

Charles John Macalister MD FRCP 1860-1943

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Macalister was a Liverpool boy, who, after a short career as a chemist, studied medicine in Edinburgh (1879-84). He returned to Liverpool and worked first as a general practitioner and also part-time as a pathologist to the Royal Southern Hospital, eventually becoming physician to both the Royal Southern and the Stanley hospitals.¹ As part time medical officer to many of Liverpool's charitable medical institutions he was instrumental in improving conditions for the patients. A regular attender at Liverpool Medical Institution meetings, he was President for two years during the First World War.² His collaboration with the famous orthopaedic surgeon, Robert Jones, led to the founding of the Royal Liverpool Children's Hospital at Heswall. This was probably the greatest of his considerable achievements. A great deal of primary source material, memoirs, original manuscripts, reprints, lecture notes, papers, letters and memos, holiday diaries, telegrams, photos, cuttings from all the papers, and menus is held by his

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¹ CJ Macalister, *A History of the Royal Southern Hospital 1838-1936* (Liverpool, W B Jones & co., 1936), p.206.

² JA Shepherd, *A History of the Liverpool Medical Institution* (Liverpool, Liverpool Medical Institution, 1979), p.303.

family.³ His MD thesis is held by Edinburgh University.⁴ One of the main sources of information for this paper is a typed and document entitled *A Physician's Retrospect, 1937-1864*.⁵

Macalister was born in 1860 in Bootle, the sixth of seven children. The family were very religious. The Sabbath was strictly observed. They went to church twice, and the only entertainment allowed was a walk, and no secular books (his second wife allowed no card games on Sundays). In 1872 he started to attend the Myrtle Street Chapel, which held 2,000 and was usually overfilled. Here he had his first encounter with Dr Carter, only five feet four inches tall, a heavily bearded Liverpool physician, later Professor of Materia Medica and Therapeutics, who became his father-in-law. It has been said that in the 1890s it just was not done to die in Liverpool without having seen Dr Carter first. The chapel was also where Macalister and Robert Jones (1858-1933) first met.⁶

Macalister was educated at Liverpool Institute. He left school in 1877, when he was sent to New York for a holiday on the steamship 'England' which still carried foresails. While there he saw the Brooklyn Bridge being built.⁷ On his return he went to train as a chemist first at the School of Chemistry in Liverpool (there was no university in Liverpool at that time), then to a firm in Widnes. Then, when the company was not doing so well, he went into a Shipping company, which he also did not like. His sister was a nursing day probationer at the Royal Southern Hospital, and he used to go and walk her home in the evenings. As a result, he became friendly with some of the doctors there, and so decided to become a doctor.⁸

He made some good friends at Edinburgh, and in his *Retrospect* he mentions particularly William Herdman (1858-1924), who became Professor of Zoology at the new University College Liverpool. This was one of the lasting friendships of his life, and they used to go dredging together, as described in one holiday diary.⁹ On the same trip, Herdman's son did research on deck stability and engines. Another friend was Henry Dobie, who went with Joseph Lister to London in 1877.¹⁰ While at Edinburgh, Macalister became a student assistant demonstrator first in botany then in physiology. He trained under John Chiene (1843-1923), Douglas Argyll Robertson (1837-1909) and Joseph Bell (1837-1911), and saw Thomas Keith operate, supposedly one of the early

³ All non-published documents referred to in this paper are held by Dr Ferguson, unless otherwise stated. For contact details see reference 1.

⁴ CJ Macalister, *A Thesis on Emphyema and Allied Thoracic Effusions considered Historically, Clinically, Experimentally and Practically* (Edinburgh University, 1895).

⁵ A copy is held by the Liverpool Medical Institution. This document has no page numbers, hence the use of chapters in subsequent references.

⁶ Macalister, *Retrospect*, Ch 2.

⁷ *Ibid*, Ch 3.

⁸ *Ibid*, Ch 4.

⁹ CJ Macalister and Herdman *Letters from the 'Runa'.. and to...Ultima Thule*. (typed and bound, 1916).

¹⁰ L Farmer, *Master Surgeon: a biography of Joseph Lister* (New York, MD Harper, 1962), p.107.

exponents of antiseptic technique. Macalister was horrified to see Keith's hair falling into the wound during one operation, but he thought there was so much carbolic about, that it was probably quite safe.

In 1879 when he first became a student at Edinburgh, he took a ticket to study at Liverpool's Royal Southern hospital during his vacations. This is his description of an operation for removal of an abdominal growth:

Every member of staff was present, together with the nurses and students. There were no precautions taken with reference to the cleanliness of their garments. The surgeons wore old surtout coats bespattered with the blood and other discharges of previous operations... When a certain stage of the operation had been reached Dr Nottingham and some of the students were invited to dip their hands in carbolic and examine the growth... While the operation was being completed Dr Nottingham requested the student who was attending to the spray to explain its workings which were very effectively being carried out in relation to a ring of backs surrounding the patient, but very little of the antiseptic vapour was getting to the vicinity of the seat of the operation. The patient died a few days later.¹¹

While at Edinburgh, he wrote his prequalification dissertation on seasickness. After qualification in 1884, he went as a locum to Wiltshire, and then worked in late 1884 at the Liverpool children's infirmary and in 1885 at the Manchester children's hospital in Pendlebury, where he saw acute and chronic pneumonias, rheumatic fever, and joint disease due to both tuberculosis and rheumatic fever. There were also large numbers of cases of scarlet fever that had a mortality rate of some 13 per cent.¹² He noticed that the children kept coming back ill again and at first he just accepted this as normal, but later he questioned why this happened.¹³

While working in Wincanton, Somerset, as a general practitioner (where the first private crematorium had recently opened), one of the local doctors, in order to introduce him to the local population, took him on a 'ward round' of the churchyard describing the occupants of the graves, and their illnesses. However, Professor Cheine, on hearing of Macalister's move to Wincanton, sent him a telegram, advising him to get straight back to Liverpool. He did, and set up his plate at his father's house in Princes Road. This was a 'waiting game'. In the late nineteenth century, all young doctors started as general practitioners and then began to specialise. Surgeons remained general practitioners, but physicians did not do surgery, midwifery, or dispense medicines.

¹¹ Macalister, *History of the Royal Southern Hospital* pp. 29 – 30.

¹² Macalister, *Retrospect*, Ch 15.

¹³ Macalister, *Retrospect*, Ch 6.

It has been said that Macalister was the first specialist paediatrician, but although his work was always slanted towards the treatment of children is never was exclusively so. He himself said that Percy Marsh, who unfortunately died young, was the first in Liverpool to practice entirely as a children's physician. Macalister became medical officer to a variety of Liverpool institutions the Foundling hospital, the Home for Incurables, the School for the deaf and dumb, the Reformatory Schools, Pathologist to the Royal Southern Hospital and Obstetrician to one district. At these places he could try any treatment he liked, and there was no control on what drugs were used. For example, whooping cough was very common, and he observed that children living near the gasworks seemed to get better faster, so he added Benzol to his prescriptions. The mother of Isabella, aged one and a half said, 'It took the whoop out of it'.¹⁴ He saw a lot of empyema, and he recommended early drainage. This became the subject of his MD thesis, presented in 1895.

Macalister learnt a lot from these posts. He wrote everything up and presented papers at local medical meetings. One of his papers, for example, was on the Liverpool Foundling Hospital that had started in 1888. The death rate was very high due to sepsis as a consequence of the babies being removed from their mothers, and being artificially fed. In 1890, overall, there was a 22 per cent mortality in the first year of life. As a result of his work at the Foundlings, he recommended breast-feeding. Working there led him to formulate a lot of ideas about bringing up children. He stated that babies did not require solids, if they did they'd have better developed jaws and teeth (he later applied this to the elderly, too), and that a rapidly growing child required frequent easily digested food. He had cows milk analysed and compared with breast milk, and thus was able to make recommendations about how to mix it to make it as similar to breast milk as possible. He said it should be delivered to the house twice a day into a clean bowl, which had been scalded out. He insisted that children should be kept clean, should be bathed daily, and have plenty of fresh air. Intriguingly, the function of the good flannel binder, which he recommended should be worked round the abdomen, is never made clear in his writings.

Macalister reported on cases of gross sepsis, liver disease, sometimes alcohol induced, rickets, and marasmus.¹⁵ He recognised that chorea was epidemic, and thought it might be infective in origin. He regularly saw diphtheria, and postulated that it could be spread by taking Holy Communion. Tuberculosis was very common, and he recommended long-term follow-up and 'audit' of all cases discharged from sanatoria, because 'cured' cases could break

¹⁴ CJ Macalister, *Note concerning the use of pure Benzol in the treatment of Whooping Cough*. (Printed reprint from *Journal of LMI*, and undated, but handwritten 'about 1888').

¹⁵ CJ Macalister, 'Two cases of cirrhosis of the liver in children', *Liverpool Medico-Chirurgical Journal*, 1901, pp. 496-504.

down again.¹⁶ Gastrointestinal diseases were very common, and when he saw them, he examined them so fully that on one occasion he removed an earring from a child's rectum, that resulted in a great improvement of symptoms.¹⁷ Now, in the twenty-first century, some of his ideas seem very odd. Some poor children were fed cooked thymus daily. He thought that some gastro-intestinal and other diseases were due to 'accumulated toxins' and it is interesting that the miasma theory almost re-emerges in his papers in 1899 and 1905.^{18 19} He also firmly believed that polymastia (the presence of additional breasts or nipples) was a reversion to a more primitive type.²⁰

In 1886 he became medical officer to the Liverpool school for the Deaf and Dumb and he studied the pupils very carefully. The *British Medical Journal* had reported on the Royal Commission on the Blind, the Deaf and the Dumb in 1889, which recommended Compulsory education for the deaf and dumb, claiming marvellous results from only allowing the children to communicate orally. It suggested that speech was superior over signs, and strongly recommending that they should be prevented from signing.²¹ Yet Macalister had enough experience working closely with these children, to disagree, and in his letter to the BMJ he stated that 'The deaf and dumb are often intelligent and hard working. Signing is the natural language of the deaf mute. Articulate speech is entirely foreign to him'.^{22 23} He further investigated the genetics of the families, comparing children who were born deaf to see if there was a genetic input. He concluded that intermarriage did not necessarily give rise to deaf children.

Because he was interested in the diseases of children, in 1887 he opened a children's department at the Beaufort Street branch of the Medical Mission.

The work was hard because it involved visiting the children in their homes over a very wide district. One learnt something of the difficulties of the poor mothers, most of them already overworked by their domestic duties and generally large families. The preparation of meals for the children and the workers, the family wash, the attention to the inevitable baby and the younger children

¹⁶ CJ Macalister, 'The results of the Sanatorium treatment of phthisis; a criticism', *Liverpool Medico-Chirurgical Journal*, 1902, pp. 337-343.

¹⁷ CJ Macalister, 'Substance of a clinical lecture on some cases of diarrhoea and vomiting', *British Journal of Children's Diseases*, 1905.

¹⁸ CJ Macalister, 'An account of some toxic diseases affecting children', *Liverpool Medico-Chirurgical Journal*, 1899, pp.453-455.

¹⁹ CJ Macalister, 'Sudden deaths in children', *British Journal of Children's Diseases*, 1905.

²⁰ CJ Macalister, 'Some reversions to type and their relationship to disease', Paper delivered to Liverpool Heredity Society, 9.12.1921.

²¹ *British Medical Journal*, 28.9.1889.

²² CJ Macalister, 'The deaf and dumb' *British Medical Journal*, 12.10.1889.

²³ CJ Macalister, 'Deaf mutes and their education', *Liverpool Medico-Chirurgical Journal*, 1889, and 1891, pp. 60-72.

(the children 'on the floor' as they styled them) must have been exhausting enough but when sickness came then was trial indeed. The family wash alone was a backbreaking business.²⁴

He gave considerable support to these families, once giving his brother's new trousers away by accident to an impoverished family. He gave this post up when he was appointed to the Stanley Hospital, and he started a children's department there, but found the problems were no different. Around 1890 he took medical charge of the Holy Trinity Industrial Schools in Grafton Street. This was really a reformatory institution, and there was a very repressive attitude, the boys were terrified, there was a 20 per cent enuresis rate, and skin diseases were rife, 5 per cent had impetigo. Together with a new head master, he managed to turn the place round, instituting a friendly atmosphere, regular individual baths, not all just in one big bath, decent food. Although he recommended an adequate diet in detail, he did not make them eat what they did not like. He recommended keeping notes on the boys with a photo, one card per boy, including serial heights and weights.²⁵

Another Liverpool institution with which Macalister was involved was the Home for Incurables for women and children, many of whom had rheumatoid arthritis, which Macalister viewed 'as terrible as cancer'. He thought the disease was caused by toxins from the nasal or oral mucous membranes, or an ergot like poison was to blame. He described one case of ulcerative colitis and arthropathy, and another which sounded like scleroderma, but he cautioned: 'These cases tell us that we must not call diseases by a name, simply because certain symptoms are present. We must watch analogies between diseases'.²⁶

In 1889, after the death of his father he took over the house and practice of the late Arthur Rich in Catherine Street. At this point he started to specialise as a paediatric physician. In 1892 he was appointed physician to the Stanley Hospital, and here he started serious research on thoracic effusions, which culminated in his MD thesis. In 1894, as he gained a medical reputation, he moved to 66 Rodney Street, Liverpool's equivalent to London's Harley Street, and in Macalister's time was known as 'the valley of the shadow'. In 1899 he moved again, to 35 Rodney Street, where he lived until 1918.²⁷

There were several venues in Liverpool for post-qualification medical education, but most of Macalister's involvement was with the Liverpool

²⁴ CJ Macalister, *The origin and History of the Royal Liverpool Children's Hospital at Heswall* (Campden, Alcuin Press 1930), pp. 8-9.

²⁵ Macalister, *Retrospect* Ch 8.

²⁶ *Medical and Surgical and Pathological Reports of the Royal Southern Hospital, Liverpool, 1902*, p.15.

²⁷ Macalister, *Retrospect*, Ch 10.

Medical Institution.²⁸ In 1884, Robert Jones and James Rose started to meet informally to read together and then discuss their findings on both medical and literary subjects. This became formalised later in 1884 as the Liverpool Medical and Literary Society. Some medical students joined, and the rule made that, if called upon to do so, one should speak, on any subject given, for ten minutes. There would then be discussion, which would be frank, and the rule was that no offence should be taken: 'All members should be friends, and be capable of slating each other freely without fear of giving offence'.

In 1886 the group was enlarged and lay members were for a time included: 'The society shall exist for the purpose of enabling its members to learn the art of speaking in public'.²⁹ Macalister and some of his brother joined in 1886, and he recorded his impression of the society:

The heat of the argument gave rise to a bottling up of physical energies, which required to be worked off, and this was accomplished as follows. We adjourned sometimes to a downstairs room in Jones house, in which was a mangle; sometimes into a compartment in Rose's domicile in a corner of which was a cardboard box containing Jimmy Rose's Sunday topper. In one or other of these compartments we used to box. As one man got knocked out, another would take his place and so each and all got a turn with the gloves. We had very good fun but were of unequal weights. Jones, in those days was solid and very strong. Steele was of medium weight. Rose was very small and light and I vividly recollect him being taken clean off his feet by Jones and sitting down on his own hat.³⁰

In other words, you were not allowed to take offence, but afterwards you could knock the living daylights out of whoever had criticised you! The minutes of most of these meetings are kept in the Liverpool Medical Institution.

Macalister gave many talks in the Liverpool Medical Institution, where he was President in the 78th and 79th sessions (1917 and 1918). These were during the First World War, and it was a difficult time for everyone. His first presidential address listed casualties, and then focused on child welfare. He wanted a coordinated child welfare scheme for the city of Liverpool, but unfortunately this did not come about.

Children, those valuable treasures of the State, are dying round us on every side, or they are being wounded, crippled, or rendered

²⁸ In his writings he never stinted on the history. They were often rather verbose, but do show a sense of humour. He was not very strong on dating things – manuscripts were often typed but undated.

²⁹ Macalister, *Retrospect*, Ch 7.

³⁰ Macalister, *Retrospect*, Ch 7,

inefficient through agencies which could well be exterminated by organised effort. Their casualties in the war which is constantly being waged against them by maleficent hereditary factors, as well as by numerous diseases resulting from ignorance and bad hygienic conditions, are quite as heavy as those in our army in the field. If there were casualty lists published throughout the kingdom, of the infants and children killed or wounded by those agencies . . . the truth of this statement would become only too apparent.³¹

His first address was published by the LMI, but he had to publish the second himself as the journal had been stopped for the duration of the war.³² On this occasion, they invited ladies, many of whom had been co-opted onto the Institution's committees.

He stated that 153 members of the Institution were engaged in war work, 88 abroad, and 65 at home. He reported several deaths, including Noel Chavasse, (twin son of the Bishop of Liverpool) who he had taught, and who had worked with him at the boys reformatory. Chavasse had been awarded the VC then MC and Posthumous Bar. Macalister's own son was badly wounded in the Somme Offensive in 1916. However, he was very pleased to give his congratulations to his great friend and colleague, Robert Jones, who had been knighted.

In 1887 Macalister had joined the second Volunteer battalion the Kings (Liverpool) Regiment as acting surgeon. He instituted training in ambulance and first aid, the classes not being confined to the regiment, and these became the best recruiting agency for the regiment. He went to annual camps, but resigned 1896. He was Surgeon Captain 1900 to a Liverpool Scottish Regiment where his job was to examine recruits. During the First World War he inspected buildings for use as military hospitals and examined men for enlistment.³³ As a result of his work for the Liverpool Scottish Regiment and voluntary lecturer to the troops in Western command he was appointed Deputy Lieutenant of the County Palatine of Lancaster in 1921.³⁴ Macalister's military work also gave him expertise in a medical area of increasing interest: venereal diseases. He was influential in getting a committee established in Liverpool, to which he gave the inaugural address, and he was also elected to the national British Social Hygiene Council in 1914. He gave lectures on the dangers of venereal disease and also assisted with the development of educational pamphlets which were distributed to troops.

³¹ CJ Macalister, 'Child welfare and its organization', *Supplement to Liverpool Medico-Chirurgical Journal*, 1916.

³² CJ Macalister, 'Professional Anecdotes, being the Inaugural address delivered at the opening of the 79th session of the Liverpool medical Institution', *Transactions of the Liverpool Medical Institution*, 1918.

³³ Macalister, *Retrospect* Ch 13.

³⁴ Letter from the Lord Lieutenant to Major Macalister. 12.4.1921.

Orthopaedic Paediatrics in Liverpool

At the end of the eighteenth century, Henry Park (1743-1831), a Liverpool surgeon, introduced an operation for excising tuberculous joints in children, rather than primary limb amputation. In his early days in practice, Macalister, as he travelled round the town, would see people mutilated by the Park-style joint excision.³⁵ Both Macalister and Jones knew and revered the work of Hugh Owen Thomas (HOT 1834 – 1891), another Liverpool surgeon, who did not excise joints, but was more conservative, treating them in splints, and keeping the children at rest in outside beds chained to the railings of the houses. Thomas had an arduous working regime. He started work at 6 a.m. in a drag and pair of horses, and he would arrive at houses so early that often the milk jug would be put out of the door when he knocked. At 9 a.m. he held a surgery at his home, then more visits. On Sundays he held a large free clinic. After Thomas died in 1891, his nephew Robert Jones continued to make orthopaedics a special branch of surgery.

Jones and Macalister both thought that there was a need for a new approach to illness in children. Between 1895 and 1900 they had long talks about it, but according to Macalister they met with some opposition. At the end of the nineteenth century, treatment of children with surgical tuberculosis was far from satisfactory. Often they would be prematurely discharged from hospitals which desperately needed the beds for other cases.³⁶ Macalister and Jones agreed that 'Fresh air and sunshine are our greatest therapeutic allies, they stimulate metabolism and therefore repair'. They were also concerned about what they called 'the tired mother', and the diet of these children. They believed that 'few children are so incurable that they cannot become well in suitable circumstances', so they wanted to found a hospital for them. Their belief was backed by the observation that some children in the Home for Incurables showed some improvement, given sufficient medical attention and time.

A seminal meeting was held at Macalister's home on 24 June 1898, which included Miss Sedgwick, Matron at the Home for Incurables. She interested Miss Lily Gaskell, whose father offered £100 and Mr Septimus Brocklehurst offered the same amount. A further meeting was held at the Deaf and Dumb School, with William Carter in the chair, and addresses were given by Jones and Macalister. Jones referred to an inspirational institution: the Institut Caillot at Berk Plage, near Le Touquet. A provisional committee was appointed, which was very fully reported in the newspapers. A lot of people offered money, but there was still no definite scheme. Following a further meeting at the Town Hall on 9 March 1899, the committee accepted the offer of temporary beds at West Kirby, in a children's convalescent home which was

³⁵ Macalister, *Retrospect*, Ch 7.

³⁶ *Ibid* p.8.

building an extension, so they were able to rent twenty two beds at £25 per bed per year.³⁷ This first phase was opened (with a full complement of patients) by Sir Edward Russell on 4 November 1899. All patients were under the joint charge of Jones and Macalister. Initially, there was to be a policy for free admission and treatment, but this was reversed at a meeting on 31 July 1899, when Gibson proposed that there should be a charge on parents for their children's admission, with the initial fee fixed at 3/6 per week. This was to reflect the principle of maintenance of parental responsibility, and because of the long periods required for treatment.³⁸ At a meeting at Macalister's House on 24 June 1898, the following points had been agreed upon:

- 1) There are few children so incurable that they cannot become well if placed in proper circumstances for treatment.
- 2) A Hospital for such children, suffering from chronic diseases, should be recognized as being a place to which they may be sent, in order to have the best chance of recovery.
- 3) Such an institution should be conducted on the lines of a hospital. It should be situated in the country, and placed under scientific and sanitary auspices. A resident doctor or a local one acting on the spot, should be appointed to look after the cases, but the main responsibility should rest with a physician and surgeon visiting, say, once a week.
- 4) Such a hospital should have an operating theatre, so that the children might at once get the benefit of the fresh air, after being operated upon – if such a course became necessary.
- 5) Experience has proved that if operations are performed, or medical treatment adopted for such cases in the country, the chances of recovery are greatly enhanced.
- 6) Such a hospital should not be regarded as a convalescent institution or confused with such an institution.³⁹

The first annual report for 1899 was published in 1900, and was written after only four months. It listed all twenty four patients, their names, diagnoses, and progress. The youngest was Elsie aged three. She had congenital dislocation of the hip, with a prospect of recovery. The oldest was John aged twelve, with hip disease, but his general health was poor.

This arrangement at West Kirby was only successful up to a point; they still needed their own buildings. In 1899 Mr Andrew Gibson became involved with the committee, and became chairman of the building group. He was the son of a well-known ship owner, who had sold this business and retired early.

³⁷ *Liverpool Daily Post* 9.3.1899.

³⁸ Macalister, *History of Heswall*, pp.24-5.

³⁹ *Ibid.*, pp.11-12.

He was the greatest benefactor both in money (£45,000 during his life and £30,000 after his death), and also in time and expertise. He found a suitable site at Heswell in 1900, paid £2,500 for nine acres, and then supervised the building of the hospital.

Now that money was needed for construction, fundraising started in earnest. There was a two-day Garden fete July 1900 at the home of Holbrook Gaskell, Woolton Wood. There was a band, lots of stalls, embroidery, flowers, a display of Japanese art belonging to Colonel Montgomery, and of paintings belonging to Holbrook Gaskell.⁴⁰ Gaskell pledged £1,000 at this event. An anonymous donor (actually Andrew Gibson) pledged £5,000 if matched by three others and conditional on raising £10,000 for running costs. Holbrook Gaskell, Arthur Jones and Alfred Jones (who had started the Liverpool School for Tropical Medicine) all gave generously. The Second annual report for the year 1900 was published in 1901. It reported 'results gratifying'. At this time there were nineteen patients in the hospital, ten of whom had been treated for fourteen months, one for twelve months and the rest for less. The 1903 report showed that two patients had died, one from tuberculous meningitis, and one from tuberculous peritonitis.

By 1903 the plans for the new building were complete but funds were inadequate, so Macalister continued campaigning through the local newspapers.⁴¹ By 1904 there was sufficient money, and building started in 1905, and the foundation stone laid by Andrew Gibson in 1906.⁴² The plans were for 200 beds. The corridor was to be 279' long 11' wide with a separate administration block. By 1907 the central block was near completion. This contained playrooms, dining room, operating theatre, and kitchens, but another £15,000 was needed.

In May 1907 a potential disaster struck. Lord Mayor Treloar of London instituted a national appeal, for money for a children's hospital at Alton in Hampshire. He wrongly stated that no similar hospital currently existed, in ignorance of West Kirby children's' hospital which had already been in existence for eight years. Macalister wrote to the local papers telling them that the Heswall project needed money too.⁴³ He was supported by the Liverpool newspapers and Dr Edward Hope, Liverpool's MOH. Colonel Montgomery, the Chairman of the Heswall appeal, wrote to Lord Mayor Treloar, who replied, saying that he was still assured that no such hospital existed, even though he had been sent the reports and the history of Heswall. Montgomery replied again, and on 13 June Lord Mayor Treloar received three pages from Dr William Carter, Macalister and Jones putting him right about his claim. At last on 14 June Treloar replied, sending his most sincere congratulations, but no money.

⁴⁰ *Garston and Woolton Reporter* 14.7.1900.

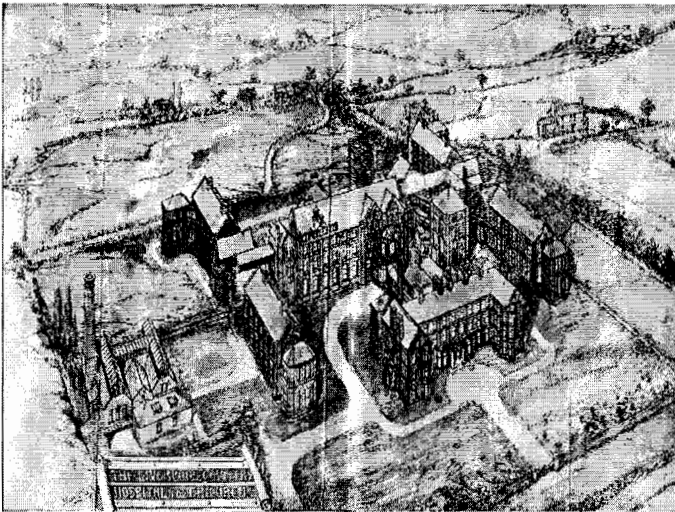
⁴¹ *Liverpool Daily Post* Letter from CJM 26.2.1903.

⁴² *Liverpool Daily Post and Mercury* 23.4.1906.

⁴³ *Liverpool Post and Mercury* 2.6.1907.

Further letters from Macalister to the *Liverpool Daily Post* and *Mercury* brought in the full amount for the hospital at Heswall, so indirectly, Treloar had done them a good turn.

Next, Macalister wanted the title 'Royal' for the hospital, and the first record of this is a letter from William Gladstone, on 6 October 1905, saying his request would have his careful consideration. A similar letter was sent from the Home Office to the Bishop of Liverpool, requesting more information. Eventually on 9 December 1908 the Home Office informed the Bishop of Liverpool that it was contrary to practice for the Secretary of State to recommend to His Majesty to allow the royal title to be given to institutions not yet opened. They were advised to reapply when the hospital had been open for a year. Macalister left it three weeks, but was again refused.



Building was completed at the end of 1908, and the hospital had 'home made electricity and a laundry with every modern convenience'. Two of the outside wards had open walls. The children were transferred from West Kirby in February 1909. At the end of 1909, Macalister, with the help of Mr Seeley MP again applied for the title 'Royal', which was granted in January 1910. As funds were still needed, there was a subscription dinner on 23 February 1911. The guests included Sir Thomas Barlow, President of the Royal College of Physicians, and Sir Donald Macalister, President of the General Medical Council. The net proceeds of the dinner were £1,068 plus two cots. In 1912 systematic education of the children began, and in 1913 an ultra violet light department was installed. During the First World War Lady Herdman paid for wounded soldiers to be admitted to Heswall, at no inconvenience to the

children, and the hospital also did the x-rays for four military hospitals in the area. TP McMurray took over the children's orthopaedic care in 1916, as Jones was too busy with the war, but Jones still was able to obtain beds for his patients when he wanted them, and Macalister had 35 beds until he retired.

Meanwhile, in 1916, negotiations began with Liverpool Children's Hospital which needed a country branch, and it seemed sensible to combine it with Heswall. At the amalgamation meeting held in March 1917 Macalister delivered a long paper on child welfare. He was unable to attend the subsequent meeting, and he learned from the minutes that he was not going to be allowed to practice there longer than five years. Judging from Macalister's private papers this was an acrimonious period, and his relations with the patron Andrew Gibson were also strained. The Honorary Secretary for the Heswall Childrens' Hospital, Mr Armstrong, wrote a mollifying letter to Macalister.

I gather for you that Heswall means something more than a place where sick children are cured. It means a school whereafter generations shall be cured by the knowledge there acquired, where observation and research, selection and segregation of cases under scientific directions shall yield fruit for the benefit of mankind. Grasping this ideal I saw at once your reason in trying to secure a continuance of these methods under any future regime, and your fear, to put it bluntly, that at some future time those in charge of the Liverpool infirmary might submerge the Heswall beds with a crowd of miscellaneous long term cases sent there mainly because there was no time or space to deal with them in Liverpool.⁴⁴

However, amalgamation took place in 1920, and by 1938 Heswall had 240 beds. It was also proving to be a useful research centre. In May 1917 Macalister had lobbied Sir George Newman, the Chief Medical Officer, for a grant to study treatment and investigation of rheumatic fever, which was the main cause of heart disease at Heswall.⁴⁵ ⁴⁶ In 1926 there was another application for a grant for rheumatism research. At that time, there was no clear differentiation between rheumatic fever and rheumatoid diseases.

Macalister retired from the Royal Southern Hospital in 1925 and from his post at Heswall in 1927. He remained as an honorary consulting physician at both institutions, active until 1936, when he was 76. He moved to Bourton on the Water, in the Cotswolds, where he did a great deal of writing. Of the changes in his lifetime, he later wrote:

⁴⁴ Handwritten letter from Mr Armstrong to C J Macalister, 25.7.1917.

⁴⁵ Correspondence with Sir George Newman, May to October 1917.

⁴⁶ Macalister, *Retrospect*, Ch 16.

There was the period of change from septic surgery to antisepsis and thence to asepsis which led to a translation of numerous diseases from the physician to the surgeon and later came the time when scientific medicine began to eclipse empiricism and is today actually preventing the necessity for surgical interference in numerous cases. Preventive medicine has made vast strides during the fifty or more years, which have covered my own experiences. Incurable diseases such as hydrophobia, of which I saw two cases in Edinburgh and others resulting from organismal infections are now amenable to treatment; life is longer and in many respects happier owing to evolutions which have taken place in this relatively short period.⁴⁷

He died on 25 October 1943.⁴⁸

⁴⁷ *Ibid.*, Ch 4.

⁴⁸ Obituary in *British Medical Journal*, 1943 (2), p.624.