

to. About 20 men and 30 women are confined to bed daily, for the sake of quietness as well as for sickness. Many of the general paralytics lie on beds of powdered wood. This takes up the excreta, and is removed from time to time. The plan is much adopted in Germany, and originated, I was told, in Dalldorf.

The proportion of attendants to patients is 1-10. They are poorly dressed. Changes amongst them are frequent. Amongst the amusements provided for the patients are dances, concerts, and theatricals. There is a good library. Divine service is conducted by clergymen from Berlin.

Medical treatment resembles that used in England. Sedatives (chiefly sulphonal and paraldehyde) are used in much the same amount as here. Hypnotism has failed and drugs are discarded, as far as possible, in favour of food and occupation. The former is sufficient and good. Cost of patients per head per diem=1.96 mark. There are numerous and spacious side rooms; padded walls are dispensed with. Mechanical restraint is not in fashion, but strong dresses are employed for patients who destroy clothing, and seclusion is made use of upon occasion. The patients are employed on a very large scale, and in many trades. There are joiners, bootmakers, tailors, decorators, bookbinders, painters, glaziers, brush and cigar makers. In addition, during the past year the work of two healthy clerks was done in the office by patients. On the farm, in the grounds, in sewing rooms, and in wash-houses patients are daily employed. About twenty minutes' walk from the institution is a colony, consisting of two houses accommodating about 80 men who work out. The worth of the patients' labour during the year of last report is estimated at more than £1,600. As rewards for work done, beer, snuff, and tobacco are given. Many discharged patients are cared for by a sort of After-Care Association in Berlin (Hilfsverein).

Both at Dalldorf and at the Charité I received specimens of the forms in accordance with which the patient's history is taken; in thoroughness they are characteristically German. If answers are usually received to all the questions put down in these forms the reports must be of uncommon value, and the German public at once more educated and obliging than the English.

For some of the facts noted I am indebted to the official report upon the State asylums for the year ending March 31, 1890.

I am, Sirs, yours faithfully,  
EDWIN GOODALL.

Wakefield Asylum.

#### PROVISION FOR PRIVATE PATIENTS.

*To the Editors of "THE JOURNAL OF MENTAL SCIENCE."*

SIRS,—On page 511 (being the President's Address) of the "Journal of Mental Science" for October, 1891, the following passage occurs: "The Lunacy Act encourages provision for such cases (meaning private patients), either attached to or separated from existing establishments; but so far as I can learn no public body has yet considered the advisability of building for them."

As the foregoing passage requires correction, and as I have not received any application for information, I hope you will allow me to state that the Committee of this asylum have not only considered the advisability of making such provision, but more than two years ago gave instructions to their architect (Mr. Geo. T. Hine) to design special blocks for private patients, 25 of each sex, in connection with the additions to, and alterations at, this asylum.

These designs were approved of and sanctioned by the Secretary of State and the Lunacy Commissioners, and the work is now in the hands of the builders.

I have reason to believe that this is the first County Asylum to provide

special accommodation for private patients under Sec. 255 of the Lunacy Act, 1890; but is it not a fact that, for many years, the County Asylum for Cornwall has had a special detached residence for private patients?

I am,

Your obedient servant,  
Dorset County Asylum. P. W. MACDONALD, M.D.

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*Obituary.*

ISAAC ASHE, M.B., T.C.D.

We regret to have to record the death of Dr. Isaac Ashe, at the Dundrum Criminal Asylum, on the 19th December, 1891.

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Though not a medical man, or a member of the Association, yet we feel that the life-long connection which Mr. Haydon had with asylums makes it fitting that his death, on November 9, 1891, at the age of 69, should be noticed. The son of a naval officer, he was an early explorer of Australia, being the first to cross (some 50 years ago) from Melbourne to Gippsland. He spent only a few years in the Colony, and soon after his return to England became Steward to the Devon Asylum, Dr. Bucknill being the superintendent, and there began a life-long friendship between the two. We believe we are right in saying that they were among the first, if not the very first, who were enrolled as volunteers when the movement started. Later, Mr. Haydon was appointed to Bethlem, and was later called to the Bar, though we believe he never had a brief. He was Steward to Bethlem for 36 years, during which time he saw a succession of superintendents—from the first, after the removal of visiting physicians, Dr., afterwards Sir Charles Hood, Drs. Helps, Williams, Savage, and Percy Smith. All who knew him respected and loved him. He had as kindly a nature as it is possible to conceive, and the personal interest he took in the comforts of the patients was fully recognized by those who worked with him. He was loyal to his superintendent, and ever ready to aid him. His fine manly presence, his tactful goodness, were greatly missed when he resigned two years ago to enjoy too shortly his well-earned pension.

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CANDIDATES WHO PASSED THE EXAMINATION FOR THE  
CERTIFICATE OF PROFICIENCY IN NURSING, NOV., 1891.\*

*Royal Asylum, Morningside, Edinburgh.*

MALES.

John Barrie.  
Donald S. Fraser.  
John Fraser.  
James Grant.  
John Innes.  
Alexander Mackenzie.  
Daniel Burgess.  
John Hogg.  
Charles Tough.  
George Wilson (*Ayr District  
Asylum*).

FEMALES.

Jessie Hodge.  
Christina Leith.  
Mary Mather.  
Christina Watt.  
Jemima Watt.

\* It will be seen from the Advertisement-sheet that the Handbook for instruction of Attendants may be had direct from the publishers on special terms. The third thousand is