



Medical History

Newsletter

AUSTRALIAN AND NEW ZEALAND SOCIETY OF THE HISTORY OF MEDICINE INC

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Fourth Series

Number Seventy

August 2020

THE PRESIDENT'S PAGE

Since my last President's report in this newsletter, we have seen the return of public health restrictions in parts of our community in Victoria and New Zealand due to the COVID pandemic. That meant we have conducted our Council meeting and our Annual General Meeting by zoom. Thank you to our Council members, and to the more than 40 members who were able to attend the AGM, for your support and patience.

At the AGM I explained the work of the Executive since we came into our roles. Since we started our work in late 2019, we have been focused on assuming our roles and responsibilities and finishing tasks agreed to by the outgoing Executive. The Executive of the Society has met 7 times since late 2019 on weekends for formal executive meetings of two hours each, and held informal discussions in March, May, July and August. The ANZSHM Council met on 11 July, and our AGM was held on 22 August. The positions on the Executive and Council are all voluntary and I thank everyone for their contributions.

At the AGM we agreed to the outcomes of the recent review of our Society's Rules with the passing of our Special Resolution to amend the Rules of the ANZSHM Inc 2020, which means these amendments will be adopted and incorporated in the Society's Rules. Thank you to those involved in our comprehensive and wide-ranging review of the Rules, which took into account input from members. The ongoing good governance of the Society has been a long-term aim. The revisions are cohesive and make our rules fit for purpose, and also bring our Society up to date, and in line with current and leading practice for not-for-profit organisations.

Substantive amendments include capacity for electronic communications, amending the quorum, clarifying eligibility for election as President, and removing obsolete Rules. We can still make future changes to our Rules when we need to update these, and we have also pledged to follow up on any outstanding items as discussed at the AGM.

The AGM enthusiastically endorsed the Council recommendation that Dr Judith Godden be given Honorary Membership of the Society. Dr Godden has been an active and influential historian of medicine for the past forty years. As President of the ANZSHM Judith was responsible for a number of significant developments in the Society. An enthusiastic attendee of ANZSHM conferences, Judith's papers have enhanced the programs over the years. In her academic role with the School of Nursing, University of Sydney, Judith contributed to the creation of a new generation of nursing graduates imbued with an understanding of the importance of the history of their profession to their current practice. Judith has also made a significant contribution through her scholarship, and as an academic mentor and advisor, Judith has contributed to the academic and professional development of many people. Congratulations, Judith!

In other news, it is important that we celebrate the marvellous contributions of our members to public discussions of health, medicine and disease throughout the pandemic in 2020. We have created a new page on our Society website to collect and share these achievements more widely. Thank you to Associate Professor Paul Sendziuk for his work to create 'COVID in Context' which can be found at: <https://www.anzshm.org.au/covid-19-in-context>. Particular highlights include the television appearances of several members including Dr Anthea Hyslop and Dr Peter Hobbins, the extensive set of media engagements by Peter and others interviewed for radio and online media, and many other achievements.

Finally, the ANZSHM Conference 2021 will be delayed until December. More details can be found in this newsletter.



Catharine Coleborne
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ALL ABOUT OURSELVES

Members of the ANZSHM describe their life, work and interests

I married a doctor is the easy answer to how I became interested in the history of medicine! I had a BA in history from Bedford College, University of London, and was interested in social history but had never thought about medicine. John and I met in Africa while still students and that is also relevant in my subsequent journey – but more of that later.

Like many new graduates, I was looking for work when John showed me a small advertisement in a medical journal for a part-time course and thought I might be interested. We were then living in Leicester in the English Midlands, but the course was held on alternative Saturday mornings in London. I could get a cheap day return train ticket, do the course in the morning, and go shopping or explore in the afternoon! The course was the Diploma in the History of Medicine run by the Society of Apothecaries. Over the year I learned about all kinds of topics in medical history and had great fun; I was the only person with a humanities background. I also discovered the wonderful building tucked away off a tiny side street that is home to the Society.

Our plan was to go overseas, although the destination was unknown. We came to New Zealand via Papua New Guinea, spending a year in the capital Port Moresby before moving out to the small government centre of Bogia in Madang Province. With its 'localisation' policy I was not allowed to work, but I spent time in the Medical School Library and read. I also travelled with John and learned about what it was like to provide healthcare in remote areas. We arrived in New Zealand in June 1982; after a few months in Wairoa we went to Northland to the Special Medical Area of Whangaroa with its small community hospital at Kaeo. I soon found out that despite moving countries the challenges of providing healthcare in rural and remote areas had many similarities.

Little did I know, but these years were foundational to my later interests and journey which began when we moved to Dunedin in 1989 and I started a part-time Diploma for Graduates with the Department of History at the University of Otago. I began a paper at a time, but half-way through took up the opportunity to do a Masters researching a history of another small hospital – Balclutha. I presented at my first conference in

Auckland in 1994 and discovered the wider world of the history of medicine and health in New Zealand and Australia.

In 1996 our family's life changed direction. We were to be the next volunteers at the small hospital at Khunde in Nepal built by Sir Edmund Hillary. Our lives were busy. Thousands of tourists visited the area and I spent a lot of time talking to those who came to the hospital and trying to answer their many questions. I learned so much from the local Sherpa community. From Nepal we went to Fiji for a year before returning to New Zealand and home in Dunedin.

Why don't you do a PhD – you have so much primary material? A long-time hope now became reality. My topic was Khunde Hospital, but reflecting my previous experiences I wanted to explore its history from different perspectives. I enjoyed it, but what to do next? An open door brought me to the School of Pharmacy at Otago. I needed a form signing and the History HOD thought some teaching might interest me. The Pharmacy Dean commented on my Society of Apothecaries diploma. So began my next journey. As a historian in health sciences my teaching and research revolves around the broader context of medicines and society.

I have been a member of the Society for a number of years now, have presented at conferences when able to, have had students present, but in 2019 I was both surprised and pleased to be asked to join the editorial team of *Health and History*. I enjoyed seeing many of you at the Auckland conference last year and look forward to our on-going association.

Susan Heydon
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MEMBERS' NEWS

Welcome!

John Baines VIC
Robert George NSW
Timothy Grey VIC
Diane Lightfoot VIC
Heather Lyle NSW
Jonathan Wardle NSW

ANZSHM COUNCIL

At the AGM on 22 August 2020 Georgia McWhinney, Vice-President of the NSW Branch, replaced Charmain Robson as the NSW representative on Council for 2019-21. Charmaine continues in her role as Society Treasurer.

ISHM NOTES

As advised the 47th ISHM Congress has now been deferred until August 2021. Also, as expected, it has been decided to defer the ISHM Summer School on the History of Medicine as well, to August 2021, just before the Congress. See the Congress web page for details: www.ishm2020.com.

The Congress organiser, Dr Juris Salaks, and his team have set up a virtual opening of the Congress in August this year in an effort to keep the idea of the Congress alive. Those participating in the 2021 Congress are welcome to 'attend'. They have created a video clip that describes the opening and includes an invitation to join the event on 24 August, 6.00 pm Riga time (this is about 1.00am our time!). I understand a virtual toast is planned. The video clip is available for all at <http://ishm2020.rsu.lv/news/join-virtual-opening-ishm2020-congress>.

Brian Reid
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COVID-19 and RESEARCH

One thing we are all learning from the Covid experience is that teaching / learning has changed, perhaps irrevocably, thanks to Zoom and webinars – alien words to many of us just a few months ago. Historians have a crucial role to play in placing Covid into its historical context and a number of our Australian members have been to the forefront in this regard (see <https://www.anzshm.org.au/covid-19-in-context>).

As Dr Michael Spence, Vice-Chancellor at the University of Sydney, wrote to Peter Hobbins: 'Congratulations on making the University's top 10 media spokespeople for June 2020. Your media commentary on lessons learned from the Spanish flu reached an estimated audience of 1,379,091.'



In New Zealand, the Auckland Arts Faculty multidisciplinary Pandemics Hub has contributors from areas as diverse as anthropology, sociology, politics, international relations, languages and linguistics,

education, media and communication, philosophy and, of course, history. The latter discipline will contribute insight on pandemics from the Ancient World to the 1918-19 influenza. Three of the participants contributed to our 2019 biennial conference in Auckland – Heather Battles (polio), Linda Bryder (influenza) and Ellen Nakamura (early modern Japan).

NEW RESOURCES

ANZSHM webmaster Paul Sendziuk recently set up two new web pages, providing a brief history of the Society and a list of past presidents. The links are:
<https://www.anzshm.org.au/history-of-anzshm>
<https://www.anzshm.org.au/past-presidents>

EDITOR'S COLUMN

Contributions to the Newsletter are always welcome. The next deadline for copy is 15 November 2020. Copy should be sent to the editor, Derek A Dow at d.dow@auckland.ac.nz.

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AMPI NEWS

Colonial Doctors in Quarantine

Smallpox! After a shaky start, the alarming outbreak that began in Sydney in May 1881 was confidently handled by the authorities, though not without controversy. The population of Sydney at the time was about 220,000. Such was the level of public interest and concern that thousands of articles relating to smallpox appeared in the colony's newspapers during the nine months of the epidemic.

The first case was a child, the son of a Chinese merchant living on the premises of On, Chong and Company in George Street. The boy was diagnosed with probable smallpox on 25 May by the Health Officer, Dr Haynes Alleyne, and the building barricaded by police. A Government Medical Officer, Louis Foucart MD, visited the premises repeatedly over the next week to monitor the patient's progress. On 3 June Foucart was himself belatedly quarantined there, the government supplying his bed and bedding.

At Surry Hills on 14 June Dr MJ Clune diagnosed smallpox in Edward Rout, a carpenter, who was promptly quarantined at home along with thirteen others who were living in the house. Two policemen were stationed outside - supplies to be sent in by the government as required. As Dr Foucart was still in quarantine, another Government Medical Officer, Dr SM Caffyn, was sent to vaccinate the household. This he managed to do by having each person poke an arm through a hole in the back fence.

Anticipating an epidemic, the government then decided to relocate the Surry Hills household to the quarantine station at North Head. Too sick to be moved, Mr Rout died at home, but the others in the house were ferried out to North Head by steamer. Drs Caffyn and Clune, instructed to undertake medical duties at the station, arrived there somewhat reluctantly the following day.

Michael Joseph Clune was a native Australian, educated in Sydney and later Dublin, Ireland, where he qualified LKQCP and LRCSI in 1872. He returned to practice in Sydney in 1873. Stephen Mannington Caffyn, the son of a Sussex grocer, qualified MRCS 1876 and LRCP Edinburgh 1878. He emigrated to Sydney in 1880 for health reasons, accompanied by his Irish wife Kathleen.

Accommodation at the quarantine station comprised tents, wooden huts, and cottages. An old ship, appropriately named the *Faraway*, was

also used. Conditions were primitive, and management often inadequate. The result was an unhappy, occasionally tragic situation at the station, attracting intense public scrutiny and generating much popular debate. There were not many lighter moments, but some amusement was afforded by the sight of the two doctors chopping their own firewood, and even cooking their own meals, as depicted in a sketch published in the *Illustrated Sydney News*.

In August, the government set up a separate Sanitary Camp with 'floored tents and other conveniences' for healthy families who wished to move out of homes or neighborhoods where there was smallpox. Home treatment of the sick was permitted, subject to mandatory reporting, the provision of two isolated rooms for the patient and a nurse, strict quarantine, and an infection control regime.



*Drs Caffyn and Clune preparing breakfast:
'We were compelled to chop our own wood.'*

By then Dr Foucart had been released from On, Chong and Company's premises, and the two disgruntled doctors at North Head had been relieved by others. The epidemic ended six months later, having resulted in about 150 cases and 40 deaths. Dr Clune travelled to Europe and acquired more qualifications before returning to professional life in Sydney. Dr Caffyn went into practice in Melbourne, where he and Kathleen, both gifted amateur writers, socialised in literary and artistic circles. His medical novel, *Miss Milne and I* (1889) included many incidents that occurred at the quarantine station.

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New Zealand in Isolation

The concept of the 'tyranny of distance' was popularised in 1966 by Australian historian Geoffrey Blainey in *The Tyranny of Distance: How Distance Shaped Australia's History*. For more than two centuries, not just during the current Covid crisis, one can argue that this distance has offered a rare degree of protection against infection, for both Australians and New Zealanders. As Stephen Due explained in his column, quarantine was the major weapon in this process.

When New Zealand passed its first major health legislation, the 1872 Public Health Act, its purpose was 'first, to prevent the approach of disease from foreign seas; secondly to suppress it when it occurred; and, thirdly, to provide for vaccination': 42 of the 120 clauses dealt with quarantine. The success of this measure depended in large part on the vigilance of harbour masters, resident magistrates and medical practitioners.



Otago quarantine station, opened in 1874.

Not everyone welcomed this protection. In March 1874 an *Otago Daily Times* correspondent complained about the 'impertinent bounce' of Dr William Donald, health officer for the Port of Lyttelton, who had attempted to impose quarantine on the *SS Phoebe*, describing his intervention as the 'whims' of a 'subordinate' which caused unnecessary inconvenience and expense.

Other doctors involved in quarantine disputes fared no better. In 1863 Dr John Niven, surgeon aboard the *Victory* which was quarantined on arrival in Dunedin, vented his spleen in the local press at Dr Alfred Eccles, who had arrived the previous year, for his ignorance about the need for this action. On a brighter note, some of *Victory's* passengers, carpenters by trade, put their enforced isolation to good use by erecting better buildings at the quarantine station.

Others forced into isolation had rather different experiences. In 1863 travel writer HB Morton was a passenger on the *Tyburnia*, quarantined at Rangitoto Island off Auckland

after arriving with 35 smallpox cases on board. Sixty years after the event, Morton recalled the young male passengers had enlivened their evenings by 'singing erotic songs of an unprintable character'.



The Tyburnia.

Doctors, like any other passengers, could be inconvenienced by quarantine requirements. In January 1878 Dr John Dale's request for a solicitor to board the *Renfrewshire* to give advice to him was vetoed since the lawyer would then have to spend two weeks in isolation. It is unclear if Dale wished guidance on a pending lawsuit against one of the ship's stewards for theft and assault during the voyage, or in regard to a warrant brought against him the following month for failure to provide for his wife and child since August 1877. In either event Dale soon departed for New South Wales, where he committed suicide by ingesting prussic acid in 1897.

By early 1888, Rangitoto had been replaced by the smaller but more inviting Motuihe Island as Auckland's quarantine station. Robert Andrews, a 50-year-old retired British Army doctor who had registered in the colony in December 1879, learned that an old Army comrade, Dr Edward Menzies, had just arrived aboard the *British Empire*; Menzies was en route for Napier, where he would remain until his death in 1904. As soon as the two men shook hands the local health inspector bustled up and announced that Andrews—and his wife—must stay on the island for two weeks since he had now been in contact with an infected person.

Adding insult to injury, Andrews sustained a badly sprained ankle while trying to relieve the boredom of his confinement with shooting and fishing. It is perhaps no surprise that he resigned all his positions in July 1880 and returned to England, where he died in October 1894.

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BLAST FROM THE PAST

Medical History Australia 25 years ago

The August 1995 Newsletter paid tribute to Frank Forster, a Melbourne obstetrician, gynaecologist and medical historian, who had died suddenly in March 1995. Prior to his death Forster had gifted his extensive collection of books to the RACOG and was actually en route to a ceremony to name the Library after him when he died. As a natural adjunct to his fascination with medical books, ephemera, and instruments, Forster was one of the founding fathers of the Australian Society of the History of Medicine and one of the inaugural editors of our Newsletter in 1981.

Bryan Gandevia, another of the originators of our Society, praised Forster's wider contribution to scholarship in the following terms:

Less easily assessed is his influence on students and others engaged in historical research, to whom he gave generously in time, information and guidance.

A decade later there was an uncanny echo of this episode at the first of our biennial conferences to be held in Auckland. Waikato GP, medical administrator and medical historian Rex Wright-St Clair, who had convened New Zealand's first international medical history conference, in Hamilton in 1987, died in his sleep after attending the opening ceremony, and shortly before he was due to present the Rex Wright-St Clair Prize for the best paper submitted to the conference by a graduate student. As I wrote to Rex at the time, in my role as Conference Secretary:

We all felt that the first visit of the ASHM to New Zealand ought to be marked by paying tribute to the pioneering role you have played over so many years in promoting the study of medical history, and in encouraging others to do likewise.

The parallels with Frank Forster's generosity are easy to see.

While Frank Forster had been instrumental in establishing the Australian Society, Rex was the inspiration behind our quest to have New Zealand become an integral part of the ASHM. It was a great shame that he was not present at the 2005 AGM in Auckland two days after his death, when the members voted unanimously to change the name of the Society to the Australian and New Zealand Society of the History of Medicine.

NSW BRANCH NEWS

Medical History Webinar Series 2020

The June talk in our medical history webinar series was highly successful, receiving numerous positive comments. We sincerely thank speaker Dr Kirsty Short for her time, interest and expertise.

Georgia McWhinney will deliver our next talk, based on her recently submitted PhD thesis titled: *'I Can ... Doctor Myself Up Without Going to the Doctor': Vernacular Medicine in the British World During the Great War*. Congratulations Georgia! Georgia is the vice-president of the NSW branch.

The date of the talk is yet to be confirmed, but is tentatively planned for November, and will include a Q & A session. Hosted by the NSW branch, Georgia's talk will be available to *all* ANZSHM members with ZOOM access.



In these uncertain times, please support the NSW branch, each other, and this fascinating free webinar! We will email the exact details and an access link closer to the date.

On Wednesday 9 September the dynamic NSW branch will run its next executive meeting via Zoom.

Dr Vanessa Witton, NSW branch
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JOURNAL WATCH

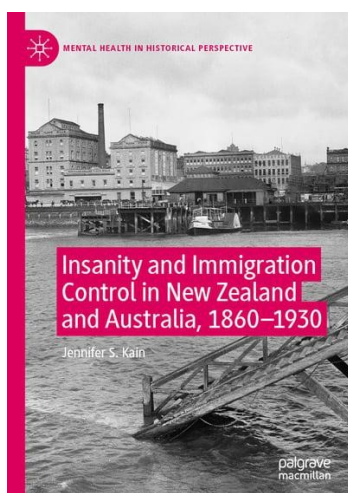
Jennifer S Kain, 'Standardising Defence Lines: William Perrin Norris, Eugenics and Australian Border Control', *Social History of Medicine*, 33:3, August 2020, 843–59, <https://doi-org.ezproxy.auckland.ac.nz/10.1093/shm/hky075>.

This article highlights the efforts of the first London-based Commonwealth Medical Officer -

Dr William Perrin Norris - to keep 'defectives' out of Australia by means of the 1912 Immigration Act, which replaced the 1901 legislation intended in large measure to exclude 'illiterate' non-Europeans. Kain argues that Norris, a Melbourne medical graduate was the architect behind the medicalisation of Australian border control.

Earlier this year our Vice-President Peter Burke published a short piece in the RACS publication *Surgical News* on 'The surgeons of *Vanity Fair* magazine'. As he explained at the time, 'This introduction leads into a proposed series of articles in *Surgical News* discussing some of the surgeons featured in *Vanity Fair* over the years, outlining not only their lives, but also in an attempt to formulate the reasons for their selection, be it professional, or non-medical, such as their role in literature, politics or the arts.' To date Peter has contributed articles on Sir James Paget, *Surgical News*, 21.3, 46-7 and Sir Henry Thompson, *Surgical News*, 21.4, 50-2.

BOOK NOTICES



Jennifer S Kain, *Insanity and Immigration Control in New Zealand and Australia, 1860-1930*. Palgrave Macmillan 2019. 244pp.

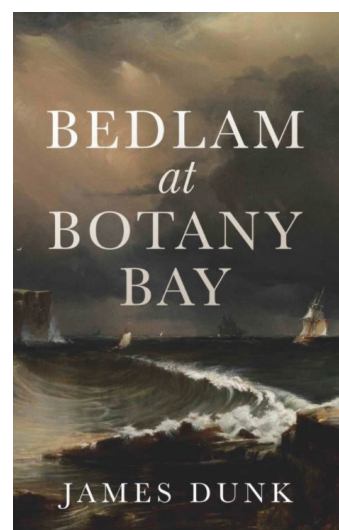
Based on her 2015 Northumbria University PhD, Preventing 'Unsound Minds' From Populating the British World:

Australasian Immigration Control & Mental Illness 1830s-1920s, Kain's book analyses the insanity clauses incorporated into the immigration controls adopted by Australia and New Zealand. She also examines the paradoxes inherent to the promotion of the two countries as 'invalid's paradises' by governments, emigration bodies, and doctors who practised outside the asylum structures.

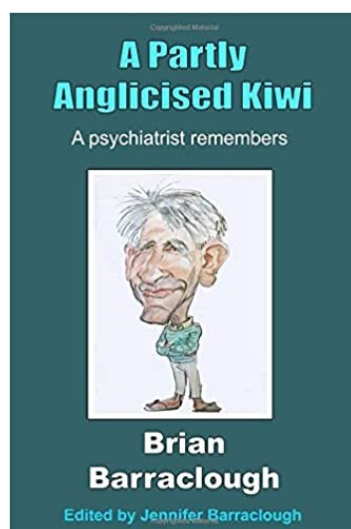
James Dunk, *Bedlam at Botany Bay, Sydney*: New South Publishing/UNSW Press, 2019. 320pp. AUD\$34.99. ISBN 978 1 7422 3617 9.

This book poses an important question: 'What happened when people went mad in the fledgling

colony of New South Wales?' Based on correspondence from government officials, lawyers, doctors, and the families of sufferers, Dunk paints a disturbing picture of the stresses attendant on life in an alien environment, and those individuals 'who found themselves not only at the edge of the world, but at the edge of sanity' in the first four decades of the nineteenth century. As one reviewer wrote, this is 'a lyrical, humane and creative approach to writing the history of madness in and out of the asylum'.



Brian Barraclough (edited by Jennifer Barraclough), *A Partly Anglicised Kiwi: a psychiatrist remembers*, independently published April 2020, 236pp, and available in paperback or ebook versions from Amazon websites .



Brian Barraclough was born near Auckland in 1933 and qualified in medicine from the University of Otago in 1957, spurred on by his own experience in contracting tuberculosis at the age of 17, with his experiences in the TB ward forming part of his narrative. In the early 1960s he travelled to the UK to join the

psychiatric training programme at the Maudsley Hospital in London, working alongside psychiatrists. His memoirs include memories of spending a year in psycho-analysis, and bad trip on LSD. As a scientific officer with the Medical Research Council he became an authority on suicide.

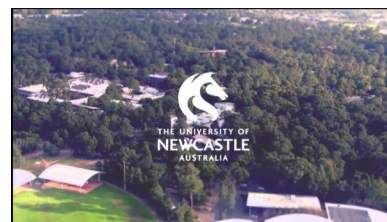
Barraclough returned to New Zealand after four decades in the UK. His other publications include a biography of Carmalt Jones, professor of systematic medicine in Otago 1920-39. (DW Carmalt Jones, edited by B Barraclough, *A physician in spite of himself*, London 2009).

ANZSHM Biennial Conference, 1-4 December 2021

Innovation in Health and Medicine

University of Newcastle, Australia

Call for Papers



We invite scholars working on social and cultural histories of health and medicine to contribute papers that specifically address past, present or future innovation. In our Society's first conference since the 2020 COVID-19 global pandemic, we particularly encourage papers that address urgency and innovation related to the identification, diagnosis and management of disease in a transnational context, the health implications of climate change and environmental modification, indigenous health, and the intersection of health and medicine with social issues. We are also interested to encourage dialogue between practitioners and historians.

Other topics broadly related to the central theme might include:

Medicine in public life and policy

Healthcare and heritage

Museums and the body

Histories of diabetes and its treatments, including insulin

Indigenous health and medicine

Gender and sexualities in health

Historical methodologies and practices (including nursing histories; hospital histories; and community health)

The future of Medical Humanities

Epidemics, pandemics and vaccines in history

Telemedicine and other health communication technologies

Medicine and technology

Histories of disability

Planetary health

Trauma and resilience

The conference will feature three invited international keynote speakers, two plenary speakers/panels, and a Witness seminar marking the centenary of the discovery of insulin, situating it in the changing cultural, health and medical environments of the past century.

We seek papers (20 minutes) and panels from all periods and regions that address these themes. We particularly welcome submissions that highlight inclusivity and diversity. Submissions from scholars across the range of career stages are welcome, especially from postgraduate and early career researchers. ANZSHM offers competitive travel grants to postgraduate students to attend the conference.

Proposals for papers should be in a single Word document, including 250-word abstract and a short CV/biographical statement. Panel proposals (3 papers) are also welcomed, and should include the same information plus a statement of the panel's aims.

Send these to ANZSHM2021@newcastle.edu.au by Monday 28 February 2021 with confirmation of outcomes by 1 June 2021. Registrations will open in July 2021 and a final conference program should be available at least one month before the conference.

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For the latest information, visit the ANZSHM Internet Website: www.anzshm.org.au

LETTERS, PHOTOGRAPHS AND ARTICLES ARE WELCOME, PREFERABLY IN ELECTRONIC FORMAT.

DEADLINE FOR THE NEXT ISSUE WILL BE 15 NOVEMBER 2020.