CARLISLE DISPENSARY & INFIRMARY.

[LETTER 3.]

TO THE EDITOR OF THE CARLISLE JOURNAL.

"Be just, and fear not."

Sir—When I commenced the series of letters which I expected the present to conclude, I feared that I should find a difficulty in rousing the public to a due sense of the importance of my subject, and of the mischiefs resulting from the system I was about to deprecate. But all fears on that account vanished as I proceeded; I found every class taking an eager interest in the concerns of an institution, of so much importance to all; I found every man with whom I had the most distant acquaintance expressing his warmest sympathies in my undertaking; I found all men keenly alive to the existence of mischiefs resulting from causes beyond the sphere of common observation, and waiting anxiously the result of my promise to develope them.

And even though I had met with less support from without, I felt that within me which would have impelled me through good report and evil report, to go on fearlessly and zealously in the discharge of what I considered an all but sacred duty. I felt a proud consciousness that I was struggling for no personal distinction, for no exclusive advantages; that I was but upholding the general interest of all my professional brethren, and sought no benefit which they were not to share. I felt that I was advocating not the interests of a party or a faction, but struggling for the good of all to whom (and to whom is it not?) the state of the medical profession is a matter of any importance.

In my first letter I endeavoured to show on general principles the advantages which would result from throwing open the practice of the Dispensary to all regular practitioners, who might be inclined to take a regular share of it, and to attend to its duties. In my second, I endeavoured to show that the elective or exclusive system had not operated so as to raise the character of the profession. I have now to show the manner in which, under the old system the patients have been attended to, or rather neglected; and to show that the defects are inherent in the system itself.

I am very well acquainted with the Dispensary. I have known more or less intimately all the apothecaries for the last ten years, and have frequently assisted in every department of its practice. I hold the certificate of the medical officers that I attended its practice for a considerable time, and that during the illness of the apothecary I discharged part of his duties for three months. No one can pretend that I am ignorant of its concerns.

As I said before, the utility of a Dispensary must not be measured by the number of poor creatures who get recommendations to it, nor by the weight of the medicines they swallow; but by the quantity of time, skill, and attention that is bestowed in investigating their complaints and prescribing the medicines. From the insufficient manner in which the records are kept, it is difficult to subject it accurately to this test; for the subscribers absolutely know nothing about its concerns, except what they may infer from the druggists' bills, and a bare list of prescriptions; from a slovenly and unscientifical list of the patients and their diseases, (one line to each individual,) kept by the apothecary, and from a few *crack* cases described now and then in the yearly reports. A register of the attendances of the surgeons and physicians (excepting the prescription book—a very imperfect one) was never kept; regular case books, either for out or in patients, there were none. Even the reasonable injunctions that the physician "shall make regular reports of all extraordinary cases, *the operations of the medicines*, &c.;" that the apothecary "shall enter in a book kept for that purpose a short and accurate history of every extraordinary case," was so laxly interpreted, if attended to at all, that I believe the archives of the Dispensary might vainly be searched for the apothecary's book, and I never saw the minutes of a case made in the prescription book in my life, nor do I believe there are any such. Some loose disorderly memorandums of a case now and then there may be; but a book kept specially for the purpose, regularly and fully, I never saw.

But with a little trouble one may supply this test satisfactorily from other data. The patients of the Dispensary cannot have amounted, for the last few years, to less than three thousand annually, (exclusive of vaccinations,) and near one third of these have been attended at their own houses. The last year there were more than three thousand three hundred; of these very nearly one thousand were home patients. A vast and almost inconceivable number; a melancholy record of poverty and suffering! Surely, to every humane man, it is an enquiry of the deepest importance, what might be the dividend of medical attention appropriated to each of these three thousand three hundred unfortunates.

Now the effective medical staff of the place consisted of one physician, one apothecary, and two surgeons; the physician and surgeon extraordinary never interfered in the practice. The duties discharged by the two surgeons were very trifling. I never knew them interfere excepting in cases requiring the greater operations; and these they did not exclusively attend to. Almost the first time I entered the Dispensary I recollect seeing Dr. Barnes and Mr. Marrs, (the then apothecary,) dressing a remarkable case of necrosis, in which one of the surgeons had extracted nearly the whole of the tibia; and very lately I saw the apothecary dressing in the Dispensary a prodigious ulcer resulting from the amputation of a cancerous breast. Extracting teeth, blood-letting, vaccinations, and minor operations, were invariably performed by the apothecary and by such volunteers as he could recruit from the neighbouring surgeries, who, like the renowned disciple of Dr. Sangrado, might be trusted to try their *prentice hands* upon the poor. The dressing of ulcers, a most important duty, in a town like Carlisle, where there are so many hatters and weavers, (whose occupations render them very subject to ulcers of the legs,) a department of practice in which the quacks are in high credit, was usually left to the apothecary; though, in this part of the business, *Doctor Wharton* used to save him a great deal of trouble. I never knew the surgeons attend at the Dispensary on the regular receiving days to receive patients; they never kept a book there to record surgical cases. In short, if I allow that these gentlemen took charge of two dozen patients a-piece, one year with another, I believe I err on the side of liberality; but if it be shown that I have underrated their services, I will, with pleasure, on the republication of these letters, do them justice to the millesimal fraction.

Making this deduction, there remain for the last year three thousand three hundred patients (save two) to be divided between the physician and apothecary. Now no man who has not a swallow like Rabelais' Giant Gargantua, who supped upon windmills, can possibly believe that those two gentlemen, however active or industrious they might be, could attend to the visiting, prescribing and administering medicines to this vast number of people. I recollect that when I attended the clinical lectures of Dr. Elliottson, the distinguished physician to St. Thomas's Hospital, he had occasion to calculate the comparative frequency of a very rare disease, and he told his pupils that he had made notes of every case of disease he had seen in the course of his life, and he had seen altogether about *six thousand*. This was indeed a prodigious accumulation of experience; and in Dr. Elliottson's mind it was truly experience, for he would no more of thought of writing a prescription in the ward-book without noting symptoms in the opposite column, than he would of swallowing his dinner without chewing it. But thirty three hundred patients in a year, and a thousand of them to be hunted for through all the lanes and alleys of Carlisle! from the obscure recesses of Milburn's Row, to the dingy attics of Lowther Street! Why, the physician should be the very Cæsar of the profession, and prescribe to three apothecaries together, and the latter official should realise Mrs. Malaprop's compendious definition of Cerberus, and be "three gentlemen at once!"

But for the benefit of the credulous and obstinate, I will reduce the state of the charity to mathematical calculation. The report furnishes two bases of calculation, namely, the number of patients on the books at the commencement and end of the year, and the number treated for the specified diseases.

The mean number on the books is arithmetically, near 150; geometrically it is more; but say 150; this estimate, observe, excludes trifling cases; it merely includes those who are permanently on the books. Now, the routine of duties was this—the physician attended three times a week, usually for about two hours a time, seldom more; and he occasionally visited in the forenoons. The apothecary attended the physician in the mornings, and had sufficient employment in the afternoons, in making up prescriptions, attending to trifling cases, &c. The time that he had for visiting patients was in the evening, and during the little time that might elapse between *dispatching* applicants in the morning and one o'clock, the dinner hour; so much for Mondays, Wednesdays, and Fridays. On the other days he had, in the forenoon, to visit all the home patients; in the afternoons, to make

up the medicines, to bleed and draw teeth, and in the evenings to see such patients as required a second visit. Moreover, every Thursday he had to vaccinate a roomful of squalling children; and he had also to keep the books recording the thirty three hundred cases!

First—as to the out patients. One hundred of the 150 will be of that class; say they apply for advice three times in a fortnight,—that will make 50 patients of that class each attendance of the physician.* There are 3300 fresh tickets in a year; rather better than 20 each day of the physician's attendance. Now, if the rules of the institution are observed; if the tickets are taken in at the proper time; if the physician sit from ten o'clock until twelve, he has fifty old complaints to attend to, and twenty new ones to investigate, in two hours—*being one minute forty-two seconds and a fraction to each case!*

Now, as to the home-patients. Fifty are to be attended constantly at their own houses; three is the average of fresh home-patients for every day in the week, Sundays included; fifty-three in all: considering that there must be in a general way cases of the most formidable description, they should be seen at least once a day.† *Fifty-three patients to be sought for throughout Carlisle every day* by an apothecary, who has to eat, and drink, and sleep, and to take healthful recreation, and to employ the afternoons in attendance at the Dispensary, and three forenoons a week in attending on the physician, and to amuse his leisure with recording thirty-three hundred cases!

I will calculate it in another fashion. Three thousand three hundred fresh cases to be investigated in the year; one hundred and fifty patients constantly on the books who should be visited or consulted with, one with another, say twice every three days (I am sure they would be seen oftener in private practice), make just (36,500—3300) 39,800 visits, consultations, and investigations in the year. *One hundred and nine and a fraction daily*, one day with another. Now, the apothecary has to wait on the physician in his visits & attendance; he has to make up the medicines; but will any mortal believe that if he had no medicine to make up, he could seek out and properly reflect on one hundred and nine cases in the day? Allowing him to this part of his business three hours in the morning, and one and a half in the evening (a too large allowance) he has *two minutes and forty-five seconds to each case!*

I will now make a calculation on the data furnished by the table of diseases. There are one hundred and twenty-three specified. *Visits, &c.*

1. There are 621 fevers and inflammations; if each person is ill on an average a month, and is seen every other day, that will be..... 9315
2. Dropsies and consumptions cannot possibly require to be attended to less than twenty times a piece; 125 at 29..... 2500
3. 69 ulcers; if they cure them at ten dressings each, they are clever fellows..... 690
4. 238 teeth pulled out..... 238
5. If they cure acute and chronic rheumatism (125), and stomach complaints (211), and syphilis and gonorrhœa (87), and clear old folks and young ones of asthma and catarrh (173), in all 596, at ten *tries*, they do well... 5960
6. If they root out "*cutaneous diseases*," and stop laxes, and expel the "*worms*," at five visits a-piece, they have good luck (486),..... 2430
7. If we deduct these cases, which amount, I think, "errors excepted," to 2132, we shall have 1211 left, principally chronic, and these at ten attendances each, come to..... 12110

32,135

Making the monstrous aggregate of 32,135 visits, consultations, &c., for one man, in twelve months, over and above making up medicine and keeping the books! ‡

Now, all these calculations coincide pretty nearly; and though the second be somewhat vague, I do not think that any reasonable objection can be made to the first and third. The basis of the calculation is quite simple: there can be very little difference of opinion as to the average attention required by one hundred out-patients and fifty home patients, and by the other business of the place. I hold it *demonstrated* that the patients *could not* be attended to under the old system. The naked fact cannot be got over. If any patient got more than his hundred and two seconds of attention, somebody must lose the difference. The number of patients on the books fluctuates; if they fell greatly below the usual number, they might be tolerably attended to: but when they were above the average, when they amounted to 178, as they did at the commencement of the last year, how were they attended to?

The fact is, the rules were never attended to, nor the patients either; there were always too many patients came on the physician's days for him to properly attend to; but nothing like the number that should have been there if the rules had been enforced. The physician prescribed for but a very small portion of the patients; the apothecary either attended to or neglected the remainder. The rule that "the apothecary shall attend when the physician and surgeon think necessary," was systematically set at defiance; the apothecary, generally speaking, took the management of the cases, and merely called in the physician when he thought proper.

Now if any truly charitable person is anxious to get to the bottom of the matter, and in spite of blustering or wheedling, to ascertain what degree of attention the patients really meet with under the old system; I would advise him, if he has had any friends or relations ill of any of the diseases mentioned in the catalogue, to enquire how many visits were paid them by their medical attendant on such occasions; or, if he know any one requiring medical advice, and so ill as to be unable to leave his house, to enquire how often in the week his surgeon or physician sees him; when he has done this, and has made an allowance of three consultations in the fortnight for those patients who are able to go abroad for advice—no exaggerated allowance—he may form his own estimate of the aggregate of visits and consultations required by better than three thousand patients. And then if he will inquire what period of time a medical man in a general way will spend over his patient without incurring the imputation of haste, and will see how many of those periods are comprised in the physician's six hours a week for out-patients, and the apothecary's five and thirty hours a week for all kinds of patients, he will ascertain what number of attendances they actually *could get*. I am sure the result would startle him.

Moreover, if he think the life and health of thirty-three hundred of his fellow-creatures worth the trouble of thinking about, I would desire him to consider how the physician could retain in his mind, without the *assistance of any notes of symptoms*, the recollection of so vast a number of cases, which on the supposition most favourable to him, he could only see three times in a fortnight for one hundred and two seconds a piece. My conclusion is that Dr. Barnes did not see a third of these people; I am sure twenty cases in two hours—precisely *eighteen minutes a fortnight for each individual*, which would include somewhat less than two seventh's of them—would be what the lawyers call *sharp practice*. I would also desire him to consider how the apothecary could carry in his head the cases of the five-sevenths of the out-patients that the physician must clearly be unable to attend to, and of the whole of the home-patients in which he might or might not have the assistance of the physician. A pretty commentary such a man's reflections would be on the assertion "that the practice of the Dispensary has always been open to those who chose to witness it!" Practice forsooth! I never knew any one who witnessed it without expressing his opinion of it in stronger language than I like to transfer to paper.

Now observe I charge no fault on any individual. I have known more or less intimately the last four apothecaries, and have known them all to be indus-

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* Some few patients may not require to be seen so often; but the vast majority should be seen much oftener. The estimate is, if any thing, too low.

† As only one third of the patients are seen at their own houses the majority of these must be very bad cases; if they are not, patients are made to come to the Dispensary who are unfit to leave their houses. I defy any one to get off the horns of the dilemma. In private practice, at least two thirds or three fourths of our patients are visited at home.

‡ This estimate is very low indeed, much too low; but if the advocates of the old system say that this it is too high I hope the subscribers will be satisfied with nothing less than a detailed statement, of what may be the average attendance or attention required for each desease in the catalogue. We shall then have the precise measure of Dispensary humanity.

Public Dispensary Estimate
1830

trious and able men, occupying their whole time and attention with the overwhelming duties of their situation. The physician in ordinary nobody could ever accuse of neglecting the prescribed attendance, or of not visiting those patients whom the apothecary thought worthy of his attention. It is the system I denounce; the *close borough system*, ruinous to the patients and disgraceful to the professor.

I might fill pages with describing the miserable consequences resulting from want of proper assistance. I have seen (and so have hundreds beside myself, for the thing is notorious) the avenues to the Dispensary crowded, the anti-room filled, with wretched creatures, worn down with poverty and disease, waiting in the forenoon perhaps from ten o'clock until twelve, or in the afternoon from two o'clock until four, in their turn, for that pittance of advice or medicine which they had hardly strength to stir abroad to seek. I state this as a matter of common notoriety, which no one can have the hardihood to deny; and when I state that patients have been frequently obliged to retire, unable to wait for the advice or medicine that they sought, I state what needs no personal authority to support, but what every man of common sense can see must necessarily result from the system.

But there were two evils which deserve particular commemoration. One was, that attendance was not given by the physician for more than three mornings in the on the other four, or in the afternoons, had either to wait from twenty-four to seventy-two hours, at the risk often of their lives, or else to come to the apothecary in the afternoons, who could not receive them without keeping probably a roomful of people waiting for medicines, and who indeed ought not to have received them at all. This is the reason why so few cases came regularly under the notice of the physician. I have rarely visited the Dispensary in an afternoon without being requested to take this part of the duty.

Another terrible evil was that from the immense pressure of business and drudgery upon the apothecary, he was unable to pay proper attention to the making up of medicines. But this was no fault of his; in no other manner could the business be got through. I could say more on this subject than I like, but if the matter were worth calculating, I could prove from the druggists' bills that the apothecary had not time to weigh out the medicines into doses, even though he had done nothing else, during the period assigned for that duty.

I have long contemplated this exposure. I was only delayed by the hope that things would be placed in the Infirmary on a more liberal footing. But the late proceedings at the Dispensary convinced me that the time was come to speak out. Towards the gentlemen elected on that occasion I had no personal hostility, I never had the slightest quarrel with any one of them.

It may be said, "why expose the workings of a system which is abandoned, and of which the failings are acknowledged?" This is not true. No one ever discovered that the Dispensary was inefficient until the friends of three young gentlemen, commencing practice, thought it might forward their interests to quarter them on it. The institution was always praised as perfection itself. At the general meetings the committee and medical officers did little but compliment each other and pass votes of thanks like children playing at the game of "give that to your next neighbour." I recollect a gentleman unconnected with the profession, for whose independent feeling I have the highest respect, stating that the poor of the city preferred the attendance of the Dispensary, to that of their ordinary medical advisers. He little suspected what a sepulchre they were whitening!

"The system is abandoned;" I regret that I have already occupied too much of the Journal to admit of my entering on this part of the business. Next week I shall bring pretty conclusive evidence that there is no material improvement in the management; that the worst parts of the system are untouched; that it is inherently vicious. And I will show how all the evils might be remedied by an open and liberal system—how the patients might be attended to, and both they and the profession alike benefitted.

In the mean time I call upon the public to mark well the course which the friends of this worthless system pursue. So far it has been as I foretold; calumny has been their only weapon; anonymous sophistry their only defence. My motives have been impeached; my arguments unanswered. Does this look like the zeal of honourable men in a good cause?

March 22, 1830. ROBERT ABRAHAM.