5. Asylum Reports for 1916.

The Annual Report for the Year 1916 of the Government Asylums in Egypt.

Yearly we receive this Report and each number impresses one with the amount of constructive work which is being carried out in Egypt.

This year further relief from merely clerical work has been given to the Director, Dr. Warnock, by the Central Board taking over many details as to payments and general non-medical administration. Government has recognised the good work done and conferred on him a New Year Honour.

The Report consists of five parts; the first contains the general report on the whole lunacy division, the second refers to "M" special hospital for British military cases, Part III is devoted to the parent institution and Part IV to the new asylum at Khanka, while an additional part provides appendices concerned chiefly with Government instructions.

The number of beds in the two asylums remains 1,550; the number of patients in residence has risen from 2,055 to 2,081, there being an excess in residence amounting to 531. The ordinary admissions were 970, besides 324 British soldiers. 824 Egyptian patients were discharged; 228 of these recovered, while 575 were sent home, though not recovered, but being harmless they were discharged to make room for more acute cases; 21 were found not insane. This is not satisfactory, for such unstable persons tend to relapse or to fall into degenerate or criminal ways.

The number of deaths at the two asylums amounted to 244; on the average number resident, 11.2 per cent.

Lists of the various general and administrative works carried out are given in detail.

An irrigation farm was worked at Khanka Asylum and this produced vegetables for both asylums, but the land was becoming water-logged, so the farming had to be reduced. Seven patients were admitted with fractured bones, six with cut throats. Eight patients were received as voluntary boarders, and this marks an advance in the understanding of the treatment of the insane by the general Egyptian public.

The European medical staff is reduced to two, Dr. Warnock and Dr. Dudgeon, but an officer of the R.A.M.C. was supplied to assist with the British military patients.

Part II.—This is concerned with the returns from the military special hospital, called "M." During the year 324 patients were admitted, suffering from the various forms of insanity. Melancholia contributed 59, mania only 16, alcoholism 31, and general paralysis 117. Epilepsy 23, and adolescent insanity 36. Simple mental weakness is represented by 45 cases, and neurasthenia 30. One would have expected more than 18 delusional cases, but the general result is much as might be expected. Of these patients the Wassermann test was applied with a positive result in 35.

The table giving attributed causes is, like all such tables, imperfect; active service, heredity, and epilepsy being credited with the chief part in causation.

Part III.—Including the military patients 1,344 patients were

admitted in the year, a larger number than admitted in any asylum in the British Empire.

The patients were employed in making baskets and mats. The usual clinical lectures were given to fifth-year students of the Cairo School of Medicine. A certain number of Turkish prisoners were admitted. Their language being Turkish made it difficult to get into touch with them.

Twenty-five convicted prisoners were sent for report on their mental condition, of whom seven men and two women were sent back to prison, being sane. Four murders were committed in Egygt by lunatics, but none of these had been in the asylum. Seven persons accused of grave offences had been in the asylum, and had been returned to the care of their friends.

A series of interesting tables is given, showing the forms of insanity and the nature of the offences of 55 male patients. Of the 55 males and 4 female patients 12 suffered from pellagrous insanity, 4 from that due to hashish. General paralysis was not represented among these patients. Murder and attempted murder were common, and these not specially associated with any one cause. A table is given of the forms of mental disorder met with among the prisoners of war.

Of admissions, 1,104 were first admissions, while 240 were readmissions. The usual tables as to times of admission, occupations, etc., are given and need not be reproduced here.

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Of 923 admissions 120 men and 59 women were suffering from pellagra, 52 from hashish, 192 from mania, 90 from melancholia, and 69 general paralysis.

Special tables in reference to pellagra are given, showing the districts from which they come. Tables giving the nationality and the places of residence of the general paralytics are given. Nine per cent. of the male admissions were suffering from general paralysis of the insane.

A considerable number of the patients had an undoubted neurotic heredity, and it was certain that a much larger number had that defect, but it was hard to get a true history in Egypt, and we know the difficulty in England. The death-rate is rather above the English standard. Only 15 autopsies were performed, in consequence of the pressure of ordinary work.

The Laboratory examined by Wassermann test 850 specimens, and also 521 cases of ankylostoma, beside a few cases of bilharzia, malaria, and tuberculosis.

One table of particular interest gives the statistics of 630 consecutive cases to which Wassermann's test (Meier's modification) was applied. The result was positive in 26.6 per cent. of men and 30 per cent. of women.

Of general paralysis of the insane, 75.6 per cent. men positive and 100 per cent. females positive. A full list is given of the forms of mental disorder and the percentage of positive reaction. This is worth careful study. In treatment a large amount of hypnotics was found to be necessary, and Dr. Warnock found the wet pack, now discarded in England, a useful help.

Many attempts at suicide by hanging were made, but without success. The high seclusion rates and the free use of hypnotics are a direct

result of excessive overcrowding, which Dr. Warnock says is to be regretted. This part is brimful of interest for all connected with asylum work.

Part IV.—Dr. Dudgeon's special report is eminently practical. He points out the reduction of costs, and of the increase of useful work on the land.

At Khanka there is accommodation for 400 patients, but there are 700 in residence.

The medical staff consists of Dr. Dudgeon and three native assistants. It is suggested that at Khanka the country patients should be received, while Abassia will take those from towns. Dr. Dudgeon regrets that a large number of epileptics and chronic patients have to be received, thus reducing the numbers of curable patients who could work on the farm. The usual tables are added, including the various items of administrative cost.

The death-rate is rather high, and depends to a great extent on general physical decay and diarrhee of a very intractable kind. No mechanical restraint has ever been used in the asylum, and seclusion has also not been used this year. Lectures were given by one of the Egyptian doctors to the staff, and the results were satisfactory.

The list of diseases treated is a very long one, and a very large

number of surgical lesions are reported.

Scabies, dysentery, and diarrhoea are very common.

Thirteen of the staff suffered from malaria.

The electric power is much used for pumping as well as lighting, and

the water supply was reorganised.

Drug-producing plants are being grown on the farm to some extent. Very full tables of expenses are given. Dr. Dudgeon had for over three months to take over the duties of Dr. Warnock, who was on holiday. His work, as shown by the reports, gives evidence of his energy and determination under local conditions of difficulty and isolation.

Part V of the Report contains very interesting views of the development of the treatment of the insane in a partially organised country. Instructions in detail are given as to the removal of lunatics from various parts of the country to the asylum, it being made clear that the patient is not to travel with the ordinary travellers. In Egypt there are now, all over the country, district hospitals under Government control with native doctors. In each of these provision is made for the reception of local lunatics, but it is pointed out that these hospitals are only receiving stations, and that all patients, if markedly insane, must be sent at once to the central asylum at Abassia. It was found necessary to draw up rules for the temporary treatment of such cases, and an admirable and concise code is laid down. The instructions would rather amuse English doctors connected with asylums from their simplicity, but one can see the necessity for exact directions for the local doctors. Instructions are given so that persons who are excitedly talking religion or politics should be cared for, but not necessarily treated as insane.

It seems that persons have been rather summarily sent to the asylums without certificate or order. Anyway, from the appendices one can trace the evolution of a Lunacy Law.