

# LIFE AND DEATH IN THE VILLAGE\*

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March

## APOLOGIA

*Each year, as with any other properly constituted body, the faculty must have its Annual General Meeting, to which every member and associate who can should contribute at least by his presence. But the bare bones of business can be very unappetising. As a dressing a faculty lunch such as we have enjoyed today could become a regular feature. But, as meat upon the bones, there should be some attention to the very meaning of our existence, namely, general practice. What better than an address by a member or associate of the Faculty? In fact, two years ago this idea was initiated by Dr James Simpson in his memorable talk on cancer. These addresses may deal with any of the innumerable facets of general practice, and some day, perhaps, an accumulation of them might be collected that our grand-children may marvel at our mid-twentieth-century simplicity. They need not be clinical. And that is where you, ladies, come in. You are, after all, the better half of general practice. Time after time, reluctantly I am sure, you spare us for whole days or even week-ends, you hope for laudable purposes. It is only right that if a subclinical opportunity arises you should be invited to share in our transactions, and witness their innocence. I was delighted to read an all-too-brief contribution by one of you to our newsletter, and I venture to hope that I may at some future time have the privilege of hearing one of you delivering the annual address.*

Imagine this picture of an English village—a medieval church in a cluster of half-timbered thatched cottages, a high street with an occasional Queen Anne or Regency house, a squire, a vicar, and a doctor, with not far off the imposing gateway of the mansion with its aristocratic or neo-aristocratic denizen. Having conjured up this delightful picture dismiss it at once, for the village of which I speak has none of these things apart from the vicar and the doctor. The church is less than a century old, no building whatsoever has any claim to architectural merit or even picturesqueness, no one fulfils anything approaching the functions of a squire. If you seek architectural distinction there is, eight miles away, St. Wendreda's church in March with a supremely beautiful angel roof, and, seven miles away in the opposite direction, you might encounter the fringes of aristocracy in the august shadow of Ely Cathedral.

Ely stands on the highest piece of land in the eighty-odd miles between Gog and Magog to the south and the Lincolnshire Wold to the north. At its foot, newly joined by the Cam, winds the Great Ouse River which, before its taming, welled over its banks as often as inland deluge, or high spring tide, or a combination of both overloaded its shallow tortuous channel. From the towers of the cathedral the medieval monks looked down in almost every direction

\*The Second Annual Address to the East Anglia Faculty of the College of General Practitioners, at Norwich on 25th October, 1959, at which many of the wives of members were present.

upon a great vista of swamp, to be described later by the Cavalier Dugdale as "a vast and deep Fen, affording little benefit except Fisch and Fowl". Here and there a mound rose almost imperceptibly out of the watery wilderness. There is an Anglo-Saxon name for these mounds, "ea", or "ey" or simply "y", indicating a piece of habitable land surrounded by marsh—Ely itself, Thorney, Whittlesey, Ramsey, Manea; and, in other parts of the country, Olney, Romsey, Romney, Chelsea, Battersea, Putney. The archaeologist has found proof enough that these islands were inhabited throughout the later stone ages, the bronze and iron ages, and in Roman and subsequent times. The plough still disinters flint implements, stone axe-heads and Roman coins and shards.

The village of Coveney stands on one of these almost-islands, clustered about its thirteenth century church of St Peter-ad-Vincula and its half-timbered sixteenth century mansion house. Included in the parish of Coveney was the hamlet of Manea perched on its own lesser mound three-and-a-half miles to the north. But what a three-and-a-half miles that must have been. Part of five-mile-long Byall Fen lay between; and today's map tells us that Coveney stands forty-three feet above sea-level, Manea eighteen, and some of the intervening land but two. No wonder, then, that at some time before the Reformation the isolated parishioners of Manea had been provided with a chapel-at-ease, dingy though it was, and lacking even a font. Even so, the poor curate, in order to carry out the offices of baptism, marriage and burial, must have undergone considerable hardship in transporting himself across a wide and treacherous morass.

But new hazards were to present themselves after the Reformation. Led by the Duke of Bedford in the reign of James I, a group of men calling themselves the Adventurers decided to carry out a vast drainage scheme calculated to turn these wastes into a land of plenty. This involved the parish of Coveney being bisected by the passage of two parallel twenty-one-mile-long channels each a hundred feet wide. In times of flood these twin channels with the intervening wash-land would constitute an unbridged river half-a-mile wide. Obviously by now the cure of souls in the Chapelry of Manea had become a fair-weather business indeed. We shall see that there was some reaction to this.

However that may be, this great drainage scheme held out the most brilliant prospects for the tiny community of Manea, for, quoting Dugdale again, "on 23 July 1638 (owing to the opposition of the Fenmen) Charles I declared himself the sole Adventurer for the reclamation of the Fens . . . . An eminent town was to be built

in the midst of the Level, on the site of the little village of Manea, to be called Charlemont, the design whereof the King drew himself". It need hardly be mentioned that the course of history of both monarchy and village was destined to be drastically changed through the agency of an East Anglian man named Oliver Cromwell. Just to show what bizarre tricks history can play, I may add that until a few years ago there remained visible evidence of this regal dream in the shape of a mound of earth and rubble in mid-village, and that this was levelled in order to make room for a "co-op" shop. There still remain oblique references in the names of two nearby pubs—The Rose and Crown and The Royal Oak. Nevertheless, at the present time, Manea, a parish in its own rights, and a very prosperous one, has nearly three times the population of its old parent Coveney

But we have not quite finished with 1638. In that year Matthew Wren, uncle of the more famous Christopher, was Bishop of Ely. The Bishop's visitation in 1638 called for replies to his articles from the church wardens throughout the diocese. These replies make highly amusing, and often piquant, reading, revealing a highly varied catalogue of delinquency of both priest and parishioner. They were collected in a book published in 1930, the result of the summer holiday hobby of William Mortlock Palmer, M.D., Fellow of the Society of Antiquaries, a general practitioner of Linton in Cambridgeshire—the practice, in fact, which gave this Faculty its first chairman, Dr Alex Brown. From the church wardens at "Many" comes this complaint:

"Wee present John Reynham for takeing hemp out of the water upon the Sabboth day after evening prayer."

From Coveney two rather more serious complaints:

"For baptiseing children in a bason at Maney."

and

"Some of the hamlett of Maney which ought to bring their children to our church have carried them to Doddington."

Now, this taking of the children to Doddington to be baptised emphasizes the dilemma of these people doubly cut off from their parent church, and their determined reaction. Doddington is half as far again as Coveney, but the geophysical obstacles were, and, indeed, still are, less formidable. Such, then, were the spiritual problems of Manea. How the medical problems were dealt with history does not relate. It was another two-and-a-half centuries before a doctor was persuaded to take up residence in this benighted place.

One can obtain a few faint glimpses into the lives of these people from a study of the parish registers. For instance, in October,

1791, John and Elizabeth Andrew became man and wife. Both were illiterate. Next year their first baby was baptised. Altogether in twenty years they had eleven children baptised, and before nine of these had attained the age of three years they had been buried. Then the name of Andrew disappears for ever from the record. We can hardly be surprised that they should have fled this pestilential spot with their two surviving children.

I am not sure when it was decided that the Chapelry should have the benefit of a resident curate, but there came one, Richard Taylor, to Manea in July 1830. In the third year of his incumbency he began to add notes to the customary bare entries in the register. At first, these were chiefly of deaths from unnatural causes, a child of seven "accidentally burnt", a man of 30 "run over by a waggon", and so on. But, as time went on, he recorded more and more causes of death, natural and otherwise. I have extracted the information to be gleaned from the last hundred of Richard Taylor's burials, and, more especially of the last thirty-three, of which he names the cause in twenty-five. These are made up as follows:

eight of smallpox at an average age of five;  
 four of scarlet fever at an average age of four;  
 one of measles at two;  
 one of typhus at eight;  
 five from consumption at an average age of twenty-three;  
 a male of two from a decline (whatever that may have been);  
 a female of one from croup;  
 a boy of sixteen, he says, was "found dead in bed supposed to have died in a fit to which he had been subject from infancy";  
 "Burnt to death" aged one year and nine months;  
 "Accidentally scalded to death" aged one year;  
 drowned, aged two;

these last three fatalities occurring within six months. In the whole series of one hundred there occur two other child deaths from burning, a puerperal death, and a running over by a waggon. He relates two episodes which today would furnish material for the Sunday Press. A man of 57, he relates, was "killed by a fall from a load of Haulm while in a state of inebriation. He was leading it for a woman with whom he was supposed to be living in adultery; his last words to his wife and daughter who remonstrated with him were, 'might hell be his heaven if he did not'". (To my mind, a masterpiece of crypticism.) In 1835 there died a woman who, says Richard Taylor, was "tried in 1833 for murdering her child, but was acquitted. She confessed the deed on her deathbed."

During the last six weeks of his incumbency Taylor committed

fourteen of his parishioners to the earth, their average age four years. He finally notes, "Here ends my registry. I leave for New Zealand." Who could blame him? From a population of eight hundred and twenty-two, those one hundred committals took place in three years and nine months, the average age at death being the appalling figure of just over sixteen-and-a-half. Fortunately for posterity there were during the same period two hundred and four young children baptised. Is there any place in the world to-day, I wonder, which could produce comparable mortality figures?

I want very briefly to contrast that dreadful picture with to-day. With an increase in population of something like seventy per cent the last one hundred deaths in the same locality were spread over a period of six-and-a-half years, and the average age was seventy-one years and three months. In the first four decades of life the only infant death was due to a very severe degree of cerebral palsy, a girl of seventeen had malignant endocarditis, two men of thirty-four had coronary thrombosis, and one of thirty-eight committed suicide. There were no deaths from tuberculosis and, with the exception of three elderly influenzas, none from infection of any kind. Forty-nine out of the hundred were from cardio-vascular causes with, in a few cases, an underlying non-tuberculous pulmonary disease; and there were twenty-six deaths from cancer.

Within living memory it was a very rough six-mile walk to Chatteris to obtain skilled medical aid. Then, one old inhabitant informs me, you were liable to be sent a further mile up the London Road to produce the doctor's groom. There were in Manea at that time active members of two of the better-known friendly societies, and for long they debated the possibility of ending this state of affairs. At last they came to an agreement, and the junior member of the firm in Chatteris was persuaded to take up residence in Manea. The cost per annum of this luxury for club patients then, in 1892, was six shillings.

It is one of the characteristics of these people that if they want a thing very much they will see to it that they get it; and so, having procured the services of a resident doctor, they successively built a commodious village hall, established a village nursing service, bought a motor ambulance, and they now own a well-equipped playing field. Their long-established silver band once won a prize in a national competition. There is a spirit of independence and of self-help, which, of course, is not surprising in a community for so long cut off from easy communication with the outside world. They are, for the most part, stockily built, immensely strong, extremely hard-working, highly-skilled agricultural workers. They are almost classless. Apart from a small coterie of farmers with large holdings,

most of them are farm workers, or have been, or are the children or grandchildren of agricultural labourers. This means that they have some more or less close acquaintance with the days of family-raising on ten shillings a week. Coupled with this is a very wide spread of proprietary interest in the land itself. Besides the self-employed small farmers and small-holders, large numbers of the employed farm workers themselves own or rent, or have allotted to them, an acre or two of this highly productive earth. Thus there is a very close application to the needs of the land, and the master will work as hard as Jack. For the employed man work starts at seven in the morning, there is a half-hour break at eleven for a sandwich meal (called dockie), and he then works on until three. The main meal of the day is taken at four, whereafter work goes on in a self-employed capacity until the evening light fails. The self-employed small-holder works these same long hours. As far as medical practice is concerned this means that there is very little hankering after the certificate of incapacity, retirement is almost unheard of, and, so long as suitable doses of digitalis and hypotensive drugs are supplied to maintain their eventually overtaxed cardiovascular systems, they just seem to go on for ever. But the women are involved as well as the men, partly as seasonal employed piece-workers and partly as members of the family team on the family holding. Their resultant shapely pelves and magnificent abdominal musculature, coupled with a matter-of-fact outlook on reproductive processes in general, tend to make operative obstetrics an obsolete art.

There is a process of urbanization proceeding apace in the village, helped considerably by its present prosperity and by government improvement grants. When I arrived just after the last war you could count the bathrooms on your fingers. Now all mod. cons. are as common as was the privy then. Refrigerators, deep freezers, vacuum cleaners, television sets, space heaters, kitchen cabinets and sink units are fitted into improved cottages. A coach service and numerous private cars take people to London and the provincial capitals for shopping and sight-seeing, and to seaside resorts to make whoopee. Hair styles, male and female, young and old, and dress styles, especially of the youth and children, elegant, expensive, and often startling, are not so far behind Mayfair and King's Parade. And yet all this imported glamour, so far, anyway, has not made much inroad into the essential spirit of the community. It is getting a little difficult, perhaps, to maintain full support for some of the older village activities, but most of them are managing to keep an end up. Even National Service, which takes callow youth out of the village into the great big world and brings it back smarter and more sophisticated, has not made it unwilling to settle down again to rural

life with its new appanage. Moreover, surprisingly enough, the widening horizons and the greater glamour, and the films and television have not turned heads. In fact, far from the many pretty girls the village produces hankering after the glitter of the cities and hunting for husbands in the higher strata, there is a constant spectacle of school-day romances persisting through early working days and the separation of National Service to marriage and parenthood within the village community. There seems to be an innate level-headedness which allows them to indulge in and enjoy the exotic and bizarre exuberances of modern times, and yet return happily to the everyday realities of rural life. In all probability this has much to do with the fact of their stake in the land; for the piece, however small, is held on to tenaciously and handed on from one generation to the next.

This is a closely knit community, tribally and economically. The bulk of the permanent population is made up of a few families of something like two centuries standing, some of them of Huguenot extraction. Although first cousin marriages are exceptional it is inevitable that these families are almost inextricably interwoven. To illustrate the sort of situation that this produces I selected one man and his wife and set out to trace their relatives living contemporaneously within the village community. The total reached sixty-two, of whom, of course, many are in their turn members of the other village families, forming thus a highly complex human tapestry. Even people on the outer fringes of the permanent population are often found to have some link with the large inner nucleus. And this leads to the economic factor, namely, that there is, as far as the tilling of the land and the lifting and disposal of the crops are concerned, a considerable mutual interchange of labour and equipment (usually, let it be said, on a strictly business basis).

From the point of view of the general practitioner this spectacle of whole living genealogical trees is of considerable interest. As a single instance, from one aged asthmatic woman it is possible to trace a strong allergic strain through three generations of her descendants. At one point one of these allergics has married an allergic of a family new to the village, and one speculates on the possible manifestations in this couple's progeny. Given time and careful recording it may be possible to discover, or even predict, trends in various directions of susceptibility and immunity.

There is a lighter side to this constant contact with such a tightly knit group, involving the necessity to keep a tight rein on one's tongue. Hear all, repeat nothing, offer no opinion. One day an old lady, diabetic, eightyish, boasted of being one of a family of twenty-

one. Later on my rounds that day another old lady, osteoarthritic, a little more advanced in her eighties, was boasting of her own fruitfulness, which led me to mention that I had, only that morning, been acquainted with a quite considerable feat. "Oh, who was that?" Light-heartedly I mentioned a name. "Oh, *her*." This was said with such a wealth of feeling that I knew my foot had plunged very deeply indeed. I asked no questions. Later I was to learn, by what devious means I forget, that these two old dears many years before had been involved in a suit for slander, in which lady number two had been on the losing side. No harm done, but a sharp lesson. An absolute gem of a man, eighty years old, bearing a Huguenot name, used to walk over a mile and back to fetch his wife's medicaments. Bed-ridden in the village lived his older brother, a difficult old man with rheumatoid arthritis. One day I said to the ambulant one, in all innocence, "Have you seen your brother lately?" Quietly the reply came, "I haven't seen him for twenty years. He did me a bad turn once." I asked no questions, and know not to this day what monstrous unforgiveability had been committed. But it was another gently administered lesson in discretion.

While such cases of enmity are natural and inevitable in such a community, they are not obtrusively common. They can be placed side by side with the case of Joey, the first owner in the village of a television set. About thirty years of age at the time, Joey was completely bedridden, and was devotedly cared for by his widowed mother with the help of National Assistance. He belonged to a family which brought me occasional letters and even visits from neurologists and geneticists, for he had one of those muscular dystrophes which ensue at puberty and are transmitted to the unfortunate male through the female parent. In spite of double wrist-drop he used to construct perfect models of aeroplanes. Quite spontaneously a few neighbours organized what is known as a benefit social, and this raised enough money to buy a television set and to maintain it throughout the remainder of Joey's life. And that was not a single isolated event, for I know of two other cases of exceptionally stricken families who received substantial succour from similar examples of practical sympathy.

I suppose most verbal traditions have a basis in fact. At the foot of the churchyard they point out a raised piece of ground without stone or rail which, they say, is a mass grave of cholera victims alleged to number something in the twenties or thirties. There is an authentic record, in actual fact, of eleven victims of cholera buried between 27th October and 11th November, 1849. But I wonder if history can be brought more up-to-date? I suppose most practitioners, to their secret shame, encounter their pet aversion, the patient



who arouses antipathy and revulsion. One such unkempt old woman brought to my consulting-room a paper bag containing some seed of a poppy, lots of which, she said, came up in her garden every year. I accepted the gift without much interest, and I doubt if I ever used the seed. I had already noticed, however, an annual poppy growing unbidden in my own garden of a type with which I was not familiar, with leaves of greyish green and petals of near-white and purple. Indeed, each summer a few of these still appear without fail from latent seed. Some years later the sight of a few acres in Norfolk of this very poppy, obviously being grown as a crop, rang a bell. This was, of course, the opium poppy, *papaver somniferum*. And then the pieces fell together, for I had already been told that opium-taking had been an indigenous habit in my district until comparatively recent times. This passage occurs in a book on the Fenland in 1878, "If 'desperate drinking' was the special sin of our Scandinavian forefathers, opium-eating—the most insidious of habits—is the special vice of their descendants in the Fens. Under the influence of this drug, men and women exist in a state of inanity, and their persons betray their habits; they look wan and emaciate." There was an apt description of the patient in question. She was, by this time, defunct. I had taken her for a confirmed tippler. Quite possibly she was the last surviving opium-addict. I wonder. But how I wish that I had taken a good look at her pupils, and how I regret my fall from those high standards of observation and tolerance it is my perpetual duty to maintain.

A deduction from afterthoughts and without proofs, you may say, has little value. Here is another for what it is worth. Every Fen field is bounded on at least two sides by a steep-sided ditch as part of the general drainage system. It is a wonder, with such abundant opportunity, that death, intentional or otherwise, from drowning is not commoner than it actually is. Two elderly bachelor brothers lived together in a house situated beside the junction of two of these deep ditches. From the house to one of the ditches was a well-worn path marking their passage to and fro in the fetching and carrying of their dipped-out supply of domestic water. One of them was being treated by me for Parkinsonism—not, as you may guess, very successfully. He was found one morning by his brother drowned at the spot from which he was accustomed to fetch water. At the inquest I gave my evidence, as sure as I could be that there was nothing pointing to anything other than an accident. To my great surprise a verdict was brought in of suicide whilst the balance of his mind was disturbed. Such a verdict, once given, has to be accepted; but often afterwards I pondered on something which did not quite make sense, until I suddenly reached the very firm conclusion that this man's death was, indeed, due to something in the nature

of an accident, and that I, albeit unwittingly, was closely connected with its cause. At that time my method of attempting to alleviate the distressing symptoms of Parkinsonism was to give doses of tinctures of hyoscine and belladonna up to the point of toleration; and this old man was taking quite considerable doses of these in a concentrated mixture. These are drugs which, in all our experience, are capable, in toxic doses, of causing a varying degree of mental confusion. I feel quite sure now that this poor old chap had taken his morning dose of that very potent concoction, in all likelihood far from accurately measured, and, in a state of confusion, had taken, as it were, the wrong turning, and had managed to get into the steep-sided ditch quite fortuitously. I am willing to be told that if my practice were to keep me harder at work I should have less time for such cogitations and conclusions.

I encountered in the village the only real case of agorophobia I have ever seen. A timid woman with no higher I.Q. than is needed to be a good housewife, a good mother and a loving wife, had come as a bride from another village, and had her "nervous breakdown" in the tenth year of her sojourn. Its chief feature was her inability to take a single step outside her own house. The husband, a man with a wonderful sense of humour and a model temperament, had to do all the shopping, including the buying of clothes for his wife and their boy and girl. Psychiatric advice and treatment were of no avail, and it took me a considerable time to sum up the situation, which was this:—This poor woman, the stranger within the gates, was closely surrounded by a host of her husband's relatives, headed by her elderly house-bound mother-in-law, an old lady living almost opposite, who may have had a heart of gold, but had a tongue which, in its keen outspokenness, was capable of laying searing lashes upon tender susceptibilities. I never had the courage to explain to the one amongst so many that she was solving the dilemma which was tearing her between duty to visit the house-bound old lady and dread of being severely stung, by herself becoming house-bound. In any case, might it not have done more harm than good to have done so, perhaps driving her into some even more extraordinary refuge from the otherwise inescapable? Fortunately, as her end draws nearer, the old matriarch is mellowing, and the problem is gradually resolving itself. In such states of conflict the village doctor has all the protagonists as his patients and neighbours.

If there is a thesis in all that you have been listening to, some general thread of coherence, it is pretty tenuous and, probably, entirely platitudinous, and certainly not scientific. It is, of course, quite obvious that any body of people is born of its history and geography and is nurtured on its day-to-day circumstances, and that

these factors have some bearing on incidents in their lives and on their reactions. I have described in a vague and far from complete sort of way a small society with a rather special history related to a most unusual geography and emergent from a veritable Slough of Despond into a joyful era of prosperity and amenity. As general practitioners we are offered the privilege of increasingly intimate knowledge not only of our individual patients, but of a whole cosmos of human beings, which may be diverse and heterogeneous, or may, as in the case under consideration, be closely inter-related and fairly homogeneous. I have tried to avoid the word ecology, because I am not quite sure that we all know exactly what it means. My general suggestion is that what might be called the natural history of your practice, given that you have some leisure for thought, may be an absorbingly interesting subject for study in its relationship to the daily incidents of your professional life.

#### Acknowledgements

I am most grateful to the Rev. G. R. Ellaby, Vicar of Manea, for allowing me free access to the Parish Registers, and to Mr F. M. Walker, archaeologist, also of Manea, for his loan of many books of local interest from his extensive library.

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**Hypothyroidism in General Practice.** D. P. WHEATLEY, M.D.  
*Proceedings of the Royal Society of Medicine* (July 1959),  
52, 521.

Dr Wheatley reports on some cases of myxoedema (9 proved and 4 suspected, out of 2,500 at risk) in his own practice. The insidious onset and resultant difficulty of diagnosis is stressed; a number of presenting complaints is discussed—increasing weight, paraesthesia, joint pains, constipation, deafness, and mental apathy. There is a high incidence in women (only one male patient is reported).

Various confirmatory tests are detailed, estimation of serum cholesterol and electrocardiography included, but the most satisfactory proof is got from a trial of substitution treatment. For this purpose triiodothyronine is most useful, not because the effect is different to that of thyroid extract, but because it is more rapidly eliminated. The ill effects of mistaken treatment are thus minimized.

In one hypertensive patient the effect of thyroid treatment was to restore normal blood pressure readings.