

43rd Annual Report of the Medical Superintendent of The Nova Scotia Hospital for the Insane 1899-1900

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On a quiet Sunday afternoon I was browsing through some old medical books accumulated at local book sales and became interested in the Medical Superintendent's Report on the Nova Scotia Hospital for the Insane at the turn of the century. It illustrates some of the striking changes that have occurred in psychiatric care and concepts, and provides an enlightening picture of one aspect of medical and social life at the end of the 19th century. The following highlights from the report are of considerable interest even today.

Hospital Statistics

Dr. W. H. Hattie, the Medical Superintendent, reported that in 1899 there were 127 admissions, 25 of them return cases. Fifty-one patients, or 40.2% of admissions, were discharged as "cured"; this was below the hospital's previous average of 44%. The number of males and females on the lists of those admitted and those cured were about equal. Dr. Hattie regretted the tragedy of patients who were not cured and laid much of the blame on the hospital's defective equipment and inadequate facilities although he did recognize other causes of persistent insanity such as degeneration, imperfect development and causes which were "beyond the reach of human skill".

Dr. Hattie's era closely followed the time of barbarous and punitive approaches to the mentally ill, both in European and North American institutions. In view of this, it is interesting to note the significant cure rate in the Nova Scotia Hospital which, like its predecessors, had a large population of chronically ill patients. Dr. Hattie noted with some pride that, "mechanical restraint is but seldom used, save for surgical reasons and as much freedom as is possible is granted to all those whose condition will permit it. The use of sedative, hypnotic and depressive drugs is avoided as much as is possible, while every effort is made to improve the general health in the hope that as this end is attained it may be accompanied by corresponding result in the mental condition." But he also lamented the lack of money to provide facilities and equipment to help the patients, stating, "the possibility of being doomed to chronic insanity as a result of insufficient provision for proper care is almost too terrible to think of, and yet it is a possibility that must not be overlooked."

Finances

Dr. Hattie apologized for going over his budget of sixty-five thousand dollars by \$70.79. Today it seems amazing that

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one could run an institution with over 400 patients for sixty-five thousand dollars a year. His complaints of increasing costs for food, fuel and clothing show a definite parallel between conditions at the turn of the century and today.

Expenditures during the year 1899-1900 included a long list of foods from apples (\$127.26) to wheat (\$7.20), with a total cost of \$16,481.63 to feed over 400 people for one year. That works out to about \$41.00 per patient per year for food. Other expenditures included a gavel (\$25.95), a rustic seal (\$1.70), a buffalo robe (\$10.50) and expenses for the library (\$2.60). The cost of recapture of patients was listed as \$8.50. Household expenses included the cost of clay pipes (\$8.45), shoe blacking (\$8.50), and washboards (\$2.25).

There is an interesting comment that one patient, who had been a resident of the hospital for 42 years, had cost the province a total of not less than six thousand dollars exclusive of the interest which this outlay might otherwise have accumulated. Imagine what 42 years would cost at present hospitalization rates!

Improvements

The superintendent felt that the Nova Scotia Hospital for the Insane ranked well in comparison to other hospitals of the same type, but suggested that such hospitals were universally understaffed, especially with regard to nurses. One nurse looked after an average of 12 patients and had to do the housekeeping for the ward as well.

He requested a number of improvements in facilities including a reception area and accommodation for recent admissions because it was deleterious to new and potentially curable patients to be suddenly admitted to a ward "full of insane people, many of whom may be of objectionable habits, many chronically alienated, and many hopelessly insane".

In that year a new barn and piggery were build on the hospital grounds, and the cattle barn was moved to another location. Dr. Hattie reported delight at the addition of electric lights to a few of the buildings and found this to be very efficient, definitely preferable to the gas lights upon which they depended in the other buildings.

Training School for Nurses

The Lieutenant-Governor, Sir Malachy B. Daly, presented the DeWolf Medal to Miss Irene Settle for leading in the nursing examinations that year. Because they had found that

the trained nurse greatly improved patient care, they decided that year to extend the nursing training to male attendants. In 1894 they had graduated the first two nurses, Harriet Sampson and Elizabeth Ogilvie; in 1900 their graduating class had increased to nine, four of them men.

Causes of Death

There were 786 deaths in this institution from 1860 to 1900 (Table I). The commonest causes of death were pulmonary tuberculosis (234), general debility and old age (85), parietic

TABLE I
THE CAUSES OF DEATH

Showing the Causes of Death, from the opening of the Hospital in 1860 to the present date, September 30th, 1900.

CAUSES OF DEATH	TOTAL
Diseases of Nervous System:	
Apoplexy and Paralysis	66
Epilepsy	38
Paretic Dementia	74
Locomotor Ataxia	4
Exhaustion from Chronic Mania and Melancholia	70
Phrenitis and Abscess of the Brain	3
Acute Meningitis	2
Multiple Sclerosis	1
Diseases of Respiratory System:	
Inflammation of the Lungs	30
Inflammation of Bronchi (Influenza)	5
Pulmonary Tuberculosis	234
Abscess and Gangrene of Lung	7
Diseases of Circulatory System:	
Organic Disease of Heart	25
Aneurism	4
Gangrene of Extremities	1
Diseases of Abdominal Viscera:	
Peritonitis	11
Enteritis	3
Diarrhoea and Dysentery	27
Gastric Ulcer	3
Hepatic Cirrhosis	5
Hepatic Abscess	1
Chronic Nephritis	15
Acute Cystitis	1
Psoas Abscess	1
Diabetes	1
Specific Diseases:	
Pemphigus Vulgaris	1
Acute Delirium	21
Septicaemia	1
Erysipelas	10
Enteric Fever	9
Cancer	8
Acute Osteomyelitis	1
General Causes of Death:	
General Debility and Old Age	85
Homicide	1
Suicide	14
Accident	3
TOTAL	786

dementia (74), exhaustion from chronic mania and melancholia (70), apoplexy and paralysis (66) and epilepsy (38). Of interest also, were several other causes of death: phrenitis (3), pemphigus vulgaris (1), homicide (1), suicide (14), and accidents (3).

Causes of Insanity

Table II shows the interesting list of causes of the mental illnesses of patients admitted to the hospital in one year.

TABLE II
ASSIGNED CAUSES OF INSANITY

Showing the probable cause, apparent or assigned, of the disorders in the admissions, from October 1st, 1899 to September 30th, 1900.

CAUSE	TOTAL
Puberty	1
Parturition	5
Lactation	3
Climacteric	8
Senile decay	6
Business worries	8
Domestic worries	9
Disappointment in love	3
Epilepsy	2
Grief	10
Fright	1
Onanism	8
Intemperance	6
Syphilis	2
Debility	18
La Grippe	2
Unknown	35
TOTAL	127
History of Heredity in	56
History of previous attacks in	29

Regulations for the Admission of Patients

Although anyone could recommend the admission of a patient to the hospital, two medical certificates and completion of a warrant chargeable to the municipality were required for admission. If a patient's admission was not chargeable to the municipality, a bond for a private patient had to be posted. Because of the crowded state of the hospital, the office of the Commissioner of Public Works and Mines, where the medical certificates, warrants and bonds were to be presented, was obliged to give preference of admission to presumably curable cases. When admitted, each patient was expected to have two good suits of clothing; a third suit for occasional use was considered very desirable. It was stated that those about to be committed to the hospital should invariably be informed of the fact before leaving home, as "everything like deception must be scrupulously avoided".

I wonder what our present care of psychiatric patients will look like to future physicians 75 years from now. □