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ANNUAL REPORT

ON THE



LUNATIC ASYLUMS

IN THE

MADRAS PRESIDENCY

FOR THE YEAR

1894.

50

MADRAS:

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OFFICE OF SURGEON-GENERAL
WITH THE GOVERNMENT OF MADRAS,
MADRAS, 9th April 1895.

No. 358-A.

From

SURGEON-MAJOR-GENERAL C. SIBTHORPE, F.R.C.P.I.,
Surgeon-General with the Government of Madras,
Madras,

To

THE HON'BLE THE CHIEF SECRETARY TO GOVERNMENT,
JUDICIAL DEPARTMENT.

Sir,

I HAVE the honour to submit to the Right Honourable the Governor in Council the annual report for 1894 on the Lunatic Asylums in the Presidency. In December last I issued orders to the three Superintendents to submit their administration reports in the same form under the following heads which include all questions of administration concerning the asylums.

2. ACCOMMODATION.—There was no over-crowding in any of the asylums throughout the year. In Vizagapatam and Calicut there was accommodation for 68 and 135 inmates against 53 and 105 which were the highest numbers in the asylums on any one day. The accommodation in the Madras Asylum was ample according to the requirements of G.O., No. 1920, dated 23rd July 1885 except in the criminal enclosure on which a separate representation is now under the consideration of Government.

3. BUILDINGS.—(a) Repairs executed.—No repairs were carried out in Vizagapatam. The usual minor repairs were made whenever necessary in Calicut. In Madras, the isolation block for natives in the female enclosure was rebuilt for the greater part in consequence of the sinking of the foundations of the forepart of the building; an additional iron door and ceilings to four of the superior cottages were put up; no general repairs were executed during the year. It is most desirable that such annual repairs should be carried out systematically and I have directed the Superintendents to submit the necessary requisitions on the 1st of April each year.

(b) State of repair.—In Vizagapatam the kitchen and the female cells require repair and the roofs of some of the cottages should be retiled; white-washing and bluewashing are required throughout the asylum. In Calicut the main buildings are in a fair state of repair; the present office building was condemned as unsafe, and Government has sanctioned the construction of a new building, but the work has not been commenced from want of funds; I have represented this to the Superintending Engineer with the view of having the work completed before the commencement of the next monsoon. In the Madras Asylum, the estimates for repairs have already been passed by me and the repairs are being carried out.

(c) New constructions.—In Vizagapatam the office building was rebuilt and the road running through the asylum was reinstalled and gravelled by the inmates. In Calicut a weaving shed was constructed during the year at a cost of Rs. 2,133-15-5 and the work of grating the walls was commenced after much delay.

In the Madras Asylum the lines for native attendants consisting of 75 huts and 2 latrines, the store sheds for grain and fuel, an iron portico to the Superintendent's house and a water-lift were completed and the work of putting up an iron gate for the asylum main entrance was commenced and has since been completed.

செப்பனுவதற்காக எடுத்த
கொள்வப்படி
மாதம் வருடம்
செப்பனுவ முடித்த
மாதம் வருடம்
ஆராய்ச்சி உதவியாளர்
கையொப்பம்

4. SANITATION—(a) *Conservancy*.—The dry-earth system was carried out in the Vizagapatam Asylum. Both the dry-earth system and flushing were used in Calicut according to requirements; all the latrines in the Calicut Asylum require their flooring raised and asphalted, and for each latrine a pukka shed for storing dry earth is desirable; I have directed the Superintendent to submit the necessary requisitions. The plan and estimate submitted for a much needed separate latrine for the hospital were returned for modification and are still under preparation by the Public Works Department. As regards the conservancy of the Madras Asylum, the Superintendent remarks:—"I consider this very inadequate and a serious defect in our asylum administration. The reduction of our fixed strength of toties to patients from 1 to 16 to 1 to 20 is dangerous, as it leaves us undermanned in this most important detail, and renders an efficient degree of cleanliness only attainable with great difficulty. There is no inducement to our toties to remain with us as their wages are not higher than elsewhere, and the work certainly not lighter. Lines for them have been recommended but if they are built I believe it will only partially remove our difficulties from sudden absences and their general irregularities." This subject is now under the consideration of Government.

(b) *General hygiene of the insane*.—All necessary precautions were taken to ensure good general hygienic conditions, but in the Madras Asylum many insanes are reported to have been admitted in bad health, and the Superintendent points out that the great feature of insanes is their extreme delicacy and susceptibility to slight ailments which, from their peculiar mental state, are difficult to recognize at the beginning. In this, they resemble infants rather than adults. The health inspection of them in sections is conducted weekly and cases found in a weakly state receive special attention as to medicine and diet.

(c) *Drainage*.—The Vizagapatam Asylum being on high sloping ground, the surface drainage is good. In Calicut V-shaped masonry drains run all round the main buildings except the sheds for 'refractory' insanes and the hospital; the Superintendent suggests with a view to further sanitary improvement to have drains for these buildings also; I have directed him to submit a requisition to have this done. The drainage of the Madras Asylum is very imperfect; the Government ordered the Consulting Architect, the Sanitary Commissioner, and the Superintendent of the Asylum (G.O., No. 454, dated 22nd February 1894) to form themselves into a Committee and to report on what improvements could be made in the drainage of the asylum. Their final recommendations were sent to Government by the Sanitary Commissioner at the end of 1894 and embraced a complete system of drainage and disposal of liquid sewage; these proposals have been returned to the Committee for a further report which has not yet been received.

(d) *Water-supply*.—The water-supply in the Calicut Asylum was, as usual, insufficient for all purposes owing to three of the six wells not having been used on account of the dangerous state of their platforms. Water had to be obtained from a tank adjacent to the asylum for bathing, washing and gardening purposes.

In Vizagapatam water is obtained from a well, 68 feet deep, within the asylum garden; it is sufficient for all purposes and of good quality and is used without being filtered.

In the Madras Asylum the water-supply is ample. It is laid on in pipes from the Red Hills from which it is received unfiltered; chatty filters were in use but were found impracticable owing to the peculiar character of the patients and they were therefore abandoned. The Superintendent states that "seeing that filtration of the water is necessary, and that to do it by half measures is inadequate, remembering also that the experience of the patients' characteristics shows that they cannot be in the least trusted not to drink the most unwholesome water surreptitiously at a moment's notice if it can be got at anywhere," he recommends some plan that will insure that all the water drunk in the asylum shall have come through a filter previous to its exit from the tap. This question is intimately connected with the question of the filtration of the 'Red Hills' water for the general population of Madras and has been considered by Government. I do not believe there is any special necessity for filtering the water for the asylum inmates that does not affect the population generally. Well water is raised in the criminal enclosure and in the asylum grounds for gardening purposes—not for

drinking—though it may be drunk surreptitiously by insanes and they have been occasionally found doing so.

(e) *Food and weighments*.—The diet scale sanctioned in G.O., No. 1292, dated 26th June 1893 was in use in all the asylums. In Vizagapatam cumbu was the grain in use being the cheapest; some of the patients who have been for years accustomed to rice refused the cumbu. The Superintendent reports "that since the substitution of gingelly oil for ghee from the 1st October (G.O., No. 1963, dated 15th August 1894), there has been a falling off in the weights of the males but it has not been decided whether it is in consequence of that fact. From the same date, a new supply of cumbu has been in use which appears to be perfectly good but is said to be very old and innutritious. Though there has been this loss of weight amongst the men, their health is satisfactory, and they are all in regular work." A careful watch is kept over them and he is now giving cholam for the evening meal instead of two meals of cumbu. The fortnightly weighment statements submitted to me are now satisfactory. All vegetables were grown in the asylum. Fresh fish was occasionally substituted for mutton. All grains and other articles were, as far as possible, purchased in bulk and no contracts were made. In Calicut rice was substituted for the dry grains and extras were given to the sick and to those losing weight. Out of the total number 124, 73 gained and 47 lost weight, 4 remaining stationary. In the Madras Asylum the Superintendent reports that the food was sufficient and varied; the ordinary diet for natives consisting of raggi mainly, but cholam was used for the first half of the year. He considers that raggi is not a suitable grain for the general use of insane patients who often are out of health on admission, fanciful in appetite and weak in digestion and are often unable to express their feelings as to their food except by refusing it. They appear commonly to dislike raggi, refusing to eat it and in some instances passing it undigested with diarrhoea. This, I considered, was probably due to bad cooking and specially called his attention to the subject. The Superintendent also thinks that it should only be given in case of good health and that it would be safer to place patients on rice on admission to the asylum, reversing the general rule of placing them on rice after trying them on raggi.

Regarding this grain diet scale sanctioned in G.O., No. 1292, Judicial, dated 26th June 1893, orders were issued in June last to adhere to it except in the case of those actually on the sick list and that copies of the diet scales should be hung up in the wards and kitchen and of the sick dietary in the hospital; also that all medical subordinates should make themselves acquainted with all the diet scales for lunatics and with the ingredients of each diet. Fortnightly weighments of all insanes not in hospitals were ordered and a quarterly comparative statement of the results was to be submitted to me. This was continued until the receipt of G.O., No. 2472, Judicial, dated the 11th October 1894 when orders were issued to submit monthly copies of the abstracts of fortnightly weighments and general rules regarding weighment similar to those in force in the jails were issued with the view of bringing specially before the medical officer any insane who was losing weight. From both Vizagapatam and Calicut the reports have been satisfactory but in Madras there has been a great deal of difficulty and the experiment ended by a large number of the patients losing weight. It was impossible to say how much of this was due to their dislike of and distaste for raggi, how much due to indifferent cleaning and cooking of the same, and how much to an indifferent selection of the grain used. The Superintendent considered a good deal of diarrhoea during the epidemic of cholera in December 1894 and January 1895 was due to undigested raggi and he was permitted by me to place for the time being all the insanes on rice. The former Acting Superintendent Surgeon-Major Evans had proposed the use of raggi in June 1894 for all those who were fit for it and I sanctioned its use instead of cholam on condition that it should be cautiously introduced and its effects carefully watched. From the date of its introduction about July 1894 up to the end of December 1894 no report was received regarding any injurious effect on those partaking of it though the special weighment returns of this class were unsatisfactory.

(f) *Clothing*.—The Superintendent of the Vizagapatam Asylum suggests that langoties ought to be provided for the males for use during the day so that

their other clothes may be kept dry for the night. I do not consider this necessary; if any of the patients' clothes are wet before they are turned in at night they should be replaced by dry ones. In Calicut those who were weakly were provided with curable jackets during the monsoon. In the Madras Asylum, the clothing is usually sufficient—being of cotton—with woollen cumblies for nights. Considering the delicacy of insane patients the Superintendent thinks it would be well to give them a flannel waist-coat or jersey for night and early morning use from a fixed date, say October 15th to January 31st, as it would prevent many coming to hospital with bronchitis, pneumonia and diarrhoea during the wet and cold months. Such an issue to the patients requiring it I consider would be very advisable in the three asylums and I have directed him to make a separate representation on the subject.

(g) *Industries and employments.*—In Vizagapatam the employments have been gardening, farming, cloth and tape weaving, cleaning and pounding grain, breaking stones for the asylum road and for the foundation of the office building; 80.45 per cent. of the patients were employed throughout the year; the hours were from 7 to 10 A.M. and from 2 to 5 P.M. A large portion of the patients in Calicut was employed in manufactures, in road-making, cleaning the asylum compound, drawing and carrying water, picking up leaves, &c., the latter work being done by the weakly patients; a few assisted in cooking; the females were employed in threshing, twisting coir, spinning thread and pounding rice, &c.; a certain number of males and females did tailoring work. The chief industries in the Madras Asylum have been weaving of cloths and cumblies, growing of vegetables for asylum use, straw hat-making and mat-plaiting to a limited extent. Oakum picking was introduced for the first time during the year and has given large employment to many; it appears suitable and has proved remunerative. A large number have been employed in the pounding and cleaning of grain, lamp-cleaning, sweeping, lighting, garden work and some as orderlies.

(h) *Amusements.*—No funds are available for amusements in the asylum at Vizagapatam; the usual Christmas treat was given by the Superintendent. Some native gentlemen officials and others, who have visited the asylum, have at times sent presents of sweetmeats and fruits for the inmates. Some vernacular books were provided for those who can read. In Calicut treats were given on Hindu festival days and for Christians on Christmas day which were highly appreciated by them. All insanes are allowed to amuse themselves from 10 to 2 daily as well as they can and are provided with a country drum and sticks for the game called 'Kolatum.' In Madras periodical monthly treats were given; the Superintendent proposes that there should be more intercourse with the world outside for many patients who would of course have to be selected; this he considers could be done by driving more of them to the beach and by allowing them to mix with or at least see the more cheerful side of life outside the asylum.

I concur to a large extent in these opinions; it is in the power of each Superintendent to carry out such means of treatment as he considers desirable and, if necessary, to propose in the budget each year any expenditure that may be absolutely necessary.

(i) *Recommendations made and their results.*—For the asylum at Calicut, recommendations are reported to have been made regarding the iron gratings over the wells; for the extension of the drainage system to the hospital and refractory sheds and for the raising of the latrine floors; the well work is in progress; the plans and estimates for the others are reported to be under preparation by the Public Works Department. As regards the Madras Asylum all its requirements are now under report in accordance with G.O., No. 3212, Judicial, dated 28th December 1894.

5. *ASYLUM POPULATION*—(a) *Remaining.*—Five hundred and eighty-four insanes remained under treatment on the 1st January 1894.

(b) *Admissions and re-admissions.*—There were 216 admissions and 6 re-admissions, making a total during the year of 222.

(c) *Discharges of all kinds.*—The discharges of all kinds during the year numbered 119.

(d) *Escapes.*—In the Vizagapatam Asylum a male insane succeeded in eluding his attendant when his cottage was opened but was brought back by the police after three days from a village a few miles distant. Three persons attempted to escape from the Madras Asylum but were shortly returned.

(e) *Religions, races and castes.*—

Asylum.	Remained on 1st January 1894.				Admitted during 1894.			
	Hindus.	Muham- madans.	Christians.	Other castes.	Hindus.	Muham- madans.	Christians.	Other castes.
Vizagapatam ...	27	3	3	3	9	2	1	...
Calicut ...	47	36	13	...	20	20	3	...
Madras ...	251	56	93	53	89	26	37	14
Total ...	335	79	114	66	118	48	41	15

(f) *Sexes.*—Of the 584 insanes who remained on 1st January 1894, 442 were males and 142 females. During the year 222 were admitted—180 males and 42 females.

(g) *Occupation.*—These are fully detailed in statement IV, the headings in which have this year been revised in accordance with the classification in the Census Report of 1891. The previous occupation of all the insanes admitted during the year was ascertained with the exception of one man in the Calicut Asylum. The largest number of admissions (41) was from the 'carrier' cooly class, and the next in the order of frequency was from 'cultivators,' 27.

(h) *Ages.*—These are dealt with in statement V as usual. The largest number of admissions was between the ages 20 to 40.

(i) *Types of insanity.*—These are dealt with in statement VI. The largest number of cases treated was for mania 549, of whom 53 recovered. The next largest number under treatment was from melancholia 81, of whom 7 recovered. There were 69 cases of dementia treated without any recoveries as might be expected.

(j) *Causes of insanity.*—These are dealt with in statement VII. The principal 'physical' causes are returned as from ganja-smoking 77 cases, hereditary taint 40 cases, under privation and starvation 55 cases, only 1 case is returned as due to opium-smoking; 6 cases to opium-eating, all old cases; 5 cases to the use of bhang, 12 to spirit-drinking and 5 for all other intoxicants. The principal 'moral' causes are returned as 'religion' 27, grief 25 and family quarrels 23.

6. *CRIMINAL POPULATION AND THEIR SUB-DIVISIONS.*—There were no criminal insanes during the year at Calicut. Since August 1892 all criminal insanes from Vizagapatam have been sent to Madras, so that the admission of one so-called criminal into the Vizagapatam Asylum requires explanation. The Superintendent reports "that this man was originally received into the asylum as a civil insane and after six months was discharged recovered. Within a month of his release he was brought back to the asylum as a criminal it having transpired that he had set fire to a hut while insane, and that he ought, in the first instance, to have been admitted as a criminal. As the man was perfectly sane, there was nothing to be gained by sending him all the way to Madras. His removal there would only have acted injuriously. He was not treated as a lunatic but as an assistant to the attendants. The Government has sanctioned his release on security to be given by his relatives."

In the Madras Asylum, the year opened with a population of 150 criminal insanes of both sexes; there were 43 admissions, 20 discharges, and 14 deaths, leaving 159 criminal insanes on 31st December 1894. Of the admissions, 11 were tried and acquitted on grounds of insanity, 23 were insanes on admission and found incapable of making a defence, and 9 had become insane during imprisonment.

7. *HOSPITAL ACCOMMODATION.*—In Vizagapatam there is hospital accommodation for 12 males. There being no hospital accommodation for females, the old

criminal cottage is used for the purpose when required. Similarly in Calicut there is no separate hospital accommodation for females and they are located and treated in one of the cells in the female enclosure which accommodates 8; there is hospital accommodation for 15 males.

In the Madras Asylum there is no real hospital accommodation for males specially adapted for the proper treatment of the sick. In the old criminal enclosure there are two ordinary barrack blocks and eight single cells capable of holding a total of 32 patients. The two single blocks at present accommodate 12 sick each, with a superficial area of only 60 square feet per patient, which the Superintendent considers too low for the sick. He says "considering the number of insane patients who require treatment for mental and physical ailments in hospital, the accommodation is utterly inadequate for men. The hospital blocks themselves are but ill-adapted for their purpose being without separate accommodation for isolating superior patients or others requiring individually special treatment; there are no baths, no hot water laid on or means of obtaining it except by boiling it in a pot at the enclosure in the open, no ward at all for Europeans, and the whole arrangements are a make-shift." The accommodation for females has been increased during the year by the inclusion of the old male hospital which now affords space for 14 in-patients, where formerly it was for five. The space has been sufficient up to the present time, but the arrangements are faulty as on the male side. Proposals are under consideration for the accommodation of 80 males and 20 females. Two separate isolation blocks of three single rooms each are used for contagious diseases among the males, and two isolation blocks of three rooms each for the females. Although these blocks were built evidently with an eye to the security of the lunatic patients the accommodation does not appear to be suitable for an epidemic.

8. SICKNESS AND ITS CAUSES.—*Vizagapatam Asylum*.—The total treated was 85 against 91 in the previous year; the average daily sick was 7.82 against 6.69. The general health of the insanes has been good but one case of chronic pneumonic phthisis and one of epilepsy, which were under treatment throughout the year, have raised the daily average. Of the total treated (85), 78 were discharged cured, 1 relieved, 2 died and 9 remained at the end of the year.

The chief causes of admission were fevers 22, bowel-complaints 21, respiratory and circulatory affections 10, nervous affections 5 and local injuries 7.

There were in all 25 admissions for 'symptoms,' namely, constipation, diarrhoea, dyspepsia, debility and anaemia. The Superintendent notes that "difficult as it frequently is when dealing with sane persons to ascertain the probable cause of such symptoms, this difficulty is necessarily increased in an asylum."

Calicut Asylum.—The general health of the insanes was, on the whole, good during the year except during the monsoon. One hundred and twenty insanes were treated in hospital, with an average daily sick of 15.07 against 87 in 1893 with an average daily of 8.10. The increase is due to the weakly condition of many of the insanes on admission and to the prompt removal of the sick to the hospital for better care and treatment in the earlier stages of disease.

Madras Asylum.—In accordance with G.O., No. 1320, Judicial, dated 4th July 1891, all members of the weakly gangs appear in the hospital returns as in the other asylums. There have been nearly double the number of admissions into hospital in 1894 as compared with the previous year, viz., 1,042 as against 539. The diseases which yielded the largest number of admissions are in order of frequency as follows:—

Itch 114, surfeit 110, anaemia 72, constipation 65, catarrhal inflammation of intestines 62, dysentery 60, ulcer 40, worms 35, simple continued fever 29, and inflammation of external ear 17.

The Superintendent states that "the sum total of four of the principal diseases, viz., 297 from surfeit, constipation, catarrhal inflammation of the intestines and dysentery, adds force to his opinion that the food of the asylum is at all times one of his greatest difficulties when conjoined with feeble health of many of the patients and that a diet such as raggi is with such patients to be looked on with suspicion. This opinion he says is further strengthened by the observation that

the next largest entries are under anaemia and ulcer, conditions which indicate when in large numbers, a general feebleness of health complicating the above conditions and liberal treatment in the direction of food, stimulants and tonic treatment generally. Insane patients are delicate feeders, their mental state makes them exceedingly capricious, and if capricious, it is waste of time to attempt to reason with insanes. They should either be given food which they like or they must be kept on a fixed diet, but in the latter case we must be prepared to constantly see them fed with great difficulty and slipping little by little into an anæmic state, losing weight and at last when deteriorated in health to put them on a diet, it would have been better to have kept them on always." "Criminal insanes have often come in from jails where they have been for some time fed on raggi under observation; it is the fresh admissions whose mental state it is difficult to gauge further than that they suffer from a certain type of mental disease, but as to how far their bodily health is affected by their mind, and has been so, it is impossible to say without observation for some time. These especially are the people to put on rice diet, not on raggi though it may not at first appear to affect them."

I have informed the Superintendent that such insanes as were accustomed to the use of raggi or cholam should be put on them on admission, that rice might be given to such patients as require it in the opinion of the Superintendent and that to put all on a rice diet would be a useless waste of public money. The standing orders regarding asylums very properly leave the dieting of the patients in the hands of the medical officer and give him ample power. If he acts on them thoroughly and at the same time carries out the orders regarding the inspection of all insanes who have lost weight after each fortnightly weighment, there ought to be no fear of any patient suffering from underfeeding.

9. MORTALITY AND ITS CAUSES.—Since August 1894 special casualty reports regarding all deaths in the asylums have been submitted to me so that I have full details of the causes of the death in each case.

There were two deaths in the asylum at Vizagapatam both of which were unavoidable, one was from cerebral abscess following long-standing disease of internal ear and the other from chronic pneumonic phthisis of eighteen months' duration following influenza.

In the Calicut Asylum, there were 6 deaths (all males), as against 15 in the previous year. The causes of death were ulceration of bowels 1, chronic pneumonic phthisis 1, old age 1, softening of the brain 1, tubercle of lungs 1 and cirrhosis of the liver 1.

In the Madras Asylum the mortality was 56 against 50 in 1893. These 56 deaths include one of suicide and eight deaths from cholera which occurred during the last few days of the year 1894. Excluding these deaths from cholera, the percentage of deaths to average strength is 9.91. The diseases which caused the deaths were debility and anaemia 12, catarrhal inflammation of intestines 3, dysentery 8, lung diseases 5, secondary syphilis 2, mania 2, and idiopathic anaemia 1, tetanus (idiopathic) 1, hæmorrhage 1, thrombosis 1, malarial fever 1, tubercle of lung 1, old age 1, diarrhoea 1, epilepsy 1.

A criminal insane committed suicide on the 30th December 1894 by hanging in his cell. The fact was brought before Government in the official visitors' report for January 1895. A magisterial inquiry was held and the Presidency Magistrate opined that the body and clothes of the deceased were not properly searched on the night in question. It is very probable, as was suggested by the Asylum Superintendent, that the deceased had secreted the rope somewhere and did not have it about his person or clothing, as the European attendant who searched him stated at the time. The man was last seen alive at 1-45 A.M. by the patrol attendant and found dead by another between 2 and 2-30 A.M.

After a careful enquiry, I formed the opinion that none of the attendants could be held responsible for the accident and directed that steps should be taken to inform all the attendants of the facts of the case in order that even greater vigilance in examining such insanes and their cells before they were locked up for night, should be carried out in future.

10. EPIDEMICS, CAUSES, AND HOW THEY WERE DEALT WITH.—There was no outbreak of epidemic disease during the year either at Vizagapatam or at Calicut.

In the Madras Asylum there was none until the very end of the year, when cholera appeared.

As the epidemic was a very serious one I attach (appendix I) the report of the Superintendent with my remarks. It will be noted that the epidemic continued beyond the 1st January 1895 but I consider it is desirable to deal with it in this report as it commenced in 1894.

11. INJURIES RECEIVED IN THE ASYLUMS.—In the Vizagapatam Asylum there were seven admissions for local injuries, one male and three females, one female being admitted four times for self-inflicted injuries; none of these cases were severe and all of them were unavoidable; only one was due to an assault by another inmate and none to attendants.

In the Calicut Asylum three cases were admitted into hospital, one for wound of scalp, the result of an assault by another insane. The remaining two were due to accidents, one a contusion of the upper extremity and the other a wound of the lower extremity.

In the Madras Asylum—(1) On August 19th 'Nabi Sahib' received a slight incised wound from a blow inflicted suddenly by patient 'Madura Cooper.'

(2) Ayah 'Allamalo second' was bitten in the hand by patient Atchammah.

(3) Patient 'Bukatiamah' was injured in the hand slightly by another patient in pounding rice. This was thought to have been probably accidental.

(4) A patient 'Miss Schmidt' tried to strangle herself on August 27th by means of a piece of clothing which she adjusted round her neck and twisted round the bar of her door, no serious harm was done.

(5) A patient in the criminal enclosure 'Ganga Nagappah' committed suicide by strangling himself with a rope made out of the cotton cloth made in the weaving room. His case is noted under 'Mortality.'

12. HOSPITAL DIETS AND EXTRAS.—In the Vizagapatam Asylum the hospital diets laid down in the Jail Code were in use; there were in all 350 hospital diets which cost Rs. 50-9-11; the cost of extras was only Rs. 2-13-2.

In the Calicut Asylum no prescribed hospital diet was in use during the year, special diets were given to suit the nature of the ailments and the condition of the patients, the average daily sick being 5-25. Those who were continually losing weight but had no appreciable disease were given extras with their ordinary diet. The cost of the sick diets and extras amounted to Rs. 825-15-6.

In the Madras Asylum the diets were on a local hospital scale in customary use at the asylum. The Superintendent remarks that the adoption of the Presidency State Hospital scale of diets sanctioned by Government in G.O., No. 2472, dated 11th October 1894, will doubtless prove beneficial, allowing greater range, but will be more expensive. I am, however, doubtful whether it will be more expensive, as it is the same scale as adopted in other Government hospitals and has been found to work well in them; and I am quite certain that the larger discretion given to the Medical officers by these rules will conduce to the better treatment of the patients in hospital and their more speedy recovery. These rules will certainly give the Surgeon-General more opportunity of intelligently checking the expenditure on hospital diets in comparison with the expenditure on patients treated in other Government hospitals. The Superintendent reports that "the expenditure on extras for the sick has been high but this is considered quite necessary in view of the bad state of health which many of the insanes are in, on admission, and the anemic state of those who form a large group of the patients often or nearly always included in those who are admitted nominally for dysentery, or other ailments, that is they suffer from both conditions combined." For these people, milk, broth, arrack and other extras are necessary, and many of these will not eat the present 'full' and 'half' diets during convalescence. Their food is

given in the fluid form to a great extent, and it has this further advantage that it does not encourage petty theft on the part of an attendant who can more easily secrete a piece of bread or other solid food than fluid food, when lying by a patient's side who is unable to eat it." One of the greatest advantages of the new rules is that it gives the Medical officer the power of dieting a patient on 'extras' alone so that there need not be any waste as would be the case when the diet is restricted to the old rigid scales.

13. NURSING OF THE SICK.—There are no sick nurses in any of the asylums and the sick are nursed by the attendants under the close supervision of the Medical subordinates. These attendants not being trained as hospital servants are not at all fitted for this duty. In the Calicut Asylum great difficulty was felt in carrying out the instructions of the Medical officer as there was no separate establishment for the hospital; since my inspection in August last, an attendant has been detailed exclusively for hospital work. I have submitted certain proposals to Government regarding the improvement of the nursing in the hospital of the Madras Lunatic Asylum. I am the more convinced of the necessity of this after a study of the different casualty reports received from this asylum as they clearly show the great advantage it would be to the patients to have skilled nurses looking after them during their illness.

14. ESTABLISHMENT—(a) General.—Owing to increase in the daily average strength of the Vizagapatam Asylum one temporary male day attendant was made permanent and one temporary male day attendant was taken on during the year. In the asylum at Calicut one first-class attendant was detailed for hospital duty. The Superintendent of the Asylum remarks that the clerk and steward, the store-keeper and the head-keeper performed their duties to his 'satisfaction' and that the male and female keepers, &c., 'have, on the whole, done their work well.'

In the Madras Asylum, the Superintendents in charge were Surgeon-Major Thornhill, from 1st to 24th January 1894; Surgeon-Major J. W. Evans, from 24th January to 16th November 1894; and Surgeon-Major D. Elcum from November 17th to the end of the year. Surgeon-Major Evans has spoken well of all the establishment, with the exception of the steward whose faults he sums up under 'passive resistance;' but Surgeon-Major Elcum does not concur in this opinion and says that as at present constituted the Steward's department is insufficiently provided and a second assistant steward and a linen clerk are necessary to carry out the work of this department efficiently. I was so convinced of this after a long and troublesome investigation I carried out in October last regarding the charges made by Surgeon-Major Evans against the steward that I submitted certain proposals to Government in my T. 4 of 29th November with the view of giving the steward more assistance; until this assistance is available, I do not consider it is possible to expect the duties of the steward to be carried out efficiently.

Both the matron and the assistant matron are well spoken of, for the efficient performance of their duties, by Surgeons-Major Evans and Elcum. Surgeon-Major Elcum concurs with Surgeon-Major Evans in his opinion that the European attendants have done their work satisfactorily being now more careful in supervision of the patients' clothing and asylum property. The Superintendent states that the establishment of the hospital should be separate from that of the general asylum and should consist of trained men, better paid, for the duties of attendants on the sick. This will be done if my suggestions regarding nursing are sanctioned.

A highly-trained and properly-paid European or Eurasian appears necessary to relieve the Superintendent of the details of administration of the asylum. Such an appointment was sanctioned for the General Hospital in the year 1874 and the Head Steward there, who is now a European, has been the greatest assistance to the Senior Medical officer. I have not made any proposition regarding such an appointment on account of the financial difficulties of Government, but I am fully convinced that if the Superintendent and his Assistant were relieved of a great deal of the detail of administrative work they would both be able to devote more of their professional knowledge to the actual treatment of the insanes; it must be remembered that the whole asylum is but an hospital for mental diseases many of which are curable under efficient medical care and attention.

One male and one female scavenger were sanctioned for the 75 native attendants' huts (G.O., No. 320, Financial, dated 29th March 1894).

(b) *Hospital*.—The Superintendent of the Asylum at Calicut says of First-class Hospital Assistant D. Rajanthram that he is a steady, reliable and intelligent man and performs his duties excellently well.

The Superintendent of the Madras Asylum has a high opinion of the professional knowledge of Mr. Cooper, the Junior Apothecary, who has performed his duties with zeal and ability; he remarks that Civil Apothecary Venkatsawmy has done his duty satisfactorily.

As regards both the Hospital Assistants in Vizagapatam and Calicut who really superintend the whole of the manufactures and look after the sick in the hospitals and the general hygiene and discipline of the inmates, I recommended to Government that they should be granted a special allowance in October last. Government was unwilling to sanction the grant of the proposed personal allowances to Hospital Assistants employed at Lunatic Asylums and saw no reason to reconsider G.O., dated 17th January 1891, No. 101, Judicial, *vide* G.O., Judicial, No. 2319, dated 22nd November 1894.

15. *GENERAL ADMINISTRATION INCLUDING NOTES ON VISITORS' REPORTS*.—At the Vizagapatam Asylum during the year the official visitors paid twelve visits. The Deputy Sanitary Commissioner and the Inspector-General of Prisons each made an inspection and their remarks were favourable.

The Inspector-General of Prisons remarked that "the administration continues to be excellent and to produce most favourable results. The state of the garden is flourishing and the amount of work which is done with so small a population is remarkable."

His Excellency the Governor visited the asylum on the morning of Sunday the 29th October 1894 and expressed satisfaction.

As regards the Calicut Asylum the Superintendent was away in camp from 2nd February to 28th March, from 2nd April to 30th April, from 22nd May to 29th May, from 19th September to 1st October and from 2nd November to 18th December 1894.

The Assistant Surgeon was in charge of the asylum during his absence.

The official visitors visited the asylum ten times during the year. It was also inspected by myself and the Inspector-General of Prisons. Attention was called to the covers of the wells and the necessity of the iron gratings being supplied, which were sanctioned in G.O., Judicial, No. 2369 of 15th November 1893, as an urgent matter; these gratings were being completed in December 1894.

Madras Asylum.—The Inspector-General of Prisons on 7th March 1894 recommended the system of fortnightly weighments and that moulds should be employed for measuring the raggi. Both these suggestions have since been carried out under orders departmentally issued.

I made the following remarks when I visited the asylum on the 25th May 1894:—

- that the hospital sorely required specially trained attendants, particularly for night duty;
- that day sheds were required: these were sanctioned in G.O., No. 1501, dated 14th June 1894, but funds have not yet been allotted;
- that the Asylum Code should be corrected up to date;
- that all the subordinates in the asylum should be acquainted with the rules concerning them.

The revision of this code is being carried out under G.O., No. 1505, Judicial, dated 20th June 1894 and I hope that after its issue, it will be possible, in future, to see that all officials connected with these asylums are conversant with all the orders concerning them and that they carry them out.

16. *FINANCE*.—The total receipts during the year amounted to Rs. 1,22,458-3-7 against Rs. 1,44,909-12-0 and were from the following sources:—

Particulars.	1893.			1894.		
	Rs.	A.	P.	Rs.	A.	P.
From treasury	97,094	15	8	92,315	7	3
From paying patients	7,387	1	2	8,711	9	11
From manufacturing departments	7,892	0	8	5,855	10	5
By book adjustments	32,301	5	3	15,102	10	11
From miscellaneous receipts	594	5	3	472	13	1
Total	1,44,909	12	6	1,22,458	3	7

While there has been a decrease under other heads the receipts from the paying patients were in advance of last year.

Deducting the remittances to the treasury, the value of the articles in store on the last day of the year, the charges on account of the work done by the Public Works Department and the contingencies of manufacture with the cost of raw materials purchased, the net charge or the 'charges proper' of the asylum amounted to Rs. 90,218-7-8. This shows a decrease of Rs. 8,344-5-4 over last year's figures.

Considering that the asylum population and the average strength have increased from 763 and 564.43 in 1893 to 806 and 621.27, respectively, in 1894, the decrease is very satisfactory and bears evidence of the economical working of the asylums.

The following statement contrasts the several items of expenditure during the year with those of 1893. It has been adopted for the purpose of showing clearly to the different Superintendents the directions in which economy is possible and will give from year to year an admirable idea of how the finances of the institution have been looked into by the Superintendents:—

1893.

Asylums.	Establishment.		Diet.		Clothing and bedding.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.
1	2	3	4	5	6	7
	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.
Madras	30,506 15 9	70 6 1	33,004 2 10	58 13 7	6,325 2 6	15 1 5
Vizagapatam	2,859 12 10	58 2 7	1,445 12 5	35 3 4	53 4 0	1 6 8
Calicut	3,507 4 9	45 13 8	5,139 8 4	60 15 0	459 2 0	5 12 9

Asylums.	Medicines.		Contingencies.		Hospital necessaries and miscellaneities.		Grand Total.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total.	Cost per head of average strength.
	8	9	10	11	12	13	14	15
	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.			Rs. A. P.	Rs. A. P.
Madras	990 2 3	2 1 2	3,382 9 2	7 11 3	...	...	80,618 0 6	184 1 6
Vizagapatam	166 4 10	4 0 9	281 4 7	6 13 6	...	...	4,342 6 8	103 10 10
Calicut	261 2 8	3 1 6	852 15 9	10 1 10	...	...	10,610 2 7	125 12 9

1894.

Asylums.	Establishment.		Diet.		Clothing and bedding.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.
	1	2	3	4	5	6
Asylums.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.
Madras ...	82,332 13 1	68 3 5	34,414 5 3	72 9 8	2,493 14 2	5 4 2
Vizagapatam ...	2,008 13 5	50 15 3	1,535 8 8	31 8 4	115 3 0	2 5 6
Calicut ...	4,059 7 8	41 6 4	6,050 14 2	61 11 2	341 0 0	3 7 11

Asylums.	Medicines.		Contingencies.		Hospital necessities and Miscellaneous.		Grand Total.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.
	8	9	10	11	12	13	14	15.
Asylums.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.
Madras ...	212 13 8	3 8 5	1,475 0 10	3 1 9	2,654 5 5	5 10 7	73,549 3 0	155 6 0
Vizagapatam ...	1 1 8	0 6 4	36 12 6	0 11 11	86 4 8	1 5 7	4,931 11 9	86 9 11
Calicut ...	250 15 8	2 10 5	1,018 6 3	10 6 2	575 13 2	5 13 11	12,307 8 11	123 7 11

According to the above tables there was a satisfactory decrease in the Madras Asylum under each head of charges and specially under diet which was Rs. 16-3-11 less than in last year per head of average strength.

In the matter of clothing and bedding the amount debited for the year compares favourably with 1893. This is explained by the Superintendent as being due to the fact that no indents were submitted for clothing for the last eight months of the year as none was required.

The charges under contingencies and medicines were also less. The new conservancy arrangements, by which the municipality removed the night-soil of the asylum free of cost, came into force on the 1st September 1894 and effected a saving of Rs. 122, so that the cost per head of the average strength under all heads of charges was only Rs. 155-6-0 against Rs. 184-1-6 in the preceding year.

In the Vizagapatam Asylum the cost per head of an insane calculated on the average strength was Rs. 86-9-11 against Rs. 105-10-10 in 1893, or Rs. 19-0-11 less than in last year. This decrease in the aggregate on an examination of the statement above is found to be due to the favourable diminution under the several heads noted below :—

Under establishment there has been no real decrease but owing to the increase in the average strength of the inmates the cost per head was comparatively small.

As regards diet the falling off in the cost is accounted for by the introduction of dry grains in lieu of rice and the substitution of oil for ghee for a portion of the year.

The charges under contingencies and hospital necessities are also less and this the Superintendent ascribes to the employment of lunatics, for washing clothes, instead of a paid aboli. The services of the barber have also been dispensed with and an attendant ordered to take up his work. There was also some saving in the feeding of the bullocks belonging to the asylum.

The only item which shows an increase is 'Bedding and Clothing' and this the Superintendent reports to be unavoidable.

In the Calicut Asylum there has been no corresponding decrease as in the other two asylums, but the figures very nearly approximated those of last year; the difference in the cost per head under all the items put together being only a few annas and pies.

The total cost of establishment in 1894 was Rs. 4,059-7-8 against Rs. 3,367-4-9 in the preceding year, but the cost per head for the year under report was comparatively less owing to the mean population in 1894 being greater than in 1893.

The diet cost shows a very small increase over last year being Rs. 61-11-2 against Rs. 60-15-0 in last year. This excess during the year was due to the more extensive issue of extras to the sick and weakly insanes and requires the careful investigation of the Superintendent.

There was also an increase of rates in the tender for 1894, for some of the principal ingredients of food which are given below :—

	1893.			1894.		
	Rs.	A.	P.	Rs.	A.	P.
Mutton	0	3	6	0	3	9
Vegetables	0	0	4½	0	0	5
Dholl	0	0	8	0	0	9
Salt	0	0	8	0	0	9
Tamarind	0	1	2	0	1	3
Milk	0	1	8	0	2	0

Under the next two heads 'Clothing and Bedding' and 'Medicines' the variation is in favour of this year and does not call for any special remark.

The charges under contingencies were very nearly equal to that of last year, but still compare very unfavourably with the other institutions where the cost per head varied from Rs. 11-11 to Rs. 3-1-0; this excess over other institutions is due to the inclusion of Rs. 495-12-5, the cost of repairs and maintenance under contingencies; while in Madras such charges were incurred by the Public Works Department and shown under column 19 of statement IX.

In the Madras Asylum the number of paying and non-paying patients and the cost per head of average strength was as follows :—

		Number.	Average strength.	Average cost.
Europeans and East Indians.	Paying patients	59	31	Rs. A. P. 0 6 9
	Non-paying patients	66	54	0 4 10
Natives	Paying patients	36	22	0 2 2
	Non-paying patients	472	369	0 2 6

In Vizagapatam there were two paying patients, one paid Rs. 3-8-0 a month, a moiety of his pension, and the other the actual cost of maintenance.

The statement below compares the average number of paying patients and the amount of recoveries during the last three years :—

	1892.	1893.	1894.
Average number of paying patients	234	123	129
Amount of recoveries	Rs. 54	Rs. 47	Rs. 55-5-0

Enquiries were made in all doubtful cases to ascertain the exact position in life of the relatives and friends. As a result of such enquiries one man has been reported as well-to-do and the magistrate has been asked to make an order for payment of Rs. 15 per mensem. This sum will be sufficient to maintain him, and allow of such charges in diet and clothing as from his former position may be considered advisable.

No extra diet has been given to the paying patients during the past year so that the cost of dieting has been the same as for an ordinary patient.

In Calicut there were no paying patients during the year and the average number of pauper patients was 98.07.

The average monthly cost of diet of a pauper patient was Rs. 5-2-3.

Manufactures.—Out of a mean population of 621.27, 404.09 inmates were employed daily on manufactures comprising farming, gardening, weaving, &c., and these have made a profit of Rs. 1,891-2-11. The subjoined table contrasts the profit per head of average number employed in each asylum with the figures for 1893:—

Asylums.	Average number employed.		Total profit.		Profit per head of average strength.	
	1893.	1894.	1893.	1894.	1893.	1894.
Madras	273	351	Rs. A. P. 2,230 10 4	Rs. A. P. 4,44 15 7	Rs. A. P. 8 2 8	Rs. A. P. 1 4 3
Vizagapatam	22	28	331 2 5	756 3 2	16 6 9	27 0 1
Calicut	24	25	544 9 10	690 0 2	22 11 1	27 5 7

Except in the Madras Asylum, where the profit per head is considerably small, the other asylums show a decided and satisfactory increase over last year. In the Madras Asylum the falling off is only nominal and is chiefly due to depreciation in the market rate of goods as per summary of the correspondence between this office and the Superintendent noted below.*

According to the present valuation, the stock on hand on 1st January 1894 would have amounted to Rs. 4,485-8-11 instead of Rs. 6,510-15-8 as shown in column 9 of statement XI, debit side. This change would have raised the profit in column 16 to Rs. 2,470-6-4 or an increase of Rs. 239-12-0 over last year.

Statement XI in the appendix gives full details of the financial transactions of the manufacturing department for the year 1894. According to columns 12 and 13 of the statement, Rs. 1,607-1-10 were expended in the three asylums on contingencies and on raw materials purchased.

The total amount realized, including the cost of raw materials, &c., in store at the end of the year, was Rs. 10,974-12-3; of this sum Rs. 3,470-0-8 were remitted to the treasury and Rs. 2,035-9-9 represented the value of manufactured goods made over to the Asylum, the difference, viz., Rs. 5,419-1-10 was the cost of raw materials, &c., to the credit of the asylums on the last day of 1894.

Against the total credit in column 8, Rs. 9,033-9-4 representing the cost of materials purchased, contingencies spent on manufacture and the value of goods in store, &c., on the 1st of January 1894 should be debited. This leaves a surplus of Rs. 1,891-2-11 for the profit of the year.

* Pursuant to the order of Government, dated 21st November 1890, No. 1352, the cloths and garments manufactured in the Lunatic Asylum at Madras were sent to the Friend-in-Need Society to be valued and the valuation fixed by the society accepted, but this valuation is now considered far too high and as such it tells very heavily on the attendants who have to pay for clothing which they have lost or cannot account for. The Superintendent therefore proposed to revise the valuation on a basis of the actual cost plus 25 per cent. profit being about the average profit made by sales to the public. The proposal not being in entire accord with the order of Government quoted above, the Superintendent was asked to ascertain the market rate of these articles and fix the valuation accordingly. Previous to this he referred the matter to the Superintendent, Her Majesty's Penitentiary, who fixed the valuation at 30 per cent. increase on actual outlay for profit and labour, but, as the order of Government quoted above is very clear on the point and directs that valuation be fixed at local market rates without reference to actual cost and as the adoption of this course would tend to the accumulation of articles which cannot yield a profit of 30 per cent. while those which may yield a higher rate will find a ready sale with the public, and as the stock on hand will consist of articles which will never reach the valuation recorded for them in the annual report, the recommendations of the Superintendent was not accepted, and the Superintendent was directed to ascertain the true market rates. Upon this the Superintendent referred the articles to Messrs. Oakes and Company and Binny and Company. The valuation by these two firms did not tally and in some cases the rates proposed are below the actual cost while in others they are so high that sale could hardly be found for them. Under these circumstances the following order which appeared to be the nearest approach to the market value as meant by the above order was passed.

"The valuation should be calculated at the prices for which you can sell certain articles in the local market. This is easily fixed by the cost of materials plus the profit made on those articles actually sold."

"The calculation of the value of articles supplied to the asylum should be done on the actual cost of materials plus the average profit made on the articles actually sold during the year."

Garden produce.—In the three asylums the income under this head showed an increase over last year. In Madras it was Rs. 368-15-3 against Rs. 215-12-9 in 1893. In Vizagapatam and Calicut the amounts were, respectively, Rs. 509-7-6 and Rs. 265-0-1 against Rs. 333-15-0 and Rs. 215-15-4. The soil of the Vizagapatam Asylum, being sandy and rocky, is not well adapted for such cultivation; the Hospital Assistant in charge, however, has, to his great credit, succeeded in improving some portions. The Superintendent considers that it will be to further advantage if the Asylum well is fitted with a pump over it. He was accordingly asked to submit an estimate which, when received, will be forwarded with my remarks.

17. *Results of stock-taking and report on inventory of valuable stores.*—The inventory of the valuable stock of the three asylums has been duly checked and found correct.

18. *Verification of service books.*—The service books of all the servants of the asylums have been verified up to the period under report as required by G.O., No. 396, of 22nd February 1886.

19. *GENERAL REMARKS.*—The following remarks made by the Superintendents of the respective asylums are here given in their own words:—

Vizagapatam Asylum.—"The asylum for the past two years and nine months has been in charge of Hospital Assistant Y. Anantayya, No. 326, and I wish to call attention to the excellent work he has done. He takes much interest in his work and has succeeded in greatly reducing expenditure and increasing receipts. At whatever hour I visit the asylum I find him busy among the inmates. I am sorry to say he now wishes to get a dispensary and it is only natural, as the asylum duties are anxious and require unceasing attention. There is no inducement for an able man to hold such a charge for any length of time."

Calicut Asylum.—"There were no paying-patients during the year, the one remaining from 1893 being transferred to the non-paying list on the representation of the Deputy Magistrate of Coimbatore, that the relatives of the insane were unable to pay for her maintenance. Rs. 40-2-5 is part payment made for the maintenance of a patient who was handed over to his relatives in 1893.

Printed notices embodying Rule 23 of Section II of the Asylum code were, with reference to the Surgeon-General's orders in July 1894, sent to all Magistrates, who commit insanies to this Asylum, requesting them to ascertain if insanies who are sent by them in future have got private property that could be utilized for their maintenance, or relatives able and legally bound to pay for their maintenance. The Magistrates have invariably furnished the information."

Madras Asylum.—Surgeon-Major Elcum writes: "The great difficulty in adequate superintendence of the Madras Lunatic Asylum that I have experienced, comes—

(a) from the large area, and scattered contents covering that area (67.89 acres),

(b) from the varied nature of details of the superintendence which occupy too much time and should not come before the Superintendent at all in my opinion.

The difficulties of (a) are inseparable from any large establishment, but I consider that the Superintendent is far too much of a steward and clerk and far too little of a doctor to insane patients. If his professional work is to be adequately done, he must devote four-fifths of his time to the patients, observing them, their habits, peculiarities, histories, ailments and all the characteristics of insanity in the native mind. This must be the main work of his superintendence but, as a fact, four-fifths of his time are taken up with steward's office work, large and petty contracts over grain and other food, looking into accounts, examining clothing details, how the cooks do their work, whether the toties cleaned the rooms or not and such like details. If, therefore, the two are to be combined, and both done efficiently, his time is far too much occupied and as his responsibility is equally great both on the professional and steward-like side and the two aspects are from their size and amplitude of details enough to crowd one another out

I think his work should be lightened considerably in the steward's department, leaving him real leisure, where he now has not any, to follow up his professional work. If his responsibility is not lightened his work cannot be delegated with safety; and if much of his work can be delegated and as I firmly maintain ought to be, his responsibility should be altogether removed. He should not be called upon to buy dholl and rice, to examine vouchers for the supply of blankets, and to trace out where a pair of slippers has gone, but if his responsibility is not removed over details such as these; his duty will be to constantly scrutinize innumerable petty details, find out and correct petty errors, until what I may call the distinctive characteristics of his mind from the medical side, are put aside more or less completely to take up those of a clerk, store-keeper and jail warder. This will always make the work of superintendence in the Madras Asylum so irksome and with its present size so unmanageable, that unless the whole system be altered, I cannot believe that any Medical Officer can either be happy or properly useful, considering his mental training and qualifications, while so over-harrassed with such innumerable petty vexations."

"*Assistant Surgeon Judge.*—Of this officer, I have only to speak in praise without his assistance, it would be, I think, impossible to carry on the work of the Asylum. Much of his time is taken up in watching numberless details and seeing that the orders of the Superintendent are carried out both by European and native attendants. He has the unpleasant task of constantly finding fault, and bringing before the Superintendent the innumerable petty lapses on the part of attendants cooks, toties, in short of all the establishment, and of endless small details connected with patients in the various sections. To a new Superintendent, or to one like myself not conversant with native languages, his services are indispensable. While speaking of him only in praise, I think that this carries with it a condemnation of the system on which the Asylum has been worked, that he should have become so necessary, as to be almost indispensable. The evil has, at least partly, arisen from the constant change in Superintendents, who, in a short tenure of the appointment have not had time to become thoroughly conversant with the very large mass of detail involved in the Asylum management; to do this thoroughly, I believe from one to two years necessary, as for example in the submission of the annual administration report both complex and numerous details have to be compiled, digested and amended, while current work is being done, which at present at all events full occupies the time of Superintendent, Assistant Surgeon and steward. With Superintendent who is inexperienced, with either of these men ill, there would be the greatest difficulty in carrying out the work of the Asylum management while should both be ill or away together, I believe it would be an impossibility and there is no one in reserve and no one in training to supply their place, each standing alone in his own work."

"*Steward.*—We have one steward, though he is assisted by Mr. McKenzie, an assistant, of whom I speak further on and he is, in my opinion, overworked. Year by year the mass of details to be watched and checked with reference to money, clothing, feeding, expenses of patients as a whole, of patients in particular, of what they eat, of what each item costs, &c., &c., has steadily increased. It is true a store-keeper has now been put on, and not before he was absolutely required, but the underlying difficulty still remains the same, that the steward is overworked, has long been overworked, and so far as I can judge will in due time be again overworked until such a point is reached that a break-down is imminent in the working in this department, unless care be taken that if the work by degrees increase, due increase in establishment is allowed long before such a difficulty is imminent, though I do not think this has been borne in mind sufficiently in the past."

"*Assistant Steward.*—He has, at the same time he is supervising kitchen management as well as cooking, to be compiling figures from diet sheets, bringing up daily issues of extras in his account—a very long one—and superintending milking going on outside the kitchen. He is supervising three cooks, two female servants (water woman and one female cook) and one special cook paid by private patients collectively—and five to seven insane people who are helping in kitchen

details. He draws all the rations in the morning. There is not too much to do, if his time could be, which it cannot be, exclusively devoted to the details of cooking itself alone, but it is the system which pervades the asylum of using men on details of duty which overlap one another, and are all taken together impossible of proper fulfilment, that has done so much harm: all the stress arises from this. If Mr. McKenzie were only all day at the kitchen, he could adequately supervise the cooking arrangements, but to give him clerk's work as well, means indifferent cooking, owing to indifferent supervision by him, and errors in the clerical details of his accounts which again throw back more work on steward and Superintendent to find out and set right."

"*European Attendants.*—They perform their work, I believe, to the best of their ability, and with a satisfactory result on the whole, but it is no dispraise of them if I say that they do not come up to what I consider the standard required, inasmuch as I doubt the possibility of getting more suitable men. Several qualifications are necessary in a good lunatic attendant:—

- (a) Good physique.
- (b) Good temper.
- (c) Knowledge of natives.
- (d) Knowledge of the languages.
- (e) Ability to read and write and do simple arithmetic and to write plain intelligible English letters.
- (f) Good common sense.

Now, it is the combination of these qualifications that is essential and such a man could command fair wages in other walks of life. What inducement has he to take to a lunatic asylum life? It is hard work, monotonous and if he be not a kind hearted man, he may very easily slide into a very cruel one—simply because he sees helpless human nature from its lowest and most repulsive side and sees it constantly. I strongly recommend a reserve of these attendants to allow of a fixed holiday for them, not as a favour but a right for their health's sake, and yet we have no available reserve, and in cases of emergency have to fall back on untrained outsiders to do highly skilled work—for these men not only require the qualifications of European Asylum attendants but, have in addition the difficulties of the language and the same difficulties of patient's temper, fastidiousness, follies, even perhaps in a greater degree than the European insane."

"*Native attendants.*—The character of the native attendants as attendants on insane patients is poor. To adequately perform the duties required of them at the present strength of our establishment, and considering the class from which we draw them, is I think impossible—they have neither the will nor intelligence nor education, and I say candidly that from their point of view I cannot much blame them; they are not men of refined feeling, their ordinary work is practically to feed, clean and provide for a human beast; that he is human it is true, but in the majority of cases the human faculty is too much in abeyance, the animal too prominent: hence arises the constant lapse into perfunctoriness, the tendency to roughness, to neglect of the watchfulness on which so much depends, and to feel what is quite true in many cases—that if the work is done well, it inspires no gratitude, that the feelings of the recipient are often purely negative, and that whether ill or well done, the result, except in the long run, will not show much difference; added to which the morbid side of a distempered mind often renders a patient's character disagreeable or even utterly odious. This difficulty is especially felt at night in the hospital. In the day time with much care and supervision, the sick can be looked after with as fair a result as can be expected with such rough material, but at night directly one is away, I see no guarantee that a sick lunatic will be looked after at all, I think the chances are much against it. The nursing by men of the sick is always a matter of doubtful expediency, but of lunatics who are much more confined necessarily, it is even more difficult to arrange satisfactorily than with sane patients."

"*Toties.*—Another difficulty arises connected with these. Assuming that the most necessary point is to feed the lunatic adequately, what should be looked on

as the next most important point? I say certainly not clothing, except in one or two months of the year, but scavenging. Now, our number of toties is fixed at 1 to 20 general patients and so necessary are they with the filthy nature of many lunatics, that were we to have a sudden strike of toties, we should be as we are now situated utterly unable to really remove the filth; there is no efficient *mechanical* means of doing so wholesale, and our blocks are so situated that most are distinct units, requiring individual cleaning; this is a most crying evil, as it puts us at the mercy of these men, and one of our greatest needs is to be able to dispense with toties to a great extent and have a complete system of flushing, and drainage drawn up for the whole Asylum by which manual labour could be minimized, the supervision of toties done away with to the greatest extent instead of having as now, one of the greatest difficulties and responsibilities to see that toties do their work adequately."

"*Patients.*—Another grave difficulty of supervision is the ease with which patients glide into ill health from their childish helplessness, which often prevents their complaining at all about their food and as often makes their complaints simply nonsensical—often they dislike all food, often they dislike one food or another, at times they seem to like one food and then dislike it. This causes endless trouble in meeting their wants and much writing and supervision of both food and accounts of food. The system of dieting must of course be checked, but I think too much time is consumed in watching the details of the feeding by the Superintendent, making the most important duty fall too heavily on him, so that it becomes not a matter of general superintendence, but a minute wearisome checking of each diet and its administration, that is, after carefully ordering a diet to see for yourself that the patient really receives it, a thing which is practically impossible to do from the disconnected nature of the blocks and the distance from the kitchen. We need, in my opinion, better kitchen arrangements and more stewards, so that besides the European attendant there should be more constant supervision of all the meals in every section at the same time, and no large amount of the Superintendent's time ought to be taken up in trying to perform such a task as this, as he has practically to do now, going from one section to another section and not at all sure that having put matters, as he thinks, right in the one, the next section will not in the same way require a careful checking which has to be continually maintained and equally applies to any one to whom he delegates the same work. The feebleness of the patients and their vagaries always keeps the supervision at a high strain to prevent a patient being slowly starved before one's eyes—sinking into an anæmic state from which he slowly, if at all recovers."

"*Buildings.*—In themselves answer their purpose of safely confining and housing lunatics. Having said that, I must add they are not well drained, they are not well lighted at night, and they cannot any of them be heated, an important point in rainy cold nights and early mornings with delicate patients who will throw off their clothes and blankets even though they lie in the cold without them. The whole scheme of the buildings of the Asylum seems never to have been consistently and definitely worked out, it bears in its arrangement a haphazard appearance, a block here, another there, some drained, some undrained, some connected and enclosed, others partly connected and as if built one after the other at uncertain intervals of time to meet pressing wants and with no idea of definite finality in their purpose or dimensions. Originally private property, the Asylum has grown up in the same area, block by block, until its numbers which ten years ago were 380 within the enclosing wall are now (1st January 1895) 473 in the same area, with lines for 75 native attendants with their families adjoining and a prospect of lines for 20 toties to be hereafter added."

"*European Patients.*—Are too much confined, have no suitable occupation or amusement, no bagatelle, cricket or lawn-tennis. No means of letting them out except in a comparatively small space, as if allowed to wander to the further side of the Asylum, they might easily get over the wall, and if violent and abusive, they have to be shut up in their own cottages and there is not enough guard of European attendants to allow of the degree of liberty that they might have if the attendants were more numerous. Hence I consider that there is a

most important want in their mental treatment, viz., not enough evidence of the cheerful side of life, either in the way of active games out of doors or recreation in-doors."

"*Native Patients.*—To them also apply the same remarks. It is true that they are occupied in various ways, but their occupations are either in the direction of work, as pulling at a cart, or weeding a walk, or they do nothing, and it is difficult, if not impossible to find work that a native likes or an amusement that he cares for that he will continue to follow."

"*Criminals.*—I think it a grave question whether the addition of the criminal section to the Madras Lunatic Asylum has not been a most mischievous error. For the sake of economy and compactness of administration, a criminal element has been introduced into an institution from which it should have been kept separate. The proximity of the criminal to the civil element has a tendency to cause a too marked centralization of system, to consider the lunatic side of the question too little and the jail side too much, and I believe it would be better to completely divide the two; the warders should not be the same, the whole establishment should be disconnected, and all questions of jail routine as to the cost of wearing materials, the amount of labour expended, the hours adopted, the cost per head per criminal should not be thrown on to our office at all, with our very small establishment. The bringing the prison element into the Lunatic Asylum is an incompatibility, and I think should be as carefully avoided as the addition of a jail to a charitable hospital for the sick poor."

The Vizagapatam Asylum has as usual been well managed during the year, and is a credit to Surgeon-Lieutenant-Colonel Leapingwell, whose remarks regarding First-grade Hospital Assistant Y. Anantayya I fully endorse.

The Calicut Asylum has been, on the whole, well managed during the year, but I would have liked more assistance from Surgeon-Major Carruthers in bringing to my notice the slowness of the Public Works Department in carrying out the necessary repairs and new works. First-grade Hospital Assistant D. Rajanthram in that Asylum has done admirable work during the year.

As regards the Madras Asylum I largely concur in the general remarks of the Superintendent Surgeon-Major Eicum who, at the time of his making the report, had before him the reports of Surgeon-Lieutenant-Colonel Dobie, Surgeon-Lieutenant-Colonel W. G. King, M.B., and Surgeon-Major Armstrong, all of whom had been previously Superintendents of the Asylum at different periods. He also had previous knowledge of the Asylum in 1892 and 1893, during which he acted as Superintendent. The problem of managing efficiently and economically such a large Asylum as the Madras one with a maximum accommodation for 711 insanés, and an average daily population during the past ten years varying from 417.64 in 1885 to 474.26 in 1894, is a most difficult one, especially as we have never had the advantage of an expert in administering such a population of insanés. As already pointed out to me by Government, there have been no less than eleven different Medical Officers acting as Superintendents during the past ten years. None of them were long enough in charge to entitle them to be considered experts; as a matter of fact I referred some important questions of administration to Surgeon-Major Eicum and two other experienced and able medical officers who had been Superintendents and encountered the difficulty of getting three opinions, all of which differed essentially on important questions. Neither I, nor any of my predecessors have had special experience in the management of Lunatic Asylums, except Surgeon-General Bidé, whose experience was about the year 1866-67. It must also be remembered that there is no lunatic asylum of this size in the East. Most of the local Governments in India have considered it more desirable to have several small asylums.

The system of uniting an asylum for criminal lunatics and one for the treatment of ordinary lunatics whom it is considered desirable to confine in an asylum also considerably complicated the question.

I have laid certain propositions during the year regarding the—

- (a) accommodation of the sick in hospital,
- (b) The nursing of the sick.

- (c) The provision of day sheds.
- (d) The improvement of the store-rooms.
- (e) The improvement of the position of the Superintendent and the erection of quarters for him outside the Asylum limits and away from the noise of the troublesome inmates.
- (f) The increase of establishment for the Steward's department.
- (g) Improvements in special wards for Europeans.
- (h) Remodelling sixteen cells.
- (i) Improvements required in the criminal enclosure.
- (j) Quarters for two medical subordinates and two European attendants.
- (k) Drainage and water-supply, now before a special committee.
- (l) Hints for toties and improvement in their pay.

If these propositions are met in a liberal spirit I consider it will be possible to get this Asylum into a more efficient state, and that if we can secure the care of Surgeon-Captain Paik, who is an intelligent young officer eager to carry on the work he has been selected for, we will soon see the Asylum as well managed as we can expect to.

I have much pleasure in endorsing the opinion of Surgeon-Major Elcum regarding the good work done by Military Assistant Surgeon Judge and Civil Apothecary Cooper during the year and more especially during the trying time while the epidemic of cholera lasted between December 1894 and February 1895.

I have the honor to be,

Sir,

Your most obedient servant,

C. SIBTHORPE, Surgeon-Major-General,
Surgeon-General with the Government of Madras.

APPENDIX I.

REPORT ON THE OUTBREAK OF CHOLERA IN 1894-95.

BY SURGEON-MAJOR D. ELCUM, SUPERINTENDENT OF THE LUNATIC ASYLUM.

The outbreak commenced on the 29th December 1894, though one doubtful case occurred on the 24th. A Mr. Downey, one of the European attendants, who had been feeling slightly indisposed from the 22nd, had several evacuations on the 23rd and by the 24th was so ill that he was transferred to the General Hospital. This case was, however, not looked upon as one of cholera, but rather as an attack of diarrhoea resulting from eating a particular kind of vegetable on the evening of the 22nd. On the 27th one case from Block 7, Section IV, 'Kanki Chittivadu,' was admitted to hospital with diarrhoea at 3 A.M., there being no distinct indication at that time that the disease was cholera. A woman 'Kulliamal' was admitted to the female hospital a few hours later, suffering from a similar attack of diarrhoea. On the 28th no fresh cases occurred, but the cases admitted on the 27th were still under treatment and regarded as suspicious. On the 29th six fresh cases were admitted showing symptoms of cholera, and these together with the two previous cases admitted for diarrhoea were kept under treatment. On the 30th another case of cholera was admitted, and the case of 'Kulliamal' resolved itself into one of cholera, having up to this date been treated as one of diarrhoea. On the 31st all the cases, including one admitted on this date, were pronounced as typical of cholera, though the motions were not of the typical rice-watery consistence, but consisted of undigested rice, raggi and vegetables suspended in fluid at first and gradually assumed a rice-watery character as time went on. Vomiting was almost entirely absent in some cases and in others consisted of undigested food. Total suppression of urine only occurred in a few cases, but the secretion of the kidney was diminished in all.

2. I did not pronounce the cases to be cholera until the morning of the 31st December, up to that date I considered them as doubtful; the gradual character of the onset, the absence of pronounced symptoms and the continuance of those symptoms, as a whole, made me rather lean towards the opinion that the disease was caused by catarrhal inflammation of the intestines due to undigested food and cold combined. The cases continued to increase in January 1895 as will be seen by the nominal roll (appendix A). From January 1895 up to the termination of the epidemic on 9th February, 20 more cases occurred, details of which will be seen in the nominal roll (appendix C). This brings the grand total up to 64 attacks with 44 deaths, being equivalent to a percentage of 68.75 deaths.

3. All the cholera cases among the men were removed to the infectious sheds and into tents obtained from the Ordnance and pitched in an open space to the south-east of the criminal enclosure. The women were treated in the isolation block in the female enclosure. I am puzzled in accounting for these cases, as they were more isolated from the outside world than the other portions of the asylum, the female attendants alone having any access to their enclosure, while the food, water and surroundings are so entirely in common that I should have anticipated a much larger number of cases once the disease started; the total number of cases being only five, and all these proving fatal.

4. *Remarks on Causation*—(a) *Drinking water* is unlikely to be the cause, as all the inmates drink the same (the Red Hills water laid on in pipes); had this been the cause I fancy far more cases would have occurred. Water from a well in the criminal enclosure, where the earlier cases came from (except the women), might have been drunk surreptitiously, not otherwise; the patients being inmates, this is quite possible.

(b) *Food* consisted largely of raggi, rice and vegetables. The same reasoning will apply to this as to the water, but in the early *post-mortem* examinations made before the cases were pronounced as cholera, I found acute inflammation of the small intestine and in some cases ulceration, with a good deal of undigested food—raggi and vegetables—and a good deal of mucus. The raggi used since 12th July last was very old; it was procured at the Penitentiary and the issue of it as a food was discontinued on 31st December 1894 by order of the Surgeon-General as not being of good enough quality.

(c) *Air*.—This might be a cause, some cleansing of the floors and the washings (sullage) having been applied to the jail garden. This sullage is freely used in the asylum garden outside, and from both the gardens vegetables are freely supplied to patients. Of late the sullage has almost entirely been applied to the outer garden only.

(d) *Infection from without*.—This might equally well be; we have free communication with the outside world by the warders and other servants, whose houses are adjoining the asylum. Some prisoners and other patients have recently come in from different districts, though nobody appears to have actually brought cholera in with him.

(e) *Overcrowding* has not existed.

(f) *Clothing*.—The usual cotton clothing and native blankets are used in the asylum.

(g) *Drainage*.—In the criminal enclosure, where the greatest number of cases arose, there is the best drainage with good masonry gutters, far superior to the rest of the asylum in which the drainage is defective. The method of removing the excreta at present in use is by allowing the excrement to run into pails which are removed by hand by the toties; the flushing of the blocks also runs into these pails or cisterns.

5. *Meteorological phenomena*.—I have noticed that such cold as we have had they have—cold mornings with dew and a sprinkling of rain once or twice affects these insanes considerably; they shiver, and though having blankets often won't use them, and even when put on, they often throw them off. One of the greatest difficulties with these people is their delicacy, making them susceptible to slight indispositions which are due to their mental state which reduces them to a condition of childish helplessness and extreme sensitiveness.

6. I think that, considering the whole course of the epidemic, the disease came from outside and was imported by means of clothes or by an attendant, though this is by no means proved. If Mr. Downey's case was the starting point, from him there is no difficulty in tracing the course to the criminal enclosure as he informed Surgeon-Captain Robertson at the General Hospital that he had passed motions in the criminal enclosure latrine on the 22nd December; but this would not account for the case in the female enclosure, which commenced at the same time as those in the criminal section, and I consider that, with more than one probability, there is still nothing proved; I leave the matter as it often is in the history of epidemics, a field for probable surmises.

7. The return of the number of epidemics that have occurred during the last ten years is attached (appendix B).

8. By order of the Surgeon-General all the patients were transferred to the isolation blocks and tents (when the increased number of cases required the latter to be pitched); all doubtful cases were retained in the ordinary hospital enclosure until the diagnosis was certain (this being necessary from the fact of their being insanes, the importance of their security was not to be lost sight of); after that they were removed to the isolation cottages and tents. Their cotton clothing was destroyed and their blankets washed in perchloride of mercury solution and fumigated. On their return to their sections after recovery fresh clothing was given them. All cholera excreta were buried in an open part of the asylum grounds at first, and at a later period the excreta were burnt. In the hospital enclosure half the blocks were emptied of patients at one time for purposes of cleaning and fumigation with sulphur; on the completion of this, the remaining blocks were cleaned and fumigated in the same way. A similar method was adopted in cleaning and fumigating the single cells. Mr. Downey's quarters were also cleaned and fumigated.

9. The blocks in the asylum were partially re-lime-washed and tarred, and the greatest care was taken to have them thoroughly cleaned.

10. Visitors were precluded from visiting the asylum.

11. A temporary staff of one hospital assistant, six native attendants and three toties was entertained for the cholera cases.

MADRAS LUNATIC ASYLUM,
16th January 1895.

Revised copy signed by

C. H. LEE PALK, M.D., Surgeon-Captain,

Superintendent, Government Lunatic Asylum.

MADRAS LUNATIC ASYLUM,
18th March 1895.

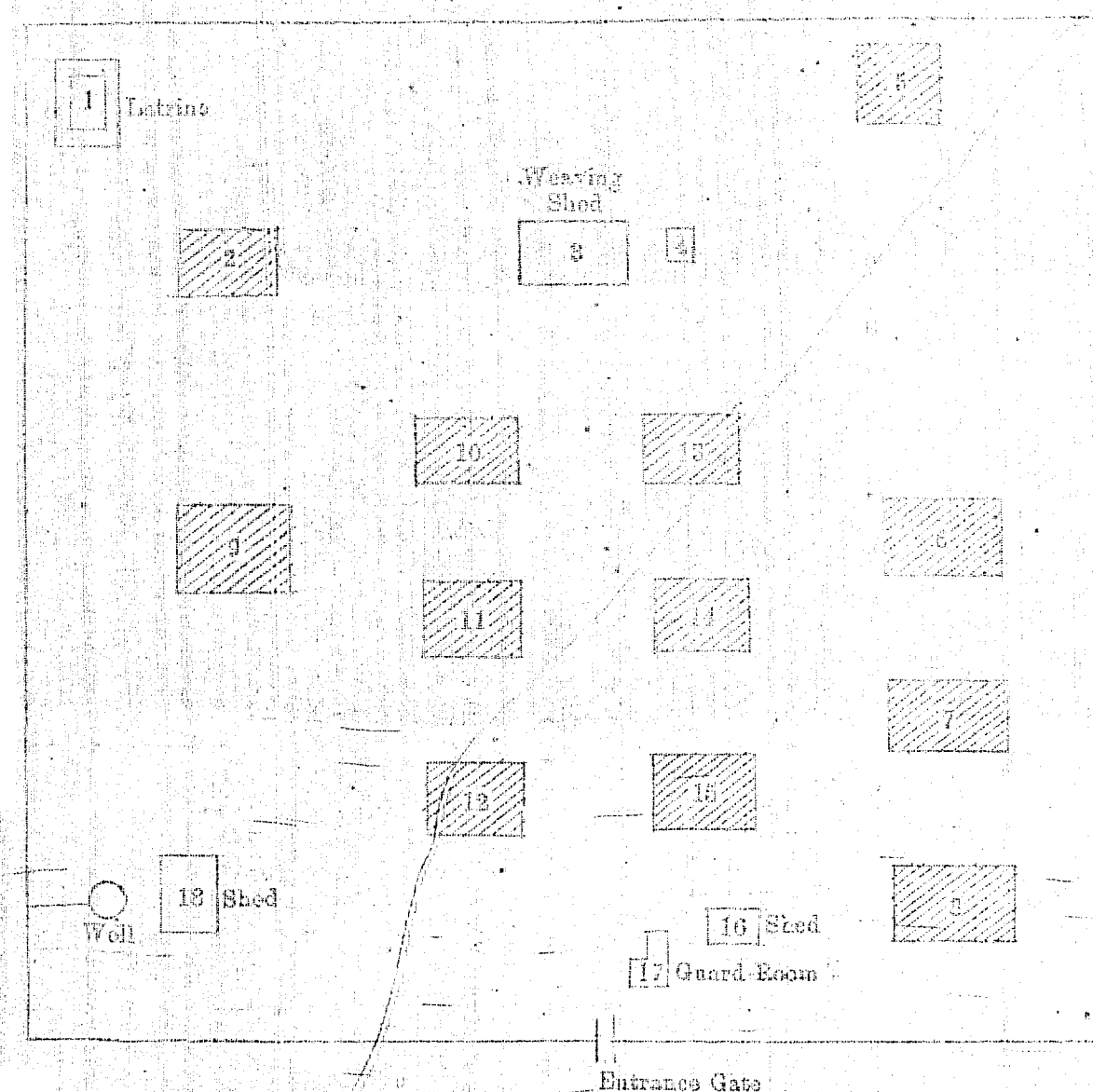
From the Government Analyst, North-West Provinces and Oudh, to Surgeon-Major D. ELLUM,
Superintendent, Lunatic Asylum, Madras, dated No. 27.

I have the honour to acknowledge the receipt of the undermentioned articles:—

- A. Specimen of water from a cistern near a well,
- B. Earth taken from a spot four yards from the latrine,
- C. Dust and fluff scraped up in the corner of a room near above,
- D. Earth from ground further off from the latrine;.

the despatch of which for analysis was intimated in your No. D.O. dated 23rd January 1895, and to report the result of the analysis, that a microbe indistinguishable from that of cholera is detected in the sample marked A, but not in the other specimens.

PLAN OF CRIMINAL ENCLOSURE.

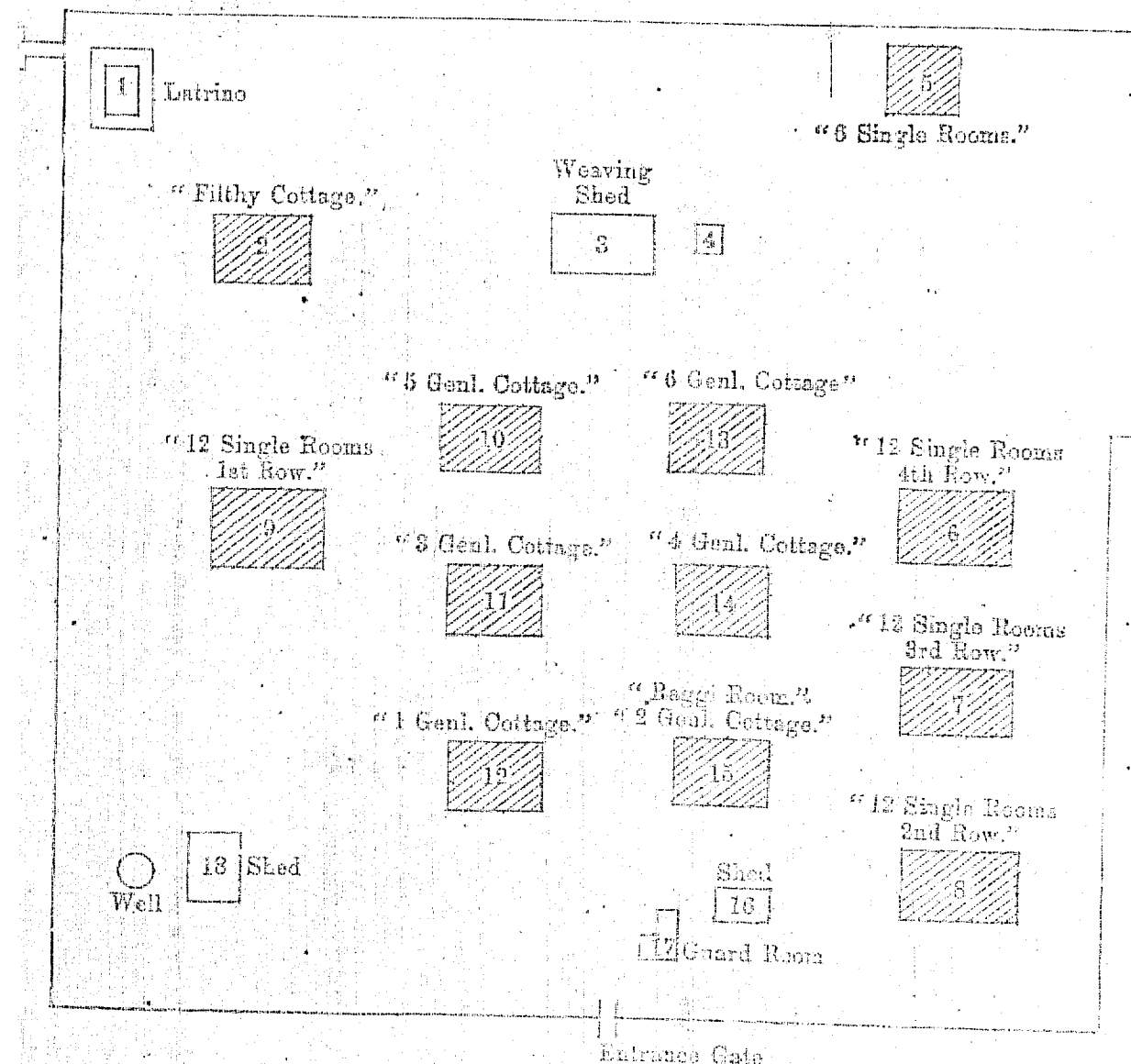


The numbers are taken from the Govt. plan, the shaded blocks are slept in.

No. 1972—Copies 200

Litho. Survey Office, Madras

1895



Sketch of Criminal Enclosure from the Govt. Plan.

The serial numbers are from the Govt. plan, the ones in inverted commas are from the Asylum blocks, as pointed on, or as usually described.

REMARKS BY THE SURGEON-GENERAL WITH THE GOVERNMENT OF MADRAS.

1. The Superintendent of the Lunatic Asylum, Madras, reported to me on the 30th December 1894, that five insanes had been attacked on the previous day with cholera and died within a few hours of their admission, also that other patients, who had been admitted during the night of the 29th, were in a more or less precarious state. All the men who had been attacked were from the criminal enclosure though from different blocks.

2. I visited the asylum on the 31st December and gave orders that the cases should be treated in the isolation wards, and suggested certain precautions which he carried out.

3. This report clearly shows that Mr. Downey, the European attendant, passed his evacuations on the 22nd December in the general latrine of the criminal enclosure and that no precautions were taken about these as cholera was not suspected, also that the evacuations passed by him on the night of the 23rd and the morning of the 24th December were collected in a chatty and put with other filth into the buckets at the general latrine (Block No. 1 & 2, Government plan) outside the criminal enclosure, that no dry earth or disinfectant of any kind was used when removing these. It appears that his servant was in the habit of daily going to the Smithfield market and had been to his own house near Chintadripet on the 19th December. As far as can be ascertained neither he nor his master was in immediate contact with persons suffering from cholera, although outbreaks of this disease existed in Madras following on the dispersion of the crowds from the great festival at Trinnomalla. Konkiehettivadu, who was taken ill on the 27th December, was sent to hospital from Block 7, Section IV (Government plan). The first case attacked in the female enclosure was Kullimal, who was grinding grain on the 27th December and came in contact with men who brought the grain bags from the criminal to the female enclosure.

4. A copy of the site plan is attached to the report to show the buildings from which the cases were admitted in the order of their admissions:—

Number.	Government plan, Block No.	Place where patient was placed.	Date of attack.
1	Block No. 6	25th cell	27th December 1894.
2	Do. No. 13	No. 6, General cottage	29th December 1894.
3	Do. No. 11	No. 3 Do.	Do.
4	Do. No. 10	No. 5 Do.	Do.
5	Do. No. 2	Filthy cottage	Do.
6	Do. No. 8	Second row of single rooms	1st January 1895.
7	Do. No. 5	Six rooms	Do.
8	Do. No. 14	No. 4, General cottage	Do.
9	Do. No. 12	No. 1 Do.	3rd January 1895.

5. The Superintendent has reported that the evacuations of the patients while in the hospital enclosure were treated in a similar manner to those of all other hospital sick, i.e., with McDonnell's powder in the wards and dry earth in the latrine and were carried away in the conservancy carts. From and after the 31st December, when the cases were removed to the isolation blocks, the evacuations were collected, thoroughly disinfected and buried. After the 21st January, the discharges were burned in the incinerator.

While the patients were in the hospital, the clothing and bedding were washed with carbolic lotion, soap and water and then dried. After their transfer to the isolation blocks, the articles of bedding and clothing already used by the patients were burned; and those in use at the time and afterwards were burned in the incinerator, the blankets only being preserved. The proper boiling and disinfection of blankets were commenced on the 10th January.

6. The Acting Sanitary Commissioner of Madras, at my request, visited the asylum with me on the 4th January, and suggested that specimens of the water from the well and earth from the places which were first polluted should be sent to Professor Hunkin and that he should be asked to carry out a bacteriological examination of them, as he had kindly told Surgeon-Lieutenant-Colonel King, that he would be happy to do so at any time if he were asked. In reply to a letter of mine, the Acting Sanitary Commissioner remarked on the 28th January that the failure to diagnose the first cases has led to difficulties as to complete segregation of the cholera poison and offered the following suggestions:—

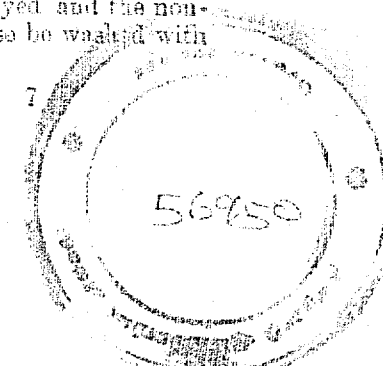
(1) That the well and cistern in the jail compound should at once be closed till the end of the epidemic and be disinfected before use by chlorinated lime and sodium sulphite in certain proportions to the amount of the water in the well;

(2) That sewage farming in the asylum compound should cease till the epidemic was over and that the patients should neither use the vegetables grown on it, nor handle its soil in any way;

(3) That the floors of each ward should be carefully washed with perchloride of mercury lotion 1 in 1,000;

(4) That all destructible eating and drinking vessels should be destroyed and the non-destructible ones should be plunged in boiling water, and in subsequent use be washed with Red Hills water at a site not hitherto employed;

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(5) That the cholera excreta should not be buried in the compound even after disinfection;

(6) That buckets used for emptying out drain water should be of a different pattern from those used for the wards, and that care should be taken that buckets used for wards are not employed in any manner, in connection with the washing of eating and drinking vessels;

(7) That special vessels should be used for giving water to patients at night, and that each ward should have its own flushing pail and if this is too expensive, that each pail be washed with perchloride of mercury lotion before passing from ward to ward, and that the drains should be cleansed daily with perchloride of mercury lotion;

(8) That, as far as possible, all clothing and blankets in use should be soaked in perchloride of mercury lotion and then exposed to the direct rays of the sun;

(9) That blankets used by cholera patients should be subjected to two hours' boiling in perchloride of mercury lotion;

(10) That patients should be numbered off to their wards and transfers be discountenanced as far as possible, and that each transfer when made be registered with a view to maintaining the history of each patient;

(11) That segregation of the excreta of patients recovered from cholera should be observed for at least ten days after such apparent recovery; and

(12) That pay or batta be sanctioned that will ensure the regular attendance of toties during the epidemic.

7. His suggestions (1), (2), (3), (4) and (5), had already been carried out under my instructions. I ordered that (6), (9) and (11) should at once be carried out and that (6), (7) and (10) be acted upon if possible, and that I would pass or recommend special batta to any men who were reported to have done good work.

8. In reply, the Superintendent proposed that the cistern be used for the daily bath alone and that the well water be used for gardening and bathing only, under the supervision of a European attendant. This was approved.

The disinfection of the well with chlorinated lime and sulphite of sodium was thought to be too late. It is a great pity that this was not carried out in time.

The continuation of the ordinary garden cultivation and the use of the vegetables were also allowed, as the epidemic had subsided.

9. All clothing, except 81 blankets used during the epidemic, was destroyed. I have sanctioned the proposal of the Superintendent to keep these blankets separate in the isolation blocks ready for future use in epidemics.

10. This outbreak of cholera is the most severe that has occurred in the asylum for many years. There were altogether 64 cases and 44 deaths or a mortality of 68.75 per cent. I concur with the Acting Sanitary Commissioner that it is a great pity that the earlier cases were not diagnosed as cholera and prompt steps taken for their isolation and the disinfection and destruction of their evacuations. The facts that Mr. Downey, the European attendant, passed several of his evacuations on the 22nd in the general latrine of the criminal enclosure, that the first native attacked was from Block 7 in the criminal enclosure, and that the third case occurred in the female enclosure and was a woman who had been in contact with the man from the criminal enclosure seems to me to show a connection between these cases. If these facts are taken in connection with the fact that Professor Hankin discovered a microbe indistinguishable from that of cholera in the slime of the water sent to him from the criminal enclosure about thirty days after the first case. I consider the sequence is as clear as one can expect to get it in most epidemics.

11. Professor Hankin's investigations are most important as illustrating the advantages of such bacteriological investigations being carried out early in such doubtful cases. Surgeon-Major Elcum had some reason for doubting these early cases being cholera at all and appears to have had no suspicion about Mr. Downey who was sent to the General Hospital where he was admitted for and treated as suffering from ptomaine-poisoning of a doubtful character. The subsequent history of the epidemic seems to me to clearly prove that Mr. Downey doubtless was suffering from actual cholera which a bacteriological examination would have at once put out of doubt.

12. The history of this epidemic has strongly shown the absolute necessity of carrying out an efficient system of drainage. The filthy habits of a large number of these inmates render the necessity of good drainage which will prevent the soakage of human evacuations into the soil even more necessary in a lunatic asylum than in any other building.

13. It has also brought prominently to notice the fact of our great dependence on the services of the toties and the absolute necessity of our being able to deal with them. As it is not possible to punish them, I have laid certain propositions before Government with the view of encouraging good work by a system of rewards. Notwithstanding the fact that during the past ten years (see appendix B to the report) cholera has appeared in five different years, no general rules regarding quarantine and the isolation of such cases have been drawn up. Such rules are now under preparation and will be inserted in the new edition of the Asylum Code.

APPENDIX A.

No.	Block in Section.	Name.	Age.	Sex.	Of coming to hospital.		Date of coming to Asylum.	Symptoms.	Result.		Remarks.
					Date.	Hour.			Alive.	When died.	
1	IV. No. 6 block ...	Kanakapali Ramiah.	40	Male	26th Dec. 1893.	8 A.M.	14th July 1893.	Premontory diarrhoea lasting for 8 hours; purging and cramps; collapse.	..	11 p.m. 29th Dec. 1894.	Admitted into hospital at 8 A.M. on the 27th inst. as a case of enteric fever; inflammation of the intestines from Section IV. 3 weeks, still well.
2	IV. No. 3 block ...	Malayal Pararan.	35	Do.	Do.	8.30 A.M.	27th Aug. 1893.	Purging and suppression of urine; collapse.	..	11-15 A.M. 25th Dec. 1894.	
3	V. No. 1, General cottage.	Deekutimamul.	30	Female	Do.	8-40 A.M.	20th May 1894.	Premontory diarrhoea for 4 hours; purging, cramps and collapse.	..	4 A.M. 2nd Jan. 1895.	
4	IV. No. 5 block ...	Konibala Ismail.	50	Male	Do.	11-55 A.M.	11th Feb. 1894.	Vomiting and purging; cramps and collapse.	1	9 p.m. 25th Dec. 1894.	
5	III. Criminal ward.	Kakkilativada.	40	Do.	Do.	12 noon.	22nd July 1892.	Vomiting and purging; collapse.	..	..	
6	IV. No. 4 block, 12 single rooms.	Venkaturamen Iyer.	30	Do.	Do.	12-15 p.m.	25th Oct. 1894.	Premontory diarrhoea for 6 hours; purging and collapse.	..	2-10 p.m. 31st Dec. 1894.	
7	IV. Fully equipped.	Jangama Khoud.	40	Do.	Do.	9-30 p.m.	12th Sep. 1893.	Vomiting, purging and collapse.	..	6-10 p.m. 30th Dec. 1894.	
8	IV. Fully equipped.	Koornan Singh.	40	Do.	Do.	8-30 p.m.	10th Dec. 1893.	Vomiting, purging and collapse.	..	8-45 A.M. 30th Dec. 1894.	
9	IV. No. 6 block ...	Kurijappan.	50	Do.	30th Dec. 1893.	8 A.M.	16th Sep. 1892.	Vomiting, purging and collapse.	..	8 A.M. 31st Dec. 1894.	
10	V. Hospital.	Kelamai.	20	Female	Do.	6 A.M.	24th Nov. 1894.	Vomiting, purging, cramps and collapse.	..	9 p.m. 30th Dec. 1894.	Admitted into hospital at 8 A.M. on the 27th inst. as a case of enteric fever; inflammation of the intestines from the 16th inst. single rooms. A hospital patient taken to Asylum enclosure for electro-convulsion.
11	II. No. 1 block, Noisy enclosure.	Bari Singh.	40	Male	31st Dec. 1893.	8 A.M.	7th May 1894.	Vomiting, purging and collapse.	..	5 A.M. 2nd Jan. 1895.	
12	IV. 2nd room of second room.	Murayadu.	45	Do.	1st Jan. 1895.	4-30 A.M.	29th Aug. 1870.	Purging, cramps and collapse.	..	2-30 p.m. 1st Jan. 1895.	

APPENDIX A—continued.

No.	Block in Section.	Name.	Sex.	Of coming to hospital		Date of coming to asylum.	Symptoms.	Result.	
				Date.	Hour.			Alive.	When died.
13	IV. No. 6 block ...	Koman Nair ...	Male	1st Jan. 1895.	7-30 A.M.	20th Mar. 1895.	Fraging and collapse ...	...	3 P.M., 1st Jan. 1895.
14	IV. No. 6 block ...	Pethan Achary ...	Do.	Do.	11-25 A.M.	29th July 1894.	Purgings, cramps and collapse.	...	5 A.M., 2nd Jan. 1895.
15	V. 13, single rooms.	Ammanji ...	Female	Do.	5 P.M.	14th Aug. 1890.	Vomiting and purging, cramps collapse.	...	1-30 P.M., 2nd Jan. 1895.
16	IV. No. 4, General cottage.	Babji ...	Male	Do.	5-55 P.M.	18th May 1872.	Vomiting, purging and collapse.	...	12-25 P.M., 2nd Jan. 1895.
17	II. No. 6, block ...	Chelun ...	Do.	Do.	6 P.M.	1st June 1884.	Do.	...	10-10 A.M., 2nd Jan. 1895.
18	IV. No. 3, General cottage.	Chokkajayachetti Narayana.	Do.	Do.	12 P.M.	15th Aug. 1892.	Purgings and collapse ...	1	10-45 P.M., 2nd Jan. 1895.
19	IV. No. 5 block ...	Kanna Pillay ...	Do.	2nd Jan. 1895.	1-30 A.M.	31st May 1896.	Do.	...	7-25 A.M., 5th Jan. 1895.
20	IV. No. 4, single rooms.	Sevathian ...	Do.	Do.	5-30 A.M.	19th Nov. 1893.	Do.	...	...
21	IV. No. 5 block ...	Kathiyalarpa Muthu Katti.	Do.	Do.	10-30 A.M.	22nd Aug. 1894.	Vomiting, purging and collapse.	...	...
22	III. Criminal ward.	Krishnaswamy ...	Do.	Do.	7 A.M.	17th Oct. 1890.	Premontory diarrhoea for 6 hours; vomiting, purging and collapse.	...	8-50 A.M., 5th Jan. 1895.
23	III. Criminal ward.	Thunna Paul ...	Do.	3rd Jan. 1895.	5-20 A.M.	19th Jan. 1895.	Premontory diarrhoea for 4 hours; vomiting, purging, suppression of urine and collapse.	1	...
24	IV. No. 1 block ...	Apparna ...	Do.	Do.	8 A.M.	3rd July 1894.	Vomiting, purging, suppression of urine and collapse.	1	...
25	III. No. 1 block ...	Bheema ...	Do.	Do.	8 P.M.	3rd Dec. 1893.	Premontory diarrhoea for 5 hours; vomiting, purging, suppression of urine and collapse.	...	4-15 P.M., 6th Jan. 1895.
26	IV. No. 3 block ...	Hari Mahandi ...	Do.	Do.	8-30 P.M.	10th Aug. 1892.	Vomiting, purging and collapse.	1	...
27	IV. No. 3 block ...	Narayanaswamy ...	Do.	4th Jan. 1895.	4-30 A.M.	25th Oct. 1887.	Purgings and collapse ...	1	...
28	V. Filthy cot-tage.	Ankan ...	Female	Do.	7 A.M.	21st Mar. 1890.	Do.	...	10 P.M., 4th Jan. 1895.
29	III. Filthy cot-tage.	Antony, II ...	Male	Do.	11-15 A.M.	3rd Oct. 1892.	Premontory diarrhoea for 4 hours; vomiting, purging, suppression of urine and collapse.	...	6-40 P.M., 5th Jan. 1895.
30	III. Filthy cot-tage.	Abdul Rahim ...	Do.	Do.	9-15 P.M.	20th Dec. 1898.	Vomiting, purging, suppression of urine and collapse.	...	11-15 P.M., 5th Jan. 1895.
31	IV. 5th cell of C single rooms.	Muruga Thara. Gan.	Do.	Do.	9-30 P.M.	9th Aug. 1892.	Vomiting, purging, suppression of urine and collapse.	1	...

No.	Block in Section.	Name.	Sex.	Of coming to hospital		Date of coming to asylum.	Symptoms.	Result.
				Date.	Hour.			
32	II. No. 5 of 8 rooms.	Adampalam ...	Do.	15th Jan. 1895.	5-30 A.M.	15th Dec. 1891.	Purgings, cramps and collapse ...	1
33	III. No. 1 block ...	Shank Daved ...	Do.	Do.	6 A.M.	28th Dec. 1894.	Vomiting, purging, suppression of urine, cramps and collapse.	...
34	III. No. 1 block ...	Yekoni ...	Do.	Do.	10-10 A.M.	10th Aug. 1895.	Premontory diarrhoea for 1 hour; vomiting, purging, suppression of urine and collapse.	...
35	III. Civil ward ...	Syed Lateef ...	Do.	Do.	12 noon	15th Aug. 1892.	Premontory diarrhoea for 2 hours; purging and collapse.	...
36	III. Civil ward ...	Shodalay Madan ...	Do.	Do.	9 P.M.	14th Jan. 1880.	Premontory diarrhoea for 1 hour; purging, suppression of urine and collapse.	...
37	IV. No. 5 block ...	Venkaswamy ...	Do.	Do.	5-20 P.M.	15th Oct. 1876.	Vomiting, purging, suppression of urine, collapse.	...
38	III. No. 6 block ...	Gudli Govinappa.	Do.	9th Jan. 1895.	7 A.M.	10th Aug. 1894.	Premontory diarrhoea for 7 hours; vomiting, purging, suppression of urine, collapse.	...
39	II. Noisy enclosure.	Veri Mancharia ...	Do.	8th Jan. 1895.	9 A.M.	22d Aug. 1874.	Vomiting, purging, suppression of urine, cramps and collapse.	...
40	III ...	Peter Murray ...	Do.	Do.	1 P.M.	15th July 1876.	Premontory diarrhoea for 10 hours; vomiting, purging, suppression of urine and collapse.	...
41	II. No. 4 block of 8 rooms.	Damb Maria ...	Do.	9th Jan. 1895.	1-45 A.M.	9th Oct. 1889.	Vomiting, purging, suppression of urine, cramps and collapse.	...
42	II. No. 3 block of 8 rooms.	Veeraswamy Nalder.	Do.	10th Jan. 1895.	12-30 A.M.	10th May 1887.	Vomiting, purging, suppression of urine, cramps and collapse.	...
43	I. Filthy cottage.	Bhann Amma Sath.	Do.	12th Jan. 1895.	6 A.M.	13th Dec. 1893.	Vomiting, cramps in the abdomen and collapse.	...
44	V. No. 2 General cottage.	Mrs. Kruger ...	Female	Do.	7-30 A.M.	20th Dec. 1885.	Purgings and collapse ...	...

MADRAS LUNATIC ASYLUM, }
16th January 1895.

D. H. COOM, Surgeon-Major,
Supt., Government Lunatic Asylum.

APPENDIX B.

Statement showing the occurrence of Epidemics of Cholera during the past ten years and the number of Admissions and Deaths in each.

Years.	Years.		Deaths.	Years.		Admissions.	Deaths.
	1885	1886		1890	1891		
1885	...	...	...	...	...	...	...
1886	...	...	...	...	...	...	...
1887	...	...	...	...	...	...	...
1888	...	...	...	...	...	...	...
1889	...	...	...	...	...	...	...
1890	...	...	...	...	...	...	...
1891	...	...	...	...	...	...	...
1892	...	...	...	...	...	...	...
1893	...	...	...	...	...	...	...
1894	...	...	...	...	...	...	...
1895	...	...	...	...	...	...	...

* From 29th to 31st December only.

Note.—The epidemic of 1894 has extended into 1895, bringing the total up to date to 41 admissions and 82 deaths.

MADRAS LUNATIC ASYLUM, }
16th January 1895.

D. H. COOM, Surgeon-Major,
Supt., Government Lunatic Asylum.

APPENDIX C.

No.	Block in Section.	Name.	Age.	Sex.	Of coming to hospital		Date of coming to Asylum.	Symptoms.	Result.		Remarks.
					Date	Time			Alive.	When died.	
45	No. 3 cell of 10 single rooms, Sec. II, 83.	Abbey...	30	Male	18th Jan. 1895.	5-30 A.M.	1st Aug. 1889.	Vomiting and purging; collapse and suppression of urine.	...	11 P.M., 18th Jan. 1895.	
46	No. 6 cell of 10 single rooms, Sec. II, 83.	Rangiah	25	Do.	21st Jan. 1895.	5-45 A.M.	8th Nov. 1893.	Vomiting and purging; collapse and suppression of urine.	...	5-15 P.M., 23rd Jan. 1895.	
47	No. 1 cell of 10 single rooms, Sec. II, 83.	Siva	32	Do.	Do.	11 A.M.	23d July 1892.	Vomiting and purging; collapse and suppression of urine.	1	...	Slept in No. 7 block of 8 rooms, Sec. II.
48	Do. do.	Chennierally	35	Do.	Do.	7-15 P.M.	19th Jan. 1892.	Vomiting and purging; collapse and suppression of urine.	...	10 P.M., 21st Jan. 1895.	Slept in No. 3 block of 8 rooms, Sec. II.
49	First cell of 10 single rooms, Sec. II, 83.	Unknown (Mad. case)	32	Do.	22nd Jan. 1895.	3-15 P.M.	15th April 1893.	Vomiting and purging; collapse and suppression of urine.	...	12-30 A.M., 29th Jan. 1895.	
50	Fifth cell of 10 single rooms, Sec. II, 111.	Unknown (Mad. case)	30	Do.	Do.	5-10 P.M.	17th Dec. 1892.	Vomiting and purging; collapse and suppression of urine.	...	5 A.M., 23rd Jan. 1895.	
51	No. 1 block, Sec. II, 12.	Kandakutti	30	Do.	23rd Jan. 1895.	3 A.M.	27th Sept. 1894.	Purging	1	...	
52	Fifth cell of 10 single rooms, Sec. II, 111.	Appala...	30	Do.	Do.	3-30 A.M.	27th May 1891.	Vomiting and purging; collapse and suppression of urine.	...	7 P.M., 23rd Jan. 1895.	
53	No. 3 block of 8 rooms, Sec. II, 20.	Beson alias Pala-ny.	35	Do.	Do.	4 A.M.	18th Feb. 1895.	Vomiting and purging; collapse and suppression of urine.	...	4-15 P.M., 24th Jan. 1895.	
54	8 rooms, Sec. II, 20.	Rangiah	30	Do.	Do.	4-15 A.M.	20th Oct. 1884.	Vomiting and purging; collapse and suppression of urine.	...	7-45 A.M., 27th Jan. 1895.	Was under treatment for aneurism.
55	Fifth cell of 10 single rooms, Sec. II, 111.	Syed Ahmed II.	40	Do.	Do.	5 A.M.	18th Nov. 1894.	Vomiting and purging; collapse and suppression of urine.	...	7 P.M., 23rd Jan. 1895.	
56	Fifth cell of 10 single rooms, Sec. II, 111.	Ramiah I.	28	Do.	Do.	5 A.M.	21st Mar. 1893.	Purging	1	...	
57	8th block, 8 rooms, Sec. II, 25.	Sheik Hassan	50	Do.	24th Jan. 1895.	8-30 A.M.	11th May 1897.	Vomiting and purging	1	...	
58	2nd block, 8 rooms, Sec. II, 30.	Kohala	30	Do.	Do.	3-45 A.M.	20th Nov. 1892.	Do. do.	1	...	
59	2nd block, 8 rooms, Sec. II, 31.	Tanka Mador	30	Do.	26th Jan. 1895.	3 A.M.	3rd Feb. 1891.	Do. do.	1	...	
60	8th block, 8 rooms, Sec. II, 28.	Ramanna II.	30	Do.	Do.	9-45 A.M.	6th Sept. 1893.	Vomiting and purging; collapse and suppression of urine.	...	10-40 A.M., 28th Jan. 1895.	
61	5th block, 8 rooms, Sec. II, 29.	Syed Ahmed I.	40	Do.	Do.	4-45 P.M.	23rd Oct. 1894.	Vomiting and purging; collapse and suppression of urine.	...	5-15 P.M., 28th Jan. 1895.	
62	4th block, 8 rooms, Sec. II, 29.	Unknown (Nursing case)	35	Do.	27th Jan. 1895.	3-30 A.M.	8th May 1879.	Vomiting and purging; collapse and suppression of urine.	...	...	
63	5th block, 8 rooms, Sec. II, 28.	Kolappa	35	Do.	28th Jan. 1895.	7-30 A.M.	30th Jan. 1894.	Purging	1	...	
64	3rd cell of 15 single rooms, Sec. II, 53.	Parthasarathy	30	Do.	30th Feb. 1895.	4-20 A.M.	21st Jan. 1895.	Vomiting and purging; collapse and suppression of urine.	...	5-40 P.M., 9th Feb. 1895.	

STATEMENTS I TO XI.

Discipline in the Madras Presidency during the year 1891 and ten previous years.

Discipline in the Madras Presidency during the year 1891 and ten previous years.

9			10			11											
Daily average strength.			Daily average sick.			Percentage to											
						Daily average strength.						Admissions.					
						A.			B.			C.			D.		
						Cured.			Died.			Cured.			Died.		
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
261.50	98.50	360.00	7.52	4.35	11.77	17.49	5.12	15.00	4.57	12.18	6.94	29.05	21.06	35.00	11.30	11.57	19.23
297.54	110.41	417.61	8.00	4.50	14.50	5.12	4.54	7.18	3.57	5.33	3.59	24.03	15.62	25.00	19.57	12.59	17.02
215.25	115.25	330.50	8.04	4.03	12.62	23.79	15.45	22.60	5.03	6.70	6.03	63.78	67.61	66.21	18.42	13.52	19.50
331.75	119.50	451.25	11.74	7.23	13.87	12.66	5.86	11.75	9.04	6.09	5.87	33.53	47.61	35.33	21.50	7.60	20.60
347.50	121.50	469.00	11.14	4.20	15.34	8.05	8.23	8.10	3.75	10.60	7.03	27.72	35.44	29.02	19.50	10.00	26.98
341.50	111.50	453.00	12.80	4.65	17.13	11.04	10.70	13.65	7.61	15.24	9.40	54.42	52.17	51.39	2.57	13.41	37.71
329.58	193.44	523.97	20.36	5.04	29.40	9.71	11.60	10.13	17.80	21.26	18.70	33.82	34.78	29.13	53.15	62.55	55.47
318.28	101.72	420.00	11.81	4.60	16.41	9.73	9.83	9.78	23.87	20.64	23.00	25.83	28.50	25.30	63.53	50.00	56.87
304.08	104.27	408.25	20.45	9.24	38.75	19.32	17.25	12.46	17.37	17.26	17.34	21.41	30.76	20.61	31.77	50.12	39.87
319.67	105.83	425.00	71.97	21.22	98.25	11.98	13.20	12.30	10.48	11.24	11.38	30.73	35.88	32.43	20.71	41.66	29.94
303	111	474	81	21	82	9.22	7.20	5.28	11.84	11.71	11.87	27.45	22.45	20.50	32.52	37.13	33.73

PLAN

The maximum number of lunatics confined during any one night in 1892 was of--										
Males	222	333	444	555	666	777	888	999	111	222
Females	111	222	333	444	555	666	777	888	999	111
Total	333	555	777	1000	1222	1333	1444	1555	1666	333

PATAM

43-55	8-83	52-43	2-75	0-11	2-35	18-36	33-78	20-98	9-18	11-25	9-53	100-00	100-00	100-00	50-00	33-33	45-15
42-10	8-87	50-47	1-91	0-36	2-27	16-63	35-54	19-81	11-88	...	9-90	77-77	150-00	90-90	55-55	...	45-45
42-95	7-19	50-14	0-39	...	0-38	9-31	13-90	9-97	6-98	...	5-88	46-03	100-00	45-45	30-00	...	27-27
44-43	7-73	52-19	0-61	0-31	0-92	15-74	12-63	15-32	4-49	...	3-83	63-63	50-00	61-53	18-18	...	15-83
43-32	6-09	53-30	1-02	2-70	3-72	4-61	10-02	5-62	...	10-02	1-87	59-00	20-00	33-33	...	20-00	11-11
43-71	12-25	55-96	0-24	0-32	0-46	2-28	8-16	3-37	...	...	...	50-00	33-33	40-00	...	...	...
41-85	11-26	53-11	1-16	0-36	1-42	4-77	6-88	5-04	9-55	17-75	11-29	28-57	...	42-85	57-14	...	83-71
42-07	10-52	52-59	2-00	0-19	2-19	4-75	9-50	5-70	9-50	...	7-60	20-00	50-00	25-00	40-00	...	33-33
32-61	10-58	42-38	3-38	2-24	6-17	12-50	...	9-33	21-87	18-38	20-88	80-03	...	50-00	130-00	68-56	112-50
28-19	12-30	41-09	3-78	2-91	6-39	10-61	...	7-30	3-55	...	2-43	21-43	...	18-75	7-14	...	6-25
36-11	13-09	49-20	5-09	2-73	7-32	5-54	7-64	6-10	5-54	...	4-06	20-00	50-00	25-00	20-00	...	16-06

The maximum number of lunatics confined during any one night in 1894 was of—

[illegible]

Total ... 53

OUT

75-27	30-33	108-60	2-80	0-73	3-53	26-83	16-48	23-94	3-11	3-29	4-06	56-73	41-68	53-06	10-81	3-33	10-26
85-03	28-35	113-38	2-41	0-93	3-39	15-29	17-69	15-89	7-05	3-53	6-17	59-03	50-05	56-25	27-27	10-00	21-81
76-78	28-06	104-84	4-24	0-37	1-01	13-02	17-82	14-30	1-30	...	0-35	125-00	500-60	166-06	12-50	...	11-11
91-39	26-45	117-84	1-11	0-47	1-53	16-94	7-56	10-13	4-38	...	3-39	24-39	36-66	27-27	9-76	...	9-60
96-56	26-12	122-68	2-35	0-73	3-03	16-46	26-80	16-36	4-14	3-83	4-07	54-17	57-59	62-50	10-66	12-50	16-63
105-03	29-27	134-50	5-30	0-61	3-94	1-40	6-83	2-98	-4-76	10-25	5-45	14-23	16-66	15-83	36-71	25-06	30-77
92-81	34-28	134-09	4-55	1-25	5-30	12-01	14-58	12-67	20-03	20-42	20-13	42-83	31-25	38-63	71-92	43-75	61-96
106-85	34-15	141-60	7-39	0-78	8-15	11-23	14-64	12-05	3-42	11-71	-9-21	37-50	71-43	43-59	28-12	57-14	33-33
69-11	29-39	118-50	8-16	0-72	8-38	10-08	17-01	18-57	25-81	3-40	20-25	109-02	125-00	104-76	135-29	23-80	114-28
60-80	24-04	84-34	6-08	2-02	8-10	13-27	4-16	10-67	21-56	8-32	17-79	34-79	20-00	32-14	50-62	40-00	33-57
72-68	25-39	98-07	10-14	4-32	16-07	21-77	11-82	21-41	8-26	...	6-12	46-15	60-00	47-73	15-38	...	13-61
471-79	140-48	621-27	76-23	28-66	164-89	11-87	8-03	10-95	10-81	8-70	10-30	31-11	28-57	30-63	23-36	50-95	26-89

The maximum number of lunatics confined during any one night in 1884 was of—

[illegible]

Total ... 105

STATEMENT No. III—continued.

Return showing the Religion, Sex and Residence of Patients admitted into the Lunatic Asylums in the Madras Presidency during the year 1894—continued:

1 Districts.	2 Christians.						3 Hindus.			4 Muhammadians.			5 Other Castes.			6 Total.		
	Europeans and Eurasians.			Natives.														
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
VIZAGAPATAM.																		
Vizagapatam	...	...	...	...	...	...	3	1	4	1	...	1	...	...	...	4	1	5
Ganjām	...	...	...	...	...	...	1	1	2	...	...	...	...	...	...	1	1	2
Goddavari	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kistna	...	...	...	1	...	1	...	...	...	1	...	...	...	...	...	1	...	1
Trivandram	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Total	...	...	...	1	...	1	7	2	9	2	...	2	...	...	...	10	2	12
CALICUT.																		
Coimbatore	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Canara, South	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Ceded Districts	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Malabar	...	...	...	3	...	3	14	1	15	17	3	20	...	1	1	34	5	39
North Arcot	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Vizagapatam	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Total	...	...	...	3	...	3	19	1	20	17	3	20	...	1	1	39	5	44
Grand Total	26	7	33	7	1	8	93	23	118	43	6	48	12	3	15	180	42	222

STATEMENT No. IV.

Return showing the previous Occupation of Patients admitted into the Lunatic Asylums in the Madras Presidency during the year 1894.

1 Name of Asylum.	2 Madras.			3 Vizagapatam.			4 Calicut.			5 Total.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Astronomer	...	...	...	...	...	...	...	...	...	...	...	...
Auditor	...	...	...	...	...	...	...	...	...	...	...	...
Blacksmith	...	...	...	...	...	...	...	...	...	...	...	...
Butcher	...	...	...	...	...	...	...	...	...	...	...	...
Beggar	...	...	...	...	...	...	...	...	...	...	...	...
Bricolayer	...	...	...	...	...	...	...	...	...	...	...	...
Bangle seller	...	...	...	...	...	...	...	...	...	...	...	...
Cultivator	...	...	...	...	...	...	...	...	...	...	...	...
Carrier	...	...	...	...	...	...	...	...	...	...	...	...
Cowherd	...	...	...	...	...	...	...	...	...	...	...	...
Cook	...	...	...	...	...	...	...	...	...	...	...	...
Catechist	...	...	...	...	...	...	...	...	...	...	...	...
Constable	...	...	...	...	...	...	...	...	...	...	...	...
Cart driver	...	...	...	...	...	...	...	...	...	...	...	...
Dancer and singer	...	...	...	...	...	...	...	...	...	...	...	...
Door-keeper	...	...	...	...	...	...	...	...	...	...	...	...
Engineer	...	...	...	...	...	...	...	...	...	...	...	...
Engine driver	...	...	...	...	...	...	...	...	...	...	...	...
Goldsmith	...	...	...	...	...	...	...	...	...	...	...	...
Knife grinder	...	...	...	...	...	...	...	...	...	...	...	...
Money lender	...	...	...	...	...	...	...	...	...	...	...	...
Potter	...	...	...	...	...	...	...	...	...	...	...	...
Printer	...	...	...	...	...	...	...	...	...	...	...	...
Railway guard	...	...	...	...	...	...	...	...	...	...	...	...
Rice pounder and husker	...	...	...	...	...	...	...	...	...	...	...	...
School Mistress	...	...	...	...	...	...	...	...	...	...	...	...
Sepoys	...	...	...	...	...	...	...	...	...	...	...	...
Soldiers	...	...	...	...	...	...	...	...	...	...	...	...
Servants, menial	...	...	...	...	...	...	...	...	...	...	...	...
Stationmaster	...	...	...	...	...	...	...	...	...	...	...	...
Sweetmeat seller	...	...	...	...	...	...	...	...	...	...	...	...
Trader	...	...	...	...	...	...	...	...	...	...	...	...
Tailor	...	...	...	...	...	...	...	...	...	...	...	...
Toddy-braver	...	...	...	...	...	...	...	...	...	...	...	...
Telegraph signaller	...	...	...	...	...	...	...	...	...	...	...	...
Writer	...	...	...	...	...	...	...	...	...	...	...	...
Washerman	...	...	...	...	...	...	...	...	...	...	...	...
Went	...	...	...	...	...	...	...	...	...	...	...	...
Wood-cutter and sawer	...	...	...	...	...	...	...	...	...	...	...	...
None	...	...	...	...	...	...	...	...	...	...	...	...
Cotton dyc	...	...	...	...	...	...	...	...	...	...	...	...
Labourer (agricultural)	...	...	...	...	...	...	...	...	...	...	...	...
Medical practitioner	...	...	...	...	...	...	...	...	...	...	...	...
Milk, curds and butter sellers	...	...	...	...	...	...	...	...	...	...	...	...
Pilgrim undertaker	...	...	...	...	...	...	...	...	...	...	...	...
Share of property receiver	...	...	...	...	...	...	...	...	...	...	...	...
Unskilled labourer	...	...	...	...	...	...	...	...	...	...	...	...
Barman	...	...	...	...	...	...	...	...	...	...	...	...
Book-binder	...	...	...	...	...	...	...	...	...	...	...	...
Book-seller	...	...	...	...	...	...	...	...	...	...	...	...
Carpenters	...	...	...	...	...	...	...	...	...	...	...	...
Lamp-lighter	...	...	...	...	...	...	...	...	...	...	...	...
Prostitute	...	...	...	...	...	...	...	...	...	...	...	...
Teacher	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...
Total	131	35	166	10	2	12	39	5	44	180	42	222

* 1 European.

† 1 European.

‡ 13 Europeans.

§ 1 European female.

The occupation of the 26 European and Eurasian males and 7 European and Eurasian females admitted during 1894 were as follows:—

Males.			Males—cont.			Females.		
Railway Guard	...	2	Station Master	...	1	School Mistress	...	1
Signaller	...	1	Engine Driver	...	2	No occupation	...	6
Soldiers	...	13	Writer	...	3			
Engineer	...	1						

STATEMENT No. V.

Return showing the Ages of Patients admitted into the Lunatic Asylums in the Madras Presidency during the year 1894.

1	2			3			4			5			6		
	Under 20 years.			20 to 40.			40 to 60.			Upwards of 60 years.			Total.		
Name of Asylum.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Madras	4	12	16	101	28	129	24	5	29	12	...	2	131	35	166
Vizagapatam	...	...	...	6	1	7	4	1	5	...	...	...	10	2	12
Calicut	4	...	4	29	5	34	6	...	6	...	...	...	39	5	44
Total	8	2	10	136	34	170	34	6	40	2	...	2	180	42	222

STATEMENT No. VI.

Return showing the Types of Insanity of the Lunatics in the Asylums in the Madras Presidency during the year 1894.

1		2		3		4		5		6		7		8			
199. Mania.		193. Melancholia.		194. Dementia including acquired imbecility.		192. Idiocy.		195. Epileptic insanity.		190. Toxic insanity.		191. Use of bang.		Optical insanity (Mental and Chlamy).			
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
235	74	309	43	15	58	29	3	31	23	5	27	20	9	29	1	1	2
111	29	140	8	2	10	...	...	...	5	1	6	5	3	9	...	...	...
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
28	8	36	6	...	6	...	...	...	...	...	...	1	...	1	...	...	...
31	8	39	5	2	7	...	...	...	2	1	3	1	1	2	...	...	...
27	8	35	4	3	7	5	...	6	2	1	3	3	1	4	...	...	...
290	79	369	30	12	42	23	3	26	23	4	27	21	11	32	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated		342	51	17	68	28	3	31	27	6	33	23	12	35	1	1	2
Total treated</																	

STATEMENT No. VII—continued.

Table showing the alleged Causes of Insanity among the Lunatics in the Asylums in the Madras Presidency during the year 1894—continued.

Table showing the alleged Causes of Insanity among the Lunatics in the Asylum at the Government of India																								
Cases.		15	16	17	18	19	20	21	22	23	24	25	26											
Physical Causes—continued.																								
Cases.	Concussion of brain.	Puerperal.		Privation and starvation.		Syphilis.		Contagious disease in jail.		Ill-treatment.		Previous attacks.		Intemperance.		Old age.		Other diseases.		Total.		Total.	Physical.	
		Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.			
Remained	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Admitted	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Non-criminal	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Total treated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Recovered	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Discharged	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Died	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Remaining	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
MADRAS.																								
VIZAGAPATAM.																								
Remained	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Admitted	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Total treated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Recovered	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Died	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Remaining	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
CALCUTTA.																								
Remained	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Admitted	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Total treated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Recovered	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Died	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Remaining	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Grand Total treated																								

VIZAGAPATAM.

CALCUT.

STATEMENT No. VII—continued.

Table showing the alleged Causes of Insanity among the Lunatics in the Asylums in the Madras Presidency during the year 1894—continued.

1		2	3	4	5	6	7	8	9	10	11															
Moral Causes.																										
Grief.	Family quarrel.	Misfortune.		Religion.		Infidelity on the part of wife.		Love and jealousy.		Loss of property.		Overstudy.		Loss of friends.		Fright and nervous shock.										
		Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.										
Remained Admitted	{ Criminal Non-criminal	7	5	12	9	9	9	9	3	2	5	11	4	75	5	5	4	4	6	1	...	1	1	4	3	7
		2	...	2	...	...	...	...	...	...	...	...	...	...	1	1	1	...	4	...	...	...	...	1	1	1
Recovered	{ Criminal Discharged otherwise	1	1	2	7	6	12	...	1	...	...	4	1	5	4	...	...	...	4	...	...	...	...	...	...	...
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Died	{ Criminal Discharged otherwise	10	6	16	16	6	21	4	2	6	16	5	21	10	10	4	4	4	12	1	...	1	1	1	6	9
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Remaining	{ Criminal Discharged otherwise	...	3	3	2	1	3	1	...	1	3	...	3	4	4	...	...	1	...	...	...	...	...	...	...	...
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total treated	{ Criminal Discharged otherwise	8	2	10	11	3	14	3	1	4	10	4	14	5	5	4	4	10	1	...	1	1	1	4	6	22
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

VIZAGAPATAM.																											
Remained Admitted	{ Criminal Discharged otherwise	1	1	2	...	...	...	...	1	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Recovered	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Died	{ Criminal Discharged otherwise	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Remaining	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Total treated	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	

CALCUT.																											
Remained Admitted	{ Criminal Discharged otherwise	5	1	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Recovered	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Died	{ Criminal Discharged otherwise	6	1	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Remaining	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Total treated	{ Criminal Discharged otherwise	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Grand Total treated	{ Criminal Discharged otherwise	17	8	25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	

VIZAGAPATAM.

CALCUT.

STATEMENT NO. VII.—continued.
Table showing the alleged Causes of Insanity among the Lunatics in the Asylums in the Madras Presidency during the year 1894—continued.

	12	13	14	15	16	17	18	19	20	21	22	23
	Moral Causes—continued.											
	Anger.	Mental anxiety.	Disappointment.	Degrade.	Desertion of husband.	Evil belief.	Fear.	Family bereavement.	Total, Moral.	Total known Moral and Physical.	Total unknown.	Grand Total.
Remained Admitted	3	2	3	6	2	2	3	4	23	68	38	106
Recovered Discharged otherwise	3	3	3	1	1	1	1	1	14	33	3	47
Died	3	3	3	1	1	1	1	1	14	33	3	47
Remaining	3	3	3	1	1	1	1	1	14	33	3	47
Total treated	6	5	6	7	3	3	4	5	27	101	41	142
Remained Admitted	3	2	3	6	2	2	3	4	23	68	38	106
Recovered Discharged otherwise	3	3	3	1	1	1	1	1	14	33	3	47
Died	3	3	3	1	1	1	1	1	14	33	3	47
Remaining	3	3	3	1	1	1	1	1	14	33	3	47
Total treated	6	5	6	7	3	3	4	5	27	101	41	142
Grand Total treated	12	10	12	14	6	6	8	10	54	202	82	284

* Improved and handed over to friends under Section X of Act XXXVI of 1858.

† Improved
Not improved
Transferred to England
Do. Jail
Do. Civil List
Total

STATEMENT NO. VIII.

Return of Sick in the Hospitals of the Lunatic Asylums for the year 1894.

Diseases.	1		2		3		4		5				6	
	Remaining in hospital from the previous year.		Admitted during the year.		Total.		Total.		Results.				Remaining sick.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Discharged 'cured.'	Discharged 'otherwise.'	Died.	Remaining sick.	Males.	Females.
MADRAS.														
I.—GENERAL DISEASES.														
Group A.														
Sub-Group I.														
2. Cow-pox	...	...	...	...	2	2	2	2	...	...	...	...	...	...
11. Influenza	...	...	...	...	20	20	20	20	...	...	...	...	...	...
16. Simple continued fever	...	...	...	...	4	4	4	4	...	...	...	...	...	...
Var. Febricula	...	...	...	...	9	9	9	9	...	...	...	...	...	...
19. Cholera	...	...	...	...	11	9	2	11	...	...	...	...	...	...
22. Dysentery	...	...	...	...	53	7	60	60	...	...	...	...	...	...
Sub-Group II.														
23. Malarial fever—	...	...	...	...	13	2	15	13	...	...	...	...	...	...
(a) Intermittent	...	...	...	...	1	1	2	1	...	...	...	...	...	...
(b) Remittent	...	...	...	...	1	1	2	1	...	...	...	...	...	...
Sub-Group III.														
26. Erysipelas—	...	...	...	...	1	1	1	1	...	...	...	...	...	...
(a) Simple	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Sub-Group IV.														
29. Syphilis, secondary	...	...	...	...	2	2	4	4	...	...	...	...	...	...
Group B.														
Sub-Group I.														
35. Animal parasites 1-0.30.—	...	...	...	...	23	12	35	23	...	...	...	...	...	...
Ascari lumbricoides	...	...	...	...	3	3	5	3	...	...	...	...	...	...
36. Vegetable parasites—	...	...	...	...	3	3	5	3	...	...	...	...	...	...
(a) Thrush	...	...	...	...	3	3	5	3	...	...	...	...	...	...
Sub-Group III.														
40. Effects of the presence of foreign body *	...	...	...	...	1	1	1	1	...	...	...	...	...	...
42. Effects of excessive exertion and strain †	...	...	...	...	1	1	1	1	...	...	...	...	...	...
47. Effects of chemical agent (899 nitric acid) ‡	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Sub-Group IV.														
49. Surfeit §	...	...	...	...	22	18	110	92	...	...	...	...	...	...
Group C.														
56. Old age	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Group D.														
58. Rheumatism	...	...	...	...	6	6	6	6	...	...	...	...	...	...
62. Non-malignant new growth	...	...	...	...	1	1	1	1	...	...	...	...	...	...
IV-13 (a) Wart	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Non-malignant new growth	...	...	...	...	1	1	1	1	...	...	...	...	...	...
IV-10 (b) Chronic mammary tumour	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Non-malignant new growth	...	...	...	...	1	1	1	1	...	...	...	...	...	...
VI-19 (c) Condyloma	...	...	...	...	1	1	1	1	...	...	...	...	...	...
73. Anæmia	...	...	...	...	9	3	12	20	...	...	...	...	...	...
75. Idiopathic anæmia	...	...	...	...	2	2	2	2	...	...	...	...	...	...
II.—LOCAL DISEASES.														
Diseases of the Nervous System.														
Sub-Section 1.														
83. Hemorrhage—	...	...	...	...	1	1	1	1	...	...	...	...	...	...
Pia mater	...	...	...	...	1	1	1	1	...	...	...	...	...	...
60. Sclerosis—	...	...	...	...	1	1	1	1	...	...	...	...	...	...
1 (b) Insular of the lateral columns	...	...	...	...	1	1	1	1	...	...	...	...	...	...

* Plantain skin in bowel.

† 115. Hyperæsthesia.

‡ 437. Stricture œsophagus; 442(2) chronic inflammation of stomach;

§ 462. Tympanites, 3; 473. Diarrhœa, 94 and 475. Colic, 13.

STATEMENT No. VIII—continued.

Return of Sick in the Hospitals of the Lunatic Asylums for the year 1894—continued.

1			2			3			4			5									6		
Diseases.			Remaining in hospital from the previous year.			Admitted during the year.			Total.			Results.											
												Discharged 'cured.'			Discharged 'otherwise.'			Died.			Re-maining sick.		
			Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
MADRAS—continued.																							
II.—LOCAL DISEASES—cont.																							
Diseases of the Nervous System—cont.																							
Sub-Section 2.																							
93.	Hemiplegia	...	...	...	...	2	...	2	2	...	2	...	...	...	...	...	...	...	2	2			
117.	Neuralgia—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
	(a) Facial	...	...	...	...	9	2	11	9	2	11	9	2	11	...	...	...	...	...	...			
119.	Megrim	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
122.	Epilepsy	...	...	...	...	3	1	4	11	3	14	14	4	18	10	2	12	...	1	1			
124.	Hysteria	...	...	...	...	...	1	1	...	1	1	...	1	1	...	...	...	...	...	...			
Sub-Section 3.																							
129.	Mania	...	...	...	...	24	14	38	24	14	38	15	10	25	2	2	4	4	...	4			
130.	Melancholia	...	...	...	...	7	2	9	7	2	9	7	1	8	...	1	1	...	1	1			
131.	Dementia	...	...	...	...	1	...	1	15	9	16	6	3	9	...	1	1	1	1	2			
132.	Idiocy	...	...	...	...	2	...	2	2	...	2	...	...	1	...	1	...	...	1	1			
133.	General paralysis of insane.	...	...	...	...	1	...	1	4	...	4	5	2	...	2	1	...	1	1	1			
138.	Senile insanity	...	...	...	...	1	...	1	1	...	1	...	...	...	...	...	1	...	1	...			
Diseases of the Eye.																							
147.	Conjunctivitis—	...	...	...	...	12	...	12	11	...	11	10	...	10	...	...	...	...	...	1			
	(a) Catarhal	...	...	...	...	...	1	1	...	1	1	...	1	1	...	...	...	...	...	...			
	(d) Pterygetular	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
Diseases of the Ear.																							
254.	Inflammation of the external ear—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1			
	(a) Acute	...	...	...	...	17	...	17	17	...	17	16	...	16	...	...	...	...	...	...			
Diseases of the Respiratory System.																							
328.	Bronchitis—	...	...	...	...	6	...	6	6	...	6	6	...	6	...	...	...	...	...	...			
	(a) Acute	...	...	...	...	4	3	7	4	3	7	4	3	7	...	...	...	...	...	...			
	(b) Chronic	...	...	...	...	10	...	10	10	...	10	9	...	9	...	...	...	...	...	1			
	(c) Catarhal	...	...	...	...	1	...	1	1	...	1	...	...	1	...	1	...	...	...	...			
344.	Constriction of bronchi	...	...	...	...	2	...	2	2	...	2	2	...	2	...	...	...	...	...	...			
345.	Spasmodic asthma	...	...	...	...	1	...	1	1	...	1	...	...	1	...	...	...	...	...	...			
349.	Pneumonia—	...	...	...	...	5	2	7	5	2	7	2	1	3	1	...	1	1	1	2			
	(a) Lobular	...	...	...	...	3	1	4	3	1	4	2	...	2	...	...	1	1	2	1			
357.	Chronic pneumonic phthisis.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
Diseases of the Digestive System.																							
375.	Stomatitis	...	...	...	...	4	...	4	4	...	4	4	...	4	...	...	...	...	...	...			
388.	Caries, tooth	...	...	...	...	1	1	2	1	1	2	1	1	2	...	...	...	...	...	...			
392.	Abscess, dental periosteum.	...	...	...	...	5	...	5	5	...	5	5	...	5	...	...	...	...	...	...			
393.	Ulceration, gums	...	...	...	...	1	1	...	1	1	...	1	1	...	1	...	...	...	...	...			
442.	Inflammation, stomach—	...	...	...	...	6	1	7	6	1	7	4	1	5	...	...	1	...	1	1			
	2. Chronic	...	...	...	...	4	1	5	4	1	5	4	1	5	...	...	...	...	...	...			
	3. Catarhal	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
457.	Inflammation, intestines—	...	...	...	...	56	6	62	56	6	62	47	4	51	1	...	1	7	2	9			
	1. Catarhal	...	...	...	...	10	1	11	10	1	11	9	1	10	...	...	1	...	1	...			
	3. (a) Enteritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
468.	Hernia a-b (b) Reducible, inguinal, direct	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
474.	Constipation	...	...	...	...	47	18	65	47	18	65	47	13	65	...	...	...	...	...	...			
480.	Piles—	...	...	...	...	4	...	4	4	...	4	4	...	4	...	...	...	...	...	...			
	(a) Internal	...	...	...	...	2	...	2	2	...	2	2	...	2	...	...	...	...	...	...			
	(b) External	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
481.	Prolapsus	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
490.	Congestion of the liver	...	...	...	...	6	5	11	6	5	11	6	5	11	...	...	...	...	...	...			
Diseases of the Generative System.																							
588.	Urethritis	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
606.	Ulcer, prepuce	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
609.	Paraphimosis	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
614.	Abscess, scrotum	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
615.	Sloughing, scrotum	...	...	...	...	1	...	1	1	...	1	1	...	1	...	...	...	...	...	...			
735.	Inflammation, female breast,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...			
	(a) Acute	...	...	...	...	1	1	...	1	1	...	1	1	...	...	...	...	...	...	...			

STATEMENT No. VIII—continued.

Return of Sick in the Hospitals of the Lunatic Asylum for the year 1894—continued.

1			2			3			4			5									6		
Diseases.			Remaining in hospital from the previous year.			Admitted during the year.			Total.			Results.									Re- main- ing sick.		
												Discharged 'cured.'			Discharged 'otherwise.'			Died.					
			Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
MADRAS—continued.																							
II.—LOCAL DISEASES—cont.																							
Diseases of the Organs of Locomotion.																							
796. Inflammation, tendon— I. Achilles 1 ... 1 1 ... 1 1 ... 1 ...																							
Diseases of the Connective Tissue.																							
811. Inflammation 1 ... 1 11 4 15 12 4 16 12 4 16 ...																							
812. Abscess 1 ... 1 13 2 15 14 2 16 12 2 14 ...																							
Diseases of the Skin.																							
816. Erythema 1 ... 1 5 2 7 6 2 8 6 2 8 ...																							
820. Eczema 1 ... 1 5 2 7 6 2 8 6 2 8 ...																							
828. Psoriasis 2 1 3 2 1 3 1 1 2 ...																							
830. Herpes 1 ... 1 1 ... 1 1 ... 1 ...																							
833. Acne 2 ... 2 2 ... 2 2 ... 2 ...																							
835. Syccosis 1 ... 1 1 ... 1 1 ... 1 ...																							
840. Ulcer 28 12 40 28 12 40 23 11 34 ...																							
852. Boil 6 3 9 6 3 9 6 3 9 ...																							
856. Whitlow 2 ... 2 2 ... 2 2 ... 2 ...																							
(a) Onychia 2 ... 2 2 ... 2 2 ... 2 ...																							
870. Ringworm 6 5 11 6 5 11 6 5 11 ...																							
873. Itch 3 ... 3 104 10 114 107 10 117 104 7 111 ...																							
Poisoned Wounds.																							
990(a). (2). Scorpions 2 ... 2 2 ... 2 2 ... 2 ...																							
INJURIES.																							
General Injuries.																							
1000. Effects of chemical irritant (383-Lime) 1 ... 1 1 ... 1 1 ... 1 ...																							
Local Injuries.																							
Burns and scalds 1 1 2 1 1 2 1 1 2 ...																							
Abrasions 3 ... 3 3 ... 3 3 ... 3 ...																							
Bruises and contusions 23 ... 23 23 ... 23 23 ... 23 ...																							
Wounds 28 11 39 28 11 39 28 11 39 ...																							
Scalp wounds 13 5 18 13 5 18 13 5 18 ...																							
Strains and sprains 8 2 10 8 2 10 8 2 10 ...																							
Displacement of parts 1 ... 1 1 ... 1 1 ... 1 ...																							
Concussion 1 1 ... 1 1 ... 1 1 ...																							
Total ... 25 4 29 832 210 1042 857 214 1071 733 177 910 23 8 31 42 13 55 59 16 75																							
VIZAGAPATAM.																							
I.—GENERAL DISEASES.																							
Group A.																							
Sub-Group I.																							
16. Simple continued fever 9 8 17 9 8 17 9 7 16 ...																							
32. Dysentery 2 ... 2 2 ... 2 2 ... 2 ...																							
Sub-Group II.																							
23. Malarial fevers— (a). Intermitent 4 1 5 4 1 5 3 1 4 ...																							
Sub-Group IV.																							
29(b). Syphilis, secondary 2 ... 2 2 ... 2 1 ... 1 ...																							
Group B.																							
35(30). Ascaris lumbricoides 1 1 ... 1 1 ... 1 1 ...																							
Group C.																							
55. Debility 1 1 ... 1 1 ... 1 1 ...																							

NOTE.—One death from suicide 'out of hospital' not included in the above return.

STATEMENT No. VIII—continued.

Return of Sick in the Hospitals of the Lunatic Asylums for the year 1894—continued.

Diseases.	2		3		4		5						6	
	Remaining in hospital from the previous year.		Admitted during the year.		Total.		Results.						Re-remaining sick.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Discharged 'cured.'	Discharged 'otherwise.'	Died.	Males.	Females.
CALICUT—continued.														
II.—LOCAL DISEASES—cont.														
Diseases of the Respiratory System.														
338. Bronchitis ...			1	1	2	1	1	2	1	1				
359. Chronic pneumonic phthisis ...			1		1	1		1					1	
Diseases of the Digestive System.														
442. Inflammation—														
(2). Chronic ...			1		1	1		1						
490. Congestion of liver ...			1	1	2	1	1	2	1	1				
492 (a). Hepatitis ...			1	1	2	1	1	2	1	1				
(c). Cirrhosis ...			1	1	2	1	1	2	1	1				
Diseases of the Urinary System.														
650. Acute nephritis ...			2		2	2		2						
651. Bright's disease ...			1		1	1		1						
674. Inflammation of bladder—														
(c). Chronic ...			1		1	1		1						
Affection connected with pregnancy.														
710. Premature labour ...			1		1	1		1						
Diseases of Connective Tissues.														
812. Abscess ...			6		6	6		6						
Diseases of the Skin.														
828. Psoriasis ...			1		1	1		1						
849. Ulcer ...			1		1	1		1						
870. Ringworm ...			1		1	1		1						
General Injuries.														
959. Effects of cold ...			1	1	2	1	1	2	1	1				
Local Injuries.														
Scalp wound—														
(a) Bone not exposed ...			1	1	2	1	1	2	1	1				
Contusion ...			1	1	2	1	1	2	1	1				
Wound ...			1	1	2	1	1	2	1	1				
Total ...	3	2	5	83	32	115	86	34	120	62	25	87	4	2

STATEMENT No. IX.

Showing the Cash Account of the Lunatic Asylum for the year 1894.

Receipts.			Charges.									
Asylums.	Received from Treasury.	Received from paying patients.	Value of Stores received from the manufacturing department.	Book receipts, i.e. the total of expenditure entered in Columns 19, 20, and 21.		Miscellaneous receipts.	Total.	Establishment.		Diet.	Clothing and Bedding.	
				Establishment proper.	Superintendence.							
1	2	3	4	5	6	7		8	9	10	11	
Madras	75,182 10 5	8,581 2 1	(a) 3,509 0 9	9,565 13 5	6,409 6 3	97,278 0 1		21,822 7 2	16,510 5 11	34,414 5 3	2,493 14 2	
Vizagapatam	4,709 1 10	50 5 5	(a) 942 10 1	2,439 0 9	.....	8,181 2		1,906 13 5	600 0 0	1,535 8 6	115 9 0	
Calicut	12,423 11 0	40 2 5	(c) 1,013 15 7	3,457 12 9	563 6 10	16,959 0 7		3,450 7 8	600 0 0	5,950 14 2	343 0 0	
Total	92,315 7 3	8,711 9 11	5,555 10 5	15,402 10 11	472 13 1	1,22,458 3 7		27,188 12 3	11,710 5 11	41,960 11 11	2,982 1 2	

Charges—continued.											
Asylums.	Bazaar medicines.	Contingencies.		Remitted to Treasury on account of paying patients, &c.	Miscellaneous items.	Total of columns 8-17.	Book charges.			Total of columns 18-21.	
		Contingencies proper.	Repairs and maintenance.				Charges on account of work done by Public Works Department.	Cost of Printed forms and stationery.	Cost of English Stores and medicines, &c.		
	12	13	14	15	16	17	18	19	20	21	22
Madras	26 4 0	1,204 5 8	55 12 5	.....	11,212 5 9	(c) 3,542 13 5	85,972 8 6	(c) 9,168 6 2	124 14 9	222 8 6	94,875 5 11
Vizagapatam	0 1 5	33 0 6	.....	.....	648 0 5	(c) 312 8 10	5,151 4 2	(f) 2,454 4 7	3 12 0	1 0 2	7,590 4 11
Calicut	108 4 0	276 7 10	495 12 5	0 13 6	794 3 6	(f) 1,302 12 8	13,331 11 9	(k) 3,195 7 5	20 9 6	(m) 251 11 8	18,759 8 5
Total	134 10 3	1,533 14 0	551 8 10	0 13 6	12,654 7 8	5,158 2 11	1,03,855 8 5	14,779 2 2	149 4 5	475 4 4	1,22,458 3 7

(a)	Value of clothing sold made over to Asylum	Rs. A. P.	2,133 13 5
(b)	Value of garden produce	Rs. A. P.	1,851 3 6
(c)	Sale proceeds of condemned clothing	Rs. A. P.	575 13 10
(d)	Cost of new building	Rs. A. P.	443 2 8
(e)	Repairs to old building	Rs. A. P.	51 0 0
(f)	Value of manufactured goods sold	Rs. A. P.	.....
(g)	Do. made over to Asylum	Rs. A. P.	.....
(h)	Value of garden produce, &c.	Rs. A. P.	.....
(i)	Cost of Hospital necessaries and miscellaneous	Rs. A. P.	.....
(j)	Cost of raw materials purchased	Rs. A. P.	.....
(k)	Cost of contingencies on manufacture	Rs. A. P.	.....
(l)	Cost of contingencies on purchase of Surgical instruments	Rs. A. P.	.....
(m)	Cost of contingencies on purchase of Surgical appliances	Rs. A. P.	.....
(n)	Cost of contingencies on purchase of Surgical materials	Rs. A. P.	.....
(o)	Cost of contingencies on purchase of Surgical medicines	Rs. A. P.	.....
(p)	Cost of contingencies on purchase of Surgical apparatus	Rs. A. P.	.....
(q)	Cost of contingencies on purchase of Surgical instruments	Rs. A. P.	.....
(r)	Cost of contingencies on purchase of Surgical materials	Rs. A. P.	.....
(s)	Cost of contingencies on purchase of Surgical medicines	Rs. A. P.	.....
(t)	Cost of contingencies on purchase of Surgical apparatus	Rs. A. P.	.....
(u)	Cost of contingencies on purchase of Surgical instruments	Rs. A. P.	.....
(v)	Cost of contingencies on purchase of Surgical materials	Rs. A. P.	.....
(w)	Cost of contingencies on purchase of Surgical medicines	Rs. A. P.	.....
(x)	Cost of contingencies on purchase of Surgical apparatus	Rs. A. P.	.....
(y)	Cost of contingencies on purchase of Surgical instruments	Rs. A. P.	.....
(z)	Cost of contingencies on purchase of Surgical materials	Rs. A. P.	.....

STATEMENT No. IX-A.

Abstract of Cash Account as per G.O., dated 12th August 1890, No. 1344, Judicial, and Statement of Stores as per G.O., dated 25th October 1893, No. 2228, Judicial.

Asylums.	(a)		(b)		(c)		(d)	
	Establishment.		Diet.		Clothing and Bedding.		Medicines.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.
	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.
Madras ...	32,332 13 1	68 3 5	34,414 5 3	72 9 8	2,493 14 2	5 4 2	243 13 3	0 8 5
Vizagapatam.	2,506 13 5	50 15 3	1,535 8 6	31 3 4	115 3 0	2 5 6	1 1 3	0 0 4
Calicut ...	4,059 7 8	41 6 4	6,050 14 2	61 11 2	343 0 0	3 7 11	259 15 8	2 10 5

Asylums.	(e)		(f)		(g)		(h)	
	Contingencies.		Hospital necessities and miscellanies.		Grand Total.		Value of stores intended for consumption including fire-wood, lamp-oil, &c., and excluding all goods manufactured in the asylums.	
	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	Total cost.	Cost per head of average strength.	At the beginning of the year.	At the end of the year.
	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.	Rs. A. P.
Madras ...	1,475 0 10	3 1 9	2,684 4 5	5 10 7	73,549 3 0	155 6 0	588 3 5	2,359 11 0
Vizagapatam.	36 12 6	0 11 11	66 4 9	1 5 7	4,261 11 9	86 9 11	766 13 8	590 13 2
Calicut ...	1,018 6 3	10 6 2	575 13 2	5 13 11	12,907 8 11	125 7 11	497 14 4	209 8 1

(a) Vide columns 8 and 9 of statement IX.

(b) Vide column 10 of statement IX. In the case of Calicut Asylum, add Rs. 100, the cost of fire-wood supplied by the Forest Department—vide foot-note (m) of statement IX.

(c) Vide column 11 of statement IX.

(d) Vide columns 12 and 21 of statement IX. In the case of Calicut Asylum, deduct Rs. 100, the cost of fire-wood included in column 21.

(e) Vide columns 13, 14, 15, and 20 of statement IX. In the case of Calicut Asylum, add Rs. 224-10-10 as per foot-note (l) of statement IX.

(f) Vide foot-notes (e), (i) and (l) of statement IX.

(g) Total of (a), (b), (c), (d), (e), and (f).

(h) Vide column 22 of statement IX of the Reports for 1893 and 1894.

STATEMENT No. X.

Showing the sanctioned Establishment of the Lunatic Asylums as it stood on the 31st December 1894.

Establishment.	Madras.		Vizagapatam.		Calicut.		Total.	
	Number.	Monthly wages.	Number.	Monthly wages.	Number.	Monthly wages.	Number.	Monthly wages.
	1	2	3	4	5	6	7	8
		Rs. A. P.		Rs. A. P.		Rs. A. P.		Rs. A. P.
Superintendent ...	1	850 0 0	1	50 0 0	1	50 0 0	...	950 0 0
Assistant Surgeon ...	1	260 0 0	...	...	...	...	...	260 0 0
First-class Hospital Assistant ...	...	...	...	...	1	70 0 0	...	70 0 0
Second-class do. ...	...	...	1	50 0 0	...	...	...	50 0 0
Civil Apothecary ...	2	235 0 0	...	...	...	...	...	235 0 0
Steward ...	1	70 0 0	...	...	...	...	...	70 0 0
Assistant Steward ...	1	30 0 0	...	...	...	...	...	30 0 0
Clerk and Steward ...	...	...	...	...	1	19 0 0	...	19 0 0
Store-keeper ...	1	40 0 0	1	20 0 0	1	20 0 0	...	80 0 0
Writer ...	1	30 0 0	...	...	...	...	...	30 0 0
First-class European Attendants ...	3	160 0 0	...	...	...	...	...	160 0 0
Second-class do. ...	3	100 0 0	...	...	...	...	...	100 0 0
Matron ...	1	60 0 0	...	...	...	...	...	60 0 0
Assistant Matron ...	1	25 0 0	...	...	...	...	...	25 0 0
Native Head Keeper, Male ...	...	...	...	...	1	15 0 0	...	15 0 0
Do. do. Female ...	...	...	...	...	1	8 0 0	...	8 0 0
First-class Native Male Attendants ...	2	24 0 0	1	12 0 0	2	21 0 0	...	57 0 0
Second-class do. do. ...	6	60 0 0	...	...	4	32 0 0	...	92 0 0
Third-class do. do. ...	44	352 0 0	4	36 0 0	4*	28 0 0	...	416 0 0
Night Watchmen ...	9	72 0 0	2	14 0 0	2	14 0 0	...	100 0 0
First-class Female Attendants ...	1	8 0 0	1	7 0 0	...	...	...	15 0 0
Second-class do. ...	1	18 0 0	1	6 0 0	3	18 0 0	...	42 0 0
Third-class do. ...	12	60 0 0	...	...	...	...	...	60 0 0
Night Watchwomen ...	3	18 0 0	...	...	1	6 0 0	...	24 0 0
Weighman ...	1	10 0 0	...	...	...	...	...	10 0 0
Lascars ...	2	12 0 0	...	...	...	...	...	12 0 0
Carpenter ...	1	12 0 0	...	...	...	...	...	12 0 0
Blacksmith ...	1	10 0 0	...	...	...	...	...	10 0 0
Gardener ...	1	10 0 0	...	...	...	...	...	10 0 0
Tailors ...	2	22 0 0	...	...	...	...	...	22 0 0
Barber ...	1	11 0 0	...	...	...	...	...	11 0 0
Cook for European and East Indian patients.	1	12 0 0	...	...	...	...	...	12 0 0
Caste Cook for Natives ...	1	10 0 0	1	6 0 0	1	7 0 0	...	23 0 0
Assistant do. ...	1	8 0 0	...	...	...	...	...	8 0 0
Caste Cook woman for Natives ...	1	7 0 0	...	...	...	...	...	7 0 0
Waterwoman ...	1	3 8 0	...	...	...	...	...	3 8 0
First-class Toty ...	1	7 0 0	1	7 0 0	1	7 0 0	...	21 0 0
Second-class Toties ...	17	102 0 0	...	...	2	12 0 0	...	114 0 0
Toty women ...	6	24 0 0	1	4 0 0	2	8 0 0	...	36 0 0
Washerman ...	...	...	...	...	1	8 0 0	...	8 0 0
Gate-peon ...	...	...	...	...	1	6 0 0	...	6 0 0
Male toty for warders' lines ...	1	6 0 0	...	...	...	...	...	6 0 0
Female do. ...	1	4 0 0	...	...	...	...	...	4 0 0

Daily average number of males ...	363	36-11	72-68	Sanctioned proportion kept up as much as possible.
Do. do. of females ...	111	13-09	25-39	
Proportion of male keepers to males ...	1 to 7	1 to 7-22	6-60	
Do. of female keepers to females ...	1 to 7	1 to 6-54	6-35	
Do. of male toties to males ...	1 to 29	1 to 36-11	24-23	
Do. of female toties to females ...	1 to 18-5	1 to 13-09	12-09	

* Includes 2 temporary attendants.

STATEMENT No. XI.

Showing Receipts and Expenditure on account of the Manufactures in the Lunatic Asylums during the year 1894.

1	2		3	4	5	6	7	8	9
	Mean Population.		Cash paid into treasury for articles sold.	Value of manufactured goods made over to asylums for asylum purposes.	Value of raw materials in store at the end of the year.	Value of manufactured goods in store at the end of the year.	Value of plant and machinery in store at the end of the year.	Total Credits.	Value of manufactured goods in store on 1st January 1894.
	Males.	Females.							
Asylums.									
Madras	363	111	2,221 11 6	1,377 5 4	412 3 2	4,094 9 10	452 3 0	8,538 0 0	6,310 15 8
Vizagapatam	36-11	13-09	557 11 0	384 15 1	55 13 0	88 6 0	21 6 0	1,109 3 7	5 2 0
Calicut	72-63	25-39	659 10 3	323 5 4	70 14 10	193 13 6	22 12 0	1,307 7 11	78 4 0
	10	11	12	13	14	15	16	17	18
Asylums.									
Madras									
Vizagapatam									
Calicut									

The average number of inmates employed on manufactures during 1894 in the Madras Asylum was of Males 299 and Females 82. Total 381.
 The average number of inmates employed on manufactures during 1894 in the Vizagapatam Asylum was of Males 29-59 and Females 7-16. Total 37-75.
 The average number of inmates employed on manufactures during 1894 in the Calicut Asylum was of Males 17-72 and Females 7-61. Total 25-33.

18TH JUNE 1895, Nos. 1303, 1304, JUDICIAL.

GOVERNMENT OF MADRAS.

JUDICIAL DEPARTMENT.

READ—the following paper:—

From Surgeon-Major-General C. SIBTHORPE, Surgeon-General with the Government of Madras, to the Chief Secretary to Government, dated Ootacamund, 18th May 1895, No. 140-T.

I have the honour to forward herewith two copies of the Annual reports for 1894 on the Lunatic Asylums in this Presidency.

2. I regret the delay in its submission which has been explained in my letter, No. 72-T. of the 25th ultimo.

ORDER—dated 18th June 1895, No. 1303, Judicial.

The report on the administration of Lunatic Asylums for 1894 was not received until the 14th of May—nearly a month after the due date—and it has consequently been impossible to review it within the date prescribed by the Government of India.

2. Statistics showing the total asylum population are given below:—

Year.	Number admitted.	Daily average strength.	Percentage of deaths to daily average strength.
1890	197	620	18-38
1891	215	611	18-57
1892	245	571	18-22
1893	211	564	11-69
1894	215	621	10-30

The accommodation appears to have been ample and the Surgeon-General's remark that the criminal enclosure of the Madras Asylum was deficient in this respect is not understood. In the separate representation which he made on the subject, viz., his letter No. 3-T., dated 9th April 1895, it was stated that the maximum number for whom accommodation was ever required was only 148, while there was room available for 150, besides buildings temporarily allotted to other uses than the accommodation of criminal insanes. It is satisfactory to observe that the death-rate has continued to fall. The total number of deaths was 64, of which two took place at Vizagapatam, both from unavoidable causes, six at Calicut and 56 at Madras. Death resulted in thirteen cases from debility and anæmia, in nine cases from catarrhal inflammation of the intestines, while dysentery was the cause of mortality in eight cases, cholera in eight more, and lung affections in nine. The deaths from cholera all occurred in the Madras Asylum, in which a serious outbreak commenced in the last few days of the year under report and continued until the 9th of February 1895. The total number of attacks during this period was 64, 44 of which were fatal. Appendix I to the report deals fully with the origin, progress and treatment of the epidemic which must have caused the Surgeon-General and the Superintendent much labour and anxiety. The Surgeon-General speaks of this epidemic as showing the absolute necessity of carrying out an efficient system of drainage and of having the scavenging service under better control. The latter defect will, it is hoped, be sufficiently remedied by the introduction of good service pay to the toties which has been

sanctioned in G.O., dated 26th April 1895, No. 874. The delay in introducing an adequate drainage system is partly due to the fact that the recommendations of the committee appointed in G.O., dated 22nd February 1894, No. 454, were unaccompanied by detailed reasons for the various suggestions made or information sufficient to enable Government to come to a decision on the matter. It was consequently found necessary to return the report to the committee for amplification.

The daily average sick rate amounted to 104.89 against 108.08 in 1893. As the daily average strength was considerably higher in 1894, these figures indicate a general improvement in health. No reliable comparison can be made with the figures relating to earlier years, as there is reason to suppose that it is only recently that complete hospital returns have been maintained. There is a remarkable coincidence between the figures showing the number of insanes remaining at the end of the year in the Madras Asylum and the daily average strength (*vide* columns 8 and 9 of Statement I). The same remark applies to the corresponding figures relating to criminal lunatics (*vide* columns 8 and 9 of Statement II). The occurrence of integers in columns 9 and 10 of Statement I and in column 9 of Statement II is also curious.

3. Statement No. IV contains what purport to be virtually complete figures relating to the registration of the previous occupations of the patients admitted during the year. Statement No. VII shows that the cause of insanity was believed to be detected in 72 per cent. of the total number of cases under treatment during the year. This percentage is considerably higher than in previous years and the improvement is due to the fact that, while 222 insanes were admitted or re-admitted during the year, the cause of insanity was thought to be undetected in only sixteen instances.

4. The next portion of the report to be discussed, is that which deals with finance. Statistics comparing the average cost per patient under the main heads of expenditure during the past five years are shown below:—

Year.	Diet.			Clothing and Bedding.			Medicines.		
	Madras.	Vizagapatam.	Calicut.	Madras.	Vizagapatam.	Calicut.	Madras.	Vizagapatam.	Calicut.
1	2	3	4	5	6	7	8	9	10
1890	Rs. A. P. 69 7 0	Rs. A. P. 26 6 0	Rs. A. P. 47 11 0	Rs. A. P. 19 8 0	Rs. A. P. 2 8 0	Rs. A. P. 5 6 0	Rs. A. P. 7 11 0	Rs. A. P. 9 9 0	Rs. A. P. 7 4 0
1891	72 10 0	34 12 0	45 10 0	9 5 0	3 1 0	4 11 0	7 2 0	3 5 0	7 12 0
1892	84 10 0	43 4 0	49 10 0	11 5 0	4 1 0	3 6 0	8 7 0	2 15 0	9 1 0
1893	88 14 0	35 3 0	60 15 0	15 1 0	1 7 0	5 13 0	2 1 0	4 1 0	3 1 0
1894	72 9 8	31 8 4	61 11 2	5 4 2	2 5 6	3 7 11	0 8 5	0 0 4	2 10 5

Year.	Contingencies.			Total.		
	Madras.	Vizagapatam.	Calicut.	Madras.	Vizagapatam.	Calicut.
	11	12	13	14	15	16
1890	Rs. A. P. 6 14 0	Rs. A. P. 9 9 0	Rs. A. P. 10 9 0	Rs. A. P. 94 3 0	Rs. A. P. 49 0 0	Rs. A. P. 70 14 0
1891	4 13 0	2 7 0	6 10 0	98 14 0	45 9 0	64 11 0
1892	14 14 0	16 11 0	8 10 0	119 4 0	68 15 0	70 11 0
1893	7 11 0	6 13 0	10 2 0	113 11 0	47 8 0	79 15 0
1894	* 8 12 4	* 2 1 6	* 16 4 1	87 2 7	55 10 8	81 1 7

* These figures include the cost of hospital necessities and miscellanies.

There has thus been a satisfactory improvement in the Madras Asylum, while even more economy than usual has been displayed in the administration of the Vizagapatam Asylum,—a circumstance which reflects much credit upon the Superintendent and the hospital assistant who has been in direct charge. The general decrease in expenditure is no doubt partly due to the lower rates of grain prices, but it is to be hoped that improved administration is the main cause. The diet scale sanctioned in G.O., dated 26th June 1893, No. 1292, was in use in all the asylums and appears to

The decrease in cost may be regarded as satisfactory, seeing that the daily average strength in 1894 was 57 higher than in 1893, but the Government is convinced that there is room for a further reduction in expenditure in the Madras and Calicut Asylums. That the Madras Asylum should compare unfavourably with the other two is especially remarkable, seeing that it is the only one provided with a whole-time Superintendent, but an explanation may in part be found in the fact that it contains European and Eurasian patients, who are not received in the other two asylums.

5. The following table compares the statistics relating to manufactures during the last three years:—

Asylum.	Percentage of average number employed to daily average strength.			Profits on manufactures.			Amount of profits per head of average number employed.		
	1892.	1893.	1894.	1892.	1893.	1894.	1892.	1893.	1894.
Madras	67.8	62.2	74.1	Rs. 5,695	Rs. 2,231	Rs. 2,476	Rs. A. P. 20 0 0	Rs. A. P. 8 3 0	Rs. A. P. 7 0 7
Vizagapatam ..	67.4	62.5	53.1	55	331	657	3 1 0	16 7 0	27 0 1
Calicut	72.3	28.0	25.8	795	545	890	4 4 0	22 11 0	27 0 7

Statement No. XI is incorrect in that it adopts one method of valuation in respect of the stock on hand at the beginning of the year and another in respect of that on hand at the end of the year. The profits cannot be regarded as satisfactory in the Madras Asylum and it is difficult to understand why so much better results are achieved in the two other asylums; the Surgeon-General should devote special attention to the point. The proportion of insanes employed at the Calicut Asylum appears to be unduly low.

6. Separate orders will be passed on the various proposals for improving asylum buildings or revising establishment which are referred to in the Surgeon-General's report. With reference to the remarks contained in paragraph 4 (k) of the report and made by Surgeon-Major Elcum regarding the difficulty of amusing the patients, the Surgeon-General will be requested to submit such proposals as he thinks suitable.

7. On the whole, the administration of the Lunatic Asylum at Vizagapatam appears to have been highly satisfactory, increased economy having been effected under almost every head, while the general health was good. At Madras there was a general improvement in the administration, but, as has already been remarked, the Government expects a further advance in this direction. In Calicut there was but little change