

Public health

Anu Lehto

1. Chronological coverage

The category of public health comprises thirty texts including some from each decade of the eighteenth century, forming a diachronic view of the emergence of public health in the century. There are, however, more works from the end of the eighteenth century than from the previous decades, which reflects the increase in publications on public health and institutions. The idea of hygiene and statistical methods, for instance, became more important, resulting in a growing number of works.

Public health is a new category in LMEMT. The emergence of the public health movement has generally been dated to the nineteenth century (e.g. Porter 1991: 111), but the range of texts in LMEMT shows that the first works on public welfare can be traced back to the previous century. A national public health movement was not yet apparent in the eighteenth century but innovative works by individual authors started to see a connection between hygiene and diseases (see also Porter 1991: 65). In addition, many institutional developments occurred during the eighteenth century, including the establishment of voluntary hospitals and the improvement of medical legislation.

2. Overview of the category

The texts in public health cover ten main themes, i.e. hospitals, dispensaries, medical practitioners, apothecaries versus physicians, medical societies, medical education, legislation, demographics, and improvement of public health and hygiene. Many texts in the category discuss new institutions, as infirmaries and hospitals were founded in the eighteenth century: in London alone, sixteen both general and specialized hospitals were established, and at the end of the century there were close to twenty hospitals in London and almost thirty in the counties (Kilpatrick 1990: 254; Porter 1991: 72; Berridge 1990: 204). The hospitals relied on donations by subscribers, and, for instance, Bowen's *An historical account of the origin, progress, and present state of Bethlem Hospital* (1783) appeals to prospective donators. The work represents the earliest description of Bethlem, which was the first hospital in England and in Europe specializing in psychiatric care (see further Andrews et al. 1997: 365). In general, texts on hospitals often underline the benevolence of citizens, e.g. Bromehead's *An oration on the utility of public infirmaries* (1772) honours the Radcliffe Infirmary founded in 1770 in Oxford and praises the philanthropic spirit of the nation in helping the sick poor by means of voluntary hospitals.

In addition to approbation, critical accounts on hospitals are encountered: in *Thoughts on hospitals* (1771), John Aikin, a surgeon and teacher of surgery, suggests improvements in the design and ventilation of hospitals and also considers the types of patients admitted to hospitals to prevent overcrowding. Aikin, nevertheless, acknowledges that infirmaries are important in teaching practical skills to medical students. Hospitals further advanced the understanding of generalized views on diseases, since the infirmaries accommodated several patients with the same disease (Lane 2001). In addition to hospitals, thirteen dispensaries were established in London between 1770 and 1800, and over twenty general dispensaries were founded outside London by the end of the century (Kilpatrick 1990: 271; Berridge 1990: 206). Lettsom's *Of the improvement of medicine in London* (1775)

presents the organization and purpose of the General Dispensary established in London in 1770, and it considers the advantages it brought to the city and medicine.

Medical practitioners and medical ethics are recurrent themes in the category. Parker's *An essay upon the duty of physicians and patients* (1715) concerns medical ethics and the relationship of the physician and patient, while in general the modern philosophical idea of medical ethics that was not dependent on the Hippocratic tradition developed in the early nineteenth century (Veatch 1997: 9). Other topics on medical practitioners range from physicians' fees and quacks to the role of surgeons in the Edinburgh Royal Infirmary. In *Observations on the mode of attendance of the surgeons of Edinburgh* (1800), Benjamin Bell, who served several years as a surgeon in the infirmary, proposes to the College of Surgeons that the infirmary should have permanent positions for senior surgeons of the College assisted by junior surgeons. Bell, however, faced criticism and the model was not adopted into practice, as a rotating system of surgeons was in use.

The texts on medical practitioners further concentrate on the controversy of apothecaries and physicians. The poor were unable to pay physicians' fees and turned to the apothecaries for treatment, although the physicians accused the pharmacists of being incompetent (see Corfield 2009). *Reasons: why the apothecary may be suppos'd to understand the administration of medicines* by the pseudonym "Apothecary" (1704) supports the use of apothecaries in treating the poor, while *Pharmacomastix* by Lucas (1741) opposes pharmacists. *Pharmacomastix* is addressed to a member of Parliament and appeals for the continuation of a statute enacted in 1736. This act allowed the Royal College of Physicians of Ireland to examine apothecaries' shops. The author, Charles Lucas, was a physician and a member of the Parliament of Ireland who had promoted the act in the 1730s.

Many works in the category public health further touch upon legislation. In *The power of gold displayed* (1785), Francis Spilsbury, a seller of patent medicines in London, attacks an act on medicine stamp duty that was passed in 1783 and 1785. The 1783 act obliged non-qualified persons selling medicines to pay for a licence and also proposed duties to prohibit quacks from distributing drugs. The second act in 1785 (25 Geo. 3, c.79) was in preparation at the time when *Power of gold* was published: instead of taxing sellers, this act attached the tax to medicines, i.e. all patent, proprietary, or advertised medicines were put under chargeable licence (see Stebbings 2013). Spilsbury argues that the stamp duty risks the lives of patients and is hurtful to the nation.

Medical societies are additionally represented in the category, as a number of texts discuss the role of organizations including the College of Physicians, the Royal Humane Society, and the Company of the Barber-Surgeons of London. The Royal Humane Society was established by charity in 1774, and it promoted the resuscitation of drowned persons (see e.g. Eisenberg 1997: 61). The anonymous work *Royal Humane Society, instituted 1774* (1790) is an annual report of the society for the year 1790, acknowledging its importance and donators, and the work also contains case descriptions of resuscitated persons. Two works concern the Company of Barber-Surgeons that split into two in 1745, the Company of Surgeons and the Barbers' Company (see also surgical and anatomical texts category description in this volume). The text *The case of the barbers of London* by Barbers' Company (1745) requests a continued union with surgeons, while in *The case of the surgeons of London* by Royal College of Surgeons of England (1745) the surgeons petition to be freed from the union, since the two professions have become separate and since the surgeons have a different education and training.

Medical education is considered in some texts in the category. *An essay concerning the growth of empiricism; or the encouragement of quacks* by Guybon (1712) is an essay addressed to the Parliament concerning regulating the medical profession and it opposes uneducated quacks. The author Francis Guybon attacks empiricism and enumerates the different fields that physicians should

have knowledge of. Further, *Sketch for a medical education* (1800) is a short account on the topics that should be taught to medical students, complete with a list of lectures attended by the author James Lind at the universities of Edinburgh and London.

Some texts deal specifically with public health and these include a text on preventing infections in towns, the effects of drinking, and hygiene in prisons and in the army. *Directions to prevent the contagion of the jail-distemper* by Layard (1772) considers the prevention of typhus in prisons and in court rooms. The author Daniel Peter Layard recommends that physicians be appointed to prisons and that they be in charge of officials to take care of cleanliness in these institutions. Sir John Pringle's *Observations on the diseases of the army* (1752) is the first work on military medicine and hygiene, and emphasizes the danger of military hospitals spreading diseases. The text went through several reprints, and was followed by many more on hygiene in the army, widening the scope to sailors and military hospitals soon after.

3. Authors and audiences

Works on public health vary in their target audiences and authors and some of the texts are written in the name of institutions. Authors and audiences form three main types. The first group consists of texts that are written by medical institutions and aimed mainly at professional readers or potential subscribers. The second type includes works by learned private authors directed towards institutions. The majority of the texts belong to the third type, namely texts on public welfare for wider audiences, although the main readership can be assumed to be professional rather than lay audiences. In general, most of the known authors in public health are university educated physicians and the works are mainly meant for learned readers.

Institutional works are written by the London Hospital (*An account of the rise, progress, and state of the London Infirmary* from 1742), the Royal College of Surgeons of England (*The case of the surgeons of London* from 1745) and the Royal Humane Society (*Royal Humane Society, instituted 1774* from 1790). Some texts have a named author who represents the institution. Thus, John Coakley Lettsom introduces the General Dispensary in *Of the improvement of medicine in London* (1775), as he acted as a physician in the Dispensary from 1773 onwards. The following extract (1) illustrates the general organization of the Dispensary:

- (1) The Dispensary is situated in Aldersgate-street, where a physician attends at eleven o'clock every day (Sundays excepted) to give advice to such out-patients as shall come recommended, and to visit the home-patients at the places of their abode, as the case may require. – By out-patients are meant, such as are able to attend the Dispensary; by home-patients, such as are not able to attend. ... An apothecary constantly resides at the Dispensary, to receive letters of recommendation, and compound and deliver out the medicines prescribed by the physicians. (Lettsom, *Of the improvement of medicine in London*, 1775: 5–6)

The extract defines the location of the dispensary and introduces the different types of patients as well as the duties of physicians and apothecaries. The readers of these texts are professionals or members of the general public who are current and potential subscribers. This audience is visible, for instance, in *An account of the rise, progress, and state of the London Infirmary* (London Hospital 1742), as the text lists the contributors and gives numerical information on cured patients. However, there was no centralized public health system, which fact explains the lack of works written by the central government.

Works by private persons directed towards institutions are targeted at hospitals, the Parliament, and medical institutions. Many of these texts are written in the form of a letter, and the authors propose, for instance, changes to existing medical practices and legislation. *Considerations on the bills of registers* (1759) is an anonymous letter¹ to a member of Parliament concerning a bill that proposes raising funds for the Foundling Hospital by charging for the recording of births, deaths and marriages in parishes. The institution, like many others, was growing in size, and in 1756 Parliament decided to grant money to the Foundling Hospital children's home on the condition that it admitted all children under two months old, causing the number of admissions to grow significantly (see Andrew 1989: 99–101). The author opposes the monetary support, arguing that the institution is already accommodating too many children, which increases costs and encourages parents to abandon their children. The 1756 act was cancelled in 1760. As the texts are targeted at institutions, the readership can be assumed to be learned.

The third type of relationship between authors and audiences is more general, as it concerns works that centre on public welfare. The works are mainly written by professional authors and generally aimed at learned readers, but some are targeted at a wider readership. The anonymous work *An essay for reforming the modern way of practising medicine in Edinburgh* (1727) proposes that physicians' fees should be lowered in Scotland in order to ensure equal treatment for less wealthy patients. In addition, in his *A friendly admonition to the drinkers of brandy* (1733) Stephen Hales, a natural philosopher and priest, opposes excessive alcohol consumption and explores its medical effects on the nation. At the beginning of the eighteenth century, gin and other distilled liqueurs posed a problem, especially in London. Hales's text (1733) was influential and it was reprinted several times up until the turn of the nineteenth century. Further, in *The method of preventing and removing the causes of infectious diseases* (1784), George Borthwick pays attention to diseases and filthy environments, and gives instructions for preventing infections in towns and institutions by means of municipal planning and cleanliness (see further Porter 1991). The instructions are numbered and the author reports on the title page that he uses "plain simple language" to make the instructions understandable for lay readers, too. The following excerpt gives advice and admonishes larger cities to establish hospitals for patients with infectious diseases:

- (2) XXXVI. In every large Town there ought to be commodious hospitals for the reception of medical, as well as surgical patients, and in such hospitals there should be a suite of rooms for the accommodation of such servants of the inhabitants of the Town, as may be taken ill of infectious diseases. (Borthwick, *The method of preventing and removing the causes of infectious diseases*, 1784: 22)

4. Discourse forms and genre

The selection of texts contains a variety of genres and discourse forms. The titles of the works mention the genre labels of *essay*, *account*, *letter*, and *observations*. Several works are argumentative and centre on one aspect within public health in need of improvement. By contrast, only a few are instructive, i.e. providing guidelines for hygiene and other national health concerns. Layard's *Directions to prevent the contagion of the jail-distemper* (1772) gives directions to prevent infections in prisons and court. Some texts are expository and introduce institutions including hospitals and medical societies. *An account of the rise, progress, and state of the London Infirmary* (London

¹ Some sources attribute the text to Francis Maseres.

Hospital 1742), for example, reports on the founding and the first eighteen months of the hospital to its subscribers (see Wilson 1996; Andrews et al. 1997: 367). The argumentative text type is also present in this text, as the purpose was to influence readers' opinions by discussing the benefits of hospitals and promote them.

The use of statistics improved at the end of the eighteenth century, which is visible in the works. The basis for this discourse form was laid even earlier, as Bills of Mortality had been collected since the late sixteenth century to track the number of baptisms and the number and causes of deaths. public health comprises two texts on demographics, including one on medical arithmetic and another on medical statistics relating to the town of Maidstone in Kent. William Black's *An arithmetical and medical analysis of the diseases and mortality of the human species* (1789) was one of the earliest texts on medical arithmetic, exploring the population, diseases, and deaths statistically (see further Rusnock 1995, 2002). Black examines the Bills of Mortality of London and relates the statistics to such features as geography, climate, and age.² Another work, John Howlett's *Observations on the increased population, healthiness, &c. of the town of Maidstone* (1782) provides statistical information on baptisms, burials, and marriages and compares the numbers to past decades in various towns. As opposed to many other demographers of his time, Howlett observes population growth and relates his statistics to various other findings, illustrating a decreasing mortality rate due to inoculation and cleanliness, which combated epidemics. He also found out that the average life expectancy of men and women in Maidstone was better than in many places elsewhere.

Letters are frequent within this category. They are usually argumentative in their text type and aimed at institutions, but sometimes more general addresses are used. For instance, *Reasons: why the apothecary may be suppos'd to understand the administration of medicines* (1704) is written in the form of a letter from an anonymous apothecary to a physician, defending the apothecary's right to prescribe medicines. Letters follow set conventions, beginning with an address to the recipient such as *sir* and by favouring the first person singular in the body of the text.

Some of the works are polemical and part of ongoing controversies. *A letter from a subscriber to the York Lunatic Asylum* (1788), for example, was written under a pseudonym by Alexander Hunter, a founder and physician at this institute. It is addressed to the infirmary and deals with the management of the hospital. Opened in 1777, the hospital originally treated only poor patients until a change in policy made it possible to admit more wealthy people suffering from mental diseases as well. At the same time, the payment system was altered: instead of a fixed fee for all patients, the patients or their parishes were charged according to the means of the sick person. Hunter supports the new payment system and attacks, in particular, the work written by an earlier governor of the York Asylum (see Digby 1986: 6; Smith 2007).

Extracts from legal texts that explore legislation and individual charters are included in some works. *A justification of the right of every well educated physician* by Stanger (1798) is an extensive work on the admission of licentiates to the College of Physicians following the charters the College was bound to. The College inspected all physicians aspiring to become fellows and to practise in London. Later this was extended to inspecting would-be physicians who might practise anywhere in England. However, a by-law excluding physicians educated in foreign universities from College membership caused dispute among its fellows and licentiates. The author, Christopher Stanger, a physician in London and a licentiate from the College of Physicians, supported the right of all physicians to apply

² The first edition of the work was published in 1788 and the corrected version a year later. Black was a licentiate of the Royal College of Physicians and had his own practice in West- minster in central London.

as a fellow to the College; he had earlier appealed to the Royal College of Physicians and to law courts together with other licentiates, but these efforts had not been successful. His work discusses the Acts of Parliament and acts of the College, arguing that they should not exclude licentiates from other universities and examining the petition and court decisions.

A number of texts in the public health category contain tables and lists. The works that introduce the organization of hospitals, for instance, include lists of subscribers' names and tables concerning monetary issues and the numbers of cured patients. Illustrations are rarely encountered, but the title page of Lettsom's *Of the improvement of medicine in London* (1775) provides two sketches of the architectural design of the General Dispensary and its layout. Further, the title page of Bowen's *An historical account of the origin, progress, and present state of Bethlem Hospital* (1783) depicts sculptures by Caius Gabriel Cibber that are situated at the entrance gate to Bethlem Hospital; the sculptures represent the figures of melancholy and raving madness, demonstrating the purpose of the infirmary (Andrews et al. 1997: 183).

The dialogue form is not common, as there is only one such discourse in public health. *An essay upon the duty of physicians and patients* by Parker (1715) treats medical ethics by means of two debates: in the first dialogue the participants discuss issues of proper care and the rights of the patient, while the second dialogue concerns the qualities of physicians, such as reputation and appearance.

5. Original compositions and translations

The majority of the authors are of English origin, but some are Scottish or Irish. All works were originally written in English and there are no translations within the category. Some of the texts, however, contain longer Latin excerpts, e.g. the anonymous *Animadversions on the constitution of physick* (1768) cites the Latin charters of the College of Physicians and relates them to the present condition of society. The work is a polemical text dedicated to Parliament, arguing that the College of Physicians has too much power concerning who is licensed to practise as a physician. In the late 1760s, many members of the College disapproved of the policy that only physicians educated in Oxford and Cambridge were allowed to apply for fellowship, and the issue is further treated in 1798 in Stanger's *A justification of the right of every well educated physician*.

6. Continuity versus new trends

Although public health is a new category in our corpus series, some of its themes can be traced back to the previous eras of medical writing and to the EMEMT corpus. The appendix titled *Medicine in society* in EMEMT contains texts on the role of physicians and on epidemics (see Taavitsainen & Suhr 2010). It includes, for instance, official orders for preventing plague epidemics on a national level that enhance the importance of hygiene. In the present category, the idea of sanitation in towns and in institutions, the army, prisons, and court rooms, receives a great deal of attention. The EMEMT appendix also contains critical accounts of physicians, and this topic continues in public health, as does the controversy between apothecaries and physicians. For instance, *Deplorable state of the sick* by an anonymous author (1707) appeals to changes in the medical practices of apothecaries, physicians and surgeons and is addressed to dispensary physicians, the College of Physicians and the House of Commons. The author argues that the poor are not given quality medicines at affordable prices.

Public health comprises several new trends in medical writing during the eighteenth century. These developments include a growing understanding about hygiene and the prevention of contagious diseases as well as the founding of voluntary hospitals and dispensaries supported by a national spirit of benevolence. In addition, there was an increase in statistical methods at the end of the eighteenth century. Authors also became more interested in legislation as a means of regulating the field of medicine: the texts in the category seek to control, for instance, the price of medicines and medical practitioners through legislation. The public health category further encompasses texts related to medical education and medical societies. Many of the texts consider the relationship of the patient and the physician and medical ethics and, in general, seek to improve the status of patients. These emerging themes concerning public welfare and institutions evolved into a centralized public health movement in the nineteenth century.