

A CLASSIC BUSH DOCTOR

Battling a deadly diphtheria outbreak alone was all in a day's – or a few months' – work for a country GP of a bygone era, as described in this excerpt from the fascinating memoir of Dr Felix Bartlett. Dr Bartlett worked in Cowra, NSW, at the turn of the previous century.



In early 1893, diphtheria of a virulent type broke out in Cowra and, in spite of all efforts to isolate the first cases, it spread rapidly. The first two or three cases will serve to illustrate how impossible it was at the beginning to persuade people of the danger. The infection came from Bathurst, where a Cowra woman went to visit friends, taking her only child, a girl of about two. On her return to Cowra, she sent for me and I found the poor child in a hopeless condition with diphtheria croup from which she soon died.

I had, on my first visit, explained to the mother how very contagious the disease was and made every effort to make them stop all communications with friends or neighbours. The disease

can be carried by a handshake. The sister of the bereaved mother came to ask me if she could attend the funeral and I forbade her to go to the house or shake hands with any of them, thinking that the seriousness of the situation would be grasped when I said: "If you go into that house you will probably lose your own children from diphtheria."

She went away saying she would obey the orders, but at the end of a short incubation period she sent for me and I found her own children terribly sick. In a very distressed state, she confessed that she had gone to the house before the funeral, despite my warnings. Both of her children died within a week or so.

On seeing the danger to the community, I sent an urgent appeal to the Public Health Bureau in Sydney, saying that tents and trained nurses should be sent to try and stop it and they sent up one of their medical officers to look things over. He stayed a couple of days, then returned to Sydney and I soon got a reply that they had no tents or nurses to spare, so I was obliged to do the best I possibly could without their help.

Further cases came in and the thing got away like a bush fire in a high wind. It was clear that the town was in for a terrible time. At the hospi-

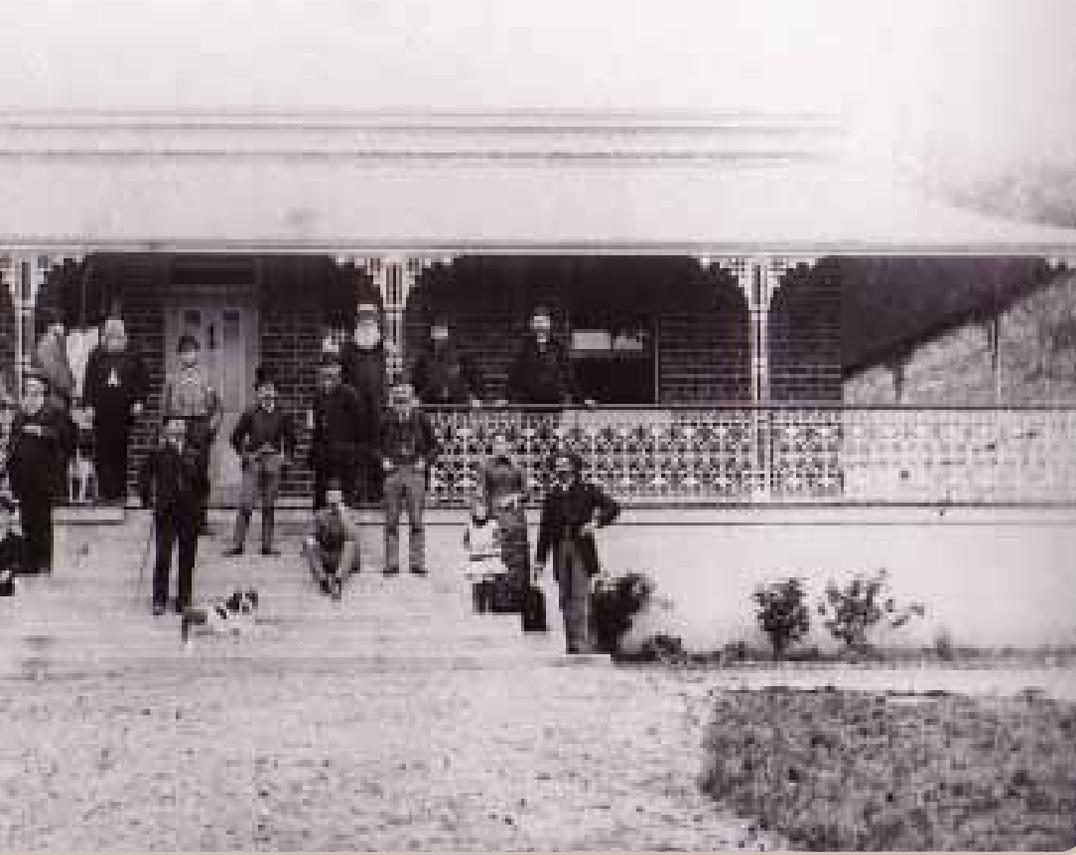
tal there was only one small isolation room with two beds in it and the only trained nurse in the town was Mrs McDowell.

Before too long, cases began to appear in the country parts also. This was all a year before Pasteur perfected his anti-toxin, so I had nothing but care to offer the patients.

I sent another urgent appeal to Sydney and they did send up another doctor to survey the worsening situation. I showed him the rapid spread of the cases with the aid of spots of red ink on the map of the town and the outlying areas. He was interested and polite and returned to Sydney assuring me that he would do what he could to get help. But in a day or two the same type of reply came; they could send no help and I must do the best I could.

By this time the town was panic-stricken and some of the local families moved away for a period of time. I sent my own family and the Stokes away to Springwood in the mountains with their two nurse-maids. Lizzie Rolfe and Wicks the groom remained with me to look after the house and help with the practice. News of the outbreak got to the Sydney papers and Cowra was, in effect, posted as a plague spot to be avoided by everyone.

The Cowra District Hospital committee at the hospital entrance sometime in the 1880s. The building still exists today, as a storage area behind the current hospital.



COWRA AND DISTRICT HISTORICAL SOCIETY AND MUSEUM INC.



So it went on, month after month, the most ghastly and distressing time of my life made even more terrible by the frantic appeals of mothers and fathers to save their children.

– Dr Felix Bartlett.

In a short time, I was seeing very little besides diphtheria and spent many hours a day painting the throats of cases with glycerine and perchloride of iron, the only thing I found which would destroy the diphtheritic membrane when it first appeared. My white coats, my face and my hands were covered with stains from the patients' explosive coughs, which accompanied the painting.

For the small children, little could be done as the membrane was usually in the larynx before one saw them. On several of these, at the frantic appeal of the distracted parents I did a tracheotomy, but the disease was so rapid and virulent

that in a day or two the membrane reached the trachea and it was all over.

Luckily I seemed to be immune to the disease and, feeling sure of it, I even did the classic stunt of sucking the tube to clear it, without ill effect.

So it went on, month after month, the most ghastly and distressing time of my life made even more terrible by the frantic appeals of mothers and fathers to save their children. It was a nightmare of a fight, with one's hands tied behind one's back. It would have been impossible for me to carry on, but for the devotion and courage of Lizzie and Wicks.

The disease abated slowly but it was many

months, seven or eight I think, before the epidemic had burnt itself out.

One of the last cases I remember was at Mount McDonald. A message came to go to see a baby who, the telegram said, had bronchitis. I found the baby in a hopeless state with diphtheritic croup and said that I could do nothing to save it but, at the pathetic appeal of the parents, I said I would put in a tube.

All the tools I had with me were a small pocket-case and one or two large camel-hair brushes. I quickly sent a man racing off on horseback to Cowra to bring my full case of tubes. But the situation was really so tragic that I decided to do the tracheotomy with a knife from my pocket-case and inserted the quill from the camel-hair brush as a tube.

When the man came back, I made some adjustments and the baby did well for a couple of days – but it was the same as usual: the membrane crept below the tube and my bit of bush surgery was of no help in the end.

I had a bit of a row with the Minister of Education in Sydney when the epidemic broke out amongst the schoolchildren at Mount McDonald. I went there in response to a telegram and I found that two of the children who must have been infectious for at least a couple of days had been attending school with the rest. The schoolroom was an old building of slabs lined with hessian, a material which would retain infection from coughing mouths, and the desks and other furniture were roughly finished, so also capable of retaining the infection.

Not only was the place itself certainly infected but almost certainly impossible to disinfect on account of the free access of the air through the material. I also found that the cesspit connected to the closets was overflowing and had saturated the ground beneath the building. The danger was immediate and I took the responsibility of telling the schoolmaster to dismiss the pupils at once, close the school and report to the school authorities in Sydney that he had done it at my orders. That evening I wrote a letter to the Minister of Education, giving the details and reasons for my actions.

When I visited the Mount the next day, I found the poor schoolmaster in a great flurry after receiving a long telegram reprimanding him and ordering the immediate re-opening of the school. I also got an angry letter from the Minister, saying that I had no right whatever to act as I had and that the school must be reopened and so on.

I replied immediately to this, saying that if he persisted I would at once publish all details in the Sydney papers and have a question asked on the subject in Parliament by our local member and I finished by asking him if he would like his own

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Sharing their grandpa's memoirs with the world

Dr Felix Bartlett kept a personal diary throughout his working life. When he was about 80, he began to fill up several exercise books with his memoirs, based on these diaries and his still excellent memory. When he died in 1944, aged 88, he left behind these hand-written memoirs, but his diaries, which contained much detailed and confidential information about his past patients, were destroyed.

In 1966, while working as a medical registrar at St. George's Hospital (Dr Felix Bartlett's old medical school), Dr Bartlett's grandson Michael started producing a typed and loosely bound copy of these memoirs.

Though well-written and entertaining, the memoirs were, Dr Michael Bartlett said, "rather discursive and repetitive", and clearly needed a lot of editing if they were to be published. He circulated the type-written memoirs among the family in the UK and Australia, but the original remained in his possession over the years.

"I often re-read sections of it, and it was a great inspiration to me during my professional life," said Michael, who worked for many years in Darwin, Adelaide and rural Australia but is now 77 and retired in Germany. "However, I never found the time to do the necessary editing."

But about five years ago, a cousin of his from Australia, Jane Caiger-Smith (pictured above with Michael), who was living in England and working as a school teacher, read the memoirs and, with Michael's encouragement and assistance, undertook the task of producing a suitably edited copy that they then had printed privately in Adelaide.

The book, *Bush Doctor*, was launched in 2011 in Cowra, where Dr Felix Bartlett spent much of his time in Australia and where Jane was born, at a meeting addressed by Dr Peter Davidson, a prominent local GP. Encouraged by the book's reception, Jane and Michael re-launched the memoirs on Amazon Kindle in the hope of reaching a wider readership.

Continued from previous page

children to attend the school. This letter seemed to bring him to his senses, as he wired the schoolmaster and told him to keep the school closed.

I then wrote again, pointing out the impossibility of disinfecting the building, and advised that in the interest of public health it should be burnt down. This brought a visit from sanitary inspectors who entirely agreed with me, so shortly afterwards it provided an exciting bonfire for the hooraying kiddies and a new, better building was quickly run up in its place.

Altogether, Mount McDonald came off rather lightly. When the infection reached the town, its virulence was beginning to fade and the people were sensible and followed, with great care, the instructions I gave them for the prevention of its spread. Others were less careful and, despite my strong words on how to prevent infection, the handshake was still the universal and automatic greeting and, as water was used sparingly in the dry times, hand-washing was not regular.

Many people seemed not to carry a pocket handkerchief and anyone, with a diphtheritic throat or not, after coughing would just wipe the lips with the back of a hand.

One day a man and his wife from the country, old patients of mine, came to the surgery saying that their neighbours had diphtheria in the house and asking me to give them advice on how to avoid it, as they had heard that it was very infectious.

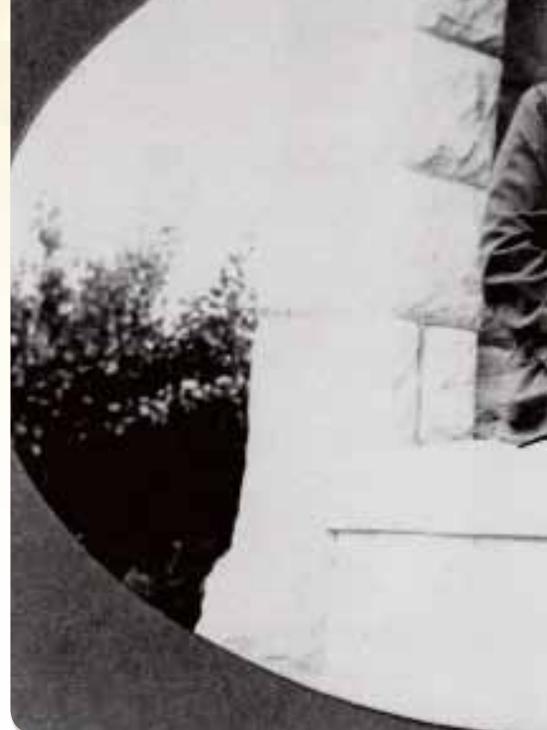
In plain language I gave them careful instructions, laying particular stress upon the danger of shaking hands with anyone who may have been near infection. They were very grateful, thanked me for their advice and I went with them to the surgery door to see them out.

Just at that moment, coming in were the very neighbours they had mentioned and to my utter astonishment they immediately shook hands all around. A feeling of hopelessness came over me and I think I said a great big "D" to myself.

I remember one poor young woman, whose neighbours brought her in to see me, she being in a terrible state. She had been ill for about a week and had been treated with some fantastic remedy which a so-called 'clever' friend had told her was a certain cure. Her throat was plastered with diphtheritic membrane, the neck swollen from jaw to clavicle and the glands enlarged. She died a couple of days later.

The only spot of 'comic relief' that came in the whole of that gloomy time was a small one when the bank manager, an odd, excitable little man, rushed into my surgery one day leading his little daughter of about nine by the hand and shouting, "Doctor, Emily's got diphtheria. We've only just found out and I brought her around at once. She said that she could feel something in her

The retired Dr Felix Bartlett on the verandah of his home in Warrawee, NSW, in 1913.



throat so we looked in and there was the white patch you told us to keep a look out for."

I told little Emily to sit down and hold up her chin and, with reflector on forehead and spatula in hand to keep the tongue down, I looked in. Sure enough, there was a fateful-looking white patch about the size of a pea in a deep follicle of one of her tonsils. It did, however, look a shade too clean and had sharply defined edges and it actually came away easily with the spatula.

"Did you have custard pudding for dinner, Emily?"

"Yes, Doctor."

"Well, here is a bit of it."

"Gosh," the father shouted, "Ha, ha, ha. That is a relief, let's get home quick, Emily, and tell mother. Ta ta, Doctor. I told them you would be able to put her right."

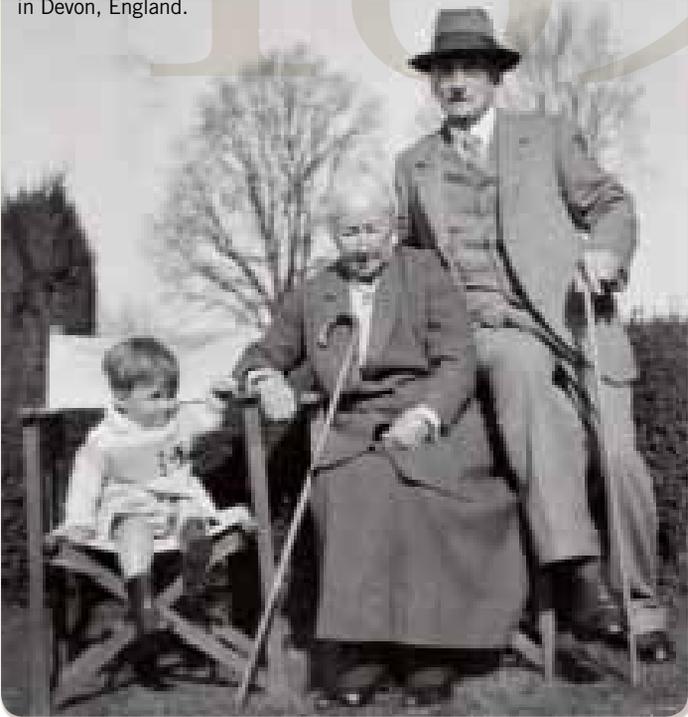
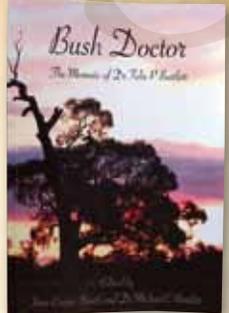
The decline of the epidemic came gradually, as always; the cases grew fewer and the virulence less. It had reached the endemic stage, the final rumblings of the great storm had died away in the distance, leaving a long trail of death in its track, and one finally had time to think and to tot up the damage.

I think that if the authorities had responded promptly to my appeal and sent tents and nurses, I might have been able to nip it in the bud and save some of those poor children. There was plenty of room in the hospital paddock and it could easily have worked as an annexe to the hospital. ●

1893



Dr Felix Bartlett with his wife, Marion, and their grandson, the future Dr Michael Bartlett, in Devon, England.

Bush Doctor:
The memoirs of Dr Felix P Bartlett
 Available on Kindle at Amazon.com (\$8). To order a paperback copy (\$25), email Jane Caiger-Smith at jane@caiger-smith.co.uk

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