


House of Recovery Cork Street Fever Hospital

Annual Report and Physicians Report 1807.

The 1807 report is notable for the attempt to produce statistics linking the days of the month with the incidence and extent of fever. The source of fever was a continuing mystery. The effect of weather conditions on the incidence of fever was regularly investigated. This is the first year also when servants were permitted to enter the hospital as patients. Prior to this year, their employers were expected to take care of them.

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FEVER HOSPITAL
CORK STREET.

Reports
and other
Documents
relating to
The Fever Hospital
and
House of Recovery
Cork Street
Dublin

From the Commencement, to 4 January 1818

Collected by J. L. Maguay

and when he is no more, let the Book
be sent to the Managing Committee.

A. D. 1819

ANNUAL
REPORT
OF THE
MANAGING COMMITTEE
OF THE
HOUSE OF RECOVERY,
AND
FEVER HOSPITAL,
IN
Tork-Street, Dublin,

For the Year ending 4th January, 1808.

Dublin:
PRINTED BY
CHARLES DOWNES,
Whitefriar-Street.

1808.

*Annual Report of the Managing Committee of
the House of Recovery and Fever Hospital
in Cork-street, for the Year ending the 4th
January, 1808.*

BETWEEN the 5th January, 1807, and the 5th January 1808, there have been received into the the Hospital 1093 Patients.

After an attentive consideration of the general management of this Institution during the last year, the Committee beg leave to state a fact which they think affords a striking proof of the advantages which have arisen from this charity to the inhabitants of the city of Dublin, namely, that a considerable diminution has taken place in the total number of Fever Patients received into the Hospital; when compared with the former year although within the last mentioned period 44 cases of scarlatina and some female servants affected with fever were received into it from their masters houses, neither of which description of sick were before admissible.

The Committee trust that the public will by a continuance of that liberality, which they have already experienced, enable them not only to support; but to extend a system of measures which has within a very short period of time, produced such beneficial effects to the Sick Poor of this city.

The following is a statement of the number of Patients admitted from the opening of the Hospital on the 14th May 1804, to the 4th January 1808, inclusive, viz.

Admitted during the above period	-	-	-	3815
Discharged cured	-	-	-	3491
Died	-	-	-	293
Remain in Hospital 5th January 1808,				31
				<hr/>
				3815
				<hr/>

And the following is a statement of the number received into the Hospital in the year ending 4th January 1808, inclusive, viz.

In the Hospital 5th January 1807	-	-	-	51
Admitted from 5th Jan. 1807, to 4th Jan. 1808, inclusive				1093
				<hr/>
				1144
				<hr/>
Discharged cured	-	-	-	1020
Died	-	-	-	93
Remain in Hospital 5th January, 1808				31
				<hr/>
				1144
				<hr/>

18th February, 1808.

Committee for the present Year :

Edward Allen	Joseph Hone,
John Barrington,	John David La Touche,
Samuel Bewley,	Peter La Touche,
Thomas Crosthwait,	Randal Mac Donnell,
Richard Darling,	George Maquay,
Thomas Disney,	John Leland Maquay,
William Disney,	John Orr,
William English,	George Renny,
Arthur Guinness,	Edward Swanwick,
William Harding,	Luke White,
John Hone,	

Physicians,

Francis Barker,
William Stoker,
George Hagan,
Richard Gamble,

Surgeon,

C. H. Todd,

Register, Purveyor and Collector

Charles May,

Apothecary,

Edward Bruen,

House-keeper,

Jane Leedom,

*Account of Income and Expenditure of the House
Dublin, for the Year ending*

	£	s.	d.
To Rent and Taxes of Premises - - -	82	17	—
Maintenance of Patients and Servants - -	582	17	11
House-bedding, Furniture and Clothing, wear and tear - - - - -	214	12	2
Salaries of Officers, Nurses and Servants -	551	8	9
Fuel, Soap and Candles - - - - -	258	10	11
Printing, Stationary and Advertising -	45	13	4½
Medicines, including Wine and Spirits -	152	6	—
Incidental Expenses, including Expense of Horse	66	8	—½
Whitewashing Habitations of the Poor, &c.	90	—	9
New Buildings, Repairs and Improvements	2089	15	2½
	<hr/>	<hr/>	<hr/>
	4134	10	1½
Excess of Income above Expenditure -	378	—	—
	<hr/>	<hr/>	<hr/>
	4512	10	1½

Account of Property of the Institution, exclusive

	£	s.	d.
To Furniture and House-bedding - - -	1104	17	9
Clothing - - - - -	91	16	11
Wine and Drugs - - - - -	54	2	7
Government Stock	211	5	—
Purveyor due by him - - - - -	46	3	—½
Collector - - - - -	6	—	3
	<hr/>	<hr/>	<hr/>
	1514	5	6½

*of Recovery and Fever Hospital, Cork-Street,
4th of January, 1808.*

	£.	s.	d.
By Parliamentary Grant, Net	2998	3	7
Subscriptions	1292	7	$\frac{1}{2}$
Donations	191	13	$3\frac{1}{2}$
Amount of Hay and Grass, deducting Expenses	30	6	$2\frac{1}{2}$

4512 10 $1\frac{1}{2}$

of Buildings and Premises 5th of January, 1808.

By Treasurers due them	182	10	11
Net Property of the Hospital	1331	14	$7\frac{1}{2}$


1514 5 $6\frac{1}{2}$

THIRD
REPORT
ON THE
OBJECT AND EFFECTS
OF THE
HOUSE OF RECOVERY,
AND
FEVER HOSPITAL,
IN
Cork-Street, Dublin,

BY ONE OF THE
Physicians to that Institution.

Dublin:
PRINTED BY
CHARLES DOWNES,
Whitefriar-Street.

1808.



ANNUAL MEDICAL

REPORT, &c.



THE plan and operation of the Fever Hospital and House of Recovery in Cork-Street, have been already detailed in two publications, which include a period from the commencement of that establishment on the 14th of May 1804, to the end of the year 1806.

Reference
to former
report.

In the course of the year 1807, the objects of the Institution have been so far realized as to admit of additions to the original system of great importance to the public; to state these and to record, as in the former publications such facts as may hereafter lead to useful induction is the object of the present Report.

Objects
realized.

A comparison of the numbers admitted, and of those previously ill in the infected houses of the poor, in the year 1806 with those of 1807, holds out a probability that

Comparison
of the num-
ber on the
Hospital
books in
different
years.

the progress of Typhus Fever has been considerably checked in Dublin since the Institution of this Hospital: the number of Patients admitted being in the former year 1256, and in the latter only 1056. Of these female servants (received from their masters houses) constitute a part, who were not admissible in the former year; and from the column of the registry in which is entered the number previously ill in the dwellings of the Poor from whence Patients were received, it appears that these amounted in the former year to 918, in the latter to 501: thus the records of the Hospital shew a reduction of more than 600 cases of Fever.

Reduction
in the year
1807.

But enquiry at the other medical Institutions within the district* rendering it probable that fewer persons affected with Fever have received assistance from those exclusively in the last than any former year,† with the increasing publicity

* The limits of the district are the same as described in the Physicians Report of the year 1806, namely the South side of the Liffey and the Circular Road.

† The number of Patients attended in Fever in Dr. Stephens's Hospital, and from the Dublin general Dispensary, have from the statement of the Physicians of those Institutions been much reduced in the last year, but no distinct registry of Fever being kept the reduction could not be accurately ascertained. The number in Fever who received assistance from the Meath-Street Dispensary owing to the adoption of a different nosological arrangement of the febrile disorders in each year, will not aid us in determining the question.

publicity of the House of Recovery, favour an opinion that the diminution of Fever in the City has been much greater than that above stated.

To the system of whitewashing, cleansing and ventilation at the infected houses of the Poor much of this success must be attributed, and it is highly gratifying to be able to state that such houses as in the first and second year, sent out their diseased inhabitants for months successively, and from whence those dismissed cured from the Hospital, often returned reinfected, are now rarely to be met with. This has been effected without the assistance of muriatic or nitrous vapours which have been so strongly recommended by eminent physicians.

Much of this success attributed to cleansing the infected dwellings.

Fumigation not employed.

A short summary of even a few of the sources of contagion so frequent in this metropolis, where there is† not a proportionate number of beds in Hospitals as in other large cities, may assist to appreciate the importance of the present preventive system. Such are the crowded and filthy dwellings of the poor in confined situations; their bad diet: fatigue alternated with intemperance: frequent removal of those accustomed to a country life, to sedentary occupations in the city: also the frequent intercourse of the citizens with other places from whence contagion may be carried, &c. &c.

Sources of contagion.

But

† Vide, the first Report where is given a comparison of the number of beds provided in Hospitals for the reception of medical diseases in Dublin and in London.

But it may be deemed unnecessary to dilate the consideration of this subject to that public, who have lately evinced such just solicitude for the success of vaccination, when it has been stated by a most respectable * authority that a larger proportion of mankind is susceptible of the repeated attacks of Typhus Fever, than of Small-pox, the ravages of which are so extensive and fatal.

Female
servants
admitted.

The applications from the indigent poor, the first object of the Institution having decreased, the managing committee turned their attention to those whose situation in life had the next claim on the establishment, and accordingly female servants in place, to whom the advantages of the Institution were not before extended, were admitted from the 1st of September 1807; these persons though not of the description of indigent poor, their masters being called on both by the laws of God and their country to take care of them in sickness, yet were considered fair objects of the establishment when they could be admitted without infringing on the advantages of those hitherto received, and for the following reasons.

Reasons for
their ad-
mission.

It was found that servants were sent from their masters houses into those of the poorer classes, either to remain there

there during illness, or to evade the regulation which prohibited their admission from the houses in which they served, and hence a new source of infection was brought among the poor; it was likewise observed that when servants were first removed from their masters houses to lodgings to be sent from thence to the hospital, the incidental delay and agitation, often produced irreparable injury. As it was feared that the accommodation which might be spared from the indigent poor, could not extend to all descriptions of servants, female servants only were made admissible, and the more especially as they are oftener found in the employment of those unable to support them during illness.

The importance to society of thus being able to extend the rules of admission, will be fairly estimated by all those who have families, and feel the just claims of its members on them, as thus an asylum is opened for their infected servants, with advantages equal to any that even affluence could procure, and the remaining part of the family is relieved from the terror and risk of contagion, nor is there, on their return to former duties, the same danger of carrying back the seeds of fresh disease as would be from ill-ventilated and ill-cleansed lodging houses.*

The

* Every description of clothes which Patients bring into the Hospital, is washed, ventilated and perfectly dried before being returned on dismissal.

Epidemic.

The influence of the different seasons of the year in modifying the forms of Fever, effected changes so similar to those described in the report of the last year, that it is not deemed necessary to enter into so minute a detail at present. Pulmonary complaints which are hereditary to, or acquired by most of the poor inhabitants of that part of the district from whence the largest proportion of our patients comes, produce the most obstinate class of symptoms in every season of the year, but are much aggravated in the winter months; and the bilious affections which were produced by the heat of summer declined with their cause.

Variation
from that
of former
year.

The principal varieties observed in the epidemic of this year were the following: conformable to the statement of medical writers that Fevers are much influenced by the prevailing epidemic, it was found that many of the patients admitted in March (when Scarlatina began to spread in the City) were affected with slight sore throats, and others with more than usual tendency to evanescent redness on the surface, and these appearances were frequent during the prevalence of Scarlatina.—The intermittent form, except in a very few instances, did not supervene in the course of fever, or on convalescence as was so frequent in the former year.

In the months of November and December, the head, in a large proportion of the patients was more than usually affected.

affected: delirium was frequent and violent, the consequent symptoms marked a very general tendency to effusion on the brain; in forming the prognosis, the principal assistance was derived from the eyes, when either eye was in even a slight degree closed, an occurrence which frequently happened at this period, and sometimes early in the fever, it was a sufficient cause of great alarm, though unattended with other bad symptoms.

The following fact is stated, as it may assist the investigation of those who are anxious in enquiring into the nature of contagion, and the laws by which it spreads. It is frequently observed in the Hospital, that peculiar and distinct modifications of symptoms appear in distinct classes of patients, and on enquiry, the persons similarly affected are generally found to have caught their Fever at the same source—this is so remarkable, that on hearing of a patient coming from a house from whence persons ill of Fever had previously been received a similar train of symptoms could be foretold with some certainty.

The mortality of this year exceeds that of the former: **Mortality.** the same variations in fatality have been observed in all similar institutions—besides the causes assigned in the last year's report, which tend to increase the number of deaths in the Hospital, farther experience points out the following to be perhaps the most frequent.

Its most frequent causes.

It being a leading object of the institution to check the progress of contagious Fever, all persons who apply even in the worst states of that disease are admitted, and when even the most faint hopes are entertained of their recovery; on the same principle, persons labouring under incurable states of Consumption, Liver Complaints, and Dropsies, if infected with Typhus Fever, are received, and hence a very considerable number of the deaths of this year has been caused by these diseases after the Fever had declined: but the mortality is principally to be attributed to late application, especially when Fever (as so frequently happens in the Cork-street Hospital) is combined with pneumonic inflammation, for it is well known by all those acquainted with this disease in even its most simple form, that if allowed to remain for three days unchecked, remedies are afterwards administered with great uncertainty; patients, however, rarely apply for admission sooner than seven, eight, or more days after the first attack.

Days of fever on which death happened.

In continuance of the plan of the former reports, the following table, exhibiting the days of Fever on which death happened in such instances as the fact could be ascertained is subjoined:

On

On day of Fever, 3d, 4th, 5th, 6th, 7th, 8th, 9th, 10th,
 Died, - - - - - 1, 1, 3, 4, 3, 2, 1, 3,

On day of Fever, 11th, 12th, 13th, 14th, 15th, 16th,
 Died, - - - - - 4, 1, 1, 5, 6, 2,

On day of Fever, 17th, 18th, 19th, 20th, 21st, 22d, 23d,
 Died, - - - - - 2, 0, 2, 2, 1, 3 0

On day of Fever, 24th, 25th, 26th, 30th, 31st, 37th, 46th.
 Died, - - - - - 1, 0, 1, 2, 2, 1, 1,

In the remaining cases, which terminated fatally, the period of Fever in which death took place, was much later than in the instances above stated, but the day of attack being more remote from that of admission to the Hospital, it could not be accurately remembered either by the patients or their friends.

The increasing disparity in the mortality between the males and females this year is remarkable and perhaps is not to be fully accounted for, but to the reasons already proposed in the publication of last year, may be added, that the accession of the menstrual discharge is frequently succeeded by convalescence from Fever, and the relief from this cause is most observable when the functions of the lungs are interrupted.

Days of
decline of
fever.

The following table exhibits the days of decline of Fever in three hundred and thirty-two instances :

On day of Fever, -	3d,	4th,	5th,	6th,	7th,	8th,	9th,
No. of Convalescents, -	3,	8,	26,	20,	39,	34,	37,

On day of Fever, -	10th,	11th,	12th,	13th,	14th,
No. of Convalescents, -	32,	24,	21,	12,	17,

On day of Fever, -	15th,	16th,	17th,	18th,	19th,
No. of Convalescents, -	8,	12,	9,	10,	3,

On day of Fever, -	20th,	23d,	25th,	28th,	31st.
No. of Convalescents, -	7,	3,	4	2	1

The number of nurses and servants belonging to the Hospital, who were attacked with Fever in 1807, amounted to five persons only, which is a smaller proportion than that in any former period; this must be attributed chiefly to the continued system of cleanliness and regularity at the institution, but partly, perhaps, to the power which habit, to a certain degree, gives persons employed about the sick to resist contagion.

Fewer
nurses or
servants
infected.

Scarlatina



Scarlatina appeared in different parts of Dublin in March and April, and spreading very generally in the course of the ensuing May and June, occasioned such distress among the poor, that it was deemed advisable by the managers to extend the advantages of the institution to persons labouring under that disease, and accordingly in July following it was resolved that such patients should be thence-forward admitted.

Scarlatina
prevelen
in Dublin.

Admitted.

Since that period, to the end of the year 1807, there were in the Hospital twenty males and twenty-four females affected with Scarlatina. As it may be to the Pathologist an object of importance to know the number, age, and sex of those received in this disease in each month—and as a series of such tables may hereafter give some assistance towards calculating its progress and decline in Dublin, the following table is subjoined:

	0	10	20	30	40	50	Total Males.	Total Females.	TOTAL.
	M.F.	M.F.	M.F.	M.F.	M.F.	M.F.			
<i>July,</i>		2 5	1				2	6	8
<i>August,</i>	2	2 3	1		1		5	4	9
<i>September,</i>	2	1 4	4	1	1		6	7	13
<i>October,</i>		5 2	1			1	5	4	9
<i>November,</i>	1	1 1			1		2	2	4
<i>December,</i>			1					1	1
TOTAL,	5	1 14	15	5	2	1 1	20	24	44

To prevent exposure of the ordinary patients of the house to the contagion of this disease, or of those affected with Scarlatina to that of Typhus Fever, the following regulations were drawn up by the physicians, and ordered by the managing committee to be complied with:

" 9th July, 1807.

" In conformity to the wishes of the managing committee,
 " as expressed in their last communication, the physicians
 " beg leave to recommend, that patients with scarlet fever
 " shall be conveyed to the Hospital in a carriage appro-
 " priated to that purpose, during the continuance of Scar-
 " latina as an epidemic. They also advise, that such patients
 " during illness and convalescence shall be accommodated in
 " separate wards, into which no patient affected with any
 " other disease shall be admitted, until the ward has been
 " vacated and has undergone whitewashing, cleansing and
 " ventilation. A distinct nurse for such patients seems also
 " necessary—The above regulations to be observed whenever
 " the physicians shall particularise the disease to be Scarla-
 " tina in the ticket of admission; they also think the con-
 " valescent dress of such patients should be kept distinct
 " from that of the ordinary patients, until the physicians
 " shall report that scarlet fever has subsided in the city."

The necessity of strictly observing these regulations was
 evinced by the accidental exposure of three persons con-
 valescent

* The superior activity of the contagion of scarlet fever over that
 of Typhus was corroborated by the suddenness after infection, with
 which Mr. King, our apothecary, (who resigned a short time after this
 new disease was received into the Hospital,) and Mr. Bruen, his suc-
 cessor, were affected.

valescent from common fever to the contagion of scarlatina, all of whom were seized with that disease; such occurrences were in some degree inevitable under the sudden emergency which urged the admission of those affected with this rapidly spreading epidemic.

The following is nearly the form it assumed in the hospital; the attack commenced with the usual symptoms of pyrexia, to those succeeded despondent anxiety, alternating with drowsiness, face flushed, the skin of a pungent heat, the tongue in some instances foul, more generally of a scarlet red colour and smooth; eyes heavy and dull, the uvula and amygdalæ inflamed, the alvine dejections black and fetid, belly costive, urine limpid; on the third day generally the eruption appeared, and under various forms in different patients, most frequently however, there was nearly an equal efflorescence over the neck, breast, and arms, sometimes extending over the whole surface; in others the redness appeared in large stains, and in some it resembled so much the measles, that on a superficial glance it might be readily mistaken for that disease.* The eruption disappeared at various periods from the 5th to the 8th day, leaving a branny desquamation on the surface. On the decline of the disease, the bowels became more easily affected by

* The measles were prevalent in Dublin at that time.

by purgative medicines than before, and the urine more copious and turbid. The sore throat was in general most severe on the 6th day, when the uvula and amygdalæ were covered with a superficial sloughing suppuration, the difficulty of swallowing also was greatest at this time. --In those naturally of a full habit and florid complexion, the external swelling of the fauces was considerable through the course of the complaint. The decline of this disease commenced very perceptibly in most of the cases on the 7th day, and the period from convalescence to complete recovery was much shorter than in the ordinary fever of the hospital, this perhaps may be accounted for partly from convalescence commencing more regularly on the 7th day in Scarlatina than in Typhus fever, and partly from the youth of the great proportion of those affected with the former disease.

The sequelæ of scarlatina were in general very inconsiderable, even partial anasarca so often observed to succeed, did not supervene in more than three instances, and it is with particular satisfaction it is stated, that of the whole number admitted, but one person died of scarlatina.* As it tends more fully to establish the healthfulness of the situation

C

tion

* This person (I understand) died affected with general dropsical effusions and epidemic fits, after the decline of fever.

tion of the hospital, with the cleanliness and ventilation of its apartments, it being ascertained how much situation influences the progress and termination of this disease.

Cynanche Tonsillaris was very general in the months in which scarlatina was most prevalent, and when visiting patients in scarlatina at their own houses, it was sometimes observed, that the whole of the family who were not affected with scarlatina (having already had the disease) were affected with inflammatory sore throats.

As the treatment of scarlatina has lately been under public discussion, it may not be amiss to give an outline of the general practice in it, since received into the fever hospital and house of recovery.

It consisted chiefly in low regimen, drinks acidulated with sulphuric acid, the free use of purgatives, indicated by general tendency to costiveness, and the relief which most commonly followed their full effect on the bowels. The gargles in use were composed of a decoction of bran acidulated with muriatic acid, and their effect on the throat assisted by the inhalation of steam, impregnated with sulphuric æther. Blisters were in some instances applied to the fauces; fomentations of the legs were often found useful in producing

ducing softness of the surface, and in causing rest. In the period of convalescence the diet was made more generous, a moderate quantity of wine was given, purgatives were persevered in, so as to produce one or two natural alvine discharges daily. This was the plan of treatment pursued in general by the physicians of the hospital, varied however with peculiar or urgent symptoms.

In the preceding narrative, the chief study has been to give a simple and faithful account of the occurrences of the Hospital, in the year 1807. They have been found sufficient to excite a warm interest with all persons who have observed them closely; to them the institution presented numerous proofs of its extensive utility, in protecting the rich, and preserving the poor—and should the present publication incite a greater number to actual inspection, a leading object of the Reporter will be attained.

The risk of visiting the Hospital under the system of cleanliness and ventilation there observed, the experience of four years has proved to be very inconsiderable—but whatever inconveniences may attend the prosecution of the objects of the establishment, they must be far outweighed by the conscious feeling of rendering unto God an acceptable service, by fulfilling the divine commandment, “Do unto others as you would they should do unto you.”

WILLIAM STOKER.

*Fever Hospital and House of Recovery,
Cork-Street, 20th October, 1808.*

THE Managing Committee of the Fever Hospital and House of Recovery in Cork-street having been enabled by the Bounty of Parliament to enlarge the Buildings so as to provide Accommodation for 180 Patients, it has been agreed upon at a late Meeting, that from and after the 5th Day of January 1809, the Benefits of this Charity at present confined to the Southern Side of Dublin shall be extended to the whole of the City within the Circular-Road, provided the Funds of the Institution can be raised so as to meet the Expence which the above Extension must unavoidably create. These Funds consist of a Parliamentary Grant of £1000 per annum, and a Subscription List subject to considerable Fluctuation, but which cannot be taken for more than £1300, making a Total of £2300 per annum, the entire of which Sum has heretofore been expended in Maintaining 100 Beds, which during the last Year have received 1101 Persons labouring under Contagious Fever: As the proposed Measure must increase the annual Admissions very considerably beyond that Number, the Committee without Meaning to relax in their Efforts to Augment the Subscription List within the Southern Division of Dublin, intend in a short Time to Solicit Aid from the Respectable Inhabitants Residing at the Northern Side of the Liffey, and they Trust that they will meet with that Success which to the Credit of the Citizens at large has uniformly attended former Applications of a similar Kind.

It is certainly a Consideration which ought to have Weight in deciding the Merits of this Charity, and which the Committee Hope will not be stated to the Public in vain, that in the Course of a few Years three great Objects have been attained by it within the District of the Hospital.

FEVER HOSPITAL
AND HOUSE OF RECOVERY, CORK-STREET.

20th October, 1809.

THE Managing Committee of the **FEVER HOSPITAL** and **HOUSE** of **RECOVERY** in **Cork-street**, having been enabled, by the Bounty of **Parliament**, to enlarge the Buildings so as to provide accommodation for **One Hundred and Eighty Patients**; it has been agreed upon, at a late Meeting, that from and after the **5th Day of Jan. 1809**, the **Benefits** of this **Charity**, at present confined to the **Southern Side of Dublin**, shall be extended to the **whole of the City** within the **Circular-road**, provided the **Funds** of the **Institution** can be raised so as to meet the **Expense** which the above **Extension** must unavoidably create. These **Funds** consist of a **Parliamentary Grant** of **£1000 per Annum**, and a **Subscription List**, subject to considerable **Fluctuation**, but which cannot be taken for more than **£1300**, making a total of **£2300**, per **Annun**; the entire of which sum has heretofore been expended in maintaining **one hundred beds**, which, during the last year, have received **one thousand one hundred and one persons** labouring under **contagious fever**. As the proposed measure must increase the **annual admissions** very considerably beyond that number, the **Committee**, without meaning to relax in their efforts to augment the **Subscription List** within the **Southern Division of Dublin**, intend in a short time to solicit and from the **respectable Inhabitants** residing at the **Northern side of the Liffey**; and they trust that they will meet with that success, which, to the credit of the **Citizens** a large, has uniformly attended former applications of a similar kind.

It is certainly a consideration which ought to have weight in deciding the merits of this **Charity**, and which the **Committee** hope will not be stated to the **Public** in vain, that in the course of a few years, three great **Objects** have been obtained by it within the **District of the Hospital**:

1st. The effectual **Relief** of all **poor Persons** labouring under **contagious Fever**, whose cases were made known at the **Hospital**.

2d. The decrease of **Fever** and **Mortality** amongst the **Poor** within said **district**, in consequence of early **Admission**, and the other **Measures** adopted for arresting the progress of **Contagion** within their **Dwellings**.

3d. The consequent diminution of **Febrile Infection** in that **quarter of the City** from whence most danger of this kind generally originated, and that, by means of a **luminous system of measures**, steadily and and actively pursued, **Security** has been afforded to the **upper**, and **Relief** to the **lower orders** of the **Metropolis**.

Subscriptions will be received at the **Bank of the Right Honourable David Latouche and Co. Treasurers to the Charity**, and by any of the **Members** of the **Committee**. (1)