Quaker contributions to medicine & public health / by Cyril C. Barnard.

Quaker Contributions to Medicine & Public Health

BY

CYRIL C. BARNARD, B.A.

An address delivered at "Howgills" Meeting House, Letchworth, First-day evening, 1st of 8th mo., 1937.

LEOMINSTER:
THE ORPHANS' PRINTING PRESS, LTD.
10 & 12, BROAD STREET

[1938]

Reprinted from
"The Friends' Quarterly Examiner,"
October, 1937, and January, 1938.
No. 284, pp. 307-326, and
No. 285, pp. 69-86.

Quaker Contributions to Medicine and Public Health.

In the earlier periods of the Society of Friends an unusually large proportion of its members took up the profession of medicine. For this there were two reasons, a negative and a positive. Friends, owing to their religious beliefs, were formerly, in common with other Dissenters, refused admission to the two universities of Oxford and Cambridge; the Navy, the Army and the Church were impossible for them for obvious reasons; and through their conscientious objection to oaths they had little sympathy with the legal profession. The only learned profession that was at all consistent with Quaker views of life was therefore Medicine, so that all those young men, who, if holding different beliefs, might have entered any of the other professions, were left with the choice either of becoming doctors or of entering trade or commerce.* This was the negative reason : the positive was that medicine seems to have made a specially strong appeal to Quakers in its own right. George Fox himself at the age of 24 wrote in his Journal (1648), "I was at a stand in my mind, whether I should practise physic for the good of mankind," and late in life he desired that part of the Philadelphia property given to him by William Penn should be devoted to a physic garden. Another Fox in our own times, Dr. R. Fortescue

* Newman (Sir George), The application of Quaker principles in medical practice. *Friends' Quarterly Examiner,* 1930, pp. 57-70.

Fox,* said in 1929, "The longer I live the nearer the calling of medicine seems to approach what I conceive to be a chief purpose of Friends, to work for the restoration of harmony in the world." The lofty ethical standard of the medical profession, dating back twenty-three centuries to the Oath of Hippocrates, and the sacrifice, sense of duty and kindness of heart demanded by its practice, make it peculiarly congenial to Quaker doctrine and practice.

We can then easily understand that large numbers of Friends have always been found among the ranks of doctors, but there are also reasons why, once in the profession, their Quaker training, particularly in earlier times, specially fitted them for such a career. The peculiarities of Quakerism tended to separate Friends from their fellow citizens,† and their secluded home life, from which many of the ordinary amusements and distractions of the world were excluded, encouraged the study of nature, developed the inductive faculty, and fostered an innate public spirit. Thus was bred a selective type of character that found its natural expression in scientific or in social work, both of which have scope in the practice of medicine. The belief in the Inward Light in all men leads to a loving care for all individuals, even the most wretched, depraved and apparently hopeless. The Quaker method of worship, with its absence of paid ministers or formal creeds, leads to a sturdy independence of spirit which makes men unwilling to be

* Fox (R. Fortescue), The place of medicine in the Society of Friends, *Friends' Quarterly Examiner,* 1929, pp. 300-309.

† Newman (Sir George) The application of Quaker principles in medical practice. *Friends' Quarterly Examiner,* 1930, pp. 57-70

bound by tradition and ready to adopt new ideas. The democratic manner in which Friends conduct their business meetings fosters the growth of any gifts for organisation which may be present in individuals, and the many philanthropic activities, in which Friends have always been prominent, provide outlets for these powers to obtain practice and experience.

It is obvious that in this short paper I can cover only a very small part of my subject; and I have therefore selected a few of the fields of medical activity in which, as it seems to me, Quakers have made specially characteristic contributions. These are:

(1) The examples of the lives and medical practice of great physicians;

(2) Work for the profession as a whole by the foundation of medical societies and educational institutions;

(3) Public Health.

I.

Curiously enough the eighteenth century, which in the history both of Quakerism and of medicine was a relatively quiescent period, produced some of the greatest Quaker physicians, outstanding among whom are John Fothergill, the founder of Ackworth School, and John Coakley Lettsom.

John Fothergill (1712-80)* was born in Wensleydale, Yorkshire, and educated at the old Grammar

* Fox (R. Hingston), *Dr. John Fothergill and his friends*, London, 1919.

School at Sedbergh. At sixteen he was apprenticed to Benjamin Bartlett, an eminent Quaker apothecary at Bradford, and at twenty he entered Edinburgh University. As a Dissenter the English universities were closed to him, but he probably lost little from a medical point of view, for the Edinburgh medical school was then the finest in the country, having been organised only ten years previously by Monro, a pupil of the famous Boerhaave of Leyden. He took his degree in 1736 and then entered St. Thomas's Hospital, London, for two years' training under Sir Edward Wilmot, the son-in-law of Dr. Richard Mead.

In 1740 Fothergill set up in practice in the City of London. He pursued his medical practice in a wholly unselfish spirit. He often took no fees and regularly set apart some time for attending the poor without charge. After prescribing for poor patients he often gave them a sum of money to defray the cost of medicines, or under cover of feeling the pulse would slip a banknote into the astonished patient's hand. This kind of secret benevolence became a habit, and very naturally he was exceedingly popular among the poor. They brought him little pecuniary gain, but much experience, and his reputation spread to the more wealthy. He himself said, "I climbed on the backs of the poor to the pockets of the rich." His income at one time reached as much as £5,000 a year. His popularity as a physician even among the upper ranks of society was won and kept without any abatement of his Quaker ways. The strict garb, singular language and unlifted hat were tolerated because of his gentle and tactful manner. The secret of his success lay largely in his personal qualities. He was businesslike and orderly, and thus managed to get through an enormous amount of work. He had

a keen intellect and quick insight which enabled him to make rapid diagnoses. He came to rely upon his intuitive discrimination in diseases, and was wont to give quick authoritative expressions of opinion. This, together with his great kindness, his hope-inspiring smile, and his punctuality in keeping appointments, ensured his popularity among his patients. Then too he had had a thorough medical training both in Edinburgh and London, and was imbued with the spirit of Boerhaave. Fothergill carried forward the more rational methods in treatment introduced by Boerhaave, making his own experiments and varying his practice with the results. He contributed to bring about the revolution which replaced multifarious and discordant compounds by simpler remedies. He knew the vegetable medicaments, not only as they appear in pharmacy, but as the herbs and trees from which they are derived. He himself introduced several new drugs into medical practice in this country, such as kino, catechu, canella, sassafras and elaterium. Orthodox medical opinion at the time was opposed to the use of antimony, but Fothergill used it extensively in the preparation known as "Fothergill's pills."

In medical literature Fothergill is best known by his work *An Account of the Sore Throat attended with Ulcers,* 1748. This is a model of clinical description. Opinions differ as to the identity of the disease described in this book. Some authorities claim it as the first clear recognition of diphtheria in this country, others consider it to have been a form of scarlet fever, while many believe that cases of both diseases were present but were not distinguished by Fothergill.

The second great Quaker physician of the eighteenth century was *John Coakley Lettsom* (1744-

1815)*, who was largely responsible for founding the Royal Humane Society. Born in 1744 on the island of Little Jost Van Dyke in the West Indies, he was sent as a boy to England to Penketh School. On the death of his father, Samuel Fothergill, brother of the doctor, became his guardian, and apprenticed him at the age of sixteen to an apothecary, Abraham Sutcliff, at Settle. At twenty-one he went to London with an introduction to Dr. John Fothergill, who became his warm patron and friend. After a year's course at St. Thomas's Hospital he returned to the West Indies in 1767 to take possession of the family property. This consisted mainly of negro slaves valued at £444. With the impetuous generosity that was such a lovable characteristic of him, but which frequently landed him into difficulties, he freed them all, leaving himself almost penniless. However, he set up in practice on the island of Tortola to such good effect that he made £2,000 in five months. Giving half to his mother, he set sail again for Europe, and on Fothergill's advice studied medicine at Edinburgh, Paris and Leyden, graduating at the last-named university in 1769. On returning to London he started practice in Eastcheap, and, when Fothergill removed from London, Lettsom succeeded to his practice. He was a popular and successful physician, his income reaching £5,000, or even at times £12,000 a year. He was actuated by the same philanthropic impulses as Fothergill, and took a leading part in many schemes. In particular he could never bear to think that any benefits available

* Abraham (James Johnston) *Lettsom: his life, times, friends and descendants.* London, 1933. Fox (R. Hingston) *Dr. John Fothergill and his friends.* London, 1919.

to the rich should not be available also to the poor. Thus when Richard Russell, known as "Sea-Water Russell," initiated the craze for sea-bathing at Brighton, Lettsom founded the General Sea-Bathing Infirmary at Margate for the benefit of poor scrofulous children. It is this, according to his latest biographer,* that really entitles Lettsom to be considered one of the great pioneers of medicine, for by it he became the father of all the open-air sanatoria throughout the world. The fact that it was really the air and sunlight, rather than the sea-water, that effected the cures, does not alter the case, for he established open-air solaria for the patients from the beginning, and the traditional treatment was carried on for half a century before it was adopted elsewhere. This infirmary, opened in 1796 with thirty beds, is now, under the name of the Royal Sea-Bathing Hospital, a flourishing concern with three hundred beds.

According to the standards of the time Lettsom was not a learned man, for he had little Latin and less Greek. He wrote much, but nothing of outstanding importance. His mind was too discursive to concentrate on any one subject for long at a time. He was essentially a practical physician and a shrewd diagnostician, with a happy way of treating patients. He was a member of the Society of Friends all his life, but his attachment to them was not so close or strict as Fothergill's. He had a wide outlook, and was tolerant of all creeds. His fondness for the fair sex was a fruitful source of lying gossip with the scandal-mongers, while his foibles and rapid acquisition of wealth were the cause of many satirical verses. One of these, which is

* Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

extant in at least a score of variants, runs as follows :

"When any sick to me apply,
I physics, bleeds and sweats 'em ;
If, after that, they choose to die,
What's that to me, I. Lettsom."

Now let us cross the Atlantic and see what medical Friends were doing in America.* A large number of Welsh Quakers went over with Penn, or shortly after, and it is said that every physician in Philadelphia up to 1700 was Welsh. On board the ship *Welcome* with Penn was *Thomas Wynne* (1631-1692), the most thoroughly equipped and learned physician who until then had gone to America. Besides being the chief physician in the young colony of Pennsylvania, he became prominent in public affairs and was president of the Provincial Assembly. Two great-grandsons of his also became famous physicians. The first of these was *Thomas Cadwalader* (1708-1779). After studying medicine in England and France, for there were no medical schools in America at that time, he returned home and established a large practice. He was the first teacher of medical anatomy in America, and performed the first scientific post-mortem examination. His *Essay on West India Gripes* (Lead Poisoning), printed and sold by Benjamin Franklin in 1745, was probably the first medical monograph published in America. Cadwalader was one of the founders of the Pennsylvania Hospital.

John Jones (1729-91) was also a great-grandson of Thomas Wynne, and a cousin of Thomas Cadwalader, under whom he was placed for medical training in Philadelphia. He too continued his studies in England and France. He set up practice in New York, and soon became famous as a surgeon, being subsequently appointed Professor of Surgery at King's College. His *Plain Remarks upon Wounds and Fractures,* 1775, the first book on surgery printed in America, was of great help to surgeons during the War of Independence, during which he worked in the Medical Department of the Army. Jones afterwards went to Philadelphia, where he became

* Davis (David J.) The Quakers and medicine. *Bull. Soc. med. Hist. Chicago,* 1928, *4,* 77-93.

prominent in the Pennsylvania Hospital. He was an intimate friend of Benjamin Franklin, whom he attended in his last illness, and was also personal physician to George Washington. His body lies in the Friends' Burial Ground at Arch Street.

John Morgan (1735-1789), the most celebrated physician of the period in America, was also of Welsh Quaker origin. After a medical apprenticeship in Philadelphia he came to Europe, and took his M.D. degree at Edinburgh in 1763, with a thesis in which he first advanced the view that pus in inflammatory conditions was largely a secretion of the blood-vessels. This, a novel idea at the time, was later advanced by the famous John Hunter and thoroughly established by Cohnheim. Like many other Quaker medical students from America, he was greatly helped and encouraged by Fothergill.

Benjamin Rush (1746-1813),* though not himself a Friend, came of Quaker ancestry, and was born in the Conservative Quaker agricultural colony of Byberry, Philadelphia. After taking his B.A. at Princeton he was apprenticed to Dr. John Redman in Philadelphia, and completed his medical training in Edinburgh and London, where he came to know Fothergill, whom he ever afterwards made his exemplar. He obtained his M.D. at Edinburgh with a thesis of unusual merit. He was recommended by Fothergill for the Chair of Chemistry at the College of Physic in Philadelphia, which he obtained, and set up in practice in the same city. Rush was cock-sure and self-confident, and, being both hot-headed and stubborn by nature, he became embroiled in controversies over rival systems of medicine. He thus alienated himself from his professional brethren from the beginning. In 1786 he founded the Philadelphia Dispensary for the poor, the first free clinic in America. In 1789 he succeeded Morgan as Professor of the Theory and Practice of Medicine. As a teacher he exerted more influence on the medical profession in America than any other man of the time, for he taught medicine to a long succession of pupils for forty-four years. In 1793, during the worst epidemic of yellow fever in the history of Philadelphia, Rush carried on an heroic struggle to cope

* Goodman (Nathan G.) *Benjamin Rush, physician and citizen, 1746-1813.* Philadelphia, 1934.

with the disease, while engaged at the same time in an acrimonious dispute with the rest of the profession as to its causation and the best method of treatment. He set down his experiences and theories in his *Account of the Bilious Remitting Yellow Fever as it appeared in the City of Philadelphia in 1793* (1794), which is one of his best-known works. Rush was a pioneer in the movements for temperance, penal reform and the abolition of slavery, of the death penalty and of oaths.

Thomas Young (1773-1829)* in the fifty-six years of his life did pioneer work on a wider range of subjects than any other man has ever done. He learnt to read at the age of two, and when only four he had read the Bible and "Gulliver's Travels." When six years old he began the study of Latin; at the age of twelve he made a microscope and a telescope, thus early showing his interest in optics, a subject in which he made some of his most noteworthy discoveries. At thirteen he wrote an analysis of the Greek schools of philosophy. After such a childhood, his later achievements are perhaps not quite so incredible as they might otherwise have seemed. At eighteen he went to London to study medicine on the advice of his uncle, Dr. Richard Brocklesby, and in his twentieth year he was elected an F.R.S. for his *Observations on Vision* (1794). In 1801 Young contributed to the Philosophical Transactions his paper *On the Mechanism of the Eye,* which was described by Helmholtz as a work of remarkable insight and ingenuity which was fully qualified to settle the discussion concerning "accommodation." It is difficult to understand, however, on account of its brevity and furthermore assumes a complete knowledge of mathematical optics. This is characteristic of Young, who had the idea that

* Hooker (Davenport) Thomas Young (1773-1829), physician and scientist. *J. Amer. Med. Assoc.*, 1924, *82*, 55-57.

there is little difference between the intellectual gifts of different men, and measured other people's intelligence by his own. To his students therefore he appeared an interminable bore interested in unintelligible minutiae, and in medical practice he never prospered because of his diffidence and erudition. He developed the science of perimetry to a very definite position and announced the discovery of ocular astigmatism. In 1805 he was appointed Professor of Natural Philosophy at the Royal Institution and his lectures were published in 1807. Their greatest value lies in his discussion of colour blindness, of the principle of the interference of light and the electromagnetic theory of light. Thomas Young laid the foundations on which other men have built and he thus advanced science as no one else has done. His scientific work, however, gave him no satisfaction and he died in 1829, worn out and dissatisfied with life. Besides the work already mentioned, Young made contributions to our knowledge of the heart and arteries, to egyptology (the first establishment of the letter-values of hieroglyphics), to political science (the algebraic expression of the value of life, tables of mortality, and the theory of life assurance), to music, shipbuilding and hydraulics. In addition to all this he was an accomplished man of the world frequenting the best society in London, played all existing musical instruments except two, was fond of dancing and a skilful horseman.

Coming now to the nineteenth century I shall mention only four Quaker practitioners, three of whom, J. C. Prichard, Thomas Hodgkin and Sir Jonathan Hutchinson, must be dealt with very briefly in order to leave space for the great figure of Lord Lister.

James Cowles Prichard (1786-1848)* is said to have adopted medicine as a profession mainly because of the facilities it offered for anthropological investigations. He settled at Bristol as a physician in 1810 and three years later appeared his *Researches into the Physical History of Man.* An extract from this was published in 1843 under the title of *Natural History of Man.* In this pre-Darwinian work he maintains the thesis that the races of mankind are all one species, which has been acted upon by causes producing permanent varieties. Prichard may fairly be called the founder of the English branch of anthropology. In medicine he devoted himself mainly to nervous and mental diseases. In 1822 he published *A Treatise on Diseases of the Nervous System,* and in 1835 *A Treatise on Insanity and Other Diseases Affecting the Mind,* which long remained the standard work on the subject. In it he developed his theory of "moral insanity" apart from serious intellectual derangement. In 1845 he was made a Commissioner in Lunacy and left Bristol for London, where he died three years later.

Thomas Hodgkin (1798-1866)† is famous as the discoverer of the condition that is named after him "Hodgkin's disease." He also greatly assisted in the elucidation of Bright's disease, and was virtually the founder of the Pathological Museum at Guy's Hospital. He helped to put an end to the abuse of each doctor having a special chemist, allowing 25 per cent. discount on every bottle of medicine prescribed, because by writing all pres-

* Tuke (D. Hack) *Dictionary of National Biography, 46,* 344-346.

† Fry (A. Ruth) *Quaker ways.* London, 1933, pp. 200-215.

criptions legibly Dr. Hodgkin enabled patients to have them dispensed where they wished. This, and his free consultations to poor patients who crowded his waiting room every morning, made him somewhat unpopular amongst certain members of his profession.

Sir *Jonathan Hutchinson* (1828-1913)* was one of the most versatile medical men. He was a general surgeon, an ophthalmologist, a neurologist, a dermatologist and a syphilologist, while as an observer of all kinds of rare manifestations he had no equal. His views upon the causation of leprosy had a wide vogue at the time, but have since been disproved. His main interest was syphilis, and in the course of his practice he saw a vast number of patients suffering from this disease. He is best known for his description of the deformity of the teeth, characteristic of hereditary syphilis, and known as "Hutchinson's teeth."

Joseph Lister (1827-1912)† was born at Upton House, Upton, Essex, and was brought up in a thoroughly Quaker atmosphere, which left its mark upon him for life. He was educated at two Quaker schools, at Hitchin and Tottenham, and at University College, London, where he took his B.A. in 1847, before beginning his medical studies. He was present at the first operation under ether anæsthesia in England. This was performed by Robert Liston in 1846 in University College Hospital. Lister took his M.B. and his F.R.C.S. in

* [Newman (Sir George)] Sir Jonathan Hutchinson, *Friends' Quarterly Examiner,* 1913, pp. 305-321.

† Cheyne (Sir William Watson) *Lister and his achievement.* London, 1925. Godlee (Sir Rickman John) *Lord Lister.* 3rd edit. Oxford, 1924. Singer (Charles) *A short history of medicine.* Oxford, 1928.

1852 and next year proceeded to Edinburgh, where he received a cordial welcome from Professor Syme, whose house-surgeon he became, and whose eldest daughter Agnes he married in 1856. The Symes were members of the Episcopalian Church, and Lister, to avoid being dissociated for marrying out, resigned his membership of the Society of Friends and joined his wife's church. This, however, was not done lightly or without due consideration; and Lister seems to have been happy in his adopted church, of which he remained a member for the rest of his life.

In 1860 Lister went to Glasgow as Professor of Surgery, and it was soon after this that he began to make the researches upon antiseptic surgery that have made his name famous. He had already made valuable scientific contributions in his papers on coagulation of the blood, on the contractile tissue of the iris, and on a new method of excising the wrist. His mind was prepared, and he had already had a long and varied surgical experience. His sensitive, kindly nature was appalled at the enormous amount of death and suffering due to sepsis in the surgical wards. Blood poisoning, erysipelas, pyaemia, septicaemia and hospital gangrene were terribly rife, while simple suppuration of a wound was so common as to be regarded as normal, and called "laudable pus." About 1861 Lister began to teach publicly that the occurrence of suppuration in a wound was caused "simply by the influence of decomposition"; but, as long as this was thought to be caused by the oxygen or by "miasms" in the air, all attempts to prevent it seemed hopeless. It was about 1864 that his attention was first drawn to the writings of Pasteur, which revealed to him that putrefaction is in fact a fermentation caused by the growth of microscopic air-borne organisms. The

problem now, though still difficult, became possible of solution. All laboratory experiments on fermentation had hitherto depended on the employment of heat to kill the germs or on filtration of the air to remove them, but neither of these plans seemed suitable. Lister therefore turned his attention to chemical substances, and selected carbolic acid, in which he soaked his dressings. His first samples were very crude and caused injury to the tissues. Later he used a system of spraying the wounds. Even in the first few years he obtained a remarkable improvement in his results. Lister published his first observations on antiseptic surgery in 1867. He continued to perfect his technique by using milder antiseptics, and adopting heat for sterilising his instruments and dressings. The Listerian system, in rendering surgery safer, had also the effect of opening up many fields of operation previously regarded as impracticable, notably in abdominal surgery.

In 1869 Lister succeeded his father-in-law Syme as Professor of Clinical Surgery at Edinburgh, and eight years later he accepted an invitation to take up a similar post at King's College, London, which he held till his retirement in 1892. He was raised to the peerage as Baron Lister in 1897, the first medical man ever to receive this honour.

One of his biographers, Dr. Wrench,* says "The life and work of . . . Lord Lister . . . affected man's relation to sickness and disease more fundamentally than the work of any other philosophic physician devoted to these problems. Lister was emphatically more than a great surgeon; he was far more the founder of modern surgery. He was a great

* Wrench (G. T.), *Lord Lister: his life and work.* London, 1913.

philosopher whose thought never deviated from the central problem of life, the mystery and quality of vitality." A special quality of character is required for the employment of the antiseptic system —a character of precision and consistency. This was the character of its founder, the character of the ideal physician. The medical profession demands sacrifice, a sense of duty, and kindness of heart; and the example of Lister's character, which embodied these qualities in a pre-eminent degree, is a gift of quite equal value to that of the antiseptic system. Some of Lister's sayings illustrate the lofty sense of responsibility which he brought to the practice of his profession. "A feeling heart," he said, "is the first requisite of a surgeon." Another is as follows: "To intrude an unskilled hand to such a piece of divine mechanism as the human body is indeed a fearful responsibility."

II.

Turning now to the second division of my theme, we find that Quakers have played a prominent part in the foundation of medical societies and educational institutions.

The first medical society in this country was formed by a group of students at Edinburgh in 1734, which Fothergill joined in its second year. In 1778 this society received royal patronage, and still flourishes as the Royal Medical Society of Edinburgh. About 1752 *Fothergill** and others in

* Fox (R. Hingston) *Dr. John Fothergill and his friends*. London, 1919.

London met together to discuss prevalent diseases, and afterwards began to publish at Fothergill's expense a selection of *Medical Observations and Inquiries* 1757-1784 (6 vols.), modelled on a similar series issued in Edinburgh, to which Fothergill had contributed as a student. To the new series in London Fothergill contributed more than fifty papers, a quarter of the whole. The society bore no distinctive name, and it remained small and select, meeting on alternate Mondays in the Mitre Tavern in Fleet Street.

In 1773 *Lettsom** founded the Medical Society of London on a broader basis than any other that had previously been in existence. Among his helpers were Dr. *Gilbert Thompson* (1728-1803) and *Joseph Hooper,* both Friends. The number of fellows was limited to thirty physicians, thirty surgeons and thirty apothecaries, all properly qualified. This catholicity was not found in earlier societies and was due to Lettsom's influence. The young society soon began to languish, but Lettsom kept it going by all means in his power. He aided its finances, he presented a house in Bolt Court for its meetings, and was always ready with a paper when others were not forthcoming. In 1789 the first volume of its *Transactions* was published, nearly half of the papers being either written or communicated by Lettsom. In 1805 there occurred a secession of discontented members, who formed the rival Medical and Chirurgical Society, which in 1907 by the amalgamation of many others became the Royal Society of Medicine. The original society, however, still continues as an independent body. It was the first to be constituted on a demo-

* Fox (R. Hingston) *Dr. John Fothergill and his friends.* London, 1919. Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

cratic basis, serving the interest of the profession as a whole, and has maintained throughout a general outlook on medical questions that forms a useful counterpoise to undue specialisation.

The Medical Institution in Liverpool also owes its foundation to a Quaker, *John Rutter* (1762-1838).* There had previously been in existence a Medical Library, but it had very inadequate accommodation. Rutter's scheme was to have a building that should provide adequate accommodation for the Library, a hall for meetings and lectures, a committee room, and a residence for the librarian. In 1834 he was elected President of the Library and was re-elected every year up to his death in 1838. Owing to his endeavours the Corporation gave a free lease of land, at the corner of Mount Pleasant and Hope Street, and also a grant of £1,000 towards the building. Rutter himself gave £900, the doctors of Liverpool over £1,000, and the lay public £242. The building was opened in 1837 and a bazaar organised to clear off the remaining debt. Rutter lived only long enough to hear that this had been completely successful. The issue of the *Liverpool Mercury* for 19th October, 1838, contained both an account of the bazaar and the notice of Dr. Rutter's death. His ideal had been to make the Medical Institution a place to promote the union and interests of doctors, the health and welfare of the community, a place for study and mutual instruction, and a habitation for the Library. All these aims have been accomplished. Although this was Dr. Rutter's greatest achievement, his name also appears amongst those who established in 1832 the Provincial Medical and Surgical Association, which

* Bickerton (Thomas H.) A historical sketch of Dr. John Rutter. *Liverpool med.-chir. J.*, 1910, 30. 1-52. Kelly (R. E.) Surgery 100 years ago. *Lancet*, 1937, 1, 1361-1362.

afterwards became the British Medical Association.

In America too Quakers have been prominent in the foundation of medical institutions. Fothergill always took a great interest in the progress of medicine in that country, and it was with his help and encouragement that *John Morgan** was able to establish the Medical College in Philadelphia in 1765. At the opening ceremony Morgan delivered *A Discourse upon the Institution of Medical Schools in America,* which was the first paper on medical education in that country and has become a classic. Morgan was the first Professor of Medicine and was succeeded by Benjamin Rush.

John Evans (1814-97),* known as Governor Evans, was born of Welsh Quaker parents in Ohio, but was later converted to Methodism. He was the co-founder with Dr. N. S. Davis of the American Medical Association, the Chicago Medical Association, and the Illinois State Medical Association. He was also active in founding the Northwestern University, the site of which is named after him Evanston.

Valentine Mott (1785-1865)‡ was the principal founder of New York Medical College in 1841. He was originally a Friend but was disowned in 1825 "for attendance at a place of diversion and neglecting attendance of our religious meetings." He admitted remissness in the latter respect, but denied the former.

Johns Hopkins (1795-1873)* was of Quaker ancestry on both sides, his mother being one of the leading spirits in Baltimore Yearly Meeting. He was not a medical man, but, by his gift of $3,500,000 for a university, and the same amount for a hospital, he became the founder of the greatest medical institution in the U.S.A. Another famous medical school, that of Cornell University in New York, owes its foundation to the gift of $500,000 by *Ezra Cornell* (1807-74)* who was born and trained as a Quaker. Finally, the widow of *Russell Sage,** a woman of Quaker

* Davis (David J.) The Quakers and medicine. *Bull. Soc. med. Hist. Chicago,* 1928, *4,* 77-93.

‡ Cox (John) jr. *Quakerism in the City of New York, 1657-1930.* New York, 1930. pp. 146-158.

family, gave $10,000,000 for the Russell Sage Foundation "for the improvement of social and living conditions in the U.S." Its scope has included preventive medical work among children, and the National Association for the Prevention of Tuberculosis.

III.

My third heading, Public Health, includes immunization (inoculation and vaccination) and the prevention and treatment of mental disease.

One of the greatest scourges in the eighteenth century was smallpox. Epidemics frequently carried off half the population of a whole village, leaving the survivors disfigured for life. So rare was it to find anyone who was not pock-marked, that almost any woman whose face was free from this blemish was regarded as a beauty. From the earliest times it was observed that a person who once had the disease was immune from further attacks; and thus arose the practice of introducing matter from a case of smallpox into a healthy person, in order to give him the disease in a mild form and thus protect him from future infection. This was called "inoculation" and is not to be confused with the much wider meaning of the word at the present day. The practice is of great antiquity in the East, but was not known to the medical profession of Europe before the eighteenth century. It was introduced into England by Lady Mary Wortley Montague, wife of the British Ambassador in Turkey. Inoculation protected the individual, if he survived, which was not always the case, but there was always the danger that the patient might infect other people and thus start an epidemic.

Robert Sutton* and his two sons, Robert and Daniel, devised a greatly improved method of inoculation in 1757, and for eleven years inoculated 2,500 patients without a single death. Their system soon came to supersede all others. One of those who studied the method under the Suttons was *Thomas Dimsdale* (1712-1800),† a Quaker surgeon of Hertford. He was disowned in 1741, like so many other valuable members of the Society, for marrying out, but all his life he considered himself a Friend, and was buried in the Friends' Burial Ground at Bishop's Stortford. Dimsdale practised the Suttonian method of inoculation with great success, gained a large experience, and appears to have brought it to a high degree of perfection. His book on inoculation, first published in 1767, went through seven editions, and was translated into several languages. In 1768 came his great opportunity. The Empress Catherine II. of Russia wanted to introduce inoculation into her country, and offered to submit herself and her family to the experiment. The Russian Minister in London was ordered to find the best British inoculator. Fothergill's advice was sought, and he recommended his friend Dimsdale, who accepted the undertaking. The journey to St. Petersburg took a month. He was given a friendly reception and treated as an honoured guest, but the risk was enormous. He inoculated the Empress in complete secrecy and, had anything untoward happened, his life would have been in great danger. Fortunately the inoculation was a complete success, and Dimsdale was over-

* Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

† Fox (R. Hingston) *Dr. John Fothergill and his friends,* London, 1919. Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

whelmed with compliments and a rush of people wanting to be inoculated. He inoculated one hundred and forty in St. Petersburg and all did well. He was given a present of £10,000, created a Baron of the Empire, and appointed Physician to Her Majesty and a Counsellor of State with the rank of Major-General and an annuity of £500. After this he returned to England, perhaps not unnaturally with a very good opinion of himself, which was partly the cause of his becoming involved in an unfortunate controversy with Lettsom.

Inoculation was an expensive business, entailing five weeks' residence under the supervision of the inoculator. Lettsom, with his usual generosity, could not bear to think of this boon being available only to the rich ; and he proposed to found a Society for Inoculation of the Poor in their own homes. Baron Dimsdale was asked to become the consulting physician, but refused, saying that the poor could not be safely inoculated in their cramped houses owing to the risk of contagion to other people, and asserting that the scheme would result in an increase of smallpox. In spite of this argument, which was, of course, perfectly just, the Inoculation Dispensary was started. Dimsdale was furious, and savagely attacked it in a pamphlet. Lettsom was drawn into the dispute, which unfortunately developed into a personal quarrel. Lettsom had at last to admit that Dimsdale was right, for by 1780 it was clear that inoculation was not controlling smallpox.

Among the first to use inoculation in America were *Thomas Cadwalader* and *Benjamin Rush*. The latter, actuated by the same motives as Lettsom, established in 1774 a Society for Inoculating the Poor. In 1777 on his appointment as a Surgeon-General in the Medical Department of the

Army, he introduced general inoculation of the troops, as a result of which smallpox was definitely controlled.

In 1798 Edward Jenner announced to the world his epoch-making discovery that inoculation with material from a case of cowpox conferred immunity from smallpox. This was called vaccination, and three things were claimed for it: (1) the patient was protected from smallpox. In this respect it was no better than inoculation. (2) No one died as the result of it, which could not be said of inoculation. (3) The patient was not infectious to others, which again was not true of inoculation. The profession at first, including Lettsom, was hostile to the new method. But when Pearson, Willan and, above all, his fellow Quaker *William Woodville* (1752-1805) confirmed Jenner's theories, Lettsom was soon converted, and with characteristic zeal threw the whole force of his influence on the side of vaccination. He sent a copy of Jenner's pamphlet to his friend *Benjamin Waterhouse* (1753-1846),* a first cousin once removed of Fothergill, and Professor of Medicine at Harvard University, who became an enthusiastic vaccinationist and published *A prospect of exterminating the small-pox, being a history of Variolae Vaccinae or Kine-Pox,* Boston, 1800. He suffered sorely for his advocacy of vaccination, losing his official appointment. Amongst those vaccinated by him was Oliver Wendell Holmes. Whether he or another Quaker, *Valentine Seaman*† (1770-1817), was actually the first to introduce vaccination into America, is not quite clear. Valentine Seaman was a pupil of

* Fox (R. Hingston *Dr. John Fothergill and his friends.* London, 1919.

† Cox (John) jr. *Quakerism in the City of New York, 1657-1930.* New York, 1930. pp. 146-158.

Benjamin Rush, and the first to introduce clinical lectures in New York Hospital. He lost his first-born son in a small-pox epidemic, as a consequence of which he made a voyage to England to consult Jenner, and returned to introduce vaccination into America. Like so many other Quaker doctors, he was disowned by the Society of Friends on very slight grounds. Meantime in Europe, William Woodville had gone, in response to an invitation, to introduce vaccination in France, while Lettsom was giving evidence before the House of Commons Committee on Vaccination. Lettsom also took a leading part in the foundation of the Royal Jennerian Institution, the first resident inoculator of which was an eccentric physician named *John Walker* (1759-1830)* who, although a Quaker in dress and in all the outward distinctions, was repeatedly refused admission into membership. He had served under Abercrombie, and vaccinated the troops on their way to Egypt to fight against Napoleon, and therefore considered that he knew more about vaccination than Jenner himself, who was Director of the Institution. Differences of opinion as to technique arose, and Walker, who appears to have behaved in a self-opinionated and discourteous manner, was forced to resign in 1806. When the question of his dismissal came before the committee, Henry Cline, after hearing all the complaints, said "Well, all they complain of in Dr. Walker is his *dress* and his *address*." Some of Walker's friends founded the London Vaccine Institution, with Walker himself as Director. This flourished, while the original Jennerian Institution languished and soon expired, whereupon Walker assumed its

* Epps (John) *The life of John Walker, M.D.*, 2nd edit. London, 1832.

name and called his own institution henceforth the Royal Jennerian and London Vaccine Institution. In spite of his faults there is no doubt that Walker was an untiring apostle of vaccination in London for more than a quarter of a century, during which time he vaccinated more than 100,000 persons, working six days a week.

Public Health is, in many of its aspects, a department of social welfare and it is therefore not surprising to find that many of the pioneers in this field, both Quakers and others, have been persons outside the medical profession.

The first of these was *John Bellers* (1654-1725)* son of a Grocer and Citizen of London, who was an original member of the Six Weeks Meeting. Bellers himself was a staunch Friend, and was thrice arrested for "Quaker offences." He was a cloth merchant by trade, but early began philanthropic work. He was a man of considerable education, an F.R.S. and a friend of Sir Hans Sloane. The work which concerns us here is entitled *An Essay towards the Improvement of Physick in Twelve Proposals,* 1714. In it he points out that according to the London and Westminster Bills of Mortality 20,000 persons die yearly, from which he estimates that the figure for the whole Kingdom must be 200,000, of which probably a half die, of curable diseases, for want of timely advice and suitable medicines. Three-quarters of the people, however, are poor and unable to provide either. "If the safety of the people be the supreme law we have," he says, "few articles in our statute-book of so great a consequence as such an Act of Parliament will be, that shall make thorough provision for the

* Fry (A. Ruth) *John Bellers, 1654-1725 Quaker, economist and social reformer. His writings reprinted with a memoir.* London, 1935.

improvement of medicine. Every able industrious labourer that is capable to have children who so untimely dies may be accounted £200 loss to the Kingdom. As for our Nobility and Gentry, I leave their valuation to themselves. But if that Old Incendiary said true, That skin for skin, and all that a man hath he will give for his life, Then I am sure that their account will run very high."

The twelve proposals briefly are as follows :—

"i. That there should be built at or near London Hospitals for the poor . . . and when any one dies in the hospital their bodies should be opened for the better information of the Phisitians."

"ii. That one hospital should be more particularly under . . . the Queen's Physitians that they may take into it such Patients whose infirmities at any time our Sovereign may be subject to . . . "

"iii. That there be one hospital for the blind . . . "

"iv. That one hospital should be for the incurable . . . and that any persons may have liberty to give medicines to such incurable patients as are willing to follow their prescriptions. And such as make any cure should be rewarded by the State."

"v. That a public laboratory and a physical laboratory be provided."

"vi. That there be one hospital at least at each of our two Universities."

"vii. That in every hundred of a county and parish of a city there be appointed one doctor and chirurgeon (or more if needful) to take care of the sick poor . . . and they to be paid by the overseers of the poor."

"viii. That all medicines that are daily published as extraordinary . . . should be examined . . . and that publick notice should be given of it, as the case requires, if a good medicine that the owner of it may be encouraged, and the public receive

the benefit of it: and if a bad one that the Nation may be prevented from being cheated by it.

"ix. That some physicians and chirurgeons should be sent into the East and West Indies and the continent of America to seek what may be found of useful medicines among the Indians and Negroes.

"x. That the Colledge of Physicians and Company of Chirurgeons should draw up a summary of advice in both their faculties. . . "

"xi. That the Royal Society should have some endowment the better to enable them to carry out that useful and great design of improving men in the knowledge of nature . . . of which medicine is a principal branch."

"xii. That both Houses of Parliament would each please to appoint a committee every sessions to enquire of, and receive from the Colledge of Physicians an account of the state of medicine."

Needless to say, this remarkable document, which made the revolutionary proposal that hygiene should be a national subject, was altogether too far in advance of its time to have any effect, but I have quoted it at some length because far too little attention has been devoted to it hitherto.

Dr. *John Fothergill** amongst his many other activities was a pioneer of public health. He advocated widening the streets of London, and suggested a tax on wheeled traffic to pay for it. He pleaded for improved sanitation, for public cemeteries outside the town, and for public bathing places. He also studied the connection of sickness with varieties of weather. In 1754 he took steps to bring before the authorities the need for registration of births and deaths. Weekly Bills of Mortality had been in existence in London since 1592; but they

* Fox (R. Hingston) *Dr. John Fothergill and his friends.* London, 1919.

were very imperfect, the causes of death being derived from the reports of searchers, often poor ignorant women, who inspected the dead. Fothergill placed a memorial before the Company of Parish Clerks in London, who were responsible, suggesting that all parishes in England should be obliged to keep registers of births, marriages and deaths, and make annual returns to London for a general summary. He called together some physicians of eminence to compile an improved list of causes of death. The benefits expected were: the increase or decrease of different diseases in different periods and places would be ascertained; the increase or decrease of the population would be known; the progress of the nation in vice or virtue would become apparent from the number of deaths from intemperance; and lastly the figures would form a basis for political authorities to work upon. The proposal was taken up, and a Bill introduced into Parliament by Thomas Potter, M.P. Unfortunately he inserted a clause for numbering the people and the Opposition seized upon this as the "sin of David"—with the result that the Bill was rejected by a large majority. The country had to wait for over eighty years before the Registration Act of 1837 was passed.

About 1770 *Lettsom's* philanthropic instincts first found scope in the foundation of the Aldersgate Dispensary.* Similar institutions were soon established all over London, in most of which Lettsom appears to have been concerned. It was a new idea, for before this paupers had been treated as in-patients at the poor-law infirmaries or workhouses. The distinctive feature of the dispensaries

* Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

was that the patients could also be visited by a doctor at their own homes. Physicians were thus for the first time brought into contact with the appalling conditions in which the poor lived and the widespread prevalence of various eruptive fevers. The consequent awakening of men's minds was the cause of the crusade for sanitary reform which was the main contribution of nineteenth century medicine to the control and prevention of disease.

It was also *Lettsom's* inside knowledge of the conditions prevailing in prisons that made him appreciate the work of James Neild and lend it the powerful help of his pen. Through the medium of his letters in the *Gentleman's Magazine* more work was accomplished for prison reform in twelve months than in the previous thirty years. In this way he probably saved John Howard's labours from becoming fruitless.*

The work of *Elizabeth Fry* (1780-1845)† for the reform of the prison system needs no comment. Though undertaken from purely philanthropic motives, like that of John Howard in the previous century, it had important effects in introducing into the mind of the British public the fundamental conceptions of sanitation. Her influence upon the history of nursing is not so well known. In 1823, a young German pastor, Theodor Fliedner, visited England to raise funds for his destitute parishioners at Kaiserswerth. He met Elizabeth Fry and was deeply impressed by her work for prisoners and the care of the sick. On returning to Kaiserswerth he established a prison association and also a hospital

* Abraham (James Johnston) *Lettsom: his life, times, friends, and descendants.* London, 1933.

† Whitney (Janet Payne) *Elizabeth Fry, Quaker heroine.* Boston : Little, Brown & Co., 1936.

in which to train volunteer nurses. In 1840 Elizabeth Fry visited Kaiserswerth and gave Fliedner valuable advice in matters of organisation. It was at Kaiserswerth that Florence Nightingale received the training she required to equip her for her life's work. On her return from Germany in 1840 Elizabeth Fry made plans for a nurses' training home in London. Her sister-in-law, *Elizabeth Gurney,* undertook the organisation. Young women were trained for a probationary period in one of the larger hospitals and finally admitted as Sisters. They lived in the home and received an annual salary. This was the first attempt in England to train and standardise nurses and put nursing on a professional basis. Some of these "Fry nurses," as they were called, went out with Florence Nightingale to the Crimea.

In America *Benjamin Rush** was far ahead of his time in the matter of hygiene. He wrote on hygiene of the troops and laid special stress on fresh air and cleanliness of body and mind as an aid to health. He also tried to persuade the authorities in Philadelphia to clean up the city as a preventive against the yellow fever. Though he did not understand, as we do now, that this disease was carried by mosquitoes, his appeals to have all stagnant water drained would, by removing the breeding places of these insects, have controlled the epidemics, had they been listened to. He came very near the truth in his view, for which he suffered such obloquy, that the disease arose in Philadelphia itself and was not brought in as an infection from outside.

School hygiene in this country owes a great deal to two Friends, who are fortunately still with us. *Sir George Newman* (1870-), formerly Medical

* Goodman (Nathan G.) *Benjamin Rush, physician and citizen, 1746-1813.* Philadelphia, 1934.

Officer of Health for Finsbury, was appointed Chief Medical Officer to the Board of Education in 1907 and the Ministry of Health on its formation in 1919. His annual reports in these two capacities (1907-1935), which he entitled *The Health of the School Child* and *On the State of the Public Health* respectively, owing to the attractive style in which they are written, won a popularity seldom attained by government reports. *Ralph H. Crowley* (1869-), formerly School Medical Officer to the Bradford Education Authority (the first to appoint a whole-time school doctor), was later appointed Medical Officer to the Board of Education under Sir George Newman. Under the leadership of these two Friends the newly created school medical service expanded and became an important factor in revealing physical defects in school children, and in promoting remedial and preventive measures, which have had a marked effect in improving the health and physique of the generation which has grown up during the last thirty years.

Closely related to Friends' work for Public Health, because it sprang from the same philanthropic instinct, is the part they played in promoting more rational treatment of the insane.

In 1669 George Fox advised Friends in one of his epistles "to erect a house for those who are mentally distracted and do not go to the world."* Perhaps in response to this, the Six Weeks Meeting in 1671 passed a minute "That Friends seek some place convenient in and about Ye Citty where they may put any person that may be distracted or troubled in mind that soe they may not be put among ye world's people or run about ye streets." But, alas, like

*Fox (George) *Collection of many select and Christian epistles, letters and testimonies.* London, 1698, p. 287.

so many other Friends' minutes it seems to have had no result, and a hundred and twenty years passed before the Society did anything about it. At that time an insane person was commonly regarded as a being suffering under a curse, for whom little or nothing could be done. If not dangerous he was neglected and left to ramble about half-naked, teased by the rabble. If dangerous he was chained in a cellar or garret or fastened to the leg of a table. The treatment in institutions specially intended for the insane was even worse, for here they were kept in iron collars, manacles and chains, and frequently horse-whipped if they became unruly.

In April, 1790, a Quakeress, Hannah Mills, died in York Asylum under circumstances that aroused the suspicion of her friends, for they had been refused permission to visit her. *William Tuke* (1732-1822)* suggested that Friends should found an institution of their own, and in spite of some opposition, he worked hard, with the assistance of *Lindley Murray,* until the idea had become an accomplished fact. In March, 1792, he laid a definite proposal before the Quarterly Meeting, and in June a special meeting was held and a subscription fund raised. In May, 1793, a committee was appointed, including Fothergill, to select a suitable site and purchase it. In 1796 the Retreat, as it was called, was opened.

Almost simultaneously a Bristol Friend, *Dr. Edward Long Fox,** was founding a private asylum at Cleve Hill, later removed to Brislington House. From here Katherine Allen came to York to become the matron of the Retreat. The treatment of the patients was from the first guided by Quaker prin-

* Hunt (Harold Capper) *A retired habitation : a history of the Retreat, York (mental hospital).* London, 1932.

ciples, with such good results that frequent enquiries were received from all over the country. This led *Samuel Tuke* (1784-1857), a grandson of the founder, to set down his sixteen years' experience in a book, *Description of the Retreat, an institution near York for insane persons of the Society of Friends, containing an account of its origin and progress, the modes of treatment and a statement of cases.* York, 1813.

At the same time in America the humane and judicious treatment of the insane was receiving its first real impetus through the personal efforts of *Benjamin Rush.** From the very time of his appointment to the Pennsylvania Hospital in 1789 he clamoured for reforms in the mental wards. From about 1795 he began to put his theories of insanity into shape and finally in 1812, only a year before his death, appeared his greatest book, *Medical Inquiries and Observations upon the Diseases of the Mind.* This is one of the most significant books ever written on the subject, its advocacy of occupational treatment being particularly interesting. For half a century it was used as a standard reference work in America, where it was not superseded till 1883. Even in Europe there had hitherto been no work of importance on the subject.

Returning to England we find that the fame of the Retreat continued to spread, until in 1814 the attention of Parliament was drawn to the contrast between the Retreat and other asylums. William Tuke was called to give evidence before a Committee appointed to examine the condition of asylums in England. A Bill for the regular inspection of asylums was passed by the Commons in 1816, but

* Goodman (Nathan G.) *Benjamin Rush, physician and citizen, 1746-1813.* Philadelphia, 1934.

thrown out by the Lords. A new Bill for the Regulation of Madhouses was brought in in 1819, but again rejected by the Lords, the Lord Chancellor of the time remarking that there could be "no falser humanity than an excessive humanity with regard to persons afflicted with insanity." It was not till 1845 that two effective Acts were passed that became known as the "Magna Charta of the Liberties of the Insane."*

The leaven of human kindness gradually spread, other institutions arose on similar principles, and before the middle of the century the Retreat was no longer unique.

Daniel Hack Tuke (1827-1895), a great-grandson of Willium Tuke, abandoned a solicitor's career to undertake work at the Retreat in 1854. In 1858, in collaboration with J. C. Bucknill, he published a *Manual of Psychological Medicine*, which for many years was regarded as a standard work on lunacy. In 1859 he retired, but in 1874 resumed practice in London as a specialist in mental diseases and became one of the most eminent psychiatrists of the time.

Bedford Pierce (1861-1932)† was appointed medical superintendent of the Retreat in 1891 at a period of transition. By this time unnecessary restraints had been largely abolished in the treatment of the insane and hospitalisation of asylums was seen to be the next step forward. Bedford Pierce had the energy, the ability and the vision necessary to inaugurate a new era. He devoted himself to improving the status of mental nurses, amplifying their training and raising their examination stand-

* Hunt (Harold Capper) *A retired habitation : a history of the Retreat, York (mental hospital)*. London, 1932.

† Obituary. *The Lancet*, 1932, *2*, 156; 215.

ards. He retired in 1922, but continued to be actively engaged on committees. In 1930 he was appointed a Commissioner in Lunacy, but was compelled to resign the post in the following year through ill-health.

The influence of the Retreat was also felt abroad. In 1822 Samuel Tuke's book was translated into German by Dr. Maxim Jacobi, who later became the director of a similar institution at Siegburg, near Bonn, and wrote a book of his own on the subject. Ferrus, Physician to Napoleon, also visited English asylums in 1822 to get ideas for the reformation of those in France.*

One further development, which grew out of a Quaker concern, deserves to be mentioned. At Hampstead meeting some years ago a doctor with mental hospital experience spoke of the plight of patients, who when they left hospital had no homes or friends or relations to go to. He appealed to Friends to pay visits to such folk while still in the mental hospital and to help them on discharge till they could become self-supporting. Out of this there grew up a work in a small way in which

* One of the most noteworthy extensions of the new spirit in the treatment of mental diseases, in which Friends have played a large part, is the Lebanon Hospital for Mental Diseases, at Asfuriyeh, near Beirût, in Syria. Forty years ago a Swiss missionary, Theophilus Waldmeier,[1] [2] found the condition of the insane in Syria very much the same as it was in the time of Jesus (Mark 5, 2-5). He came to plead their cause in Europe and America and to collect money. In 1898 a site was bought on the hills above Beirût looking westwards over the Mediterranean, and the Hospital was

1 Dobbeler (Dietrich von), *Sozialpolitik der Nächstenliebe dargestellt am Beispiel der Gesellschaft der Freunde.* Goslar, 1912.

2 Fox (Hilda). A pioneer hospital overseas, Mental treatment in the Near East. *Mental Hosp. Workers' J.*, December, 1936.

Friends and others have co-operated, by means of which one hundred and fifty patients have been helped to earn a living. About two years ago a small home for convalescents and "border line" cases was established at The Gate House, Aylesbury,* where patients have been received from L.C.C. hospitals and private nursing homes. It was called a holiday hospice, a name which dissociated it from the idea of mental illness and had a cheerful psychological effect on those who stayed there. Unfortunately this hospice has had to be closed recently, but it is hoped that if sufficient support is forthcoming it may be re-opened.

To sum up, the characteristic Quaker contributions to medicine, as it seems to me, have been along four main lines. Firstly, Friends have furnished some great and ideal practitioners of medicine, like Fothergill, Lettsom and Lister. The sympathetic and conscientious Quaker nature, with the strict morality and unselfish devotion to their principles, seemed to prepare them ideally for this work, and the examples of their lives exerted a

opened in 1900. All the neighbourhood thought the founder himself mad, to take the chains off these wild people and try to cure them by Christian kindness and personal care, but in time they were won to the new idea. Patients of all nationalities and religions are accepted, but in the understanding atmosphere of the community they settle down together happily and even worship together on Sunday in a simple Arabic service. The Director, who is also Lecturer in Mental Diseases at the American University at Beirût, trains medical students in this branch of medicine. Young Syrians, Jews, Turks, Armenians, Iraki, Palestinians, Cypriotes, etc. all take a compulsory course at Asfuriyeh during their fifth year of medicine at the University. Thus new and better ideas are quietly permeating the whole of the Near East.

* The Gate House Hospice. *The Friend*, 1937, *95*, 346.

profound influence on the profession.* Secondly, their freedom from the shackles of traditional authority made them ready to adopt new ideas. We have seen how Fothergill introduced numerous new and unorthodox remedies, and was ready to vary his methods of treatment; how Lettsom espoused the cause first of inoculation and then, when he was convinced of its superiority, of vaccination, and how Pasteur's novel theories found ready acceptance in Lister's mind. Thirdly, Friends appear to have a genius for organisation, as exemplified in Lettsom's foundation of the Royal Humane Society, the Medical Society of London and the Royal Sea-Bathing Hospital, Rutter's foundation of the Liverpool Medical Institution, the work of Elizabeth Fry for the nursing profession, and the numerous medical schools, hospitals and societies founded by Quakers in America. Lastly, Friends' work for the reform of prisons and mental hospitals is clearly derived directly from their belief in the Inward Light even in criminals and lunatics. I should not like to close without acknowledging my indebtedness to John L. Nickalls, Librarian at Friends' House, for suggestions and for help in tracing references.

* Davis (David J.) The Quakers and medicine. *Bull. Soc. med. Hist. Chicago*, 1928, *4*, 77-93.