

skepticism gave way to an unbounded optimism which in retrospect is easy to understand. I myself saw the new tranquilizers initiate a revolutionary advance in our own hospitals as they did in mental hospitals all over the world. A long-term relentless increase of population was suddenly halted and reversed, the atmosphere in the wards became quiet and relaxed, restraints disappeared, and the open ward finally became a reality for all psychiatric institutions. Some 60 percent or more of mental hospital cases were soon on drug therapy and this is the situation currently. In the meantime, penicillin had made paresis a thing of the past; the anticonvulsants phenobarbital and diphenylhydantoin were presenting the psychiatric complications of epilepsy so well that special hospitals for this condition were disappearing while other drugs lightened the burden of mental patients by spectacular control of many infections including tuberculosis which in our patients had produced a mortality 19 times as high as it did in the general population.

Senator NELSON. You are saying that patients in mental institutions had a tuberculosis mortality 19 times higher than others?

Dr. BRILL. To put it slightly differently, the mortality for the tuberculosis in mental hospitals was 19 times as high as the tuberculosis mortality in the general population at a specific point—

Senator NELSON. What is the explanation for that?

Dr. BRILL. Poor hygiene, poor nutrition, and close contact with contagion from one to the other. At that time, in the 1930's, and before, there was no repeated screening of the population with X-ray to screen out active cases, and contagion spread like wildfire from a single focus. This has changed dramatically.

Under such conditions the general public and the medical profession was ready to believe almost any claim made for a new drug and correspondingly the demand for relief of symptoms was increased.

Senator NELSON. You mentioned a moment ago that a census of mental hospitals showed that the number of patients had dropped drastically, and I think we have had some statistics here on that. Are there any good statistics to show how many patients, who would otherwise be confined to a hospital, are in fact able to be employed? We have statistics to show that the number in hospitals dropped from 750,000 to a half million in the past 15 years, but I don't believe we have had any statistics indicating the number of patients released from the hospitals who were able subsequently to make a living or support themselves.

Dr. BRILL. You asked how good are the results of these release statistics?

Senator NELSON. Well, we know they are able to be out of the hospital, I assume, even though they continue to receive medication. How many of them are employable?

Dr. BRILL. The only large scale study of this type that I am familiar with crossed my desk only the other day. It is my recollection that it is a minority of the total number. And I will be glad to give you the figure—my recollection is, some where in the neighborhood of 40 percent, but I will give you the figure that I have.

Certainly by no means all of them.