

SOME OBSERVATIONS ON THE PROGRESS OF PSYCHIATRY.¹

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“Medical Jurisprudence is a branch of jurisprudence that pertains to questions concerning wounds, poisons, insanity, and presumption of survivorship requiring technical knowledge of the medical sciences for their elucidation and determination.” It is not my purpose to deal with the subject in its entirety, but I will confine myself to that part pertaining to insanity; describing the methods of provision for, management and treatment of, mental diseases now adopted in this country.

It is necessary to refer to ancient methods in order to contrast the progress that has been made in this branch of science.

The past history of psychiatry up to the middle ages is known as the era of demoniacal exorcism. From this period up to and including the eighteenth century it is known as the chain and dungeon era; then follows that of the special asylums and hospitals, which continue to the present time with gradations of improvement to meet the existing conditions of scientific advancement.

All alienists agree that the earlier insanity is recognized and given the proper treatment, the more favorable is the prognosis; therefore the most modern method is the establishment of psychopathic hospitals for immediate provision and treatment, obviating the delay incidental to admitting the patient to the eleemosynary institutions for the insane.

This method is of prime importance to the patient and a source of comfort to those immediately interested, besides its adoption would render it unnecessary to provide custodial care in prisons, a custom which needs only to be mentioned to be condemned.

¹ Read before the thirty-fifth annual meeting of the State Medical Association at San Antonio, Texas, 1903.

After a certain period of time, the stationary and unimproved patients in these psychopathic hospitals are adjudged of unsound mind and committed to the regular hospitals for the insane.

Germany is taking the front rank in constructing these institutions, having them in all the large cities; they are managed and equipped similarly to our general charity hospitals.

Alienists and students of mental diseases substitute the terms "hospitals" and "mentally diseased" for "lunatic asylums" and "crazy;" these latter designations are harsh and frequently produce a deleterious moral effect on the sensitive patient. The laity are uneducated to the fact that insanity is not a disgrace, and so long as they persist in stigmatizing the mentally afflicted, so long will the restorations be diminished. The frequent recurrence of mental disease is largely due to the want of confidence that the restored patient encounters, involving a humiliation which revives the exciting cause.

At the close of the nineteenth century we have special institutions for the insane, epileptic, criminal insane, inebriates and mental defectives such as idiots, imbeciles and feeble-minded.

The methods of provision have undergone a decided change and the block or concrete system of buildings is being superseded by the cottage plan, which affords a more home-like environment for the patient whereas the block system is too sudden a departure from domestic life to be conducive to real comfort and happiness.

Since all observers agree that more good is accomplished by moral agencies in the treatment of mental diseases than by medicinal agents, the patient should be placed in the most suitable environment, home-like, sociable, with orderly and friendly associates. The psychical impression made upon an individual in a confused mental state is quite a factor in the ultimate prognosis and no expense should be spared in constructing our state hospitals with all the modern appointments. I heartily endorse the cottage system as the most feasible plan of provision for the mentally diseased; it offers many advantages over the block system:

First. A classification which insures happiness and contentment—a condition which aids materially the prognosis.

Second. An ideal hygienic system is secured.

Third. Isolation of infectious and communicable diseases.

Fourth. The danger of fire is very much reduced and the entire institution is not exposed, a condition that is a source of much anxiety in the block system where hundreds of patients are housed under one roof.

Fifth. The cost of construction, maintenance and repairs is not any more than that of the block system.

The physical management of our hospitals for the insane and the scientific treatment of mentally diseased and mental defectives has made wonderful progress in the United States, surpassing that of similar institutions in Europe, but there is a deficiency in original research from a pathological standpoint which is made a special department of study in the foreign hospitals, whereas only a small number of our institutions have well-equipped pathological laboratories. However this department is recognized as an important adjunct and it is only a question of time when the others will fall into line.

Many of our state hospitals have a well organized staff of physicians and surgeons who are enthusiastic in this branch of science, not so much for the remuneration they receive as from patriotic and charitable feelings toward their fellow-man.

The moral influence that encouraging words, patience and diplomacy exert, is of the greatest importance in the treatment, and can only be acquired by long experience and special study of each case. Another commendable feature is the regular staff meetings, the object and purpose being to present papers and cases which are discussed; there is no question that such meetings act as a stimulus and each member of the staff will naturally put forth his best efforts.

I will briefly outline what constitutes the accepted methods in this country for the public care and treatment of mental diseases from an eleemosynary basis. The location of an institution of this kind is of special importance to the public and state; a site should be selected near the center of a given population, easily accessible from all directions by adequate railroad facilities; there should be at least one tillable acre of land to each patient, and the capacity of the institution should not exceed twelve hundred beds.

The surroundings should be hygienic, there should be natural drainage, an uncontaminated atmosphere and an inexhaustible supply of pure water. An abundance of native shade trees adja-

cent to the building site will save expense and provide shade for the patients, visitors and employees. A gravel-pit on the premises will insure good walks and roads at a minimum cost.

The institution should be constructed on the cottage plan with all the modern appointments and intrusted to the management of a wide-awake, energetic superintendent, endowed with recognized executive ability and scientific knowledge; he should surround himself with enthusiastic, educated and conscientious medical assistants, loyal in every respect; and select competent heads for the other departments.

A pathological laboratory should be established, original research encouraged and regular staff meetings held at stated intervals, where papers and questions beneficial to the institution should be discussed.

There should be a well equipped operating-room, in construction and arrangement similar to those in our general charity hospitals, where aseptic surgery can be done according to modern methods. Electro- and hydro-therapeutic apparatuses should be installed as important adjuncts to the hospital equipment.

Trained attendants are much superior in every way to the inexperienced, therefore training schools should be established with a two years' course for graduation. The didactic and clinical lectures should be delivered by the hospital staff, assisted by experienced graduated tutors who should instruct in the practical duties in the ward and at the bedside.

Diversion is an important adjunct in producing contentment and mental rest, as idleness breeds discord. Patients are encouraged to take exercise, as daily recreation in the park, and assist with the work in the different departments of the institution, but no drastic measures are permitted to coerce them; the general experience of observers both in this country and in Europe is that properly selected employment for each patient is of great value in the treatment and this systematic employment is profitable to the institution.

All of those who are physically able and understand in a measure the import of the duties assigned are permitted to employ themselves. They assist in the general housekeeping of the ward, and many of the females become quite proficient in mending, knitting, hemstitching, crochet and drawn-work.

The different departments have their regular quota of patients—the laundry, sewing-room, kitchen, barns, mattress-shop, farm, grounds, store-room, plastering, painting, plumbing, dairy, garden, tailoring, dining-rooms, provisions being also made for emergencies that come up from time to time. Precaution is taken at all times to prevent over-exertion on the part of anyone.

The average amount of labor done by a patient is estimated as being about one-fourth of that of a sane person under the same conditions and circumstances.

Various amusements receive special attention and many of our state hospitals have a well organized orchestra to furnish music, which Abbott says is the only “perfect language of the higher emotions.”

Games, both indoor and outdoor, as cards, billiards, pool, dominoes, checkers, chess, lawn-tennis, base-ball, foot-ball and other field sports, have their place in the treatment of mental diseases.

Literature is provided, books, periodicals and newspapers—which furnishes a mental stimulus and is the means of whiling away the time and the dissipating lonesome feeling that idleness courts. Also the regular dances which permit the males and females to mingle with each other and are a source of especial enjoyment to them. Other diversions, as band concerts, matinees, concerts, carriage drives, picnics, fishing parties, as well as gymnasia, bowling alleys and swimming pools are recognized as important adjuncts to up-to-date institutions. These methods of diversion aid in producing new fields of thought and stimulate a cheerful feeling; besides it goes without contradiction that a depressed mental state naturally exists in any individual who is deprived of his freedom.

A system of open wards where patients are allowed the privilege of going out and coming in at pleasure, within certain prescribed hours, has proven to be quite a success, it restores the confidence of the patient and cultivates self-reliance. Certain rules are prescribed as to boundary limitations and conduct. It requires clear forethought and judgment in perfecting a classification for this system and can only be available by those who understand what constitutes honor and integrity.

A most important feature of this plan is the abolition of re-

straints, which permits a more natural condition and removes the continuous exciting influences that close confinement and seclusion engender.

It is the present policy in many institutions to discountenance any mechanical restraint—padded rooms, chains, muffs, wristlets, lockbeds and lock-chairs. It has been ascertained that the most violent, restless and destructive patient can be controlled without these methods; however chemical restraints assist in a measure, but they have been reduced to a minimum.

The locking of patients in rooms and dormitories at night is becoming obsolete, but is necessary in some cases. The open door policy aids materially in improving the hygienic conditions and reduces the danger of accident.

The employment of an increased number of night attendants is necessary, but the expense incurred is of secondary importance when the health and comfort of the patient are under consideration.

The construction of open pavilions on the grounds, isolated from the public drives and walks, is a feature that redounds to the credit of any hospital, especially where shade trees are conspicuous by their scantiness. Their architecture should be rustic in design and they should be equipped with comfortable seats, patent swings and hammocks, free latitude being permitted for social enjoyment and amusement.

Admission of visitors to the grounds, various departments and special wards is a prevalent custom in many state hospitals. I regret to say that the existing ideas of restraint and raving maniacs, as the phenomena to be observed, continue to cling to the public and many turn away with disappointment, because they were not allowed to see the worst cases, where dungeons, chains, padded rooms and other contrivances are supposed to exist. Such ideas show lack of education on the part of our citizenship and these people do not understand that these methods have about disappeared under modern provision, care and treatment.

The plan for adjudging patients requires a regular legal process but the jury trials and other proceedings that are necessary for criminals are becoming obsolete, in determining the mental soundness of an individual. It is only those who come in daily contact with these patients that can appreciate the mental anxiety that

such methods excite and practical experience has demonstrated that deleterious results follow such a practice, both from a moral and psychological standpoint. You frequently hear them plead that they were innocent of the charge and that no infraction of the criminal statutes was committed, but the usual confinement in jail makes an indelible impression, which requires patience and reason to eliminate. This particularly applies to those patients that possess some degree of intelligence and have delusions of persecution.

The most approved method for adjudging a person of unsound mind is outside of the temple of justice, except in contested cases. No publicity should be countenanced and in preparing the necessary court papers, care should be exercised, that the unbiased evidence of two or more members of the medical profession should be secured as well as any other evidence under oath to prove conclusively that such a person is of unsound mind.

Approved blank forms, as recommended by the state hospitals, should be filled out with care, so that a complete history of the case can be ascertained. It is important to have the family and personal history as also the facts pertaining to the immediate attack. Correct data aid in making up the statistical tables for the annual report and furnish compact knowledge from which deductions and conclusions can be made.

It should be the policy of all our states to make ample provision for the insane, so that trained attendants can be dispatched to immediately and safely conduct the individual to the state hospital.

Public opinion will ultimately demand that such cases should not be incarcerated in prisons, even for a short period of time. Mental unsoundness is a disease of the brain, either due to direct or remote functional derangement of the nervous system, which may be transient or become organic in character, resulting from heredity or stress; therefore ample provision, care and best methods of treatment become a duty that the public owes to its unfortunate fellowman. It devolves upon the twentieth century to correct these inhuman customs, which can only be done by education.

The evil effect produced by an aggregation of the different types of mental diseases clearly demonstrates the wisdom of segregation. It is necessary for many of the state hospitals to provide custo-

dial care and treatment for idiots, imbeciles, feeble-minded, inebriates and epileptics, which brings together a heterogeneous population and produces a condition by no means conducive to the improvement of each class.

It is practically impossible to manage scientifically an institution of this kind. State provision for each class is the solution of the problem, and special institutions should be constructed with all the modern appointments, where the number of cases will justify the expense. Texas is now building the State Epileptic Colony at Abilene which will eventually remove the epileptics from hospitals for the insane. The time is coming when another eleemosynary institution will be constructed for the care, education (both industrial and literary) and treatment of those mental defectives termed idiots, imbeciles and feeble-minded. The purpose will be to admit children within certain prescribed ages and remove them from the hospitals for the insane. It has been clearly shown by similar institutions in other states and countries that a certain percentage can be educated and so mentally improved as to make useful citizens, nor is the general improvement in the majority of cases to be disregarded.

Public provision for inebriates is another approved plan, but little progress has been made in this country, separate institutions being provided for those types of mental diseases resulting from alcoholism, both acute and chronic. It requires no forethought to see what a benefit it will be to the citizenship and posterity of any state. Numbers of these cases can be cured in a very short time, if no permanent pathological change has taken place in the cerebral tissue or vital organs.

In all eleemosynary institutions there are cases of pulmonary tuberculosis and special cottages should be erected, with complete equipments. A perfect sanitary condition is all important, with good ventilation and solariums. The most approved method of treatment should be given in all its details.

There is another class known as the criminal insane, and here observation and judgment are required in forming an opinion in cases of suspected simulation. The association of this class with the other patients in our state hospitals exerts a detrimental influence upon the sensitive and appreciative person; also on those that have delusions of persecution. Insane criminals, according

to their nature, require entirely different disciplinary treatment from the ordinary insane. It is best to segregate such cases in isolated annexes or establish a branch department at the most centrally located institution. The object and purpose of this department should be to admit persons, where the plea of insanity is a defense for a violation of the criminal statutes, and those that have become mentally unsound after conviction before their term of punishment has expired. The suspected cases of simulation should be closely observed at all times and the importance of a trained corps of attendants will materially aid in detecting the malingerer. The system of provision, care and treatment, will necessarily be more drastic than that for the other mentally diseased.

The most approved method for the criminal class is separate institutions, but this is not economical unless the number of cases justifies the expense.

It is difficult to realize the number of eleemosynary and penal institutions in all countries and their number is gradually increasing. There is a limit to all things, and it is only a question of time when the philanthropists and taxpayers will see the necessity of restrictive laws intended to prevent the hereditary transmission of disease. The statutes should be so drastic as to stop all procreation of species among the defective and, if enforced in all their details, will in a degree improve the vigor and health of our citizenship, as is forcibly illustrated in the animal kingdom.

Education of the masses is a means to this end of solving this momentous problem, but so long as personal liberty is engrafted in our souls, so long will the hereditary transmission of diseases continue notwithstanding the protests of our profession and students of psychiatry.

In conclusion I cannot refrain from trying to impress the necessity of education along this line in regard to our legislative bodies. It is a physical impossibility for the management of the state hospitals for the insane and mental defectives to incorporate modern principles with inadequate appropriations.

Economy and honesty are a necessity in all state governments, but the public service frequently retrogrades because cheapness is considered economy. It is not right to place the dollar before our unfortunate fellowman, and liberal means should be provided,

from time to time as necessity demands, for the proper care and treatment of mental diseases. Legislators know that the people desire an economical and honest administration of the state government and their consciences dictate the necessity of guarding their interest, but in doing so they do not represent the friends and relatives of the indigent patients, who demand and expect of the management of these institutions everything imaginable for their proper treatment. In fact we are brought face to face with the saying, "If you are going to do anything, do it well."

How can a progressive superintendent follow the dictates of his conscience when he so carefully prepares an annual budget, to meet the demands of the people and to keep abreast of the time, and then has it trimmed down by the inexperienced, so that the expense of the government should not exceed the revenue, thereby forcing an imperative necessity for the public service of many state hospitals to be deprived of means that are so necessary for their proper management in all of its details. Banquo's ghost arises and frightens those who have future political aspirations, if they conceive the idea of providing more revenue. Self preservation, the spirit of politics, pervades their innermost souls.