

## **House of Recovery Cork Street Fever Hospital**


### **Annual Report and Physicians Report 1810.**

**The physician's report this year begins by stating that in these reports 'much novelty cannot now be expected', indicating a certain weariness in repeating the same information year in and year out. He concludes his report by stating that the benefit to society, of the hospital, is to administer relief which enables the poor to help themselves.**

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FEVER HOSPITAL  
CORK STREET.

Reports  
and other  
Documents  
relating to  
The Fever Hospital  
and  
House of Recovery  
Cork Street  
Dublin

From the Commencement, to 4 January 1818

Collected by J. L. Maguay

and when he is no more, let the Book  
be sent to the Managing Committee.

A. D. 1819

*J. S. Maguire*

ANNUAL

REPORT

OF THE

*MANAGING COMMITTEE*

OF THE

HOUSE OF RECOVERY,

AND

*FEVER-HOSPITAL,*

IN

Cork-Street, Dublin,

*For the Year ending 4th January, 1810,*

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Dublin:

PRINTED BY CHARLES DOWNES,

WHITEFRIAR-STREET.

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1810.



*Annual Report of the Managing Committee of  
the House of Recovery, and Fever Hospital  
in Cork-Street, for the Year ending the 4th  
January, 1810.*



THE Committee in their Report for the year ending the 4th January, 1809, had to remark that the maintenance income was less than the expenditure upwards of one hundred pounds; by the statement of the income and expenditure for the year ending 4th January, 1810, now handed to the public, they are sorry to observe the same circumstance occurring: it will thereby appear that there is a deficiency of £63. 2s. 5d. In the subscriptions and donations they satisfactorily see an increase, but it is necessary to remark, that in consequence of the enlargement of the district last year, (comprising the entire of the city within the Circular-road) the expenditure, (principally under the head of salaries) has also unavoidably been increased, and unquestionably would have been increased still more, if the number of patients had increased in pro-

portion to the enlargement of the district; instead of this which might naturally have been looked for, the fact has been, that fewer were admitted, than in the preceding year, when only the South side of the river was attended to: for observations on this fact they refer to the Medical Report. From the evidently striking advantages arising from this Hospital, both to *rich and poor*; the Committee confidently rely that it will not be suffered to want funds to defray its necessary expenses.

The Committee avail themselves of this opportunity, to congratulate the Public on the success of an Institution, which has proved the happy means of giving a considerable check to the progress of *Contagious Fever*; and consequently of having improved the health of the inhabitants of this populous city: *as it is a fact which cannot be too generally known*, that since the opening of the Hospital in 1804, the number of persons for whom application has been made for admission has diminished, although at the commencement, and for some time thereafter, the district relieved comprehended only about five parishes in the Liberty, and neither servants nor persons affected with Scarlet Fever were received; whilst since 5th January, 1809, the limits of admission have been extended to the entire of the city of Dublin, within the Circular road, and servants as well as every other description of poor, labouring under contagious fever (*Scarlatina* included) are now admissible.

In order to secure a continuance of these benefits, the Committee annex the code of advice, which the porters attending the Hospital Carriage, leave at every House from whence a patient is removed; which they earnestly hope will be strictly followed, by those persons to whom it is more immediately addressed; as well as by the **INHABITANTS** of the **CITY** of **DUBLIN** at large: and in a measure of this important nature, the Committee confidently expect the co-operation and assistance of all humane and public spirited individuals.

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### ADVICE.

Though you have sent your friend to the House of Recovery, yet the infection may still remain in your rooms and about your clothes; to remove it, you are advised to use without delay the following means:

1st.—Let all your doors and windows be immediately thrown open, and let them remain so for two hours.

2dly.—Let the house or room whence the patient is removed, be immediately cleansed; all dirty clothes, utensils, &c. should be immersed in cold water; the bed clothes, after being first steeped in cold water, should be wrung out and washed in warm water and soap.

3dly, Let

3dly.—Let the clothes you wear be steeped in cold water, and afterwards washed; and let every box, chest, drawer, &c. in the infectious house be emptied and cleansed.

4thly.—If you lie on straw beds, let the straw be immediately burned, and fresh straw provided, and let the ticken be steeped in cold water.

5thly.—White-wash all your rooms, and the entrance to them; with lime slacked in the place where you intend to use it, and while it continues bubbling and hot.

6thly.—Scrape your floor with a shovel, and wash it clean, also your furniture.

7thly.—Keep in the open air, for the space of a week, as much as you can.

And Lastly.—Wash your face, hands and feet, and comb your hair well, every morning.

N. B.—The benefit of this Advice, after infection has entered your dwelling, you will soon feel; and persevering in your attention to it, will, UNDER GOD, preserve you from all the variety of wretchedness occasioned by infectious Fevers.

*Attend to it then with spirit and punctuality, for be assured that*

## CLEANLINESS

will check DISEASE, improve your HEALTH and STRENGTH, and increase your COMFORT.



The Committee, although they have the foregoing form of advice left at the habitations from whence patients are brought to the hospital; do not consider that sufficient, the object of the Institution being not only to relieve the sick-poor, but also to check the progress of contagion, they employ men to white-wash with hot lime such apartments as are reported by the physicians to stand in need of it, and where contagion of extraordinary virulence has been found to exist, more powerful measures have been resorted to with success.

The Committee consider it not improper to repeat, that no recommendation is necessary to entitle to admission, but that applications for admission must be left at the Letter-box at the eastern entrance to the hospital before half past nine o'clock in the morning, in order that the applicants may be visited by the extern physician in such time, as that those whose diseases are ascertained to be fit for admission may be brought to the hospital on that day. No patient can be admitted until seen by one of the physicians of the hospital, nor in any other manner than in the hospital carriage, which is on springs, and the patients are placed therein, on a bed in a recumbent posture.

24th May, 1810.

Admitted from 14th May, 1804, to 4th Jan. 1810, inclusive	-	-	-	5943
Discharged cured	-	-	5442	
Died	-	-	469	
Remain in Hospital 5th January, 1810,			32	
			<u>5943</u>	

In the Hospital 5th January, 1809,	-	-	-	29
Admitted from 5th Jan. 1809, to 4th Jan. 1810, inclusive				1056
				<u>1085</u>

Discharged cured	-	-	973	
Died	-	-	80	
Remain in Hospital 5th January, 1810,			32	
			<u>1085</u>	

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*Committee :*

Edward Allen	Joseph Hone
John Barrington	John David La Touche
Samuel Bewley	Peter La Touche, Jun.
Thomas Crosthwait	Randall Mac Donnell
Richard Darling	George Maquay
William Disney	John Leland Maquay
Thomas Disney	John Orr
William English	George Renny
Arthur Guinness	Edward Swanwick
William Harding	Luke White
John Hone	

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**PHYSICIANS.**

Surgeon,  
 Register and Purveyor,  
 Apothecary,  
 Collector,  
 House-keeper,

{ Francis Barker  
 William Stoker  
 George Hagan  
 Richard Gamble

Samuel Wilmot  
 Wm. Richardson  
 M. O'Donoghue  
 Henry Harris  
 Jane Leedom

*Servants usually employed at the Hospital :*

Three porters, two whitewashers, nine nurses and even female-servants.

*Account of Income and Expenditure of the House  
Dublin, for the Year ending*

	£.	s.	d.
To Rent and Taxes of Premises - - -	87	0	6
Maintenance of Patients and Servants -	656	17	10½
House-bedding, Furniture and Clothing wear and tear - - - - -	258	7	9
Salaries of Officers, Nurses and Servants -	920	4	11½
Fuel, Soap and Candles - - -	145	12	0
Printing, Stationary and Advertising -	129	3	9½
Medicines, including Wine and Spirits -	209	2	6
Incidental Expenses, including Expense of Horse	77	3	5
Whitewashing Habitations of the Poor -	91	16	11½
Repairs - - - - -	5	18	3½
	<hr/>	<hr/>	<hr/>
	2581	8	0½
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*Account of Property of the Institution, exclusive*

	£.	s.	d.
To Furniture and House-bedding - - -	1560	6	8
Clothing - - - - -	255	1	0
Government Stock - - - - -	256	9	4
Treasurers' - - - - -	403	6	3
Purveyor - - - - -	2	6	0
	<hr/>	<hr/>	<hr/>
	2477	9	3
	<hr/>	<hr/>	<hr/>

*of Recovery and Fever Hospital, Cork-Street,  
4th of January, 1810.*

	£:	s:	d.
By Parliamentary Grant, Net - - -	999	12	11
Subscriptions - - -	1346	2	7
Donations - - -	122	18	3½
Amount of Hay and Grass, deducting Expenses	37	3	0
Interest on Government Stock -	12	8	10
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	2518	5	7½
Excess of expenditure above income -	63	2	5¼

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2581 8 0¼

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*of Buildings and Premises, 5th of January, 1810.*

	£.	s.	d.
By Net Property of the Institution = =	2477	9	3

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2477 9 3

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ANNUAL  
MEDICAL REPORT,

OF THE  
*FEVER-HOSPITAL,*

IN  
Cork-Street, Dublin.

1810

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ANNUAL  
MEDICAL REPORT.

IN the medical reports of the Fever Hospital, much novelty cannot now be expected. Annual publication on the same disease must at length exhaust the more usual topics of remark, and leave but little to add to former statements.—To this observation there is in the present instance however some exception, as circumstances have occurred within the last year which exhibit the establishment increasing in utility as its sphere of operation becomes more extended.

Until the commencement of 1809, the benefits of the Hospital had been confined to the southern portion of the city, but at the beginning of the year, the district was made to comprehend the whole city: thus, not only was a greater number of the sick relieved, but also, the means necessary to eradicate contagion were rendered more effective, as the sources of infection which must have extended their influence from the north to the south side of the river were more completely intercepted.—This arrangement has already produced effects signally beneficial; it may even be asserted that the preventive system has been more conspicuously useful since its extended operation than it was at any former period.

By adding the northern portion of the city, there was an increase of the population to be relieved amounting to about  $\frac{1}{2}$ d. (a) It might be supposed that a proportionally increased number of Patients had been admitted into the Hospital: on the contrary, the number of Patients received during 1809, has been less than in preceding years; thus in the year 1808, 1071 Patients were admitted, when the Hospital district was limited to the south side of the river; and in 1809, 1052 Patients, when it comprehended the whole city.

To obtain a more exact estimate of the effects arising from this arrangement, we should therefore subtract the number of Patients received from the *north* side of the river from the total number admitted within the year, and the statement will be thus,

Total number of Patients admitted in 1809	-	1052
Number of do. received from north side of river	- - - - -	223
Difference	- - - - -	829
Total number admitted in 1808	- -	1071
Total number admitted this year, from the same district	- - - - -	829
Reduction in the number received	- -	242
		That

(a) The population on the northern side of the river, amounts to about 61,049 inhabitants.—See Dr. Whitelaw on the population of Dublin.



\* That this <sup>reduction</sup> should be attributed to the Fever Hospital can hardly be questioned, and is indeed nearly certain, from the consideration that the numbers have diminished *progressively* during each of the last four years, which proves the effect to have arisen not from any adventitious circumstance, such as change of season or the varying nature of the epidemic, but from the operation of a system proceeding in the attainment of its object with constancy and uniformity.†

Years.	Total No. of Patients.	Contagious Fever.	Scarlatina.	Previously ill.
1806	1264	1264	0	918
1807	1100	1056	44	501
1808	1071	1047	24	443
1809	1052	1036	16	226

That the influence of Contagion diminishes, will appear highly probable from inspection of the above table, which

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shews

\* It must however be observed that the number of Patients admitted from these different quarters has not been proportioned to their relative population: the number from the north side of the river not exceeding  $\frac{1}{2}$ th or  $\frac{1}{3}$ th of the total number of Patients admitted, although the population of that part of the city is equal to about  $\frac{1}{3}$ d of the whole. This probably depends on various causes, among these, as the chief, we may rank the greater distance from the Hospital and the less dense population of that quarter.

† These conclusions rest on the supposition that the resort to the Hospital continues the same; this the Physicians believe to be the case, as they have found among the poor an increased disposition to accept the benefits of the charity, now more known among them than formerly,

shews the number of persons *previously ill* of Fever in the Patients dwellings progressively to have lessened during four years past: Thus in the year 1806, this number was equal to above  $\frac{3}{4}$ ths of the Patients admitted in 1807 it was reduced to less than  $\frac{1}{2}$ , in 1808 to about  $\frac{2}{3}$ ths, and in 1809 to less than  $\frac{1}{4}$ th of the same numbers respectively.

Another striking proof of the influence exerted by the Fever Hospital system on Contagion, we obtain by comparing the number of persons *previously ill* in the Patients dwellings at the southern and northern sides of the river. If Fever in its progress from the sick to the healthy is checked by the interference of the Hospital, we might expect that the effects of Contagion were least observable in that quarter of the city, where the Hospital system has continued to operate for the greatest length time, and accordingly that fewer instances of the disease originating from this cause should appear at the southern than at the northern side of the city. This supposition is confirmed by experience, for we find (by referring to the Hospital registry) that the number of persons previously ill of Fever in the Patients dwellings at the southern side of the river, has not been more than  $\frac{1}{8}$ th of the total number admitted from that quarter, but at the northern side this number is nearly equal to half that of the Patients received into the Hospital

from

from this portion of the city. Thus the number of Patients admitted from the south side of the river was	828
The number previously ill in the dwellings from which these Patients had been taken	136
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Number of admissions from the north side of the river	223
Number previously ill in the dwellings of the latter Patients	90
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These facts at once exhibit the influence of contagion in extending, and of the preventive system in restraining the progress of Fevers.

To the above, another very important fact must be added, which it is believed the experience of most if not all the extensive practisers of medicine in this city will confirm: that among the upper ranks of Society continued Fever is much less frequent than it formerly was, and that instances of Typhus the most infectious kind of Fever now rarely occur among these classes. Thus the contributors to this charity are largely repaid by immunity from a disease, formidable at once to the sufferer and to those around him.

Efficacious as the preventive system may have been, results still more important may be expected from its continued and more complete operation: when means may be devised to remove more effectually the infection which must remain attached to the bedding or furniture of the sick, or to the persons of those

who have lived in the same apartment: when the poor shall adopt more completely the cleansing and ventilation of their rooms, and fully impressed with the truth of the maxim, that prevention is better than remedy, may be induced to act accordingly: on this subject, the valuable suggestions of Dr. Haygarth, of Bath, published in the last number of the Reports of the Society for bettering the condition of the poor, deserve attention: experience of the past should excite exertion and sanguine hopes for the future.

The proportional number of females admitted during the last year is greater than at any former period; this must be ascribed principally to the enlargement of the Hospital district and consequent reception of Patients from a quarter of the city in which the Hospital system is new, and where Fever is extended more by Contagion than by other causes, and for this reason affects females who from their habits of life are more exposed, in a greater degree in this, than in other quarters of the city.

Although the number of Female Patients admitted into the Hospital since its opening, has considerably exceeded that of the males, we are not to infer the greater prevalency of Fever among the female sex; on the contrary calculating with reference to the numbers of each sex in this city, we are led to the conclusion, that men more frequently than women are

the subjects of Fever. The number of male and female Patients admitted to the Hospital since its opening, has been, of males 2732, of females 3193.—The number of males and females in the city according to Dr. Whitelaw's estimate in the year 1798, is males 75279, females 95526, and this should give 3466 instead of the above number of females.

It deserves remark that the proportion of men to women received into the Hospital varies much at different times; thus it frequently happens that the number of Female Patients is often double or treble that of the males, at other times the same inverted proportion of these Patients is observed. This may depend on the varying influence of Contagion which we may suppose to predominate in a greater degree when women than when men are the principal sufferers.

Notwithstanding the extended admission of Patients from a part of the city where the influence of the Hospital system was recent, the proportional number of deaths in the Hospital has been scarcely greater than usual. During the last year there died one in  $12\frac{1}{2}$ , and the average mortality is 1 in  $12\frac{1}{2}$ .

The progress of Fever during the different seasons of the last year has much resembled that of former years. During the beginning of winter in the month of January, pectoral affections prevailed in most of the Patients, these however were not severe, and in few instances did the  
Physicians

physicians find it necessary to have recourse to blood-letting. The febrile symptoms were in many cases very severe, and the mortality exceeded the annual average.—At the approach of spring, Intermittent Fevers prevailed with a degree of frequency not observed for many years past in this city, and contributed to modify the epidemic at that season. In several instances continued Fever was observed to assume the intermittent form, a fact which taken in connection with the general resemblance of symptoms, seems to invalidate the opinion of a Physician deservedly high in medical repute, that continued and Intermittent Fevers should be ranked as diseases completely distinct from each other.—(See Willan on the diseases of London.)—In some of the cases of Intermittent Fever which fell under the care of the Physicians, the disease proved obstinate, but was at length removed by the use of Calomel given in combination with Peruvian Bark until a slight degree of Mercurial Action was induced; in this case the Paroxysms were either abridged or ceased altogether.

As the spring advanced, pectoral complaints became more frequent and severe; above  $\frac{1}{4}$ th of the Patients laboured under symptoms of determination to the lungs. Affections of this kind were most prevalent during the month of May, but extended even to the month of June, at which time several Patients were received for whose relief blood-letting was neces-

vary.—As the heat of summer increased, the Sensorium became the principal seat of disease. Headache, violent delirium, suffused eyes, and flushed face were observed to occur with more than usual frequency, and to increase as the summer advanced. These symptoms seemed to arrive at their acmè in the month of September; at this time many of the cases were severe and demanded close medical attention: Petechiæ also occurred more frequently than before; nevertheless, the mortality was much less at this than at other seasons.

On the approach of winter the Patients diminished considerably, and in the month of November were reduced to almost one half of the number admitted during either the months of February or March.—Intermittents did not prevail during the latter part of autumn as generally happens at that season, and as might have been expected from their frequency in spring. The diminished number of Patients received into the Hospital continued to the end of the year.

Such are the principal occurrences of the last year; these exhibit the Fever Hospital gradually arriving at the attainment of an object most important to society, by means of the best kind, which administer relief by enabling the poor to assist themselves.

F. BARKER,