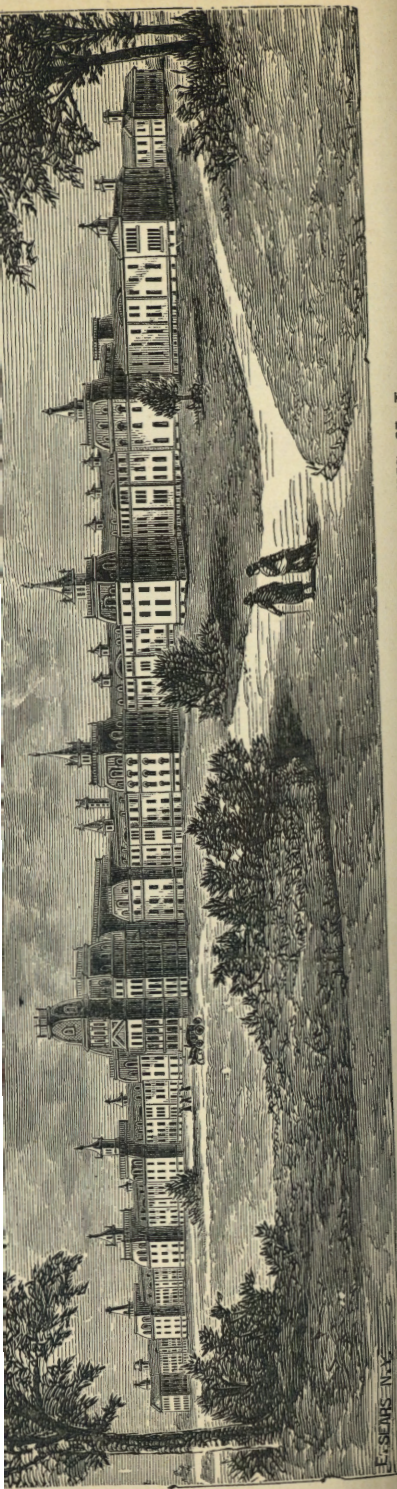
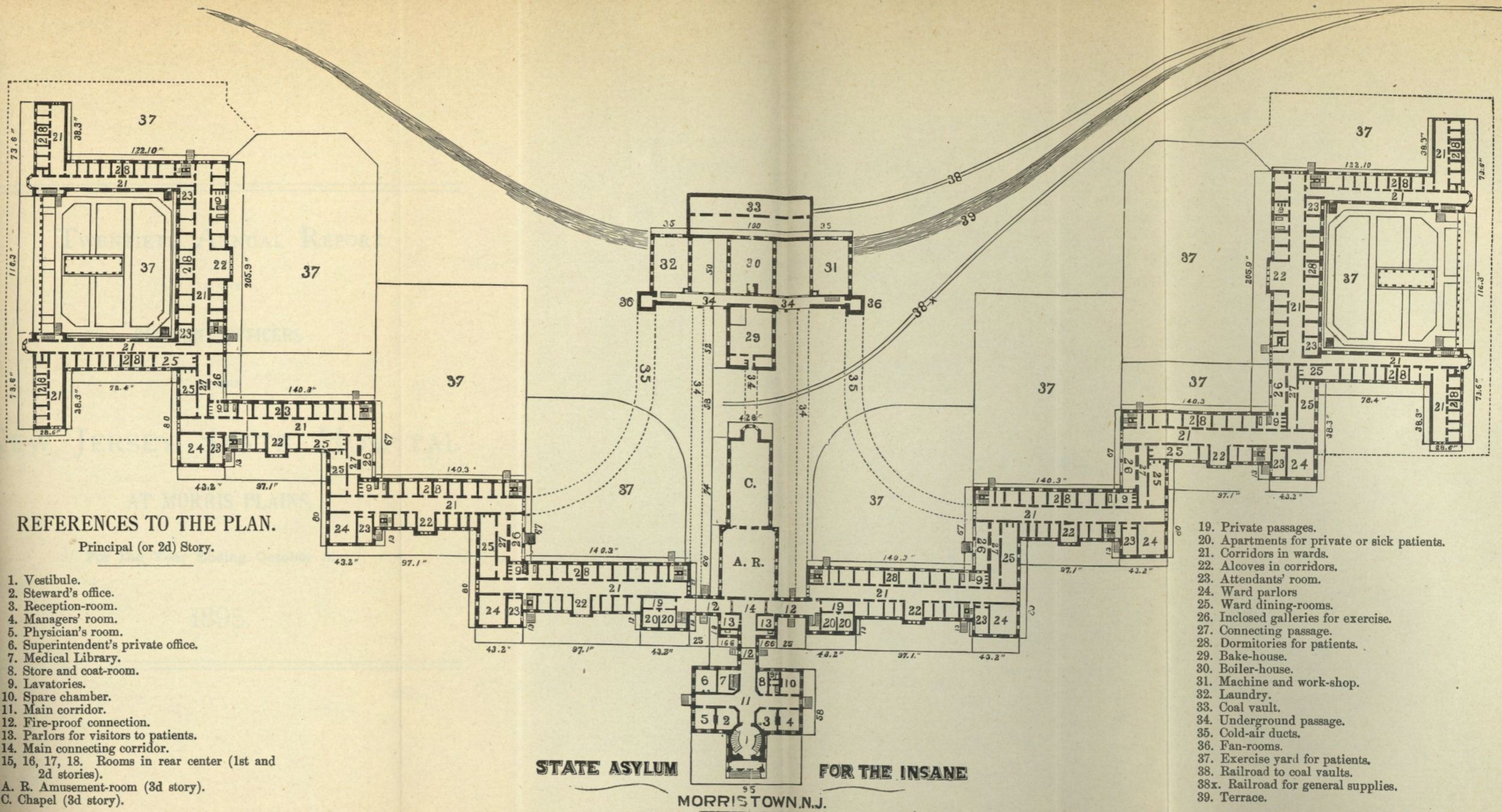


NEW JERSEY STATE HOSPITAL, AT MORRIS PLAINS, N. J.  
(PERSPECTIVE VIEW.)



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





**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.

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TWENTIETH ANNUAL REPORT

OF THE

RESIDENT OFFICERS

OF THE

NEW JERSEY STATE HOSPITAL

AT MORRIS PLAINS,

For the Year Ending October 31st,

1895.

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TREASURER'S REPORT.

RESIDENT OFFICERS.

MEDICAL DEPARTMENT.

- BRITTON D. EVANS, M.D., . . . . Medical Director.
- ELIOT GORTON, M.D., . . . . Assistant Physician.
- THOMAS P. PROUT, M.D., . . . . { Second Assistant Physician.  
and Pathologist.
- PETER S. MALLON, M.D., . . . . Third Assistant Physician.
- M. L. PERRY, M.D., . . . . Fourth Assistant Physician.

BUSINESS DEPARTMENT.

- MOSES K. EVERITT, . . . . . Warden.
- GUIDO C. HINCHMAN, . . . . . Treasurer.

## TREASURER'S REPORT.

*To the Managers of the New Jersey State Hospital at Morris Plains:*

GENTLEMEN—The Treasurer of the New Jersey State Hospital at Morris Plains respectfully submits the following abstract of receipts and disbursements from November 1st, 1894, to October 31st, 1895, inclusive:

### RECEIPTS.

Balance on hand November 1st, 1894.....	\$30,781 95
From State Treasurer for convict patients.....	\$17,225 81
From State Treasurer for county patients.....	46,671 56
From sundry counties for maintenance of county patients,	150,957 08
From private patients.....	50,769 73
From hides, tallow, etc.....	8,041 49
From First National Bank, Morristown, for interest.....	81 74
	273,747 41
	\$304,529 36

### DISBURSEMENTS.

On orders of Warden.....	\$282,508 23
Balance in Treasurer's hands.....	22,021 13
	\$304,529 36

**G. C. HINCHMAN,**  
Treasurer.

The New Jersey State Hospital  
at Morris Plains, November 14th, 1895.

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,**  
**PATRICK FARRELLY,**  
Auditing Committee.

The New Jersey State Hospital  
at Morris Plains, November 14th, 1895.

TREASURER'S REPORT

To the Managers of the New Jersey State Hospital at Morris Plains  
GENTLEMEN—The Treasurer of the New Jersey State Hospital at  
Morris Plains respectfully submits the following statement of receipts  
and disbursements from November 1st, 1894, to October 31st, 1895.

Statement of Receipts and Disbursements for the year ending October 31st, 1895.

Balance on hand November 1st, 1894	\$17,222 41
Receipts from patients for board and nursing	10,747 26
Receipts from patients for laundry	1,007 03
Receipts from patients for medicines and sundries	20,100 12
Receipts from patients for rent	5,001 00
Receipts from the National Bank, New York, for interest	11 74
<b>Total</b>	<b>\$55,089 52</b>
Disbursements	
Salaries of Warden	12,000 00
Salaries of Treasurer's bookkeeper	1,200 00
<b>Total</b>	<b>\$13,200 00</b>

G. G. HIRSHMAN,  
Treasurer.

The New Jersey State Hospital  
at Morris Plains, November 14th, 1895.

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

GEORGE HUGHES,  
PATRICK FARRALL,  
Auditing Committee.

The New Jersey State Hospital  
at Morris Plains, November 14th, 1895.

WARDEN'S REPORT

REPORT OF THE WARDEN.

## WARDEN'S REPORT.

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*To the Board of Managers of the State Hospitals:*

**GENTLEMEN**—The following is an abstract of accounts for the year ending October 31st, 1895:

Balance on hand November 1st, 1894 .....	\$30,781 95
Total receipts from November 1st, 1894, to November 1st, 1895.....	273,747 41
	\$304,529 36
Total disbursements from November 1st, 1894, to November 1st, 1895..	282,508 23
	\$22,021 13
Cash balance.....	\$22,021 13

The statement of resources and liabilities October 31st, 1895, is as follows:

RESOURCES.	
Balance in hands of Treasurer .....	\$22,021 13
Due from Union county, as per bill rendered.. .....	8,303 37
Due from State Treasurer for county patients.....	10,273 10
Due from State Treasurer for convict patients.....	6,253 89
Due from State Treasurer for State patients. ....	760 68
Due from private patients as per bills rendered.. ..	7,204 63
Due from Sailor's Snug Harbor.. .....	3,666 86
Due from petty expense account. ....	51 87
Due from clothing issued.....	1,959 83
	\$60,495 36
LIABILITIES.	
Bills payable.....	\$5,308 49
Pay-roll for month of October.....	7,682 96
County patients paid beyond October 31st, 1895.....	5,174 17
Private patients paid beyond October 31st, 1895. ....	5,877 53
Amount of bills rendered counties, not yet earned.....	1,383 89
Amount of bills rendered private patients, not yet earned,	3,604 66
Loan from New Jersey State Hospital at Trenton.....	10,000 00
	\$38,831 70
Balance above liabilities.....	\$21,663 66

The Hospital is indebted to the Hon. Jas. P. Sullivan, of Morristown, N. J., and Hon. Chas. A. Baker, of Ledgewood, N. J., for valuable and painstaking services in making the annual inventory and appraisal. The total value of the personal property of the Hospital, according to their appraisal, amounts to one hundred and forty-two thousand five hundred and seventeen dollars and one cent (\$142,517.01.)

It also shows, in store, according to the estimation of the appraisers, based on actual cost price, at wholesale to the house, fuel and subsistence, valued at \$17,715.48. During the past year \$5,303.59 have been charged to profit and loss account. All of this was for the maintenance of private patients, and the charges covered a period from near the opening of the house down to April 1st, 1891. These charges had been carefully investigated, and in all cases the principals and bondsmen were either dead, and without assets, or it was found impossible to collect from them. Charging off these accounts, while it lessened the balance of resources over liabilities, simply freed the balance of a fictitious asset.

#### IMPROVEMENTS.

The continual increase in the number of patients, and the necessity of making provision for the future occupants of the new building, made it necessary to increase the laundry capacity. For this purpose an extension about 20 x 60 feet has been built on the south side of the present laundry, which will be used for the washers and wringers, while the space now occupied by them will be given up to a new mangle and will make room for sorting, drying, etc. This new addition is exceptionally well lighted and ventilated, and with the new machinery already contracted for will place the laundry of this institution on a par with any institutional laundry in the country.

The sewing-room, which was in the south wing, ward 4-1, has been changed to the basement under the parlor of ward 1-2, south. This part of the basement has been partitioned off, and makes a very pleasant sewing-room. The room formerly occupied has been fitted up as a dormitory, and furnishes space for about sixteen beds.

Five sleeping-rooms have been made out of part of the flour-room, directly over the bakery. These will now be used for the kitchen help, and when the third floor of the laundry is converted into sleeping-rooms for the laundry help, the rear center, now occupied by the

kitchen and laundry help, will be left entirely empty, and with but few changes can be made into an additional ward to accommodate about thirty-five patients.

During the last year eight wards, including both halls and rooms, and also four additional halls, have been painted. On the outside, the Hospital proper and the machine-shops, from the cornice up, with the exception of the center, have been given a coat of paint.

Serving the food hot in the ward dining-rooms has been here, as at most institutions without associate dining-rooms, an unsolved problem. During the past year the service of food on the wards of this Hospital has been much improved by the use of distributing cars with steam coils so arranged that the food for the separate wards is put direct from the cooking utensils on the distributing car into covered receptacles, already hot, and on a coil of pipe filled with live steam. The connection for the steam is then broken and the food, in hot covered receptacles and on pipes filled with live steam, is hurried to the respective elevators connecting with the dining-rooms. A further change now in progress consists in the placing of the food receptacles inside of tin boxes filled with hot water, which are to go into the ward dining-rooms, and it will make it possible to place the food in the different dining-rooms without removing it from a source of warmth at any time after it is cooked. This change is undertaken at the suggestion of the chairman of the Medical Committee, after much investigation by him, of different methods looking towards the solution of this problem.

Properly, to handle these new distributing cars it has been necessary to appropriate the old steam kitchen to afford an entrance for them into the large kitchen. The steam-kettles have been re-arranged in such a manner as to materially enlarge the kitchen, and improve its general arrangement.

The special diet kitchen, and the rooms for washing kitchen utensils, which were very small and inconvenient, have been increased to double their former size by the appropriation of unnecessary passage-ways, and by throwing together small rooms formerly used for purposes now accomplished elsewhere.

Tea and coffee, which were formerly made in separate rooms north and south, are now made in the special diet kitchen. This arrangement facilitates the work, and adds to the efficiency of the supervision. The room for washing kitchen utensils has been fitted

with entirely new plumbing. New ranges have been placed in both the special diet and center kitchens.

In the line of outside improvements, much of our time has been spent in clearing up a swamp of about twenty acres on the south side and preparing the field beyond for cultivation. A circuitous channel was dug for the stream running through the grove at the south of the Hospital and its sides walled up. At several points in its course small waterfalls were made. In the center of the grove a small lake, 160 feet long, with an average width of 100 feet, was built. In the center of this is a fountain, which is connected with the water main. The lake is two and a half feet deep and has a coarse graveled bottom, as has the stream. There are 1,050 perches of stone in the walls of the stream and lake, and 1,025 square feet of cement flooring in the waterfalls. There was, of course, an immense amount of work in clearing the grove of stone, and in grading and draining the land.

When this work is fully completed, it will make a beautiful park, which will afford a great deal of pleasure to the patients.

Beyond this grove is a field of about ten acres. This has been thoroughly underdrained. There are in the grove and field together 5,979 feet of underdrain. We are at present plowing the field and clearing it of stone. When this is seeded with grass, it will not only add to the beauty of the grove, but also will be a valuable addition to the arable land.

Two sheds at the yard of the cow barn, one 100 x 25 feet and the other 125 x 25 feet, were completed in the early summer. These furnish the cattle with excellent protection, and will doubtless add to the success of the dairy, while at the same time furnishing needed space for storing hay of capacity for about sixty tons.

The front entrance to the Hospital has been greatly improved by macadamizing the center road to the crest of the hill on the old Telford foundation, formerly covered with gravel, a distance of about one-half mile. Three courses of trap rock, aggregating about six inches in depth, were used, and each course was thoroughly rolled.

The double rows of shade trees on either side of the center avenue are being extended to the bridge at the entrance of the grounds. A carload of Ohio blue stone, sawed in 6 x 4 feet flags, has been laid between the double row of trees on the south side, leading down the center road, as a beginning of a walk to the front entrance. This stone makes a very fine walk, which will be greatly appreciated when completed.

For many years past some plan for carrying off the storm water, without emptying it into the sewer, has been strongly advocated. Within the past month all the storm pipes on the northwesterly side of the south wing and west side of the chapel and shops, which, connected with the sewer, have been connected with a twelve-inch pipe, which empties into the stream running beyond the south side. It is hoped to extend this work another year.

#### FARM AND GARDEN.

The operations in the farm and garden have been attended with gratifying results. For detailed information of the quantities of the various products reference is made to the appendix of this report. The dairy has furnished all the milk needed for the Hospital uses. The average daily number of cows milked during the year has been fifty-nine. The average daily number of quarts of milk during the year has been 617. This shows an average daily yield per cow of about ten and one-half quarts.

The herd at the present time is in excellent condition. Since the last report for this department fifty-four cows from the herd have been slaughtered, as their yield of milk fell off. Since February 1st, last, all cattle slaughtered from the herd have been inspected by some member of the medical staff, and all have been found free from any trace of tuberculosis.

The results obtained from the greenhouses have been very gratifying.

#### 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, beginning November 1st, 1896 :

For the appraisalment of personal property.....	\$75
For the salaries of resident officers.....	11,400
For the maintenance of county patients.....	49,900
For the support and clothing of insane convicts, at the rate of \$5 per week for each insane convict.....	15,300
For the support and clothing of State indigent patients, at the rate of \$4 per week for each State indigent patient.....	4,100

Respectfully submitted,

M. K. EVERITT,

Warden.

New Jersey State Hospital

at Morris Plains, October 31st, 1895.

## ABSTRACT OF ACCOUNTS.

*For the Fiscal Year Ending October 31st, 1895.*

G. C. HINCHMAN, Treasurer.

DR.

To balance October 31st, 1894.....	\$30,781 95
To amount received for board, clothing and incidental expenses of private patients.....	50,769 73
To amount received for board, clothing and incidental expenses of county patients.....	150,957 08
To amount received from State Treasurer for county patients .....	46,671 56
To amount received from State Treasurer for convict patients.....	17,225 81
To amount received for hides, tallow, etc.....	3,943 16
To amount received from sundries, rags, etc.....	1,835 06
To amount received for hogs and pigs.....	2,107 27
To amount received for rents.....	156 00
To amount received for interest.....	81 74
	\$304,529 36

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Amusements.....	\$615 36
Appropriation .....	97 50
Books and stationery.....	1,679 14
Bedding, linen, etc.....	6,780 28
Clothing.....	10,933 05
Crockery and cutlery.....	912 14
Counsel fees.....	247 70
Farm and garden.....	16,368 87
Fixtures .....	1,800 15
Flour.....	4,952 50
Feed.....	5,474 49
Fencing .....	270 21
Fruit.....	2,389 26
Freight.....	4,175 27
Furniture.....	4,445 14
Fuel.....	13,999 11
Funeral expenses.....	1,073 10
Fire apparatus.....	290 00
Gas and steam pipes, etc.....	1,783 11

Grounds and grading.....	\$8,138 05
Hay and straw for ice-houses.....	30 09
Harness, wagons, etc.....	676 10
Household goods.....	1,417 01
Improvement of buildings.....	16,023 85
Insurance.....	1,720 00
Incidentals.....	2,233 52
Laundry.....	5,561 70
Light.....	8,535 80
Medical supplies.....	4,114 84
Medical library.....	307 04
Newspapers.....	18 00
Provisions and groceries.....	84,626 88
Postage.....	709 42
Petty current expenses.....	500 00
Pathological.....	498 66
Refunding.....	1,244 76
Repairs.....	9,109 17
Smith and wheelwright.....	1,280 96
Stock.....	6,411 85
Traveling expenses.....	80 04
Tinware and fixtures.....	725 58
Tools and supplies, boiler house and machine shop.....	1,036 55
Telegrams, telephone rental, etc.....	504 47
Vegetables.....	814 78
Wages.....	47,902 67
	<u>\$282,508 23</u>
Balance in hands of Treasurer October 31st, 1895.....	22,021 13
	<u>\$304,529 36</u>

## APPENDIX TO WARDEN'S REPORT.

## FARM AND GARDEN PRODUCTS.

## DAIRY AND FARM, 1895.

225,175 Quarts milk.....@ \$0 04	\$10,132 87
219 Dozen eggs.....	22 48 18
215 Tons hay.....	18 00 3,870 00
25 Tons rye straw.....	18 00 450 00
400 Bushels rye.....	60 240 00
4,800 Bushels potatoes.....	50 2,400 00
800 Bushels cow-horn turnips.....	30 240 00
50 Bushels selected apples.....	75 37 50
2,400 Bundles cornstalks.....	3 72 00
400 Quinces.....	2 8 00
26 Weeks' pasture for 65 head stock.....	50 845 00
	<u>\$18,343 55</u>

## STOCK.

6,248 Pounds veal (44 calves).....@ \$0 10	\$624 80
45 Fowls.....	50 22 50
54 Cattle slaughtered (30,499 pounds).....	7 2,134 93
Hogs sold.....	2,107 27
	<u>4,889 50</u>

## GARDEN, 1895.

1,625 Bushels tomatoes.....@ \$0 50	\$812 50
600 Bushels carrots.....	40 240 00
350 Bushels parsnips.....	40 140 00
750 Bushels beets.....	40 300 00
900 Bushels mangel-wurzels.....	30 270 00
450 Bushels rutabaga turnips.....	30 135 00
650 Bushels flat turnips.....	30 195 00
1,005 Bushels potatoes.....	50 502 50
223 Bushels onions.....	60 133 80
85 Bushels selected apples.....	75 63 75
650 Bushels spinach.....	50 325 00
500 Bushels kale.....	30 150 00
625 Bushels bush beans.....	70 437 50
176 Bushels Lima beans.....	75 132 00
510 Bushels peas.....	1 00 510 00

135 Bushels cucumbers.....	@ \$0 75	\$101 25
32 Bushels cucumber pickles.....	1 50	48 00
15 Bushels onion sets.....	4 00	60 00
10 Bushels onions (pickling).....	4 00	40 00
45 Bushels horseradish.....	1 25	56 25
49 Bushels okra.....	1 00	49 00
50 Bushels oyster-plant.....	1 00	50 00
135 Bushels grapes.....	1 50	202 50
167 Bushels squash.....	40	66 80
31,000 Heads celery.....	2½	775 00
17,500 Heads cabbage.....	4	700 00
25,702 Heads lettuce.....	1½	385 53
1,600 Bushels cauliflower.....	5	80 00
20,850 Bunches onions.....	1½	312 75
41,100 Bunches radishes.....	2	822 00
1,125 Bunches carrots.....	2	22 50
6,250 Bunches asparagus.....	10	625 00
9,000 Bunches rhubarb.....	4	360 00
2,705 Bunches parsley.....	3	81 15
2,221 Bunches leeks.....	3	66 63
750 Bunches celery for soup.....	5	37 50
100 Bunches sage.....	5	5 00
100 Bunches thyme.....	5	5 00
100 Bunches sweet marjoram.....	5	5 00
100 Bunches savory.....	5	5 00
100 Bunches chervil.....	5	5 00
10 Bunches tarragon.....	10	1 00
10 Bunches chive.....	10	1 00
60 Baskets peaches.....	50	30 00
20 Baskets pears (Bartlett).....	75	15 00
75 Baskets pears (Seckel).....	60	45 00
20 Baskets pears (Sheldon).....	75	15 00
6,500 Muskmelons.....	5	325 00
29,100 Ears sweet corn.....	1	291 00
300 Ears sweet corn for seed.....	3	9 00
1,500 Bundles cornstalks.....	3	45 00
3,900 Peppers.....	1	39 00
750 Quinces.....	2	15 00
1,300 Egg-plants.....	5	65 00
450 Quarts blackberries.....	10	45 00
457 Quarts raspberries.....	10	45 70
1,050 Quarts strawberries.....	10	105 00
282 Quarts cherries.....	12	33 84
350 Quarts currants.....	10	35 00

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\$10,474 45

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\$33,707 50

## CUT FLOWERS AND PLANTS FURNISHED, 1895.

## CUT FLOWERS.

Roses.....	35,750
Carnations.....	14,500
Chrysanthemums.....	1,400
Sweet peas.....	2,000
Pansies.....	1,000
Hyacinth (white).....	400
Easter lilies.....	75
Calla lilies.....	150
Bunches of violets.....	600
Bouvardia.....	200
Sprigs of smilax.....	150
Sprays of heliotrope.....	250
Sprays of mignonette.....	400
Sweet William.....	1,000
Foxglove.....	50
Sprays of Stevia.....	300
Tulips.....	300
Freesia.....	250
Gladiolus.....	300
Tube roses.....	50
Asters.....	500
Candytuft.....	300
Bunches of coreopsis.....	100
Bunches of Cosmos.....	75

## BLOOMING AND DECORATIVE PLANTS GROWN IN POTS.

Chrysanthemums.....	900
Calceolaria.....	150
Cineraria.....	250
Chinese primroses.....	200
Dutch hyacinths.....	150
Tulips.....	100
Easter lilies.....	125
Calla lilies.....	90
Hydrangea.....	50
Dracena.....	125
Begonia.....	200
Marguerite daisies.....	50
Geneta.....	25

## PLANTS AND BULBS GROWN FOR BEDDING AND CUT FLOWERS.

Roses.....	1,200
Carnations.....	1,300
Violets.....	300

Croton.....	250
Geraniums.....	1,500
Coleus.....	5,000
Canna Indica.....	450
Caladium.....	200
Ricinus.....	12
Salvia splendens.....	200
Petunia (single).....	250
Sedum.....	500
Althernanthera.....	300
Heliotrope.....	100
Begonia.....	200
Lantana.....	75
Pyrethrum aureum.....	300
Pansies.....	1,500
Daisies.....	1,200
Forget-me-nots.....	300

## ACCOUNT OF FRUITS, ETC., CANNED AND PRESERVED.

Chow-chow.....	4 quarts.
Pears (Seckel).....	46 gallons.
Green tomatoes.....	9 quarts.
Crab-apples.....	4 quarts.
Mangoes.....	3 gallons.
Pickled cucumbers.....	29 quarts.
Pickled peaches.....	23 quarts.
Brandied peaches.....	11 gallons.
Canned peaches.....	170 gallons.
Preserved peaches.....	25 quarts.
Canned pears.....	74 gallons.
Preserved pears.....	15 quarts.
Cherries.....	50 quarts.
Strawberries.....	39 bowls.
Strawberries.....	25 cans.
Currant jelly.....	42 glasses.
Grape jelly.....	28 glasses.
Quince jelly.....	4 glasses.
Raspberries.....	24 quarts.
Tomatoes, canned.....	990 gallons.

## ARTICLES MADE IN SEWING-ROOM, 1895.

Sheets.....	2,540
Double sheets.....	105
Pillow cases.....	1,839
Hand towels.....	1,906
Bolster cases.....	6

Roller towels.....	227
Dish towels.....	956
Tablecloths.....	75
Napkins.....	204
Kitchen aprons.....	286
Chef's aprons.....	10
Curtains.....	108
Curtain bands.....	56
Bed spreads hemmed.....	180
Blankets hemmed.....	578
Clothes' bags.....	74
Chemises.....	487
Ladies' drawers.....	206
Underwaists.....	212
Petticoats.....	229
Night dresses.....	36
Men's night shirts.....	16
Burial robes.....	32
Burial skirts.....	32
Burial chemises.....	32
Burial sheets.....	32
Dresses.....	826
Wrappers.....	16
Dress waists.....	13
Dresses altered.....	16
Pairs of sleeves made.....	1
Boys' shirt waists.....	4
Dress skirts.....	5
Total number of pieces.....	11,346

## RETURN OF WORK DONE IN MATTRESS-ROOM AND SHOE-SHOP, 1895.

Single hair mattresses made, new.....	703
Double hair mattresses made, new.....	18
Single hair mattresses made over.....	910
Double hair mattresses made over.....	32
Hair pillows made, new.....	709
Hair pillows made over.....	1,978
Single mattress ticks made, new.....	702
Double mattress ticks made, new.....	18
Pillow ticks made, new.....	739
Feather pillows made, new.....	257
Sofa pillows made, new.....	27
Pieces of furniture upholstered.....	139
Large hall carpets made, new.....	12
Large hall carpets made over.....	4
Connecting hall carpets made, new.....	7
Alcove carpets made, new.....	9

Parlor carpets made, new.....	15
Room carpets made, new.....	410
Room carpets made over.....	200
Carpets taken up.....	503
Carpets laid.....	632
Carpets repaired.....	98
Rooms laid with linoleum .....	7
Chairs caned.....	227
Settees caned.....	5
Bed protectors made, new.....	510
Holland window shades made, new.....	407
Long window curtains made, new.....	4
Long window curtains hung (pairs).....	37
Ottomans made, new.....	29
Carpet doormats made, new .....	53
Pairs of holders for boiler and gas-house.....	205
Pieces of harness repaired.....	32
Pieces of harness made, new.....	22
Horse blankets repaired.....	15
Bed protectors repaired.....	202
Yards of carpet hemmed.....	902
Yards of carpet bound.....	203
Sets of mangle aprons made, new.....	5
Sets of mangle aprons repaired.....	4
Chair cushions made, new.....	27
Large awnings made, new.....	1
Awnings put up.....	25
Awnings taken down.....	25
Mattress ticks repaired.....	200
Window shades repaired.....	159
American flags made, new (size of each 10 x 22 feet).....	2
Pairs of boots, shoes and slippers repaired.....	1,397
Mail bag (leather).....	1
Total number of pieces.....	12,828

## ARTICLES MADE IN TIN-SHOP, 1895.

Large pails (kitchen).....	2
pudding pans (kitchen).....	6
Large strainers (tea-room).....	2
Bread pans (bakery).....	300
Large coffee boiler (kitchen).....	1
Biscuit pans (kitchen).....	24
Copper kettle (kitchen).....	1
Tea pots (kitchen).....	2
Drinking cups (store-room).....	100
Diet cups (store-room).....	154
Large boilers (kitchen).....	4

Diet flats (store room).....	72
Large coffee boiler (kitchen) .....	1
Large coffee pots (dining-rooms).....	2
Wash basins (store-room).....	24
Pails (store-room).....	24
Diet cups (store-room).....	175
Drinking cups (store-room).....	120
Pans (path. lab.).....	8
Round copper strainers (tea-room).....	1
Diet pans (store-room).....	16
Round cake pans (center kitchen).....	4
Large bread box (bakery).....	1
Bread boxes (store-room).....	12
Large butter boxes (store-room).....	2
Brass strainer (Elysian Grove).....	1
Pails (store-room).....	12
Watering pots (garden).....	4
Copper can (laboratory).....	1
Water pails (laboratory).....	2
Copper cans (kitchen).....	2
Milk pails (cow barn).....	10
Flats (store-room).....	50
Round pudding pans (center kitchen).....	6
Square cake box (center kitchen).....	1
Large meat pans (butcher).....	3
Large coffee pot (dining-room).....	1
Sugar scoops (store-room).....	4
pudding pans (kitchen).....	36
Covering tables (laboratory).....	2
Dust pans (store-room).....	24
Tables covered (wash-room).....	2
Milk pitchers (store-room).....	24
Plumber's fire-pot (shop).....	1
Large oval boiler (center kitchen).....	1
Sugar boxes (store-room).....	36
Large pails (store-room).....	18
pudding pans (center kitchen).....	2
Starch strainer (laundry).....	1

Usual repairs to hall locks, waiter bells, call whistles and kitchen utensils.

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REPORT OF THE MEDICAL DIRECTOR.

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# REPORT OF THE MEDICAL DIRECTOR.

*To the Board of Managers :*

GENTLEMEN—I have the honor to herewith submit to you the twentieth 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, 1895.

	Men.	Women.	Total.	Men.	Women.	Total.
In the Hospital October 31st, 1894.....				520	530	1,050
Patients admitted—						
First admission.....	108	107	215			
Not first admission.....	10	19	29			
Total admitted during the year.....				118	126	244
Total number of patients under treatment during the year.....				638	656	1,294
Patients discharged—						
Restored.....	26	30	56			
Improved.....	11	14	25			
Unimproved.....	6	4	10			
Died.....	51	33	84			
By elopement.....	3		3			
Total discharged and died.....				97	81	178
Remaining in the Hospital.....				541	575	1,116
Of this number there are, Public.....	472	513	985			
Private.....	69	62	131			
Total.....				541	575	1,116
Whole number admitted from August 17th, 1876, to October 31st, 1895.....				2,260	2,082	4,342
Whole number discharged during the same period of time—						
Restored.....	466	437	903			
Improved.....	417	430	847			
Unimproved.....	136	149	285			
Died.....	691	491	1,182			
By elopement.....	9		9			
Total.....				1,719	1,507	3,226
Remaining October 31st, 1895.....				541	575	1,116

TABLE II.

MONTHLY ADMISSIONS, DISCHARGES AND AVERAGES.

	ADMISSIONS.			DISCHARGES AND DEATHS.			DAILY AVERAGES.		
	Men.	Women.	Total.	Men.	Women.	Total.	Men.	Women.	Total.
1894.									
November.....	9	11	20	11	5	16	517.22	533.00	1,050.22
December.....	7	5	12	7	9	16	519.27	535.36	1,054.63
1895.									
January.....	13	9	22	4	1	5	522.86	536.10	1,058.96
February.....	8	8	16	5	6	11	525.13	539.39	1,064.52
March.....	15	9	24	7	3	10	534.65	543.95	1,078.60
April.....	9	6	15	10	7	17	536.87	549.19	1,086.06
May.....	12	12	24	7	6	13	538.10	549.67	1,087.77
June.....	7	19	26	9	5	14	541.44	560.80	1,102.24
July.....	11	10	21	1	1	2	542.00	570.78	1,112.78
August.....	11	16	27	8	10	18	548.92	581.18	1,130.10
September.....	11	8	19	9	13	22	552.34	578.37	1,130.71
October.....	5	13	18	16	15	31	546.58	576.82	1,123.40
Total.....	118	126	244	94	81	175			
For the year.....							535.45	554.55	1,090.00

TABLE III.

NUMBER OF ATTACK OF THOSE ADMITTED.

ATTACK.	Men.	Women.	Total.
First.....	164	101	265
Second.....	12	18	30
Third.....		3	3
Fourth.....	2	2	4
Sixth.....		2	2
Total.....	118	126	244

TABLE IV.

AGE WHEN ADMITTED.

AGE.	Men.	Women.	Total.
Under fifteen years.....		1	1
From fifteen to twenty years.....	1	4	5
From twenty to twenty-five years.....	17	18	35
From twenty-five to thirty years.....	17	14	31
From thirty to thirty-five years.....	12	16	28
From thirty-five to forty years.....	16	12	28
From forty to forty-five years.....	8	11	19
From forty-five to fifty years.....	10	12	22
From fifty to sixty years.....	17	13	30
From sixty to seventy years.....	12	14	26
From seventy to eighty years.....	5	10	15
Eighty years and over.....	3	1	4
Total.....	118	126	244

TABLE V.

NATIVITY OF PATIENTS ADMITTED.

NATIVITY.	Men.	Women.	Total.
Connecticut.....	1		1
Kentucky.....	1		1
Louisiana.....		1	1
Maine.....	1		1
Massachusetts.....		5	5
New Jersey.....	37	34	71
New York.....	17	19	36
Pennsylvania.....	4	5	9
South Carolina.....	1		1
Virginia.....	1	4	5
United States.....	6	4	10
Austria.....	1	2	3
Bavaria.....	1		1
England.....	9	7	16
Germany.....	14	10	24
Holland.....	1	1	2
Hungary.....	2	2	4
Ireland.....	15	25	40
Italy.....	1		1
Nova Scotia.....	1		1
Poland.....		3	3
Russia.....	2		2
Scotland.....	1	2	3
Sweden.....		2	2
Switzerland.....	1		1
Total.....	118	126	244

TABLE VI.

PLACE OF RESIDENCE OF THOSE ADMITTED.

COUNTIES.	Men.	Women.	Total.
Bergen .....	16	10	26
Essex .....	12	23	35
Hudson .....	19	17	36
Hunterdon .....	3	4	7
Morris .....	10	11	21
Passaic .....	23	28	51
Somerset .....	1	1	2
Sussex .....	1	3	4
Union .....	25	20	45
Warren .....	7	7	14
New York, N. Y. ....	2	2	4
Total .....	118	126	244

TABLE VII.

CIVIL CONDITION OF THOSE ADMITTED.

CIVIL CONDITION.	Men.	Women.	Total.
Single .....	49	47	96
Married .....	64	65	129
Widowed .....	5	14	19
Total .....	118	126	244

TABLE VIII.

OCCUPATION OF THOSE ADMITTED.

*Males.*

Artisans.....	14
Author.....	1
Brokers.....	2
Carpenters.....	5
Clerks.....	14
Electrical engineer.....	1
Farmers.....	6
Lawyer.....	1
Laborers.....	32
Merchants.....	14
Mechanics.....	12
Masons.....	2
Mariners.....	2
Physician.....	1
School teacher.....	1
Telegraph operator.....	1
No occupation.....	9
Total.....	118

TABLE IX.

OCCUPATION OF THOSE ADMITTED.

*Females.*

Cashier.....	1
Designer.....	1
Dressmaker.....	1
Housewives.....	60
Housekeepers.....	7
Flax spinner.....	1
Music teacher.....	1
Nurse.....	1
School teachers.....	2
Seamstress.....	1
Saleswomen.....	2
Silk weavers.....	3
Silk winders.....	2
Servants.....	19
No occupation.....	24
Total.....	126

TABLE X.

FORM OF MENTAL DISEASE OF THOSE ADMITTED.

MENTAL DISEASE.	Men.	Women.	Total.
Mania, acute.....	17	11	28
Mania, acute delirious.....		4	4
Mania, chronic.....	4	10	14
Mania, epileptic.....	3	1	4
Mania, puerperal.....		3	3
Mania, recurrent.....		9	9
Mania, toxic (alcoholic).....	9	2	11
Melancholia, acute.....	28	34	62
Melancholia, agitata.....	5	5	10
Melancholia, chronic.....	13	12	25
Melancholia, recurrent.....		6	6
Melancholia, stuporous.....	1		1
Dementia, epileptic.....	2	3	5
Dementia, parietic.....	9	1	10
Dementia, senile.....	14	12	26
Dementia, terminal.....	3	5	8
Insane neuroses, hypochondria.....	1		1
Insane neuroses, hysteria.....		3	3
Idiocy.....		1	1
Imbecility.....	3		3
Imbecility with epilepsy.....	1	1	2
Insanity of pubescence.....	1		1
Insanity of adolescence.....	2	1	3
Morphinomania.....		1	1
Paranoia.....	2	1	3
Total.....	118	126	244

TABLE XI.

MANNER OF SUPPORT OF THOSE ADMITTED.

HOW SUPPORTED.	Men.	Women.	Total.
State.....	13	7	20
County.....	77	89	166
Private.....	28	30	58
Total.....	118	126	244

TABLE XII.

ALLEGED CAUSES OF INSANITY OF THOSE ADMITTED.

CAUSES.	Men.	Women.	Total.
<i>Physical.</i>			
Congenital.....		1	1
Cerebral hemorrhage.....	1		1
Childbirth.....		7	7
Diphtheria and measles.....	1		1
Epilepsy.....	6	5	11
General ill-health.....	1	6	7
Heat stroke.....	3		3
Heredity.....	8	11	19
Injury to head.....	3	1	4
Intemperance and other excesses.....	17	3	20
Masturbation.....	6		6
Menopause.....		2	2
Opium.....		2	2
Old age.....	6	11	17
Overwork.....	5	5	10
Pregnancy.....		3	3
Rheumatism.....		1	1
Syphilis.....	3		3
Uterine or ovarian disease.....		2	2
Total physical.....	60	60	120
<i>Moral.</i>			
Domestic troubles.....	3	4	7
Financial reverses.....	12	2	14
Disappointed affections.....	2	6	8
Grief.....	2	2	4
Religious excitement.....		2	2
Worry.....	7	12	19
Total moral.....	28	28	54
Total physical.....	60	60	120
Total moral.....	28	28	54
Unassigned.....	32	38	70
Total.....	118	126	244

TABLE XIII.

COMPLICATIONS OF THOSE ADMITTED.

COMPLICATIONS.	Men.	Women.	Total.
Acne vulgaris.....	3		3
Anæmia.....	5		5
Aphasia.....	1		1
Arterio-sclerosis.....	1		1
Asthma.....	1		1
Bell's paralysis.....	1		1
Bright's disease.....	1	3	4
Cataract.....	1	1	2
Carcinoma of breast.....		1	1
Carcinoma of ear.....	1		1
Cellulitis.....	1		1
Chronic gastritis.....	1		1
Dislocated femur.....	1		1
Deaf-mute.....		1	1
Fracture of ulna.....		1	1
Diabetes mellitus.....		2	2
Enterocolitis.....		1	1
Epilepsy.....	6	5	11
Goitre.....		1	1
Hemiplegia.....	4		4
Hemophilia.....	1		1
Hemorrhoids.....		2	2
Hernia.....	6	2	8
Hydrocele.....	1		1
Gonorrhœa.....	1	1	2
Homicidal tendencies.....	15	11	26
Lacerated perinæum.....		1	1
Leucorrhœa.....		2	2
Multiple neuritis.....		1	1
Organic heart disease.....	10	27	37
Partial deafness.....	5	1	6
Paraplegia.....		1	1
Paraphimosis.....	1		1
Phthisis.....	3	7	10
Rheumatism.....	1	2	3
Spinal curvature.....		2	2
Syphilis.....	3		3
Suicidal tendencies.....	17	21	38
Uterine or ovarian disease.....		5	5
Urethral stricture.....	1		1
Without complications.....	53	59	112

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.....	24	37	61
Hereditary taint denied.....	58	53	111
Hereditary history unobtainable.....	36	36	72
Total.....	118	126	244

TABLE XV.

DURATION OF DISEASE BEFORE ADMISSION.

PERIOD.	Men.	Women.	Total.
Under one month.....	28	26	54
One to three months.....	26	23	49
Three to six months.....	12	13	25
Six to twelve months.....	8	15	23
One to two years.....	16	14	30
Two to three years.....	6	8	14
Three to four years.....	6	6	12
Four to five years.....	1	2	3
Five to ten years.....	4	11	15
Ten to twenty years.....	4	1	5
Over twenty years.....	4	6	10
Unknown.....	3	1	4
Total.....	118	126	244

TABLE XVI.

AGE WHEN ATTACKED OF THOSE RESTORED.

AGE.	Men.	Women.	Total.
Under fifteen years.....		1	1
From fifteen to twenty years.....	1		1
From twenty to twenty-five years.....	4	4	8
From twenty-five to thirty years.....	6	4	10
From thirty to thirty-five years.....	3	4	7
From thirty-five to forty years.....	4	2	6
From forty to forty five years.....	1	4	5
From forty-five to fifty years.....	4	5	9
From fifty to sixty years.....	1	4	5
From sixty to seventy years.....	2	2	4
Total.....	26	30	56

TABLE XVII.

DURATION BEFORE ADMISSION OF THOSE RESTORED.

DURATION.	Men.	Women.	Total.
Under one month.....	4	5	9
One to three months.....	7	8	15
Three to six months.....	6	6	12
Six to twelve months.....	4	6	10
One to two years.....	3	2	5
Over two years.....	2	3	5
Total.....	26	30	56

TABLE XVIII.

DURATION OF TREATMENT OF THOSE RESTORED.

DURATION OF TREATMENT.	Men.	Women.	Total.
Under one month.....	2	1	3
One to two months.....	3	2	5
Two to three months.....	5	5	10
Three to four months.....	4	3	7
Four to five months.....	2	2	4
Five to six months.....	1	3	4
Six to nine months.....	3	8	11
Nine to twelve months.....	2	2	4
Twelve to eighteen months.....	2	2	4
Eighteen to twenty-four months.....		1	1
Two years and over.....	2	1	3
Total.....	26	30	56

TABLE XIX.

MENTAL DISEASE OF THOSE RESTORED.

MENTAL DISEASE.	Men.	Women.	Total.
Mania, acute.....	6	4	10
Mania, acute delirious.....		1	1
Mania, chronic.....	1		1
Mania, puerperal.....		2	2
Mania, recurrent.....		3	3
Mania, toxic (alcoholic).....	6	3	9
Melancholia, acute.....	11	8	19
Melancholia, chronic.....	1	5	6
Insane neurosis, hysteria.....		1	1
Insanity of pubescence.....	1	1	2
Morphinomania.....		2	2
Total.....	26	30	56

TABLE XX.

AGE AT DEATH.

AGE.	Men.	Women.	Total.
Twenty to twenty-five years.....	6	2	8
Twenty-five to thirty years.....	5	.....	5
Thirty to thirty five years.....	1	2	3
Thirty-five to forty years.....	4	1	5
Forty to forty-five years.....	6	2	8
Forty-five to fifty years.....	1	7	8
Fifty to sixty years.....	9	6	15
Sixty to seventy years.....	8	5	13
Seventy to eighty years.....	8	8	16
Eighty years and over.....	3	.....	3
Total.....	51	33	84
Average age at death.....	56	52	54

TABLE XXI.

FORM OF MENTAL DISEASE OF THOSE WHO DIED.

MENTAL DISEASE.	Men.	Women.	Total.
Mania, acute.....	2	2	4
Mania, acute delirious.....	.....	2	2
Mania, chronic.....	1	3	4
Mania, puerperal.....	.....	1	1
Mania, recurrent.....	.....	1	1
Melancholia, acute.....	1	2	3
Melancholia, chronic.....	1	1	2
Melancholia, stuporous.....	1	.....	1
Dementia, epileptic.....	7	2	9
Dementia, organic.....	.....	1	1
Dementia, parietic.....	5	1	6
Dementia, senile.....	10	7	17
Dementia, terminal.....	20	10	30
Idiocy.....	1	.....	1
Imbecility with epilepsy.....	2	.....	2
Total.....	51	33	84

TABLE XXII.

CAUSES OF DEATH.

CAUSES.	MANIA.		MELANCHOLIA.		DEMENTIA.		Total.
	Men.	Women.	Men.	Women.	Men.	Women.	
<b>Mania—</b>							
Acute, with acute gastritis.....	.....	1	.....	.....	.....	.....	1
Acute, with dysentery.....	1	.....	.....	.....	.....	.....	1
Acute, with phthisis.....	1	.....	.....	.....	.....	.....	1
Acute, with pneumonia.....	.....	1	.....	.....	.....	.....	1
Acute delirious, with phthisis.....	.....	1	.....	.....	.....	.....	1
Acute delirious, with pneumonia.....	.....	1	.....	.....	.....	.....	1
Chronic, with Bright's disease.....	.....	1	.....	.....	.....	.....	1
Chronic, with entero-colitis.....	.....	1	.....	.....	.....	.....	1
Chronic, with phthisis.....	.....	1	.....	.....	.....	.....	1
Chronic, with abdominal hemorrhage.....	1	.....	.....	.....	.....	.....	1
Puerperal, with phthisis.....	.....	1	.....	.....	.....	.....	1
Recurrent, with acute phthisis.....	.....	1	.....	.....	.....	.....	1
<b>Melancholia—</b>							
Acute, with exhaustion.....	.....	.....	1	.....	.....	.....	1
Acute, with organic heart disease.....	.....	.....	.....	1	.....	.....	1
Acute, with paraplegia.....	.....	.....	.....	1	.....	.....	1
Chronic, with exhaustion.....	.....	.....	1	.....	.....	.....	1
Chronic, with Bright's disease.....	.....	.....	.....	1	.....	.....	1
Stuporous, with pachymeningitis hemorrhagica.....	.....	.....	1	.....	.....	.....	1
<b>Dementia—</b>							
Epileptic, with cerebral hemorrhage.....	.....	.....	.....	.....	1	.....	1
Epileptic, with cyanosis.....	.....	.....	.....	.....	.....	1	1
Epileptic, with acute enteritis.....	.....	.....	.....	.....	1	.....	1
Epileptic, with entero-colitis.....	.....	.....	.....	.....	1	.....	1
Epileptic, with exhaustion.....	.....	.....	.....	.....	1	.....	1
Epileptic, with pachymeningitis hemorrhagica.....	.....	.....	.....	.....	1	.....	1
Epileptic, with scald.....	.....	.....	.....	.....	.....	1	1
Epileptic, with status epilepticus.....	.....	.....	.....	.....	2	.....	2
Organic, with cerebral hemorrhage.....	.....	.....	.....	.....	.....	1	1
Paretic, with convulsions.....	.....	.....	.....	.....	2	.....	2
Paretic, with exhaustion.....	.....	.....	.....	.....	2	1	3
Paretic, with phthisis.....	.....	.....	.....	.....	1	.....	1
Senile, with acute bronchitis.....	.....	.....	.....	.....	1	.....	1
Senile, with acute enteritis.....	.....	.....	.....	.....	1	3	4
Senile, with entero-colitis.....	.....	.....	.....	.....	1	1	2
Senile, with exhaustion.....	.....	.....	.....	.....	5	1	6
Senile, with phlegmonous erysipelas.....	.....	.....	.....	.....	1	.....	1
Senile, with phthisis.....	.....	.....	.....	.....	.....	2	2
Senile, with pneumonia.....	.....	.....	.....	.....	1	.....	1
Terminal, with acute enteritis.....	.....	.....	.....	.....	1	1	2
Terminal, with acute gastric ulcer.....	.....	.....	.....	.....	1	.....	1
Terminal, with Bright's disease.....	.....	.....	.....	.....	3	.....	3
Terminal, with cerebral hemorrhage.....	.....	.....	.....	.....	1	1	2

TABLE XXII—CONTINUED.

## CAUSES OF DEATH.

CAUSES.	MANIA.		MELANCHOLIA.		DEMENTIA.		Total.
	Men.	Women.	Men.	Women.	Men.	Women.	
	Dementia—						
Terminal, with chronic enteritis.....						1	1
Terminal, with cirrhosis of liver.....					1		1
Terminal, with exhaustion.....					5	1	6
Terminal, with organic heart disease.....					3	1	4
Terminal, with phthisis.....					3	3	6
Terminal, with pneumonia.....						1	1
Terminal, with pyo-nephrosis.....					1		1
Terminal, with sarcoma of liver.....						1	1
Terminal, with thrombosis of the pulmonary artery.....					1		1
Idiocy, with acute gastritis.....					1		1
Imbecility with epilepsy, with entero-colitis..					1		1
Imbecility with epilepsy, with typhoid fever..					1		1
Total.....	3	9	3	3	45	21	84

TABLE XXIII.

## SHOWING YEARLY INCREASE OF POPULATION SINCE OPENING OF INSTITUTION.

YEARS.	Men.	Women.	Total.
October 31st, 1876.....	159	183	342
October 31st, 1877.....	216	229	445
October 31st, 1878.....	227	253	480
October 31st, 1879.....	248	279	527
October 31st, 1880.....	277	309	586
October 31st, 1881.....	310	331	641
October 31st, 1882.....	321	346	667
October 31st, 1883.....	330	377	707
October 31st, 1884.....	371	374	745
October 31st, 1885.....	415	414	829
October 31st, 1886.....	415	441	856
October 31st, 1887.....	434	439	873
October 31st, 1888.....	463	441	904
October 31st, 1889.....	427	430	857*
October 31st, 1890.....	450	436	886
October 31st, 1891.....	455	443	898
October 31st, 1892.....	471	478	949
October 31st, 1893.....	509	500	1,009
October 31st, 1894.....	520	530	1,050
October 31st, 1895.....	541	575	1,116

\* One hundred patients transferred to Essex County Hospital.

## RESUME.

Table I. shows that the Hospital year covered by the nineteenth annual report, ending October 31st, 1894, closed with 1,050 patients in the Hospital—520 were men and 530 women. They were divided, as to manner of maintenance, into 126 private patients (supported by guardian, friends or relatives), and 924 public (supported by counties and the State.)

There were admitted during the year covered by the twentieth annual report (the period between October 31st, 1894, and November 1st, 1895) 244 patients—118 males and 126 females; 58 of these were private and 186 public patients; 99 were of foreign birth; 71 were born in New Jersey, while the remaining 74 were born in other parts of the United States.

While only 71 of the 244 admissions were born in the State of New Jersey, 240 were residents and 4 non-residents.

The daily average of patients for the months of August and September was 1,130; the daily average of the entire year 1,090. The year closed with 1,116—541 males and 575 females. Nineteen per cent. of those admitted had suffered from one or more previous attacks and 2 were suffering from the sixth attack.

The decade of life furnishing the greatest number of admissions was between the twenty-fifth and thirty-fifth years of age, there being 66 persons, or 27 per cent. of the entire number, admitted during the year who came in this division, as will be seen by consulting Table IV. There was one who was admitted under the age of 15 and 4 who were past "four score."

Table XII. shows that the supposed cause of insanity in 120, or nearly 50 per cent. of those admitted, was of what is generally termed a physical nature, or bodily disease, while in 54, or about 22 per cent., the alleged cause was moral, or emotional; and in 70, or about 28 per cent., the friends and relatives could assign no cause for the mental disturbance.

Those admitted were found to have the following complications: Acne vulgaris, 3; anæmia, 5; aphasia, 1; Bell's paralysis, 1; arterio-sclerosis, 1; asthma, 1; Bright's disease, 4; cataract, 2; carcinoma of breast, 1; carcinoma of ear, 1; cellulitis, 1; chronic gastritis, 1; dislocation of femur, 1; deaf-mute, 1; fracture of ulna, 1; diabetes mellitus, 2; entero-colitis, 1; epilepsy, 11; goitre, 1;

hemiplegia, 4; hemophilia, 1; hemorrhoids, 2; hernia, 8; hydrocele, 1; gonorrhœa, 1; homicidal tendencies, 26; lacerated perinæum, 1; leucorrhœa, 2; multiple neuritis, 1; organic heart disease, 37; partial deafness, 6; paraphimosis, 1; phthisis, 10; rheumatism, 1; spinal curvature, 2; syphilis, 3; suicidal tendencies, 38; uterine or ovarian disease, 5; urethral stricture, 1; paraplegia, 1; without complications, 112.

The number of patients discharged during the year is 91—43 men and 48 women. Of this number 56 were discharged as restored and 25 as sufficiently improved to get along nicely at home. Several of those discharged as improved continued to improve after going to their homes, and are now apparently in full possession of their mental faculties.

Since August 17th, 1876, the date of the opening of the Hospital for the admission of patients, 903 persons have been discharged as recovered and 847 as improved, making a total of 1,750 patients who have derived sufficient benefit from the care and treatment received to be returned to their homes, many of them taking up their former places in society, business and literary pursuits.

There were 84 deaths during the year—51 men and 33 women—17 less than during the preceding year, while there were 46 more patients under treatment.

Of those admitted, 96 were unmarried, 129 married and 19 widowed; 118 were men and 126 women.

Those who died suffered from the following mental diseases: Acute mania, 4; acute delirious mania, 2; chronic mania, 4; acute melancholia, 3; chronic melancholia, 2; stuporous melancholia, 1; epileptic dementia, 9; organic dementia, 1; parietic dementia, 6; senile dementia, 17; terminal dementia, 30; idiocy, 1. The average age of those who died was: Men, 56; women, 52.

#### OVERCROWDED CONDITION.

In the two preceding annual reports I made mention of the steadily increasing population, and called attention to our limited accommodation. On October 31st, 1894, the last day of our nineteenth Hospital year, there were 1,050 patients in the Hospital. The daily average for the month of September of the same year was 1,062, while on October 31st, 1895, we had 1,116, and the daily

average for the month of September was 1,130. This shows during one month a daily average of 78 in excess of the same month of the preceding year, and the census upon the last day of the year of 66 more than upon the same day of the preceding year. There has been a steady increase in the numbers since the opening of the Hospital, and in the last two years the gain has been greater than in the preceding years, until we now have about 325 patients over the normal capacity of the institution. This crowded condition causes us daily anxiety and apprehension for the comfort and welfare of our patients; it seriously operates adversely to many of the primary interests of the Hospital. The step taken by the Legislature in appropriating a sum sufficient to start the work of a new building has inspired the hope that the near future will find us with ample accommodation for not only the present population, but sufficient to enable us to receive patients for several years, and properly care for them without overcrowding. Upon completion of the new building the congested condition of the Hospital proper will be greatly relieved.

#### LAVATORY EXTENSIONS.

The new extensions now nearly completed are a much-needed improvement, and will prove of primary importance from a sanitary standpoint.

They are 23 x 16 feet, four stories high, and are extensions to the second and third tiers of wards of both the north and south wings of the building. When fitted up with modern flush-closets and sanitary plumbing, they will give to twenty-four wards of the house facilities and accommodations they have long been in need of. In addition to this extension the two rooms adjoining it on each ward, previously occupied as bed-rooms, will be used, one for a bath-room and the other for lavatory purposes, the new extension to be especially fitted up with closets, urinals, etc.

The rooms in which the water-closets, urinals and wash-basins are now located have given much annoyance for years from the fact of a lack of the necessary facilities for preserving the proper sanitary conditions. The closets are not, strictly speaking, "flush-closets," but are subjected to a steady and continuous flow of water, which has not had a satisfactory cleansing effect, though the amount of water

thus used is extravagant. Modern flush-closets will be used in the new extensions.

The old lavatories and closet-rooms are what may be termed "interior rooms," into which no direct rays of sunlight can fall, or air currents can reach except through other rooms. The new extensions have windows so arranged that the sunlight may penetrate them in great plenty, and may be flushed with pure air at pleasure.

The use of stone similar to that used in the original construction of the main building gives the extensions the appearance of having been built simultaneously with that building.

The crowded condition of every part of the Hospital prompts me to present to you the question of building a home for nurses and attendants.

#### TRAINING SCHOOL.

The work of the training-school for nurses and attendants was faithfully prosecuted throughout the entire course of six months, and at the close of the session 31 men and 39 women presented themselves for examination upon the various subjects treated in the lectures and in which they had been instructed during the course. The standard established as requisite to passing, or making the candidate eligible to enter upon the second course, was 70 per cent., general average.

There were 29 men and 34 women who passed successfully; 11 men and 5 women failed.

The successful candidates were given certificates showing their eligibility to enter upon the second course.

The class was addressed by Rev. Dr. Buckley on July 4th, on which occasion he delivered to them their certificates.

The good results of this course of training have been quite noticeable. The nurses who took a full course have been able to give a much more intelligent and efficient service. Their reports to physicians as to the symptoms and progress of their patients have been markedly more satisfactory, and in acute cases where it has been necessary to keep a temperature chart and a full record of symptoms, their work has been of quite a gratifying character. The work will be energetically pushed during the coming year, with the hope that the institution will through this source be equipped with a corps of

attendants and nurses thoroughly fitted to acceptably and intelligently perform all the many trying and perplexing duties of their calling.

#### TYPHOID FEVER.

The development of typhoid fever during the months of September and October gave us much concern, but up to the time of the writing of this report there have only been 10 cases on the Hospital premises, all males—7 insane patients, 1 attendant and 2 employes of the Warden's department.

Though a careful investigation has been made we are unable to determine the cause of infection. To determine whether the water-supply had not in some way become contaminated, samples of the water were sent to Professor William Chandler, to be analyzed. The chemical analysis showed the water to be in excellent condition.

The infection cannot be traced to any condition or defect peculiar to one ward. The wards where the disease manifested itself were all supplied with water-coolers, and kept filled with sterilized water for drinking purposes.

All persons attacked were as carefully isolated as possible; every precaution taken to prevent the spread of the disease. No recent cases have developed. One case died. The others have recovered.

#### DEATH SUPPOSED TO BE DUE TO VIOLENCE.

The matter of the death of Nicholas Dolfuz, who had since his admission to this Hospital from Paterson jail been subject to irregular periods of excitement and violent conduct, and whose death there was reason to believe resulted from rough treatment at the hands of two attendants, has been submitted to you in detail and duly laid before the proper legal authorities. An inquest was held over the body by Coroner James Douglas, M.D. The two attendants were promptly arrested and await trial in the county jail.

#### PATHOLOGICAL LABORATORY.

This department is still presided over by Dr. Thomas P. Prout, and, as in the past, his enthusiasm and intelligent devotion to the work have brought forth highly gratifying results.

The work of this department is not, as some might suppose, principally the examination with the microscope and other scientific instruments of the organs of the body after death for the purpose of ascertaining the cause of death and associating the pathological conditions with the symptoms which have been exhibited, but it is also a most important adjunct in diagnosis, often giving a definite knowledge of what would otherwise have been most obscure cases, enabling us to proceed intelligently in their treatment.

In cases of suspected phthisis the sputum is carefully examined; when kidney disease is suspected the urine is examined; in patients where symptoms are present indicating malarial disease the blood is examined, and so on in the various diseases in which distinctive conditions or specific organisms may be found by laboratory processes, and thus diagnoses are made with accuracy.

In nearly all acute cases the blood is carefully examined, noting not only its general elementary characteristics, but an accurate differential count is made and recorded in our case books. Dr. M. L. Perry, fourth assistant physician, has done interesting work upon the blood in connection with "thyroid feeding."

The following equipments have been added to the laboratory since our last report: a bacterial apparatus with its various appurtenances, one Leitz microscope and a centrifuge.

New zinc-covered desks have been placed in both rooms.

The light of both rooms has been improved by substituting two large panes of glass to each window for twelve small ones, and placing in each room Welsbach burners. These changes have given us very much improved conditions and made the work easier and more satisfactory, but as laboratory apartments they are far from ideal; we live, however, in the hope that the laboratories provided for in the plans of the new building will meet our fullest expectations and leave no room for complaint.

#### AMUSEMENTS.

The amusements, both outdoor and indoor, have received much attention, and, as in the preceding years, have proven a source of much enjoyment to our patients, adding daily to their comfort of mind as well as their mental and physical health.

The outdoor amusements have consisted of lawn tennis, croquet, foot-ball, base-ball, quoits, lawn parties, band concerts, etc.

The indoor amusements were weekly dances, card parties, musicales, theatrical entertainments, readings, recitations, ward parties, checkers, chess, back-gammon, etc.

#### RELIGIOUS SERVICES.

The chapel pulpit was occupied every Sunday, and our patients manifested much interest in the services. Many of them eagerly look forward each week to the return of the day of the Lord, and go to the chapel in the strictest spirit of devotion, deriving much comfort from the sermons. The following clergymen have regularly presided over the religious worship of the Hospital, and visited and ministered to the sick upon the wards:

Rev. Dr. Albert Erdman, Presbyterian, Morristown.  
 Rev. Father Egan, Roman Catholic, Morris Plains.  
 Rev. Dr. S. C. Batten, Baptist, Morristown.  
 Rev. William Fryling, Presbyterian, Morris Plains.  
 Rev. George P. Eckman, Methodist, Morristown.

The foregoing perform the service for one Sunday in each month. In their absences the Rev. J. M. Freeman, D.D., the Rev. J. B. Beaumont and Dr. Buckley have been at the service of the institution.

The relations existing between the medical and business departments during the year have been gratifying. I am indebted to the Warden for many courtesies which he has extended to the medical department.

There have been no changes in the medical staff during the year.

I am under renewed obligations to my assistants for their zealous and faithful co-operation in the medical work of the institution.

Respectfully submitted,

B. D. EVANS, M.D.,

Medical Director.

MORRIS PLAINS, N. J., October 31st, 1895.

#### DONATIONS ACKNOWLEDGED.

The grateful acknowledgments of the Hospital are due to the following persons:

December, 1894, Mr. W. M. Rexford, boxes of oranges.

January 12th, 1895, Mrs. A. R. Whitney, Morristown, a package of magazines and periodicals.

April 17th, 1895, Miss Belle Grover, Newark, sixteen paper-covered books.

May 8th, 1895, Morristown Club, a large number of periodicals, papers, magazines, etc.

July, 1895, Messrs. Robert M. Dodsworth, Henry Turner, S. G. Ely and T. Vanatta, styled "The Harmony Quartette," for two enjoyable entertainments to the patients assembled in the amusement hall.

July 18th, 1895, Mrs. Kissel, Morristown, a package of magazines.

September, 1895, E. F. C. Young, Esq., Jersey City, fifty dollars (\$50) contributed to the outdoor amusement fund.

The following papers have been regularly received and are much appreciated by our patients as well as the officers and employes of the Hospital:

The Reporter .....	West Hoboken.
The Observer .....	West Hoboken.
The Jersey City News.....	Jersey City.
Jersey City Democrat .....	Jersey City.
The Evening Journal.....	Jersey City.
The New Jersey Staats Zeitung.....	Jersey City.
Hudson County Journal .....	Hoboken.
The Kearny Record.....	Harrison.
The Evening News.....	Hoboken.
The Bayonne Budget.....	Bayonne.
The Kearny Observer.....	{ Kearny and Arlington.
Hudson County Review.....	Town of Union.
The Hunterdon County Democrat.....	Flemington.
Home Visitor.....	Flemington.
Hunterdon Independent.....	Frenchtown.
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.
East Orange Gazette.....	East Orange.
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.
Star of the Cape.....	Cape May City.
The Advance.....	Jamesburg.
The Middlesex County Democrat.....	Perth Amboy.
Southwestern Presbyterian.....	New Orleans, La.
Paterson Volks Freund.....	Paterson.
Paterson Labor Standard.....	Paterson.
De Telegraf.....	Paterson.
Passaic County Journal.....	Paterson.
Paterson Evening News.....	Paterson.
The Item.....	Passaic.
Passaic Daily News.....	Passaic.
Passaic City Record.....	Passaic.
The Union County Standard.....	Westfield.
Westfield Leader.....	Westfield.
The Cranford Chronicle.....	Cranford.
The Constitutional.....	Plainfield.
The Daily Press.....	Plainfield.
The Summit Herald.....	Summit.
The Summit Record.....	Summit.
Elizabeth Daily Journal.....	Elizabeth.
Union County Record.....	Elizabeth.
Freie Presse.....	Elizabeth.
Central New Jersey Herald.....	Elizabeth.
The Union Democrat.....	Rahway.
New Jersey Advocate.....	Rahway.
The Hackensack Republican .....	Hackensack.
The Bergen County Democrat.....	Hackensack.
The Bergen County Index.....	Hackensack.
The Englewood Times .....	Englewood.
Bergen County Herald.....	Rutherford.
Carlstadt Freie Presse.....	Carlstadt.
The Sunday Times-Standard.....	Newark.
Hunterdon Republican.....	Flemington.
Democrat-Advertiser.....	Flemington.
Hunterdon Gazette .....	High Bridge.
The Weekly Avalanche.....	Glen Gardner.
The Milford Leader.....	Milford.
The Frenchtown Star.....	Frenchtown.
The Morris County Chronicle.....	Morristown.
The True Democratic Banner.....	Morristown.
The Evening Express.....	Morristown.
The Jerseyman.....	Morristown.
The Iron Era.....	Dover.
The Dover Index.....	Dover.
The Dover Daily Journal.....	Dover.

The Rockaway Record.....Rockaway.  
 The Boonton Weekly Bulletin .....Boonton.  
 The New Jersey Herald.....Newton.  
 Sussex County Democrat.....Newton.  
 The Post.....Phillipsburg.  
 The Warren Republican.....Hackettstown.  
 The Warren Tidings .....Washington.  
 The Warren Journal.....Belvidere.  
 The Washington Star.....Washington.  
 Warren Democrat.....Phillipsburg.  
 The Morning Call.....Paterson.  
 Paterson Daily Guardian.....Paterson.  
 Paterson Daily Press.....Paterson.

REPORT IN PATHOLOGY.

REPORT OF THE RESIDENT PATHOLOGIST.

The following is a list of hospitals and their locations:

- The Asbury Park Hospital, Asbury Park
- The Atlantic City Hospital, Atlantic City
- The Camden Hospital, Camden
- The Elizabeth Hospital, Elizabeth
- The Jersey City Hospital, Jersey City
- The Newark Hospital, Newark
- The Passaic Hospital, Passaic
- The Paterson Hospital, Paterson
- The Plainfield Hospital, Plainfield
- The Trenton Hospital, Trenton
- The Vineland Hospital, Vineland
- The Woodbury Hospital, Woodbury
- The York Hospital, York

REPORT OF THE RESIDENT PATHOLOGIST

Case No.	Age	Sex	Diagnosis	Duration	Result
100	45	M	Chronic nephritis	1 year	Death
101	55	F	Chronic nephritis	6 months	Death
102	65	M	Chronic nephritis	1 year	Death
103	75	F	Chronic nephritis	1 year	Death
104	85	M	Chronic nephritis	1 year	Death

REPORT IN PATHOLOGY.

To the Medical Director:

During the past year twenty-four autopsies have been performed, a number considerably below that of last year.

The following table presents in tabulated form a few of the facts in regard to the autopsies. The table which followed this in the two preceding years has been omitted. Following the table I have presented some considerations in regard to the occurrence of gross kidney lesions among the insane.

Number.	Sex.	Age.	Mental Disease.	Duration.	Anatomical Diagnosis.
181	M.	23	Terminal dementia..	5½ years...	Pulmonary tuberculosis. Chronic pleuritis. Acute gastritis. Chronic peritonitis. Intussusception.
182	M.	38	Epileptic dementia...	11½ years...	Chronic pleuritis. Localized cerebral atrophy.
183	M.	23	Terminal dementia...	3 years....	Pulmonary tuberculosis. Chronic pleuritis. Chronic endocarditis. Chronic diffuse nephritis. Tubercular inflammation of mesenteric glands.
184	M.	58	Senile dementia.....	12½ years...	Hemorrhage in right internal capsule. Chronic meningo-encephalitis. Chronic diffuse nephritis.
185	M.	52	Epileptic dementia...	15 years....	Pulmonary thrombosis. Acute gastritis. Acute ileo-colitis. Chronic diffuse nephritis.
186	M.	42	General paralysis.....	2½ years...	Pulmonary tuberculosis. Chronic endarteritis.
187	F.	75	Acute mania.....	1 year ....	Pleurisy with effusion. Lobar pneumonia. Dilatation of the heart. Chronic diffuse nephritis with amyloid degeneration. Fatty degeneration of the liver with passive congestion.
188	M.	45	Epileptic dementia...	4½ years...	Chronic pachymeningitis. Subdural hemorrhage. Pulmonary thrombosis. Hypostatic pneumonia. Chronic diffuse nephritis.
189	M.	35	Terminal dementia..	1 year ....	Acute pyonephrosis. Acute cystitis. Chronic endocarditis.
190	M.	37	General paralysis.....	8 mos ....	External pachymeningitis hemorrhagica. Pulmonary thrombosis. Chronic diffuse nephritis.
191	M.	67	Terminal dementia...	31 years....	Cerebral hemorrhage. Hypostatic pneumonia. Chronic diffuse nephritis. Chronic endocarditis.
192	M.	63	Chronic mania .....	23 years....	Gastric ulcer. Chronic diffuse nephritis.
193	M.	55	Terminal dementia...	12 years....	Fatty infiltration of heart with endocarditis. Fatty degeneration of liver with malignant disease. Chronic diffuse nephritis.
194	F.	57	Terminal dementia...	15 years....	Fatty infiltration of heart. Malignant disease of liver with fatty degeneration. Chronic peritonitis.

Number.	Sex.	Sex.	Mental Disease.	Duration.	Anatomical Diagnosis.
195	M.	25	Terminal dementia...	4 years....	Pulmonary collapse and general anasarca. Chronic diffuse nephritis.
196	M.	55	Terminal dementia...	23 years....	Lobular pneumonia. Double pleuritic effusion. Chronic endocarditis. Chronic hepatitis. Chronic splenitis. Chronic diffuse nephritis.
197	M.	51	Chronic mania.....	28 years....	Chronic pericarditis. Chronic endocarditis. Double pleuritic effusion. Chronic peritonitis. Chronic hepatitis. General anasarca.
198	F.	39	Hypochondria.....	2 years....	Fatty infiltration of heart. Acute gastritis. Chronic diffuse nephritis with acute renal congestion.
199	M.	53	Terminal dementia..	20 years....	Chronic encephalitis. Chronic pleuritis. Pulmonary tuberculosis with consolidation. Pulmonary thrombosis. Acute gastritis. Acute enteritis. Chronic diffuse nephritis.
200	F.	65	Senile dementia.....	1 year ....	Chronic pachymeningitis. Chronic endocarditis. Chronic pleuritis. Chronic endarteritis. Chronic hepatic congestion. Chronic diffuse nephritis.
201	F.	76	Senile dementia .....	17 years....	Intraventricular hemorrhage. Chronic pachymeningitis. Chronic endocarditis. Chronic diffuse nephritis.
202	M.	28	Epileptic dementia.	9 years....	Thrombosis of right lateral sinus. Hypostatic pneumonia. Chronic endocarditis.
203	M.	65	Chronic mania.....	3 years....	Sub-pial hemorrhages. Hemorrhage of the pons varolii. Multiple hemorrhages in the right centrum ovale. Extensive sub-peritoneal hemorrhage bursting into the abdominal cavity. Chronic endarteritis.
204	F.	22	Acute melancholia...	10 weeks...	Compression of the spinal cord. Chronic pleuritis. Chronic endocarditis. Chronic hepatic congestion.

In looking over the preceding table, a very noticeable fact is the great number of cases in which a chronic kidney lesion figured in the anatomical diagnosis. It will be noted that fifteen of the cases showed a chronic kidney lesion out of a total of twenty-four, or 62.2 per cent.,

and of the whole number only six were over sixty years of age and one of these showed no gross lesion. The association of chronic kidney lesion with alcoholism, syphilis and gout has caused me to look up the assigned causes of the insanity in each of the cases that have come to autopsy during the past year, and I find that syphilis has figured in only one case and alcohol in but one, but the former only presented a gross kidney lesion. It would seem, therefore, that we might safely eliminate the question of syphilis and alcoholism as a factor of importance in the production of kidney lesion in our cases.

Kidney disease of a chronic nature, as is well known, is especially frequent after the sixtieth year. Bearing this fact in mind and analyzing the above table according to ages we find that five of the cases were between the ages of twenty and thirty and two of them showed a gross kidney lesion (40 per cent.)

Four were between the ages of thirty and forty, and two showed a gross kidney lesion (50 per cent.)

Two were between the ages of forty and fifty, and one showed gross lesions of the kidneys (50 per cent.)

Seven were between the ages of fifty and sixty, and five of these showed gross kidney lesions (71.4 per cent.)

Of the six above sixty years of age, five showed gross kidney lesions (83.3 per cent.)

A gradually increasing percentage of kidney lesions is apparent with advancing years, but the percentage of kidney lesions between the ages of thirty and forty, I believe is unusually high. If we exclude the six cases above sixty years of age, we have a total of eighteen autopsies and gross kidney lesions presented in ten of the whole number, or 55.5 per cent.

When we come to take into consideration the microscopical appearances we are obliged to add three more to the list of those presenting chronic kidney lesions, for in each of these, as well as in those presenting a gross lesion, there was quite an extensive connective tissue development, together with atrophy of the tubules in considerable portions of the cortex, and atrophy of the glomeruli and thickening of the capsuls.

This gives a total of thirteen presenting chronic kidney lesions in eighteen autopsies in cases under sixty years of age, or 72.2 per cent.; and in the whole number of autopsies we have eighteen out of a total of twenty-four presenting kidney lesions, or 75 per cent.

In the two sexes the percentage of gross lesions is as follows:

Males, total number eighteen, presenting gross lesion, eleven, or 61.1 per cent.

Females, total number six, presenting gross lesion, four, or 66.6 per cent.

When we consider the microscopical lesions the percentage rises in the males to 72.2 per cent., and in the females to 83.3 per cent.

The foregoing facts have constrained me to look up the matter of the frequency of kidney lesions, gross and microscopical, in the autopsies last year, and I find the facts are as follows:

Total number of complete autopsies, forty-four, of this number thirty-one showed gross kidney lesions, or 70 per cent.

By ages the percentages are as follows: Four were between the ages of twenty and thirty, and three showed a gross kidney lesion, or 75 per cent. Four were between the ages of thirty and forty, and two showed a gross kidney lesion, or 50 per cent. Seventeen were between the ages of forty and fifty, and thirteen showed a gross kidney lesion, or 76.4 per cent. Seven were between the ages of fifty and sixty, and three showed a gross kidney lesion, or 42.8 per cent. Twelve were over sixty years of age, and ten of these showed a gross kidney lesion, or 83.3 per cent.

It will be seen by the foregoing that the total percentage for the year 1894 is somewhat in advance of the year just closed, the percentages for the two years being respectively 70 per cent. and 62.2 per cent. If we add to the total number presenting kidney lesion in 1894, two more which showed quite a marked lesion on microscopical examination, we have a total for the year of thirty-three, or 75 per cent.

For the two years, the figures are as follows:

Total number of complete autopsies, 68.

Number showing gross kidney lesions, 46, or 67.6 per cent.

Adding to this number the five others which showed marked microscopical lesions, we have the total percentage raised to 75 per cent.

The following table presents in tabulated form the percentages of gross kidney lesions for the two years by ages:

Age.	Total No.	Showing Gross Kidney Lesion.	Without Gross Kidney Lesion.	Per cent. Showing Gross Kidney Lesion.
20 to 30.....	9	5	4	55.5
30 to 40.....	8	4	4	50.0
40 to 50.....	19	14	5	73.7
50 to 60.....	14	8	6	57.1
60 and over.....	18	15	3	83.3
Total.....	68	46	22	67.6

Comparing these figures with some that have recently been published, I find that our percentage is higher than that quoted by most authors. The highest percentage is quoted by Beadley, who quotes statistics from Colney Hatch, and states that out of 187 post-mortem examinations, 106 cases of chronic renal disease were found, or 70.6 per cent.; but in looking through the record of 2,810 cases he finds only 1,128 cases of chronic renal disease, or 43.21 per cent. Dr. C. H. Bond,† quoting from the Banstead Asylum, finds that in 154 post-mortems there were 74 cases of chronic renal disease, or 48 per cent., and Dr. Hubert C. Bristowe,‡ quoting from the Somerset and Bath Asylum, finds in 532 post-mortems 327 cases of chronic renal disease, or 61.4 per cent.

These figures leave one with the impression that there must be some serious mistake somewhere, for when the figures vary from 43 per cent., a figure lower than the percentage in general hospitals in persons of the same age, to 70 per cent., a figure 22 to 25 per cent. above that of the general hospitals, it would seem that something must certainly be wrong. I am little inclined to regard these figures as really representative of the range of variation in the frequency of gross kidney lesion among the insane; there is, I think, a very large personal equation that must be taken into account to answer for this.

Dr. C. H. Bond, of the Banstead Asylum, who quotes 74 cases of chronic renal disease in 154 autopsies, states that he has included in these cases only such lesions as might have been produced by alcoholism, and his paper deals largely with the subject of alcoholism in its relation to mental disease. No mention is made of the microscopical appearances by any of the observers. Dr. Bond presents a table of some interest, showing the frequency of kidney lesions found in per-

\* British Journal of Mental Science, January, 1895. † British Medical Journal, March 2d, 1895. ‡ British Journal of Mental Science, April and July, 1895.

sons of various ages in 422 autopsies at St. Bartholomew's Hospital, London; out of this number 110 showed gross kidney lesions, or 26.5 per cent. Of course these figures include a great many infants and persons under thirty years of age, in whom kidney disease is comparatively infrequent, and it is, therefore, unfair to compare statistics unless we leave out of account this portion of Dr. Bond's table, as persons under twenty years of age are quite rare in our asylums. This eliminates 228 from the 422 autopsies, and leaves us 194 autopsies, 94 of which presented a gross kidney lesion, or 48.4 per cent.

Leaving out of account those of our own cases under thirty, we have a total of 59 autopsies, in 41 of which the kidneys present a gross lesion, or 69.49 per cent. Leaving the same figures out of account in Dr. Bond's table, the figures are 142 autopsies, in 71 of which a gross kidney lesion was found, or 50 per cent. The following table presents the percentages of gross kidney lesions found in persons over thirty years of age in St. Bartholomew's Hospital, the Banstead Asylum and this institution:

Institution.	Whole Number of Cases.	Percentage Showing Gross Kidney Lesion.
St. Bartholomew's Hospital.....	194	48.4
Banstead Asylum.....	142	50.0
Morris Plains State Hospital.....	59	69.49

Dr. Hubert C. Bristowe has recently called attention to the great frequency of gross kidney lesions in cases of general paralysis, and he arrives at the conclusion that kidney disease is more frequent in general paralysis than in other forms of insanity, the figures being from 68 to 72 per cent. I have gone over the autopsy records for two years past with reference to this point and I find that in the two years I have had but five cases of general paralysis and every one of these presented kidney disease in the form of chronic diffuse nephritis, and not one of the cases was over forty-two years of age. This gives us then a percentage of 100 for chronic kidney lesions in our cases of general paralysis that have come to autopsy. The following table presents some of the facts in regard to this matter:

Autopsy number.	Age.	Sex.	Duration.	Gross Appearance of Kidneys.	Microscopical Appearances.
154	36	F.	3 years.....	{ Capsule non-adherent. Cortex uneven in thickness. Consistence increased. Surface lobulated.	{ Connective tissue is increased. Many of the tubules are atrophied. Capsule of the glomeruli are thickened and tufts atrophied.
157	41	M.	3 years.....	{ Capsule adherent. Surface granular and lobulated. Cortex thin. Substance of increased consistence.	{ Connective tissue is increased. Epithelium is necrotic and detached. Capsules of glomeruli are thickened and the tufts atrophied.
175	42	M.	9 months...	{ Capsule adherent. Cortex thin. Striations fairly well marked. Substance of increased consistence.	{ Connective tissue slightly increased. Epithelium swollen, necrotic and detached. Smaller vessels show end arteries.
186	42	M.	2½ years....	{ Capsule non-adherent. Surface smooth. Cortex slightly thinned. Striations well marked. Substance of increased consistence and congested.	{ Connective tissue increased. Capsules of glomeruli thickened and tufts atrophied.
190	37	M.	8 months....	{ Capsule adherent. Cortex normal in thickness. Striations poorly defined. Substance congested.	{ Connective tissue increased. Some tubules show casts. Capsules of glomeruli are thickened and tufts atrophied. Vessels are engorged.

While we cannot consistently draw any inference from five autopsies, still the fact is of some significance, for the lesion occurred in every one of the cases and was of the same nature in all. The nature of the lesion is of more significance than the mere fact of its occurrence, for, as Bristowe has pointed out, the changes in the arterial coats of the kidneys in chronic diffuse nephritis are quite similar to those occurring in the cerebral vessels in general paralysis. The association of general paralysis with kidney disease is of considerable significance when we consider the possible cause of general paralysis, for it points again to the toxic origin of that disease. The fact that the toxic substances, in order to reach the brain cell, must needs pass through and, in fact, be secreted by the cells of the smaller vessels, would account in great measure, it seems to me, for the proliferation of nuclei in the perivascular lymph spaces that occurs with such regularity in general

paralysis. It is quite probable that the irritation caused by the toxic substances is sufficient to cause cellular proliferation. The kidney lesion is probably a secondary condition following long continued stimulation of the arterioles by the toxic substances and their consequent contraction with elevation of arterial tension. That kidney disease should follow is only a natural inference.

THOMAS P. PROUT, M.D.,  
Resident Pathologist.

BY-LAWS, FORMS, ETC.

It is quite probable that the infection caused by the virus is sufficient to cause cellular degeneration. The kidney which is probably a secondary condition following any condition of the circulation by the toxic substances and their concentration with elevation of arterial tension. The kidney disease should follow in only a natural order.

Case No.	Age	Sex	Diagnosis	Course
100	45	M	General paresis of the insane	Progressive course, death in 18 months.
101	50	M	General paresis of the insane	Progressive course, death in 18 months.
102	40	M	General paresis of the insane	Progressive course, death in 18 months.
103	55	M	General paresis of the insane	Progressive course, death in 18 months.
104	60	M	General paresis of the insane	Progressive course, death in 18 months.

While we cannot completely draw any inference from these statistics, still the fact is of some significance, for the lesions occurred in every one of the cases and was of the same nature in all. The nature of the lesions is of some significance, also, in that the most part of the cases, as in the following table, are of the chronic type, and the changes in the arterial walls of the kidneys in these cases are quite similar to those occurring in the arterial vessels in general paresis. The association of general paresis with kidney disease is of considerable significance when we consider the possible cause of general paresis, for it points again to the toxic origin of that disease. The fact that the toxic substances, in order to reach the brain cell, must work pass through and, in fact, be absorbed by the cells of the smaller vessels, would account in great measure, it seems to me, for the proliferation of nuclei in the perivascular lymph spaces that occurs with such regularity in general



EXTRACTS FROM THE BY-LAWS

ADMISSION OF PATIENTS

ORDER OF 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

BY-LAWS, FORMS, ETC.

2. The patient must be free from venereal or any contagious or infectious disease.

3. Each male patient shall be provided with at least (1) shirt, a new and substantial coat, vest and pair of trousers, of strong woven cloth, two pairs of socks, a black cap, a good hat or cap, and a pair of new shoes or shoes, together with a comfortable suitable garment.

REGULATIONS FOR VISITORS

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

NEW JERSEY STATE HOSPITAL

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.

#### TERMS OF ADMISSION.

7. The price of board, including washing and attendance, for all who are supported at public charge, is three dollars (\$3) per week. For private patients, or those supported by themselves or friends, the price varies from five dollars (\$5) upward, according to the trouble and expense incurred, and according to their ability to pay. Higher prices are paid by a special agreement with the Warden for extra attention and accommodations. Payments required to be made quarterly, in advance, from date of admission.

#### BOND, ETC.

8. 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.

## 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 support .....under 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 that .....is 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.

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.....18...

\* FORM OF CERTIFICATE OF INSANITY BY A PHYSICIAN.

I.....physician, of the township of.....in the county of.....do 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. 18...

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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