

HISTORICAL

JENNER MUSEUM

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EDWARD JENNER, THE DISCOVERER OF vaccination against smallpox, was born in Berkeley, Gloucestershire in 1749 and having spent nearly all his life in the village, died there in 1823. The Chantry, his home for many years, the Temple of Vaccinia (a sort of summerhouse in the Chantry garden and in which he vaccinated many of the poor), Berkeley Church, where he is buried and where his father was vicar, Berkeley Castle, a superbly preserved medieval fortress where, amongst other events, Edward II was murdered, and many other buildings in Berkeley and the surrounding countryside still appear, at least externally, much as they did in Jenner's day.

Jenner was a general practitioner throughout almost all of his professional life and he has been described as the greatest single benefactor of mankind. At the age of 13 he was apprenticed to a surgeon at Sodbury, near Bristol, and after several years he became a student at St George's Hospital, London, and a favourite house-pupil of the great John Hunter. Despite the prospect of advancement in London, Jenner preferred to return to Berkeley as the village doctor. However, he kept up his connection with Hunter by correspondence on medical and natural history matters and by complying with the latter's many requests for specimens of hedgehogs, cuckoos and other wild life, until Hunter's death 20 years later. In the 'Temple of Vaccinia' is a whale's scapula, probably part of the whale stranded on the bank of the River Severn and which Jenner is known to have dissected before sending much of it, in barrels, to Hunter in London.

The present Jenner Trust was formed in 1966 and replaced an earlier one whose activities were curtailed by the last war. It is a continuing trust, with representatives from the medical Royal Colleges, the College of Pathologists, the Royal Society, the Wellcome Historical Medical Museum and Library, the American College of Physicians, as well as members both medical and non-medical serving more local interests. The Trust's main objects are the preservation of the buildings associated with Jenner, the acquisition, either by gift or by purchase, of Jenner relics and the establishment of a small museum. To further these aims many organizations, including the Royal College of General Practitioners, and individuals, among them descendants of the Jenner family, have been generous in the donation of money and objects of value.

The Jenner Museum was officially opened on 17 May 1967 (Jenner's birthday) by Professor Sir John McMichael, the vice-president of the Royal College of Physicians, in the cottage which Jenner built for the boy James Phipps, the first person to be vaccinated by him in 1796. (Some of the older Berkeley people of the present day can remember their parents'



The Temple of Vaccinia

stories of being driven by James Phipps in the Berkeley-Bristol coach.) In his address, Professor Sir John McMichael emphasized the widespread nature of smallpox and its high mortality. He spoke of the great superiority of Jenner's method of inoculating the comparatively safe cowpox to protect against smallpox, as opposed to the previous method of inoculating a patient, at a convenient time, with smallpox material in the hope of inducing a mild attack of smallpox, with subsequent immunity. In fact, smallpox inoculation frequently led to grave illness and disfigurement and quite often death.

Among the exhibits are vaccinators and other medical equipment of the time, paintings, drawings, caricatures and books, some fine silverware engraved with Jenner's initials, a cuckoo and a hedgehog. The latter illustrate Jenner's high reputation as a naturalist and it was for his researches in natural history that Jenner was elected to the Royal Society in 1789. A rather attractive painting of Blossom, the cow responsible for giving Sarah Nelmes, a dairymaid, the cowpox, from the lesions of which James Phipps was inoculated, occupies a corner position. The Trust was

greatly helped by the Wellcome Historical Medical Museum, both in the arrangement of the museum and by the loan of several exhibits.

Members and associates of the Royal College of General Practitioners may care to visit the Museum and 'The Temple of Vaccinia' (open 1 May–30 September (except Mondays), 2.30 p.m.–5.30 p.m.) It may well be included with visits to Berkeley Centre and Church, and Slimbridge Wildfowl Trust, a few miles away.

Acknowledgement

I am grateful to Mr John Eatough for allowing me to use his photograph of 'The Temple of Vaccinia'.

CLINICAL NOTE

ACUTE NEPHRITIS PRESENTING WITH A NORMAL URINE

Report of a case

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THAT THE URINARY FEATURES OF acute nephritis may be found without other evidence of renal disease is well known (McCrae 1913, Lyttle 1933, Weinstein *et al.* 1950, Stetson *et al.* 1955) and renal biopsy studies (Hutt and White 1964) have shown that in some patients signs are absent and urinary abnormalities minimal.

Less familiar is the claim that patients may manifest the systemic signs of this disease—oedema and hypertension—yet excrete a urine with either few abnormalities or none at all.

Whether dropsy without proteinuria ever followed scarlet fever has been a subject of discussion since 1844 (*Lancet* 1844, Thomson 1886, Tirard 1909, McCrae 1911, Nonnenbruch 1916). Fenini, in 1872, described a series of cases of acute nephritis (some fatal) in which at some stage proteinuria was either absent or slight. Other authors have claimed that oedema, or a rise in blood pressure, or both, sometimes preceded the appearance of proteinuria (Mohammed 1874, Kylin 1929, Keefer 1939, Hahn 1948, Osman 1948). Manser and Wilson (1952), investigating an epidemic of sore throats associated with a high incidence of acute nephritis, found that, late on in the outbreak, a few patients had hypertension without proteinuria and over 30 had oedema, with only a trace of protein in the urine.

It has been claimed that abnormalities of the urinary deposit may also

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