3-28 Was admitted about 4.15 P. M. in a hysterical and excited condition. At a good supper but refused to go to bed or to comply with any request made of her. Was finally given a bath and put to bed. Dressings removed from abdominal wound which is healed perfectly. She refused to have new dressing and herefused to take anything to help her sleep. Finally quieted down and slept 9 hrs. Took a light breakfast and is again very emotional.

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Took very little nourishment and has cried and worried most of the day. Is confused, willful and in the evening dressed to go out saying she would stay no longer. Is unkempt in appearance. Refuses companionship etc. Slept 6 hrs. Bowels moved twice during the night.

In the third month of 1894, Friends Hospital admitted Helen Linsley for care. At the time, she was 24, married, and a mother to 6 children. She was a Protestant, unlike many of the patients who were Quakers. While her husband was a schoolteacher, her input papers listed her occupation as "Housewife." Her symptoms and reasons for admittance to the hospital began shortly after the birth of her sixth child. The documented form of insanity is "Melancholia Agitata," caused by the period of puerperal, now referred to as postpartum. Recent articles refer to this condition as "Mixed Depression" where the patient experiences a depressive episode with "excessive and purposeless activity." Her symptoms include the following:

Has been very excited, buys & gives extravagantly. Has become excessively fond of letter writing, before was very indifferent [to] correspondence. Is suspicious of her family, has turned against her husband & grows daily worse in these respects. Is inattentive to personal appearance, untidy, & will not properly bathe. Has threatened suicide–eats well–sleeps fairly well–mind very infeebled, judgement in [illegible] are wrong. Memory fair–Coherent.

Four weeks ago double ovariotomy performed by Dr. [illegible] to bring [illegible] change. Has recovered from operations. Results undetermined. ²

These symptoms stand out because of how unclear it is which parts are normal reactions to having a child, let alone taking care of five other children. These kinds of records can not account for the patient's relationships, it may say that she turned against her husband, but it is out of the context of what their marriage dynamics are. It is also unclear why she had the ovariotomy procedure; the fact that the results are undetermined suggests that it was not for an immediate physical health concern, but something more long-term, like restoring her mental health. It is difficult to know why the operations occurred and who advocated for them; what is clear, however, is that the patient is not satisfied. Upon admittance she is disagreeable and upset about her involuntary admission, stating she will "stay no longer." She remained intermittently depressed during her time at the hospital yet the report shows she recovered when she left.

Helen Linsley's story exists in uncertainty, as her voice and opinion are buried under what others report about her condition. As a patient who did not want to be admitted, one must consider if she wanted the ovariotomy she is recovering from while in the hospital. The expectation to bounce back immediately after giving birth, to be put together, and physically attractive while dealing with one's mental health during postpartum is ultimately unrealistic. How people deal with postpartum throughout history reflects their views and the empathy people afford women. One must consider if her presence in the home and a quick return were more valued than her wellness, as she spent three months at Friends Hospital and had little improvement.

¹"Case History of Helen C. Linsley" (Case Histories, 1899-1893), Friends Hospital records, HC.MC-1261, box 20, Haverford College Quaker Special Collections.

² Ibid.