THE SOMERSET TRADITION

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This special number of the *Journal* is designed to honour Professor Frank Forman, a great teacher of medicine. whose contribution to its science merits a special place in the history of medicine in this country. With the passage of time, Frank Forman, along with others, will be remembered as one of the founders of clinical practice and teaching in South Africa.

Thinking of Forman, my mind goes back to the Somerset Hospital where I first remember him. There, in the first South African teaching hospital, medical history was made, and I am sure his most impressionable years were spent in the wards of this hospital, jutting out, as it still does today, into Table Bay, almost like a fortress.

Bailey and Bickersteth

When I think of the Somerset Hospital I recall the 'Barkley' and 'Bickersteth' wards with the many students crowded round the beds listening to 'Charlie', 'Oubaas', 'Frankie' himself, Lindsay Sandes, and others. My thoughts stretch back even further to Samuel Silverstone Bailey, the naval surgeon, who served in the Battle of Trafalgar and who first erected the old Somerset Hospital in 1818 as a general hospital and lunatic asylum and even maintained it for a few years out of his own funds. Looking back at such an undertaking we visualize him as a man of immense enterprise and imagination building a public hospital at his own expense for the inhabitants of Cape Town, for those in the country, and particularly for merchant seamen, slaves and paupers. Botha, in his collected papers, mentions that, except for the military hospital, this was the only institution of its kind in South Africa and was badly needed in Cape Town with its population of 8,000 Europeans and 16,000 slaves, more especially since its doors were open to people of any creed or colour.

Bailey was born in Wiltshire in 1778, went to a school in Manchester and, at the age of 15, was apprenticed to a surgeon at the Manchester Infirmary. He became licensed to practise as a surgeon and 'man midwife' on the recommendation of the Supreme Medical Council. When he was 22 he entered the Royal Navy, serving on H.M.S. Victory during the Battle of Trafalgar. In 1813 he settled in Cape Town and, imbued with the idea of a public hospital, he approached the Government to build one; but since no funds were available, he erected one at his own expense. He obtained a site for it from the Government at the northern end of Cape Town near the sea, as well as a loan of 10,000 rix dollars, promising that if he ever had to dispose of the building he would offer it first to the Burgher Senate (corresponding to the City Council of our day). It was opened in 1818 and called the Somerset Hospital. But the undertaking was too great for a single individual, and by 1821 he had spent 72,000 rix dollars of his own money. So he had to offer his debt-ridden hospital to the Burgher Senate, who took it over in 1822 for 50,000 rix dollars.

Bailey's second contribution to medicine in South Africa was his choice of Henry Bickersteth as surgeon to the Somerset Hospital, a man who was perhaps the leading South African surgeon of the nineteenth century. In 1830, two years after the Burgher Senate handed over the Somerset Hospital to the Government, Bailey was reappointed full-time resident surgeon. In 1834, however, he realized the need for an assistant and became interested in Bickersteth who had worked with him in this capacity for two years. But unfortunately Bickersteth had come from England without having passed a qualifying examination and therefore, before he could be accepted for the appointment, he had to be examined by a Council in Cape Town. His appointment raised a storm of protest and, small as it was, the medical profession was split in two over the issue. The protest was led by Dr. Louis Liesching, and it was generally held that it was grossly unfair to employ Bickersteth since others with no diploma were refused licences to practise. Eventually the matter was taken to the Governor, Sir Benjamin D'Urban who, at a heated meeting held in the home of a local medical practitioner, expressed himself in favour of employing Bickersteth. No doubt mainly out of respect for Samuel Bailey's service to the town, the Governor had his way and Bickersteth was accepted. A few months later Bickersteth took overseas leave, returning to the Somerset Hospital in 1838 armed with an M.R.C.S.

In June 1845 Bailey retired at the age of 65 and Henry Bickersteth took his place as full-time surgeon to the hospital. He was perhaps a little ahead of his time for, not only was he a very able surgeon, but he started instruction in clinical methods with demonstrations and lectures. He received the acclamation of his colleagues-the most valuable indication of his worth for, after all, the medical profession is most fitted to judge a doctor's qualities. In 1853 Bickersteth returned to England where he gained an M.D. degree as well as the F.R.C.S.(Eng.) Like Bailey he was interested in the hospital building and was largely instrumental in persuading the government to erect a new and better one, and in early August 1862 the doors of the new Somerset Hospital were thrown open to the public. But Bickersteth did not live to serve in the new building, since he passed away on 6 August 1862.

James Barry

Bailey and Bickersteth bring to mind other personalities of the nineteenth century, and the most outstanding is undoubtedly James Barry-a woman who masqueraded as a man. Romantic as this may be it is not the sole reason for her fame. She earned a reputation far beyond that of any other doctor in South Africa in this period. She not only completed over 40 years' service in the British Armed Forces until she retired on pension, but became renowned for her work, her social services to the country, and the way in which she battled for reform. In a time when prejudice against women doctors was so strong, it is easy to understand how a person with her strength of character. grim determination and great interest in medicine was forced to take on the guise of a man in order to achieve success in her profession. And the most unlikely place for a woman and thus the safest from discovery would be the Army. We can appreciate the struggle she had to conceal her sex, which was strongly suspected in spite of all her efforts. Yet it was never questioned, and this was probably due to the influence she had in high quarters. She overplayed her hand, perhaps, which explains the bitter quarrels and duels in which she became involved. This was inevitable in the era in which she lived. Wherever she went she left behind a memory of guarrels and bitterness as well as one of pleasure in work well done and kindness to the underdog. From all sides we read of her outstanding ability as a clinician. She built up a fine reputation for remarkable cures, not so much among the military personnel, although she was primarily responsible for their health. but among the citizens of Cape Town who soon sought her advice. She was not popular with her colleagues in private practice in the town for her high-handedness. because she disregarded their diagnoses and medicines. As soon as she entered a sick room she dispensed with their prescriptions, pronouncing them of little avail. In fairness

to her we should remember that the ethical code under which we practice today was not vet in operation in her time. Further, there must have been many refusals to call her in when requested by the patient, and no doubt this upset her. She obviously loved her work and wrote sensibly and to the point about diseases such as leprosy, smallpox and disorders of nutrition. She handled her patients well and was always in control of the situation. It was probably not mere influence that gained her the appointment of physician to the Governor's household barely 15 months after her arrival in South Africa. When His Excellency was ill with severe fever and dysentery she treated him most competently. What put her in a class of her own was the caesarean operation she is said to have performed on the wife of Thomas Munnick who called her in frantically to save his wife and the unborn babe. She then performed in their bedroom an operation not yet carried out in Great Britain.

James Barry brought with her a humane approach to sickness and a determination to better the lot of the unfortunate. This could only be achieved by one endowed with a spirit of devotion and courage. She seemed not to know the meaning of fear and was undeterred by any discomfort or embarrassment she caused the officials or Governor with Whitehall. When involved in an argument she showed no constraint. No matter how senior the official concerned, she overlooked nothing. Often her attitude and arguments were provocative and caused unnecessary offence. But she was sincere in her desire to help others. She was not interested in monetary reward nor in advancement for herself.

She arrived at the Cape in August 1816 at the early age of 21 years. She was so young in appearance that her patients remarked on her youthfulness and effeminacy. By September 1821 she must have achieved a reputation for efficiency since Sir Rufane Donkin, acting Governor while Lord Charles Somerset was on leave, appointed her as Colonial Medical Inspector. It seems extraordinary to us that a Governor should place the control of registration in the hands of a single person instead of in a board. There had been a board, but it had become defunct. In 1807 when the British assumed control of the Cape, a Supreme Medical Committee was created to examine the qualifications of candidates wishing to practise and to investigate all drugs and medicines sold to the public. Thus its powers were wide. But it gradually became ineffective. By 1811 only one member was left and he died in 1818, leaving only the president to carry out these responsibilities. In 1821 he passed away too and Sir Rufane, no doubt tempted to save money, decided that the duties of the board could well be continued to be carried out by only a president. So he appointed Dr. John Robb as Colonial Medical Inspector and Director of the Vaccine Institute. Six months later the appointment was again vacant and this time, impressed by the qualities and growing reputation of the recently arrived military surgeon, he chose James Barry for this function. No one can doubt that she was the right person for the post. Because of the deep feelings she aroused she achieved more good than a board could have done. She had a gift for touching the public conscience where it hurt. Whether this was deliberate or

not we do not know, but she moved from one crisis to another, championing some vital principle. Even though she did not always achieve her object at once, she was the first social reformer at the Cape and sowed the seeds for future change. In this field she was a lone figure in South Africa for many years.

Her first attack was on the sale of drugs. She discovered that drugs and medicines were sold to the public by men not qualified as apothecaries, and insisted that only those qualified should be granted licences. She even declared that members of the public had been poisoned through the sale of patent medicines by pedlars both in Cape Town and in the interior. She set about to remedy this so thoroughly that after two years the merchant importers of medicines at the Cape were furious with her interference and presented a memorial to the Governor in May 1824, objecting to the licensing of apothecaries by a solitary individual and demanding a board. Barry agreed that this was preferable, but pointed out that only those who were properly qualified should deal in medicines. The memorial was referred to the chief justice who argued that it was impossible in country districts to stipulate that only licensed apothecaries could handle drugs since there were not enough qualified men in the country. But his report was inconclusive and finally the Governor rejected the memorial.

Soon there was another crisis when the son of Dr. Liesching, the prison doctor, applied for registration as an apothecary and the Governor and Barry had to decide on his fitness for this. For registration he required a recognized diploma from a European country, but although he had been apprenticed for 5 years and his training was probably adequate he had no diploma. His father had obtained a licence to practise as an apothecary and surgeon in 1800 without the necessary qualifications. Not long after, an anti-Barry memorial reached the Governor but, although the Governor was against her, she still refused. Anxious to help such a well-known personality as Liesching, Lord Charles Somerset referred the request to the chief justice. The word 'usual' was used in the request and his lordship ruled that the Act did not imply that a diploma was essential. James Barry dismissed the judgement and the Governor turned to the Fiscal Daniel Denyssen for help. The latter had little time for the military surgeon and supported the Governor, who instructed Sir Richard Plasket (the Colonial Secretary) to order Barry to examine Liesching. She would not be hurried and when nothing had been done for 14 days, Sir Richard wrote to her again. Once more she protested and asked to be relieved of the examination. The Governor then appointed another board to investigate the candidate, and on 25 January 1825 it found him fit to be granted a licence. Barry had thus made an enemy of the Colonial Secretary who resented her disrespect towards senior officials of the Administration. But this made no difference to James Barry who appeared oblivious to all the opposition she had provoked and continued with her duties, finding fault when she considered it necessary.

In the meantime Barry had become involved in another crisis. In July 1823 Mr. P. Leitner, the superintendent of the leper asylum at 'Hemel en Aarde' complained bitterly of her interference to Lord Charles Somerset and declared he would not take orders from her. She had drawn up a list of rules for the running of the asylum and in particular criticized the food provided for the patients, believing that a good diet was the only way to overcome the disease. Leitner had given much of his life to the service of lepers and resented her critical attitude. Barry, on the other hand, could only see the cause of the lepers. Leitner resigned but the Governor refused to accept his resignation. Barry did not gain her object, but no doubt her criticisms paved the way for future reforms.

Barry's next crusade was against the conditions in the main prison in Cape Town. For some time she had been aware of the wretched state in which the prisoners lived and the severe floggings meted to them. She constantly commended those in charge to adopt a more humane attitude to their charges, but to no avail. Finally, on 16 April 1824, she found Jacob Elliott in a dungeon in a state of utter neglect with a fractured thigh. Elliott alleged that he had been given no medicine or proper food. His miserv so moved Barry that she took up his case immediately and Lord Charles Somerset ordered him to be removed to hospital. This was the first victory James Barry gained. Perhaps this was responsible for the scurrilous placard displayed on a public building in Cape Town at this time linking the names of the Governor and the military doctor. The public reaction to this disgusting attack was one of sympathy for Barry.

The next crisis arose in 1825 when she was requested by Sir Richard Plasket to report on Aaron Smith who was confined in a cell at the Town Prison suffering from mental confusion. Dr. Liesching, the prison doctor, had reported this but Barry's consent was necessary before he could be transferred to the Somerset Hospital which received lunatics. After examining him, Barry submitted her report to the Governor, stating that she was convinced that Aaron Smith was perfectly sane and was thus not a suitable case for the Somerset Hospital. She realized that an attempt was being made to cover the policeman who had wounded the prisoner. By certifying him and sending him to the hospital his wounds would be treated without their cause being discovered. She therefore flatly refused to transfer him from the gaol. The officials were furious at being treated with such contempt by one relatively junior to them, and she was ordered to re-examine him. This she did on 12 September, when she found his mind had now become partially clouded and that his general condition was much weaker due to lack of medical care. He required hospital treatment. The Fiscal, annoyed that Barry's report was a reflection on him, now started court proceedings against her. As she considered herself answerable only to the Governor she dismissed the summons to appear before the local court of justice. It is said that in her temper she threatened to cut off the Fiscal's ear with her sword. Three days later, on 15 September, she was served with a second summons. She appeared in court but refused to take the oath or to give evidence. The Fiscal, no doubt with Plasket's full consent, issued a decree of imprisonment on Dr. Barry. By this time the public had become wildly interested in this affair and sympathies were largely with the doctor. In all the excitement the prisoner was

26 Junie 1965

forgotten. His wounds were now healing in a ward in the Somerset Hospital and no one was concerned as to whether he was insane, alcoholic or of sound mind. Public opinion held that all was not well with the Government and the administration was far too autocratic. The Governor had the sense not to imprison his medical adviser and refused to implement the sentence.

At this time the Royal Commission to look into the legal and administrative machinery of the Government was at the Cape, so Barry appealed to it to clear her name and set her stand in proper perspective. She asked the Commission to investigate the treatment she had received. Plasket maintained that it was wrong to entrust a single individual with the entire conduct of the affairs of the Colonial Medical Department and recommended that a committee be formed on the lines of the original Supreme Medical Committee of 1807. He suggested that Dr. Barry's services be retained on the committee, but she should not be its president. The Governor approved of the change which, today, we agree was a wise one, despite Barry's objection. This was a bitter blow to her pride; she felt it was a reflection on her honesty and reputation, and she appealed to the Commission against this decision. But on 28 October 1825 the office of Colonial Medical Inspector was abolished and the Supreme Medical Committee came into being again. The Commission's findings did not come up to Barry's hopes. It found that her first diagnosis on Aaron Smith might have been faulty, but that she acted in good faith. In her support it condemned the action of the Colonial Secretary and declared him an unreliable witness. The sympathy of the Commission was clearly with the military surgeon, but it was not prepared to restore the appointment of a Colonial Medical Inspector because it felt that this was a post that would always result in strained human relations. Further, much to Dr. Barry's disappointment, it did not advise that she be made president of the Committee. Barry appealed to Lord Bathurst, Secretary for the Colonies, to restore her to the head of the medical department, but he too preferred a Supreme Medical Council.

In 1827 Lord Charles Somerset resigned his position as

Governor of the Cape. James Barry had lost a good friend, for, although he had not always agreed with her, he helped her in time of need, supporting her when the other officials opposed her. Therefore it is not altogether unexpected that Barry's stay at the Cape was drawing to a close. In November 1827 she was promoted to the rank of staff surgeon to the forces, and in the following October she was transferred to Mauritius.

There is little doubt that Barry helped materially to bring reform to the Cape. Her disclosures as Colonial Medical Inspector showed up glaring deficiencies in almost every public institution. The Royal Commission was thus able to see the need for change, and as a result the whole judicial system was overhauled. A Supreme Court was set up in Cape Town as well as circuit courts for the district. Mr. Daniel Denyssen was dismissed and his office of Fiscal abolished.

Through her struggle to help the sick, the poor and underprivileged, Barry set in motion a new era of social reform at the Cape, paving the way for medical men to play their part in bringing better health measures to the country.

Bailey, Bickersteth and Barry were all remarkable characters and each contributed to medical progress at a time when traces of mysticism and even Galenism still existed in medical thought. Even today we can learn from them—the initiative and enterprise of Bailey, the love for the clinical approach of Bickersteth, and the courage of Barry. Each paved the way for reform, for a better standard of medical practice and for a more humane outlook towards the sick.

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