ECHOES FROM THE PAST

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SIR James McGrigor was married in June 1810, and on 2nd May 1811 his wife presented him with a son, who became in later life Sir Charles McGrigor. When the child was some six months old, McGrigor was ordered to the Peninsula to become Chief of the medical staff to Lord Wellington. As has happened to many an Army medical officer since, a familiar pattern developed, happy family life at home suddenly interrupted by a posting abroad, but by a posting not to be refused in the light of a career. He says in his autobiography "At any other time this appointment would have gratified me to the full extent of my ambition." His wife wished to accompany him, but again a not un-familiar pattern established itself. McGrigor says "I had however seen enough of ladies on service in the field to decide me against this step; and I knew well, that with the care of my wife and child, I could not do my duty in the way in which I had determined it should be done, while I remained in the service." So, at the end of 1811 McGrigor embarked for the Peninsula and its war without wife and child.

McGrigor's "Journal", as recorded in the documents of the Aberdeen Medico-Chirurgical Society, frequently becomes complementary to the Autobiography, for example, there is no actual date of embarkation recorded in the autobiography, but in the Journal it is given as the 26th December 1811. The 6 has obviously over-written a 5. Is there a story here? It may be that his departure from Portsmouth by brig was delayed for one day, and what may be the reason for this? The 25th December being Christmas day, the bowels of compassion of the powers that be may have been moved to allow McGrigor to spend Christmas in the bosom of his family. Perhaps the more cynical service officer, and mayhap not without reason, would suggest that the crew of the brig, having celebrated Christmas more bibulously than wisely, were unfit to take to sea on the 25th December 1811.

In recording the day of arrival in Portugal once more the Journal and Autobiography are complementary in information, and oppositely this time. The autobiography gives this date as the 10th day of January 1812, while the Journal names the month, leaving a blank for the date, and here McGrigor makes a quaint error in the year. His entry is "I embarked for Lisbon on the 26th December 1811 and arrived there on the January 1813." Even the slower sea transport of the time could not spend so long on a voyage to Portugal, although he does say in his autobiography "for several days it blew exceedingly hard." May there be a reason or is it merely a slip on his part? It is good to know that the great McGrigor was fallible, for who really likes the infallible person, if such a one exists? In his anxiety to record the new year he may have jumped one ahead. Anyhow a gigantic task awaited him in Portugal when he, Dr. Forbes and his four clerks disembarked at Lisbon, but more of this anon.

Not for the first time or the last in his lifetime of service, indeed not for the last in the history of the medical services of the Army since, the sensitive and conscientious McGrigor found deplorable conditions obtaining in the care of the sick and wounded.

By this time he was a very experienced officer at home and abroad with service in Europe, the Middle East and India behind him. So immediately on disembarkation, he visited as many medical establishments as possible on his way to report to Lord Wellington, and he quickly sized up the situation.

“The army was sickly and the greatest part of the sick were crowded into the general hospitals, particularly to Lisbon, in most of which there was a high proportion of mortality.” The siege of Ciudad Rodrigo was taking place at this time and the field hospitals were near this place. “The wounded and sick of the besieging army were carried to Celerico where I saw them in a sufficiently miserable and deplorable state, many of them with frost-bitten limbs, some tetanic, and typhus prevalent among them: they were eventually carried to Coimbra.”

For reasons not apparent McGrigor frequently omits the mileage between places in his journal and an example is the following from the record of January 1812.

“*Coimbra*. The sufferings of the sick and wounded on this route were very great: a distance of miles, particularly from Celerico to Coimbra miles, between which places there was an intermediate station where they are halted into more comfort. As the sick and wounded were conveyed on this route almost always only on bullock carts, the journey of miles meeting little cover on the route and often without the means of having any victuals cooked, and not unfrequently without comforts, their distress and misery may easily be imagined without much stretch of the imagination. The loss on the road was as might be immense, but the loss was not alone, that of those who died on the evacuation. They suffered so much by the transport, the weather and by privations that many, particularly of the wounded and those ill of dysentery arrived in so bad a state as only to survive a few days or hours after their reception into the hospitals at either Celerico or Coimbra. In truth the medical officers at their stations had not fair play with them, they received their patients on that stage when it was impossible to do anything with them.”

In perusing the Journal, it is obvious time and again that McGrigor was the originator of principles of medical organisation and administration which obtain to this day. When he arrived at Coimbra, which was the seat of the principal Portuguese university, he wisely consulted local medical colleagues about prevailing conditions. “There were different opinions as to the healthiness of Coimbra but the medical professors of the university were all of the opinion that the site was healthy.”

Many a good and successful military medical officer has wisely followed his example to the advantage of all concerned. Also he obviously was of the opinion that the best available was only good enough for the sick and wounded, and that certain standards of accommodation must be sought for this purpose. “We occupied the best buildings as hospitals: their situation was good and they were large and airy with lofty roofs and abundantly ventilated.” Such simple but sound principles of hospital accommodation in the field stand for all time.

McGrigor found at Lisbon a state of affairs which has occurred not infrequently in all campaigns and wars ancient and modern. The fleshpots of Lisbon were too attractive compared with conditions nearer the scene of action, recorded as follows in his autobiography:

“There was an immense number of sick, and of medical officers at Lisbon, and also a very great number of either sick or reported sick or wounded officers. In England I

had heard much that was unfavourable respecting them; and after I had narrowly examined the whole, I made up my mind to make a report and a proposition thereupon to Lord Wellington, when I had joined headquarters. The report related to the very great accumulation of sick, and to the still greater exceptional accumulation of officers, their ladies and the wives of soldiers at Lisbon, which detained at the capital of the country a disproportionate part of the medical officers of the army.

My repeated inspection of all the hospitals, and of a great many of the officers, convinced me that Lisbon was so very agreeable a residence, that many officers and soldiers would be slow to resume their duties in the field, and that it was a much more attractive station for the medical officers themselves, than the divisions of the army about Ciudad Rodrigo, in an inclement season of the year.

After I had fully satisfied my own mind by repeated inspection of every establishment at Lisbon, and much conversation with General Peacock the commandant there, I communicated my ideas to Lord Wellington; and after giving a full report of the existing state of things, I submitted to his lordship three distinct propositions.

First. As to the large proportion of the army in the hospitals, particularly at Lisbon, I proposed, that, in future, only special cases of either wounds or sickness should be sent to the rear, and such only as should be approved by me. In order to effect this, I submitted, that each corps should have a temporary hospital of its own, where all slight cases of disease and wounds should be treated by the regimental medical officers, under the superintendence of the principal medical officers of the division.

Second. That all sick and wounded officers of the same description, instead of being sent to Lisbon, as heretofore, should be treated in the same manner.

Third. That, as in future no sick or wounded would be at Lisbon, except those that would ultimately be embarked for England; all the medical officers should be ordered up to the army, excepting the small establishment which I indicated for the Lisbon duties. Finally, I gave a statement of the sick I found at Lisbon; proposing that one part of them, officers and men, should be sent as inefficient to England, and the remainder ordered to join their regiments in the field, for duty, or to be under the care of the medical officers of their regiments.

I made further propositions for the prevention of the accumulation of the stores of every kind which I found at Lisbon."

Yet another sound principle was enunciated by McGrigor soon after his arrival in the Peninsula.

"The principal, if not the greatest means of preserving health in an army, is the treating of every case when it can be done in the Corps at first and as long as it can be done. In acute disease everything depends on active treatment being pursued at the very commencement."

Among many deficiencies he found in medical care of the sick and wounded, he noted two especially outstanding. One was that all kinds of cases, wounds, all manner of infectious disease were herded together in wards, accounting for the high hospital mortality. Another was the fact that there were no convalescent hospitals. He speaks as follows:

"I established at Coimbra a regulation which I subsequently found of the greatest service in all our hospitals: separate hospitals for care of Continued Fever, for Dysentery, for Wounds and Ulcer and for convalescents."

This segregation of cases was obviously being carried out for the first time—another first for McGrigor.

He also established the principle of convalescent depots in the management of the sick and hurt by a system of grading that obtains to this day. Many of us would think or like to believe that the system of convalescent depots was a modern development in the care of sick and wounded in the army, but once again McGrigor was the pioneer in this. He speaks as follows in his Journal:

“At Coimbra I found that relapse from disease was extremely frequent, indeed the hospitals were principally fed by relapses and cases from the Depot. Men sent from hospitals as recovered, generally returned from the Depot in a few days and with severe disease and it was observed that a large part of the mortality was from the relapses.

The recovered men went from the warmer comfortable hospitals to the Depot which was a dreadfully cold place where they had only one blanket, and where the duty they had to perform was rather severe. I therefore established a convalescent hospital in a convent, and to this place every convalescent was sent from all the hospitals and remained for two or three weeks. The convalescent hospital was placed under the charge of Mr. Inglis who conducted it with a great deal of judgement.

Consequently the convalescent, intermediate between the cured man and the man doing military duty at the Depot, as they advanced in convalescence he put them according to the degree of condition into first, second and third squads, giving tonic and other medical regimen and a portion of military duty according to the degree, so that before they were discharged to the Depot they were in the main habituated to the duties and regimen they met there. The two upper squads were daily marched out and exercised in the air. It was decided that no man should be sent to the Depot who was not fit for all duties of a soldier and fit to be marched off for his Corps. They were generally kept two or three weeks at the Depot, both to perform the duties of the hospital station and the better to enable them to perform the long and fatiguing marches which in general they had to perform in order to join the army.

A medical officer was likewise appointed to the Depot acting therein under the orders of the Principal Medical Officer in charge of the Convalescent Hospital. The medical officer was directed twice a day to minutely examine every man in the Depot, to send immediately those having any symptoms of disease to the proper hospital and to clear the weakly men to the convalescent hospital. A code of regulations was further presented to the Military Commandant and recommended for adoption in the Depot. Special attention was requested to the diet and temperance of these men, and that they should be completed in necessities and warm clothing before they were exposed to any duty. The necessity of these injunctions was most obvious because the neglect of any of them never failed speedily to induce disease and bring back the patient to hospital.”

(to be continued)