Memories of madness: the County of Lancaster Asylum, Rainhill, 1890

Richard C. Barnes

An account of the thoughts of a fictional Assistant Medical Officer (AMO) on duty at the County of Lancaster Asylum, Rainhill in 1890 is given. It is based on the contemporary case records and other literary sources and is as factually accurate as possible. However, any similarity to persons living or dead is coincidental and unintentional.

The Assistant Medical Officer (AMO) slumped into his battered old armchair. His customary last tour of the wards completed, he had indulged himself by 'borrowing' a small bottle of brandy from the medicine chest on ward 10. The attendants on 10 would never notice. That maddest of wards in the madhouse would keep them busy enough even tonight. Even tonight, the last day of December 1890. And what a place to see the New Year in; alone in a tiny room in Main House, duty AMO for Rainhill Hospital.

As he sat, he pondered over what 1890 had brought him in the way of work. Only an average year, yet almost daily he had sat with the duty Medical Officer and had seen admitted 641 patients (Parker et al, 1993) recorded in one of the four great leather-bound case-books.

He had watched his superiors etch their marks indelibly onto the folio sheets. Dr Atwood-Beaver in his looping, almost flamboyant hand which always proved so hard to read. Dr Menzies, who wrote smaller, more neatly and recording such detail of their neurology he must surely have a special interest there. Or Dr Wiglesworth, the Medical Superintendent. Always writing in almost perfect copperplate, always concise and to the point. A locally trained man who must be only a year or so from being elected a Fellow of the Royal College of Physicians (and, though the AMO could not have known, only four years from receiving a near fatal stab wound in the back from one of his charges (Regan, 1986)).

Only an average year, but he had seen some interesting cases.

That poor, wretched melancholic whose lowering of mood had reached such a point she had become insane. Her notes had recorded that on admission she was "in a very depressed condition...and says she has no throat, no tongue, no stomach, no intestines and no passage and that she cannot eat any food. She holds her tongue because she is frightened it will fall back and choke her. Only speaks in a whisper. Has much anaesthesia and a pin can be stuck through her nasal cartilage, ear and tongue with hardly any pain". Vaguely he recalled reading somewhere of a recent description of a similar patient by the Frenchman Cotard. Perhaps Dr Wiglesworth would recall the journal (Cotard, 1882).

Other patients had been much happier though. The young maniac girl who had so irritated Dr Menzies, prompting him to record she was "in a condition of considerable exaltation. She is chatty, merry and decidedly 'cheeky'. Answers back and tries to be witty and make jokes which are often inappropriate and poor but amuse her very much".

Livelier still had been the man who had greeted him like a long-lost brother and was "joyful and exalted, smiling continually and making personal comments all round". How rapidly his Irish tongue had gabbled that he was "guided by three colours, blue which means true, white is alright so I will be alright if I am the best man, as I will wear a white collar, and green which is Ireland. The trees outside are green so this is Ireland".

And what of the lunatic whom Dr Atwood-Beaver had described using Morel's term, dementia praecox (Morel, 1860). Her mental state had recorded that "she rambles off into a longwinded and incoherent tale having no apparent connection with the current question but quite full of expressions of pious joy and thankfulness. Questions set to clarify her points only make the story less clear".

Thoughtfully, the AMO sipped a little more of his purely medicinal brandy. Its gentle fire...
warmed his throat as the flame in the hearth slowly toasted his shins. Alcohol raised his spirits a little, but also put him in mind of the other things it could do to a man.

The delirious patient they had admitted in summer. That man’s appearance was “that of a confirmed drunkard. His whole muscular system is in a state of tremor and his speech slurred. He hears voices and sees serpents and faces on the walls. He is irritable and sleepless and his memory for recent events is gone”.

Surely the occasional brandy, and cheap hospital stuff at that, could never bring a young AMO to such a state. Those problems were only wanned his throat as the flame in the hearth with brandy as a diluent if for oral consump other things it could do to a man.

THE HISTORY OF PSYCHIATRY

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He was equally sure that a fine asylum like Rainhill, new and well run, would provide care for the insane for many hundreds of years to come.

Postscript
The fictional AMO's last thought, though reflecting the philosophy of the time, was to prove wrong. Less than half a century after this date the movement against asylum care began. Rainhill hospital finally closed on 27 September 1991. It now stands, decaying, in its old grounds, soon to be demolished. Its lands are to be used for office buildings.

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References

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