



The Practice of Medicine in Lewis

The Practice of Medicine in Lewis in Earlier Times - Local Village Untrained Midwives

Medical practitioners go back to the remote past. Hippocrates, who was born about 460 B.C., is commonly known as the father of medicine, and even long before that people practiced medical cures. The ancient Gaelic Celts were no exception.

The practice of medicine in Lewis in earlier times was carried on by local untrained people who applied local well tried and proven traditional treatments including various herbs etc. Even one hundred years ago at the beginning of the 20th century the community still depended to a large extent on local traditional remedies prescribed by untrained medical practitioners.

All births, including that of the writer in 1916 were attended by the local village untrained midwife on her own without a professional doctor at hand. Doctors were only called if there were complications. The local *Bean-Ghluinn* (untrained village nurse) that attended at my birth was Mrs Chirsty MacKenzie, 4 Calbost, known to us later as *Banntreach Rhuairidh* (Roderick's widow). She was originally from Marvig and she married Roderick MacKenzie, 4 Calbost. Even as late as 1924 we know that she attended the birth of twin boys on her own. There were untrained village midwives in every village. Women with a natural aptitude for nursing like Florence Nightingale of old.

Before the time of Mrs Chirsty MacKenzie, as our village untrained midwife, there was *Banntreach Dhuil*, Dugald Kennedy's second wife 1825-1910, daughter of Donald Nicolson, 5 Kershader. In Gravir there was Chirsty Matheson 1831-1914 daughter of Murdo Matheson, 13 Gravir. She was *Bean Dhomhnuill Iain*, married to Donald Nicolson, 32 Gravir. In Lemreway the untrained village midwife was *Bean Thormoid Ruaidh*, Catherine MacMillan, born in 1851, daughter of Donald MacMillan, 14 Lemreway. She was married to Norman Nicolson, 21 Lemreway. At that time the birth rate in Lewis was very high and these untrained midwives were kept very busy.

The late Roderick Campbell, 13 Gravir, who was born in 1897, told us that there were 22 births in Gravir during the year of his birth. Five of these children died of whooping-cough during the same year when they were still at school. There were ten births in Gravir during the year of the birth of Katie Campbell, 13 Gravir, Roddy's wife. There were seven births in Calbost in 1916, the year of my birth. There was an average intake of 5 new pupils per year from Calbost to Planasker Primary School at Marvig from the time the school was opened in 1880 until the last single pupil, Christopher MacKinnon from Calbost went to school in 1961. There was a population explosion in Lewis in the 19th century and a steady decline of population in the 20th century.

Roderick Campbell, 13 Gravir, also related to us how he was wakened in the middle of the night by his father, when he was about 20 years old in 1917 and sent off to Keose to call the doctor urgently to his mother who was in the pains of child birth. He hurried off to Garyvard by foot, borrowed a rowing boat and crossed Loch Erisort to alert Dr Cameron. Sadly it was too late to save the mother. Nevertheless, it was said that the success of the local untrained midwives were very high, as may be judged from infant mortality in the area at that time. It was said that in earlier times child birth was taken on the floor, probably because the enclosed box beds then in use were restrictive and therefore they were neither practical nor convenient for that purpose.

The community had full confidence in the local village midwives, and even when the trained district nursing sisters came, at the beginning of the 20th century the community still preferred the old *cailleachs* to begin with. The first official district midwives came to the Park district of Lewis about 1902, yet *Banntreach Rhuairidh's* services were still in demand 20 years after that.

To begin with the official district midwife was resident in Lemreway for a while. In due course the Pairc district was divided into nursing districts. A purpose build nursing cottage was built at Gravir about 1924. The building contractor was from the Stornoway area, and it was said that it was he who brought the first motor vehicle to Park. At that time the main road to Pairc was not yet completed right round the end of Loch Erisort, as there were one or more bridges still to be built across streams. The building contractor of the Gravir nurses cottage improvised a crossing of these streams by using temporary wooden structures.

The district nurse at Gravir covered the villages of Marvig, Calbost, Gravir, Lemreway and Orinsay as well as the scattered area of southern Park. In due course a second district nursing cottage was built at Garyvard and the Garyvard district nurse covered the community bordering on the southern shores of Loch Erisort such as, Cromore, Torostay, Caversta, Garyvard, Kershader and Habost. In 1974 the two nursing stations in Park, Gravir

and Garyvard were amalgamated into a new single nursing district, based on the nurse's cottage at Gravir. The nursing cottage at Garyvard became redundant and it was sold off.

The district midwives stationed at Garyvard were as follows:

Nurse MacLeod, Uig 1902	Nurse MacKay, Barvas 1951
Nurse MacDonald, Uig 1908	Nurse MacIver, Uig 1952
Nurse MacRae, Stornoway 1914	Nurse MacIver, Back 1954
Nurse Martin, Leurbost ??	Nurse McDonald, Habost Lochs 1958
Nurse MacAulay, Uig 1929	Nurse MacLeod, Garyvard 1963
Nurse Fletcher, Skye 1932	Nurse McCuish, Harris 1965
Nurse McDonald, Uig 1945	Nurse McKenzie, Back (7 Marvig) 1974

The last named nurse was appointed to the combined nursing district of Gravir and Garyvard, to be known as South Loch Nursing District.

To begin with these nurses walked to the various villages within their district, carrying their familiar nursing bag. Later on in the 1920's they used pedal bicycles, which was still used in the 1930's when the people of the Gravir nursing district gathered voluntary contributors locally and bought a new small Austin 8 car for the use of nurse Fletcher. If memory serves correctly, the cost of the new nurse's car was only about £120, which of course was a lot of money in the depressed economic circumstances of the 1930's.

The new nurse's car proved a boom in the district, not only for the quicker and more efficient services the nurse was able to provide to her patients, she also provided a fast and free passenger service for a steady stream of inter-village visitors. *Ceilidh Na Tighean*, came into its own.

Other Untrained Medical Practitioners (*Lighichean*)

The untrained village midwives were not the only untrained medical practitioners, *lighichean*, that was active in the crofting community in Lewis in the past. Various ailments were treated, both in people and in animals by local individuals who had a natural inclination for the practice of medicine.

There were those who specialised in, 'sty on the eye' which was quite common in times past. The mystical cure for this condition was the murmuring of certain incantations as the medical person counted up to ten small pieces of peat, *caoran's*, and back down from ten to nought. The ten to the nine, the nine to the eight, the eight to the seven and so on down to nought. Probably the nought signified the disappearance of the sty on the eye. The writer can confirm the effectiveness of this form of treatment as I was cured on two occasions when I was a young boy, first by Murdine No 9 *Bean Neill* and later on by Barabal No 13, *Bean Alastair an Coinneach*.

Then there was the Kings Evil, *Tinneas an Righ* which was a form of boil. The exclusive practitioners in this field was the seventh consecutive child of the same sex. *Cailleach an Deacoin* in Gravir was one such person, and there is still a lady in Cromore. I recall being sent for a bottle of water from each of these two good people. The qualified people in this case dipped his/her hands, or washed in a container of water, which was then decanted into a suitable bottle, and applied to the affected part regularly until the boil disappeared, which it invariably did. The treatment had a very high success rate.

Yet another group of persons that were able to affect cures were those who were born feet first. Their speciality was painful backs, which is the condition which is referred to now a days as a slipped disc. Young people were better fitted for this form of treatment, because it was necessary for the medical practitioner to stand gently on the affected part of the patient as he lay face down on the bed or the floor. One of our school pals in the village practiced this form of treatment and we ragged him mercilessly calling him *Doctor Dhomhnuill Ruaidh* after a decrepit old man he once treated.

There were also a comprehensive range of less mystical cures, *congadh leighis* practiced locally, such as blood letting, bone setting, various herbs, roots and leaves, *duilligean*, which were used for inner cleanliness. Massage of muscles, hot drinks of which *deoch ban* was a prominent one. It was made with hot water and a dab of oat meal, butter and salt and invariably a dab of whisky which was an extract of barley meal. The older generations believed implicitly in the value of oat meal in its various forms and they also liked the extract from the barley meal.

Again the writer is inclined to agree to the value of the various oat meal dishes, such as porridge, brose, oatcakes, and from time to time a drop of the barley extract in *deoch bhan*. The bowl of *deoch bhan* was stood beside the open fire to keep it warm and the patient usually suffering from a bad cold partook of the mixture from time to time.

Then there was the oatmeal practice, *fualaichte*, which is still used extensively in the first half of the 20th century in Lewis. Also oil extracts from fish liver and seal oil etc. which were taken regularly to fortify against the ravages of winter and many other natural medicines.

Early Trained Medical Doctors in Lewis

About two hundred years ago a prosperous Glasgow merchant had two sons, John and Robert Millar and they both trained as medical doctors. John joined the Navy and Robert joined the Army. Doctor John's health was affected by the hard life on board ship and when he learned that the Seaforth Lewis Landlord was advertising for a doctor for the Island of Lewis he walked from Glasgow to Brahan Castle in Ross-shire and secured the job.

Doctor John Millar came to Lewis to practice medicine in the early years of the 19th century. He and Doctor Roderick MacIver set up in Practice in Stornoway and they covered the whole island. Probably they were the first professional doctors to practice medicine exclusively in Lewis.

Eventually Dr Roderick Millar, a son of the above Doctor John Millar followed his father in the practice of medicine in Lewis and for a while he was the only medical doctor in Lewis. His portrait used to hang in the Stornoway Town Hall. It might be in the Comhairle Nan Eilean buildings now.

The fourth doctor to practice medicine in Lewis was Doctor Charles MacRae who became a partner with Doctor Roderick Millar about 1849. Doctor Charles MacRae was born in the Parish Manse in Barvas, Lewis on 18th February 1818 and his university studies extended over a period of 12 years. His medical course was taken in Edinburgh and it was an exceedingly brilliant one. In 1848 he obtained a gold medal for his thesis on the antiseptic properties of peat smoke.

It was said of him, that had he elected to pursue a career in the large towns or centres of population his rare and medical skills would have placed him in the front ranks of his profession. However, turning his back on the honours and wealth that lay within his grasp, he returned to his native island where there awaited him a hard life and a modest subsistence.

The medical practice of Doctors Roderick Millar and Dr Charles MacRae embraced the whole of Lewis, scattered over 700 square miles, with few if any roads. Doctor Charles MacRae used to say that his special province was what he called 'the Western circuit' extending from the Butt of Lewis to Gallon Head in Uig. He was also expected to assist in the 'Eastern circuit' extending from the Butt of Lewis to Southern Park, and from there westward to Mealasta in Uig, Lewis. He worked until growing infirmities forced him to relinquish the active practice of his profession, only three years before he died in May 1909 at the ripe old age of 90 years.

Early Doctors at Lochs

As far as we can ascertain, Doctor Roderick Ross 1840-1912 was the first resident medical doctor that practiced medicine in Lochs. He was born at Crobeg, Lochs, a son of Allan Ross, the tacksman at Crobeg.

Doctor Roderick Ross set off for the university with the pulpit in mind but instead he made for the faculty of medicine where he was a brilliant student, and although he could have taken a lucrative position on the mainland, he chose to come back to his native parish and to begin with he set up a medical practice at Crobeg. Subsequently the following medical doctors covered the whole parish of Lochs and were based on Keose the centre of the district.

Doctor Roderick Ross at Crobeg	1875-1879
Doctor Roderick Ross at Stornoway	1879-1882
Doctor Roderick Ross at Valtos Lochs	1882-1884
Doctor Douglas Sinclair (lived in Keose School house)	1884-1888
Doctor Angus MacAulay (an assistant)	1889-1895
Doctor D MacNaughton	1895-1900
Doctor Hugh MacKay	1900-1901
Doctor H.G. Mahon (died in Laxay, Titarinus)	1901-1907
Doctor Allan Cameron (a Lochaber man)	1902-1920
Doctor Donald Campbell (moved from Keose to Leurbost 1939)	1920-1939

Doctor Douglas Sinclair the first mainland doctor to cover the whole Parish of Lochs, was born in Melfort, Argyllshire on 4th November 1860. His father moved with the family to Oban and young Douglas learned to speak Gaelic there. He graduated from Glasgow University in 1882 and he worked for two years as assistant to a Doctor Anderson in Dennistoun Glasgow for £70 and his board.

It was then he saw an advertisement for the post of doctor in Lewis at £150 a year guaranteed, in addition to what he could make from private practice. There was no doctor's house in Lochs at that time and he stayed with Mr Crawford the schoolmaster in the Keose Schoolhouse when he came in 1884. Mr Crawford the schoolmaster was also an Argyllshire Gaelic speaking man. After a few years in Lewis, Doctor Sinclair returned to a general medical practice in Maryhill, Glasgow. He lived until he was over 100 years.

Meantime a permanent doctor's residence was being built at Keose on the site of the first English parish school in Lochs. Doctor Angus MacAulay was the first doctor to occupy the new purpose built doctors house and surgery which may still be seen at Keose in good condition.

There were few, if any, roads in Lochs when the first doctors came and they had to walk or use a boat or horse. Doctor Cameron was said to have been the first owner of a car at Lochs. A model 'T' Ford in 1917. He could only use it in the North Lochs district because the road round the end of Loch Erisort to South Lochs was not finally opened until about 1928. By that time Dr Cameron had left Lewis in 1920 and Doctor Donald Campbell a native of Ness in Lewis came after him in 1920. He was the last parish doctor that was resident in Keose because of the division of Lochs Practices in 1934, in line with the natural geographical division of North and South of Loch Erisort.

In the early days when the whole of Lochs was one large medical practice and few if any roads, the doctors relied on sail boats, hence it was convenient to be based on Keose on the northern shores of Loch Erisort in the centre of the district with three geographical areas radiating from it. To the east was the district of North Lochs, extending along to Grimishader, a distance of about six or seven miles from Keose.

Then to the west was the district of Kinloch extending to Airidhbhruaich or further, also a distance of six or seven miles from Keose. To the south across Loch Erisort, there was the large scattered district of Park. Access could easily be gained to several communities on the southern shores of Loch Erisort directly by boat, such as Cromore, Caversta, Garyvard, Kershader and Habost. Beyond that to the south there were many communities some of them many miles away with access only by walking over the roadless moors.

In due course the Keose doctor kept a pedal bicycle in a small shed in Garyvard for use in Southern Park. Later on he acquired a powerful motor launch which he used to cross Loch Erisort and he kept a motor bicycle at Garyvard until eventually the road round the end of Loch Erisort was opened for vehicular traffic in 1928.

Crossing Loch Erisort in the winter months could be very hazardous if the wind came up suddenly as Doctor Cameron found out on one occasion when his sailing boat capsized half way across. Fortunately he was able to cling to his upturned boat until he was rescued by people from Garyvard who witnessed the accident.

If the Keose doctor received a call for a home visitation from each of the three areas of his scattered practice on the same day it would be physically impossible for him, even with the best will in the world to attend to more than one district call in one day. In that way it could well take him several days to answer some calls no matter how urgent the need for the doctors services were. We recall occasions like that in our younger days.

Even calling the doctor to a patient was difficult. Usually a team of two men walked to Garyvard and borrowed a boat to row across Loch Erisort to the doctor's surgery at Keose. Bicycles came in the 1920's.

Then after the doctor came to visit the patient and prescribed the inevitable brown mix medicine, another team of two men had to make the journey to the doctor's dispensary at Keose. The writer undertook that journey from Calbost to Keose on more than one occasion. Tribute should be paid here to *Alistair Rhuaridh* Mackinnon, Garyvard and *Alex an' Thormoid* MacLeod 10 Garyvard for their generosity and patience by lending their boats in order to cross Loch Erisort to visit the doctor at Keose.

When Doctor Roderick Ross left Lochs he moved to Borve where his medical practice embraced the whole of north Lewis down to the Barvas district. He served that large community both medically and spiritually. His name was a household word from the Butt to Shawbost. Doctor Ross's family were as follows:-

Doctor Roderick Ross	1841-1912	Son of Allan Ross, Crobeg, School Teacher at Keose.
Isabella MacDonald	1847-1890	Daughter of John MacDonald, Bernera, Lewis
Annabell	1880-1970	Wife of Doctor Norman A MacLeod, Kershader
John M.		Medical doctor Darlington, England

Doctor Roderick Ross's mother was also named Annabella. She was the daughter of Hector MacLeod, Valtos, Lochs. That is why Doctor R. Ross set up in medical practice at Valtos, Lochs on the northern shores of Loch Erisort from where he could gain reasonable access by boat to many of the villages of Lochs. There is a room in Valtos House Lochs which is still referred to as 'the surgery'.

Doctor R. Ross's daughter Annabell, 1880-1970 was the wife of Doctor Norman A. MacLeod 2/4 Kershader who practiced medicine in Skipton England. They in turn were the parents of the late Conservative Chancellor of the Exchequer, Iain MacLeod, the well-known British Parliamentarian whose untimely early death cut short a promising political career. Iain's widow Annabell Ross MacLeod was elevated to the House of Lords. She chose the title of Lady MacLeod of Borve.

Doctor Norman A. MacLeod 2/4 Kershader and Skipton was a keen sportsman and he bought the 8,600 acre estate of Scaliscro on the west coast of Lewis where Lord Leverhulme sold off the hitherto single Lewis estate in lots in 1925. Because of the depressed Lewis economy the island could not be sold as a single estate in the mid 1920's. Doctor Norman A. MacLeod 2/4 Kershader graduated M.B. C.H.B. in 1903 and after a spell overseas he took over a medical practice at Skipton in 1907. He married in 1910 and they had a family of one daughter and three sons, Rodebell, Iain, Torquil and Roderick. Doctor Norman was a brother of *Bean a Clachair*, Kershader.

In 1913 a new South Lochs Medical Practice was set up, based in Gravir where a new purpose built doctor's residence and medical practice was built at that time. The following doctors served at the Gravir Medical Practice.

Doctor Hector MacDonald (a Stornoway man)	1934-1947
Doctor Donald MacKenzie (a native of Calbost)	1947-1957
Doctor Roderick Campbell (Gravir connections)	1957-1965
Doctor G.B. Knox	1965-1967
Doctor MacKenzie Dodds	1967-1973
Doctor Torquil MacLeod	1974-1975
Doctor Carnachan	1975-1977
Doctor Worsfield	1977-1981
Doctor Barker	1981-2006

Another new purpose built Doctors residence and medical practice was built at Leurbost road end and Doctor Donald Campbell moved from Keose to Leurbost in 1939.

Hospital provision

As there was no hospital on the island, a public meeting was convened in Stornoway in 1892 and after discussion it was decided to build a new hospital at Stornoway. A committee was appointed initially consisting of all the medical practitioners in the island, the ministers of all the denominations, the resident Sheriff and the Chief Magistrates of Stornoway.

A subscription list was opened, and a site was provided by Lady Matheson, the Lewis proprietress at Goathill, Stornoway. (Sir James Matheson passed away in 1878). In 1894 the hospital building of stone and lime with slated roof was commenced even though the committee did not have the full amount of £2,000 that the hospital was estimated to cost. The new hospital was to provide for 12 beds and it was planned in such a way as to be capable of easy extension.

Overheads had to be kept down to the minimum, and the original staff consisted of the local district nurse and the local biblewoman already serving in the town. These two were to be located at the new hospital, and they were to exercise the functions in which they were already engaged as well as the general caretaking of the hospital and the nursing of its patients at an annual salary of £30. each.

This arrangement must have meant a considerable additional commitment for these two ladies as may be seen from the following set of rules that was drawn up.

In summer rise at 6 a.m., breakfast at 6.30 and to be in the wards at 7.30. Lunch was at 10.30 a.m., dinner at 1.30p.m., tea at 5.30, supper at 9.00 and lights out at 10 p.m.

The nurse and biblewoman were to devote the afternoons from 3 to 5 and the evenings from 6.30 to 8.30 to their respective duties in town. Each of them were to have an evening a week out from 6.00 to 9.30 unless specially required in the hospital and each were to be allowed out to one sermon on Sunday.

The annual salary of the nurse was to be £30, plus board, lodgings and uniform. That of the housekeeper £25 but the later was soon raised to £30 to avoid friction. Staff groceries were to be given out weekly on the following scale: Tea 1lb, coffee ½lb, cocoa ½lb, butter 2 lbs, sugar 4 lbs, rice 1 lb, sage 1 lb, flour 7 lbs, barley 1 lb, peas and lentils 1 lb, syrup 1 tin a month, currants 1 lb, raisins 1 lb, jam 1 lb, cheese 2lbs, meat 14 lbs.

There was mounting activities as the opening day approached. Furniture was arriving, tenders for butcher meat were accepted, steaks, roast beef, roast mutton, boiling meats etc. in equal proportions at 7½ pence per pound (old pence), best English coal 19/6 (97½ new pence).

Emerging from these details is the sheer hard work put in by the voluntary committee as well as their attention to detail of organisation and foresight in planning, even taking future expansion into consideration before the first stone had been laid. Also the very heavy duties expected from the two staff ladies. Steps were taken soon to lighten their duties and be more generous with their time off.

In retrospect we all know that Goathill Hospital was extended very considerably and the staff increased over the long period of nearly 100 years that the hospital catered magnificently for the welfare of the community. Many of us have reason to be thankful for the treatment we received at that hospital.

The new hospital opened for patients in 1896. It relied for its very existence on voluntary contributions and full attention had to be given to fund raising all the time. It was not until 1925 that a full time surgeon, Dr. J.E. Purves F.R.C.S. was appointed. Before that, Doctor Murdoch MacKenzie, Stornoway acted as a part time surgeon.

It was not until 1929 that a five bedded maternity unit was added to Goathill hospital at Stornoway, and that way only possible through the generosity of Dr.T.B. MacAulay of Montreal, Canada, a Lewisman by descent. We may

be sure that all confinements in the area were taken in their homes before 1929, and indeed many if not most of them for a long time after that.

As a matter of interest the diagnosis of the first 100 patients admitted to the Goathill Lewis Hospital were as follows, demonstrating beyond doubt the pressing need for a hospital in the area:

Epithelioma of hip	3	Carcinoma of breast	2
Other cancers	5	Tuberculosis of spine	6
Lupus vulgaris	3	Other tuberculosis	9
Fracture of thigh	3	Other fractures	4
Other injuries	13	Osteomyelitis	5
Other sepsis	4	Perithyphilitis, etc,	4
Backache	2	Arthritis	2
Haematuria	2	Orchitis	2
Strangulated hernia	1	Venereal disease	2
Nephritis	2	Skin disease	3
Anaemia	1	Laryngitis	1
Pneumonia	5	Liver disease	2
Heart disease	3	Fever	1
Paralysis of bladder	1	Hydrocephalus	1
Vertigo	1	Stenosis of osuteri	1
Sunstroke	1	Rheumatism	1
Gangerine	2	Tonsillitis	2

It would be wrong to assume that the new Lewis Hospital was immediately inundated with patients who have previously been denied relief because of the absence of suitable hospital facilities. Some were undoubtedly treated in mainland hospitals. However, the truth was that it was difficult to persuade people to go to hospital for treatment. It was difficult to believe that surgery was not a fate worse than death. Therefore many opted to suffer their illnesses at home. Perhaps they were fortified by their strong faith.

Doctor MacKenzie carried the burden of the surgery work at Goathill Lewis Hospital as well as his own work in his own practice. He was a young man from Stornoway who graduated from Edinburgh University and went into the army. After some time as an army surgeon he came back to Stornoway in 1894 and lived on the corner of Keith Street and Francis Street. He set up in medical practice with Doctor Donald Murray and their surgery was on Kenneth Street opposite the Free Church. Doctor MacKenzie was reputed to be the only doctor in Lewis at that time that was any good with the knife.

Doctor Donald Murray became M.O.H. for the island and Doctor Jack Tolmie took his place as assistant and finally successor to Doctor MacKenzie when he died in harness in 1922. It is said that he did valuable work at the Lewis Hospital and that he deserves the highest tribute. Later on Doctor Donald Murray became the first Member of Parliament for the new constituency of the Western Isles in 1918. When he was M.O.H. for Lewis he conducted a crusade against the lack of hygiene conditions and the ignorance that helped to spread the scourge of T.B. He wanted open windows and clean hands before milking or touching any food.

The original intention of the hospital committee was to build a massive endowment fund, the interest of which would provide for the day to day running expenses of the Lewis Hospital. In the event this hope never materialised because the endowment fund did not attract a great deal of money. By 1902 the interest from the investment of the money in the endowment fund was only £80. Some £200 came from donations or subscriptions. Other money was raised by a levy on fishing boats using the harbour and fund raising events throughout the island etc.

Only by a very careful watch on expenses and attention to fund raising was the income and expenditure approximately equalled. In November 1903 the committee found it necessary to approve of the following recommendations:

- A. That a widespread appeal be at once made outside of the island for funds to augment the endowment fund and put it on a safe footing.
- B. That individual members of the committees bestir themselves to increased zeal in the collection of funds.
- C. The ministers should be asked to urge the claims of the hospital on their congregations.
- D. That the strictest economy on the prescription of food and medicine and in the selection of surgical dressing should be exercised.
- E. The patients only, whose disease is curable, should be admitted to hospital.

The running costs of Lewis Hospital was a hand to mouth existence. The committee was never able to accumulate reserves.

Clearly the community are indebted to the committee and to the fund raisers and others in the community that worked hard to set up the Hospital and raise funds to operate it until the state assumed their proper responsibility in this field.

Despite the difficulties there was a steady growth in the hospital facilities over the years. Some of the important events are as follows:

- In 1915, Mrs C.E. Wellesley, provided capital for an extension of 20 beds. Considering the financial difficulties facing the committee it was an act of faith on their part to decide to enlarge the hospital and hope they would get enough money to operate a much larger unit.
- In 1924, the Department of Health for Scotland provided £12,000 for the building of a new operating theatre and tray room. Outpatients department and laboratory. The kitchen, laundry, etc. was modernised and a whole time salaried surgeon was appointed.

After spending five busy years as surgeon at the Lewis Hospital Dr. J.E. Purves F.R.C.S. left a thriving hospital in 1930, and he was succeeded by Dr E.N. Jamieson who spent 25 years in the post, during which time he gained the confidence of the whole community and made the hospital a popular place.

He was a very versatile doctor. He was described as surgeon, dentist, obstetrician, gynaecologist, Ear Nose and Throat specialist, Orthopaedist and his own radiologist etc. Today, with ever increasing specialisation his place would probably be taken by several specialists. Before the new £12,000,000 hospital was built in Stornoway in 1992, there were 80 beds and nearly 200 staff in the Goathill Lewis Hospital.

Tuberculosis

An account of the medical history of Park or Lewis would not be complete without referring to the scourge of Tuberculosis, *tinneas caitheamh*, or the dreaded wasting disease which decimated the people of Lewis in the latter decades of the 19th century and the first half of the 20th century.

It was in the 1870's that tuberculosis was first noticed in Lewis and for the next 80 years it wrought havoc until it was eventually controlled by hospitalisation, surgery and drugs about the middle of the 20th century.

Probably T.B. was the greatest single killer disease in the history of Lewis. The overcrowded housing conditions were one of the factors that contributed to the high death rate. The overcrowded living conditions of the people in the crofting areas was mainly due to the land-use policy of the Crofting Landlords who denied the indigenous population living space and indeed cleared many crofting communities from their ancestral land. Over 30 small crofting communities were cleared from Southern Park alone and 42,000 acres of crofting land was converted to sheep farming in the first half of the 19th century. Later on the Park sheep farm was converted into a sporting deer park in 1886.

Another factor that contributed to the spreading of tuberculosis was the ignorance of the people of the nature of the disease and the simple but comparatively effective precautions that might go a long way to curtailing the spreading of the disease. Perhaps the authorities could have done more to inform and educate the people about the nature of the disease and the simple precautions they could practice.

The overcrowding conditions and the virtual absence of the most elementary precautions resulted in the rapid spread of the disease once a member of a family contacted it. In that way many fine good looking members of families became affected and one by one succumbed until, in some cases, whole families were wiped out.

Doctor Doig, Medical Officer for Health in Lewis stated in an article in the Stornoway Gazette in 1963 that the victims throughout Lewis were mainly young people between the ages of 15 and 35 years. In our village the disease claimed lives at one time or another from upwards to three quarters of the 14 crofts of the village. One can well imagine the grief and heartache these young deaths caused to parents and relatives. There was also the stigma, which fortunately our society has now overcome, as the nature of the disease and effective treatment became better known.

Up to the beginning of the 2nd World War the prospect of survival from T.B. in Lewis was very low. During that war and the immediate years following the war, every bed in the County hospital in Marybank, near Stornoway were fully occupied with T.B. patients. Suddenly in the early 1950's a breakthrough with new drugs was achieved and the disease was conquered.

The threat of it has now gone and people regard it more as a nuisance. Nevertheless it is advisable to take all sensible precautions, including prompt attention to any suspected symptoms.

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