

A HISTORY OF THE KINGSTON GENERAL HOSPITAL

The following hospital article is written by Dr. R. W. Garrett, who before his retirement some years ago, was Kingston's leading surgeon and consultant:

Contrast the advantages in medicine and surgery which hospital staffs now possess with those of a century and a half ago. They knew nothing of chloroform or ether; they never heard of antiseptic surgery; they would expect every wound to heal by suppuration; they would press their approval of "healthy" and "true and laudable pus." If a wound healed by "primary union," they exhibited it as a most unusual occurrence. They did not know typhus from typhoid, or scarlet fever from diphtheria; they never heard of auscultation or had seen a stethoscope or a hypodermic syringe; they never had counted the blood corpuscles nor inspected a skilgraph of different parts of the body. They ridiculed Jenner and his theory of vaccination as a preventive of smallpox, and published most ludicrous cartoons.

Within the last sixty years the whole features of hospital work have changed. As an outcome of recent research a new work has risen up for it, which demands for its success a thorough technique, skilful nursing and good hygienic surroundings. In days gone by the work was considered complete when it furnished food, shelter and medical attendance for the sick poor, supplying in cleanliness those comforts which their own surroundings denied them. Thus it was that our hospitals were filled with the poor only. Few beyond such occupied a bed in the wards or applied for medical treatment. Those in other stations of life only darkened the threshold to perform some kindly office, or to speak some word of comfort to its occupants.

Allow me, for a moment, to point out the causes which led to such transformations in hospital management, equipment and technique, and which bring to us today patients from every class and station in life for treatment.

When Sir Joseph Lister announced his gospel of Antisepsis there burst upon the surgical world a new light which shed its rays in every corner, and a new era was given to medical science.

Notwithstanding the mighty upheaval in surgery made by antisepsis, the progressive tendency of surgery did not permit Listerism to rest upon its achievements. The advance movement was primarily manifested in bacteriological investigations.

Retrospect.

At the close of the war 1812, a number of immigrants, with very little means of support, settled in Kingston and vicinity. Their poverty led to an outbreak of disease among them. With the object of relieving this distress and suffering, a few citizens banded themselves together under the name of The Kingston Compassionate Society. It subsequently merged into the Female Benevolent Society, and secured from the Legislature of Upper Canada funds towards the erection of an hospital.

During the rebellion of 1837-38, it was used as a military hospital. In 1841, the building was changed to some extent and the United Legislature of Canada met there until 1844. In that year, the Female Benevolent Association was given permission to occupy and send their patients to the hospital.

Up to the year 1856, the hospital was under the control of a board of trustees, consisting of the mayor of the city of Kingston, judge of the district court, warden of the Midland District, sheriff of Midland District and three aldermen.

The first meeting of the Board of Governors, under the new charter, was held on November 5th, 1856, and the following is a list of the life members at that time:

James Sampson, chairman; Thomas Asken, treasurer; John Patton, honorary secretary; Hon. John A. Macdonald, John R. Forsyth, Thomas Kirkpatrick, John Watkins, James Hopkirk, William G. Hinds, James Hartly.

Kingston hospital memories recall long years of devotion to the work by the chairman of the board. The names of Drs. Sampson, Yates and Strange should live long in grateful remembrance, and with this acknowledgement most cheerfully will be coupled the names of the late Thomas Kirkpatrick, Q.C., M.P., and of his son, Hon. George A. Kirkpatrick.

The Hospital Mound.

The description of "the emigrant fever" is from the reminiscences of Carl Fechter, who wrote for the Whig in the eighties:

"It was only a day or two ago that, in passing the General Hospital, the eye of the visitor caught the mound which is the only visible monument of the scourge of 1847. That was the year in which Ireland was afflicted. There was not food for the population, and between those who emigrated and those who died, under circumstances the most distressing, it is estimated that the Emerald Isle lost about 2,000,000 people. It wasn't Home Rule the people cried for; it was 'Bread, Bread,' and there was no bread. There seemed to be no alternative but leave Ireland for foreign shores or die of starvation, and as many as could get passage by outgoing vessels boarded them, flying from present dangers to others, they knew not of. Thousands succumbed at sea; thousands lingered in life until they reached a supposed-o-be friendly colony, only to perish there of disease and exhaustion. Talk of Montreal during the smallpox epidemic. It was clean and healthy

compared with the fever period made memorable by its perpetual funeral dirge. Cross Isle was a pest spot. Death's sickle was so fatal in its effects that the Montreal clergy could not attend to all the funerals and assistance from other places was summoned. Bishop Phelan, the most courageous clergyman of his time, went from here, but returned when this city became nearly as unfortunate as the sister city.

"In June of 1847 the disease reached Kingston. It was brought hither by thousands of poor people, who, broken down by sickness and ill-usage, did not know what was to become of them, and apparently did not care. They were passed on to this place by the eastern authorities who, in their mistaken policy of kindness to the emigrants, sent pestilence stalking over the country. The sufferers came up the river on all manner of boats—some of them in steamers, some of them in small sail-crafts, and some of them in barges, huddled together in the holds thereof like so many cattle. A panic struck our people, and no wonder. One summer morning I walked down to John H. Grier's wharf, and I almost sickened at what I saw. Grier was a forwarder, and a barge belonging to him had been used for the conveyance of some 1,800 emigrants from Montreal to Kingston. They were dumped out on the wharf in a condition of wretchedness that beggars description. Many of them were too weak to leave the spot where they were virtually abandoned. Almost naked and nearly starved, they seemed to have lost all hope and to have given themselves up to the ravages of disease. Those who were strong enough to move about begged for food.

Performed Great Service.

"The ravages of death had to be stopped in some way; the progress of typhus fever had to be arrested; thousands were destitute of all comfort and without homes. They could not all be left to die upon the streets, many did so—and yet most people could not be induced to face the danger of contact with the sick. There were a few brave men, however, and among them Thomas Kirkpatrick, the mayor; Robert Anglin, councillor; James Baker, alderman; William Ford, Jr., and James Meagher, sr.; and these and other dauntless citizens inspected the places of infection, and performed a service which should cause their names to be held in everlasting remembrance.

"The hospital and old Molson brewery building were filled to overflowing, every part of them, and the Board of Health, acting in concert with the government, had several temporary structures provided. The chief erection was on Emily street, 90 feet long, 18 feet wide, and 20 feet high, and five sheds were run up on the then commons, now park, on King street, and even these were not sufficient to accommodate the hundreds who were seriously or fatally prostrated by fever. Subsequently sheds were erected on the Herchmer property, and near to the college, but not until the feeling against the continued use of the building had taken irrepresible form. At one time it was suggested that Garden Island, then a government reserve, and occupied by, I think, a solitary residence and outhouses, should be taken for hospital purposes, but the plans to this effect of the Board of Health suddenly collapsed. The sight of men and women and children staggering about the city, poorly clothed and dying, I shall never forget. One glimpse of misery like this and the lurid hideousness of Dante's Inferno seems less impossible! The doctors were a philanthropic lot. They labored skilfully, untiringly, and without hope of reward. Look at the list:—Sampson, Dormer, McLean, Meagher, Jr., Robison, Halliwell, Harvey and Stewart; all dead. They were as ministering angels of the stricken, and when human agency could do no more, and death came, the bodies were interred for a time in the cemeteries at the head of Bay and Ordnance streets, until the issue of a prohibition, and then in the spot adjacent to the General Hospital, made memorable by the mound! I don't remember how many bodies went into this huge grave, but they were numbered by hundreds."

Many years later His Grace Archbishop Cleary desired to mark the mound where so many of his countrymen were buried, erected a full length Italian Marble statue, figurative of the resurrection and amid sacred ceremonial consecrated it as a lasting memorial to those who died under such sad circumstances.

Early Ward Services.

The main building contained four principal wards—Strange, Yates, Sampson and Mott, together with a small ward—the Chowan ward.

Previous to the installation of the training school, three elderly women, wholly untrained, were in charge of the wards. One had charge of a woman's ward and maternity ward; one was in charge of a male ward, with a male assistant, and one was in charge of the top flat with two wards—male and female. The male patients were for the most part "weary willies" and "winter sojourners," a comfortable home free from cold and with good nursing food drove them in. All who had varicose veins and hobbos were eligible for admission.

Up to the time and until a qualified superintendent was appointed, the hospital was practically governed by a steward. In addition to other duties he kept the register, admitted and discharged the patients, kept the cash, if it had any; disciplined the house-surgeons and students. The students were not permitted to enter the wards except by his permission and practically were looked upon by him as interlopers or bandits, often shutting the door in their faces, or even locking the door or putting the chain on against their entrance.

The medical staff, four in number, appointed by the governors, attended from 11 to 12 a.m. for three months at a time.

During the whole summer in 1871, there were performed but three major operations, and the Watkins sheltered but two private patients. During the winter session surgical operations were occasionally performed, but where they occurred it was always proclaimed by the student, as a holiday for the rest of the day, and the sounds of "slopes" was heard on all sides.

Hospital Expansion. In 1862, through the generosity of Mr. Watkins, who for a number of years was a life governor of the hospital, the Watkins wing was erected for the treatment of general disease. In 1896 this part of the building was almost completely destroyed by fire. The following year it was rebuilt and refurbished by subscriptions from citizens and other friends of the hospital. For the name of St. Andrew's children's ward, the children of St. Andrew's church agreed to equip and maintain it in every detail.

Nickle wing—The late William Nickle bequeathed the sum of \$10,000 for charitable purposes and a magnificent stone structure was erected for infectious diseases. Later it was remodelled which made the treatment of infectious diseases more efficient and more efficacious as a preventative from the spread of contagious diseases.

Doran wing—By the munificent bequest of the late Michael Doran, the governors were able to add the Doran building, enabling them to furnish a maternity department and one for diseases peculiar to women, entirely separate from the other wards. It includes within its walls a fully equipped antiseptic operating room.

In the eighth, a member of the surgical staff visited some of the hospitals in New York and was so impressed by the results obtained by properly trained nurses that he urged on the governors the necessity of establishing a training school. One graduate was taken on, and in a few months two more were accepted, thus was established the nucleus of the training school which has grown to such enormous proportions, numbering over eighty nurses in training. The nurses were first housed in the large room over the Watkins and after the fire were placed in a few private rooms in the Nickle building. It was found that the accommodation was unsatisfactory for the increasing number of nurses and it was decided to erect a separate building accommodating thirty-five nurses. Later it was found necessary to add another large building in the very near neighborhood where a large number are located.

Extra-mural nurses: When the school had been properly established, two regular nurses were named for outside nursing. They were to be ready to answer outside calls for relief, advice and professional care in places where it was most needed, and teaching the best treatment on themselves and their children.

General operating room: One of the most pressing needs was an operating room well equipped, good ventilation, suitable for surgical cases, and also for demonstrations in the presence of the student classes. This was built and donated by the late Dr. K. N. Fenwick, who died before it was completed, a martyr to septicaemia. Another operating room named "The Lytner" so called after a deceased daughter of a well known hospital surgeon. It is devoted to special cases where special privacy is maintained. It is most suitable to young children of nervous temperament and for emergency cases. The walls and ceiling are plastered with a special kind of cement which renders them impenetrable to infection. All arrangements and equipment were paid for by the Women's Aid Society.

Tuberculosis. The early treatment of tuberculosis attracted the attention of the medical staff and Governors. On the grounds of the Hospital were erected two or three 'shacks' for cold and fresh air treatment. They were fed and otherwise ministered to by special trained nurses. The treatment gave great success and they were so encouraged that a band of workers was organized into a joint stock company, named the Kingston Health Association. They bought a large piece of property, some thirty acres, partly wooded with pine and other shade trees and land suitable for cultivation. It was named The Mowat Memorial Hospital. The hospital patients were transferred to that locality and lodged in very comfortable buildings, with wide spacious verandas and open fire places. Later it was taken over and enormously expanded by the Dominion Government and controlled and carried on as a tuberculosis hospital during the continuance of the Great War and it is still being maintained as such under the charge of a specialist.

Made in Canada Fair: The Ladies' Aid Society and committee of management organized to make an effort to raise money by a 'Made in Canada Fair.' Booths under the management and direction of bands of ladies were erected in the armories, contributions were solicited from manufacturers outside and inside Kingston. In almost every case, they were most generously responded to in these booths, the ladies exposed for sale their various wares. Real estate in lots were offered and readily sold. From the country districts, came potatoes, all sorts of vegetables, butter, eggs, cord-wood and all sorts of material. It certainly produced a very motley appearance.

All were disposed of within the allotted time. Its success was far beyond the bounds of expectation.

Empire Wing: At the annual meeting in 1911, a committee was appointed to make some effort to increase the accommodation of the hospital, particularly private rooms. A systematic canvass was made and several substantial subscriptions were offered. The city corporation granted \$5,000 dollars and minor contributions were added.

In 1912, the Women's Aid Society, that energetic organization, never appealed to in vain, was waited upon and at once formed themselves into a loyal band of workers and decided to hold a "Festival of Empire." It was organized and carried out to a successful termination, the proceeds netted \$12,000. As a result a magnificent stone structure was erected at a cost of over \$50,000 with every comfort and with every modern improvement including baths and open grates, and was named "The Empire Wing" so called by the Women's Aid Society, who contributed so largely to the success of the enterprise.

Too much credit cannot be given to the noble band of workers and enthusiasts who came forward at the "Made in Canada Fair" from Napanee to assist. They brought various contributions, erected a booth, leaving their homes for the full week, and adding much to the success of the fair. Napanee has always been most generous in a great many ways, it furnished in every detail and maintained a room in Mowat Hospital. A brass plate on the door still marks its generosity. A generous contribution was given for an up-to-date steam sterilizer, while the county council has annually contributed to the general fund.

Organic Union. Previous to 1918, appointments to the hospital staff were made by a medical board, subject to the approval of the Board of Governors.

In that year, an agreement was ratified between Queen's University and the hospital, having some degree of permanency and in conformity with the requirements demanded by the American Council of Surgeons, so as to measure up to what constitutes a "standard hospital." It was agreed that appointments to the visiting staff of the hospital will in the future be made by the Board of Governors on the recommendation of the board of trustees of the university. All appointments will be terminated annually, subject to re-appointment. No remuneration will be extended to the members of the visiting staff.

Public ward patients will be entered under the care of the heads of departments and available for medical clinics, and medical students will be permitted to visit the wards, clinic and operating rooms for the purpose of receiving instruction. Members of the medical profession of the city of Kingston, who are not on the staff have the privilege of attending patients in private or semi-private rooms.

Medical services will be organized, so as to include both indoor and outdoor patients. Each service in medicine, surgery, obstetrics, eye, ear and throat, pathology and anaesthetics will be undertaken with such assistance as may be necessary.

Reconstruction: In 1913 plans were submitted by specialists in hospital construction, but on account of the high cost of labor and building materials, they were deferred for the time being.

In 1921 the 'service building' a handsome stone structure, was commenced and will be ready for occupancy at an early date. It is intended for kitchens, pantries and their equipment, and a cold storage and refrigerator system. The upper storey will be utilized for quarters for the staff. An extension has been added to the Empire wing, fire proof, and providing twenty-six additional private rooms.

The Isolation hospital, the funds for which were provided by the city of Kingston, is progressing rapidly. The corner stone for which was laid in October 1922.

Laundry: In line with reconstruction, a new laundry is in the process of erection.

The university and hospital combined for the erection of a power house on the water's edge, furnishing hot water and steam for the hospital's university buildings, and for other requirements. It is most modern in every form.

Plans and specifications are being prepared for the new clinic building, with operating rooms and other rooms for special clinical demonstrations on the top floor.

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