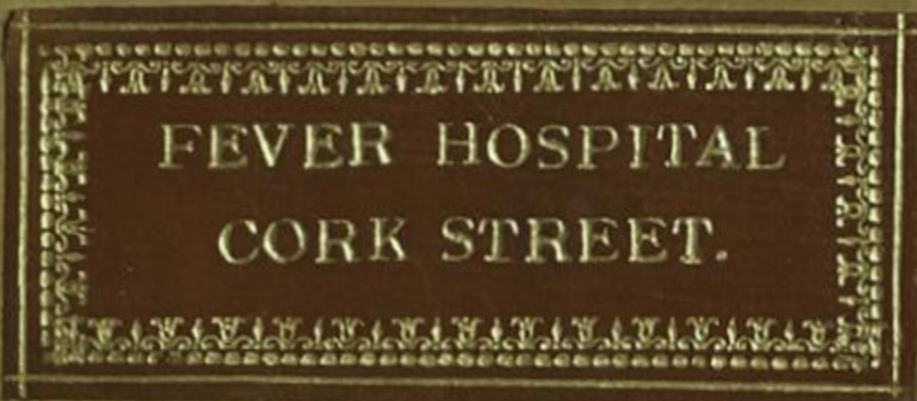


**House of Recovery Cork Street Fever Hospital**  
**Annual Report and Physicians Report 1814-1815**

**The committee decided not to publish a report in 1814 but combined the two years, 1814-1815, in this report.**

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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

**REPORT**

OF THE

**MANAGING COMMITTEE.**

OF THE

**HOUSE OF RECOVERY**

AND

**FEVER-HOSPITAL,**

IN

**Cork-Street, Dublin,**

**FOR TWO YEARS ENDING 4th January, 1815.**

~~~~~  
Dublin :

PRINTED BY J. JONES, 40, SOUTH GREAT GEORGE'S ST.

1815.

*Report of the Managing Committee of the House  
of Recovery and Fever Hospital, Cork-street,  
for two years ending the 4th January, 1815.*

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IT has been the uniform practice of the Committee, since the first establishment of the Hospital, until last year, to present an Annual Report of its progress and circumstances, to the subscribers and the public: for the cause of it having been then omitted, the Committee refer to a letter annexed from the Physician to whom was assigned the task of furnishing the Medical Report, which should have appeared with the Report of the Committee, at the commencement of 1814: disappointed of the Medical Report, and acquainted with the disappointment too late in the year, to publish their own at the usual period, the Committee thought it better to defer it until this year, when the two Reports might be combined with perhaps better effect, than if published separately, under the circumstances stated.

The relief afforded by this Institution to the suffering poor, during the period embraced by this Report, has been considerably greater than it ever was before, in the same space of time; no fewer than 5018 patients were admitted into the Hospital, and of these the number discharged cured, has been much greater in proportion, than at any former period.

To meet the increased pecuniary demands occasioned by the increased admission of patients, it became neces-

sary for the Committee the year before last, to make individual application to their fellow citizens, for assistance. This application was answered, as similar appeals from this Institution always have been, and funds were placed in the hands of the Committee, sufficient to extricate them from the difficulties under which they laboured at the time. Amongst other contributions on this occasion, the Committee were highly gratified by one from the overseers and workmen at Howth Harbour, amounting to 27*l.* 12*s.* 9*d.* enclosed in a letter expressive of their gratitude for the benefit several of their body had experienced in the Hospital, and conveyed in terms alike honourable to themselves, and to the servants of the Institution: this donation has latterly been succeeded by another from the same quarter, and the Committee report them here, as having furnished, unsought for, unequivocal testimony of that unceasing attention to the patients in the house, on which success in this disease so much depends.

Soon after the publication of the last report, it appeared to the Committee, that they must either curtail the district, the relief of which the Hospital now embraces, or by increasing the accommodation for patients, prevent the liability to disappointment to persons applying for admission: it will be recollected that 180 beds had been formerly provided, under the idea that that number of patients could have been conveniently accommodated, but after every expedient, consistent with the objects of the Institution, had been resorted to, for the purpose of procuring room for their accommodation in the present buildings, it was found that the danger of injury from crowding the Hospital far exceeded the prospect of advantage, from the reception of an in-

creased number of patients, and that the beds provided could not all with propriety be occupied, without the erection of an additional building; under these circumstances it was determined to adopt this plan, so soon as adequate funds could be obtained.

Another deficiency of accommodation had frequently been forced upon the notice of the Committee: experience had proved that the laundry department was very defective, and that a radical change in it was highly desirable.

Upon mature consideration it was resolved to erect a wash-house and laundry, to be furnished with appropriate machinery, upon plans which had been amply tried and approved of at the Nottingham and Derby Infirmaries.

To procure funds for these purposes in part, but principally to ensure the means for meeting the permanent regular demands for the maintenance of the Hospital, the Committee about the time that they made the application to the public, applied likewise to Government for assistance; this assistance was granted, and the income of the Institution was last year considerably augmented from this source.

The Committee on obtaining this increase at first determined to commence their improvements with the laundry department, as being the lightest undertaking; but the continued demands for admission, and the consequent necessity for immediate increased accommodation for patients, induced them to alter their intention, and they are now engaged in building another fever-house.

The finishing and furnishing this additional building will press heavily on the funds of the Hospital for a long time to come, and the improvements in the laundry which become more necessary in proportion to the extent of the establishment must

depend for their completion on the bounty of the public. To this source the Committee look with confidence ; as it must be evident that the present distressed state of the poor of this metropolis calls for the particular exertion of its more opulent inhabitants ; and there is no way perhaps by which relief can be so effectually administered as by the removal of disease and contagion from the midst of their families—and here it is much to be lamented that the funds arising from individual annual subscriptions have of late greatly fallen off. The Committee have at different times made particular applications for the purpose of at least keeping up their amount, and a deaf ear has been seldom turned to them on these occasions ; but the public must be aware how extremely irksome it is to be always *begging*, and the Committee hope that the performance of this duty will not again become necessary, but that those of their fellow-citizens, who have not already contributed, or who do not contribute according to their ability, will without further solicitation afford the necessary aid in support of an Institution, the great extensive utility of which, is universally felt and acknowledged.

May, 1815.



7

|                                               |                            |       |
|-----------------------------------------------|----------------------------|-------|
| Admitted from 14th May, 1804, to 4th January, |                            |       |
| 1814, inclusive, - - -                        |                            | 14093 |
| Discharged cured, - - -                       | 12935                      |       |
| Died, - - -                                   | 1071                       |       |
| Remain in Hospital 5th January, 1814,         | 87                         |       |
|                                               | <hr style="width: 100%;"/> |       |
|                                               | 14093                      |       |
|                                               | <hr style="width: 100%;"/> |       |

|                                                  |  |                            |
|--------------------------------------------------|--|----------------------------|
| In the Hospital 5th January, 1813,               |  | 127                        |
| Admitted from 5th January, 1813, to 4th January, |  |                            |
| 1814, inclusive, - - -                           |  | 2620                       |
|                                                  |  | <hr style="width: 100%;"/> |
|                                                  |  | 2747                       |
|                                                  |  | <hr style="width: 100%;"/> |

|                                       |                            |  |
|---------------------------------------|----------------------------|--|
| Discharged cured, - - -               | 2497                       |  |
| Died - - -                            | 163                        |  |
| Remain in Hospital 5th January, 1814, | 87                         |  |
|                                       | <hr style="width: 100%;"/> |  |
|                                       | 2747                       |  |
|                                       | <hr style="width: 100%;"/> |  |

|                                                                  |   |   |              |       |
|------------------------------------------------------------------|---|---|--------------|-------|
| Admitted from 14th May, 1804, to 4th January,<br>1815, inclusive | - | - | -            | 16491 |
| Discharged cured                                                 | - | - | 15163        |       |
| Died                                                             | - | - | 1212         |       |
| Remain in Hospital 5th January, 1815,                            |   |   | 116          |       |
|                                                                  |   |   | <u>16491</u> |       |

|                                                                     |   |   |   |             |
|---------------------------------------------------------------------|---|---|---|-------------|
| In the Hospital 5th January, 1814                                   | - | - | - | 87          |
| Admitted from 5th January, 1814, to 4th January,<br>1815, inclusive | - | - | - | 2398        |
|                                                                     |   |   |   | <u>2485</u> |

|                                                    |   |   |             |  |
|----------------------------------------------------|---|---|-------------|--|
| Discharged cured                                   | - | - | 2228        |  |
| Died                                               | - | - | 141         |  |
| Remain in Hospital 5th January, 1815,<br>inclusive | - | - | 116         |  |
|                                                    |   |   | <u>2485</u> |  |

*Committee :*

Edward Allen,  
 John Barrington,  
 Samuel Bewley,  
 Thomas Crosthwait,  
 William Disney,  
 Thomas Disney,  
 William English,  
 Arthur Guinness,  
 William Harding,  
 John Hone,  
 Joseph Hone,

John David La Touche,  
 Peter La Touche, Jun.  
 Randal Mac Donnell,  
 George Maquay,  
 John Leland Maquay,  
 John Orr,  
 James M. Pike,  
 George Renny,  
 Edward Swanwick,  
 Luke White.

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*Physicians :*

Francis Barker, M. D.  
 William Stoker, M. D.  
 George Hagan, M. D.

Samuel Robinson, M. D.  
 John O'Brien, M. D.  
 Richard Grattan, M. D.

*Temporary Physicians :*

P. Harkan, M. D.

John O'Reardon, M. D.

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

Patrick Roney,  
 Wm. Richardson,  
 John Hale,  
 John Hughes,  
 Henry Harris,  
 Jane Leedom.

*Servants usually employed at the Hospital :*

Three Porters, two Whitewashers, twelve Nurses, and eight Female Servants.

5th January, 1815.

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

|                                                         | <i>£</i> | <i>s.</i> | <i>d.</i> |
|---------------------------------------------------------|----------|-----------|-----------|
| To rent and Taxes of premises                           | 77       | 6         | 4         |
| Maintenance of Patients and Servants                    | 1608     | 0         | 2         |
| House-Bedding, Furniture and Clothing,<br>wear and tear | 483      | 16        | 2         |
| Salaries of Officers, Nurses, and Servants              | 1015     | 0         | 9½        |
| Fuel, Soap, and Candles                                 | 455      | 0         | 4         |
| Printing, Stationary, and Advertising                   | 95       | 5         | 11        |
| Medicines, including Wine and Spirits                   | 621      | 6         | 2         |
| Incidental expences, including expense of Horse         | 175      | 2         | 0         |
| Whitewashing habitations of the Poor                    | 101      | 13        | 8         |
| Government Stock for loss on sale thereof               | 24       | 16        | 10        |
| Repairs                                                 | 98       | 8         | 11½       |
|                                                         | 4755     | 17        | 4         |
| Excess of Income over Expenditure                       | 928      | 14        | 1½        |
|                                                         | 5684     | 11        | 5½        |

*Account of Property of the Institution, exclusive*

|                                |      |    |    |
|--------------------------------|------|----|----|
| To Furniture and House-bedding | 1730 | 18 | 0  |
| Clothing                       | 178  | 7  | 0  |
| Government Stock               | 314  | 10 | 4  |
| Treasurers, amount due by them | 406  | 4  | 5½ |
| J. Smith, due by him for hay   | 19   | 0  | 0  |
|                                | 2648 | 19 | 9½ |

*of Recovery and Fever Hospital, Cork-Street,  
4th of January, 1814.*

|                                                                                                               | £    | s. | d. |
|---------------------------------------------------------------------------------------------------------------|------|----|----|
| By Parliamentary grant, Nett                                                                                  | 2998 | 15 | 10 |
| Subscriptions                                                                                                 | 1075 | 6  | 6  |
| Donations                                                                                                     | 1491 | 1  | 7  |
| Amount of Hay and Grass, deducting ex-<br>penses                                                              | 32   | 2  | 3  |
| Interest from a fund raised for relief of Dis-<br>tressed Manufacturers given temporarily to<br>this Hospital | 87   | 5  | 3½ |

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5684 11 5½

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*of Buildings and Premises, 5th of January, 1814:*

|                                  |      |    |    |
|----------------------------------|------|----|----|
| By Purveyor due him              | 0    | 10 | 0  |
| Nett Property of the Institution | 2648 | 9  | 9½ |

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2648 19 9½

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

|                                                                    | £.    | s.    | d.    |
|--------------------------------------------------------------------|-------|-------|-------|
| To rent and taxes of premises - - - -                              | 77    | 18    | 3     |
| Maintenance of Patients and Servants -                             | 1271  | 17    | 0     |
| House-bedding, Furniture and Cloathing,<br>wear and tear - - - - - | 458   | 13    | 4     |
| Salaries of Officers, Nurses, and Servants -                       | 1158  | 0     | 7     |
| Fuel, Soap, and Candles - - - - -                                  | 471   | 16    | 4     |
| Printing, Stationary, and Advertising -                            | 45    | 0     | 5½    |
| Medicines, including Wine and Spirits -                            | 335   | 7     | 2½    |
| Incidental expences, including expence of Horse                    | 169   | 2     | 0½    |
| Whitewashing habitations of the Poor -                             | 110   | 7     | 4     |
| Repairs - - - - -                                                  | 135   | 1     | 1     |
|                                                                    | <hr/> | <hr/> | <hr/> |
|                                                                    | £4233 | 3     | 7½    |
| Excess of Income over Expenditure .                                | 2120  | 16    | 4½    |
|                                                                    | <hr/> | <hr/> | <hr/> |
|                                                                    | £6354 | 0     | 0     |

*Account of Property of the Institution, exclusive*

|                                      |       |       |       |
|--------------------------------------|-------|-------|-------|
| To Furniture and House-bedding - - - | 1629  | 14    | 6     |
| Cloathing - - - - -                  | 171   | 1     | 4     |
| Government Stock - - - - -           | 314   | 10    | 4     |
| Interest on do. - - - - -            | 7     | 6     | 9½    |
| Treasurers, amount due by them - -   | 2647  | 3     | 2½    |
|                                      | <hr/> | <hr/> | <hr/> |
|                                      | £4769 | 16    | 2     |

*of Recovery and Fever Hospital, Cork-Street,  
4th January, 1815.*

|                                             | £.    | s. | d. |
|---------------------------------------------|-------|----|----|
| By Parliamentary Grant, Nett                | 4998  | 15 | 10 |
| Subscriptions                               | 1001  | 7  | 7½ |
| Donations                                   | 314   | 15 | 3½ |
| Interest on Government Stock                | 14    | 13 | 7  |
| Amount of Hay and Grass, deducting expences | 24    | 7  | 8  |
|                                             | <hr/> |    |    |
|                                             | £6354 | 0  | 0  |
|                                             | <hr/> |    |    |

*Of Buildings and Premises, 5th January, 1815,*

|                                  |      |    |   |
|----------------------------------|------|----|---|
| By Purveyor amount due him       | 0    | 10 | 0 |
| Nett Property of the Institution | 4769 | 6  | 2 |

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£4769 6 2

*A communication from one of the Physicians to the Committee, assigning reasons for there being no Medical Report prepared for the year 1813.*

Circumstances partly explained in the few following lines, have prevented the usual Medical Report being presented to the public this year.

SEVERAL changes occurring in the Medical Department of this Institution in the beginning of the last year, it became at the time uncertain, to which of the Physicians the duty of furnishing the Annual Report, which has been undertaken in succession by them, should be assigned for the last period. This point was moreover not attended to, nor ascertained till lately, which has occasioned the omission of an essential measure for the fulfilment of the above task, in a manner, suitable with this establishment, or deserving the notice of any practitioner.

A Report so characterised (such a one cannot now, for the reason just stated, be even attempted) could only be founded on a full and exact record, made with a view to this particular object, of the cases of Fever, that should occur during the whole period. No partial recollection however distinct, nor general impression, though perhaps just, ought to be made the ground-work of a publication, whose object should be at least, by a clear exposition and classification



of the extensive range and variety of facts, which the Fever Hospital presents, to confirm former experience and observation, if not to add a little to the stock of improvement.

An abstract however, taken from the registry of the Hospital, which may be considered, as in some measure continuing its Medical History, is subjoined. From this Document it appears, that the number of admissions exceeds that of any former year, and that the proportion of mortality has been diminished. Both these important results seem to have arisen from the same cause—the present popular character of the Hospital.

A remark or two may be necessary in order to shew distinctly the connexion between a favourable opinion of this Institution, and a considerable saving of life, among the persons infected with the virulent and widely spread malady, the prevention and cure of which are the proper objects of this House of Recovery.

Observation warrants the assertion, that the deaths, which occur here, are chiefly of those whose admission has been delayed till the latter and worse stages of their disorder. Prejudice, as well as the anxiety of the sick to remain with their families, have often withheld them from resorting to an aid, which is at all times open to them, till the hope of recovery could no longer be entertained. Hence some die immediately after being admitted, and many within twenty-four hours; this event being in many instances, determined, while they lay neglected in their own dwellings.

But a different course, attended generally with an opposite result, is now frequently adopted by the poor. They appear increasingly solicitous to obtain early admission. Their application is often made upon the first symptoms of Fever,

or at least within the first week of its appearance. Instances of this kind are become numerous; the effect of which in lessening the mortality from Fever may be yet very considerable, as it is found, that the cases which are received into the Hospital in their early stages, are, in a large proportion, successfully treated.


To this change of practice in the public, arising from a favourable opinion of the Hospital, which the experience of a number of years has produced, may be fairly attributed the diminished mortality of the last year; as it gives an opportunity of applying the means of cure at a time, when they are without doubt, most efficacious.

# MEDICAL REPORT,

FOR 1814,

BY

*ONE OF THE PHYSICIANS.*



AFTER the many excellent annual reports already published, the task of the present reporter were superfluous, if the regulations of the Institution did not impose on him the performance of an established duty. He owns, he feels the difficulty of encountering a subject already so ably examined in every possible bearing, and quite exhausted of interest and originality.

So little diversity indeed, do the phenomena of fever, or the incidents of the Hospital undergo, from year to year, that their Historian must be content to follow the same path, and travel in the same circle as his predecessors; the recorder of speculations often recorded, and the commentator on comments often made.

In compliance however with the annual custom, he shall take a brief and general view of the most striking circumstances connected with the Hospital, for the past year, and detail those observations on the nature and treatment of fever, which occurred to him in the course of his attendance.

The number of admissions for the past year, though somewhat less than on the preceding, has been greater than at any former period, since the establishment of the Institution.

The following is the comparative estimate of the admissions for the last three years, as taken from the registry.

| <i>Years.</i> |   |   |   | <i>Admitted.</i> |
|---------------|---|---|---|------------------|
| 1812          | - | - | - | 2273             |
| 1813          | - | - | - | 2619             |
| 1814          | - | - | - | 2392             |

A fact so remarkable as the continual encrease of numbers, since the commencement of the Institution, cannot fail to excite surprise and awake enquiry. Under the operation of the wisest and most beneficent Institution which human philanthropy could devise, for the extinction of fever, we behold its quantity annually multiplied, and its ravages extended in a ratio proportioned to the activity of that benevolence, which would stop its career.

To explain this apparent anomoly, it is sufficient to state that those causes which are universally allowed to be the great promoters of infection among the poor, still exist with augmented energy ;—these are want ;—filth ;—crowded apartments ;—idleness ;—dejection ;—intoxication.

After the many strong appeals, and affecting pictures of misery, already laid before the public ; the writer thinks it superfluous to dwell on this distressing subject : for a full account of those causes which are subsidiary to the progress of contagion, he begs leave to refer the reader to a little tract lately published by Mr. Ball, whose description of the misery of the Dublin

poor, the writer has personally seen verified in numberless instances, and for the accuracy of which he pledges himself. This gentleman has justly remarked that houses of recovery succeed only partially in the prevention of infection, by curing infected persons, contracting the sphere of contagion, and lessening the mortality: but that an efficient system of Police (supported either by public authority or private association,) is absolutely necessary to give an effectual and permanent check to its progress.

The object of such a system of course would be to encourage cleanliness (the great antidote to contagion) among the poor; to clear the wretched receptacles in which they dwell, of their accumulated filth; to discourage residence in cellars, and to excite industry, the parent of cleanliness and sobriety; to provide work for the unemployed, and rouse the passive brutified creature from the torpor of sloth, vermin and rags, into a confidence in his own exertions. A system of this kind would not only be useful in stopping the progress of fever, but would operate as a practical discipline, to improve the taste, habits, and morals of the people, and raise them in the scale of civilization.

Of the activity and wide operation of the causes above assigned, in propagating contagion, though we cannot entertain a doubt; it still remains uncertain, how far the natural virulence of the epidemic, and the occult constitution of the season, might not of themselves, unaided by secondary causes, have produced the augmentation of numbers in our registry, and to whatever combination of causes, we may attribute this augmentation, the writer is of opinion, that an unusual febrile constitution, has prevailed in Dublin, since the beginning of the year, 1810.

It is a question of the highest interest and importance to determine whether Fever is generated by contagious matter alone, or

whether the depravation of the animal fluids produced by want and unwholesome diet be a sufficient cause for its production. From the facts which have fallen under the writer's observation, he would conclude that a certain class of fevers is generated from this latter source, and from cold, namely the simple inflammatory and bilious fevers; but he is inclined to think that the Typhus fever is always the product of contagion.

Fortunately a great portion of the fevers which occur in the Hospital, are of the simple inflammatory and bilious Type; they are resolved in five six or seven days, and require little more aid from the physician than spare diet, and rest with the exhibition of one or two purgatives.

The other class of fevers, under the general head of Typhus, are those which demand the aid of medicine, and the sedulous attention of the Physician; they are characterized by delirium, low or vehement, frequent and weak pulse, black, brown, or yellow tongue, and occasional petechiæ, sometimes with a pale dejected countenance, and sometimes with a flushed and tumid one, with suffusion and wildness of the eyes; out of this class of fevers, as it may be supposed all the fatal cases, which occur in the Hospital are taken, and it is only from this class that the candid and truly philosophic physician, can draw his inferences as to the success or failure of any particular innovation, in the usual treatment of fevers. As far as the writer could form a judgment, and he has kept a pretty accurate journal of the cases he attended for the last two years, about a sixth part of the whole are of the latter class, or as it is called of a Malignant Type. It has been a point of great curiosity with the writer, to ascertain whether the fevers of this city observed any regular law as to the period of their termination, or whether the doctrine of certain critical days as described by Hippocrates, and the antient

physicians, had any foundation in nature. This unfortunately is a point of great difficulty from the impossibility in most instances of obtaining an accurate account from the patient of the day of ingress of the fever; in those instances however, in which, he could mark the periods with confidence, he never found that these fevers observed any certain law as to their termination; the day of change or crisis happening differently and irregularly, almost in every individual; nor could he observe that odd or even days, were particularly selected by nature for this purpose. He confesses however, that it is with the utmost distrust in his own observations he propounds an opinion, which seems to militate against the observations of the ancients, who studied the habits of diseases, with an assiduity, industry and integrity scarcely to be hoped for in modern times.\*

\* The writer finds that a registry was kept for the first three years of this Institution of the days on which fever declined; it is as follows:

| On day of<br>Fever. | No. of<br>crisis. | On day of<br>Fever. | No. of<br>crisis. | On day of<br>Fever. | No. of<br>crisis. |
|---------------------|-------------------|---------------------|-------------------|---------------------|-------------------|
| 2                   | 2                 | 11                  | 117               | 20                  | 20                |
| 3                   | 16                | 12                  | 121               | 21                  | 17                |
| 4                   | 45                | 13                  | 82                | 22                  | 11                |
| 5                   | 129               | 14                  | 79                | 23                  | 8                 |
| 6                   | 117               | 15                  | 74                | 25                  | 6                 |
| 7                   | 262               | 16                  | 51                | 28                  | 4                 |
| 8                   | 173               | 17                  | 42                | 31                  | 2                 |
| 9                   | 212               | 18                  | 30                |                     |                   |
| 10                  | 118               | 19                  | 35                |                     |                   |

In those numbers from the 4th day to the 14th, the difference is not so material as to enable us to fix on any particular set of critical days, and establish a rule which may guide our prognostic on future occasions: in the above column the 11th which was a day of great importance in the system of Hippocrates, is less critical than the 8th, 10th or 12th, which are *non critical* days with him. The 10th, 11th and 12th scarcely differ in this column. The three chief critical days of Hippocrates were the 7th, 14th and 20th—here the three chief days are the 7th, 8th and 9th. The writer thinks the Type of Fever must have been different on the years this account was kept from what he has observed for last two years. Those Fevers which terminated on the 8th and 9th, he would consider as of the milder class,

Although the day of termination in death, or of change to health is uncertain, the writer thinks it seldom takes place before the eleventh, or after the twenty-ninth day, the latter being the longest period, he finds marked on his journal of those cases which terminated fatally, and the first the shortest; of those cases which recovered, he never observed a well marked crisis take place after the twenty-fifth day, nor before the tenth (excluding the lighter fevers, and those attended by pænuomia) during the two years in which he has attended the Hospital; and he finds only two cases of recovery, marked in his journal, where the crisis was protracted to the twenty-fifth; in protracted fevers indeed, it is generally impossible to mark a crisis at all with certainty; they appear gradually to wear out, and are attended with a very slow recovery, and the subjects are generally old or debilitated persons.

*The following table will exhibit the scale of mortality, and the admissions for each month in the past year:*

| Remains from<br>last month. | Admitted. | Died. | Discharged. |
|-----------------------------|-----------|-------|-------------|
| Jan. 5..... 87              | 160       | 19    | 151         |
| Feb. .... 77                | 168       | 13    | 142         |
| March ..... 90              | 154       | 4     | 164         |
| April ..... 76              | 178       | 8     | 165         |
| May..... 81                 | 159       | 13    | 155         |
| June..... 72                | 171       | 9     | 154         |
| July..... 80                | 184       | 12    | 158         |
| August ..... 94             | 178       | 12    | 163         |
| Sept..... 97                | 225       | 15    | 213         |
| Oct. .... 94                | 281       | 12    | 242         |
| Nov..... 121                | 277       | 10    | 260         |
| Dec..... 128                | 263       | 14    | 261         |
| 1097                        | 2398      | 141   | 2228        |

It may be seen by this table that the mortality was greater in the month of January than any other; this, as far as the writer's experience has enabled him to judge, was owing to the number of bad cases of pneumonia which occurred in



this month, produced by the unusual severity of the winter of last year. In those instances where fever patients are attacked with pneumonia, from the tardiness and reluctance of the people to apply to the Hospital till all other succour is hopeless; the critical moment passes away at which a prompt and judicious use of the lancet might rescue the patient from impending death; thus it happens that the employment of this remedy in too many instances comes too late after the patient's admission to the Hospital when effusion has already taken place and when V. S. will only accelerate the patient's death. After the months of January and February the combination of pneumonia and fever began to disappear, and the Typhus again assumed the ascendancy; the writer, however has observed that the fevers of last year were more frequently attended with general rheumatic pains, and displayed more of an inflammatory character than on the preceding one.

In observing the effects of different medicines in fever, the writer has made many trials on general blood-letting, a remedy, whose application to fevers of a malignant type has excited much discussion and controversy among medical men. In a short sketch of this kind it is impossible to exhibit a particular detail of cases, from which his inferences on this subject have been drawn; he shall therefore content himself with making a general statement of the result of his experience on this subject.

It has been already stated that the bad or malignant cases may be estimated at a sixth part of the whole—in the other five parts it is obvious that blood-letting is altogether nugatory, and useless, though harmless, and affords us no fair criterion for judging of its utility—the remaining part, or the malignant cases are therefore the proper objects of experiment in

the present enquiry. In many of those cases the writer has several times directed two or three bleedings to the amount of six or eight ounces, and never observed any evil consequences arising from it; on the contrary he has uniformly observed a mitigation of head-ache, and delirium the general pains with which fever patients are often afflicted, produced by it. He is decidedly of opinion however that general bleeding is applicable only to the first stage of fever, and should never be persevered in beyond this—in those instances where blood was taken in the more advanced stages he has always found its texture broken down and dissolved, a greenish watery fluid, with little coagulum, whose abstraction was attended with no relief to the patient. In those cases where bleeding may be thought adviseable, he would literally follow the example of the sagacious Sydenham:

“Ad œgrum accersitus mox sanguinem a brachio educendum curavi mode nimia debilitas, præsertim vero provector ætas non contra indicaret; et venæsectionem insuper alternis diebus ad duas ad huc vices repetendam jussi, nisi redeuntis sanitatis signa aliter suaderent.” P. 184, de feбри continua an 67.

“Sanguinem e brachii venis mittendum ea quantitate quæ œgri viribus ætati aliisque circumstantiis, convenire visa est ante omnia curavi.” P. 256 de feбри contin an 73.

He must acknowledge however that in some instances he has found very unpleasant effects arise from the lancet wounds in the arm of fever patients; they are often very slow in healing, and have produced serious inflammation all along the arm—in one instance an erysepelalous eruption, commencing at the arm, spread over the face and greater part of the body, and brought the patient's life into imminent danger: and the writer confesses that this effect has of late deterred him from em-

ploying the lancet, except in those cases attended with severe general pains, for which he has found V. S. the most certain remedy.

Although the writer conceives general bleeding to be applicable only to the first stage of fever, he has not hesitated to employ topical bleeding of the head, either by leeches or opening the temporal artery in every period of the disease. As a remedy for the head-ache and delirium with suffused eye, with which fever is generally attended, he knows nothing more prompt and decisive than topical bleeding of the temples, and has seen several instances where a repetition of this remedy has subdued the fiercest delirium. In that variety of fever also where the patient declares he feels no particular pain but only complains of general weakness, and inability to move, the writer has used topical bleeding with the happiest effect.

In treating of blood-letting, as a remedy for fever, the writer thought it his duty to state the result of his experience on this subject, and he cannot help thinking that its introduction into the treatment of fever has done much good; not that he would be supposed to assent to the theory on which it has been founded, nor approve of the extent to which it has been carried, but because, he thinks, that physicians were too timid in employing the lancet at all in this disease, under the apprehension that the loss of the smallest quantity of blood was attended with irremediable exhaustion to the patient—they accordingly proceeded to the other extreme, and endeavoured to support the patient's strength by enormous quantities of wine, whose only effect was to increase the determination of blood to the head, and aggravate that debility which it was intended to remove. Wine, however, when administered in moderate quantities and at a proper period of the disease is found to be

a useful auxiliary in the treatment of fever; and indeed it is by a judicious combination of the antiphlogistic with the tonic and cordial plan, that the highest success has been attained in the cure of this disease. Of the other remedies which have been long in common use, the writer thinks it unnecessary to comment at present.

The following table extracted from the registry, and former reports will exhibit at one view the proportion of mortality for each year since the commencement of the Institution:

|      |                            |                             |                            |                            |                             |            |
|------|----------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|------------|
| Year | 1804                       | 1805                        | 1806                       | 1807                       | 1808                        | 1809       |
| Died | 1 in<br>14 $\frac{2}{3}$   | 1 in<br>15 $\frac{1}{2}$    | 1 in<br>12 $\frac{7}{26}$  | 1 in<br>11 $\frac{22}{21}$ | 1 in<br>11 $\frac{1}{4}$    | 1 in<br>12 |
| Year | 1810                       | 1811                        | 1812                       | 1813                       | 1814                        |            |
| Died | 1 in<br>11 $\frac{40}{77}$ | 1 in<br>12 $\frac{21}{113}$ | 1 in<br>12 $\frac{11}{11}$ | 1 in<br>15 $\frac{29}{27}$ | 1 in<br>15 $\frac{13}{141}$ |            |

It appears by the above that the mortality has been less in proportion to the admission on the last year than on any former one since the origin of the Institution, a circumstance highly gratifying to the medical officers.

J. O'BRIEN.

3, Grafton-Street.

# REPORT

OF THE

**MANAGING COMMITTEE**

OF THE

**HOUSE OF RECOVERY**

AND

**FEVER-HOSPITAL,**

IN

**Cork-Street, Dublin,**

*FOR ONE YEAR, ENDING 4th January, 1816.*

**Dublin:**

*PRINTED FOR THE COMMITTEE,*

*BY JOHN JONES, 40, SOUTH GREAT GEORGE'S-ST.*

*1816.*

*Annual Report of the Managing Committee of the  
House of Recovery and Fever Hospital in Cork-  
street, for the year ending the 4th January, 1816.*

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THE Committee are concerned to have to state, that the Fever Beds in the Hospital have been occupied for nearly the entire of the last year, and very frequently the applicants, who have been visited by the Physicians, and certified by them as proper objects, could not be admitted for want of room. This continued press has interfered with the regulation of the Hospital, to have each ward periodically vacant, that it may be properly ventilated, white-washed and cleansed. With the addition of the new building, there will be sufficient room to have 180 beds constantly occupied; and to allow the process of internal cleansing to be systematically followed up. This building is in a considerable state of forwardness, and the Committee trust it may be opened for the reception of patients by Autumn.

In the last year's Report the Committee alluded to the necessity of providing a more extensive and commodious Laundry; one sufficiently large to admit the washing of the Hospital Linen, Bedding, &c. and the purifying the Patient's clothes by keeping them separate. The expense of the new building having exhausted all the Funds of the Hospital, and even encroached on the future income, the Committee see no immediate prospect of their being able to procure the means to complete this most necessary addition to the establishment. It is indeed, with considerable anxiety they look forward to the opening of the new building, without having first provided adequate accommodation, for the consequent increase in a department, that they must consider inadequate even to the present establishment.

The two Tables of admission for the years 1814 and 1815, specify the numbers admitted from each Parish during those periods. Those admitted under the denomination of Itinerants, are objects who apply at the gate, and are there visited by the Physicians.—Most of them are from the neighbouring Parishes without the Circular Road, and consequently cannot be visited at their homes. The Committee finding that such persons were conveyed to lodgings within the district, to entitle them to be received into the Hospital, reluctantly permitted admission from the gate. They however, cannot refrain from expressing their anxiety, that this infringement of the regulations of the Hospital, may be prevented by such parishes providing proper medical assistance for their sick. The Committee have found that in some instances, the friends of the Patients have given money to the Nurses, either to recommend them to their particular care, or to procure for them some supposed necessary, or additional comfort. This most mistaken kindness, tends to the subversion of the best regulations of the Hospital; it introduces a system of favouritism to some objects, and consequent neglect of others. The Dietary of the Hospital being approved of by the Physicians, it is more than probable, that what is given to the Patient through kindness, retards his recovery. When this serious abuse comes to the knowledge of the Committee, either by being detected by the Officer of the Institution, or by the complaint of the Patients themselves, the Committee immediately dismiss the Nurse. The Committee most earnestly entreat the Public to co-operate with them, not only in checking this abuse, but in maintaining the regulations of the Hospital, by adhering in all instances strictly to the regulations laid down, and by reporting to them any abuse that may come to their knowledge.

*Cork-street, May 1816.*

*A statement of the number of Patients admitted into the Hospital in the years 1814 and 1815, together with the aggregate number of days spent by the said patients in the Hospital, also the total expense; and the expense of provisions in each year: by which is shewn the average number of days each patient remains in the Hospital, and the average expense of each patient.*

## 1814.

|                                           |       |   |                 |                    |
|-------------------------------------------|-------|---|-----------------|--------------------|
| Patients admitted,                        | -     | - | -               | 2398               |
| Aggregate number of days in the Hospital, | -     | - | -               | 33102              |
| Average number of days of each patient,   | -     | - | -               | 13 $\frac{1}{2}$   |
| Total expense of Hospital for this year   | £4233 | 3 | 7 $\frac{1}{2}$ |                    |
| ———— of provisions                        | -     | - | 1271            | 17 0               |
| Average expense of each patient           | -     | - | 1               | 15 3 $\frac{1}{2}$ |
| ———— of Do. for provision daily, about    | 0     | 0 | 9 $\frac{1}{4}$ |                    |

## 1815.

|                                                                  |       |      |                 |                  |
|------------------------------------------------------------------|-------|------|-----------------|------------------|
| Patients admitted,                                               | -     | -    | -               | 3787             |
| Aggregate number of days in the Hospital,                        | -     | -    | -               | 49609            |
| Average number of days of each patient,                          | -     | -    | -               | 13 $\frac{1}{3}$ |
| Total expense of Hospital this year, exclusive of new Buildings, | £4917 | 3    | 8               |                  |
| Total expense of provisions,                                     | -     | 1591 | 3               | 2 $\frac{1}{2}$  |
| Average expence of each patient, nearly                          | -     | 1    | 6               | 0                |
| ———— of Do. for provisions daily, about                          | 0     | 0    | 7 $\frac{1}{2}$ |                  |



Account of the Number of Patients admitted into the Hospital in the Years 1814 & 1815.

| PARRISHES, &c.           | Jan. | Feb. | March | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | TOTAL. |
|--------------------------|------|------|-------|-------|-----|------|------|------|-------|------|------|------|--------|
| 1 St. James              | 8    | 3    | 17    | 8     | 6   | 7    | 4    | 10   | 10    | 16   | 26   | 13   | 128    |
| 2 Catherine              | 49   | 51   | 41    | 40    | 21  | 32   | 39   | 32   | 52    | 35   | 55   | 41   | 491    |
| 3 Luke                   | 8    | 7    | 7     | 14    | 7   | 8    | 12   | 5    | 12    | 8    | 7    | 5    | 100    |
| 4 Nicholas Without       | 16   | 23   | 11    | 17    | 14  | 18   | 11   | 7    | 13    | 23   | 31   | 37   | 221    |
| 5 Nicholas Within        | 3    | —    | 1     | —     | —   | 4    | 2    | 1    | 1     | 2    | 2    | 2    | 18     |
| 6 Andoen                 | 10   | 2    | 7     | —     | 2   | 5    | —    | 7    | 6     | 7    | 10   | 3    | 59     |
| 7 Michael-               | 4    | 3    | —     | 2     | 2   | 4    | —    | 2    | 6     | 5    | 1    | 4    | 33     |
| 8 John                   | 6    | 4    | 5     | 6     | 4   | 3    | 1    | 4    | 3     | 3    | 6    | 6    | 51     |
| 9 Werburgh               | 1    | 1    | —     | 1     | 3   | 4    | 3    | 1    | 2     | 4    | 1    | 2    | 23     |
| 10 Christ Church         | —    | —    | —     | —     | —   | —    | —    | —    | —     | —    | 3    | 2    | 5      |
| 11 Patrick               | 4    | 4    | 3     | —     | 1   | 1    | 1    | 1    | 8     | 3    | 7    | 7    | 40     |
| 12 Bridget               | 5    | 4    | 15    | 7     | 17  | 8    | 17   | 22   | 12    | 24   | 28   | 21   | 180    |
| 13 Peter                 | 7    | 10   | 12    | 14    | 23  | 15   | 16   | 14   | 11    | 23   | 13   | 14   | 172    |
| 14 Anne                  | 1    | 1    | 1     | 1     | 3   | 1    | 1    | 3    | 1     | 3    | 1    | 3    | 20     |
| 15 Andrew                | 7    | —    | 4     | 1     | 3   | 1    | 5    | 4    | 7     | 3    | 4    | 7    | 46     |
| 16 Mark                  | 3    | 3    | 5     | 5     | 7   | 5    | 5    | 6    | 13    | 11   | 18   | 7    | 88     |
| 17 Paul                  | 9    | 7    | 6     | 8     | 13  | 9    | 17   | 17   | 14    | 37   | 16   | 14   | 167    |
| 18 Michan                | 1    | 8    | 9     | 15    | 13  | 16   | 7    | 14   | 23    | 31   | 25   | 42   | 204    |
| 19 Mary                  | 3    | 4    | 9     | 11    | 3   | 10   | 5    | 7    | 8     | 9    | 17   | 12   | 98     |
| 20 Thomas                | 1    | 1    | 2     | 4     | 1   | 3    | 1    | 1    | 4     | 1    | 5    | 9    | 33     |
| 21 George                | —    | —    | 2     | —     | —   | 2    | 1    | —    | 9     | 1    | 1    | —    | 16     |
| 22 Itinerants            | 11   | 22   | 20    | 11    | 11  | 14   | 35   | 16   | 17    | 15   | 6    | 12   | 160    |
| 23 Servants of the House | 2    | 2    | —     | 1     | 1   | —    | —    | —    | 1     | —    | 2    | —    | 0      |
|                          | 159  | 160  | 177   | 166   | 155 | 170  | 183  | 174  | 233   | 264  | 266  | 266  | 2302   |

| PARISHES, &c.             | Jan. | Feb. | March | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | TOTAL. |
|---------------------------|------|------|-------|-------|-----|------|------|------|-------|------|------|------|--------|
| 1 St. James               | 14   | 11   | 4     | 6     | 7   | 11   | 18   | 16   | 12    | 12   | 9    | 5    | 125    |
| 2 Catherine               | 40   | 45   | 45    | 50    | 38  | 55   | 56   | 73   | 77    | 76   | 63   | 60   | 678    |
| 3 Luke                    | 17   | 14   | 9     | 11    | 13  | 26   | 43   | 31   | 41    | 35   | 23   | 21   | 284    |
| 4 Nicholas Without        | 8    | 18   | 37    | 24    | 31  | 43   | 38   | 58   | 46    | 66   | 53   | 18   | 440    |
| 5 Nicholas Within         | —    | 2    | —     | 1     | 4   | 4    | 2    | 6    | —     | 2    | 3    | 6    | 30     |
| 6 Audoen                  | 10   | 7    | 5     | 8     | 16  | 14   | 10   | 7    | 8     | 9    | 4    | 14   | 112    |
| 7 Michael                 | 1    | 4    | 1     | 7     | 1   | 5    | —    | 4    | —     | 3    | 2    | 9    | 37     |
| 8 John                    | 3    | 6    | 6     | 14    | 9   | 4    | 7    | 9    | 11    | 13   | 8    | 14   | 104    |
| 9 Werburgh                | 1    | —    | —     | 1     | 1   | 1    | 1    | 6    | 3     | 7    | 2    | 5    | 28     |
| 10 Christ Church          | —    | 1    | —     | —     | —   | —    | —    | —    | —     | 1    | —    | —    | 2      |
| 11 Patrick                | 5    | 4    | 9     | 3     | 4   | 9    | 14   | 7    | 10    | 9    | 6    | 6    | 86     |
| 12 Bridget                | 17   | 12   | 17    | 11    | 12  | 19   | 8    | 13   | 15    | 22   | 20   | 17   | 183    |
| 13 Peter                  | 9    | 15   | 13    | 29    | 19  | 28   | 28   | 26   | 30    | 15   | 5    | 22   | 239    |
| 14 Anne                   | 3    | 3    | 5     | 4     | —   | 11   | 4    | 3    | 3     | 1    | 3    | 7    | 47     |
| 15 Andrew                 | 6    | 4    | 5     | 4     | 7   | 5    | 5    | 4    | 7     | 3    | 6    | 6    | 62     |
| 16 Mark                   | 9    | 23   | 26    | 21    | 11  | 17   | 8    | 10   | 6     | 5    | 17   | 8    | 161    |
| 17 Paul                   | 9    | 14   | 16    | 16    | 26  | 24   | 21   | 16   | 18    | 12   | 15   | 10   | 197    |
| 18 Michan                 | 35   | 26   | 29    | 21    | 29  | 45   | 40   | 35   | 19    | 31   | 53   | 26   | 389    |
| 19 Mary                   | 13   | 17   | 22    | 19    | 24  | 16   | 13   | 25   | 21    | 21   | 14   | 15   | 220    |
| 20 Thomas                 | 6    | 13   | 7     | 6     | 13  | 5    | 5    | 6    | 5     | 12   | 6    | 4    | 88     |
| 21 George                 | —    | —    | —     | 2     | —   | 1    | 1    | 4    | 1     | 1    | 4    | 8    | 22     |
| 22 Itinerants             | 13   | 16   | 26    | 15    | 15  | 17   | 17   | 24   | 24    | 14   | 34   | 29   | 235    |
| 23 Servants of the House. | —    | 2    | —     | —     | 1   | 1    | 1    | —    | —     | 1    | 4    | 1    | 11     |
|                           | 219  | 237  | 282   | 273   | 281 | 361  | 340  | 383  | 337   | 371  | 354  | 302  | 3780   |

|                                                                  |   |   |   |       |     |
|------------------------------------------------------------------|---|---|---|-------|-----|
| Admitted from 14th May, 1804, to 4th January, 1816,<br>inclusive | - | - | - | -     | 202 |
| Discharged cured                                                 | - | - | - | 18751 |     |
| Died                                                             | - | - | - | 1403  |     |
| Remain in Hospital 5th January, 1816,                            |   |   |   | 124   |     |
|                                                                  |   |   |   | <hr/> |     |
|                                                                  |   |   |   | 20278 |     |
|                                                                  |   |   |   | <hr/> |     |

|                                                                      |   |   |   |       |       |
|----------------------------------------------------------------------|---|---|---|-------|-------|
| In the Hospital 5th January, 1815,                                   | - |   |   |       | 1     |
| Admitted from 5th January, 1815, to 4th January,<br>1816, inclusive, | - | - | - |       | 37    |
|                                                                      |   |   |   |       | <hr/> |
|                                                                      |   |   |   |       | 39    |
|                                                                      |   |   |   |       | <hr/> |
| Discharged cured                                                     | - | - | - | 3588  |       |
| Died                                                                 | - | - | - | 191   |       |
| Remain in Hospital 5th January, 1816,                                |   |   |   | 124   |       |
|                                                                      |   |   |   | <hr/> |       |
|                                                                      |   |   |   | 3903  |       |
|                                                                      |   |   |   | <hr/> |       |

*Committee :*

Edward Allen,  
 John Barrington,  
 Samuel Bewley,  
 Thomas Crosthwait,  
 William Disney,  
 Thomas Disney,  
 William English,  
 Arthur Guinness,  
 William Harding,  
 John Hone,  
 Joseph Hone,

John Hutton, Jun.  
 John David La Touche,  
 Peter La Touche, Jun.  
 Randal Mac Donnell,  
 George Maquay,  
 John Leland Maquay,  
 John Orr,  
 George Renny,  
 Edward Swanwick,  
 Luke White.

*Physicians :*

Francis Barker, M. D.  
 William Stoker, M. D.  
 George Hagan, M. D.

Samuel Robinson, M. D.  
 John O'Brien, M. D.  
 Richard Grattan, M. D.

*Temporary Physicians :*

P. Harkan, M. D.  
*Surgeon & Accoucheur,*

John O'Reardon, M. D.  
 Patrick Roney,

*Resident Officers.*

*Register and Purveyor,*  
*Apothecary,*  
*Collector,*  
*House-keeper,*  
*Head Nurse,*

Wm. Richardson,  
 John Hale,  
 Henry Harris,  
 Jane Leedom,  
 Frances Graham.

*Servants usually employed at the Hospital :*

Three Porters, two Whitewashers, twenty Nurses, and nine Female Servants.

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

|                                                                | £.           | s.        | d.        |
|----------------------------------------------------------------|--------------|-----------|-----------|
| To rent and taxes of premises - - -                            | 77           | 18        | 3         |
| Maintenance of Patients and Servants -                         | 1591         | 3         | 2½        |
| House-bedding, Furniture and Cloathing,<br>wear and tear - - - | 455          | 7         | 7½        |
| Salaries of Officers, Nurses, and Servants                     | 1304         | 15        | 8½        |
| Fuel, Soap, and Candles - - -                                  | 507          | 2         | 7½        |
| Printing, Stationary, and Advertising - -                      | 86           | 17        | 3½        |
| Medicines - - - - -                                            | 260          | 15        | 3½        |
| Wine and Spirits - - - - -                                     | 287          | 7         | 0         |
| Incidental expenses, including expense of Horse                | 185          | 6         | 11½       |
| Whitewashing habitations of the Poor -                         | 119          | 15        | 11½       |
| Repairs - - - - -                                              | 40           | 13        | 9         |
|                                                                | <u>£4917</u> | <u>3</u>  | <u>8</u>  |
| New Buildings - - - - -                                        | 3722         | 11        | 9½        |
|                                                                | <u>£8639</u> | <u>15</u> | <u>5½</u> |

*Account of Property of the Institution, exclusive*

|                                       |              |          |          |
|---------------------------------------|--------------|----------|----------|
| To Furniture and House-bedding - - -  | 1629         | 19       | 6        |
| Cloathing - - - - -                   | 167          | 14       | 10       |
| Government Stock - - - - -            | 363          | 10       | 0        |
| Interest on do. - - - - -             | 22           | 0        | 4½       |
| Treasurers, amount in their hands - - | 326          | 7        | 10       |
| Bank of Ireland - - - - -             | 50           | 11       | 9        |
|                                       | <u>£2560</u> | <u>4</u> | <u>4</u> |



# MEDICAL REPORT

FOR 1815,

BY

*ONE OF THE PHYSICIANS.*

---

TWELVE years nearly have elapsed since the House of Recovery in Cork-street, was first opened for the reception of patients labouring under contagious fever; and as during the period of its establishment, ample opportunity has been afforded of ascertaining from experience, the benefits of such an Institution, I think it may prove not altogether uninteresting, briefly to trace its history from its foundation to the present time.

In a medical point of view in particular, some information may be obtained, by comparing together the events of so many successive years; for, it is only by instituting a comparison between the result of our own observations, and of those who have preceded us, that a science so widely extended, and so difficult as that of medicine can ever be cultivated with any prospect of success. Besides, as a national establishment, whether we consider it with reference to the number of patients that it is capable of accommodating, or with respect to the excellence of its system, and the admirable regularity with which it is conducted, the Fever Hospital, justly

occupies the first rank amongst all others of a similar kind in Europe, and hence no inconsiderable degree of importance must at all times be attached to the several occurrences which have marked its progress.

I shall therefore in this Report, give a slight sketch of such events as appear most worthy of being recorded, and make such observations on each as the practice of the present year has suggested.

In the treatment of any highly contagious disease, to separate the sick from those who are as yet free from its influence, and preclude as much as possible, all unnecessary intercourse between them, is an object of such evident moment, that few are disposed to question its utility. Indeed, the benefits which we derive from a strict adherence to this necessary rule of prevention, and the evils that result from its neglect, are more than sufficient to convince us of its importance as well to individuals as to the public in general.

To preserve the health of the public at large, is a national concern, and has long been deemed a matter worthy of legal interference. Accordingly the Legislature has enacted, that every precaution shall be adopted which may contribute to prevent the introduction of diseases from foreign countries; and to the enforcement of the laws of quarantine, we are probably at this moment indebted for our exemption from the plague, and perhaps other disorders, scarcely less contagious or destructive.

But, although the introduction of contagion from other climates, had early attracted the public attention, and was anxiously provided against by the strictest laws, it was not until a later period, that the security of individuals was sufficiently attended to. For though the health of individuals is doubtless an object of minor importance, it however, by no means deserves to be considered as totally unconnected with the public welfare, inasmuch as the death, or even temporary illness of a single industrious individual detracts something from the general resources of the country. Such an occurrence, therefore, is to be regretted on this account merely, even independently of every humane consideration. But, when the country is thus deprived of the services of many such individuals, the injury becomes serious, and increases in proportion to their number and industry.



Of course it must be obvious, that every measure calculated to diminish the extent of such mischief should be vigorously adopted, and this object so desirable, is peculiarly practicable in contagious diseases. In diseases of this nature it may be accomplished by separating the sick from those who are still in health; for thus the disease is checked in its commencement, and numbers are preserved from its influence, who would otherwise perhaps, have become its victims, and contributed in their turn to communicate it to others. Public Hospitals therefore, were established for the purpose of removing from their own habitations, such individuals as were unable from poverty or other causes, either to provide themselves with the means necessary to their recovery, or to adopt measures calculated to prevent the disease from spreading further.

In Manchester and Waterford, Institutions were founded with this view, and their example was quickly followed in this city, so deservedly celebrated for the number and extent of its charities.

At a meeting of the principal inhabitants, held on the 28th of October 1801, subscriptions were entered into, and a Committee appointed, to whom the management of the intended establishment was confided. Government also liberally contributed their assistance; and a sufficient fund being thus procured, an extensive plot of ground was purchased in Cork-street. The first stone of the Hospital was laid in the month of April 1802, and in about two years it was completed at an expense amounting to £11,318 13s. 11d.

It consisted originally of two uniform buildings, four stories in height, placed at a small distance from each other, and connected by a covered walk open to the south. One building was exclusively appropriated for the reception of Fever Patients, and the other was occupied by the convalescents and resident officers of the establishment.

Corresponding externally, their interior arrangement was however different. In the fever side, each story was constructed with a gallery placed in the centre of the building, and extending throughout its entire length. The galleries were terminated at either end by windows, and on each side were the doors which opened into the wards occupied by the patients. Each ward was intended to contain two beds, and in each there was a window

and fire place. The wards were forty-eight in number, that is to say, twelve on each floor; but of these, forty only were fever wards, the remainder being required for the accommodation of the nurses and for other purposes; so that at its commencement the Hospital was calculated to contain only eighty fever patients.

In the other building, the two upper stories, were each formed into two large rooms, two of which were occupied by the female, and two by the male convalescents, while the remainder was inhabited by the Secretary and Purveyor to the Hospital.

In deciding on the plan of the Hospital in its original form, the Committee were most solicitous to procure every possible information: they consulted such medical characters as were celebrated for professional ability; and on comparing their opinions, and judging from the experience of other Institutions, they, after much deliberation, finally determined on that which I have just described.

The Hospital was opened for the reception of patients, on the 4th day of May, 1804, and its relief was at first confined to that portion of the town which was more immediately situated in its vicinity, those persons only being admissible, who resided within the limits of a particular district, comprehending about one-third of the southern division of the city, and containing a population estimated at about 57,000 individuals.

In the commencement the Hospital had much to contend with, and many difficulties to encounter, originating for the most part, from the ignorance and prejudices of those for whose relief it was intended. To enter within its walls as objects of charity, was at first, even by the lowest ranks of society, considered a matter of disgrace, while the idea of being removed to a Fever Hospital, tended to increase their reluctance, by exciting in their minds the most formidable apprehensions. Hence, rather than avail themselves of its advantages, numbers preferred remaining in their own dwellings, though destitute of every comfort and perhaps altogether incapable of procuring the medicines necessary for their recovery.

In consequence however, of the extraordinary care and attention which the patients experienced from the physicians and other attendants, these prejudices gradually disappeared, for the individuals were few indeed, who, on departing from the Hospital, expressed them-

selves in any other than the most grateful manner, for the kindness with which they had been treated. They were therefore anxious to apply to it themselves on all future occasions, and with a degree of confidence, founded on experience, they equally recommended it to their friends and acquaintances.

In the following year, the Funds being increased by an additional Parliamentary grant, the Hospital district was enlarged, so as to admit patients from all parts of the city, south of the Liffey, and within the limits of the Circular Road.

This district, according to the Reverend Doctor Whitelaw's survey, contained a population of 112,497 souls, of which a great proportion was lodged in ill-constructed, and badly ventilated houses, where little attention was paid to cleanliness, as the rooms were generally occupied by distinct families, who having no permanent interest in the house where they resided, could seldom be induced to co-operate, for the purpose of cleansing the common entrance and staircase. Of course, an accumulation of dirt, was the consequence, which by giving rise to a constant exhalation of noxious effluvia, rendered the air still more impure, and predisposed the inhabitants to disease. Great attention was therefore paid by the Committee, to obviate this evil, and arrest as much as possible, the progress of fever, by whitewashing the apartments of those who had been removed to the Hospital. With a view also to impress on their minds, the importance of a strict attention to cleanliness, the following paper was left at their dwellings:—

*House of Recovery, Cork-street.*

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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:

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

Secondly—Let the House or Room from 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.

Thirdly—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.

Fourthly—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.

Fifthly—Whitewash 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.

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

Seventhly—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 at least.

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.

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The Hospital continued on the same footing, both with respect to the number of its beds, and extent of district, from 1805 until the end of the year 1807, but during the year 1808, an additional fever

building was erected, and the beds were increased to 180. The district was consequently enlarged, and from the beginning of the year 1809, patients were admitted from the north side of the town, so as to comprehend the entire city, situated within the Circular Road.

It might be supposed, that this extension of district would have been productive, of a corresponding increase in the number of patients admitted; but this was not the case, for in the year 1809 the admissions were rather less, than in any of the three preceding years. The efficacy of the Fever Hospital system was therefore considered as fully established, and confident expectations were entertained, that fever would soon be a disease of rare occurrence in the metropolis.

This opinion it would seem, had the support of reason and experience; for reasoning from our knowledge of the general laws of contagion, we must *a priori* conclude, that the measure of immediately separating the sick, on the first appearance of fever, would confine the disease, for the most part, to the individual in whose person it originated. The experience of the Hospital also, from its commencement to the end of the year 1809, contributed materially to strengthen this opinion. At first, as has been already mentioned, it afforded relief only to a limited portion of the town, afterwards the district was enlarged, so as at last to comprehend the entire City, and even latterly, persons of every condition were admitted, although in the commencement it was intended merely for the labouring poor, and the servants of families were therefore excluded.

Notwithstanding these various causes, however, any one of which was of itself sufficient to produce a considerable increase in the number of applications, it appears from the Annual Reports of the Committee, that the admissions from January 1805, to January 1810, were nearly equal, averaging at the rate of about 1100 each year. Than this nothing apparently could be more decisive; nothing seemed to demonstrate more clearly the present efficacy of the Institution, or to hold out more encouraging expectations as to the future. But in the summer of 1810, a fever of unusual malignancy broke out in Dublin, which spread with rapidity, and threat-

ened at first to exceed every former epidemic in point of fatality. From this period, the admissions increased to more than double what they were in the corresponding months of 1809, and continued in the same proportion to the end of the year.

In the month of September, in consequence of the low condition of the funds of the Hospital, a statement was submitted to the public, explaining this circumstance, and soliciting subscriptions. This appeal of the Committee to the public, amongst other observations contained the following: "From the Physicians of the Hospital they learn that during the four past months an epidemic fever prevailed in this city, and throughout many parts of Ireland, unparalleled in malignancy and extent for many years past, and were it not for the check given to the spreading of contagion, by the immediate admission of the infected persons together with the white washing and fumigating the habitations from whence the patients were brought to the Hospital, there are strong reasons for believing, that this populous metropolis, might have suffered, and been now suffering under a fever, comparatively destructive as the plague."

The donations received on this occasion amounted to upwards of Two Thousand Pounds, a sum sufficient to recruit the finances of the Hospital, and enable it to continue its relief on the same extended scale as before. However, notwithstanding every exertion to arrest the progress of contagion, the epidemic still continued to prevail; and even at the present moment, if we are to judge from the number of admissions, it yet rages with increasing force.

The formidable increase of patients from the commencement of the year 1810, to the end of the year 1815, is evident from the following table, which gives the numbers admitted in each year since the opening of the Hospital.

## PATIENTS ADMITTED.

|                                        |   |   |        |
|----------------------------------------|---|---|--------|
| From 14th May, 1804, to 5th Jan. 1805, | - | - | 422    |
| — 5th Jan. 1805, to 5th Jan. 1806,     | - | - | 1028   |
| — 5th Jan. 1806, to 5th Jan. 1807,     | - | - | 1272   |
| — 5th Jan. 1807, to 5th Jan. 1808,     | - | - | 1092   |
| — 5th Jan. 1808, to 5th Jan. 1809,     | - | - | 1072   |
| — 5th Jan. 1809, to 5th Jan. 1810,     | - | - | 1056   |
| — 5th Jan. 1810, to 5th Jan. 1811,     | - | - | 1774   |
| — 5th Jan. 1811, to 5th Jan. 1812,     | - | - | 1478   |
| — 5th Jan. 1812, to 5th Jan. 1813,     | - | - | 2273   |
| — 5th Jan. 1813, to 5th Jan. 1814,     | - | - | 2620   |
| — 5th Jan. 1814, to 5th Jan. 1815,     | - | - | 2398   |
| — 5th Jan. 1815, to 5th Jan. 1816,     | - | - | 3787   |
|                                        |   |   | 20,278 |

From the great increase of business, two temporary physicians were appointed in 1811, one of whom, Doctor George Lee, died shortly afterwards of a bad typhus fever, which he caught while engaged in attending to the duties of the Hospital. In 1812, the influence of contagion amongst the attendants, seemed to have acquired additional activity. The Hospital in this year, had to lament the death of Doctor Joseph Lynch, and also about the same time, that of the Rev. James Whitelaw, Vicar of St. Catherine's, the celebrated author of the Essay on the Population of Dublin. Both these gentlemen, it is said, derived their disease from the same patient, while engaged in the discharge of their respective offices; their anxiety for the interests of a stranger, inducing them perhaps to lose sight of that caution, so necessary to their own security.

In the following year, Mr. Hale, the Apothecary, was seized with typhus fever, and to my attendance on him, I think I have reason to ascribe that with which I was myself attacked. In this year, from the continued pressure of encreasing admissions, the finances of the Hospital were such as to render it necessary, a second time to apply to the public for assistance. The donations received in consequence amounted to nearly £1500, and it deserves to be

particularly noticed as a proof of the high estimation to which the Hospital had attained in the opinion, not merely of the better ranks, but even of the lower classes, that the labourers employed at Howth Harbour, contributed from their wages the sum of £27. 12s. 9d. and remitted it with a letter expressing in the most flattering manner their gratitude to the officers of the institution, for the attention which several of them had experienced while under their care, thus confirming the observation of the Committee. "That every effort which has a tendency to draw the different classes of society closer together in good will and affection, must be productive of beneficial national results."

Although the Hospital had from the commencement progressively advanced in the public estimation, and gradually acquired the highest character for its excellent management and extensive utility, its occurrences were still confined to those more immediately connected with the institution, and had not as yet become the subject of public investigation. About this time however, a work was published by one of the temporary Physicians, giving an account of his particular practice and improved method of treatment in fever. This work had for its object to recommend the use of bloodletting in fever, as a remedy of more value than is at present supposed, and capable of being more generally applied in the management even of the worst cases.

To every one who fairly considers the fatality of fevers, and the many difficulties the Physician has to encounter in their treatment, it must appear, that even an attempt at improvement, should be received, if not with approbation, at least with indulgence. It was therefore peculiarly unfortunate, that the author of the work in question should have considered it necessary to form a comparison between his success and that of his colleagues. If instead of so doing, he had compared his own success at different periods, and had calculated the proportion of deaths amongst his particular patients, prior, and subsequently to his adopting the practice of bloodletting, then such statement would have been highly candid and praiseworthy. However, he stated, as a strong recommendation of his practice (more I am satisfied from want of reflection than from any ungenerous motive) that the average proportion of deaths amongst the patients



placed under his care, was only as one to twenty-five and a half, while the proportion of deaths in the Hospital during a period of eight years, was as one to eleven.

The permanent Physicians, some of whom had been attached to the Hospital from its commencement, felt hurt at this assertion, and conceiving that their characters were called in question, they examined the several documents connected with the subject, and published the result of their inquiry in a letter addressed to the Committee. From this letter it appears in the most satisfactory manner that the statement was erroneous, and that the proportion of deaths to recoveries, was different from what it had been represented. The tables annexed to the letter are calculated with precision, and they go decidedly to prove that the proportion of deaths among the patients of the author of the Essay on bloodletting, was as 1 to  $11\frac{4}{5}$ , and among those of the other Physicians, during the entire period of his attendance as 1 to  $12\frac{1}{10}$ .

The cause of this miscalculation on the part of the author of the Essay, I am confident originated in mistake, and is to be ascribed to the circumstance of his having excluded from the number of his deaths, such patients as were not treated by bloodletting, or who died of diseases different from fever: It appears to have escaped his observation, that by calculating his comparative success, without charging *all* such deaths, he must of necessity have a considerable advantage over his colleagues; for when he estimated the deaths in the Hospital as in the proportion of one to eleven, *every* death which occurred, whether by fever or otherwise, was included.

The Committee in 1808, as has been already mentioned, increased the number of beds to 180, with a view to accommodate at all times, if necessary, patients to that amount. For this purpose they erected an additional building, situated between the two former, and placed three beds in each of the fever wards. It was found however, that the wards of the under-story were ill adapted for the reception of patients, in consequence of their imperfect ventilation and want of sufficient altitude, they were therefore closed; but in order to employ as many beds as possible, the rooms formerly occupied by the convalescents were converted into fever

wards, and the patients when convalescent were removed to the small wards of the central house. But, notwithstanding every contrivance the Hospital still proved too limited; 144 beds was the greatest number that it could be made to accommodate, without running the risk of crowding it to excess, and a fourth building was therefore determined on.

The Parliamentary grant received in 1814 amounted to £5,000, so that sufficient funds were placed at the disposal of the Committee, to enable them to carry their plan into execution. In the month of June 1815, they accordingly commenced building the proposed addition, and so rapid has been its progress that it is now nearly completed. The plan is unlike that of the fever wing which I have already described. Its exterior, for the sake of uniformity, is nearly similar, but the wards are differently constructed. It is a single building of four stories, the lowest of which is divided into apartments not appropriated for fever, while the other three are each formed into two large wards of sufficient extent to contain twelve beds each.

Some of the Physicians, much longer connected with the Hospital than I have been, and possessing of course greater experience; were strenuous in recommending the adoption of large wards, conceiving that large wards are decidedly the best calculated for fever patients. It is therefore with considerable diffidence, that I venture to entertain an opinion different from them, and am rather disposed to give a preference to the small wards of the eastern wing.

The reasons by which I am influenced are of some weight, and certainly not altogether unworthy of attention. In the first place, it is evident, that large wards are subject to many inconveniencies, from which the small wards are in a great measure free. It is well known that in fever, quiet, is often one of our most important means in accomplishing a cure; but in large wards which contain 12 patients, it is for the most part nearly impossible to prevent continual noise. Amongst so many patients, some one or other must constantly require to be attended, and the disturbance thus occasioned, can hardly fail to interrupt the rest of those who would otherwise compose themselves to sleep. In delirious cases, the objection to large wards is obvious for the same reason, and in cases of extreme dan-

ger, even though unaccompanied with delirium, the objection is equally strong. If a patient ill of low nervous fever, shall behold another expiring near him, I would ask, must not the influence of such a circumstance naturally retard his recovery. We know that in fever, the depressing passions are those which exert the greatest influence on the mind, and that the imagination, unnecessarily, creates for itself a thousand causes of uneasiness and apprehension. Every circumstance therefore, which can be productive of anxiety should be studiously avoided, for it must be allowed, that in fever particularly, a calm and tranquil disposition, conduces to recovery, and that whatever violently agitates is injurious.

It is also to be observed, that in the treatment of different kinds of fever, it is sometimes necessary to regulate the temperature of the room, and accommodate it to the nature of the disease, for in some fevers the air can scarcely be too cool, while in other cases, a similar degree of coldness, would tend materially to aggravate all the symptoms. In simple inflammatory fever; for example, a free circulation of cold air is desirable, but in fever continued with pneumonia, even when the pulmonary affection is trivial, air of a low temperature cannot be inspired, without increasing the cough, and adding to the difficulty of respiration.

Now in large wards containing cases of every description, it really becomes a matter of considerable difficulty to manage each patient in the manner best calculated to ensure his recovery; but when the wards are small, the Physician has it in his power to assort his cases; he can place such as are dying, or whose fever is malignant, in a room separate from those who are recovering; those who require cool air he can put in one room, and those to whom it would prove injurious he can place in another.

In all hospitals, but more particularly in those that are established for the treatment of contagious diseases, frequent white-washing is an object of the utmost importance. Indeed, in no Hospital whatever, is there more attention paid to neatness and cleanliness than in our's; but at the same time it must be admitted, that when the wards are large, they cannot readily be white-washed as often as could be wished. To whitewash with advan-

tage, the ward should be suffered to remain unoccupied for two or three days at least, in order that it may be perfectly ventilated, and that every part of the walls and ceiling shall be thoroughly cleaned. This, in wards which contain only two beds, may be affected as often as shall seem necessary, without inconvenience either to the hospital or to the public, but when the wards are large, it cannot by any means be so easily or so frequently accomplished.

And further, all the arguments that are generally adduced in support of large wards, when fairly examined, resolve themselves into this single one, namely, that the air is more pure in large wards than in small. It remains however to be proved, that the air *cæteris paribus*, is most pure in large wards. I am inclined to doubt that it is so. Certainly, if the small wards as is now unquestionably the case, are too much crowded, while fewer patients are placed in the large wards, in proportion to their size, then it is only reasonable to suppose that the air ought to be less pure in the former than in the latter, but surely no one would merely on that account conclude, that large wards are preferable to small. Even circumstanced as the small and the large wards are at present, I believe that the condition of the air in both is nearly similar, but if fewer patients were placed in the small wards, or a greater number in the large, so as to reduce them to an equality in this respect, I am disposed to think, that the small wards would then have decidedly the advantage.

In each small ward, there is a fire-place and window. In winter when it is necessary to have the window closed, the fire preserves a constant circulation of air, and in summer, the air which enters by the window, passes through the door exactly opposite, into the gallery, conveying with it the contagious effluvia. The galleries are terminated by windows which are kept for the most part open; the upper story of the house also is furnished with ventilators, corresponding with which there are gratings in the floor of the galleries, so that a free exit is thus at all times afforded to the impure and heated air, from every part of the building. But the large wards have not these advantages; in them there is no constant current of air, and therefore it is, that considering their great

extent, they are found to accommodate fewer patients than the small. Nor is this all, I think that patients seem to recover better in the small wards, at least this I can affirm, that I have almost uniformly been most successful in the treatment of fever when I have practised in the small wards, a circumstance, which has perhaps principally influenced me in forming my opinion.

The question as to the superiority of large wards seems therefore as yet undecided, and I have been induced to make these remarks, because it appears to me to be a matter of some importance, and more particularly, because I conceive it to be one which can only be determined, by the experience of those whose practice in extensive fever establishments, renders them competent to pronounce an opinion on the subject. Besides, when any doubt exists, nothing is more to be desired than a candid and liberal discussion, resulting from an anxiety, to elicit truth and promote improvement; for, thus only can we hope to arrive at perfection in the exercise of any art, but especially of one so difficult and complicated as that of medicine. But though, I am for the reasons already mentioned, inclined to give a preference to the small wards, I do not however by any means wish it to be understood, that the large wards are not likely to answer the purpose for which they are intended. On the contrary, they constitute a most important addition to the other buildings of the hospital, which considered collectively, are certainly unequalled for utility, extent, neatness, and uniformity of structure.

Besides the enlargement of the Hospital, this year, was also distinguished in a singular degree by an unexampled increase in the number of admissions, the patients admitted from the fifth of January 1815, to the fifth of January 1816, the period to which this report particularly refers, having exceeded those of every former year, to an almost incredible extent. In the year ending the 4th of January 1815, the admissions were 2398, and considered unusually numerous, but during the past year, they amounted to 3787, a number, unparalleled in the annals of the Hospital.

It must occur to the most superficial observer as a strange and remarkable circumstance, that contagion, instead of being materially

diminished, should rather have increased since the establishment of the Hospital. As to the accuracy of the fact, there can be no doubt whatever, and it therefore remains for us to investigate its cause.

The present extraordinary prevalence of fever, cannot I think be ascribed, to any natural defect of our city, in point of situation. Dublin, has none of those local peculiarities, which are found to generate contagion with facility, or which might be supposed to render us more susceptible of its influence. Our streets are in general much wider than those of other large towns, they have of late been kept in a cleaner condition than formerly, and are not commanded by any neighbouring heights capable of preventing a free circulation of air. The vicinity of the sea also, the size and rapidity of the river which divides our town, and the abundance of water with which it is supplied, are advantages so far superior to those which most other cities possess, that were we to consider it merely in reference to its situation, they would induce us, at once to pronounce it, one of the most healthful in the world.

The causes so productive of contagion, must therefore be sought for elsewhere, and I believe they will be found to exist, in the manners of the lower ranks by which it is inhabited. Here, we look in vain for that sober demeanour and laborious assiduity so characteristic of patient industry, and so essential to the existence of every well regulated community. Instead of these qualities, we daily witness instances the most degrading to human nature, and behold in our streets crowds of wretched objects, so lost to every sense of decency, and of habits so depraved, that they seem rather beings of an inferior order. Indifferent as to the present, and careless about the future, they have acquired an habitual listlessness, and an unaccountable apathy, which, without rendering them content with their situation, incapacitates them from active exertion. Hence their habitations, their dress, their persons, are filthy to a degree; they have no taste for neatness; to them the comfort of cleanliness is unknown. Existing under such circumstances, and leading a life at one time of excess, and again of penury and distress, how is it possible that they can ever be free

from contagious disease? From the nature of contagion it is not in our power to annihilate it altogether, we can only pretend to moderate its influence; and this can never be accomplished to any considerable extent, until good order, industry and sobriety, shall succeed to gross irregularity, idleness, and habitual intemperance; and until, in place of a total indifference to the comforts of life, an anxiety for cleanliness, and a taste for neatness shall stimulate the lower ranks to laudable exertion.

Until such change shall be effected in the morals and habits of the people, it is likely that his expectations will be disappointed, who hopes that the actual quantity of fever can be sensibly diminished, through the agency of our Hospital. The time is however, I trust, not very remote, when the condition of the labouring classes of this extensive City, shall be such as to prove a source of pleasing reflection to the sincere lover of his country. It is to be hoped that commerce will again revive, and dispense its blessings generally, by affording constant employment to the well disposed and industrious; but above all, it is to be desired, that education may be more widely diffused, for to education, it appears to me, that we are alone to look for any permanent improvement.

These however, are circumstances over which our system of prevention can exert no control, and therefore it is not to be objected to its efficacy, that contagion should still continue to prevail, notwithstanding all our exertions. Though fever were never to be diminished, yet the effects of our Hospital are not on that account to be considered nugatory, since it annually preserves the lives of numerous individuals, who must otherwise have perished. What would have been the mortality during the past year, if the 3787 patients admitted into the Hospital, were suffered to remain neglected in their crowded apartments, most of them without proper medicines or advice, and many without even the necessaries of life! Instead of only one death in twenty, one in four would perhaps have occurred, a conviction of itself, fully sufficient to demonstrate the superior value and excellence of the Institution.

The following table, which I have calculated from the annual reports of the Committee, in which are stated precisely the number of patients that have died, and also the number of those that have

been dismissed cured, will shew the comparative mortality at different periods.

|       |                          |                             |                           |                             |                             |                                 |
|-------|--------------------------|-----------------------------|---------------------------|-----------------------------|-----------------------------|---------------------------------|
| Year  | 1804.                    | 1805.                       | 1806.                     | 1807.                       | 1808.                       | 1809.                           |
| Died. | 1 in<br>13 $\frac{1}{2}$ | 1 in<br>10 $\frac{1}{7}$    | 1 in<br>12 $\frac{1}{7}$  | 1 in<br>11 $\frac{10}{17}$  | 1 in<br>11 $\frac{2}{22}$   | 1 in<br>13 $\frac{1}{20}$       |
| Year  | 1810.                    | 1811.                       | 1812.                     | 1813.                       | 1814.                       | 1815.                           |
| Died. | 1 in<br>11 $\frac{1}{5}$ | 1 in<br>12 $\frac{24}{113}$ | 1 in<br>13 $\frac{1}{11}$ | 1 in<br>16 $\frac{11}{163}$ | 1 in<br>16 $\frac{11}{113}$ | 1 in<br>19 $\frac{140}{157}$ or |

1 in 20 nearly.

The average mortality, from the foundation of the Hospital to the end of the year 1815, has been very nearly as one in 14 $\frac{1}{3}$ , but we are not therefore to infer, that the mortality from fever, is in the same proportion. For, of the deaths that have taken place, it may be observed, that many are in consequence of diseases different from fever, and occurring either in the progress of the original fever, or succeeding to it during the period of convalescence.

Amongst the females for example, several have died of the diseases consequent on pregnancy, where their fever was either completely subdued, or would otherwise most probably have terminated favourably. And in both sexes, the infirmities of age, and the disorders connected with a worn out constitution, have often contributed to increase materially the number of our deaths. Another cause of mortality also, is to be traced to the improper treatment of patients, previously to their admission into the hospital. It frequently happens that where a patient has been under the care of an injudicious practitioner, and has been blooded or physick'd, or blistered to excess, that when his strength begins to fail, and his case seems hopeless, he is then, and only then, advised to apply to the Hospital for relief, and forced upon us, for the purpose of releasing his former attendant from all share of responsibility. Under such circumstances, what can we effect towards accomplishing a cure? We may indeed prolong the patient's existence, and by the use of wine and invigorating cordials support his strength for a time, but it is in vain to look to his ultimate recovery, the principle of life which was unnecessarily wasted in the commencement, becomes unequal to the struggle of a protracted



illness, and at length, he sinks into the grave, from mere exhaustion.

From the table of the comparative mortality in the Hospital, it appears that our deaths have of late years decreased considerably, and that in the last year in particular, our exertions have been attended with unusual success. The cause of this diminished mortality has been ascribed to the popular character of the Hospital, which induces the patient to apply for admission at an early period of his disease, before the symptoms have increased in violence, and when medicine can of course be employed with a greater prospect of success.

This opinion, does not however seem to me to be correct, for if it were, it would follow, that the deaths which occurred during the last year within a short period after admission, must have been less in proportion than those of former years, in which the mortality was greater. If we suppose that whatever patients die, within the four first days after admission, are admitted at a period too late for the successful employment of medical skill, the argument deduced from the principle of "early application," in order to account for our decreased mortality, can apply to such cases only; for when the patient survives beyond that period, some benefit may reasonably be expected to result from the interference of art. But instead of any progressive diminution, a remarkable coincidence in this respect exists between the deaths of different years. I have selected those of 1805, 1810, and 1815, in each of which the deaths were as follows:

| Year          | 1805, | 1810, | 1815.         |
|---------------|-------|-------|---------------|
| Total deaths  | 67.   | 158.  | 191.          |
| Within 4 days | 22.   | 49.   | 59, or nearly |

one-third of the entire in each year.

Our decreased mortality, must therefore be referred to some other cause, and it can scarcely be explained, on the supposition, that the prevailing fever of the last year was less malignant than usual. That fever is now, less malignant than it was some years ago, is I think, improbable; for in the last year, we certainly had our proportion of bad cases, and the fever which prevailed, was

besides, unusually contagious. It is therefore, evident that the diminution of mortality, must have depended principally on the exertions of the physicians, a fact highly creditable to the institution, and one which places in the clearest light, the efficacy and importance of the medical profession. It proves decidedly, how much may be effected by the timely and judicious administration of remedies; and how greatly the chances of recovery are increased, when the efforts of nature are seconded and properly regulated, by the experienced practitioner. It also completely exposes, the fallacy of the opinion so confidently advanced by some, that in medical diseases, nature accomplishes every thing, and that therefore the physician might be dispensed with altogether; an opinion, however, the result only of a narrow illiberal mind, and of an understanding contracted by a low and mechanical education.

In the course of the last year, the assistant Apothecary, and one of the Physicians, were attacked with fever; the latter, was for a time, dangerously ill, but is now recovering. Of the other persons employed at the Hospital, eleven suffered from the effects of contagion, but none of them died.

*The following table will explain the number of patients that were admitted into the Hospital during the different months, and also the number of dismissals and deaths in each respectively.*

From 5th January 1815, to 4th January 1816, inclusive.

|             | Admitted. | Dismissed. | Died. |
|-------------|-----------|------------|-------|
| Jan.....    | 220       | 211        | 12    |
| Feb.....    | 226       | 236        | 9     |
| March.....  | 269       | 240        | 19    |
| April.....  | 276       | 258        | 18    |
| May.....    | 284       | 272        | 16    |
| June.....   | 369       | 330        | 20    |
| July.....   | 354       | 330        | 15    |
| August..... | 356       | 360        | 17    |
| Sept.....   | 364       | 339        | 17    |
| Oct.....    | 382       | 366        | 19    |
| Nov.....    | 344       | 335        | 10    |
| Dec.....    | 303       | 301        | 19    |
|             | <hr/>     | <hr/>      | <hr/> |
|             | 3787      | 3578       | 191   |

With respect to the practice of the last year, the fevers which prevailed during the first three months, were marked by an increased action of the brain, and frequently attended with violent delirium. In such cases, the face was tumid and flushed, the eyes were red, there existed great intolerance of light, and considerable throbbing of the temporal and carotid arteries. When the symptoms had been neglected the disease proved extremely fatal, and generally seemed to terminate by effusion in the ventricles of the brain. In cases of fatal termination, this event was indicated by stupor, dilation of the pupils, low muttering, and other appearances of Coma. When such were the symptoms, wine, bark, and opium, remedies once so celebrated in the treatment of fever, were altogether inadmissible, at least in the commencement of the disease, and even towards its conclusion required to be administered with the greatest caution.

The plan which experience proved to be most successful, consisted in moderating the violent action of the brain, by means of the various antiphlogistic remedies; but more particularly by topical bloodletting. When the excitement was considerable, the head was uniformly directed to be shaved, and repeatedly washed with cold vinegar and water. Leeches were applied to the temples, and if they failed to afford relief, the temporal artery was opened, and blood taken to the extent of from four to six ounces. By these means the local excitement was diminished, the symptoms became less violent, and the patient gradually recovered; whereas, had he been stimulated by spirituous or heating medicines his danger would have been increased, in the exact proportion of the means that were used, with a view, to insure his recovery.

Theory, has at all times exerted a most pernicious influence over medicine, and probably a greater number of individuals have fallen a sacrifice to the many prejudices of which it is productive, than have at any time recovered, in consequence of the advantages that it affords. Indeed of this I am persuaded, when I consider the practice of the present day, and compare it with that which prevailed at no distant period. Many of the cases for which it was necessary to prescribe bloodletting, in order to moderate the increased action of the vascular system, were cases of pete-

chial or spotted fever. Even in our own memory, the appearance of petechiæ was considered a symptom of the most alarming kind, and one which indicated the utmost debility. Wine and bark, were therefore given in the greatest possible quantity, under the conviction that they were absolutely necessary to support the patient's strength, and obviate the effects of putrescency.

Fortunately however, the treatment of fever is now better understood, and a more rational, and infinitely more successful mode of practice is adopted. Wine and bark are no longer considered essential to its cure, and in their place remedies of quite an opposite nature, are administered with the most decided advantage. But, what has most of all contributed to diminish the mortality of fever is the introduction of bloodletting, which was until of late, with so little reason, so much dreaded and so universally censured; though at the same time it is to be acknowledged, that there is no remedy which is more frequently abused, or which, in fever especially, is capable of producing more destructive consequences when injudiciously employed.

Of this, I had an opportunity of observing a striking instance, in the case of a man, who had been bled to the extent of eight ounces, without appearing at the time to suffer any inconvenience. In the course of two days however, he complained of a pain in his arm; the puncture of the lancet had become inflamed, it soon assumed a gangrenous appearance, and notwithstanding every effort to arrest its progress, the mortification continued to spread, until it included the entire arm from the shoulder down to the fingers, and even a great portion of the side, when the patient, worn out by his sufferings, at length expired.

It appears to me, that the author of the bloodletting system, has pushed his practice to an unnecessary extent, and recommends it too generally, which may perhaps be accounted for on the principle, that most persons who have suggested any scientific improvement, are naturally inclined to attach to it more importance than it really deserves, the interest that they take in its success, rendering them anxious to extel it to the utmost. Hence also it sometimes happens that their anxiety defeats the very object that they have in view, for by promising too much, they disappoint the expectations of those who adopt their system, which therefore

though useful to a certain extent, soon falls into disrepute and is neglected altogether.

It is probable, that such has already been the case even with this particular remedy, for the practice of bloodletting in fever has no claim whatever to the merit of originality. It is a fact that this remedy was employed nearly two centuries ago, precisely in the same way and in cases exactly similar to those in which it is used at the present day. In Riverius's practice of medicine, there is an account of the treatment of a fever termed, "*Febris Continua et Maligna*," in which the patient was bled repeatedly in the manner recommended by the author of the essay, and eventually recovered.

Bloodletting in fever, is therefore a remedy which having been once perhaps generally practised, was afterwards neglected, probably in consequence of its being abused, and is again revived. But although it must ever be abused, in the hands of injudicious persons, yet surely this circumstance should not be considered an objection to it, nor should it on that account be less employed by practitioners in cases where it is clearly indicated. For this would be indeed, to run into the opposite extreme, and verify the adage of falling into Scylla, by endeavouring to avoid the dangers of Charybdis.

Practitioners formerly erred much with respect to bloodletting in the treatment of fever, for they either obstinately refused to bleed, or if the symptoms were so urgent as to admit of no other remedy, they generally bled to excess. But as the injurious effects from excessive bloodletting were for the most part obvious, while patients who had not been bled occasionally recovered, the depleting system came into disrepute, and the stimulating practice was adopted.

It is fortunate for the present time, that we now clearly perceive the advantage of pursuing a middle course; for I am convinced that there is not in medicine a maxim of greater practical utility than this, when symptoms require bloodletting, bleed, but bleed *moderately*. And in this, I think, consists the entire merit of the system alluded to, that it has directed our attention to an active and a useful remedy, which our predecessors were prevented from employing, by the influence of ill-founded apprehensions

resulting from erroneous opinions, with respect to its mode of action, and the nature of the effects that it produces.

On the subject of the diseases which are most apt to prevail at particular seasons of the year, much has been written, and it is asserted by some, that a distinction should be made in the treatment of such diseases, for what might be proper at one time would probably be injurious at another. It is true, that at certain periods of the year, certain complaints predominate. Thus in the spring of the last year, pneumonia was frequent; in summer, fever was extremely contagious, and mostly of the simple type; in autumn, the cases of fever were complicated with bilious or putrescent symptoms, and in winter, with catarrh and general rheumatic pains. But instances, of all the cases that I have mentioned, were found to occur at every period of the year, and I never observed that any inconvenience resulted from their being managed in the manner indicated by the nature of the existing symptoms. I therefore think that no speculative opinions as to the particular season of the year, should be suffered to interfere with that prompt and decisive practice which the urgency of the case may require. For if the physician misled by theory, hesitate, and merely palliate the symptoms, their violence is diminished but not subdued, and the patient's recovery is thereby endangered, or at least retarded.

The remedies which are necessary for the cure of fever are few and simple, and the difficulty of practice consists, not in artfully combining together a great variety, but in selecting and judiciously applying that which is most appropriate.

However, in a superficial account like this, it cannot be expected that I should enter into a detail of the circumstances which indicate one sort of remedy in preference to another, I shall therefore, in concluding, merely remark, that I have scarcely employed in the treatment of fever, any of the antimonial preparations, and that in cases of a putrid and malignant type, I have found a mixture acidulated with the muriatic acid eminently successful.

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