History
The Royal Hospital Haslar: from Lind to the 21st century
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In 1753, the year his Treatise of the Scurvy was published (1,2), James Lind was invited to become the Chief Physician of the Royal Hospital Haslar, then only partially built. However, he declined the offer and George Cuthbert took the post.

A few years later the invitation to Lind was repeated. On this occasion Lind accepted, and took up the appointment in 1758. In a letter sent that year to Sir Alexander Dick, a friend who was President of the Royal College of Physicians Edinburgh, Lind referred to Haslar hospital as ‘an immense pile of building & … will certainly be the largest hospital in Europe when finished…’ (3). The year after his appointment, reflecting his observations on the treatment of scurvy, Lind is reputed to have advised Sir Edward Hawke, who was commanding the Fleet blockading the French port of Brest, of the importance of fresh vegetables and fruit (3,4).

Lind published three more books while at Haslar - An essay on the most effectual means of preserving the health of seamen, in the Royal Navy (5,6); Two papers on fevers and infection (7,8); An essay on diseases incidental to Europeans in hot climates (9,10). He remained Chief Physician for 25 years, and was succeeded by his son John in 1783. James Lind died in 1794 (11), and two years later, when the First Lord of the Admiralty visited Haslar and asked to see a case of scurvy, not one could be found (3,12).

The original hospital plans included a chapel within the main hospital, which was to have been sited in the fourth side of the quadrangular building. Due to over-expenditure, this part of the hospital was never built. St. Luke’s Church was eventually built facing the quadrangle. Construction of the main hospital building eventually stopped in 1762.

Early administration of Haslar
Responsibility for the day to day running of the hospital lay with Mr Richard Porter, the Surgeon and Agent for Gosport (a physician who was paid by the Admiralty to review and care for sailors of the Fleet for a stipend from the Admiralty), who had had to cope with almost insurmountable problems. However, a letter from Vice Admiral Boscawen dated 12 April 1755 drew attention to the inadequacies of the administration of the hospital, and laid the blame squarely on the shoulders of Porter:

The hospital at Haslar is so ill conducted that it little answers the design of it…The Agent is also the Surgeon, his profits by the 6/8d (33p) (a per capita payment) are above £2000 per annum and the office of agent alone is sufficient employment for him. (13)

The income of £2000 was very high for those days. The Admiral’s comments were endorsed by a Mr Ward, contractor for all the stores in the hospital, from bedding to biscuits. He observed that:

...at present there is drunkenness and all sorts of licentiousness committed by the people there, many of which are very far from being proper objects for a hospital.” (ibid.)

The Hospital Commissioners acted promptly. They dispatched Sir Edward Hawke to investigate, who confirmed that the accusations were correct. On arrival at the hospital he found the gate porter missing from his post, and chaos reigning in the hospital.

As a result of Hawke’s report, the Commissioners issued a series of orders in May 1755. They appointed a Mr Francis Jones as Agent, Richard Porter as First Surgeon only, and George Cuthbert as First Physician and Senior Administrator. Cuthbert’s salary was to be £200 per annum.
Although Porter’s new salary is not recorded, it must be assumed that he took a substantial cut in income.

Dr Cuthbert administered the hospital with the help of a small council for a few years, but he was succeeded by James Lind in 1758. In the letter already cited Lind explains that:

[The hospital is under the direction of the Physician and Council – the latter consists of the Physician who presides[,] two master Surgeons, the Agent & Steward, & lately two new members are added to the Council viz Dr Welch Physician to Gorton [sic, for Forton] hospital (which receives the marines only about a mile distance from us) & the Surgeon of that hospital. But this Council must act entirely on orders from the Board of Sick & hurt.]

Insufficient accommodation was the main problem over the subsequent hundred years. Although Haslar had been built to hold 1,500 patients, by 1755 1,800 had to be accommodated, and there were repeated requests from the Commissioners for more beds to be found. On 31 March 1755 the Commission wrote to Dr Cuthbert, the senior Physician at Haslar: ‘You are hereby requested and directed to use all possible expedition in making provision for the reception of 200 additional patients in the hospital at Haslar’.

Even after two new wings had been completed in 1762, the shortage of beds was still acute and it became necessary to use old hulks as ‘hospital ships’ for temporary accommodation. Discharged pensioner sailors lived in the attics of the hospital, and staff and their families shared the building. By 1790, there were 2,100 patients in the buildings, causing considerable overcrowding, as noted in a report by Admiral Barrington (4).

**Patients or prisoners?**

Although physicians in the early years of Haslar tried bring a semblance of order to this state of affairs, their efforts were doomed to failure. James Lind drew up a comprehensive list of rules and regulations for the efficient management of the hospital (4) but it is doubtful that these were ever used even as guidelines, let alone as rules to be obeyed.

One of the reasons originally given for the erection of the hospital was to stem the ‘evil of such pernicious consequences’ of desertions (14). The patients were largely men who had been press ganged into the Navy. As soon as they had recovered sufficiently to walk they wanted to disappear into obscurity. As a result, Haslar was more like a prison than a hospital. All doors on the ground floor were locked at night to prevent patients escaping, and a guard of soldiers was installed to patrol the perimeter wall and apprehend patients attempting to escape.

To make matters worse, drunkenness was rife among the hospital’s staff. Some female nurses, avoiding the hospital’s armed guards by using the hospital sewers at low tide, smuggled in rum in pig bladders suspended under their skirts. Staff were accused of stealing patient’s food (14); patients of the 2nd new ward East petitioned the Admiralty by letter, claiming to be afraid to eat their rations in case they had been poisoned, and to have been threatened with knives by staff of the hospital (15). A Nurse Brown was dismissed by the Hospital Executive for infecting a number of patients with ‘a foul disease’, and other nurses were dismissed for not keeping their rooms tidy (Governing Committee report book 1765).

When the Executive Captains of the Navy also began to complain to the Admiralty about the situation, something had to be done. The first of two major official investigations into the management of Haslar was initiated by the orders of the Privy Council, and inspections were made by Admiral Barrington in 1780, and by Admirals Caldwell and Gardiner in 1794. Eventually, on the 26 August 1795, a Naval Commanding Officer - Captain William Yeo - was appointed to take command of Haslar, assisted by two Lieutenants, and this arrangement lasted to the end of the 19th century.

**Wars and explorations**

During the early 19th century many Army casualties from the Peninsular Campaign (1809), the Battle of Waterloo (1815), and the Crimean War (1853-56) were admitted and treated at Haslar. Such was the reputation of the treatment then being given to the Army at Haslar that the hospital was held up by the Army authorities as a shining light to nursing. By the late 19th century, Navy pensioners were also being admitted, both for care and shelter. These included the Greenwich Pensioners, who in turn helped to care for the patients. In return for this service many of the hospital wards (named after famous Admirals) accommodated pensioners, who ended their days in relative comfort.

It has been estimated that the remains of some 13,000 sailors and soldiers who died at the hospital between 1753-1859, or whose bodies had been brought there, were buried in the hospital grounds (16). They include 114 sailors from the Russian Fleet, which was impounded in Portsmouth in 1808-9 (17). Since 2005, teams of archeologists and forensic analysts have explored the Paddock burial areas at Haslar. One skeleton had coins over the eye sockets (to pay the boatman for crossing the river Styx), one of only three examples found in the UK. One of the coins was a Slavery Abolition token minted in 1794 for a limited period in the local area. The coin showed the head of a negro and bore the inscription ‘Am I not a Man and a Brother?’

During the 19th and early 20th centuries, many physicians set out from Haslar as members of expeditions, not only pushing forward the frontiers of medicine but also those of global exploration. The most famous of these was Sir John Richardson, Inspector of Hospitals and Fleets at Haslar from 1838 to 1855. He undertook two expeditions in support of Sir John Franklin in search of the Northwest Passage. At the age of 62, and at the request of Lady Franklin, he was involved in the search for Franklin and his crew. Richardson became a renowned naturalist, and played a part in establishing collections of animals, birds, and books at Haslar. [The museum was destroyed by enemy action in October 1941, with the total loss of the collection. The Library survived, and the books are...
now held in the Historic Collections Library in the Institute of Naval Medicine at Alverstoke], Richardson was consulted by Florence Nightingale on the running of military hospitals (18), and he met and corresponded with Charles Darwin. It was under Richardson’s direction that Thomas Huxley left Haslar in 1846 as the surgeon on board HMS Rattlesnake in the southern hemisphere, where he studied marine life. Later, through his studies and support, Huxley became known as “Darwin’s Bulldog” because of his unwavering advocacy of Darwin’s theory of evolution.

In 1847, Captain Sir Edward Parry, the renowned arctic explorer, took command of Haslar. He had previously overseen the transition from sail to steam for the Royal Navy, but had made his name in polar exploration. Parry worked with Richardson to improve the care of patients at Haslar, especially those incarcerated in the hospital asylum. His departure from Haslar in 1852 was much lamented.

In 1854 William Balfour Baikie, a physician at Haslar, was appointed to the Niger expedition to explore the west coast of Africa. He was instrumental both in discovering a treatment for malaria and in the discovery of Nigeria (19).

In 1899 Edward Atkinson, vaccinator at Haslar, became Captain Scott’s medical officer, and he was one of the survivors of Scott’s ill-fated South Pole expedition of 1912. Atkinson also survived the Battle of Gallipoli (Turkey) during the First World War, and was decorated for his life-saving actions.

Haslar today
Haslar remained a busy hospital during the many wars and campaigns of the 20th century and especially during the First and Second World Wars. During and after D-Day in 1944, both allied and enemy troops were treated at Haslar in great numbers. Royal Navy surgeons were joined by US Army surgeons in treating the wounded. Haslar continued to grow in professional and technological ability. In 1954, the word ‘Naval’ was formally included in the title of the hospital, only to be removed again in 1996 when Haslar became the core Tri-Service Hospital and the original title of ‘Royal Hospital’ was restored.

The beginning of the current century opened a new chapter in Haslar’s history. In 2001, in partnership with Portsmouth Hospitals National Health Service Trust, Haslar combined the best of medicine in the Naval Health Service with the best of military medicine. It was a sophisticated hospital with advanced medical technology, housed in a prestigious and splendidly-preserved historic Georgian building. However, in March 2007, the Ministry of Defence’s involvement in the hospital ended, and in July 2009, the Royal Hospital Haslar finally closed after 256 years of service and history.

The Haslar Heritage Group (www.haslarheritagegroup.co.uk), formed by former hospital staff and others, will help to ensure Haslar’s place in history is assured and that this magnificent Georgian building is not only preserved, but put to good use.

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Dental Branch History

The Harvey-Fletcher Medal and Prize

Grant E J

Introduction
The first book covering the history of the Royal Naval Dental Service (RNDS) from its inception in 1905 to 1964 was published in 1995 to coincide with the celebration of the Branch’s 75th Anniversary (1).

A follow-up volume covering the years 1964 to 1995 has just been published (2) and the text of this article, covering the history of the Harvey-Fletcher medal and prize, borrows unashamedly from both volumes of these histories.

Acknowledgment is made that the References annotated in the first two sections of this article derive from the meticulous research carried out by the late Surgeon Commander (D) Nick Daws for the 1995 publication.

Staff Surgeon Christopher Harvey

The Harvey-Fletcher medal, the most prestigious award in the gift of the Director Naval Dental Services, commemorates the two founding fathers of the RNDS. The first of these was Staff Surgeon Christopher Harvey. Harvey, a far-sighted naval doctor, was concerned about the poor dental health of the sailors in the Fleet, a matter which he brought to the attention of the Medical Director General of the day. He had assumed that the dental treatment of sailors was being carried out by medical officers and he was appalled to discover that it was not. He wrote:

“It is unquestionable that formerly, medical officers themselves had a great tendency to neglect the teeth of the men under their charge and to relegate the duties of extraction to the sick berth stewards, men who too frequently abused such improper powers.”

Harvey had been serving in HMS Warrior in 1870, when the sick berth steward had proudly presented him with two large Lazenby’s Pickle bottles, one full, the other, two thirds full of teeth that he had extracted over a period of ten months, without the knowledge of the ship’s medical officer.

The thought of the pain and suffering associated with these extractions had such a profound effect on Harvey that he decided to investigate the true extent of dental problems in the Navy.

The vagaries of service appointments prevented him from carrying out his research until 1880. For the same reason, it was not until 1886, by which time he was stationed at the RN Hospital Yokohama, that he presented his findings to the Medical Director General.

Harvey’s ‘memorial’ to the MDG, which he entitled The Blue Jackets’ Teeth (3), was based on research that he had undertaken while he had been serving in the Royal Naval Barracks at Sheerness. He carried out dental examinations on 1,022 sailors over the age of twenty, who had originally joined the Navy as Boy Seamen. He found that more than one seventh of the total number of teeth had been extracted or had decayed and from this concluded that “every seventh man in the Navy is toothless”; a number he considered strikingly large.

Harvey believed that there were three main causes for this dental disease: first, a want of cleanliness; second, a lack of employment for the teeth (the sailors’ diet had got softer by the 1880s); and third, insufficient professional attention to the teeth.

For the first two of these, Harvey recommended that “a toothbrush, or better still a pointed stick of soft wood, be used by friction up and down, after the manner of the natives of India” and that soft food be avoided. To rectify the third cause, Harvey stressed at great length, the need for professional dentists to be employed by the Royal Navy and he urged that: “at the large Home Hospitals of Haslar, Plymouth and Chatham, skilled dentists be permanently attached, whose sole duty should be to attend to the teeth of the men”.

It was, sadly, to be another fifteen years with further pressure from other authorities, including the British Dental Association, before the Admiralty finally and formally accepted that there was a need for dental surgeons to care for the personnel of the Royal Navy. Yet, even then it was to be 1905 before the first appointments were made and the following advertisement appeared in the British Dental Journal:

“The services of three DENTAL SURGEONS are required for duty with the Naval forces in the United Kingdom from April next. They will be required to devote their whole time to their duties, and they will receive an inclusive salary of £1 per diem, and, when necessary, travelling expenses. The period of engagement will be for one year, and under conditions specified in the contract. The necessary dental appliances will be provided. The Dental Surgeons will be stationed at Portsmouth, Plymouth and Chatham, but will be required to give attendance elsewhere as directed by the Naval Commander-in-Chief. Application, by letter, should...