

they survive for a year or two, will probably again become mentally afflicted. For the patients themselves the outlook is anything but encouraging; for the public it ought to be one of considerable anxiety, and of some danger.

The discharge of patients, even under the most favourable circumstances, is for me always a matter of supreme concern. The brain, at once the most complex thing in nature, and under ordinary conditions the strongest organ in the human body, once broken probably never recovers to the extent that most other organs do; it apparently becomes a fragile thing as compared with what it formerly was, and the expert cannot fail to note the gradually decreasing strain that culminates in each successive relapse. The knowledge of this fact increases the difficulty in discharge. It becomes a question whether the once diseased brain should not always be regarded as too frail for freedom. Three classes of cases present more than ordinary difficulty—First, that class where the patients remain, so far as one can judge, perfectly sane so long as they are under the discipline and control of an asylum, but for whom liberty becomes a strain that soon induces relapse; second, the naturally melancholic and sensitive class, who after so-called recovery feel their position acutely, and who, unable at once to find suitable employment, brood, relapse more or less, and too often find suicide the easiest solution of their difficulty; third, the violent and dangerous class, who after recovery may remain well for months or years, but many of whom we know will relapse and perhaps become more dangerous. In the last class the law to some extent recognises the difficulty, and relieves the medical superintendent of responsibility. If a man commits a greater or lesser crime, and is committed to the asylum by a Judge of the Supreme Court, he is detained during the Colonial Secretary's pleasure; but if a man in a fit of insanity attempts to murder another, and is checked in the act, he must be discharged upon recovery, although his intentions may have been most deadly, and although it is always possible that an outbreak will again occur and the consequences be disastrous. I do not hesitate to state that in all such cases my mind inclines to oppose discharge; but it seems to me that the natural dread in the public mind of the detention of a so-called sane man in an asylum far outweighs the dangers which accrue from his discharge and the transmission of his insane tendency. Moreover, the increase in asylum accommodation which would consequently result is perhaps in itself, in the meantime, an effectual bar to the success of any measure so drastic.

The recovery-rate for the year is as follows: Males, 31·14 per cent.; females, 50 per cent.

The death-rate, calculated on average number resident during the year, is—Males, 10·8 per cent.; females, 5·5 per cent.

It will be noticed that both the recovery- and death-rates for males compare unfavourably with those for females. This is partly due to the higher moral tone of the female patients previous to admission, leading to fewer hopeless wrecks; to the fact that amongst the females we have had no general paralytics; and, as far as the death-rate is concerned, to the better hospital accommodation and better nursing provided for the female patients. The proposed new wing on the male side will remedy a long-standing evil, and provide a hospital ample for our requirements for, I hope, many years.

The enforced retirement of ex-Attendant Owens, owing to general physical infirmity and increasing blindness, is severely felt in the hospital, although he has been to a large extent incapacitated for a considerable period. He had been a faithful servant for about twenty-three years, and I was extremely pleased to note that he received full compensation for his long service. Now that he has gone, I think the time has arrived for a radical change in the Asylum hospital nursing. The average man is an impossible nurse, and I can see no reason why he should be longer tolerated. The introduction of elderly married women would, I am convinced, be a decided improvement. I know of no asylum where women are engaged in the male hospital wards, but in an address delivered by Dr. Spence at a meeting of the Medico-Psychological Association held in London in July, 1899, he states, "The sick-nursing of the male patients is unquestionably a department in which the services of women will be more and more utilised." It will unduly lengthen my report to comment further on this matter, but I trust that on the completion of the new wing you will approve at least of an experiment in that direction.

During the year we have had to face an epidemic of measles and one of influenza. On the last day of the year nearly sixty patients were confined to bed suffering from influenza. Only one death was directly due to influenza, but it has left an unwished-for legacy. Only one serious accident occurred, an aged Maori being accidentally knocked over by another patient, fracturing her thigh.

Farm-work is vigorously carried on. The new farm-manager is active and industrious, and I look for much better results than we have had in the past.

A considerable amount of work is being done in the interior of the main building in the way of improving ventilation and rooting out unnecessary *cul-de-sacs* and holes that are a menace to the health of patients and attendants. This work must necessarily be slow owing to the small amount of space available for the temporary transfer of patients, but I hope to continue it until we reach something approaching sanitary perfection.

Unfortunately it was found necessary to make many changes in the staff. The changes have been markedly beneficial.

Our thanks are due to the proprietors of the *Herald*, who for years have daily furnished us with a number of copies of the *Herald*; to various ladies and gentlemen who have contributed to the amusement of patients; and to the United Fire-brigades Band, who on several occasions have pleased the patients with instrumental music.

I have, &c.

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Medical Superintendent.

The Inspector-General of Asylums, Wellington.