogs sold..... | | 4,075 48 | |
| | | | 6,361 93 | |
| | | | \$22,022 63 | |

GARDEN, 1897.

| | | | | |
|-------|-----------------------------------|--------|----------|--|
| 1,043 | Bushels tomatoes.....@ | \$0 75 | \$782 25 | |
| 690 | Bushels carrots..... | 40 | 276 00 | |
| 800 | Bushels parsnips..... | 40 | 320 00 | |
| 1,040 | Bushels beets..... | 40 | 416 00 | |
| 700 | Bushels mangel-wurzel..... | 30 | 210 00 | |
| 730 | Bushels rutabaga turnips..... | 30 | 219 00 | |
| 500 | Bushels yellow stone turnips..... | 30 | 150 00 | |
| 400 | Bushels flat turnips..... | 30 | 120 00 | |
| 539 | Bushels potatoes..... | 75 | 404 25 | |

| | | | |
|--------|-------------------------------|--------|--------------------|
| 268 | Bushels onions..... | \$0 50 | \$134 00 |
| 149 | Bushels selected apples..... | 65 | 96 85 |
| 600 | Bushels spinach..... | 40 | 240 00 |
| 700 | Bushels kale..... | 30 | 210 00 |
| 650 | Bushels bush beans..... | 60 | 390 00 |
| 275 | Bushels lima beans..... | 75 | 206 25 |
| 505 | Bushels peas..... | 1 00 | 505 00 |
| 105 | Bushels cucumbers..... | 60 | 63 00 |
| 70 | Bushels cucumber pickles..... | 1 25 | 87 50 |
| 40 | Bushels horseradish..... | 1 25 | 50 00 |
| 50 | Bushels oyster plant..... | 1 00 | 50 00 |
| 150 | Bushels grapes..... | 1 25 | 187 50 |
| 194 | Bushels bush squash..... | 40 | 77 60 |
| 44,500 | Heads celery..... | 02½ | 1,112 50 |
| 21,250 | Heads cabbage..... | 04 | 850 00 |
| 20,950 | Heads lettuce..... | 01½ | 314 25 |
| 350 | Heads early cauliflower..... | 05 | 17 50 |
| 28,000 | Bunches onions..... | 01½ | 420 00 |
| 38,900 | Bunches radishes..... | 01½ | 583 50 |
| 975 | Bunches carrots..... | 02 | 19 50 |
| 8,050 | Bunches asparagus..... | 10 | 805 00 |
| 11,500 | Bunches rhubarb..... | 04 | 460 00 |
| 1,970 | Bunches parsley..... | 03 | 59 10 |
| 2,760 | Bunches leeks..... | 03 | 82 80 |
| 950 | Bunches celery for soup..... | 05 | 47 50 |
| 200 | Bunches sage..... | 05 | 10 00 |
| 150 | Bunches thyme..... | 05 | 7 50 |
| 100 | Bunches sweet marjoram..... | 05 | 5 00 |
| 100 | Bunches savory..... | 05 | 5 00 |
| 15 | Bunches tarragon..... | 10 | 1 50 |
| 15 | Bunches chive..... | 10 | 1 50 |
| 18 | Baskets pears (Bartlett)..... | 60 | 10 80 |
| 15 | Baskets pears (Sheldon)..... | 75 | 11 25 |
| 25 | Baskets pears (Seckel)..... | 50 | 12 50 |
| 4,350 | Muskmelons..... | 04 | 174 00 |
| 3,100 | Ears sweet corn..... | 01 | 310 00 |
| 1,180 | Bundles cornstalks..... | 03 | 35 40 |
| 3,500 | Peppers..... | 00¼ | 8 75 |
| 300 | Pumpkins..... | 05 | 15 00 |
| 446 | Quarts blackberries..... | 10 | 44 60 |
| 658 | Quarts raspberries..... | 10 | 65 80 |
| 3,561 | Quarts strawberries..... | 10 | 356 10 |
| 250 | Quarts cherries..... | 10 | 25 00 |
| 651 | Quarts currants..... | 10 | 65 10 |
| | | | <u>\$11,131 65</u> |
| | | | <u>\$33,154 33</u> |

CUT FLOWERS AND PLANTS FURNISHED, 1897.

CUT FLOWERS.

| | |
|---------------------------|--------|
| Roses..... | 28,000 |
| Carnations..... | 18,000 |
| Sweet peas..... | 5,000 |
| Violets..... | 3,000 |
| Chrysanthemums..... | 700 |
| Stevia..... | 500 |
| Heliotrope..... | 200 |
| Iris..... | 100 |
| Gladiolus..... | 400 |
| Tuberoses..... | 200 |
| Asters..... | 2,000 |
| Bunches of coreopsis..... | 50 |
| Fresia..... | 500 |
| Roman hyacinths..... | 250 |
| Dahlias..... | 300 |
| Bunches of phlox..... | 50 |
| Strings of smilax..... | 200 |
| Strings of asparagus..... | 75 |
| Bunches of cosmos..... | 200 |
| Calla lilies..... | 100 |

DECORATIVE AND BLOOMING PLANTS GROWN IN POTS.

| | |
|------------------------|-----|
| Chinese primroses..... | 150 |
| Dutch hyacinths..... | 250 |
| Cineraria hybrida..... | 200 |
| Easter lilies..... | 150 |
| Chrysanthemums..... | 750 |
| Begonia..... | 150 |
| Calla lilies..... | 80 |
| Narcissus..... | 200 |
| Tulips..... | 300 |
| Marguerites..... | 25 |
| Hydrangea..... | 25 |

PLANTS AND BULBS GROWN FOR BEDDING.

| | |
|-----------------------|-------|
| Coleus..... | 500 |
| Geraniums..... | 2,200 |
| Stevia..... | 600 |
| Santalina..... | 500 |
| French canna..... | 800 |
| Alternanthera..... | 2,000 |
| Salvia splendens..... | 250 |
| Pyrethrum aureum..... | 500 |

| | |
|---------------------------|-------|
| Cineraria maritima..... | 800 |
| Ageratum..... | 200 |
| Caladium esculentum | 250 |
| Pansies | 1,800 |
| English daisies..... | 800 |
| Crotons..... | 250 |
| Rose plants..... | 800 |
| Carnation plants | 1,000 |
| Violet plants..... | 500 |
| Forget-me-not..... | 200 |
| Begonia vernon..... | 500 |

ACCOUNT OF FRUITS, &c, CANNED AND PRESERVED.

| | |
|---------------------------|-------------|
| Peaches..... | 91 quarts |
| Cherries | 15 quarts |
| Plums | 8 quarts |
| Raspberries..... | 9 quarts |
| Strawberries..... | 32 quarts |
| Pickled cucumbers..... | 46 quarts |
| Chili sauce. | 12 quarts |
| Mustard pickles..... | 13 quarts |
| Pickled cabbage | 3 quarts |
| Mangoes | 16 quarts |
| Preserved watermelon..... | 8 quarts |
| Pickled peaches..... | 12 quarts |
| Brandied peaches..... | 6 quarts |
| Crabapple jelly..... | 49 glasses |
| Currant jelly..... | 14 glasses |
| Tomatoes..... | 218 gallons |
| Canned peaches..... | 502 gallons |
| Crabapples | 56 gallons |

ARTICLES MADE IN SEWING-ROOM, 1897.

| | |
|------------------------|-------|
| Sheets..... | 3,002 |
| Double sheets..... | 66 |
| Pillow cases..... | 2,585 |
| Bolster cases..... | 30 |
| Hand towels | 2,240 |
| Roller towels..... | 450 |
| Dish towels..... | 815 |
| Table cloths..... | 158 |
| Napkins | 258 |
| Kitchen aprons | 254 |
| Chef's aprons..... | 7 |
| Butcher aprons..... | 12 |
| Barber aprons..... | 6 |
| Infirmiry aprons | 6 |

| | |
|-----------------------------------|--------|
| Curtains..... | 180 |
| Curtain bands..... | 174 |
| Blankets hemmed..... | 422 |
| Clothes bags..... | 78 |
| Chemise..... | 757 |
| Ladies' drawers..... | 406 |
| Petticoats..... | 529 |
| Under waists..... | 12 |
| Night dresses..... | 25 |
| Night shirts..... | 14 |
| Burial robes..... | 34 |
| Burial skirts..... | 34 |
| Burial chemise..... | 34 |
| Burial sheets..... | 34 |
| Dresses..... | 885 |
| Dress waists..... | 10 |
| Dress skirts..... | 3 |
| Wrappers..... | 12 |
| Dresses altered..... | 10 |
| Dresses (baby's wardrobe)..... | 12 |
| Petticoats (baby's wardrobe)..... | 24 |
| Total number of pieces..... | 13,578 |

RETURN OF WORK DONE IN MATTRESS-ROOM AND SHOE-SHOP.

| | |
|-------------------------------------------|-------|
| Single hair mattresses made, new..... | 707 |
| Double hair mattresses made, new..... | 9 |
| Single hair mattresses made over..... | 998 |
| Double hair mattresses made over..... | 42 |
| Hair pillows made, new..... | 773 |
| Hair pillows made over..... | 1,959 |
| Single hair mattress ticks made, new..... | 710 |
| Double hair mattress ticks made, new..... | 9 |
| Pillow ticks made, new..... | 986 |
| Feather pillows made, new..... | 173 |
| Sofa pillows made, new..... | 9 |
| Pieces of furniture upholstered..... | 108 |
| Large hall carpets made, new..... | 5 |
| Large hall carpets made over..... | 7 |
| Alcove carpets made, new..... | 5 |
| Alcove carpets made over..... | 3 |
| Connecting hall carpets made, new..... | 3 |
| Connecting hall carpets made over..... | 7 |
| Parlor carpets made, new..... | 4 |
| Parlor carpets made over..... | 2 |
| Room carpets made, new..... | 297 |
| Room carpets made over..... | 252 |
| Carpets taken up..... | 715 |

| | |
|-----------------------------------------------------|--------|
| Carpets laid..... | 763 |
| Carpets repaired..... | 120 |
| Rooms laid with linoleum..... | 3 |
| Chairs caned..... | 194 |
| Settees caned..... | 8 |
| Holland shades made, new..... | 355 |
| Long window curtains made, new..... | 4 |
| Long window curtains hung, in pairs..... | 42 |
| Ottomans made, new..... | 43 |
| Carpet doormats made, new..... | 25 |
| Pairs of holders made for bakery and gas house..... | 155 |
| Pieces of harness repaired..... | 70 |
| Pieces of harness made, new..... | 42 |
| Bed protectors made, new..... | 680 |
| Bed protectors repaired..... | 262 |
| Horse blankets repaired..... | 18 |
| Yards of carpet hemmed..... | 694 |
| Yards of carpet bound..... | 243 |
| Sets of mangle aprons made, new..... | 9 |
| Sets of mangle aprons repaired..... | 11 |
| Chair cushions made, new..... | 34 |
| Awnings put up..... | 27 |
| Awnings taken down..... | 27 |
| Mattress ticks repaired..... | 296 |
| Window shades repaired..... | 227 |
| American flags (10 x 22) made, new..... | 2 |
| Sets of heavy double harness..... | 2 |
| Pairs of boots, shoes and slippers repaired..... | 885 |
| Total number of pieces..... | 13,021 |

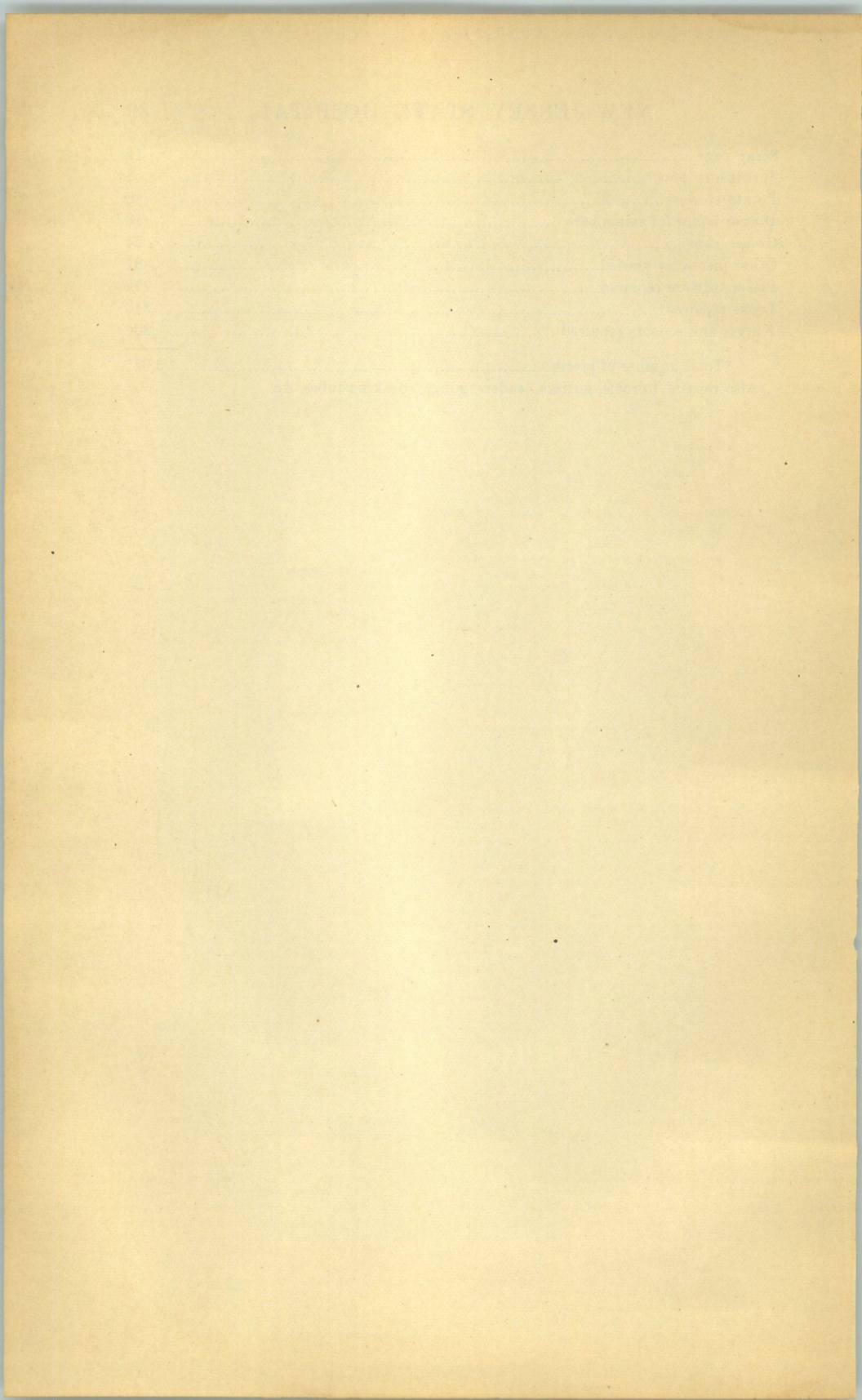
RETURN OF WORK DONE IN TIN-SHOP, 1897.

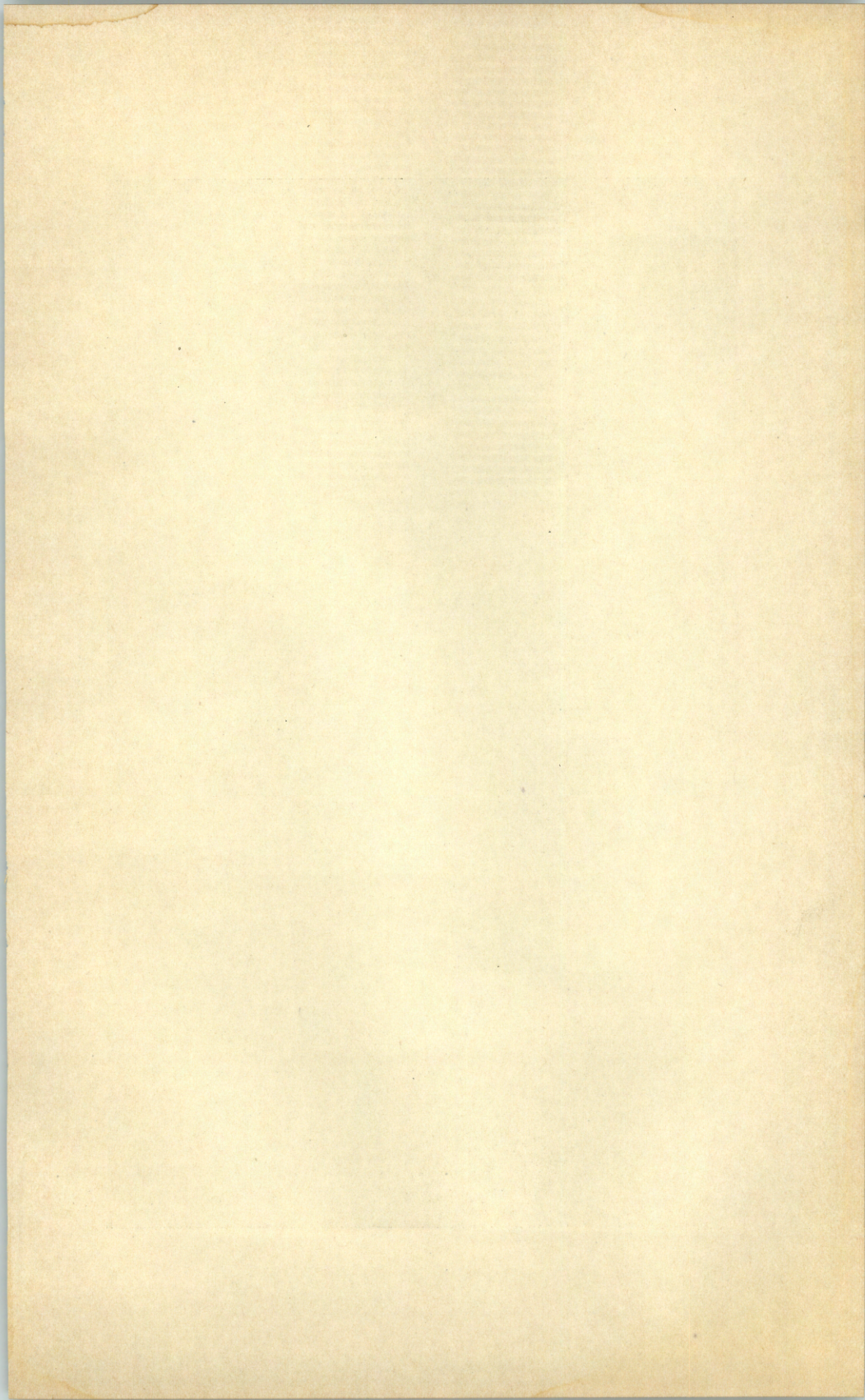
| | |
|--------------------------|-----|
| Rice pans..... | 172 |
| Butter boxes..... | 100 |
| Diet cups..... | 200 |
| Diet cup covers..... | 125 |
| Dust pans..... | 100 |
| Special diet flats..... | 224 |
| Biscuit pans..... | 75 |
| Pails..... | 68 |
| Fruit cans..... | 100 |
| Molasses pitchers..... | 50 |
| Washbasins..... | 40 |
| Drinking cups..... | 112 |
| Dippers..... | 52 |
| Tea and coffee pots..... | 20 |
| Small cake pans..... | 36 |
| Coffee kettles..... | 6 |

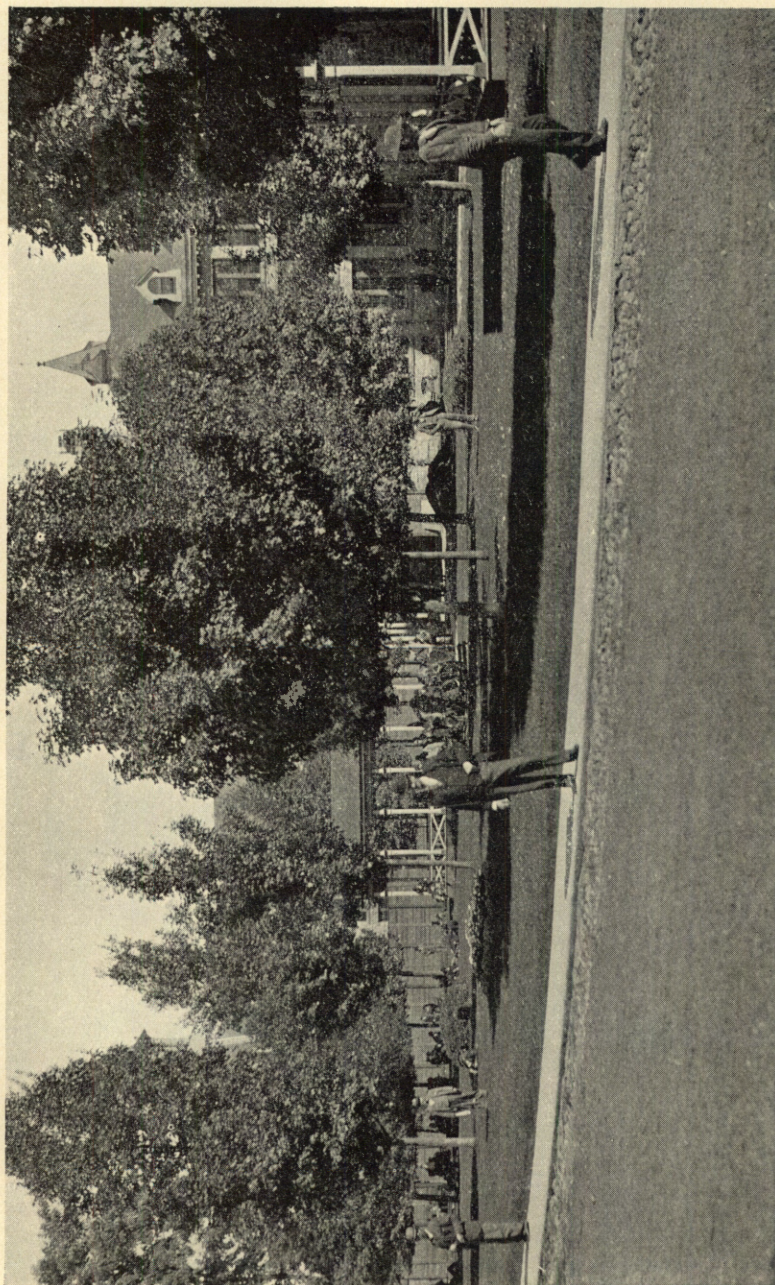
NEW JERSEY STATE HOSPITAL.

39

| | |
|---------------------------------------------------------------------|-------|
| Scrap pans..... | 12 |
| Sprinkling pots..... | 8 |
| Potato stewers..... | 6 |
| Dinner boxes for steam cars..... | 18 |
| Grease cans..... | 24 |
| Other pieces, as needed..... | 91 |
| Pieces tinware repaired..... | 772 |
| Locks repaired..... | 310 |
| Knives and scissors repaired..... | 306 |
| | <hr/> |
| Total number of pieces..... | 3,027 |
| Also repairs to roofs, gutters, leaders, gongs, speaking-tubes, &c. | |







PAVILION AND EXERCISE GROUNDS.—MALE DEPARTMENT (REAR).

REPORT OF THE MEDICAL DIRECTOR.

(41)

REPORT OF THE MEDICAL DIRECTOR

REPORT OF THE MEDICAL DIRECTOR.

To the Board of Managers :

GENTLEMEN—Herewith is submitted to you the twenty-second annual report of the Medical Department of the New Jersey State Hospital at Morris Plains.

TABLE I.

SHOWING THE ADMISSIONS, DISCHARGES AND DEATHS DURING THE YEAR ENDING
OCTOBER 31st, 1897.

| | Men. | Women. | Total. | Men. | Women. | Total. |
|--------------------------------------------------------------------------|------|--------|--------|-------|--------|--------|
| In the Hospital October 31st, 1896 | | | | 538 | 550 | 1,088 |
| Patients admitted— | | | | | | |
| First admission..... | 131 | 126 | 257 | | | |
| Not first admission..... | 21 | 16 | 37 | | | |
| Total admitted during the year..... | | | | 152 | 142 | 294 |
| Total number of patients under treatment during the year | | | | 690 | 692 | 1,382 |
| Patients discharged— | | | | | | |
| Restored | 34 | 39 | 73 | | | |
| Improved | 20 | 19 | 39 | | | |
| Unimproved | 2 | 12 | 14 | | | |
| Died..... | 40 | 38 | 78 | | | |
| By elopement | 1 | | 1 | | | |
| Total discharged and died | | | | 97 | 108 | 205 |
| Remaining in the Hospital..... | | | | 593 | 584 | 1,177 |
| Of this number there are, Public..... | 518 | 518 | 1,036 | | | |
| Private | 75 | 66 | 141 | | | |
| Total | | | | 593 | 584 | 1,177 |
| Whole number admitted from August 17th, 1876, to October 31st, 1897..... | | | | 2,559 | 2,357 | 4,916 |
| Whole number discharged during the same period of time— | | | | | | |
| Restored..... | 532 | 511 | 1,043 | | | |
| Improved..... | 453 | 463 | 916 | | | |
| Unimproved | 186 | 209 | 395 | | | |
| Died..... | 780 | 590 | 1,370 | | | |
| By elopement..... | 15 | | 15 | | | |
| Total | | | | 1,966 | 1,773 | 3,739 |
| Remaining October 31st, 1897..... | | | | 593 | 584 | 1,177 |

TABLE II.

MONTHLY ADMISSIONS, DISCHARGES AND AVERAGES.

| | ADMISSIONS. | | | DISCHARGES AND DEATHS. | | | DAILY AVERAGES. | | |
|-------------------|-------------|--------|--------|------------------------|--------|--------|-----------------|--------|----------|
| | Men. | Women. | Total. | Men. | Women. | Total. | Men. | Women. | Total. |
| 1896. | | | | | | | | | |
| November..... | 16 | 16 | 32 | 2 | 5 | 7 | 544.70 | 553.40 | 1,098.10 |
| December..... | 17 | 13 | 30 | 8 | 13 | 21 | 556.80 | 566.76 | 1,113.56 |
| 1897. | | | | | | | | | |
| January..... | 14 | 7 | 21 | 6 | 11 | 17 | 563.71 | 553.71 | 1,117.42 |
| February..... | 11 | 11 | 22 | 6 | 10 | 16 | 569.14 | 556.40 | 1,125.54 |
| March..... | 13 | 12 | 25 | 5 | 8 | 13 | 578.30 | 558.78 | 1,137.08 |
| April..... | 12 | 13 | 25 | 11 | 7 | 18 | 579.20 | 563.07 | 1,142.27 |
| May..... | 15 | 11 | 26 | 8 | 6 | 14 | 583.54 | 563.79 | 1,152.33 |
| June..... | 14 | 11 | 25 | 10 | 4 | 14 | 590.25 | 575.53 | 1,165.78 |
| July..... | 10 | 14 | 24 | 7 | 8 | 15 | 592.24 | 580.80 | 1,173.04 |
| August..... | 7 | 12 | 19 | 8 | 12 | 20 | 595.00 | 581.21 | 1,176.21 |
| September..... | 10 | 11 | 21 | 6 | 8 | 14 | 596.68 | 587.14 | 1,183.82 |
| October..... | 13 | 11 | 24 | 19 | 16 | 35 | 597.00 | 581.28 | 1,178.28 |
| Total..... | 152 | 142 | 294 | 96 | 108 | 204 | | | |
| For the year..... | | | | | | | 578.88 | 568.07 | 1,146.95 |

TABLE III.

NUMBER OF ATTACK OF THOSE ADMITTED.

| ATTACK. | Men. | Women. | Total. |
|-------------|------|--------|--------|
| First..... | 128 | 120 | 248 |
| Second..... | 20 | 12 | 32 |
| Third..... | 2 | 8 | 10 |
| Fourth..... | 1 | 1 | 2 |
| Fifth..... | 1 | 1 | 2 |
| Total..... | 152 | 142 | 294 |

TABLE IV.

AGE WHEN ADMITTED.

| AGE. | Men. | Women. | Total. |
|---------------------------------------|------|--------|--------|
| From fifteen to twenty years | 7 | 6 | 13 |
| From twenty to twenty-five years..... | 17 | 14 | 31 |
| From twenty-five to thirty years..... | 24 | 26 | 50 |
| From thirty to thirty-five years..... | 22 | 15 | 37 |
| From thirty five to forty years..... | 16 | 17 | 33 |
| From forty to forty-five years..... | 15 | 16 | 31 |
| From forty-five to fifty years..... | 18 | 17 | 35 |
| From fifty to sixty years.. .. | 14 | 15 | 29 |
| From sixty to seventy years..... | 13 | 9 | 22 |
| From seventy to eighty years..... | 3 | 5 | 8 |
| Eighty years and over | 3 | 2 | 5 |
| Total. | 152 | 142 | 294 |

TABLE V.

NATIVITY OF THOSE ADMITTED.

| NATIVITY. | Men. | Women. | Total. |
|--------------------|------|--------|--------|
| California | | 1 | 1 |
| Connecticut | 1 | 1 | 2 |
| Delaware | | 1 | 1 |
| Georgia | | 1 | 1 |
| Illinois | | 1 | 1 |
| Kentucky | | 1 | 1 |
| Maine..... | 1 | 1 | 2 |
| Maryland | 1 | | 1 |
| Massachusetts..... | | 1 | 1 |
| Missouri..... | 1 | | 1 |
| New Hampshire..... | | 1 | 1 |
| New Jersey..... | 65 | 52 | 117 |
| New York..... | 17 | 13 | 30 |
| Ohio | 2 | | 2 |
| Pennsylvania..... | 6 | 5 | 11 |
| Vermont | | 1 | 1 |
| Virginia..... | 2 | 3 | 5 |
| United States..... | 5 | 3 | 8 |
| Austria | 1 | 1 | 2 |
| Bavaria | 1 | | 1 |
| Belgium..... | | 1 | 1 |
| Canada | 1 | | 1 |
| England | 5 | 2 | 7 |
| France..... | | 1 | 1 |
| Germany..... | 13 | 16 | 29 |
| Holland | 2 | 4 | 6 |
| Ireland | 16 | 20 | 36 |
| Italy..... | 2 | | 2 |
| Norway | 1 | | 1 |
| Poland | 1 | 1 | 2 |
| Russia..... | 1 | 2 | 3 |
| Scotland..... | 1 | 2 | 3 |
| Sweden | 4 | 2 | 6 |
| Switzerland | | 3 | 3 |
| Wales | 1 | 1 | 2 |
| West Indies | 1 | | 1 |
| Total | 152 | 142 | 294 |

TABLE VI.

RESIDENCE OF THOSE ADMITTED.

| COUNTIES. | Men. | Women. | Total. |
|----------------------|------|--------|--------|
| Camden | | 1 | 1 |
| Bergen | 10 | 14 | 24 |
| Essex | 28 | 20 | 48 |
| Hudson | 21 | 21 | 42 |
| Hunterdon | 14 | 2 | 16 |
| Middlesex | 1 | | 1 |
| Monmouth | | 1 | 1 |
| Morris | 12 | 16 | 28 |
| Passaic | 21 | 30 | 51 |
| Somerset | 1 | | 1 |
| Sussex | 7 | 7 | 14 |
| Union | 26 | 17 | 43 |
| Warren | 6 | 10 | 16 |
| New York, N. Y. | 5 | 3 | 8 |
| Total | 152 | 142 | 294 |

TABLE VII.

CIVIL CONDITION OF THOSE ADMITTED.

| CIVIL CONDITION. | Men. | Women. | Total. |
|------------------|------|--------|--------|
| Single | 78 | 53 | 131 |
| Married | 67 | 68 | 135 |
| Widowed | 7 | 21 | 28 |
| Total | 152 | 142 | 294 |

TABLE VIII.

OCCUPATION OF THOSE ADMITTED.

Males.

| | |
|--------------------|-----|
| Artisans..... | 22 |
| Brokers | 3 |
| Carpenters | 4 |
| Clerks | 20 |
| Clergyman..... | 1 |
| Druggist..... | 1 |
| Engineer..... | 1 |
| Farmers | 16 |
| Lawyer..... | 1 |
| Laborers | 42 |
| Merchants..... | 10 |
| Mechanics..... | 6 |
| Masons | 2 |
| Mariners | 2 |
| Musician..... | 1 |
| Physician..... | 1 |
| Student..... | 1 |
| No occupation..... | 18 |
| Total..... | 152 |

TABLE IX.

OCCUPATION OF THOSE ADMITTED.

Females.

| | |
|--------------------|-----|
| Clerks | 6 |
| Housewives..... | 61 |
| Housekeepers | 9 |
| Laundresses..... | 6 |
| Nurse | 1 |
| Physician..... | 1 |
| Seamstresses..... | 3 |
| Servants | 24 |
| Silk weavers | 3 |
| Teachers..... | 4 |
| No occupation..... | 24 |
| Total..... | 142 |

TABLE X.

FORM OF MENTAL DISEASE OF THOSE ADMITTED.

| MENTAL DISEASE. | Men | Women. | Total. |
|-------------------------------|-------|--------|--------|
| Mania, acute..... | 22 | 37 | 59 |
| Mania, acute delirious..... | 1 | 1 | 2 |
| Mania, chronic..... | 7 | 16 | 23 |
| Mania, epileptic..... | 6 | 1 | 7 |
| Mania, puerperal..... | ..... | 1 | 1 |
| Mania, recurrent..... | 1 | 3 | 4 |
| Mania, toxic (alcoholic)..... | 9 | 2 | 11 |
| Melancholia, acute..... | 38 | 31 | 69 |
| Melancholia, agitata..... | 5 | 1 | 6 |
| Melancholia, chronic..... | 7 | 7 | 14 |
| Melancholia, recurrent..... | 1 | 1 | 2 |
| Melancholia, stuporous..... | 2 | ..... | 2 |
| Dementia, epileptic..... | 1 | 3 | 4 |
| Dementia, organic..... | 1 | 1 | 2 |
| Dementia, parietic..... | 11 | ..... | 11 |
| Dementia, senile..... | 6 | 12 | 18 |
| Dementia, terminal..... | 8 | 5 | 13 |
| Epilepsy..... | ..... | 2 | 2 |
| Idiocy..... | ..... | 1 | 1 |
| Imbecility..... | 4 | 3 | 7 |
| Imbecility with epilepsy..... | 2 | 2 | 4 |
| Adolescent insanity..... | 6 | 3 | 9 |
| Pubescent insanity..... | 2 | 1 | 3 |
| Choreic insanity..... | ..... | 1 | 1 |
| Morphinomania..... | 1 | 1 | 2 |
| Paranoia..... | 11 | 6 | 17 |
| Total..... | 152 | 142 | 294 |

TABLE XI.

MANNER OF SUPPORT OF THOSE ADMITTED.

| HOW SUPPORTED. | Men. | Women. | Total. |
|----------------|------|--------|--------|
| State..... | 28 | 21 | 49 |
| County..... | 81 | 82 | 163 |
| Private..... | 43 | 39 | 82 |
| Total..... | 152 | 142 | 294 |

TABLE XII.

ALLEGED CAUSES OF INSANITY OF THOSE ADMITTED.

| CAUSES. | Men. | Women. | Total. |
|-------------------------------------|------|--------|--------|
| <i>Physical.</i> | | | |
| Burns..... | | 1 | 1 |
| Chorea | | 1 | 1 |
| Congenital | 1 | 3 | 4 |
| Cerebral hemorrhage..... | 1 | 1 | 2 |
| Childbirth | | 6 | 6 |
| Epilepsy | 9 | 8 | 17 |
| General ill-health..... | 5 | 8 | 13 |
| Heat stroke..... | 2 | 1 | 3 |
| Heredity..... | 17 | 22 | 39 |
| Injury | 3 | 1 | 4 |
| Intemperance or other excesses..... | 16 | 5 | 21 |
| La grippe..... | 1 | 1 | 2 |
| Masturbation..... | 4 | | 4 |
| Meningitis | 1 | | 1 |
| Menopause..... | | 2 | 2 |
| Opium..... | 1 | 2 | 3 |
| Old age | 4 | 6 | 10 |
| Operation, Surgical..... | | 1 | 1 |
| Overwork | 7 | 3 | 10 |
| Pregnancy | | 4 | 4 |
| Syphilis | 4 | 1 | 5 |
| Total physical..... | 76 | 77 | 153 |
| <i>Moral.</i> | | | |
| Business troubles..... | 7 | | 7 |
| Domestic troubles..... | 4 | 6 | 10 |
| Disappointed affections..... | 1 | 2 | 3 |
| Financial reverses..... | 6 | 1 | 7 |
| Grief..... | | 4 | 4 |
| Religious excitement..... | 1 | 5 | 6 |
| Shock | 1 | 1 | 2 |
| Worry | 6 | 7 | 13 |
| Total moral..... | 26 | 26 | 52 |
| Total physical | 76 | 77 | 153 |
| Total moral..... | 26 | 26 | 52 |
| Unassigned | 50 | 39 | 89 |
| Total | 152 | 142 | 294 |

TABLE XIII.

COMPLICATIONS OF THOSE ADMITTED.

| COMPLICATIONS. | Men. | Women. | Total. |
|-----------------------------|-------|--------|--------|
| Arrythmia | 2 | ..... | 2 |
| Athetosis..... | 1 | ..... | 1 |
| Atrophied testicle..... | 2 | ..... | 2 |
| Anæmia..... | 2 | 1 | 3 |
| Burns..... | ..... | 1 | 1 |
| Cataract..... | 1 | 1 | 2 |
| Chorea..... | ..... | 1 | 1 |
| Chronic pleuritis..... | 1 | ..... | 1 |
| Cystitis..... | 1 | ..... | 1 |
| Deformed chest..... | 1 | ..... | 1 |
| Deaf-mute..... | ..... | 1 | 1 |
| Emphysema..... | 1 | ..... | 1 |
| Epilepsy..... | 9 | 8 | 17 |
| Endarteritis..... | 2 | ..... | 2 |
| Frozen feet..... | 1 | ..... | 1 |
| Fistula in ano..... | 1 | ..... | 1 |
| Gonorrhœa..... | 1 | ..... | 1 |
| Hemiplegia..... | 1 | 2 | 3 |
| Hernia..... | 5 | ..... | 5 |
| Inanition..... | 3 | 1 | 4 |
| Lacerated perinæum..... | ..... | 4 | 4 |
| Nephritis..... | 12 | 7 | 19 |
| Organic heart disease..... | 8 | 30 | 38 |
| Pulmonary tuberculosis..... | ..... | 1 | 1 |
| Pregnancy..... | ..... | 4 | 4 |
| Rheumatism..... | 1 | 1 | 2 |
| Strabismus..... | 1 | 1 | 2 |
| Syphilis..... | 6 | 1 | 7 |
| Varicocele..... | 3 | ..... | 3 |
| Homicidal tendencies..... | 21 | 11 | 32 |
| Suicidal tendencies..... | 29 | 28 | 57 |
| Without complications..... | 97 | 91 | 188 |

In this table several patients who had a number of complications have been noted more than once. Therefore, the totals would have no significance.

TABLE XIV.

HEREDITY OF THOSE ADMITTED

| HEREDITY | Men. | Women. | Total. |
|--------------------------------------|------|--------|--------|
| Insanity in family..... | 41 | 38 | 79 |
| Hereditary taint denied | 69 | 69 | 138 |
| Hereditary history unobtainable..... | 42 | 35 | 77 |
| Total | 152 | 142 | 294 |

TABLE XV.

DURATION OF TREATMENT BEFORE ADMISSION.

| PERIOD. | Men. | Women. | Total. |
|--------------------------------|------|--------|--------|
| Under one month..... | 31 | 36 | 67 |
| From one to three months..... | 35 | 33 | 68 |
| From three to six months..... | 12 | 11 | 23 |
| From six to twelve months..... | 15 | 13 | 28 |
| From one to two years..... | 18 | 10 | 28 |
| From two to three years..... | 8 | 8 | 16 |
| From three to four years..... | 6 | 3 | 9 |
| From four to five years..... | 6 | 5 | 11 |
| From five to ten years..... | 9 | 13 | 22 |
| From ten to twenty years..... | 7 | 5 | 12 |
| Over twenty years..... | 5 | 5 | 10 |
| Total | 152 | 142 | 294 |

TABLE XVI.

AGE WHEN ATTACKED OF THOSE RESTORED.

| AGE. | Men. | Women. | Total. |
|---------------------------------------|------|--------|--------|
| From fifteen to twenty years..... | 3 | 1 | 4 |
| From twenty to twenty-five years..... | 5 | 8 | 13 |
| From twenty-five to thirty years..... | 4 | 8 | 12 |
| From thirty to thirty-five years..... | 7 | 6 | 13 |
| From thirty-five to forty years..... | 6 | 5 | 11 |
| From forty to forty-five years..... | 3 | 5 | 8 |
| From forty-five to fifty years..... | 2 | 2 | 4 |
| From fifty to sixty years..... | 2 | 4 | 6 |
| From sixty to seventy years..... | 2 | ..... | 2 |
| Total..... | 34 | 39 | 73 |

TABLE XVII.

DURATION BEFORE ADMISSION OF THOSE RESTORED.

| DURATION. | Men. | Women. | Total. |
|--------------------------------|-------|--------|--------|
| Under one month..... | 15 | 16 | 31 |
| From one to three months..... | 11 | 11 | 22 |
| From three to six months..... | 4 | 4 | 8 |
| From six to twelve months..... | 3 | 2 | 5 |
| From one to two years..... | 1 | ..... | 1 |
| Over two years..... | ..... | 6 | 6 |
| Total..... | 34 | 39 | 73 |

TABLE XVIII.

DURATION OF TREATMENT OF THOSE RESTORED.

| DURATION OF TREATMENT. | Men. | Women. | Total. |
|-------------------------------------|------|--------|--------|
| Under one month | 2 | 3 | 5 |
| One to two months..... | 3 | 5 | 8 |
| Two to three months..... | 3 | 9 | 12 |
| Three to four months..... | 5 | 4 | 9 |
| Four to five months | 3 | 1 | 4 |
| Five to six months..... | 2 | 6 | 8 |
| Six to nine months. | 5 | 6 | 11 |
| Nine to twelve months..... | 4 | 3 | 7 |
| Twelve to eighteen months..... | 1 | 1 | 2 |
| Eighteen to twenty-four months..... | 3 | 1 | 4 |
| Two years and over..... | 3 | ..... | 3 |
| Total..... | 34 | 39 | 73 |

TABLE XIX.

MENTAL DISEASE OF THOSE RESTORED

| MENTAL DISEASE. | Men. | Women. | Total. |
|-----------------------------|-------|--------|--------|
| Mania, acute..... | 8 | 17 | 25 |
| Mania, puerperal..... | ..... | 1 | 1 |
| Mania, recurrent ..... | ..... | 2 | 2 |
| Mania, toxic (alcohol)..... | 4 | 2 | 6 |
| Melancholia, acute..... | 17 | 10 | 27 |
| Melancholia, chronic..... | 2 | 1 | 3 |
| Melancholia, recurrent..... | 1 | 1 | 2 |
| Dementia, primary..... | ..... | 1 | 1 |
| Adolescent insanity..... | 1 | 2 | 3 |
| Choreic insanity ..... | ..... | 1 | 1 |
| Morphinomania..... | 1 | 1 | 2 |
| Total | 34 | 39 | 73 |

TABLE XX.
AGE AT DEATH.

| AGE. | Men. | Women. | Total. |
|----------------------------------|-------|--------|--------|
| Ten to fifteen years..... | 1 | ..... | 1 |
| Fifteen to twenty years..... | 1 | ..... | 1 |
| Twenty to twenty-five years..... | 1 | ..... | 1 |
| Twenty-five to thirty years..... | ..... | 3 | 3 |
| Thirty to thirty-five years..... | 1 | 2 | 3 |
| Thirty-five to forty years..... | 3 | 4 | 7 |
| Forty to forty-five years..... | 4 | 5 | 9 |
| Forty-five to fifty years..... | 5 | 3 | 8 |
| Fifty to sixty years..... | 11 | 8 | 19 |
| Sixty to seventy years..... | 5 | 7 | 12 |
| Seventy to eighty years..... | 6 | 5 | 11 |
| Eighty years and over..... | 2 | 1 | 3 |
| Total..... | 40 | 38 | 78 |
| Average age at death..... | 54 | 52 | 53 |

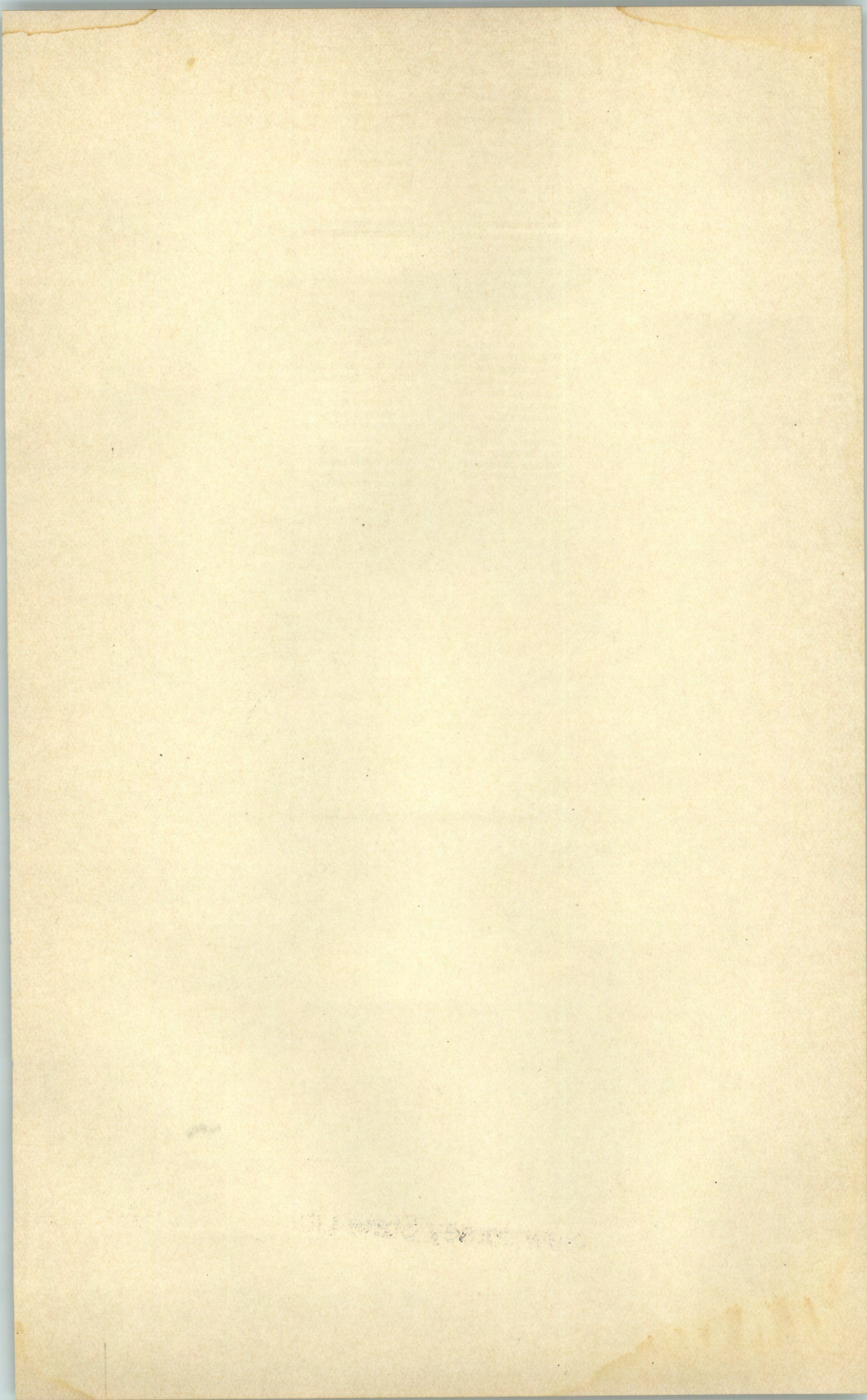
TABLE XXI.
FORM OF MENTAL DISEASE OF THOSE WHO DIED.

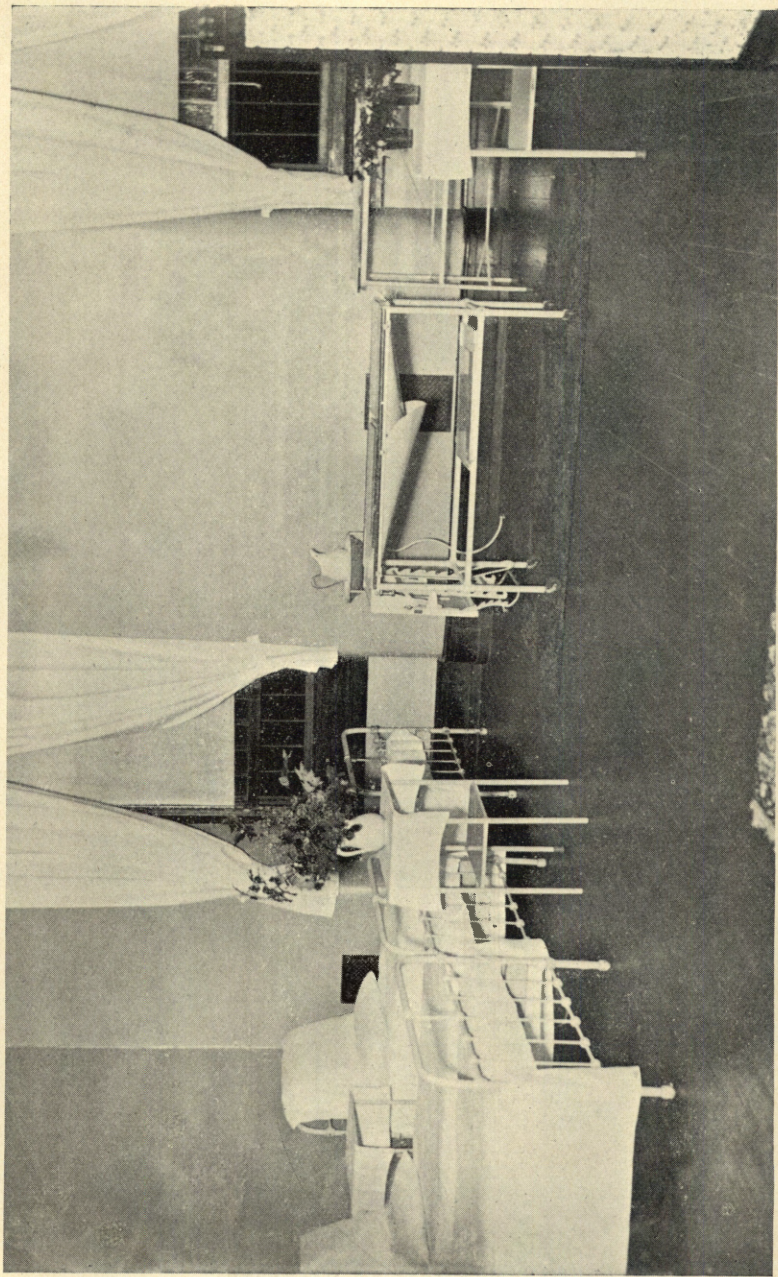
| MENTAL DISEASE. | Men. | Women | Total. |
|-------------------------------|-------|-------|--------|
| Mania, acute..... | 2 | 3 | 5 |
| Mania, acute delirious..... | 1 | 1 | 2 |
| Mania, chronic..... | 3 | 5 | 8 |
| Mania, epileptic..... | 1 | ..... | 1 |
| Mania, puerperal..... | ..... | 1 | 1 |
| Mania, recurrent..... | ..... | 1 | 1 |
| Melancholia, acute..... | 1 | 3 | 4 |
| Melancholia, chronic..... | 2 | 4 | 6 |
| Melancholia, stuporous..... | 1 | ..... | 1 |
| Dementia, epileptic..... | 1 | ..... | 1 |
| Dementia, organic..... | ..... | 1 | 1 |
| Dementia, parietic..... | 9 | 2 | 11 |
| Dementia, primary..... | ..... | 1 | 1 |
| Dementia, senile..... | 9 | 4 | 13 |
| Dementia, terminal..... | 6 | 11 | 17 |
| Imbecility..... | ..... | 1 | 1 |
| Imbecility with epilepsy..... | 1 | ..... | 1 |
| Paranoia..... | 3 | ..... | 3 |
| Total..... | 40 | 38 | 78 |

TABLE XXII.

CAUSES OF DEATH

| CAUSES. | MANIA | | MELANCHOLIA | | DEMENTIA. | | Total. |
|------------------------------------------------|-------|--------|-------------|--------|-----------|--------|--------|
| | Men. | Women. | Men. | Women. | Men. | Women. | |
| Mania— | | | | | | | |
| Acute, with chronic nephritis..... | | 1 | | | | | 1 |
| Acute, with exhaustion..... | 2 | | | | | | 2 |
| Acute, with gastro-enteritis..... | | 1 | | | | | 1 |
| Acute, with organic heart disease..... | | 1 | | | | | 1 |
| Acute, delirious, with exhaustion..... | 1 | 1 | | | | | 2 |
| Chronic, with acute pleurisy..... | 1 | | | | | | 1 |
| Chronic, with chronic nephritis..... | 1 | | | | | | 1 |
| Chronic, with exhaustion..... | | 2 | | | | | 2 |
| Chronic, with organic heart disease.. | | 1 | | | | | 1 |
| Chronic, with pneumonia..... | | 1 | | | | | 1 |
| Chronic, with pulmonary tubercu- losis..... | 1 | 1 | | | | | 2 |
| Epileptic, with status epilepticus..... | 1 | | | | | | 1 |
| Puerperal, with pneumonia..... | | 1 | | | | | 1 |
| Recurrent, with organic heart disease.. | | 1 | | | | | 1 |
| Melancholia— | | | | | | | |
| Acute, with dysentery..... | | | | 1 | | | 1 |
| Acute, with exhaustion..... | | | | 1 | | | 1 |
| Acute, with organic heart disease..... | | | | 1 | | | 1 |
| Acute, with pneumonia..... | | | 1 | | | | 1 |
| Chronic, with cerebral hemorrhage.. | | | | 1 | | | 1 |
| Chronic, with chronic gastritis..... | | | 1 | | | | 1 |
| Chronic, with chronic nephritis..... | | | | 2 | | | 2 |
| Chronic, with pulmonary tubercu- losis..... | | | 1 | 1 | | | 2 |
| Stuporous, with dysentery..... | | | 1 | | | | 1 |
| Dementia— | | | | | | | |
| Epileptic, with pneumonia..... | | | | | 1 | | 1 |
| Organic, with cerebral hemorrhage.. | | | | | | 1 | 1 |
| Paretic, with chronic nephritis..... | | | | | 2 | | 2 |
| Paretic, with convulsions..... | | | | | 3 | | 3 |
| Paretic, with entero colitis..... | | | | | 1 | | 1 |
| Paretic, with exhaustion..... | | | | | 3 | 2 | 5 |
| Primary, with pneumonia..... | | | | | | 1 | 1 |
| Senile, with cerebral hemorrhage..... | | | | | 1 | | 1 |
| Senile, with cerebral embolism..... | | | | | 1 | | 1 |
| Senile, with chronic nephritis..... | | | | | | 1 | 1 |
| Senile, with ery-ipelas..... | | | | | 1 | | 1 |
| Senile, with exhaustion..... | | | | | 4 | 1 | 5 |
| Senile, with organic heart disease.... | | | | | 1 | 2 | 3 |
| Senile, with pneumonia..... | | | | | 1 | | 1 |
| Terminal, with acute enteritis..... | | | | | 1 | 1 | 2 |
| Terminal, with carcinoma of breast.. | | | | | | 1 | 1 |
| Terminal, with chronic entero-colitis.. | | | | | | 1 | 1 |
| Terminal, with chronic nephritis..... | | | | | 2 | 2 | 4 |
| Terminal, with exhaustion..... | | | | | | 1 | 1 |





INFIRMARY.—FEMALE DEPARTMENT.

TABLE XXII.—Continued.

CAUSES OF DEATH.

| CAUSES. | MANIA. | | MELANCHOLIA. | | DEMENTIA. | | Total. |
|------------------------------------------------------------|--------|--------|--------------|--------|-----------|--------|--------|
| | Men. | Women. | Men. | Women. | Men. | Women. | |
| Terminal, with lateral and posterior spinal sclerosis..... | | | | | 1 | | 1 |
| Terminal, with organic heart disease..... | | | | | | 2 | 2 |
| Terminal, with pulmonary œdema..... | | | | | 2 | | 2 |
| Terminal, with pulmonary tuberculosis..... | | | | | | 3 | 3 |
| Imbecility, with pulmonary tuberculosis..... | | | | | | 1 | 1 |
| Imbecility, with epilepsy, with pneumonia..... | | | | | 1 | | 1 |
| Paranoia, with pulmonary emphysema..... | | | | | 1 | | 1 |
| Paranoia, with exhaustion..... | | | | | 1 | | 1 |
| Paranoia, with chronic nephritis..... | | | | | 1 | | 1 |
| Total..... | 7 | 11 | 4 | 7 | 29 | 20 | 78 |

TABLE XXIII.

SHOWING YEARLY INCREASE OF POPULATION SINCE OPENING OF INSTITUTION.

| YEARS. | 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 |

* One hundred patients transferred to Essex County Hospital.

† Eighty-five patients transferred to Hudson County Asylum.

RESUME.

The Hospital year closed with 1,177 patients—593 males and 584 females—98 more than were in the Hospital at the close of the preceding year. The manner of support of the 1,177 remaining October 31st, 1897, is as follows: One hundred and forty-one are supported by guardians, relatives or friends and are known as private patients; 106 are supported by the State and are known as State indigents and convicts, and 930 are county patients, supported by the respective counties of which they were residents and from which they were committed by the courts.

There were 294 admissions—152 males and 142 females. There was a steady increase in the number of patients from the beginning of the year to September 25th, when the census reached its highest point, the number of patients in the house at that time being 1,189—600 males and 589 females. During the month of October the census declined because of the large number discharged.

Of the 294 admitted, 248 had not previously been patients in this Hospital, while 47 were not first admissions.

Table IV. shows that the decade of life which furnished the greatest number of patients was between the 50th and 60th years.

Table XVI. shows that out of the 73 discharged as cured, 50 were between the ages of 20 and 40, giving proof that youth and early adult life, coupled with the vigor and bodily health usually incident to it, are strong factors in the re-adjustment or restoration of a deranged mind. Those in advanced age gave the greatest number of admissions and yielded the fewest recoveries.

Of the 294 admissions, 117 were born in New Jersey, 70 were born in other parts of the United States and 107 were of foreign birth; 286 were residents of New Jersey and 8 were non-residents. The non-residents were private patients and persons committed as State indigents under a recent law, for whom the courts were unable to fix a legal settlement in the State.

In previous years the number of married persons admitted was much in excess of the unmarried, but in the year just closed the difference is small, there being but four more married than unmarried. The cares and complications incident to married life seem not to have exerted a marked influence in the causation.

The death-rate for the year, computed upon the whole number under treatment, is 5.6 per cent. The number of recoveries during the year is 25 per cent. of the number admitted. The percentage of recoveries is high and the death-rate low; there were 73 recoveries during the year against 67 the previous year, and 78 deaths against 110. Another gratifying record is that but one patient escaped who was not returned to the Hospital.

Table XIII. shows that, aside from mental derangement, a large percentage of the persons admitted were suffering from one or more of the following bodily disorders: Athetosis, 1; atrophied testicle, 2; anæmia, 3; burns, 1; cataract, 2; chorea, 1; chronic pleuritis, 1; cystitis, 1; deformed chest, 1; emphysema, 1; epilepsy, 17; endarteritis, 2; frozen feet, 1; fistula in ano, 1; gonorrhœa, 1; hemiplegia, 3; hernia, 5; inanition, 4; lacerated perinæum, 4; pregnancy, 4; rheumatism, 2; strabismus, 2; syphilis, 7; varicocele, 3; without complications, 188.

In Table XXI. it will be found that those who died were afflicted with the following mental diseases: Acute mania, 5; acute delirious mania, 2; chronic mania, 8; epileptic mania, 1; puerperal mania, 1; recurrent mania, 1; acute melancholia, 4; chronic melancholia, 6; stuporous melancholia, 1; epileptic dementia, 1; organic dementia, 1; parietic dementia, 11; primary dementia, 1; senile dementia, 13; terminal dementia, 17; imbecility, 1; imbecility with epilepsy, 1; paranoia, 3.

HOSPITAL CROWDED.

Too much stress cannot be laid upon the dangers and inconveniences incident to the crowding of nearly 1,200 patients into a hospital with only a normal capacity for 800. This serious problem has been presented from year to year in former reports, but no actual relief has as yet been given. The gravity of the situation is too evident to call for elaborate consideration in this report. The Hospital year closed with 1,177 patients, or 377 in excess of its normal capacity. The discontinuation of the work on the new Hospital building was to the resident officers more than a simple disappointment. It meant that we must continue to herd together in dormitories and sleeping-rooms a number of patients regardless of sanitary laws, thus jeopardizing the health and comfort of all concerned; it meant the conversion of a hospital intended for the scientific classification and treatment of its

patients into a place offering hardly more than custodial accommodation; it meant that it would be impossible to entirely separate the violent and vicious from those afflicted with a milder form of mental trouble, thus unavoidably jeopardizing life in a manner more apparent than the violation of sanitary laws. This ignoring all principles of classification and placing dangerous patients with innocent and inoffensive ones necessarily keeps the officers of the Hospital in constant apprehension and fear that its records will be tarnished with a homicide. While the year closed has not such a blot upon its records, this lack of classification and the unavoidable crowding together has resulted in numerous bruises and on more than one occasion the breaking of bones. A fire in an institution is a possibility that is always borne in mind and so far as possible guarded against. Under the most favorable conditions in the event of such a calamity it is an extremely difficult task to remove patients safely. The gravity of the situation can be readily appreciated. We are confronted with wards, dormitories and rooms crowded with patients regardless of classification. Add to these alarming conditions low cots on the main floors of the wards, acting as stumbling-blocks and barriers to rapid egress, and a possibility is presented the reality of which we may be forced to face at any time.

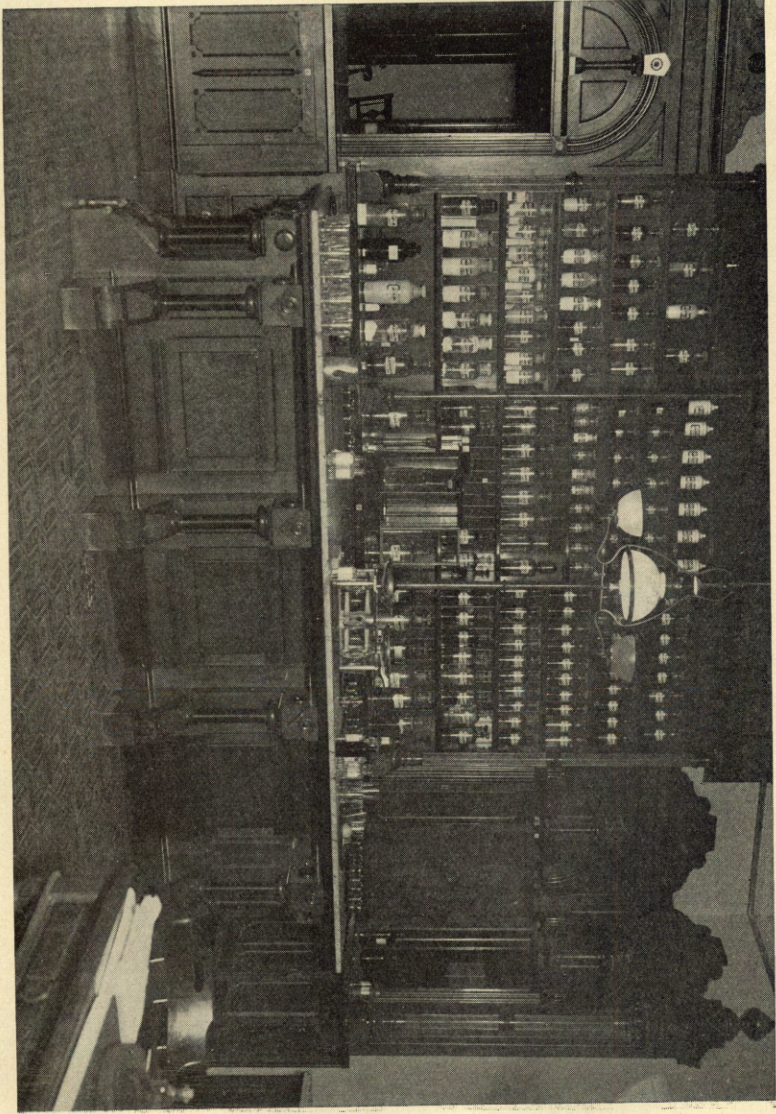
The placing of a large number of patients upon the floors in the corridors has been presented to you in a former report and was exhibited to a committee of the last Legislative Assembly of the State.

PATHOLOGICAL WORK.

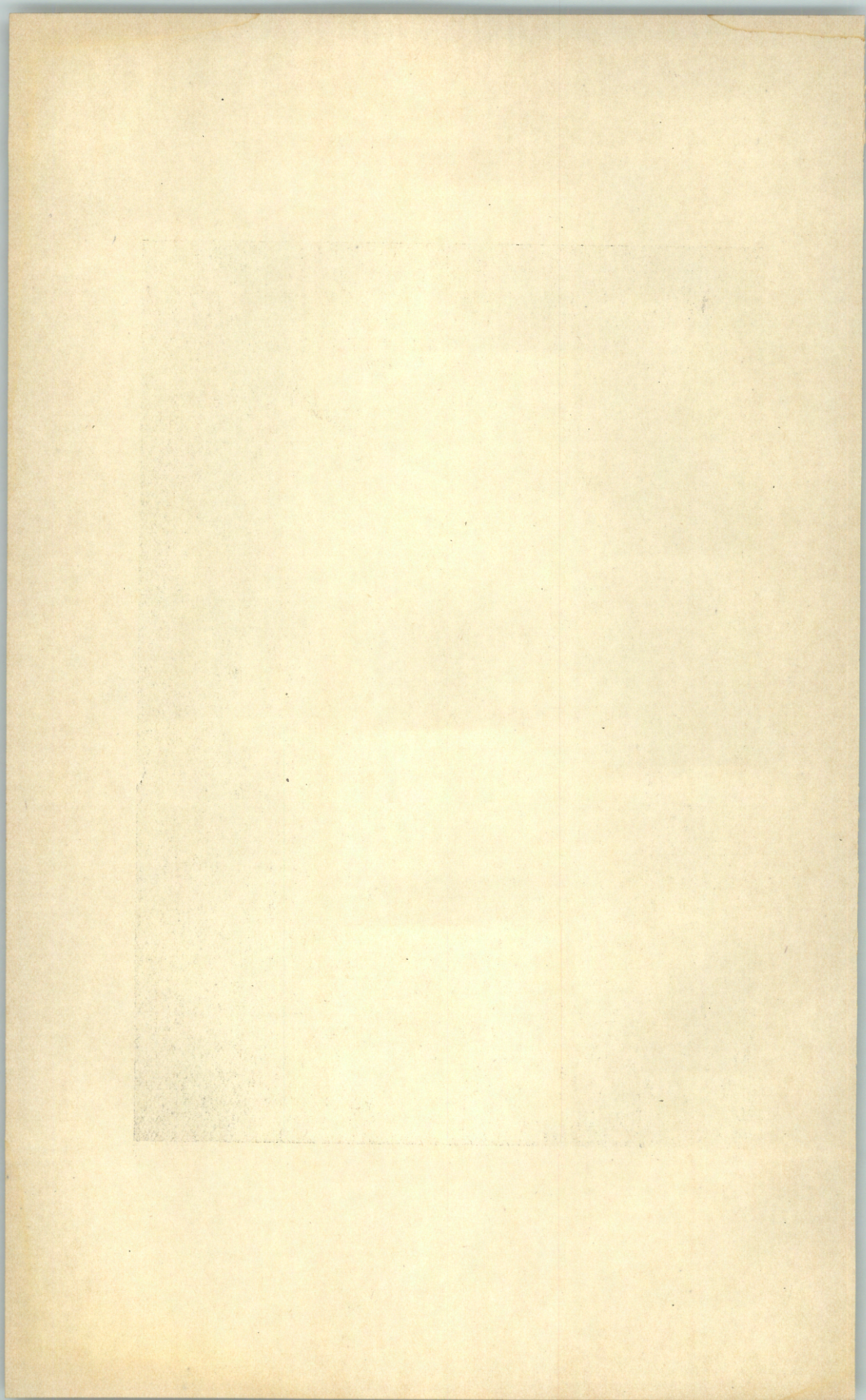
The work of the pathological laboratory, under the supervision of Dr. Thomas P. Prout, has been energetically and satisfactorily prosecuted during the year. Autopsies have been held in all cases when permission could be obtained from the friends and relatives, but the low death-rate has made the number of autopsies unusually small.

A large number of scientific examinations of blood has been made. This field of work promises much light to the study of mental disease. The study of thyroid treatment of mental diseases has impressed the medical staff with the importance of thorough blood examinations.

Thyroid extract has for years been used in the treatment of myxœdema. The first careful study of its application in the treatment of



DRUG ROOM.



mental diseases was made by Dr. Bruce, of the Royal Edinburgh Asylum, but he adduced nothing to distinguish the class of cases amenable to this treatment. The medical staff of this Hospital began the study of the blood and the making of differential counts in all cases which were to be treated with thyroid extract. By making thorough and scientific examinations before putting the patient upon the treatment, frequently while giving the drug and also after its discontinuance, it was found that it could be determined which cases would improve on thyroid and which would not.

It has also been found that by an examination of the blood, syphilitic complications can be better understood and more intelligently treated.

The result of the year's work in the pathological laboratory has been very gratifying. We have not been discouraged as to the future in this line of investigation, but more thoroughly convinced that it promises and bids fair to give a clearer comprehension of the diagnosis, causation and treatment of mental diseases.

We had hoped that the new building with its pathological rooms would have been completed before this time, giving us accommodations and facilities for this important work which cannot be obtained in the dark, small and inconvenient rooms now occupied.

TRAINING SCHOOL.

The training school has entered upon its fourth year; 23 men and 28 women, making a total of 51, have graduated and received diplomas; 19 men and 27 women, or 46 of the 51 graduates, are still in the service of the Hospital.

The character of the work done upon the wards by these nurses has so much improved that it is difficult to understand how we managed in the days when we had no training school.

Our graduates assist in giving instructions in bandaging, dressing wounds and sores, massage, taking temperatures, making records, &c.

With forty-six graduates upon the wards, while one of the two classes is attending lectures, we have an assurance that the work is being properly looked after.

The classes will grow smaller from year to year, the number of graduated nurses upon the wards increase and the ward service proportionately improve as well.

The training-school work has been attended with very gratifying results.

The following is the programme of the graduating exercises of the Class of '97:

PROGRAMME.

| | |
|-----------------------------------------|-------------------------|
| Music..... | Hospital Orchestra. |
| Invocation..... | Rev. Dr. Albert Erdman. |
| Music..... | Hospital Orchestra. |
| Report of Year's Work..... | Dr. B. D. Evans. |
| Address..... | Hon. John C. Eisele. |
| Music..... | Hospital Orchestra. |
| Presentation of Diplomas..... | Rev. J. M. Buckley. |
| Address and Presentation of Prizes..... | Rev. J. M. Buckley. |
| Music..... | Hospital Orchestra. |
| Benediction..... | Rev. J. R. Dill. |

EMPLOYMENT OF PATIENTS.

The following tables show that 79,359 days' work were done by both male and female patients, inclusive, on the wards, and 35,291 days' work were done by both sexes, inclusive, in the various industrial departments under charge of the Warden, making a total of 114,650 days' work done by patients.

TABLE 1.

NUMBER OF DAYS' WORK DONE BY PATIENTS ON THE WARDS.

| DATE. | Men. | Women. | Total. |
|----------------|--------|--------|--------|
| 1896. | | | |
| November | 3,122 | 2,808 | 5,930 |
| December | 3,429 | 3,038 | 6,467 |
| 1897. | | | |
| January | 3,666 | 3,003 | 6,669 |
| February | 3,307 | 2,775 | 6,082 |
| March | 3,780 | 2,937 | 6,717 |
| April..... | 3,702 | 2,820 | 6,522 |
| May..... | 3,939 | 2,888 | 6,827 |
| June..... | 4,383 | 2,818 | 7,211 |
| July..... | 4,100 | 2,951 | 7,051 |
| August..... | 4,092 | 2,644 | 6,736 |
| September..... | 3,615 | 3,013 | 6,628 |
| October..... | 3,404 | 3,115 | 6,519 |
| Total..... | 44,549 | 34,810 | 79,359 |

TABLE 2

NUMBER OF DAYS' WORK DONE BY PATIENTS IN THE INDUSTRIAL DEPARTMENTS.

| DATE. | LAUNDRY. | | | KITCHEN. | | | Bakery. | Farm and grounds | Shops. | Sewing-room work. | Total. |
|----------------|----------|--------|--------|----------|--------|--------|---------|------------------|--------|-------------------|--------|
| | Men. | Women. | Total. | Men. | Women. | Total. | | | | | |
| 1896. | | | | | | | | | | | |
| November..... | 181 | 303 | 484 | 339 | ..... | 339 | 48 | 925 | 287 | 445 | 2,528 |
| December..... | 219 | 344 | 563 | 352 | ..... | 352 | 54 | 1,078 | 306 | 410 | 2,763 |
| 1897. | | | | | | | | | | | |
| January..... | 223 | 324 | 547 | 276 | ..... | 276 | 52 | 1,060 | 232 | 448 | 2,615 |
| February..... | 190 | 327 | 517 | 313 | ..... | 313 | 48 | 991 | 279 | 358 | 2,506 |
| March..... | 232 | 406 | 638 | 366 | ..... | 366 | 54 | 1,073 | 324 | 481 | 2,936 |
| April..... | 192 | 413 | 605 | 330 | 4 | 334 | 52 | 1,230 | 310 | 502 | 3,033 |
| May..... | 182 | 383 | 565 | 373 | 17 | 390 | 72 | 1,286 | 308 | 359 | 2,980 |
| June..... | 175 | 448 | 623 | 339 | 12 | 351 | 75 | 1,335 | 227 | 356 | 2,967 |
| July..... | 189 | 528 | 717 | 342 | 28 | 370 | 70 | 1,360 | 365 | 420 | 3,302 |
| August..... | 161 | 525 | 686 | 354 | 25 | 379 | 101 | 1,192 | 393 | 371 | 3,122 |
| September..... | 181 | 529 | 710 | 405 | 26 | 431 | 104 | 1,183 | 387 | 420 | 3,235 |
| October..... | 182 | 499 | 681 | 377 | 35 | 412 | 104 | 1,164 | 363 | 480 | 3,204 |
| Totals..... | 2,307 | 5,029 | 7,336 | 4,166 | 147 | 4,313 | 834 | 13,877 | 3,881 | 5,050 | 35,291 |

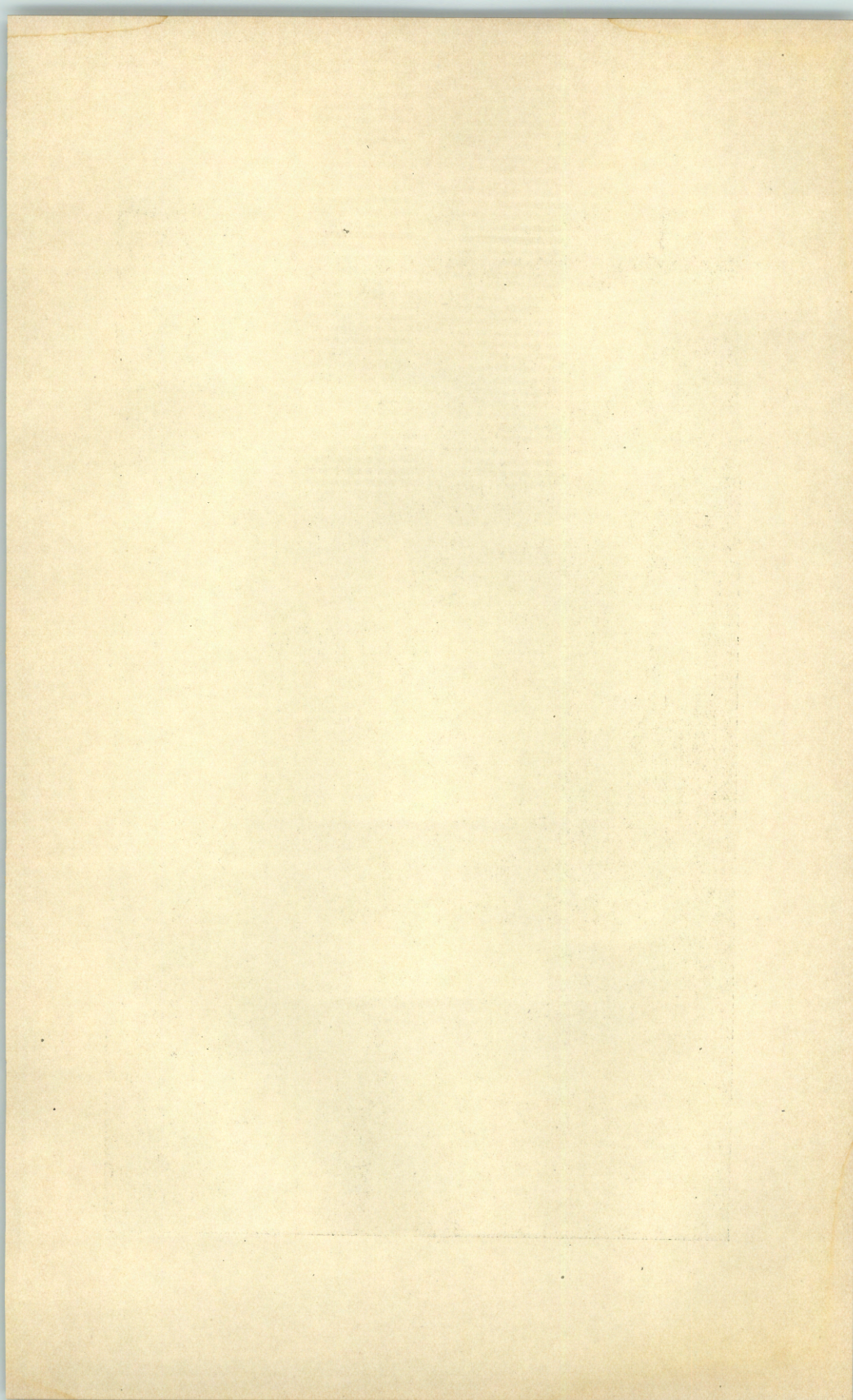
If the placing of patients in a hospital simply meant that they would be surrounded by the most approved sanitary conditions; that they would be placed in comfortably-furnished rooms and wards; that hygienic measures pertaining to ventilation and diet would be strictly observed, and their mental condition carefully inquired into and appropriate medication prescribed, it would still be far from a rational or scientific treatment of the insane. We must go further and institute means and methods calculated to divert the mind from abnormal channels, and experience has demonstrated the fact that this can be obtained in no better way than by giving the body judicious exercise. Nor can this result be gained by sending patients indiscriminately to amusements or the industrial departments. Amusements, serving as they do to banish "dull care" by replacing painful thoughts with others of a more pleasant character, are a necessary and important adjunct to treatment; add to this a proper amount of that form of exercise or work which employs not only the mind but the body, and we have placed the patient under the most favorable conditions for a return to mental health, assisting nature in her struggle for supremacy by obtaining as near as possible a perfect action of body and mind.

As a rule this employment has proven itself of benefit to the patients as evidenced by mental improvement. The devising of suitable employment for, and the observance of the capacity of each patient individually in conjunction with care not to overtax, nor to allow them to work out of doors in inclement or unsuitable weather, results in great good to the patients, aside from any benefit the Hospital derives from their labor. So much stress has been laid upon the proper employment of patients that many alienists go so far as to judge the efficiency of a hospital and measure the success of its work by the number of patients employed daily in its industrial departments and upon the wards. While a comparatively small number of patients have been employed, owing to the lack of proper facilities, yet the amount of work accomplished by those regularly employed is of greater proportions than is apparent to the casual observer. It is an important item and for that reason has been elaborated in the tabulated statements which show the different grades of work done and the number of days' service rendered.

As stated, it requires care in the selection of work suited to each case, and still further tact and intelligence in getting the patients themselves interested in the work laid out for them. The primary consideration should always be the welfare of the patients rather than the amount of work which can be obtained from them. The work should be assigned each patient according to his or her physical condition, ability and natural inclinations. The proper utilization of such labor to the benefit or profit of the Hospital is wholly legitimate and with no objectionable features when carried on within proper bounds.

EPILEPTICS.

In the last annual report I called your attention to the large number of epileptics in this Hospital. There were at the close of the Hospital year covered by the twenty-first annual report, 82 epileptics. The year covered by this report closes with 92 epileptics in the house. The unfortunate phase of this problem is found in the fact that practically no hope can be offered in the treatment of epileptics in a hospital for the insane. Once in such a hospital it may be safely said that the epileptic will remain there until removed by death. Epilepsy so positively and seriously affects the mind that when mental perversion is present sufficient to demand the placing of a person so afflicted





3-1 WARD.—FEMALE DEPARTMENT.

in a hospital for the insane, the outlook is practically for progressive mental deterioration only. The presence of epileptics jeopardizes both the interests of the convalescent insane and the epileptics themselves, and when it is possible their treatment and management in separate institutions is always advisable.

INFECTIOUS DISEASES.

Infectious and contagious diseases are always to be dreaded in a hospital for the insane. To have an epidemic in this Hospital, crowded as it is, would amount to a calamity; every bed and every room being occupied, it would be next to impossible to establish a satisfactory and effective isolation. Located so near large centers of population where infectious and contagious diseases are present throughout the year, our reason for apprehension is apparent and the need of a building for contagious diseases is impressed upon us with all the more force.

I am able to report that we had no epidemic in the Hospital this year. Two male attendants had measles in a mild form, but by isolating them in their rooms the spread of the disease was prevented.

Two female patients were afflicted with a fever presenting pronounced symptoms of typhoid, but an examination of the blood failed to give the Widal reaction and no other cases developed.

A child in the family of the upholsterer, whose place of residence is about five hundred yards in the rear of the Hospital building, was attacked with scarlet fever. A strict quarantine of the house and a close observance of quarantine regulations prevented the spread of the disease.

The cases of fever which I have mentioned will serve to direct attention to the fact that the Hospital is in great need of protection by the erection of a building set apart specially for infectious and contagious diseases.

CONVICTS AND CRIMINALS.

Since this subject was fully set forth in the last annual report, it is unnecessary that it should be discussed at length in this one, except to make record that the criminals and convicts have given us much trouble during the year and have made frequent attempts to escape, one dangerous convict succeeding.

The construction of three strong rooms for the most turbulent and troublesome convicts in that part of the male department known as the "Section" has added to our facilities for controlling them, but these rooms only accommodate three persons. To construct a number of rooms sufficient to prevent this class of patients from escaping would mean to give a large part of the house the appearance of a prison, and would then fail to protect the other patients from the disorganizing and contaminating influences of such association. Nothing short of the construction of a building, especially set apart for the criminal and convict insane, will satisfactorily solve the problem.

AMUSEMENTS.

It gives me pleasure to record the steady progress made in providing healthful outdoor diversions and amusements for the patients.

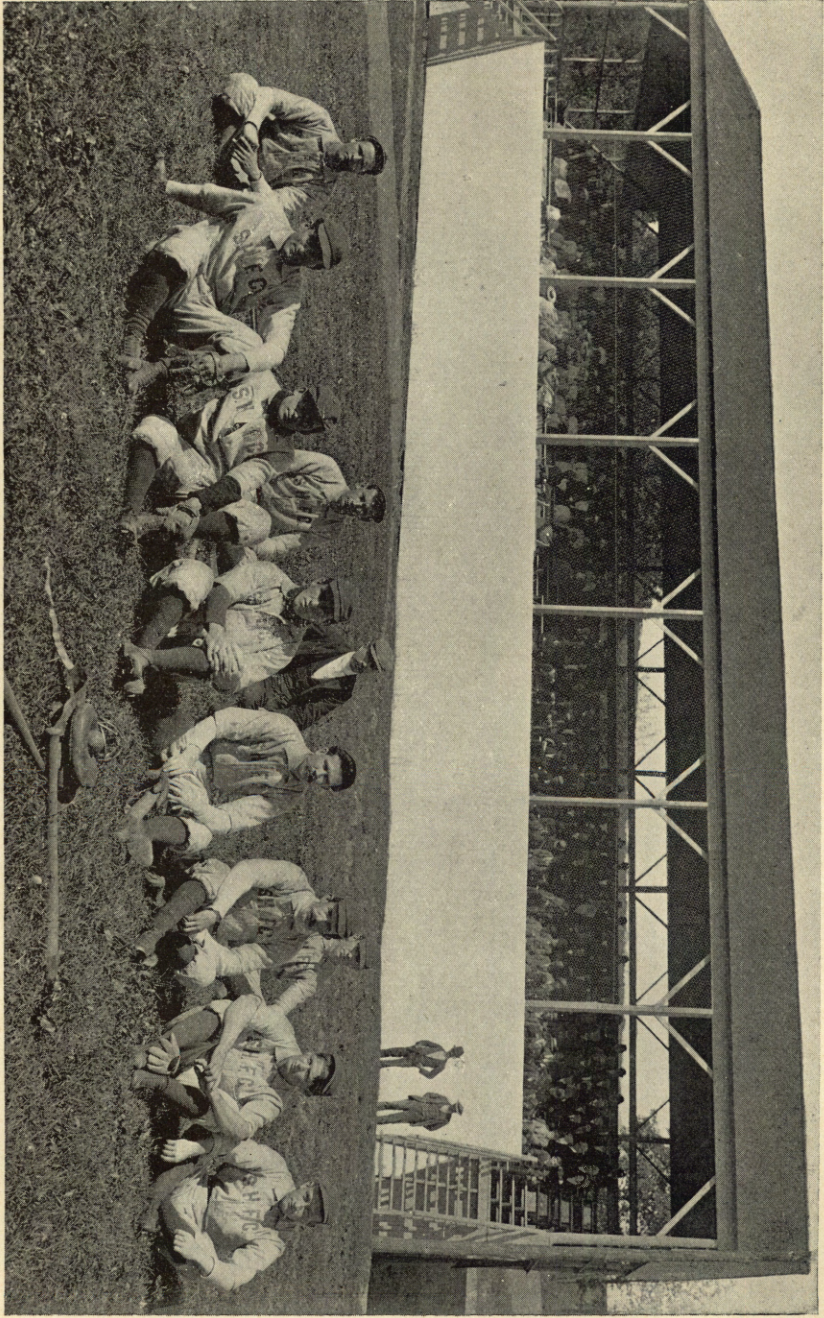
The outdoor sports prove helpful in many ways to participants and spectators. They induce patients who would otherwise remain in their rooms to go out into the open air and sunshine; their minds are in this way diverted from their vagaries; their rooms when vacated are subjected to sanitary influences and made more healthful.

Our patients take much interest in the base-ball contests and tennis games and are benefited by them. The erection of the grand stand, with a seating capacity for about 500 persons, is a decided acquisition to the amusement department of our work. It enables us to get a larger number of patients out to see the games and gives us a supervision over them we could not heretofore command.

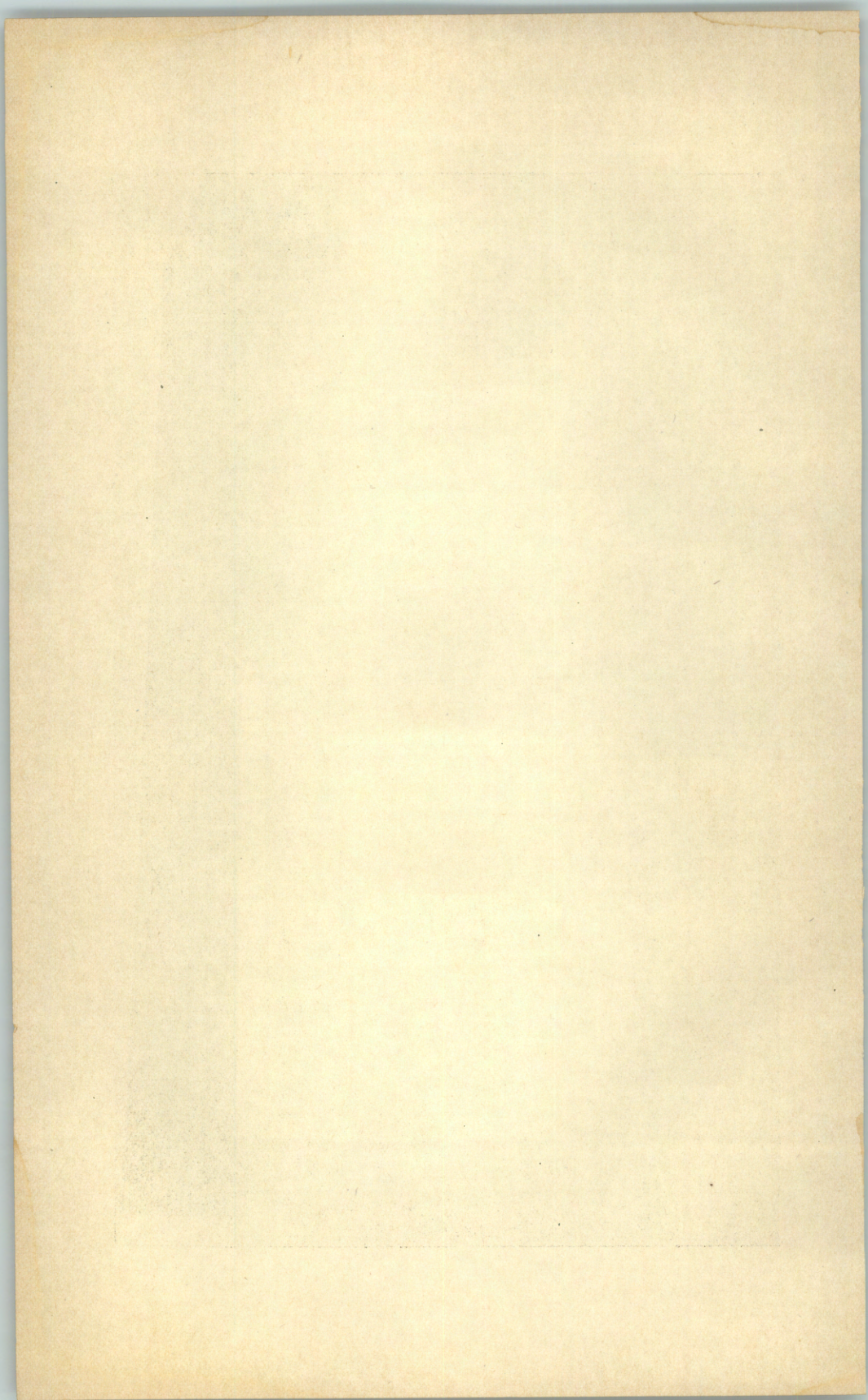
The indoor amusements, such as weekly dances, card parties, billiards, &c., have received much attention and still retain their popularity.

Occasional theatricals and musicales are given during the winter months and always to appreciative audiences. To one not intimately acquainted with the care and treatment of the insane the entertainments may seem to be an unimportant matter. They are potent factors in the treatment of our patients and are indispensable in a well-conducted hospital for the insane.

The construction of a bowling alley under the new base-ball grand stand would afford much invigorating and healthful exercise and entertainment to the patients during the season when outdoor sports cannot be carried on.



NEW BASE BALL GRAND STAND.



The building of a pavilion near the Hospital, where afternoon dances, musicales, band concerts, &c., can be held, would be a long-needed acquisition. In the warmer months of the year these entertainments have to be discontinued indoors, and in rainy weather the patients are deprived of band concerts. Such a building would not be expensive and would greatly add to the comfort and pleasure of the patients.

RELIGIOUS SERVICES.

Religious worship has been held in the Hospital chapel every Sunday afternoon throughout the year. The following clergymen have regularly conducted the services:

Rev. Dr. Albert Erdman, Presbyterian, Morristown.

Rev. Geo. P. Eckman, Methodist, Morristown.

Rev. S. Z. Batten, Baptist, Morristown.

Rev. A. M. Egan, Roman Catholic, Morris Plains.

Rev. William Fryling, Presbyterian, Morris Plains.

Rev. Dr. T. I. Coultas, successor to Rev. Geo. P. Eckman, has officiated on the Sunday set apart for Methodist worship since his arrival in Morristown. Rev. Dr. Norman Fox conducted the religious services one Sunday when Dr. Erdman was unable to be present.

All of these, as well as other clergymen in Morristown, have exhibited a willingness to respond to calls from the Hospital and give religious advice and consolation to the patients.

The funeral ceremonies over the indigent dead have been conducted by Rev. Father Egan and Rev. Mr. Pannell in all cases where the friends and relatives have not taken charge of the remains.

There were no changes in the medical staff during the year.

Mr. Howard M. Smith, house druggist, resigned and Dr. J. H. Crosby was appointed to the position and has acceptably performed the duties thereof.

The work of my assistants has been characterized by uniform loyalty to the Hospital. They have had many onerous duties and trying problems in the performance of their duties, and have at all times manifested commendable skill and ability. Their work has been highly gratifying to me.

I am pleased to acknowledge the courtesies received at the hands of the Warden and the department over which he presides.

Respectfully submitted,

B. D. EVANS, M.D.,

Medical Director.

Morris Plains, N. J., October 31st, 1897.

DONATIONS.

The Hospital gratefully acknowledges the receipt of the following contributions and courtesies :

November 14th, 1896, medical magazines and other periodicals from Dr. H. A. Buttolph, Short Hills, N. J.

December 24th, 1896, medical journals from Dr. Romeo F. Chabert, Hoboken, N. J.

December 31st, 1896, medical journals from Dr. H. A. Buttolph, Short Hills, N. J.

February 24th, 1897, gratuitous entertainment by the Young Men's Catholic Association Dramatic Club of Morristown.

February 26th, 1897, package of magazines from Mrs. Roscoe Lyon and Mrs. G. E. Kissell, of Morristown, N. J.

March 18th, 1897, large package of magazines from the Memorial Hospital of Morristown, N. J.

July 14th, 1897, package of periodicals from Miss Canfield, Morris Plains, N. J.

August 2d, 1897, large box of books and paper-covered novels, presumably from Mr. W. K. Thorne, Newport, R. I.

August 6th, 1897, package of magazines from Mrs. Roscoe Lyon, Morristown, N. J.

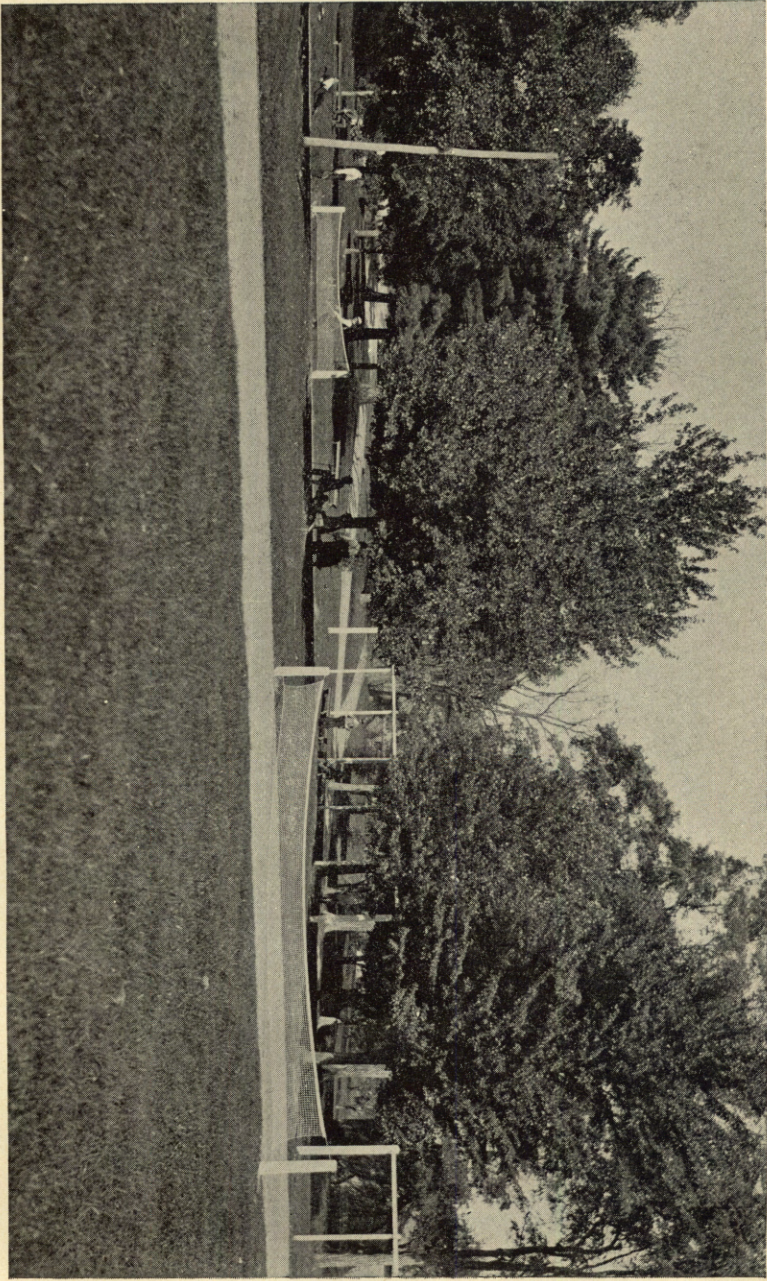
The following is a list of newspapers which have been regularly sent to the Hospital gratuitously, and are always welcome and appreciated :

| | |
|------------------------------------|----------------------------|
| The Observer..... | West Hoboken. |
| The Jersey City News..... | Jersey City. |
| The Evening Journal..... | Jersey City. |
| The New Jersey Staats Zeitung..... | Jersey City. |
| The Evening News..... | Hoboken. |
| The Bayonne Budget..... | Bayonne. |
| The Kearny Observer..... | { Kearny and Arlington. |

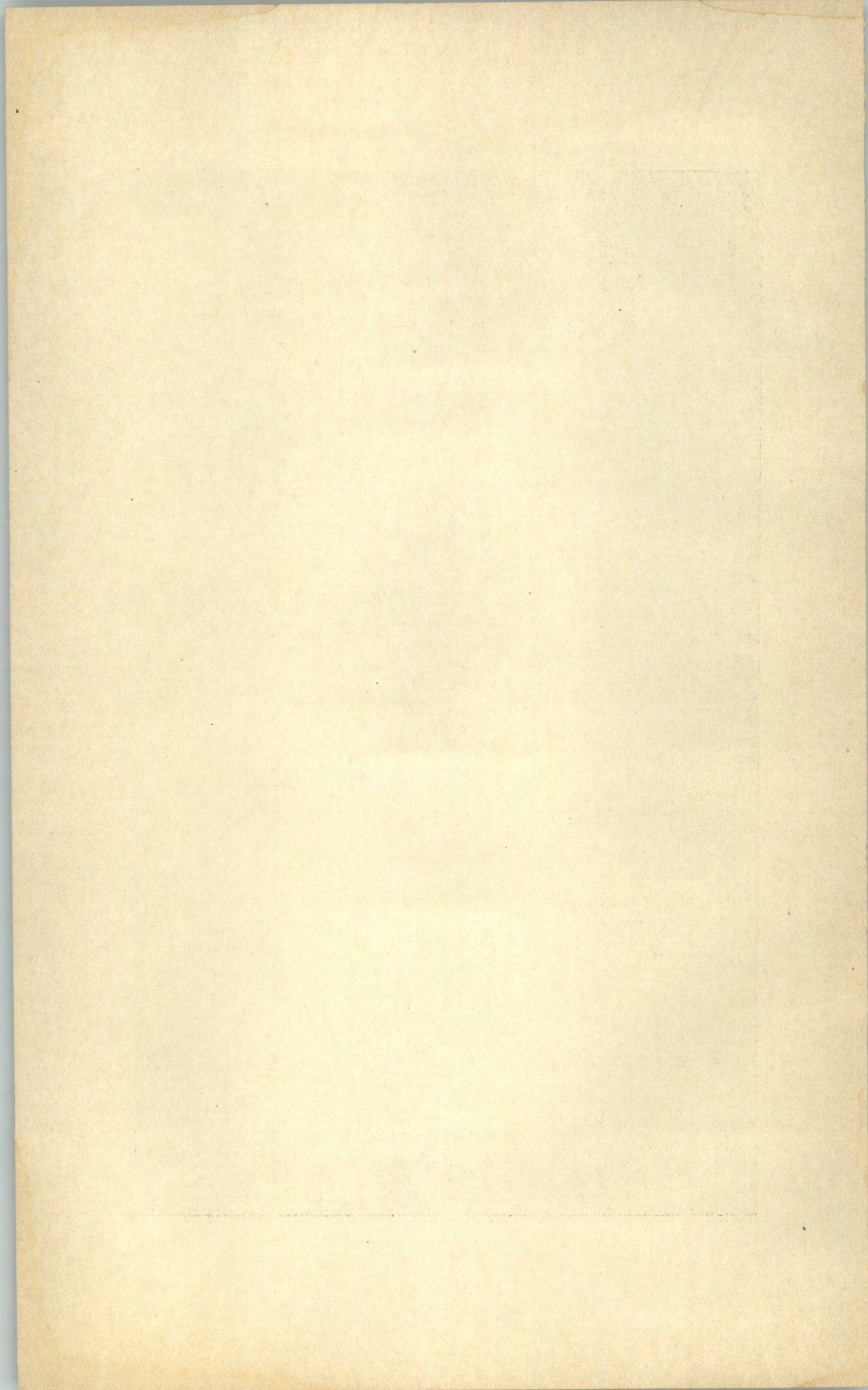
| | |
|----------------------------------|------------------|
| Hudson County Review..... | Town of Union. |
| Hunterdon County Democrat..... | Flemington. |
| Hunterdon Independent..... | Frenchtown. |
| Home Visitor..... | Flemington. |
| The Clinton Democrat..... | Clinton. |
| The Lambertville Record..... | Lambertville. |
| The Newark Sunday Call..... | Newark. |
| Town Talk..... | Newark. |
| New Jersey Trade Review..... | Newark. |
| New Jersey Deutsche Zeitung..... | Newark. |
| Newark Evening News... .. | Newark. |
| South Orange Bulletin..... | South Orange. |
| Newark Tribune..... | Newark. |
| Newark Pioneer..... | Newark. |
| The Bloomfield Record..... | Bloomfield. |
| The Bloomfield Citizen..... | Bloomfield. |
| The Newark Item..... | Newark. |
| The Orange Journal..... | Orange. |
| Orange Sonntagsblatt..... | Orange. |
| The Short Hills Item..... | Short Hills. |
| The Advance..... | Jamesburg. |
| Southwestern Presbyterian..... | New Orleans, La. |
| Paterson Volks Freund..... | Paterson. |
| De Telegraaf..... | Paterson. |
| Paterson Evening News..... | Paterson. |
| Passaic Daily News..... | Passaic. |
| Passaic City Record..... | Passaic. |
| The Union County Standard..... | Westfield. |
| Westfield Leader..... | Westfield. |
| The Constitutionalist..... | Plainfield. |
| The Daily Press..... | Plainfield. |
| The Summit Herald..... | Summit. |
| The Summit Record..... | Summit. |
| Elizabeth Daily Journal..... | Elizabeth. |
| Union County Record..... | Elizabeth. |
| Freie Presse..... | Elizabeth. |
| The Jersey Advocate..... | Rahway. |
| The Hackensack Republican..... | Hackensack. |
| The Bergen County Index..... | Hackensack. |
| The Englewood Times..... | Englewood. |
| Bergen County Herald..... | Rutherford. |
| Carlstadt Freie Presse..... | Carlstadt. |
| Hunterdon Republican..... | Flemington. |
| Democrat-Advertiser..... | Flemington. |
| The Milford Leader..... | Milford. |
| The Frenchtown Star..... | Frenchtown. |
| The Morris County Chronicle..... | Morristown. |
| The True Democratic Banner..... | Morristown. |
| The Evening Express..... | Morristown. |

NEW JERSEY STATE HOSPITAL.

The Jerseyman.....Morristown.
 The Iron EraDover.
 The Dover Index.....Dover.
 The Madison Eagle.....Madison.
 The Rockaway Record.....Rockaway.
 The Boonton Weekly Bulletin.....Boonton.
 The New Jersey Herald.....Newton.
 The PostPhillipsburg.
 The Warren Republican.....Hackettstown.
 The Warren Tidings.....Washington.
 The Warren Journal.....Belvidere.
 The Washington Star.....Washington.
 Warren DemocratPhillipsburg.
 The Morning Call.....Paterson.
 Paterson Daily Press.....Paterson.
 The Paterson Daily Guardian..... Paterson.



TENNIS COURTS.



REPORT OF
Thomas P. Prout, M.D., Resident Pathologist.

(71)

REPORT OF
THOMAS F. FROST, M.D., Forensic Pathologist

REPORT IN PATHOLOGY.

To the Medical Director :

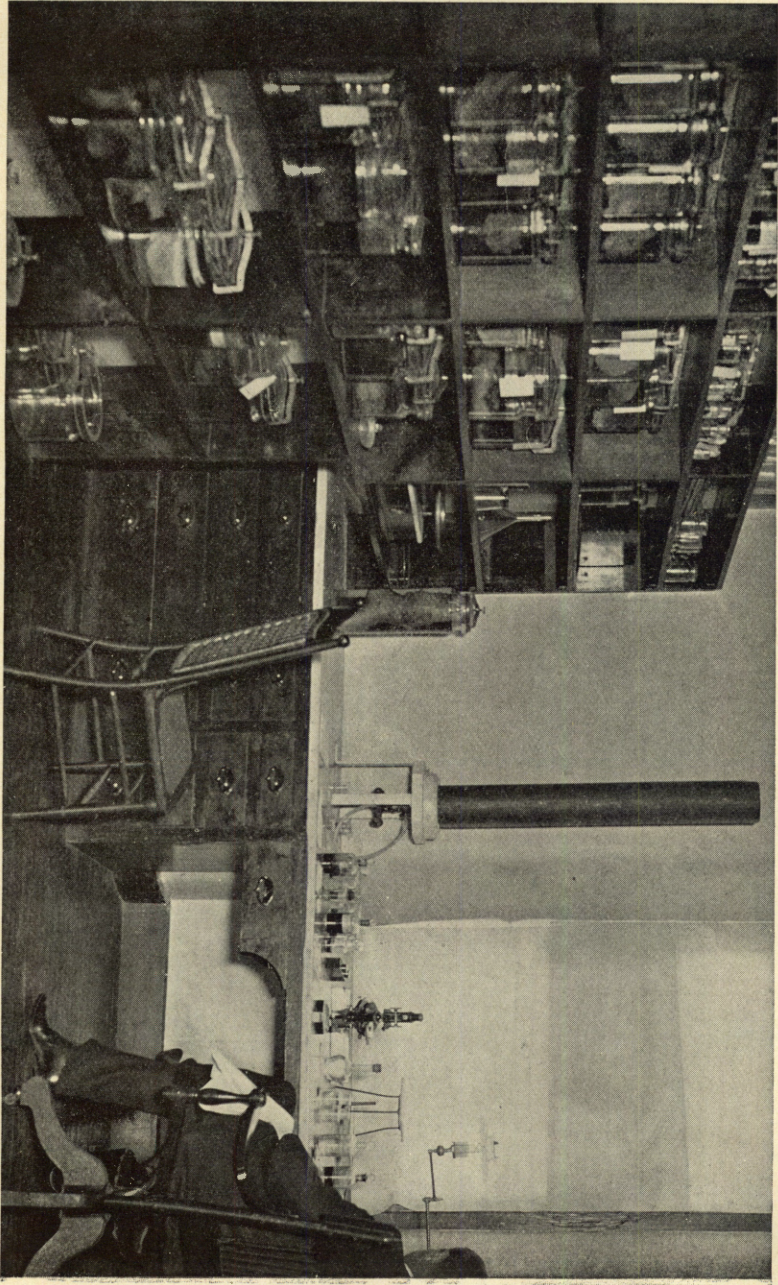
Eleven autopsies are comprised in this report. It is unfortunate that more post mortem material is not available, for the facts gathered from an autopsy are always valuable as statistics. During the past year we have been unable in many instances to obtain permission from the friends for an autopsy when such would have been highly interesting, and this, together with a low death-rate, has influenced the number of autopsies. However, it has given opportunity for work in another direction which otherwise could not have been done. In addition to the routine laboratory work, about two hundred complete blood examinations in various forms of mental disease have been made. This work is as yet incomplete and will not be published for some time.

I am convinced that the best work that can be done in a pathological laboratory of a hospital for the insane is along these lines, supplemented by a few autopsies to keep our ideas from becoming too much narrowed by a single closely-followed routine. The pathology of the future is the pathology of the living tissues and while post mortem findings are of much importance, if we are unacquainted with at least some of the conditions obtaining during life, the knowledge of post mortem pathological states will be of little value. In fact, pathological findings are of value only in proportion as they lead up to a knowledge of states existent in the living body and the phenomena accompanying life. Considered from this standpoint, therefore, the number of autopsies during the past year is not only enough, but more than enough for careful study. As was mentioned at the outset, however, I am fully aware of the statistical value of a large number of autopsies.

The statistical facts in regard to the autopsies are given in the following tables :

TABLE I.

| Number. | Sex | Age. | Mental Disease. | Duration. | Anatomical Diagnosis. |
|---------|-----|------|-----------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 226 | M. | 76 | Dementia, senile..... | 4 years.... | Localized cerebral softening. Chronic endocarditis. Chronic hepatic congestion. Chronic diffuse nephritis. |
| 227 | M. | 65 | Mania, chronic..... | 2 years.... | Pulmonary œdema. Chronic pleuritis. Chronic parenchymatous nephritis. Chronic hypertrophic splenitis. Chronic interstitial hepatitis with portal thrombosis. |
| 228 | M. | 35 | Melancholia, chronic. | 7 years ... | Fatty infiltration of heart. Chronic gastritis with foreign bodies in stomach. |
| 229 | F. | 80 | Dementia, senile..... | 1 month... | Chronic endocarditis. Chronic hepatic congestion. Chronic diffuse nephritis with cystic degeneration of the kidneys. |
| 230 | M. | 40 | Dementia, terminal.. | 18 years.... | Acute pulmonary œdema. Cerebral congestion. |
| 231 | M. | 67 | Mania, chronic..... | 2½ years... | Acute pleuritis with effusion. Fatty degeneration of the heart. Chronic hepatic congestion. Chronic diffuse nephritis. |
| 232 | M. | 41 | Melancholia, chronic. | 11 years.... | Subacute miliary tuberculosis. Chronic hepatic congestion. |
| 233 | F. | 65 | Melancholia, acute... | 4 months.. | Pulmonary tuberculosis. Fatty infiltration of the heart. Chronic diffuse nephritis. |
| 234 | M. | 72 | Dementia, senile..... | 5 years.... | Hypostatic pneumonia. Chronic endocarditis. Chronic pleuritis. |
| 235 | F. | 36 | Paresis..... | 1 yr. 9 m.. | Chronic diffuse nephritis. Chronic meningo encephalitis. |
| 236 | F. | 70 | Mania, chronic.. | 23 years.... | Chronic diffuse nephritis. Pulmonary œdema. Multiple fibromata of uterus. |



PATHOLOGICAL DEPARTMENT.

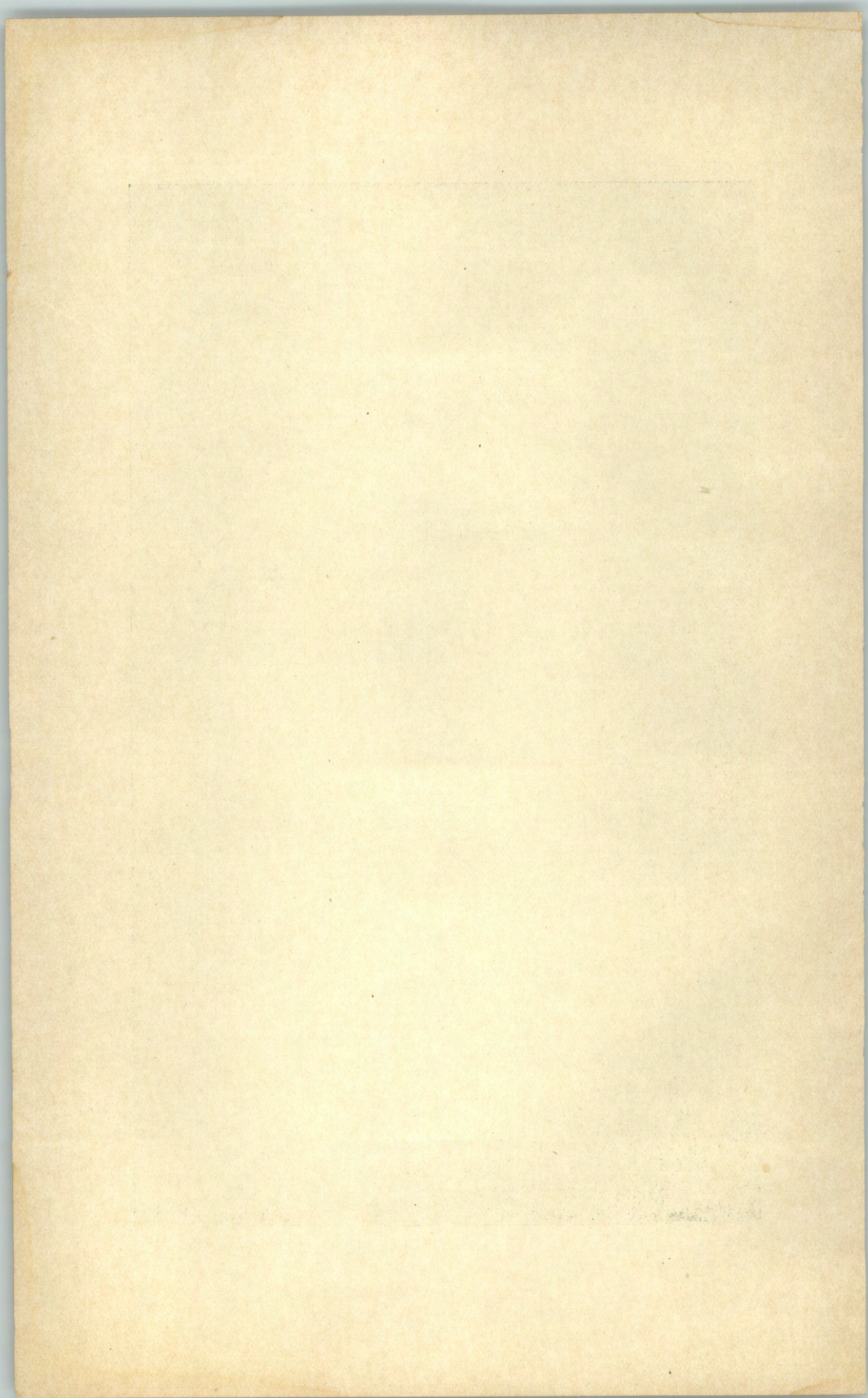


TABLE II.

| Number. | GROSS LESIONS OF ORGANS. | Brain membranes. | GROSS APPEARANCE OF BRAIN. | | |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------|---------------|------------------------------------------------------------------------|
| | | | Consistence. | Blood supply. | Other conditions. |
| | <i>Dementia, Senile.</i> | | | | |
| 226 | Lungs—Pleural surfaces adherent. Heart—Large. Mitral and aortic valves thickened and calcareous. Wall of right ventricle thin and fatty. Liver—Congested (passive) Gall bladder contains inspissated bile and gall stones. Gall duct impervious. Kidneys—Capsule very thin. Substance of increased consistence. Cortex thin. Striations obliterated. | Pia congested. | Diminished. | Anæmic.... | { Areas of localized softening. Convulsions atrophied. Cortex thin. |
| 229 | Heart—Mitral valve thickened. Aortic valve thickened and calcareous. Muscle flabby and fatty. Liver—Congested (passive) Kidneys—Capsules adherent. Cortex thin. Cystic. Stomach—Dilated. | Dura thickened. Pia, cedematous and opaque. | Diminished.. | Normal.... | { Convulsions atrophied; areas of localized softening. Cortex thin. |
| 234 | Lungs—Pleural surfaces slightly adherent. Marked hypostatic congestion in lower lobe Heart—Aortic valve thickened. | Normal..... | Diminished.. | Normal. | |
| | <i>Dementia, Terminal.</i> | | | | |
| 230 | Lungs—Very cedematous. | Both much congested... | Diminished.. | Congested. | |

TABLE II.—CONTINUED.

| Number. | GROSS LESIONS OF ORGANS. | Brain membranes. | GROSS APPEARANCE OF BRAIN. | | |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------|---------------|-----------------------------------------------------------------------|
| | | | Consistence. | Blood supply. | Other conditions. |
| | <i>Mania, Chronic.</i> | | | | |
| 227 | Lungs—Edematous. Pleural surfaces adherent. Tubercular scars in apices. Heart—Dilated. Fatty. Liver—Small. Thrombus in portal vein. Increased consistence. Enlarged. Kidneys—Striations obliterated. Diminished consistence. | Dura aræmic. Pia cedematous | Diminished.. | Anæmic..... | { Cortex thinned. Convulsions atrophied. |
| 231 | Lungs—Congested. Right completely carnified Pleural surfaces adherent. Cavity filled with exudate and fibrin. Heart—Fatty deposits in heart muscle. Wall of right ventricle very thin. Mitral valve thickened. Kidneys—Surface roughened. Substance of increased consistence. Striations poorly defined. | Dura adherent to brain and skull. Calcareous deposits. Pia cedematous. | Normal | Normal | { Slight atrophy of convulsions in the frontal region. |
| 236 | Lungs—Hypostatic and cedematous posteriorly. Heart—Old vegetation on aortic valve. Fatty infiltration. Kidneys—Small. Surface roughened. Cortex thin. Capsule adherent. Striations poorly defined. | Dura very adherent to skull. Pia very cedematous | Diminished.. | Normal | { Cortex thin. Convulsions atrophied. Cerebro-spinal fluid in excess. |

TABLE II.—CONTINUED.

| Number. | GROSS LESIONS OF ORGANS. | Brain membranes. | GROSS APPEARANCE OF BRAIN. | | |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------|---------------|--------------------------------------------------------------------|
| | | | Consistence. | Blood supply. | Other conditions. |
| | <i>Melancholia, Acute.</i> | | | | |
| 233 | Lungs—Old tubercular nodules. Glands at root enlarged. Pleural surfaces adherent. Heart—Muscle infiltrated with fat Kidneys—Small. Capsules adherent. Cortices thinned. Striations poorly defined. Consistence increased. | Slightly thickened..... | Diminished.. | Normal.... | { Convulsions in frontal region much atrophied. Cortex thin. |
| | <i>Melancholia, Chronic.</i> | | | | |
| 228 | Heart—Slight fatty infiltration. Stomach—Walls thickened. Covered with thick layer of mucus Congested. | Pia very œdematous..... | Diminished.. | Anæmic.... | { Convulsions coarse and atrophied in the frontal region. |
| 232 | Lungs—Filled with miliary tubercles. Cavities in both apices. Liver—Congested (passive) | Pia presents a hemorrhagic membrane on inner surface..... | Diminished.. | Anæmic.... | { Convulsions show some atrophy in frontal region. Cortex thinned. |
| | <i>Paresis</i> | | | | |
| 235 | Liver—Slightly fatty. Spleen—Very small. Kidneys—Surface roughened Cortex thin. Striations poorly defined. | Dura congested. Pia thickened, œdematous, opaque and adherent to brain surface..... | Increased.... | Normal.... | { Cortex very thin and extreme atrophy of some of the convulsions. |

The additional facts of interest are presented in few words. The average age at death was nearly 59 years, and the average duration of mental disease was about six years and nine months.

In seven of the autopsies there was a gross kidney lesion, a percentage of 63.6. This is slightly below the percentage for last year, which was 66.6.

If we reproduce last year's table bearing on this subject which gave the percentage of gross kidney lesions by ages for the three years previous and make additions to it for the past year, the relative frequency of kidney lesions in the insane as shown by the 100 autopsies during the past four years will appear as follows:

| AGE. | No. | Showing gross kidney lesion. | Without gross kidney lesion. | Per cent. showing gross kidney lesion. |
|------------------|-----|------------------------------|------------------------------|----------------------------------------|
| Below 30..... | 14 | 6 | 8 | 42.8 |
| 30 to 40..... | 15 | 9 | 6 | 60.0 |
| 40 to 50..... | 25 | 18 | 7 | 72.0 |
| 50 to 60..... | 18 | 11 | 7 | 61.1 |
| 60 and over..... | 28 | 23 | 5 | 82.1 |
| Total..... | 100 | 67 | 33 | 67.0 |

As a matter of fact, the percentages are very little changed from those appearing in the table last year.

MICROSCOPICAL APPEARANCES.

SUPRARENAL BODIES.

During the year some attention has been given to the microscopical appearances of the suprarenal capsules. In the light of present knowledge these bodies can no longer be considered mere foetal relics, but organs whose function is of great importance in the animal economy. A number of facts have recently been presented which indicate an importance of these organs to the central nervous system. Dr. H. D. Rolleston in the Gouldstonian lectures for 1895 calls attention to the fact that these bodies have been found absent in a number of anencephalics and hemicephalics ("British Medical Journal," March 23d, 30th and April 6th), and Alexander* has been able to associate

* Quoted by Rolleston.

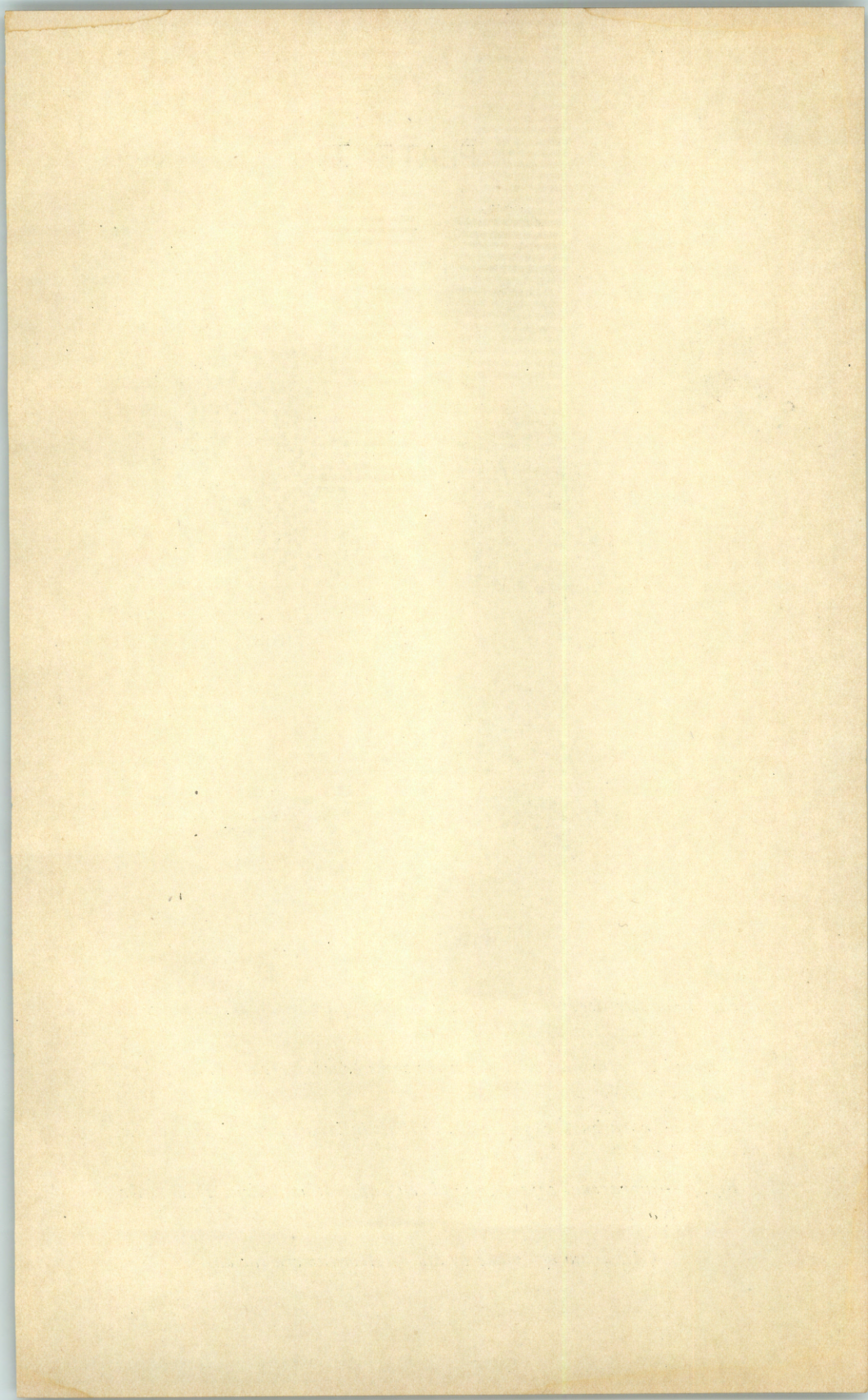


PLATE I.

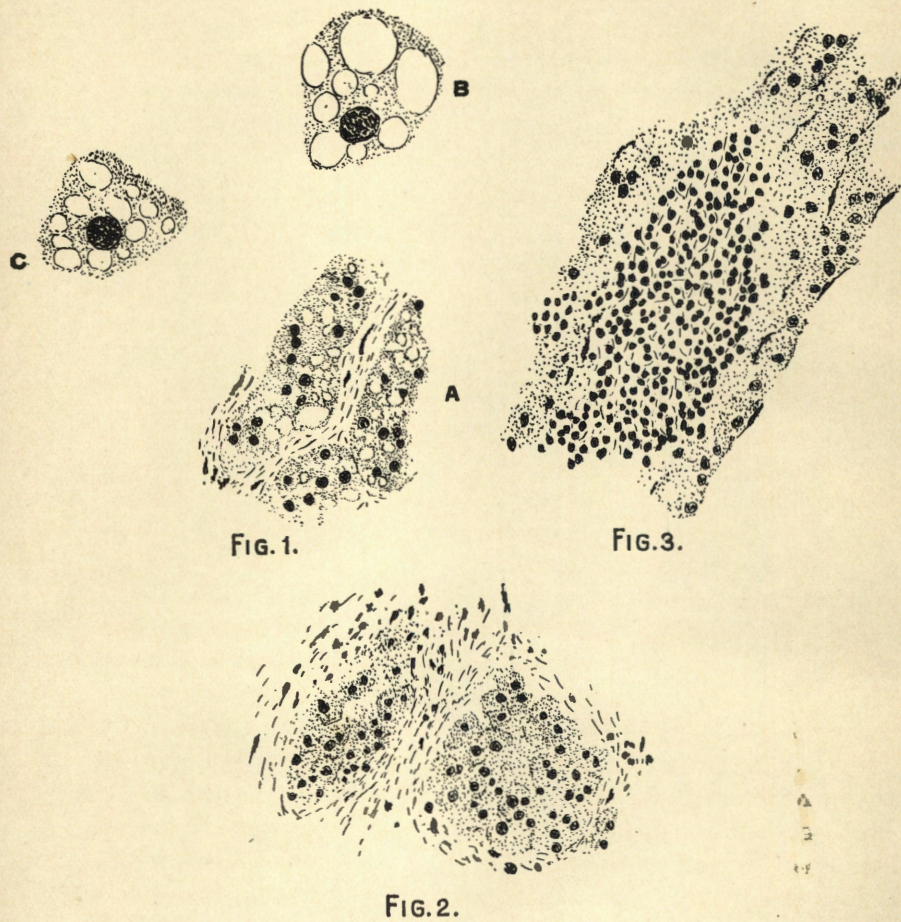


Fig. 1—Fatty degeneration of the cortical portion of the suprarenal body. Zeiss D D. Oc. No. 1.

A and B individual cells from the same general area. Zeiss 1/12. Oc. No. 1.

Fig. 2—Suprarenal capsule, interstitial inflammation of the cortex. Zeiss D D. Oc. No. 1.

Fig. 3—Suprarenal capsule, round cell infiltration. Zeiss D D. Oc. No. 1.

(All drawings made by aid of Abbe camera lucida.)

atrophy of the suprarenal bodies with an abnormally developed brain and spinal cord. In these cases of mal-development of the central nervous system he inclines to the opinion that the primary lesion is in the suprarenal bodies. Tizzoni* records severe lesions in the brain and spinal cord as a result of their removal. In this connection it will be of interest to mention an anencephalic monstrosity recently sent to this laboratory in which I was unable to demonstrate the existence of suprarenal bodies after careful examination. Schaefer and Oliver have demonstrated the existence in the suprarenal bodies of a substance having a decided effect upon the heart, diminishing its action and increasing the arterial tension, an effect, it will be observed, almost the opposite of that produced by thyroid extract. All these facts point to these bodies as possessed of a function of importance.

Fatty Degeneration.—All the autopsies of the past year presented a condition of more or less fatty degeneration of the suprarenal bodies. In most instances this was extensive, involving the cortical portion of the capsule and in not a few instances the medulla also. The distribution of the fatty areas was irregular. In many instances the cells in the outermost portion of the cortex were quite evenly involved, in other instances considerable portions of the whole cortex showed fatty degeneration extending over a considerable area. The extent to which the individual cells were involved varied, some presenting one or two fat droplets, others presenting a degenerative change so extensive as to cause the whole section to present a honeycombed appearance. A decided difference in the character of the fatty changes was apparent in different cases. When the degeneration was less in amount the fat droplets were very small and not appreciable, except with an immersion lens. With a low power these areas presented a very granular appearance. On the other hand, when the degenerative change was more extensive the fat droplets were much larger and considerable areas presented no well-formed cells, their places being taken by fat.

A moderate degree of fatty degeneration is shown in Fig. 1, Plate I. In this case the low-power picture (A) fails to show the real extent of the fatty change, and it is only when we observe the individual cells slightly amplified (B and C) that we appreciate the real condition of the tissues. The two shown in the plate were taken from the same general area as the low-power picture, and I may add that they were not specially selected. In the case from which the drawings were made the fatty changes were so extensive that the connective tissue

*Quoted by Rolleston.

stroma was plainly visible throughout large portions of the cortex and the cells were practically distended with fat globules. In large portions of the cortex also the parenchyma cells had practically disappeared.

I am aware of the fact that a moderate degree of fatty degeneration of this organ is often found post mortem after middle life, and writers on the subject are quite agreed that this fatty condition is not inconsistent with a state of health; but while a slight fatty change is perhaps no more inconsistent with a state of health than, for example, the slight fatty change found in the liver (which latter condition can be demonstrated in the vast majority of cases past middle life), nevertheless I think it questionable if an extensive degree of fatty degeneration of these organs can be considered any more consistent with perfect health than an extensive degree of fatty degeneration of the liver. I am led to use the liver as an analogue because in the light of recent investigation the functions of the liver and the suprarenal bodies are analogous, both probably furnishing important internal secretions to the animal economy.

In a few instances I have had opportunity to examine the suprarenal bodies in individuals dying in a state of apparent health. In all a slight fatty change was demonstrable, but in no instance have I found extensive fatty changes such as have been present in some of the autopsies of the past year. I have also had opportunity to examine the suprarenal bodies in many of the lower animals, but in every instance they have failed to show fatty changes in any but the slightest degree, and in the majority they were entirely absent.

Absence of the Pigmented Layer.—An apparent diminution in the number of pigmented cells, amounting in some instances almost to their complete disappearance, was a condition not infrequently accompanying the fatty change. In these instances the fatty change seemed to involve the layer of pigmented cells quite extensively, and cells in the cortical portion were found presenting a slight yellowish-red tinge, indicating the possible assumption of the function of the pigmented layer of cells by other cells in the cortex. In one case—autopsy 227—the pigmented cells were diminished in number and many seemed in a condition of granular disintegration. This condition was apparent only in the neighborhood of an extensive fatty deposit, but the diminution in the pigmented cells was positive.

It is interesting to note in this connection that the cortical cells of

the brain showed extensive pigment deposits; pigment was scattered throughout the brain substance and in the neighborhood of the vessels, many of the cells of which were loaded with pigment granules. The function which some authorities incline to ascribe to the suprarenal bodies as pigment destroyers, raises the interesting question as to whether or not the extensive pigment deposits in the brain (and other organs) and the lesion in the suprarenal bodies bear any relation to each other. In this particular instance the evidence is not positive because of the existence of portal thrombosis which, consequently, seriously involved the liver.

Interstitial Capsulitis.—Fig. 2, Plate I. A number of the cases presented quite an extensive increase in the connective tissue, especially marked in the outer portion of the cortex. The case from which the drawing was made (autopsy 233) presented this condition in addition to an extensive fatty deposit in certain portions of the cortex. In one instance there was passive congestion, the venous spaces in the medullary portion of the capsule being dilated and filled with blood. In all instances showing an increase in the interstitial connective tissue of any degree there was evident pressure and consequent distortion of the adjacent cells of the parenchyma. In some portions the newly-formed tissue presented a loose, spongy appearance, and its development in every instance seemed to be downward from the fibrous capsule surrounding the organ.

Round Cell Infiltration.—It remains to mention this condition as not infrequently met with; in fact an occasional area similar to the one shown in Fig. 3, Plate I., was found in a majority of the autopsies. These areas were not usually extensive, and in number they varied from one to four or five in a section.

BRAIN.

Fatty Degeneration of the Cortical Neuron.—I am led to discuss this subject briefly, first, because of its frequency as a lesion in senile and terminal dementia, and second, because, in the case from which the drawings were made, it occurred as a lesion of acute melancholia. The patient, a female aged sixty-five years, having been perfectly well mentally, up to about four months before her death, was admitted to this institution two weeks after the beginning of the attack. She

deteriorated rapidly, both mentally and physically, and died after a mental illness of four months.

The cortical cells presented an extreme condition of fatty degeneration, most marked in the frontal region of both sides, but by no means confined to these areas. The drawings were made from cells in the right frontal region and are fairly representative of the condition of the cortical neurons (Fig. 2, Plate II.) The fatty changes occurred with great regularity in the larger portion of the body of the neuron, and often appeared intimately associated with the nucleus. In a few instances the nucleus seemed to be actually involved in the fatty process. Small fat globules were also frequently found distributed through other portions of the body of the neuron. A marked destruction of the chromatin bodies was apparent throughout the whole cortex. In examples such as those from which the drawings were made (Fig. 2, Plate II.) these granules were absent or ill-defined, or apparently disintegrated, an even blue stain pervading considerable portions of the neuron. In not a few instances the body of the neuron presented a washed-out appearance, all granules being absent. In cells presenting this latter condition, it was common to find the nucleus deeply stained, but this condition was not universal; instances in which the nucleus was lightly tinged or presented a normal appearance being quite common. This was especially true of a number of bodies in the motor regions of both sides. Cells in a condition of complete degeneration were common. These presented an appearance similar to the body represented in Plate II., Fig. 2, B, the nucleus having entirely disappeared together with the chromatin bodies, a mass of fat occupying a considerable portion of what remained of the body of the neuron. Many of these were entirely devoid of chromatin granules, presenting a very light tingeing with blue stain, the whole body being greatly rarefied; in others an occasional chromatin body was identified in the peripheral portion of these degenerated cells.

Pigmentary Degeneration—This condition was developed to an extreme degree in autopsies 227 and 234. In the latter (a case of senile dementia) it was accompanied by various degrees of degenerative states in the cell, all of which may represent different phases of the same condition. Fig. 3, Plate II, A, represents a phase of degeneration in which the chromatin granules are beginning to disappear, there being but a slight deposit of pigment. The upper portion of the body of the neuron is in this instance diffusely and quite

PLATE II.

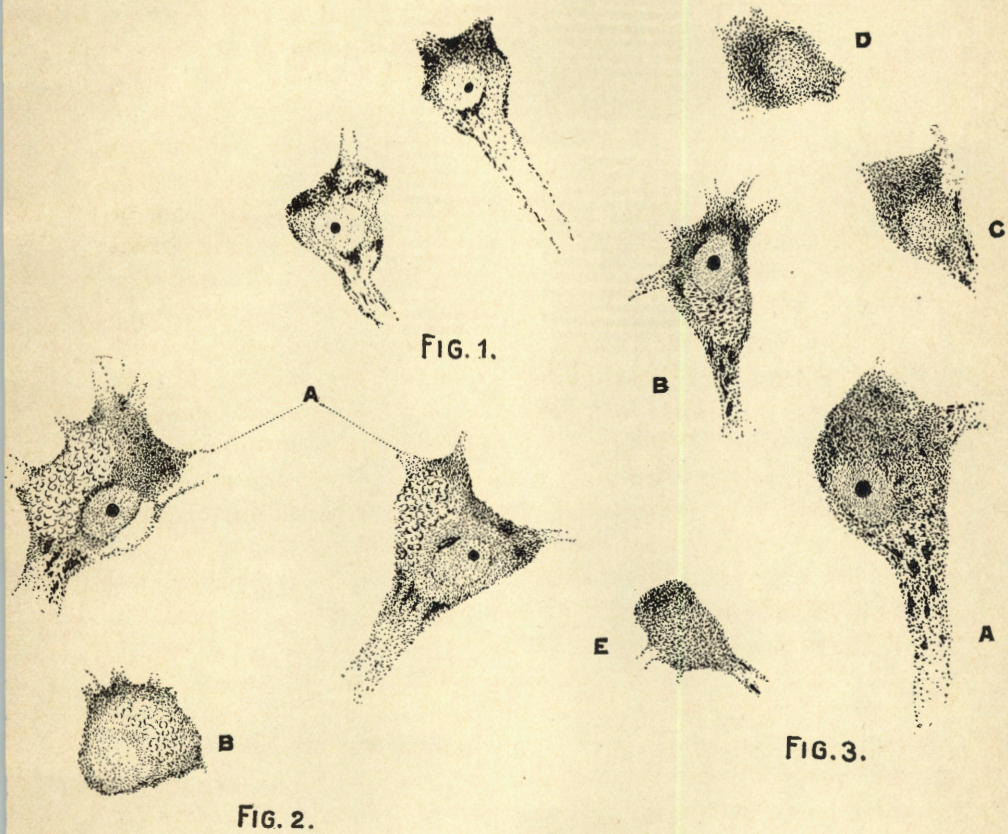
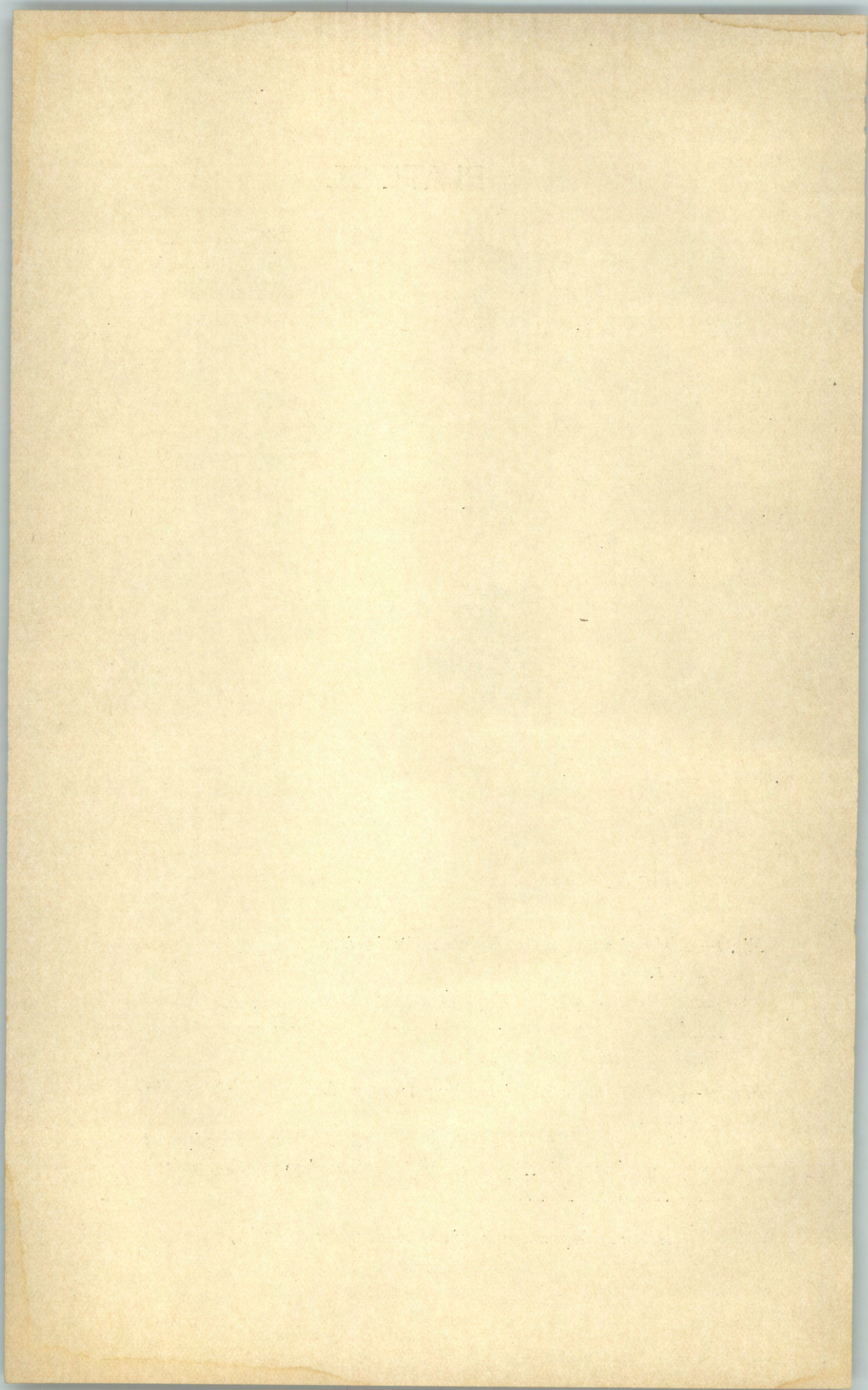


Fig. 1—Normal nerve cells from rabbits brains. Zeiss 1/12. Oc. No. 1.

Fig. 2—Fatty degeneration of the body of the cortical neuron. B shows also a destruction of the nucleus and chromatin bodies. Zeiss 1/12. Oc. No. 1.

Fig. 3—Various stages of pigmentary degeneration in the body of the neuron. A disintegration of chromatin bodies, B an extensive pigment deposit, C D and E phases of complete degeneration. Zeiss 1/12. Oc. No. 1.

(All drawings made by aid of Abbe camera lucida.)



evenly stained, with here and there a granular mass apparently belonging to the chromatin bodies. Fig. 3, Plate II., B, represents a cell showing an extreme deposit of pigment; here some of the chromatin bodies seem to be still intact. Cells C, D and E of the same figure present a condition of complete degeneration, the chromatin bodies being absent and the nucleus having disappeared from all. The degenerative process seems to be more complete in E, where no trace of a nucleus is visible. In C and D the area occupied by the nucleus is still visible, although its outline cannot be determined. In these cells no pigment granules were visible. As previously mentioned, all of these conditions may be various stages of a single degenerative process. I incline to the opinion that they are, although it is a matter difficult of proof.

events related with bars and their crystals were apparently belong-
ing to the chromatin bodies. Fig. 3 Plate II, a represents a cell
showing an extreme degree of pyknosis, the chromatin
bodies seem to be still intact. Cells a, b and c of the same group
present a condition of complete fragmentation, the chromatin bodies
being absent and the nucleus having disappeared from all. The
degenerative process seems to be more complete in c, where no trace
of a nucleus is visible. In c and b the area occupied by the nucleus
is still visible although its outline cannot be determined. In these
cells no pigment granules were visible. A previously mentioned
of these conditions may be various stages of a single degenerative
process. I incline to the opinion that they are, although it is a matter
difficult of proof.

BY-LAWS, FORMS, ETC.

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RYLAWS FORMS ETC.

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, etc., 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, some one 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 a bond, and, if strangers, bring evidence of their responsibility.

REQUIREMENTS FOR ADMISSION OF PATIENTS

TO THE STATE HOSPITALS OF NEW JERSEY.

PRIVATE PATIENTS.

The admission of a private or pay patient requires the certificates of two physicians, whose signatures must be sworn to before a Notary Public or other proper officer of the law; one written request for admission signed by a near relative or the guardian of the patient, which need not be sworn to; a bond signed by two responsible property owners, one of which (preferably both) must be a resident of, and own property in, the State of New Jersey. It is not necessary that the bond be sworn to, the signatures may be simply witnessed.

Thirteen (13) weeks' board and medical attention must be paid for at the time of the admission of the patient, and quarterly, in advance, thereafter. These requirements must be met before the patient can be admitted.

The rates range from five dollars (\$5) to fifty dollars (\$50) per week, which includes medical attention, board, room and washing. No private patients are admitted for less than five dollars (\$5) per week. No patient not a resident of New Jersey will be admitted for less than ten dollars (\$10) per week.

All the necessary blanks for the admission of private patients will be promptly forwarded upon application to the Medical Director.

When practicable, a visit to the institution and a personal interview with its officers previous to completing arrangements is advised.

INDIGENT PATIENTS.

For the admission of indigent patients application must be made to the Judge of the Court of Common Pleas of the county in which the indigent insane person resides.

The Prosecutor of the Pleas or the Chosen Freeholder of the township may be consulted for further details.

The court officers will furnish all necessary papers for the commitment of the indigent insane.

The visiting hours are between 10 A. M. and 4 P. M. on all days except Sundays. No visiting on Sundays.

All the above regulations have been established by statute and the Board of Managers, and cannot be changed by local officers.

Communications and inquiries relative to patients, if directed to the Medical Director, will receive prompt attention.

The forms of requests, bonds, certificates, etc., are appended.

The admission of a private or paying patient requires the execution of two physicians, whose signatures must be on a written report in duplicate, one of which is to be retained by the physician of the patient, and the other by a board agent or two responsible persons, one of which preferably must be a resident of the State of New Jersey. It is not necessary that the board be sworn for the signature may be simply witnessed.

Patients (1) who are indigent and medical attention must be paid for at the time of the admission of the patient, and quarterly in advance. These requirements must be met before the patient can be admitted.

The rate range from five dollars (\$5) to fifty dollars (\$50) per week, which includes medical attention, board, room and washing. No private patients are admitted for less than five dollars (\$5) per week. No patient not a resident of New Jersey will be admitted for less than ten dollars (\$10) per week.

All the necessary blanks for the admission of private patients will be promptly forwarded upon application to the Medical Director.

When practicable a visit to the institution and a personal interview with the officers previous to completing arrangements is advised.

INDIGENT PATIENTS

For the admission of indigent patients application must be made to the Judge of the Court of Common Pleas of the county in which the indigent insane person resides.

New Jersey State Library

FORMS AND DIRECTIONS
FOR THE ADMISSION, ETC., OF INDIGENT AND
PAUPER INSANE PATIENTS.

FORMS OF ORDER, ETC., FOR JUDGE.

I, A. B., one of the Judges of the Court of Common Pleas of the county of.....and State of New Jersey, do hereby report that application has been made to me on behalf of C. D., a resident of the township (ward or borough) of.....in said county, alleged to be insane and in indigent circumstances (or a pauper, as the case may be), and that pursuant to the act of the Legislature in such cases made and provided, I have called before me Dr....., a respectable physician, and other credible witnesses, to wit (state their names), and having examined them and fully investigated the case, and not deeming it necessary to call a jury, I do hereby decide and certify that satisfactory proof has been adduced before me showing the said C. D. to be an insane person, and that.....has not sufficient estate to supportunder said visitation of insanity.

Given under my hand at.....in the county and State aforesaid, this.....day of.....in the year of our Lord one thousand eight hundred and.....

A. B.

CERTIFICATE OF PHYSICIAN.

.....County, ss.—I, A. B., being duly sworn according to law, do certify and declare that I have examined into the state of health and mental condition of C. D., of the township (ward or borough) of.....in said county of.....and that I am of the opinion thatis insane.

A. B., *Physician.*

Sworn and subscribed before me this.....day of.....A. D. 18...

A. B., Judge, &c.

The Chosen Freeholder or Freeholders of the township, ward or borough must then indorse the above order and certificate as follows: "Approved," and sign his or their names as the Chosen Freeholder or Freeholders of the township (ward or borough) of.....and county of.....

CERTIFICATE OF THE COUNTY CLERK.

State of New Jersey, } ss.
..... County, }

I, A. B., Clerk of the county of.....do hereby certify that the foregoing is a true copy of the report and certificate of.....one of the Judges of the Court of Common Pleas of said county, in the case of.....and also the certificate of Dr.....thereunto appended, as filed in my office; that the foregoing is a true copy of the indorsement thereon, and that A. B. and C. D., whose name.....signed to the said indorsal of approval.....member of the Board of Chosen Freeholders of said township (ward or borough) in said county, and that said signature.....in.....proper handwriting.

In witness whereof, I have hereunto set my hand and seal of office, at.....this.....day of.....A. D. 18...

A. B., Clerk.

NEW JERSEY STATE HOSPITAL

FORMS AND DIRECTIONS
FOR THE ADMISSION, ETC., OF PRIVATE INSANE
PATIENTS.

FORM OF REQUEST.

The undersigned, of the.....of.....in the county of.....is desirous of placing in the "New Jersey State Hospital at Morris Plains, N. J.," and hereby requests the admission therein of.....a resident of the.....of.....who is aged.....years, and has been..... is a native of.....in the State of.....and is.....of the undersigned.

Dated.....189...

*FORM OF PHYSICIAN'S CERTIFICATE.

.....18...
I,, physician, of the township of.....in the county ofdo certify under oath that I have examined into the state of health and mental condition of.....of the township of.....in the county of.....and that.....is, in my opinion, insane, and a fit subject to be sent to the New Jersey State Hospital.

Sworn to and subscribed before me this.....day of.....A. D. 189...

FORM OF BOND.

Whereas.....of.....in the county of.....an insane person, has been admitted as a patient into the "New Jersey State Hospital at Morris Plains, N. J.;" now, therefore,

* Two certificates are necessary.

We, the undersigned, in consideration thereof, jointly and severally bind ourselves to.....Treasurer of said Hospital, to pay to him and his successors in office, the sum of.....dollars and.....cents per week for the care and board of said insane person, as long as..... shall continue in said Hospital, with such extra charges as may be occasioned by.....requiring more than ordinary care and attention ; and also to provide with suitable clothing, and pay for all such necessary articles of clothing as shall be procured for..... by the Warden of the Hospital ; and to remove.....from the Hospital whenever the room occupied by.....shall be required for a class of patients having preference by law, or whenever.....shall be required to be removed by the Managers ; and also to pay all expenses incurred by the Managers or Warden in sending said patient to.....friends, in case one or either of us shall fail to remove said patient when required to do so as aforesaid ; and if.....shall be removed at the request of.....friends before the expiration of six calendar months after reception, then to pay board for twenty-six weeks unless..... shall be sooner cured ; and also to pay, not exceeding fifty dollars, for all damages.....may do to the furniture or other property of said Hospital, and for reasonable charges in case of elopement, and funeral charges in case of death ; such payments 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 it becomes due.

In witness whereof, we have hereunto set our names this.....day of.....in the year 18...

| | | |
|-------------------------------------------|------------|----------------|
| Name, | Residence, | P. O. Address. |
| Name, | Residence, | P. O. Address. |
| Signed and sealed in the presence of..... | | |

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