

The Seamen's Hospital Society: a progenitor of the tropical institutions

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Summary

1999 marks the centenary of the two major British Schools of Tropical Medicine, founded in London and Liverpool, respectively. The origin(s) of the former clearly lies in the Seamen's Hospital Society, which dates from 1821. It seems likely that the foundation of this school (with Government support) also acted as a catalyst for the school at Liverpool, which in fact opened its doors a few months before that in London.

Keywords: Seamen's Hospital Society; Schools of Tropical Medicine; history of medicine

For many centuries, as was the case with most other countries, Britain was largely dependent for survival on her merchant navy (Mercantile Marine).¹ Unlike their counterparts in the Royal Navy (RN), sailors in the merchant service were poorly cared for both physically and spiritually. During the winter of 1817–18, which according to contemporary accounts was a severe one, the appalling plight of seafarers who were milling around the Pool of London in large numbers led to a public appeal and formation of the Committee for the Relief of Distressed (Destitute) Seamen²; this charitable foundation was launched by subscription. Its successor, the Seamen's Hospital Society (SHS) officially came into being on 8 March 1821, two of its more enthusiastic supporters being William Wilberforce (1759–1833) and Zachary Macaulay (1768–1838). Early meetings were held at The City of London Tavern, in Bishopsgate. The RN proved extremely supportive of the newly formed Society and leased a 50-gun hulk, HMS *Grampus* (which still appears on the SHS letter-head), anchored off Deptford, as the first hospital ship.² This vessel rapidly proved too small for the expanding clinical requirements of the SHS, and in 1831 the RN granted use of the 104-gun ship HMS *Dreadnought*, which had served at the Battle of Trafalgar.²

In 1832 an event of momentous significance occurred in the early history of the SHS; John Lydekker (1778–1832),³ a member of Lloyds and prominent ship owner (his five vessels plied the South Seas and Greenland collecting whale oil) suddenly died of cholera, which was (during the first major epidemic) rife in London. Regrettably, no image of this important benefactor exists today, but we know he was buried at St Dionis Backchurch, a Wren foundation which has since been destroyed. A memorial commemorating his beneficence was later established at Lloyds, and this has recently been removed to the Museum of the Docklands. In his uncontested Will (written immediately before he died, and not witnessed) he left the Society nearly £60 000 which led to a successful approach to Parliament for an Act of Incorporation (1833); this not only gave greater legal status to the organisation but also conferred a number of additional rights on the SHS. In 1857, the *Dreadnought* was replaced with a larger hulk, HMS *Caledonia* (renamed *Dreadnought*) which had formerly held 120 guns.² Following a great deal of 'political' activity, the base for the clinical activities of the institution were transferred, in April 1870 to dry land (figure 1); the RN had eventually granted, at nominal charge, the Infirmary and Somerset Ward of the Royal Hospital, Greenwich, which immediately became known as the *Dreadnought (Seamen's) Hospital*.² This fine, listed building (figure 2) will soon house the library and refectory of Greenwich University.

Disease(s) on the hospital ships (1821–1870)

The extant records of the SHS allow one to document the major diseases encountered during this 50-year period: 'ague' (which undoubtedly encompassed numerous diverse febrile illnesses prior to Laveran's demonstration (in 1880) of the causative agent(s) of *Plasmodium* spp infection), was a major cause of morbidity and mortality. Other infectious conditions were epidemic typhus, dysentery, and 'enteric fever' (the causative agents of these entities were not delineated until the 'germ-theory' of disease was enunciated in the latter years of the nineteenth century). Cholera swept across Britain in three major epidemics between 1831 and 1854; the SHS was instrumental in producing posters for captains of ships drawing attention to the necessity for rapid medical attention to men with acute diarrhoeal disease, whilst George Budd⁴ and George Busk,⁵ a physician and surgeon, respectively (see below), documented the prevalence and treatment of individual cases of this disease. The SHS also carried out a great deal of work to prevent scurvy in the Mercantile Marine. This disease had, by the early nineteenth century, almost disappeared from the RN as a result of the pioneering work of James Lind (1716–94) and Gilbert Blane (1749–1834).

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Accepted 5 July 1999

Based on a paper presented at a symposium on Tropical Medicine Institutes held at the Wellcome Institute for the History of Medicine on 4 June 1999

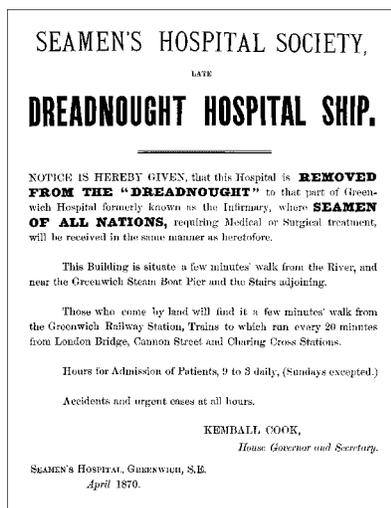


Figure 1 Poster (issued by the SHS) advising removal of all clinical facilities from the last of the hospital ships to the Dreadnought Hospital, on dry land (at Greenwich) in April 1870 (SHS Archive; reproduced with permission)



Figure 2 The Dreadnought (Seamen's) Hospital, Greenwich which after 1870 became the 'flagship' hospital of the SHS (SHS Archive; reproduced with permission)

However, due to adulteration and poor storage of lime (and lemon) juice in the merchant navy, and discipline which was far less exacting than that in the RN, this disease continued to be a menace within the Mercantile Marine until the early twentieth century. By introducing the Mercantile Maritime Amendment Act of 1867 (largely at the initiative of Harry Leach (1836–1879),⁶ who was to become the first Port Medical Officer of the City of London), which made inspection and testing of lime-juice mandatory, the SHS was very largely instrumental in eradicating this disease from the Mercantile Marine.⁷ Other diseases which assumed enormous practical importance included tuberculosis, syphilis and gonorrhoea. Smallpox (a highly contagious communicable infection) was never, knowingly, accepted on any of the SHS ships.

Some early physicians and surgeons

Several senior medical personnel served (voluntarily) on the hospital ships. George Roupell (1797–1854),⁸ who subsequently became senior physician at St Bartholomew's Hospital, London, and died of cholera in the 1853–54 outbreak, made important observations on this disease and also on typhus. George Budd (1808–1882)⁴ laid a claim to the title of the major pioneer of hepatology and gastroenterology, having written two monographs (*On Diseases of the Liver*, 1845, and *On the Organic diseases and Functional disorders of the Stomach*, 1855). George Busk (1807–1886),⁵ one of the early surgeons on the *Grampus* and the first *Dreadnought* ship, was also an outstanding polymath; he was, for example, an authority on the Gibraltar skull (an early example of Neanderthal man). An early piece of research carried out at the land-based Dreadnought hospital, was a clinical trial of the newly introduced 'open-air' treatment for pulmonary tuberculosis⁹; this took place at the 'Ranlett' ward, situated on the roof of the main hospital. The *Dreadnought* hospital also encompassed a pathology laboratory (shortly also to become part of the University of Greenwich), and museum (largely based on one assembled by Busk [see above]).

Service commitments of the SHS

In addition to the *Dreadnought* hospital, the SHS established in 1890 a Branch Hospital,² situated between the Royal Albert and Victoria Docks, later to become the nidus for the London School of Tropical Medicine; the foundation stone had been laid (by the Prince of Wales) on 15 July 1889. In addition, dispensaries (for merchant seamen) operated at East India Dock Road (1880) and Gravesend (1887). In 1918, the 'Angas' convalescent home was opened (at Cudham, Kent), and in 1921 King George's Sanatorium (at Bramshott, Hampshire) was made available for merchant sailors convalescing from tuberculosis. Later, the Tilbury hospital (formerly the Passmore Edwards hospital) situated at the Tilbury dock-gate was opened (having taken the place of a small dispensary). In 1927 a brief 'flirtation' with Marseilles was launched, but due to various problems (mostly political and financial) only survived for 5 years.

Teaching commitments of the SHS

In 1877, the SHS inaugurated a School of Nursing, founded on Nightingale lines, which was a pioneering institution, antedating most nursing schools in major London teaching hospitals. It is especially relevant in the context of this account because it formed the basis for *tropical* nursing courses, which remain in operation (at the London School of Hygiene and Tropical Medicine) to this day.¹⁰ The 'new' nurses' home (established in the 1920s after an appeal by Lord Devonport) will shortly become residential quarters for the University of Greenwich.

In February 1898, the SHS Committee of Management received a letter from the Colonial Office (signed by H Bertram Cox) requesting the formation of a School of *Tropical Medicine*¹¹; it contained the following text:

"Sir,

The question of improving the medical service of the British Colonies in West Africa has been receiving Mr Secretary Chamberlain's [the Rt Hon Joseph Chamberlain (1836–1914) was the British Secretary of State for the Colonies between 1895 and 1903] serious consideration.

At present the newly appointed medical officers receive no special training in the diagnosis and treatment of tropical diseases before they proceed to West Africa, and, although an attempt is made to give them whenever possible some preliminary instruction at the Head Quarters' Hospital of the Colony, this course cannot be followed in every case and the arrangement is, on the whole, unsatisfactory."

He continued:



Figure 3 Woodcut, dated 1943, showing a view from the Nurses' Home, Albert Dock Hospital; the close proximity to the Royal Albert Dock is clearly shown (SHS Archive; reproduced with permission)

"He is advised [presumably by Dr (later Sir) Patrick Manson (1844–1922), the 'father of tropical medicine'] that the experience and training to be obtained at the Seamen's Hospital would be the most suitable in the present instance, and he would be greatly obliged to the Managing Committee if they could give him their valuable assistance in the matter."

The letter suggested further, that the Foreign Office should also be involved: "The Secretary of State for Foreign Affairs is being asked whether it is wished that the Protectorates in East and West Africa, at present administered by the Foreign Office, should be included in the proposed scheme, but, in any case, it is not probable that more than six officers would be under instruction at any one time."

The SHS readily acceded to this request, and the London School of Tropical Medicine was opened for teaching and research on 2 October 1899, but not before an acrimonious correspondence from three of Manson's colleagues (John Curnow and John Anderson, both physicians, and George Robertson Turner, a surgeon) at the *Dreadnought* hospital.¹² Their dissatisfaction emanated from (i) a belief that other venues (eg, the Royal Army Medical Corps hospital (the Victoria Hospital) at Netley, and the Royal Navy Hospital at Haslar) were eminently more suitable for a *tropical* school, (ii) that establishment of a School at the Albert Dock Hospital would deprive the *Dreadnought* Hospital of most of its 'tropical' cases, and (iii) that the scheme as outlined contained allegations that they were themselves incompetent in dealing with 'tropical' cases. In retrospect, these colleagues seem to have been correct in that there were not great numbers of 'tropical' cases at the Albert Dock Hospital,¹³ which had in fact been founded to deal with the acute medical problems (largely injuries) of sailors (and others) in London's docklands. The Albert Dock Hospital (the cradle of London's tropical medicine) was rebuilt in 1936/7, following collapse of its foundations (figure 3), and has recently been raised to the ground!

In 1906, the SHS launched a School of *Clinical* Medicine at the *Dreadnought* Hospital¹⁴; this initiative was important in postgraduate education in the metropolis in the early twentieth century, and attracted many influential physicians and surgeons to its ranks. This school remains, however, poorly documented today.

Subsequent venues of the 'tropical' discipline

The SHS continued sponsoring tropical medicine until the National Health Act of 1946. In 1920, the School (and clinical facilities) moved to Endsleigh Gardens, London WC1; here the two institutions remained in a single building, which remains extant today. During the second world war, the *clinical* component (the London School of Hygiene and Tropical Medicine had been opened at Keppel Street in 1929) moved to the *Dreadnought* Hospital, Greenwich, where it occupied a mere 10 beds. From 1944 to 1951 it was located at 23 Devonshire Street, W1; in 1951 it moved to St Pancras, and since 1998 it has consisted of a small 'department' at University College Hospital.

Epilogue

There can be no doubt that the SHS (at Chamberlain's request) was solely responsible for launching the formal discipline 'tropical medicine' not only in London but also elsewhere. The Liverpool School of Tropical Medicine¹⁵ opened its doors to teaching approximately 6 months before that in London; however, without the London 'initiative' it seems unlikely that the Liverpool merchants would have been so financially generous in establishing their 'rival' School. Shortly afterwards all of the great colonial powers (throughout Europe) instituted their own Schools of Tropical Medicine.

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