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Editorial

Surgery in Oxford

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There must have been a certain amount of cutting in the Oxford of Robert D'Oilli, the Norman, originally in the patients' homes. The first buildings to which we can give the name of Hospital in Oxford is the hospital of St Bartholomew situated near Cowley Marsh, formed about 1100 by Henry I, for 12 lepers. Oxford's St Bartholomew's appears to have been a little older than its namesake in London.

The second hospital was that of St John the Baptist, which was built about 1180 just outside the Eastgate on the site where Magdalen College now stands, and some of the buildings of that hospital have been incorporated in Magdalen College. The hospital was founded by Hugo de Malauny who was an Oxfordshire knight, "for poor scholars and other miserable persons" and for the general treatment of the sick, including incurable diseases such as leprosy, dropsy, epilepsy, and, strangely classified amongst these, are pregnant women. The staff of St John's Hospital treated cases of fistula and also accidents and injuries for which it became famous. Some of the bowmen whose hands had been amputated by the Scots at the battle of Bannockburn, to destroy their skill in archery, were looked after there.

William Hobbys was an Oxford licensed surgeon and he became surgeon to Edward IV, and also warden of the Barber Surgeons Company.

Surgeons were not graduates of the University in the academic sense, but the University provided a license to practice surgery in England. Then as now the University expected about seven years experience but the other conditions seem to have been a little less strenuous, namely that a trainee surgeon should attend two dissections, cure at least three patients, pass an examination by the Regius Professor, and be willing to cure poor persons without fee.

Another distinguished Oxford surgeon was Edward Nourse the older, who died in 1738 and his portrait is in the Royal College of Surgeons. His son Edward Nourse, the younger, became a surgeon at St Bartholomew's hospital in London and Master of the Barber Surgeons Company. He died in 1761 and his nephew, Charles Nourse who with Percival Potts, was apprenticed to his uncle, played a considerable part in surgical affairs in Oxford becoming a member of the staff when the Radcliffe Infirmary was founded in 1770.

The land on which the Radcliffe was built was given by Thomas Rowney, Mayor of Oxford and also a Member of Parliament. The piece of land that Rowney gave was known as Coggin's Piece, being about five acres of what was then the only open fields north of St Giles.

When the Radcliffe Infirmary was founded in 1770, the governors laid it down that there should be never more than six physicians and four surgeons. The



Figure 1: A lithotrite that is used without vision. Mr Mike Kettlewell who retired as a colorectal surgeon in 2000 told me he had used it as a trainee!

four surgeons were Hacker, Towsey, Grosvenor and Nourse. Hacker left just after he had been appointed to pursue his private practice.

Of the remaining three surgeons Henry Towsey was on the staff for the next 41 years but little more is known of him. John Grosvenor had a Worcester and London training and returned to Oxford, at Christchurch, as anatomical surgeon. He was a good surgeon and a good lecturer and is particularly noted as one of the first surgeons in England to massage his patients stiff joints and injured limbs. He was a surgeon at the Radcliffe for 47 years and finally give it up in order to edit Jackson's Oxford Journal and pursue various other interests.

Sir Charles Nourse was a very good surgeon and there is a report of his in 1776 wherein he and two others managed to push back the intestines of a man badly wounded in the belly, sewing him up in his own house and saving his life.

In 1777 seven years after the infirmary was opened, a highwayman stopped the Birmingham Stagecoach on the Woodstock Road, "he rode furiously after the chaise stopped it opposite the Radcliffe Infirmary and robbed a single gentleman of 10 guineas and a gold repeating watch."

Nourse appears to have been the first knighted surgeon in the Radcliffe getting his honour on the occasion of the royal visit to Oxford of George III 1786.

The operations of those days had lots of onlookers, and they had to put a rail up around the operations to stop the visiting hospital governors and others from jogging the surgeons arm.

Thanks to the edict of the board of governors, following an enquiry in 1830 in the House of Commons on the conduct of hospitals, there is a complete record from 1838 to 1874 of more than 450 operations "of the higher order" performed in the Radcliffe Infirmary. Some of these records are fascinating:

February 4th 1838. Mr Hitchens amputated the right thigh of Charlotte Martin, age 21 on account of a disease of the knee. Her cure was retarded by reason of a large abscess forming, but she was discharged cured on April 25. And was seen to be in good health in August 1855.

July 2^{nd} 1838 Mr Hitchens performed an operation for stone on Henry Sumpter of Sherborn aged five. The stone was of uric acid and weighed 80 grains (2 $\frac{1}{2}$ gm). On July 25^{th} he was discharged cured.

November 12th 1838 Mr Cloeburey extracted a cataract from Rev Andrews.

July 23rd 1839 Mr Wingfield amputated the thigh of Thos White, postilion aged about 55 years. He was thrown from a carriage on July 15 while he was driving while much intoxicated, by which accident he received a compound fracture of the leg. All the bones were much comminuted. After a few days, delirium came on. After consultation with the surgeons it was thought that immediate amputation was the only hope of saving his life. He was discharged cured on September 11th.

From 1838 to 1840, 42 operations were performed: 21 amputations, seven lithotomies for extractions of stone through the urethra, three divisions of Achilles tendon, two operations for strangulated hernia, two of femoral hernia, one for cataracts and two for talipes. Only one died in the case of a strangulated hernia.

In March 4, 1847 the first use of ether anaesthesia in the infirmary was recorded. The operation was performed by Mr Parker who amputated the right side of Charlotte Quaintain, from Yarnton, aged 16, who has a necrosis of the tibia. Discharged 16th of June cured.

Ether had been first successfully used in public by Morton in 1846 in the Massachusetts General Hospital. In December three months later, Liston used it for the amputation of a leg in London and less than three months after that, it was in use in the Radcliffe Infirmary. However the next three operations in the register do not mention anaesthesia but in June there is an account of an amputation in which it is used and then it is mentioned at various times subsequently.

Chloroform was mentioned on 24th April 1848 just five months after Simpson had inhaled it on a memorable evening in Edinburgh. Mr Parker amputated the left thigh of George Pym of Stanton Harcourt age 35, a labourer. The operation was successful and in June 1855 he was said to be

in good health.

The coming of the railway produced its share of accidents, and amputations became frequent from this cause. They did pretty well in pre-antibiotic days. From 1838 to 1849 the total operations of 'the higher order' was 165 with 20 deaths, a mortality of 12%, and an average of 16 operations a year. Probably as good if not better than other regions in the country. The total number of operations from 1838 until 1894 is 450 and the mortality had crept up somewhat. Many of the earlier operations were amputations for injuries from agricultural machinery and then railway accidents. Then there were at least 66 lithotomies, 29 operations for hernia, three trepannings (two died) and one tracheotomy who died. Nearly half the patients with strangulated hernia died and one in ten of the lithotomies died and a quarter of those who underwent operations after accidents did not recover.

In 1835 the third meeting of the British Medical Association was held in Oxford, and at midday there was a demonstration of lithopaxy by Mr Costello, an Irishman who introduced the operation into England. The operation was originally planned to have taken place in the anatomy theatre, but because of the very large audience asking to see it the Town Hall was used. The stone was caught in the jaws of the lithotrite but it was very hard and could not be broken by hand pressure so the instrument was fixed in a vice and a hammer used to break up the stone, and the fragments being further broken up by hand pressure. The patient must have been very stoical for he seems to have stood up to it without a murmur and when it was over thanked everyone about him for the relief he felt, and walked out. Whether he took lunch with the members of the BMA and made a speech is not recorded.

References

Excerpts taken from the Oxford Medical Journal vol xxv No 2 1977, by G E Moloney Consultant Surgeon Radcliffe Infirmary 1948-1977