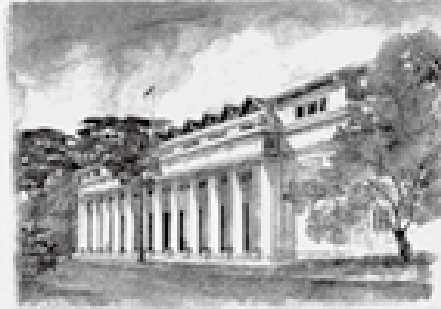


# Private practitioners and private hospitals in early Singapore (1819-1872)

Y K Lee



When Sir Stamford Raffles landed in Singapore on January 28, 1819, one medical man, Sub-assistant Surgeon Thomas Prendergast, was responsible for the health of the contingent. An inkling of what he had to do is shown in his report when he listed his duties<sup>(1)</sup>:

*"..... My being the Medical Man in charge of the Expedition, consisting of seven ships with troops, etc. and afterwards detained there in charge not only of the troops but of upwards of 1,000 daily labourers employed in clearing jungle, of whom, I seldom had less than 100 in my list with cholera, dysentery, broken bones and ulcers. ...."*

Some sort of "hospital" was soon required.

The first hospital (actually a shed) erected in Singapore was in the Cantonment for the troops, i.e. it was a military hospital, but was known as the General Hospital<sup>(2)</sup>. Singapore in the early years after its founding was very wild. Apart from the Cantonment, a few buildings around it and a few acres under cultivation, the whole island was covered by jungle. By 1821, there were separate buildings in use as hospitals for European soldiers, sepoys and native paupers. Civilians (Government officials and merchants) were treated in their homes by the army surgeons, and if very ill, in the homes of the doctors.

One instance was reported by Colonel Farquhar, the Resident, to Messers Binny & Co, Madras (Agents for John Casamajor, Madras Civil Service) on February 9, 1821<sup>(3)</sup>:

*"Dear Sirs, ..... to convey to you the melancholy account of the Gentleman's death which took place at this Settlement on the 1<sup>st</sup> instant. Mr Casamajor was at his own particular request brought out here on the 16<sup>th</sup> ultimo from the ship Cumbria, Capt Seton, in the last stage of Dropsy and so extremely debilitated that he was unable to move without assistance. In this distressing state, the Medical Gentlemen were of opinion that as he would require constant attendance day and night, it would be advisable to have a room prepared for him at Dr Prendergast's Bungalow, which was accordingly done, and during the short period*

*between his landing and dissolution, the most unremitted attention was paid to him by Mr Assistant Surgeon Montgomerie and Mr Acting Assistant Surgeon Prendergast, both of whom deserve to be brought to the favourable notice of the Executors.*

*His funeral took place the following morning attended by all the Civil and Military Gentlemen of the Station. .... Tomb and Gravestone should be done at Madras.*

*All the papers, trunks, etc are returned. ....*

*William Farquhar  
Singapore, 9th February 1821."*

In 1822, the second General Hospital was built to replace the first one. By this time, the General Hospital (although a military hospital) had already been admitting sick sailors from the many ships calling at Singapore and the European inhabitants of the place. In 1827, this hospital caved in and collapsed due to the decay of the materials used in its construction.

The third General Hospital was built in its place. This time the hospital was placed under civilian control by the Governor as there was a separate military hospital.

When did the first private practitioner arrive in Singapore? On the July 21, 1826, as this letter proves<sup>(4)</sup>:

*"To the Hon. J Prince, Esq.,*

*Resident Councillor.*

*Sir,*

*In compliance with your circular presented to me this forenoon, I beg leave to inform you that I arrived at this Settlement on the 21<sup>st</sup> of July 1826. My profession here is as a Surgeon and Druggist, and that I have no permission from the Honourable Court of Directors for residing here.*

*I have, etc.*

*A. MARTIN"*

The General Hospital (the third) built in 1827, was allowed to deteriorate and by 1830, was so dilapidated that no one would seek admission except

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in dire need. The roof was full of holes, and there was not a single section through which the rain did not enter. The Assistant Surgeon in charge of the hospital proposed that a new hospital should be built. This was rejected by the Government, and the broken-down shed continued to be used until it was eventually abandoned.

In 1832, there was public agitation for a hospital to be built for sick European seamen. The Government was against using its funds for unprofitable projects, and suggested that "this is a fit object to be provided for by public subscription amongst the mercantile Community of the Settlement."

Public conscience in the form of the Grand Jury and letters to the Press continued to urge the building of a new General Hospital. But the Government did not budge from the official view:

*"As to the want of an Hospital for sick Europeans. .... Not the custom in England for Government to erect hospitals of this description. .... but that public contributions were usually raised for the purpose."*

There was no public support. In the meantime, an enterprising doctor in private practice sized up the situation and started a private hospital, the first ever in Singapore. He advertised this in the Singapore Chronicle (a weekly newspaper) on May 24, 1832, and in nine subsequent issues. Medical ethics was different then<sup>(5)</sup>:

*"Hospital for Seamen*

*M. J. Martin, Surgeon, begs to inform Commanders of Vessels trading in this Port that he has fitted up a House in a very desirable situation, as a Hospital for the reception of sick European and other seamen.*

*Singapore Dispensary,  
Commercial Square."*

But the hospital charges were exorbitant relative to the salaries of the poor sailors. Those who could not afford the fees were treated where convenient if they refused to go to the run-down General Hospital. One such place was the Tavern which had spaces to rent.

The Singapore Dispensary also advertised the sale of soda water at \$1.50 per dozen bottles. Private practitioners in early Singapore advertised often and freely in the newspapers about their practices and related matters. More examples will be given below as they give us a glimpse of what practice was like and a sense of the times. Medically related advertisements by laymen were also common, e.g. one by Alfred Cooper, Hairdresser. .... "Surgical instruments set with care"<sup>(6)</sup>.

By July 1834, there was still no sign of anything being done to build a new General Hospital. Another doctor, while visiting Singapore, decided that the

opportunities were bright and became a resident. He advertised in the Singapore Chronicle of July 10, 1834 about this practice and his hospital<sup>(7)</sup>:

*"Mr Charles Wilson, Surgeon, etc. having resolved to remain at Singapore and exercise his profession, takes this opportunity of informing the Community of Singapore who may be pleased to employ him, that their applications will meet with immediate attention.*

*Ships' crews promptly attended and comfortable accommodations provided on shore during their sickness, for moderate remuneration.*

*Address: No. 2 Gemmill's New Building.*

*P.S. Prescriptions carefully prepared by Mr Wilson with the best medicines."*

He must have done very well for after eight months, he could expand and open a Dispensary for the retail sale of drugs, and he informed his clients of this, thus, in the Singapore Chronicle of 4<sup>th</sup> and 11<sup>th</sup> April 1835<sup>(8)</sup>:

*"To the Inhabitants of Singapore,  
Ladies and Gentlemen.*

*For the encouragement you have given me since I first came to the Settlement, I hereby return my grateful acknowledgements. When I inform you that from my earliest days I have been engaged in the Medical Profession in London, it may perhaps induce you to assist me more than you have hitherto done.*

*The circumstances under which I remained here precluded the possibility of affording a supply of Medicines to those who might wish to purchase, having had only sufficient for my private practice, but now having an open dispensary, and receiving supplies from London and Calcutta, I shall be able to accommodate those friends who may wish to favour me with their commands. I shall always prepare those prescriptions entrusted to my care from Medical Gentlemen or private families with my own hands, and this I hope will give more confidence to my friends.*

*I am, Ladies and Gentlemen,  
Your most obedient servant,  
Chas Wilson."*

Not all dispensaries opened in Singapore were for profit<sup>(9)</sup>. Missionaries who came to evangelise and proselytise sometimes opened clinics. One such was "The American Missionary Dispensary" which started seeing patients on February 1, 1835 at the junction of Pekin and Amoy Streets. Two medically-qualified missionaries, Rev P Parker, MD and Rev D B Bradley, MD ran this clinic assisted by a third missionary, Rev I Tracy and a Chinese assistant. When the two doctors left for Siam and China, the Rev Tracy felt that he could not abandon the sick, and

confident that he had learnt enough from his two medical colleagues and having a good assortment of medical books, decided to continue to treat patients;

*"..... The whole number of patients whose names have been entered in our books up to this date is 1316. Of these, 818 were Chinese, of whom 412 were Teochew men, 311 Hokkien; and the others came from more than 20 different countries and all quarters of the globe.*

*The types of diseases treated exceeds 50. Ulcers have been the most numerous amounting to about 400; wounds of different kinds have been next in number, being about 100, many of these were gun-shot and spear wounds received from pirates; then follow rheumatisms, cutaneous diseases, venereal complaints, diseased eyes, etc, etc.*

*It has been the great design and constant aim of the missionary physicians to secure for the patients more durable benefits than those which medicines alone can give ..... Some religious book or tract is given to every new patient who could read ..... exhortations ..... We hope they have secured for themselves an inheritance worth more than all the wealth of Singapore ...."*

Rev Tracy also acknowledged the help given by Dr Oxley, the Residency Assistant Surgeon, especially in taking over the management of the serious cases. When the medically-qualified missionary expected from America did not arrive, the clinic eventually closed<sup>(10)</sup>.

In early 1837, there was again some agitation for the establishment of a hospital to be maintained by contributions of public charity for the reception of European and American seamen frequenting the port. The Editor of the Singapore Free Press strongly supported the proposal, and the proposal was taken up by the Chamber of Commerce. A move was made to collect subscriptions, but the scheme fell through for want of public support.

Some opponents to the scheme said that there was no demand for a hospital as few sailors had been admitted to the Singapore Dispensary's private hospital. The Editor of Singapore Free Press debunked this view<sup>(11)</sup>:

*"..... It has been advanced, we believe, that so few are the seamen who have been sent to the Singapore Dispensary that it is obvious no hospital is needed here for them. This is, we think, rather a hasty conclusion. It does not appear to have been sufficiently considered by those who have made this objection that the premises upon which they proceed, namely, the smallness of the number who have attended the Dispensary may be a consequence not of the universal freedom from disease of the seamen who have frequented the port, but of their inability to pay the cost*

*of their being treated and attended by a private surgeon. This, we are informed, amounted at the Dispensary to \$45 a month. .... It is surely not at all out of reason to suppose that this must often have been the case, and that the serious consideration of what would remain to send to his wife and children if he went to the doctor, has often driven some poor fellow to remain on board and content himself with an occasional reference to the ship's medicine chest, while perhaps suffering from a complaint that required the most careful and judicious treatment. All those in such unfortunate circumstances would have come to a hospital on shore where they would have been treated and attended gratuitously or at some comparatively trivial charge, if there had been such a place for them to go to. .... We intend here no reflection whatever upon the respectable medical gentleman in charge of the Singapore Dispensary. Only a charge which is but moderate compensation for an European practitioner in this country may be much more than a sailor's hard-earned pittance can bear. ...."*

In April 1838, some mercantile houses proposed petitioning the Government regarding the need for a hospital for European and Native seamen. They had the full support of the Press. But the merchants themselves were not unanimous in this. Several refused to subscribe on the ground that it would be ridiculous for the relatively few European merchants in the Settlement to maintain a hospital by public subscription. They contended that it was the duty of the Government to provide and maintain such an institution.

Despite this opposition, a petition was submitted to the Governor, who indicated that if the merchants would pay for the erection of the hospital, then the Government would not object to supplying the medical staff and medicines. This was in June 1838. Nothing was done until May 1841, when an outbreak of cholera among British naval ratings forced the Government to take urgent steps to assess the adequacy of the Medical Service and to build a Seamen's Hospital.

The Governor made an appeal to the Chamber of Commerce which managed to collect donations amounting to \$2,700 after one year. The estimated cost of building the hospital was \$7,500, i.e. the Government would have to contribute the balance of \$4,800 towards its erection. After delays, the foundation stone of the European Seamen's Hospital was laid on Pearl's Hill (where the first Tan Tock Seng Hospital was also to be built.) The hospital was not ready until July 1845, and began to admit patients on November 1, 1845.

Let us now consider the state of private practice prior to the building of the hospital, and the effect this European Seamen's Hospital had on the private practitioners and their private hospitals. The private practitioners not only had to compete among themselves, but also with practitioners of traditional Chinese, Indian and Malay medicine, and purveyors of home cures and miracle cures: "Everyman His Own Doctor"<sup>(12)</sup>; "Galvano-electric Magnetic Ring – a cure-all"<sup>(13)</sup>. Some of these advertisements were by Dispensaries owned by the general practitioners themselves<sup>(14)</sup>!

Woodford, Chemist and Druggist, advertised the sale of many patent medicines<sup>(15)</sup>, e.g. Keating's Cough Lozenges, Holloway's Pills and Ointment, and books on medicine and sex for laymen, e.g. The Physiology of Marriage. The Singapore Dispensary advertised that it was the Singapore Agent for "Pulvermacher's Patent Portable Hydroelectric Chair – cures many diseases".

There was also competition with the Government doctors who were allowed private practice. Dr Oxley, when he was transferred to Malacca, had this item about him in the Singapore Free Press of April 7, 1841: "..... Dr Oxley quitted with reluctance his former situation as Assistant Surgeon at Singapore, where he enjoyed a remunerative practice, ....."<sup>(16)</sup>

On November 16, 1842, Dr Oxley (back in Singapore) wrote to the Governor for some remuneration for looking after non-Government servants in hospital (Government servants were entitled to free treatment)<sup>(17)</sup>:

*"I humbly hope I may be accorded as some remuneration for my attendance on those totally unconnected with the Service. I allude to all Europeans sent into hospital by Agents or Owners of vessels, who are at present charged for their mere subsistence. In future, I would propose that I be permitted to make a claim for the sum of one Rupee per diem for every person so admitted. The charge will fall upon the Owners and I feel assured will not be thought excessive by anyone, more particularly when \$2 per diem and an entrance fee of several dollars is at present charged by Mr Martin in his private hospital for the above class of persons."* (Rupees and Dollars were both legal tender then. The exchange rate was roughly two Rupees to a Dollar.)

Competition among the private practitioners was keen. More arrived in Singapore and they advertised<sup>(18)</sup>:

*"Mr Cooper, Surgeon and Accoucheur, etc. begs leave to acquaint the inhabitants of Singapore, also Commanders of Vessels that he has commenced*

*practice, and resides in Victoria Street, the house lately occupied by Mr Dos Santos."*

The Singapore Dispensary, the oldest established private practice, countered by reducing its hospital charges<sup>(19)</sup>:

**"NOTICE TO COMMANDERS OF SHIPS**

*Owing to the alterations made to the PRIVATE HOSPITAL attached to the SINGAPORE DISPENSARY, a greater number of seamen can now be accommodated in it, and for this reason, the charge for Board, Medicine and Attendance is from this date changed from \$2 to \$1 per day."*

In the meantime, Mr Robert Little, Surgeon, joined Dr M J Martin as a partner.

Mr J I Woodford was one of the first local boys who had been trained as an Apothecary in Penang. (In those days, the term "Apothecary" was not used to mean a "pharmacist or druggist". It was a Government Service rank which indicated that the holder was a "second class" doctor and treated as an assistant doctor by the British). When posted to Singapore, he refused to stay in hospital quarters as he considered the accommodation unsuitable. He wanted a room rented for him by the Government. When reprimanded as being "presumptuous", he resigned and set up private practice. Like everyone else he advertised<sup>(20)</sup>:

**"CAMPONG GLAM DISPENSARY**

*The undersigned respectfully begs to announce to the Community of Singapore as well as to all Captains and Owners of Vessels, that he has opened a Dispensary under the above title, in Church Street, Campong Bencoolen, where he hopes by his promptitude and care in the execution of orders, to merit a share of Public patronage.*

*A branch of the above Dispensary has also been opened in the premises recently occupied by Dr Cooper, being the corner of Gemmill's Buildings, Commercial Square, where orders will be attended from 9 o'clock AM till 4 PM, Sundays excepted.*

*Medical prescriptions will meet with prompt and careful attention at all hours.*

*Medicine chests can be filled up and supplied on the shortest notice, and at moderate rates.*

*J I WOODFORD*

*Singapore, 23.9.1844.*

*FOR SALE: A few dozens of Essence of Ginger and a few Chamois Skins."*

Evidently, private practice must have been very lucrative, for when Mr Woodford's successor as Apothecary and Steward of the hospital, Mr Curties,

was appointed from India, he was not interested in his official duties, and set about establishing contacts for private practice. He was sacked and a report was submitted by the Governor<sup>(21)</sup>:

*“Re employment of Mr Curties. .... It will at once be perceived that the said Apothecary had no further object in accepting the appointment than to obtain a free passage to Singapore with a view to seeing what openings there might be for a person of his stamp and undoubted ability in his profession.*

*Immediately on his arrival he set up a carriage and visited all the middling classes of people intimating that he was prepared to attend them in his medical capacity when necessary. The European Hospital became a secondary consideration. ....”*

Curties, of course, lost no time in advertising<sup>(22)</sup>:

*“Mr Curties, Surgeon, Accoucheur, etc, late of King’s College, London, and recently attached to the Seamen’s Hospital, has the honour to notify for the information of those requiring professional assistance, that he may be consulted at his rooms, Gemmill’s Building, Commercial Square, from 9am till 5pm daily, and at his private residence, Armenian Church Street, immediately in the rear of the Armenian Church, facing Government Hill, during the intervening hours.”*

There were still doubts about who was entitled to free treatment, and Senior Surgeon Oxley wrote to the Governor on May 21, 1845 for clarification. He was informed that Government servants and their families were entitled to free treatment by Government doctors, and to free medicines. Private practitioners were precluded from having their prescriptions made up at the Government Dispensary<sup>(23)</sup>.

The new General Hospital was not ready until July 1845, and began to admit patients on November 1, 1845.

Drs M J Martin and Robert Little decided not to compete against the Government and closed down their private hospital temporarily, and announced it in the Singapore Free Press of July 24, 1845<sup>(24)</sup>:

**“SINGAPORE DISPENSARY**

*In consequence of the establishment of a Government Hospital, the undersigned have ‘in the meantime’ given up the Private Hospital attached to the above Dispensary.*

*Owners and Masters of Vessels are respectfully informed that they, their passengers and crew can be attended to at any hour of the day or night, for which purpose, Mr Little is resident on the premises, Commercial Square.*

*Medical advice can be afforded at all hours, while the Dispensary is open for the sale of medicines and the answering of prescriptions from 9am to 5pm daily.*

*Medicine chests are fitted up with the requisite medicines and directions for a tropical climate, while particular medicines with their directions can be supplied to those visiting countries subject to peculiar endemics.*

*Soda water from the fountain.*

*M J MARTIN, R LITTLE, Surgeons.*

*Commercial Square, Singapore.”*

When Dr Curties moved house, he re-advertised in the Singapore Free Press on July 2, 1846<sup>(25)</sup>:

*“Mr Curties ..... may be consulted at his residence adjoining the Court House and facing the London Hotel at any hour of the day or night.”*

In 1846, there were ten medical men who were Singapore inhabitants (permanent residents); six were Government or Army doctors. The four private practitioners were Charles Curties, Robert Little, M J Martin and J I Woodford. Curties, Little and Martin were classified as “Surgeons and Accoucheurs” and Woodford as “Chemist and Druggist” in the Singapore Directory<sup>(26)</sup>.

In 1847, the Singapore Dispensary (Martin & Little) was added to the list of “Chemist and Druggist”<sup>(27)</sup>. In 1848, Henry Allen was included in the list of “Surgeons and Accoucheurs”<sup>(28)</sup>. The lists of Government and Army doctors in the Singapore Directories kept on changing, depending on the exigencies of the Service. Over the years, there were many changes among the private practitioners and the chemists and druggists as recorded in this article.

Another visiting doctor assessing that prospects were bright, and decided to set up practice. Those were the days before there was such a thing as medical registration when any medical man irrespective of qualifications, could start practice in Singapore<sup>(29)</sup>:

**“NOTICE**

*F A Dacruz, Medicus Chirurgus, late of the Academy of Medicus-Chirurgus of Lisbon, has established himself in Singapore, and resides in Coleman’s Row, in front of St Andrew’s Church, where he may be consulted at any hour of the day and night.”*

Some of the private practitioners kept up with the advances in medicine. Dr Robert Little was the first to use ether. He tried it successfully on an Indian patient who had a large splinter embedded in his hand<sup>(30)</sup>. Dr Little also contributed to journals. One of his articles was “On coral reefs as a cause of

Blankang Mati fever, and of the fevers in various parts of the East”, published in the Journal of the Indian Archipelago (August 1848 issue)<sup>(31)</sup>.

Mr Woodford had to resort to non-medical activities to survive the fierce competition among the private practitioners. He became an agent for a sex consultant. An advertisement in the Singapore Free Press announced that Woodford, Campong Glam Dispensary was the agent for “Sex Preservation – on the secret infirmities of youth and maturity with 40 coloured engravings. Sent in sealed envelopes. Personal consultations by post”<sup>(32)</sup>. He became a bankrupt in 1850, and in 1851, to supplement his income, he became an undertaker<sup>(33)</sup>.

Soon, the private practitioners began to play prominent parts in the social and non-medical life of Singapore. They undertook public service. Dr Little was appointed Coroner in October 1848, Dr Charles Julius Curties in January 1857, and Dr John Scott in June 1860, when Dr Curties died on June 5, 1860.

Dr M J Martin retired and sold his share in the Singapore Dispensary to Mr Little, who employed a resident dispenser, and announced in the Singapore Free Press of January 4, 1850<sup>(34)</sup>:

*“SINGAPORE DISPENSARY*

*The interest and responsibility of M J Martin, Esq., M.D., ceased in this concern on the 31<sup>st</sup> day of December, 1849.*

*Owners and Masters of Vessels are respectfully informed that they, their passengers and crew can be attended on board at any hour of the day or night by Mr Little.*

*Medical advice can be afforded at the Dispensary from 9am to 5pm daily.*

*R LITTLE, Surgeon.*

*The Dispensary is open for the sale of medicines and the answering of prescriptions at all hours, for which purpose, R TUCKER is resident on the premises.*

*Medicine chests are fitted up with the requisite medicines and directions for a tropical climate, while particular medicines with their directions can be supplied to those visiting countries subject to peculiar endemics.*

*To obviate the effects of climate, arrangements have been made for a quarterly supply of medicines overland.*

*R TUCKER  
Commercial Square, 1.1.1850.”*

In June 1849, when a shipping company applied to Senior Surgeon Oxley for a Bill of Health certifying that Singapore was free of epidemics, the request was rejected because there was smallpox prevalent. The Captain of the ship, however, obtained a certificate from Mr Little. The Senior Surgeon complained to

the Governor that Mr Little was usurping the duties of the Government doctors. When asked to explain, Mr Little stated that from personal acquaintance with two-thirds of the vessels in the harbour, he knew that the crews did not have any contagious disease. He had also been informed by a fellow private practitioner who had an extensive practice, that he had no case of smallpox, and had learnt from non-medical men who had constant and close dealings with the natives that there were no cases of smallpox. He thus considered himself entitled to grant a Bill of Health.

He then suggested that a Board of Health be established consisting of Government doctors and private practitioners, that this body be responsible for the issuing of Bills of Health as it was impossible for a single doctor, whether in Government service or in private practice, to positively state that Singapore was at any one time free from epidemic contagious diseases<sup>(35)</sup>.

The Government did not agree to this. Of course, there was smallpox in Singapore. The Editor of the Straits Times criticised the Government and the Senior Surgeon for not doing enough, “a disgrace to the Executive and its well-paid employees”, but praised the private practitioners<sup>(36)</sup>:

*“Vaccination, in every country, is like christianising. It is a missionary labour. The objects must be sought out. Experience has shown that to throw open a church or vaccine station and proclaim free admission is insufficient. The purlieus of our towns, our villages, lanes and nooks must be visited and the benefits carried to their doors. .... Millions now live who but for vaccination, would have been in their graves. We repeat, this missionary spirit is wholly wanting in Singapore, or one should not have cause to complain of the extent and fatality of the disease now prevailing. We have known the private practitioners here to carry out vaccination to the doors of the poor with a degree of cheerfulness highly creditable to the profession. We are, however, of opinion these private practitioners ought not only be constantly supplied with fresh virus, but also to be paid, as in England, a liberal percentage on all persons they gratuitously vaccinate. Smallpox is a public calamity; its arrestation a public good, and ought not only be rewarded, its benefits should be constantly kept before mankind”.*

After disagreement with senior Government officials, Mr Little resigned as Coroner on September 14, 1849<sup>(37)</sup>.

Competition among the private practitioners became keener as the years went by. Some went to the wall. Mr J I Woodford became insolvent.

Straightaway, Dr Curties advertised<sup>(38)</sup>:

*“NOTICE*

*In consequence of J I Woodford's Dispensary having closed, the undersigned begs to notify that he has opened a private Dispensary at his residence, High Street, two doors from the Court House.*

*C CURTIES  
Surgeon-Accoucheur, etc.”*

Mr Little decided to re-open his private hospital in January 1851 with reduced charges, and this was reported both in the Straits Times and the Singapore Free Press<sup>(39)</sup>:

*“A private hospital for Merchant Seamen was opened on Monday, the 13<sup>th</sup> instant under the general superintendence of Mr Little, Surgeon.*

*Terms: 50 cents per day”.*

Laymen were always trying to cash in on the lucrative “health industry”. On April 29, 1851, there was an advertisement and write-up in the Straits Times on the medical value of ice<sup>(40)</sup>:

*“That ingenious gentleman, Mr Dutronquoy, proposes to make sultry weather tolerable by means of artificial ice at a rate so moderate as to place the luxury within reach of the many. For invalids suffering from Brain Fever, Mr Dutronquoy has an iced-cap or rather wig which promises to afford the desired relief”.*

On July 4, 1851, there was a new advertisement for the Singapore Dispensary and Hospital. There was a change of resident dispenser. Mr Thompson took over from Mr Tucker<sup>(41)</sup>. (The hospital closed not long after).

Woodford evidently rented rooms to doctors as evidenced by this advertisement in the Straits Times of September 2, 1851<sup>(42)</sup>:

*“MR JONES, Surgeon-Accoucheur, etc. may be consulted at No. 10 Queen Street. Dr Jones will attend at Mr Woodford's Dispensary, Kling Street, near Commercial Square, daily between noon and 2pm (Sundays excepted).”*

Mr Dutronquoy, an astute businessman, opened a “Hotel for Invalids and Convalescents”, and had a team of private practitioners on his panel of doctors<sup>(43)</sup>:

*“A splendid hotel especially suited for invalids and convalescents has just been established at New Harbour by Mr Dutronquoy, proprietor of the London Hotel. Magnificent view. .... and the medical aid of the best doctors of India may be procured at this branch of the London Hotel.”*

Later on, there were sanatoriums (or holiday bungalows) for invalids, convalescents and those needing a holiday in various parts of Singapore (see below).

The problem of patients who could no longer pay for treatment and stay in private hospitals being sent to Government hospitals is not new. In July 1852, the Apothecary of the European Seamen's Hospital reported to the Resident Councillor<sup>(44)</sup>:

*“To the Hon. T. Church, Esq., Sir,*

*Dr Cowpar wishes me to mention Jean Warns of the ‘Victory’ who was admitted into hospital in March last, and is not likely to recover.*

*Prior to his admission to the Seamen's Hospital by order of the Master Attendant, he had been in Dr Little's Hospital for a couple of months, and all his wages were expended in paying his expenses there before he was sent to this hospital. Hospital expenses are now defrayed by H. M. Government.*

*J J DEBEAUX.”*

Private practitioners occasionally had to give evidence in the Coroner's Court. Mr Little, in the early days, even did post-mortem examinations on Coroner's cases when the Government doctors were engaged in other duties. But once he had to appear before the Coroner to answer how a sailor managed to obtain four fluid ounces of Brandy of Laudanum to commit suicide. Little's excuse was that his dispensary assistant had dispensed it by mistake<sup>(45)</sup>!

As mentioned earlier, smallpox was endemic in Singapore. There was co-operation between the Government Medical Department and the private practitioners to get as many people as possible to come voluntarily for vaccination. Vaccine was supplied to the private practitioners by the Government as shown in this letter from Senior Surgeon Oxley to the Resident Councillor on August 24, 1852<sup>(46)</sup>:

*“Vaccine virus from Batavia (present-day Jakarta) by the last steamer totally failed. It was immediately distributed to all the Medical Gentlemen in the Settlement, five in number. They tried with no success. Public Vaccinator had conducted trials on five cases.*

*Ask for new supply every second month. Virus becomes spurious after one month or six weeks at most.”*

Whenever a private practitioner returned from holiday, he advertised in the Straits Times or the Singapore Free Press<sup>(47)</sup>.

*“NOTICE*

*Mr Curties, Surgeon, Accoucheur, etc. having returned to the Settlement begs to intimate for general information that he has resumed practice in High Street, Singapore.”*

When the doctors learned of the efficacy of some herbs used in native medicine, they were not scornful but tried them. One example was the use of Penawar Pahit ("Bitter Antidote" or *Eurycoma Longifolia*) from Malay medicine as a febrifuge. The roots of this small tree, and particularly the bark of the roots, were used. A decoction was made and drunk for the purpose. It was intensely bitter.

Senior Surgeon Oxley wrote to the Resident Councillor on September 14, 1852<sup>(48)</sup>:

"Sir,

*Our stock of Penawar Pahit being finished, I have the honour to request that a few convicts may be despatched to the jungles beyond Siglap for the purpose of securing this serviceable article, the use of which saves the Government considerable expense as it answers instead of Quinine in the cure of Intermittents (i.e. Intermittent Fevers), and is most generally employed in the Convict Hospital. The part most useful is the root or seeds, but I should be glad of all parts of the tree, more especially as I shall then be able to judge whether the right plant be brought in. If there be any difficulty in procuring the plant, I shall be happy to go with a gang of men myself some day, when at leisure, and point it out to them.*

*T. OXLEY."*

At the end of 1853, one Mr Sargent arrived at Singapore and gave public lectures on Mesmerism (gratis) and Phrenology (\$1). He also advertised that he would conduct interviews and examinations at \$10 for each private delineation; for classes and families at \$5 each. He was also prepared to make home visits. (Phrenology was a system, now rejected, by which an analysis of character and mental ability could allegedly be made by studying the shape, size and protuberances of the skull<sup>(49)</sup>).

Evidently he was a medical man, for he decided to practise in Singapore, and advertised in the Singapore Free Press and Straits Times<sup>(50)</sup>:

"NOTICE

*Mr J E T SARGENT, MRCSL, MPSGB, has commenced practice as a Surgeon and begs to inform the public that his charge for visits is \$2 for each visit.*

*Medicines supplied on reasonable terms.*

*Ships attended on moderate terms.*

*Communications addressed to Messers Woodford and Scheerder, New Dispensary."*

On January 13, 1857, Charles Julius Curties was appointed Coroner when CA Riggs resigned<sup>(51)</sup>.

In September 1857, the problem of Government doctors' medical attendance on the families of Government servants cropped up again. They had

no objection to treating the Government servants themselves gratis, but were reluctant where the family members were concerned. They were reprimanded and reminded<sup>(52)</sup>:

*"All Medical Officers in the service of Government as a general rule are not entitled to remuneration for professional attendance on families of those Public Servants whom they are bound to attend gratuitously. Exceptions (e.g. families of Military Officers) ..... amount by private adjustment. If too excessive ... will be disciplined."*

Change of residence and place of practice were also advertised by the private practitioners:

"REMOVAL

*Mr Curties begs to notify for general information that he has, for the present, removed to the HOTEL DE L'ESPERANCE (until lately known as the LONDON HOTEL) where he may be consulted as usual, any hour. N.B. The Consulting Room is strictly private<sup>(53)</sup>."*

"NOTICE

*Dr Allen begs to notify that he has changed his Residence to the River Valley Road, a short distance in a straight line past the Ice House, where he may be consulted, or at his office opposite the godowns of Messers G J Dare & Co., Boat Quay<sup>(54)</sup>."*

The Singapore Rifle Corps was established under Act XXIII of 1857, and Dr Robert Little was commissioned as Surgeon to the Corps on December 4, 1857.

In January 1858, Dr Curties took three months' sick leave and went on a sea trip to Siam (Thailand) for his health. He did not resume practice until July 1858<sup>(55)</sup>:

"NOTICE

*Mr Curties, Surgeon, etc. begs to notify that he is prepared to resume practice, and may be consulted at his temporary residence, No. 4 Coleman's Buildings."*

And in September, he moved to new premises<sup>(56)</sup>:

"NOTICE

*Mr Curties, Surgeon, etc. begs to intimate for general information that he has removed to No. 599 North Bridge Road (opposite the Sailors' Home)."*

In July 1858, Dr Little had a new partner, Dr John H Robertson, MD and Surgeon<sup>(57)</sup>.

Private practitioners criticising, denigrating, bad-mouthing, back-stabbing and quarrelling with each other or with Government doctors is not a new phenomenon. A few incidents will be quoted.

On September 20, 1858, the Residency Assistant Surgeon, Dr James Cowpar, was called by Messers



Bain & Davidson to see a patient in consultation with Dr Little. They met at the home of the patient, Mr Cummings. After seeing the patient, Dr Cowpar told Dr Little that his treatment was "injudicious and remonstrated with him upon it". Dr Little was annoyed and said that he and his partner, Dr Robertson, were competent to treat the case, and that he would not put himself to the inconvenience of meeting Dr Cowpar twice a day to see the patient, and suggested that Dr Cowpar should come once in two days.

Since he had been called by Messers Bain & Davidson, Dr Cowpar informed them at noon the next day, September 21, on what had passed between him and Dr Little, and expressed his wish to have nothing to do with the case. However, at one o'clock on that day, Dr Little went to Dr Cowpar and requested him to see Mr Cummings again as the patient was much worse. This he did and expressed "great displeasure" at the treatment which had not been changed.

On the evening of the same day, Messers Bain and Davidson came to Dr Cowpar's house and urgently requested him to continue his attendance on the patient, and were informed that he had already seen the patient at Dr Little's request, and although "much displeased with what had been done", he would continue his attendance as the patient's friends were anxious that he should do so. After the patient's death, his friends communicated to Dr Little what Dr Cowpar had said about his management of the case.

Dr Little complained to the Senior Surgeon who referred the matter to the Governor for advice on how to act. The Governor's secretary wrote to Dr Cowpar:

*"the Governor has nothing to do with the subject of the medical treatment of the deceased or with any opinions formed by yourself or by others with regard to that treatment"*,

and told him to settle the matter with Dr Little and Dr Robertson. The animosity was such that Dr Cowpar said he would be prepared to meet Dr Little only in the presence of a third party to resolve the misunderstanding<sup>(58)</sup>. The feud smouldered, and there was another incident later between Dr Cowpar and Dr Robertson, Dr Little's partner (see below).

The second incident was a quarrel about qualifications. Dr John Scott accused Dr Robert Little of defaming him by stating that he was not entitled to call himself "doctor". Dr Scott paid for the exchange of correspondence between them to be published in the advertising columns of the Daily Times of March 16, 1861. Parts are quoted in full as

they make very interesting and very informative reading (which include details regarding professional qualifications and medical etiquette in the 19<sup>th</sup> century<sup>(59)</sup>).

*"Singapore, 4.3.1861.*

*My dear Dr Little,*

*It has been brought to my notice that in a conversation which you have recently had with a gentleman, and into which my name was introduced, you made certain remarks implying that I was not a Doctor of Medicine and had no right to attach M.D. to my name. Although my informant is positive in stating that you left the above impression on his mind, I will still venture to hope that he may have been mistaken as I find it difficult to conceive what could induce you to make a statement so calculated to inflict the deepest injury on my character as a professional man and a gentleman. You will therefore oblige me by giving me in writing a distinct denial of having made use of any expression leading anyone to suppose I was not as a Doctor of Medicine fully entitled to write M.D. after my name.*

*Believe me, yours truly, John Scott."*

*"Singapore Dispensary, 4.3.1861.*

*My dear Scott,*

*It being the custom in this place to style every medical man "doctor", I believe you adopted this addition to your name from it being forced upon you, especially as I had heard that on your cards you wrote "Doctor" and did not always sign M.D. nor define of what College you were a graduate, the rules amongst graduates being to attach to the M.D. the College they belonged to. As you state you are a Doctor of Medicine, I am bound to believe you and if you will inform me of what College, I will be delighted to mention it to anyone who like myself did not know the fact before. I need not say you would not have been singular even if you had adopted the addition of "doctor" without being a M.D. as it is daily done by "another" in his cards and notes. .... I think it is a subject of regret that there is not a registration of medical men here, and if you would establish one it would, I am sure, be agreeable to all our feelings and add much to the respectability of the profession.*

*Yours truly, R. Little, M.D. Edin."*

*"Singapore, 5.3.1861.*

*Sir,*

*Your reply to my note of yesterday's date is so disingenuous and insulting that it is with very deep regret I feel myself compelled to alter the tone of a correspondence which I was anxious to conduct in the friendliest spirit. Pray what right had you to assume*

that any circumstances or the usages of any place could induce me to do a thing of which I ought to be ashamed. You say you are bound to believe that I am a Doctor of Medicine because I state that I am one, whilst you acknowledge to having known that I took the title on my cards and wrote M.D. after my name, but did not consider the use of them justifiable. I assert and I do most emphatically that you are bound to believe me to be what I profess myself till by enquiries you had ascertained you could prove the contrary. To take a title to which one has no legitimate claim is to stamp oneself an imposter, and to do that is mean, despicable and dishonest and this charge you have endeavoured to fix on me. Your letter is a plain admission that you have attempted to do me this foul wrong while it is unaccompanied by a single expression of regret for the infliction of an injury which nothing can justify or extenuate. I beg to tell you that had you asked me, I would have had much pleasure in satisfying you that I was fully entitled to write M.D. after my name, and I now call on you to retract your statement and give me an ample apology for having made them.

I have the honour to be, Sir,  
Your obedient servant,  
John Scott, M.D.”

“Singapore, 7.3.1861.

Dr Scott having waited upon us (the undersigned) and laid before us certain correspondence wherein his professional qualifications had been called into question, we have at his special request examined the diplomas and certificates in his possession and find they are as follows, viz.

*Degree of Doctor of Medicine from the University of St Andrew's, Scotland.*

*Diploma of Membership from the Royal College of Surgeons of Ireland.*

*Diploma of Fellowship from the same.*

*Certificate (or Diploma) of qualification in Midwifery from the same.*

*Certificate (or Diploma) of qualifications in Chemistry, Botany, Materia Medica and Pharmacy, the compounding and administering of medicines, and in Medical Jurisprudence and Toxicology from the same.*

The course pursued by Dr Scott in thus vindicating his position is perhaps the most satisfactory one he could have adopted, but we are bound to disclaim any right or authority on our part to see his qualifications which can only be called for in a Court of Law, and we consider the implications complained by him to have been as most unwarranted and as coming

more particularly from a medical man, most unprofessional.

W. FARQUHAR, M.D.

Assistant Surgeon in medical charge, Artillery.

J. I. FRASER, M.D.,

Assistant Surgeon, Madras Army.

JAMES COWPAR,

Residency Assistant Surgeon.

I have much pleasure in stating that at Dr Scott's request I have examined the diplomas and certificates mentioned above. It is perhaps the best course Dr Scott could have taken as his professional titles have been called in question.

Henry A Allen, M.D.”

Dr Little apologised, but rather reluctantly and not whole-heartedly:

“Singapore, 11.3.1861.

Sir,

..... I confess my regret, my intention being to state that I did not know you signed M.D., and consequently I was in ignorance of your being one, an ignorance shared in by three other resident medical men who told me they have never seen you sign M.D. and were in ignorance of the honour I believe you have a just claim to.

I remain, yours truly.

R. Little, M.D. Edin.”

The third incident occurred in July 1861<sup>(60)</sup>. There had been a criminal trial in April 1860 in which four men were accused of murdering another by means of opium. Dr J H Robertson was present and was convinced that the evidence given by Dr Cowpar would have led to a miscarriage of justice had the Jury accepted his testimony. He wrote a pamphlet entitled “Medical Jurisprudence in Singapore” in which he criticised Dr Cowpar's evidence.

He sent this pamphlet to the Editors of three newspapers in Scotland and the Edinburgh Medical Journal; to three eminent medical jurists, and to all the private practitioners in the Straits Settlements.

He later had his pamphlet and the opinions of the above-mentioned persons published in the local newspapers, and officially complained to the Governor:

“..... that an impression was created on my mind of so painful a kind that I determined to do what I could with a view to rectification of what appeared to me to be wrong. .... Dr Cowpar had affirmed that from the livid appearance of the body, the rapid decomposition which appeared to have taken place

*and the peculiar foetid odour that arose from the body, that death had been caused by opium, and that the opium had been given in a liquid form, and from being given in a liquid form was all absorbed into the system. .... The head of the deceased was not opened owing to the advanced state of decomposition. .... and an analysis of the stomach contents had been made and no trace of poison could be discovered. ....*

*The opinion of the experts I had consulted was that the evidence was defective and the doctor incompetent; and not having examined the brain deprived the medical witness of showing the deceased had not died of some brain pathology; and an incomplete post-mortem was worth nothing. Even if he had discovered poison in the stomach, the presence did not necessarily prove it to have been the cause of death for it could have been taken as a medicine or to gratify a bad habit .....*

*I believe that enough has been done to prove to Your Honour's satisfaction that something is required to prevent in future the tender of mere surmise and suspicion for fact and evidence and thereby render safer the administration of justice in our Criminal Courts. ....*

*John H Robertson, M.D. Edin."*

The Governor wisely refused to get himself involved in the petty quarrels of the doctors!

There were many other incidents. Doctors constantly disparaging, running down and bad mouthing each other must have amused and perplexed the layman. The Editor of the Straits Times on May 24, 1862 made the correct diagnosis and mildly chided the doctors<sup>(61)</sup>:

*"There can be but very little doubt that the good feeling existing between the medical men of this place is not great. We have repeatedly had this conviction thrust upon us privately and once or twice publicly, and the fact is to be regretted both in a social and in a professional point of view. We should be sorry to believe that this was the result of competitive opposition, and yet it would be difficult to find any other reasonable cause. We have a very high opinion of the medical talent of this place, and we think without one exception our practitioners are men who would maintain first class positions in Europe, but the profession is perhaps the only one here which engrosses the entire time and attention of its followers, and Singapore is but a narrow field for the talents of half a dozen first class medical men, and we suppose that in this as in all other fields, competition being narrowed must assume a less pleasant form .... Among medical men of this place there is not much concord or kindly feelings."*

In April 1860, the Senior Surgeon, Dr J Rose, found out that the Residency Assistant Surgeon at Singapore, Dr Cowpar, in defiance of standing orders, had been issuing free medicines to students of the Institution (now Raffles Institution) and other schools, to charitable societies, to the poor, to the families of missionaries and to Military officers and their families residing in the immediate neighbourhood. He was instructed as follows<sup>(62)</sup>:

*"The undersigned has the honour to request Dr Cowpar will in future strictly confine his prescriptions intended to be made up at the Government Dispensary to the use of Government Servants in Civil Employment and their families.*

*J. ROSE."*

But unofficially, he was allowed some latitude where charitable institutions and the poor were concerned.

The corollary (i.e. since Government Servants and their families were entitled to free consultations and free medicines; if they saw a private practitioner, then they had to pay the fees themselves) was also strictly enforced. When a Government Servant applied to be re-imbursed, he was told<sup>(63)</sup>:

*"Under instruction from His Honour the Governor of the Straits Settlements, I am directed to inform you that he has no authority to sanction payment being made on account of Government to any Private Practitioner as long as the services of Government Medical Officers are available. Had an application been made to Dr Rose, the Senior Surgeon in the Straits Settlements, it would have been immediately attended to."*

Some of the private practitioners were prominent citizens and were often invited by the Governor to State functions. In May 1860, Dr and Mrs Allen, Dr and Mrs Little, and Dr and Mrs Robertson were guests at a Ball held in Government House in honour of Queen Victoria's Birthday<sup>(64)</sup>. They were also on the guest list for the 1861 Ball<sup>(65)</sup>.

Dr Charles Julius Curties who had been appointed Coroner on January 29, 1857, died on June 5, 1860, and Dr John Scott was appointed in his place<sup>(66)</sup>.

Just as Dr Curties, Dr Scott continued his private practice<sup>(67)</sup>:

*"AT THE STRAITS DISPENSARY*

*Battery Road*

*Dr Scott may be consulted from 11am to 4pm daily. Residence: No. 6 Beach Road."*

The Editor of the Straits Times was not happy that a practising doctor had been appointed Coroner,

and he wrote an editorial on why practising doctors and lawyers should not be Coroners. He posed this question – what if a patient of the doctor-coroner died and the relatives were dissatisfied with the treatment and wanted an inquiry<sup>(68)</sup>? This situation predicted by the Editor occurred in July 1861, and caused quite an embarrassment to all concerned<sup>(69)</sup>.

In May 1861, the management of the Singapore Dispensary was handed over to Mr R Jamie. The doctors had decided that they did not want to be bothered with administrative details, and to confine themselves to medical practice<sup>(70)</sup>:

*“SINGAPORE DISPENSARY*

*We have given over the entire management of this Dispensary to Mr Robert Jamie, late Manager of Mr Baidon’s Medical Hall, and formerly assistant to Messers Duncan Flockhart & Co of Edinburgh.*

*In our rooms adjoining we may be consulted from 10am to 4pm daily, Sundays excepted; and at other times at our private residences.*

*ROBERT LITTLE, M.D. Edin.*

*Bonny Grass House*

*River Valley Road.*

*JOHN H. ROBERTSON, M.D. Edin.*

*4 Coleman Street adjoining the Masonic Hall.”*

Apart from the permanently resident medical men, there were those who visited Singapore as part of their circuit. They stayed in hotels or boarding houses and advertised and had publicity in the newspapers.

Mr Levi, a chiropodist, was one of them. His advertisement and write-up appeared in the Straits Times of October 26, 1861 and November 2, 1861<sup>(71)</sup>:

*“Mr Levi, the Chiropodist, who is at present here, has submitted to us the originals of various testimonials he advertises, besides many others, and if we are to judge of his ability by the recommendations of the very highest personages in Europe, his stay here, though short, will not be without its advantages.”*

*“We would direct the attention of our readers to the advertisement of Mr Levi, Surgeon, Chiropodist, who is at present staying at the Hotel de l’Esperance. This gentleman has acquired an unequalled reputation as an operator on corns, bunions, and such like excrescences, and has spread his fame through England and France as well as through a great portion of China and the East Indies. He makes but a short stay here, and will doubtless do much service to the public before his visit is ended.”*

Another itinerant was Dr Kufferberg<sup>(72)</sup>:

*“NOTICE*

*Dr Kufferberg can be confidentially consulted*

*anytime at the Rose Family Hotel. English, French, German spoken.”*

North Bridge Road was a popular place for doctors to have their practices:

*“NOTICE*

*The undersigned Med. Art. Obstr. Chir. Doctor has established himself at Singapore from today. Persons requiring his services will be promptly attended. At Home for consultation from 12-3pm. North Bridge Road No. 45, next to the Sailors’ Home.*

*M.V.H.B. KEISER<sup>(73)</sup>”*

Although the private practitioners had been vaccinating patients for years, none advertised this aspect of their practices except Mr Maney whose clinic was at North Bridge Road<sup>(74)</sup>:

*“CENTRAL DISPENSARY*

*No. 33 North Bridge Road.*

*Mr W Maney, General Medical Practitioner. Shipping attended; and Medicine Chests replenished.*

*VACCINATION*

*Mr Maney begs to inform the Public that he has made arrangements for a regular supply overland from England of liquid vaccine lymph, purity and sources guaranteed, in hermetically sealed capillary tubes, which preserve it active for an indefinite period.*

*He has just received overland ex Columbian, a supply of the above, and is prepared to vaccinate children at his Dispensary, or he will be glad to attend at the Residences of the Parents and Guardians if required.”*

The 1862 list of Surgeons and Accoucheurs in the Singapore Directory included two Government doctors who had retired - J Cowpar and J Rose<sup>(75)</sup>.

The 1862 Directory also had a list of Sanatoriums. The word “sanatorium” here was used not in the sense of an institution for treating specific disease, e.g. tuberculosis, but in the sense of a quiet resort, where people, including invalids and convalescents, go to rest and regain health in pleasant surroundings. The following list is included for interest’s sake<sup>(75)</sup>:

*Roseneath, Arthur’s Seat, Siglap. Robert Little, M.D. Proprietor.*

*Changi Bungalow, Changi Point. Thomas Scott, Proprietor.*

*Dudley College (Pulo Tekong). Samuel Bateman, Proprietor.*

*Government Bungalow at Sirangoon.*

*Government Bungalow at Changi.*

*Government Bungalow at Thomson Road.*

Over the years, other holiday bungalows were opened for those who needed a holiday and for the private practitioners to send their patients, e.g. at Pulau Blankang Mati, Fairy Point Changi, Bukit Chermin, Tanjong Katong and Seletar. All the bungalows were furnished except the Government Bungalows.

The private practitioners moved frequently, as shown by their advertisements<sup>(76)</sup>:

“NOTICE

T. A. KRAUSSE, M.D. has moved to High Street, No. 88.”

“NOTICE

Dr Scott moved his dispensary (*The Straits Dispensary*) from 3 Battery Road to 48 Battery Road, and his residence from No. 6 Beach Road to Bargamy Cottage, Oxley's Hill in January 1863<sup>(77)</sup>”

“NOTICE

Dr Rowell has moved from Bargamy Cottage to Mrs Nugent's, St Thomas Walk, River Valley Road<sup>(78)</sup>”

Those who returned from holidays also advertised<sup>(79)</sup>:

“NOTICE

Dr Allen begs to notify to his friends and the public that he has returned to Singapore, and that he may be consulted at his Residence, Beach Road, next to the Institution.”

The private practitioners not only had to compete among themselves, with the Government doctors who were allowed private practice, but also with “quacks<sup>(80)</sup>”.

Information was received by the Police that an European seaman had died in hospital from the effects of a strong purgative administered to him “by a well-known quack who styles himself Dr John, a native of Madras”. A post-mortem examination was held and at the Coroner's Inquiry, the verdict was “Died of natural causes, aggravated by a violent purgative administered by John Francis Christian.”

“Before the inquest Dr Ferguson analysed some pills which were brought away from the house of the above-mentioned, and the ingredients contained in them were not all satisfactory. It appears that this native has been in the habit of carrying about with him, a wand which contains any number of pills for all disorders. .... Dr John got a very narrow escape and if there had been sufficient evidence the Coroner would have been justified in committing him for manslaughter.”

There was another case where an Indian caulker who had taken a purgative from a native doctor in

the morning, expired during the night from exhaustion. The Editor of the Singapore Free Press on July 27, 1865 lamented the fact that there was no registration of doctors to distinguish the qualified from the unqualified:

“..... Unfortunately for India and the Straits any person without knowledge of physic can set himself up among the natives as a doctor and gain a livelihood. In England, the cases would be very different, and in later years the law in this respect has been so modified as to check all abuses by unskilled medical men.”

(The Medical Registration Ordinance was passed in 1905 - 40 years later.)

In October 1866, there were beginnings of criticism of the existing medical system which allowed Government doctors private practice<sup>(81)</sup>:

“..... The public medical duties of this place are of the most extensive character and to be performed conscientiously and efficiently, must absorb every moment of even the most hardworking of medical men. There are no fewer than five hospitals which are or ought to be visited daily, and are dispersed over a very wide circle. .... Here is work enough, perhaps more than enough, for any conscientious man to attempt to undertake, yet those who have hitherto taken credit of performing it, have found ample time for the pursuit of lucrative private practice. It requires no professional knowledge; it requires a knowledge of human nature and of human endurance only to form an opinion as to how this public work must have been performed. .... Let our Colonial Surgeon be well-paid; give him an assistant too if he requires one, but take from him the fatal allurements of private practice. .... Hitherto the emoluments attached to our public medical appointments have been such as to render absolutely necessary resort to private practice. Indeed, the pursuit of private practice by Public Medical Officers seems not only to have been tacitly understood but positively been invited. ....”

On April 1, 1867, the Straits Settlements were transferred from the India Office to the Colonial Office, and became a Crown Colony with its own Legislative Council. Dr Robert Little was appointed one of the three Unofficial Members of the first Legislative Council<sup>(82)</sup>. After the transfer, the designation of the Senior Surgeon was changed to Colonial Surgeon, and later to Principal Civil Medical Officer.

In 1868, when the Medical Act 1858 was amended, the Secretary of State for the Colonies in a despatch instructed the Governor to take the necessary steps to amend any local law to bring it in

line with the British Act. He was informed that there was no law in the Straits Settlements for the registration of medical practitioners<sup>(83)</sup>.

On the night of November 19, 1869, a Malay girl who had been severely burnt, was denied admission to the General Hospital, and sent to Tan Tock Seng Hospital. She was admitted but was not seen by the doctor and died two hours later<sup>(84)</sup>. The Coroner's Inquest revealed "in the most painful light the defects in our present system of hospital management." The Apothecary at Tan Tock Seng Hospital had given instructions that he was not to be called at night. There was editorial expression of outrage and disgust.

*"..... The offence against humanity. The fact is that our hospitals are left too much to the control of the Apothecaries. In scarcely any part of the civilised world would hospitals be found without a resident physician or surgeon or both. Here on the contrary, the Government Surgeon and Assistant Surgeon are underpaid and in compensation are allowed private practice, a most pernicious system. They visit the hospitals at stated times, issue their orders and the Apothecary and his apprentice do the rest, after which we may reasonably suppose they hasten to their private practice. Government should make it compulsory on at least one of the Government Surgeons to reside at the hospital, and to be always in attendance. If necessary, pay higher salaries but by all means do away entirely with the system of allowing private practice ..... The case under notice ..... Neither the first nor the second we have known of the disgraceful fruits of the present system."*

The criticisms of the Government doctors neglecting their public duties for private practice continued<sup>(85)</sup>:

*"..... We have more than once taken occasion to urge the necessity of having a physician or surgeon in constant attendance instead of as now being content with flying visits paid at stated hours and leaving the actual working and control of the hospitals to the Apothecaries and their subordinates ..... If the Colonial Surgeons are not sufficiently paid, pay them better by all means, but do away with the principle of allowing them private practice, and if the duties now devolving upon these officers are too onerous to admit of one of them taking up his abode in the hospital, let another be employed especially for the purpose. We think the experiment would be a paying one and many who now decline to go to hospital for treatment would gladly do so were they assured that they would be constantly under the Surgeon's wakeful supervision."*

The Editor of the Straits Times of October 1, 1870 also debunked the excuse that the expertise of the Government doctors should not be restricted to hospital patients, Government servants and their families, but be available to all and sundry. He also queried the necessity of according free medical treatment and medicines to Government servants and their families<sup>(86)</sup>:

*"..... We consider the principle of the Government supplying gratuitous medical attendance to Public Servants in a place such as this is thoroughly bad. When a community has grown out of its infancy and when it can attract and support independent practitioners of skill and talent, then the necessity on the part of Government or indeed the right to continue at public cost, the support of special practitioners for the benefit of that small section of the community who draw their emoluments from the public purse ends. .... The argument that Government having highly qualified practitioners in its pay, should beneficially allow anyone who so fancied, to have their attendance, is absurd. As well allow the services of the Colonial Engineer or the Auditor-General to be at the beck and call of everyone who wants to build a house or gets his accounts in a muddle..... Medical men ..... Their work is left to their consciences..... Attention to official duties would be interfered with by self-imposed private duties. The official salary is safe but neglect of private practice means loss of fees. .... Our fight is with the vicious principle which permits the union of two motives which are opposed to one another."*

The Editor was accused of siding with the private practitioners and trying to cause friction between the private practitioners and the Government doctors. He denied this and stated that he was only interested in public duties being performed efficiently<sup>(87)</sup>:

*"..... The medical practitioners of this place can very well fight their own battles as they apparently push their own fortunes without aid from us. What we struggle for is that the public duties which the Colony has assumed or which have been imposed on it, should be performed to the full. Having built and subsidised public hospitals, we should so maintain them as to be a credit and not a reproach to us..... The anomaly against which we exclaim, that of subjecting the Medical Officers under whose control they are placed to the allurements of private practice is certainly one of the first evils which must be removed."*

When the Vaccination Ordinance 1868 came into force, the Governor informed the Secretary of State on June 14, 1871 that the Government Medical Officers had asked for compensation as the extra

work involved in vaccinating members of the public deprived them of time which they had for private practice<sup>(88)</sup>.

In May 1872, when the Governor reported to the Secretary of State that the Principal Civil Medical Officer would enjoy the right of private practice, the Secretary of State thought that under those circumstances the official salary was too high, but "I do not propose now to withdraw my sanction, but I wish the matter to be re-considered on the occurrence of a vacancy in that office<sup>(89)</sup>".

It would be years before this entrenched system was gradually changed.

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