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HISTORY A (SCHOOLS HISTORY PROJECT)

Developments in British Medicine, 1200–1945

SOURCE BOOKLET

TUESDAY 26 JANUARY 2010: Afternoon

DURATION: 1 hour 30 minutes

SUITABLE FOR VISUALLY IMPAIRED CANDIDATES

NINETEENTH-CENTURY DEVELOPMENTS IN ANAESTHETICS

DID PEOPLE WELCOME THE USE OF CHLOROFORM IN THE NINETEENTH CENTURY?

BACKGROUND INFORMATION

Surgery in the 1800s was dangerous and painful. Surgeons had to work quickly. They could only successfully carry out the amputation of limbs and the removal of surface tumours. Surgeons had got used to ignoring the pain suffered by their patients. However, medical knowledge was increasing and some surgeons believed that they would be able to experiment with more complex operations if they could ‘knock out’ their patient whilst carrying out the operation. In 1799, Sir Humphrey Davy discovered that the use of laughing gas during operations reduced pain. Soon after, ether was used to numb pain during operations. In 1847, James Simpson discovered chloroform, recognising straight away that it could be a very effective anaesthetic.

Did people welcome the use of chloroform?

SOURCE A



A painting of an operation which took place around 1800. Six men can be seen holding down a patient who is about to have his leg amputated. The patient is crying out in pain. The surgeon and his assistants are wearing their ordinary clothes. There are students sitting in rows looking down on the operation.

SOURCE B

It is repulsive to good taste that every woman who is about to go through childbirth, an ordeal to which she is doomed by the laws of Nature, should be made unconscious through the whole proceedings. Pain has been invented by Almighty God.

From letters sent to a medical journal in 1849.

SOURCE C

We look back with sorrow on the methods of the opponents of Paré. In the future our successors will, I believe, look back with similar feelings on the so-called desirability of pain in operations as claimed by many surgeons at the present day. They will be amazed at the idea of men confessing that they prefer operating on their patients in a waking state instead of in an anaesthetic state; and that the agonies which they inflict should be endured quietly. All pain is destructive and fatal.

From a speech Simpson gave to a medical meeting in 1847.

SOURCE D

Dr Hall takes this opportunity of warning medical officers against the use of chloroform in the severe shock of gunshot wounds, as he thinks few will survive if it is used. It is much better to hear a man scream lustily than to see him sink silently into his grave. But Dr Hall knows that public opinion, based on mistaken kindness, is against him.

From a notice issued by Dr John Hall in 1855 during the Crimean War. Hall was the Chief of Medical Staff of the British army in the Crimea.

SOURCE E

Doctor Cheyne came and laid a towel saturated with chloroform over my face and said, ‘Now breathe away.’ I then felt the Professor’s hand laid gently on my arm as if to let me know that he was near... I felt myself go weaker and weaker and every nerve and joint relaxing and breaking up, as it were, a very solemn moment thus staring death in the face, and I believed I never should awaken to look on the things of time anymore but was indeed entering eternity... I was conscious of no more until I awoke in a bed in a strange ward. My first thought was ‘My arm! Is it off or not?’ I at once sat up to feel for it. I found it bandaged and breathed a sigh of thankfulness. I felt very sick and kept on vomiting at intervals for several hours. I have no doubt it will be some time before I get over this horrid chloroform taste and its effects.

An account by Margaret Matthewson of an operation on her shoulder in 1877.

SOURCE F

Doctor Snow gave me the blessed chloroform and the effect was mild, calming and beautiful beyond belief.

From Queen Victoria’s journal, 1853, describing using chloroform during the birth of her eighth child.

SOURCE G



A cartoon called Operation Madness, published in 1870. A team of surgeons can be seen cutting off the leg of an unconscious patient. Two other teams of men are working on bodies on other tables. Behind the operating table, patients are lined up in beds ready for their operations. A pile of coffins can be seen ready at the front of the picture. The surgeons are wearing aprons on top of their ordinary clothes. One surgeon is walking away with blood on his apron.



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