

The President's page

I wish all members a happy and stimulating new year. 2023 is a conference year for the Society, and our 18th Biennial Conference will be held 12–15 July at the University of Adelaide. I invite all members to submit proposals for papers, panels, and short talks at [the conference website](#) and to enter the conference into your diaries. I also encourage everyone to renew their membership and to spread word about the conference to your networks.

At our last biennial conference, at the University of Newcastle, Professor Chelsea Watego (Institute for Collaborative Race Research) delivered a powerful keynote calling for an [Indigenist health humanities](#), a new research field founded on Indigenous sovereignty and demands our attention. As a historical society, it is right that we place ourselves carefully in the context of our settler colonial history, reconsidering how our histories have, at points, continued rather than challenged colonial frames and logics. Our society exists to promote the understanding of health and medicine in Australia and Aotearoa New Zealand. Western medicine and health fields have recently begun to return to holistic ideas of human health and wellbeing, with many looking to Indigenous Knowledge for guidance. As part of this remit we seek to understand how health and healing have been understood and practiced by Indigenous peoples in these places for many thousands for years. Our 18th conference will therefore begin with an important plenary entitled History, Health and First Nation People, followed by a full and stimulating program.

In line with this desire to recognise the context of our historical work, we have written a draft acknowledgement of country, written below, for the Council to consult on and approve. We welcome feedback from members. Once we have a final version, I encourage you to use it or a local acknowledgement and hope that such acknowledgements, so far from empty

words, might be prompts for us to continue to place health and medicine in this region in colonial context, conscious both of historical collaborations between Western medicine and Western colonisation and the continuing stark disparities in health outcomes between Indigenous groups and settlers.

We acknowledge that we gather and work on unceded lands of Aboriginal and Māori people groups, who have long understood health, or hauora, as a state of physical, social, emotional, cultural, and spiritual wellbeing, incorporating community and Country. We acknowledge that the practice of these ideas have preserved life for thousands of generations. We acknowledge the continuing effects of colonisation, which separates people from Country and erodes the foundations of health and peace. We pay respect to elders and kaumātua past, present and emerging across Australia and Aotearoa New Zealand, and to all Indigenous persons.

Warmly,

James Dunk

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@JamesHDunk



All About Ourselves

David T. Roth

I was a STEM person for many years. I completed two chemistry degrees in the late 1960s, and later worked at CSIRO, as a science teacher and as a financial analyst. I then had a 34-year career as an IT specialist. After enduring some workplace unpleasantness, ageism and unethical management in my final IT years, I decided to retire and return to study.

How did I become a medical historian in my senior years after so many years as a STEM person? History and historical fiction have been consuming hobbies since the age of six, when I bought a copy of *Julius Caesar* with my own pocket money. Since then I've been a steady consumer of history books. While working in Foreign Affairs and Trade in the 1980s, I began part-time studies in Australian and European History at ANU. In those days, tutorials were small and lively, and tuition was free. I fondly remember a kind letter from Don Baker, one of my tutors and a close friend of Manning Clark, who urged me to continue my studies. But I had to give them up as I was posted to London as Computer Centre Director at the High Commission.

Shortly after retirement, I began a Graduate Certificate study in History at ANU. I especially enjoyed Frank Bongiorno's unit on Sexuality in Australia. Part of my work for this course was my essay on the WA Lock Hospitals, which started my interest in medical history. These hospitals were essentially prisons for Indigenous people charged with suffering from syphilis during the second decade of the 20th century. I had originally intended to write a Master's thesis on venereal disease in Australia and I was curious as to why so many mental patients died from tertiary syphilis (General Paralysis of the Insane/GPI) before the 1930s. But my research on the Claremont mental hospital's case notes in the WA State Records Office changed my mind. These 'brief lives', these microhistories, were a window into how the society of the day, and asylum staff, treated some of its most vulnerable members.

My PhD thesis on the Callan Park asylum in Sydney was an opportunity to address these topics on a much larger scale. My STEM experience was a great help and I had first-class guidance from my supervisors Frank and Carolyn Strange. Several chapters have become published articles, for example my paper on chemical restraints. The report of the Royal Commission on Aged Care showed that little had changed in this respect, other than the names of the medications. Other offshoots were a book chapter on microhistories of mental patients and a *History Australia* essay 'In Defence of William Chidley'. Chidley, a pioneer of sexual reform in Australia, was highlighted in Frank's course and his



book on sexuality in Australia. Chidley has been the subject of an extensive historiography. But my essay covered new ground in revealing his medical history at Callan Park (he died

there) and refuting the authorities' attempts to discredit him by claiming that he had syphilis. I have also written a series of articles about Callan Park patients for *People Australia*, including one on Chidley which supplements his *Australian Dictionary of Biography* entry.

I am currently a Visiting Fellow in the School of History. My current projects include research on the effects of the 'Spanish' influenza pandemic on NSW mental health patients, the effectiveness of bacterial vaccines during the pandemic, and tuberculosis mortality at Callan Park.

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New members

Brad Leeson, ACT Stephen Townsend, QLD
Chris James, NSW Joshua Pocius, VIC

A very warm welcome to our new members!

Vale

Dr Diane (Di) Tibbits

NSW Branch news

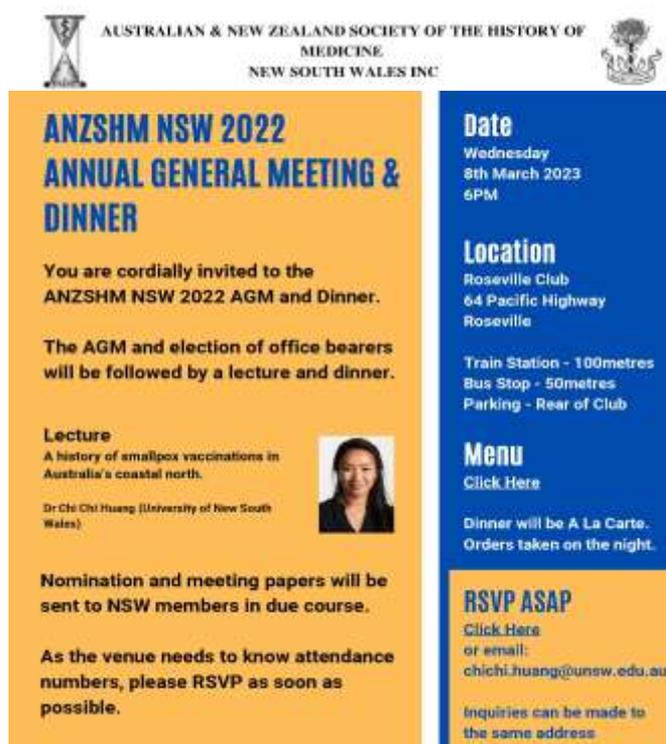
To foster the ANZSHM NSW community, we will be launching an in-person discussion group/book club in 2023. We intend to hold three this year at lunchtimes, and each meeting will be set around a theme. These meetings will be for members to share their current work or any research topics of interest. More information will be finalised soon, but if you have suggestions for a theme, please feel free to share them by emailing chichi.huang@unsw.edu.au.

Chi Chi Huang

Secretary, ANZSHM-New South Wales

The AGM will be held on 8th March. See flyer below.

NSW Branch AGM



The flyer is for the ANZSHM NSW 2022 Annual General Meeting & Dinner. It features the society's logo at the top left and a portrait of Dr. Chi Chi Huang on the right. The text is organized into sections: an invitation, details about the AGM and dinner, a lecture by Dr. Chi Chi Huang, nomination information, and an RSVP section with contact details.

ANZSHM NSW 2022 ANNUAL GENERAL MEETING & DINNER

You are cordially invited to the ANZSHM NSW 2022 AGM and Dinner.

The AGM and election of office bearers will be followed by a lecture and dinner.

Lecture
A history of smallpox vaccinations in Australia's coastal north.

Dr Chi Chi Huang (University of New South Wales)

Nomination and meeting papers will be sent to NSW members in due course.

As the venue needs to know attendance numbers, please RSVP as soon as possible.

Date
Wednesday
8th March 2023
6PM

Location
Roseville Club
64 Pacific Highway
Roseville

Train Station - 100metres
Bus Stop - 50metres
Parking - Rear of Club

Menu
Click Here

Dinner will be A La Carte.
Orders taken on the night.

RSVP ASAP
Click Here
or email:
chichi.huang@unsw.edu.au

Inquiries can be made to the same address

Congratulations

Peter John Dowling

has been awarded the 2023 Order of Australia Medal for service to community history.

Cate Storey

has been awarded an Honorary Fellowship by the University of Sydney for her impacts on the field of medicine, neurology, education and the history of medicine.

Maggi Boulton

has been awarded the 2023 Fellowship of the History Council of South Australia, in association with the State Library of South Australia, for her study *The Apothecary and the Surgeon: Medical Responsibility and Care in Early South Australia*.

Warm congratulations to Peter, Cate and Maggi

Membership update

It's that time of year when members are invited to renew subscriptions to the Society. Our membership follows the calendar year from 1 January to 31 December. We welcome subscription payments by 31 March to tie in with the Society's end-of-financial-year.

Member subscriptions go towards the costs of running an incorporated association and its activities: Biennial Conferences, production and circulation of *Health and History*, *Medical History Newsletter* and website. In conference years, subscriptions support the Ben Haneman Memorial Conference Grants available to higher degree students and early career researchers who are studying medical and health history.

ANZSHM has maintained pre-COVID-19 membership numbers, despite the havoc that the pandemic imposed on the ability to run events and conferences. ANZSHM has just under 330 members, comprising individuals, households, and institutions/organisations. Almost 75% of members pay a subscription online. Members have generously made donations to the Society since this option was introduced in 2022. On behalf of ANZSHM Council, thanks to each and every one for continuing to support the Society. We can't do it without you.

Madonna Grehan

Membership Coordinator



AUSTRALIAN AND
NEW ZEALAND SOCIETY
OF THE HISTORY OF
MEDICINE

The 18th Biennial Conference
of the ANZSHM

Second Opinions

12-15 July 2023

University of Adelaide
Health & Medical Science Building

**Call for Abstracts
now open. Submit via
anzshm2023.com**

Are you interested in the history of health and medicine? Do you have a fascinating health-related history to share? We look forward to you joining us to explore medical histories of all kinds, including re-examining long established historical opinions.

Grants for postgraduate students and early career researchers to attend the conference will be available.

For more
information visit
anzshm2023.com

To register your interest
or for more information
please contact NC Events
ncosta@ncevents.com.au



ANZSHM conference

Second Opinions Call for Papers

The abstract submission form can be found at:

<https://www.anzshm2023.com/abstracts>

We encourage people to submit abstracts on any topic connected with the history of health and medicine, for any period or region.

Abstracts can be for individual papers or for panel discussions with up to three papers. Authors should prepare 20 minute talks. There will be no posters. Speakers are limited to one submission only. A small number of short talks will be accepted. These talks should be no more than 1000 words in length and limited to three slides.

ANZSHM offers conference grants to postgraduate students and early career researchers, details of which are available by contacting NC Events via ncosta@ncevents.com.au.

The deadline for abstract submission is 30 April 2023.

Journal watch and members' publications

Recent articles and chapters

Catherine Storey "So near and yet so far": the early women of the Royal Australasian College of Physicians – the first 20 female MRACP 1938–1947". *Internal Medicine Journal* 2022; 52 (12): 2186-2190.

Daniel Blackie & Alexia Moncrieff, "State of the Field: Disability History", *History* 2022; 107.377, 789-811.

Catherine Storey. "Then there were 12: The illustrated cranial nerves from Vesalius to Soemmerring." *Journal of History of Neurosciences* 2022; 31(2-3): 262-78.

Recent books

Mahar, Caitlin (2023) "The Good Death Through Time", Melbourne: Melbourne University Press, Australia.

Please send details of your recent publications to anzshm@anzshm.org.au

Medical iconography



Disease vectors decorating the entrance at the Keppel St building, London School of Hygiene and Tropical Medicine. *Photos: K Weston*

TROVE under threat

ANZSHM President James Dunk alerted members this week that the funding of the National Library's incredibly important digital archive, Trove, is again under threat. With less than six months' funding remaining, the Library may be forced to close Trove or seriously curtail its offerings.

Action is needed now. There are two ways you can act and you can do both. You can sign a petition, which can be accessed through the Australian Parliament website at <https://www.aph.gov.au/e-petitions> - scroll down to petitions EN4747 or EN4745. These petitions are only open for 28 days and close on February 22. The petition



at change.org was being presented to Parliament on February 8 but there is still time to sign an e-petition at the link above.

You can send a letter to the Minister for the Arts (Tony Burke) at <https://www.tonyburke.com.au/contact> and to the Prime Minister at <https://www.pm.gov.au/contact-your-pm>. The email from Jamie includes suggested text that could be included.

Letter to the Editor

A response to the article written by Louella McCarthy in our last newsletter relating to pay for women doctors:

Dear Editor

I noted your article in the recent newsletter. It is definitely a case of 'this happened in my lifetime'. I graduated from Sydney University in 1972, and became a Junior Resident Medical Officer (JRMO) at Royal North Shore Hospital (RNSH). This was the first year that male and female JRMOs were actually paid the same amount! I have quite a lot of the old pay scales in the archives at RNSH if this is of any interest.

There was a great confusion over the distribution of females to RNSH in that year. 1972 was the first year that all the names of graduates appeared as Smith, J. Prior to this, it was possible to identify women because they had both surname and given name, e.g. Smith, Joan.

RNSH had always limited their female intake on the excuse that they didn't have the accommodation. But, in 1972, all that changed and RNSH ended up with lots of women! (The lists were in academic order). This sent the admin into total confusion. And this happened as recently as 1972.

Dr Cate Storey

Chair, Library, Collections and Cultural Heritage
Committee
Royal Australasian College of Physicians

ISHM News

After a rather protracted internal debate, the ISHM journal *Vesalius*, will now be published online, with two issues a year. The new editor can be contacted by email, [<francesco.galassi@biol.lodz.pl>](mailto:francesco.galassi@biol.lodz.pl), for queries or submissions. Paid-up members will be supplied a password to access the journal by the publisher. Non members can obtain a copy of the Journal for a fee by contacting the publisher,

<https://pontecorbolipress.com/journals/>.

The Society is also settling into a post-Covid agenda for its meetings. The next Society and Council meeting will be held in Panama on 25-29 July 2023 in conjunction with the V11 Congress of the Pan-American Society of the History of Medicine. For more details, go to <https://facmedicina.up.ac.pa/congreso>.

The next Congress will be held in 2024, probably in Western Europe.

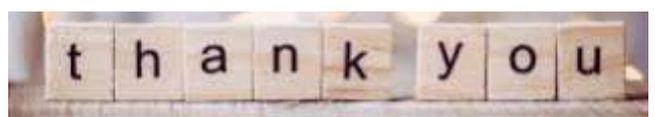
Brian Reid

International Society for the

History of Medicine

Editor's note: An ISHM Council meeting will be held later this year. Brian has let the Society know that he plans to retire as delegate for A&NZ and also assistant treasurer on the ISHM executive at that meeting. If there are any ANZSHM members interested in taking on the ANZSHM delegate role on the ISHM, please contact the ANZSHM secretary at anzshm@anzshm.org.au.

and very sincere thanks to Brian Reid for representing us all on the ISHM over the years. We are very grateful and wish you all the best in the coming years.



Awards and Prizes

ANZSHM biennial book prize

The ANZSHM Biennial Book Prize is awarded to the best book produced on the history of health and medicine in Australia, New Zealand and the wider Oceania region published within a specified two-year period. The value of the prize is \$500.

The next prize will be awarded in July 2023. Books published from 1 January 2021 to 31 December 2022 are eligible for entry.

Only sole authored or multi-authored monographs will be considered for the prize. Edited books and exhibition catalogues are ineligible for entry.

Nominations for the prize may come from publishers or the author/s themselves. Authors or publishers are required to send three hardcopies of the nominated book to the judges for review. The winner will be selected on

the basis of the academic merit of the publication, its accessibility to a wider audience, and its contribution to the field of the history of health and medicine.

Nominations with details of the book and its publisher should be sent to the ANZSHM Secretary at anzshm@anzshm.org.au by 1 March 2023. Books must then be made available to the judges by 1 April 2023.

All nominated books will be displayed at the Society's biennial conference dinner where the finalists and prize winner will be announced.



Women in the RACP

A shortage of 'foundation mothers' for the Royal Australasian College of Physicians

A few years back, I was asked to provide a historical review of the women of the Royal Australasian College of Physicians (RACP) as an introduction to a seminar on gender equity.

The College began in December 1938. There were 232 Foundation Fellows, but no mention of any women in the official history of the College. The only contemporary report of women at the inauguration appears in the 'Home Magazine' of the *Daily Telegraph*.

There were five female Foundation Fellows.¹ To become an original Fellow, physicians needed to demonstrate that they practised solely in internal medicine or a related specialty and held an honorary position at a public hospital. The latter requirement was an almost insurmountable obstacle for women in 1938 other than in the newly created pathology departments of public hospitals or in the traditional fields of child and maternal health.

After 1938, admission to the RACP was by examination to become a Member. In the first decade, from 1938 to 1947, 250 physicians were successful, but only 20 were women.² These women had excellent academic records

at school and university; they had fewer difficulties obtaining the coveted hospital resident positions than their predecessors, but once again, the main barrier to advancement was the failure to gain more senior hospital posts. But these were determined women, and one solution was establishing their own public hospitals – "hospitals for women by women". The Queen Victoria Hospital opened in Melbourne in 1896, and the Rachel Forster in Sydney in 1922. These institutions offered women an opportunity to practice as specialists, teach, and mentor another generation of women doctors.

World War II offered opportunities for these women to serve in the Australian Defence Force or to 'back-fill' positions vacated by their male colleagues. After hostilities, women of the RACP were 'so near and yet so far' in achieving their goals of gender parity.

There have been 43 Presidents of the RACP since 1938. The current President is the fourth woman to hold this post.

Catherine Storey FRACP

Chair, Library, Collections and Cultural Heritage Committee
Royal Australasian College of Physicians

¹C.E. Storey. 'Discovering the women "Foundation Fellows" of the Royal Australasian College of Physicians'. *Intern Med J* 2020; **50**:1009-13.

²C.E. Storey. ' "So near and yet so far": the early women of the Royal Australasian College of Physicians – the first 20 female MRACP 1938-1947'. *Intern Med J* 2022;**52**:2186-2190.

The fate of Adelaide's Women's & Children's Hospital

Editor's note: In Adelaide, the planned move of the Women's & Children's Hospital to the site of the heritage listed Police Barracks has created much debate. ANZSHM member Dr John Crowhurst was previously involved with planning the move of the former women's hospital in Adelaide – the Queen Victoria Hospital – to the Adelaide Children's Hospital in 1995, as well as the move of Queen Charlotte's Hospital in London to adjoin the Hammersmith in 2000, and the move of the Mercy Hospital in Melbourne to adjoin the Austin hospital in 2005.

The fate of former hospitals and health institutions no longer in use is a topic worth airing. John has shared a letter relevant to the discussion which was published in the Adelaide East Herald on 14th October 2022.

The Editor,
Adelaide East Herald.

Dear Sir/Madam.

Re: WCH RELOCATION IN ADELAIDE

Further to Professor Warren Jones's letter suggesting the new government should 'go back to the drawing board' to plan the relocation of the Women's and Children's Hospital, there are several other significant considerations the government seems to be ignoring. Along with Professor Jones, I and other senior clinicians have pointed out these issues to both the present and previous governments over several years.

In the years before the Queen Victoria Hospital was relocated to the Adelaide Children's Hospital in 1995, a majority of clinicians tried unsuccessfully to convince the Bannon government to relocate the QVH to the Royal Adelaide Hospital. One factor which the paediatricians stressed was that two Caesarean sections were performed at the ACH as the newborns needed immediate life-saving surgery as soon as they were delivered. Both babies needed immediate tracheal intubation and ventilation because their congenital defects prevented them from breathing as soon as they were born. Since the early 1990s diagnostic ultrasound scans and other tests in early pregnancy have continued to develop and improve the detection major congenital abnormalities. When these are detected at about 12 weeks gestation, the majority of mothers elect to have a termination.

Nowadays, in the rare event that such a pregnancy is not terminated, newborns who need immediate life-saving

airway management or other surgery are treated with laparoscopic intrauterine surgery during pregnancy, or with an 'EXIT' (Ex-uterine Intubation) procedure. The latter involves delivery of the fetal head through a uterine incision and securing the airway while the baby is still connected to the placenta. The paediatric team does this, then the Caesarean delivery is completed and the newborn anaesthetised and taken for scans and surgery if required. As far as I know only one EXIT procedure has been done in Australia and that was in Melbourne earlier this year.

One other factor concerning the plan to relocate the WCH is that many of us have heard that when the WCH had been relocated to the RAH, the North Adelaide site would be sold, just as the QVH was sold, so reducing the overall cost of building the new WCH. As far as I am aware, this has never been discussed in the public media. These are economic considerations, and not relevant to the clinical needs of both hospitals now and in the future.

Surely a better plan is to move just the Women's Hospital to adjoin the RAH which would enable the Children's hospital to expand their services into the vacated women's buildings at the WCH. Those facilities already have operating theatres, high-dependency wards with piped oxygen, suction, and other requirements which are easily and economically adapted to the needs of the paediatric services.

Finally, most clinicians involved in obstetric care have pointed out that today the mean age of women having their first baby is over 30 years. Many such women have diabetes, obesity, hypertension, gynaecological issues and may require IVF, which can result in twins or triplets. This large population of pregnant women needs many of the medical services at an adult general hospital such as the RAH. In Melbourne the Royal Women's Hospital recently relocated to adjoin the Royal Melbourne Hospital, NOT the Children's, and in 2005 the Mercy Hospital for Women relocated to the Austin Hospital, and in London in 2000 Queen Charlotte's hospital relocated to adjoin the Hammersmith. In Brisbane, the Royal Brisbane Women's and general Hospital has been functioning efficiently for many years.

(Dr.) John A. Crowhurst

B.Pharm., MB BS, Dip.(Obst.)RCOG, FANZCA, FRCA.

Consultant Anaesthetist (Ret.)

E: jacrow43@gmail.com

PS: I was Director of Anaesthesia at the QVH and WCH (1983-1997); Director of Anaesthesia at Queen Charlotte's & Chelsea Women's Hospital in London (1997–2004) and Senior Consultant Anaesthetist at the mercy Hospital for Women in Melbourne (2004-2010).

Artefactual news

Charles Darwin University Nursing Museum

The Charles Darwin University [CDU] Nursing Museum in the Northern Territory started by accident as pre-service nursing education transferred from hospital to university in 1987. Two empty display cabinets bought with nursing fit-out money for use at the local agricultural show [maybe they went once or twice] stood empty and forlorn. The new nursing school received stuff from various health services to assist with clinical teaching set-up – often, more an opportunity to dispose of stuff from the pre-plastic and pre-disposable era. With purchase of several antique bedpans and some photographs from NT Health's Aerial Medical Service, two nursing academics¹ populated the cabinets and nursing memorabilia started to flow in.

Professional museum practices and understandings for these unsolicited and motley collections began with our first generation of 'Museum Ladies'² [volunteers]. We participated in *Cinderella Collections* research³ from 1992, and joined the relevant professional body⁴. Sue Harlow of the regional museums program⁵ of the local Museum soon found us. She persuaded us to wear gloves and, with more difficulty, helped with a grand 'throw-out' day⁶ – de-accessioning! She found answers to our questions, often persuading local and visiting experts to advise and visit us. She organised occasional local workshops and persuaded us to join Museums Australia [MA]⁷.

The Nursing Museum's mission was defined as preserving nursing artefacts and memorabilia and collecting and keeping nursing stories of northern and central Australia. Sue enjoyed our nursing stories, reminding us constantly to clarify why an object was to be kept. With this professional support and attendance at MA's rural and remote days and national conferences, our museology knowledge developed. We learnt how to conserve and store artefacts, to connect object with people and story. Publications emerged out of our collections.

"Pop-Up" displays can be seen in several buildings on campus, with an occasional exhibition on request in the community. Two significant sites of nursing memory are marked with plaques "Dedicated to nurses, both military and civilian" which were erected on the initiative of the Nursing Museum in 2001 at the Darwin Cenotaph and 2007 at the 119th AGH rail transit station at Adelaide River. Staff and friends of the Nursing Museum participate each year in the National Bombing of Darwin Day service at the

cenotaph 19th February and the Anzac Day Dawn Service at Adelaide River War Cemetery where two nurses are buried⁸. We also celebrate International Nurses' Day annually on 12th May with friends and supporters.

The Nursing Museum, its collections and practices, was assessed in 2016 as "significant within the national nursing heritage and valuable for future student learning and research"⁹.

And a cultural heritage specialist in 2017 found "a great little museum and its many hidden stories waiting to be told ... [and] ... a passionate and knowledgeable staff who are part of the story being preserved"¹⁰.

Like many university collections however, this museum is vulnerable. It lacks established governance and is reliant on volunteer labour, grants, donations and occasional internal funding, unlike the university's funded and staffed art gallery. The changing cultural environment of universities with decades of government defunding compound the situation. There have been abandoned and de-accessioned collections with loss of associated data and information¹¹.

We are currently working to secure our data for the next generation. We continue to conserve and catalogue artefacts and archives and are working on our next book, for launch on 2023 International Nurses' Day. Our catalogue can be found on 'The Collecting Bug – Nursing Museum' or *Trove* [National Library of Australia].

**[Janie] Elizabeth Anne Mason AM DLitt
University Fellow & Nursing Museum Curator**

Contact: 08 8946 6385 or janie.mason@cdu.edu.au

Nurse's badge,
NT Aerial
Medical
Service from
1930s to 2010



Antique
porcelain
slipper pan



¹Cecilia Batterham and myself

²Jenny Hanley, joined later by Susan Green and Jacqueline O'Brien

³*Cinderella Collections* [University Museums and Collections in Australia] 1996 and 1998 [CAUMAC news February 2020 – online 31/12/2022]

⁴Council of Australian University Museums and Collections [CAUMAC], now a special interest group of Australian Museums and Galleries Association [AMaGA]

⁵This Museum and Art Gallery of the Northern Territory [MAGNT] program ceased more than twenty years ago leaving small community collections unsupported [JMason]

⁶De-accession and disposal of numerous rigid metal scopes in beautiful wooden boxes from before today's flexible endoscopes, boxes and boxes of glass syringes and needles, and other stuff

⁷Now known as Australian Museums and Galleries Association [AMaGA]

⁸Mason 2019 *Connecting Darwin and the Eastern Front – Anzac Nursing Stories*, & 2022 *Pride and Revelation – Stories from Charles Darwin University Nursing Museum*, Historical Society NT pp.176-190

⁹"Significance Assessment" for National Library of Australia 2016 [Carolyn McLennan] & to CDU Cultural Collections Advisory Board 2017 [Janie Mason & Carolyn McLennan]

¹⁰Malene Bjornskov, working grant-funded on our catalogue – see her story: "A part of this great little museum and its many stories" in Mason 2022 *Pride and Revelation – Stories from Charles Darwin University Nursing Museum*, Historical Society NT – pp. 115-117

¹¹Andrew Simpson, well-known for advocacy for university collections: 2021 "Australian University Museums and Collections interfacing with COVID-19", *MaG*, Australian Museums & Galleries Association Vol 29[1], pp 28-35



Nursing Museum
&
Historical
Photographs
Collection



*Her Honour, the Honourable Vicki O'Halloran,
Administrator of the Northern Territory*

About 100 years ago...

Surgical admissions to Guy's Hospital, London, during World War I as detailed in a recently discovered house surgeons' weekly register:

Guy's Hospital was founded in 1721 by Thomas Guy, a London publisher who made a fortune in the 'South Sea Bubble'. A recently discovered notebook (Fig. 1) in which the surgical house officers at Guy's hospital recorded the weekly admissions into the surgical wards of the hospital provides a glimpse of the range of surgical and infectious disorders that Londoners suffered during World War I (WWI). The register includes the numbers of cases admitted, their pre-admission diagnoses and how many died, and includes details of an unusually large number of cases of anthrax.



Fig 1. Guy's hospital surgical house officers' weekly register from World War I.

Surgical patients were admitted under five consultant surgeons, two of whom, Sir Arbuthnot Lane and Sir Alfred Fripp, were well-known and respected for their innovations and discoveries. Alfred Downing Fripp, who was born in 1865 and died in 1930, worked in South Africa during the Boer War as Chief Medical Officer to the Imperial Yeomanry Hospital, Deelfontein. Sir Alfred was a distinguished drinker, and devoted to promoting a Guy's drinking club called 'The Ancient Order of Froth Blowers', which was set up in 1924 by a grateful patient who raised money for charity work.

Sir William Arbuthnot Lane is also very well-known, but much more controversial. He was born in Scotland in 1856 and died in 1943. His father, Benjamin Lane, was an Irishman who was posted as a surgeon to Inverness, Scotland, where William was born. Sir William worked at Guy's for most of his hospital career and is known for three surgical procedures: the treatment of cleft palate; the application of internal splints to fractures using the strict aseptic Lane technique; and the treatment of chronic intestinal stasis.

Later, this controversial surgeon asked to have his name removed from the Medical Register in order to promote 'The New Health Society', a first attempt at organised social medicine. Because Sir William was an early Darwinist, he was not popular with the Church of England. He was also unpopular amongst fellow surgeons who regarded his attempts at repairing fractures by steel plate and screws to be unethical.

The first entry in the house surgeons' diary is dated January 10th 1915 and the last dated August 29th 1919.

The most common civilian cases admitted during this period were: acute abdomen, pneumonia, generalized peritonitis and anthrax, and the most common causes of civilian death were: severe burns and intestinal obstruction (which accounted for over 50% of cases), spinal cord and head injuries, accidents, peritonitis, crush injuries and ruptured abdominal organs.

There were many civilian cases of war-related injuries including shrapnel wounds, abdominal organ damage, bleeding and shell-shock. In the course of three major air raids on London, on September 1917, October 1917 and May 1918 in which 32, 17 and 15 patients, respectively, were wounded or killed, were cases of crush injuries, gunshot wounds and gangrene.

There were 19 cases of anthrax, of whom three died. Most of the cases (n=14) were diagnosed in winter and spring, suggesting seasonal factors. Relevant to the current Covid 19 pandemic, is an entry on 20th June 1918 about three patients "who may have had the abdominal manifestations of the *prevailing epidemic*", subsequently known as the "Spanish flu".

The relatively high prevalence of anthrax is of interest. Anthrax infections were common during war time particularly in poor areas of big cities, for example East London, where Guy's hospital is situated. Infectious outbreaks of cutaneous anthrax among soldiers during the "Great War" were thought to have been a result of using cheap and dirty shaving brushes. One report described 250 cases of anthrax infections on the faces and necks of American and British soldiers, and a handful of civilians, in the period 1915-24. Among these cohorts, brushes contaminated with anthrax spores were again found to be the cause, leading to the publication of new guidelines on brush cleaning.

The German army was the first to use weapons of mass destruction, both biological and chemical, during WWI although attacks with biological weapons were on a small scale and were not particularly successful. The first mass use of anthrax spores as a weapon is said to have taken place during the Japanese occupation of China from 1932 to 1945. Around 10,000 deliberately infected prisoners are thought to have died as a result. There is no evidence to support the notion that the German forces introduced anthrax spores into London during WWI, nor any reason to invoke a conspiracy theory for the high prevalence noted at Guy's hospital. However, the total number of cases of cutaneous anthrax in the civilian population of the major London hospitals during WWI might have been as high as 25 cases per month, raising the possibility that some type of "germ warfare" was indeed being perpetrated.

Jack R Wall MD, PhD, FRACP
Hooshang Lahooti BSc, PhD

Department of Medicine, The University of Sydney
Sydney, NSW, Australia

Rural Museums

In 2016, I visited the well-kept museum in the NSW town of Wentworth at the junction of the Darling and Murray Rivers. There was a small medical section that contained a local GP's Gladstone bag, c.1880. It contained a drill-shaped apparatus labelled "unknown". My usual sources of last resort were mystified.



Image shows an identical instrument to the one in the Wentworth Museum.

However, a retired midwife volunteer at the Western Australian Medical Museum identified my photo as a Victorian era vibrator.

Despite that era's reputation for moralistic respectability, the female orgasm was a topic of medical curiosity and seen as important for maintaining a woman's equanimity.

Three years ago this topic was presented as a comedy at the Heath Ledger Theatre in Perth. The introduction on their program (included below) sums up the use of this 19th century medical apparatus.

Max Kamien

Program introduction:

American Playwright, Sarah Ruhl *In the Next Room* or *The Vibrator Play*. Inspired by Rachel P Maines' book, "The Technology of Orgasm, Hysteria, the Vibrator and Woman's Satisfaction".

The lead role is taken by Dr Givings, who has invented an electrical device designed to relieve women of their hysterical symptoms. This was an advance on manual manipulation of the clitoris which was causing doctors to develop a repetitive strain injury of the wrist. The underlying theory was that the manipulation of the clitoris would induce an orgasmic paroxysm that would cure the hysteria. It was an entirely respectable medical procedure. It was an early evolution of the vibrator.

Farce, but as the theatre reviewers point out 'important things to say about the nature of sexuality and human relationships'.

Nevertheless, I can't imagine any woman, however 'hysterical', reaching orgasm with one of these devices clunking and buzzing away down her lower end!

Call for papers

Call for Papers
HOMSEA 2023
9th International Conference on the
History of Medicine in Southeast Asia
and
IASTAM Regional Conference
International Association for the Study of Traditional Asian
Medicine
to be held in
Singapore, 9-11 June 2023



Conference Host: Nanyang Technological University
With support from: Nanyang Technological University

All proposals on the subject of the history of medicine and health in Southeast Asia will be considered, but papers dealing with the influence of Chinese Traditional Medicine in Southeast Asia, local medical traditions, and the interaction between medical traditions and western medicine are encouraged. Please submit a one-page abstract for a 20-minute talk, and a one-page CV by 15 March 2023 to: Hans Pols (hans.pols@sydney.edu.au). Proposals will be reviewed by May 2023. Further information regarding the venue, registration, registration fees and accommodation options will be made available then.

Program Committee: Warwick Anderson, Michitake Aso, Michael Stanley-Baker, Harold Cook, Laurence Monnais, Hans Pols, Michele Thompson
Local Organizing Committee: Michael Stanley-Baker and team

Please note that it may be possible to subsidize some of the costs of participation for scholars from less wealthy countries, and for graduate and postgraduate students. If you would like to ask for financial support, please send a separate email justifying your request by 15 March to Hans Pols.

Mystery object



Can you identify this mystery object?

To find out more, go to page 12

Animalia

The unusual case of Mrs Way's pug

On Sunday 8 May 1898, Edward Way, James Hamilton and Professor Archibald Watson decided to perform an oophorectomy on Mrs Way's pug. The operation is recorded in Watson's 1898 surgical diary.

Who were the three protagonists in this case?

Brilliant, eccentric and audacious, Archibald Watson is a complex character who made a significant contribution to the study of anatomy and physiology. He obtained his medical degrees from Göttingen (1878) and Paris (1880). In 1885, Watson was appointed Professor of Anatomy at the University of Adelaide. The Adelaide medical fraternity at the time was a close-knit community and Watson's associates were all linked to the Adelaide Hospital and the Adelaide University medical school.

Edward Willis Way was educated in Adelaide and did his medical training at Guy's Hospital, London, and Edinburgh University. Way became Lister's dresser and held several other posts such as House Surgeon at the Royal Edinburgh Infirmary and Demonstrator in Anatomy at the University. By the 1880s, he had become interested in obstetrics and when the Adelaide Medical School was formed, he was appointed lecturer in obstetrics and the diseases of women. He held this post from 1887 until his early death in 1901.

James Alexander Greer Hamilton was known as JAG to distinguish himself from his medical colleagues and another unrelated Hamilton who worked at the Adelaide Hospital. He was educated at Trinity College, Dublin and Edinburgh University and moved to Adelaide in 1879. When Way died, Hamilton was appointed his successor, taking over as the Alfred Lendon lecturer in gynaecology and obstetrics; and becoming the Adelaide Hospital's honorary gynaecologist.

Watson was a prolific diary writer and his first diary dates from 1882 when he was doing post-graduate work in London. The 1898 diary is narrow in scope and tends to focus on the diseases of women, specifically cancers and gynaecological problems. The entry below is interesting because not only does it reveal the off-duty pursuits of three medical men, but it also demonstrates their fascination with anatomy.

Extract from Watson's 1898 surgical diary

Way – Sun. May 8th. 1898

Oophorectomy on Mrs Way's pug aet 12m

In heat about three days about – an umbilical omentocele existed – in the silly idea of operating this at same seance – the cut between recti commenced too far up – could not find ovaries – could feel hardness (ovaries) but there was always gut or some thick membrane between pulp of finger and ovary – Hamilton enlarged cut downwards – guts came out – Trendelenburg – Way & Hamilton now had a feel – Way brought bladder (full) out of lower end of region

The uterine bifurcation then easily recognised and the right cornua traced up to hardness which turned out to be ovary, hidden away in ovarian sac – which opened over the area of a large pins held and displayed maroon colored [sic] mucosa of fimbriated end of tube – the capsule was rent with stripper and ovary twisted off with vapor forceps

Hamilton thought it safe to pass a tendon round the tube and adjacent peritoneum as there was a little oozing – on left side a double tendon (chromicised) passed through under ovary and one sea-sawed [sic] towards pelvic wall by Hamilton was tied the other sea-sawed [sic] to inner end of ovary embraced the left uterine cornu which was exsected [sic] with the ovary – this left an oozing U so the ends of ligatures at each side of U were tied as I do in a varicocele – there was a ball of peritonea & fat in each flank well below kidney (movable) which to the eye looked like ovaries – abdominal wall sewn as Way does it in man.

Elizabeth Milford

Archivist, Royal Australasian College of Surgeons

Ref: Watson, A. *Surgical Diary. The Royal Australasian College of Surgeons Archive.* 8 May 1898, page 90

Images: (below) section of Dr Watson's 1898 surgical diary; (right) Professor Watson in Natal, c. 1901.



The Editors are very grateful for the numerous items kindly submitted by members in this issue. Letters, photographs and articles for publication in the newsletter are always welcome. We prefer electronic submission via email to ANZSHM@ANZSHM.ORG.AU. The deadline for our next issue is 1st May 2023.

Book launch

Mahar, Caitlin (2023) *The Good Death Through Time*, Melbourne: Melbourne University Press.

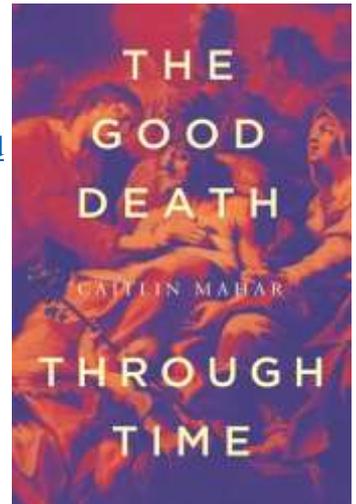
ANZHSM colleagues are warmly invited to the launch of Caitlin's book on 2nd March at 6.30 pm at Readings Carlton in Melbourne.

An Australian Senate committee investigation of the Northern Territory's *Rights of the Terminally Ill Act 1995*, the first legislation in the world that allowed doctors to actively assist patients to die, found that for the vast majority of Indigenous Territorians, the idea that a physician - or anyone else - should help end a dying, suffering person's life was so foreign that in some instances it proved almost impossible to translate. *The*

Good Death Through Time asks how such a death became a 'thinkable'-even desirable-way to die for so many others in Western cultures.

Launch details can be found at: <https://www.readings.com.au/events/book-launch-the-good-death-through-time>

Pre-orders available at: <https://www.mup.com.au/books/the-good-death-through-time-paperback-softback>



Call for submissions

BSHM
British Society for the
History of Medicine

**“History of Military Medicine”
CALL FOR SUBMISSIONS**



RAMC in World War I (Wellcome Collection) 'In Safe Hands' ©Stuart Brown (artist)

Topics in the History of Medicine

A peer reviewed, fully open access, online only
journal published annually by the BSHM
<https://bshm.org.uk/thom/>

Volume 3 (2023)

Guest Editor: Colonel (Rtd) David Vassallo FRCSEd MA L/RAMC

Authors should follow the Guidance for Authors and directions for Manuscript Preparation on the journal website and are invited to contact the Editorial Team at editorial@bshm.org.uk before manuscript submission.

Deadline for submissions: 31 March 2023

Call for papers

**PGR Medical Humanities Conference,
"Medical Humanities and (In)Justice:
Crossing Disciplines and Contexts"**

will be held at the University of Exeter on
June 29th (hybrid) and June 30th (online), 2023

We accept abstracts or creative work (visual art, website, audio piece or any other creative work) that relates to the main topic of our conference.

Deadline for submissions:

Monday, 3rd April 2023

Please send your submissions or queries to:
Maria Teresa Marangoni mm967@exeter.ac.uk or Ana
Lucia Estrada Jaramillo ae399@exeter.ac.uk

For more information about the conference, contact:
Lucia Guerrero lg562@exeter.ac.uk or
Any Ovcharenko ao465@exeter.ac.uk

Mystery object revealed

(Not a gravy spoon!). This is a bile spoon - c1920 - used in abdominal surgery by RPAH surgeons. Used to scoop out bile from the abdominal cavity from a burst gall bladder.

Submitted by Cate Storey



Book note

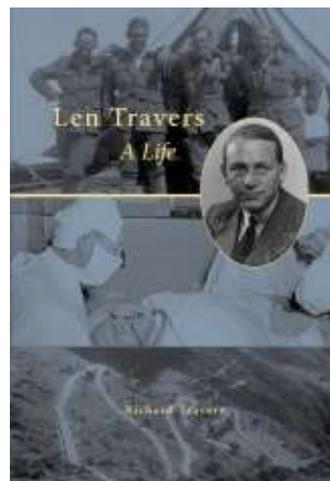
Len Travers – a Life. Octavo, pp. viii, 144. St Kilda: Nicholas Alexander Publishing, 2022. ISBN 9780648278771

This book is written by **Richard Travers**, a long-term member of the ANZSHM. Enquiries may be directed to the author on richard@travers.net.au.

Lennard Gilmore Travers (1905-1968) MBE, MBBS (Melb.), FRCS (Edin.), FFARACS, FFARCS was a much-respected anaesthetist in Melbourne: a named award is administered by the Australian and New Zealand College of Anaesthesia in his honour. The narrative draws on about three hundred candid letters he wrote to his wife Joan (née Bostock) from the Middle

East and from Morotai, and on the many letters she wrote to her family from travels before her marriage, particularly to Granada and Germany.

The book starts with some family background – Len's grandfather had come from London to Central Queensland in the mid-nineteenth century – and finishes with vignettes of two people important to the story, Mary Bostock and Lorna Greene. The book has over 80 illustrations, many in colour.



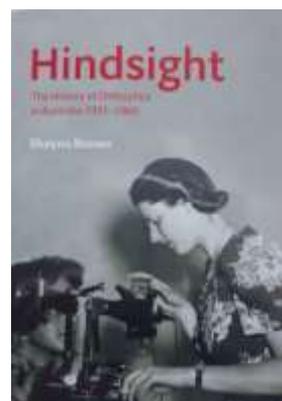
Book note

Hindsight: The History of Orthoptics in Australia, 1931-1960. Published by Orthoptics Australia, PO Box 7345, Beaumaris VIC 3193. The cost including postage is \$40.

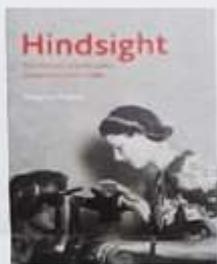
Enquiries: orthoptics.org.au. ISBN 978-0-646-85320-8.

This publication came out of the Masters thesis - of the same name - written by **Shayne Brown**, awarded by The University of Sydney in 2020.

While the history of a small allied health profession may be somewhat niche, those with an interest in feminine professions may be interested as the book provides an addition to the feminist literature. During the period covered by *Hindsight*, all the orthoptists were women.



Hindsight: the history of orthoptics in Australia, 1931-1960



Hindsight explores the development of orthoptic education, orthoptic clinical practice and its professional association in the early period of the profession from 1931-1960. It also provides biographies of the 121 orthoptists who worked in Australia during that period. Through these portraits and reminiscences the author traces how and why changes and developments in orthoptic practice, orthoptic education and in the professional association eventuated, and how the profession being all-female influenced these developments. With meticulous research the author shows how, by 1960, orthoptists ran orthoptic education, and the practice and science of orthoptics had advanced, largely due to the research conducted by orthoptists themselves. The professional association, the Orthoptic Association of Australia (now Orthoptics Australia), established and run by orthoptists, had been operating for 16 years. *Hindsight* is the first Australian orthoptic history and provides an authoritative account to orthoptists and interested readers of allied health history how the all-female workforce had established Australian orthoptic practice and education as world-class.

www.orthoptics.org.au

Medical History Newsletter is the news bulletin of the Australian and New Zealand Society of the History of Medicine Incorporated. It is published quarterly, in the months of February, May, August and November. The opinions of the authors of articles in this *Newsletter* are their own, and are not necessarily the views of the editor or the publisher, Australian and New Zealand Society of the History of Medicine Inc. Every care is taken in the preparation of the *Newsletter*, but the publisher can accept no responsibility for any errors or omissions. Currently edited and compiled in Australia; printed and posted in Melbourne.

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For the latest information, visit the ANZSHM website: www.anzshm.org.au

LETTERS, PHOTOGRAPHS AND ARTICLES ARE WELCOME, PREFERABLY IN ELECTRONIC FORMAT.

DEADLINE FOR THE NEXT ISSUE IS 1 MAY 2023