

## History of Medicine:

# Various Items from the Museum of the History of Medicine in Johannesburg\*

C. ADLER, *Honorary Director, Museum of the History of Medicine, Johannesburg*

*S. Afr. Med. J.*, **47**, 34 (1973).

In addition to the great events in the history of medicine, such as Jenner's first use of a vaccine against smallpox and the first heart transplant, there are numerous smaller occurrences and milestones which make interesting reading. The following vignettes have been collected over a number of years at the Museum of the History of Medicine. They need no further comment as each forms a complete episode highlighting the practice of medicine in days gone by. In some cases, such as the advertisement for bilingual medical men, the reader is left with a sense of nostalgia for the days when £400 could still be regarded as a reasonable remuneration, and in others where one reads about outbreaks of hydrophobia, one

is thankful for the progress that medical science has made over the years.

From the *South African News Weekly Edition*, 28 November 1900:

## WANTED

Medical Man able to speak Dutch and English. Married Man preferred. Guarantee £400 first year.

Applications with reference, stating age and whether Pro or Anti-Boer, will be received up to 31st December next, by

DOCTOR COMMITTEE,  
Vosburg, via De Aar.

\*Date received: 19 June 1972.

The following is one of the *Reports on Public Health* for the Cape of Good Hope, presented in 1891:

### Report on the occurrence of a Case of Hydrophobia at Hanover

Towards the end of November last the attention of the Government was drawn to the occurrence of a fatal case of illness, reported to be hydrophobia, in the District of Hanover. The District Surgeon was immediately communicated with, and requested to furnish a complete report of all the circumstances of the case, including the symptoms of the disease as it occurred. The District Surgeon thereupon, writing on the 12th December, reported that the person whose death had been attributed to hydrophobia, was bitten by a wild cat, in the early part of September, in the left hand, a severe lacerated wound of the web between the thumb and the forefinger being inflicted. She did not apply for medical assistance, but dressed the wound herself.

"I first saw her," the District Surgeon, in his report, goes on to say, "on the 7th of October, when I removed a small piece of callous skin. She was then in perfect good health."

"On the 7th of November," the District Surgeon continues, "she sent for some liniment, as she was suffering from extreme pain in the arm, said to be rheumatic. On Sunday, the 9th, I was sent for to the farm. I found her in bed. The further history of the case is, that on the preceding Monday she noticed that from the hand to the shoulder was a broad strip devoid of feeling. The same evening, after she was in bed and asleep, she was wakened up by extreme pain in the left arm. This continued all the week, but, after having rubbed the liniment in, she felt great relief in the arm, but the pain went into the upper part of the chest and throat. She suffered from extreme restlessness, inability to lie or sit quietly, and also great difficulty in swallowing. Her pulse and temperature were normal, but with peculiar breathing, low inspiration and short jerky expiration. I prescribed for her and left. On Monday I was again sent for, and found that her condition had changed for the worse. Pulse rapid and weak. Cold sweats. Extremities cold. Spasmodic action of the diaphragm with incessant cough, spitting out the thick viscid phlegm which she was unable to swallow. I tried her with a glass of water. She immediately flung herself over to the other side of the bed, declaring that she could not swallow. The medicine by force of will she could swallow, a few drops at a time, but each effort produced the characteristic spasms. These spasms were produced even in wiping her face over with vinegar and water. The heart failed suddenly at 4.30.

"I am unable to describe more fully the case; but to anyone seeing it there could be no possible doubt that it was one of genuine hydrophobia."

The report of the District Surgeon was subsequently submitted to the Colonial Medical Committee, who expressed their opinion that the case was one of hydrophobia.

---

One of the *Reports of District Surgeons* for 1883:

#### ALIWAL NORTH

I have the honour herewith to report upon the health of the town and district of Aliwal North.

I am glad to be able to state that during the last twelve months the town and district have been in a fairly healthy state. It is impossible for me or any other District Surgeon to answer the question as to the Statistical Records of Deaths in the District, as no registration of deaths is enforced. I would strongly recommend the Government to provide for the compulsory registration of births, deaths, and marriages. No special epidemics have prevailed in the district to any great extent during the last year. I have had several cases of Low Fever, two of Typhus, and several of Typhoid—all due, probably to over-crowding and bad drainage. Rheumatic Fever, a few cases, but very severe. Scarlet Fever, very plentiful, but usually of a mild form. Measles, unusually severe, but of short duration. Puerperal Fever, two cases, due to neglect. Croup, several cases in damp localities. Diphtheria has almost died out, and is not severe. Catarrhal diseases, such as bronchitis and pneumonia, very prevalent, also diarrhoea, during spring months. There has been a remarkable epidemic of abscesses in the face and fingers (whitlow). Vaccination has been successfully performed throughout the whole district. Syphilis: I have to draw your attention, especially, to the alarming manner in which this disease is spreading in the district. I have on several occasions solicited the aid of Government to enable me to cope successfully with this most loathsome disease. The Government, however, refused to take any steps in the matter, but referred me to the Divisional and Town Councils. I applied to these for help, and, after some considerable delay, was informed that a hospital would be built for contagious diseases. This was erected in due course close to town, and was fitted up for fifty patients. Advertisements were then inserted in the local paper, calling for tenders for medical attendance on and supply of medicines to the patients. A tender was accepted, which the Council thought low. I remonstrated with the Council, and showed them that, by accepting this tender, the very object for which the hospital was erected would be defeated, as it would be impossible for any medical man who tendered so low, to admit more than few patients into the hospital without suffering great pecuniary loss. The consequence was that there were never more than eighteen or nineteen patients admitted into the hospital, though there were many more who would have availed themselves of the benefits of the institution if an opportunity had been offered them. So few were admitted, and the expenses incurred in treating these few were so great that the Divisional Council refused to contribute their share of the expenses after the end of January, 1884. On account of this mismanagement the Hospital was broken up, and the patients sent home uncured. The result of the whole business is that the district is now in a worse plight than ever it was before. No one will take any further steps in the matter, and the disease is allowed to spread without hindrance. If the hospital had been properly conducted it would have been of incalculable benefit to the Town and district, and hundreds instead of tens of patients might have been treated.

I would advise the Government to take some extreme measures to try and stop the ravages of this most dire disease, or in a short time this country will be shunned by the world as a loathsome place, and one to which all must give a wide berth. I shudder to think what the results of this neglect on the part of Government will be. So many thousands are spent in checking the spread of Small-pox, and yet of the two diseases, which is the most loathsome?—Syphilis undoubtedly. Cure Small-pox, and the patient recovers completely, and the disease is not transmitted to the offspring. Such is not the case with Syphilis. I doubt if the offspring of patients who have suffered from this disease ever escape from the effects of the sins of the fathers; for in some form or another this disease always shows itself in the children to the third and fourth generation of those who were once affected.

I would also draw your attention to a want that is very much felt in Aliwal North—I refer to a hospital. It is a shame that so large and important a town as this should be totally without some form of hospital accommodation. Now that the railway is almost completed to this Town a Hospital will be an absolute necessity, and some steps should be at once taken by the Government in this matter. The course I would suggest is that some Government land in the immediate vicinity of the Town be sold, and the proceeds be used for the purpose of erecting a small cottage hospital, somewhat after the plan of the Frere Hospital at East London. The expense to Government would in this way be minimised. All that would then be required is a small annual grant from the Government. The expenses would be defrayed by paying patients and voluntary contributions. I hope that steps will be taken by the Government on this earnest appeal, through me, of the Town and District.

Aliwal North, 4th March, 1884.

The following item appeared in the *South African News Weekly Edition* of 28 November 1900, on page 2:

## YOUR EYES

The treatment of Defective Sight by  
Scientific Means at

### ROSEMONT'S

EYE-SIGHT TESTING ROOMS.

Spectacles, Clips, Eye-Glasses. All in  
need of Spectacles should at once  
consult

### MR. P. M. ROSEMONT,

A.A.S.O.O. (London),

Ophthalmic Optician, Colonial Mutual  
Chambers, opposite Dix's Cafe, 84,  
Adderley Street, Cape Town.

SIGHTS Scientifically tested free of  
charge. Sun, Dust and Shooting Spec-  
tacles. Country clients attended to by  
letter or appointment. Hospital and  
Doctors' Prescriptions a Speciality.  
Artificial Eyes fitted.

(Note: Country clients attended to by letter or  
appointment:)

The following are extracts from the same newspaper  
which appeared in the issue of 17 April 1901:

Once more (says a Durban paper) the  
borough is troubled with dengue fever.  
Nearly every store and office in town are  
deprived of some of their workers, and it  
is a common thing now to receive, as an  
excuse for work unexecuted the absence  
of storemen or assistants necessary for such  
work. The doctors are kept busily engaged  
attending to the numerous cases which are  
daily being added to. The majority of  
them, fortunately, are of a light character,  
and a patient is able to resume business in  
the course of a day or two.

\* \* \*

We have received a letter from a Native  
reader who points out that although the  
Government recently prohibited a gathering  
of Natives on the ground that such might  
spread the plague, the Railway Department  
herds the Natives together in trucks, which  
is just the way to spread the disease. Our  
correspondent also says something which  
seems incredible, and yet has been said in  
several recent letters we have received from  
Natives, namely, that at the new location  
men and women in one portion of the  
location have to use the same sanitary  
offices. Is this so, or not?

\* \* \*

Lord Kimberley, whose illness has been  
causing great sorrow among all parties in  
and out of Parliament, is described by the  
"St James's Gazette" one of the statesmen  
of our time who has never made himself  
known to the men in the street. He was in  
touch with Queen Victoria on political  
matters before any other living statesman  
had come in contact with her as a member  
of the Government. He was a peer before  
Lord Rosebery was born, and a member  
of the Government before Lord Rosebery  
was out of frocks. He is the only living  
man who sat through all the Gladstone  
Cabinets.