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ADJUNCTS TO MEDICAL TREATMENT IN HOSPITALS FOR THE INSANE.*

BY M. J. WHITE, M. D.,
Medical Superintendent, Milwaukee Hospital for Insane, Wauwatosa, Wis.

Within but a comparatively recent period has the subject of the care and treatment of the unfortunate victims of mental disease been given due consideration with reference to the various auxiliary measures to be employed in promoting a return to normal conditions in curable cases presented for treatment, and the amelioration of the larger class capable of enjoying a partial state of usefulness in the world. In reviewing the history of the treatment of the insane prior to the last decade, the lack of the governing principle calculated to meet the conditions presented on a rationally physiological basis will, in the light of subsequent experience, appear prominently to view. It is not my purpose to indulge in a retrospect of the conditions met with in the remote history of this peculiar class, when the affection occupied a somewhat novel position in the estimation of the profession and the laity; before it was accredited a morbid condition or disease and when the sufferers were subjected to indignity and ostracism.

To begin with the period when the insane were regarded as other invalids, suffering from an essential disease, it will be observed that the heroic measures adopted for their relief, consisting of abstraction of blood, blistering, violent purgation and the use of depletives and depressants, were duly supplanted by the more rational principles of rest and freedom from exciting influences, with tonics, good feeding, induction of sleep and occasional diversions of a suitable character; what was termed the expectant plan of treatment. This system of treatment of the insane obtained a foothold which has never been abandoned.

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The value of these principles as applied to the average case has been amply demonstrated. However, it was not sufficiently taken into account that, in a large proportion of cases met with, the person affected would seem to demand everything in the way of incentives to save him from the current of morbid reflection which was for a long period threatening to carry him off his feet, so to speak, and that the habit of morbid introspection, so common in cases presented for treatment, was to be combated. It was deemed sufficient to place the patient in surroundings thought to suit his condition, so far as rest and quiet were concerned, and to institute the administration of medicines calculated to improve the general nutrition and induce sleep: measures tending to arouse and stimulate a return to natural and healthful conditions of mind were, it is to be regretted, sadly ignored. The convalescence was undoubtedly retarded beyond what would be expected to be a reasonable duration, and cases lapsing into dementia were unduly hastened toward that goal. I would not wish to be understood as criticising unfavorably the methods practiced in the past history of the insane by the many noble, self-sacrificing and eminently able men who have devoted themselves and their abilities to the cause of these unfortunate people. All honor to them! The foundation of the principles inculcated by them in their students and followers has been richly operative in producing beneficent results in the humane and advanced practice in vogue at the present time. They were the pioneers in the struggle for the advancement of the welfare of the afflicted ones and they held the essential principle of humane and scientific treatment, as opposed to simply custodial measures, as paramount, and their individuality and teachings have borne fruit in the younger generation of alienists. The principle of rest and quiet and freedom from mental exertion was the key-note of the doctrine then advocated and no one will dispute its validity as applied to the average case of acute disease; it had its origin in a scientific observance of the principles of physiology, psychology and mental hygiene and its advocates were of such strength and possessed such powerful individuality as to insure the intelligent and efficient carrying out of their theories and the perpetuation of their practice; and with what beneficent results the condition of the insane at the present time will fully demonstrate. This theory and practice is as necessary and as effective to-day as in the past, and there is little likelihood of its being

superseded by any other, unless perchance the discovery of some potent substance tending to check or render impossible cerebral degeneration, or to renew inert nerve cells and replace effete nerve substance, shall revolutionize the methods at present practiced. The theory of rest to the overworked brain with its attendant derangement of functionation was based on the same principles and as faithfully practiced as those applying to the purely physical system. The comparison of a fracture in the osseous system with that of the disordered brain has been duly emphasized in the past by workers in the field of practical psychiatry and the deductions drawn have met with unanimous concurrence. Placing the brain in splints, so to speak, by the enforcement of absolute rest and quiet and immunity from distraction of any kind is the essence of the doctrine. This practice in the average case of acute mania is undeniably the correct and only proper one to be adopted with a view to bringing about a return to normal conditions of thought, feeling and action. In the average case of acute melancholia, however, I am doubtful of the efficacy of such a practice alone. My experience, though limited in comparison with some observers, forces upon me the conviction of the necessity of practice of an opposite character. The average case of melancholia, in my opinion, requires not so much rest and seclusion from conditions in the outside world which, in part, no doubt, were instrumental in causing the morbid condition presented, as the employment of methods calculated to wean the mind from pet fancies and gloomy imaginings and forebodings and divert it into healthful channels of thought.

It will be seen, therefore, that the principles laid down will not apply equally in all cases, intelligent discrimination being required and a study of individual peculiarities of disposition, habit and thought called for and suitable measures instituted to meet them.

I would say that while I am a believer in the somatic or physical theory of insanity and consider that in a large proportion of cases there is an interdependence of physical and mental conditions, yet my experience leads me to believe that while any physical derangement in the insane should receive the closest attention and active measures looking to its correction equally with the sane, and any possible connection between the two conditions in their relation of cause and effect should be given the deepest study and investigation, nevertheless, I am convinced

that, aside from the ordinary tonic and hygienic measures employed, the moral treatment of the insane is of still greater importance. It is readily recognizable that one of the earliest evidences of mental aberration is usually a perversion of the moral nature in greater or less degree, manifesting itself in a lack of power in the individual of adjusting himself to ordinary conditions and associations, absence of altruistic feeling, incorrect or exaggerated conception of passing events as applied to themselves, disregard of the proprieties and amenities of life and final absorption in self and the things of self. This condition is met with in the daily experience of every practical alienist and is of necessity to be antagonized by suitable measures not within the province of strictly medicinal treatment: consequently, what is termed the moral treatment of the insane is called into play with the hope of correcting the obliquities presented. Very little is to be hoped for, in my opinion, from simply and solely medicinal treatment: the environment and moral atmosphere of the insane as produced by the example of their nurses and others in charge is most powerful: this in conjunction with the various auxiliary measures in use, such as healthful occupation of the body and mind of a not too stimulating kind, a salutary amount of amusement and diversion of a like character, both adjusted to the mental balance of the individual, will be found most effective in restoring normal mental and moral tone. The effect of environment on the insane is apparent to the average observer and in greater degree to those in close and daily contact and intercourse with them; in the early days this fact did not seem to be recognized in any material degree and consequently was not taken due advantage of in the accessories of their care. The present appearance of homelikeness and cheer sought to be attained, and which presents in the average modern institution in its exterior and interior arrangements, bears witness to the change of sentiment wrought by the lessons of experience. The gloomy and forbidding structures with cold, bare exterior, devoid of lines suggesting anything in the shape of a home, and everything calculated to impress the idea of custody and duress has gradually given place to cheerful, sunshiny abodes with every accessory tending to appeal to the sense of the beautiful and good. These are in turn being superseded, or at least modified, by the addition of cottages for the reception respectively of the milder types, newcomers as well as the various classes which con-

stitute a source of annoyance and menace to their fellows in affliction: another step which marks the advance in modern psychiatry and to its perpetual credit. These institutions on the plan of segregation, tending to the ultimate abandonment of that of herding the insane in large caravansaries, are proving a veritable boon to both classes and particularly the more sensitive class of acute cases in which first impressions are most potent for good or evil. Again, by these means, and in large congregate institutions steps have been gradually taken looking to a more perfect classification of these afflicted people and wherever attained it has wrought incalculable good. The entire separation of the defective classes, together with that most objectionable class from every standpoint of safety and comfort to the large mass of the insane, the epileptic, is being sought and attained in a limited number of the States and measures looking to the accomplishment of that end are being introduced in our own State at the present time in this line of progressive sentiment which, it is to be sincerely hoped, will meet with success. It will assuredly prove a perpetual source of pride and satisfaction to its promoters.

To return to my theme, the seeming digression from which you will pardon, the congregating of large numbers of the insane in surroundings however attractive, and however much effort was exerted to vary the monotony of daily routine, the condition of turbulence, discontent and vain importuning on the one hand and that of hopeless resignation, apathy and dejection on the other, was the picture daily presented to view.

The disuse of mechanical restraint in varying degree and wholly marks another step in the progress attained, and however conflicting may be the opinions entertained as to the benefits or the contrary resulting from its partial employment or entire abolition, it is not in the province of this paper to discuss.

This brings us to the period when the insane were still regarded as incapable of any intelligent or organized effort: the fear of trusting them with the use of implements of any kind also playing an important part. They were treated as absolutely invalid physically as well as mentally and suffered to languish in idleness. As a first step in the right direction, their assistance was sought in the performance of ordinary household tasks to their decided benefit mentally, morally and physically: next in the line of progressive sentiment they were persuaded and encouraged to assist in the

various trades suited to their abilities and tastes and with what satisfactory results the records and statistics of the average modern institution of to-day will furnish ample evidence. This movement of organized labor among the insane, modest and trifling in its inception, has steadily and gradually been pushed to the utmost limit of good and has finally become an established and successful adjunct to the ordinary means of treatment employed. Its origin and development was based on the theory of prolonged disuse of a faculty resulting in inertia and ultimate decay, as applied to the curable or partially curable cases, as well as in the idea of possible elevation of the condition of the mass of so-called incurable cases: the filthy, destructive and turbulent. As stated, the results of this practice have far exceeded the most sanguine expectations entertained in the way of success. Out of conditions of turbulence, unrest and painful dejection have come a spirit of contentment, quiet and renewed hope. The basis of this plan as an adjunct to the ordinary line of treatment pursued for the relief of these unfortunate people is assuredly grounded in the soil of common sense, judgment and humanity. It will be readily appreciated that voluntary idleness is most pernicious in the average sane individual and productive of discontent, mischief and general moral deterioration: then how much greater in degree will these results be manifest in the insane in a state of enforced idleness? It is only necessary to visit and compare institutions where the two conditions do not obtain uniformly to appreciate the *rationale* of the plan as applied to the insane. The old proverb "Satan finds some mischief still for idle hands to do" could never be more aptly quoted than with reference to the average insane person kept in that state. It is a fact universally established in the minds of close observers of this diseased condition that in a large proportion of cases presented, an excess of energy of a physical nature is constantly being generated and evolved, and that, if an outlet is not provided for it in natural channels, explosions are certain to occur periodically in the form of assaults, provoked or the contrary, on their fellows: again, in the insane, equally if not to a greater degree, the conditions favorable to restful repose at night are to be met by the application of measures calculated to produce a mild degree of bodily fatigue, such as active exercise or employment or both in the open air, suited to the character of the individual as to strength, temperament and habit. It is a most gratifying

accomplishment to behold the success of such measures as contrasted with those of former times when the unfortunates were restricted in their movements, with the possible exception of daily walks; and the surplus energy evolved expended itself during the night in motor restlessness, vociferation and endeavors to render night hideous and the abode repulsive to those within hearing. This condition of sleeplessness and unrest was and is at present, to a considerable extent, met by the administration of sedatives and hypnotics whereby the nervous energy is suppressed perforce: not in the average insane person, however, without dire effects being produced eventually, as evidenced by the miserable appearance of the victims of this system of artificial sleep. The same conditions are being overcome to a daily increasing extent by the employment of more rational methods, namely, relying upon the exhaustion produced by healthful exercise and manual labor in the open air during the day, and the administration of hot milk or lemonade at intervals, when demanded, during the night. For those unequal to the tax on the physical strength and those disinclined and absolutely resistive to such means, passive exercise, as furnished in the course of the Turkish bath, is employed with immense advantage to the individual.

The heat and sudation has been found to be most healthful and calmative to the highly overwrought brain and nervous system, equalizing the circulation and thereby relieving internal congestion; promoting tissue transformation and incidentally the assimilation of foods; ridding the system of effete material; also constituting a general nerve sedative and hypnotic of a natural character, thus taking almost, if not entirely, the place of the various harmful drugs employed to accomplish the same purpose. This measure, as an adjunct to the ordinary medical and moral treatment pursued in the Milwaukee Hospital for Insane, together with administration of hot milk at night, has rendered possible a reduction in the number of sedative draughts amounting to fifty per cent; and the record of sleeping draughts is practically nothing, averaging two doses per night. Due credit must, however, be accorded to the effect produced by the extended degree to which occupation in the way of farm work for the physically robust and the mat and other industries for the weaker class have been carried. The results secured in the way of improved nutrition, with its attendant advantages of quiet and contentment,

more than counterbalance, in my opinion, the effort demanded to bring it about.

Again, it is my firm conviction that due advantage has not been taken of appeals to the special senses in the treatment of the insane; for example, music as an adjunct, intelligently and scientifically employed, has, by close observers, been found to possess really wonderful potency in its effects on the troubled and clouded intellect.

In the nature of the disease, involving, as it does, the faculties of perception and the emotions, which while blunted in some and existing only as a potentiality in others, yet in the large majority appear in an exaggerated degree of activity, judicious appeals to and stimulation of them would naturally be supposed to yield very material and satisfactory results. The love of music is an entity in the make-up of the ordinary being and will inevitably reveal itself when reached by harmony of sound, however produced; and how readily are the attributes of mind stimulated to action: consciousness aroused by experiencing a healthful shock, so to speak; memory revived, the emotions appealed to and the general mental operations quickened into activity. The same *rationale* applies in a great measure to the victims of mental disease and with equal if not greater force.

The sense of sight as a channel to the mind is being appealed to also by the use of sunlight in its full intensity, and the employment of vari-colored and attractive objects. Experiments in the field of hypnotism recently made indicate the extent to which this agency has been employed and with what results. It is found conclusively that these means of stimulating the mind through the medium of the special senses are of very material value and, in conjunction with others more purely medical, result in a re-establishment, partially at least, of functional activity. The measure of success attending the efforts of those who have for a considerable period past urged and promoted this practice of occupation for the mind diseased by various devices is of such magnitude as to warrant continued and persistent application of it, as well as further experimentation with any and all methods calculated to restore, in part at least, mental activity in brains structurally damaged and limit the degree of mental deterioration by an endeavor to re-educate the crippled faculties.

Finally, the effect of association of the various classes of the

insane for short periods daily, as accomplished by the recent introduction, to a limited extent, of the congregate plan of dining-rooms in institutions is being turned to account for the benefit of all classes. This system has very recently been instituted in the Milwaukee Hospital for the Insane and has proven eminently successful; the results in the way of improvement in the manners and deportment and the general elevating influence operative is clearly appreciable.

It will be observed that the various adjuncts employed in the treatment of the insane which have been briefly reviewed in this paper have for their object: first, the re-establishing of healthful and natural lines of thought, feeling and action, so far as is possible, due account being taken of the character and temperament of the individual sought to be reached by them: and, secondly, securing the closest approach to ordinary conditions of life formerly enjoyed in the outside world.

The counterfeiting of these conditions in their applicability to the insane will be seen to constitute the essence of the doctrine advocated in this paper and the *rationale* of the method, based as it is on conditions of mind in health and in disease, and adopted and practiced in the average modern institution, assuredly commends itself to extended study and observation on our part in view of the accomplishment of further good to this unfortunate class of our fellow-beings.