

**Remarks on the situation of the poor in the Metropolis, as contributing to the progress of contagious diseases; with a plan for the institution of houses of recovery, for persons infected by fever / [T.A. Murray].**

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REMARKS  
ON THE  
*SITUATION of the POOR*  
IN THE METROPOLIS,  
AS CONTRIBUTING TO THE PROGRESS OF  
*Contagious Diseases;*

WITH A  
PLAN  
FOR THE INSTITUTION OF  
HOUSES OF RECOVERY,  
FOR  
PERSONS INFECTED BY FEVER.

*By Thomas Archibald Murray.*

*Published by the Desire, and at the Expence of the Society for  
Bettering the Condition of the Poor.*

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1801.

[Price One Shilling.]

REMARKS

STATION TO THE POOR  
IN THE METROPOLIS



THE HISTORY OF THE  
RECOGNITION OF THE  
GOSPEL IN THE  
METROPOLIS

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TO

The Honourable and Right Reverend

The Lord BISHOP of DURHAM,

*President ;*

The Right Hon. LORD TEIGNMOUTH,

THOMAS BERNARD, Esq.

JOHN SULLIVAN, Esq. and

The Reverend DR. GLASSE,

*Vice-Presidents ;*

And the other Members of the General  
Committee of the Society for Bettering the  
Condition and Increasing the Comforts of  
the Poor.

MY LORDS AND GENTLEMEN,

IN offering to your notice the contents of  
the following pages, I have no doubt that  
the subject to which they relate will ap-  
pear



pear so closely connected with the important object of your Society, as to obtain from you an attentive consideration.

In the very short account which I have given of the system of domestic œconomy generally prevailing among the Poor of the Metropolis, and in the description of the destructive effects produced by that system, I have confined myself to the relation of such circumstances as have occurred under my own immediate notice ; but I have the satisfaction of being able to add that what I have stated and proposed is honoured by the entire sanction of many gentlemen of the highest respectability in their profession.\*

\* In this number I am happy in being allowed to particularize Sir Walter Farquhar, Dr. Saunders, Dr. Garthshore, Dr. Willan, and Dr. Ferriar of Manchester. Dr. Willan was, I believe, the first who publicly recommended the establishment of Houses of Recovery in the neighbourhood of London.



The measure of which I here endeavour to point out the necessity, seems so perfectly unexceptionable, that I cannot anticipate any solid objection to its adoption. I am indeed aware that when a similar plan was first brought forward at Manchester, many well-intentioned persons opposed it, from an apprehension that the contagion would be as it were concentrated on the spot where a House of Recovery should be established; so as not only to expose to hazard those who might be immediately connected with it, but also to infect the whole surrounding atmosphere, and endanger the safety of all the neighbourhood. This apprehension however has been long since abandoned as ill founded, being wholly inconsistent with a knowledge of the facts ascertained respecting the communication of infection, all of which concur to prove that the contagious atmosphere



sphere is rendered perfectly innoxious by being *diluted* in a sufficiently large quantity of pure air. The experience of Manchester is particularly to this effect; the House of Recovery, although in the centre of that populous town, is perfectly airy, in all respects comfortable, and free from the appearance of infection; and the number of contagious fevers in its immediate vicinity has been *diminished* to an astonishing degree\*.

I now beg leave to place the proposal, and all which relates to it, under your protection; with the entire confidence that it will be in the hands of those who are sincerely disposed to promote whatever is beneficial to the poorer classes of the

\* As mentioned in the Appendix, page 39.

community, and perfectly competent to estimate the importance of the measure now submitted to their consideration.

I have the honour to be,

With the greatest respect,

My Lords and Gentlemen,

Your most obedient servant,

T. A. MURRAY.

*Greville-Street,*

*Dec. 3d, 1800.*



community, and perfectly competent to estimate the importance of the measure now submitted to their consideration.

I have the honour to be,

With the greatest respect,

My Lords and Gentlemen,

Your most obedient servant,

T. A. MURRAY.

## REMARKS, &c.

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A READINESS to alleviate the sufferings of the lower orders of society constitutes so prominent a feature in the character of the present age, that few measures which have had that object in view have failed of obtaining the most liberal and effectual patronage, when properly submitted to the public. In presenting, therefore, the following plan, no other commendatory introduction of it seems necessary than evidence of its direct tendency to render less numerous the sources of disease and misery among the poor, for whose immediate benefit it is intended ; but if it shall farther appear that there is no one, of whatever



rank in society, who may not derive the most essential advantage from the adoption of the measure here to be proposed, it will acquire a stronger, and, it may be hoped, an irresistible claim to attention and support.

Of the various diseases which shorten human life, a very considerable proportion consists of those termed *infectious*\*; that is, which occasion the sick person to taint the atmosphere around him, so that it becomes capable of exciting in others, who are exposed to it, a similar disease: and this effect may be produced by the direct application of the contagious matter; or the noxious effluvia may be deposited on various substances, especially wood, and cotton or woollen cloths, so as to become, at some future pe-

\* Contagious diseases have been divided into two classes; one comprehending those which arise from *specific* contagions, as measles and small-pox; the other, those produced by what may be termed *general* contagions, as the putrid or jail fever. Though much or what is here said applies to diseases of both descriptions, it is obvious that the latter class is that to which the remarks chiefly allude, and the plan wholly refers.

riod,



riod, active and powerful instruments of contagion.

But although Fevers of a particular description are with perfect propriety denominated infectious, it is not to be understood that in every instance, and in all situations, they manifest themselves to be so by the effects above mentioned. To the propagation of contagion some circumstances are essentially necessary ; some are especially conducive. The virulence of it, or the facility with which its effects are produced, may be considered as chiefly proportioned to the quantity of infectious effluvia with which the air is impregnated : but any degree of impurity in the air independent of such impregnation—any length of time during which the effluvia may have been allowed to stagnate—and any degree of weakness in the bodies, or depression and anxiety in the minds, of persons exposed to their action, are also circumstances which materially promote the progress of contagion.



That the poor of every populous town are peculiarly liable to the attacks of contagious distempers, is a fact of which every one, who has at all attended to the subject, must be fully satisfied; but those who have witnessed the situation of the lower classes in the country only, and have not been induced to explore the recesses of poverty and disease in the metropolis, cannot be aware how many of these dwellings are in situations favourable to the spreading of infection, on all sides closely surrounded by buildings, and in their whole appearance indicating filth and wretchedness.

In the interior arrangement of these habitations, circumstances frequently subsist, which, it must be obvious, are wholly incompatible with cleanliness and with comfort. Such evils are undoubtedly the consequence of increasing population, but they are not the necessary and inseparable effect. On the contrary, experience \* has shewn that in many

\* See Reports of the Society for bettering the condition of the Poor, *passim*.



respects they admit of alleviation and remedy; and there is every reason to expect that the more accurately the real state of the poor shall be ascertained, the more distinctly will the means of ameliorating it be understood, and the more effectually will the energy of the benevolent and enlightened be called forth to correct and improve it.

In a large proportion of the dwellings of the poor, a house contains as many families as rooms: on the ground-floor resides almost universally the master of the house, with his family, which if pretty numerous, sometimes occupies the whole of that floor; if not, the back room is tenanted by another family. This apartment is in many instances of a size scarcely more than sufficient to admit of a bed, with space for a person to pass it, and so much as is necessary for a fire-place. The rooms which are in the front of the house are usually larger, but they are often occupied by families more than proportionally numerous.

But



But although the accommodations in the middle and upper part of the house are extremely uncomfortable, they are in every respect preferable to those in the lowest apartment or cellar, where darkness, dirt and stagnant air combine to augment all the evils resulting from such a situation\*.

The state of the windows requires to be particularly noticed, as being intimately connected with the present subject. Many of these cannot be opened without admitting air apparently more noxious, certainly not less offensive, than that already contained in the room; in other instances, the sashes have frequently been rendered by age or accident immoveable; wood or paper has been substituted for broken panes of glass; and every crevice is so carefully stuffed by woollen rags or some other filthy substance, that as means of admitting fresh air the windows are often totally useless†.

Thus

\* See Appendix, No. I.

† To enter into more minute particulars, and describe all the circumstances of these miserable apartments, seems scarcely



Thus from various circumstances the situation of a dwelling seems in many instances very wretched, even while the inmates of it remain in health: what an addition of misery it receives, when any of them, especially either of the heads of a family, is attacked by disease, may be more easily imagined than described. Improvident for the future while their labour enabled them to procure the means of subsistence; perhaps in their most fortunate days earning too little to admit of any savings, every evil is now doubled. If the father be confined by sickness, the chief source of the family's support is directly and at once cut off; if the mother be the person attacked, so much of her husband's time is employed in attending to her, and supplying

scarcely necessary, the object of this statement being merely to shew the utter impossibility of effectually checking the ravages of contagion among the poor, while they remain in their own habitations. Farther information with many excellent remarks may be found in the extracts, given at the end \*, from Dr. Willan's report, which fully confirms all that is here asserted, and indeed forms, with what Dr. Ferriar has written, the foundation of all that is here advanced and proposed.

\* See Appendix, No. II.



her place in the care of the children, that less of it can be devoted to labouring for their support: in either case, with an increase of expence, the means of defraying it are diminished, and some article from their already small stock of clothes or furniture, is every day disposed of, to enable them to meet the exigency of the moment. Here it may be thought the misery is complete: still however it admits of aggravation, if the distemper, which has made its way into their abode, be not contagious\*: if it *be* contagious, the wretchedness of the inhabitants is consummated; it can receive no augmentation†.

\* See Appendix, No. III.

† As these remarks relate chiefly to the communication of contagious fevers from one person to another, it may be proper to observe here that those diseases require, for their first production, nothing more than the effluvia of the living body, become putrid by stagnation; and may of course arise in any ill ventilated and crowded place. It therefore happens that they not only are easily *propagated* in such habitations as have been described, but usually *originate* there, without any previous intercourse between the inhabitants of them and any infected person. See Appendix, No. IV.

From



From what has been said above on the circumstances conducive to the progress of infection, it may be understood how little chance of escape there is for the individuals of such a family, weakened by the diminution of their ordinary means of subsistence\*, harassed by anxiety, exhausted by fatigue. The powers of medicine, however early employed, however judiciously directed, will be unavailing to counteract the effect, while the cause is so constantly and so forcibly applied.

Within a short time from the commencement of the illness of the person first attacked, some other member of the family is usually seized in a similar manner, and frequently all in succession. From the closeness of the room, the air becomes completely vitiated by the noxious effluvia, some of which are deposited on the walls and on every article of bedding, clothes and furniture. In this state, dread of the infection, now too manifest, sometimes deprives the

\* See Appendix, No. V.



miserable sufferers of the assistance of their neighbours\*; but the appearance of the disease in another apartment, there to occasion similar calamities, soon evinces the insufficiency of their precautions. It now goes on from room to room, and from floor to floor, until every one under the same roof has experienced the effects of its ravages, and the house becomes completely infected†. No sooner does one lodger change his residence than he is succeeded by another, without any intermediate time being allowed for purifying the apartment, and the disease is thus perpetuated by a succession of fresh subjects for its attack‡.

But it is not to the house in which it first appears, that the evil consequences of a malady of this description are confined; the means of spreading the infection are too various for it to stop here§. Sentiments of humanity and affection prevailing over

\* See Appendix, No. VI.

‡ Ibid, No. VIII.

† Ibid, No. VII.

§ Ibid, No. IX.

those



those of timid precaution will, at least before the virulent nature of the disease has been fully ascertained, give rise to occasional visits of relations and friends from a distance, by whom the contagion may be still farther propagated. Thus servants often introduce a fever among a family, who are unsuspicious of its approach and generally unable to account for its origin; the person first attacked being often so circumstanced, as to lead to an apparent certainty that there has been no previous intercourse with any one by whom it could be communicated \*.

There is yet another consequence of the appearance of a contagious fever in the habitations of the poor, still more extensively destructive than that now mentioned. When the general illness of a family renders all the members of it absolutely incapable of supporting each other, they would perish from mere want, did they not obtain assistance from the funds which the law has provided for that purpose; but as the en-

\* See Appendix, No. X.



tire maintenance of a family at home is not compatible with the rules commonly observed in the distribution of those funds, a removal of the sick persons to a workhouse takes place, where the absurdity and impolicy of the measure is generally soon evinced by the infection of many, perhaps all, of the previous inhabitants of the house.

All the mischiefs now described occur in those cases which may be deemed comparatively favourable, as terminating in the ultimate recovery of the persons first infected\*. It seems almost needless to point out the additional injury which the community will have received, if the fever in its course have proved fatal to the father of a numerous family; or to dwell upon the losses which society every year sustains from the devastations of contagion. It is indeed a subject of the most serious importance; but all that relates to it is so obvious as to preclude the necessity of minute discussion.

\* See Appendix, No. XI.



It may be hoped, that what has been said is sufficient to demonstrate the good effects which would have followed the removal of the person, or even the family, first attacked by the contagious fever, from the situation where it was perhaps generated; which at least increased its violence and facilitated its communication to others. Could this have been effected and other salutary measures adopted, the long train of subsequent miseries would not have ensued; much sickness would have been prevented; many lives would probably have been saved. It now remains therefore to shew by what means this extensive evil may be corrected: and fortunately a remedy can be proposed, not upon mere speculation, but recommended by the experience of a large and populous town. A short account of the advantages produced by the institution for diminishing the number of contagious fevers among the lower classes at Manchester, will suffice to explain what benefits may in this respect be conferred on the Poor of the Metropolis.

An



An alarming infectious fever, which clearly originated with a single individual, having in the year 1795 appeared in the neighbourhood of Manchester, Dr. Ferriar, who had repeatedly recommended the establishment of houses for the reception of fever-patients\*, was requested to prepare a plan for such an institution. This he accordingly did, and in consequence of it four small adjoining houses, detached from other buildings, were fixed upon, and being fitted up so as to accommodate twenty-eight persons conveniently, were opened in May 1796, for the reception of patients. The circumstances of the cases which were the first objects of the charity were of the most affecting description; and such as left no room to doubt that not only the lives of the persons themselves were preserved by their removal, but that the infection of many others was pre-

\* An establishment for this purpose had been suggested by Dr. Haygarth, in a paper read before the Royal Society in January 1777, and inserted in the 68th volume of the Philosophical Transactions. Fever-wards were established by Dr. Haygarth at Chester in 1783.



vented, which would otherwise inevitably have ensued.

The good effects of this institution soon became abundantly apparent, and indeed exceeded all reasonable expectation. The number of sick among the poor was perceptibly diminished; and at the end of the first year an astonishing decrease was observable in the bills of Mortality\*. The result of more than four years' experience has now completely fulfilled the predictions by which the public was encouraged to the formation of the establishment; and similar institutions have been founded in some of the most populous towns in that quarter of the kingdom.

It is therefore reasonable to conclude that Houses of Recovery in London would effect a very considerable diminution of the number of contagious distempers, and

\* A more particular account of the benefits accruing from this institution is given in the Appendix, No. XII.

would



would thus be attended by various most essential advantages. To extend to every part of the Metropolis the benefits, which they are likely to produce, at least *six* institutions, in different situations, would perhaps be necessary. But as the attempt to carry at once into effect a plan on so large a scale would unavoidably occasion much delay in its execution, and would be liable to many other objections, it seems on every account preferable to commence with the establishment of *one* Receptacle for persons infected by Fever.

In sketching the following outline of a Plan for that purpose, the principles so successfully applied at Manchester have been closely kept in view. If it shall be thought worthy of attention, many circumstances will occur to be noticed, which have not now been provided for ; many imperfections and errors, almost inseparable from the first proposal of a comprehensive measure, will require to be remedied and corrected.



OUTLINE OF A PLAN  
81  
*Outline of a PLAN for the Establishment of  
a House of Recovery, for Persons infected  
by contagious Fever.*

1. All poor persons labouring under infectious fever, and residing within a mile of the House of Recovery, shall be considered at the opening of it as proper objects of this charity, but the limits shall be enlarged as soon as possible.

2. The House to be provided for the reception of such persons, shall be in an airy situation; detached from other buildings; in the neighbourhood of a populous district of the town, and large enough to accommodate as many patients as the funds of the House shall, at its opening, be deemed adequate to support. The rooms shall be furnished with iron-bedsteads, and straw-beds.

3. Two or more Physicians and an Apothecary shall be appointed, the latter of whom shall reside near the House.



4. The servants of the House shall consist of a Matron, who shall superintend the domestic concerns; three ordinary nurses (until more shall be found necessary); and a Messenger or Porter.

5. Upon any application for admission, notice shall be immediately given to one of the Physicians, who shall, as soon as possible, ascertain the state of the person recommended; and if he deem it expedient that the patient be removed to the House, he shall give an order to that effect.

6. A sedan chair, provided with a moveable lining, shall be kept at the House, in which all persons, ordered by the Physician to be removed, shall be carried thither at the expence of the institution\*.

7. The internal regulations shall be similar to those of the House of Recovery at Man-

\* No one should be admitted who is not removed to the house in this, or on an open litter, for the reason stated in the Appendix, No. XIII.



chester\*, with the exception of the 11th, 12th, 13th, and 15th, which relate to circumstances entirely local.

8. When the Physician shall not think the removal of the sick person advisable; or when the fever shall have ceased in a dwelling-house; he may, with the concurrence of the Committee, order such measures † as may be conducive to check the

\* Dr. Ferriar's Med. Hist. and Reflections, Vol. III, p. 66. and Reports of the Society for bettering the condition of the Poor, Vol. I, p. 101.

† How much may be done by cleanliness and ventilation to prevent the spreading of infectious diseases, is every day experienced: in no instance more strikingly than in the British navy. Formerly it seldom happened that a fleet was at sea for any considerable time without its having been necessary to send home some of the ships, on account of the prevalence of contagious fevers. Now, on the contrary, the health of seamen receives so much attention from those to whom the administration of naval affairs is entrusted, that large fleets are enabled to keep the sea for a great length of time and in the most unfavourable seasons; and no instance of that nature has occurred during the present war, although it has been attended with more extensive, and, it may be added, more successful naval operations, than any former one.



progress of contagion, or necessary to prevent the renewal of its effects. Of this description are whitewashing and cleansing the apartments; purchasing new bed-clothes or apparel, when the destruction of those infected shall have been necessary, &c. The expence of such measures shall be defrayed from the funds of the House.

It is suggested that the Committee should order such measures as may be conducive to check the

\* Dr. Ferriar's Med. Hist. and Reflections, Vol. III. p. 66. and Reports of the Society for bettering the condition of the Poor, Vol. I. p. 101.

† How much may be done by cleanliness and ventilation to prevent the spreading of infectious diseases, is every day experience. In no instance more strikingly than in the British navy. Formerly it seldom happened that a fleet was at sea for any considerable time without the having been necessary to send home some of the crew on account of the prevalence of contagious diseases. Now on the contrary, the health of seamen receives so much attention from those to whom the administration of naval affairs is entrusted, that large fleets are enabled to keep the sea for a great length of time and in the most successful manner; and no instance of that nature has occurred during the present war, although it has been attended with more extensive, and, it may be added, more successful naval operations, than any former one.

APPEN-

## A P P E N D I X.

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### No. I.

Page 6.

“THE custom of inhabiting cellars tends to promote both the origin and preservation of febrile infection. But even in them the action of filth and confined air is always apparent when fevers arise. I have often observed that the cellar of a fever-patient was to be known by a shattered pane, patched with paper, or stuffed with rags, and by every external sign of complete dirtiness.”

Dr. Ferriar's Medical Histories and Reflections, Vol. I. page 138.

No. II.



## No. II.

*Extract from Dr. Willan's "Reports on Diseases in London," for March 1800.*

"During the mild open weather in January, and in the beginning of February, the malignant fever was rapidly diffused to a very great extent, and with an aggravated train of symptoms. Among the poor, the mortality from this cause was nearly as stated in the last report\*, notwithstanding the attentive administration of proper articles of diet, and of suitable remedies, with plenty of wine. The good effects of all these applications are almost wholly superseded by the miserable accommodations of the poor with respect to bedding, and by a total neglect of ventilation in their narrow, crowded dwellings. It will scarcely appear credible, though it is precisely true, that persons of the lowest

\* "One in four of all persons affected with fever."



class do not put clean sheets on their beds three times a year; that even where no sheets are used, they never wash or scour their blankets and coverlets, nor renew them till they are no longer tenable; that curtains, if unfortunately there should be any, are never cleaned, but suffered to continue in the same state till they drop to pieces: lastly, that from three to eight individuals, of different ages, often sleep in the same bed; there being in general but one room and one bed for each family. To the above circumstances may be added, that the room occupied is either a deep cellar, almost inaccessible to the light and admitting of no change of air; or a garret, with a low roof and small windows, the passage to which is close, kept dark in order to lessen the window tax, and filled not only with bad air, but with putrid, excremental or other abominable effluvia from a vault at the bottom of the stair-case. Washing of linen or some other disagreeable business is carried on, while infants are left dozing, and children more advanced kept at play whole days on the tainted bed; some  
unfavoury



unfavoury victuals are from time to time cooked: in many instances idleness, in others, the cumbrous furniture, or utensils of trade with which the apartments are clogged, prevent the salutary operation of the broom and white-washing brush, and favour the accumulation of a heterogeneous, fermenting filth. From all these causes combined there is necessarily produced a complication of fœtor, to describe which would be as vain an attempt, as for those to conceive who have been always accustomed to neat and comfortable dwellings. It cannot be wondered at that in such situations, contagious diseases should be formed, and attain their highest degree of virulence."

See Medical and Physical Journal,  
Vol. III. page 298.

To confirm and illustrate the preceding representation, it may not be improper to describe the following case, which occurred after the general statement had been completed.

On



On the 19th of November George Cotton was visited as a home-patient of the Carey-Street Dispensary, and was found to be affected with Typhus-Fever. His residence was in a narrow, covered alley, leading from Shoe-Lane (the entrance to Richard's Buildings) in a back room, on the ground-floor. There was a large window to the room, which from its very construction could not be opened; and as several panes of glass had been broken away on one side, a shutter which covered that part was carefully, and, it was said, constantly closed. The inhabitants of this room were—the sick man, his wife, and five female children, of the age of 16, 15, 11, 4 and 2 years, respectively. There was but one bedstead in the room, but some bedding lay on the floor, between this and the fire-place. The room, the bedding, and the persons of the inhabitants were all in the highest degree filthy and offensive.

The mother had been first attacked, in consequence, as she supposed, of having visited



sited a person, who died of the fever in one of the upper apartments. She had immediately obtained admission into an hospital, and remained there until she thought herself able to return to her family; though still retaining, in her clothes or person, enough of the contagion to infect them. Soon after her return her husband was attacked by the fever; then the second and third of her daughters; afterwards the eldest and the two youngest. Medicine, as might have been foretold, was of very little service in such a situation. No injunctions could induce the woman to clear off the dirt from the skins of the patients; no remonstrances could prevail on her to allow of the door and shutters remaining open. The most woeful experience could not convince her of the inefficacy of "a handful of rue," and the sprinkling of vinegar: she seemed even to think it desirable that the room should be kept as close as possible, because then the smell of these supposed preservatives was most strongly perceived.

The



The father of the family died on the fourth day after he was first visited. The children still continue to linger under the disease. The eldest of them was, on the 27th of November, conveyed to an hospital in a *hackney coach*, having until the time of her removal lain by the side of her sister, on that part of the infected bed which the dead body of their father had previously occupied.

Dec. 1, 1800.

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No. III.

Page 8.

IN such circumstances the disease, though not originally and in its own nature contagious, may very often become so. Dr. Willan remarks that persons, residing in infected apartments, sometimes by means of fresh



fresh air and the exercise of the day, continue long unaffected by contagion. "It must however," he adds, "be observed, that if through taking cold, or any other cause, they should be confined to the house for some days, they assuredly take the fever. So it happened in the late unfavourable season: whoever was obliged to keep his bed for a catarrh, pleurisy, or inflammation of the lungs, within three or four days caught the fever, and almost every one so affected died. The children are infected from the new source of contagion; and the mother, after closing the eyes of her husband, and perhaps of more than one of her offspring, sinks exhausted with grief, watching and fatigue, and is herself the last victim to the disease."



## No. IV.

Page 8, Note.

“ IT is a fact equally alarming and true, that many persons in indigent circumstances are exposed, in our great towns, to such evils as I have shewn to be *productive* of febrile contagion.”

“ One of the most satisfactory instances of this sort was observed by Dr. Heysham at Carlisle, in 1778 or 1779. A fever of the nervous kind raged in that city, which did not seem to have been introduced from any neighbouring place. Dr. Heysham, with great industry, traced its origin to a house near one of the gates, which was tenanted by five or six very poor families; these unhappy creatures had blocked up every avenue of light with which even wretchedness could dispense, and thus contaminated the air of their cells to such a degree, as to *produce* the poison of fever among them.”

“ The



“ The Plague itself appears to *originate* with the crowded inhabitants of the miserable villages in the East.”

Dr. Ferriar, Vol. I.

pages 240 and 245.

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No. V.

Page 9, line 6.

THE effect of a deficiency of necessary food, in disposing the body to receive the contagion of fever, is a circumstance of universal observation, and frequently exemplified among the poor. It is however in the highest degree satisfactory to have reason for believing, that the scarcity which at present subsists, has not materially added to the number of diseases in general among them. The monthly average of the cases occurring under the notice of a physician to an extensive charitable institution was 220 in the six months preceding the 20th of November, but in the month following only 171 cases occurred under the same circumstances\*.

\* See British Magazine for December, 1800.



This reduction may perhaps be attributed to the healthy state of the atmosphere during the last mentioned period, but it is quite as considerable as can be accounted for from any change which has taken place in that respect. The cases here referred to having occurred chiefly among the lower classes, the observation proves, as far as it extends, that the poor have not become more unhealthy at the period when the scarcity of provisions must have affected them most perceptibly, but for the unexampled attention which has been paid to their necessities, and the unremitting exertions which are made for their relief.

Dec. 24, 1800.

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No. VI.

Page 10.

DR. Ferriar mentions the deplorable situation of two children in this respect: "Their parents had been swept off by the disease, and as great terror prevailed in the neighbourhood, these little wretches were left almost



almost destitute of every thing. One of them died, from the effects of previous hunger, very soon after its reception into the House of Recovery."

Similar instances have probably occurred to many practitioners of medicine among the poor. It is not, however, meant to be asserted, that they are by any means frequent. On the contrary, Dr. Willan mentions an error of an opposite kind as a means of diffusing infection through a house. "The inhabitants of the second story," he observes, "suffer from contiguity and from their friendly attentions to those above them, or to the tenants of the cellars; so that in whatever part of the house a fever commences, it is soon diffused among all the inmates."

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No. VII.

Page 10, line 9.

AN exception to this general infection of a house is sometimes the result of judicious precaution.



precaution. "I met with a remarkable instance of the ease with which contagion may be confined within certain bounds. A house, in a very confined situation, had been infected during several years in three of the rooms; and, at one time, when the whole family was ill, four persons died from want of the common offices of a nurse. During all this time an elderly couple, who lodged in the fourth room, separated from the infected only by the narrow staircase of the house, preserved themselves from the disorder, merely by avoiding all communication with the rest of the family."

Dr. Ferriar, Vol. II. page 195.

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No. VIII.

Page 10, line 15.

Dr. Ferriar, alluding to some lodging-houses in Manchester of which he describes  
 the



the situation, says, "In those houses a very dangerous fever constantly subsists, and has subsisted for a considerable number of years. I have known nine patients confined in fevers at the same time in one of those houses, and crammed into three small, dirty rooms, without the regular attendance of any friend; or of a nurse. Four of these poor creatures died, absolutely from want of the common offices of humanity, and neglect in the administration of their medicines." "As soon as one dies or is driven out of his cell, he is replaced by another, who soon feels in his turn the consequences of breathing infected air. Ventilation can be very imperfectly obtained in many of these houses." "In most of these places lodgers are received. The consequence is a perpetual succession of fever-patients in them."

Dr. Ferriar, Vol. II. page 183.  
and Vol. I. page 136.



## No. IX.

Page 10.

“ When a fever either arises in, or is introduced into the house of a poor person, every circumstance favouring its progress, it generally attacks the family in succession: their clothes, and the woollen and cotton parts of their furniture become infected, retain the infection tenaciously, and are capable of communicating the disease for a long time. These they can neither afford to purify or destroy. Thus their dwellings and persons continually breathe contagion; and where this is the situation, not of one family only, but of a great number, it is hardly possible to prevent a communication of the disease to the families of the rich, among whom it would never have been *produced*.”

“ The clothes disposed of, thoroughly penetrated by contagious effluvia, are purchased by healthy persons, without suspicion; and thus fevers may often arise among the servants of the rich.”

Dr. Ferriar, Vol. I. pages 243 and 140.



## No. X.

Page 11.

"It may give a clearer idea of the extent of danger from the access of unnecessary visitors, to mention, that an elderly woman, just recovering from the fever, informed me, that she had fifteen children, all settled in the town, and all of whom had undergone the fever within these two months."

Dr. Ferriar, Vol. III. page 53.

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## No. XI.

Page 12.

THERE is one point of considerable importance, which perhaps ought to have been more distinctly noticed in the preceding remarks; namely, that all the circumstances which conduce to the generation and progress of contagion, also affect in the highest degree



degree the *event* of the disease in each particular instance. It has been observed, that where two or more persons are confined to one bed by a fever at the same time, it almost invariably happens that at least one of them sinks under the disease. "In almost all the instances of fatal termination, the patients die at a very extended period of the disease, their strength being rather gradually exhausted by its duration, than overpowered by its force\*."

"It is very difficult," as Dr. Ferriar remarks, "to eradicate the fever, when it seizes a family thus situated. The convalescents, from their confinement in the midst of infection, have frequent relapses, attended with increasing danger, so that the disease continues in the same spot for several months together. The recovery even of those who do not relapse, is also tedious and imperfect, beyond the conception of any who

\* Observations on Diseases in London, by the Physicians of the Finsbury Dispensary, Med. and Phys. Journal, Vol. IV. page 395.

have



have not experienced cases of this nature. The want of proper nurses must be added, as none of the least evils attending this unfortunate class of people. I have no hesitation in asserting, that many lives are annually lost from this cause alone."

Vol. III. page 50.

No. XII.

Page 15.

THE advantages produced by the establishment of the House of Recovery at Manchester, cannot be more distinctly and concisely stated than in the successive accounts which Mr. Bernard has laid before the public.

"The beneficial effects of the House of Recovery are almost beyond belief; the facts are, however, established by authentic documents. The number of fever-patients  
in



in the pile of buildings *in the neighbourhood of the House of Recovery*, for the two preceding years and eight months were 1256 something more than the average of 400 a year: those in the same district, from July 1796, (a period commencing two months after the establishment of the House of Recovery) to July 1797, being twelve months, were only *twenty-six*."

"In January 1796, (before the establishment of the House of Recovery) the whole number of home-patients at the Manchester Infirmary was 296, of which 226 were cases of fever: in January 1797, the number of their home-patients was 161, and of these only 57 were cases of fever\*.

\* The number of home-patients from June 1795 to June 1796, was 2880; from June 1796 to June 1797, the number of home-patients was 1759; that is, the illness of 1121 was probably prevented by the institution of the House of Recovery, in one year.

By "home-patients" are meant poor persons who are visited at their own houses by the Physicians of the Infirmary.

Other



“ Other consequences have attended the extraordinary success of this institution. The Board of Health does *now* receive fever-patients into the House, from places beyond the districts for which it was first established; by which means the environs of the town will be cleared of the epidemic fever. The Infirmary also receives a variety of patients, which they were obliged to refuse, when the Infirmary and Town were oppressed by the enormous croud of fever-patients, whose claims seemed to supersede those of persons not afflicted with contagious diseases.”

“ In the year 1796 there was a decrease of near 400 in the bills of mortality at Manchester. An additional proof to the same effect, of a singular nature, appears in the accounts of the overseers of the poor.” The number of coffins for deceased paupers provided in the two years preceding the establishment of the House of Recovery amounted to 1078: in the following two years it was reduced to 751.

“ There



“There is another very gratifying circumstance, the diminution of the proportion of mortality among the patients of the House of Recovery\*. In 1796 it was nearly one in eleven; in 1797 one in thirteen; and in 1798, not quite one in eighteen. The list is as follows:

Patients admitted from 19th of May	}	247
1796 to 1st of January, 1797,		
Died	-	21
<hr/>		
Admitted in the year 1797	-	349
Died	-	27
<hr/>		
Admitted in the year 1798	-	381
Died	-	21

\* This is probably “because the poor are now induced to apply in the earlier stages of the fever, when medicine can be applied with more effect.” “But the benefit of this institution is not to be calculated by the number of persons cured. Every single removal into the House of Recovery, probably prevents on an average two or three cases of the disease.”

Dr. Currie's Med. Reports on Fevers, p. 217.

“A salu-



"A salutary impression has also been made on the minds of the poor, respecting the utility of cleanliness in their houses. The idea of fever comprehends among them, that of ruin to their circumstances and desertion by their neighbours. It may therefore be expected that they will catch at every means within their reach to avoid so dreadful an evil: and when they find that a public charity extends its care to them so far, as to white-wash their houses (when the physicians report it to be necessary) they must feel the propriety of attending to this object." - - - - -

"Another very important circumstance deserves attention; the check to infectious fevers in Manchester and its neighbourhood. Though the House is open not merely to the town, but to any distance of the neighbourhood that can benefit by it, and the poor are indiscriminately invited, nay almost compelled, to come in; there are only eleven patients now (October 3d, 1799) in the House. In the course of the preceding year 360 fever-pa-  
tients



tients have been cured in the House of Recovery, their habitations purified, and the progress of infection stopped in their respective neighbourhoods. With so great a benefit conferred, not only on that town, but on the human species in general, the total expence this year is under seven hundred pounds."

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### No. XIII.

Page 18.

It is obviously of the utmost importance that the vehicle in which infected persons are removed, should be appropriated solely to that purpose. There is great reason to apprehend that fevers are sometimes communicated in consequence of inattention to this circumstance. A patient with contagious fever is taken hot from bed\*; perhaps

\* An instance of this has been given in the case related in page 25.

wrapped



wrapped in infected clothes ; and placed in a hackney-coach (of which the windows are carefully closed to prevent his "catching cold") for the purpose of being conveyed to an hospital. Various circumstances may concur to occasion a detention of him in the carriage for a considerable length of time : he may be in such a state as to bear only a very slow motion of it ; it may be long before he can ascertain the possibility of his admission ; he may finally be unable to obtain it, and obliged to return. It will not then be wonderful if in some instances there should be sufficient time for contaminating the lining of the coach ; so that a person entering it, in a state of body or mind rendering him susceptible of the effects of contagion, may be infected with the disease of the one who preceded him.

CON-



## CONCLUSION.

IT is impossible to close the discussion of the subject which has occupied the preceding pages better than with the admirable observations of Dr. Currie\*, physician to the Liverpool infirmary: "Contagious diseases, and more particularly fevers, have in general been excluded from the hospitals of England; but the evidence of our infirmary and work-house, of the Chester infirmary, and of various similar institutions, proves that under proper regulations they may be admitted under the same roof with

\* Medical Reports on the effects of Water, cold and warm, as a remedy in fever and febrile diseases; whether applied to the surface of the body, or used as a drink. Page 222.



other diseases, without any danger of the infection spreading through the building. It is not however to be denied that the attendance and the arrangement requisite for patients under fever, render it a matter of convenience and propriety that they should be received into a separate building; and it is a point capable of demonstration that hospitals for such diseases stand pre-eminent in point of utility over all other hospitals, those for accidents that require the immediate assistance of surgery, alone perhaps excepted. The benefit derived from hospitals in other cases consists in removing disease, and is confined to the patient himself; but in cases of contagion, the evils prevented are much greater than those remedied, and the benefit is by this means extended from the patient himself to the circle by which he is surrounded. The establishment of such hospitals was first suggested by tracing the contagion which propagates the contagious fever to its origin, and ascertaining the power of ventilation and cleanliness in preventing and in alleviating the disease. The arguments



ments for such hospitals are strengthened by the discovery of the chemical methods of destroying this contagion ; and, if I do not greatly deceive myself, they are still farther strengthened by the success of that mode of practice in fever, which it is the chief object of this publication to explain and to establish. A vigilant exercise of all the means of prevention and of cure, might indeed, in a short period supersede the use of hospitals for fever, by extinguishing the disease ; a prospect in which the philanthropist might indulge with more safety, if he could calculate with equal confidence on the wisdom, as on the power of his species."

THE END.



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