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Scharlieb, Mary Dame, 1845-1930.

Publication/Creation

London : Williams and Norgate, 1924.

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[Frontispiece.]

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REMINISCENCES

BY

DR. MARY SCHARLIEB

C.B.E., J.P

WITH PORTRAIT FRONTISPIECE



LONDON

WILLIAMS AND NORGATE

14 HENRIETTA STREET, COVENT GARDEN, W.C. 2

1924

CHARLIE B, Dame Mary Ann
Dacombs Bird [1845-1930]

Valuable for the History
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RICHARD CLAY & SONS, LIMITED,
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O Master Workman, if Thou choose
The thing I make, the tool I use,
If all be wrought to Thy design,
And Thou transmute the Me and Mine,
The noise of saw and plane shall be
Parts in the heavenly harmony,
And all the din of working days
Reach Thee as deep and peaceful praise.

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INTRODUCTION

To write the story of one's own life means looking into "the dark backward and abysm of time," the short space of one human existence. To me it has been a delightful task, a re-living of many strenuous but happy years. I have again been in the society of valued friends who have passed behind the veil: I have recalled the beauties, the tropical glory, and the atmosphere of my old home in India: and I agree with Mrs. Flora Annie Steele that that magic country increases her hold over the affections and imaginations when she relaxes her grip of the bodily nature of her victims.

Further on I have recalled the tremendous struggle that I had when I returned to England in 1887 and took my place among those who were striving to obtain for medical women equal duties and equal privileges with their brethren. Our endeavours have been crowned with success, but it remains for those women to whom I and my colleagues are handing on the torch of life to consolidate our victory.

I have not written my story for my own sake, not even for the joy that it has brought me. I hope that my sense of my own insignificance would have

made me feel that it was foolish to add yet one more to the many Reminiscences recently published, most of which were framed in a more interesting manner and had better claims on the attention of the public. But my object is to convince medical women students and junior practitioners that a successful, happy, and useful career can be, and ought to be, the guerdon of their toil, though, inasmuch as we can never get more out of any enterprise than we put into it, they are likely to find that success and opportunities of usefulness will vary directly with the vigour that they put into their studies and the love that they bring into professional practice. It is impossible to do the maximum amount of good to one's patients if one attempts to serve their bodies only. The real success and value of medical and surgical work is in proportion to the degree with which physicians and surgeons recognise the threefold nature of those whom they desire to serve.

In writing my life I also wished to supply an answer to those who ask whether professional life is compatible with wifely and motherly duties. I know that it is. I wanted to make this clear to my readers, but exigencies of space have forced me to cut out all but the barest references to home and family.

Before saying good-bye I must tell those who read this book how deeply indebted I am to many friends for help and advice in its production. It

has been written in fragments of holidays and in the midst of professional work. It would have been more imperfect even than it is had it not been for their kind assistance and wise criticisms.

M. S.

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REMINISCENCES

CHAPTER I

EARLY LIFE AT HOME AND AT SCHOOL—MARRIAGE

THE interest of my life seems to me to be bound up with the Medical Women's Movement, but we know that the interest of a play is enhanced when we are told something of the personalities of the actors. Therefore it is my duty to furnish a short account of my life up to the time that I began to take my share in professional work.

My father, William Candler Bird, came of a Suffolk family settled since the seventeenth century at Earl Stonham, near Ipswich. My grandfather, George Bird, came to London at the beginning of the nineteenth century, and started dyeing and bleaching works at Bethnal Green, then a rural place. Unfortunately he died at the early age of forty-nine, when my father was only seventeen years of age, and there seems to have been no one to keep the business together. My grandmother was better at spending than in making or saving money. My mother's father came from a Dorsetshire family.

I was born in London in the spacious days of the

good Queen Victoria, and my mother, alas ! survived my birth by ten days only. She was a victim to that special form of sepsis known to the public as puerperal fever, an infection which neither Lord Lister nor any other scientist has even yet succeeded in banishing from our homes and hospitals.

The family tradition about my mother was that she was well endowed intellectually, but that she was chiefly valued by her family and friends for her unselfishness, devotion and sweet temper. It was said that no one had ever seen her lose her self-control. She and my father had a long engagement (I think of nearly ten years), but their married life had not lasted one year when I was born and she "passed on."

My father was a stricken man, but he bore his grief nobly, sought distraction in his work and comfort from God. I have a letter from him written to me in 1884 after I had commenced medical work in India. In this letter, after speaking of the sad circumstances of my birth, he says : "I was moved to Manchester when you were about two months old. . . . One evening as I was walking home from the warehouse I went into Trinity Church. I think if ever a father asked for his child to be spared to him, and to have health and good intellect granted to it, I did it most sincerely, and at the same time if these great blessings were vouchsafed to my child I then dedicated its life to the glory of God and the good of its fellow-creatures, not making

any stipulation of any kind, but simply asking the blessing and leaving the rest to a Higher Power. I particularly well recollect walking from the church to where I was then living, and during my walk I had a curious kind of feeling or revelation that my request would be granted. . . . Years after, your marriage followed and your transference to India, when I could not see my way at all. All at that time seemed dim and obscure, as though the thread were broken, but now I think the promise has come."

This episode was the more remarkable because my father was an old-fashioned Evangelical, and a man as little likely to be the subject of a mystical experience as it is possible to imagine.

Very shortly after my birth he had been sent by his firm, Cook, Sons, & Co., of St. Paul's Churchyard, to open a branch warehouse in Manchester. This subsequently became an independent firm (Hocken, Bird, Cole & Co.). The poor man could not be burdened with a motherless baby, and I was therefore left to the loving care of my excellent grandmother, Mrs. Dacomb.

One of her daughters, my Aunt Lily, proved to me a guide, philosopher and friend. Under her tuition I acquired the rudiments of French and Latin, and was very practically taught the meaning of capital and interest, for one day when my Aunt had no change she borrowed some money from me, and when she returned it at night she gave me an

unexpected sixpence, which was, she explained, the interest, or rent, that she was paying for the money I had lent her. She also took me with her to popular lectures on Science, and to this day I remember a lecture in which the uses of the different foodstuffs were explained. The lecturer must have been convincing, for from that time onward I faithfully ate all fats offered me instead of refusing them as I had always done hitherto. This dear Aunt evidently inoculated me with her own love of varied knowledge, for when I returned to Manchester after my six months in London I used to sit for hours rocking my small sister's cradle, and practically learning by heart Brewer's "Guide to Science" and the "Child's Guide to Knowledge."

My father would have been well contented to keep me at home under the tuition of a governess, but it was urged that neither character nor intellect could be properly developed in this manner, and I was sent to an excellent boarding school in the north of Manchester when I was about ten years of age. Here I thoroughly enjoyed my life and all my lessons with the exception of those administered by the music master : on his days I always provided three, if not four, pocket handkerchiefs, in preparation for the grand finale which nearly always consisted in much anger on the one side and abundant tears on the other. When I left school I used to practise five hours a day in the vain hope of becoming a good executant, for my father, like

the rest of his family, was intensely musical, and I wanted to be like my hero.

My first boarding school was blessed in the possession of a large garden, abounding in big trees and thick shrubs which furnished the children with plenty of hiding-places and admirably served for our favourite game of "Black Beast." In this game one child represented a fearsome animal which was supposed to be concealed in the garden, none of the rest of us knew where. This creature was liable to spring out and capture unwary members of our small community and inspired us with a half-enjoyable terror.

About this time I made my first literary essay. I had already, before I was five years old, told various tales to my stepmother, one of which—"The Marchioness of Quent"—appears across the vista of seventy years as a thrilling story. In it the heroine was represented as dying during the early days of married life and as being restored to life by the agonised kisses of her young husband! That was all very well for an infant, but at the age of ten something more sober commended itself, and I was permitted to write a portion of my story, instead of the regulation copy, every day, the bargain with my form mistress being that the handwriting at any rate should be above suspicion. "Gracie Graham" was, oddly enough, the story of a child who lived in India. It abounded in descriptions of scenery that I had never seen, of

native servants of whom I knew nothing, and of journeys by palanquin which had but little foundation in fact. I have often wondered whether the original of this precious production was ever cherished by anyone who read it. So far as the author was concerned the interest was in writing it, and when once written it was little thought of until I married, and going to India had the opportunity of testing and revising childish ideas: I then wished that I knew where the manuscript had gone.

My next educational promotion was to a school near to New Brighton and almost opposite Liverpool on the estuary of the Mersey. The grounds of the school ran right down to the water, but had no access to the river owing to the sea wall which protected the ground. Residence near New Brighton was undoubtedly desirable both from the point of view of health and also as an introduction to the love of crabs, jelly fishes, sea anemones, seaweeds and zoophytes. The younger of the two ladies who kept the school was exceptionally well qualified to direct our affections into the study of natural history. Under her guidance some of us made really good collections of the beautiful seaweeds and zoophytes that we found in abundance on the sands and in the rocky pools. We used to float the seaweeds out in sea water on thick sheets of fairly porous paper, on which we were able by means of large pins or needles to display their loveliness of

form, and to preserve, more or less successfully, the beauty of their colour. My collection was finally bound in an album and formed one of my wedding gifts to the Aunt Lily to whose inspiration I owe so much.

One more educational change awaited me; my wise stepmother was far from satisfied with the teaching at my seaside school. She had made up her mind that, wealthy though my father was, all life and all prosperity were uncertain, those of a Manchester merchant being unusually precarious. She was therefore determined that I should have such an education as would enable me to earn my own living in some calling less dependent than that of the ordinary governess. She must have been wise and understanding beyond her times, and she must have been blessed with some sort of a vision of the wonderful era of emancipation and progress that was even then dawning for Englishwomen. This time her venture on my behalf was thoroughly successful, for Mrs. Tyndall's school, at 16 Upper Hamilton Terrace, St. John's Wood, did not need to fear comparison with the best schools of the present day. Mrs. Tyndall was the beautiful and gifted widow of an Irish clergyman who had died during one of the visitations of typhus and famine that devastated Ireland about the middle of the nineteenth century. She was thorough, enthusiastic, and yet well balanced. She was assisted in the school by her daughters Grace and Bella, young

women who had inherited much of their mother's grace and charm. Mrs. Tyndall was also fortunate in her selection of resident governesses and of visiting professors. Under the enthusiastic but somewhat sarcastic teaching of Madame Hedler we could not fail to acquire admiration for the German language and literature, and I, at least, found myself compelled to work hard at this subject because she selected me as her understudy to help on certain backward members of our class. Herr Reiner, the Science master, was equally an enthusiast; his lectures were admirable, and his corrections of our reproductions of his teaching were searching and beneficial. Mr. Graham, our English literature master, not only saw to it that we had at least a bowing acquaintance with the best masters of our language, but also exacted from us a weekly essay in the appraisement of which he laid great stress on short sentences and a scanty use of commas. He was painstaking and conscientious, and I am conscious that I owe much to him, but he dwelt too much on the Olympian heights to be able to kindle the enthusiasm of his pupils.

Besides these three outstanding worthies many other professors visited the school, but to my great joy my musical studies were now confided to my much-loved cousin, Mr. Henry Bird. He was a musician indeed, who from his infancy attempted to express himself both on piano and organ, and who at the age of seven years was appointed organist to

a small church—St. John's—a chapel of ease to the parish church of Walthamstow. When he was about ten years old his master, Dr. Turle, organist of Westminster Abbey and also of the Chapel Royal at Windsor, took the boy down with him for an evening service. The Queen and Prince Consort were present. Dr. Turle played the opening voluntary and then told my cousin that he was going down into the body of the Chapel to listen to him conducting the musical part of the service. This was a great surprise and fright for a young and very sensitive boy, but Dr. Turle was firm, and left him to his fate, to which he fortunately proved himself equal.

After three very happy years I left Mrs. Tyndall's school and returned home in time to welcome the advent of my younger brother, in whose infant welfare I was soon profoundly interested. Shortly after this my stepmother became dissatisfied with the lady who was governess to my three little sisters and I was appointed her successor. This work together with the continuation of my own education under masters, attendance at lectures, visits to the excellent Manchester Museum, and last but not least many concerts and oratorios, for pre-eminence in which Manchester even at that time was famous, filled up my time and secured my happiness. The one element of my new life that I did not like was the various dances and parties that naturally fell to my share. Games for girls

were not then organised, and I do not think that I should have been good at them had I had the opportunity; riding lessons were more in my line, and were useful to me when I went to India, where the early morning ride is one of the best means of maintaining health.

Shortly after I returned home a Confirmation was held. The rector of St. Paul's, Kersal, in whose parish we lived, had classes for young women. I attended them and greatly enjoyed the good man's scholarly comments on the Epistles. There was, however, nothing distinctively doctrinal in his teaching, there was no appeal to the individual soul, and no attempt to set before us the momentous nature of the rite for which we were supposed to be preparing. Our rector was a good, a learned, and a very eloquent man, but in those days what we should now regard as insufficient stress was laid on the application of the mysteries of our faith to our daily life.

The four years spent in my father's house passed all too quickly, and before I was twenty I had met my life's partner and had felt that he was the one and only man in the world for me. At the time that I first met Mr. Scharlieb he was engaged in "eating his dinners" at the Middle Temple, preparatory to his "call to the Bar" and subsequent practice in Madras as a barrister. Mr. Scharlieb was accompanied to England by Mr. Herbert Church of the Madras railway. They were great

friends and close connections, for my husband's elder sister was married to Herbert Church's brother, Fitzgerald, the Chief Auditor of the Madras railway. It happened that the brothers Church were lifelong friends and old fellow-workers with Mr. Underdown, my uncle by marriage. Mr. Church and Mr. Scharlieb were due to pay him a short visit on their way from London to Scotland. On the day of their proposed visit, too late to put them off, Mrs. Underdown was taken ill and my mother had to entertain them in her stead. Thus it came to pass that I met my future husband, William Scharlieb, and also one of the best friends I ever had, Herbert Church. Long afterwards, in comparing notes with my husband, I found that the attraction had been mutual, and that with both of us it was an old-fashioned case of love at first sight. Naturally nothing was said during this brief visit, but when Mr. Scharlieb returned to Manchester at my stepmother's invitation after his visit to Scotland, a certain degree of mutual understanding came about, and when he came again at Christmas there was sufficient attention offered on the one side and accepted on the other to justify my stepmother in calling me into her room for a private talk and asking me what it all meant. I told her there was no engagement, but that if an offer were made I intended to accept it. She very wisely pointed out that I was acting in the dark, that beyond the fact of his relationship to our

friends, the Churches, we knew nothing of the young man's family and prospects; that he was not even a practising barrister, but only a law student; and that if I married him and went with him to India, where he intended to work, I should choose a life of exile and one of isolation from family and friends, therefore such a marriage was one of which neither she nor my father could approve, much as they liked Mr. Scharlieb personally. Some weeks of anxiety and perturbation of mind followed for me; on the one hand, I admired and loved the man who evidently loved me; on the other, I dreaded separation from my country, my family and my friends. I ought also to have feared the climate of India—heat had never suited me. I was not particularly strong, and in those days communication between India and England was much less easy and rapid than it has since become, and visits home were practicable only at long intervals of time.

However, the year 1865 was destined to be a momentous one for me. In the second week of February arrived the formal proposal, which of course I showed to my father and stepmother. The latter had much to say, much good advice, clearly and forcibly expressed! My father simply said: "I cannot part with you; I will not have you go to India." Mrs. Underdown, my beloved Aunt Lily, was very emphatic in her disapproval, in fact it was a case of universal disapprobation by

my little world. However, the letter had to be answered, and this was permitted after I had assured my father that although I would never marry against his wishes I would never marry anyone but Mr. Scharlieb. No doubt the overruling of Providence marking me out for the work I had to do finally led to a somewhat unwilling permission on his part, and I wrote what I believe was the oddest letter of acceptance that any lover ever received :

“DEAR MR. SCHARLIEB,

“I have received your letter and thank you for it. I believe that I am as honest in accepting as you are in proffering your love.

“Yours sincerely,

“MARY BIRD.”

This letter might well have been considered inadequate, but on February 14th my stepmother and I went up to London and the engagement was ratified and announced.

My father's final stipulation was that I should not marry until my future husband had been called to the Bar, and this could not be until November 1865. There was plenty of opportunity during the year for us all to become better acquainted, there were frequent visits between Manchester and London, and a very happy time in Cornwall with the Churches and their connections, the Taylors.

On November 17th, 1865, my *fiancé* was called

to the Bar and my father duly attended his "call night dinner." The conditions for our marriage were now fulfilled and all was arranged for December 19th. I think we solved the problem of a winter wedding very happily, and that the bridesmaids' costumes were charming. They wore white silk dresses trimmed with swans' down, and relieved with snowdrops and holly. The service was taken by our rector and the Rev. George Lemon Church, a connection of my husband's, from Chacewater, Cornwall. These two good men were so anxious for our welfare that they both pronounced the blessing! By good fortune my cousin, Mr. Henry Bird, was able to come to Manchester for the occasion and arranged the musical part of the service beautifully.

My husband and I went to the Lakes for the first instalment of our honeymoon and found them wonderful in their winter dress of snow and ice. It had been arranged that we should return to my father's house in time for Christmas, but it never occurred to any of us that the Christmas season would cause a variation in the train service. Luckily we remembered this just in time, and by driving to Preston we were able to catch a train from the North to Manchester. We arrived home on Christmas Eve (Sunday) in time for a very late supper. Naturally our welcome was warm and there was much jubilation that we had managed to get back in time for Christmas Day. Curiously enough,

I immediately recognised that, although home was still home in a sense, and although as much love and kindliness as ever awaited me there, my own point of view was changed, and that like Ruth in the Scriptures my feeling towards my husband was "where thou goest I will go, where thou lodgest I will lodge, thy people shall be my people, and thy God my God. The Lord do so to me and more also if ought but death part thee and me."

Christmas Day was much the same as it was in most English homes at that period, but my stepmother had warned the young people that there would be no Christmas tree, for which she said I was the substitute. During the ensuing week there was a kaleidoscopic jumble of dinners, receptions, farewells, and final packings, all inducing a tremendous sense of fatigue and bewilderment which culminated in a hurried visit to London and farewells to friends there. The last stage of this distressing time was the journey from London to Folkestone. My husband and stepmother talked vigorously and gallantly, they did their best to hide their emotions and to help my father and me to conceal ours; still taciturnity prevailed, and it was not a gay little party that made a pretence of a farewell meal. It was a relief when the time came to go on board. My father resolutely adhered to his original plan, which was that he would accompany us to the last inch of English soil but would not go

with us to Paris. I regretted his decision, for long after the steamer had started on her journey we could see the two figures on the pier and we felt how impossible it was to turn our faces to the future while these dear links with the past were still discernible.

CHAPTER II

LIFE IN INDIA

WE arrived in Madras and with much diligence got our possessions together, sure that some of the members of my husband's family would soon be on board. However, no one came, and eventually, when the steamer was leaving for Calcutta, we had to disembark. In those days passengers were conveyed to the land in a large open boat known as "a surf boat." In its construction no nails are used, the planks are sewn together with string made of cocoa-nut fibre, the theory being that if nails were used the violence of the surf would so impair their hold on the wood that the boat would fall to pieces. These boats are propelled by means of paddles plied by natives. Madras boatmen are very experienced and skilful, and the sort of landing that a new-comer makes depends almost entirely on their opinion of the passenger's probable liberality. If they expect a good tip in addition to their lawful hire the boat will be skilfully guided through the great rollers, and when she is safely beached the passengers are carried in the arms of their boatmen unwetted to land. If, however, passengers are abusive, disagreeable, or thought

likely to be stingy, the *syrang*, or head boatman, sees to it that they have their fair share of salt water. In our case the boatmen were pleased to approve of my husband's appearance and we were both carried safe and dry to the sandy shore. By this time the sun was high, and as neither friend nor carriage was forthcoming my husband installed me on the verandah of the Stamp Office while he went to look for a conveyance. After a time he returned with a man whom he introduced to me as his cousin, Dick Ross. This cousin was the bearer of bad news—my husband's eldest sister, the wife of Fitzgerald Church, had long been ailing and had suddenly become very seriously ill. This accounted for the fact that no one had come to the beach to meet us. Mr. Ross placed his carriage at our disposal and we drove straight to Perambore, where Mr. Church lived. On my way to the house I was able to correct my impressions as to the appearance of Madras. I had imagined that it was treeless, sandy and desert. On the contrary its real appearance was more or less that of an enormous forest of cocoa-nut trees with clearings here and there for houses and gardens. Mr. Church's house was a long low bungalow surrounded by a really beautiful garden; he was a keen gardener and spared no trouble on his flowers. We found the household in great grief and the invalid manifestly approaching her end, nevertheless she was the one person who retained any apparent remembrance of

present circumstances, for she was the only one who verbally welcomed her brother and his bride to India. Two days later Eliza Church died, leaving a broken-hearted widower and two small motherless girls. This sad event threw a great gloom over the first months of my life in India, but my husband's mother, a most charming and dignified old lady, did all she could to make me happy, and succeeded, for I was not a girl whose happiness depended on parties and gaieties.

Our first home in India was close to the Spur Tank, a large artificial lake intended for irrigation purposes, which greatly increased the beauties of the neighbourhood. During the hot season a considerable area of the bed of the tank was dry and afforded a pleasant promenade, but there was always water in that portion which corresponded with the rowel of the spur. In the dry bed of the tank grew many wild flowers, among them the little germander speedwell, well known to English children under the name of "Angels' Eyes." It was a lovely reminder of my old home. Our house was a one-storeyed bungalow with a sleeping-room on the roof; it was pretty and convenient, set in a large garden, but unfortunately it was terribly haunted by mosquitoes. It had been furnished with loving care ready for our reception and contained many presents from those of my husband's relations and friends who lived in Madras. Among these one that appealed greatly to me was a charming rosewood

writing-table, the little drawers of which were made of satin wood; this was given by Herbert Church, and a particularly beautiful dinner service was from Fitzgerald.

Life soon fell into a daily routine which was pleasant enough in itself and fairly typical of the lives of thousands of Englishwomen at that time domiciled in India. A hasty cup of coffee at 5 or 5.30 a.m., and then a most adventurous drive, for the training of a half-broken pair of ponies provided sufficient excitement to last the day! My husband was an excellent whip, but in spite of this we were frequently upset or half upset into the broad ditches that lined both sides of the roads. After the upset there always ensued much plunging and struggling on the part of the ponies, objurgations and excitement from the horsekeepers and my husband, and a certain amount of internal fright disguised by external decorum on my part. No very disastrous consequences ever happened, and the ponies never had their own way; they were always re-harnessed and had to finish the projected drive no matter what their tempers.

The trials and temptations of daily life fall with great severity on the nervous and half-broken animals that it pleases good horsemen to ride and drive in India. Coolies who suddenly throw their burdens at the feet of the animals, drivers of *judkas* and other native vehicles who stimulate their own ponies by rattling a long stick against the wheels,

and perhaps worst of all the heart-rending creak and scream of oil mills. These incidents contribute much to local colour, to the variety of life and also to its perils. One morning's drive nearly brought all things to an end so far as we were concerned; my husband was driving a much-cherished grey Arab, who like others of his race had no vice, but who had perhaps too keen a consciousness of things going on around him. On this occasion it was an oil mill that upset his nerves: he shied, and then broke into a wild gallop. As his fright continued long and showed no signs of diminution my husband asked me whether he should turn the horse's head against the wall of the Madras Club that we were rapidly approaching—this would probably have stunned or killed the animal and would have shaken our light phaeton to pieces. I thought, however, that as we were still able to keep the road we would go on. The creature quieted down just as we reached Perambore, some three miles distant from the place where he first took fright. When my husband got down he went to the horse's head to speak reassuring words and to examine the reins; he then found that one of them was holding by a thread of leather only!

One of the events of the Indian day was the departure of the master of the house for his office: he took with him what is known as a "tiffin basket," an object larger than the tea-basket that contents a whole family here at home. This basket was well

filled with a two- or three-course luncheon. After this came the time for the inspection of the fresh stores brought daily from the market, the weighing-out of groceries, horses' food, and other articles from the store-room, and the writing down of the cook's and butler's accounts. These accounts were generally quaint, and—as Mr. Justice Holloway said of Appeal Cases from the Malabar coast—"they always smelt of fraud." This they certainly did, and the process of taking down the items strongly resembled the bargaining that goes on between tourists and the vendors of curios in Italy. For instance, the cook might price a capon at the equivalent of about 2*s.* 2*d.*; the mistress would exclaim in horror :

"Oh no, such a small capon, it is only worth 1*s.* 6*d.*"

"No, missus, truly did give 2*s.*"

"Well, cook, I did not think you were so stupid; you have let that bazaar man cheat you."

"Oh, missus, I very clever boy, bazaar man he asking plenty too much money, I only giving 1*s.* 9*d.*"

When some approximation was made to the probable price, the item was passed. Fortunately for the young and inexperienced mistress the daily papers frequently published an average tariff of prices by means of which she was saved from over-liberality on the one hand and the danger of grinding the faces of the poor on the other.

Occasionally other sources of amusement

appeared in the taking of the daily accounts; for example, one day my butler presented me his written account in which appeared the item "worm jelly." To this I demurred:

"Worm jelly, boy? We did not have *any* jelly yesterday."

"No, missus, worm jelly did have."

"Some mistake, boy. No jelly."

"Yes, missus, missus thinking properly, she remember little, little things like worms, putting into soup."

Then the solution flashed on my mind: the charge was for *vermicelli*!

Occasionally conscious and deliberate fraud tainted the daily reckonings. Two brothers, Leander and John Miller, great friends of ours, were living *en garçon* while John's wife was away in England. One day when he was away at the court, doing his work as a barrister, his brother entertained an unexpected lady guest and her little daughter to tea. His boy, or private servant, with the ready kindness usual in Indian servants, rushed out and procured a cake and pot of jam from the bazaar. The next day these items appeared in his master's account, and they also appeared in the account rendered by his own servant to the absent younger brother. Whatever Mr. John Miller may have thought, he did not question the charge, but the *dénouement* came when the butler of the establishment included the price of the cake and pot of jam

in the joint household expenditure ! Then the brothers found that it had been hoped that they would each pay separately, and both of them jointly, for the entertainment of the guests !

After the household accounts were settled there succeeded a certain amount of private arithmetic, for my husband was very particular that our accounts should be strictly and regularly kept. I did the keeping and he did the auditing—a very good training for me.

Letters home absorbed a considerable amount of time. My people expected, and received, voluminous diaries intended for the family in general, and personal letters *ad libitum*. In those days the mails to and from India were fortnightly, and letters could be sent *via* Marseilles for ninepence an ounce and *via* Southampton for sixpence. I had always plenty to say : I was young and eager, my circumstances were new to me, full of the most vivid interest, and I had a considerable amount of time to spend as I liked. I did my best to keep up languages and mathematics, feeling that it would be wrong to waste through disuse the powers for the cultivation of which my stepmother had fought so successful a battle, and the balance of my time was spent on diaries and letters for my home people.

Tiffin in my case was a simple procedure, but it afforded me a certain amount of opportunity of improving my knowledge of Tamil, the chief

vernacular of Madras. Madras servants are renowned for their adequate, although imperfect and very bizarre, knowledge of colloquial English, but it is essential that the mistress should be able to understand and to speak the vernacular.

About 5 o'clock I started for my husband's office and sometimes had to wait a considerable time for him to finish the work of the day. When my husband came we drove to the bandstand, where all Madras collected to listen to the music that was provided for them by the Governor's band, or by the band of the regiment in Fort St. George, on six nights out of the seven. The carriages were drawn up all round the bandstand, many people got out and went to stand by, or sit in, their friends' carriages, thus promoting good feeling and the solidarity which characterised the European families exiled in India. An excellent road extended from the bandstand southward along the seashore to the village of San Thomé about five miles distant. This road and its footpath afforded good exercise for riders, drivers, and pedestrians, it enjoyed the full vigour of the sea breeze, and was an undoubted means of health to the European population. Eight p.m. brought dinner and gun-fire. There was no excuse for irregularities on the parts of clocks and watches in Madras, for the gun afforded them chances of correction at 6 in the morning and 8 in the evening daily. The gun also informed us of the arrival and departure of our

mails, two reports, at a short interval, representing Sǔ-ěz, informed us that in an hour or two we should get our longed-for home letters, while three reports unevenly divided, representing Cāl-cüttă, warned us that people who had not completed their homeward mail must finish in haste and despatch their letters by hand to the beach.

At the end of that year, 1866, my first child was born. By this time we had moved from the neighbourhood of the Spur Tank to a delightful house at San Thomé called Leyland's Gardens. The house had three storeys : the lower part of it lent itself very well to my husband's work as a barrister, it was convenient for the reception of his clients and for the storing of his library. The second floor was admirably cool, with a good view of the sea, and plenty of protection from the sun by deep verandahs back and front. The central part, dining- and drawing-rooms, was common property. The wing on the south of it was occupied by my husband's mother and widowed sister, Mrs. Gordon, while the northern wing was inhabited by my husband and me. The third storey, which was only over the central part of the building, was assigned to Mr. Church.

This joint *ménage* was advantageous because my husband's mother wished to live with her much-loved son, and yet not to part from Mr. Church and his motherless girls, and there was also the fact that the house was too large for one private family and was so

constructed that two or even three households could occupy it jointly without getting too much in each other's way.

The next problem that presented itself was : Who should keep house ? This was solved by my being in charge from the 1st to the 15th of each month, and Mary Gordon from the 15th to the end. This joint management lasted for several years, we never had a cross word between us, and if any question arose it was immediately referred to the old lady, whose decision, apparently, never failed to give complete satisfaction. Old Mrs. Scharlieb was a remarkable woman, tall and strong, with the remains of considerable good looks : she was a clever woman and an excellent housekeeper. The family legend ran that in her youth her temper had been fiery, but by the time I knew her the experience of life and a good practical Christianity had made her as sweet and lovable as she was clear-headed and just.

Shortly before the birth of my second boy our delightful old house on the beach was given up, and the women and children of the community went to live in Bangalore for six months while my husband and Mr. Church found bachelor quarters in Madras. A move to a cooler climate and different surroundings seemed absolutely necessary for the maintenance of my health, and even so my second child weighed only six pounds at birth against his brother's eleven.

When we returned to Madras we took a house at San Thomé, and I was soon busy helping my husband in his law work, and more especially in the production of two Law Journals, the *Madras Jurist* and the *Madras Revenue Register*, which appeared on the 1st and the 15th of the month respectively. My share of the work consisted in the collection of materials, writing précis and notes of law cases reported, encouraging correspondence, and occasionally in the contribution of articles. Finally I corrected the proofs and got the two publications ready for press. This together with household management and the constant supervision of the children, the making of their clothes and the care of my own wardrobe pretty well filled the days.

CHAPTER III

MEDICAL TRAINING IN INDIA—AND INTERESTING FRIENDS IN ENGLAND

IN 1871 I began the study of Midwifery. It had fallen to my lot to review Sir Joseph Fayrer's magnificent work on "Medical Jurisprudence" for the *Madras Jurist*, and this aroused my interest in medicine. I also frequently heard through my husband's native clients, from his Brahmin clerk, and from our servants, of the great and unnecessary suffering of the women of the country, Hindu as well as Mahommedan, in sickness and in childbirth. Among these stories was one that could not fail to make a strong appeal to anyone's pity and charity. A very young Mahommedan lady, a child herself, had a difficult and extremely painful labour. Her husband, although a strict Mahommedan and jealously observant of *purdah* rules, was finally so affected that he sent to a European surgeon to come to try to save her life. The poor girl dragged herself to the door of her room and lay down against it so that it could not be opened from without except by brutally crushing her body. Her women probably approved of her action and certainly did not dare to touch her, and there she lay

until death ended her sufferings. It seemed to me that some European women ought to qualify themselves to render help in such cases. My doctor lent me a copy of Churchill's "Midwifery" to study, and later on the still more interesting volume of Ramsbotham on the same subject. This latter book was adorned with beautiful steel engravings which not only conveyed scientific truths, but also made a powerful appeal to the imagination and to the æsthetic sense. Finally the conviction was forced on me that a theoretical knowledge of midwifery would never help anyone, and through my friend, Dr. John Shortt, I got an introduction to Surgeon-General Balfour, the supreme head of the Medical Service in Madras.

Dr. John Shortt was a gifted man who possessed a remarkable personality. He was an East Indian, and when in the subordinate ranks of the Indian medical service he was able to save the life of a young officer of good family and much wealth. This young man was very grateful, and when he recovered from his attack of cholera he told young Shortt that he would give him anything he asked for. The young man asked to be sent home to obtain a good degree, and with it admission to the upper ranks of the service. This was willingly promised, but it was felt that his great service was not yet adequately acknowledged. Therefore Mr. Shortt asked for a similar chance to be given to a young friend of his. The two men were sent

to Edinburgh and maintained there until they obtained the M.D., Edin. Then they returned to Madras, and Dr. Shortt at any rate had a long and distinguished career. When I knew him he was Superintendent-General of Vaccination, and, as an amusement, was enthusiastically investigating Cobra poison and its antidotes. At one time Dr. Shortt wished to insure his life, but the Insurance Company objected. They felt that no enhancement of premium could cover their risk in dealing with such a man. He considered the matter and finally assured the Company that he had made all the necessary investigations and would not incur any further risks from snake-bite. The Company, however, knew their man, and therefore demanded to know what other work he was likely to undertake, and when he said cheerfully that Hydrophobia came next on his list, he was informed that they would never be able to see their way to make out a Policy of Insurance for him !

Dr. Shortt was a valuable friend to me and both gave me useful introductions and lent me anatomical diagrams and medical books.

I explained my views and desires as to the medical education of women to Dr. Balfour. He most kindly offered to take me to the Lying-in Hospital and to commend me to the practical teaching of its Superintendent, Surgeon-Major Cockerill. Dr. Cockerill was a tall, thin man, with Dundreary whiskers, and a general air of

finding the climate and the work too much for him. He listened to the Surgeon-General and to me, but was not in the least convinced that my prayer should be granted. He told me that I did not know what I was asking for, that the work was not suitable for an English lady, that it involved much unpleasantness and dirt, and that it was such as he would not permit his wife to undertake. I replied that whether I should like it or not was for me to judge, that my clothes would wash, and that soap and water plus carbolic acid would secure cleanliness. His next objection was that my husband could not possibly approve of my training as a midwife, to which I replied that if he had not approved I could not have been there. Finally he asked whether if he accepted me as a pupil I would be ready to attend *any* case assigned to me, and to keep the rules of the institution. To this of course I gladly assented. Then he invited me to accompany him to a thatched shed in the hospital compound. At the other end of this shed lay a woman quite unconscious and swollen beyond all recognition. I did not know what was the matter with her, and in my ignorance thought it might be a very terrible case of leprosy, but Dr. Cockerill asked me whether I would attend her, and when I, of course, said that I was willing to do so he explained that it was the worst case of confluent smallpox he had ever seen, and asked whether I would attend her in the face of that assertion. What could I do but still consent?

When we left the shed the Surgeon-General asked me how I had dared to accept such a charge. I told him that I had been revaccinated the week before, and further, that I was quite certain that Dr. Cockerill would not give me such a case for my first. As a matter of fact there was no chance of this, for the poor woman died within twenty-four hours of my visit to the hospital.

The arrangement we finally came to was that I should be on duty at the hospital from 6 a.m. to 6 p.m., which would suit Dr. Cockerill's requirements and satisfy my husband's stipulation that I should return home for dinner and remain the night.

Dr. Cockerill became a great friend to my husband and me and proved a fine raconteur. One story was that when he was a medical student he and some friends hired a drag and four horses and drove down to the "Star and Garter" at Richmond. There they dined. When the time came to drive back no one was very fit nor very eager to be Jehu. Finally young Cockerill was voted to the box as being the least unfit. Somewhere on the road he got so mixed up that he let the leaders go one side of a standard lamp-post and the wheelers the other side. The result was a general smash. When he extricated himself he heard a policeman asking, "Who was driving?" A publican standing in the doorway of his inn replied, "No one wasn't a-driving—that there long chap was a-holding of the reins."

The old Lying-in Hospital in Madras was a low

rambling building, a part of which was reserved for European and East Indian women, but much the larger part of which was for the service of low caste women and such Mahommedans as did not object to being attended by men. The Superintendent, Dr. Cockerill, visited it every morning from 6.30 to 9.30 or 10 a.m. He went round the wards, saw the gynæcological patients, visited the various sheds in which were special cases, and occasionally lectured to the midwifery pupils. Under him were two "apothecaries"—officers whose duties corresponded with those of house-surgeons or obstetric assistants at an English hospital. They both went round with the Superintendent in the morning, and each had stated hours of duty during the day and night. I soon came to the conclusion that the most important person with whom I should have to do was Mrs. Secluna, the matron. In spite of her Spanish name she was English by birth, a big, fair woman, who had had fifteen children herself, and was one of the most skilful midwives and most kindly people that I ever had the good luck to meet. She, at any rate, approved of my desire to learn practical midwifery; she kept me by her all the day, made me share in the instructions she gave to her nurses and pupils, and supervised my first attempts at acquiring the art as well as the science of obstetrics.

In spite of his official disapprobation of my action Surgeon-Major Cockerill had a little leaf pavilion

built for me in the compound. This I furnished with a folding chair and small table; there I wrote my notes of cases, and there I had the milk and roll provided for me by Mrs. Secluna.

I found the work extremely interesting. The patients were courageous and pathetic in their troubles, and I was soon good friends with the senior apothecary, Mr. Robert Falconer, who subsequently took the M.D. degree of Edinburgh, and made a deservedly great reputation and practice for himself in Madras. I remained at the hospital about a year, and very narrowly missed paying for my tuition with my life. One day there was an especially difficult and septic case which had been badly neglected outside and had come into the hospital probably to die. The only available officer at the moment was Mrs. Secluna, and she, poor soul, was suddenly attacked by gall-stone colic: she sent for me and asked whether I could do what was necessary. I thought I could, and accepted the responsibility, but my devout faith in carbolic as an efficient antiseptic did not suffice to prevent me from a severe attack of erysipelas due to the absorption of septic material through my hands—this was before the days of india-rubber gloves. Of course I was off duty for some time and when I finally returned to the hospital I was thankful to find that, contrary to all expectation, my patient had survived and had returned home well.

Towards the end of my year of training at the Lying-in Hospital I became conscious of two things : first, that a knowledge of midwifery and of diseases of women would not suffice to make me a really useful medical adviser to Hindu and Mahommedan women. To do all that I wanted to do for them an adequate knowledge of general medicine and surgery was also necessary. Secondly, I found that as I had not been *resident* at the hospital I could not receive a diploma as a trained midwife. The idea immediately occurred to me that the best thing to do was to return home and join in the agitation for the training and qualification of medical women in which Miss Jex-Blake, Mrs. Garrett Anderson, and others were the protagonists. Family circumstances, and especially my husband's unwillingness to part with me, made this plan impracticable for the time being, but I was so fortunate as to enlist the sympathies of the Governor of Madras, Lord Hobart, and of Surgeon-General Balfour, in a scheme for the provision of medical women for the service of Caste and Gosha ladies. Of course there were the usual preliminary difficulties and delays, but finally the roll of students at the Madras Medical College for the winter session, 1875, contained the names of four women, of whom I was one.

Medical studies were made possible for me partly by my husband's great interest in the matter, his insight into the needs of the native women of India,

and his generous wish that I should fulfil what I believed to be part of my mission in life. Furthermore, my young sister Kate came out to live with us and she was able to assist me greatly in the matter of housekeeping, and in the care of my three children. My sister was only a young girl, but she had had an excellent education and was possessed of a firmness of character and a degree of *savoir-faire* that many older women might have envied. She was tremendously interested by the life in India, and was charmed to have the opportunity of riding and driving and attending such social functions as we enjoyed. Between her and my very trustworthy and experienced European nurse, Mrs. Cunningham, the children were well cared for, and after all I was able to keep my hands on the reins of domestic government since I slept at home and retained the supreme command myself. Kate came out to me in 1873 and about two years later my father, stepmother, and their family joined us. My father had fallen on evil days: he had been the senior partner of a big firm of Manchester merchants, but owing to commercial troubles they had become bankrupt, and although the creditors received the full amount of what was due to them my father was ruined. He had cast all that he possessed, and not only his share in the property of the firm, into the fund that was to satisfy the creditors. He was by this time too old to start afresh, and my husband invited him to come to us and to bring his family

with him. From the first it was quite evident that my father at any rate could not stand the climate of Madras, therefore my husband bought a very nice house with plenty of ground at Ootacamund on the lower slopes of Dodabetta, the highest peak (approximately 10,000 feet) of the Neilgherry range. The house, which was called "Woodbourne," was a long, low building of one storey only, the dining-room and drawing-room formed the centre of the house and opened into verandahs front and back, the front verandah was glassed in and with suitable curtains and furniture made a pleasant lounge and smoking-room. The back verandah, with store-rooms on either side, was given over to the servants and domestic requirements. On either side of these central rooms there were two sets of rooms, each consisting of two bedrooms, dressing-rooms and bathrooms. One side was reserved for my father and stepmother, and the other for my husband, myself and our children.

By this time a serious question had arisen as to what should be done about the children. It was very desirable that they should enjoy a better climate than that of Madras, and that the boys should go to school. The settling of my parents at Ootacamund seemed to us to supply a temporary solution to this problem. My husband and I thought that for the two or three years that I should be engaged in medical studies in Madras the three young people could quite well find a home in the

“sweet half-English Neilgherry air,” under the kindly care of my father and stepmother. This arrangement postponed the evil day when I should have to take the children home and so break up our home life.

So far as they were concerned the change from Madras to Ootacamund was an almost unmixed blessing. The climate of the beautiful Neilgherry hills is perfection, and the boys were all the better for school life and discipline. The one drawback was that for a part of the year they were deprived of their own parents' care, and that perhaps my stepmother's rule over them was rather too much in the spirit of the Old Testament. However, my husband, who was now Assistant Secretary to the Government Legislative Department, went up with the Government every year in March or April and was with them for at least six months, and I joined the party during the long vacation of the Medical College, which was of rather more than two months' duration. Thanks to these arrangements I was able, with a fairly contented mind, to devote myself to my medical studies, and these were providentially made quite practicable.

The Government of Madras was by this time thoroughly convinced of the usefulness of properly qualified women practitioners in a country where the great mass of women dislike treatment by men doctors, and where the upper ranks of the female population, both Mahommedan and Hindu, were

absolutely debarred by their conventions, or their religion, from profiting by such assistance. The arrangements for the medical education of women students were therefore conceived in a generous spirit. We were to pay no fees, our text-books were given to us, and a comfortable room at the Medical College was assigned to our use. So far as lectures went we shared in the instruction given to the large body of young men who were attested students preparing to be Assistant Surgeons and Sub-assistant Surgeons in military and in civil employ under Government. Practical midwifery we were to learn at the Lying-in Hospital, and other clinical work was to be done by us at the Women's Hospital under the medical superintendence of Surgeon A. M. Branfoot, M.D., Lond., whereas the young men took their clinical surgery and medicine at the great General Hospital at Madras, which was close to the Medical College.

The first morning that we joined the Women's Hospital Dr. Branfoot expressed himself with the utmost clearness as to the undesirability and folly of educating women to be doctors. He told us that the Government had sent us to him, and that as a Government servant he could not prevent us from walking round the wards, but that he was firmly determined that he would not teach us! I very respectfully suggested that he could not help himself, and that if we were willing pupils and carefully observant of his methods of examination

and of treatment we should do very well. My prophecy was justified by the result. No doubt the very kindly and able little gentleman soon repented of his unfavourable reception of four eager students: we got plenty of excellent practice in his wards, and when after the lapse of some months I told him that I intended to come home to take the M.B., B.S., of the London University, he said he would do all in his power to secure for me admission as a student to the General Hospital, which had a much wider field of clinical usefulness and the teaching arrangements of which were sufficient to satisfy the requirements of the University of London. My three women colleagues remained at the Women's Hospital and I went alone to share in the clinical work of my male fellow-students. I ought to say at once that none of us ever met with the slightest discourtesy or difficulty either at college or at hospital, and that when our curriculum was finished and we had obtained the diploma of the college, the Principal (Dr. M. C. Furnell) told me that the coming of the women had been a great advantage to the men, for our companionship had sweetened their manners, and our eagerness to learn had been a useful stimulus.

Life in those days was somewhat strenuous. I had to be at the hospital by 6 a.m. and spent the first half-hour or so in writing my notes of cases: then the students were distributed throughout the wards, working as dressers and clerks. On

the surgical side the presiding genius was my old friend, Surgeon-Major Cockerill, under whose very able and sympathetic guidance I developed a real love for surgery and much admiration for the results of the combined courage and knowledge of which I saw so much. On the medical side we were under the tuition of Surgeon-Major Furnell, a most charming and delightful physician. He was full of experience and knowledge, very kind to his patients, considerate to his subordinates, and always ready to teach and to help his students. No words could possibly express the debt that I owe to these two good men, who have long ago gone to their reward.

At the Lying-in Hospital Surgeon-Major Harris had taken Dr. Cockerill's place. He was a scientific obstetrician and an excellent teacher. The affairs of the hospital went very well, but Dr. Harris always felt that the buildings and equipment were inadequate and he was very keen to move the hospital to a new site and to more modern buildings better furnished in all respects. For some time this scheme made little apparent advance, but the occurrence of several deaths from puerperal septicæmia probably induced the Government of Madras to accede to his desires, and after a time a very up-to-date Lying-in Hospital was erected on a better site. At this new hospital it was possible to set apart a ward for Caste and Gosha women, and another for an isolation ward to which cases could be moved should symptoms of sepsis arise,

This arrangement went far to relieve the authorities of the hospital of the constant and unnecessary anxieties they had had to bear in the old hospital, which must have been thoroughly insanitary.

My fellow-students were Miss Dora White, who subsequently passed an entirely successful qualifying examination and obtained a good appointment under the Government of the Nizam of Hyderabad. She was an exceptionally able woman and had a distinguished and useful career.

Miss D'Abreu was a quiet, shy young woman, a good worker and one who was called to devote herself to Medical Mission work. She more than fulfilled the promise of her student days.

The fourth member of our little band of pioneers was Miss Mitchell. She qualified with the other three, but gave up medical work when she married soon after qualification.

At the end of three years we all received the Licentiate of Medicine, Surgery and Midwifery from the Madras Medical College and I was thankful to go up to the Hills to have a holiday with my husband and family before returning to England. I had had nearly twelve years of Indian life and had worked hard all the time as housewife, mother, sub-editor, and finally as medical student. My health had never been good in India and now it was quite evident that if I was to make any practical use of my hard-won knowledge I must have rest and "*home*"—as we always called England.

After all the pangs of partings, the actual voyage was uneventful.

As soon as possible after my return to London I called on Mrs. Garrett Anderson, Dean of the London School of Medicine for Women and Lecturer on Medicine. She received me very kindly but characteristically. She told me that with such health as I appeared to possess I should do little as a medical student, that she had hoped to see a much stronger person, that I could of course join the School after I had passed the Matriculation examination, and that she would do what she could to help me.

Among other introductions I had one to Dr. Acland, Regius Professor of Medicine at Oxford. This was most valuable to me. Dr. Acland (afterwards Sir Henry Acland) proved a great friend to me; I am much indebted to him, and am glad to honour his memory.

Shortly after my arrival in London I wrote to him enclosing Surgeon-Major Furnell's letter. He replied that he was ill and unable to see me in London, but invited me to go down to Oxford for a day or two to stay with him and his daughter. I went to Oxford feeling somewhat shy of the great man, and when I arrived was made more shy by having to wait some time until he came in from his evening round of professional visits. I was put into his library and had ample time to study the long, narrow, delightful room that I was to know

so well in years to come. One thing that particularly appealed to me was the fireplace—stainless white marble, and bearing on its lintel the words :

“Type of the wise, who soar but never roam,
True to the kindred points of heaven and home.”

I knew that Mrs. Acland had just passed beyond the veil and in some manner I thought that her husband probably realised that she was the anti-type of the domestic flame which illuminated and cheered his hearth.

I had to wait long, for when he came in the poor man was faint and exhausted, and had to rest before seeing me. I fear only his great charity prevented him from feeling me to be an unmitigated nuisance. However, he received me most kindly and promised to talk of my future when we were both refreshed by our evening meal.

Miss Acland was keeping her father's house and ministering to his comfort. He needed all she could give him, for his loving and sensitive nature suffered severely from his sudden bereavement. Miss Acland, too, had need of courage, for she was an invalid, and the call to take her mother's place both as comforter to her father and mistress of a large and busy house must have necessitated strenuous effort and self-sacrifice. That night in November 1878 was the beginning of a friendship that still endures untouched by Time's rude hand.

In those days Dr. Acland and his daughter

lived in a beautiful old house in Broad Street, just opposite to the Bodleian Library. It was full of art treasures and redolent of art, learning, and devotion.

Another of my letters of introduction was to Dr. (later Sir Henry) Pitman. He lived in Gordon Square, quite near to the lodgings in 39 Woburn Square, where I lived when working for the Preliminary Scientific examination. Dr. Pitman, his dear wife and family were very kind to me, and on Dr. Furnell's introduction practically took me into their family. I was always welcome to their house and was sure of good advice as to my health and that of my children.

A third most interesting and important introduction was one to Florence Nightingale. At the time I first visited her she was a chronic invalid. She was never seen except on her bed, but she was always fully dressed in a black silk gown and dainty cap, and she sat upright, not deigning to rest on the pillows.

Miss Nightingale was deeply interested in the circumstances of women in Eastern lands, especially in Hindu and Mahomedan women. She was never tired of hearing my stories of their lives, their manners, customs, and sufferings. One phase of Hindu woman life that greatly appealed to her was that of the widow. Under the British Government no widow may become Sāthi (Suttee). She may not mount the funeral pyre and attain purifi-

cation and salvation in the arms of her departed lord. The British Raj is able to prevent this material sacrifice, but no human power can prevent the death in life that is the Hindu widow's portion. The fact of widowhood is considered to be proof of sinfulness. It matters not whether the wrongdoing that drew down the wrath of heaven were in her present life or in one of her former lives. The crime has been committed, the stain is hers, punishment falls on her in the loss of her lord and master, and for the sake of her eternal welfare the cleansing fires, actual and material, or potential and spiritual, are her only means of purification, restitution, and *it may be* of eventual forgiveness.

As the actual fire is forbidden the spiritual purification of humiliation, fasting, and prayer must be endured. A year after the husband's death the widow is dressed in her richest silk and golden robe, she wears for the last time her valuable jewellery, she is conducted to the sacred tank, and there, to the accompaniment of chants, prayers, and music, she is stripped very roughly of jewellery and rich clothes, she enshrouds herself in a length of unbleached longcloth, her head is shaved—all actions typifying her utter humiliation—then she is immersed in the sacred water, a mystical washing away of sin. She emerges dripping, shivering with cold, with sorrow, and with fear. Her calico shroud must dry on her person, and from this time until the day of her death she knows no comfort, no

consolation, no ordinary clothes, only her shroud, no nourishing and pleasant food, only cold rice and water—her touch, her very presence is pollution.

Who can wonder at Florence Nightingale's generous sorrow for such sufferings, and who cannot understand her desire to help anyone who was able and willing to give such relief as might be possible to these patient sufferers?

Miss Nightingale threw herself enthusiastically into my work, she shared my hopes and fears, and by her great sympathy and powerful interest she helped materially in the completion of the task I had set before me.

I also had an introduction to Mr. Bryant, Surgeon at Guy's Hospital. When I went to see him he said : "Let us understand each other ! I entirely disapprove of women becoming doctors and will do nothing to further your wishes." However, after a careful explanation of the situation as I conceived it, he altered his opinion, at any rate so far as it concerned the provision of women doctors for India, and kindly promised to stand my friend.

CHAPTER IV

POSITION OF WOMEN'S MEDICAL EDUCATION IN ENGLAND IN 1878 — FELLOW-STUDENTS AND TEACHERS

MEDICAL education for women in Great Britain became a *fait accompli* in 1877. A gallant attempt had been made by Mrs. Garrett Anderson in 1865 when she passed the examination of the Society of Apothecaries. She hoped that she might have been the first of many, but this Society, which had been forced to admit her by the terms of its Charter, immediately amended that instrument by resolving that they would in future admit no student to final examination who was not able to produce certificates of instruction issued by a recognised Medical School, and inasmuch as no Medical School would consent to give such certificates to women their access to the medical profession appeared to be entirely barred.

Five years later, in 1870, Miss Jex-Blake, Mrs. Thorne, Miss Pechey, and four other ladies were, after much difficulty, accepted by the University of Edinburgh, but although they were admitted as students they never succeeded in obtaining the degree. Among their great obstacles was the

absence of clinical teaching. The women distinguished themselves in their various examinations, but they met with very great difficulties, and finally seven judges against five gave a legal opinion that the University of Edinburgh was not competent to admit women to its degrees. Nothing more could therefore be done in Edinburgh for the time being. While the intrepid seven had spent four very arduous and unsuccessful years in Edinburgh Mrs. Garrett Anderson had obtained the M.D. degree of the University of Paris and had founded the School of Medicine for Women in London. She had many good friends who helped with money and with influence, a strong staff of teachers generously came forward, and the School began its career with a roll-call of fourteen students. So far so good, but there were two difficulties in the way that might well have proved insuperable had it not been for the inflexible determination and the great business capacity shown by Mrs. Anderson. Like Napoleon, she did not believe in the word *impossible*. She had made up her mind that the medical profession ought to be open to women, that they were well fitted to render good service in this respect to the cause of humanity, and she was prepared to strive to the utmost of her strength and so long as life should last to attain her object. The two great difficulties that she had to overcome were (1) that not one of the twelve great Medical Schools in London were willing to admit women to their hospital work and

teaching; (2) that not one of the licensing bodies could be induced to admit the women to the examinations that would make them eligible for registration as qualified practitioners.

This impasse terminated in 1877 when the King's and Queen's Colleges of Physicians and Surgeons in Ireland very generously offered to admit women to their examinations. In the same year the Royal Free Hospital, Gray's Inn Road, London, finally determined to admit women to clinical practice in its wards. It was the only one of the twelve great London hospitals to which no male medical school was attached, it was therefore the one that could admit women students with the least difficulty. Mrs. Anderson had her own way in this as in most other matters, but the authorities of the Royal Free Hospital were very far from wishing to have the women in their wards. The doctors did not think that they would find in them desirable pupils, the nursing staff who had hitherto performed the duties which generally fall to medical students were much aggrieved because the entrance of the women would take from them both work and prestige, and finally the Board of Management and the other authorities dreaded the effect that their new move might have on the public mind and feared that their funds would suffer. The friends of women doctors were few, and while the great mass of the population ignored the subject there was a very considerable number of people who most honestly and heartily detested

the idea. Many of them no doubt felt with Sir William Jenner that they would rather follow their daughters to the grave than see them medical women, and many no doubt approved of the dictum of *The Lancet* to the effect that when a woman qualified she could not degrade *herself* as she must already be lost to all sense of decency, but that she would, by qualifying herself in medicine, lower the general moral status of women. It was little wonder then that the authorities of the Royal Free Hospital should await with fear and trembling the effect of their act of faith upon their friends and their funds, and there was little wonder that they drove a hard financial bargain with the authorities of the nascent School. It is gratifying to know that the action of the Royal Free Hospital proved to be founded on a correct view of things, and that its connection with the School of Medicine for Women has always been an advantage to it both in finance and in reputation.

The numbers of students at the School increased as soon as it was evident that its curriculum would lead to qualification and admission to the Register. The roll-call of thirty-four with which the winter session opened in 1877 included some excellent students. Among the earliest medical women students was Dr. Edith Pechey, afterwards better known as Mrs. Pechey Phipson. She was a brilliant student and was subsequently a most successful practitioner. For several years she had a good

practice in Leeds, and subsequently, about 1884, she went out to India as the first Medical Superintendent of the Cama Hospital, Bombay. There she did excellent work, and laid the foundations of success for the women who succeeded her in her hospital appointment and in medical work on the Bombay side.

Another of these early students was Mrs. Isabel Thorne, the mother of the present Honorary Secretary of the School, Dr. May Thorne, herself a very distinguished medical woman. Mr. and Mrs. Thorne were amongst the best friends of the School in its early days. They were able to help it much both with financial support and with widespread influence, Mrs. Thorne serving it well as its first Honorary Secretary.

By the time I came home in 1878 the School was well established and all was working smoothly. We had a delightful Secretary in the person of Miss Heaton. This lady was not a doctor or a medical student, she was a woman of good ordinary general education, and well fitted for her position by her feminine charm on the one hand and her enthusiasm for the good cause on the other. Sweet and gentle as she was, she had certain inflexible rules for the guidance of the students. She did much to set the tone and to keep the atmosphere such as it ought to be. She was willing enough to discuss hospital appointments, relations of lecturers and students, and all manner of professional matters

in official hours and in her office room, but when she presided, as she always did, at the tea-table, all such subjects were taboo, for she was strongly of the opinion that our minds would be the better fitted for work if we had one or two intervals during the day in which our thoughts were turned to other subjects.

Among the interesting features of the School in those early days were Mr. and Mrs. Stubbins. This truly Dickensian couple were respectively a factotum man and a very good cook-housekeeper. Mrs. Stubbins provided us all with a good midday meal for a shilling a head, while Mr. Stubbins saw to the cleanliness and order of the whole house.

It is a little premature in my story, but I must record that when Dr. Jane Waterston, one of the original students of the London School of Medicine for Women, qualified and prepared to go out to Africa, she was entertained at a farewell tea, in the course of which Mr. and Mrs. Stubbins presented her with a candlestick and candle as an emblem of the light that she was supposed to carry into the dark continent! The instinct of Mr. and Mrs. Stubbins was justified and Dr. Jane Waterston was for many years the unwearied friend and doctor of the natives of South Africa. Her chief work there was amongst the lepers, and she finally laid down her life, a victim to typhus during the Boer War, equally mourned by Boer and Briton.

Being already a qualified practitioner and the

University of London recognising both my courses of lectures and clinical work in Madras, I had not so much to do with the Professors of the School as had the other students, but I did all I could to supplement my inadequate knowledge of practical anatomy and to profit by the wonderful instruction in histology and physiology given by Professor (now Sir Edward) Sharpey Schafer, Professor of Physiology in Edinburgh University.

The first examination for which I had to prepare was the Preliminary Scientific of the University of London, the subjects being botany, zoology, chemistry, and physics. The School curriculum did not yet provide complete instruction in these subjects, and four of us who were candidates for the London degree had to make arrangements with other institutions for the necessary lectures. My colleagues in this matter were Helen Prideaux, Miss Shove, and Miss Tomlinson.

Helen Prideaux was one of the most brilliant of the women who studied medicine at our School. She was a young woman richly endowed with intellectual ability and with personal charm, and she had received and profited by a very good general education of the High School type. She graduated M.B., B.S., in 1883, and was appointed house-surgeon to the Children's Hospital, Paddington Green, where to the great grief of her family and many friends she died of diphtheria, the special hardship being that it was supposed to have been

contracted in her lodgings and not in the discharge of her duties. She was my greatest personal friend amongst the students, and I owe to her a deep debt of gratitude for her helpful sympathy during the difficult early days, and indeed throughout my student life in London.

Miss Edith Shove was not a new student of the School in 1878; she had made some progress in her studies and had obtained the distinction of being appointed Demonstrator of Anatomy to the School. She was a shy, diffident little lady, who must have been badly overworked, for in addition to her demonstratorship and her private studies at the School she attempted the well-nigh impossible task of teaching after school hours. This plan is a disastrous one. A medical student who does his or her duty has no time for other work; it is sufficiently difficult to secure necessary exercise and rest. Medicine is a jealous mistress, and those who would win her favours must not worship at any other shrine. Miss Shove took her degree as Bachelor of Medicine and Bachelor of Surgery at the end of 1882, when I took mine.

Miss Tomlinson, the other member of our little group, was an exceedingly clever woman who had had the advantage not only of a liberal education but of a considerable time spent in Italy. Unfortunately her health was poor, and although she took her degree in the normal time she never practised, for she completely broke down shortly after quali-

fication. This disaster was not the direct result of overwork, but was due to some septic infection at hospital which led to permanent invalidism and loss of sight.

With regard to botany and organic chemistry we were most kindly welcomed by the Pharmaceutical Society of Great Britain in Bloomsbury Square. There we attended the lectures and demonstrations on botany given by Professor Bentley, a courteous gentleman and a very successful teacher. Chemistry was acquired under the guidance of Professor Attwood. We attended his interesting lectures, and were constantly reminded that "those who work in a mess get their minds in a muddle." We were also privileged to spend what time we liked in the museums of the Society, where we found admirable collections of the raw materials of all sorts of drugs. Through this generous action of the Pharmaceutical Society we enjoyed privileges that our own School, still in its infancy, could not then provide, but which were essential to our preparation for the Preliminary Scientific examination of the London University.

We attended classes in physics at University College under the guidance of Professor Carey Foster and Professor (now Sir Oliver) Lodge. Of course in all these cases we shared the instruction of the young men: no difficulties ever arose, there was not much intercourse between us, but such as there was was marked by courtesy and good feeling

on both sides. Occasionally our lectures were diversified by unconscious humour on the part of our professors, as for instance when one gentleman, not gifted with a vivid imagination, described some object in physics as having a "pudding shape." This was the gentleman to whom Helen Prideaux always exhorted me not to listen, for she said if I had any ideas at all on the subject of the lecture the incoherency of the lecturer would create a disastrous muddle. Another gentleman amused us by solemnly singing to a flame to demonstrate the nature of waves of sound, also by striking a loose string with a stick so as to produce in it waves, while he murmured gently: "hump, depression—hump, depression."

As for zoology, we were almost in despair. The School could do nothing for us. There was some talk of Professor Geddes coming to our rescue, but he, I think, left London at the crucial moment and I was selected to approach Professor Sharpey Schafer and to ask him for advice. I knew something of this young man, for his sisters and mine had been schoolfellows, but this did not make my mission the easier, because he was said to be equally learned and unapproachable. However, he received me kindly and listened to Miss Prideaux's views as represented by me. He explained why neither Professor Geddes nor Mr. Gotch would be available, but added that he himself would undertake the class if we would like him to do so. I was quite unaware

of the greatness of the honour he proposed to confer on us. I thanked him, and said that I would refer the matter to Miss Prideaux. When I returned to the School and told her the result of my mission she was horrified that I had not immediately and joyfully accepted Professor Schafer's offer. She explained that he was *the* big man and the teacher she had not dared to hope for. Naturally I returned to University College and accepted Professor Schafer's kindness with many thanks from all concerned. All arrangements were made, microscopes were procured, and the class assembled at the School in due time. The class consisted of the original four, Helen Prideaux, Miss Shove, Miss Tomlinson and myself, together with Julia Cock and Connie Hitchcock, two students who had not at that time definitely determined for which examination they would prepare, and Mrs. Schafer.

Professor Schafer was even then engaged on preparing one of the books which have done so much to advance scientific knowledge of histology, and he seems to have had the hope that his wife would be able to assist him in the production of original illustrations. Of course we all had to prepare various objects for microscope examination, to study the objects we saw, and then, as the Professor said, "to draw what we saw." I do not know whether Mrs. Schafer was successful in her work, but I know that she captivated the admiration of the whole class. She was a young, slightly

built woman, with a good complexion, bluish-grey eyes, and a large quantity of beautiful hair, she was abundantly endowed with "charm," and showed the utmost goodwill to all the members of the class. At this time she and her husband lived at Elstree. They had a nice house and a good garden, and many pleasant Saturdays and Sundays were spent by us there. Miss Tomlinson once had quite an adventure. In returning from Elstree one Saturday evening she missed her train, and arrived in London so late that the landlady and family at our lodgings had gone to bed. In vain she pulled the bell and thundered at the door. No notice was taken of her from within, but a policeman came up, watched her fruitless efforts to obtain admission, and finally ordered her to "move on." She went to St. Pancras Hotel, but having no luggage was looked on coldly. Unluckily she had taken little money with her beyond what was needed for her ticket, so even the silver key failed her. Finally she gave a gold brooch in pledge, was permitted to occupy a room for the night, and had to go home to fetch the money in the morning.

We all recognised our indebtedness to Professor Schafer for finding time in his very busy life to teach so small a class, but his final triumph came when he supplied us with some Canadian bull-frogs that he had imported for his own special use. At the practical part of the examination in zoology it was quite probable that the examiners might require us

to dissect a snail, a cockroach, a toad, a frog, a rabbit, or some other small beast. It was therefore necessary that we should acquire a certain amount of dexterity before the fateful day, and that we were able to satisfy their requirements was certainly due to Professor Schafer's thorough and inspiring teaching.

I have many memories of that class of practical biology. One member of it asked Professor Schafer to come and look at something she had found in the field of her microscope: she seemed to think there was something unusual and exciting. The Professor glanced down the microscope tube, straightened himself, and said gravely, "It is an air bubble." Another member of the class was committing "terminological inexactitudes" in her drawings. These were sternly condemned by the Professor's remark: "Why do you not look at the object you are professing to draw?"

My contribution to the gaiety of the class occurred under the following circumstances. Professor Schafer ordered us to cut oblique sections from a fern stem, to select a good section, mount it, put it under the microscope, then study it, "and draw what you have seen." My sections were not good so I asked Helen Prideaux to cut some for me. The Professor asked: "Mrs. Scharlieb, why is Miss Prideaux cutting your sections for you?" "Because mine are bad." "Well, but who is going to cut them for you at the examination?" I meekly

replied that I thought the examiner would do so. Swiftly came the reply, "Well, there is no knowing what people will do for you if only you show sufficient incapacity."

My working days were well filled up by lectures at the Botanical Gardens, the Pharmaceutical Society, University College, and Professor Schafer's class at the School, with the addition of a certain amount of practical anatomy. Saturday afternoon and Sunday were always spent with my cousins in Longridge Road. I could not accompany them to the early celebration at St. Mary Abbott's, it was too long a walk for me, but we were much nearer St. Matthias, Earl's Court, and there I found my spiritual home. On rare occasions I went with my cousin Charlotte (Mrs. Henry Bird) to St. Mary Abbott's at 11 a.m. to enjoy the musical treat of her husband's most devotional music. This service of his at the organ was absolutely the flower of his musical life, the expression of an intense devotion to which he permitted no interruption. He had a notice pinned on to the organ requesting that no one should speak to the organist, an eloquent rebuke to those musicians who do not see beyond the vehicle of music and so fail to realise the worship conveyed thereby.

Between the commencement of preparation for the Preliminary Scientific examination in January and the ordeal in July there was no time to spare, and it was with very mixed feelings that I saw the

day approaching. However, as usual, anticipation is worse than the reality, and I found that "If hopes are dupes, fears may be liars."

All went well with me and my comrades, our names were among those who had satisfied the examiners. We could scarcely believe in our own good fortune, and our sense of relief found a very quaint mode of expression. We left Burlington Gardens, rapidly crossed Regent Street, rushed into Liberty's shop, where each of us bought a Japanese teapot! After that telegrams and letters were the order of the day.

My children arrived from school about this time and we all went down to Colwyn Bay to share a house with the Underdowns. The Colwyn Bay of 1879 was a delightful little place, small and quite unspoiled, and many were the delightful drives that I expected to enjoy. Unfortunately very shortly after our arrival enjoyment and holiday-sense were swallowed up in the anxiety caused by my Aunt's serious illness. She had a very sharp attack of pneumonia which caused the whole family the deepest anxiety. Her illness coincided with a disastrous accident to the railway line, which was blocked for two or three days and so prevented her own doctor from Manchester coming to attend her. Nothing would induce her to see a stranger and consequently all the professional responsibility and most of the nursing fell on me. Luckily I had seen plenty of pneumonia in the wards of the

hospital at Madras, and although much concerned for the trouble in the family, and the uncertainty of my patient's fate, I was not afraid. Mercifully the crisis passed in safety, and although her strength was slow to return and the condition of her heart gave considerable trouble, all immediate danger was soon over.

With the opening of the winter session of the medical scholastic world I began the second stage in my preparation for the London degree. The subjects we had to prepare were anatomy, physiology, organic chemistry, and materia medica. To my mind this was by far the most exacting stage of my journey. I think that anatomy made the greatest demands both on sheer memory and also on manual dexterity, but, if possible, physiology and histology as taught by Professor Schafer were the most interesting of our subjects. The dissections at the School were under the supervision of Miss Edith Shove and some very good work was accomplished under her guidance. Unfortunately for me I could not convince her that I had little or no experience of practical anatomy, and in consequence I was left far too much to my own devices in this respect. This want of practical training in anatomy was a hindrance to me for years. In materia medica I did not need to take lectures, nor to attend classes in practical pharmacy—the training that I had received in Madras was as good as any that could be obtained in London, thanks to

Mr. Harvey. Physiology was in those days making rapid advances, and it found in Professor Schafer an up-to-date, accurate, and most enthusiastic exponent. The consequence was that he had a good class and great success in his teaching. The formal lectures were given in the winter term, histology was demonstrated by the Professor himself in May and June, while for physiological chemistry we four London women students were most kindly welcomed by Professor (afterwards Sir John) Burdon-Sanderson in his private laboratory at University College.

This remarkable man was a genius and a saint. He possessed a long thin body capable of much endurance, and a rugged irregular face that held the combined charms of intelligence and love. Burdon-Sanderson lived as much in heaven as on earth, and all his courteous consideration for his fellow-men had its origin in his childlike love of God.

Legends grew up about him in his students' minds. We knew that every Sunday he went with his shabby old Bible under his arm to "sit under" the spiritual teaching of a tinker or a carpenter, and that intervals of laboratory work were sweetened by the refrain of some familiar hymn. Sometimes his absent-mindedness took amusing forms, as when having made several ineffectual efforts to strike a light by means of various pieces of chalk he flung them down, rang for the attendant and

gently said, "Fielder ! get me a box of matches that will strike." On another occasion, having invited so many colleagues and students that they had to go down to supper in two parties, he and his wife arranged that he should take charge of the second division. He marshalled them down, forgot all about the supper and bade them all a cheerful good-night.

Unfortunately a severe attack of bronchitis took me off study for some weeks, and I had to go to St. Leonards to convalesce. A little later, soon after I returned to London, I received an urgent summons to my elder son. He was at Lancing College, and the Headmaster's message conveyed the idea of extreme urgency. On the way from the station I called at the school doctor's house : he was out, but his wife confirmed my fears, and said she thought the boy was dying : the trouble was acute pneumonia. We (the doctor and I) thought it well to have a consultation with Dr. Sanderson of Brighton. He was helpful and kind, but naturally could not promise much in the way of outlook. However, our anxiety did not last long, the crisis passed safely, but I returned to London much shaken and very unfit for work. The boy of course was quite unable to study during the rest of that term ; he therefore joined me in my London lodgings, and I had to do what I could for his welfare and amusement while continuing my broken course of study.

As I was a qualified practitioner I was permitted by the University to take the successive examinations at such intervals as might be convenient to me. Naturally my preparation for the Intermediate Medical in the subjects of anatomy, physiology, organic chemistry, and materia medica had been very much hampered by my illness and my son's. However, I went up together with my colleague, Miss Shove, and did well in all subjects except anatomy, in which, alas! I failed. In those days the Intermediate Medical examination was held only once a year, and this mischance involved a corresponding delay in graduation. After the first bitterness of defeat was over I saw clearly that my rejection was a blessing in disguise—it meant an extra year in England for the re-establishment of my health; an extra year of hospital work, because although I had to revise my anatomy the other subjects were well prepared and I should probably have no difficulty with them in July 1881. I took the children with me to Lowestoft for a holiday, sent them back to school, and entered the wards of the Royal Free Hospital in October, giving such time as was necessary to practical anatomy. My chief comrades moved on with me, Helen Prideaux and Julia Cock becoming dressers to Dr. Baxter, one of the Assistant Physicians at the Royal Free Hospital.

Dr. Baxter was a very remarkable man. His mother was Russian and his father Scottish. He

was himself an M.D. of London and thoroughly understood the requirements of the University : he was also a born teacher and an enthusiastic healer. He combined a veritable passion for humanity with a profound and loving study of his profession. He was a wonderful all-round man, he spoke practically all the European languages, he was apt with classical quotations and allusions, and his general knowledge of men and affairs was wide and interesting. One of Dr. Baxter's plans in teaching was to make his little court of students do all the questioning and note-taking of his out-patients. He was delighted when any patient could not speak fluent English, because then he set on his students to improve their professional knowledge of foreign languages and of practical medicine at the same time. Dr. Baxter had a fine sense of humour and a great delight in a sort of half-loving, half-mischievous teasing of his students. He was keensighted indeed for our ignorances and our negligences, but kindly in supplying our want of knowledge and exquisitely tender with the sick and the sorrowful. On one occasion he heard Helen Prideaux whispering something to me behind his chair; he insisted on knowing what she had said. With some hesitation and blushing she owned that she had said, "Be sure your sin will find you out, and if your sin does not, then Dr. Baxter will." "Yes," he commented, "you may be sure of that."

As time went on this excellent teacher found

another way of making us more ready for our great ordeal. He would select a case for investigation and send one of us with the patient into another room for twenty minutes, and twenty minutes only. In that time all necessary questions had to be asked and all desirable investigations had to be made. Not only a complete history of the case had to be obtained, but tongue, teeth, throat, heart, lungs, and abdomen had to be examined in every case, while certain special investigations—eyes, ears, larynx, etc.—had to be carried out when indicated. The results of our twenty minutes' work were to be written out at home. On them we had to found our opinion of the case, the treatment that we would carry out if free to act, and the condition of things that we should expect to find if the patient died shortly after our examination. We were bound in honour to write this report in half an hour, and to consult no book or other source of information. Two great benefits to us followed this somewhat strenuous process: (1) our investigation of the case had to be so painstaking and accurate that we could base on it the whole superstructure for Dr. Baxter's consideration, and (2) there was no time allowed for slackness or dilatoriness. I was convinced at the time that an enormous benefit was being conferred on us, and when I went up for my Final examination and much depended on the reports that we were able to give on two medical and two surgical cases, I blessed the name of Evan Buchanan Baxter.

After a few days our notes of cases were returned to us carefully corrected in red ink, and we discussed them fully with him.

After a time Dr. Baxter passed on to the charge of in-patients, where his work for his patients and his teaching of his students were maintained at the same high level. Then began an invaluable series of clinical lectures. We had constant small vignettes of disease and its treatment at the bedside of each patient, but once a week there was a full-length portrait of some special morbid condition worked out with the greatest care and presented to us in the comfortable surroundings of our lecture-room.

On the surgical side we had a brilliant surgeon, Mr. William Rose. He was an enthusiastic follower of Lord Lister, and was brought up by him in the strictest sect of antiseptic surgeons. We all admired him greatly, but he did not like to be questioned, and when one day I asked him why he was of a certain opinion he very characteristically said, "What business is that of yours? It is quite enough for you that I say so." Naturally nobody questioned the accuracy of his diagnosis, but the hardship was that his magnificent knowledge and accuracy of touch could not be communicated by him to us.

An honorary member of his class, a middle-aged woman who was not intending to qualify, had a perfectly German devotion to this little deity of hers. Occasionally her sentiments found quaint

expression, for example, she presented him with a bouquet of flowers, the names of which made up the following sentence: "Sweet William, Rose, Forget-me-not!" Mr. Rose tolerated her devotion with great good humour.

Among the other members of the staff one ought to mention with gratitude and affection Dr. William Allen Sturge, who was for a short time an Assistant Physician to the Royal Free Hospital and a most enthusiastic teacher. He was a great friend to the women students and was generous both in his teaching and in his appreciation of their hard work. Apparently, however, he had not much reliance on women's capacity for medical learning, for I remember him impressing on me very strongly that it would be better for me to select some one subject in which to endeavour to secure Honours and leave all the rest at a Pass standard.

There are few indeed now alive who remember the London School of Medicine as it was when I first knew it. It was located in a beautiful old house fronting into what was then known as Handel Street (now Hunter Street), Brunswick Square. It was an Adam house, long and low, facing west, and protected along its eastern front by a deep verandah, and was formerly inhabited by George IV's Mrs. Fitzherbert. The rooms on this side opened into the verandah by French windows, which during the summer months gave us the maximum of fresh air and an unimpeded entrance

into the delightful old garden. This garden was not too much cut up by flower-beds : it afforded a fair amount of lawn on which to walk, and was adorned by a fine old ash tree with sweeping boughs, beneath which the students did much of their reading, and under which in later days I gave my lectures on medical jurisprudence. To finish the story of the ash tree—I am thankful to remember that I saved its life. In days long after my student time when the School was being virtually rebuilt the new laboratories had to come so close to the ash tree that the builder thought it would be necessary to remove it. Such a wholesale destruction of its roots was necessary on the eastern side that it was thought it might as well be sacrificed. I hoped that its vitality was sufficient to enable it to live even if half its roots were cut away. This plan was adopted, and the ash tree still shelters our “sweet girl graduates.”

In my days, and long after, the dissection-room was on the ground floor, a long, comparatively narrow room, opening on to the verandah : it was not in those days called the dissecting-room, but went by the name of the “long room.” The light was not particularly good, and the supply of water and the arrangements in general were far less well adapted for the purpose of the room than they are now. Our diagrams were old and indistinct and our supply of material was always uncertain and generally inadequate. Students in those days (1878–

1882) were not spoon-fed in any sense. Not only had we to obtain supplementary classes wherever we could procure them, but at times, and especially during the Christmas holidays when a few enthusiastic souls remained to continue their work, we encountered real difficulties: all the servants were away except Mr. and Mrs. Stubbins, and they naturally felt that if it pleased the students to work it was no concern of theirs. We had therefore to do what might be called the "house-maiding" of the long room in addition to our dissections, and in one special winter (1880-1881) the weather was also against us, the pipes froze, and no water was to be obtained in the house. However, we filled our kettles from the snow in the garden, found wood and coal and lighted the fire, and so provided ourselves with hot water for the cleansing of tables and benches as well as our own hands.

In those days the students' quarters at the Royal Free Hospital were widely different from what they are now. We had but one sitting-room and a cloak-room. The "Common Room," as it might be called, was small and much overcrowded for a couple of hours or so in the middle of the day, when we were turned out of the wards during the patients' dinner-time. Some of the students walked over to the School to share in the midday meal provided there: some went to a pastrycook's in the Gray's Inn Road, but the great majority of us preferred tea and sandwiches, or what we called "the plum-

bunia nutritiosa " eaten to the accompaniment of transcribing notes, looking up points in text-books, and discussing the various cases confided to us in the wards. In due time I completed all my student posts at the hospital—two surgical, two medical, one each in diseases of women and of the eyes. I did not need to take midwifery, as my former work in that department sufficed. I was therefore during those latter months quite free to work as I pleased, and my time-table was more or less as follows : Breakfast with Miss Tomlinson at 8 a.m., and when she had gone to hospital about 8.30 a.m., I set to work on Latin, of which I had to show a competent knowledge at the Final examination (because in consideration of my Madras qualification the University of London had excused me from matriculation). I worked at this until 10 o'clock, and then spread out around me various authorities on midwifery. My plan was to read up each subject in five or six books, to make such notes as were necessary, and to add to them illustrations from my own experience. In this way I obtained a sort of private compendium of midwifery and of the diseases of women. I thought in whatever subject I might fail it ought not to be in these, for a medical woman's ability to cope with the physical crises of a woman's life is her own *raison d'être*. At 12 o'clock I had a cup of Bovril and some bread, and then went down to the hospital for the afternoon clinics : I did this because one can never

have too much practical experience of patients and their treatment. Miss Tomlinson and I returned together in time for an evening meal, and then I did microscope work until 8 p.m. To this plan my good companion objected vigorously : she thought, it may be wisely, that everyone ought to have some rest, but I felt that the rest must come after the examination, not before it, to which her invariable rejoinder was : " Well, go your own way to the Evil One, but remember I have warned you." From 8 p.m. until midnight I worked at medicine or surgery, and after that, as long as I could keep awake, at medical jurisprudence. I should not recommend this course of study to most students, nor should I have attempted to do it myself throughout the long years of student life, it was only possible as a finale. I still received much assistance from Dr. Baxter, who set me regular examination papers and required very careful and accurate reports on cases. I was greatly indebted to him for such success as I obtained.

In spite of all careful preparation and in spite of all kindly prognostications from fellow-students I could not help feeling that as it is recorded in the legend of " The Wise Men of Gotham " I was about to " put to sea in a sieve." One day Dr. Baxter inquired what was the matter, and when I told him of my conviction that I should fail to satisfy the examiners his comfort was, " No one who works well in the wards can fail to satisfy them." Finally, with

a sinking heart and much misery of mind and body, I found myself seated at one of the well-remembered little tables at Burlington House. On it lay two of the inevitable green exercise books. I pursued my invariable plan of reading over all the questions, selecting the one that seemed to suit me best to answer first. I wrote a careful *précis* of all my answers so that if time failed me to finish the desirable elaboration the examiners should at least see what I had intended to do and how I had covered the ground.

The Final M.B. was a lengthy examination; the written portion lasted for six hours on three successive days only, but then came the *vivâ voce* examination in each subject, the formal case-taking and reports of cases at different hospitals, and finally a race round making a lightning diagnosis of certain skin eruptions in company with one or more of the examiners. In one of my cases I had the opportunity of seeing how much one could induce an examiner to do. Amongst others a very interesting case of nervous disease had been assigned to me. I took the history and examined the man, but just as I was about to clinch my diagnosis by an ophthalmoscopic examination, Dr. Hilton Fagge came up and said that the limit of time had been reached. I hurriedly thrust the lamp into his hand and asked him to hold it whilst I looked into the man's eye. Whether from courtesy or from astonishment I do not know, but he most kindly held the

lamp, and I blessed those teachers who had made me look so many times at the fundus of the eye. In that brief glance I had obtained the answer to the enigma, and I went down from the ward to the examination-room sure of the basis of my report.

The interval between the termination of the examination and the report of the examiners is always a great trial to students, and very anxiously did we await the expected telegrams announcing failure or success. Finally they came and were satisfactory to both Miss Shove and me. Then came the examination for Honours, conducted much on the same lines but not lasting so long. I was so fortunate as to get Honours all round with the Gold Medal and Scholarship in Obstetric Medicine. The examiners in this subject were the late Matthews Duncan and the late Dr. Gervis. Matthews Duncan had the character of being a real old bear, but he was extremely kind, although somewhat gruff in manner, and subsequently he told a friend that he "liked a candidate who made no effort to conceal her ignorance." From the son of an old friend who was one of Dr. Gervis's students at St. Thomas's Hospital I heard that when he learnt that No. 104 was a woman Dr. Gervis exclaimed: "Oh, to think that I have lived to give the Scholarship in my own subject to a woman! But there, it was an excellent paper and it can't be helped!"

After this came the examination for the Bachelor of Surgery degree, first Pass, and then, when that was surmounted, Honours. The hardship of the Honours examination was that there were only three questions, and if any one of the three did not suit the candidate a possible third of the marks was unattainable. However, I was fortunate enough to get a Second Class.

CHAPTER V

LIFE AND WORK IN VIENNA—ROYAL SYMPATHY IN ENGLAND

AND so, when the Christmas holidays were over and the children had returned to school, I prepared for a visit to Vienna, where I hoped to be able to obtain practice in operative midwifery on the living. Nothing of the sort was available in London, but I had heard that in the great Lying-in Hospital for Southern Austria it might be possible to obtain such work on payment of a fee. On the way I intended to visit Paris and there to learn something of French methods in medicine and surgery. I had good letters of introduction to several leading professors, and also one to the British Ambassador from Sir Henry Acland. However, when I got to Paris I found that my French colleagues were away from home enjoying a brief holiday in the south. It was useless to await their return or to spend any time in the French capital. I knew that my husband proposed to come home in the spring, and that when he arrived I should have to give up all my time to him and our mutual friends. The wisest plan therefore was to get on to Vienna, and I went the same evening. I broke the journey

at Munich; it chanced to be Sunday, and the train to Vienna did not leave until night. I went into the cathedral and attended three Masses, one of which was a soldiers' Mass, and very impressive owing to the character of the congregation and the military music. I visited two picture galleries, and after lunch took a carriage and drove round, seeing among other things the colossal statue of Bavaria. After dinner I joined the train for Vienna, where I arrived between five and six o'clock the next morning. Naturally it was very cold and dark, also naturally, I suppose, there was much snow, and I had a somewhat disagreeable quest for the lady who had kindly promised to present me to the authorities of the hospital. My driver took me safely to the entrance of her house: she lived in the top flat, and I cannot imagine what were her feelings when before dawn on a January morning an unknown woman suddenly demanded her presence and claimed the fulfilment of her promise. The lady was a teacher of languages, and I am more sorry now than I was at the time that I disturbed her hard-earned rest, and I am far more grateful now than I was then for her generosity in dressing at once and going with me to find an hotel. We found one which promised comfort and was near the hospital. There she left me, saying that she would return as soon as she thought it possible for us to obtain audience of some responsible person in the Frauenklinik of the Allgemeiner

Krankenhaus. I had my breakfast and demanded a bath. The chambermaid was much astonished at my wanting such a thing, but philosophically remarked, "Ah, well, I suppose you are very dirty; the English always are, they are always wanting baths!"

About 10 a.m. my most kind guide reappeared and we walked to the hospital. This was a little town in itself: building upon building, court after court, and on many of the doors the name-plates of men who were European celebrities. We penetrated to the domain of the Matron of the Lying-in Hospital. She was a fine woman in every sense of the word, big, good-looking, full of common sense and kindness of heart. It was very soon arranged with her that if I were accepted as a pupil by Dr. Gustav Braun, the head of the Midwives' Clinic, she should do what she could to facilitate my work. The great man soon arrived, more German than Austrian in manner and appearance, loud in voice, and diffusing around him an atmosphere of mingled arrogance, alertness, and efficiency. I presented to him a letter of introduction from Dr. Matthews Duncan conceived in a very friendly spirit towards me. Dr. Braun held it upside down, pretended to read it, and then asked me who wrote it! I endeavoured to explain, and was asked what I wanted—all of which was carefully set out in the letter! I said that I had come to Vienna hoping that he might be kind enough to let me study in

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his clinic, and that he would permit me to do certain operations myself, a privilege which I had heard he accorded to qualified students, that is, junior practitioners, of whom he approved. His answer was quite decided—nothing of the sort could be permitted, it was strictly forbidden and quite impossible that operations should pass out of his hands or those of his assistants. In vain I pleaded that I was going to India to work amongst the native women, and that such training as I begged from him would be of inestimable value to me and my future patients. He said I could stand by and see him operate on the payment of a very considerable sum. Of course I replied that I could do as well as this in London without the inconvenience and expense of staying in Vienna. However, I was apparently entirely unsuccessful and took a formal leave, saying that I was returning to London that night. When Dr. Braun had passed on, his senior assistant remarked in an aside that it would be a pity to do anything rashly, I should do better to remain where I was, and speak to him after the Chief's visit was concluded. After a time this gentleman, Dr. Breuss, returned to me, and after some little conversation arranged to pass on to me all operations falling to his share. He also promised that I should do operations on the cadaver under his guidance, and that I should have a share in all his work throughout the day. The fees were heavy, but that I had expected.

I was very well pleased with the results of my interview.

From the Frauenklinik I went on to the part of the hospital that Politzer was adorning with his original and successful work on Diseases of the Ear. He held a clinic daily from 11 to 12, and received the respectful attention of well-qualified practitioners from all the civilised world. He had a very remarkable and impressive personality—tall, dark, rather Eastern-looking, with good manners and a considerable fund of humour. He talked well, wrote well, and was most successful in healing the sick and in teaching his large and enthusiastic class. We were all welcome to him, men and women alike (though I, at the moment, was the only woman in attendance). The work of the clinic was admirably arranged, there was a routine sufficiently definite to economise time and labour, sufficiently elastic to serve adequately both students and patients. We were carefully taught the various methods of examination of the ear and throat, and secured considerable practice in passing the Eustachian catheter along the nose, and performing "Politzerisation," as it was already called.

Another clinic that I attended was that of Professor Arlt for operations on the eyes. I considered this a very important part of my training, for I knew by old experience what a field there was in India for the treatment of diseases of the eye. I

liked Arlt and his assistants and found the instruction that I received very valuable in after life, especially during my practice in India.

I did not undertake any other work at Vienna; there were plenty of excellent clinics and much profit and enjoyment were to be had at a comparatively low cost, but my great object was to obtain real dexterity in operative midwifery, and I knew that if I were continually away from the Frauenklinik, no matter what other joys I might obtain, I should certainly lose many opportunities that in the nature of things could never recur.

The good Matron was much interested in her lonely English visitor, and when she found that although I was paying for three months' courses of instruction everywhere I should not be able to remain longer than six weeks she exclaimed against the injustice of the arrangement, and told me that the only way in which I could obtain anything like a return for my trouble and expense would be to take up my residence in the hospital so that I should be on the spot night and day and lose none of the cases that might come to fruition in any one of the twenty-four hours. She offered me a fair-sized room leading out of the Waiting Ward. She wanted no rent, nor anything else for herself; she offered to provide me with coffee and bread night and morning for a very moderate sum, but of course I was to get my midday meal when I went out to the Aural Clinic. It is unnecessary to say that

I was delighted with the proposal, and immediately went to the hotel to pay my bill and remove my luggage to the hospital. This dear woman, Madame Mohr, was much beloved by her large class of pupil midwives. Like them, I fell into the way of addressing her as "Gnädige Frau." She was the one touch of humanity in my life at this time. There was but little time for conversation, both she and I were too busy, but I always felt that in her a beneficent and very kindly personality cared for me and for my doings.

The room assigned to me was about 18 by 9 feet and had two windows. The furniture consisted of a hospital cot with two grey blankets and a pillow; there were no sheets or pillow cases. There was a small table on which it was possible to write, and a little stand on which I soon placed a tin basin; this and towels I had to buy, and other things (except one wooden chair) I had to do without. However, I did not spend very much time in my room. The order of the day's proceedings was: 5.30 a.m. a large and excellent cup of coffee and some good Vienna bread. In about an hour's time I was ready for the wards, went round with the Night Sister and saw what progress had been made by patients during the night: there were no chairs about, but as a visitor I was always made welcome to sit on any bed that was out of use, there I could study my books and write my letters. The first officer to arrive on the scene was the Gnädige

Frau, who had always something interesting and instructive to say about the patients. Then came my friend Dr. Breuss, and I accompanied him round not only the Labour Ward, but also every part of the Frauenklinik, and had the opportunity of seeing how he met the various troubles and complications that are apt to follow childbirth. Some of the hospital customs appeared very odd to me; for instance, the newly delivered mother was fed for two or three days on coffee and bread. This, of course, was ordinary enough, but it was astonishing to learn that after this period their food consisted of *schincken*, which is simply raw ham. There were no knives and forks in the wards, the ham being eaten as a slice of bread might be, being held in the hand. Everything was very primitive, there was scarcely anything beyond the bare necessities of life, but the work was good, and there was a simple, unfailing devotion to antiseptic principles which ensured success. Dr. Breuss had scarcely finished his round when his big and burly Chief appeared. His arrival was announced by his cries of "Vorwärts, Vorwärts," and a general bustle and scuffling among the midwife pupils. Dr. Braun conscientiously inspected all the patients for whom he was responsible; even those who were supposed to be doing very well were uncovered and received a huge punch in the middle of their anatomy, in order that the Herr Director might be sure that there was no tenderness

there. If anything were going wrong the good man showed his best side: he was prompt, efficient, and although rough he was never unkind. If any operative methods had to be carried into effect preparations were immediately made in the ward, quite openly; the woman was anæsthetised or not, as seemed good to Dr. Braun. Her troubles were quickly ended, and the measure of success was great. By the time the Director had finished his round I had to attend the Aural Clinic: this was immediately followed by a midday meal at a restaurant near by, and then I went to the demonstration on operations on the eyes. I returned to hospital between 2 and 3 p.m. and was always invited to share the Matron's after-dinner coffee. After this I returned to the wards, did whatever work came my way, read and wrote till about 8 p.m., when I retired to my palatial abode and had my supper of Bovril and bread.

The patients at this clinic were all technically called "Mädchen," but some of them were respectable married women who had had trouble in previous confinements, or for whom difficulties were anticipated in their first delivery. Inasmuch as the hospital served the whole of Southern Austria, and these cases at any rate were more or less specially selected, midwives and students enjoyed more than an ordinary share of difficult work. The other patients were young women who earned their living by qualifying as wet-

nurses. They came in regularly with each succeeding child, passed the baby on to the State-maintained Kinder-Anstalt, and then went out to nourish the babies of women who were unable or unwilling to perform the primary duties of motherhood.

I do not think that I quite realised at the time what the arrangement really meant. I, of course, knew that many of the mothers were unmarried, but it was not until long after that I really understood that their maternity was commercialised, and that qualifying themselves to be wet-nurses was their chosen method of livelihood. All the same I believe that the girls were more sinned against than sinning; they were poor and very ignorant. I therefore venture to think that the wrong-doing was more on the part of those ladies who so carelessly delegated their maternal duties, and on the State which so frankly encouraged immorality.

I was most grateful to the Gnädige Frau for her kind hospitality. The best of the cases seemed to have a way of occurring at night, and then, unless the difficulty was great, Dr. Braun was not sent for, and the case fell to one of the two assistants, usually to Dr. Breuss, the senior of the two, and therefore through him to me.

Only once during my six weeks did I miss anything of importance, and that was on the only occasion that I went out for two or three hours one Sunday to attend the Votiv Kirche and to

dine with Professor Fleischl and his mother. She was a delightful old lady, extremely kind and cordial in manner. She pressed me to go again, but when on returning to hospital I found out what I had missed I thought I should do better to "seorn delights and live laborious days." I did so, and profited much. I do not know whether Dr. Breuss told the Chief that I was not a very dangerous individual and that he might safely trust me a little, but at any rate one day I received an unexpected summons to take one of his operations, and was glad to do so. The invitation was repeated, and we finally parted very good friends, and I received both from him and from my still greater friend, his assistant, testimonials which I relied on to be good introductions to the medical authorities in Madras.

All too soon the time came to say good-bye to Vienna. I heard from my husband that he was leaving India and proposed to meet me at Brindisi on a certain date. We arrived in England in time for the children's Easter holidays and settled down in lodgings near to my cousins, the Henry Birds. Presentation Day of the London University was that year (1883) on the 10th of May. The degrees and distinctions were awarded by Lord Granville, the Chancellor of the University. I was presented by Mrs. Garrett Anderson, the Dean of the London School of Medicine for Women. It was a momentous occasion in my life, and I have never ceased during

many succeeding years to sympathise very deeply with the men and women who, year after year, go up to receive the reward of patient toil.

As soon as the children returned to school my husband and I went to Manchester to visit the Underdowns, to Oxford to stay with the Aclands, and to many other friends in other parts of the country. From time to time we had a few days at Coleherne Road, but the greater part of that summer was spent in knitting up old friendships, in visiting people who had been helpful and kind during my student life in London, and in saying good-bye to those from whom we were to be parted for a term of years.

Sir Henry Acland was determined that if it were possible my proposed work among the women of India should receive recognition from Queen Victoria, to whom the welfare of India was so dear. Sir Henry held a very privileged position: he had accompanied the then Prince of Wales to Canada in his youth, and had long been on terms of intimacy with Her Majesty. If he were determined that she should see me, Sir William Jenner was equally determined that she should not see me. Finally, Sir Henry triumphed, and I received a command to go to Windsor. In a private letter I was told that my husband was to accompany me. He was entertained to lunch by Sir Henry Ponsonby, while I was instructed in the etiquette of this special visit by Lady Biddulph, with whom

I lunched. She was perfectly charming, and did much to help me to prepare for the interview in a reasonable spirit. Indeed, as soon as one saw the Queen one forgot to be frightened. Lady Biddulph and I were alone in a moderate-sized room opening out of the one in which was the Queen. The door opened, and a little figure clad in black appeared. Her Majesty was at that time more than sixty years of age, but her carriage was upright, her blue eyes were bright and clear, and her personal dignity was admirable. Her atmosphere was one of kindliness, sympathy, and eagerness, she was determined to know all that she wished to know about her women subjects in India. Finally I asked her whether she desired me to tell her all the truth, and whether it might not prove too shocking for her. She told me that she had sent for me in order to hear the whole truth so far as I knew it. Accordingly I gave her a plain, straightforward account of the difficulties and sufferings caused to Caste and Gosha women by their refusal, or rather their inability, to avail themselves of the services of male doctors. I described to the Queen the unintentional barbarities and injuries inflicted on these poor women by the kindly, but absolutely ignorant, native midwives. I also gave some account of the frequent failure of native methods of treatment, which do not rest upon scientific knowledge, and which, in the case of women at any rate, are not inspired by the

knowledge that comes from physical examination. The Queen listened with apparently great interest, and when I had finished my story she turned to Lady Biddulph and said: "How can they tell me that there is no need for medical women in India?" After a few more questions the Queen most graciously gave me a message to my Hindu and Mahomedan lady patients; she said, "Tell them how deeply their Queen sympathises with them, and how glad she is that they should have medical women to help them in their times of need." She added, "I will give you my photograph, and you must take it with you to their houses to show them how much I feel for them." The interview was ended, I curtsied and kissed her hand, but she gave me a most kindly grasp, and if I had not been her devoted servant before, that interview would have made me such to my dying day.

Lady Biddulph and I waited for the photograph, and a young aide-de-camp brought me the Birthday Book in which the Queen wished me to write my name. In a few minutes he reappeared with a kindly message that Her Majesty would send the photograph the next day; she was having it framed and feared that if I waited I might lose my train. Lady Biddulph accompanied my husband and me to the station, and true enough the train had gone.

The Queen's photograph came the next day by special messenger: it was well protected from injury by its solid gilt frame, and bore the Royal

lady's autograph, "Victoria, R. et I." I took the picture with me to India and made a point of showing it and telling the story of the interview to as many as possible of my patients. The story was always received with enthusiasm and helped to accentuate the popular legend of the Great White Queen who, although so far away, never failed to feel sympathy and love for her Indian daughters.

The very day before my husband and I were to leave for India I had a sudden command to visit the Prince and Princess of Wales (afterwards King Edward VII and Queen Alexandra) at Marlborough House. I was received by General Knollys and naturally asked him what the special etiquette of such an interview might be. He told me there was none, that I should find the Prince and Princess just like any other host and hostess.

I was most kindly received and was put entirely at my ease by the very courteous gentleman and lady who expressed so much interest in my work. The Prince reminded me of his visit to Madras and said he remembered me. I remembered his gracious and pleasant bearing, and the interest he had shown in his English exiles and in his devoted Hindu and Mahomedan servants. Next he mentioned my recent visit to Windsor: he said the Queen had told him about my past work in Madras and of my hopes for the future, and now he said, "I want you to tell me all you told my mother."

I replied that I could not quite do that, but that I should be delighted to tell him all that was fit for him to hear : I spared him painful details that the Queen had pressed for, but I was quite truthful and frank as to the sufferings of Caste and Gosha women and as to the crying need for women doctors in India.

I was listened to most sympathetically by both the Prince and the Princess and then dismissed, after a little general conversation, with kindly wishes for my health and usefulness among those who were later on to be their subjects.

CHAPTER VI

MEDICAL WORK IN INDIA

WHEN my husband and I went back to Madras in July 1883 we were confronted with the problem of leaving our children in England without parental guidance at a time when careful and sympathetic supervision meant so much to them. Difficulties due to distance and other circumstances seemed to make help from our nearest friends very difficult, when suddenly our anxiety was removed by the generous offer of Professor and Mrs. Schafer to take charge of them.

The children were devoted to these dear people, and were the more likely to do well under their care because they could assume the rôle of elder brother and sister rather than that of formal guardians. Professor, now Sir Edward, Sharpey Schafer, was at that time Professor of Physiology at University College, London, and was young enough to sympathise with the young folk, but old enough and sufficiently experienced to be a wise and reliable guide.

In commencing work in Madras I needed not only professional knowledge, but also some practical psychology.

Among all manner of patients, the great thing is to learn to understand the sick and to appreciate the way in which diseases are modified by individual peculiarities of mind and body. If this were true of work in England, how much more urgent was that truth when the patients were chiefly people of different races, different constitutions, and a wholly alien outlook on life, and when the diseases I was called upon to treat were either peculiar to the country or greatly modified by the climate? I soon found that most of my patients were childlike in their response to disease. They collapsed readily, and in the course of a few hours or days completed processes that would have run a much slower course in English patients and in a temperate climate. For instance, there was a Brahmin boy whose parents sent for me in the early morning because he had dysentery and had simultaneously developed pneumonia. Hour by hour the consolidation of his lungs spread, his strength ran down, his heart failed rapidly, and before midnight he was dead. On the other hand, one had to learn that high temperatures in India, and especially high temperatures in Hindu and Mahomedan patients, have not the same significance that they have at home. A temperature of 104° to 105° was quite reasonable in cases of ephemeral fever and as the result of chill or acute indigestion. Much more significant was acceleration of the pulse. But one soon learned to

keep calm and not to be too much distressed by vagaries of temperature and even of pulse unsupported by any serious physical signs.

Another thing one had to learn was some peculiarities in the employment and in the dosage of drugs. In those days (1883) practitioners in England seldom gave more than three grains of quinine for a dose. Such a dose was absolutely useless in India. Ten grains, suitably guarded by hydrobromic acid, were more to the purpose, and had to be given three times in the twenty-four hours in cases of malaria; while as a stimulant to the uterus, in cases where it was sluggish and no other impediment to delivery existed, twenty grains of quinine every twenty minutes for an hour frequently averted the necessity of using instruments.

The first few months in Madras were naturally a probation period, a time during which I wondered whether I had done right in spending so much time and money in preparing for a work that perhaps was not meant for me. I had weighed this question most carefully even before I went to the Madras Lying-in Hospital, and again when I determined to develop my Madras training by the more extended field of study in London, and on each occasion I had earnestly prayed for guidance. The problem soon solved itself, and in a little time I had more patients than I knew how to manage. Among the earliest of my patients was

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the married daughter of the Hon. Mr. V. R. He was a great gentleman, occupying a very distinguished position under Government, a man who was justly esteemed and admired by all who knew him. A baby was due to arrive for his daughter, and certain complications occurred. I was sent for and found a very disconcerting scene of anxiety, perplexity, and grief. The baby was dead and the lady's life in great danger. Mercifully I was able to do what was necessary for her immediate safety and received much kind recognition from the girl's father and mother. However, medical work does not begin and end with dramatic proceedings: whatever operations and emergency work may accomplish for the moment there is nearly always much need for patient endeavour and tedious treatment later on. My patient's mother, who had willingly permitted my efforts to save her daughter, greatly disapproved of my subsequent conduct of the case. At last she could bear it no longer, and one morning she informed me that she was willing for me to take the temperature and pulse of the patient, to look at her tongue, to express my opinion, and to order medicines, but more than that she did not mean me to do. In vain I explained that real convalescence depended on the treatment to which she objected. The great lady was in the habit of having her own way and would not be convinced. Finally, after much discussion and loss of time I gathered up my belongings, put on my solar-topee

(sun-hat), and said good-morning. Mrs. R. was much astonished. "But," she remonstrated, "you have not seen your patient." Of course I replied that the lady was no longer my patient as she had removed her from my care. I went towards the front door, and finally, with much decision in my manner, got to the end of the long flight of steps and was ready to get into my carriage. The dear lady, probably with the fear of her husband before her eyes, came into the front verandah and asked me to return. This I declined to do, until at last she exclaimed, "Oh, come back, and you shall do as you like." This was a most desirable victory, in the interests, not only of her young daughter, but of many others in similar circumstances.

Almost from the time of commencing practice in Madras I became aware that work among the women of the country would never be well done until I had at my command a hospital to which I could send the more serious cases. It was not only the poorer women members of the community who needed this form of succour in childbirth and in illness, but even the women of good family and those whose husbands or fathers were well able to pay for all medical and nursing care that might be necessary were terribly handicapped by the fact that, although a doctor might visit them twice or even three times a day, there was no one in their households who was competent to

carry out the treatment ordered; and by the fact that it was practically impossible to induce such patients and their friends to accept the ministrations of a nurse.

It was also clear that surgical operations, at any rate those that involved skin incisions, could not be safely performed under the conditions which existed in the patients' homes.

Another class of cases in which hospital treatment is very desirable is the large group of nervous and hysterical troubles to which all flesh is heir, but which are peculiarly apt to occur in women of an ill-balanced and emotional temperament.

These troubles sometimes take very odd forms: for instance, I was asked to see a young Mahomedan woman of good birth. She was the only child of a devoted and not very wise father and mother. The girl was strictly *purdah*, very pretty and endowed with considerable charm. She had good qualities too, a loving heart, as well as more intelligence than is possessed by the average well-born Mahomedan girl. For some reason that I never fathomed this young lady had developed a habit of having convulsions every evening, from 8 to 9, with perfect regularity. They commenced as the clock struck 8, they ended when it was 9 p.m. She then lay in a trance-like or fainting condition until it was 10 o'clock, but at that hour with unfailing regularity she revived and asked for her supper. It was evident that some-

thing had to be done to break so undesirable a habit. Medicines, naturally, were of no avail. So I tried plentiful sprinkling with cold water. The astonished girl ceased her convulsions and apparently returned to a normal condition. This triumph of mine was short-lived, for after a night or two the dreary drama recommenced. I then had recourse to water hot enough to astonish the patient, but not to injure her. This was just as effectual, and, also, as ineffectual, as was the cold water. I next tried mild shocks of Faradic electricity. This, as everyone knows, gives a most disagreeable sensation resembling that which might be caused by millions of pin-pricks. It had an immediate but very evanescent effect.

Finally, when I was almost at the end of medical resources, and when I realised sadly that my charming patient would never be well unless some quasi-miraculous change could be made in her mode of life, Providence intervened and she developed typhoid fever. The attack was severe, and her parents were quickly in despair about her. I told them that their fears were well grounded, and that unless they would permit me to remove their darling to the hospital I greatly feared that there was much trouble before us, and indeed I could not promise that the girl would recover. With great hesitation and many lamentations the young lady was removed to the hospital, and under the care of my excellent matron, Mrs.

Delange, and her little band of nurses the weary days of fever were at length ended and the girl very slowly regained consciousness and eventually health.

Lying on her cot day after day, too weak for any special amusement, she began to realise something of the usefulness, beauty, and dignity of a nurse's life, and little by little she formed a desire to help in their work. At first this took the lowly form of hemming dusters and towels, but as her strength gradually returned she was able to be of more definite service, and when her convalescence was finally established she begged to be allowed to train as a nurse, so that she might carry to other Mahomedan ladies something of the comfort and help that had secured her own recovery.

After a time the girl became an efficient and kindly nurse : she was of great service to me in the out-patient department, and more especially in the management of the many hysterical and nervous women who attended. She would often exclaim, " Oh, hysteria, that my old trouble ! I bring cold water, hot water and battery, that doing plenty good." If the hysteria took the form of inability to walk, she would vigorously seize the sufferer, and with the help of one of the nurses, partly coaxing, partly threatening, she would endeavour to induce the patient to use her powers of locomotion.

After I left Madras I heard that she had herself

entered the ranks of medical women students. From my knowledge of her character I should think that she must have made an efficient and acceptable doctor.

In India, at any rate in those long gone-by days, little was to be accomplished without the help of the Government, or at any rate without the initiative and sympathetic interest of the powers that be. I was extremely anxious that there should be a hospital dedicated entirely to the service of Caste Hindus and Gosha Mahommedans. Naturally there was a certain amount of difficulty and delay, but finally Lady Grant Duff, the Governor's wife, and Surgeon-General Furnell called a meeting of the chief members of the Indian community. There was the usual amount of speech-making setting forth the merits of the scheme. And finally a series of resolutions was submitted to the meeting, to the effect that it approved of the institution of a hospital exclusively for the use of Caste and Gosha ladies; that the hospital should be under my care; and that I should have such assistance as I considered necessary. Details were settled later, and without too much loss of time a very nice house in a large garden was found and dedicated to the service of the hospital.

Arrangements had to be very carefully thought out, for it was necessary not only to separate lying-in women and surgical cases from the general mass of patients, but it was also essential to provide

separate accommodation for the Mahommedans, the ordinary caste Hindus, and, finally, for the Brahmin ladies.

On the ground floor we arranged a large waiting-room for the patients, a consulting-room, and a separate room for examinations. Here also was a large ward for the ordinary caste Hindu ladies, with smaller rooms to be used as labour and lying-in wards. Upstairs the central room was devoted to the service of the Mahommedans, and a range of smaller rooms for the Brahmin patients. On the same floor were the apartments which from the beginning were reserved for the lady Resident Medical Officer, who would surely be needed when the hospital got into full work.

At first the staff consisted simply of myself, a most excellent European matron, and the necessary nurses. My work at this time was decidedly hard. I did not live in hospital but got up every morning in time to leave the house by half-past five or a quarter to six and went round to see Mahomedan and Hindu patients in their own homes. I got to the hospital at seven or soon after, and saw an average of about seventy patients. They came one by one into my consulting-room. I took the history of each one, examined and ordered her treatment, admitted to the in-patient wards such as needed this help, and prescribed medicines for those who were well enough to be treated at home. So far as the Tamil-speaking patients were concerned I needed

no interpreter, but I was thankful indeed that my matron understood and spoke Telugu, Canarese and Hindustani.

We had a pretty strenuous time with the out-patients and then went round to the thirty or more beds which were always full of patients. At first I used to return home to a belated breakfast; subsequently, when my Resident Medical Officer, Miss Pailthorpe, arrived from England, I found it more convenient and a considerable saving of time and fatigue to have breakfast with her at hospital.

Breakfast, of course, was a very movable feast, being dependent on the number of out-patients, the gravity of their troubles, and still more on whether or no operations had to be performed on the in-patients. These were always done in the early morning, before the heat of the sun and the fatigue of work had taken the fine edge off our energies.

From twelve to one I lectured at the Medical College to the women students. During the winter term my subject was Midwifery, and in the summer term first Diseases of Women and then Diseases of Children. At one o'clock I went home to see patients at my own house. I had usually finished with these about four o'clock and then had a meal that was partly lunch and partly tea, a bath and a change of raiment, and then a round of visits to my European patients. The dinner-hour was 8 o'clock; usually before that time my husband

and I had a breath of sea air on the beach, but after dinner there is little to describe, I was only too glad to get to bed. Not infrequently it happened that I was called out in the night, usually to go to the assistance of some native midwife who had found that her troubles were more than she could bear, and who, like other people, saw difficulties more clearly in the night season than she had done during the daytime. On one occasion I was called up three times in one night to three separate cases of neglected labour that needed operative interference. Returning home after the third of these excursions, I thought it useless to go to bed, so had my coffee and a hot bath, and made an early start for the next day's work.

Of course such a life could not continue long in the climate of Madras, and I think that the most trying part of it all was that I felt that no matter how over-fatigued or how ill I might be there was no possibility of rest without causing great damage not only to individual patients but to the work I had set out to do, namely, that of teaching the women of the country to rely upon, and to use, the help that Western medicine could give them.

When the Committee of Native Gentlemen who were responsible for the upkeep of the hospital saw that it was really going to be a success, they were quite willing for me to have an assistant, and

they were also willing that I should write to England and secure someone I thought suitable for the important position of Resident Medical Officer.

I heard of a young lady who seemed to me to be just the woman I wanted. Mary Pailthorpe was a graduate of Cambridge, she had studied at Newnham College and was classed equal to the twenty-fourth wrangler in Mathematics. She held the degrees of Bachelor of Medicine and Bachelor of Surgery, and had secured a good reputation at the Royal Free Hospital. This lady had been specially selected by Sir William Muir and his Committee to take charge of the Mission Hospital at Benares. It was, however, thought desirable that she should acquire a working knowledge of Hindustani before she took charge. It was also, of course, absolutely necessary that she should have some house-surgeon and house-physician experience in a hospital before being placed in supreme command.

By coming to Madras to work at the Caste and Gosha Hospital she secured all these advantages. She slept and lived at the hospital, she worked under me, assisted me at operations, and had sufficient time to learn Hindustani. The arrangement was an admirable one in all respects. Miss Pailthorpe was an exceedingly well-qualified and delightful colleague, a woman who understood how to command and how to obey. Her medical

training and knowledge were more than adequate, and her excellent previous work at Cambridge gave her a capacity for insight and understanding that a purely medical training could never have conferred. In addition to all this she was a devout Christian and a person possessed of considerable charm. We became very warm friends, and much of my best work in Madras was made possible by her capability and loyalty.

My first feeling in connection with her arrival was thankfulness that she would soon make it possible for me to be ill or to take a holiday without bringing the whole work to an end.

Before closing this chapter I ought to state that soon after the hospital was opened I wrote to Lady Biddulph, and through her obtained the Queen's gracious consent to the hospital being called the Royal Victoria Hospital for Caste and Gosha Women.

CHAPTER VII

EXPERIENCES AND PATIENTS IN INDIA

I HAVE already incidentally mentioned that I lectured at the Madras Medical College. This appointment was given to me almost as soon as I arrived from England. I had a letter one day about eleven o'clock from the Superintendent-General of the College, asking me whether I would accept appointment to the Lectureship on Midwifery, Gynæcology and Diseases of Children to the women students, and if so, when could I take up my duties. This should, he said, be done with the least delay possible, as the winter session was then beginning; the hour of lecture was from twelve to one daily. I wrote a note signifying my acceptance of the honour, and saying that I would be at the College at twelve o'clock. I went to the College, was very kindly received by the Principal, and lectured to the women on the anatomy of the female pelvis. This appointment as Lecturer was very gratifying to me. I loved teaching, and I was glad to be of some service to the young women students.

Thus began my work as Lecturer, which lasted more than twenty-five years, that is, including my

Lectureships at the Madras Medical College, and at the London School of Medicine for Women. In Madras I conformed to the rule of the College, which demanded that there should be examinations every third day. My students worked well and were able to take a satisfactory position in the Final examination.

Shortly after my appointment as Lecturer to the Medical College, I was honoured by being appointed Examiner in Obstetrics and in Gynæcology to the University of Madras.

The work of a woman doctor in India must necessarily be that of a general practitioner. She cannot possibly say to her patients, "I can attend you in labour, I can undertake to repair any damage done, I can look after your children, and give you medicine should you unfortunately suffer from malaria or dysentery; but without proper assistance and without someone to give the anæsthetic, I cannot do surgical operations. I am incompetent to give you relief if there be trouble in connection with your eyes, ears, nose and throat, and most certainly I do not know how to deal with decayed teeth, nor how to remove them if they are too bad for palliative measures." All such excuses, explicit or implied, would be not only futile, but really a confession of impotence, and would justify those people who say that women doctors are of no use in India, or indeed

anywhere. Any woman intending to practise in India, especially among the Hindu or Mahommedan women, must be not only as well prepared for her work as are men doctors, but she should at any rate aim at being as near perfection as is possible to mortals. No amount of time and trouble can be misspent in preparing oneself for work among very sensitive and delicate women who will be to some extent unwilling patients and keen critics, and on whose behalf in the hour of emergency and the time of doubt and anxiety it is impossible to invoke the kindly aid of a big brother-consultant. In England and in most European countries, the fledgling doctor has no difficulty in securing a thoroughly good consultant to give advice in unusual and difficult cases. In India the position is altogether different. When I began work in Madras there was no other woman doctor nearer to me than Bombay, that is to say, none within thirty-six hours' call. Even in Bombay there was only one, Dr. Edith Pechey Phipson, and although my medical brethren in Madras would at any time have been willing to come to my assistance if I had asked for their help, the fact remains that my patients and their husbands would not have permitted anything of the sort.

As to surgery, I had to instruct my sister how to administer anæsthetics, and my maid, Mrs. Franks, had to assist to the best of her ability. Those

were the days of so-called *antiseptic* surgery, and therefore in all operations that demanded an incision through the skin, it was *de rigueur* that the carbolic spray should be kept going throughout the operation. This part of the proceeding I confided to the care of my Mahomedan ayah, having no one more suitable. On one occasion she distinguished herself greatly by fainting at the critical moment and dropping the hand-boiler spray which she was holding on to the operating table. I feared not only the burning of my patient, but, more disastrous still, a possible explosion! However, I knocked the little boiler off the table and as it rolled along the floor my patient's husband kicked it out into the garden to explode at leisure. Such was the crew with whom one had to work in those primitive times, and probably similar circumstances still exist in the practice of women who have to work in isolation up country. It is partly on this utter absence of all friendly counsel and on the impossibility of adequate surgical assistance that I base my constant plea that no medical woman should be sent to work by herself alone either in the Mission Field, under Government, or as an independent practitioner. To do so is to court disaster, and is utterly unfair to the doctor, to the patient, and to the good name of European medicine.

Two or three anecdotes may suffice to show the

charming variety of medical work in India. One day a Brahmin gentleman asked me whether I could remove cataract from his mother's eyes. He explained that she was a devout woman, who suffered greatly from her inability to read their sacred writings. Of course I consented with pleasure, and it was arranged that he should bring the old lady to stay in the house of one of her friends, named Jévubai. I anæsthetised the eye by dropping in a solution of cocaine. The old Brahmin lady was plucky and had plenty of self-control. She did just what I told her and did not flinch, although the sense of touch is not lost when the sense of pain is abolished by cocaine. The operation was safely performed, and before applying the bandage I asked her what she could see. She replied with the deepest thankfulness and joy, "I can see Jévubai." I told her she would see no more for three days and applied the bandage. Subsequently her son brought her to my house for me to test her amount of vision. Of course she could not read English type, but she was able to see and to describe pictures, jewellery and such articles. After a time she came back for operation on the second eye; that also went well.

On another occasion I was told that a man from the country wanted to see me. Seated in my consulting-room I found a strong, middle-aged

farmer from the Nellore district. I asked him what he wanted, and he said that he had two teeth that gave him great pain and required removal. I advised him to go to the hospital because I was not a dentist, nor did I accept men patients. He was both sorrowful and indignant. He urged that he had walked seventy miles to see me, that he had brought me a beautiful and valuable Nellore cow and also two large jars of honey. Finally I could not resist the good man's pleading. There was no one to give him an anæsthetic, but he said he did not require one. He remained perfectly still until I was able to show him the two offending molars. It was quite true he had brought me both the cow and the honey, as fine a fee as could be desired !

On another occasion I was attending a Hindu lady who had some internal complaint that required much treatment. I used to go to her house twice a day and did my best to rescue her from a very painful and perilous condition. My ministrations were carried out *coram populo*—a somewhat hostile assembly of at least twenty men and women, members of her family. Their remarks were frank and not always complimentary, and my patient usually greeted me with: "Here is this pest come again." However, things went well, and a year or so afterwards I had the satisfaction of presenting her and her husband with a living child.

The husband took advantage of my constant attendance on his wife to get me to examine his boy's ears. He told me that the lad had been suffering some days from high fever and severe pain in the head, ear and neck. I took my mirror, forceps and other aural instruments with me when next I went to the house, and looked into the boy's ear. There I saw a small circular ring of bone, which looked dry and dead. In the presence of the swelling and discharge that existed, I was uncertain whether the bony ring was something natural or some foreign body introduced from without. I was strongly inclined to this latter opinion. I asked the boy what he had been putting into his ear. He strenuously denied that he had put anything in. His father, however, remarked, "Do not believe him, Madam, these boys are all liars." And so it proved in this instance, for when I had carefully removed the bony ring it turned out to be the end of a small ball-room pencil. It was pretty firmly wedged in, deep in the external ear, but after it was once removed all went well, and there was no extension of the inflammation to the internal ear.

Another of my patients was a tiny little woman, hardly more than a girl, who had been married for some time and had never had a child. This in the case of a high caste Hindu was a terrible misfortune, for if a woman does not bear her

husband a son who can redeem his father's soul from hell by performing his funeral obsequies, the fruitless wife will be superseded and the man will marry another who may not only gratify his fatherly instincts, but also enable him to comply with the demands of his religion. The young girl in question was very frail and delicate, and it was with great difficulty that I got her health into a more satisfactory state. However, after a time she improved greatly, and hopes of a family began to develop. She had an unfortunate pregnancy, complicated by whooping cough. This wasted her small strength by depriving her of necessary food and sleep, and when the time of her trial came, it was soon evident that without assistance the child would not be born alive. This I explained both to the patient and to her mother. Nothing, however, would induce either of them to consent to the necessary operation. Time went on, and my regrets for the loss of the baby gave place to fears for the mother, who was rapidly becoming exhausted. It was only at the eleventh hour that permission could be obtained for the use of the forceps. The girl was safely delivered, and might have done well, had she not fallen into paroxysms of grief on learning that the child was dead. She made up her mind that she would die too. She felt that she could never face her husband again, since she had not proved equal to bearing him

a living son. Fever quickly developed, her strength failed, and neither European medicines nor Eastern charms were of any avail. It was in vain that her mother tied a living cock to the girl's long hair and constantly excited the unhappy bird to fluttering and crowing. The fever demon was not exorcised. Then a pearl, a turquoise, and a bit of coral from the girl's necklace were burnt, powdered and mixed with water, the draught was poured down the patient's throat, but she did not revive. Poor child, her sufferings were short, but the ruin was complete. A fortnight or so later her mother came to see me and gave me an exquisite little silver model of a god in a car with tiny wheels and chains all complete. It is said that the Hindus have no word to express gratitude and that they are incapable of that sentiment, but this poor lady remained my firm friend up to the time that I left India.

My work amongst the ladies of Madras was by no means finished when I had played my part as physician, surgeon or midwife. They would not accept the services of nurses and I not infrequently found myself compelled to spend an hour or more with one patient, endeavouring to get her into the state of comfort that was essential for the success of her operation or for her safety as a newly made mother.

There was one lady in particular, a Mahomedan

of good birth, and a member of a wealthy family. Her father was a Hadji, that is to say, he had made the pilgrimage to Mecca. She was a very delicate young woman and was living under most insanitary conditions. Her delivery was normal, but unfortunately she was suffering from dysentery at the time. Probably in consequence of this, she fell into a septic condition and suffered from an inflammation in the big vein of the leg, which gave rise to much swelling, tenderness and fever. I had to do all that was necessary, all that a nurse ought to have done. I also supplied her with chicken broth and other comforts. She recovered, but about a year afterwards, after the birth of another child, I received a hasty summons from the family doctor, a good Mahomedan well instructed in Western medicine. His note was brief and much to the point: "Please come at once. They say Mrs. K. S. is dying—even in this last extremity I cannot be admitted." I went and found the poor woman extremely ill, probably with a clot in her heart. I mixed some brandy, sal volatile and water, hoping that, desperate as both the condition and the remedy were, this strong stimulant might possibly give the heart energy to force on the clot and relieve the block. My patient dashed the cup out of my hand, exclaiming, "That is alcohol; I won't drink it." My reply was, "Alcohol or not, it is all that is

between you and death." I mixed a second dose which met with a better fate, and somewhat strange to say, accomplished its object. The patient rallied, and I hope she got into no trouble with her spiritual adviser.

Another case that gave me much amusement and some anxiety was that of a young lady, the wife of a Mahomedan *moulvie* or doctor of law. The anxiety arose from the fact that although a native midwife had brought her child into the world some two or three weeks before I was called in, she had not received the necessary subsequent attention. She had been kept rigidly on her back in a very insanitary state. She had an enormous bed sore which, naturally, had caused septic fever. I had the utmost difficulty in the conduct of this case, but the patient eventually did well. The amusing part of the proceedings consisted in the conduct of the lady's mother. She was a Mahomedan princess and was strictly *purdah-nashin*, and as such could not be seen by her son-in-law. She was, however, an extremely lively lady and one who wanted to have her fair share in all that went on around her. Therefore when the *moulvie* was describing to me the woeful plight of his wife, the princess felt compelled to come forward and give me details from the motherly point of view. She was a funny little figure, very tiny, very thin and very active. She skipped about

the courtyard and verandah in which the proceedings were taking place, defending herself from her son-in-law's gaze by means of an enormous palm-leaf umbrella, the diameter of which was quite equal to her height, and from the shelter of which she at times almost completely emerged in her excitement and anxiety to have her say. Her son-in-law could speak to her though he could not see her. He addressed her as "Huzrut," that is to say, "Your Highness." He was extremely deferential to her and to her exalted social position, although he himself was a learned man, a doctor of Mahommedan law.

My practice was not only well diversified but it was very scattered. Madras is a long town, built on the sea-coast, and also extends to a considerable distance inland. My morning work required the use of two pairs of horses, one pair being posted at some convenient spot where they could take up the second part of the round. An endeavour was always made to arrange work so that there should be no unnecessary expenditure of human or equine energy, but with the best will in the world the sudden summonses and unlooked-for interruptions, which occur more frequently in India than at home, tended to make the work complicated and fatiguing.

Some of my readers may wonder why there is no record of my attempting any direct evangelisation

of my Hindu and Mahommedan patients. I did not think that it would be right for me to take advantage of the doctor's position of confidential adviser and friend to do any definite missionary work. Had I been an avowed missionary, then I should have been employed by Hindus and Mahommedans with their eyes open, and it would have been both my duty and my pleasure to help them to a comprehension of the Faith which makes the joy of my life. But, not being a missionary, I thought such a line of conduct would be dishonest. My aim at any rate was to live the Gospel, although under the given circumstances I could not preach it verbally. There is no doubt that much has been done for India and for the training of her population by the standard of life which Christianity requires of its professors and which ought to be observed by them, and much harm is done by those Europeans who fail to live up to their religious profession, and much scandal is caused when any European shows himself or herself indifferent to religion. Hinduism and Mahommedanism are really practical guides and influences in the lives of most of those who profess them, and the more thoughtful among their votaries are astonished and offended when Europeans who claim, and justly claim, to have a purer religion practically act as if they had none. Truly I feel that I did but little for India and her peoples, and that I have received

a more than adequate reward in the love that my patients gave me and in their kindly remembrance of me, which has survived the lapse of more than thirty-five years' absence, for in February 1887 I left Madras, never to return.

CHAPTER VIII

WORK AT HOME—MRS. GARRETT ANDERSON

I HAD long been aware that my health was failing and that I should be obliged to come home. Naturally I wished to postpone the evil day, and it was not until I found that not only were headaches and sleeplessness increasing, but also that the smallest exertion caused faintness, that I determined to put my fate into the hands of my old friend, Dr. Branfoot. His verdict was short and decided. "You must go home at once." I said, "Of course, that means the end of this winter session." But his reply was, "I do not know if you will be alive then; you had better go now."

From such a verdict there was no appeal. I had to write, resigning my Lectureship at the College and also my position as Medical Superintendent of the Royal Victoria Caste and Gosha Hospital. It was a terrible wrench that was involved. I had to leave my husband and my work, I was going home probably to die, and not at all probably to rebuild my fortunes on a better foundation. However, there was no use hesitating or repining; to stay through the hot weather was suicidal; and whatever

was going to happen to me, I felt that for the moment my one duty was to obey.

My father and stepmother were growing old; they were both over seventy years of age. They both wished to return to England with me, and we all felt that there ought to be no difficulty in disposing of Woodbourne to good advantage, for the little estate had been well developed by my good father.

During the voyage and first days at home there was ample time to face the situation and to form plans for the future. I had succeeded in building up a good practice in Madras, and had been earning about £2,000 a year, but I had not had time to do much in the way of saving. Indeed, my income had been spent partly in remittances to England on behalf of the three children, partly in supplying myself with the horses and carriages which were necessary for a large and scattered practice in a tropical climate. It is easier to buy than it is to sell, and the greater part of my capital was represented in assets not immediately realisable.

I had every reason to hope that if only my health could be re-established I should eventually do even better in London than I had done in Madras, but it was quite uncertain whether I should ever be able to work again. Meanwhile I had to try to work in order to educate the two younger children, provide my elder son with an expensive outfit,

and give some assistance to him during his early years as a soldier. In addition to all this the charge of my father and stepmother fell almost exclusively on me. I had undertaken all these financial burdens at the time when I was doing very well at Madras. Now everything was changed in me and in my circumstances. There was much reason for gravity and prudence, although none for despair.

Nothing could exceed the kindness of family, friends and professional colleagues. Mrs. Garrett Anderson saw me almost at once, and was very soon able to put a certain amount of work in my hands.

The first appointment that came my way was that of Joint Lecturer on Medical Jurisprudence to the School of Medicine for Women. Dr. Dupré was the Lecturer on Toxicology, and his colleague, Dr. Bond, Lecturer on Medical Jurisprudence, having retired, there was a vacancy. It was suggested that I should apply for the appointment. Luckily I had taken Honours in this subject at the M.B. examination. Luckily also I had testimonials to show that I had proved a successful lecturer and examiner in Madras. I was appointed, and straightway set to work to prepare the necessary lectures.

I received a very kind invitation from Lady Biddulph. She wanted me to go to Windsor so

that the Queen might learn through her of the welfare of the Royal Victoria Hospital. Various inaccurate accounts had been received and it was felt that a true statement of the cause of my resignation ought to be laid before the Royal lady who had permitted the hospital to be named after her. All went well after Lady Biddulph had been furnished with the necessary information. Of course the great trouble was that my failure in health practically coincided with the termination of Miss Pailthorpe's contract with the hospital. It was very unfortunate, but she could not delay her departure for Benares, nor could I postpone my journey to England. It was a matter of deep thankfulness that in those days when there were comparatively few medical women it was possible to find one able and willing to take temporary charge as did Dr. Bouchier.

Mrs. Garrett Anderson was anxious that I should make friends as quickly and as widely as possible. She urged me to join the National Indian Association. I did so, made friends with the Secretary, Miss Manning, and soon after my arrival in England attended a soirée given by the Society at 11 Chandos Street. Here I was introduced to many interesting people, all of whom cheered me with prophecies of abundant work and assured success, among them Sir Edwin Arnold, the author of the "Light of Asia" and editor of the *Daily Telegraph*. He was very much interested in all I could tell him about the

prospects of medical women in India. He told me that he had promised his daughter a cheque for £1000 on the day that she entered the London School of Medicine for Women with the intention of going to work as a doctor among Hindu and Mahommedan women. I am afraid Miss Arnold never claimed her father's cheque.

Among the interesting visits I paid at this time was one to my dear old friend, Florence Nightingale. She was greatly disappointed by my return home and was extremely anxious that I should go back to India as soon as health permitted. She was, however, very kind, and assured me that although work in England took the second place in her esteem, it would come to me quite as quickly as I should be able to deal with it.

Another kind and cheering friend was Sir James Paget. He told me to make haste and get well, for there was plenty of work to be done by medical women in England. He said it was merely a question of health, that there were few people in London with any knowledge of tropical conditions or tropical diseases. He also promised that he would send me all the women patients that came his way who needed such help as I could give them, and urged me to write a series of articles for *The Lancet*.

Dr. Ogle of Cavendish Square took me in hand medically, and gave me at least one excellent piece

of advice, which it would have been very much better if I could have followed. He wished me to promise that I would lie down for an hour after each meal.

In my diaries for this time I find that my practice in London really began on the 21st May, 1887, when no fewer than four or five patients presented themselves in one morning. This was very cheering, and hope was further kept alive by several kind proposals of work, which, however, never materialised.

Among the more feasible and dignified hopes of the moment was one that I might possibly be appointed Assistant Physician to the Great Ormond Street Hospital for Sick Children. In this I was greatly encouraged by Dr. Theodore Acland and some of the other members of the staff. However, that was not to be. Many years were to elapse before a woman doctor was elected to any such position.

At the end of July Mrs. Garrett Anderson went away for her holiday, and most kindly left me in charge of all her patients, both private and hospital. She generously arranged that any new patients consulting me during her absence should, if they were willing, remain mine. But of course she would take over her own old patients on her return.

By this time I was quite as busy as I could afford to be. I was lecturing to the students three afternoons a week, I was attending lectures by Dr.

Mercier on Mental Pathology and Insanity. I went down repeatedly to his asylum near Beckenham, I had charge of Mrs. Anderson's work, and my own practice was beginning to grow. Early in May I had moved from Earl's Court to No. 75 Park Street, Grosvenor Square. I had four rooms, consulting-room and waiting-room and a bedroom each for myself and my medical student son. My elder son had gone out to India and my daughter was still at school. These rooms were fairly comfortable and sufficiently central in position, but it was not dignified for a consultant to live in apartments, nor was it right that my patients should be admitted by a very obvious general servant with her sleeves tucked up above her elbows. The question of taking a house and putting up a brass plate was one that needed much thought and care. The expense would be relatively enormous, but the professional gain seemed to me to outweigh economical considerations. Of course, as usual in such cases, my advisers differed among themselves—some thought it too big and heavy a responsibility, but others, among them Sir Victor Horsley, Sir James Paget, Sir Henry Acland, and my legal adviser, Mr. Grove-Grady, were strongly of opinion that I ought to undertake housekeeping. Victor Horsley told me that waiting-room, consulting-room and patients' dressing-room must all be on the ground floor—very obvious, but not so easy to secure. He further told me that I must not go north of the Marylebone

Road, nor south of Oxford Street, that my house must be west of Portland Road and east of Baker Street. I hesitated. He appealed to the rapidity with which work and position were accruing. I said that perhaps this was all temporary, just a flash in the pan, and should I meet with one professional disaster, all would be over. "Not at all," said he, "everyone has his troubles, and even if one patient died who had no right to die, you would soon be forgiven." So I determined to make the plunge.

Then there came a weary, heart-breaking hunt for a suitable home. I went into at any rate a hundred houses, my father said he went into five times as many, Grosvenor Square, Brook Street, and all parts of Victor Horsley's parallelogram were explored. Many houses, otherwise eligible, had not the necessary light in the consulting-room, others had a step in the front hall, which might possibly cause sprained ankles or broken legs to my patients. In others the drains called aloud to heaven for repair, but the landlords refused to touch them. Other houses, quite suitable in structural conditions, were prohibited to me by premiums of from £1000 to £1700. At one time I had great hopes of a house in Bryanston Street. The lease was approved by Mr. Grove-Grady and structurally the house provided all that I required. But the surveyor could not pass the drains and I most reluctantly declined the lease. This disappointment occurred in Sep-

tember while I was away having a little holiday at Scarborough, and to finish the story of house-hunting I may say that it was not until October that I heard from Samuel Clarke & Co. of several houses in Harley Street. I went into them one after another, the last being at the extreme north end looking into Marylebone Road. Still, the house bore the magic name and opened into the great professional thoroughfare.

There was a small square garden in front and a truly magnificent plane tree. My spirits rose as I turned into the enclosure, and when I had investigated the house with its good dining-room, library and smoking-room, which I could devote to my professional purposes, the pretty double drawing-room and healthy bedrooms, I felt that this was the house for me, and as the lease and the drains proved satisfactory, I was able to enter into possession at the end of October, and 149 Harley Street has been my home ever since.

To go back a little, some part of my Scarborough holiday was devoted to the preparation of the Inaugural Address at the School of Medicine for Women which I had been asked to deliver on the 1st October.

The Inaugural Addresses which are delivered yearly in each medical school are, one must suppose, affairs of greater or less importance. They ought to set the key for the new students' endeavours throughout their curriculum. They ought also,

if possible, to reflect the opinions and sentiments of those who deliver them. I felt that my effort in this respect was a matter of great personal importance. I had already made friends individually with the staff of the school and hospital. I had made new friendships and re-knitted old ones with students past and present, but the opening day of the school was really my formal introduction to the colleagues who were to be my companions and to the students among whom I hoped to work.

It was soon evident that I had many friends and might expect a fair number of patients. I had been appointed Lecturer to the School and very shortly after this I was appointed Physician to Out-patients at the New Hospital for Women. In those days this hospital was domiciled in two small inconvenient houses on the north side of the Marylebone Road. The staff consisted of Mrs. Garrett Anderson, the Founder, her sister-in-law, Mrs. Marshall, Mrs. Atkins and Mrs. De La Cherois. The time had evidently come for reorganisation. Mrs. Anderson had started the hospital many years before and had associated those ladies with herself. It was quite wonderful what good work was done considering the extremely poor accommodation at their disposal, considering also that none of the staff had enjoyed such a medical education as is usual in the case of men doctors, still less had they enjoyed such careful training and ample hospital experience as falls to the lot of students nowadays.

Mrs. Anderson was one of those indomitable persons who are always willing and able to make the very best of their circumstances. She dominated them, and refused to be crushed by her difficulties. She was the one member of the staff who undertook major surgery, it was she only who was competent, and indeed she was the only one who was willing to encounter the difficulties and responsibilities inseparable from such work. Sometimes she felt that in the interests of the patient a surgeon of greater experience ought to operate. When this occurred no self-love nor false shame prevented Mrs. Anderson from inviting some outside surgeon to do what was necessary. On such occasions she played the part of assistant, and I have seen her meekly and carefully following the instructions of Sir Spencer Wells, Mr. Knowsley Thornton, Mr. Meredith and other consultants. The position was a very difficult one. Mrs. Anderson's absolute honesty and unselfishness demanded that an outsider should do this work for her, but she felt, and all her staff felt with her, that such an arrangement could not continue, that it was essential that she, or some other member of the permanent visiting staff, and not the consultants of the hospital, should take full charge of the surgical department. Mrs. Anderson believed that, with the experience I had acquired in Madras, I was the right person to help her in this matter. It was, however, necessary for her to proceed with extreme caution. Therefore I was

first appointed Physician to Out-patients, and after a time I was offered the post of personal assistant to Mrs. Anderson.

Meantime, my own surgical work had grown, and with it both experience and reputation. This made it easier for Mrs. Anderson to claim me as a colleague on the surgical side.

The next promotion came later on, when Mrs. Anderson left England for a long visit to Australia. She then told the Committee that she considered I was the right person to act for her, as I was already on the staff and had the necessary experience. As was natural, this proposal met with considerable opposition, but Mrs. Anderson had her way. I most thoroughly enjoyed my new work, although there were difficulties, as there were bound to be under the circumstances.

When Mrs. Anderson returned from Australia, she naturally demanded from me an account of my stewardship, and armed with this she met the Committee with the astounding proposal that she should retire and that I should succeed her, or rather, as she at first put it, that she should retire. The Committee remonstrated and implored her to remain, as she was their one and only surgeon. Mrs. Anderson persisted, then the Committee asked her at any rate to give them time to look round and find a successor. Her answer was that she had done better than that, for she had provided a successor. She reminded them that I had been in charge of her

work during her prolonged absence, that it had been well and successfully managed, and she said that in her opinion they could not do better than appoint me. She further told the Committee that if they wanted the surgery of the New Hospital to be a credit to it, they must for the time being put all the major surgery into the hands of one surgeon, for, as she very truly said, no one can operate well who is not operating constantly, and there was not at that time sufficient big surgery done at the hospital to enable more than one surgeon really to acquire the desirable experience. Mrs. Anderson was acute and far-seeing, she was perfectly right in feeling as she did that one surgeon only should be responsible; that each practitioner in charge of beds might, if she liked, do the minor operations on her own patients, but that she should still consider herself in honour bound to transfer all serious cases to the surgical ward which was to be inaugurated and placed under my care. Further than this, Mrs. Anderson advised the Committee to give me a regular assistant, who, by constantly working with me and performing the onerous duties of a first assistant, should herself be training to become second surgeon when the number of surgical cases increased sufficiently, and who would be ready to become senior surgeon on my death or retirement.

It is quite unnecessary to say that these proposals completely took away the breath of the Committee, but Mrs. Anderson had thought the matter out and

as Founder of the hospital and Senior Member of the Staff she was much too strong for the Committee to fight. Finally her wishes were carried into effect. Of course I am anticipating, and before all this happened the hospital had been removed from its small and inconvenient domicile in Marylebone Road and was housed in a good and convenient building at 144 Euston Road, nearly opposite St. Pancras Church. When I became Surgeon to the New Hospital my personal colleague, Mrs. Stanley Boyd, was probably just the very person designed for that position by Providence. She was keen, she quickly became a successful operator, and she was one of the ideal surgeons who know how to care for patients after operation as well as on the table. She was an absolutely sincere and loyal colleague, capable of much devotion both to her work and to her chief.

At first my position in the hospital was extremely difficult, and would have been very much more difficult if it had not been for the steadfast loyalty of my good assistant.

The time came later when surgery became a very marked feature in the work of the New Hospital. An additional ward was set aside for its service, and Mrs. Boyd was appointed Junior Surgeon to the institution. Even then she entirely refused to give up her assistantship, and for years we worked together both in private and in hospital until we so thoroughly understood each other's ways that it

was just like one brain directing two pairs of hands. This happy partnership continued until I resigned my position to the New Hospital for Women on appointment as Gynæcologist to the Royal Free Hospital in 1902.

CHAPTER IX

COLLEAGUES—EARLY DAYS IN HARLEY STREET

THIS might be as good a place as any other in which to give tiny sketches of the colleagues to whom I owe so much.

First and foremost must come Mrs. Garrett Anderson. She was a little woman whose bearing was distinguished by the alertness, determination and sincerity that were among her leading characteristics. Opinions as to Mrs. Anderson varied greatly, but those who knew her best respected and loved her most. There was a certain brusqueness in her manner that sometimes proved distasteful, especially to people who did not know her well enough to appreciate the underlying unselfishness and the devotion to duty that marked her whole career. She had been a Miss Garrett, the daughter of a well-known citizen of Aldeburgh in Suffolk. He was a man of ample means, and much respected. I should think that to him his daughter was indebted for many valuable gifts of character and intellect.

Some of Mrs. Anderson's sayings are well worth recording. For instance, when someone remarked to her that she must have had a great love for the sick to induce her to take up her arduous profession,

she replied, "Not at all, I became a doctor because I detest sickness." To a tearful mamma, who was sending her young daughter to study at the School of Medicine for Women, and who wound up a long interview by saying, "I know you will be a mother to my dear girl." Mrs. Anderson replied, "Certainly not; I have quite enough to do to be a mother to my own children." All the same, Mrs. Anderson maintained a delightful cottage at Aldeburgh which she kept constantly filled with those students who needed rest and refreshment which they could not afford to take without such generous assistance.

One day Mrs. Anderson received a letter from a gentleman saying that if gout were in her line of practice he would be much obliged if she would come and see him. The reply was, "Dear Sir, gout is very much in my line, gentlemen are not. I advise you to consult So-and-so."

My dear old friend, Julia Cock, M.D., Brussels, was for a long time Senior Physician to the re-organised New Hospital for Women. She came of a good Shropshire family, but was an orphan from her early years. When I first knew her in 1879 she was about eighteen years of age, very pretty and endowed with considerable charm. As stated on page 59, she was one of the members of the small class which studied biology under Professor Schafer. She and Miss Hitchcock sat next to each other and shared a microscope over which Julia shed many tears because, as she said, she was too young for her

work. Naturally the elder members of the class assured her that fault would soon mend. Her health was delicate and was greatly tried by the very strenuous work that falls to the share of a medical student, and after qualification at the Irish Colleges she had to take a long and complete rest. When at length her health was re-established she took the M.D., Brussels, with distinction, and it was *à propos* of her and her colleagues on the one hand, and the London students on the other, that the phrase originated which distinguished the alumni of the Women's School into two classes—"Brussels Sprouts" and "London Pride." As time went on, Miss Cock became not only a learned, wise and tactful physician, but also a woman of great administrative capability. She succeeded Mrs. Garrett Anderson as Dean of the School and devoted herself to the promotion of its welfare. She possessed the qualities that statesmen possess, and in her position as Dean she was able to employ these qualities to the promotion of the welfare of our much-loved School. When she became Senior Physician to the New Hospital for Women she certainly pulled her own weight in the boat, and was, I think, the leading spirit in the Medical Committee, to the care of which all questions referring to the medical conduct of the hospital were confided.

With regard to my dear surgical colleague, I first knew Mrs. Stanley Boyd between 1880 and

1882, at the time that I was completing my work as a student at the School. She was then Miss Florence Toms. She was a short, strongly built woman with a beautiful face and splendid health. I can remember giving her the sobriquet of "the good animal." This did her less than justice, for she was equally well developed on the intellectual and spiritual sides of her nature. Mrs. Boyd was a devout Christian, a faithful and unfailing friend, and a keen surgeon. She did many years' good work as Surgeon to the New Hospital, a post that she still held at the time of her premature and lamented death in 1908.

Dr. Jane Walker, the Junior Physician, who happily is still with us, was slightly known to me as a student; subsequently I knew her well as a friend and as a highly valued colleague at the hospital. Her attention was chiefly turned to medicine, but we pioneer medical women were never able to be what is called pure physicians or pure surgeons. We had of necessity in those early days to be willing to give advice to women as to their health, whether from the medical, surgical or obstetric point of view. Dr. Jane Walker has accomplished much hard and valuable work, and probably the two outstanding achievements of her career are the excellent sanatorium for tuberculous patients, founded by her near Colchester, and her very considerable services as a member of the Royal Commission on Tuberculosis, under the

Presidency of Sir Malcolm Morris. Dr. Walker's Sanatorium at Naylands, Colchester, is a very complete and delightful specimen of its type of institution, while the beautiful Chapel with its reverent and helpful services shows the spirit in which Dr. Walker tries to carry out her life's task.

Any account of the personnel of the New Hospital for Women, as I knew it from 1888 to 1902, a period of nearly fifteen years, would be incomplete without some tribute of gratitude to my very dear friend Miss Bagster, who for many years was the Secretary of the hospital, and was the bond of union of all its friends. Subscribers, Board of Management, In-patient, Out-patient and Nursing staff, were all alike indebted to her. Her business capability, her unfailing good temper, her cheerfulness, and her personal kindness to all, helped us to do our work with the maximum of profit and the minimum of friction. Miss Bagster has now retired, but her memory lives in the grateful remembrance of those who worked with her.

Still one more individual in the New Hospital must be commemorated, and this is Janet. Janet was a figure that ought to have been sketched by Charles Dickens. She was the Portress of the hospital, and this was fitting in an institution that rather prided itself on having no male member, not even a tom-cat! Janet was always watchful, kindly and helpful; she was the dear soul who looked after our physical comforts, and from whom

we expected and received ambrosia and nectar in the form of bread and butter and tea. Tea in the middle of an Out-patients' afternoon was not only desirable, but in our eyes it almost appeared to be necessary. It afforded a brief period of rest and also an opportunity for the exchange of views on patients and their ailments.

These thumbnail sketches of my dear and honoured colleagues seem to come in well at this point, because they must act as an introduction to my readers of those with whom I worked for many years, but I must now go back to the autumn of 1887 and try to describe the difficulties, disappointments, successes and pleasures of the next few months.

I had accepted the responsibility of a fairly big house, and had signed the lease, but I did not know whether my earnings would cover the expenses nor of any friend with whom this responsibility could be shared. This problem was most happily solved by the proposal of Professor Schafer that he and his family should live with me until such time as his new house at Croxley Green should be completed. He had begun to build the house and had put his old house at Elstree into the market; an advantageous offer for the latter was received when the building of the new house was scarcely begun. It was therefore evident to him that he must find a temporary home for a year or more. I was delighted with the offer, the financial arrangements proposed

were just and right, Mrs. Schafer would relieve me of the burden of housekeeping, while the old friendship subsisting between us was a fairly good guarantee that no undue friction would occur. They were to move in during the Christmas holidays.

At Christmas 1887 I find myself writing to my husband: "The weather is cold and the forecast is snow. But I am fairly cheerful and have cause to be so, for I have paid all bills presented to me and still have some money in the bank. My practice grows."

My income for the six months had been rather more than £200, and it was quite evident that if only my health improved, my prospects were of the brightest. Unfortunately I was still constantly delayed by illness and often had to lie down and rest, or even to take a day off. At this time my sources of income were patients—who constantly increased in numbers—pupils, and writing for the Press.

As to pupils, I coached three sets every day, the hours being 2.30 to 4.30, 4.30 to 6.30 and 8 to 10 p.m. They were all young women studying at the school, most of them preparing for the Final, qualifying, examination; but some of them were still studying the preliminary subjects. I was also helping my son with his study of the bones and of physiology.

I took a great deal of trouble in the teaching of my pupils, for I not only worked with each of them for the two hours' regular work, but I took them with

me to study specimens at the Pharmaceutical Society and the Museums, I also taught them case-taking, together with diagnosis, treatment and prognosis in the wards of the New Hospital. Of course I had as yet no *locus standi* there, but Mrs. Anderson had kindly arranged that the Resident Medical Officer should give me and my pupils access to any interesting and useful case that might be in hospital. Over and over again in my diaries and letters I find such entries as : " Miss Royce and Miss Smith came, and we thoroughly enjoyed our two hours' work. I had looked out microscope slides illustrating the subject and we were able to go thoroughly into the morbid anatomy and nature of the case under discussion."

The two real difficulties with my work during these early months were my health on the one hand and my lack of both carriage and secretary on the other. If I could have afforded a carriage much fatigue and waste of time would have been spared, and if I had thought of providing myself with a secretary I should not have had to sit up until twelve o'clock at night writing the twenty or more letters that needed answers daily, and the weekly occurrence of my Indian diary and four or five letters to husband, son, and friends would have been more easily borne.

It was something to get rid of the housekeeping when Mrs. Schafer came, but that was an infinitesimal matter as compared with the mass of corre-

spondence and the scattered nature of my outdoor engagements. In addition to visits to patients, to the meeting of my pupils at hospitals and museums, and my family and social obligations, I was diligently studying abdominal surgery by frequent attendance at the operations at the Samaritan Hospital and at the Cancer Hospital, to which I was invited by Mr. Jessett, I also attended courses of Post-Graduate Lectures, chiefly at Charing Cross, and Lectures on Psychology and Insanity by Dr. Mercier.

At Christmas I was again left in charge of Mrs. Garrett Anderson's work. As the Schafers were not moving in until after Christmas Day, I was able to have my father and stepmother to stay with me, and we had a big family party on Christmas Day itself.

In my diary for the 31st December I find an entry that I had ten consultations in the morning, several of the patients being new. This was a nice finale to the old year and a good promise for 1888.

In February 1888 I was definitely appointed Clinical Assistant to Mrs. Garrett Anderson at the New Hospital, so now I was Lecturer to my School and an Officer at the Hospital, two objects of ambition with every junior practitioner.

I remember that many years later, when I was a member of a delegation to Mr. Birrell on the subject of Medical Inspection of School Children, he said to us that it was useless to come to ask him to sanction

it, that he was well aware of the necessity, but, said he, "Go and convince the general public. Government neither can nor will legislate in advance of public opinion." All the more reason, therefore, that doctors and all others who have medical and social reforms at heart should be instant in season and out of season, convincing, persuading and threatening both by word and pen until they first instruct the general public and then communicate to that slow-moving deity some of their own enthusiasm. A doctor's duty does not end with prescribing medicines, performing operations, nor even in giving good common-sense advice to individuals. Doctors ought, so far as they may be able, to appeal to the public both by word of mouth and also through the medium of the Press in order to secure the many reforms of which we stand in need.

About this time I attended a preliminary meeting at the University of London Women Graduates' Association. Greatly to my astonishment I was elected President, and Miss Clara Collett was elected Secretary.

During 1888 my own work increased greatly. My letters and diary at that time appear to record a constantly increasing amount of professional work, of lecturing, writing, and coaching. I became Demonstrator of Practical Gynæcology to the New Hospital, and to me it is extremely interesting to note that I had the honour and pleasure of coaching

practically all the students who were preparing for their Final examinations.

On the 30th September of this year I wrote my first article for *The Queen*. This is interesting to me as noting the commencement of an association that has now lasted thirty-five years. In those days the women's part of the paper was edited by Mrs. Bateson, the predecessor of the kindly and able Mrs. Ursula Lyon. About this time, too, I find the first mention of a pupil named Margaret Smith. She was destined to have a very considerable influence over my work for some years. She was an exceptionally conscientious and good student; she came to me with another lady whom I already knew and who is still a much-beloved practitioner in London, Dr. Isabella Macdonald. I thoroughly enjoyed the evenings that I spent with these two ladies; they were always well prepared, and being blessed with a good general education and possessed of logical minds the work was easy and delightful to all three of us.

One morning in this autumn I had a visit from Sir James Paget. He had come to talk over my work and prospects and to offer me a Lectureship on Physiology to the Queen's Jubilee nurses. I took him into my consulting-room, which was now quite charming with books, pictures and Indian hangings. Sir James thought it was just what a woman's consulting-room ought to be, and I of course was charmed by his kindly appreciation. This great

surgeon and saintly man was one of my best advisers at this time; I was very anxious not only to do my work well, but to play the game, and to conform carefully to the rules of medical etiquette, which I found to be based not only on enlightened self-interest, but to have been framed for the promotion of the welfare of patients. I remember on one occasion when referring a question to Sir James, I wound up by saying, "I know what I should like to do, and what I believe to be right, but what about professional etiquette?" The reply was characteristic of the man, "Always do unto others as you would they should do unto you, and your etiquette will be perfect." *There* was guidance for a lifetime in one sentence.

In October 1888 an interesting case came my way. A certain lady home from India had consulted me a few months before as to the nature of a supposed tumour. I told her that there was no tumour, but that she might expect another baby. She was greatly upset and would, she said, much have preferred a tumour and surgical interference, because, she added, "I have had four children, and have lost three at the time of birth." I pointed out to her the entirely accidental nature of these regrettable deaths, and assured her that under proper supervision everything would go well on this occasion. She engaged me to attend her. Subsequently she asked me to recommend her a good man doctor, because her sisters had told her that where strong and clever

men had failed to secure living children a woman could not hope to succeed. I gave her the names of two or three of the leading obstetricians of London. To my surprise the lady returned to tell me that her husband wished her to carry out her arrangements with me, and that she herself felt every confidence in my ability to help her. When the time came, the complication that had wrecked her hopes on former occasions arose, but this time it did not prove to be insuperable, and after an anxious day, I was able to present her with a very fine boy. This lady was over fifty years of age at the time, but she nursed her child, and until he was over six months old he had no food but that of Nature's providing. The case was an important one for me, for her husband was a distinguished engineer, an Englishman who had passed all his working years in India, and who had a large and important circle of friends.

Work of all kinds increased, and in addition to a rapidly growing private practice and to the coaching of many students, both individually and also as members of a class twice a week, I was constantly sent for to administer chloroform both in hospital and in private to my colleagues' patients, more especially to those under the care of Mrs. Garrett Anderson. I also had private classes at the School for demonstrations of obstetric operations, in addition to the official demonstrations in Gynæcology. In these classes four or at the most six pupils could be

taught at the same time; if there were more it resulted in much loss of time because the other students would have to stand by and watch while one practised with the model.

The amount of work that pressed on me at this time can be gauged by the fact that in one of her letters to my husband, which was intended as a substitute for one which I ought to have written, my stepmother explained that she and my father had not seen me for a month, although they lived very near to me.

The time for the M.D. examination was close at hand. I did not register till the last possible moment, for I had had no time to study with any special reference to the requirements of the examination, and greatly doubted whether my knowledge of psychology would suffice to satisfy the very modest requirements of the University. However, I did register and went in on the 3rd December. At this time I was miserably ill and I do not think I should have got through but for the extraordinary kindness and help given to me by Julia Cock and Dr. Helen Webb. Dr. Webb was one of my pupils and had recently passed the M.B. examination. This quasi-maternal and filial relationship no doubt quickened her sympathy with me in my distress. These two dear people went with me to and from the University, came to me in the dinner-hour, saw that I had food, and discussed the various papers with me. Luckily the suspense of the examinees for the M.D. degree

is not long drawn out, and I was soon able to telegraph the news of my Pass to India.

No other woman was in with me, so that I was for a time the only, as well as the first, woman M.D. of London.

CHAPTER X

THE NEW HOSPITAL—MY OWN PRACTICE

EARLY in 1889 Mrs. Anderson, Mrs. Marshall and I opened a campaign to procure funds for the building of the New Hospital for Women in the Euston Road. For many years it had been known that the hospital was not likely to make much contribution to the success of women doctors until it was better housed, that it was equally impossible for it to be of much avail for the clinical instruction of students and that, in spite of all the efforts of the staff, it could not under its then conditions give to the patients the best opportunities of a speedy recovery from illness and operations. Mrs. Anderson's determination to provide another domicile was reinforced by the fact that the lease of the two houses in the Marylebone Road had run out, and that it was not practicable to obtain any extension. There was much hunting for a suitable site, which was eventually found in the Euston Road, nearly opposite to St. Pancras Church. The plan of campaign for providing funds consisted in Mrs. Anderson, Mrs. Marshall, and myself, talking of the project to patients and to friends, in the holding of meetings both in London and in

the country, and in ventilating the question in the Press. Roughly speaking, we arranged that Mrs. Anderson should usually speak on the inception of the women's medical movement, on the degree of success it had already obtained, and on her hopes for the future. Mrs. Marshall was to draw the attention of the public to the very good medical and surgical work that was being done under difficult circumstances. She was also to appeal for the means to build and equip a hospital in which medical women could more readily obtain experience, which should aid women medical students in preparing for examinations, and above all a hospital that could give patients the best hope of regaining health.

My share of the work consisted in pointing out how a fairly large hospital with modern scientific equipment would facilitate the sending out of women practitioners to India. I knew myself from personal experience how women doctors in India needed to be the very best of their sort. I had only to point out the peculiar swiftness of the development of disease under tropical conditions, the practical impossibility of the woman practitioner being able to obtain consultations and assistance from colleagues, and the great advantages, social, political and religious, that must accrue from a supply to India of well-educated, enthusiastic and devoted medical women.

Mrs. Anderson was not the woman to let the

grass grow under her feet, nor was she one to consider unduly the effects of overwork and excessive fatigue on herself and her colleagues. She therefore readily achieved her object and in so doing she greatly helped the women's cause, not only because she raised the necessary funds to build the hospital, but because she and her colleagues in the work succeeded in stirring up the interest of practically all classes of the community in the education of medical women.

Mrs. Anderson herself was a persistent, shameless, and very successful beggar. One day she came to the Building Committee and said, "I have secured a gift of £1000 to the Building Fund. I wrote to some friends of mine in the country, asking them to contribute liberally; they sent me £100, but I returned it immediately with a note, saying, 'If old friends and rich people like you send me £100, what can I expect from the general public? I quite thought you would send me £1000,' and the £1000 arrived by return of post!" In another instance she was equally successful. Her old patient, dear Mrs. Holland, gladly promised £1000 in three equal yearly instalments, upon condition that Mrs. Anderson would keep her alive for that time. Mrs. Anderson accepted the condition, knowing quite well that should Mrs. Holland unfortunately die, her children would certainly honour their mother's intentions. I may say that the generous old lady lived not only to see the

completion of the Fund, but also the opening of the New Hospital for Women. Among the many meetings at which we spoke, there was one at the house of my friend, Mrs. D. F. Carmichael of Madras. Surgeon-General Balfour was in the chair, and was able to reinforce all my arguments in favour of providing thoroughly competent and well-trained medical women for India.

Of course, there was much more to be done for the embryo hospital than the mere collecting of money. Architects' plans had to be discussed and criticised, and there were many difficulties to overcome, more especially because in digging the foundations many active, and very tiresome, springs of water were encountered. This caused delay, and also a certain amount of difficulty with surveyors and inspectors. I remember Sir Douglas Galton raising many objections at a time when Mrs. Anderson was away from London and I was representing her, so that I had my share of the responsibility.

The foundation stone was laid on the 7th May, 1889, by the Princess of Wales (now Queen Alexandra), the staff attending in their robes, the guard of honour furnished by the Artists' Rifles. Madame Antoinette Sterling sang "The Lord Is My Shepherd" quite beautifully, the Prince made a charming little speech and the Archbishop of Canterbury (Dr. Temple) pronounced the Benediction. The Princess had a little chat with me, recalling my

visit to Marlborough House before I went to India. Two days later was Presentation Day at the London University and my heavy scarlet robes seemed intolerably heavy on that intensely hot, bright morning. Lord Granville made some very kind allusions to the similar occasion in 1883 when I had been presented for my M.B.

Before I left London, I received a letter from Mrs. Thorne, Hon. Secretary to the School of Medicine for Women, offering me the Lectureship of the Diseases of Women, "probably more in accord with your work elsewhere than Forensic Medicine." I accepted the appointment, though I would rather have had the other half of the Joint Lectureship, that is, Midwifery.

About this time I became convinced that delightful as midwifery practice is, and well as it serves as an introduction to general family practice, it is of all forms of medical work the most extravagant in its demands on time and strength. My practice steadily grew in the direction of operative surgery, and as I had more work than time or strength, I had eventually so to raise my midwifery fees as to limit that branch very considerably. This was a grief to me, for women doctors are especially valuable in this branch of professional work.

At the end of the year I found that my income had been £950. This was not bad, considering that I had only been in practice in London for eighteen months, but it was not good enough. It

did not suffice to cover the expenses of the house plus the education of the two younger children, some assistance to my elder son, and the maintenance of my dear old people. I was therefore all the more thankful that in January 1890 Herbert passed his second professional examination for the Conjoint Board. However, under the most favourable circumstances he could not qualify until well on in 1892, for his success in this examination did not absolve him from the necessity of working hard, in preparation for the Intermediate Medical examination of the London University, at physiology and materia medica.

I transcribe a portion of a letter written to my husband in February 1890, which shows a fairly onerous time-table :

Monday.

- 9—11. Dental Hospital (giving anæsthetics under Dr. Buxton).
- 11—1.30. Consultations at home.
- 1.45—6. Out-patients at Hospital.
- Local letters and accounts in the evening.

Tuesday.

- 9—11. Coaching Miss M. in Chemistry, Botany and Materia Medica.
- 11—1.30. Consultations at home.
- 2—4. Visits to patients in their own homes.
- 4.30—5.30. Lecture at the School on Diseases of Women.
- 8—10. Coaching Miss S.

Wednesday.

- 9—11. Coaching Miss D. in Midwifery.
- 11—1.30. Consultations at home.
- 3—4. Lecture to Jubilee Nurses.
- 4.30—5.30. Lecture at the School.
- 8—10. Class of ladies at my house.

Thursday.

- 9—11. Coaching Herbert in Anatomy.
- 11—1.30. Consultations at home.
- 1.45—5 or 6. Out-patients at Hospital.
After this visits to patients.
- 8—10. Coaching Miss B. in final subjects, *i. e.* Medicine, Surgery, Obstetrics, and Gynæcology.

Friday.

- 9—11. Coaching Miss C. in Midwifery.
- 11—1.30. Consultations at home.
- 2—4. Operations and visits to patients at their houses.
- 4.30—5.30. Lecture at the School.
- 8—10. Coaching Herbert in Physiology.

Saturday.

- 9—11. Coaching Miss B.
- 11—1. Consultations at home.
- 2—3. Lecture at Blackfriars. Visits to patients.
- 8—10. Coaching Miss S. in final subjects.

From this time there are no more diaries and letters between my husband and me. What happened was this. He had retired from the service of Government and had returned, as all his friends advised, to the Appellate Bar. Almost immediately he had been put in charge of a Rajah's Appeal to the Privy Council, and with scarcely any notice he started for England. He appears to have begun a small diary, which runs from the 17th September to the 31st December, 1890. In his first entry my husband speaks of having hard work to get in order the papers in connection with the Rajah's Appeal, and of having secured a berth on the P. & O. S.S. *Peking*. On the 21st he made over charge of certain items of business, and deposited his own will with a friend. His journey home

appears to have been entirely uneventful, and quite pleasant. He arrived in England on a miserably foggy night, the 14th October. All the family were delighted to see him, and although we knew that his stay could not be a long one (because he would probably have to return to Madras and continue his work) we none of us suspected in what manner the visit would terminate. My husband was in good health and good spirits. We celebrated our Copper Wedding in December; he gave me a brougham as a Christmas present, and we had some very delightful visits to old friends. I have always been glad to remember that we had this pleasant little time together, and that he saw his two younger children. They had, of course, grown and developed out of all recognition during the seven and a half years which had elapsed since he and I went to India together in 1883.

We also visited the Schafers at Croxley Green, the Underdowns at Manchester, and other friends, but at the end of the year I was very busy with lectures, pupils, and patients, while much of my husband's time was spent in preparing his Appeal case for the hearing of the Privy Council. Altogether his visit home gave both of us great pleasure, and he was evidently cheered and soothed by the affection of our children.

Time passed all too quickly and we began to realise that the hearing of the Rajah's Appeal would soon take place. My poor husband was much

distressed by the probability that the Appeal would be dismissed because the sworn facts disclosed little ground for hope. This was a real sorrow to us both, for it was all too likely that the Rajah would not be capable of understanding the legal aspect of the case, and would be disposed to attribute the dismissal of his Appeal to some failure in his advocate's presentment of it.

In January 1891 there was a severe epidemic of influenza in London, and my husband was one of its victims. He was taken ill on the 4th January, double pneumonia supervened, and on the 9th he passed away, and I could only hope that he was taken from the evil to come. It seemed as if his hopes of professional success depended greatly on the result of the Appeal he had brought home, and if that were dismissed, there appeared to be little hope of other similar work being offered to him. He was at this time over sixty years of age, and was of an anxious disposition—he would have grieved desperately if he lost his case, and felt that his prospects were thereby injured.

In spite of my own loneliness and sorrow I could see the mercy that spared my husband this bitter disappointment.

Life went on as usual and work steadily increased, and was better paid than it had been. I remember well that when I first came to London I asked Mrs. Anderson what fee I ought to charge for an ordinary consultation at my own house. This was

when I was living in lodgings in Park Street, Grosvenor Square. Mrs. Anderson looked round and said, "I should think one guinea—you are certainly not smart enough for two." However, by 1891 my environment was greatly improved and I felt that for those who could afford it two guineas was by no means an excessive fee.

Some of the patients who fell to my share were peculiarly gifted and charming women; thus a certain Maharani came from India intending to place herself in my hands. She accepted the necessity for operation cheerfully and was never depressed or doubtful of the result. She told me that a great friend had asked her why she put her life into the hands of a woman surgeon, and had added : "You can get the best men for the same money." But her reply was to the effect that she had come from India intending to place herself in my hands, and that nothing would induce her to change her plans. Mercifully all went well, and the Maharani and I were equally gratified when the kind telegram from Queen Victoria inquiring as to her safety could be cheerfully answered. The Maharani was a woman of great character and original views. One day when she was complaining of a headache I asked her why she did not pray that she should be relieved. She replied that she never prayed for herself. I asked her for whom she prayed. She said for His Highness and the children. I said, "Very good, then pray for His Highness's wife

that her headache may be cured." When she was staying at an hotel in the country she overheard her little son, aged somewhere about seven years, boasting that his father was a great Rajah, and that in time he himself would be Maharajah. She called him to her and told him that princes and other gentlemen never boasted about their family and position. She pinned a towel round him and told him to go and sweep the drive, so that those who had heard him boast might see his humiliation.

On another occasion, when her stepsons came home from Oxford, she found fault with them, saying that they had lost their good manners and had had their heads turned by success. She proposed therefore that they should breakfast on porridge only, for a week or more, in order that they might be convinced that neither high estate nor much wealth alters the essential personal value of any man.

CHAPTER XI

VIEWS AND EXPERIENCES

I HAVE dwelt with considerable fulness on the events of my first five years in practice at home, for that was my time of difficulty and probation, and I have abundant material in the letters and diary sent to my husband. But now the story of my life seems to divide itself under certain main headings, such as Professional Work and Colleagues; Home Life and Holidays; Social Work; The Growth and Development of the Medical Women's Movement. It is also part of my design to suggest the struggles and difficulties which are likely to fall to the share of junior practitioners, and especially I want to show that these are not insurmountable. Another object I have in view is to convince the world that constant attention to professional duties is by no means incompatible with the natural and paramount duties of a wife to her husband, a mother to her children, and those of one member to the other members of a family circle. I am also anxious to show that participation in the work of Preventive Medicine and in the endeavour to promote social and moral well-being is the natural outcome of the human interest that

one cannot but take in the patients committed to one's care. The principal aim and object of a doctor's life ought necessarily to be the glory of God and the benefit of the human race, and it is under this aspect and towards this end that I want to record my own small personal experience.

Probably the interval between 1891 and 1902 represents a sort of tableland in my life. I had by this time developed as large a practice as I could manage, I had made many friends among my fellow-practitioners and was fairly well known in the medical world, I was a Hospital Surgeon, Lecturer at my School, and I wrote a good deal for the Press. Outside appointments of various kinds fell to my share; for instance, I was Medical Referee for most of the big Missionary Societies whose headquarters are in London, Lecturer to the Queen's nurses, and to several other similar institutions, as well as Examiner to women candidates for the Civil Service.

During these ten years there was but little change to record in my professional life. My work at the New Hospital in Euston Road was exacting, and very interesting, but it soon fell into a peaceful routine which meant much work, many anxieties, and ample causes for thanksgiving.

Twice a week I made my official visit to my ward, and from 9 to 10.30 or 11.0 a.m. I heard my house-surgeon's reports on new admissions and on the progress of old patients. I went from bed to bed

with her and with the students attached to my post. Each of these girls was responsible for the record of the primary investigation and for the subsequent notes on the cases assigned to her. I listened to their reports and noted the house-surgeon's confirmation or correction of them. Then I examined the patient and dictated such statements as I thought good. I endeavoured to do for my students and patients as Dr. Baxter had done for me and my fellows in the days when I was a student, and following in his footsteps—*longo intervallo*—I also gave them, and other students who came in voluntarily, clinical lectures on the more instructive cases; also twice a week I had my regular operating mornings, and was careful to be ready to begin at 9 a.m. If I did not insist on this I knew that my own work would suffer throughout the day and that anæsthetist, first assistant and students would never know what engagements they could safely make. Even so, surgical operations are always uncertain in duration and, no matter how carefully one may arrange, there is always some degree of uncertainty as to the time at which the morning's work can be finished.

These fixed appointments at hospital did not represent the whole of the work there. Serious cases had to be visited daily, sometimes twice a day, and emergency work had to be done when necessary whether by night or day. Not infrequently we had "distinguished visitors," both

home-grown and foreign. Among the former I remember Sir John Bland Sutton and Sir Thomas Smith, and of the latter, Professor Gusserow and Dr. Howard Kelly.

Concurrently with the hospital work there were the formal lectures to be given at the School. I had been appointed to the chair of Lecturer on the Diseases of Women in 1889; my colleague who held the chair in Midwifery was Dr. Ford Anderson. When he retired I held the combined Lectureships for a time until Mrs. Vaughan Sawyer relieved me of the Gynæcology, and finally I resigned the chair of Midwifery in 1908, in favour of Lady Barrett. I had then been lecturer in Madras and London for an unbroken period of twenty-five years, and I felt that it was a duty to let someone else enjoy so coveted an advantage. As long as I was lecturer I carried out the Madras plan of frequent vivâ voce examinations and also gave the students a written examination once a month. These papers I corrected, assessed, and returned to the students, for I knew by experience how great is the value of this form of tuition.

The next great professional event of my life was my appointment as Gynæcologist to the Royal Free Hospital. Dr. Hayes, who had long held the post, retired, and the vacancy was advertised. Mr. Berry came to see me about the matter. He advised me to send in an application, and told me that he thought it was likely to receive favourable

consideration. Of course I wrote out the application, together with a record of my qualifications and previous experience both in India and in England. I sent this in together with selected testimonials and then awaited the result.

On the appointed day I was invited to meet the Board and was interviewed. The interview was just what such trials nearly always are. The manner of the Chairman and of the Committee was distinctly friendly, and their questions apparently purely formal. There were some good men in for the appointment, and one of them very generously said that, if he were not appointed Gynæcologist, he would be quite content to work under me as assistant. However, in the long run, I got the senior appointment, and Ethel Vaughan was appointed Assistant Gynæcologist to the hospital. It is unnecessary to say how much pleasure these appointments gave me. I was very grateful to Mr. Berry for the way in which he had stood my friend throughout the business.

Of course, becoming Gynæcologist to the Royal Free involved my resignation from the staff of the New Hospital. I had been Senior Surgeon there for a long time, and had enjoyed delightful work, always feeling sure of the ability and loyalty of my good colleague, Florence Boyd. She naturally would now succeed me, and it was good to think of her as being Senior Surgeon to the hospital.

I was very much pleased at the appointment of Ethel Vaughan as Assistant Gynæcologist. She was ultimately my successor and from the time that we took up work together on All Saints' Day, 1902, I bore in mind that Ethel was there not only to help me and to enable me to work well for the hospital, the patients and the students, but that she was also there to fit herself to bear the burden of independent work and responsibility. I therefore placed beds at her disposal, although unfortunately I had all too few myself, and I frequently assisted her instead of always requiring her to assist me. Ethel Vaughan was a splendid young woman, full of life and enthusiasm. It was a great pleasure to work with her, and to recognise in her one of the best and most skilful surgeons of the next generation. She had charge of the Out-patient department, and under her tactful and able management the number of patients increased by leaps and bounds. She was not only a good diagnostician, but she was also a born teacher, and the students who crowded to her Out-patient mornings had every reason to be thankful for her good gifts.

It was extremely important that she and I should throw our whole souls and energies into our work, for if the proper study of mankind is man, undoubtedly the proper study of women doctors is woman. Our real *raison d'être* lies in our ability to recognise women's special troubles and in our aptitude and sympathy in dealing with

them. Anything like brusqueness and lack of tact are unpardonable offences in women doctors, and I was thankful that, in all her dealings with her patients and her pupils, Ethel Vaughan showed herself not only a good surgeon and a brilliant and painstaking teacher, but also a loyal and sympathetic friend to students and patients alike.

As Gynæcologist to the Royal Free Hospital I had greater opportunities than I had had before, more especially in the way of teaching. I enjoyed my work to the fullest possible extent, and I found my colleagues kind, courteous and helpful. We had a very useful custom. Once a week, on Wednesdays, we held what were known as Consultations—several of us would each bring a case before our united colleagues and students; we read the notes giving the history and the present state of the patient; we gave our own views as to diagnosis and treatment and wound up with a humble petition for criticism and guidance. I remember one excellent rule laid down by one of our surgeons, Mr. Roughton. It was to the effect that in the case of abdominal disease no surgeon should make a final diagnosis until the abdomen was open to investigation!

The one great drawback to my work at the Royal Free Hospital was the inadequate number of beds allotted to my department. Under Ethel Vaughan's management the Out-patients increased very rapidly, and she had many more serious and

interesting cases than could be admitted to the very few beds allotted to me. Thus much injury was caused to the patients, and much loss of instruction to the students.

I am thankful that there is now an obstetric unit at the Royal Free Hospital and that it was possible to appoint Dr. Louise McIlroy to be its first Director. She has sixty beds, and ample assistance from competent colleagues, and thus she has the opportunity of giving her students such a training as none of her predecessors enjoyed either as students or as teachers. She has also the time and the material for careful and constant research work, and we are looking to her and her colleagues to make valuable additions to our theoretical knowledge of midwifery and gynæcology and also for those practical developments in technique that can only come about as the result of ample experience flourishing in an atmosphere of calm and comfort, unharassed by the eternal lack of pence and beds from which we suffered.

The passage of time in every life is marked by events that are apparently of little interest outside the immediate family, but which have a really profound significance owing to their inevitable influence on the environment and on the characters of the other members of the group. To me, and to my character and position, the events of these years were full of importance. The death of my father left me the head of the family. The coming of the

grandchildren caused the development of a new sphere of duty and responsibility. In 1896 Mrs. Underdown died. I had seen much of her towards the end of her life, for she let her house in Manchester, came to reside permanently in London, and consequently was again my patient. For some months before her death she had suffered much, and, when the summons came, one could not but feel that the great change must have been one of joy for her and thankfulness for those who loved her.

During the year 1897 there were at any rate three occurrences that could not fail to make a considerable mark on my life. In May that year we lost my stepmother, to whom I was so much indebted for the good education that proved the foundation of my fortunes. She was by no means young; indeed she was getting on towards that age of fourscore years at which time the Psalmist assures us that "our strength is but labour and sorrow, so soon passeth it away and we are gone." In her case it is quite true that her days of usefulness had ended so far as the outside world was concerned, but as a loving wife and well-trying companion on life's way, she was of much importance to my father, who was five or six years her senior. Mercifully for them both, her last illness was very short and, so far as one could judge, not painful. In December of the same year I lost my dear old father.

From the time that I came home in 1887 to the termination of his life ten years later he was goodness itself to me. He never spared himself any exertion or trouble that could ensure my personal happiness or my professional position, and by keeping my accounts, and also by watching over the appearance of my house, he contributed largely to my success.

His last few winters were spent at St. Leonards. I went down frequently for the night to cheer him. On the morning of the 11th December I thought him so ill that I did not like to leave him. I went into his room about half-past eight, and he greeted me with : " My dear, why are you not getting ready to go to London ? " I told him I did not intend going to London that day. He replied, " My dear, you must go, your patients will be waiting for you ; duty is duty, you know." I told him I would rather stay with him. He replied, " Oh, my dear, you are making me very unhappy ; if you love me you will go." I asked him whether he really meant this, and on his assuring me that it was his earnest desire, I obeyed. Shortly after I reached London there was a telegram announcing his release, and so ended my father's life of absolute devotion to duty and of a steady correspondence with the Divine Will so far as he understood it.

My father's death coincided with my last academic effort, and also with the end of that difficult period during which I had to consider how

to prevent the increase of expenditure outrunning the increase of income. In this matter my father's advice had been of the greatest value to me, and his loving care of my private accounts and of my accounts with my patients had helped me to realise exactly where I stood, and into what liabilities it was fair and just that I should enter. His assistance lasted to the very end of my difficulties and I am most thankful that this was permitted.

The third great event in 1897 was my successful candidature for the degree of Master of Surgery. I had been up for the examination the year before, but had then failed to satisfy the examiners. I was told that my papers on Surgery and my practical and operative work were excellent, but that the Anatomy was not up to the requirements of the examination. However, in 1897 all was well, and my only regret in the matter was that the telegram announcing my success came too late for my father's gratification.

The marriages of my two sons came before the South African War, and Herbert went out as one of the doctors to the Langham Hospital. No doubt it was the experience gained out there that accounted for the relatively small death-rate from typhoid in our subsequent Armageddon in France and Flanders. The conditions in South Africa were appalling, and had they been repeated on the much larger scale of the war against Central

Europe, the havoc would have been absolutely disastrous.

For the sake of convenience it may be well to forestall events here, because I am alluding to family matters, and describe the circumstances under which my last and only really successful portrait was painted.

During 1907 my friend, Miss Alice Ravenhill, had been collecting money to give me a presentation portrait. Of course I was supposed to know nothing about it, but on two or three occasions subscriptions happened to come into my hands, and naturally the secret was soon out. When she thought she had enough money in hand, the question arose as to the artist to whom the task of painting the picture should be entrusted. Several artists were discussed by the Committee, and finally their choice fell on Mr. Hugh Rivière. I do not think that it would have been possible for them to have made a wiser selection; he is not only a great artist, but he possesses the gifts of sympathy and charm. I have sat for my portrait five or six times, and it was only in the case of Mr. Rivière that I did not feel, as most people do during the operations of a photographer, that one is gradually being turned into stone. He seemed to be able to see right through one's envelope of flesh, and to study and sympathise with the self which it enclosed. We talked of many things, and found, as was to be expected, points of agreement, and

other points on which we held different opinions. But the sittings were never dull and never prolonged. I should think that in all they did not amount to ten hours, and yet the portrait is the only satisfactory one that has ever been painted of me. I believe that Mr. Rivière himself considered the picture one of his successes. It was exhibited in the New Gallery in 1908, and two or three times has been lent to Mr. Rivière for exhibition elsewhere. The delightful thing about the subscriptions was that they included so many from my friends and came from very different classes of people. For instance, among the subscribers were Earl Spencer and my chauffeur. Miss Ravenhill arranged with my old friend, Lady Frederick Cavendish, to have a reception for the presentation of the portrait in her house at Carlton House Terrace; she made a charming speech, explaining that my friends did not in any way consider that my professional life was drawing to a close, but that they were anxious to assure me of their affection, and of their hope that I should continue to work for many years to come. I had an excellent photogravure taken from the portrait. I signed each copy, and much more important than my signature was that which Hugh Rivière kindly appended. A copy of this was sent to every subscriber, and a reproduction forms the frontispiece to the present volume.

Resuming the chronological order of my experiences, I recollect that early in 1902 there was

a domestic event of great interest to me personally, for it gave me an inside view of how patients act and feel when confronted by a surgical emergency. I was in Rome for my Easter holiday, staying with my dear friend Mrs. Bethell. On the eve of the festival, having gone to bed very tired after witnessing a prolonged ceremony in St. Peter's, terminating with the exhibition of relics from a balcony, I was awakened in the middle of the night by a horrible pain, accompanied by nausea, vomiting and collapse. As I lay on the floor the conviction flashed upon me that this was appendicitis. I had had several less violent attacks before in England, but had always been too busy to pay any attention to them. After a time I was able to get back to bed, and shortly afterwards my temperature rose, and there were all the usual symptoms of appendicitis. It happened that a doctor friend came in the next day to ask me to see his wife who was ill, and he most kindly took charge of me. After a few days he was joined by another physician, and I had the benefit of the advice of the two. I was subsequently very much interested at the insight this illness gave me into the psychology of patients. Almost from the time of that initial agony I had been aware, consciously or subconsciously, that the appendix had perforated, and that an abscess was forming, but the odd thing was, that often as my two doctors discussed the condition of affairs before me, I never told either of them of my own conviction.

I let them talk, and I let them arrange, and finally I consented, without desire, and without deprecation, that a surgeon should be called in. The case was urgent and there was no time to get anyone from England nor Professor Kocher from Berne. My advisers therefore suggested Signor Mazzoni, who had the distinction of being Surgeon both to the Pope and also to the King of Italy. He immediately told me that there was an abscess which must be opened, but I replied that I had known that ten days before.

The next morning the operation was performed, and proved that Mazzoni and I were perfectly right in the diagnosis of perforation and the urgent necessity for operation.

From this time all went well. Certainly I had ten days of peritonitis and of great pain, but the peritonitis was mild and progress was satisfactory. During these ten days I learned two things. First, what it is that patients do when they lie hour after hour, and day after day, neither reading, writing, knitting nor talking, silent and uncommunicative—they are simply hanging on to life, waiting for the storm to roll by. The condition is by no means one of unrelieved suffering, and certainly it is not one of mental depression. Every faculty is present and at work. In my case, at any rate, the emotions were not acute, there was simply a sense of waiting, and an appreciation of the value of patient endurance.

The second lesson well rubbed into me was that when a really painful dressing is necessary it is much better to give the patient a whiff of chloroform. Until Mazzoni extracted yard after yard of gauze I did not know how bad pain might be to bear, and, while he was doing it, I registered a vow that never again would I allow one of my patients to endure the altogether avoidable suffering of a first bad dressing.

After ten days life became something of a joy, and I had the finest rest that I had known for years. I had few cares and few responsibilities, I found that little by little everything except my own personality had been taken from me—my money, my keys, my jewellery, and even my letters. I quite saw the wisdom, nay, the imperative necessity of it all, but it struck me as amusing that my letters were opened for me and that I was regaled with selected passages only. In fact, I entirely agreed with King Edward, who, when someone on his birthday after his operation wished him a happier year, replied: "Do not say that, this has been the happiest year of my life."

It was a blessing to me that during the whole of this illness my daughter was with me. It was entirely thanks to her that I had such good medical and surgical attention, thanks to her also that I had no worries or troubles. She wrote all the necessary letters and made every possible arrangement herself. Naturally she felt the responsibility of being the

only member of the family in attendance, and she had many hours of supplementing my two nurses, and, still more, of writing interminable letters to her brothers and other friends.

There was much discussion as to our homeward journey. At one time it looked as if some able-bodied friend would have to come and fetch us home; indeed a very beloved patient, who was far from being a rich woman, sent my son a cheque for £100, in order that he should come to Rome to fetch me. This was, of course, very gratefully returned, and finally we were able to arrange for a compartment in the *train de luxe* from Rome to Paris, where my son met us and took care of me for the rest of the journey.

It is extraordinary how good and kind people are to fellow-creatures in misfortune. Had I been Mrs. Bethell's own sister she could not have done more for me than she did. She had a most advantageous offer for the room in which I was, but she entirely declined to have me moved to the Anglo-American Nursing Home, nor would she even permit me to be put in any other room to set free the one on which another lady had set her heart. On the day of operation, one son of her family superintended the preparation of a temporary theatre, while old Mr. Bethell and another son, who was a priest, went to church to pray for me. The guests in the house were extremely kind to my daughter in her perplexities and anxieties, while

Fanny Hickman (a young friend travelling with us) was goodness itself in her comprehension and sympathy.

When I reached home in the middle of May it was not at once possible to resume full work. I had to get leave from my hospital and I had to be contented to see no patients at all for a time, but I soon managed to persuade my gaolers that a few each day would be good for me. Naturally operations were out of the question for the time being, for the wound had not yet healed.

Throughout the summer months of 1902 I had to feel my way back to work very cautiously, and it was not until after the August holiday that I was able to undertake any really big surgery. One of my cases at that time stands out in my remembrance, because it affords an illustration of the slenderness of the thread on which a really smooth convalescence depends. I had operated on a young girl for appendicitis. The operation was a particularly smooth and easy one, and I was somewhat astonished when, on the fourth or fifth day, there was an unlooked-for rise of temperature.

However, on careful questioning I learned that on the third day after the operation she had been permitted to eat raspberry and currant tart, and the irritation caused by the pips and skins was responsible for the fever. Happily all danger subsided under the benign influence of castor-oil ! This incident made me realise how impossible it is for

doctors to be too careful in the directions that they give *à propos* of treatment and diet. It is true that it is often wearisome to write down the necessary directions, and frequently when time is very precious one is apt to feel that it is an absurd rule. But experience convinces me that it is the right thing and the only thing that can give the physician or surgeon a sense of having thoroughly done all that is possible to command success. In fact, these precautions are on the same level with that which demands that either the surgeon or the first assistant shall be satisfied that all sponges, veils, and instruments are counted at the end of an operation, and that has made it an invariable rule that no piece of gauze and no sponge or veil shall be divided into two during an operation.

About this time I was invited to meet the Princess of Wales at a grand function at Holloway College. The College is a large, comfortable and suitable building on the high-road from London to Camberley. It contains a fine chapel, good lecture-rooms, and ample accommodation for the young women students. Seen on a fine summer's day, when the gardens were in perfection, it struck one as being admirably calculated to assist in the physical as well as the mental development of the students. I enjoyed the day very much and was pleased to see our beautiful and gracious Princess, but I cannot think how I got the time to do it. The next time that I saw her was at Marlborough

House when she had a reception of the Presidents and Vice-Presidents of the League of Mercy. I was one of the latter. Our chief duty was to collect £20 a year for the objects of the League. Unluckily, after a time I had to resign because I had not sufficient leisure to do the necessary begging.

In the autumn came the Liverpool Church Congress. I stayed with my old pupil, Dr. Frances Ivens, in Rodney Street, and had a most delightful time. These meetings, like those of the British Medical Association, are valuable not only from the purely professional point of view, and for the diffusion among the profession in general of new knowledge and experience acquired by some of the members, but they are always most delightful opportunities of meeting old friends, and of making new ones. There are many people who dwell in one's affectionate remembrance, but who live far away, and with whom one has no time to correspond. In attending the annual meetings of such Associations, opportunities occur of renewing those old friendships and of preventing a slowly but constantly increasing separation from valued friends.

Perhaps holidays are to be included among domestic events. At any rate they form an important part of life. Not only do they afford busy people the opportunity of accumulating potential energy, but they also furnish many consecutive and quiet hours during which much

professional reading and writing can be done. Life during working months is overcrowded and it is scarcely possible to secure so much as one uninterrupted hour which may be given to literary work. Therefore, since my visit to Whitby in 1899 when I wrote "A Woman's Words to Women," I have spent the mornings of most of my summer holidays in writing. Up to 1913 I usually took my April holiday in Italy and could not do much book-writing, although I managed to get through a certain number of articles.

After 1913 there was no more foreign travel for me, and I have sometimes taken Miss Giuseppi, my greatly valued Secretary, away with me in April that we might more effectively use these precious morning hours.

In August 1903 Elsie and I again went to Riffel Alp for our holiday, and, writing to Herbert, I told him how very unnatural it seemed to us to be there without him. It brought most forcibly to our minds our pleasant holiday in 1898. Things had altered a good deal, for whereas in 1898 he had walked up while Elsie and I rode on mules, there was now an electric train all the way from Zermatt to Gorner Grat, and a very smart electric omnibus ran from Riffel Alp station to the hotel. We met the Baring-Goulds, and Elsie joined with them in several pleasant excursions. I went with them for a comparatively quiet day on the mountain-side, and while there Miss Baring-Gould told us a most

interesting story. Mr. Baring-Gould, her father, was one of the Secretaries to the C.M.S., and the incident she related had been told him by a gentleman who went out to inspect Mission Stations in N.W. India on behalf of the Society. I do not know his name, for she called him the Inspector. In the course of his work, this gentleman reached a mission station called Tarn Taran. He asked the Head of the Station how things were going on, and received the answer that work was progressing favourably, but that the missionaries were much annoyed and hindered by the action of certain spirits. He further explained that the mission house was built on a disused Hindu burning-ground, and that the annoyance complained of consisted partly in the clattering together of crockery and glassware and partly in definite assaults on the missionaries themselves. For instance, when someone was saying his prayers, he might be suddenly lifted up and dropped again to earth. The Inspector did not attach any great importance to this report, but in the afternoon he had occasion to go into the town to see an old native priest who was ill in hospital, and this gentleman asked him for news of Tarn Taran mission station. The Inspector repeated the weird story he had heard in the morning. "Oh," said the old Brahmin, "I will set that right." The Inspector proceeded into Kashmir and after some time returned, and again spent a little time at Tarn Taran. He asked about

the spirits and was told that there had been no further trouble. He then went on to see the old Brahmin gentleman in the hospital. He asked him what he had meant when he said that he could set matters right, and the old man replied : “ Of course, when I was a Brahmin priest I had much intercourse with spirits; when I became a Christian, and especially after I was ordained, I recognised that it was not right for me to do so, but when you told me of the sufferings of our brethren at Tarn Taran, I thought God would forgive me if I used my powers on their behalf, so I sent for the head of that gang of spirits and told him he must leave the missionaries alone.”

This is an interesting story and particularly well attested.

CHAPTER XII

THE GREAT WAR

THE late summer of 1914 was an anxious and uncomfortable time. There was every appearance of imminent civil war in Ireland, and neither the prayers of the faithful nor King George's anxious desires seemed as if they could avert the fratricidal and disgraceful outburst. We were saved from this disaster, but at what a price! The murder of the Archduke at Sarajevo may have been the spark which kindled the conflagration, or it may only have been the long-awaited signal for the dawning of "Der Tag." In any case the end of July and the beginning of August was a time that no English man or woman who went through those days can ever forget. Proposals and counter-proposals, the advancement and holding back of armies, ultimatums hurtling through the air, and men's hearts failing them for fear, strong men nerve-racked with the knowledge of all that a European war must mean, and beyond all things the desperate, sickening fear that we might stand aside as neutrals, and that with the destruction of Belgium and the annihilation of France might come Britain's moral ruin.

That first Sunday and Monday in August was a

period of suspense, more difficult to bear than all the sorrows, uncertainties and dangers which they ushered in. The declaration of war came as a great relief to those of us who valued our national honour and who were prepared to pay the price of its maintenance.

I had planned to spend my August holiday at Kitzbühl near Innsbruck, but immediately after the Sarajevo murder I returned my tickets to Cook's and gave up the proposed expedition. I was invited to go for a visit to our friends the Richards at Snow Hill, Midhurst, and I transcribe a few sentences from a letter which I wrote to my daughter at this time.

“How good of those Nursing Home people to be so liberal in setting aside a room for any officer who may need surgical treatment for wounds! Will you ask them kindly to send Eva Richards specimens of a complete outfit of all that is necessary for big operations, so far as the Nursing Home requirements go? I will pay the expenses; Eva is full of zeal and anxiety, but wants help in this way. I will gladly join Mrs. Cantlie's Committee for Red Cross work, and attend the meetings as soon as I come home in September. . . .

“Much depends upon us civilians; by our calm and reasonableness we can each one help all around us. I am sending a cheque to the Prince of Wales's Fund, and will send more after a time. I would send £500 at once, but none of us knows what our

obligations may be. I addressed Eva's detachment yesterday; speaking on the care of personal health, on nursing treatment in general, of wounds more especially.

"It is heartrending to see this lovely country, all corn, flowers and sunshine, and to remember that humanly speaking its future depends on the hazard of war. Still, I think we ought to feel that even although we shall certainly have much to suffer, the final result must be good—good even from the human point of view. The other nations of Europe will not be able to acquiesce in Germany being 'Lord of all.' We shall all combine as we did against the great Napoleon, and eventually—it may be after much suffering—an honourable Peace will be made."

Eventually, about the 15th August, my daughter, a young friend, and I went to the Royal Crown Hotel at Sevenoaks. We took the car with us, and very soon fell into a quiet daily routine, which was inexpressibly helpful and soothing amid all our anxieties and troubles. We breakfasted early and then set to work on soldiers' garments for Mrs. Cantlie's V.A.D.

The news from the front was steadily bad, our "contemptible little Army," as the Germans called it, although every man was a hero, was like a bulldog facing a tiger. It was driven back inch by inch, or rather mile by mile, and the accounts from Belgium and from Northern France seemed on the surface to warrant all the insolent boastfulness of our

enemies. Meanwhile, the weather remained perfectly exquisite, and there was seldom so fine a harvest and so beautiful a countryside as during those momentous weeks when the fate of the Empire trembled in the balance.

The embarkation officer at Folkestone said the calm weather was the miracle whereby we were able to send our supplies over in time to be of real service.

On the 6th September we returned to London, and our return practically coincided with the Battle of the Marne.

Shortly after, I was asked whether I would take charge of one of the Women's Hospitals which was being fitted out to work in Belgium. I was greatly tempted to accept, for it would have been glorious to render such direct aid, but on the whole I thought it my duty to decline. I feared that my health would not stand the combination of fatigue and unsuitable food, and I knew that if the Director of the Hospital were incapacitated, a very grave injustice would result to the whole undertaking. I therefore most reluctantly made up my mind that my duty lay in London, that I must make it possible for my sons to do their best by guaranteeing the welfare of their families should necessity arise, by contributing so far as I was able to various patriotic funds, and by offering to treat officers' wives and Belgian women free of charge.

As time went on, other opportunities of usefulness

occurred, for instance, I was privileged to be one of those who set on foot the Council of War Relief for the Professional Classes, and was appointed Chairman of the Midwifery Committee of this very useful institution. I spent much time not only in the regular meetings of the Hospital Committee, but also in visiting the patients, and in helping in the general supervision of my department.

The Maternity Hospital was located in a truly magnificent house in Prince's Gate. It had been placed at our disposal, rent free and tax free, by Mr. Pierpont Morgan. Friends of the different members of the Council most kindly lent, or gave, furniture. They also provided us with bed linen, blankets, coverlets and baby clothes. We had an excellent matron and the work was blessed with great success. We had a rota of doctors, men and women, who most generously gave their services and who worked with conspicuous ability and success; so well did they serve the hospital that, during the four years that it was open, we had no maternal death and lost only one infant. Considering the bad health of many of our patients, their anxieties and nervous excitement, this measure of success was very remarkable.

Early in October 1914 Herbert went to France, and not long after we heard that his battalion of the Artists' Rifles was in the trenches. We knew what this might mean. The possibilities had been brought close to us through a friend's experience.

About this time I went in one morning to ask my old colleague, Ethel Vaughan Sawyer, to tell me exactly how she had made an eiderdown sleeping-bag for her husband, which I had heard he found very comfortable. To my horror she replied, "Yes, he was comfortable enough, but now he is dead!" I had not heard of her bereavement, which had only just occurred. The story of Captain Vaughan Sawyer's death is only one among many thousands, as distinguished and as brave, but it was in some respects unusual and very pathetic. He had lost an arm when shooting in India, and had therefore retired from the Indian Army, and at the time of the outbreak of war was living at home, adding to his pension by literary and artistic work. With characteristic alertness he immediately offered himself to the War Office, but was declined on the ground of his maimed condition. He however insisted that if he could not go out as a combatant, he would be found useful as an interpreter for an Indian Regiment. Eventually he was accepted in this capacity. During the first Battle of Ypres he observed that an Indian battalion had lost all its officers except one young subaltern, whose Hindustani was imperfect. Captain Vaughan Sawyer immediately offered his assistance, and with the young officer's permission he spoke a few words of Hindustani to the men. The effect was magical, they no longer wavered, and were eager to be led forward. They charged with the subaltern and Captain Vaughan Sawyer at their

head, and he met with the death that is dearest to a soldier. This was the supreme sacrifice offered by him as by many others; in his case the distinction lay not only in the ultimate deed, but in the courage and unselfishness which led both him and his wife to decide that, maimed and comparatively helpless as he was, he should do all that in him lay for the national salvation.

The year 1915 brought a very considerable amount of consolation and hope to our armies abroad and to the anxious civilians at home. Things seemed to promise well, Italy renounced her neutrality and no longer permitted supplies of munitions of all sorts to be conveyed to the Central Empires. But when all was most hopeful Russia failed us. Her armies were brave and many of her commanders both honest and skilful, but nothing can avail if an army is not properly provided with all the munitions of war and more especially if it is not well provided with food and with high explosives.

Naturally my elder son was anxious to be on active service and would have gone if he could have passed the doctor. As this was not possible, he obtained command of an Officers Training Corps, and served his country well in this manner all through the war.

That autumn amongst my many other engagements I had one in Manchester, where I went at the kind invitation of Miss Burstall, the Head Mistress of the High School for girls in that city.

I was to distribute the prizes and speak to the young people. The school is a very large one and the girls filled all the central portion of the Free Trade Hall, leaving the side portions of that enormous building for their parents and friends. The girls were dressed in white with red sashes, and each wore a red rose—the Rose of Lancashire. Miss Burstall had drawn up a most attractive programme, and had written a few verses of patriotic poetry commemorative of the losses of the 1st Battalion of the 5th Lancashire Fusiliers at Krithia in Gallipoli. Miss Burstall told me there was scarcely a girl in the Hall who had not lost father, brother or other near relation in this glorious but fatal campaign. Her verses ran as follows :

At Minden on that August day
Each gallant Fusilier
Bound to his crest so proud and gay
The Rose of Lancashire.

But now with mingled grief and pride
We hail the red, red Rose,
In glory strewn by Krithia's side
Mid hosts of bitter foes.

Oh, wreath of laurels greener yet !
Oh, rose, so red, so dear !
Your gallant deeds we'll ne'er forget,
Ye men of Lancashire.

Miss Burstall explained that in the circumstances she felt it quite justifiable to pronounce Lancashire in the local manner to rhyme with *fusilier*. I told

her that my son Herbert was commanding the 2nd Battalion in Flanders, and she kindly offered, on behalf of herself and her girls, to knit socks, comforters, etc., and send them out to him for his men. The girls of the Manchester High School honoured Miss Burstall's promise very fully, and three or four large sacks of woolly comforts were despatched from time to time.

In 1916 the war clouds gathered thicker and thicker. The difficulty of obtaining provisions became greater, and little by little the nation realised that the war had to be won not by brilliant and heroic battles, but by the terribly slow process of trench warfare, submarine and anti-submarine conflict, an efficient blockade of the enemy's coasts, and beyond all by a quiet but steady determination of the whole nation that nothing should make us accept a negotiated peace. After many hopes and some fears we settled down to our task, and all foolish, ungrounded expectations of rapid victory faded away. We remembered how Lord Kitchener had said at the beginning that the war would last three years and more, and also how he had said, "I cannot tell you when the war will end; it will begin in the spring of 1915."

Except for extra Committees my own work went on just as though there were no war. I had as many patients as usual, and as many operations as I could do. My holidays were occupied by the writing of books, and my leisure moments, such as

they were, with articles for various publications. I did my best to write to Herbert every Sunday.

I was much interested in the formation of a Women's Medical Service for India, and in March 1916, when Lord Chelmsford went out to take up his appointment as Viceroy of India, I had tea with Lady Chelmsford just before they sailed, in order that I might tell her as much as possible about the matter. This Service was the direct descendant of Lady Dufferin's scheme for the provision of female medical aid for the women of India. She had started her scheme in the early 'eighties and had achieved much, but it seemed as if the time had now come in which it should be reorganised and that the conditions of women's medical work in India should be greatly improved. Some of us who knew both India and also the present status of medical women felt that there ought to be a State Service for Medical Women in India, which should be run on approximately the same lines as the old-established Indian Medical Service which is officered by men.

Lady Hardinge, during her all too brief stay in India as Vicereine, had been extremely friendly in this matter, and had been able to make considerable advance. To everyone's grief she died, leaving her valuable work unfinished. I was therefore very anxious that Lady Chelmsford should go out to India knowing what had already been accomplished, and also armed with special knowledge as to the

views and needs of Hindu and Mahommedan women. She was extremely sympathetic, and was able to do much to further our objects during her husband's tenure of office.

By the time that 1917 dawned I think that even the most heedless among us must have realised the extreme seriousness of our condition. One thing that was calculated to make a deep impression on the minds of the masses was the great difficulty of obtaining the necessaries of life. Women and children had to wait for hours in the wet and cold, hoping to obtain bread, meat and other foods, and perhaps at the end of their vigil all that they got was the curt announcement that there was nothing left—everything was sold out. It was not wonderful that there was some discontent, and that not only amongst the women, but also amongst the soldiers at home on leave. They no doubt felt that, while they were fighting the country's battles, it was the duty of the Government to see that their wives and families were adequately fed.

In the particular matter of the food shortage there is no doubt that the situation was saved by an exceedingly well-thought-out and successful method of rationing the food. Certain experts were consulted by Government, and they drew up a dietary which they knew to be sufficient to maintain health and strength in ordinary adults; and they gave special privileges to certain classes of the community, who by reason of age or various abnormal conditions

of health needed special consideration. It is no doubt true that under the rations many people *felt* hungry, but as an expert carefully explained to his wife, she was not *really* hungry, she only thought she was ! And he added that this error on her part arose partly from the fact that she was thinking about food to an extent that she had never thought about it before, and partly because she was aware that whatever happened she could not have any more. When the poor lady protested that, say what he might, she still was hungry, he replied, " But, my dear, that's quite impossible, for I am one of those who calculated the rations, and I know that you have enough."

On the whole people behaved honourably, and did not try to cheat the rest of the community by eating food that practically belonged to their neighbours. In a few instances women asked me to give them a certificate to the effect that their state of health was such that they needed extra meat, butter, etc. When I knew that their plea was well founded I signed the certificate, but when I knew that this was not the case I asked them under which heading I should classify them, were they diabetic, consumptive, pregnant, or nursing mothers ? Some few people were *plus royalistes que le roi* ; for instance, I knew one lady who for months ate neither bread nor potatoes and was only convinced that this was a mistake when she came to consider that, after all, people who impaired their usefulness by semi-

starvation were not in very truth serving the country to the best of their ability.

It is very remarkable how during the war the nation as a whole developed its belief in the Communion of Saints, and was led to feel that those who have passed behind the veil must still be in need of our sympathy and prayers. Memorial services increased greatly in number, and there is no doubt that mourning parents and relatives felt with ever-increasing force that their dear ones were not lost but gone before. People chose different means of expressing these feelings, as was inevitable, for everyone has individuality, and nothing, not even a national affliction, can obliterate our personal peculiarities.

During 1917 I wrote a short series of articles for *The Queen*, on the subject of Insanity, and I had two little books ready for publication. They both dealt with the subject of Venereal Disease. One of them was specially intended for the help of nurses and midwives, and was published by the Scientific Press. The other was written at the request of the N.C.C.V.D.

At the end of this year Mrs. Garrett Anderson's long and most useful life came to an end, so far as this world is concerned. She had retired from the profession for a considerable time. She had been living in her beautiful house at Aldeburgh, and had devoted herself to helping both with money and advice the younger women who were able to render

direct war service. Immediately after the outbreak of war Mrs. Anderson's daughter, Dr. Louisa Garrett Anderson, had got together a hospital to which she was surgeon and her friend, Dr. Flora Murray, first physician. They had wisely chosen comrades who were young enough to stand the racket of hard work and poor food, they were well equipped, not only as to personnel, but also with all the material things that are necessary to command success. This very fine and serviceable hospital was first offered to our own Government, but unfortunately it was not accepted. Miss Anderson then took it out to Paris and commenced work in Claridge's Hotel. Here she and her colleagues were most successful and I am told that a most amusing episode occurred. It was supposed to be as follows :

Lord Esher went to Paris to inspect British hospitals there. He was much taken aback when he saw the terrible sight of women in khaki, and he inquired who and what they were. He was told that they were the women who were running a hospital at Claridge's Hotel. He determined to pay them a visit. He went and inquired for Miss Garrett Anderson, but found that she was absent. He then asked who was doing her work, and Dr. Flora Murray was summoned. When she came in he said, "I understand, Miss Murray, that you and Miss Anderson are running this hospital." She replied, "Dr. Flora Murray, if you please." "Well,

Dr. Murray, I very much disapprove of this. Who have you in the hospital? Privates?" "Yes, privates and officers too." "Oh, surely not officers?" Then he asked whether he could see the men. He was taken into one of the wards and very wisely was left there to make his own investigations. He went from bed to bed, found that the men were admirably cared for, and that not only was everything spotlessly clean and well arranged, but the men were cheerful, and they told him how the ladies received them, had them bathed, clothed in clean suits, and after being fed and rested one of the ladies came to know what she could do for their comfort. Letters were written to their home people, and the little details that make all the difference between happiness and unhappiness were cared for. The men also told their distinguished visitor that when any of their number died as much reverence and care were manifested as could have been shown by their own people, one of the ladies invariably attending the funeral service. If it be true that Lord Esher had gone into the ward a lion, he came out a lamb. He told Dr. Murray how pleased he had been with all he saw and heard; he said that all the British hospitals in Paris were about to be closed, but he added, "I shall be very pleased if you will come and run a hospital at Wimereux." This was done and the record of unbroken success and satisfaction continued, until the time came when it was thought better that the hospital should be

brought home and established in Endell Street. The history of this hospital illustrates the remarkable powers, not only of professional work, but of administration, that were shown by women during the war.

Another successful hospital was one run by Dr. Frances Ivens at Royaumont in Central France. It was very near the front and received a large percentage of severely wounded men in the earlier stages of their troubles. No doubt this fact increased the operative work of the hospital greatly, but probably Miss Ivens and her colleagues preferred to have it thus because they would have a better chance of preventing sepsis or of dealing with it successfully. This hospital had the advantage of a fine old building and of lovely grounds. The work that was done by Miss Ivens and her colleagues was in all respects so good that the French Government awarded her the distinction of the Legion of Honour.

A third hospital was sent out by Mrs. St. Clair Stobart. It began its work in Antwerp and its intrepid managers remained at their post throughout the terrible days of the invasion of Belgium, indeed they did not depart until the enemy were entering the eastern gates of the city. The patients were then transferred to the protection of some nuns and the staff went out into the street to endeavour to get transport to Dutch territory. Apparently

nothing was to be had. But they went and stood in the middle of the road in front of a London omnibus, and called to the driver to take them up. This he said he could not do; he was absolutely full of cases of ammunition. The ladies, however, were not to be denied. They said they could ride on the ammunition, and clambered up. Thus they passed in safety into Dutch territory, returned home, and subsequently went out again and reopened the hospital on the coast of France.

Of the Medical Women's work in Serbia a whole volume could well be written. All the women officers of hospitals at the seat of war carried their lives in their hands, and were only too thankful to be able to share the dangers and sacrifices of their patients. But in Serbia the most terrible enemy was typhus. There is something particularly trying and depressing in the idea of dying of such a disease in the terrible discomforts and want of help which must always characterise hospital work in such a country and in such circumstances.

When the *débâcle* came some of these heroic people were captured, as were our friends the Berrys. Others, like Dr. Lilius Hamilton, accompanied the Serbian army in its awful retreat through snow and darkness across the mountains. Many of them died from sickness, exhaustion and some few from wounds. Among the noblest of the noble may be reckoned Dr. Elsie Inglis. She indeed finally returned home,

but only to die on landing. In 1922 I went to Edinburgh to unveil a monument that had been erected in St. Giles's Cathedral to the memory of this heroic lady.

Early in January 1918 I went to Leicester to speak on Venereal Diseases at an evening meeting, and two or three days later I spoke on the same subject at Ipswich. Indeed, about this time I had as much lecturing as I could manage in addition to my usual duties. Thus I was speaking at Ilford on the 23rd January, at Hull on the 24th, and at Ipswich on the 26th. At Ilford my subject was "Venereal Diseases," at Hull "The Child and the Future," and at Ipswich "Rescue and Preventive Work."

While I was down in Devonshire in August 1917, I received a letter from Mr. Lloyd George, who was then Prime Minister, in which he told me that the King had been graciously pleased to confer on me the honour of the C.B.E. (Commander of the Order of the British Empire), and shortly after my return to London I was summoned to Buckingham Palace and had the great pleasure and honour of receiving the decoration from the King's own hand. I had been laid up with lumbago and sciatica, and up to the last moment doubted whether it would be possible to go to the Palace. It was a great satisfaction that my old friend, Lady Barrett, had also been commanded to attend for the same purpose,

and I felt that she would do what she could to assist me if I were extremely stiff and awkward. The ceremony went off very well, and their Majesties were as gracious and friendly as I have always found them.

The next occurrence of interest in my life seems to have been a Congress under the auspices of the Royal Institute of Public Health held in Brussels in the spring of 1920. I was invited by the Principal, Sir William Smith, to be the President of the Women's Section. I had a distinguished list of Vice-Presidents, and many good papers were promised and sent in. Everything was most admirably organised and Dr. Kelynack was unwearied in his very successful endeavours to secure comfort and efficiency for the British contingent. Lady Barrett, Dr. Christine Murrell, Professor Winifred Cullis, Lady Rhondda, Mrs. H. B. Irving, my daughter (who was the Secretary to the Section) and I, formed a very happy little party in an hotel not far from the Guildhall, where the principal meetings were held. King Albert most graciously attended the first meeting of the Congress and much good work was done. The Mass at the Cathedral on Whit-Sunday was solemn and impressive. It had been hoped that Cardinal Mercier would preach, but he was absent at Rome and his place was taken by an eloquent man who addressed the large mixed assembly in English, French, and Flemish. The last night that

we were in Brussels we had a very friendly and pleasant dinner, and I was delighted to be able to voice the gratitude and appreciation felt by their English guests for the gallantry of the Belgian nation, and to recall the wonderful services rendered to mankind by them and by their three great representatives, King Albert, Burgomaster Max, and the Cardinal.

The same year, 1920, saw the appointment of the first women magistrates, and I was both proud and pleased to receive a letter from Sir William Collins asking me whether I would act if appointed.

The first definite work assigned to me as a magistrate was to be a member of the Juvenile Court under the Presidency of Mr. Campbell Grahame. In addition to this I was asked to serve at the Marylebone Infirmary as one of the magistrates under the Commissioners in Lunacy. Both these appointments were congenial to me, but I was especially anxious to be appointed one of the Visiting Magistrates to Holloway Prison. For some time I had been deeply interested in the women prisoners through my friendship with the Chaplain to the prison, and I thought that the influence of a woman magistrate might be helpful to some of our sisters who from wrongdoing or inadvertence are deprived of that most highly valued gift of liberty. After a time I was included in the list of Visiting Magistrates and so became a member of the Committee meeting every month under the Presidency of my old friend,

Sir Alfred Reynolds. I was not disappointed in this work, I found it deeply interesting, and the knowledge gained through it shed much light on many social and medical problems. I had also the honour and pleasure of acting as Chairman to the Nursing Advisory Board at Holloway.

CHAPTER XIII

SOCIO-MEDICAL WORK

FROM 1902 onwards I was as busy with my professional work at home and at hospital as I had been during the previous ten years, but the older I grew, and the more I began to see beneath the surface of life, the more I realised that one of a woman doctor's privileges and duties is to assist in preserving the health of the nation, and therefore in the prevention of disease, in the suppression of alcoholism and vice, and more especially in the prevention of infantile mortality and disease in young children. From the time that national statistics dealing with births, deaths, the incidence of epidemics, and other matters connected with public health began to be compiled there had been a gratifying fall in the general death-rate. Unfortunately the death-rate of infants had very little share in this fall. The Registrar-General still continued to insist that for England and Wales the average death-rate of infants under the age of one year remained at somewhere about 150 in the thousand, while in certain areas it reached the appalling figure of 350. He also pointed out that this death-rate was dependent very largely on remediable causes, that is to say, that the

children were born much in the condition to which their mothers' health during pregnancy reduced them. Year after year, with ever-increasing clearness, it became evident that if we wished to improve the prospects of life and health for the children of the nation, we must seek it chiefly by better conditions for women during pregnancy. Slowly statesmen, philanthropists, and doctors became aware that it was hopeless to expect A1 children from C3 mothers and that it is not possible that a woman who has been overworked and underfed, or who has suffered from disease during pregnancy, should be able to produce not only a living child, but a healthy child, and one who is likely to pass successfully through the stages of infancy, childhood, and adolescence to a healthy maturity.

In all movements that have for their aim the attainment of some quite definite but not generally understood object, it is necessary for the friends of the movement to begin their work by educating the public. Government cannot legislate usefully in advance of public opinion, and the first thing to be done by those who desire any reform is to arrange for propaganda on a large scale. They must be prepared to lecture, to write, to talk, and to use all their influence upon the public in general, hoping that as the continual dropping of water wears away stone, so the oft-repeated announcement of facts, and the legitimate deductions from those facts, may gradually find an entrance into the public

mind, and finally be enthusiastically adopted by the heart of the nation.

When anyone is intended by Providence to take up a certain work he will find on looking back that his first initiation into this special duty was not due to any one person or to any one set of circumstances, but that when the time is ripe for any social reform, or for any scientific discovery, the operative idea appears to occur to several people almost simultaneously, even although those people may be citizens of widely separated nations. This might be illustrated by the history of the invention of the steam engine, the introduction of general anæsthesia and of wireless telegraphy. It is to be observed that it matters not at all whether the first person to publish a discovery or to commence a campaign of Preventive Medicine be American, British, French or German; the important thing to remember is that the man or woman who first publishes the discovery is simply the representative of many others who have been working on the same lines and pursuing the same object.

The deep and lasting interest that I have felt in Preventive Medicine, more especially in the welfare of mothers and infants, was certainly greatly strengthened by my friendship and my work with such people as Sir Malcolm Morris, Dr. Kelynack, Miss Alice Ravenhill, and the Rev. (now Sir) James Marchant. I am quite conscious that the knowledge and influence of many other individuals

contributed to my interest in this important subject. I realise, as all other workers in such matters must realise, that we each of us see only a small portion of the truth, and that each of us has only strength enough and time enough to do an infinitesimal part of the great work. Indeed, as was said by the author of "John Inglesant," "The day is long and the task is great, the reward also is great and the Master presseth. It is not incumbent on thee to finish thy work, but thou must not therefore cease from it."

As a doctor I had unusual opportunities of informal propaganda in the quiet natural intercourse between surgeon, or physician, and patients and their friends. During the early years after the Report of the Royal Commission on Venereal Diseases I was astonished by the great interest shown in this subject by my patients and by the rapid development among them of a reasonable attitude of mind.

This simple informal work naturally led to more formal and co-ordinated efforts to secure the public welfare, and thus to the heavy and responsible, but delightful work, not only of writing and speaking, but of membership of Commissions and Committees in which one is permitted to collaborate with experts in the several branches of Public Health work.

Much work and opportunity have come to me in lecturing and giving addresses. My earliest venture

was in Madras, when I read a paper on Medical Women for India. Then came the Inaugural Address at the London School of Medicine for Women, on the Seven Lamps of Medicine, when I returned home in 1887. Meanwhile from 1883 I had been Lecturer on Midwifery and on the Diseases of Women at the Madras Medical School, and from May 1887 I was Lecturer on Medical Jurisprudence to the London School.

From the time of my return home in 1887 I accepted invitations to speak on missions and temperance and rescue work, but this part of my work was occasional, until Lord Sydenham laid on his Commissioners the duty to do all the propaganda work of which they were capable. My entire agreement with him as to the necessity of those who know the truth making it known to others led me to accept invitations to speak as often as possible on the various aspects of the causation, incidence, prevention, and cure of the venereal diseases. I was convinced that this was a part of my duty, but it was a very difficult duty at first. The situation was novel, it was necessary to speak on a subject that was unknown to audiences that were at heart unwilling to be taught. The very name of the venereal diseases was repulsive to the public, and not infrequently those who invited me to lecture did their best to disguise it under a more attractive title. To get the truth home needed both courage and a sympathetic relation between speaker and

audience. In the early days of the campaign nothing but a realisation of national danger and an appreciation of individual duty could have made it possible to tell the whole truth and to tell it so as to help and not to disgust the audience.

In the course of my duty I spoke twice or three times both at Liverpool, Manchester, and Newcastle-upon-Tyne, in nearly all the big manufacturing towns in South Yorkshire, at South Coast ports, and seaside resorts, and during three most well-organised tours in Cornwall, and one in Devon. There is very little strain and fatigue in travelling from town to town for a week and lecturing each afternoon and evening. The strain and difficulty arise when fairly distant lectures have to be accomplished in addition to the ordinary day of professional work. My lectures and lecture tours have brought me many valued friends and much happiness. The initial fear that the audiences would be hurt and shocked is now a thing of the past. Women—and men also—have come to know that the horror of the subject consists not in the prevention and treatment of venereal diseases, but in the selfishness and moral slackness to which they are due; also, slowly but surely, fathers and mothers are awakening to the fact that the physical and moral ruin of their children is usually the result of ignorance, and that the blame for that ignorance must lie wholly or in a great measure on those who have been too selfish to speak the truth in love and to warn the

young people of the dangers to which all are exposed on entering on independent life.

Partly out of the subject of Public Health, and partly out of more direct spiritual and moral consideration, has developed another large sphere of duty. Nothing can be of greater national importance than adequate and intelligent care of the young. I find that at the present time I am more often asked to speak and to write on "The Care of the Adolescent Girl" or on "The Moral Training of Little Children" than on Venereal Diseases, Temperance and Rescue work. This is reasonable, for if little children and adolescents could be ideally cared for there would be no room for Temperance and Rescue work, no need for Asylums, Inebriate Homes, and Prisons.

There is not much standing to my credit as an author. What little I have done has been during scanty holidays and in the short intervals between professional engagements. I have never been able to work for hours at night as some stronger folk can do. Of what little I could do much is forgotten. Long articles inspired by the successive phases of moral warfare do not live in anyone's memory. They are intended to serve a special need, and then to perish. It is with small books one hopes to sow seed that may flourish: the present longer one is in response to repeated demands by friends known and unknown.

From the time that I settled down to professional

life after my return from India in 1887 I have written for the Press from time to time, and have gradually become convinced that by this means it is possible to reach people with whom one would not otherwise be brought into contact. At first much of my writing consisted of scattered articles for the Medical Press, of which the longest was one on "The Non-Malignant Tumours of the Uterus" for the *Encyclopædia Medica*, and two analyses, each of 100 cases, of operations on Fibroid Tumours of the Uterus. I liked this work, and should probably have done more of it, but from about 1900 it began to be crowded out by articles and books addressed chiefly to women on the care of their health and that of their children, and also to collaboration with others who were anxious to disseminate knowledge that might help the physical and moral life of the people. Thus in 1905 I contributed a paper on "Alcoholism in Women" to a volume of essays called "The Drink Problem" edited by Dr. Kelynack. The Norman Kerr Lecture on the same subject which I delivered before the Society for the Study of Inebriety in October 1919 was published in the Journal of the Society in January 1920.

In 1899 I wrote a little book intended to help pregnant women in the care of their health, and called it "A Woman's Words to Women." A year or so later I published a companion volume on "The Maternal Management of Children." These two

books are now out of print and so are the two that I intended to be their successors. Their revival in new guise, matured from wider experience, are among my aims if I am spared.

When I was in Tintagel for my August holiday in 1915, I wrote "The Seven Ages of Women." In it I dealt with the health of the young girl, the young wife, the young mother, the nursing mother, the mother in the noisy years, the middle-aged woman, and the old woman. During my August holiday in 1916 I wrote "The Hope of the Future" dealing with the physical health and well-being of children, and with the care that is necessary for their welfare in health and in sickness.

In 1917 Sir Malcolm Morris asked me to write a small book that would be useful to Medical Officers of Health, Health Visitors, Midwives and Nurses, on "The Care of the Expectant Mother." This I wrote during an Easter holiday at Lyme Regis.

The book that seems to have really found a sphere of usefulness was one I wrote during my Easter holiday in 1917. It was called "How to Enlighten our Children," and was written under a certain amount of difficulty, more especially the early chapters, which had to be written by hand during a country visit. It continues to be in demand and my correspondence proves it has been helpful.

When the Royal Commission completed its labours and Lord Sydenham appealed to the Commissioners to educate the public I wrote several

small books with this object. Some were published by the National Council for Combating Venereal Diseases; one, "The Hidden Scourge," by the National Society for the Promotion of Public Morality; and another, "Notes on the Venereal Diseases," was published by the Scientific Press and was intended to help Midwives and Nurses to realise the importance of the subject.

I contributed articles to "The Care of the Adolescent Girl" and to "The Control of Parenthood," edited by the Rev. Sir James Marchant, also some articles to the *Nineteenth Century and After* on "The Education of Medical Women" and on "A Terrible Census," and a pamphlet for the Research Defence Society on "Small Pox."

In July 1913 the International Congress of Medicine was held in London. We had a very strenuous and interesting time with our many foreign *confrères*. Probably the sensation of the meeting was produced by Professor Ehrlich when he told us how he had finally succeeded in finding a combination of drugs which had the power of destroying the *Spirochaeta pallida* (the micro-organism which causes syphilis) and which, he said, would not inflict serious injury on the tissues of man. Such a discovery was, if substantiated, an inestimable boon. Ehrlich called his drug 606 because it was the result of his 606th experiment. He also called it "salvarsan," the safety of health. He naturally received an ovation from his colleagues. In practice

salvarsan did not altogether realise the hopes that were founded on it. Its destructive power against the *Spirochæta* is undoubted, but in not a few instances mischief to the patient has been wrought. The proposed technique of administration was extremely cumbrous and the whole proceeding needed such meticulous care and skill that it was practically beyond the power of the ordinary busy practitioner to administer the drug. In the course of time we were driven to recognise that salvarsan in itself was not quite perfect, and that unless its administration could be greatly simplified it might be the treasure of the few but not the possession of mankind.

The very vivid interest kindled in the profession and in the public by Ehrlich's announcement probably led to Sir Malcolm Morris considering that the time had arrived for a careful investigation of the whole subject of the Venereal Diseases. He interested the Government in the matter and a Royal Commission was appointed. The composition of this body was most carefully thought out, Government was represented by Sir Kenelm Digby and Sir Almeric Fitzroy, the clergy by Canon Horsley and the Rev. Dr. Scott Lidgett, doctors by Sir Malcolm Morris, Mr. Ernest Lane, Dr. Mott, Sir Arthur Newsholme, Sir John Colley and myself, Parliament by Mr. Philip Snowden, and the thirteen were completed by Mrs. Creighton, representing Women Philanthropists, and Mrs. Burgwyn, Inspec-

tor of the Feeble-Minded. Our Chairman was Lord Sydenham of Combe, a most excellent choice. He was deeply interested in the subject of his Commission, painstaking, courteous and patient. It seemed to me that he drew the best out of everyone, and that it was thanks to his personal weight and to his courtesy that we were finally able to make a unanimous report. We began our sittings as soon as the medical year commenced in October 1913 and with the exception of the holidays we sat twice a week up to December 1915 and presented our report to the Government the following January.

When the Commission separated, Lord Sydenham made an address to his colleagues, in which he charged them to do their best by personal influence, by virtue of official position, and also by their varied gifts for public speaking or writing, to help in the great task of educating the public. We all gladly promised to carry out his wishes.

With the presentation of our Report in January 1916 the Royal Commission on the Venereal Diseases ceased to exist. But many of us joined the newly formed National Council for Combating Venereal Diseases, and Lord Sydenham was our first Chairman. This Council with its various Committees has done good work and has greatly helped in popularising the information that the Commission had been so anxious to broadcast throughout the land. The results of our labours are to be seen to

some extent in the following facts : Not only have all the great general hospitals in London arranged clinics and set aside beds for the treatment of venereal diseases, but also as the years have elapsed there has been a great change both in the provision of treatment, in the circulation of literature, and, most important of all, in the education of the general public. But we have not yet attained all that we desire. The war was both a help and also a hindrance to our work. It was a help because the facts of the frequent incidence and the terrible consequences of venereal disease were brought home in a practical manner to the whole population. Men and women alike were forced to realise the facts of the case, and inasmuch as they were taught by sufferings in their own family, or by the misfortunes of neighbours, the knowledge acquired interested their hearts as well as informed their minds. People began to understand that although syphilis and gonorrhœa are most usually the direct consequences of wrongdoing, it is also quite possible that they may be innocently acquired, and the great lesson of Christian charity thus painfully taught has gone far to remove the old Pharisaic feeling that those who suffer thus must be sinners beyond the rest of the community. The moral change wrought in this way has in many instances led men to look with increased seriousness on these diseases and to understand as they never did before the injury which may

be inflicted on innocent wives and unborn children by a brief selfish gratification. Women have acquired a broad-minded charity which prevents them from so bitterly resenting the physical wrong while it has in no wise lowered their moral standard; they have been taught that it is possible to hate the sin while pitying and loving the sinner.

On the other hand, as is usual after wars, there was a great increase in the venereal infections, and inasmuch as in the Great War millions of men were involved, the number of infections, while proportionately less, was numerically greater. The trouble spread, not only in the seaports and the great towns, where it has always been rampant, but all over the country.

It would not be fair to conclude this sketch of the labours of the Royal Commission without mentioning that it and its successor, the National Council for Combating Venereal Diseases, have been sharply criticised by another Society, that for the Prevention of Venereal Diseases, which accuses it of having deliberately prevented the reception of evidence as to certain methods of preventing these diseases at the time of the sitting of the Commission, and of obstinately refusing to accept these methods, which have been warmly recommended by the rival society.

In the commencement of this dispute the Prevention Society urged that any man who intended to incur the risk of infection should be able to

procure a packet of drugs and appliances that would enable him to carry out his intentions without running any risk of infection.

The National Council for Combating Venereal Diseases, and those who agreed with it, held that the means proposed for the prevention of disease had been only partly successful even when they were used by soldiers and sailors accustomed to discipline and very carefully instructed as to how the packets should be used. From this they inferred that the provision of such packets for ordinary civilians would help but little, since they were to be used by men undisciplined and untaught, and who were probably suffering from emotional disturbance at the time when the appliances should be used. It was thought that the offer to make unchastity safe was a blow at the nation's morals, and it was also pointed out that the method was practically inapplicable to women and that therefore a potent source of infection was left untouched.

It is certain that both Societies earnestly desire the prevention of infection and the moral good of the nation. They may not yet see eye to eye, but there is good reason to hope that in the end truth will prevail, as indeed it always does and that the two Societies may find that *l'union fait la force*.

Before closing this chapter, I must be permitted to pay a humble tribute to the able and much-respected Secretary of the National Council. It is

not too much to say that Mrs. Neville Rolfe, better known as Mrs. Gotto, is the very spring of that Society's vitality. She is, in all respects, a most remarkable woman, clear-headed, tactful and courteous, "the power behind the throne" to our various Committees.

The Commission on National Birth-Rate, of which I was a member, was undertaken by the National Council of Public Morals, and began its sittings in October 1913 under the Presidency of the late Right Reverend Bishop Boyd-Carpenter. As a rule it met weekly, except during the holidays, and lasted about two and a half years. During the later part of this period the Very Rev. Dean Inge, D.D., was Chairman of the Meetings, as Bishop Boyd-Carpenter had resigned owing to ill health.

The report was presented on the 28th June, 1916, by the Right Reverend The Lord Bishop of Birmingham, who had succeeded Bishop Boyd-Carpenter as President.

The deputation presenting the report was received by Mr. Long, who was at that time President of the Local Government Board.

The chief subject on which evidence was taken was the progressive decline in the birth-rate in our own and in other countries. The subject was studied with the greatest care chiefly under four aspects: the Statistical, the Economic and Social, the Medical, the Moral and Religious. In making our report we pointed out the disastrous effect of

the venereal diseases on conception, pregnancy, abortions and still-births, also on infantile mortality and the morbidity of childhood. We called attention to housing difficulties and we recorded our hopes that the sale of abortifacient drugs might be made illegal. We pleaded that some State help might be given to middle-class parents either in the form of helping them in the education of their children, or permitting some remission of taxation to such parents who reared a certain number of living children.

Among the safeguards suggested by us were registration not only of still-births, but also of miscarriages and abortions, the institution of laboratories for the investigation of the dead products of conception, and improved ante-natal care. We also studied the subject of migration within the Empire and urged greater care and wisdom in the selection of individuals and families for migration to the Britains overseas.

Mr. Long's reply was wise and sympathetic, and probably more direct good would have been achieved had not the circumstances of the country made legislative action and all social reform very difficult.

The second session of the Birth-Rate Commission was the natural outcome of the first, and was in a manner suggested by the reply of Mr. Long. We met about once a fortnight from May 1918 to November 1919. Much evidence was taken on the

subject of voluntary restriction of the birth-rate. It exists, is increasing, and according to the bulk of the evidence it is dysgenic and not eugenic in its operation. Among the points on which the Commission felt there would be general agreement there are these :

No pregnancy once begun should be artificially terminated except under medical advice when it is considered to involve danger to the mother's life. No persons likely to transmit serious physical or mental taint should have children. No preventive means which could injure parents or children should be used. The duties of parenthood should not be refused for selfish reasons. Disabilities imposed on worthy parenthood should be removed. Sound instruction on sexual facts and duties should be given to young persons.

We considered the arguments of our witnesses in favour of and against the use of contraceptives, and again we considered the economic and social aspects of voluntary restriction of families, and the whole question of the unmarried mother and her child; also the subjects of ante-, intra-, and post-natal death of children; the milk supply, tuberculosis, alcoholism, and venereal disease received attention as being causes of loss of population.

When we brought this extensive inquiry to a close it was felt that we had scarcely touched on an important subject—the Development and Education of young Citizens for worthy Parenthood.

We presented our Second Report to the Minister of Health in June 1920 and in October of the same year entered on the third part of our inquiry as above indicated. I had not the pleasure of signing the Third Report in April 1923, as circumstances had compelled me to retire from the Commission.

CHAPTER XIV

PAST, PRESENT, AND FUTURE OF MEDICAL WOMEN

So far as modern times are concerned, the Medical Women's Movement began in the middle of the nineteenth century with the endeavour of Miss Jex-Blake and six other women to obtain graduation in the University of Edinburgh. Their hopes for the immediate future were frustrated, and apparently the whole outcome of their endeavours was much expenditure of time and money, great disappointment, and complete collapse. But lost causes have a way of reviving, and the river of medical life which was lost to sight in Edinburgh again saw the light of day in London. There, in the centre of our Empire, Mrs. Garrett Anderson, Miss Jex-Blake, and their colleagues began a very successful work which has continued and prospered up to the present time. They founded the London School of Medicine for Women and secured for it a most delightful habitation in an interesting old house, in Henrietta Street, Brunswick Square. They had many good friends, and a certain number of doctors willingly gave their services as lecturers and teachers; sufficient money was also forthcoming. But the nascent school laboured under two great defects, either of

which was sufficient to prove fatal to its hopes. In medicine and surgery the best of theoretical teaching is of no avail unless the students can secure hospital experience and tuition, and this the Women's School sought for diligently and for some time in vain. As recorded on p. 51 this *impasse* was finally overcome by the action of the Royal Free Hospital, which opened its doors to women in 1878. The other great difficulty, the want of a Licensing Body willing to admit women to a qualifying examination, was solved by the action of the University of London and of the King's and Queen's Colleges of Physicians in Ireland (see p. 51). With this solution of the problem the way was clear, and from that time the future of medical women depended on themselves. They had a medical school, access to clinical teaching, and they were "recognised" by two Licensing Bodies.

This point was attained nearly fifty years ago, and the progress of the School has more than justified the hopes of those who founded it. One after another the Licensing Bodies opened their doors to the women. Women's Medical Schools sprang up in Glasgow, Edinburgh, Dublin, in English provincial towns, in India, and in the Britains Overseas. Hospitals have also accepted women students, not only in London, but practically in every part of the Empire. It is true that the women's campaign is not yet graced by complete victory; the individual battles and sieges have

nearly all terminated in favour of the women, but if they are thinking to rely on the advantages gained they will certainly lose them, and half a century of successful warfare may yet end in a disastrous setback.

The number of students on the roll of the London School has increased from fourteen in the beginning to more than five hundred at the present time. Women medical students have also obtained a higher percentage of prizes, scholarships, and Honours degrees than have the students at any other school. No doubt this was owing to the fact that the more ordinary entrances to the profession through the Royal Colleges of Physicians and Surgeons were not open to them until 1909. They therefore for many years had to choose between the degrees of the London University and the qualifications of the Society of Apothecaries on the one hand and the Irish Colleges on the other. As was to be expected, the great majority elected to work for the London degree, with all its difficulties, its possible disappointments, and its hoped-for distinctions.

Again and again the School buildings have been extended and improved. The accommodation at the Royal Free Hospital for staff, students and patients has been repeatedly enlarged, and great efforts have been made to raise the standard of teaching, both theoretical and practical, to encourage original research, and to develop the *esprit de corps* and opportunities for social intercourse. On the

surface everything appears to be satisfactory. The education offered is thorough and up-to-date. The students are adequate in number and they continue to hold a distinguished position in the lists of the University and of the Royal Colleges. The internal bond of union which ought to unite teachers and taught, past and present students, is developing satisfactorily. The School, whether in Hunter Street or in Gray's Inn Road, is approaching its jubilee, and is old enough to have acquired self-respect and that consciousness of solidarity which is essential to the well-being of all public institutions.

In spite of all this prosperity, nay, even on account of it, there are certain reasons for anxiety as to the future well-being of our School. As the Senior Surgeon said a few years ago, the earlier students had to suck hard and to chew well to get their living. In consequence of these exertions they developed good jaws and sound teeth, but, added he, the present generation of students is spoon-fed. It is perfectly true that the present generation of students number amongst them very gifted and successful women who have done quite as well academically as did any of their predecessors. The risk appears to lie in a somewhat different direction. The earlier students were all enthusiasts. Every one of them had had to make sacrifices and to fight a hard battle with parents and with circumstances to obtain their heart's desire. Nor did the necessity for effort cease when at last a student

entered the School, she still had much difficulty in securing the necessary lectures and the additional clinical instruction of which she stood in need. The numbers were small but the percentage of good qualifications was very high. Now the numbers are greatly increased, in many instances the student has had no difficulty in entering the School, nay, in some cases she has been practically compelled to join it by her father's desire and by home influence, and even after entering the School there has been but little need to struggle and to contend for opportunity and advantage. The road to medical knowledge is now safe, smooth and easy for the woman student. Academic prizes still require to be won by intellectual gifts, but, granting these, the student's career affords but little opportunity for the development of a strong and well-balanced character.

Those who love the students and who are anxious for the fame of the School and the future usefulness of her children, ought to impress upon them that the ideals of student days must not be only, or even chiefly, concerned with present success and brilliant graduation. Far higher and more important than any intellectual or professional distinction is the ideal of such a training and of such a discipline of character as may enable the alumni of the School to use their hard-won knowledge in the best possible way to the glory of God and for the welfare of those who consult them. It is the error of the young to

believe that the *summum bonum* is to be found in what they *do*, and in what they *acquire*. These things are good, but far more important, and far more satisfactory, is what the students *are*, and the true measure of success is the ability to make the best possible use both of their original endowments and of the opportunities afforded to them during student days.

The conditions of student life are constantly becoming more complicated and more difficult to use to the best advantage. The very fact that our numbers have so greatly increased provides each student with a wider environment to which she has obligations, upon which she cannot but exercise influence, and from which she, in her turn, receives impulses both good and bad. The fact that many of our students are now working in mixed schools among male fellow-students, and in circumstances where practically each girl must be responsible for herself, is a further complication; she has to hold her own with very little guidance, and her only external safeguard is the public opinion by which she is surrounded.

With more special regard to the mixed schools, the women and their friends have to remember that this arrangement is still in the experimental stage; that it is still sufficiently a novelty to attract considerable attention; that their conduct is closely scrutinised; and that the eyes observing them are not all necessarily friendly. Women who work

in these, or any similar, circumstances, must for the credit of their school and their sex be extraordinarily careful to abstain, not only from all appearance of evil, but from any, even the slightest, disregard of the amenities of life. It is not sufficient for each girl that she should possess the "white flower of a blameless life," but it is also necessary that the white flower should be free from the slightest shadow which could in any way detract from its lustre. Put in homely language, it is not sufficient that the woman student's life should be blameless, it must also be so attractive, and so strong in its honesty that it may be a source of help and of strength to fellow-students. Many lawful things are not expedient, and in judging of the desirability of any act each young woman must ask herself the question: In thus doing am I really taking the highest and the best line? Shall I thus most readily uphold and advance the good tradition of my School? There is no doubt that the girls of the present time are called upon to play a far more difficult part than fell to those of us who were students forty or fifty years ago. We had to fight hard for instruction, for recognition, and to secure the respect and approval of medical men and of the general public: now the students have all their physical and professional wants freely supplied: the profession and the public are prepared to receive them in a friendly and ungrudging spirit, but owing to their more complicated environment, and to the constantly

growing laxity of social conventions, the women students of to-day have moral difficulties and spiritual obligations from which we were free.

As one looks at the students gathered together to listen to the Inaugural Address or to receive the rewards of their hard work, one is inevitably reminded of the emotion felt by Professor Jowett, who looked on an array of undergraduates at Oxford, and exclaimed, "Good God, gentlemen! what will become of you?" One is frequently asked the question: How do you expect that all these young women are going to make a living as doctors? My invariable reply is that they will do very well. My optimism is based on the experience of forty-five years. I know that in certain circumstances supply creates demand. I also know that the majority of women who have once been attended by a doctor of their own sex feel the suitability and comfort of the arrangement.

I have been warned by perfectly friendly critics that the war has changed everything, and that the changes wrought are not all favourable to the success of women doctors. My own conviction is that women doctors will succeed or fail according to their merits, and that those merits must be sought not only in the intellectual and professional, but still more in the moral and spiritual status they may gain. It seems to me, looking back over these long years, that my patients expect and desire from me far more than surgical skill or medical experience.

They seek, it may be unconsciously, the moral tonic and the spiritual stimulus of which we all stand in need from time to time. Many of them have said to me, "The great comfort is that I can tell you everything." It is in order that women doctors should be able to be wise and sympathetic guides, real comforts and true healers of mind and body, that one so ardently and so jealously seeks that nothing shall interfere with the right and perfect development of their own natures. The very varied and difficult character of our girls' present environment will become a marvellous asset if used aright. The more they know of the perplexities and difficulties of human life, the more they have suffered, resisted, and triumphed over the temptations and perplexities that surround them, the better fitted will they be to discharge their chosen mission.

The professional prospects of the women are decidedly good. The powers that be have gradually learned that women doctors can be relied on to do certain kinds of work and to do them well. The record of the women's medical work during the war (see p. 200 ff.) affords admirable proof of their professional and administrative ability, it also shows that they are good colleagues and cheery comrades. The story of their doings is not only interesting but it goes far to prove their value and to justify their existence.

Medical women are being more and more utilised

in the public services. They hold many posts under Government, some of them well paid and distinguished. They have been found very suitable as Medical Officers of Health and in other municipal appointments. A constantly increasing number of them is essential to the running of many philanthropic enterprises, among them Infant Welfare Centres, Rescue and Preventive Homes, and Schools. In the care of persons of unsound mind, and in the management of the defective and the feeble-minded, medical women have a large and very suitable field of work : they are usually acceptable to the patients and are trusted and liked by their colleagues.

One of the great spheres for which women doctors are really essential is in the management of, and work in, Medical Missions, especially in such countries as India. Women are very welcome in Medical Missions all over the world, but they are *necessary* where a large number of the patients are *purdah* women, unable, whether from religious conviction or from social convention, to avail themselves of the services of men doctors. The great Missionary Societies have never yet been able to secure a sufficient supply of medical officers for the female side of their hospitals. The real difficulty in this matter is the chronic lack of funds from which the Missions suffer. It must be remembered that a doctor's training occupies at least six years, often more, and that the necessary outlay at the present time is approximately £1500. Such an outlay on

education must be looked on as an investment, and in not a few instances the money necessary to provide fees and maintenance has to be borrowed. Even if a girl's father provides the necessary funds he not unfrequently expects her to repay the outlay, or at any rate to contribute towards the education of younger members of the family. In such cases the salary offered by a missionary society is quite inadequate, and may shut out from the mission service women who have plenty of missionary spirit, but whose financial position presents an insuperable difficulty.

In thinking over the different ways in which a medical woman can achieve professional success and reap the fruit of her long and arduous training, one must not forget that amongst the most useful and satisfactory work is that of the general practitioner. The general practitioners are the backbone of the medical profession. It is they who come into the most intimate relations with the great body of the public: they are the trusted friends and advisers of mankind. It is to the doctor that individuals and households alike turn with a touching confidence in times of sickness and anxiety. There are few professions which make so large a demand on unselfishness and self-abnegation as does that of the general or family practitioner. Such a doctor must be ready and willing to go to patients whenever they need, or think they need, help and advice. No considerations of convenience, of sleep,

of food, of health, can be admitted as excuses for a failure to respond to the call.

The case is somewhat different with consultants and specialists. As a rule they have their stated hours for receiving patients, and are frankly "Not at Home" at any other time. Whether they be surgeons, physicians, or specialists, they have many patients who cannot come to them, and for whose sake therefore they must fence off the very early morning hours as well as those of the afternoon. This leads to their work being better organised, and to that extent more comfortable and more manageable. Their work, therefore, may be considered to be less onerous, but on the other hand much more is expected of them, and rightly so. Much study, professional, philosophical, and spiritual, is essential to the making of a really good consultant. Such a one must not only be quick to recognise the import of signs and symptoms; it will not suffice for a surgeon to operate brilliantly or for the physician to have a keen, intuitive appreciation of the patient's present state, and of the probable course of the disease. In addition to all this there must be an ample experience of life, a quick, sympathetic appreciation of the patient's circumstances and difficulties, and, above all, an unwavering determination to be "on the side of the angels."

Sir John Bland Sutton says that God is very good to doctors, that no sooner does a doctor begin to believe in his own skill, and to be prepared to back

his good luck, than a series of misfortunes, great or small, supervene, and he is taught to pray, as Rudyard Kipling did :

“ From heathen heart that puts her trust
In reeking tube and iron shard,
All valiant dust that builds on dust,
And guarding calls not Thee to guard—
For frantic boast and foolish word,
Thy mercy on Thy people, Lord ! ”

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