

News, Notes and Queries

Thus he overcame Diseases and at length too the Envy of Doctors
A more obstinate Evil
If you desire to know more Read his Writings
Which to many will give longer life
And to their Author Immortality.
He died . . .

REFERENCES

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5. Sloane MS. 4039 f. 253, British Museum.
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KENNETH DEWHURST

AN EARLY COTTAGE HOSPITAL

The Beginnings of the West Herts Hospital

As I have lived near the West Herts Hospital for all my life and it is well over seventy years since first my father took me there to visit a little boy patient (T.B. hip I think), I shall not hesitate to use my memory and tradition when I cannot get written references.

Sir Astley Paston Cooper, surgeon to King George IV, had been spending an increasing amount of his time at Gadebridge, his country house, which lies to the north of Hemel Hempstead. In A.D. 1825 he took the home farm into his own hands, and devoted still more of his attention to country occupations. Tradition says that he was so plagued by people seeking his professional help that he resolved to found a hospital to bring the situation under his own control.

However that may be the *Herts Mercury* of Saturday, 5 August, 1826 carried this item:

We have great pleasure in stating that the gentry and inhabitants of Hemel Hempstead meet this day at the Town Hall in that place to take into consideration the propriety of establishing an infirmary for the town and neighbourhood.

Sir Astley Cooper Bart., the Rev. J. B. Mountain, Henry Campbell White Esq. and the Rev. B. Cooper are the principal advocates of this benevolent undertaking.

This is followed on 12 August by:

It is with no ordinary feelings of gratification we announce to the public the establishment of the West Hertford Infirmary, an institution well calculated to alleviate the sufferings of such of our fellow creatures who have not the means to procure it otherwise.

It is one of those excellent institutions, in this land of benevolence, that bless the giver at the same time that it diminishes the aggregated misery and disease of those who receive its benefits.

A Committee appears to have been quickly formed with Sir Astley as treasurer and the Rev. J. B. Mountain as secretary, and they acted with vigour. An old row of cottages at Piggotts End was rented about October 1826. Repaired and altered at a cost of £178 10s. 10d., and furnished for a further £149 1s. 8d. These figures should be multiplied by at least 10 to bring them into a modern order of magnitude.

The First Annual Report, August 1827, shows also that the Infirmary was opened for patients on 1 January, 1827 and that eleven inpatients were received up to 31 July, 1827. Two were still in then. The number of beds was not stated but as eight inpatients were recorded as still in the house in July 1829 the traditional numbers varying from six to ten are not far out. In that year thirty-five inpatients and 426 outpatients had been treated.

Sir Astley is said to have ridden over from Gadebridge across his park almost daily to see the patients though from the beginning two local doctors, Mr. Steele and Mr. Smith, were appointed honorary surgeons. There was also a matron, Mrs. Howick, and a nurse, Mrs. Bonwich. In 1827, however, Sir Astley lost his wife and thought of retiring. The consternation of the committee appeared in the 1828 annual report and Mr. C. A. Key, a relative of Sir Astley's, was induced to accept the position of consulting surgeon and to come down one Thursday each month to assist the local surgeons. (Thursday was Market day, the day the house committee met and the day the surgeons attended to see outpatients.) A house surgeon and dispenser was also appointed 1828-9. Sir Astley soon resumed his professional work and remarried, and continued to take a great interest in the Infirmary to which he presented books and specimens to found a library and museum. (I remember rather vaguely a vesical calculus removed by him but that is another story.)

The infirmary served all the district from Bushey to Tring and out to Redbourne, Harpenden and St. Albans, but, as I was told, a severe accident soon showed that it was inadequate both in size and position. So in 1831 Sir John Sebright undertook, at his own expense, to build a new infirmary; this was in Marlowes, to the south of Hemel Hempstead, and is now part of the nurses' home and school.

It was finished just in time to deal with the many accidents that happened when the London and Birmingham Railway was being built from 1835 onwards. Fourteen accidents occurred 1835-6 and in 1836-7, forty-three, six fatal. We got 8s. a head per week for these from Cubitts the contractors.

This building was the West Herts Infirmary till 1877 when the first part of the present building was opened (by Princess Mary, Duchess of Teck, mother of Queen Mary) for some fifty patients with rooms for seven nurses, and Sir John Sebright's building was let to King's College Hospital for a convalescent home.

But this is getting into quite modern times. The last operation case of the second hospital did not die till well on in the thirties, old Peggy Biggarstaffe who after an evening poaching shot off his foot with the gun hidden in his trouser leg and went about with an amputation at the site of election on a 'Long John Silver' leg with great activity.

And so the old cottages returned to use as dwelling-houses of the too ordinary kind and were protected by over forty years of rent restriction from any alteration or improvement. But two or three years ago the last old lady died and the owner, Mr. A. C. Lindley, pulling on a bit of loose wall paper brought away the whole wall covering of old wall papers stuck on a sheet of coarse handwoven linen and exposed a magnificent medieval painting on the wall. This is now cleaned and goes above and below the Elizabethan first floor: in the middle, Christ in Glory: on the right, The Baptism in Jordan: on the left, the Descent from the Cross: a pope on either side of

this group and St. Margaret escaping from the Dragon below. (There was a Priory of St. Margaret at Ivinghoe.)

It is believed that the original building was of the early fifteenth century and was a high barnlike structure of wattle and daub on a very heavy oak frame with a steep pitched roof; that the painting was the background of an altar and that the place was a resthouse for pilgrims to the monastery of Ashridge where certain relics were exhibited. Another short day's walk would take the pilgrims to St. Margaret's priory. It is believed that soon after the dissolution of the monasteries (about 1538) a floor was put in and the gables so prominent in the present building put up to make a two-storied building. This roughly is the present opinion about the building but a more detailed and authoritative report is expected soon.

The West Herts Hospital today is an up-to-date unit of 167 beds, but we still keep the bust of Sir Astley Cooper in the hall and have Astley Cooper, Sebright, Clarendon, Ryder and Dickinson wards, names from our first annual report, to show that we were one of the earliest, if not the first, cottage hospital.

I thank Mr. A. D. Side, administrator of West Herts Hospital, for lending me the early Annual Reports; and the Hertfordshire County Record Office for the *Herts Mercury* files.

REGINALD FISHER

A NOTE ON EDWARD STANLEY, F.R.S. (1791-1862) AND HIS DESCRIPTION OF NEUROPATHIC ARTHRITIS

THIS note is the result of a chance finding. The *Louisville Medical News* of 1882 had an annotation¹ headed 'Charcot's Joint-affection Observed and Described in 1882 by Stanley'; and it freely quoted a recent number of the *British Medical Journal*.² This in its turn had quoted freely an article in *St. Bartholomew's Hospital Reports* by F. S. Eve,³ curator of the Hospital Museum.

Stanley was Abernethy's successor. He taught at Barts for fifty years, first as Demonstrator of Anatomy and later as a senior surgeon, had founded the museum and preserved in it a large number of specimens of bone disease. Eve³ listed a number of Stanley's contributions to *Medico-Chirurgical Transactions*, of which the most important was 'On Dislocations, Especially of the Hip Joint, Accompanied by Elongation of the Capsule and Ligaments'. In this, Eve found that Stanley had accurately described a case of locomotor ataxy with disease of both hips, and had mentioned a second case. Here is Eve's summary:

It is remarkable that no old specimens showing Charcot's disease of the joints associated with locomotor ataxy have been found in the various London Museums. That the absence of these specimens may rather be attributed to accident than considered an evidence of the origin of a new form of disease is, I think, demonstrated by the following cases. In looking through the above-mentioned paper on 'Spontaneous Dislocation,' I find that Stanley has most accurately described at least one case of locomotor ataxy, with disease of both hip-joints. . . .

'A gentleman, aged thirty-nine, in the year 1824, was attacked with spasms in the pectoral and intercostal muscles, and numbness of the whole of the left side of the body with the exception of the arm. In the left leg and thigh sensation was wholly lost, the power of motion remaining. He had no sensation of passing his urine after it had quitted the bladder, and was but just aware of the evacuation of faeces. Vision in the left eye was impaired to the extent that he could but distinguish daylight.'

The symptoms continued, with increasing weakness in the thighs and legs, to the complete loss of the power of support and of sensation in them.