



# Medical History

## Newsletter

AUSTRALIAN AND NEW ZEALAND SOCIETY OF THE HISTORY OF MEDICINE INC

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### THE PRESIDENT'S PAGE

A few months ago I attended the 7<sup>th</sup> International Meeting of the International Society of the History of Medicine (ISHM) in Merida, Yucatan, Mexico. It was hastily arranged and we (my wife carried the bags) left with misgivings of drug cartels, violence, corruption and threatening cyclones. Whilst, sadly, cyclones did indeed do much damage to parts of Mexico they were not a problem where we were. Nor were there any signs of the other worries.

Merida is a delightful colonial city with much effort put into preserving and often restoring and re-using its many heritage buildings. In the surrounding countryside of the Yucatan Peninsula are many large, complex, and in some cases restored Mayan ruins. These are all under the care of the National Institute of Anthropology and History. This part of Yucatan was wonderful. Despite its many problems, Mexico seems to take much pride in caring for its past.

The ISHM is an international medical history organisation open to medical historians and history professionals around the world. Like our organisation it holds a Congress every two years to which paper presentations are invited. The next is in Tbilisi, Georgia, 2014. ([www.ishm-congress-tbilisi2014.org](http://www.ishm-congress-tbilisi2014.org)) Again, like our organisation, in the 'off' year it holds an Administrative Council meeting in a suitable city. Lately there has been a tendency to hold this meeting in conjunction with a national medical history conference. This is what happened in Mexico and ISHM calls these grafted on Administrative Council meetings, 'International Meetings'.

The Mexican medical history organisation was holding a national conference and invited ISHM to join it for its Administrative Council meeting as well as to become involved in the conference. Some ISHM delegates presented papers.

The Mexican conference was a familiar mixture of medical professionals with an interest in history and historians with an interest in medicine and

health. The latter were often from university departments of medical history, or departments of the history and philosophy of science. Not all the papers were in Spanish which was some comfort for mono-lingual me. At the ISHM Administrative Council meeting, held during the Mexican conference, I was confirmed as National Delegate for Australia and New Zealand.



There are, I understand, a couple of bids in to host the next Administrative Council meeting in 2015 after the Congress in Tbilisi in 2014. Something for Australia and New Zealand to think about, is an offer to host the ISHM Council meeting in 2017 in conjunction with our own national conference. Perhaps this would be a less risky way to start our engagement with ISHM than would be a bid to host a congress.

I came away from Merida with a strong feeling that we, that is, the Australia and New Zealand medical history community, should endeavour to become more involved with ISHM. Annual subscriptions are only \$US50 (\$US25 if you are young or less young) and this includes receipt of the organisations journal, *Versalius*. The ISHM has a comprehensive website (<http://www.biusante.parisdescartes.fr/ishm/eng/>) and it is possible to apply to join on line. Paying the subscription can be a technical problem and I am happy to be a conduit for that should anyone be interested.

Think about joining ISHM and taking on an international landscape for your medical history interests.

**Brian Reid**  
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Ps. My bag manager and I did manage a little time for birding in Yucatan. B

## ALL ABOUT OURSELVES

Members of the ANZSHM describe their life, work and interests

It is hard to recall when I first became aware of History. I grew up in the years when, like all the fathers in our street, our Dad was 'away at the War'. I was the youngest of three children in a large old house in suburban Melbourne, and surrounded by lots of old things – old hats hanging on hooks down the hallway, Grandma's old piano (and sometimes Grandma herself), my sister's old clothes 'let down' for me, my old eiderdown (out of which I plucked feathers during afternoon rests), old teddies with noses worn shiny from loving, the old trunks from travels stored on the verandah, and the shelves of old books some with pictures in colour – all waiting for something. Were they waiting for me? Yes, they were waiting – for a further 60 years. Despite retiring 3-4 years ago I seem destined to continue dealing with Collections. As the last of my generation, I am tackling the huge task of dealing with that old and many roomed house, filled with the lifelong possessions of three generations of our family.

I am clearer though about my first awareness of medicine. There was Hypol for strong bodies, Vicks Vaporub for chests, Lanoline for itchies and sometimes cracked lips, Mercurichrome for knee grazes, Calomine Lotion for sunburnt shoulders, and Figsens on Fridays (when the children were cranky.)

But there was also Medicine with a capital M, that was for our Mother, and Hospital too, that disrupted the flow of childhood memories – of long summer holidays, xmasses and bedtime stories lovingly read to us, and we learned that unlike the endings of the fairy tales, people didn't always 'all live happily ever after'. On a sad New Year's morning of 1949 our auntie came into our bedrooms to tell us that 'our mother was very, very sick, and that she wasn't going to get better'.

Peritonitis, still a potentially fatal inflammation of the lining of the abdomen, is caused by bacterial infection (in my mother's case from a ruptured pelvic abscess) and if left untreated can spread, causing multiple organ failure and death. Emergency surgery is usually required to repair and remove seriously affected tissue around the rupture site, and the abdominal cavity cleansed. It may have been that my mother's condition was too far advanced, for surgery was not performed. In the 1940s, sulphanilamide and its derivatives were the

most widely used and effective antibiotics available before the mass production of penicillin, and these must have been tried as she survived twenty-six days in hospital. The only treatment that reportedly gave her even temporary relief were blood transfusions, administered directly person to person at my mother's bedside by a donor matched to her rare blood group – a very generous young man, who was called to the hospital from his day on the Sandringham beach.

Needless to say her death caused a major disjunction in our lives, and a very deep emptiness at the centre of things. I had no understanding of the meaning of our auntie's words, although I knew they were sad as my sister was crying. Nothing further was ever explained to us. Our father never came to comfort us, nor mentioned even her name again, ever, throughout our lives. It was a few weeks later, after the family separated and I was packed up and taken to boarding school one Sunday night, to start a new life out on my own, that I gradually understood that my mother was dead and had gone forever. Had it been our fault that she had died, and what was to become of us? These were the unnecessary fears and the guilty suspicions that the three of us tried to resolve alone.

I have told this small sad story of my early years in order to consider it alongside improvements today in this area of health and healing, where there is now more open and enlightened conversation about death, and where counselling is possible for young people struggling with such situations, or just feeling frightened and alone.

I had the opportunity in my youth of learning that life is precious, and that we should appreciate every moment we have on this wonderful planet, for our time here is short. I also knew that when I grew up I wanted 'to do something to help other people' and that is the path I took, for many satisfying years as a physiotherapist, and in later years, as Curator of the Medical History Museum, at the University of Melbourne, as a keeper and teller of the stories of medical history.



**Ann Brothers**  
**annbrothers2010@hotmail.com**

## MEMBERS' NEWS

### Welcome!

Christine Cramer (NSW)

Michael De Looper (ACT)

Millie Nakatsuka (QLD)

Susan Webster (VIC)

Jeanie Wood (NSW)

## BEN HANEMAN MEMORIAL STUDENT PRIZE 2013.

The winner is Ms Veronika Neuzilova, a PhD student at Queensland's Griffith University. Her paper, delivered at this year's Darwin conference, was entitled: 'The Oil of the Dugong: towards a transnational history of an indigenous medicine'. The judges praised the paper's sound research and perceptive analysis, noting that 'The story of dugong oil, its production and use by Aborigines, its preparation and marketing by Dr Hobbs, is well told, and the account of its presentation in Sydney in 1854 and in Paris in 1855 ably evokes the atmosphere of the great international exhibitions of the time.'

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

In November 1988 *Medical History Australia* noted the formation in Brisbane of the Amphion Press, which 'now provides a valuable resource assisting the publication of matters germane to Australian medicine and its history. It warrants our strongest support.' Amphion Press was the brainchild of ANZSHM stalwart John Pearn, who in the same year was elevated to the status of professor of paediatrics in the University of Queensland.

I first came into contact with John in March 1987 in my capacity as archivist to the Greater Glasgow Health Board, when he sought information on a Scottish surgeon, Walter Scott (c. 1792-1854), who had emigrated to Australia. With his customary diligence and speed, John published the results of his researches in 1988, in a book entitled *In the capacity of a surgeon: a biography of Walter Scott: Surgeon and Australian colonist, and first civilian of Queensland*.

John's first venture into medical history, to the best of my knowledge, was a 1983 volume edited jointly with Sister Catherine O'Carrigan, *Australia's quest for colonial health: some influences on early health and medicine in Australia*, published under the auspices of the Department of Child Health at the Royal Brisbane Hospital. The meeting on which it was based was a predecessor to our biennial conferences.

This heralded a flurry of publications, many of them devoted to aspects of paediatrics, such as a biography of Sydney Fancourt McDonald (1985), paediatric education in Queensland (1986), and milestones in the history of the Royal Children's Hospital, Brisbane (1994).

Over the past three decades John has produced more than 600 papers and in excess of 60 books or book chapters, many ranging widely across the entire spectrum of medical history; more than 70 of these works are listed in the National Library of Australia catalogue.

A quarter of a century on, he is still publishing with the Amphion Press, his most recent publication being *Beneath the surface: medical imaging and children's healthcare in Queensland* (2013). John's has been a uniquely prolific contribution to Australian medical history and one which fully justifies the 1988 *Medical History Australia* injunction to offer strong support to the Amphion Press.

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## EDITOR'S COLUMN

Contributions to the Newsletter are always welcome. The next deadline for copy is 15 February 2014. Copy should be sent to the editor, Derek A Dow at [d.dow@auckland.ac.nz](mailto:d.dow@auckland.ac.nz) or, if you prefer snail mail, 62 Koraha St, Auckland 1050, NZ.

## AMPI NEWS

### Colonial Doctors with Mental Illness

*'I thought it was madness', he said, 'and now I begin to fear it is disgrace'.*  
(Robert Louis Stevenson, from *Dr Jekyll and Mr Hyde*, 1886)

Severe mental illness was rare among colonial medical practitioners, whose most common psychiatric disorders were depression and alcoholism. Nevertheless there is a handful of doctors in the AMPI file who are known to have been afflicted by madness, and sometimes by disgrace as well.

In 1819 the naval surgeon John Morgan was found to be deranged soon after his ship arrived at Sydney. His fate is uncertain, but it appears that the authorities shipped him back to England about a year later. Better documented is the case of Nicholas Langley, a general practitioner, who became violent soon after arriving at Fremantle in 1830. He had to be confined for two years before he recovered and was able to return to medical practice.

Perhaps the most intriguing story is that of Alexander Euston MRCS, who arrived in Sydney from England in 1844. Over the next twenty years he worked in Tasmania, Victoria and New South Wales. In 1866 or 1867 he was detained in a lunatic asylum in New South Wales, from which he escaped. He made his way back to Victoria, where he was arrested and placed in the asylum at Yarra Bend.

At Yarra Bend he showed himself to be a talented



painter and writer. He decorated the walls of his accommodation with strange scenes from Greek allegories. He described these works as the 'Eustonian Cartoons' and raised money for charity by charging admission to see them. During 1873 he wrote a series of thirty articles for a local newspaper on obscure medical topics such as 'The Chaldean Sulphur Cure'. What eventually became of him is unknown.

Another medical inmate of Yarra Bend was Alfred Yates Carr MRCS LSA, formerly resident physician of a lunatic asylum in Warwickshire, who arrived in Victoria from England in 1852. He was in practice at Ballarat until 1855, when he returned to England for two years. After another voyage to Victoria in 1857 he was found to be insane and was sent to Yarra Bend.

There he remained for the next thirty years, except for brief periods when he was released or had escaped. He eventually died at Ararat Lunatic Asylum in 1894. He had left a wife and two children behind in England. It is not known whether they ever received news of him, as the authorities believed they were a figment of his imagination. An excellent short biography of him has been published online by Patrick Gregory of the State Library of Victoria.

Perhaps the best-known case of colonial medical mental illness is that of Walter Lindesay Richardson LRCS MD, who was first a storekeeper at Ballarat and later a wealthy and highly respected practitioner there and in Melbourne. He spent an extravagant year on tour in Europe, but returned to Melbourne in 1874 to face financial disaster following the failure of his investments.

Over the next four years he had practices at Hawthorn, Chiltern and Queenscliff. During this time his mental condition deteriorated rapidly. At Queenscliff he could be seen lurching about the streets, constantly muttering and laughing to himself. He was admitted to Yarra Bend Asylum in 1878 with a diagnosis of General Paralysis of the Insane, and died about a year later. His daughter Ethel, writing as 'Henry Handel Richardson', made him the model for the hero of her fictional masterpiece *The Fortunes of Richard Mahony* (3 vols., 1917-25).

**Stephen Due**  
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*Yarra Bend Lunatic Asylum*

## New Zealand Doctors Suffered Too!

As so often happens, this quarter's AMPI column resonates with parallels to New Zealand. Stephen Due's article about colonial doctors with mental illness focussed solely on those who practised in Australia but it seems that New Zealand medical men were no more immune.

From the mid nineteenth century New Zealand was hailed as a particularly healthy country. Many doctors, especially those suffering from tuberculosis, availed themselves of the climate in search of a cure. For some, the colony was perhaps a vain attempt to escape the demons which eventually overcame them. In this vignette I examine three individuals who succumbed in the first decade of the twentieth century; all had Australian connections.

The first of these was Thomas Henry O'Reilly, who gained a 'sweeping majority' when the Waikato Coal Miners Sick and Accident Society voted in May 1900 to appoint a resident doctors. A contemporary press report described the successful candidate as 'a gentleman just three months out from Home, where, after studying medicine at Edinburgh, he took the triple qualification'. Within the year O'Reilly had been replaced as medical officer by Dr John Wilson, another LRCPEd LRCSEd LFPS. No reason was offered for the change. Just over two months later it was reported that O'Reilly had committed suicide in Sydney by opening the femoral artery with a safety pin while in police custody following an earlier attempt to shoot himself.

O'Reilly was not the only one for whom an inherent restlessness or instability saw them meander back and forth across the Tasman until the illness reached its denouement. Samuel Henry Edgelow MRCS 1877 practised in New Zealand from 1881-7 until he decided to try his luck in, first, Queensland and then Victoria. In 1903 he registered in South Australia but shortly afterwards returned to New Zealand, only to be obliged to insert a newspaper advertisement stating that 'OWING to illness, Dr Edgelow is unable to be consulted, but hopes soon to be able to resume his practice.' No explanation was forthcoming until May 1905 when the *Observer* revealed that Edgelow had just been released from Sunnyside Asylum after an enquiry by Mr Justice Edwards. The doctor made a number of allegations against the institution, the chief of which was the claim that 'when he was originally admitted to Sunnyside Asylum, his bag, containing valuable private papers and credentials, was handed to a junior officer, and that no trace of it can now be found. This unquestionably is a hardship, the papers being of considerable professional

value to the Doctor, and no stone should be left unturned in the effort to restore his personal property to him.'

Sadly there was no happy ending. Having returned once again to Australia, Edgelow died in Gladesville Mental Hospital on 19 December 1916.

The most fascinating trans-Tasman links in this regard, however, involved three members of the Goode family, all doctors. One of the siblings, William Henry, was a lecturer in the Sydney Medical School and a founder of the Royal Prince Alfred Hospital. He died in 1902. His elder brother, George, had died the previous year, although the *Sydney Morning Herald* obituary made no mention of the circumstances.

In 1909 the third brother, Edward Jonathan, went on trial in New Zealand after he shot dead a married woman who resisted his sexual advances. At his trial his nephew, a defence witness, revealed that his own father, Dr George, had died in Callan Park Mental Hospital, Sydney, of exhaustion following on melancholia. Dr Robert Beattie, medical superintendent of Auckland's Avondale Asylum, included this information in his evidence at the trial, diagnosing Goode as insane because he was a chronic alcoholic, whose 'whole intelligence was impaired'. He also stated that 'The fact that Dr Goode's full-brother was a lunatic would make prisoner predisposed to such mental disturbance, particularly in conjunction with the fact that accused was, as witness had notice, of a HIGHLY NEUROTIC TEMPERAMENT.'

Accepting Beattie's testimony, the jury found Goode not guilty on grounds of insanity although he was still committed to imprisonment at His Majesty's pleasure. I have not determined whether, or if, Goode was ever released from custody before his death on 15 March 1916 and his burial in Auckland's Waikaraka Cemetery.

### Derek A Dow



*Dr Goode's tombstone, Waikaraka Cemetery.*

## NSW BRANCH NEWS

The year 2013 was a busy one on the ANZSHM-NSW calendar, particularly for members who also travelled to the Society's biennial conference in Darwin. As noted below, the executive committee has determined to alter the format of events for 2014, in the hope of increasing attendance and encouraging more social interaction between our members.

### **2013 Ben Haneman Memorial Lecture**

Once again the memory of Ben Haneman – an inspiring benefactor for bibliophiles and historians alike – was honoured by the public lecture which bears his name. Hosted biennially by the State Library of New South Wales and ANZSHM-NSW, this oration continues to draw prestigious presenters to Sydney in order to share their historical research.

The 2013 Ben Haneman Memorial Lecture was delivered on 19 June by Stanley Finger, Professor Emeritus of Psychology at the Washington University in St Louis, Missouri. Exploring attempts by Benjamin Franklin to harness the medical benefits of electricity, Professor Finger commenced by drawing out his subject's several links to Australia. Franklin not only suggested that Britain consider transporting its surfeit of convicts offshore, but during the Revolution argued vigorously that rebellious American forces should not interfere with the explorations of James Cook.

Although not trained as a doctor, Franklin developed numerous medical interests, including the establishment of hospitals and medical schools, hygiene and exercise regimens, mesmerism and music therapy, and – not surprisingly in the context of 'Pox Americana' – smallpox inoculation. His fascination with electricity arose in 1743, thanks to a roving demonstrator of the phenomenon. This visit coincided with the invention of the Leyden jar, the first apparatus capable of reliably holding an electrical charge and controlling the emitted current. Amongst Franklin's first observations regarding electricity was its habit of congregating around pointed objects. Thus although often erroneously credited with inventing the lightning rod – a technology which was in fact well established – Franklin was the first to insist that such conductors should be pointed. Extending his observations of lightning, Franklin's famous kite experiment established that the electricity generated in thunderstorms was qualitatively the same as that produced in Leyden jars.

With a reputation for designing prosthetics –

particularly bifocal spectacles – Franklin early took up the idea of electricity as a stimulant to counter paralysis. Although there is no clear record of his cases, Franklin did employ electricity in several attempts to reverse deafness and 'paralytic disorders' (strokes), although he had abandoned the idea by the time that his own wife suffered a stroke. In 1758 Franklin reported to the Royal Society of London that electricity provided no permanent benefit for palsy. In a case of hysteria, Franklin's attempt appeared more successful, albeit largely for its placebo value. Professor Finger noted that Franklin was also the first to propose a progenitor of electroconvulsive therapy for melancholia, based upon his auto-experimentation which established that major shocks to the head effected short-term memory loss.

The Society and the State Library thank Professor Finger for delivering this year's Ben Haneman Memorial Lecture. The 2015 lecture will serve as a public engagement activity within the structure of the biennial ANZSHM conference in Sydney.

### **SPASM visit and walking tour**

On 14 September, NSW members headed to the old Gladesville Mental Hospital to see the preservation of medical history in action. First was a visit to the museum operated by the Society for Preservation of the Artefacts of Surgery and Medicine (SPASM). This remarkable collection of medical heritage items and memorabilia, carefully overseen by a dedicated band of volunteers, is now housed in one of the old gatehouses of the complex. For some of the members this was a nostalgic trip to old machines and instruments, now superseded; for others it offered an insight into a previous era of practice. We thank our generous hosts, Bevan Stone and Judith Cornell.

Then it was off for a guided walk around the Gladesville campus, led by Cate Storey. Opened as the Tarban Creek Lunatic Asylum in 1836, these original and later buildings, now adapted to other uses, provide an insight into the changing concepts of management of the mentally ill. How fortunate we are, that these buildings and parklands remain for us to appreciate their historical secrets.

### **Missions, methods and management: 2015 ANZSHM Biennial Conference in Sydney**

Plans continue apace for the Society's next biennial conference, with the dates of 30 June – 4 July 2015 now locked in at the Australian Catholic University in North Sydney. The conference sub-committee is now approaching keynote speakers and actively establishing sessions and logistics. As always, suggestions are welcome, including ideas for presenters and sponsors.

### **Peter Tyler history of medical history witness seminar**

Initially planned for December 2013, the Peter Tyler Memorial Witness Seminar has been rescheduled to mid-2014, in order to allow adequate time for planning this session, which is intended to be formally recorded and transcribed as an oral history archive. Suggestions and offers from members with expertise and interest in this area are most welcome via the Secretary, Peter Hobbins, peter\_hobbins@bigpond.com or 02 9569 5561.

### **Forthcoming events**

The next ANZSHM-NSW event will be our Annual General Meeting and medical history dinner, to be held on the evening of Thursday 6 February 2014. We are planning to hold this function at a modern Australian restaurant in Roseville, with a dinner presentation by Peter Hobbins entitled 'Snakes on your plate: vipers, venoms and vermin in colonial Australia'.

Further events planned for 2014 include a seminar on medical history museums in early March, and the Peter Tyler witness seminar in June. Dates to be confirmed, but the format for Society functions in 2014 will change to incorporate a dinner wherever possible. Our intention is to make events more sociable for existing members, whilst also encouraging new members and students to join us. There remains considerable interest in a return visit to Newcastle, which we may plan for later in the year.

**Enquiries/RSVP for all events to Peter Hobbins, peter\_hobbins@bigpond.com or 02 9569 5561.**

## **JOURNAL WATCH**

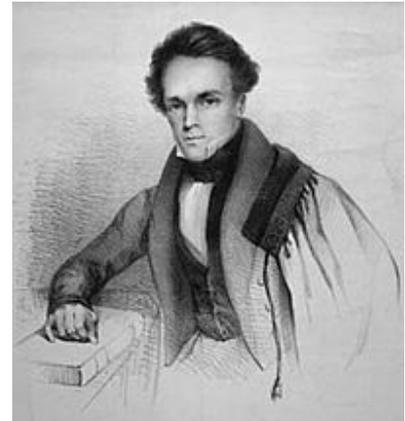
The October 213 issue of *Medical History* contains an article with the intriguing title of 'Tom Tiddler's Ground: Irregular Medical Practitioners and Male Sexual Problems in New Zealand, 1858-1908'. The time frame has been chosen to coincide with the 1858 UK Medical Act and with New Zealand's Quackery Prevention Act which came into effect in 1909 (but had limited success in quashing such activities). The article makes extensive use of the Papers Past website (the NZ equivalent of the NLA Trove interface) and includes comparisons with Australia. The author, a biology teacher rather than a historian, also acknowledges the assistance of Robert Darby, a Canberra medical historian with a particular interest in the history of circumcision.

## **BOOK REVIEW**

John B. Hickie, *George Bennett: Naturalist, Physician and Bibliophile*, Sydney, 2013, 200pp, ISBN 978-0-646-59112-4.

Narrating the many facets of George Bennett's life, this biography addresses one of the most prominent doctors and naturalists of Australia's early colonial era. Based closely upon Bennett's extensive writings, the text also generously acknowledges Victor Coppelson's research into the subject in the 1950s. The author couches his admiration for Bennett within thematic chapters which detail his social connections and scientific legacies. Self-published, the book unfortunately suffers from numerous typographical errors, including the names of historical characters and biological species. Chapter 1 ends mid-sentence, whilst some items of information are repeated two or even three times. Conversely, the book is neatly laid out and richly illustrated with contemporary images.

### **Peter Hobbins**



*George Bennett*  
(1804-93)

## **OSLER LIBRARY TRAVEL GRANT**

The Osler Library of the History of Medicine at McGill University sponsors a travel grant, designed to assist scholars who need to travel to and establish temporary residence in Montreal in order to use the resources of the Library. This grant is available to historians, physicians and to those interested in the arts and humanities of medical history. It carries an award of \$1,500 (Canadian), and must be held from 2-4 weeks during the calendar year of 2014. \$2,000 will be made available to those requiring 4 weeks to complete their research. Application instructions are located on the website <http://www.mcgill.ca/library/branches/osler/grant>. Applications for the 2014 grant must be received by 31 December 2013.

## LONDON'S PULSE

On 28 October 2013 the Wellcome Library launched London's Pulse, the first stage in its ambitious project to digitise the 70,000 medical officer of health reports in its holdings. These reports offer huge research opportunities for the history of British public health since the mid-nineteenth century. The often rich and elegant prose, along with graphs, tables and other statistics, provide data on important issues such as infectious diseases, environmental issues, the evolution of health services, and infant mortality.

This first phase includes more than 5000 reports covering the City of London, including 32 London boroughs and their predecessor local authorities, for the years 1848-1972. The starting point is the first ever report by London's MOH, John Simon, which begins: 'Gentlemen. During the 52 weeks dating from October 1st 1848 to September 29th 1849 there died of the population of the City of London 3,799 persons.' The earliest borough reports began seven years later, in 1855.

As the account of the launch reveals, the reports provide 'unparalleled insight into Londoners' lives, covering a dizzying array of topics'.

They also impact on non-medical matters. Dr Joseph Loane's annual report on the sanitary condition &c, &c of the Whitechapel District for the year 1888, for instance, refers in some detail to the notorious Jack the Ripper murders: 'During the year the civilized world heard with horror of the terrible outrages which took place in Whitechapel.' Loane was emphatic that this was the work of a solitary lunatic, adding that 'It is also clear to those who are familiar with the District, that were the miscreant a resident in the district, he could not have escaped detection.' He also complained that Whitechapel was often blamed for all the crimes in East London, but annual registration forms show only 19 murders between March 1862 and September 1888, with 6

infanticides and 5 deaths accounted for by the 'awful crimes' of 1888. One hundred and twenty-five years on, the crimes remain unsolved.

For hours of happy browsing see the dedicated website <http://wellcomelibrary.org/moh/>



*The site of one Jack the Ripper victim.*

## FOR YOUR DIARY

A conference entitled *Quarantine: History, Heritage, Place* will be held in Sydney from 14-16 August 2014, at the former Quarantine Station, North Head. It is hoped this will prompt productive conversations between archaeologists, historians, cultural and human geographers, and heritage scholars. Keynote speakers are Nadav Davidovitch (Israel), Gareth Hoskins (Wales), Harold Mytum (England), Nayan Shah (USA), Alexandra Minna Stern (USA).

The Society for the Social History of Medicine Conference, *Disease, Health and the State*, will take place from 10-14 July 2014, in Oxford, UK. The committee encourages proposals for papers, sessions, and round-tables that examine, challenge, and refine the history of disease, health and the state.

Submissions should be sent to: [sshm2014\(at\)wuhmo.ox.ac.uk](mailto:sshm2014(at)wuhmo.ox.ac.uk) by 1 January 2014.

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For the latest information, visit the ANZSHM Internet Website: [www.anzshm.org.au](http://www.anzshm.org.au)

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