

A letter to the Commissioners of Military Enquiry, containing a refutation of some statements made by Mr. Keate, Surgeon General to the Forces, respecting the Medical Department of the Army / [Robert Jackson].

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A
LETTER
 TO THE
COMMISSIONERS
 OF
MILITARY ENQUIRY,
 CONTAINING A
REFUTATION
 OF SOME
 STATEMENTS MADE BY MR. KEATE,
 SURGEON GENERAL TO THE FORCES,
 RESPECTING THE
 MEDICAL DEPARTMENT OF THE ARMY.

BY ROBERT JACKSON, M. D.

LONDON:
 SOLD BY J. MURRAY, FLEET STREET.

1808.

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Roworth, Printer, Bell Yard, Temple Bar.

LETTER, &c.

GENTLEMEN,

THE observations of Mr. Keate, surgeon general to the forces, directed against your fifth report, call upon me to appear again in the irksome field of controversy. The surgeon general, like Dr. Bancroft, supposes that you have been biassed in your opinions concerning the affairs of the medical department of the army by statements which you found in my publications of 1803 and 1805; and, as he pretends that these are not correct, I hold it to be a duty which I owe to you as persons appointed to investigate a subject of important national concern, and to ascertain the truth of the fact in all its relations, to furnish illustration on those points which may be deemed obscure, or not sufficiently explained in the works alluded to.

As I had formed views of army medical arrangement different from those of the members of the army medical board, I explained my views to the public on that subject in obedience to my duty. The surgeon general, judging others by himself, ascribes my act to personal resentment; alledging it must be so, because he and the physician general opposed my appointment to the hospital staff, and because they afterwards effected my removal from the office of physician at the army depot. Mr.

Motive for writing.

Keate says this was done in obedience to duty; the motive, which acted on the physician general and surgeon general on this occasion, I may however say with safety, was different from a sense of public duty: the purpose was a purpose of revenge, and it was accomplished in an insidious manner, unknown, at least never practised by military men. The calumny was dark and mean; and I confess that I felt so much resentment at the falsehoods, which were industriously propagated through the means of these chiefs of the medical department, that I was induced to vindicate my professional character, through the medium of the press, from the injurious aspersions which had been cast upon it in the year 1801. This I had a right to do; and I did it openly and fully, and so demonstratively, that my statements have never been refuted, though they bore hard on the professional and moral character of Sir Lucas Pepys and Mr. Keate.

I had dedicated the best part of my life to military service, and I believed that I had made some useful observation on the treatment of military sick. This was my opinion, and I did not consider myself interdicted by the laws of the country, from communicating my informations concerning the principles to be kept in view in digesting a system of medical arrangement for the benefit of the British army, though these might not accord with the views of the physician general and surgeon general of the forces. Instead of resentment, there was here a manifestation of good design; and that you may see, and that the physician general and surgeon general may see through you, that I was moved to this undertaking by no unworthy motive, I beg leave to inform you that the base of my opinions, on the subject of medical arrangement for armies, was laid on the experience which I gained in the American war. It was there acquired, and it was
 actually

actually put before the public in the year 1791, in the appendix to my Treatise on the Fevers of Jamaica, published in that year. At this period no medical board existed, and I had no knowledge of either Sir Lucas Pepys, or Mr. Keate; hence my resentment could not be then said to operate against them and their arrangements. But besides my work of 1791, to which I refer, you will here find some documents subjoined in an appendix,* which may serve to prove that I have always thought in one manner respecting the medical department of armies, that I have taken the liberty occasionally of recommending the subject to those who, in my opinion, were likely to attend to it, and that, where I myself had authority to act, I never failed to execute the arrangements which I had projected. In my publication of 1805, in which I considered the medical department of armies on general grounds, I avoided, as much as possible, all such matters as did not essentially concern the subject, or as were not, in my opinion, intimately connected with the interests of the British nation; and it may be inferred, from the proposition which I made to the late prime minister Mr. Pitt, that I had no desire to expose publicly the errors of the existing medical system, which I was willing to consider as having proceeded from want of knowledge, rather than from negligence or party views in those who gave it form. I intimated to Mr. Pitt in the year 1804, as appears from the preface to my work, that I had formed a system of medical arrangement for the British army, that I was ready to submit it to his consideration in the view that he might order it to be examined by persons who were competent to judge of its merits, adding that, if found to be what I affirmed it was, effect might be

* Appendix, No. II, III.

given to the suggestions by the authority of government, without exposing the errors of the medical chiefs to public reprehension. My proposition was not noticed by the minister; I therefore gave my manuscript to the printer; because I considered the informations contained in it to be important, and, if true, I must still hold them to be valuable. You will see at least, by what I now state, that I was moved to this act by no resentment against the physician general and surgeon general of the army. Had I withheld my communication, with such belief of its truth and importance in my own mind, as then was, and now is, I should have deemed myself culpable to the public, as having abstained from the execution of my duty through fear of giving offence to those in power.

The articles No. VIII, and IX, which relate to the system established, to the management observed, and to the effect produced in the general hospitals on the continent 1794 and 1795, with the observations made thereon by the surgeon general, between page 11 and 23, call for a few remarks on my part.

Hospitals on the continent.

In entering upon this subject, I must first draw your attention to No. V. in the surgeon general's appendix, where the principle on which the new board had resolved to act, is developed in a paper bearing date November 23, 1793, addressed to Lord Amherst, who was then commander in chief. "*They (viz. the medical board,) have found themselves under the necessity of deviating from the lately established custom of choosing and intermixing men of different abilities and education, and concentrated in this one point, through a regular gradation from different services, and from motives of length of service and seniority only; we conceiving that the effect of such a disposition must ever be, what it indeed has already been, that the management of the*

most

most important cases, and the performing of almost the whole of the operations must fall into the hands of men, who, from length of time and service, have either forgotten what they had originally learned, or have never been taught, as having been qualified for the inferior situations only; or had contracted a disuse of their powers, or even lost them entirely." The extract which I have now quoted, though contradictory in itself, inconsistent with the common sense of common men and embarrassed in expression, aims directly at a monopoly of the higher hospital ranks for privileged classes. The new board, considering the regimental surgeon of the year 1793 as a person qualified only for inferior situations, resolved to fill the hospital staff with younger men—pupils of the London hospitals; and, as they did this from presumption, not from real knowledge of the deficient qualification of regimental surgeons (for they had not given themselves time to enquire into and ascertain the fact) they did it unjustly, and perhaps injuriously to His Majesty's service. If the regimental surgeons of the year 1793 were qualified only for inferior situations, that is, for curing itch, sore backs, and sore legs, as the new board would seem to suppose, you, with others of the nation, may be disposed to think that Sir Lucas Pepys and Mr. Keate incurred more blame by permitting them to remain in the army, while so unfit for the important duties which the chances of military service often impose upon them, (for their stations are often equally important, and not less responsible than those of staff surgeon or staff physician,) than the amount of the praise which they assume to themselves, by effecting the act of their exclusion from general hospitals. The new rule had, I presume, a different motive from that here assigned. The hospital staff appointments were

held to be of some consequence in the year 1793; the regimental were less valuable than they now are; the regimental surgeon had then no fixed rank, and a great part of his emolument was contingent. The board did not therefore think it worth while to disturb him in his place; had his office been lucrative, or had his rank been dignified, it is very probable that he might have been required to make way for the privileged; at least it may be presumed, that the station would have been in future only occupied by privileged members of the corps. But, while the paragraph now quoted develops the spirit which guided the new Board, the future arrangements of the Board prove clearly that a knowledge of the matters which belong to the health of armies was not among its acquisitions; for the means provided were ill calculated,—not often indeed deficient in quantity, but often ill arranged, and in quality little fit for their purposes. No other result could be well expected from men who had no knowledge of the military service of their own country, and who do not appear to have had the smallest acquaintance with that of foreign powers. If we look at the effect, it cannot be said to have been fortunate; and we could not perhaps expect it to be other than it was.

I have mentioned cursorily the general principle which appeared to have directed the arrangements of the army medical board, appointed at the close of the year 1793 for the management of the medical concerns of the army. The effect of it was manifested on the continent; but Mr. Keate, with more ingenuity than candour, seems desirous of turning all the blame of the errors which were imputed to hospital management in that scene of service to the account of his predecessor, and to arrogate to himself and his colleagues a large share of praise for what was now done in remedy of an evil.

Mr.

Mr. Keate states at page 13,—“ *That the inspector Dr. Kennedy; the two physicians, Dr. West and Dr. Smith; the two staff surgeons, Mr. Young and Mr. Grieves; and the two apothecaries nominated by Mr. Hunter; all retained their situations and seniority during the whole of the time in which the alleged management subsisted.*” This is not perfectly correct.

I do not say that these, or any one of them was superseded as not belonging to the privileged class: they retained their rank and appointments, but they did not all remain during the whole period alluded to in the scene of action, as might be inferred from the paragraph now quoted. The inaccuracy is not of much consequence in itself, and I should not have noticed it were it not an inaccuracy of design, made with a view to transfer blame to others. Dr. West, as appears by his letter, page 19, came to England in February 1794. Whether he returned again to the continent, I know not; but he was not with the army in the August following. Mr. Young left Holland, if I recollect rightly, in Autumn 1794, and Dr. Kennedy went home about the end of the year. Dr. Smith was then senior physician, and he continued so till May 1795, when the infantry was withdrawn from the continent. He was the only physician of Mr. Hunter's nomination: all the others were new,—of the privileged class, unacquainted with the army, and few, if any of them had, as far as I know, been physicians of experience or established reputation in civil life. The staff surgeons and apothecaries were mixed; several of them, perhaps the majority, had served as regimental surgeons.

The sick were accumulated in general hospitals in an unusual manner during the retreat through Holland; and, in the latter end of 1794, and beginning of 1795, the mortality was enormously great. The hospital staff was

numerous; but, I do not pretend to say, that it was too numerous according to the plan acted upon, and the dispositions then made: it was not in fact even equal to its duties, for the sick list was high; and, as the principles of hospital arrangement did not seem to be well understood, the medical officers were oppressed with work, and the sick were not well attended.*

The principle would appear to have proceeded from the medical board, the particular arrangement must be supposed to have depended on Dr. Kennedy during the time he remained on the continent; latterly on Dr. Smith, when he became senior; the execution in all cases depended on the physicians and surgeons. Dr. Kennedy was an army physician, I do not know of what service; Dr. Smith had been long an army surgeon, and, as such, might be supposed to have gained knowledge by experience. It is notwithstanding true that the hospitals in both cases presented a melancholy picture to the spectator, and it is well known that death by sickness thinned the ranks of the army. I mention this fact with a view that you may notice a defect in Mr. Hunter's rule, as well as in that of the army medical board. Mr. Hunter required army experience for his army physician, assuming perhaps too confidently that it implied knowledge. The army medical board require education at a privileged university, or a licence from the corporate body of physicians of London for the person who fills this high rank, believing, perhaps too readily, that such education, or such licence alone confer medical knowledge. The public service will suffer if either rule be trusted implicitly. The proper adjustment of the concerns of the medical department of the army calls for the best education that our best seminaries can give; but form alone

* See Appendix, No. I.

is not sufficient. Some proof is required that the education is not only regular, but that it has brought knowledge; and this can only be known by giving proof in experience that it has done so.

The surgeon general, having mentioned the jarrings and disagreements among the medical officers on the continent in 1793 and 1794, boasts, and he perhaps does it with rather too great assurance, that the medical board had given to the army on the continent in the year 1794 and 1795 a better staff than it ever had. This I only mention as it tends to blame his predecessor, and to proclaim his own praise without fair grounds of argument, if we judge of the value of the means by the effect produced in trial. The management of the hospital department on the continent obtained little praise from any one; and the whole or some part of the staff appears to have been blamed in an official report made by lieutenant colonel, afterwards major general Barnett, under whose command it had been placed at Bremerlehe:—the history of this I must take the liberty of mentioning in a few words, though it may seem in some measure foreign to the present subject of discussion.

The British infantry was ordered to withdraw from the continent in May 1795; and a sufficient number of transports not being provided for the conveyance of every thing belonging to it, the sick were left behind under the care of a medical staff, with colonel Barnett as military commandant of the whole. The condition of the sick was miserable; and the colonel was singularly humane and attentive to the relief of their sufferings; he visited them frequently, and administered all the aid and comfort which it was in his power to administer. The number of sick, and they were the gleanings of the hospitals on the continent, amounted to about 700. Two regular staff
physicians,

physicians, with surgeons, apothecaries, &c. were left for their medical care. My own station was with the cavalry, which was ordered to remain on the continent in expectation of some forward movement taking place among the allies; but, as I was then at Bremerlehe, having been ordered by the honourable general Harcourt to superintend the embarkation of the sick and convalescent intended to be conveyed to England, I took a share of the duty and continued in charge of the division which was placed at Dorum, in the neighbourhood of Bremerlehe, till transports were prepared, and till the embarkation actually took place. During the time I remained at this station, colonel Barnett made frequent visits to Dorum; and, as he then always found me among the sick, for the adjustment of their concerns occupied all my time, he probably reported that I was diligent and attentive. It appears by Mr. Keate's statement that he spoke favourably of me and three others only. He had, I believe, no view in doing what he did, except what he considered to be his official duty. I was not known to him, except as a person in charge of a division of sick; he could not therefore be supposed to have spoken partially in consequence of friendship or previous acquaintance. It would also appear, according to the surgeon general, that the colonel reflected indiscriminately on the whole medical staff of the army *lately* on the continent, except myself and three others. Whether the reflection attached to the whole staff, or to that part of it only which was placed under the colonel's command at Bremerlehe, I am not able to determine. But if it attach to the whole staff, few men on the continent had a better opportunity of knowing the truth than colonel Barnett; for he was stationed for a considerable time at Rhenen, which was the great hospital, on hospital duty, that is, to receive the recovered

recovered men, and send them to their respective regiments ; and it was on his authority that I stated, in one of my works, that the mortality in the general hospitals on the continent bore the proportion of three out of five. The surgeon general seems to exult that the colonel, who had reflected generally, only instanced particularly the misconduct of a Mr. Morris, who was frequently intoxicated, and thus incapable of doing his duty. Mr. Morris had been appointed by one of the commanders in chief, in opposition, it would appear, to the opinion of Mr. Gunning, when he visited the army in Holland ; consequently he was not a regular mate, and the Board is thus exempted from blame on his account. This I am ready to admit ; but, the surgeon general, though dexterous in subterfuge, will not always so escape. He is perfectly aware that there was at least one staff regular physician, whose conduct colonel Barnett had an opportunity of knowing, for he was under his command at Bremerlehe, who was placed on half-pay after his return from the continent, never, I suppose, to be employed again as physician, for conduct, it was said, similar to that imputed to Mr. Morris. The surgeon general knows perfectly well the person to whom I allude : he would appear to be his own intimate friend, for he selected him to assist him in his office, though his influence was not sufficient to re-instate him in the list of acting physicians. I state this fact with reluctance ; but the ungenerous conduct of the surgeon general towards the memory of a deceased officer, who ranked high for his kindness and humanity to the soldier, call upon me to shew that the colonel, had he been so disposed, might have found other examples besides Mr. Morris ; and I may here remark that the surgeon general, with the knowledge that what

I state

I state is true, has not been very discreet in touching the subject.

The observations on Article X. page 23, "on the superiority of regimental over general hospitals, in respect of the treatment of the sick," have their answer in my letter to you, dated June 15.

Proportion of
medical staff,

The observations on Article XI. relative to the excessive number of the medical staff, at page 24, &c. are partly answered in my letter to you just now mentioned; but there are still some particular points on this head which require explanation and further elucidation. The surgeon general admits that the number of medical officers appointed for the expeditions to the West-Indies in 1795 was greater than what had been usual in similar cases; but he adds that this was done with the advice, and at the earnest desire of Mr. Young and Mr. Weir, the two inspectors general; and he further remarks that, though I myself wrote many letters to him from the city of Cork (he ought rather to have said the cove or harbour of Cork,) I never intimated to him any opinion of superfluity of medical staff, and he endeavours to extort from the following passage in one of my letters, dated Spike island, the 8th of February 1796, that I held it to be insufficient; viz. "*a signal being made for sailing, and there being a probability that the wind may continue favourable, I must beg leave to state to you that the medical staff for the troops under the command of General Whyte, will not be adequate to its purposes from the number left behind here in charge of the sick; unless those who may have returned to England with admiral Christian's fleet, (which is supposed at present in this place to have arrived at St. Helen's,) are ordered to join in the West Indies with the earliest opportunity.*"

This passage implies no opinion respecting the original proportion

proportion of the medical staff, for it did not belong to my place to offer an opinion to Mr. Keate upon the subject. It was my duty to state a circumstance of history for the information of the army Medical Board, and what I there stated is not inconsistent with my present opinion. The medical officers, who sailed from the Cove of Cork on the 8th of February, would have probably been insufficient for the duty in the West Indies: the following facts will be allowed to be sufficient to account for the deficiency. Three of the hospital mates had been dismissed for improper conduct; one staff officer was supposed to be dying; several were sick; the sick troops were very numerous and a large proportion of the St. Domingo staff was necessarily left in charge of them. The staff, a part of which only had been sent to Ireland, was, in fact, scattered and dispersed; the health of the troops was precarious, for infection was in almost every ship; and, in such circumstances, it was necessary that those at home should use means to collect the dispersed medical officers and dispatch them to their destination. If the number of sick exceeded by at least three times the proportion that might have been expected, had it not been for the constrained circumstances under which the troops had been placed; and if, notwithstanding this, there still remained sufficient for the service if the whole had been present, it will not be thence inferred, that the original staff was deficient, at least as far as my opinion goes. The paper in the Appendix, No. II. will shew how I thought at that time on this subject. I am more convinced now than I was then of the advantages of quality over number.

Mr. Keate would seem to insinuate, that my opinion, given in 1805, is not consistent with that which I held in 1796; I shall therefore state, in a few words, the history of
of

St. Domingo.

of what relates to the subject of medical staff during the time I acted as chief in the medical department in St. Domingo, or other places. I mentioned in my Letter of the 15th June that, when I became senior officer in the medical department in St. Domingo, I broke up the general hospital establishment, and, of course, set the hospital staff at liberty. This was executed completely only in the district of Port au Prince where I principally resided; and, as it is evident that there was now a superfluity of hospital officers at this place, and as I recommended a regimental surgeon to be promoted to the hospital rank at this time, it is fit and proper that I here state the reason for which this was done, lest the surgeon general should adduce the fact as a charge of inconsistency, or accommodation of the service to my own partial purposes. It is shortly this: there was a large colonial force in St. Domingo, the surgeons of which were French; and, as the colonials were frequently employed on expeditions or enterprizes, and were, of course, frequently engaged with the enemy, I thought it proper that a British officer of the medical staff should be attached to them, for the purpose of superintending the concerns of the sick, particularly in the field. This was my view; and, in execution of my purpose, I recommended for this appointment a person who spoke the French language perfectly, who was acquainted with the manners and character of the French people, and whom I believed to be the best capable of executing the duty for the benefit of His Majesty's service. Besides this, I recommended no augmentation of the hospital staff while I remained in St. Domingo; and when I made the alluded to recommendation, I noticed, in the memorandum, that I had not made it because there was want of hospital officers; (on the contrary, it was expressed on the face of the memorandum that there was a superfluity;)

fluity;) but because I conceived this person to be particularly well qualified, on account of his acquirements, for the purpose specified. The hospital concerns were now conducted on the regimental plan, and they went on smoothly, in the district of Port au Prince, during the time I remained at St. Domingo. There was no deficiency, except perhaps of respectable hospital mates for detachment with troops stationed at distinct and distant posts. The nature of the service in St. Domingo required the troops to be dispersed in parties for the purpose of occupying a chain of posts; and, as it is proper that a medical officer be stationed at every post where there are British soldiers, it was often difficult to find a person of trust for this duty; for, notwithstanding the solicitude and boasted discernment of the medical board in instituting the proper course of examination for hospital mates, I was under the necessity of dismissing several as useless or vagabond: one of them recommended for the first staff or regimental surgery by the Medical Board itself; of this the Board was officially informed.—And here I may remark that it is not the number of medical officers that gives promise of health to an army: the quality is principally to be regarded, and that can only be known by trial in experiment which the Medical Board does not institute. Moral character is also a consideration in the estimate of a medical man's merits; but the surgeon general estimates that by his own rule.

But that you may attain some other proof of my position, viz. that a just proportion of medical officers is necessary for the correct execution of medical duty, and that more does no good, I shall instance the Russian auxiliary force, for it furnishes an example of the fact while it remained at its cantonments in the islands of Jersey and Guernsey. The Russian troops made their passage to the islands in the best manner they could after they left
the

Russian.

the Helder; some sooner, some later. I myself came the way of Yarmouth, and was detained some days in London in arranging some necessary details of business; hence some of the transports reached Guernsey before I arrived. The sick were landed, and treated by the island medical staff: the duty was oppressive; for the greater number of the Russian surgeons or assistant surgeons having accompanied the sick and wounded to Yarmouth, the troops, which first landed on the islands, were nearly without medical help. As the sick increased rapidly, and as few of the surgeons were present, I wrote to the Secretary at War, suggesting that Count Woronzow, the Russian ambassador, should be requested to order a proportion of the medical officers to repair to the cantonments in Jersey and Guernsey. This was done accordingly, and relief was sent immediately; while the surgeon general, of whose provident care in ordering supplies of men and materials I never complained, dispatched, at the same time, two deputy purveyors with hospital stores, two staff surgeons, two apothecaries, and a proportion of hospital mates. As a certain proportion of Russian surgeons and assistant surgeons had already arrived, I declined employing the British staff; and as the commissariate had been ordered to furnish an hospital ration for the sick, calculated *ad valorem*, the hospital stores were not touched, and the purveyors were not admitted to act; for there were no accounts to be kept. The Russian sick were thus treated by their own surgeons under the superintendance of Doctors Borland, Baillie and myself: the force amounted to about 14,000 men: the expence of the treatment, exclusively of medicines and some addition of fuel, was comprehended within the value of the ordinary ration; and the Russians were themselves well satisfied with what was done for
them

them, as may be inferred from Count Woronzow's letter here subjoined.*

To this I shall add some notice of what I observed in the American war, in that division of the army where I myself served. In the latter end of the year 1778, an expedition was sent from New York to take possession of the province of Georgia. It consisted of about four thousand men, and it was accompanied by only one staff surgeon. This force was afterwards increased by some troops from St. Augustine, and sometime afterwards a physician, a staff surgeon and an apothecary were added to the detachment. Georgia and South Carolina were the scene of our operations; and, as the lower districts of these provinces are known to be among the most unhealthy parts of North America, this additional hospital assistance was now thought to be necessary. We took Savannah by storm, advanced to Augusta, fought a considerable action at Brier Creek, penetrated into South Carolina, appeared under the walls of Charlestown, retreated to Savannah, and, in our retreat, suffered loss in repelling an attack at Stono-Ferry, and finally sustained a siege at Savannah in Oct. 1779. Besides wounded from the cause stated, there were many sick during summer and autumn, for we occupied very unhealthy positions; and, during 1779, we fought more, and sustained

* (COPY.)

LONDON, *March 10th, 1800.*

SIR,

Permit me hereby to acknowledge the receipt of your very polite letter, as also of the statement of the Russian troops which you have had the goodness to send me. Your care and attention to the welfare of his Imperial Majesty's subjects entitles you to my warmest acknowledgements, and to that true regard with which I remain,

Sir,

Your most obedient and humble servant,

S. C. WORONZOW.

Dr. Jackson.

C

more

more loss in wounded than all the troops in America put together. Here regimental surgeons did most of the duty: complicated cases of disease, or such persons as required rest and different diet from what could be afforded at the regimental infirmary, were only sent to the general hospital. Charlestown was besieged in the spring 1780, and it surrendered in May. Lord Cornwallis was left with the chief command in the province. He advanced into the country with the active part of the army: his force was not, I believe, less than 3000 men, and he had with him only one staff surgeon. Some part of the troops became sickly in an unusual degree in the summer and autumn; and an action was fought at Camden on the 16th of August, which, exclusive of prisoners, gave between three and four hundred wounded for the care of British surgeons. It may be supposed that every one was here fully employed; but I heard of no complaint that the wounded were neglected. A detachment of Guards, &c. joined Lord Cornwallis in January, 1781: a staff surgeon accompanied it, so that there were now two staff surgeons in the army. We fought a severe action at Guildford Court House in March, in which between 500 and 600 were killed or wounded: those who were badly wounded were left behind under the care of one of the staff surgeons; the other accompanied the army in its retreat to Wilmington, and the regimental staff now took care of all who could be transported with safety, and they were, at least, three-fourths of the whole. Lord Cornwallis, after refreshing the troops for about three weeks at Wilmington, moved on towards Virginia, accompanied by one staff surgeon. He joined the force which had been under the command of General Phillips and General Arnold near Peterborough; and when the whole was collected at York Town in September, amounting to 7000 men and upwards, the hospital staff

staff consisted of three staff surgeons and one apothecary, while few of the regimental surgeons had mates or assistants. During the siege of York Town, between 500 and 600 men were killed or wounded. The hospital staff was no doubt fully employed, for the most of the regimental surgeons were stationed at the lines or advanced works; yet I heard of no suffering from want of surgical aid. And I may here remark, that medical officers did more work in the American than in the late or present war; but they made little noise about it; and, if they were not well educated, as the surgeon general pretends, we may yet say, with truth, that they practised their art not less successfully than they do now.

I have thus detailed some histories which occurred within my own experience; and, as they are facts, they may probably assist in enabling you to form an opinion concerning the just proportions of a medical staff for an army of a given force, destined to serve in a particular scene. It is first of all necessary to allot the portion of time out of the twenty-four hours that a medical officer is supposed to spend among the sick in hospital, and, when that is done, it is fit that you estimate, according to rule drawn from correct experience, the number of patients or quantity of work that he is supposed to perform in hospital in the given time. When these primary points are fixed, you will then be enabled to judge whether the requisitions made by officers on foreign duty for further assistance, accompanied, as they ought in all cases to be accompanied by detailed returns of the sick troops and of the sick and effective medical staff, hospital and regimental, are well, or ill founded. Mr. Young makes frequent and strong requisitions for hospital mates, not only from the West Indies but from Holland and Egypt; but, as the requisitions are not presented by the surgeon

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general,

Surgeon general's proportion.

general, as accompanied with a detailed return of the sick and wounded, and of the sick and effective medical staff present, you cannot form an opinion of the propriety, or necessity of the demand then made. I cannot, as far as my own experience goes, admit the surgeon general, who, from what he states himself, is the person who apportions the medical staff for the British army, to be at all parsimonious on the subject of supply; on the contrary, he has appeared to me to be profuse. He seems to calculate his staff on the supposition that there may be a sickness among the troops in the proportion of one in ten. This we know is high in ordinary circumstances; but, taking it as he supposes it to be, we shall thereby see how many sick he allots to the care of one medical officer. He mentions at page 149, of his observations, "*that the candidate shall evince a certain portion of medical knowledge before he can receive the appointment of hospital mate.*" As every medical person in the army, hospital mate, as well as physician or surgeon must, according to this regulation, (which is certainly a very proper one,) evince medical knowledge, we must suppose that every one is more or less qualified to treat the common diseases which appear in the army. This being admitted; let us take the staff appointed for the Cape of Good Hope in the year 1795 as an example; for, being a small staff, and little divided by the circumstances of service, its operations may be easily kept under view in all their progress. The force which was dispatched to take possession of the Cape in 1795 was said to consist of about 3000 men, the hospital staff of eighteen medical persons; the regimental staff, though not known to me precisely, could not well be fewer than nine,—total twenty seven. If one soldier in ten were in the sick list, and one in ten of the medical staff ineffective on account of indisposition or other

other cause, there were thus 300 sick out of 3000 troops, and 24 medical officers out of 27 still remaining effective for their attendance. Three hundred, divided by 24, gives 13 and a fraction. The care of 13 sick persons, disposed under one roof, more particularly as we cannot well suppose more than two of them to be in critical circumstances, will not be deemed an adequate portion of labour for a willing and active medical officer. Hence, the staff will not be adequately employed in the case stated. But to proceed, let us suppose that the number of sick troops amounts to one in five, and let us suppose that the medical staff suffers in the same proportion with the troops, we have thus 600 sick men, and 21 effective medical attendants. In this case, there are only 29 patients for one medical officer; a share of duty, which no person, acquainted with the arrangement of sick and treatment of diseases in armies, will deem hard. A greater degree of sickness than that now stated will rarely occur among troops, unless in particular countries or districts of country in certain seasons of the year, when intermittents, diarrhea, or other complaints of little mortality are epidemic, or where infectious fevers, which have a tedious convalescence, are generated by accumulation in ill-ventilated barracks, or in transport ships; for, even in tropical climates, where sickness is epidemic, but where the course of fever often terminates fatally within the fifth day, such accumulation of sick is not often likely to take place. If the medical staff die rapidly in such case, so do the troops: hence, the preponderance in the balance being still preserved, there will be no just cause to complain of want, or to call for augmentation. But let us go farther, and suppose that the sick amount to one half of the total number, and that the half of the medical staff is likewise ineffective. We have here 1500 sick soldiers,

diers, and only thirteen medical officers to attend them. This I maintain, from what I have done myself and seen done by others, is within the compass of their power; and, if a good interior arrangement be made in the hospital by classing the subjects according to the nature of their diseases and their conditions, it will not even be oppressive. If this be true, I infer by a similar rule that, if the whole troops were sick and the medical staff effective, the task of attending them, that is, of prescribing and administering for their needs would not be impossible, as every hospital mate is stated to possess medical knowledge, consequently to be capable of responsible trust; and, according to this statement, you will see that the allotment of medical officers for the naval hospitals at Haslar and Plymouth is adequate to its purposes, even if the hospitals were full.

You will not I presume, from what I have now said, be disposed to believe that the surgeon general, notwithstanding all his boast of experience has calculated the medical staff, which was sent to the Cape of Good Hope in the year 1795, with sufficient knowledge of military service, or a just opinion of the quantity of labour which may be exacted from a medical man. He could not, had he been in any degree acquainted with military hospitals, have supposed that 13 patients, such as ordinarily present themselves among the sick of armies, could furnish adequate employment for an energetic and well instructed surgeon or hospital mate who devotes his whole time to his duty; and, that this Cape staff, or the greater part of it was in reality unnecessary, is incontrovertibly proved by the fact that the whole or greater part of it was subsequently sent home, the care of the sick committed to the regimental surgeons, as stated to you in my letter of June 15.

You

You will also, I believe, see from what I have now said here and in the Appendix, that I have at no time committed myself to speak inconsistently with regard to the number of the medical staff. I have always looked for quality rather than number, and the longer I live the more I am confirmed in the truth of that opinion. One zealous and intelligent man is better than half a dozen who are otherwise : I even maintain that it is better for the sick to be without a physician than to be placed under the care of one that is not skilful ; and I do not see how a physician can be known to be skilful, till he has been tried, that is, till he has had experience from which he might learn.

The proofs, which I adduced in my former letter and what I have now added, appear to me to be decisive that the hospital staff exceeds all just proportion, even in the scene of war ; in times of peace, and in stationary quarters, I hold it to be altogether superfluous. The re-opening the general hospital at the Cape for a short time in the present war was not, as stated by Mr. Keate, a necessity arising out of the nature of the service. It arose from the general in command ordering the surgeons to encamp with their regiments. This was not a measure of necessity, if each regiment had a surgeon and an assistant present ; and, as proof that it was not necessary, it did not take place next year when a proportion of the surgeons were permitted to remain in town in charge of the sick : hence, as no general hospital was opened in the one case, none was necessary in the other. I therefore, notwithstanding the testimonies of Mr. Young, Mr. Weir, and Mr. Wood think that my own opinion on the subject of medical staff is well supported. I proved it by experiment, even in the West Indies ; and I maintain that, in the West Indies, of all countries in the world, the sick, as obtaining prompt

assistance, ought to be solely treated by the regimental surgeon, in the regimental infirmary. See Appendix, No. II. and III.

General hospitals.

In Article VIII. “ you observe that hospitals, to which the sick of regiments absent on service may be generally sent, must be undoubtedly useful ; but you object to the number which have been established, and to the magnitude of the establishments attached to them.” The surgeon general gives a history of the different hospitals which have been established in England since the year 1793, stating the causes which called for their erection, and producing the authority under which they were erected. I do not deny that there was a temporary convenience, even a temporary necessity for what was done ; but I must at the same time add that it will be more consistent with military organization, and conduce more to the general good of the army, if the concerns of health can be arranged systematically, the ineffective parts of absent regiments brought together in one body, so as to be under the inspection of one eye and attached as it were to one centre. There is, or there ought to be an hospital for every barrack in which troops are quartered ; and hence those troops, which are stationed in England, and which have a regimental infirmary, are not supposed to send their sick to a general hospital. The sick of regiments at present thus remain at the regiment, attached to their own centre ; the sick of absent regiments only are to be received into general hospitals ; and, this being admitted, it is proper that the sick, for the sake of an effective military purpose, be brought together in the hospitals in correct order, and remain under the inspection of one military eye during their absence from their proper corps. The depôt at the Isle of Wight is set apart for the reception of soldiers whose regiments are
absent

absent on foreign service ; and, as there is a depôt at this place for detached soldiers, so there is an hospital for the reception of the sick of all such detached parties as assemble at the depôt. If the depôt be not sufficient in extent and capacity for its purposes, it is fit that it should be enlarged so as to be equal to the needs ; and, for a similar reason, if the hospital be not large enough for the sick which may occasionally be thrown upon it, it is fit that others should be built so as to furnish accommodation for all the sick who may fall within the precincts of the depôt, and thus become subject to its order and discipline. The army depôt could not, I may observe, be better placed than it now is, for it is contiguous to Portsmouth, which is the great port for embarkation and disembarkation ; and, if it should so happen that troops are embarked at Deal, Margate, or Yarmouth, the persons not fit to proceed on service will be easily sent to the Isle of Wight by water, and they will then be where they ought to be, for the depôt must be considered as the home of every soldier whose regiment is abroad. Hence there may exist cause for extending the hospital at the army depôt ; there would be much expence, and no great convenience in erecting or maintaining general hospitals at every port from which troops may occasionally embark, or at which they may most conveniently disembark, when they arrive from foreign parts.

The second point, “ the magnitude of the establishments attached to general hospitals,” seems to be a point which bears hard upon the surgeon general, for he manifests considerable irritation on the subject. He alludes at page 51, to the depôt hospital at Chatham and Isle of Wight, and observes, but without good recollection, that he does not “ *discover any intimation from Doctor Borland, or from me of a superabundance of medical officers,*

Establishment
of servants, &c.

officers, or of servants in them, except in the single instance of Dr. Maclaurin." When I went to Chatham in 1800, I found a surgeon and an apothecary attached to the duties of the hospital; the apothecary did medical duty, as the apothecaries stores were placed under the care of an hospital mate, to whom was given extra allowance for extra trouble. I then applied for the assistance of Dr. Borland, as I thought such assistance necessary. I obtained it, and, together with it, the assistance of Dr. Maclaurin, which I thought more than necessary. There were then seven hospital mates at Chatham; four I considered to be sufficient for the duty of this establishment; and, as two of the seven were practitioners in the neighbourhood, but gave their hours of attendance at the hospital, I mentioned to Mr. Keate, I do not recollect whether verbally or by writing, that I did not wish any person of that description to be employed in hospitals of which I had the charge; for I thought then, as I do now, that a physician, surgeon, or hospital mate owes all his time to his official duty. The number was reduced to four in the course of some months; but the practitioners were still continued. With regard to servants, the surgeon general has spoken without knowledge, or contrary to his conviction. I effected a great retrenchment on this head, for that depended on myself with the approbation of the general commanding. The surgeon general could not well avoid noticing it; for he, I believe, regularly received weekly states, or monthly returns, in which were expressed the material alterations which were made. There were about 130 persons borne at one time on the list of hospital servants, including matrons, sempstresses, stewards, cooks, ward masters, clerks, orderlies, barbers, dispensers, nurses, washers, &c. I reduced the number by greatly more than one half, and by a different disposition which I

made

made of the sick, allotted double attendance to those who were really ill and required the care of nurses. The monthly returns, and the servants pay bills from December 1800 to July 1801, exist somewhere; and, if found, they will shew the steps and mark the progress that was made in this reduction.

Article XXVI. "relates to the superfluous and ill judged supplies of medicines, &c. sent to foreign parts." I stated in a note subjoined to my publication of 1805 that I sent to England, for the information of the members of the Medical Board, an invoice of medicines found at Bremen in the year 1795, accompanied with a requisition of a few articles wanted to complete the assortment, so as to make it equal to answer the demands of the service. The surgeon general says he has no belief of ever having seen any such requisition. I cannot pretend to say that it actually came to his hands; but I know that it was sent from Bremen by the common post, through which the general's dispatches, and all other communications from the Continent were made. I do not recollect, whether it was directed to Mr. Keate individually, or to the board as a collective body. I did not then know that requisitions for medicines were to be made directly to the apothecary general without receiving the sanction of the Medical Board; and I thus, in ignorance, as no member of the Medical Board deigned to communicate with me, or instruct me, during the time I was chief medical officer on the Continent, addressed a requisition to the Board, which, as it appears, ought to have been sent to Mr. Garnier. There is, however, no proof that the requisition, though not properly addressed, was not received; but a proof arises in the circumstance now stated that the Medical Board were determined not to acknowledge me or my requisition, in as much as I had been appointed

Requisition for medicines.

contrary

contrary to their wishes, or rather contrary to their remonstrances. The medicines alluded to were collected and arranged by Dr. Shapter, who was then apothecary to the forces; and the Doctor, I dare say, still recollects that he made an invoice of what existed, and he even perhaps remembers that this invoice was transmitted to England, accompanied by a requisition for a few things that were not in the stores, and that were necessary to be provided in order to supply the demands of regimental surgeons. But I have said enough on the subject: the surgeon general has pleased himself with a subterfuge; he has given no refutation of what was done, and what I state to be a fact.

Besides the subterfuge now alluded to, the surgeon general adds what he terms another refutation of my statements, in the extract of a letter from Mr. Wood, apothecary to the forces. Mr. Wood will scarcely be deemed sufficient authority to support the surgeon general on this point. He has not expressed himself very clearly on the subject, and by no means correctly as to matter of fact. He says he had *the charge of the principal depôt all the time we remained in possession of Mole St. Nicholas in St. Domingo*. This cannot be true, for Mr. Wood left the Mole in company with General Whyte, in April or May, (I do not recollect which), and the Mole was not evacuated till the month of September or October. He says farther, that *he was employed by you (Mr. Keate) to limit the quantity sent into that country for three years, to prevent accumulation*. This duty he must have executed badly; for, in the year 1798, there was a large house—one of the second rate houses at the Mole, occupied by medicinal stores, while many articles, particularly such as were called for by colonial troops, were left to be purchased where they could be found. This is true, and the fact will be proved to your satisfaction

Excess of medicines at St. Domingo.

satisfaction by reference to the accounts of the commissary general, by whom the superfluous drugs were sold, and by whom the money price was paid for drugs purchased. I stated, in the note under consideration, that 354 tons of medicines were shipped for the West Indies in the year 1795. This Mr. Wood has multiplied to 400, and he asserts that not a decimal part was sent from England, suspecting, without knowing correctly, that articles of *diet, even beds, bedding, cots, &c. have been included.* The quantity I stated was taken from the official lists laid before the House of Commons in the year 1796; and I should suppose that every article shipped under the head of medicines came from the army elaboratory, which does not, I believe, furnish either beds or bedding. But as the matter may not be clear, and that you may not rely altogether on Mr. Wood's testimony as presented in his letter to Mr. Keate, I advise you to consult Mr. White, who was apothecary to the forces in the year 1798, and is now field inspector on half pay. He is, I believe, in England. He had the charge of the apothecaries stores after Mr. Wood left the Mole: he probably saw them shipped for Jamaica, and he can perhaps inform you of the amount of the tonnage required for their conveyance. Mr. Lind, then Garrison surgeon of Jamaica, and now deputy inspector of hospitals, will also be able to give some information on this subject: Mr. Lind states generally that the quantity was enormous; and I understand that, after he had selected what he thought necessary for the service of Jamaica, the residue was sold at vendue by the commissary general; and if the sales were regularly made, and if the accounts be still preserved, you may attain some information of the real state of the case by inspecting them. I merely state the fact of superfluity of some articles, and of deficiency of others; and, from a view of what has occurred

occurred within my own knowledge, I am well founded in what I state. I do not pretend to say where the blame lies; and I admit that it does not belong to the surgeon general, if the requisitions made to him were correctly executed, and nothing more was added. But, while I say this much, I know from my own experience that the surgeon general has a great propensity to be liberal in supplying public stores; and, that I do not make assertions without giving example of the fact, I here take the liberty of mentioning what occurred in 1800, when I acted with the Russian auxiliary force. The medicines and hospital equipments which had been ordered for the use of the Russian sick were embarked in the river, and the vessel was frozen up in her passage, I believe at Deptford. The sick were in want of their hospital equipments, and I wrote to the War Office, Horse Guards, or Mr. Keate himself, (I do not now recollect which), suggesting that a proportion of the necessary things should be selected, and sent to Portsmouth by land, in order to be embarked for the islands. Instead of selecting a proportion of what was already prepared for the use of the Russians, a duplicate of the original supply was ordered. This could not be executed in a short time, probably not before there was reason to expect that the frozen vessel would be at liberty; and, as I considered the supply already prepared to be ample for every probable want, I stated to the higher authorities that the second was superfluous; it was accordingly countermanded, and I have reason to think that the surgeon general was in consequence checked for the great forwardness he manifested on this occasion. He notwithstanding informed me some time after, that he had ordered 21 sets of capital instruments for the Russian surgeons. This was superfluous; the Russians only required a supply of what had been lost or spoiled on service, of course

course the 21 sets were not received.—These facts shew the slender grounds on which the surgeon general orders supplies.

Article XXXV, “*relates to the propriety of establishing depôts of hospital stores and medicine at given stations, or of trusting to the sources of the country in which the troops may serve, or in which the scene of war may lie.*” The surgeon general seems to exult on

Markets on the spot.

this subject, and, with a law flippancy of expression, opposes Jackson versus Jackson, as implying a charge against me of inconsistency in opinion. I must state the case: it implies no inconsistency in reality, and, in explaining it, it is probable I shall strike upon ground which the surgeon general would not wish to be touched. A division of troops was collected on Spike island, in Autumn 1795, for the service of the West Indies. By confinement in camp, and other causes which it does not belong to this place to mention, it experienced unusual sickness and sustained great loss by death. There were no hospitals on Spike island; and no hospital stores had yet arrived in the month of October. Mr. Robert Keate, nephew to the surgeon general, was deputy purveyor, and it is commonly known that the purveyor supplies the wants of hospitals. Mr. Robert Keate, I am ready to acknowledge, shewed good disposition and every desire to do his duty; but he was very young, totally unacquainted with military service, and he certainly had much to do to provide what was required for the use of the sick. This was true at the time I wrote to the surgeon general; but, at an after period, when the sick were greatly more numerous than they were on the 11th of November; and moreover, when they were dispersed in various places in urgent necessity from increasing number, I recollect no complaint of want, and heard of no difficulty, when the weather permitted boats to pass to and from the ships in harbour,

bour, or to the different places where the sick were accommodated on shore. The cause of this change I ascribe to the activity of Mr. Munro, a staff surgeon, who, with the approbation of the general commanding, was ordered to act as purveyor till such time as the expedition should arrive at its destination, where the commissioned purveyor was. The step taken on this occasion was not regular; but it appeared to me to be necessary for the good of the service: it provoked strong expressions of anger from the surgeon general, who desired that I might request General Whyte to remand Mr. Munro to his surgeon's duty, and leave purveying to the commissioned purveyors. But, as I held myself responsible that there should be no difficulty or embarrassment in supplying the sick with what was required for their uses, I persisted, with the general's consent, in continuing Mr. Munro's services in the line of purveyor, 'till the expedition arrived at Barbadoes, where I was relieved from responsibility by the presence of Mr. Weir. Such is the fact: If I spoke from wrong information on the 11th of November, that information was derived through Deputy Purveyor Keate; and we may, perhaps, conclude with safety that the wants and difficulties, complained of at that time, were more owing to our own inexperience and inefficiency than to the deficiencies of Cork market. Vinegar, I remember was dear, that is, common vinegar was scarce; but, I recollect no other want or difficulty after the period stated. As Ireland furnished common provisions, or such as are termed hospital stores, it also furnished medicines, and it was capable of furnishing them to any extent that the sick of this expedition required.

After this explanation, the Commissioners will not, I presume, appeal to my own authority against myself as to the deficiencies of civilized countries. I was probably
not

not well informed of the means to be found in Cork ; but, that we do not incur such error in future, it is fit and proper that those persons, who superintend the medical arrangements of our military expeditions, know precisely what is to be found in the common markets of every country to which our troops are sent, so that hospital stores or medicines be not sent to a well provided market ; and, on the other hand, that no hardship be incurred from want, it is necessary that the hospital or commissariate stores be provided with those things which are useful, and which are not to be purchased on the spot ; for, if it be known that any given place furnishes what we want of good quality, it is, I presume, better and cheaper to purchase at the market than that government should transport at its own expence and risk ; for, as merchants freight cheaper than the public, they, by a necessity in the law of trade, ordinarily sell at a fair profit.

But, as the surgeon general does not think it prudent to trust the supply of hospital stores and medicines to the common market in distant countries, in apprehension that the service may suffer from want, it will not be so easy for him to explain why he refuses to purchase, or allow purchase of stores at a market on the spot, when he has proof that they are as cheap, even cheaper, and of equal good quality as those furnished by contract in London. This question must necessarily attract your notice as Commissioners ; because, it is important to the public that it be satisfactorily explained. When the army depôt was removed from Chatham to the Isle of Wight in the year 1801, Mr. Keate requested with earnestness, that I should draw from the stores at Gosport whatever was wanted for the depôt hospital. I found it more convenient to get what was wanted at Newport, and,

after making a comparison of prices, I did not find that it was more expensive. I therefore, with the consent of General Hewett, under whom I served, adopted that method of supplying the hospital, and I consequently took measures to ensure the best and cheapest market, by laying the contract open to competition. The surgeon general was disappointed, and he appeared to be highly offended. As soon as I left the depôt, the manner of supplying the hospital was changed: the stores were sent from Gosport, or from London; and one of the dealers at Newport, viz. Mr. Steane, made tenders in consequence to the members of the Army Medical Board, and afterwards to the Secretary at War, of such articles as were comprehended in his trade, at prices considerably below the London market. I transcribe his letter, because I think it a very important one; and, at the time it was written, Mr. Steane was a man of good credit, and respectable among merchants.

(COPY.)

The Right Honourable Secretary at War.

SIR,

WHEN the sick belonging to the army depôt arrived here from Chatham, I had the honour of supplying the same with wine, spirits, porter and beer, I flatter myself to the satisfaction of the medical gentleman, Dr. Jackson, then at the head of it. Importing my own spirits and wines, and rectifying my spirits of wines, and also purchasing a quantity of London porter; it stands more in my power to sell those articles of merchandise at a cheaper rate than they can be procured from London, and a consequent large saving to government, of not only the price and the article, but the carriage,

riage, as well as risk and insurance—in war most especially; so, from my general knowledge in business, and having ever since the army depôt was stationed in this island, furnished the medical drafts, of course knowing the prices they give for their goods in London, it appears hard they should use the London market for their wines, spirits, and porter, when they can have them for 4s. per gallon less, and fully of the same quality, and as what I furnished the hospital with under Dr. Jackson's orders was perfectly satisfactory, I feel it sore it should be drawn from me. Annexed are my prices at the time the spirits came from London, and opposite are the prices charged for what was brought from London; the quality I most positively declare the same. As I, in common with the other inhabitants of the island, bear a liberal share of the burthens attached to war, I presume, without wishing to offend, I have a right to a share of the advantages arising from the same, whilst I can do the business better than it is now done with a considerable saving to government; the matter must hold itself of considerable moment to every one at this crisis of our country. This reason, Sir, has induced me to come forward with the present address, having been recommended to do so by a part of the head of the medical staff in London, to two of whom I have made tenders without receiving any reply; and knowing from the high situation you hold, and the stake you have in the country, you will the more readily attend to the tenders of individuals, where it is attended with so much public economy.

With due respect,

Your obliged humble servant,

(Signed) JOHN STEANE.

Distiller and Merchant,

Newport, Isle of Wight, July 16, 1803.

	J. Steane's Prices.		London Prices.
	s.		s.
Cogniac Brandy	18	Do.	22
Jamaica Rum	14	Do.	18
Rotterdam Gin	14	Do.	18
Spirits of Wine	13	Do.	18
Port Wine, per pipe	80 <i>l.</i>	Do.	86 <i>l.</i>

The above are now my prices, the new duty to be added to them, and no carriage or risk, and if not approved, immediately changed without any expence to the public; the porter I will deliver with a saving of 8s. per hogshead, for carriage, and from the same brewer, viz. Felix, Calvert, and Co.—Quality the same.

J. S.

Such is the letter of Mr. Steane. It speaks sufficiently for itself; and, as it appears that twenty-five per cent. on articles of spirit, ten on wine, and about ten on porter, including freight, wharfage and other incidental expences, would have been saved by closing with his proposition, it is somewhat surprizing that the then Secretary at War, (I believe Mr. Bragge) should not have attended to it so as to give it effect. The subject was I believe considered by him; but the surgeon general stated that the persons, who had supplied the hospitals with the above-mentioned articles, had done it to his satisfaction, and he therefore hoped they would be permitted to continue to do so. This was the purport of his recommendation, and the effect proves that the Secretary at War acquiesced in it. Whether there may be some who think that the satisfaction of the surgeon general on this head was purchased at too great expence, I do not take upon myself to determine; the transaction I may however say has a
strange

strange appearance,—not consonant with the obvious rules of economy.

Article XLIV. “The expences at Chatham hospital, or rather the money drawn for Chatham hospital, between the 25th of September, 1800, and July 16, 1801, amounted to near £10,000;” and it is true, as Mr. Keate states, that during three-fourths of the time that hospital was under my management. The money was drawn between September and the following July; I do not know that it was all expended during that time; but, I am ready to allow that the expenditure during the first three months after my arrival at Chatham was very great. The enormity of the expence indeed induced me to digest, and, with the approbation of General Hewett, give effect to a different plan of management. This was viewed with an evil eye by the surgeon general; and it was brought against me at an after period by the two principal members of the Medical Board, as a matter of serious accusation. The retrenchment which I made was considerable, at least one half of the amount; and that you may see the causes on which it depended, I must take the liberty of mentioning to you that I admitted no persons into the hospital under the head of itch or punishment, that I reduced the servants from 130 to about 50, disposing the sick at the same time in such a manner, that those who were actually ill had better attendance than they had when under the former disposition, that I measured the provisions correctly to the wants of the patients, and that I thereby effected a considerable saving of meat and bread; for, it is well known to all persons who are acquainted with the interior of military hospitals of former times, that meat and bread were almost always to be found under the sick man’s pillow. This was a nuisance,—if it was not otherwise injurious,

Expences of
Chatham hos-
pital.

I endeavoured to obviate it, by allotting to the different classes of hospital patients the quantity, which I found by observation they easily and ordinarily consumed—and nothing more. There was no waste—neither was there any want, at least the patients did not themselves perceive it, or complain of it; and if they did not perceive it, there could be no good reason to suppose that it existed. The arrangement now alluded to was not in train till about the beginning of March; and I admit, that prior to that time, the expence was great, and not easily ascertained: there are documents to shew that posteriorly, it was diminished and correctly adjusted. The hospital books, which I suppose still exist, shew the progress of this economical operation; and the accounts of the hospital at the Isle of Wight, which were more correctly digested and better kept than they were at Chatham, shew the effect of the arrangement which I then introduced into the depôt hospital.

Recapitulation.

I have now noticed some points in Mr. Keate's observations, which relate to general arrangements in the medical department of the army, in which he says you have erred, and on which he is pleased to say that I have led you into error. Be that as it may; I think the following positions, and they are the most important ones in this discussion, are fully established, viz. 1. That medical officers, by whatever name they are designed, ought invariably to give proof, by open trial in experiment, that they actually possess knowledge of the most approved manner of curing diseases, before they are permitted to assume independent and responsible duties. 2. That hospitals, or receptacles for sick, well conducted, are a benefit to an army, whether they be general or regimental; that hospitals, badly conducted, are directly destructive of life, whether they receive the sick of many
regiments

regiments or of one. This our common sense can comprehend, and we have seen it proved in experience. But while we admit its truth, I may at the same time add that general hospitals, which are ordinarily collections of sick indiscriminately thrown together, are difficultly organized and preserved in order; for they consist of a mass of materials originally heterogeneous: regimental infirmaries on the contrary, which receive the sick of a particular corps, still retain something of the organization and discipline of the corps to which they belong: they are thus comparatively speaking little liable to abuse; that is, they may be kept in order with comparatively little effort. Good effect arises from good order in a train of movement; consequently, as the order of the regimental infirmary is better ensured than that of the general hospital, the effect of its operations may reasonably be expected to be more fortunate, if other things be equal.

3. General hospitals become necessary in the scene of actual war, as places of accommodation for tedious and complicated diseases which cannot be transported with convenience or safety in the train of a moving army: they are not necessary in time of peace, or in stationary quarters and fixed cantonments;* and, if not necessary

* In illustration of this position, I adduced the instance of what happened at Port au Prince, St. Domingo, and at the Cape of Good Hope, in the late and in the present war. The surgeon general at page 57, alludes to the Cape, and represents the case as if he were advocate for a cause, not as if he wished ingenuously to state the truth.—There was in fact no necessity for re-opening the general hospital at the Cape. The general ordered the troops to encamp for a short time, and he ordered all the surgeons to encamp with the troops. This last step was not necessary: another general ordered a similar encampment next year, and he allowed a portion of the surgeons to remain in quarters; of course no general hospital was opened: thus in one case the general hospital was opened; in the other not; in neither case was there a necessity.

in such case, it is obvious, from what has been said in the preceding article, that they ought not to be resorted to : they are only strictly speaking a resort of necessity, for it requires great talent and exertion to maintain their economy correct and systematic throughout. 4. The proportion of the hospital staff does not appear to have been calculated of late years by any fixed rule of knowledge ; nor does the quantity of a medical man's labour appear to have been duly estimated by the medical chiefs. If there be no guide for fixing measure by a just rule, as deficiency is often dreaded, where we do not know to estimate and judge the quantity correctly, profusion is the consequence ; and I think we may say without fear of contradiction, if we allow ourselves to be guided by facts, that it has often been enormous. The assertion which I made is certainly true that, if the whole force in some of our expeditions had been sick, the hospital staff might have been considered as equal to its medical care, if all things had been well arranged, and if the medical officers had been zealous and intelligent. I have placed this in a point of view which any medical man may understand ; and I have further proved by example that, where the regimental staff did its duty, the hospital staff was, or might have been idle : hence I conclude, and on solid evidence, that the hospital staff was often unnecessarily numerous. 5. Wherever a country, in which the scene of war is laid, is commercial and civilized, it possesses hospital stores and ordinarily medicines adapted to the cure of the diseases which there most prevail ; consequently it is safe to trust supplies to the common markets ; and, if all things be duly considered, as it will for the most part be sufficiently certain, so it will be found generally to be the most economical, as nothing is provided without actual requisition, pointing to near and measured consumption ;

consumption;—the judgment of those who act on the spot may be trusted to regulate the quantity.

The observations, which the surgeon general has placed against your suggestions and recommendations, mark a casuistry which far exceeds the measure of Mr. Keate's intellect. The case is drawn up with ability; and the surgeon general, I am ready to confess, owes much to his counsel, who has glossed his defects and errors so artfully that those who read superficially may be disposed to regard him as a man of zeal and judgement. The subterfuge is substituted with dexterity for argument, and the authority is applied with address to cover the reason of the thing. You did not I presume say, or suppose that Mr. Keate erected hospitals or formed depôts by his own power. The order for execution, you know perfectly well, proceeded through the War Office; but, you expected that the surgeon general, as he appears, by what he says himself, to be the responsible member of the Board, was capable of shewing that every medical arrangement adopted by his recommendation was the best and fittest that could be devised: And we must allow that, if hospitals were erected in England, and depôts of stores and medicines formed in given positions on good grounds originally, it is strange that these hospitals should be abolished, the buildings converted to other uses, or that the depôts should be broken up, the materials removed to other service, while the necessity still continues; for we are still at war, and we are not even secure from the chances of invasion. But, if the surgeon general be responsible for the reasonableness and propriety of erecting permanent hospitals and forming depôts in certain positions in England; it is also expected that, as the person intrusted with the power of apportioning the medical staff for the army or detach-

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ments of the army serving abroad, he be qualified to apportion such staff from his own knowledge of the needs. He cannot be supposed to be fit for his office, if he be guided, in as far as respects number, by the opinions of those who may be appointed to act under him. I admit that it is fair, even proper that a medical officer who is intrusted with execution, be indulged with some choice of his instruments in regard to quality, for he is in some measure responsible for their acts: but I maintain that the act of apportioning number or quantity does not belong to him;—it must be defined by a general rule. The rule must rest on the knowledge of what is required for service in every situation and climate to which troops are sent. This knowledge must arise out of experience, and it can only be supposed to be completely in possession of the surgeon general, or Army Medical Board. The proportion of medical staff, appointed for the service of the year 1795, was unusually high; and the surgeon general seems to think himself justified in deviating from the usual proportion by the recommendations of Mr. Young, Mr. Weir, and perhaps Sir John M. Hayes. This is a cover,—it is not in fact a justification; it however marks that the surgeon general was not acquainted with the extent of his duty. But, as the recommendations of Mr. Young and Mr. Weir will scarcely be held to be sufficient, for authorizing such unusual deviation from the rule of apportioning the medical staff as was exemplified in 1795; so the demands for medical assistance, made by these officers at subsequent periods, cannot be deemed authority for future increase or supply, unless a document be produced that the medical staff and military force had lost their original proportions; that is, by decrease of the one, or augmentation of the other. Mr. Keate has produced no such document, and, of course, he has
produced

produced no authority for complying with the requisitions alluded to. The same rule applies to the apportioning and supply of hospital stores and medicines, as applies to the apportioning and subsequent supply of a medical staff for a given military force. The ordinary equipment is supplied according to a regular estimate; the voucher of expenditure is produced; the future consumption is estimated according to its past rate; and the subsequent supplies are furnished according to that rule. It is demonstrative that this was not attended to in the cases stated.

I have only noticed the points in the surgeon general's observations which were directed against my statements and opinions; and I trust you are satisfied that he has produced no argument that can in the least invalidate the facts stated, or the opinions advanced by me respecting the medical department of the army. But, if any doubts should remain in your mind on any point on this important subject, you are sensible that the only way by which it can be settled, and by which the truth can be established, is by confronting opposing evidences. You will thus find the truth; and, when you find it, it will form a base on which to found arrangements.

Besides the points on which I have now touched, and which are connected with the object of your investigation, there are some particulars in the surgeon general's publication which relate to myself, and which I cannot suffer to pass in silence, though I cannot with propriety submit them to your notice; for I do not consider a commission of military enquiry as a channel through which I am at liberty to repel the calumnies of the surgeon general. As the matter relates to acts which took place, while I held an official situation in the public service, it most properly refers itself to the cognizance

zance of a military court; but, being on half pay, and the transactions being long past, I am so circumstanced that I cannot demand, and the surgeon general is so conscious of his weakness that he declines to submit the case to military decision.

I have the honour to be,

GENTLEMEN,

Your most obedient and most humble servant,

ROBERT JACKSON, M. D.

London, July 30, 1808.

APPENDIX.

No. I.

*Copy of a Letter sent to the Right Honourable Mr.
Windham, Secretary at War.*

NYMEGEN, *October 23d, 1794.*

SIR,

THE defects of the medical department of the army are so obvious, both in plan and execution, as not to escape the notice of the least attentive observer. It is at all times irksome, and frequently appears invidious to search for error and to censure misconduct; but, in a matter like the above, which nearly concerns the success of the British arms and the lives of British Soldiers, I should deem it culpable not to point out, in the most unequivocal terms, the defects which prevail in the present system of medical arrangement, and to suggest the remedies which seem to me the best calculated to remove, or to diminish the evil. Influenced by this motive, I take the liberty of submitting to your consideration a view of the medical history of the regiment to which I belong, and of that part of the army in which I have served, as far as it has come to my knowledge since the month of last November. A history of this sort, if drawn with accuracy and communicated with candour, represents error on undisputable authority, and affords the suggestion of remedies of the least possible fallacy.

I shall endeavour to be concise in my detail.—I joined the third regiment of foot in the month of last November, a few days before it was expected to sail for the West Indies.—A fever of an infectious kind, introduced by recruits from
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the independent companies, began to shew itself soon after the embarkation; but it did not, for some time, manifest signs of violence or malignity. The regiment, instead of proceeding to the West Indies with Sir Charles Grey according to the original intention, was put under the command of Earl Moira as part of the expedition designed for the coast of France. It was distributed in four transports under the idea of proceeding to the West Indies; but, when the nature of the service was changed, one of the ships was demanded, and given up to be applied to some other purpose; by which means the men became crowded and uncomfortable in their berths. The expedition sailed and made its appearance off Cherbourg; but discovering no signs of invitation from friends, it anchored and lay for some time in the road of Guernsey. The weather was stormy, which occasioned confinement between decks, a cause which probably aggravated and called into action the seeds of disease: But be the cause as it may, the fact is certain, that between thirty and forty men were ill of fevers with alarming symptoms when the fleet arrived at Cowes in the latter end of December. The men were brought ashore, and fortunately—for want of better accommodation—were placed in a shed, where the air was pure and free. The good effects were visible; but the regiment being ordered, in a few days, to Lymington, and it not being judged advisable to carry people with suspicion of infection aboard of transports, fifteen of those least advanced in recovery were left behind to be removed to the general hospital at Southampton. During the time the Buffs remained at Lymington, a period of six weeks, fifteen others making thirty in all, were sent to the above hospital in obedience to general orders—of these eight are dead, and six still remain under cure. During the six months, that the regiment depended wholly, for the care of its sick, on its own medical resources, more than one hundred were attacked with the same formidable species of disease, of whom only one died.

The above statement places in the clearest light possible,
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the destructive effects of collecting sick men into general hospitals. Few hospitals were ever better provided with what is deemed necessary for sick than the hospital at Southampton, but still the mortality was great: hence we are obliged to conclude that medical skill and careful nursing do not compensate for the want of pure and free air. The fever, which prevailed among the troops under the command of Earl Moira, had undoubtedly a strong feature of malignity at its source: but it acquired a concentrated virulence in the general hospital at Southampton which baffled the ordinary means of treatment.

But to proceed—the infectious and malignant fever to which the Buff were subject while they remained in transports, cantonments or barracks, totally disappeared about six weeks after they had been encamped at Grosville, in the island of Jersey. When they arrived at Bergen op Zoom, towards the end of July, they actually had not a man sick. They joined the army at Rosendal, then under the command of His Royal Highness, the Duke of York; and, a movement being intended a few days thereafter, such as were thought unable to march with their packs and accoutrements were ordered to be sent away. From boils, from blistered feet, from accidents and slight indispositions, chiefly the consequence of irregularities, thirteen men were found incapable of undertaking a march of fifteen or sixteen miles with arms and necessaries. They were accordingly sent to an hospital; a practice which has been uniformly adopted on the eve of every movement; and, in consequence of which practice, the hospitals are become crowded, though it cannot be fairly said that a general or epidemic sickness has till very lately prevailed in the army. In this manner, the Buff have at present one hundred and twelve men in general hospitals, not more than ten of whom were actually under disease at the time they were removed from the regiment, and not two of whom, I have reason to believe, would have been unfit for duty at this instant, had they been suffered to remain under the care of the surgeon. What has taken place in the Buff,

has,

has, with little variation, taken place in the whole line. It is notorious that men, received into hospitals with the most trivial complaints, become infected with fevers and die. But, besides that human life is sacrificed to the practice of collecting sick men into large hospitals, the service suffers essentially from the tedious and imperfect recoveries which take place at those establishments. It appears, and perhaps it is short of the truth, that of the whole number of men received into the general hospitals of the army, not one in ten returns to his respective regiment in less than three months; and it is a fact which my own experience confirms daily, that there is not one case in twenty of the diseases to which soldiers are liable in the field, that exceeds a fortnight in duration, if treated with judgment and decision in the early stages. As some proof of what I now advance I shall simply observe, (if the egotism can be excused,) that the situation of the regiment to which I belong has been such as to have no connexion with the general hospital for nearly a month. The actual sick at present do not exceed five or six, and there are not in all more than ten or twelve incapable of marching with arms and knapsacks: yet the above has been a sickly period; for, during it, not fewer than eighty have suffered more or less from fever or flux.

The above history is accurate, and this obvious conclusion arises from it, that general hospitals are the chief causes of mortality in armies. In short it appears, from a careful examination of facts, that total neglect has in reality fewer victims than the ordinary means, with ordinary management, employed for restoring the health of sick soldiers. But, if it be true that general hospitals are pernicious in many cases, it will hardly be maintained that they are necessary for the accommodation of the usual diseases of the field in any, when it is known, that exposure to wind and rain, that bathing and washing with cold water, that travelling in open boats or wheel carriages in the actual state of fever, instead of doing harm, as is commonly supposed, has in numerous instances apparently saved life: This opinion of moving or of exposing

exposing men in fevers to the open air, will be considered as rash and hazardous by those who argue without experience ; but I have seen, and daily see so many proofs of it, that I advance it with confidence and without fear of contradiction. There are undoubtedly situations in which motion, or even open air might be hurtful ; but in the common cases of fever, motion in open air is more cordial than wine, and more invigorating than Peruvian bark : the knowledge of the fact is of importance to those who arrange the medical concerns of any army.

The above detail proves sufficiently that the plan of providing for the health of the British army, by the establishment of general hospitals, is wrong ; and if the plan be wrong, I am sorry to observe that little praise is due to the execution. It is not necessary to be particular: for it is obvious that, if vigorous and decided measures were pursued, recoveries would not be so tedious and imperfect as they notoriously are; and, if the arrangements were made with discernment, men admitted on account of wounds, bruises, or trifling accidents, would not so often die of fevers, fluxes, or infectious diseases as they actually do.

It is often easy to point out error, but difficult to suggest a remedy. It is fortunate, in the present case, that the remedy is simple and obvious, and, if executed with vigour, cannot well fail of being effectual. It consists in furnishing the surgeons of the army with the means of taking care of the sick at their respective regiments. But, that this may be done with effect, it is necessary that the qualifications of men appointed to this station be ascertained in the most unequivocal manner. It is not enough that they undergo a formal examination in words, that they have been the pupils of certain men, or of certain hospitals; it is necessary that they have attained a mature age, and that their actual abilities be brought to the test of experiment, by treating diseases and performing operations under the inspection of able and impartial judges. But besides this first and essential step, viz.—

the qualification of the surgeon, it is indispensable that every regiment be furnished with conveyance for sick and recovering men during a campaign, and that a fund be allowed to every corps sufficient to provide the requisite accommodations and comforts in every situation. This is the outline and basis of the plan; but, that the business may be conducted in a uniform and systematic manner, that neglects may not arise, or be permitted to remain, it is further proper that persons acquainted with the habits, manners, and diseases of soldiers which are in some degree peculiar, be appointed to direct and superintend the management of those regimental infirmaries for such a proportion of troops as their labours can embrace, or as the nature of the service throws together. This plan has many important advantages, and nothing can be alleged against it, except a probable increase of incumberance when the army is upon the march; but there is reason to believe that this will be much less than is generally imagined. Troops are universally known to be healthy when actively employed, and I am cearly of opinion, from what I now see and have seen formerly, that 20 or 25 men actually ill and the same number in a state of convalescence would be a large proportion unfit for duty in a thousand men in most parts of Europe, if the method I have recommended were adopted. This incumbrance would be trifling; most evidently over-balanced by the accession of strength it would give to the army, and still more by preventing the slothful habits and irregular conduct which attach to men who have spent some months in a general hospital.

N. B. This paper was sent to Mr. Wyndham, and I believe received by him; whether it was perused by him or not, I do not pretend to know.

On the paper, in which the above was written, the following memorandum or rather addition was found, which I shall now add as illustrative of my opinion: it was written after the infantry withdrew from the Continent in 1795.

MEMO-

MEMORANDUM.

The sequel of the medical history of the Buff, during their service on the Continent, strongly confirms the above opinion. The Buff, with some other regiments, encamped behind the village of Lent, immediately after the evacuation of Nymegen. The rains were so frequent and heavy that the ground of encampment was converted into an absolute mire; but, though this uncomfortable circumstance might aggravate, it could not in justice be considered as the fundamental cause of the disease. A contagious fever, which prevailed in a greater or less degree in every regiment of infantry in the line, and which appeared to have originated from connection with general hospitals, propagated, perhaps, by means of the infected clothes of dead men, was general among the Buff. From the 11th of November, the time of encampment, till the 1st of January, the day on which the camp was broken up, 150 men, ill of fevers only, were received into the hospital of the regiment:—The regimental hospital laboured under many wants. The house, allotted to the purpose, was a barn, where it was not possible to have a fire, or even stove; the hospital bedding of the regiment was left at Helvet sluys; and many of the men were actually without blankets. When the regiment decamped from Lent, the sick were ordered to be sent to the general hospitals at Amheim. They amounted to 45; 30 of whom were in such a state of convalescence as to walk without help, though they were not capable of active service. The threatening movements of the enemy obliged the regiment to change position almost every day; so that those who became sick were necessarily sent to the general hospital. This practice continued till the commencement of the final retreat from the banks of the Rhine; after which, means of conveyance being furnished by the inhabitants as occasions required, every person sick, or convalescent, incapable of walking on foot, was transported in carts or waggons along with the regiment: during the months of February and March, the quarters were frequently

quently changed; the roads were bad; the weather cold and wet; yet, though the sick and convalescent generally amounted to 30 or upwards, several men in a weakly state having rejoined at Deventer, no material disadvantage was felt. Recent attacks recovered rapidly; convalescents from hospitals suffered repeated relapses; but, upon the whole, one man only died; while by separating the sick from the convalescent, the convalescent from those who were well, by frequent washing of the body, changing of the clothes, and change of place, the infection was so far overcome that, in embarking at Bremerlehe in April, no more than six men were left behind, and those in such an advanced state of convalescence, that they were all, except one, immediately employed to attend the sick of other regiments, in the general hospital at Dorum.

This short statement proves the practicability of the surgeons of regiments taking care of their own sick; and a multitude of reasons evince the utility of the practice: the principal of which are the preservation of discipline, the preservation of life, and the saving of expense. The bad effects of long continuance in general hospitals upon the discipline and military spirit of soldiers are known to every officer; the greater mortality, particularly where infectious disease prevails, is known to every medical observer, and the excess of expense exceeds all calculation. The precise proportion of death, in the general hospitals on the Continent, is not within my knowledge. It was said to be three out of five: and from the small number, who rejoined the Buff before embarkation, there is reason to believe it actually was not less. In the Buff, it did not amount to one in one hundred; and though it was not, perhaps, altogether so low in every regiment, it was still lower than in the general hospitals. The sum expended in support of the general hospitals is known to have been enormously great. The ordinary hospital fund of the Buff, with one shilling per week from each man admitted into the regimental hospital, defrayed every expense and furnished every comfort which the sick required.

No. II.

(COPY.)

Remarks on the Medical Department of the Expedition designed for the West Indies. (Presented to General Sir Ralph Abercromby.)

LONDON, Sept. 20th, 1795.

It being obvious, need scarcely be remarked, that the permanent success of our arms in the West Indies depends upon the health of the troops; but it is of importance to be known and remembered that the preservation and recovery of health, in that climate, depend, in a great measure, on the rigid observance of wise military regulations, and on a judicious disposition of medical assistance. It has been unfortunately often proved that dependence, for the recovery of health, on the establishment of general hospitals, is a bad plan in any country:—it is a destructive one in the West Indies. Fever, the principal disease of tropical climates, commonly proceeds rapidly through its different stages: a duration of two, three, or four days frequently terminates its course; and the decision or neglect of an hour often saves or sacrifices the life of a patient. It is evident, under those circumstances, that the practice of removing sick men to general hospitals, which cannot be contiguous to all the divisions of troops on service, cannot fail of being a cause of mortality. Time, every moment of which is precious, is lost in the act of transporting the sick man to a distant hospital; and it will too often happen that, if not dead, the patient is actually in a state of dying before there can have been an attempt to apply a remedy. From this fact, the truth of which is incontrovertible, we draw the important conclusion,

that the acute stage of disease ought to be suffered to pass over with the regiment. But, that the medical establishment of a regiment may be capable of encountering the pressure of malady which may sometimes occur, it is proposed that, besides the surgeon and two mates properly belonging to the corps, there also be an hospital mate attached: and further, as there are few of the present regimental surgeons who have experience of the diseases of hot climates, it is not only advisable, but absolutely necessary for the good of the service and the saving of human life that men who have served in the West Indies, who are acquainted with the modes and forms of the fevers of that climate, be sought for and employed to superintend regimental infirmaries;—viz. to visit those infirmaries daily, and to be constantly in readiness to assist with advice in cases of difficulty and danger. This office of inspector of regimental infirmaries is an office of the utmost importance; but it is probable it will not be adopted—from an idea of increasing medical appointments: yet, if the matter be duly considered, this will not in reality be the case; for, the assistance allotted to the care of the sick being applied in a different and more effective manner, the actual establishment will on the contrary be diminished. According to the plan proposed, none others besides the wounded, those ill of chronic complaints, or who do not recover favourably from acute diseases, will be received into what may be considered properly as general hospital. In this manner, I am of opinion that three physicians, four surgeons, expert in operation, with a well qualified inspector for the regimental infirmaries of each brigade would not be a deficient medical staff for an army of fifteen thousand men.

The above is the outline of a plan which promises advantages to the health of the army; but that its good effect be rendered complete, it will further be proper that soldiers be under the same stoppages in regimental as in general hospital, that they be furnished with sick dresses,
provisions

provisions and every kind of comfort in the same manner, either by a deputy purveyor allotted to each brigade, or by one of the mates of the respective regiments to whom this duty is assigned with adequate compensation. The books of diet for these regimental infirmaries to be kept in regular form; and that there be no waste or unnecessary expenditure, a committee, consisting of a military officer, the surgeon of the regiment and inspector of brigade, ought to be appointed to examine and pass the accounts once every week.

It will further be necessary, in order that this business be conducted in a connected and systematic manner that a person, if possible, acquainted with the climate and with the science of medicine in its whole range be appointed to form a plan in detail, and to superintend the execution of it; to reduce into system and cause to be adopted the improvements which experience may discover; and to report to the Commander in Chief, with a view to censure or reward, the neglects or diligence of the different individuals of the department.

N. B. The arrangement here proposed was not attended to; the general hospital system prevailed, and the event is very generally known.

No. III.

Medical Department in St. Domingo.

COLONIAL.

PREVIOUSLY to a statement of the present situation of the Medical Department of St. Domingo, it is necessary to remark that, under the ancient rule of France, the care of sick soldiers, in the colonies, was usually committed to contractors, frequently monks, or Pères de la charité. Magnificent, extensive, and well arranged hospitals were erected in the principal towns, at the expense of the King; but these hospitals were generally unfortunately situated with respect to health, the convenience of water being uniformly the circumstance which seems to have directed the choice of place. The regulations of the French government for the management of their hospitals were systematic and exact; but the principle on which they were formed is injurious to the service, by withdrawing the soldier from under the eye of the officer during the cure and convalescence, which are usually uncommonly slow. The King furnished the building, paid the salary of the chief physician, and sometimes of the chief surgeon: every other expense was comprehended in the contract. The price of contract did not ordinarily exceed four livres currency a day, for each patient.

When St. Domingo was first possessed by the British, and the plan of raising colonial troops for maintaining the possession was adopted, officers were commissioned to form regiments in districts conquered, or to be conquered; and surgeons were appointed for corps existing, or to exist. No regular mode of ascertaining professional qualification was enjoined. The surgeon, and assistants of the surgeon were usually

usually named by the colonel: consequently they remained subservient to his views in all things.

In some corps the sick were treated regimentally, receiving from the King's stores every thing demanded which the stores possessed, with a contingent bill of extra expenses, and a bill for drugs—generally of enormous amount. In other corps, where the views of the colonel were more extended, the old system of contract was revived; and, instead of the *Pères de la Charité*, the surgeon, sometimes openly, sometimes covertly,—a dependant on the colonel, and in effect the colonel himself, became the contractor. In former times, the contractor was bound to furnish every thing except the house, the salary of the chief physician, and sometimes chief surgeon; here he furnished nothing, except provisions, wood and candles, drugs and orderly service. In the one case, the price of the contract was four livres currency; in the other, seven: to which the expense of furniture, especially the incredible destruction of stretchers, added probably three more. In the one case, two-thirds of the pay of the soldier, was retained for the benefit of the contract, unless from those wounded on service: here nothing was withheld. A table, &c. was furnished for sick officers, under the ancient government, at the rate of fifteen livres: here twenty-one were allowed, exclusive of the furniture, &c. of the sick room. Two-thirds of the pay was retained in the one case: here nothing was required.

In a visit which I made to the different posts, in the month of June 1796, undertaken for the purpose of examining the medical establishments in the island, abuses appeared so flagrant and enormous as to occasion the framing of an official report, suggesting a mode of reform.

It appeared that the surgeons of regiments were generally surgeons of hospitals of contract; by which means they were twice paid for one duty; added to which, they were often either openly or covertly, connected with the contractor. The business was not under competent controul.

De la Tour, colonial inspector, detected frauds and represented abuses; but he had not authority to cause his representations to be attended to: the hospital of contract became the receptacle of people of all descriptions, and frequently of the most trifling diseases. The principle of the plan appeared to be injurious to the service; the abuses of it were insufferable; but a formal agreement had been made, and it required to be abolished in form. It was therefore proposed in the first place to cut off its more glaring abuses; and, in this view, an order was procured to examine the sick in the hospitals of contract, and to cause to be dismissed the cases of slighter malady. This was effected without resistance; but the termination of the contract was warded off, by one means or other, till the month of January. The extent of it, however, had been much circumscribed, at Croix des Bouquets, by the establishment of convalescent hospitals, on a regimental footing, for the Hussars quartered in the plain. It was finally dissolved on the 24th of January. The Medical Department is now regulated according to the following plan:—

1st. Each regiment, consisting of 500 men and upwards, is allowed one surgeon major, with the rank, pay and emoluments of captain; an assistant surgeon, with the pay of seven shillings and sixpence per day and the allowance of subaltern; two inferior assistants, with a pay of five shillings each; the allowances the same as those of chief assistant: the rank as to quarters, &c. inferior to that of ensign. Regiments consisting of a smaller number than 500 are allowed one surgeon, with seven and sixpence per day and the allowances of captain: an assistant at five shillings with the allowances of subaltern: small corps, consisting of 100 men, are allowed one surgeon, at a pay of seven shillings and sixpence per day and the allowances of captain; but no assistant till the number of the corps exceeds 150.

2d. A house is provided, as contiguous as possible to the head quarters of each corps, for the reception of the sick. It is fitted

fitted up with platforms, or furnished with stretchers according to circumstances, and supplied with bedding, cooking and other utensils, according to a proportion of twelve sick for each 100 men. At *Port au Prince*, two-thirds of the ancient general hospital, at present converted into an hospital for colonials, being fitted up with platforms, or *lits de camps*, the hitherto enormous expense of stretchers will be diminished by some thousand pounds a year. In cantonments liable to be changed, this method could not so properly be adopted; but hammocks may be given, in such situations for the convalescent and those slightly indisposed, stretchers only being allowed for cases of severe wounds and severe disease.

3d. At *Port au Prince*, and at *Croix des Bouquets*, it is thought necessary to reserve an apartment for militia, for *marechausée*, for poor, and for sick of detachments who may have no surgeon present. This precaution is further necessary to secure the means of separation, in the event of contagious disease making its appearance among any of the divisions of the troops.

4th. The regimental hospitals, formed in the above manner, are attended by the respective surgeons under the eye of the colonial inspector, and with the occasional advice of the French physician or surgeon of the staff, when within the precincts of *Port au Prince*.

5th. These regimental hospitals receive from the stores of the commissary general, fresh beef in place of salt, and wine in place of rum according to a fixed rate of value. The surgeon also has it in his option to draw from the stores a diminished quantity of beef or bread, demanding an equivalent in rice or sugar according to a fixed rate; or to make any arrangement with the butcher or baker which may conduce more to the benefit of the hospital, submitting the proposition in the first place to the inspector of the district, and shewing the execution of it afterwards. In this case government does not make any stoppage from the pay of the soldier,
consequently

consequently is not chargeable with any contingent expense. Medicines are supplied at regular periods, according to certificates of expenditure; but repair of waste and damage of furniture and utensils is to be supported by a regimental stoppage, or hospital fund, as also washing, orderly service, &c. Government has however, thought fit to allow for the sick in hospital a double proportion of fuel and candles to that granted to healthy troops.

6th. The above is the basis of the plan; but that no assistance be withheld from the sick or wounded officer and soldier, which the medical art can supply, government has further appointed the former physician of the French king, Peyre, at a pay of twenty shillings per day; Chabannes, former surgeon, at a pay of fifteen shillings per day; the one to give advice in difficult cases of disease; the other to operate in difficult cases of surgery: an inspector, De la Tour, superintends the general economy, with a salary of twenty shillings per day, and such allowances as the nature of his duty renders necessary: one, and sometimes two assistants may be required to attend the militia, the *marechausée*, the poor, and such soldiers on detachments as have not a surgeon present; or to be in readiness to be detached where occasions demand assistance; the pay will be ten shillings per day, but no allowances are granted, either to these, or to the physician or surgeon, as they are not supposed to take the field. The surgeon of the hospital will settle the business of rations with the commissary for the *marechausée*, militia, &c. in the same manner, as the surgeon of a regiment does for his own corps.

7th. A suite of rooms is reserved in the general hospital at Port au Prince for the reception of sick or wounded officers: attendance will be given by the surgeon of the corps when present, by the physician or surgeon of the staff when required. The same arrangement takes place at Croix des Bouquets on a smaller scale. Fresh rations, and wine, bedding and some necessary utensils are furnished; but government is chargeable with no other expense.

The

The above establishment may be thought high and expensive for the medical and surgical care of black troops ; but it will be, or it ought to be economy to place the surgeon of a regiment in rank and emolument above servile dependance on a commanding officer ; while an establishment, more circumscribed in numbers, will not permit a corps to take the field, to send out occasional detachments, and to leave sufficient assistance in quarters for the care of the sick. Besides, it is well known that the sick list of black troops usually runs high. It is seldom under twelve in one hundred : sometimes above it.

FOREIGN.

The foreign troops, being chiefly Europeans, have proportionably, as might be expected, a greater number of sick than the colonials. The sick list, invalids included, often amounts to one-third whether the troops be quartered in towns or cantoned in plains : at certain seasons of the year, or in certain situations, it may even be higher, particularly among men newly arrived. The same system of medical treatment is adopted for those as for the colonials ; the regimental hospitals of the British legion and hussars of Rohan are actually in train ; that of Hompesch is not yet properly established, much owing to defective economy in the corps, and to change of cantonment at the time fixed for the new arrangement.

The above is the outline of the plan, and the material circumstances of detail of the medical arrangement for the colonial and foreign troops in St. Domingo. It is simple in principle, and easy in practice. If it ever become embarrassed, the embarrassment can have no other causes than the inexperience or incapacity of the surgeon ; the want of precision in arrangement made at the commissariate ; the insubordinate and refractory conduct of the commanding officer, who perhaps does not well brook controul in a department which he has been accustomed to manage according

ing to his own views. The plan is obviously calculated to give advantages to the service in a military point of view ; in an economical one, the advantages are prodigious. The following gross estimate may serve to give some idea of the difference.

If we take the amount of the colonial sick and wounded through the whole island at one in ten, we cannot rate it lower than 1000, and if all these were in contract hospitals, the expense would be enormous.

	Livres.	
Price of contract - - -	7	
Expense of furniture and extra } salaries - - -	3	
Total	10	St. Domingo currency,

for each sick colonial soldier.

Present Establishment.

The expense of subsisting (the value of the ration estimated at 3 livres) - - -	3	
Extra cost of furniture, &c.	1	
Total expense of sick soldier	4	per day.
Excess of contract - - -	6	do. currency.

The above statement supposes the business to have been conducted on fair grounds, which there is reason to believe was not always the case. There existed, during the time of contract, no adequate controul to prevent fraud in the issue of provisions ; and there are strong grounds to suspect that government often issued rations for the subsistence of sick, for which it also paid the contractor.

BRITISH.

It is proposed that the above plan be adopted for the medical treatment of the British, as well as of the colonial and foreign troops. It will actually be accomplished with less difficulty, as British surgeons are generally more capable and

and experienced with military business than the surgeons of colonials or foreigners; while the economy of the regiments, though not perfect, is still less defective than that of the others. Military men of reflection are well aware of the advantages of regimental infirmaries over general hospitals for the preservation of discipline, and medical men will generally assent to superior success in the treatment of disease. The causes of the advantages are obvious; and the execution of the plan proposed, with a sufficiency of assistance to be divided in case of detachment or service in the field, practicable and easy. Of 350 sick men at present in Port au Prince, 120 only are upon the establishment of the general hospital. The others are under the care of the surgeons of the regiments. Fresh rations are received from the commissary on their account, with wine in lieu of rum according to the adjudged value. The extra wants are amply supplied by the contribution of a certain portion of the pay during confinement in the hospital: the sum of four-pence, or even three-pence per day, with management and economy is found sufficient for every purpose.

February.

N. B. The above was written in February 1797. The plan was afterwards carried into execution most perfectly in the district of Port au Prince for British, as well as for colonials and foreign, and it answered every expectation. There was more active service during some part of this period than at any other, and no embarrassment occurred. Instead of a stoppage, it was found on trial that the commuted ration, or its value was sufficient to furnish every extra comfort the sick required; and, as the general hospital was broken up, the hospital staff, farther than a regimental inspector, perhaps a staff surgeon for detachment in case of an expedition, and a responsible person in charge of apothecary's stores, was of no use.

FINIS.

