



Medical History

Newsletter

AUSTRALIAN AND NEW ZEALAND SOCIETY OF THE HISTORY OF MEDICINE INC

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THE PRESIDENT'S PAGE

One of our aims as a Society is to become more visible in our advocacy of our members' interests, research and public contributions. In this report, my last for the year, I want to highlight the work we have all been doing – both behind the scenes and in public life – to promote our expertise.

In 2020 we have received a steady stream of inquiries for medical history information from our specialists. I thought it would be fun to provide you with a list. It is very instructive, and indicates the range of items we are invited to consider. Most queries come directly to our Secretary, or via the website form.

First, we have curated some of our public commentary on our Society's website on a page called COVID19 in Context: <https://www.anzshm.org.au/covid-19-in-context>.

Second, as well as being responsive to the ubiquitous COVID19, we have been invited to comment on the following historical themes: children's health in Sydney in 1910; female psychiatrists in rural regions for interviews; papers or archives relating to the former Chief Medical Health Officer and Public Health Commissioner of Western Australia (c. 1915 to c. 1942), Dr Everitt Atkinson; information about nurses in WW1; the age of a bottle of original formula Codral; medical procedures for stomach cancer in 1928; locating a copy of the small book *A selection of poems presented by Dr Stanley Goulston to a meeting of the NSW Society of the History of Medicine*; and finally, for the television series, 'Who Do You Think You Are', historical expertise in the period of the late nineteenth and early twentieth century regarding two death certificates, one mentioning malaria.

We have also received a flurry of inquiries from television production companies and private researchers about medical history, including for family history purposes. On the topic of the media, we also continually seek appropriate credit, recognition and acknowledgement for our assistance.

Thank you to all of those who have offered their advice and crafted responses to these queries, including Paul Lancaster, Madonna Grehan, Peter Burke, Charmaine Robson, Ian Roberts-Thomson, Judith Godden, and Warwick Anderson. If I have missed anyone, I apologise and offer our collective thanks to anyone else who has contributed expertise.



We would love to hear from you if you would like to offer your service and knowledge. If you wish to update or provide your interests and areas of expertise, please contact us. At present we have around 60 experts on 'our books'.

In the year ahead we are hoping to continue to grow our public role as custodians of medical historical knowledge. We are aiming to consider some virtual Society events as opportunities to meet and share research highlights, so stay tuned for more information on this in the New Year.

I am delighted to invite you to appreciate the short history of our Society on our website, written by our Vice President, Peter Burke: <https://www.anzshm.org.au/history-of-anzshm>. Thank you, Peter!

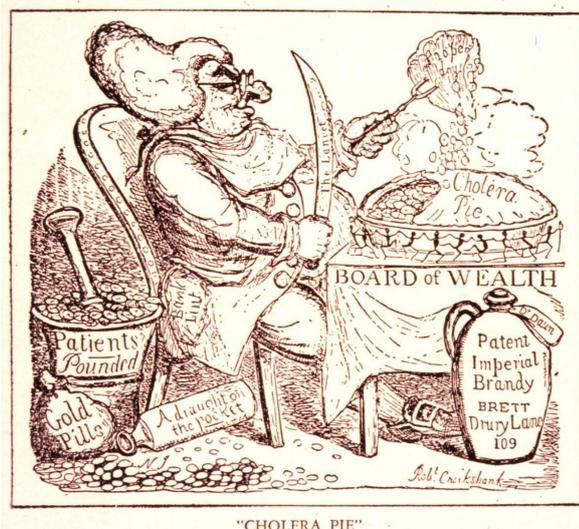
Finally, I express my gratitude to the Executive and Council of the Society, without whom our organisation would not exist. Their voluntary, tireless work on our behalf is impressive. I wish you all a safe and healthy festive season wherever you are, and see you in 2021.

Catharine Coleborne
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AN ONGOING SAGA: COVID19

Covid19 continues to exercise the minds of historians but I'm increasingly of the view that we may be jumping the gun. For more than a decade I have lectured on infections in history as part of a University of Auckland course titled 'Epidemics: Black Death to Bioterrorism'. In June 2020 the course co-ordinator emailed the following exhortation: 'Hoping you are available for the usual. Naturally there will be a COVID theme this year, so much material to draw on. Hoping you may be able to mention COVID with an historical lens on the past, how might history judge this?'

In my talk I explore aspects of the 1832 cholera epidemic in Britain, including diagnosis, treatment, politics, and public responses. In 2020 I drew parallels with Covid, incorporating 1830s and 2020 cartoons highlighting recurring themes such as the grim reaper, allegations of profiteering, and suspicions of quackery (anyone for hydroxychloroquine or intravenous bleach?). The students enjoyed the show and hopefully took something from it.



In the August newsletter I mentioned that a number of Australian and New Zealand medical historians have offered perspectives on the current pandemic. As time passes, I'm more and more inclined to think that it is far too soon for historians to be making any substantive comments. It's a bit like reviewing Shakespearean tragedy after Act 1!

Like King Canute I realise there is no holding back the tide. I am concerned, however, about how we might – or even if we should – engage with the current upsurge of articles on the history of infectious diseases sparked by the pandemic.

A good example of this plethora of publications is the recent issue of *Microbiology Australia* 41(4) (<https://www.publish.csiro.au/ma>). The editorial castigates the media perception of Covid as a killer virus because this 'completely denied the history of infectious disease as we know it'. The 13 articles in the issue are almost all penned by medical scientists, most of whom made scant use of the work of professional historians.

In contrast to this, in November 2020 influenza historian, Geoffrey Rice, published 'How reminders of the 1918–19 pandemic helped Australia and New Zealand respond to COVID-19' in the *Journal of Global History* (<https://doi.org/10.1017/S1740022820000285>).

Rice argued – without specific examples – that the memory of the 1918–19 pandemic played a significant role in the preparedness and response of Australia and New Zealand to the 2020 pandemic, and that this might help explain their success compared with Europe and the USA.

Following an outline on coping with the 1918-19 pandemic and reforms resulting from it, he penned a section headed 'Between pandemics' on



the development of Australian and New Zealand health systems since the 1920s, and one on pandemic planning. The final section, 1800 words on 'Responses to COVID-19', is described as an 'attempt to summarize briefly' the experiences of our two countries. It can best be described as a chronicle of somewhat random elements, with no claims at historical analysis.

Rice's conclusion reads: 'As New Zealand's prime minister has observed, this looks more like a marathon than a sprint.' The question for us as historians is, when might we realistically don our metaphorical running shoes and provide a valid historical appraisal of the unfolding pandemic of 2020. Five years? Ten Years? Whenever?

Derek Dow

MEMBERS' NEWS

Welcome!

Robyn Arnold NSW
Craig Ellis NZ
Phil Sandford NSW
Scott Stokes NSW

Congratulations!

ANZSHM member James Dunk won the 2020 NSW Premier's History Award for *Bedlam at Botany Bay*, which was reviewed in our August Newsletter.

Congratulations to NSW Branch Vice President Georgia McWhinney, who has just been awarded her PhD in the history of military medicine from Macquarie University.

Madonna Grehan (Nursing, University of Melbourne) recently gave the 2020 Marian Barrett Lecture on nursing, epidemics and public health in Australia since 1850.

ISHM NOTES

In these times of reduced movement and travel, a visit to the ISHM website for the next ISHM Congress is a pleasant way to travel virtually. The 47th Congress was supposed to be in Riga, Latvia this year but has been deferred to 23-27 August 2021 in the hope that a Covid 19 vaccine will be available by then. The preliminary summer school on medical history has also been deferred.

The website (<ishm2020.rsu.lv>) has an entertaining and pictorial account of the 46th Congress in Lisbon, Portugal. It also has a recording of the Virtual Opening of the 47th Congress in Riga in September this year. This event was held to publicise the deferral of the Congress and to outline the 'shape of things to come'. Perhaps most entertaining of all on the website is a series of online lectures on 'Politicised Medicine in the Dictatorships of Eastern Europe'.

For those interested in attending the Congress next year, the website contains details of registration, deadlines etc.

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EDITOR'S COLUMN

Contributions to the Newsletter are always welcome. The next deadline for copy is 15 February 2021. Copy should be sent to the editor, Derek A Dow at d.dow@auckland.ac.nz.

BLAST FROM THE PAST *Medical History Australia* 25 years ago

In his November 1995 president's column, 'Whither ASHM?', Peter Winterton recalled that for a 1989 meeting before the first ASHM conference he had to buy a tie in order to gain admission to the Sydney Club. I had a similar experience immediately after the conference, when I was invited to lunch in the Melbourne Club. In a sign of how norms change, at the opening of the current session of Parliament New Zealand's Green Party co-leader raised the issue of dispensing with ties in the House. The three episodes are a reminder of societal change in the three decades of the ANZSHM's existence.

Peter also commented, apropos our second biennial conference which was held in his home town of Perth, that this event 'highlighted the commitment of our membership to travel far and wide for an ASHM conference'. Although it is too soon to evaluate the long-term impact of Covid on international travel, it seems likely that organisations like ours may re-think some of the ways in which we operate (see below).

SCOTTISH SOCIETY OF THE HISTORY OF MEDICINE Teaching anatomy from Classical times, Edinburgh 12 & 26 March 2021

This two-day virtual symposium is organised by the SSHM in association



with the British Society for the History of Medicine and the History Society of the Royal Society of Medicine. The aim is to explore anatomy teaching from the earliest times to the present day.

Abstracts on any of the symposium topics are invited. These include: The rise and fall of comparative anatomy; cadaveric models; wax and paper models; anatomy textbooks; the rise and fall of the private anatomy schools; the role of anatomy museums; modern technologies; anatomy in art; Leonardo's anatomy; anatomy potpourri: humour/mnemonics/cartoons etc.

Abstracts on any other aspect of the history of anatomy teaching will also be considered.

For further information please email academia.bbmuk@bbraun.com.

AMPI NEWS

Vaccination: A Saga of Colonial Public Health

Henry Baker Armstrong, a GP at Fryer's Creek on the Victorian goldfields in the 1850s, also occupied three government posts there: he was deputy registrar of births and deaths, postmaster, and public vaccinator. The AMPI files list hundreds of GPs like Armstrong who were enlisted by the colonial governments as vaccinators in a century-long campaign against smallpox.

Edward Jenner had shown in 1798 and 1800 that inoculation with cowpox gave immunity from smallpox. Three years later the Royal Jennerian Society was established to promote the eradication of smallpox by vaccination. In May 1803 Colonial Assistant Surgeon John Savage conducted the first vaccinations in New South Wales. Within a year he and Principal Surgeon Thomas Jamison had successfully vaccinated at least forty children at Parramatta. Governor King then ordered vaccination to be offered regularly at Sydney, Parramatta, and Hawkesbury.

A more systematic approach was heralded by Governor Macquarie in February 1818, when he called upon all parents in the colony to provide a list of their children to the surgeon at one of the government medical stations (then Sydney, Parramatta, Windsor, Liverpool and Newcastle). Two or three children were to be vaccinated per week at each station.

Over the next two decades, voluntary vaccination was promoted by the colonial governments, with Colonial Surgeons providing the service gratis for children whose parents who could not afford to pay. The Hobart Town Gazette in December 1821 announced that parents could have their children vaccinated at the Colonial Hospital. A few months later the Colonial Surgeon at Hobart, James Scott, reminded general practitioners that material for vaccination could be obtained from the hospital.

Dr Cussen, Colonial Surgeon at Port Phillip, began vaccinating in March 1839, just four years after settlement. In July 1839, within three years of settlement in South Australia, the Colonial Surgeon at Adelaide was vaccinating emigrants and natives alike. In August 1839 the New South Wales Gazette noted that children could be vaccinated on Tuesdays at any colonial hospital or by any colonial surgeon without charge – although a shilling had to be paid on presentation, to be refunded when the child was brought back to confirm that the operation was successful.

GOVERNMENT ORDER.
VACCINATION, as a protection against Small-pox, will be performed for the Native Inhabitants every Wednesday, from eleven to twelve A.M., at the Native Huts on the Forrens.
By command of His Excellency,
J. P. LITCHFIELD, M.D.,
Inspector of Hospitals.
Adelaide, July 10, 1839.

In 1839 Aboriginal inhabitants of Adelaide were offered vaccination against smallpox.

Throughout the 1840s the New South Wales government repeatedly advertised its service. News of each fresh outbreak along the sea routes to Sydney (for example, at the Cape in 1840, Tahiti in 1841 and Manila in 1845) prompted a renewed appeal from Governor Gipps: 'His Excellency very strongly recommends Parents and Guardians avail themselves of the means of taking the necessary and proper precaution with respect to all children not already vaccinated.'

Emigration increased in the early 1850s following the discovery of gold, and at the same time there was a notable change in government policy on vaccination in the UK and in the colonies. In August 1853 the British government, determined to revive the faltering campaign against smallpox, passed the first Compulsory Vaccination Act. Tasmania and South Australia followed suit in October and December 1853, and Victoria passed a similar law the following year. New South Wales (then including Queensland) held off. Western Australia passed its own compulsory vaccination Act in 1860.

With compulsory vaccination in South Australia and Victoria came major changes in public health management. Vaccination districts were proclaimed, and government-appointed public or district vaccinators recruited from the ranks of local general practitioners, who were paid per child treated. Vaccinations were to be recorded in a register. In later decades it was not uncommon for a doctor to serve as both health officer and public vaccinator for his district or town.

Over 400 doctors in the AMPI files were engaged as public vaccinators. They were part of a global movement, originating in England in the early 1800s, and continuing for nearly two centuries, until the WHO declaration in 1980 confirming the complete eradication of smallpox by vaccination.

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Maori and Vaccination

In the mid-1820s the Maori chief Tippahe Cupa was vaccinated during a visit to the UK because of fears he would catch 'that dreadful complaint the small pox'. Although he suffered an adverse reaction, Cupa survived the experience. Twenty years later William Williams, a surgical apprentice who had abandoned his training to become an Anglican missionary in New Zealand, reported vaccinating more than 90 Maori amidst fears of an outbreak of smallpox.

Other missionaries followed suit, though in a somewhat haphazard fashion. In 1854, however, Irish-born Loughlin O'Brien, MP for Auckland in the first New Zealand Parliament 1854-5, suggested the formation of a 'Committee for Consideration of the Introduction of Vaccination amongst the Natives'. This body reported within three weeks, and by the end of the year the Central Board of Vaccination for the Aborigines of New Zealand was up and running.

The government was keen to involve senior clergymen but the Roman Catholic Bishop Pompallier opted out, as did George Selwyn, his Anglican counterpart. Selwyn did at least nominate a substitute, the former Lutheran missionary GA Kissling who had become an Anglican priest in 1841. The Methodists were represented by Thomas Buddle, who took over as chairman of the Board in 1861. Scottish Presbyterianism had a voice in the presence of Donald Maclean, whose role as chief land purchase commissioner placed him in a rather ambiguous position. The final lay member was Major Nugent of the 58th Regiment, who also served as Native Secretary.

The first two medical members were surgeon Arthur Thomson, also of the 58th Regiment, and William Davies, the long-serving colonial surgeon and coroner who had been in the colony since March 1840, shortly after the signing of the Treaty of Waitangi. Neither had a lengthy tenure. Thomson left with his regiment in 1858 while Davies died in 1856, aged just 52. Some of their successors fared little better.



The 58th Regiment's disbandment parade, 1858.

HJ Andrews arrived in Auckland in 1849, after he was bankrupted in England. Appointed resident vaccinator and secretary of the Board in February 1855, he died three years later, aged 53.

Three other former army officers served on the Board in the late 1850s—TM Philson, medical superintendent of the Auckland Hospital, SJ Stratford, who had lived in Canada from 1830 to 1854, and JTW Bacot, who had helped establish the retired soldiers' Fencibles settlements in and around Auckland. The outlier in this group was Richard Matthews MRCS 1838, who established the Auckland Medical Hall in 1853 to provide 'efficient Medical and Surgical Attendance, combined with charges so modest as not to distress the Mechanic, yet providing ample remuneration to a general practitioner'. After the death of Dr Andrews he was appointed resident vaccinator and secretary, probably a welcome supplement to his apparently modest income. In keeping with a number of his predecessors, Matthews succumbed at a relatively early age, dying of heart failure in 1863 aged 47.

By 1866 another Auckland doctor, Richard Day, was chairman of the Central Board of Vaccination. In December 1869 the *New Zealand Herald* reported that Day had resigned as public vaccinator for Auckland, on health grounds; there was no mention of his role as chairman.

The first report of the Central Board, in May 1856, revealed that in 1854 the authorities had voted £500 for this purpose, and £200 in 1855. In his 1859 *Story of New Zealand* Dr Arthur Thomson stated that two-thirds of the 'natives' had been vaccinated by that date, a claim which suggests many may have felt the work was near to completion, though Thomson's boast is impossible to verify or refute.

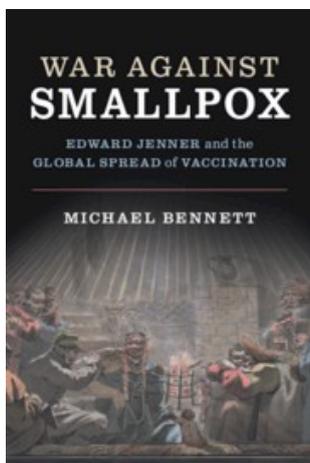
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ARTHUR SCHULLER NEURORADIOLOGIST

Arthur Schuller is a great-nephew of his namesake, whose work in Vienna before WW1 was declared by James Bull to have laid the foundations of neuroradiology. Forced to leave Vienna in 1939, Schuller emigrated to Australia, where he worked at St Vincent's Hospital in Melbourne. His great-nephew has compiled a documentary entitled 'Xrays to Exile' about Schuller's life in Austria and Australia, available at <https://youtu.be/YhRLobn-Ubw>. Contributors to the film include Dr Keith Henderson whose book *Arthur Schuller Founder of Neuroradiology: a Life on Two Continents* will be published posthumously in February 2021.

BOOK NOTICES

Michael Bennett, War against smallpox: Edward Jenner and the global spread of vaccination, Cambridge University Press, 2020, 423pp.

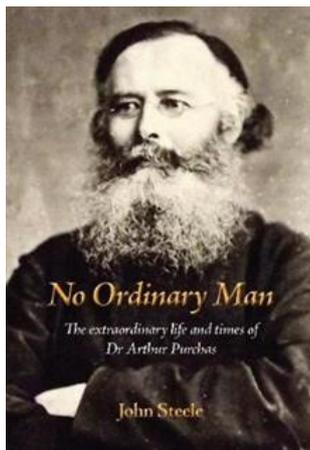


In his preface Michael Bennett explains the two-decade gestation of this project. The resulting book, concentrated on developments during the Napoleonic Wars, shows this was time well spent. Bennett starts by comparing smallpox and cowpox, then moves on to a chapter entitled 'Fire with fire', on 18th

century inoculation. This is followed by accounts of Jenner's discovery, the adoption of vaccination in the UK, chapters on Napoleonic Europe, Spain, Portugal, Russia, South Asia, North America and Latin America, and another entitled 'Oceanic vaccine: the world encircled'. Underpinning the text is a focus on the toll on human lives of exposure to smallpox, the investment in vaccination by medical men and parents, and the expanding influence of state power.

Derek Dow

Steele, John, No ordinary man - The extraordinary life and times of Dr Arthur Purchas. Mangawhai, New Zealand: David Ling Publishing Limited, 2019 349pp.



The son of an English architect, Arthur Guyon Purchas (1821-1906) was a true polymath. After training as a surgeon (MRCS LSA 1842) he became an Anglican priest in sole charge of Onehunga, near Auckland 1847-75. He continued to practise medicine and also contributed to society as an 'architect, engineer, geologist,

explorer, musician, botanist, artist, priest, [and] inventor', according to his biographer. Among his

surgical achievements was a series of successful ovariectomies, starting in 1873 with the first to be attempted in Auckland.

Several of Purchas's descendants followed him into medicine. Two of his sons, Arthur and Frederick, became doctors, as did his grandson, Auckland cardiologist EH Roche, and a great-grandson, Dr Tony Roche.

Derek Dow

Patricia Skehan and Lois Michel, Frontline of the Pandemic: Australia 1919 (s.n., P Skehan Publishing, 2020) 168pp.

Over the past two years I have enjoyed reading many community histories of the 1918-19 pneumonic influenza pandemic. Most relate local or institutional experiences, researched almost exclusively through digitised period newspapers.

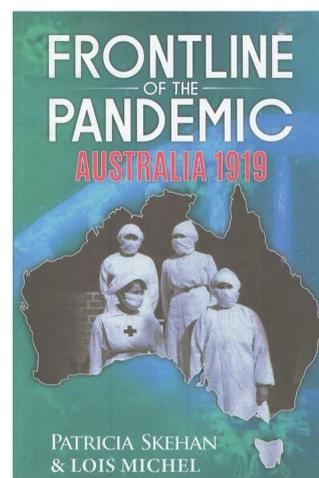
Frontline of the Pandemic is largely comprised of transcribed newspaper accounts from 1919, focusing on the Australian and New Zealand experience. It certainly savours of the period, although sometimes it is difficult to discern where the author's remarks leave off and the transcript commences.

What sets this work apart are the transcribed letters of Voluntary Aide Jean Curlewis. Daughter of Australian novelist Ethel Turner, Curlewis served as an emergency nurse through the hectic months of mid-1919 at the Walker Convalescent Hospital at Concord in Sydney. Written in haste yet inventive and insightful, her missives provide a surprisingly rare primary source for frontline healthcare through the pandemic's peak.

'No, this was dissolution, the word was exact. One saw the soul disintegrate, fall apart - first the reason, then the speech, then the hearing, then the blood receded from the limbs and left them black', Curlewis wrote. 'Then the poison tide in the lungs mounted into the throat and shoved out the quick, gasping breath and, next minute, the face was empty'. Extraordinary - and yet so ordinary in its intimate tragedy.

Peter Hobbins

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RACP LIBRARY RELAUNCHED



After a comprehensive remediation program in 2018 by RACP librarian, curator and project manager Karen Myers, the Royal Australasian College of Physicians (RACP) History of Medicine Library has been re-launched! Exciting news for historians,

RACP Fellows and trainees, researchers, students, genealogists, and anyone passionate about investigating the history of medicine.

As many ANZSHM members know, the Australasian history of medicine collection is valuable financially, intellectually and historically, comprising photographs, archives, papers, pamphlets, journals, monographs, artworks, manuscripts, and medical artefacts.

The collection is housed over multiple rooms inside the College, but the library-proper is located at the RACP office at 147 Macquarie Street Sydney, where a dedicated research space for RACP Fellows and researchers has been established. Karen Myers can assist researchers with the library's print and electronic resources, as well as provide direction on where to source further information.

What is new is that Karen has expertly built a full online catalogue that can be accessed at: <http://racp.intersearch.com.au>. Fellows and trainees can borrow items directly from the Library, and members of the public can borrow items through the inter-library loans system at their local library.

Five minutes with RACP History of Medicine Librarian Karen Myers

Can you tell ANZSHM members about your working background?

Karen: I have a background in special and public libraries but just prior to coming to the History of Medicine Library I was working in Timor Leste as advisor to the fledgling National Library of Timor Leste and the Xanana Gusmao Reading Room. I also worked with the Royal Australasian College of Surgeons international program in the Guido Valadares National Hospital as office manager for five years.

Tell us a little about the RACP History of Medicine remediation program.

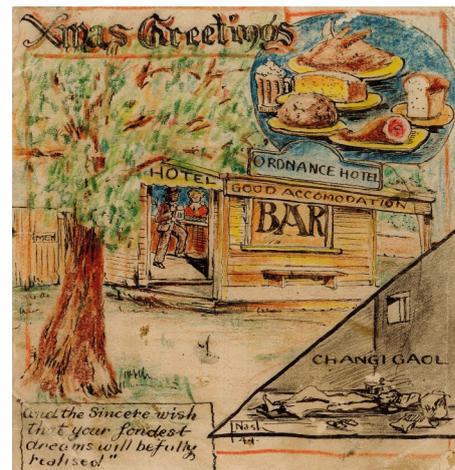
Karen: The work to remediate the collection was undertaken in 2017-18 as moisture ingress had occurred in the basement of our historic 1848-built 145 Macquarie Street offices. The College took proactive steps to fix this, and sent the entire collection offsite for remediation work. This fortunately also presented an opportunity to reposition the collection layout on its return to the College to provide a more user-friendly and accessible experience.

Do you have plans to develop the collection?

Karen: We are focused on taking our collections online to provide greater access to, and interpretation of, this significant collection. This year we are digitalising our unique archives and images and making them available to the public via our catalogue. We are fortunate to have a very enthusiastic Library, Collections and Cultural Heritage Committee, chaired by Dr Cate Storey, who provide oversight of the cultural heritage of the College as well as providing great insight into the context of the Australasian medical scene and the College throughout the years.

Do you have a favourite collection item?

Karen: One of my favourite, and surely one of the most touching items is the collection of Christmas cards hand-drawn by POW's in Changi Prison and presented to Dr Cotter Harvey (FRACP) during his internment. We hold extensive archive material donated by Dr Harvey, a leading thoracic physician, related to his work with tuberculosis and the anti-smoking lobby, as well as many items from his service in World War Two.



Please note the Library remains closed to the public for the foreseeable future due to the COVID-19 pandemic.

ANZSHM Biennial Conference, 1-4 December 2021

Innovation in Health and Medicine

University of Newcastle, Australia

Call for Papers



We invite scholars working on social and cultural histories of health and medicine to contribute papers that specifically address past, present or future innovation. In our Society's first conference since the 2020 COVID-19 global pandemic, we particularly encourage papers that address urgency and innovation related to the identification, diagnosis and management of disease in a transnational context, the health implications of climate change and environmental modification, indigenous health, and the intersection of health and medicine with social issues. We are also interested to encourage dialogue between practitioners and historians.

Other topics broadly related to the central theme might include:

Medicine in public life and policy

Healthcare and heritage

Museums and the body

Histories of diabetes and its treatments, including insulin

Indigenous health and medicine

Gender and sexualities in health

Historical methodologies and practices (including nursing histories; hospital histories; and community health)

The future of Medical Humanities

Epidemics, pandemics and vaccines in history

Telemedicine and other health communication technologies

Medicine and technology

Histories of disability

Planetary health

Trauma and resilience

The conference will feature three invited international keynote speakers, two plenary speakers/panels, and a Witness seminar marking the centenary of the discovery of insulin, situating it in the changing cultural, health and medical environments of the past century.

We seek papers (20 minutes) and panels from all periods and regions that address these themes. We particularly welcome submissions that highlight inclusivity and diversity. Submissions from scholars across the range of career stages are welcome, especially from postgraduate and early career researchers. ANZSHM offers competitive travel grants to postgraduate students to attend the conference.

Proposals for papers should be in a single Word document, including 250-word abstract and a short CV/biographical statement. Panel proposals (3 papers) are also welcomed, and should include the same information plus a statement of the panel's aims.

Send these to ANZSHM2021@newcastle.edu.au by Monday 28 February 2021 with confirmation of outcomes by 1 June 2021. Registrations will open in July 2021 and a final conference program should be available at least one month before the conference.

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

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

DEADLINE FOR THE NEXT ISSUE WILL BE 15 FEBRUARY 2021.