

The Commonwealth of Massachusetts

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ANNUAL REPORT

OF THE

TRUSTEES OF THE GARDNER  
STATE COLONY

FOR THE

YEAR ENDING NOVEMBER 30, 1923

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DEPARTMENT OF MENTAL DISEASES



# TRUSTEES AND OFFICERS

## OF THE

### GARDNER STATE COLONY.

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 HARRY A. SCHNEIDER, M.D., *Assistant Physician*  
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 GEORGE A. GREENE, *Men's Infirmary*  
 LILLIAN A. GREENE, *Hospital*

#### Colonies.

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 Mrs. KATHERINE BOWMAN.  
 Mrs. MINNIE LARKIN.  
 Mrs. MAE WADSWORTH.  
 Mrs. MYRTIE SPRAGUE.  
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 Mrs. GLADYS BENNETT.  
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Valley Cottage.  
 Belcher Cottage.  
 Gardner Cottage.  
 Wachusett Cottage.  
 Hillcrest Cottage.  
 Westminster Cottages.  
 Fairview Cottage.  
 Overlook Cottage.  
 Highland Cottage.

##### Supervisors.

FRED MORSE.  
 HALL C. BOWMAN.  
 HERBERT F. LARKIN.  
 WALTER WADSWORTH.  
 STREETER G. SPRAGUE.  
 EUGENE L. BRYANT.  
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#### Religious Services.

Rev. FATHER DOLAN, Catholic.

MOSES L. SEDAR, Hebrew.

Local pastors in turn, Protestant.

# The Commonwealth of Massachusetts

## TRUSTEES' REPORT.

*To His Excellency the Governor and the Honorable Council.*

We have the honor to present herewith the twenty-first annual report of the Board of Trustees of the Gardner State Colony.

During the year the Board has met with an irreparable loss. Dr. Herbert B. Howard, the Chairman of the Board, died suddenly at Lynchburg, Virginia, March 6, 1923, in the sixty-eighth year of his age. Dr. Howard had been connected with the public and private institutions of Massachusetts nearly the whole of his life since graduation from the Medical School. He had been Superintendent of the State Infirmary at Tewksbury, the Resident Physician of the Massachusetts General Hospital, superintendent of the Peter Bent Brigham Hospital, member and Chairman of the State Board of Insanity, and Chairman of the Trustees of the Gardner State Colony.

Dr. Howard had been connected with the work of the State Colony from the very inception of the plan for its foundation. He was largely concerned in selecting the site of the Colony, the separate parcels of which were bonded and later purchased by Mr. George N. Harwood, of our Board. Dr. Howard's wisdom and great experience has been given freely to the Commonwealth of Massachusetts in many directions, but the outstanding proof of it is this fine institution at Gardner. The Trustees wish to record their grief and sense of very great loss in Dr. Howard's death.

Dr. Frederic A. Washburn has been appointed by Governor Channing H. Cox to the vacant place on the Board.

During the year our new Hospital has been completed and open for patients. It is a most valuable unit of our buildings. It has already been a great relief and comfort to our patients and officers. The new laundry, which has also been completed and is in use, proves very satisfactory. A considerable section of new road between the Colony and the City of Gardner has been built by cooperation between the City and the Institution. The occupation of the new laundry has made it possible for us to start the changes in the domestic building. These are well under way and we should soon have our enlarged kitchen, bakery and dining rooms.

The Colony has had a very trying time this Summer and Fall because of lack of water. There has been risk from fire, and the supply at one time was so low that the necessary economy in the use of water endangered the comfort and health of the patients. The ordinary supply of water of the Colony is insufficient and in time of drought this is reduced to an alarming degree. The Trustees have called attention to this matter in their annual reports of 1920 and 1921, and have repeatedly urged the situation upon the central authorities in additional communications. It is earnestly hoped that there will be no failure to provide the necessary connection with the Gardner or Ashburnham water supply this coming Spring.

The Trustees have been watching with interest the continual lessening of their functions and authority and the constant growth and centralization of power in the hands of Department Officials in Boston. They think this procedure has reached the place where for the good of the Institution and the well being of the patients, a halt should be called and probably some of the steps retraced. The Trustees are convinced that if they had had their old time authority, the Gardner State Colony would have been spared its recent trying experience with lack of water and that other needs would have been met with no greater expense to the Commonwealth than under the present method. The Trustees are in cordial sympathy with the effort toward economy and standardization of procedure in the State Institutions but believe this could be accomplished with greater efficiency by development of the old organization. The re-

quirements of the present system have multiplied several times the office work of the Gardner State Colony.

The Trustees recommend to your attention the following list of needs:

1. Adequate water supply.
2. Two buildings for the semi-disturbed.
3. A superintendent's house.
4. Two buildings for the disturbed.
5. A dairy barn.
6. One or more colony groups.
7. A fire proof garage and fire station with apparatus.

Next to an adequate water supply the most pressing of these needs is the second on our list. It is very important for the comfort and happiness of our patients that this request should be granted. The colony now has an Infirmary building for men and one for women, holding about one hundred and seventy-five patients each. Patients committed directly from their homes to the Gardner State Colony, of whatever type they may be, must be taken into these buildings. Patients transferred by other hospitals are admitted here until study enables us to classify them. In addition, patients in our Colony groups who become for one reason or another unsuitable for the colonies must be cared for in these Infirmary buildings. The aged and the infirm must be housed here. We have here, then, all types from the quiet recoverable kind to the chronic disturbed type. The aged and infirm and less troublesome patients should not be kept in the same building with the semi-disturbed patients. It is not fair to them so to do. It is for these reasons that we earnestly recommend that we be granted the second of these requests. If it is impossible to give both buildings at the same time, at least, let us have one during the coming year.

The other needs on our list are important, but none compare in urgency to the two needs just stated.

The Superintendent's house is needed. Our Superintendent, Dr. Charles E. Thompson, has been with us many years. We recognize that the value of his services to the Commonwealth is very great. He should be adequately housed so that he may to a degree get away in his hours off duty from the harassing and distressing scenes which cannot be entirely separated from his position. A comfortable house, a little way from the Infirmary buildings would be a great boon, and would in the end repay the Commonwealth, by making the position of the Superintendent of the Gardner State Colony more desirable.

AMIE H. COES.  
 THOMAS R. P. GIBB.  
 GEORGE N. HARWOOD.  
 OWEN A. HOBAN.  
 THOMAS H. SHEA.  
 ALICE M. SPRING.  
 FREDERIC A. WASHBURN, *Chairman.*

## SUPERINTENDENT'S REPORT.

*To the Trustees of the Gardner State Colony.*

It again is my privilege to submit to you my report as Superintendent which is the twenty-first annual report of the Colony. The statistical data is for the hospital year ending Sept. 30, while the financial report which follows is for the financial year of the Commonwealth which ends Nov. 30, 1923.

In submitting this report of the year I would review briefly the general development of the Colony thus far, considering the purposes and expectations expressed at the time its origin was conceived by the Commission appointed in 1898 to consider the state-wide problem of the care of the mentally ill and defective in Massachusetts which leads to a consideration of the development which followed during the ensuing years since its establishment in 1900, and

its opening in 1902 to the present year to a review of the work of the present year and a statement as to future development.

This review has repeatedly suggested itself to me because of the death of our Chairman, Dr. Herbert B. Howard which occurred on March 6. It is well to note that Dr. Howard more than any other, early saw the advantages of a Colony, and not only urged this as a member of the Commission appointed in 1898, but eventually selected the site upon which our Colony was built. Dr. Howard's interests were state-wide, but as keen as any was his interest in the Gardner Colony. I have never known a better informed hospital executive. One never gave more willingly of his knowledge and broad experience than he. The State has lost a citizen and hospital administrator of the highest type, the Colony the benefit of his association and wise council, while those of us who knew him best feel that we have lost one of the best of friends.

#### THE COLONY SYSTEM

as recommended by the Commission in 1898, very clearly stated in considerable detail the needs of the State at large, the Colony system being recommended as merely one part of the program. The full report shows in the light of subsequent state-wide development, the keen insight the members of this committee had and the mapping out of a plan of meeting these needs shows after these years their depth of knowledge, insight and foresight.

That part of their report which dealt with Colony care pertained largely to the establishment of this institution and our subsequent development has closely approximated the original conception.

#### THE DEVELOPMENT

from 1902 to 1907 consisted of the construction of a central administrative group of buildings, two of which were for the reception of patients, and two colony groups from which farms were to be developed. From 1907 to the present year eight additional colony homes or groups have been added in which are housed those patients, who, as a rule, are quiet, but who will need continued hospital care. About these farms have been developed, or within them occupation has been encouraged. Occupational buildings have been erected and from time to time cottages for the housing of employees. Such buildings have been erected by our own labor.

Previous to 1919 patients were received, by transfer only, from other hospitals, but in addition to this the Colony is now a reception hospital for its prescribed district, and this year has received approximately the same number by direct admission as by transfer. The reception of patients direct from their homes has served materially to stimulate the interest in the general medical service without lessening of interest in those patients suffering from a more chronic type of mental illness, indeed, I believe it is helped by it.

In 1923 building extensions have been as follows: 1. A separate laundry building for which an appropriation became available in 1921, was completed and is in use. 2. A hospital building accommodating seventy-five ill and surgical cases has been completed and was immediately filled to capacity. 3. A connecting tunnel extending from the Power House to the Laundry and Hospital and connections have been made with all buildings in the receiving group. 4. The Domestic Building constructed in 1904 is now undergoing re-construction to provide for increased numbers of patients and employees. This work will be completed this winter. 5. An employees' cottage is nearing completion. 6. Miscellaneous small farm buildings, several in number, have been completed or are under construction. 7. The road to Gardner has, in part, been re-built. 8. The water supply has been improved by the construction of wells of larger capacity, a new pump and storage tank.

#### PROGRESS MADE

however, must be measured not by buildings but rather by what we have been able to accomplish in behalf of and through our patients.

Occupation as treatment was one of the principal reasons for the establish-

ment of this Colony. From the first this has been our chief interest that the individual patient might benefit thereby, and that all might benefit from the result of their combined efforts. Productive occupations for adults have always, with us, aroused greater interest than sense or senseless training. Making something to be used (as cloth, clothing, furniture, etc., raising farm products) are normal occupations and are of the same and frequently greater value to our patients than to those persons in the community who are regularly engaged in these constructive efforts. In addition to our industries and occupations of previous years, we have added weaving of sheeting, making of games, toys, puzzles, etc. Sheep raising has been stimulated and from this we are now receiving creditable returns in meat and wool. We have made from the wool our blankets, sweaters, shawls, mittens, etc. Co-operating with the Department of Mental Diseases printing has been further developed. A larger room has been set aside for this, two larger presses installed and we are undertaking to do all printing for the fifteen hospitals under the Department. Pottery has a special appeal for many and this is being developed along practical lines.

Mention is especially made of creative occupations from which the Colony and the individual benefits directly and indirectly for the reason that we believe so strongly in this. Diversional and invalid occupations, do, however, occupy an important place in treatment and have been utilized as formerly.

Cures directly resulting from any occupation or diversion are not easily obtained and should not be rashly claimed. It is not easy to demonstrate improvements in those whose disease tends to progressive deterioration as directly and only due to occupational treatment. Improvement seen is frequently the result of a number of methods of treatment all of which have been beneficial. It is, nevertheless, clear that individuals who are regularly occupied and whose interests are stimulated have less tendency to indulge in abnormal activities, are more normal in their behavior and personal care and are better physically. It is, therefore, only fair to claim that the deteriorating agencies, so little understood, must be thereby to a degree counteracted.

#### THE FUTURE

development of the Colony in order that it may become, in fact, a district hospital serving in full the needs of the district, but still retain Colony features, would seem to require extension in two directions: A. Provision should be made for proper classification of those we now have and those who are to be admitted. B. Extension of the Colony plan for additional numbers.

A. At present those who are admitted are of necessity received in the hospital building intended for the sick or in the Infirmaries in which classification is already unsatisfactory. Two buildings for those requiring special treatment because of their active mental condition would remove from the Infirmaries those who now serve to disturb those recently admitted, the infirm, and the otherwise quiet. If this provision were made the present Infirmary buildings would serve as such, but to them could be admitted the new patient of the quiet type. Eventually, a reception service should be provided equipped for the treatment of acute mental illnesses of all types, thus allowing the Infirmary buildings to accommodate only the infirm, the number of which is steadily increasing.

Two additional buildings accommodating ten each, similar to two we now have would permit of proper treatment of the acutely disturbed. It is not fair to any type of patient that they be cared for in the Infirmary buildings as classified at present.

B. *Additional Colonies.*—The simple comparatively inexpensive type of Colony buildings we now have serve admirably for the care of the quiet continued care cases. As the need of the State for greater accommodation of numbers demands it, other Colony buildings may very readily be added at a low cost and without appreciably increasing the general official organization. The ultimate number of such colonies would be limited only by the need of additional provision, not by lack of suitable building sites.

## PRESENT NEEDS

deemed very necessary at this time, requiring new construction, have already been submitted to you for your consideration and are as follows: 1. Water Supply. 2. Two buildings for the semi-disturbed. 3. Two buildings for the disturbed with subway connections. 4. Dairy barn. 5. Superintendent's house. 6. Colony groups. 7. Fireproof Garage and Fire Station with apparatus.

1. Adequate water supply is obtained at present from driven wells and pumped to a storage tank from which all buildings are supplied. The supply is limited and this year proved entirely inadequate. For many weeks we would have been unable to extinguish a fire of any magnitude. All bathing was of necessity delayed, the laundry stopped, and the use of water for every purpose reduced to the lowest possible point. Such a situation endangered health and property. An additional supply must be immediately provided. There is no adequate supply upon or near our land and it would appear that our only relief can come from the purchase of water from either the town of Ashburnham or Gardner. Nothing should take precedence over this the coming year.

2. Two buildings for the semi-disturbed;—Mention above is made that classification is urgent and those buildings are recommended that such classification may be brought about.

3. Two buildings for the disturbed with subway connections: Money was requested last year for subway connections sufficient to include these two extra buildings, but the appropriation granted was reduced and proved insufficient to extend the subway beyond the hospital building.

Hydrotherapeutic treatment, so necessary in these buildings, cannot be successfully done with low pressure boilers and during the summer months we should not operate these as is now necessary if treatment is prescribed.

4. We are developing a tubercular free herd of cattle. We have insufficient and improper room for the clean young stock and heifers we now have and the number will increase rather rapidly.

5. Superintendent's House: An administrator in any line of activity can do more satisfactory work if slightly removed, at the end of the day, from the scene of his duties to a home environment. Request for an appropriation for this purpose has been made from time to time from the beginning of the Colony, but it has been delayed because of pressing needs in other directions.

6. Colony Groups:—One or more may be added each year as the need of accommodation for greater numbers required.

7. Fireproof Garage and Fire Station with apparatus:—The present garage housing the state cars is in very great need of repair. It never was satisfactory and is not worth repairing. It is a distinct fire menace and in requesting a new garage, I would recommend that it be fireproof and that it have connected with it a fire station containing suitable apparatus ready for immediate use.

## GENERAL HEALTH.

There has been but one case of contagious disease. This was an attack of measles in an officer just returned from vacation. No other cases developed. The physical health of patients and officers has been generally good. The mortality from tuberculosis was 17% of the total, a considerable reduction from last year. This, we believe, is due, in large measure, to the greatly improved hospital facilities available since last summer. Of the 29 deaths during the year, 10 have been from cerebral hemorrhage, doubling the percentage of deaths from that cause over last year. As a large part of our population is rapidly approaching senility we may expect a gradual increase in deaths from arteriosclerosis and its complications. Prophylactic inoculations against typhoid and smallpox have been continued.

John A. Holland, M.D., Asst. Physician since Nov. 15, 1921, resigned on April 25, 1923 to accept an appointment on the Staff of the New Jersey State Hospital at Trenton, N. J. Harry A. Schneider, M.D., was appointed Asst. Physician to fill the vacancy and took up his duties June 1, 1923.

Samuel Bolosky a member of the senior class of the Tufts Medical School served as Clinical Assistant from June 14 to Sept. 10, 1923. Walter M. Frizzell, D.M.D. resident Dentist since April 26, 1920, resigned on May 24, 1923 to enter private practice at Greenfield, Mass. Herman E. Danofsky, D.M.D. was appointed to this vacancy June 1, 1923. Caroline D. Harlow was appointed Social Worker from June 1.

A. F. Lowell, M.D., Consulting Surgeon, has continued to do our major surgery and has co-operated willingly and very helpfully with the Medical Staff whenever important surgical problems have arisen.

In the estimate for 1924 I have included a Pharmacist. Heretofore an Assistant Physician has done the work of the clinical laboratory and pharmacy, but with our new hospital building greater progress could be made if a person were appointed especially adapted to laboratory and pharmaceutical work that we might stimulate the laboratory side of the work including pathology. This would materially stimulate the Medical Staff, adding to our general knowledge of physical and mental conditions found in our patients and also make available the entire time of the Assistant Physician for psychiatric work.

#### DENTISTRY.

The following work has been accomplished during the year by our resident dentist with the aid of a full-time nurse.

Fillings: Amalgam, 340; Silicate, 30; Gold, 6; Inlays, gold, 3; Cement, 46; Gutta Percha, 1; Extractions, 553; Odontiasis & cleanings, 577; Charted & examined, 416; Post operative, 90; Impactions, 3; Oral Abscesses, 52; Granuloma, 24; Cysts, 6; Crowns cemented, 4; Alvelectomy, 1; New plates, 5; Ranula, 1; Replantation, 1; Bridge repaired, 1.

Conduction anesthesia used when indicated. Infiltration anesthesia used otherwise.

#### CHANGES IN POPULATION.

On Sept. 30, 1922 there were under care 543 men and 379 women, a total of 922. During the year there were admitted by first admission 30; by re-admission 12; by transfer from other hospitals 37; making a total received during the year of 108. There have been discharged during the year 63 as follows: as recovered 5; as improved 11; as not improved 7; as not insane 8; transferred to other hospitals 3; died 29. There remained under care Sept. 30, 1923, 989. Of these 557 are men and 412 are women.

#### OUT-PATIENT SERVICE.

Every effort has been made to extend and improve our out-patient service. With this end in view we have urged the medical profession and the various social agencies in this district to call freely upon the Medical Staff for consultations. No fee is accepted for this work regardless of distance, time or ability to pay. The members of the Staff find this work very interesting and instructive as well as a pleasant diversion from institution routine. That it has been of great benefit to both the community and the Colony, there can be no doubt.

The regular monthly clinic has been held as in years past in Fitchburg. 84 different individuals have been seen in consultation, 55 at the Fitchburg Clinic; 6 at the Colony by appointment, 19 at their homes, and 4 at the Heywood Memorial Hospital. The recommendations made in these 84 cases were: commitment as mentally ill 22; admission to the school for feeble-minded 10; home care with medical treatment 9; social supervision without hospital treatment 13; medical treatment at general hospital 5; for diagnosis only 11; almshouse rather than hospital 1; change in occupation 10; reformatory 2; further study necessary 10.

## FAMILY CARE.

On Sept. 30, 1922 there were in Family Care 52. There have been placed in this department during the year 45, and 48 have been returned to the Colony. Two escaped from Family Care and were later returned to the Colony. One died while in Family Care, leaving on September 30, 1923 a total of 46. Of these 12 are self supporting, and 34 are supported by the State.

## SCHOOL CLINICS.

Examination of school children whose names have been submitted by the Superintendents in our district as three years retarded, has been carried on in Fitchburg, Gardner, Ashby, Lunenburg, Townsend and Winchendon. The total number of cases examined was 119. Of these, 116 were found by intelligence tests to be three or more years retarded. Reports were sent to the school superintendents on all cases with recommendations as to their grade classification and physical handicaps. The percentage of cases without handicaps has been practically nil. In the above towns we have received good cooperation especially after the work was in progress and the superintendent more thoroughly understood its scope. There are, however, apparently because of misconceptions on the part of the superintendents or because they have no room to care for special classes, a few districts in which we have been unable to make a survey. In isolated cases some superintendents have been unwilling to submit names of children who are manifestly retarded for fear of offending the parents. We feel, however, it is only a matter of time when full cooperation of both parents and local school authorities will be general.

Meetings of the District Medical Society, of social and welfare agencies have been held with us as in former years and these meetings we consider of particular importance that we may be more familiar with the problems and difficulties encountered by these agencies in the community and that they in turn may be more familiar with hospital care, methods of treatment, and that we all may work together with a better understanding in after care when a patient is returned to home environment.

## DIVERSION.

Motion picture entertainments seem to be the form of entertainment most desired by our patients. These entertainments have been held weekly during the winter months. Dances have been held at frequent intervals throughout the year, music being furnished either by our orchestra or band. Special entertainments have been arranged for all holidays, supplied by local talent and by entertainers hired for the purpose.

The Ninth Annual Cattle Show and Fair was held Sept. 12 and 13. This Fair has become an established institution with us and with the district. Although this has become a large task for every person here, it is from every point of view decidedly worth while. This year Sept. 12 was Public Day and on this day we had 5,000 visitors from the community which we serve. Such a contact would be difficult to make in any other way. Sept. 13 was Colony Day and our efforts were devoted entirely to our people here. The day was a full one with many attractions and was thoroughly enjoyed by all.

## ACKNOWLEDGMENTS.

The following have kindly made donations for the enlightenment, encouragement, and happiness of our patients during the year for which we would express our full appreciation.

Mrs. Amie H. Coes, Worcester, magazine subscriptions; Mr. George N. Harwood, Barre, magazine subscriptions; Thomas R. P. Gibb, Belmont, magazine subscriptions; John C. Rahm, Leominster, money to be expended best; The American Legion Auxiliary, of Gardner, fruit for veterans; Knights of Columbus Educational and Welfare Department, Boston, tobacco, candy, stationery, etc., for veterans; Massachusetts General Hospital, 130 library books, for library; Mrs. Amie H. Coes, Worcester, playing cards; W. Fitzgerald,

Gardner, candy and ice-cream; books, papers, magazines, Alice M. Walker, Gardner, Roy E. Mayo, Gardner, P. J. Grant, D.M.D., Gardner, G. R. Godfrey, Gardner, Mrs. A. I. Colburn, Gardner, Mrs. C. E. Coleman, Gardner, Mrs. J. E. Taylor, Gardner, The Gardner Ridgley Club, Mrs. Harold E. Drake; Copies of Christian Science Monitor, Christian Science Reading Room, Leominster; Athol Transcript Co., Athol, subscription to the Athol Transcript; Annual subscription of Dumb Animals.

At the end of the year I look back with a great deal of satisfaction to the spirit of cooperation among both employees and patients which means much to the proper care and treatment of patients and the entire administration of the Colony.

I have, at all times, received the fullest support and encouragement from each and every member of your Board of Trustees and have not failed to appreciate this.

Respectfully submitted,

CHAS. E. THOMPSON, *Superintendent.*

## INDUSTRIAL DEPARTMENT.

### WORK DONE BY WOMEN.

Aprons, 727; Aprons, ticking, 327; Bags, various kinds, 191; Bedspreads, 164; Blankets, 976; Caps, men's, 306; Caps, special, 114; Cat O'Nine Tails, 285; Chemises, 640; Chrysanthemums, 142; Covers, various kinds, 464; Curtains, 216 pairs; Curtain tie backs, 223 pairs; Doilies, crocheted, embroidered and woven, 441; Drawers, cotton, 378 pairs; Dresses, 838; Handkerchiefs, men's & women's, 1,240; Holders, 123; Holly, crêpe paper, 241 bunches; Hose, men's & women's, 5,948 pairs; Lace, 1,127 yards; Mittens, 231 pairs; Night gowns, 178; Overalls & Jumpers, 967 pairs; Petticoats, 334; Pillow slips, 1,681; Pockets in coats, 332; Rags, burlap, colored, 510 pounds; Rugs, braided, 231; Scarfs, shawls & sweaters, 118; Shamrocks, crêpe paper, 121; Sheets, 2,401; Shirts, outside, 1,350; Shoe taps stitched, 221 pairs; Socks, 1,547; Suspenders, 285 pairs; Tatting, 265 yards; Ticks, 198; Towels, 3,837; Toweling, woven, 340 yards; Trousers, 598 pairs; Underdrawers, men's & Women's, 687 pairs; Undershirts, men's, 542; Undervests, women's, 247; Vests, men's, 181; Yellow poppies, crêpe paper, 350; Miscellaneous, 1,367.

### *Mending.*

Aprons, 205; Chemises, 144; Coats, 538; Dresses, 385; Hose, 2,373 pairs; Nightgowns, 128; Overalls & Jumpers, 1,667; Petticoats, 343; Sheets, 252; Shirts, 1,633; Socks, 5,686; Trousers, 1,241 pairs; Underwear, 2,704; Vests, 103; Miscellaneous, 591.

### WORK DONE BY MEN.

#### *Furniture Department (New Work).*

Chairs, 43; Chiffoniers, 13; Costumer, 1; Dressers, 13; Rockers, 41; Record Boxes, 2; Stool, foot, 1; Settees, 10; Tables, 102; Towel rack, 1.

#### *Furniture Department (Repairs).*

Baskets, 13; Benches, 2; Chairs, 215; Chiffoniers, 3; Clocks repaired & put up, 9; Couches, 4; Curtains & rods, repaired and put up, 46; Desks, 3; Drawers, 5; Graphophones, 4; Hair clippers sharpened, 4; Locks, 4; Looms, 2; Rockers, 97; Settees, 15; Sewing machines, 13; Shades & Rolls, 54; Shears & knives sharpened, 81; Swabs, 32; Tables, 33; Wheelbarrows, 150; Miscellaneous, 20.

#### *Shoe Department.*

Brogans, men's, 258; Harnesses repaired, 29; Leather mittens cut, 159; Lumbermen's felts & rubbers repaired, 275 pairs; Rubber heels (officer's), 129;

Shoes repaired (officers'), 251; Shoes, women's dress, 207; Shoes, men's dress, 274; Shoes & slippers repaired (men's), 1,289; Shoes & slippers repaired (women's), 722; Slippers (men's), 176.

*Tailoring Department.*

Bags repaired, 202; Caps, cut, 289; Caps, pressed, 241; Chemises, cut, 402; Clothes pressed & repaired (Officers'), 1,114; Clothes repaired (patients'), 3,068; Coats made, 579; Dentist gowns cut, 12; Dresses cut, 520; Hospital Shirts cut, 64; Jumpers & Overalls cut, 654; Nightgowns, cut (women's), 113; Nightshirts cut (men's), 165; Operating gowns cut, 6; Outside shirts cut (men's), 710; Reefers cut, 31; Surgeon's caps cut, 6; Trousers cut, 592; Trousers pressed, 564; Underwear cut (men's), 1,140; Underwear, cut (women's), 661; Vests cut, 102; Vests made, 8; Vests pressed, 107.

*Textile Department.*

Bedsread material, woven, 429 yards; Blanket material, officers', 612 yards; Blanket material, patients', 2,523 yards; Brooms, barn, 84; Brooms, house, 300; Brushes, counter, 52; Brushes, floor, 53; Brushes, hand scrub, 122; Brushes, horse, 7; Brushes, long handle, 132; Brushes, radiator, 4; Cocoa mats, 23; Cocoa rope, braiding, 2,231 yards; Couch, recovered, 1; Cushion, Bowling Alley repaired, 1; Curtain Special, 44 yards; Dish mops, 123; Games & puzzles, 52; Mattresses, officers', double, 2; Mattresses, officers', single, 40; Mattresses, patients', 200; Mattress leather cut & punched, 74,000; Mop handles repaired, 13; Overall material woven, 2,695 yards; Pillows, officers', 18; Pillows, patients', 129; Printing, 178,732 pieces; Sheeting Patients' 48", 160 yards; Shirting woven, 4,156 yards; Stockings men's knitted, 3,054 pairs; Stockings women's knitted, 801 pairs; Strong cloth, 125 yards; Table runners, 31 yards; Toweling officers' woven, 654 yards; Toweling patients' woven, 1,674 yards; Underwear material knitted, 3,340 yards; Underwear wristers knitted, 753 yards; Whisk brooms, 2.

## DOMESTIC DEPARTMENT.

### MANUFACTURED.

Soap, hard, 100 pounds.

### PICKLES, PRESERVES, ETC.

Shell Beans, 228 qts.; String Beans, 9,408 qts.; Beets, 15 qts.; Beet greens, 9 qts.; Blackberries, 142 qts.; Blueberries, 1,737 qts.; Carrots, 2 qts.; Cauliflower, 2 qts.; Cherries, 30 qts.; Chili sauce, 18 qts.; Chow chow, 30 qts.; Corn, 8,887 qts.; Cucumbers (salted), 6 bbls.; Dandelions, 11 qts.; Grapes, 6 qts.; Jams, 6 qts.; Jellies, 52 qts.; Marmalade, 11 qts.; Mincemeat, 46 qts.; Peaches, 104 qts.; Pears, 678 qts.; Pear chips, 4 jars; Peas, 187 qts.; Piccalilli, 488 qts.; Pickled beets, 82 qts.; Pickle (cucumber), 669 qts.; Pickle (sweet cucumber), 89 qts.; Pickles (mixed), 265 qts.; Pickles (mustard), 162 qts.; Pickled peaches, 3 qts.; Pickled pears, 24 qts.; Pickled onions, 48 qts.; Pickle (tomato), 135 qts.; Plums, 11 qts.; Raspberries, 55 qts.; Red pepper relish, 50 qts.; Rhubarb, 111 qts.; Sauerkraut, 600 qts.; Strawberries, 188 qts.; Summer squash, 10 qts.; Swiss chard, 1,437 qts.; Tomatoes, 5,265 qts.; Tomato preserve, 6 qts.

At the sawmill there were cut and sawed 42,000 ft. of Lumber. In addition there were—Fence Stakes, 710, Fence Posts, 500, Woods, 530 cords, Sawdust, 25 cords, Ice, 1,600 tons, Blueberries, 2,163 pounds.

Excavation, grading and filling were accomplished, as follows: Stones removed from fields, 4,251 tons; Rocks excavated, 1,795 tons; Earth excavated, 7,075 cubic yards; Road building, 2,745 sq. yds. (1,800 new to Gardner, 225 new to Stone Crusher); Roads repaired, 6,950 sq. yds.; Walks replaced, 2,215 sq. yds.; Grading, 10,973 sq. yds.; Land cleared of underbrush, 45 acres; Land cleared for fields, 2¼ acres; Linear feet of Subway and sidewalk (6½ ft. wide), 554.

# VALUATION

NOVEMBER 30, 1923.

## REAL ESTATE.

Land (1,848 acres) . . . . .	\$36,850 00
Buildings . . . . .	791,869 09
	\$828,719 09

## PERSONAL PROPERTY.

Travel, Transportation and Office Supplies . . . . .	\$75 00
Food . . . . .	18,685 44
Clothing and Materials . . . . .	18,970 20
Furnishings and Household Supplies . . . . .	112,074 63
Medical and General Care . . . . .	3,299 32
Heat, Light & Power . . . . .	10,880 22
Farm . . . . .	35,544 86
Garage, Stable and Grounds . . . . .	4,291 39
Repairs . . . . .	11,750 42
	\$215,571 48

## SUMMARY.

Real Estate . . . . .	\$828,719 09
Personal Property . . . . .	215,571 48
	\$1,044,290 57

# TREASURER'S REPORT.

*To the Commissioner of the Department of Mental Diseases.*

I respectfully submit the following report of the finances of this institution for the fiscal year ending November 30, 1923.

## CASH ACCOUNT.

Balance December 1, 1922 . . . . .	\$10,473 41
------------------------------------	-------------

### Receipts.

<i>Income.</i>		
Board of inmates:—		
Private . . . . .	\$3,907 90	
Reimbursements, insane . . . . .	5,013 65	
	8,921 55	
Personal services:		
Reimbursement from Board of Retirement . . . . .		28 49
Sales:		
Food . . . . .	\$3,427 77	
Clothing and materials . . . . .	398 17	
Furnishings and household supplies . . . . .	24 23	
Arts and crafts sales . . . . .	1,052 13	
Farm:		
Guinea pigs . . . . .	\$101 25	
Milk . . . . .	72 00	
Eggs . . . . .	2 35	
Pork and chicken . . . . .	11 88	
Wool . . . . .	7 50	
Vegetables . . . . .	15 65	
Sundries . . . . .	132 30	
	342 93	
		5,245 23
Miscellaneous:		
Interest on bank balances . . . . .		290 01
		14,485 28
Other receipts:		
Refunds of previous year . . . . .		\$11 91
Refund on account of wages unclaimed . . . . .		3 80
		15 71

### Receipts from Treasury of Commonwealth.

Maintenance appropriations:		
Balance of 1922 . . . . .	\$98 11	
Approved schedules of 1923 . . . . .	302,102 96	
		302,201 07
Special appropriations:		
Balance of 1922 . . . . .	\$13,399 10	
Approved schedules of 1923 . . . . .	104,203 50	
		117,602 60
		\$444,778 07

*Payments.*

To treasury of Commonwealth:			
Institution income		\$14,485	28
Refunds on account of maintenance, \$223.50; account of special, \$258.37		481	87
Refunds of previous year		11	91
Wages unclaimed		3	80
		<hr/>	\$14,982 86
Maintenance appropriations:			
Balance of schedules of previous year (November schedule, \$25,098.11; less advances, \$7,168.35)		\$17,929	76
Approved schedules of 1923	\$302,102	96	
Less returned	223	50	
		<hr/>	301,879 46
			319,809 22
Special appropriations:			
Balance of schedules of previous year		\$13,399	10
Approved schedules of 1923	\$104,203	50	
Less returned	258	37	
		<hr/>	\$103,945 13
Less advances, last year's report		7,358	24
		<hr/>	96,586 89
			109,985 99
<b>Total</b>			<hr/>
			\$444,778 07

**MAINTENANCE.**

Balance from previous year, brought forward		\$377	41
Appropriation, current year		350,486	12
		<hr/>	\$350,863 53
<b>Total</b>			320,227 60
Expenses (as analyzed below)			\$30,635 93
Balance reverting to treasury of Commonwealth			

*Analysis of Expenses.*

Personal services		\$141,206	01
Religious instruction		1,415	50
Travel, transportation and office expenses		4,252	84
Food		45,683	54
Clothing and materials		10,970	48
Furnishings and household supplies		17,530	94
Medical and general care		13,290	82
Heat, light and power		31,019	58
Farm		29,896	46
Garage, stable and grounds		4,841	26
Repairs, ordinary		14,364	12
Repairs and renewals		5,756	05
		<hr/>	\$320,227 60

**SPECIAL APPROPRIATIONS.**

Balance December 1, 1922		\$93,432	67
Appropriations for current year		53,000	00
		<hr/>	\$146,432 67
<b>Total</b>			118,621 66
Expended during the year (see statement below)			\$27,811 01
Balance November 30, 1923, carried to next year			

OBJECT.	Act or Resolve.	Whole Amount.	Expended during Fiscal Year.	Total expended to Date.	Balance at End of Year.	
Hospital Building	Chap. 129, Acts 1922	\$134,000 00	\$62,752 64	\$132,239 71	\$1,760 29	
Ext. of Water Supply	Chap. 129, Acts 1922	5,000 00	-	-	-	
	Chap. 546, Acts 1922	15,000 00	14,172 66	14,172 66	5,827 34	
Laundry Building	Chap. 129, Acts 1922	23,000 00	8,666 54	22,746 80	253 20	
Alt. in Infirmaries	Chap. 126, Acts 1923	6,000 00	-	-	6,000 00	
Alt. in Domestic Bldg.	Chap. 126, Acts 1923	47,000 00	33,029 82	33,029 82	13,970 18	
		<hr/>	\$230,000 00	\$118,621 66	\$202,188 99	\$27,811 01

**PER CAPITA.**

During the year the average number of inmates has been 907.34 (includes all patients under care).  
 Total cost for maintenance, \$320,227.60.  
 Equal to a weekly per capita cost of \$6.787.  
 Receipt from sales, \$5,245.23.  
 Equal to a weekly per capita of \$0.1111.  
 All other institution receipts, \$9,240.05.  
 Equal to a weekly per capita of \$0.1958.  
 Net weekly per capita \$6.4801.

Respectfully submitted,

GERTRUDE W. PERRY,  
*Treasurer.*

Examined and found correct as compared with the records in the office of the Comptroller.

JAMES C. McCORMICK,  
*Comptroller.*

## STATISTICAL TABLES

AS ADOPTED BY AMERICAN PSYCHIATRIC ASSOCIATION.  
PRESCRIBED BY THE DEPARTMENT OF MENTAL DISEASES.

TABLE 1. — *General Information.*

1. Date of opening as an institution for the insane: Oct. 22, 1902.						
2. Type of institution: State.						
3. Hospital plant:						
Value of hospital property:						
Real estate including buildings	.	.	.	.	.	\$828,719 09
Personal property	.	.	.	.	.	215,571 48
Total	.	.	.	.	.	\$1,044,290 57
Total acreage of hospital property owned, 1,848.5.						
Total acreage under cultivation during previous year, 342.25.						
ACTUALLY IN SERVICE AT END OF YEAR.						
VACANCIES AT END OF YEAR.						
M.      F.      T.      M.      F.      T.						
4. Officers and employees:						
Superintendents	.	.	.	.	.	1      -      1      -      -      -
Assistant physicians	.	.	.	.	.	3      -      3      -      1      1
Clinical assistants	.	.	.	.	.	-      -      -      1      -      1
Total physicians	.	.	.	.	.	4      -      4      1      1      2
Stewards	.	.	.	.	.	1      -      1      -      -      -
Resident dentists	.	.	.	.	.	1      -      1      -      -      -
Graduate nurses	.	.	.	.	.	-      1      1      -      -      -
Other nurses and attendants	.	.	.	.	.	53      34      87      3      1      4
Teachers of occupational therapy	.	.	.	.	.	6      5      11      -      -      -
Social workers	.	.	.	.	.	-      1      1      -      -      -
All other officers and employees	.	.	.	.	.	42      43      85      7      -      7
Total officers and employees	.	.	.	.	.	107      84      191      11      2      13
ACTUALLY IN INSTITUTIONS.						
ABSENT FROM INSTITUTION BUT STILL ON BOOKS.						
M.      F.      T.      M.      F.      T.						
5. Census of patient population at end of year:						
White:						
Insane	.	.	.	.	.	426      284      710      13      48      61
Epileptics	.	.	.	.	.	1      -      1      -      -      -
Mental defectives	.	.	.	.	.	51      45      96      3      13      16
Alcoholics	.	.	.	.	.	54      12      66      -      -      -
Drug addicts	.	.	.	.	.	2      -      2      -      -      -
Total	.	.	.	.	.	534      343      877      16      61      77
Colored:						
Insane	.	.	.	.	.	4      7      11      1      -      1
Epileptics	.	.	.	.	.	1      -      1      -      -      -
Mental defectives	.	.	.	.	.	1      -      1      -      -      -
Alcoholics	.	.	.	.	.	-      1      1      -      -      -
Total	.	.	.	.	.	6      8      14      1      -      1
Grand total	.	.	.	.	.	540      351      891      17      61      78
M.      F.      T.						
6. Patients employed in industrial classes or in general hospital work on date of report						
477      221      698						
7. Average daily number of all patients actually in institution during year						
523.709      328.179      852.179						
8. Voluntary patients admitted during year						
-      1      1						
9. Persons given advice or treatment in out patient clinics during year						
41      43      84						

TABLE 2. — *Financial Statement.*

See treasurer's report for data requested under this table.

TABLE 3. — *Movement of Patient Population for the Year ending September 30, 1923.*

	INSANE.			TEMPORARY CARE AND OBSERVATION.			SANE VOLUNTARY.			AGGREGATE.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Patients on books of institution Sept. 30, 1922 . . . . .	543	379	922	-	-	-	-	-	-	543	379	922
Admissions during year:												
(a) First admissions . . . . .	12	27	39	9	3	12	-	1	1	21	31	52
(b) Readmissions . . . . .	3	8	11	2	1	3	-	-	-	5	9	14
Total admissions . . . . .	15	35	50	11	4	15	-	1	1	26	40	66
(c) Transfers from other institutions . . . . .	37	20	57	-	-	-	-	-	-	37	20	57
Total received during year . . . . .	52	55	107	11	4	15	-	1	1	63	60	123
3. Total under treatment during year . . . . .	595	434	1,029	11	4	15	-	1	1	606	439	1,045
Discharged from books during year . . . . .	17	13	30	11	2	13	-	1	1	28	16	44
(a) As recovered . . . . .	3	2	5	-	-	-	-	-	-	3	2	5
(b) As improved . . . . .	4	7	11	-	-	-	-	-	-	4	7	11
(c) As not insane . . . . .	6	1	7	-	-	-	-	-	-	6	1	7
(d) As unimproved . . . . .	4	3	7	-	-	-	-	-	-	4	3	7
(e) Transferred to other institutions for the insane . . . . .	3	3	6	-	-	-	-	-	-	3	3	6
(f) Died during year . . . . .	11	11	22	4	9	13	-	-	-	15	20	35
Nominally dismissed for commitment . . . . .	18	24	42	11	2	13	-	1	1	29	27	56
Total discharged during the year . . . . .	38	24	62	11	2	13	-	1	1	49	27	76
5. Remainder on books of institution September 30, 1923 . . . . .	557	410	967	-	-	-	-	-	-	557	412	969
<i>Supplementary Data.</i>												
6a. Average daily number on books during year . . . . .	540.444	382.800	923.235	-	-	-	-	.053	.053	540.444	382.853	923.288
6b. Average daily number actually in institution . . . . .	523.709	328.426	851.658	-	-	-	-	.053	.053	523.709	328.479	852.179
7a. Average daily number in family care . . . . .	5.951	41.615	47.566	-	-	-	-	-	-	5.951	41.615	47.566
7b. Average daily number on visit and escape . . . . .	10.784	12.759	23.543	-	-	-	-	-	-	10.784	12.759	23.543
8. Number of voluntary patients admitted during the year . . . . .	-	-	-	-	-	-	-	1	1	-	-	-
9. Number of temporary care patients admitted during the year . . . . .	-	-	-	15	13	28	-	-	-	15	13	28
10. Number of patients actually remaining in the institution September 30, 1923 . . . . .	557	410	967	-	-	-	-	-	-	557	412	969
State Reimbursing . . . . .	552	401	953	-	-	-	-	-	-	552	401	955
Private . . . . .	4	9	13	-	-	-	-	-	-	4	9	13
11. Persons given advice or treatment in out-patient department during the year . . . . .	-	-	-	-	-	-	-	-	-	41	43	84

TABLE 4. — *Nativity of First Admissions and of Parents of First Admissions for the Year ending September 30, 1923.*

NATIVITY.	PATIENTS.			PARENTS OF MALE PATIENTS.			PARENTS OF FEMALE PATIENTS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
United States . . . . .	9	18	27	5	5	10	11	10	21
Canada <sup>1</sup> . . . . .	1	3	4	2	3	5	3	4	7
England . . . . .	—	—	—	—	—	—	—	1	1
Finland . . . . .	—	2	2	—	—	—	2	2	4
Germany . . . . .	—	—	—	1	1	2	—	—	—
Ireland . . . . .	1	1	2	1	1	2	5	4	9
Italy . . . . .	—	1	1	—	—	—	2	2	4
Poland . . . . .	1	—	1	1	1	2	—	—	—
Russia . . . . .	—	1	1	—	—	—	1	1	2
Other countries . . . . .	—	1	1	—	—	—	1	1	2
Unascertained . . . . .	—	—	—	2	1	3	2	2	4
Total . . . . .	12	27	39	12	12	24	27	27	54

<sup>1</sup> Includes Newfoundland.TABLE 5. — *Citizenship of First Admissions for the Year ending September 30, 1923.*

	M.	F.	T.
Citizens by birth . . . . .	9	18	27
Citizens by naturalization . . . . .	—	—	—
Aliens . . . . .	3	9	12
Citizenship unascertained . . . . .	—	—	—
Total . . . . .	12	27	39

TABLE 6. — *Psychoses of First Admissions for the Year ending September 30, 1923.*

PSYCHOSES.	M.	F.	T.	M.	F.	T.
1. Traumatic psychoses . . . . .	—	—	—	1	7	8
2. Senile psychoses . . . . .	—	—	—	4	2	6
3. Psychoses with cerebral arteriosclerosis . . . . .	—	—	—	—	—	—
4. General paralysis . . . . .	—	—	—	1	—	1
5. Psychoses with cerebral syphilis . . . . .	—	—	—	—	—	—
6. Psychoses with Huntington's chorea . . . . .	—	—	—	—	—	—
7. Psychoses with brain tumor . . . . .	—	—	—	1	—	1
8. Psychoses with other brain or nervous diseases, total . . . . .	—	—	—	1	—	1
9. Alcoholic psychoses, total . . . . .	—	—	—	—	—	—
Other types, acute or chronic . . . . .	1	—	1	—	—	—
10. Psychoses due to drugs and other exogenous toxins, total . . . . .	—	—	—	—	—	—
11. Psychoses with pellagra . . . . .	—	—	—	—	3	3
12. Psychoses with other somatic diseases, total . . . . .	—	—	—	—	—	—
Post-infectious psychosis . . . . .	—	1	1	—	—	—
Cardio-renal diseases . . . . .	—	1	1	—	—	—
Other diseases or conditions . . . . .	—	1	1	—	—	—
13. Manic-depressive psychoses, total . . . . .	—	—	—	4	2	6
Manic type . . . . .	2	—	2	—	—	—
Depressive type . . . . .	2	1	3	—	—	—
Other types . . . . .	—	1	1	—	—	—
14. Involution melancholia . . . . .	—	—	—	—	—	—
15. Dementia præcox (schizophrenia) . . . . .	—	—	—	1	5	6
16. Paranoia and paranoid conditions . . . . .	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	—	—	—	—	1	1
18. Psychoneuroses and neuroses, total . . . . .	—	—	—	—	—	—
Psychasthenic type (anxiety and obsessive forms) . . . . .	—	1	1	—	—	—
19. Psychoses with psychopathic personality . . . . .	—	—	—	—	3	3
20. Psychoses with mental deficiency . . . . .	—	—	—	—	1	1
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—
22. Without psychosis, total . . . . .	—	—	—	—	3	3
Psychopathic personality without psychosis . . . . .	—	1	1	—	—	—
Mental deficiency without psychosis . . . . .	—	1	1	—	—	—
Others . . . . .	—	1	1	—	—	—
Total . . . . .	12	27	39	12	27	39

TABLE 7. — Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.

RACE.	TOTAL.			TRAUMATIC.			SENILE.			WITH CEREBRAL ARTERIO-SCLEROSIS.			GENERAL PARALYSIS.			WITH CEREBRAL SYPHILIS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
English . . . . .	4	10	14	-	-	-	-	2	2	2	1	3	-	-	-	-	-	-
Finnish . . . . .	-	2	2	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
French . . . . .	2	4	6	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
German . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Irish . . . . .	1	5	6	-	-	-	1	4	5	-	-	-	-	-	-	-	-	-
Italian <sup>1</sup> . . . . .	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lithuanian . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Slavonic <sup>2</sup> . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed . . . . .	3	3	6	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-
Total . . . . .	12	27	39	-	-	-	1	7	8	4	2	6	-	-	-	-	-	-

<sup>1</sup> Includes "North" and "South."<sup>2</sup> Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 7. — Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923 — Continued.

RACE.	WITH HUNTING-TON'S CHOREA.			WITH BRAIN TUMOR.			WITH OTHER BRAIN OR NERVOUS DISEASES.			ALCOHOLIC.			DUE TO DRUGS AND OTHER EXOGENOUS TOXINS.			WITH PELLAGRA.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
English . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Finnish . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
French . . . . .	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
German . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Irish . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Italian <sup>1</sup> . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lithuanian . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Slavonic <sup>2</sup> . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-

<sup>1</sup> Includes "North" and "South."<sup>2</sup> Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923 — Continued.*

RACE.	WITH OTHER SOMATIC DISEASES.			MANIC-DEPRESSIVE.			INVOLUTION MELANCHOLIA.			DEMENTIA PRÆCOX.			PARANOIA AND PARANOID CONDITIONS.			EPILEPTIC PSYCHOSES.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
English . . . . .	-	3	3	2	-	2	-	-	-	-	2	2	-	-	-	-	-	-
Finnish . . . . .	-	-	-	-	1	1	-	-	-	-	1	1	-	-	-	-	-	-
French . . . . .	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
German . . . . .	-	-	-	1	-	1	-	-	-	-	1	1	-	-	-	-	-	-
Irish . . . . .	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Italian <sup>1</sup> . . . . .	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Lithuanian . . . . .	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
Slavonic <sup>2</sup> . . . . .	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
Mixed . . . . .	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-
Total . . . . .	-	3	3	4	2	6	-	-	-	1	5	6	-	-	-	-	-	-

<sup>1</sup> Includes "North" and "South."<sup>2</sup> Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.TABLE 7. — *Race of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923 — Concluded.*

RACE.	PSYCHO-NEUROSES AND NEUROSES.			WITH PSYCHOPATHIC PERSONALITY.			WITH MENTAL DEFICIENCY.			UNDIAGNOSED PSYCHOSES.			WITHOUT PSYCHOSES.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
English . . . . .	-	-	-	-	1	1	-	-	-	-	-	-	-	1	1
Finnish . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
French . . . . .	-	-	-	-	1	1	-	-	-	-	-	-	-	1	1
German . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Irish . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Italian <sup>1</sup> . . . . .	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Lithuanian . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Slavonic <sup>2</sup> . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mixed . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-	1	1
Total . . . . .	-	1	1	-	3	3	-	1	1	-	-	-	-	3	3

<sup>1</sup> Includes "North" and "South."<sup>2</sup> Includes Bohemian, Bosnian, Croatian, Dalmatian, Herzegovinian, Montenegrin, Moravian, Polish, Russian, Ruthenian, Servian, Slovak, Slovenian.

TABLE 8. — *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			UNDER 15 YEARS.			15-19 YEARS.			20-24 YEARS.			25-29 YEARS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	1	7	8	-	-	-	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis . . . . .	4	2	6	-	-	-	-	-	-	-	-	-	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	3	3	-	-	-	-	-	-	1	1	-	-	-	-
13. Manic-depressive . . . . .	4	2	6	-	-	-	-	-	-	-	-	-	-	-	-
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	1	5	6	-	-	-	1	-	1	-	2	2	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	3	3	-	-	-	-	-	-	-	-	-	-	1	1
20. With mental deficiency . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	3	3	-	-	-	-	1	1	-	-	-	-	-	-
Total . . . . .	12	27	39	-	-	-	1	1	2	-	3	3	-	1	1

TABLE 8. — *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923 — Continued.*

PSYCHOSES.	30-34 YEARS.			35-39 YEARS.			40-44 YEARS.			45-49 YEARS.			50-54 YEARS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
13. Manic-depressive . . . . .	1	1	2	1	-	1	-	-	-	-	-	-	1	1	2
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	-	1	1	-	-	-	-	1	1	-	-	-	-	1	1
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
19. With psychopathic personality . . . . .	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	1	5	6	1	1	2	-	1	1	-	-	-	1	3	4

TABLE 8. — *Age of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923 — Concluded.*

PSYCHOSES.	55-59 YEARS.			60-64 YEARS.			65-69 YEARS.			70 YEARS AND OVER.			UNASCER- TAINED.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	-	-	-	-	2	2	-	-	-	1	5	6	-	-	-
3. With cerebral arteriosclerosis . . . . .	-	1	1	1	-	1	1	1	2	2	-	2	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	-	-	-	-	-	-	2	2	-	-	-	-	-	-
13. Manic-depressive . . . . .	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	1	1	2	1	2	3	1	4	5	5	5	10	-	-	-

TABLE 9. — Degree of Education of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.

PSYCHOSES.	TOTAL.			ILLITERATE.			READS AND WRITES.			COMMON SCHOOL.			HIGH SCHOOL.			COLLEGE.			UNASCERTAINED.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
	1. Traumatic . . . . .	1	7	8	-	-	-	1	1	2	-	6	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	4	2	6	-	-	-	-	-	-	4	2	6	-	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	1	-	1	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	3	3	-	-	-	-	-	-	-	2	2	-	1	1	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	4	2	6	-	-	-	-	1	2	3	3	3	-	-	-	-	-	-	-	-	-	-
13. Manic-depressive . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
14. Involution melancholia . . . . .	1	5	6	-	-	-	-	-	-	-	1	4	5	-	-	1	1	-	-	-	-	-
15. Dementia praecox . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	18	3	21	-	-	-	-	-	-	-	1	1	2	2	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	3	1	4	-	-	-	-	1	1	2	2	2	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	3	3	-	-	-	-	-	-	-	-	2	2	-	-	-	-	-	-	-	-	-
Total . . . . .	12	27	39	-	1	1	3	4	7	9	19	28	-	2	2	-	1	1	-	-	-	-

TABLE 10. — *Environment of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			URBAN.			RURAL.			UNASCERTAINED.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	1	7	8	1	6	7	-	1	1	-	-	-
3. With cerebral arteriosclerosis . . . . .	4	2	6	3	2	5	1	-	1	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	1	-	1	1	-	1	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	1	-	1	1	-	1	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	3	3	-	3	3	-	-	-	-	-	-
13. Manic-depressive . . . . .	4	2	6	4	2	6	-	-	-	-	-	-
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	1	5	6	1	4	5	-	1	1	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	1	1	-	1	1	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	3	3	-	3	3	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	1	1	-	1	1	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	3	3	-	3	3	-	-	-	-	-	-
Total . . . . .	12	27	39	11	25	36	2	1	3	-	-	-

TABLE 11. — *Economic Condition of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			DEPENDENT.			MARGINAL.			COM- FORTABLE.			UNASCERTAINED.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	1	7	8	1	4	5	-	2	2	-	1	1	-	-	-
3. With cerebral arteriosclerosis . . . . .	4	2	6	1	1	2	2	1	3	1	-	1	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	1	-	1	-	-	-	1	-	1	-	-	-	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	3	3	-	2	2	-	-	-	-	1	1	-	-	-
13. Manic-depressive . . . . .	4	2	6	2	1	3	2	1	3	-	-	-	-	-	-
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	1	5	6	-	3	3	1	1	2	-	1	1	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	3	3	-	2	2	-	1	1	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	3	3	-	2	2	-	-	-	-	1	1	-	-	-
Total . . . . .	12	27	39	5	17	22	6	6	12	1	4	5	-	-	-

TABLE 12. — Use of Alcohol by First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.

PSYCHOSES.	TOTAL.			ABSTINENT.			TEM- PERATE.			INTEM- PERATE.			UNASCER- TAINED.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	1	7	8	1	7	8	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis . . . . .	4	2	6	4	2	6	-	-	-	-	-	-	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	3	3	-	3	3	-	-	-	-	-	-	-	-	-
13. Manic-depressive . . . . .	4	2	6	2	2	4	1	-	1	1	-	1	-	-	-
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	1	5	6	1	5	6	-	-	-	-	-	-	-	-	-
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	3	3	-	3	3	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	1	1	-	1	1	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	3	3	-	3	3	-	-	-	-	-	-	-	-	-
Total . . . . .	12	27	39	8	27	35	1	-	1	3	-	3	-	-	-

TABLE 13. — *Marital Condition of First Admissions classified with Reference to Principal Psychoses for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			SINGLE.			MARRIED.			WIDOWED.			SEPARATED.			DIVORCED.			UNASCERTAINED.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
	1. Traumatic . . . . .	1	7	8	1	2	3	—	2	—	2	—	—	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. With cerebral arteriosclerosis . . . . .	4	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. General paralysis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. With cerebral syphilis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Alcoholic . . . . .	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	—	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Manic-depressive . . . . .	4	2	6	1	—	1	2	2	4	1	—	—	—	—	—	—	—	—	—	—	—	—
14. Involution melancholia . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15. Dementia praecox . . . . .	1	5	6	1	3	4	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—
16. Paranoia or paranoid conditions . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses . . . . .	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality . . . . .	—	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	—	3	3	—	1	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total . . . . .	12	27	39	4	6	10	5	17	22	3	2	5	—	—	—	—	2	2	—	—	—	—

TABLE 14. — *Psychoses of Readmissions for the Year ending September 30, 1923.*

PSYCHOSES.	M.	F.	T.
1. Traumatic psychoses	-	-	-
2. Senile psychoses	-	-	-
3. Psychoses with cerebral arteriosclerosis	-	-	-
4. General paralysis	-	-	-
5. Psychoses with cerebral syphilis	-	-	-
6. Psychoses with Huntington's chorea	-	-	-
7. Psychoses with brain tumor	-	-	-
8. Psychoses with other brain or nervous diseases	-	-	-
9. Alcoholic psychoses	2	-	2
10. Psychoses due to drugs and other exogenous toxins	-	-	-
11. Psychoses with pellagra	-	-	-
12. Psychoses with other somatic diseases	-	-	-
13. Manic-depressive psychoses	1	5	6
14. Involution melancholia	-	-	-
15. Dementia præcox	-	3	3
16. Paranoia and paranoid conditions	-	-	-
17. Epileptic psychoses	-	-	-
18. Psychoneuroses and neuroses	-	-	-
19. Psychoses with psychopathic personality	-	-	-
20. Psychoses with mental deficiency	-	-	-
21. Undiagnosed psychoses	-	-	-
22. Without psychosis	-	-	-
Total	3	8	11

TABLE 15. — *Discharges of Patients classified with Reference to Principal Psychoses and Condition on Discharge for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			RECOVERED.			IMPROVED.			UNIM-PROVED.			NOT INSANE.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Senile	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
3. With cerebral arteriosclerosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. General paralysis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. With brain tumor	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Alcoholic	2	1	3	1	-	1	-	1	1	1	-	1	-	-	-
10. Due to drugs and other exogenous toxins	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. With pellagra	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. With other somatic diseases	-	1	1	-	1	1	-	-	2	-	-	-	-	-	-
13. Manic-depressive	3	2	5	2	1	3	1	1	2	-	-	-	-	-	-
14. Involution melancholia	-	2	2	-	-	-	-	2	2	-	-	-	-	-	-
15. Dementia præcox	6	3	9	-	-	-	3	2	5	3	1	4	-	-	-
16. Paranoia or paranoid conditions	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19. With psychopathic personality	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
20. With mental deficiency	-	1	1	-	-	-	-	1	1	-	-	-	-	-	-
21. Undiagnosed psychoses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
22. Without psychosis	4	4	8	-	-	-	-	-	-	-	-	-	4	4	8
Total	17	14	31	3	2	5	4	7	11	6	1	7	4	4	8

TABLE 16. — Causes of Death of Patients classified with Reference to Principal Psychoses for the Year ending September 30, 1923.

CAUSES OF DEATH.	TOTAL.			SENILE.			WITH CEREBRAL ARTERIO-SCLEROSIS.			GENERAL PARALYSIS.			ALCOHOLIC.			MANIC-DEPRESSIVE.			INVOLUTION MELAN-CHOLIA.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
<i>General Diseases.</i>																						
Tuberculosis of lungs . . . . .	3	2	5	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-
Diabetes . . . . .	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Nervous System.</i>																						
Apoplexy (cerebral hemorrhage) . . . . .	4	6	10	1	1	2	-	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-
General paralysis of insane . . . . .	1	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
<i>Circulatory System.</i>																						
Endocarditis and myocarditis . . . . .	7	1	8	2	1	3	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
<i>Respiratory System.</i>																						
Bronchopneumonia . . . . .	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lobar pneumonia . . . . .	1	1	2	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-
<i>Digestive System.</i>																						
Hernia and intestinal obstruction . . . . .	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	18	11	29	4	2	6	-	-	3	3	1	-	1	3	-	3	4	7	-	-	-	-

TABLE 16. — Causes of Death of Patients classified with Reference to Principal Psychoses for the Year ending September 30, 1923  
— Concluded.

CAUSES OF DEATH.	DEMENTIA PRÆCOX.		PARANOIA OR PARANOID CONDITIONS.		EPILEPTIC PSYCHOSES.		PSYCHO- NEUROSES AND NEUROSES.		WITH PSYCHOPATHIC PERSONALITY.		WITH MENTAL DEFICIENCY.		ALL OTHER PSYCHOSES. <sup>1</sup>				
	M.	F.	M.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
<i>General Diseases.</i>																	
Tuberculosis of lungs . . . . .	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Diabetes . . . . .	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Nervous System.</i>																	
Apoplexy (cerebral hemorrhage) . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
General paralysis of insane . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Circulatory System.</i>																	
Endocarditis and myocarditis . . . . .	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Respiratory System.</i>																	
Bronchopneumonia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lobar pneumonia . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<i>Digestive System.</i>																	
Hernia and intestinal obstruction . . . . .	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total . . . . .	6	2	8	-	-	-	-	-	-	-	-	-	-	1	-	-	1

<sup>1</sup> Includes group 22 "without psychoses."





TABLE 18. — *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the Year ending September 30, 1923.*

PSYCHOSES.	TOTAL.			LESS THAN 1 MONTH.			1-3 MONTHS.			4-7 MONTHS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	4	2	6	—	—	—	1	—	1	1	—	1
3. With cerebral arteriosclerosis . . . . .	—	3	3	—	2	2	—	—	—	—	—	—
4. General paralysis . . . . .	1	—	1	—	—	—	—	—	—	—	—	—
5. With cerebral syphilis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
9. Alcoholic . . . . .	3	—	3	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
13. Manic-depressive . . . . .	3	4	7	—	—	—	—	—	—	—	—	—
14. Involution melancholia . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
15. Dementia præcox . . . . .	6	2	8	—	—	—	—	—	—	—	—	—
16. Paranoia or paranoid conditions . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	1	—	1	—	—	—	—	—	—	—	—	—
Total . . . . .	18	11	29	—	2	2	1	—	1	1	—	1

TABLE 18. — *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the Year ending September 30, 1923—*  
Continued.

PSYCHOSES.	8-12 MONTHS.			1-2 YEARS.			3-4 YEARS.			5-10 YEARS.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
2. Senile . . . . .	—	1	1	1	—	—	1	1	2	—	—	—
3. With cerebral arteriosclerosis . . . . .	—	—	—	—	1	1	—	—	—	—	—	—
4. General paralysis . . . . .	—	—	—	—	—	—	—	—	—	1	—	1
5. With cerebral syphilis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
6. With Huntington's chorea . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
7. With brain tumor . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
8. With other brain or nervous diseases . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
9. Alcoholic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
10. Due to drugs and other exogenous toxins . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
11. With pellagra . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
12. With other somatic diseases . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
13. Manic-depressive . . . . .	1	—	1	—	—	—	—	—	—	—	2	2
14. Involution melancholia . . . . .	—	—	—	—	—	—	—	—	—	2	1	3
15. Dementia præcox . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
16. Paranoia or paranoid conditions . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
17. Epileptic psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
18. Psychoneuroses and neuroses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
19. With psychopathic personality . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
20. With mental deficiency . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
21. Undiagnosed psychoses . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
22. Without psychosis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—
Total . . . . .	1	1	2	1	1	2	1	1	2	3	3	6

TABLE 18. — *Total Duration of Hospital Life of Patients dying in Hospital classified according to Principal Psychoses for the Year ending September 30, 1923—Concluded.*

PSYCHOSES.	10-15 YEARS.			15-20 YEARS.			20 YEARS AND OVER.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1. Traumatic . . . . .	-	-	-	-	-	-	-	-	-
2. Senile . . . . .	-	-	-	-	-	-	-	-	-
3. With cerebral arteriosclerosis . . . . .	-	-	-	-	-	-	-	-	-
4. General paralysis . . . . .	-	-	-	-	-	-	-	-	-
5. With cerebral syphilis . . . . .	-	-	-	-	-	-	-	-	-
6. With Huntington's chorea . . . . .	-	-	-	-	-	-	-	-	-
7. With brain tumor . . . . .	-	-	-	-	-	-	-	-	-
8. With other brain or nervous diseases . . . . .	-	-	-	-	-	-	-	-	-
9. Alcoholic . . . . .	-	-	-	1	-	1	2	-	2
10. Due to drugs and other exogenous toxins . . . . .	-	-	-	-	-	-	-	-	-
11. With pellagra . . . . .	-	-	-	-	-	-	-	-	-
12. With other somatic diseases . . . . .	-	-	-	-	-	-	-	-	-
13. Manic-depressive . . . . .	-	1	1	1	-	1	1	1	2
14. Involution melancholia . . . . .	-	-	-	-	-	-	-	-	-
15. Dementia præcox . . . . .	-	-	-	2	1	3	2	-	2
16. Paranoia or paranoid conditions . . . . .	-	-	-	-	-	-	-	-	-
17. Epileptic psychoses . . . . .	-	-	-	-	-	-	-	-	-
18. Psychoneuroses and neuroses . . . . .	-	-	-	-	-	-	-	-	-
19. With psychopathic personality . . . . .	-	-	-	-	-	-	-	-	-
20. With mental deficiency . . . . .	-	-	-	-	-	-	-	-	-
21. Undiagnosed psychoses . . . . .	-	-	-	-	-	-	-	-	-
22. Without psychosis . . . . .	-	-	-	-	-	-	1	-	1
Total . . . . .*	-	1	1	4	1	5	6	1	7

TABLE 19. — *Family Care Department.*

	M.	F.	T.
Remaining Sept. 30, 1922 . . . . .	8	44	52
Admitted within the year . . . . .	7	38	45
Whole number of cases within the year . . . . .	15	82	97
Dismissed within the year . . . . .	9	42	51
Returned to institution . . . . .	8	40	48
Discharged . . . . .	-	-	-
Escaped . . . . .	-	2	2
Dismissed to visit . . . . .	-	-	-
Died . . . . .	1	-	1
Remaining September 30, 1923 . . . . .	6	40	46
Supported by the State . . . . .	1	33	34
Self-supporting . . . . .	5	7	12
Private . . . . .	-	-	-
Number of different persons within the year . . . . .	7	38	45
Number of different persons admitted . . . . .	7	31	38
Number of different persons dismissed . . . . .	8	26	34
Daily average number . . . . .	5.950	41.614	47.564
State . . . . .	3.339	34.067	37.406
Self-supporting . . . . .	2.611	7.547	10.158
Private . . . . .	-	-	-