



GRESHAM COLLEGE  
*Founded 1597*

## **Hospital for seafarers Transcript**

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# FOR THOSE IN PERIL ON THE SEA: HOSPITALS FOR SEAFARERS

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An elaborate structure for health-care in the Royal Navy (RN) (the fighting force) grew up in the eighteenth century. The 'flagship' hospital was situated at Haslar (1754), of which arguably the best known physician was James Lind (1716-94) better known for his much publicised work on scurvy. However, the disease and injuries which afflicted the seafarer of the Merchant Navy were not adequately taken care of until the early nineteenth century, and the pioneering institution targeted its activities towards the Merchant Sailor, upon which Great Britain was so dependent, in the Port of London.

## The Seamen's Hospital Society

The Seamen's Hospital Society (SHS) was to become one of the greatest of Victorian charities <sup>1,2</sup>; today it is alas known to a very small minority of individuals. Apart from a small administrative office at 29 King William Walk, Greenwich, facilities are now limited to a few beds, for seafarers and their dependents, at St Thomas's/Guy's Hospital(s), and the Seafarers' Benefits Association.

During the winter of 1817-18 which, according to contemporary accounts, was a particularly severe one, the appalling plight of seafarers, who were milling around the Pool of London in large numbers, led to a public appeal and formation of the *Committee for the Relief of Distressed (Destitute) Seamen*; this charitable foundation was launched by subscription. Several meetings were chaired by William Wilberforce (1759-1833), better known for his involvement in the anti-slavery campaign as a member of the 'Clapham Sect'. Its successor, the SHS, officially came into being on 8 March (to this day observed as Founders' Day) 1821, two of its more enthusiastic supporters being Wilberforce - who immediately became a Vice-President - and Zachary Macaulay (1768-1838) who was a member of the Management Committee. Early meetings were held at The City of London Tavern, situated in Bishopsgate, the first President being Viscount Melville (1771-1851) - First Lord of the Admiralty. The RN proved extremely supportive of the newly formed Society and loaned a 50-gun hulk, *HMS Grampus*, which was anchored off Deptford, to become the first hospital-ship. This vessel rapidly proved too small for the expanding clinical requirements of the SHS, and in 1831 the RN granted use of the hulk of the 104-gun ship *HMS Dreadnought* which had served at the Battle of Trafalgar (21 October 1805). Throughout this period, fund-raising dinners and sermons <sup>3</sup> were essential means of obtaining revenue.

In 1832 an event of momentous significance occurred in the early history of the SHS; John Lydekker (1778-1832), a member of Lloyd's and prominent ship owner (his five vessels plied the south Seas and Greenland, collecting whale oil) suddenly, and unexpectedly, died of cholera which was (during the first major epidemic - 1831-32) rife in London. Regrettably, no image of this important benefactor exists today, but we do know that he was buried at St Dionis Backchurch, a Wren foundation which was razed to the ground in the late nineteenth century. A memorial commemorating his beneficence was later established at Lloyd's, and this has recently been removed to the Museum in Docklands. In his uncontested Will (written immediately before he died, and not witnessed) he left the Society nearly £60,000 which led to a successful approach to Parliament for an Act of Incorporation (1833); this not only gave greater legal status to the organisation but also conferred a number of additional rights on the SHS. In 1857, the *Dreadnought* was replaced with a larger hulk, *HMS Caledonia* (renamed *Dreadnought*) which had formerly held 120 guns.

Following a great deal of 'political' activity, the base for the *clinical* activities of the institution were transferred on 13 April 1870 to dry land; the Admiralty had, after a great deal of uncertainty, eventually granted (at nominal charge) the Infirmary and Somerset Ward (these hospital facilities closed in 1986, and the buildings today constitute the Library of Greenwich University) of the Royal Hospital, Greenwich, designed by Christopher Wren (1632-1723), Nicholas Hawksmoor (1661-1736), and John Webb (1611-1672), and completed in 1696. This immediately became known as the *Dreadnought (Seamen's) Hospital*; this listed building was designed by James "Athenian" Stewart in 1769.

## **Disease(s) on the hospital-ships (1821-1870), and in the late nineteenth century**

The extant records of the SHS allow one to document the major diseases encountered during the approximately 50 year period on board ship. <sup>4</sup>These were dominated by sexually transmitted diseases – syphilis and gonorrhoea. ‘Ague’ (which encompassed numerous diverse febrile illnesses prior to Laveran’s demonstration (in 1880) of the causative agent(s) of *Plasmodium* spp infection), was also a major cause of morbidity and mortality. Other infectious conditions encountered were epidemic typhus, dysentery, and ‘enteric fever’ (the causative agents of these entities were not delineated until the ‘germ-theory’ of disease was enunciated in the latter years of the nineteenth century). Cholera swept across Britain in three major epidemics between 1831 and 1854; the SHS was instrumental in producing posters for captains of ships whilst in the Port of London, drawing attention to the necessity for rapid medical attention to men with acute diarrhoeal disease, whilst George Budd FRS (1802-82) <sup>5</sup> and George Busk FRS (1807-86) <sup>6</sup>, a physician and surgeon, respectively, documented the prevalence and treatment of individual cases of this disease. The SHS also carried out a great deal of work aimed at preventing scurvy in the Mercantile Marine <sup>7</sup>. This disease had, by the early nineteenth century, almost disappeared from the RN as a result of the pioneering work of James Lind (see above) and Gilbert Blane FRS (1749-1834). However, due to adulteration and poor storage of lime (and, more importantly lemon) juice in the merchant navy, together with discipline which was far less exacting than that in the RN, this disease continued to be a menace within the Mercantile Marine until the early twentieth century. By introducing the Merchant Shipping Amendment Act of 1867 (largely at the initiative of the SHS’s Harry Leach MRCP [1836-1875] <sup>8</sup>, who was later to become the first Port Medical Officer of the City of London), which made inspection and testing of lime-juice mandatory, the Society was in fact very largely instrumental in eradicating this disease from the Mercantile Marine. Another disease which assumed enormous practical importance was ‘phthisis’; consumption, or tuberculosis. Smallpox (a highly contagious communicable infection) was never intentionally managed on any of the hospital-ships; immediately it was diagnosed, the infected case was removed to an isolation hospital – either on shore or later a smallpox ship.

The spectrum of disease in seafarers in the *late* nineteenth century (ie, after removal to land) has also been well documented. <sup>9,10</sup>

## **Some early physicians and surgeons**

Several senior medical personnel served on the hospital-ships. Amongst the first physicians and surgeons, were Sir Andrew Halliday (1781-1839)<sup>11</sup> and Sir Richard Dobson FRS (1773-1847). <sup>12</sup> George Roupell FRS (1797-1854) <sup>13</sup>, who subsequently became senior physician at St. Bartholomew’s Hospital, London and died of cholera in the 1853-54 outbreak, made important observations on this disease and also on typhus. George Budd (see above) later laid claim to being a major pioneer of hepatology and gastroenterology, having written two monographs (*On Diseases of the Liver*, 1845, and *On the Organic diseases and Functional disorders of the Stomach*, 1855) both of which were based largely on his SHS experience. George Busk (see above), one of the early surgeons on the *Grampus* and the first *Dreadnought*, was in addition to his surgical skill, an outstanding nineteenth-century polymath; he was, for example, an authority on the Gibraltar skull (an early example of Neanderthal man).

One example of research carried out at the land-based *Dreadnought* hospital, was a successful clinical trial of the newly introduced ‘open-air’ treatment for pulmonary tuberculosis; this took place in the ‘Ranlett’ ward, situated on the roof of the main land-based hospital <sup>14</sup>. The *Dreadnought* hospital also housed a nurses home, a pathology laboratory (now residential accommodation for the University of Greenwich ), and museum (largely based on a collection assembled by Busk).

## **Non-medical staff**

The SHS had, from its origin in 1821, until 2000, always had the reigning monarch as its Patron, beginning with King George IV; since 2000, however, HRH the Duke of York has filled this role.

Although the first President was Viscount Melville (see above) (whose presidency lasted from 1821 until 1851), in recent years none has been more distinguished than Lord Lloyd of Dolobran (1879-1941) – who occupied this position from 1938 until 1941.

The Society has had numerous Chairmen of outstanding calibre - of particular note being Joseph Moore and Captain Sir Arthur

Clarke.

Of Secretaries, none has been better known amongst Hospital Administrators than Sir Henry Burdett (1847-1920) <sup>15</sup>, nor Sir James Michelli (1864-1939) who gave long and dedicated service to the SHS.

### **Extensions to the SHS's 'Empire'**

In addition to the *Dreadnought* hospital, the SHS established (in 1890) a *Branch* Hospital, situated between the Royal Albert and Victoria Docks, later to become the nidus for the London School of Tropical Medicine (LSTM) (see below); the foundation stone had been laid (by Prince George of Wales, later King George V) on 15 July 1889. In addition, dispensaries (for merchant seamen) were opened at East India Dock Road (1880) and at Gravesend (1887). In 1918, the 'Angas' convalescent home was opened (at Cudham, Kent), and in 1921 The King George Sanatorium (at Liphook, Hampshire) was made available for merchant sailors convalescing from tuberculosis. Later, the Tilbury hospital (formerly the Passmore Edwards hospital) situated at the Tilbury dock-gate was opened (having taken the place of a small dispensary). In 1927 a brief 'flirtation' with Marseilles was launched but, owing to various problems (mostly political and financial) this survived for a mere five years.

### **Educational commitments of the SHS**

In 1877, the SHS inaugurated *nurse-training* at the land-based *Dreadnought* hospital on Nightingale lines; this gave rise to a School of Nursing which was in many respects a pioneering institution, antedating most nursing schools in the major London teaching hospitals - with the exception of that at St. Thomas's, which had been founded in 1860. This formed the venue for tropical nursing courses, which remain extant (at the London School of Hygiene and Tropical Medicine) to this day. <sup>16,17</sup> A 'new' nurses' home (opened in 1929 after an appeal by Viscount Devonport [1856-1934]), now provides residential accommodation for the University of Greenwich.

In February 1898, the SHS Committee of Management received a significant letter from the Colonial Office (signed by H. Bertram Cox) requesting the formation of a *School of Tropical Medicine* <sup>1,2,18</sup>; it contained the following text:

Sir, The question of improving the medical service of the British Colonies in West Africa has been receiving Mr Secretary Chamberlain (the Rt. Hon. Joseph Chamberlain [1836-1914], British Secretary of State for the Colonies from 1895 until 1903)'s serious consideration. At present the newly appointed medical officers receive no special training in the diagnosis and treatment of *tropical diseases* [my italics] before they proceed to West Africa and, although an attempt is made to give them whenever possible some preliminary instruction at the Head Quarters' Hospital of the Colony, this course cannot be followed in every case and the arrangement is, on the whole, unsatisfactory.

He continued:

He is advised [presumably by Dr. (later Sir) Patrick Manson (1844-1922), the 'father of tropical medicine'] that the experience and training to be obtained at the Seamen's Hospital [at the Albert Docks] would be the most suitable in the present instance, and he would be greatly obliged to the Managing Committee if they could give him their valuable assistance in the matter.

The SHS readily acceded to this request, and the *London School of Tropical Medicine* (LSTM) was opened for teaching and research at the Albert Dock Hospital (ADH) <sup>19</sup> on 2 October, 1899, but not before a great deal of acrimonious criticism from three of Manson's colleagues (John Cumow [1840-1902] and John Anderson [1840-1910], both physicians, and George Robertson Turner [1855-1941], a surgeon, at the *Dreadnought* Hospital <sup>20</sup>). Their dissatisfaction emanated from (i) a belief that other venues (eg Royal Victoria at Netley, and the Royal Naval Hospital at Haslar (see above)) were eminently more suitable for a tropical school, (ii) that establishment of the LSTM at the ADH would deprive the *Dreadnought* Hospital of most of its 'tropical' cases, and (iii) that the scheme as outlined contained hidden allegations that they were themselves incompetent in their dealing with 'tropical' cases. In retrospect, these colleagues were partly correct in believing that there would never be great numbers of 'tropical' cases at the ADH <sup>21</sup>; this hospital had in fact been founded in London's docklands to deal with morbidity, most importantly injuries, acquired by the local personnel employed in that locality. The ADH (which thus housed the 'cradle' of London's tropical medicine) was rebuilt in 1936/7 following collapse of its foundations, and has recently, like so many of this

country's smaller hospitals, been sold off and razed to the ground!

In 1905, the SHS also launched the *London School of Clinical Medicine* at the *Dreadnought* Hospital (at Greenwich); this initiative was extremely important in *postgraduate education* in the metropolis in the early twentieth century, and attracted numerous influential physicians and surgeons to its staff.<sup>22</sup> This school, which closed during the Great War (1914-18) remains, however, poorly documented.

### Subsequent venues of the 'tropical' discipline

The SHS continued patronising tropical medicine until the National Health Act of 1946<sup>23</sup>, implemented in 1948. In 1920, the School (including the clinical facilities – then named the Hospital for Tropical Disease [HTD]) – moved to Endsleigh Gardens, London WC1; here the two institutions remained in a single building, which remains extant today. This hospital had a steady stream of 'tropical' cases, a high percentage of disease in Southern England and beyond acquired in warm climates being referred there; a rare case of laboratory-induced yellow fever was recorded in 1930<sup>24</sup>. During the Second World War (1939-45), the *clinical* component (the LSHTM had been opened at Keppel Street in 1929 following a grant of \$2 million from the Rockefeller Foundation) moved to the *Dreadnought* Hospital (which was itself, severely damaged), Greenwich, where it occupied, until 1944, a mere ten beds. Following the Second World War, the HTD eventually moved to St Pancras<sup>1</sup>; it is now incorporated in the *new* University College Hospital in Euston Road.

For a brief period in the 1920s and early 30s, the HTD had a temporary 'rival', ie the Ross Institute & Hospital for Tropical Diseases at Putney.<sup>25,26</sup> However, as anticipated by many contemporary observers, London did *not* require two Hospitals to manage 'tropical disease', and the Putney institution, which had been founded to honour Ross's Nobel Prize-winning work, was closed in 1934.

### Epilogue

Hospitals for RN personnel had their origin(s), usually away from London in the eighteenth century. The SHS, whose main objective was to care for the physical and spiritual requirements of the *Mercantile Marine* of many nations, was focused on the Port of London, and was one of the greatest of Victorian charities. It was also a *progressive* organisation in pioneering nurse-training and post-graduate medical education, and was also responsible for launching the formal discipline 'tropical medicine' not only in London but also elsewhere. Following the steep decline in merchant shipping in the 1960's, it has largely lost its overriding *raison d'être*. Sadly, today the SHS, although still devoted to the medical (and surgical) care of mariners and their dependents, has only an administrative centre at St Thomas's Hospital, London, and the Seafarers' advice-line. A brief summary of the SHS since its foundation has recently been published.<sup>27</sup> The definitive history is nearing completion.<sup>28</sup>

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