



1962 AND ALL THAT

John Chippendale, retired general practitioner



Dr Chippendale concludes his anecdotal look back at the Lancaster and district medical scene of 1962, the year he arrived in Lancaster. It was the year of the Cuban missile crisis, Pope John XXIII was Time magazine's person of the year, Sean Connery debuted as James Bond and Mike Sarne asked Wendy Richards to 'Come Outside'. 1962. That was the year that was.

In this article, Dr Chippendale describes the work of the Morecambe and Heysham general practitioners and concludes the hospital section focussing on the psychiatrists, and the Moor Hospital.

GENERAL PRACTICES

Hest Bank, Morecambe and Heysham

At Hest Bank, *Dr Brock* was single handed, with his surgery in his house at the corner of Hatlex Lane. Morecambe, with its population of over 40,000 people, was well doctored but unlike Lancaster, where the emphasis was on group partnership, the Morecambe emphasis was on being single handed or there being, perhaps, two doctors together.^(1,2,3) The exception was the Kensington Road practice with *Drs Gould, Bibby, Robertson* and, I think, *Abernethy* in partnership. This practice was nicely placed, being adjacent to the Queen Victoria Hospital (QVH), where Dr Gould was casualty officer and, although the hospital was not a true cottage hospital, the general practitioners (GPs) kept close contact with their patients when admitted. The GP maternity unit was located at QVH. As my practice had many patients in the Torrisholme and Bare areas, we often had patients booked into this unit. A memory, not of 1962 but of the 1960s, is of Mr Grayburn, the consultant obstetrician, trusting me to get on and do a low forceps delivery; the only one I did in general practice.

To return to the location of the GPs, the brothers *Dr Schofield* lived at Bare and I think had surgeries there and at Heysham. I came to know Dr Douglas Schofield well when he started doing DHSS boarding work. Dr Jim Schofield was a magistrate.

In the central promenade area was *Dr Wood*, who had just taken over from Dr Gladys Wilson. Dr Wood was an instant senior partner when a year or so later he brought Drs Ellis and Beet into practice with him. It was 1987 before I reached this elevated status in my practice!

Continuing along the Morecambe front we had the surgeries of *Dr Hogarth* and *Dr Enid Goodall* and then the partnership of *Drs Hodge* and *Fleming*. Dr Fleming was a low handicap left-handed golfer who arranged tournaments for left-handers at Morecambe Golf Club, and was captain of the club. *Dr Tideswell* was in practice at Cross Cop. His son is now a dentist in Morecambe.

Away from the front were *Dr Smith* and *Dr Thompson* at Lancaster Road, *Drs McKinney* and *Jean Ward* at West End Road and *Dr Brown* at Regent Road. George Thompson was always very formally dressed and attended British Medical Association (BMA) meetings in black jacket, pinstriped trousers and wing collar. Dr Hugh McKinney took over from his father in the August.

Moving on south towards Heysham, *Dr Laurie Flather* and *Dr Milner* were on Heysham Road. Dr Flather lived here with his brother, Mr Wilf Flather, the eye surgeon. Dr Milner was President of the Lancaster Medical Book Club in 1962 and I remember his annual dinner which was, I think, at the Elms Hotel in Bare. It was, of course, the first I attended. I remember a 1960s British Medical Association dinner dance which was held in Morecambe at the then splendid Midland Hotel.

To complete this round up there was *Dr Elizabeth Nicholson* at Heysham. She was a clinical assistant in obstetrics at QVH and a local magistrate.

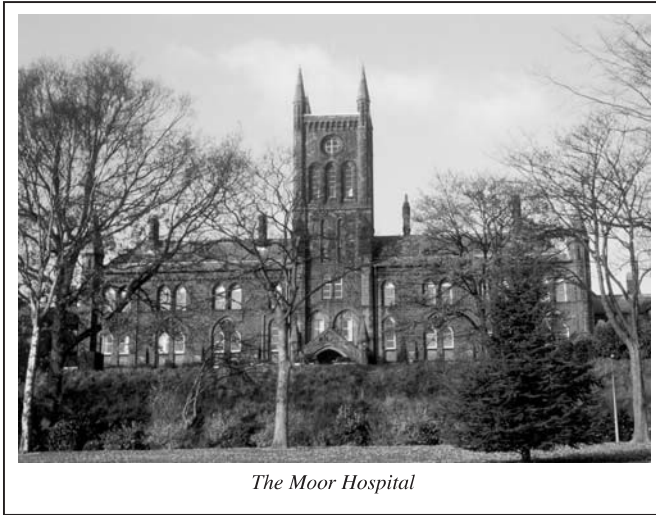
Observations

It is interesting to record that when there was the shift to GP health centres, the Morecambe area doctors moved into the centres at QVH and Heysham, but also formed into groups at York Bridge, Westgate and West End. The Doctor's Charter of 1966 introduced payments for being in partnership. None of the Lancaster groups took up the health centre offer – at least initially. My practice was offered and declined premises on Peter's Road near the Cathedral. The local medical officer of health was Dr Farquhar. He and his successor, Dr Dyer, were involved in looking at the provision of the health centres. They both felt that the general practices could be rationalised so there was less criss-crossing in all directions when doing home visits.⁽⁴⁾ Dr Farquhar died at his home either at his retirement or just into his retirement in the mid 1960s.

THE HOSPITALS

The Psychiatrists

Dr Smith was the medical superintendent at the Moor Hospital, with *Dr Gibb* as his deputy. They were NHS consultants with clinics in the Royal Lancaster Infirmary (RLI) as well as at Ridge Lea Hospital. *Drs Theobald* and *Martin* did not have the Moor Hospital connection and, I think, took more outlying clinics than Drs Smith and Gibb. Dr Martin was consultant to the EEG department at the Garnett Clinic. Our practice had much contact with Dr Martin as partner Dr Anderson was his clinical assistant. Mr Tutton, a visiting neurosurgeon from Preston, had a few neurosurgical beds in the Garnett clinic and Dr Anderson would sometimes give basal sedation when Mr Tutton did open brain surgery.⁽⁵⁾



The Moor Hospital

On a lighter note, Dr Theobald, the captain, and Drs Smith and Gibb ran the Moor Hospital doctors' cricket team, playing in the hospital intramural evening league. I was quickly recruited, as was my partner, Dr Lomax, later on. We played matches against the nurses, porters, gardeners etc. Each team could only raise perhaps seven players, which meant fielding for the opposite side. Interesting moral decisions arose when you were fielding and 'your' batsman put up a catch!

Psychiatrists *Drs Cunningham* and *Gregory* were the superintendents at the Royal Albert Hospital, where there were over 1000 patients in 1962.⁽⁶⁾

The Moor Hospital/Garnett Clinic

The Garnett Clinic was a 1958 development, on three levels, in the most southerly block of the 1883 'north side' Annexe Building of the Moor Hospital. The surgical and neurosurgical beds, operating theatre, X-ray and EEG departments were on the ground floor. The eye department and the orthopaedic beds were on the second floor; and on the third floor were two general medical wards. The Manchester Blood Transfusion Unit's sub-centre was a short distance away in the hospital grounds. *Dr Gunson* was in charge of the Blood Transfusion Unit. He later became chief of the Manchester centre and later still was chief executive of the National Blood Transfusion Service. *Dr Wilson's* geriatric unit, which included day care, was also in buildings on the north side. *Dr Hood*, of our practice, was a psychogeriatric clinical assistant working in the old (1816) wards of the Moor Hospital and on the north side.

CONCLUSION

As assistant to the Dalton Square practice, I worked in all the fields we were involved in, including orthopaedic operations, EEG, psychogeriatrics and at the Prison. I should have mentioned that Dr Anderson was the civilian medical practitioner at the army training camp on Halton Road. This post meant an occasional sick parade when troops were exercising there. Going on holiday, Dr Anderson casually mentioned there would be 600 Ghurkhas at the camp while he was away! I prepared for a busy Monday morning but the orderly rang to say no one was sick. In the whole fortnight there was only one call, to a soldier with a high fever, whom I was lucky enough to diagnose as having malaria. Tribute to the Ghurkhas – they don't go sick easily.

In writing of 1962, I do not do so to suggest things were better then. In my practice, I think we did too much and covered too wide an area. I cannot write with authority about the hospital side, but I do think that the consultants were hugely stretched in 1962 and increases in establishments could not come too soon

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In completing the hospital part, I again thank Dr A Kilpatrick, who read, corrected and expanded my original script and I thank those listed in the references who jogged my memory. Apologies if I have missed anyone out.

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