HISTORICAL NOTICE

OF

THE LYING-IN HOSPITALS OF DUBLIN.*

BY THOMAS E. BEATTY, M.D.,

Physician to the City of Dublin Hospital; Master S.E. Lying-in Hospital;
President of the Obstetrical Society of Dublin; etc.

GENTLEMEN,—In taking the chair of this section of the British Medical Association, my first duty (and I discharge it with great pleasure) is to express my thanks to my brethren in this city who kindly selected me to occupy this honourable position; and to the Council of the Association, who have been pleased to sanction the nomination of the Irish Branch. My next duty is to express a most cordial welcome, on my own part and that of the medical profession in Ireland, to our distinguished and numerous friends from the sister country who have honoured us with their presence on this occasion. I trust that the meeting which has now so happily commenced may go on to the satisfaction of all the members, but particularly of those who take and have taken a leading part in the management of this great and most important institution; and I hope that at its close the British Medical Association will have no reason to regret that the meeting of 1867 was held in the metropolis of Ireland.

For the first time in its history, the Association is now divided into sections, which, considering the vast number of its members and the different branches of the profession they embrace, seems to me to be a most convenient and wise arrangement. Subjects that will deeply interest those who frequent the different sections will be brought forward, without the risk of being considered wearisome or uninteresting, if produced at a general meeting; and each member will have the opportunity of selecting the section or communication most congenial to his tastes and pursuits.

As the time appropriated for the meeting of the sections is necessarily limited, and the number of communications promised is very large, it has been thought right that the Presidents of the different sections should not occupy much time in addresses from their respective chairs. I therefore trust that the brevity of my observations may not be ascribed to any want of respect to this section, but to my desire to forward its interests by leaving as much time as possible for the authors of the highly important papers on the list now before me.

Meeting as the British Medical Association now does for the first time in Dublin, and many of its members who honour us by their presence being now for the first time visitors of our city, it might be expected that, as occupant of this chair, I should make some allusion to the different medical institutions with which we are surrounded; and, if time permitted, it would afford me much pleasure to do so. There is one department, however, with which this section of Midwifery is more particularly concerned, upon which if I dwell for some moments, I trust you will not consider my observations out of place. I think it not unlikely that one of the motives that induced some of our brethren from the other side of the Channel to attend this meeting was the opportunity it afforded to visit and inspect the Lying-in Hospital of this city—an institution of which it would be affectation if I were to say we are not proud. The chief physician, the head of that institution, called in its charter the Master, holds his office for seven years; and it happens most fortunately that the place is occupied at the present moment by one who, in addition to his sound practical knowledge and consummate skill, is endowed with a kindness and courtesy to strangers which render the visits to that institution so satisfactory. Dr. Denham is at his post every morning, and gladly receives all who wish to see the hospital.

The history of the origin, foundation, and building of that establishment is very remarkable. It was not built by Government or by public subscription; neither was it founded and endowed, as two of our largest hospitals were, by medical men, who left their large estates for the purpose. Dr. Stevens and Sir Patrick Dun have enriched our city by founding the hospitals which bear their honoured names. But the Lying-in Hospital was built by a poor man, a physician, poor in worldly wealth, but rich in benevolence and indomitable energy. In a biographical memoir of Dr. Bartholomew Mosse, written by Sir William Wilde, and published in the November number of the *Dublin Medical Journal*, 1846, we have a most interesting and accurate account of that most extraordinary man. I wish much I had time to bring before you all the wonders that memoir records. I can only content myself by recommending it to your perusal, and stating some of the most prominent incidents.

* Address delivered at the opening of the Section of Midwifery of the British Medical Association, August 7th, 1867.

Dr. Mosse first purchased a house in South Great George's Street (then called George's Lane), which he fitted up as a lying-in hospital, and opened on March 15th, 1745, continuing to support it chiefly at his own expense, and constantly attending it in person, until the apparent usefulness of it induced several well disposed persons to encourage the undertaking by benefactions and yearly subscriptions, which encouraged him to enlarge his plan. Of the kind and amount of aid which he received, we read the following curious item. "He belonged to a society called the Union", consisting of a number of persons of different occupations, most of whom subscribed four shillings and fourpence yearly, to be paid quarterly, and this is supposed to have been the first assistance he received. This institution was the first of the kind in the British dominions. Besides ordinary subscriptions, Dr. Mosse had recourse for its support to plays, lottery schemes, concerts, oratorios, etc. Finding that this hospital did not satisfy the wants of the poor and his own aspirations, he determined to erect one on a grander scale; and, three years after the opening of the old house, he took the ground on which the present hospital stands, and, while the old establishment was still kept open, he undertook the herculean task of building what you now see, one of the finest ornaments of this city. On June 4th, 1751, the first stone of the hospital was laid. In the memoir by Sir William Wilde, it is stated: "It is worthy of remarking what the Doctor assured an intimate friend, that on that morning he was barely worth five hundred pounds, and, although he knew the hospital would cost him twenty thousand pounds, yet he never despaired of seeing it finished." By the same devices, balls, concerts, lotteries, plays, etc., he contrived to obtain money from time to time; but these would not keep pace with the expenses, and he became overwhelmed with debt, and hourly subject to arrest and imprisonment, having sold or mortgaged everything he was worth. In this distressed condition, he was advised to make an application to the House of Commons, who granted six thousand pounds; and a charter nominating the first governors was likewise obtained. Another sum of six thousand pounds was subsequently granted by Parliament; and, at the close of the year 1757, six years from the laying of the first stone, the hospital being nearly finished, it was opened for the admission of patients on December 8th. Dr. Mosse was most properly appointed Master of the hospital during his life, which, unfortunately, was of brief duration; for, worn down by intense study and anxiety of mind and labour of body, his health gave way, and he died on February 16th, 1759, at the early age of 47 years, leaving the Lying-in Hospital a monument of his surprising perseverance, and an evidence of energy and benevolence such as have rarely been exhibited. It has been well said by Sir W. Wilde: "Men will labour diligently for their own advancement, either directly or indirectly, and will even contribute liberally to the relief of distress; but how seldom do we see an individual devoting his time, his talents, bodily and mental labour, and his wealth, to the sole purpose of raising up an asylum for the relief of suffering, and at the same time for the improvement of his own profession, without the prospect—nay, we may say, without the possibility—of an adequate reward. And yet this was done, simply and without display, under circumstances of unparalleled difficulty, by the founder and builder of this hospital. If the College of Physicians may justly glory in such a man as Sir Patrick Dun, the Surgeons have no less reason to be proud of Dr. Mosse."

But, gentlemen, in our admiration of the noble institution of which I have endeavoured to give you a feeble sketch, we must not forget that we have in this city another very valuable and important institution, the Coombe Lying-in Hospital, also founded by a medical man, the late Richard Gregory. Some time about the year 1828, now nearly forty years ago, he perceived, what indeed was manifest to most who thought upon the subject, that the whole of the large portion of the city lying to the south west, including the populous but very poor district termed the "Liberties," was totally unprovided with any establishment for the relief of poor lying-in women, whose distance from the large hospital in the north was almost a complete barrier against their being able to avail themselves of its shelter. The Old Meath Hospital was then vacant, its staff and patients having been removed to the larger and more commodious building, the New Meath Hospital. Mr. Gregory took the old building, and, unaided by any one, fitted it up as a lying-in hospital, which he conducted with great ability and advantage to the public until his death. It is now under the management of three eminent physicians, Dr. Sawyer, the Professor of Midwifery in the Royal College of Surgeons, and President of the Obstetrical Society; Dr. Ringland, who has promised a very important communication to this section on cases in that hospital; and Dr. Kidd, the valuable and energetic secretary of the Obstetrical Society, who now kindly acts as secretary to this section. These gentlemen are always anxious to receive the visits of their professional brethren, and I can promise you those who go will not be disappointed.

These very hurried observations will of course appear trite to the

Irish portion of my audience, who are familiar with the facts; but I trust they will not be considered uninteresting to our visitors, who have now, for the first time an opportunity of making a personal acquaintance with the Dublin School of Midwifery.

FOREIGN BODY IN THE POSTERIOR NARES.

By HENRY LOWNDES, ESQ.,
Surgeon to the Liverpool Northern Hospital.

A CHILD, aged 15 months, was brought to the Liverpool Northern Hospital on July 20th, 1867. It had been seen the day before playing with a brass ring, and this, the mother thought, had become fixed in the throat, as the child had not been able to swallow without great difficulty, and then only liquids. There was a sound, scarcely amounting to a whistling noise, with the respiration. On examination, a rounded substance could be felt lying above the soft palate on the left side and depressing it, and, by drawing the velum a little forward, the sharp edge of a metal ring could be felt projecting from the posterior nares. The hard foreign body could be felt by a probe passed through the left nostril, but could not be moved. The point of the probe could easily be passed through the ring out into the throat.

A little chloroform was given to the child, and then, with a pair of curved forceps used with some little force, I was able to push the substance back into the throat with one hand, and there received it into the finger and thumb of the other. The ring was of brass, and the drawing below shows its exact shape and size. So large a body could not have

Brass ring removed from the posterior nares.

been introduced through the nostril, so I presume that, while the child was on the point of swallowing the ring, a choking fit came on and drove this substance behind the soft palate, where it became impacted at the orifice of the posterior nares on the left side.

HOURLY CONTRACTION OF THE UTERUS SIMULATED BY THE PRESSURE OF A NARROW BINDER.

By WILLIAM T. GREENE, M.B.,
Physician to the Moira Dispensary.

On the 5th of June last, I was called in to see Mrs. E. L., who had given birth to her first child on the previous evening at 10 P.M., after a natural and not very protracted labour; but who, although fourteen hours had elapsed since the termination of the second stage, had not yet been delivered of the placenta.

On my arrival at the house, I found the patient, a middle-sized healthy young woman, of about 25 years of age, in a state of abject terror, and much exhausted. Her attendant, an ignorant old woman, had tied the end of the funis that protruded externally to the foot of the bed, in order "to prevent its going back". The unfortunate patient had also been directed to keep "quiet"; and, following the nurse's injunction to the letter, had not ventured to stir, even to empty her bladder, of which she stood in urgent need. There had been some *post partum* hæmorrhage, though not to any great extent. A vaginal examination told me that the placenta was retained in the uterus; but, before attempting its removal, I proceeded to examine the abdomen externally, and found a very narrow binder, tightly applied below the uterus, which was much enlarged, but not tender. Thinking that I had discovered the cause of the retention of the after-birth, I immediately loosened the binder, when an enormous clot escaped, and, in a minute or two, the long-retained placenta. Good contraction followed, and the patient recovered without any bad symptom.

In this case, the narrow binder originally applied, or which had slipped below the uterus after the birth of the child, had prevented the escape of the remaining contents of that organ, simulating that rather unusual complication of child-birth, hourly contraction of the uterus.

ON THE ACTION OF THE TETRACHLORIDE OF CARBON.

By ARTHUR ERNEST SANSOM, M.D.Lond.,
Late House-Physician and Physician-Accoucheur's Assistant to King's College Hospital.

It is a source of gratification to myself that the agent which I introduced before the Obstetrical Society on February 7th, 1866, should have been lately approved by other observers, and that the views which I then expressed as to its uses and actions should have been, in most particulars, closely corroborated. I cannot, however, altogether endorse the sanguine expectations which have been expressed of its proving the anæsthetic *par excellence*. I think it right, first, to correct some errors which have gained ground concerning the question of the priority of introduction of this addition to our materia medica. In one journal it was stated to be an anæsthetic agent of the most recent discovery; in another place it is recorded to have been introduced by Sir James Simpson. So far as I know, the real truth is, that the first experiments with the tetrachloride of carbon as an anæsthetic were performed conjointly by Dr. John Harley and myself on July 4th, 1864; and the first record thereof was made by myself in my book on chloroform (page 39), published in May 1865. The paper by Sir James Simpson, drawing attention to the tetrachloride, was published in the *Medical Times and Gazette* seven months afterwards. Subsequently to having written the essay read before the Obstetrical Society, I have made a great number of experiments with the tetrachloride of carbon; and the deductions from them, read by the light thrown upon them by the researches of Dr. Protheroe Smith and Mr. Nunneley, I propose to record in this communication.

I.—EXPERIMENTS ON ANIMALS.

1. *Effects on Muscular System.*—In the course of my experiments on animals, I have found that struggling and inordinate muscular action, as effects of the inhalation of the tetrachloride, are of very common occurrence. Such signs are recorded as having been observed in six guinea-pigs, one dog, one cat, and a large number of frogs experimented upon. The struggling is at first voluntary, but afterwards is evidently due to the characteristic action of the vapour. In the case of a frog, the first instance in which Dr. John Harley and myself tried the anæsthetic, the whole of the muscles became rigid, the limbs being extended. In guinea-pigs, I have found, at the time when perfect insensibility begins to be established, that the animal stretches forwards its front paws, and, fixing these upon the floor, jerks the hind limbs backwards. To further describe this peculiar effect on the muscular system, I may quote the following details of an experiment performed at my house on March 3rd, 1867; Dr. Barratt, of Cleveland Gardens, being present, and assisting me in the observation. A healthy guinea-pig was placed under a bell-glass of 1000 cubic inches (16387 cubic centimetres) capacity, and two centimetres of tetrachloride poured upon a sponge were introduced. For three or four minutes the animal seemed uninfluenced; its respirations were about 80 per minute. The first sign of specific action was a general tremor, followed by micturition. It then projected its fore-paws, and leaned for support against the sides of the glass. Then followed sharp and sudden retrojection of the posterior members; the respirations being now a little deeper and slower. We found that reflex response to stimulus was not abolished. The tremor, which had continued until this time, now subsided, and was superseded by vigorous tetaniform spasms as the animal lay on its left side. The jactitations then gradually ceased in the front paws, but were actively kept up in the hinder. The animal now performed no voluntary muscular action, yet it still gave slight evidence of pain on stimulus. Sensation about the head was almost entirely obliterated; it existed in a slight degree in the anterior extremities, whilst irritation of the posterior limbs evoked considerable evidence of pain. This stage of spasmodic muscular action was protracted for a quarter of an hour, and, after removal of the animal from the impregnated atmosphere, continued for fifteen to twenty minutes, until the normal position of the limbs was attained; even then were exhibited slight tetanic tremors of the dorsal and abdominal muscles.

After the animal had perfectly recovered, it was re-exposed to an atmosphere of two cubic centimetres of tetrachloride in the same receptacle. A very early sign was arching of the back and twitching of the muscles of the hind quarters. In three minutes it fell on its right side; in four minutes there was complete anæsthesia. Immediately commenced a series of short gasps, as if from spasm of the diaphragm; these occurred every two seconds; the respirations were wholly thoracic—not abdominal. The animal died seven minutes after the commencement of the second experiment.

2. *Effects on Respiration.*—According to my experiments, it does not seem that respiration is influenced in the early stages of the action of the