REMARKS
ON
PAROCHIAL MEDICAL RELIEF.

By GEORGE C. WATSON, M.D.E.

Perhaps you will allow me to insert in your Journal a short statement of the results of two years attendance on the out-door poor in the municipal district of the West Derby Union. The only object I have in view is, to show the inadequacy of the contract system to remunerate properly the medical attendant; at least I can speak of my own case, and I wish that yourself and others should be able to judge from the facts of this case; and concluding, analogically, from other contracts similarly held by medical men in the various unions, there can be no question that the payment of medical men under the new Poor-Law Act is totally regardless of the true interests of the poor, prejudicial to medical practitioners, and, as far as it can be generalised, demoralising in its general bearing.

I have held office for two years precisely, and as each visit to one patient is required to be recorded in a book, an estimate can be obtained readily of the actual amount of "work and labour done." I find that I have been consulted at home, or paid medical visits, 652 times at least within these two years. I was compelled by the contract to find medicine for all these pauper cases. For this, I have received 10 guineas per annum; for the two years, 20 guineas; dividing 652 by 20, gives rather more than 7d. a visit, but as the medicine has to be found out of this 7d. a visit, but a small figure is left for attendance. At least one half must be reckoned for physic, and thus dividing the contract sum, per visit, into equal parts for attendance and physic; what a trifle is 3½d. a visit, or a consultation, even granting that the medicine could be furnished, at first cost, at this rate! The nature of many cases calls for a good deal of medicine; if we are justified in putting the rich to much expense for medicines, we should endeavour to do for the poor in essentials what we prescribe for their more affluent neighbours; hence, I am satisfied that the above sum has been quite absorbed by the furnishing the medicine; and I do not see how any medical man could, even by a sponging economy, realise anything for attendance, unless he were an homœopathist, and, in that case, we all know the poor would ascribe to the globules their real value—nothing medically—something to saddle a notion upon!

Now, whence comes shoe-leather, or even a new hat, out of such remunerative appointments? "*Ex nihilo nihil.*" Where stands the member of a liberal profession under the terms of such a contract? Ought he not to tread the winds on his rounds so that his shoes encounter no friction? In no other trading transaction is there the same counter-play of interest and feeling; the game of self-defence even is taken out of the surgeon's hand if he has a * for the wants and sufferings of those placed under his care.

It is with a simple wish to contribute my mite towards the alteration of a system so prejudicial to the parochial medical officer—so derogatory to the

character of the profession, so short-sighted in political economy, that I write this letter; even if only one class is oppressed unequivocally, it is bad, and the galled jade must wince! Satisfied I am, that our profession is so placed, as far as the new-Poor law arrangements go, and though all the paupers should be well attended to under such contracts, yet if it press hard upon, and screw down our own class, then it is an unequal and inequitable plan. With the wish to ascertain for myself the real bearing of the system, and to test its operation, I have continued to hold the post alluded to for the two full years past, with the view, all along, to do my duty strictly and to furnish what data I could at the end of the time. Both for the correctness of the statements I make, and the discharge of my whole duty as far as I knew it, and for non-exaggeration of the same, I challenge any investigation; I fulfilled the past labours as a duty, and I do this as a part of the same duty. I am now abundantly satisfied of the mistaken operation of the contract system. So badly are we paid, that for less than three times that rate of payment I would not undertake the post again. The juniors are those most likely to engage in these parochial duties—it is to warn them from accepting such posts on the present terms that I address these lines to you. I think, instead of the nominal payment of the guardians—no pay at all is preferable for many reasons—the same professional exercise among the poor can be followed out by a judicious gratuitous help; this can be regulated in proportion to the merits and need of the party, the calls of better-paying practice, &c.; and, by so doing, for your charity, at least you have the satisfaction of relieving the wants of the poor, and you enjoy the "*mens conscia recti.*" The mere nominal payment is, of all things, the most galling, and the sooner an effectual stop is put to all such, the better. Let not the junior practitioner forego the chief reward of his earlier practice, his gratuitous visits and advice to the poor, and deserving (himself the judge of that desert and poverty)—let him not lose the substantial reward attending a good and sacred act for the shadow of a reward in a payment only nominal.

The only right plan is, for the guardians of the poor to remunerate their medical officer at a certain fair and fixed rate, per visit, and to find the drugs themselves, either at their workhouse, or, if more convenient, by contracting with a druggist to furnish mixtures, pills, and powders, at so much per member. This would leave the practitioner unshackled in his direction of the medicines by any paltry considerations of profit and loss; a slight degree of returning self-respect would cheer him in his attendance upon the poor; he would begin to realise a conviction that his brains, stored with medical knowledge, were valued at a different rate from the drugs and ointments, and that his willing services were priced higher than those of a medicine porter. Dr. Kay, the commissioner, if I remember right, did specify the rate of 6d. a visit to be what even he thought a fair remuneration. This sum, if given for each recorded visit, would be a comparatively respectable remuneration, instead of the wretched and screwing contract plan at present pursued. In my opinion, no arrangement will be respectable, and of that gentlemanly character men of education have a claim to, until *brains and drugs* dis-

* Manuscript illegible.

solve partnership, so that no party under any circumstances supply both these materials. I grant it is our own fault for accepting these trading contracts; some surgeons in pecuniary straits will be found tempted to do so; but the profession, as a body, ought to resist them, and let the guardians over the country know that medical men will not contract like butchers and bakers for the supply of articles. Let them assert the standing of gentlemen, and they will be respected, their services valued, and adequately remunerated.

From my own experience in this appointment, I have been a loser by the office, and the duty has been most onerous and irksome; I have had to run at the beck of any pauper, who chose to demand my services, as I would not even run after their wealthy neighbours. If you neglect rendering a prompt attendance on the latter, the remedy is in their own hands—they send for another practitioner. If you do not run off to the poor (though they often cry out “wolf” ignorantly or inconsiderately), they have no self-defensive remedy at hand, if we except complaint to the board, &c.; therefore, humanity prompts your early attendance, and generosity whispers scorn in taking any advantage of the defenceless part of your patients. Thus the post is, in its scope, a very arduous one; the nature of the duty most imperative. For my part, I declare that I never had such hard work during the eight or nine years I have been a practitioner.

I will conclude by a few statistical remarks, limited and imperfect as they may be.

Out of the 652 visits paid amongst a population of 4,000 or 5,000, half of which, and more, are a mile at least from my house, many cases occurred where food was more wanted than physic.

Of contagious epidemic and endemic diseases, 37. *Sporadic*: Brain and nerves, 9; organs, respiratory, 22; circulatory, 4; digestive, 20; urinary, 6; generative, 8; locomotive, 7; integumentary, 6; of uncertain seat, 16; accidents, 9. Total, 144. Fatal cases, 13.

This is under the mark considerably, after all; yet it is, as far as it goes, correct, though several cases, in the hurry of business and the pressure of domestic and other cases, have escaped notice after all.

I must add, that I was separately paid about £4 for the midwifery and lunatic cases, and this is the only remunerative part of my contract—the only bit of fair professional payment.

In the affections of the “*brain and nerves*,” one case of insanity, supervening on epileptic fits, recovered under treatment; one case of *erotomaniacal* excitement recovered, though with threatening relapses.

In those of *respiratory* organs, one case of phthisis of apparently the most confirmed character, with well-marked hectic, extreme emaciation, and purulent expectoration, underwent the greatest possible improvement for about a year, though the lungs were extensively occupied with tubercle; the hectic left the patient, and the cough entirely, and she got fat, and went out of doors like others, to the surprise of all around, who had despaired of any improvement. She has since, however, had a fresh return of hectic and

cough, &c., and she has sunk under her disease this spring.

In the “*circulatory*,” one case of anasarca, in a man of sixty-two, arising from valvular disease of the heart, was singularly cured of the dropsy, under which he was labouring, half drowned, as it were, by a supervening attack of what I believe to have been serous apoplexy (not allowed post-mortem), so that those limbs which were oppressed by œdema were relieved from this direct mechanical numbing of the powers of sensation, and were visited in exchange by an indirect affection—paralysis of the motor powers. I was led to prognosticate, from the organic affection of the heart being the cause of the dropsy, that such must return as the effects of the apoplectic attack went off. For a fortnight my prognosis remained unfulfilled, but in a few days the anasarca returned, the thorax became implicated, and death ensued.

In the “*generative*,” one case of corroding ulcer of the os uteri came under my care, in which the poor woman had been prescribed for by a physician treating generally only her symptoms. I mention the case for this reason; she had acquired the habit of taking large doses of opium in its crude state by the mouth, a consequence too often of the prescribing for symptoms. I found that I could give far more relief to the woman by opiate suppositories, than by her continuing to take crude opium; less of the drug was required, and her stomach could bear the presence of food to recruit the waste of the body, the demand for food often being increased by agonising pain—a demand which actually is denied gratification by the other mode of exhibiting opiates though still importunately urged by the poor exhausted body, thus adding languor and the faintness of unsatisfied hungering of the system to the other ills; and even though we cannot cure, yet have we no warrant to anticipate the approach of the King of Terrors. I cannot help adding, that even more directly than by the rectum—I mean by the uterus itself—is the pain of course the most alleviable, and by less quantity of the anodyne still, whether opium, morphia, henbane, or conium be the one employed, and the additional advantage of the conjoined use of styptics in case of hæmorrhage is obvious, and has been elsewhere mentioned already. I had a case of *retained placenta* during twenty hours; the patient was completely blanched by the consequent hæmorrhage and all but pulseless; I had to tear it forcibly, yet as carefully as possible from the fundus uteri; she recovered finally, but not yet her colour or good health.

P.S.—What I have brought forward is in no disrespect to the board of guardians of this union; on the contrary, my personal respect towards that body as a whole, and towards some particular members of it, would only add to my reluctance in publishing this letter; but I conceive it a duty to shew the miserable system in present operation, and by so doing, to discharge that debt I owe to the body of the profession, and which every member of it owes, whether he knows it or acts upon it, or the contrary—that relative duty being understood by the term “*esprit de corps*.” Measures, not men, I look at.

West Derby-street, Liverpool,
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