

time that I occupy. The question of an economical administration of charity seems like one that ought not to be necessary for us to consider. If we take charity to mean love, which it really is, it seems strange that there should be any occasion for considering why there should be economy in love. An economical administration of it, however, is perhaps something different, which I suppose would be taken to mean a wise use of our love, or an organizing of sympathy, as it has sometimes been stated. It seems to me that the most economical method of administering charity is the adoption of a system which will most lessen the number of persons requiring relief. We are very busy in manufacturing paupers or people requiring aid from the outside. There are two principal sources of production. One is the general economic conditions of the country, and the other is the method in which very kind-hearted people undertake to assist those who apply for relief. This has been dealt with by Mr. Smallwood, but I think it may be fairly enlarged upon. It seems to me, taking the words as we ordinarily use them, Mr. Chairman, that an economical administration of relief is the only charitable administration. A system of relief that is not economical is not charitable, but often the very opposite. We want those who are kind enough and who have sympathy enough to be willing to give something of their goods towards the assistance of those in need to administer it so that they will not increase the number of those in need or render those already in need less capable of making themselves, or being made, self-dependent. A line laid down by Mr. Smallwood is a good suggestion, viz., that we must have intelligent agents to assist in doing this work, and that those who supply from their bounty the necessities must also have a thorough knowledge of the situation before any possible advance can be made. The poor are not in a position to know what they need themselves. Why should we always immediately reply to their demand by giving them just the thing that they ask for? It renders them more helpless tomorrow than today, because it has destroyed their energy to a greater or less extent. The suggestion made by Miss Mott's paper—a very suggestive paper, and almost peculiar to me—that necessity is the bulwark in those cases, must in the long run be fallen back upon; by all means it must be; and, as also stated in that paper, that the Roman mob is the best example of what we are making in society to-day by fancying that we are charitable when we are only soft-hearted. The greatest possible necessity is that we have a thorough investigation into all the conditions surrounding the needy family, and see what it was that brought them to the condition which they are in, before we can deal with them. There is no more sense in trying to deal with them in advance of this than there would be in the physician trying to cure his patient without investigating the case. It will be observed that Mr. Smallwood and myself have been dealing almost entirely with the question of administering relief to those who are really hungry, or those who are in need of clothing, or think they are in need of clothing, or some of those more pressing demands for charity. There are so many others dealing with the other phases of the charity question that I have not touched upon them. This narrower view is not unworthy of consideration by counties, especially by county commissioners, by whom a great deal of charity is administered, and I am afraid not always in the wisest way, because they have yet no system by means of which they can get at the conditions.

It seems to me, then, that the strongest point in Mr. Smallwood's address, and what needs most to be emphasized, is that we must find out exactly what the conditions are, and in that way we will have some hope of making self-supporting those that are now dependent, and will be in a fair way to stop the very great growth in the dependent classes, in those requiring aid. That seems to me to be what is demanded; and, following the suggestion that I made at the beginning, I think I should be economical

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BY H. H. HART, LL. D., SUPERINTENDENT ILLINOIS CHILDREN'S HOME  
AND AID SOCIETY, CHICAGO, ILL. 189

Mr. President, Ladies and Gentlemen: It is a matter of great personal gratification to be invited to have a share in this meeting. Last year I was unhappily debarred from being present at the meeting, very much to my disappointment. It is an especial privilege and pleasure to appear upon this platform in the city of Duluth, where, during my fifteen years of work in Minnesota, I formed so many pleasant acquaintances, and to see in this audience some of those with whom I had the privilege of being associated in the work of caring for the sufferers after the great Hawkeye fire. Knowing something of the spirit of the people of this place, something of their liberality, something of their progressive spirit, I have been delighted to-day, in going about the city of Duluth, to see the signs of returning prosperity and continued activity, and to find that the years of depression have by no means abated their spirit and courage. The future of this city no man dare estimate. I believe from what I have seen that what seemed the wildest predictions of the past are to be realized in the future on this spot; for this people has already made for itself a history which is assured and which opens ways to the world the courage, enterprise and progressive American spirit.

The topic assigned to me to-night is "The Need of Separate Care for Epileptics." It is my mission to turn your thoughts in the direction of what seems to me the saddest lot which can befall a human being. We are accustomed to speak of the sad lot of those who have been bereft of the power of vision, and we have been accustomed to regard it as an especial misfortune to fall under the power of that dread disease, insanity; but neither one of these misfortunes, in my judgment, can at all compare with that of the unfortunate being who becomes a victim of the disease which we are accustomed to call epilepsy,—the falling sickness; or, as it has been sometimes called, "the sacred sickness."

If you have never reflected upon the effect of this disease upon its unfortunate victim, ponder for a moment what it involves. A young lad, running about the street, bright, erect, promising, vigorous, active in his studies, the pride and hope of his parents, one day suddenly drops in his place, with a cry, once heard, never to be forgotten. He foams at the mouth, his limbs twitch, his whole frame is convulsed. His friends rush to his assistance in great alarm. A physician, who is passing, comes and loosens his collar, and says, "Never mind, he will be over it in a minute." The first paroxysm has occurred. His friends are alarmed and distressed. His father consults the family physician, who, shaking his head, gravely says, "We will hope, since he is young, that he will throw this off after a while." But in the course of a week or ten days a second attack occurs, and much alarm comes to the parents, and then the father goes to a specialist, or possibly some quack, and various remedies are advised. The child, perhaps, is drugged with bromides, and he is taken about from place to place, to individuals who advertise a positive cure for such disturbances. The mother, loving and faithful as a mother always is, comes to devote herself to the child. No ear so quick as hers to hear that promissory cry; she hastens to prevent the heavy fall which threatens the very life of the child.

Gradually he becomes uneasy and disturbed. He goes through life in a perpetual state of terror, not knowing at what moment the sword of Damocles is to fall upon him. As he goes about, behind every bush, lurks an enemy that may strike him down. Gradually his mental powers are sapped; he loses confidence in himself, and as he grows older, his gait begins to falter, his memory to fail; he begins to feel himself separated from the community. But the mother is ever faithful. The father has spent his substance in endeavors to relieve the child from the impending fate, but at last he has come to recognize that there is a permanent condition. By and by the father falls a victim to disease. The mother, left a widow, still struggles, and makes it the mission of her life to care for that unfortunate being. Her affections are extraordinarily developed towards him; he becomes more and more dear to her; her mind is possessed with anxiety as to what would become of him if her life should be taken. When, finally, that faithful mother, worn out with care, lies down and dies, her unfortunate child is left without a friend in the world.

Now there are three possible refuges open to him. If he is young enough, though still in possession of his ordinary senses, he may be sent to the institution for feeble-minded children. Such institutions contain hundreds of those unfortunate children, epileptics; not naturally feeble-minded, enfeebled by disease, but belonging to an entirely different class from those who are grouped together there; but he is taken to that institution as the best available place, and there he receives such tender care as the institution is able to bestow upon him. Soon he becomes a disturbing element; he is not feeble-minded in the sense that the other inmates are. The whole tenor and bent of his life is different from the lives with which he is there associated. He becomes a source of terror and even of danger to the other unfortunate children. The nurses and attendants feel this is an added and unnecessary burden placed upon them. The schools of the institution are not exactly fitted to his temperament. The child is out of place. He is an evil to the institution; the institution is not adapted to him, and the officers of the institution are the first ones to declare it.

But there is another possible recourse. If the child is older; if he is too old to be sent to the school for the feeble-minded, then he may be sent to a hospital for the insane (and we have about fifty of these unfortunates in each of the three hospitals in the State of Minnesota). But his position there is much worse than in the school for the feeble-minded; because in the hospital for the insane there are no schools and there are very few young people, and those who are there are in no way adapted to become his associates; and there he stagnates. I never shall forget the impression that was made upon my mind by a certain case (and there is a gentleman present who will remember it). It was that of a young woman, to some degree talented, and with musical ability, who was sent to the hospital for the insane at Rochester. As I visited the place from time to time I noted a gradual decline and decay of her faculties, the losing of her alertness, the touch of her hand upon the piano was less delicate, and her interest in literature and in life was gradually declining and slipping away from her. It is a dreadful thing to see a human soul trying to maintain a hold upon health and life and love, and upon those things that make life beautiful and dear to us, and see it slipping away, and see the individual gradually become slovenly and careless,

and gradually losing the memory of the things that he cherished, and gradually losing the power of development. And then with that comes a sluggishness and indisposition to active life, a loss of hope and a loss of courage, and then in many cases gradually the mind is dissipated, and there comes about a state of stagnation, a loss of the faculties, and by and by the individual becomes a proper inmate of a hospital for the insane.

But there is a third refuge, and by no means as favorable a one as the two that have been spoken of. Alas! our hospitals for the insane are full. Do you know how many epileptics there are in the State of Minnesota? No, you do not; nobody knows, but we can approximate it. I think that the smallest estimate I have seen by those who have studied this subject—and it has been studied with some care—is one in eight hundred of the population. That means two thousand of this unfortunate class in the State of Minnesota. Some of the best authorities estimate the number at about one in every five hundred of the population, which would give a much larger number of epileptics in the state than the number which I have given. Our hospitals for the insane are full and overcrowded; they cannot receive these people, and so there is a third refuge provided by the public, and that is the almshouse. The unfortunate one sent there, himself purely the victim of misfortune, finds himself in the saddest possible environment, among a class of people who are without consideration, without realization of his sad and miserable lot and who are unable to exercise that forbearance and consideration which is due to him. It is one of the effects of his disease that he becomes irascible, unreasonable, intractable, stubborn and not amenable, and the rest—is he finds himself out of joint with the people about him. He conceives prejudices which he is unable to control. Many people are repugnant to him and disagreeable to him, but he must sit at the table and eat with the people in the poorhouse; and the superintendent, endeavoring to control him, disciplines him, scolds him and berates him, and perhaps shuts him up, and so deals with him until the lot of the poor individual comes to be utterly wretched, miserable and downcast, because there is no machinery by which there can be given to him the consideration which is due to a sick person. There is no recognition of the fact that he is simply and solely a sick person, and that these characteristics which seem so unreasonable and so disagreeable are simply symptoms of a disease, and are as uncontrollable as the manifestations of the insane.

And then there is another very sad thing about it. Little by little this unfortunate individual comes to find in himself impulses to which he has heretofore been a stranger. He finds arising in him sudden instincts and desires to do something violent, and time and time again he has to struggle to control himself lest he smite and injure some one, and thus there is added to his mind fresh terror that he shall commit some horrible offense. Time and again people have lost their lives or suffered great injury from a sudden attack from one of these unfortunates in the time when his paroxysm comes upon him. I cannot conceive of a sadder or unhappier lot to be inflicted on one of God's creatures than to fall into this sad condition. I know of nothing that can portray this condition more vividly than the ancient story of the prisoner who was confined in the cell which gradually contracted. At first he could stand erect; the next day he was compelled to stoop; then came the time when he could no longer lie at full length, and

little by little it came together until it crushed him. And this is an illustration of the disease with which we have to deal. It is a very sad thing in human history that society has been so slow to recognize our obligation to these most woeful and miserable of our neighbors, these little ones of the Lord Jesus Christ who have a right to consideration which has heretofore been withheld from them. But there is arising a recognition in the public conscience of the duty which we have toward these unfortunates. Here and there there has been created an institution, either by the benevolence of kind-hearted individuals or by physicians who have established such institutions for the benefit of those who pay for them, where there may be special provision for this unfortunate class. It is within a comparatively few years that the first great institution of this class was established in foreign countries. The Bielefeld colony is perhaps to-day the most successful and valuable institution for the treatment of this class.

Now, then, the question arises, What needs to be done for the unfortunate epileptic? What ought to be done for his benefit?

This disease is an exceedingly obscure one. The physicians have not yet decided definitely where it resides, how far it is to be regarded as a disease of the brain, or how far it is to be regarded as a disease of the spinal cord or the nervous tissues. It seems sometimes to be located in one place and sometimes in another, and the medical treatment of this disease is still very greatly in dispute. Those remedies which were highly valued a few years ago are recognized to-day as of very doubtful efficacy. It is one of the most difficult diseases to deal with. And yet there have come to be recognized certain things that ought to be done for the unfortunate epileptic.

In the first place, he should live under such conditions that he will be surrounded by those who will exercise due consideration toward his unhappy condition. There must be found for him, if possible, that spirit which the mother has who devotes herself to that unhappy child day in and day out, week in and week out. There must be somebody there who, as a nurse, or as a physician, or as a parent, recognizes his condition. This is a matter of first importance both for his recovery, if possible, and for his comfort and happiness during that portion of his life which is left to him.

The statistics show that probably less than one-tenth of those who develop a genuine case of epilepsy ever become entirely rid of the disease even under the most favorable conditions; although the work in some of the institutions which have been established begins to offer hope that a larger proportion of these unfortunates may be benefited.

In order to treat these patients wisely there must be, in the second place, a proper diet. I think it is recognized that this is one of the diseases that can be most effectively treated by a proper diet, and a report of the institutions show that the physicians, by a series of experiments, are beginning to learn what diets can be used with safety and what cannot. And it must be said, further, that even the parents who love these unfortunate children cannot be depended upon to carry out such a proper course of diet faithfully. The epileptic has an unnatural appetite in a great many cases. He craves the very thing that is not good for him. He is apt to eat inordinately. He cannot be relied upon to carry out the instructions of the physician. There must be some one to watch over him and see that this matter of proper diet is attended to. And there must be a wise varying of

the diet in order that it may not become tiresome, and that needs the careful watching of a skilled physician.

Then there must be suitable employment. Now, if this individual is to lead a happy life, like all the rest of us, he must be genially and suitably employed. But that is a very difficult thing to provide outside of the institution. People are reluctant to have an epileptic employed about them. Most people, unaccustomed to the seizures, are greatly alarmed when they occur, and they do not like to have these subject to epileptic paroxysms about. A merchant cannot very well be expected to employ a clerk who is liable to fall and foam at the mouth, and then be absent from his work for a period of time; and a man cannot be safely employed in many forms of outdoor work or about machinery who is liable to these seizures; and so there is left a comparatively narrow range of employment open to such persons. But it is necessary to their welfare that they should have congenial employment, that there should be such employment as will utilize their energy and make it effective, because during a large portion of the life of an ordinary epileptic he is able to do a valuable amount of work if he can be put at the right sort of work. He cannot himself direct it, but someone must arrange his work. There must be those at hand who can care for him.

Then there is another thing. It is essential to the cure and to the happiness of the individual as well, that he shall receive a certain amount of education. In the great proportion of epileptic cases the disease comes early in life, before their school days are completed. You cannot send an epileptic to the regular schools, and the result is that, outside of the institution, he is debarred from school privileges for the rest of his life. And the kind of institution that he needs is not exactly that of the public schools. It needs to be especially adapted to his needs and his temperament and his condition.

Now, the question is, How are these conditions to be realized? I think that anyone who examines into the question candidly will come to the conclusion that this is one of the cases,—and I am one of those who is a great advocate of placing unfortunate children in family homes,—this is one of the cases where the institution needs to step in in order to accomplish the best result for these unfortunate children and I believe it is indispensable that they should be brought into the environment of a suitable and wisely directed institution.

Epileptics are distributed through the community pretty nearly in the proportion to the rest of the population; that is to say, it is a disease that is not confined to the poor or the rich; it afflicts all conditions of humanity about equally. A very small proportion of the parents of epileptic children, then, are able to pay the expense of sending them to an institution and paying for their care at the ordinary rate, and the large proportion of these children must be debarred from these institutions unless they are provided at the expense of the public.

Now, in this state, the principle has been developed, and has, I think, come to be pretty well settled as a part of the policy of the state, that certain misfortunes shall be recognized as public misfortunes. You have developed this spirit to the extent that we have agreed that you will assume the responsibility for the feeble-minded, the deaf and the blind, and you have lately undertaken the care of deformed and crippled children, and I believe wisely. Now the question is whether this misfortune about which I have

been speaking is one which should be added to the category of those which are cared for at public expense. It would be possible perhaps to undertake this burden, as it has been done in some foreign countries, by private institutions. But I believe if the two thousand cases in this state, which are constantly increasing, are to be cared for, it must be done by the state; and the question is whether the state ought to undertake it, and that is a fair question. Your burdens of taxation are very large. The people already begin to complain of the expense of caring for the insane and the feeble-minded and the prisoners and the poor, but there are some considerations which would lead us to believe that the state ought to assume and to undertake this burden. In the first place, I believe that the state should assume this burden in order to perform its duty to these unfortunate children. If I have succeeded in any degree in picturing to you what is involved in this affliction, I think you will recognize that these unfortunate children have as strong a claim upon the consideration of the public as any class can have. And therefore, as a matter of Christian charity toward these unfortunate young people, it seems to be a duty which the state owes to make provision for them. We undertake to provide public education for all children, and when the child is afflicted, when he cannot avail himself of the public schools through deafness or through blindness or through feeble-mindedness, then the state undertakes to provide an institution which shall be adapted to his peculiar needs, and it seems to me this class comes under that category. But, further than this, I think we ought to provide a special public institution for this class as a matter of justice to those in other institutions who are now suffering injustice through our present arrangement. Whether you desire to make public provision for them or not, you are now caring for 250 of this class in the State of Minnesota, and you are not doing it right.

Now, why not provide a special institution for these 250, which can be done without any material increase in expense, and they can be cared for just as cheaply in an institution for epileptics as in an institution for the insane, where they to-day occupy beds which are demanded for their own patients. If you had a child of your own in the school for the feeble-minded, would you be willing that he should be placed in the same ward with a child that is afflicted with epilepsy? Every epileptic is more or less dangerous. No one can tell when a seizure or paroxysm of the individual may break out and he cause injury to those who are about him. You may say, "Keep them entirely by themselves," but that is a very difficult thing to accomplish. The number is comparatively small—a hundred. These children require a special classification. They require classification in smaller groups than the feeble-minded. The epileptic, from his temperament, from the character of his disease, is full of crotchets and prejudices. He forms a prejudice against another epileptic because he has fits. "I don't want to associate with that boy," he says, "because he has fits." That prejudice must be met and dealt with, and it cannot be handled properly in the institution of the feeble-minded. And the insane patients feel it is an injustice and an unkindness to compel them to be associated in the same institution with the epileptics. And then a large proportion of these epileptics are neither insane nor feeble-minded. Gradually some of them become insane and some of them more or less feeble-minded, but a large proportion of them are not, and therefore it seems to me desirable that there should be a special institution provided for them.

But, still further, there should be special provision for the unfortunate epileptics as a matter of public precaution, and this is perhaps even more important than either of the considerations that I have mentioned. If you will examine the statistics of this state you will be appalled to learn how very rapid is the extension of this disease. I have with me a paper which was read in the Iowa State Conference of Charities last year; I thought I had it here, but I think I can give you the essential figures. An examination was made by an eminent Italian physician, I think of the cases of 62 males and 74 females who were themselves epileptics. They became the parents of some 540 children. Out of those 540 children only 105 were healthy children, and 75 per cent of the 540 children were afflicted with a nervous disease, and a large proportion of them, more than half—I think 60 per cent—were themselves epileptics. And this is only part of the evil, because when you go down to the third generation—Dr. Rogers tells me that there is even more probability of the grandchildren being afflicted than there was of the children themselves being afflicted with a similar disease.

Now, we are coming to recognize that we have a duty in the prevention of the transmission of disease from parent to child. We have already adopted a policy in this state of shutting up the feeble-minded girls during the child-bearing age, believing it is not right they should hand down to posterity the evils with which they are afflicted. We have already in Illinois a hospital for the confinement of consumptives, and rapid strides are being made in the direction of having all consumptives put in special institutions in order to avoid the transmission of their disease to their posterity.

Now, it seems to me that there is no question that the time has come for us to put a stop to the propagation of the victims of this most terrible disease called epilepsy, and the only practical way, it seems to me, to do that is to provide institutions where they may be cared for. In feeble-mindedness the probability of the propagation of the species is confined almost entirely to the young women, but in epilepsy it is not confined to one sex; it is quite as likely to happen in the one case as in the other. The public owes itself a duty.

And, further than this, if you will examine the records of your institution for the feeble-minded, you will find a large proportion of the inmates are of parentage who were afflicted with epilepsy. The very interesting paper which was read to-night carried with it some very significant thought. A very large proportion of these accidental criminals, these petty criminals, are either themselves epileptics or come of epileptic ancestry.

Now, then, we take account of the expense and the burdens which the public is assuming, but we must realize that we have to take care of these people anyhow. Every individual who lives in the community in idleness lives on somebody else. Somebody carries that burden; and in the end the public carries the burden, either in public institutions or through the loss of the activity and services of those who have to devote their time to the care of these people. We carry the burden; we carry it one way or the other. And so I believe we shall find if we examine this subject carefully that as it is economical to carry on such an institution as that magnificent training school at Red Wing for the children of the delinquent class, so it will be economical for us to make public provision for these unfortunates in whose behalf I am speaking to-night.

Something has already been done in this direction. Dr. Rogers will give you an account of the beautiful institution which has been established at Sonyea, N. Y., of which Dr. Sprattling, who was to have been here to-night, is the superintendent. Ohio is a pioneer in this matter. She has been conducting most valuable experiments along this line, which cost us nothing, and of which we can avail ourselves. The States of Ohio, Massachusetts, New Jersey and New York have already made provision for this class, and the State of Illinois at the last session of its legislature made provision for the public care of epileptics. In other states temporary provision has been made for their care. In Iowa, Minnesota and California they receive some accommodation in the institutions for the feeble-minded. I have already shown how inadequate this provision is. The time has come when we must face this question. I believe it is our duty to study what is being done in these other states. Let us send representatives to visit these institutions at Sonyea and Gallipolis and investigate the work that is being done in order that we may act wisely in the matter. Minnesota has much better institutions than the eastern states. Why? Because it has always availed itself of the experience of these older states and has taken the benefit of their experiments. Let the State Board of Corrections and Charities begin to study this subject. Let the members of this conference begin to study it. Let those of you who can, visit these institutions and see what is being done, and let us consider what our duty is towards our unfortunate brothers.

## DISCUSSION.

**PRESIDENT ROGERS:** We very much regret the fact that Dr. Sprattling, who had intended to be here this evening, found himself unable to come at nearly the last moment. He has been very sick and consequently his work accumulated, and he found it absolutely impossible to leave home. However, he very kindly forwarded a set of slides, illustrating some of the features of the Craig colony for epileptics at Sonyea, N. Y., and I will have the pleasure of showing them and reading the descriptions which he has transmitted with the slides.

Stereopticon views of the institution over which Dr. Sprattling presides were then shown and descriptions read by Dr. Rogers.

**BISHOP GILBERT:** Why would it not be a good idea for the Conference of Charities and Correction, which is so deeply interested in all these matters, to appoint a committee to draw a proper bill and present it for consideration and passage at the next meeting of our legislature? It would seem as though there could be no question as to the desirability of establishing such an institution as has been advocated here this evening.

**CAPTAIN C. R. FAULKNER:** I believe it would be wise to have accurate statistics in this matter placed in the hands of the committee who are to do the preliminary work. Legislative committees must deal with facts; and if there is any method of gathering this information, the committee should be furnished with figures showing the number of epileptics there are in the state.

**BISHOP GILBERT:** I would suggest, Mr. President, that there is abundant time to secure all these facts, because the legislature of Minnesota will not meet again until a year from the coming winter.

**MR. HART:** I may say that your president informed me it was his intention to secure this information by corresponding with the county superintendents.

**HON. JOHN W. WILLIS, St. Paul:** I would like to ask you, Mr. President, what success you have had in treating epileptics.

**PRESIDENT ROGERS:** I will answer that very briefly in this way: We have about one hundred epileptics in the institution at Fairbank, but the most of these cases are among those who are decidedly feeble-minded; not all, but the most of them. We find that the regular habits of the institution, regular hours for and care in dieting and sleeping and for unobtrusive occupations, do more to reduce the spasms than anything else. We are somewhat hampered in trying to care for epileptics in the school for the feeble-minded. We cannot, on account of the conditions there, give them the liberties they should have, and epileptics especially feel irritated by restrictions. If they can wander in the fields their lives are much happier. Freedom in the open air is what they especially need. We have found, however, that the number of spasms are readily reduced under our treatment. We have had no cures.

**SECRETARY JACKSON:** In regard to cures, I may say that the superintendent of one of the hospitals in the state told me that he had labored most assiduously with an epileptic. He studied his case with great care and gave it a large amount of time. At length he thought a cure had been effected, and the patient was released; but after a little while he had a relapse. The superintendent has given up the idea of effecting a cure. He believes that once an epileptic always an epileptic, and while the disease may be mitigated, it can never be cured.

**DR. T. C. CLARK, Stillwater:** I wish to compliment Secretary Hart on the very vivid portrayal which he, as a formal case of this terrible disease, but as vivid as he made it and as sad as he pictured it, it does but begin to convey to you the sad features of the disease. I remember my boyhood friend who was afflicted with the disease and the terror with which his seizures used to inspire me, and I cannot say that age and experience with these cases have relieved me of the feeling of oppression and sadness which the witnessing of these spasms brought to me in those early days. All that has been said here to-night has been little enough to impress upon us and upon the state at large the necessity for providing a separate place for the care of this class. I remember very well the case of a leading clergyman of the state, now living at a distance, who had two adult children afflicted with this disease. Educated and cultivated as they were, there was no place where this son and his daughter could be sent where they could be properly treated; nothing but the insane asylum. They were too old for the school for feeble-minded. Now, Secretary Hart stated that perhaps this affliction was about equally divided between the poor and the rich. If I were to give a guess I would say there was a larger proportion of cases among the educated and better classes. It is a terrible thing to think of these people, having the same tastes and education as ourselves, condemned in their own eyes, as Secretary Hart has described,—I say it is a terrible thing to think of putting such individuals into an insane asylum, among people whose minds are not like their own, who are unable to whose mental machinery is out of order; you cannot say they have any moments when they are perfectly themselves. But these epileptics, especially in the earlier years, aside from the temporary confusion arising from the attack, are as normal as you or I. As the disease progresses, they become as pictured by Secretary Hart. They require treatment entirely different from that of insane persons. They require employment and home surroundings, such as you and I would need if we were taken with an insurable disease, and knowing it was necessary for us to be somewhere where we could be taken care of. Every physician knows in his own practice of a number of these cases, and I do not know of any more pressing need in this state, or in any other state, than a place—a home—where these people can be intelligently and properly taken care of and treated. I say treated, because I agree with what Secretary Jackson has said. I do not know of any treatment except the treatment of regular habits and proper employment. Now, these epileptic seizures seem

to be explosions of nervous force. They are not understood by the profession. There is no pathological change in the brain; there is nothing to show the cause or the reason for this manifestation of disease; but it has been found that regular habits and regular diet lessen the liability to these explosions of nervous force. We may call them something like the eruption of a volcano, brought on by irregular habits or intemperance in eating, or nervous excitement, or the living of an improper life; and when those afflicted are put under conditions where the life is free from excitement, free from excess in eating or drinking, or any of the improper habits of life, they are put in the most favorable conditions for a liberal existence, and I hope that the legislature of Minnesota can be brought to realize that for no class of the population is there more need than for its epileptics.

### THE INDIGENT ADULT BLIND

BY J. J. DOW, L. H. D., SCHOOL FOR THE BLIND, FARIBAULT.

The class referred to in the above title are not numerous in this state, nor have the distresses of the few who exist been so pressing and so urgent in character as to call forth any wide expression of sympathy, or to formulate any specific demand for public aid. The intensity of their need has been lessened by private charity and the world has heard little of them. Yet there is a slowly growing pressure for an interest in these feeble folk, whose distress perhaps more than any other appeals to the tenderness of humanity. Isolated cases of a very distressing character occasionally become known, and the conviction deepens that ere long it will be found necessary to meet in some way the problem of the indigent adult blind. Just now it is perhaps pressed most sharply home upon those in charge of the School for the Blind, upon whom falls the responsibility of the education of the blind youth of the state; for to them come the appeals of those who have passed the age of education and only desire a refuge from the storms of the world, to be admitted into the school. So pressing have been these appeals that judgment has been constrained to yield to sympathy, it is to be feared, in a few instances. It should be distinctly understood that the school is designed to be exclusively a school, and does not make provision for any except such as would but for their affliction be entitled to admission to the public schools of the state. To expand its scope to include adults who are in need of a home would be destructive of its usefulness to those for whom it is designed. Lest this great harm should come and that those whose distresses appeal most powerfully to the sympathetic heart may find some other and more fitting relief it has seemed proper to enter upon this discussion.

The problem of the indigent blind is but one phase of the poor problem which has always been with man; and of the one as of the other it may be said that there is no ideally perfect solution. To aid cuts the vital nerve of self help; to refrain from aid involves such distress and suffering as humanity will not and ought not to endure. It is only a question of the most good with the least harm. This is the general problem of the poor. In a broad way, society has taken a rough solution of it into its own hands by casting such social stigma upon poor relief that it will not be sought until all possible resources are exhausted; when relief is accepted self-respect is largely broken down, and watchfulness is the only resource. Not an ideal

solution surely. Yet in a fairly vigorous social body it works, though not without much friction, loss of efficiency, and, alas! no little loss of character.

If provision for present and future needs are neglected, society in making up the deficiency, has a right to look askance at the one who has thrown this burden upon it. It is quite safe to say that social feeling has ever been more tender of the blind than of any other needy class. The affliction is so terrible that in its presence theories break down and principles are abandoned. However keenly the blind man may himself have felt the plaint of the unjust steward, "I cannot dig—to beg I am ashamed," society has at all times looked with leniency upon the blind beggar. Nevertheless, the blind are not of a race apart, with other feelings and impulses and ideas, than those that are common to mankind. Many of them have had long years of sight. The eager ears of all have drunk in the notions, the passions, the prejudices of the community in which they live. They are full heirs of the heritage of instincts and impulses which the past has crowded on to the present.

Begging is not the solution of the problem of the indigent blind. Whatever else may be, they must not be compelled nor allowed to exploit their infirmity to win their daily bread.

So there has arisen in men's minds, easily and naturally, the idea of the asylum. Beautiful and tender word; a shelter and a refuge from the storms of life. But wherever manhood and womanhood have had high value the asylum has not seemed the solution of the problem—a palliative, but not a remedy—since it makes no provision for the common interests of humanity.

We recognize the imperative need of a school for those of normal condition. How much more is it a necessity for the blind. The school is to fit them for the adverse conditions which must be met. In our state, a few of our broad land, blind men and women are meeting the conditions of life successfully, who, without the training of the school, would have been helpless and dependent. The majority of the blind have lost sight after school years. Adapted to lines of work now become impossible, they are no longer plastic to the trainer's touch and the school has no help for them. Again, as with boys of sight so with the blind, many have not the "head," the mental capacity, for anything but physical labor. For such with sight the world has ample need. Its rough work is always waiting to be done by them. But, alas! for the blind man physical labor is at best an uncertain source of support. So, too, in the case of the blind woman the situation is very difficult. The world offers few openings for an independent career to women with sight. How much fewer it offers to blind women no one would imagine who had not painfully and with a sense of despairing responsibility microscopically scanned its field. So however much we may congratulate ourselves on the successes of education, we are fain to admit that there is a large field which it cannot reach. There will still be some without ability to earn a living unaided. They are in fact the ones who make the problem before us. We have agreed that they shall not beg. What, then, remains to do? The talented French instructor of the blind, Dufau, more than fifty years ago made this assertion: "I lay down the principle that every indigent blind person is properly a charge upon the community, and by virtue of this has a right to demand of it the means of subsistence." In a way we Americans admit this to be true of all needy persons, but, as has been said, we make the conditions of the grant so uncomfortable that none but the needy will be