During my absence from New Zealand for nine months as Government delegate to the Infantile Mortality Congress in London the Mental Hospital was well managed by Dr. Jeffreys, to whom and to Dr. Buchanan, the present Senior Medical Officer, I have to express my appreciation.

I have, &c.,
F. Truby King,
Medical Superintendent.

The Inspector-General, Mental Hospitals, Wellington.

PORIRUA MENTAL HOSPITAL.

Sir,—

I have the honour to submit the following report on this Mental Hospital for the year 1913:—

At the beginning of the year there were 908 patients on the register, and at the end 892 (485 males and 407 females), of whom 7 males and 4 females were absent on trial. The average number resident was 890. Eleven men were transferred to the new Mental Hospital at Tokanui in May, and 12 women to the Nelson Mental Hospital in July. These transfers served to relieve the congestion in the wards, which on the female side of the institution continues to be embarrassing. I understand the Department is about to construct a new auxiliary building to accommodate 100 patients, and designed for the reception of recent admissions as well as for sick patients. This addition will go far in overtaking our immediate requirements.

During the year 182 cases were admitted for the first time, of whom 60 per cent. were males and 40 per cent. females, and of whom more than half were chronic and incurable. It is satisfactory to find that these first admissions were 22 less than in the previous year. There were 33 readmissions, or 4 less than in 1912.

Of the 142 patients discharged, 88 were recorded as recovered, making a recovery-rate of 40 per cent. on the number admitted. But this does not represent the full recovery-rate. A number of the patients away on probation were written off as discharged unrecovered at the expiration of the probation period because they failed to present themselves for examination or to return a medical certificate as to their mental state. Had they done so probably fully 30 of these probationary cases so discharged would have been passed as recovered.

There were 68 deaths, a ratio of 7·6 per cent. of the average number resident. The causes of death included 12 from general paralysis of the insane (10 males and 2 females), and 27 from senile decay.

In addition to the new auxiliary building above referred to, I am pleased to find that the Department has decided to construct two large day-rooms (one for male and one for female patients), extending from the central wards of the main building on the north side and commanding a particularly fine view of the landscape and the harbour, as well as overlooking our sports-ground. The accommodation will provide day-room space for a large number of patients who have hitherto been very poorly served in this respect.

I have to express my appreciation of Dr. McKillop's and Dr. Simpson's capable and loyal assistance. In all departments I have been fortunate in having a very good staff of officers, who take their responsibilities seriously and can be trusted to discharge the duties required of them in the best interests of the institution and its inmates. There has been some trouble in maintaining the female nursing staff at anything like adequate strength, especially towards Christmas and during the summer months. The shortage was mostly due to resignations of the juniors and recently appointed probationers and to the difficulty of obtaining suitable candidates to fill the vacancies.

I have, &c.,
Gray Hassell,
Medical Superintendent.

The Inspector-General, Mental Hospitals, Wellington.