Development of Health and Medicine in the Victorian Era

Bethany Dieringer
English II
April 30, 2014
The Victorian era was a time of great development around the world and social growth in many places including Europe. Along with this global development came many issues and discoveries surrounding the medical field. As cities began to develop in the 19th century and the population density of Europe increased, diseases such as Smallpox became prevalent, and medical practitioners experimented with new remedies and cures to help combat the health issues found in society, the workplace, and among women and children.

In the 19th century there were multiple severe illnesses that were common amongst the population of Europe. One major disease that spread rapidly during the Victorian era was Cholera. Cholera is a disease of the intestinal tract that leads to extreme dysentery and rapid decrease in bodily fluids. These symptoms were highly dangerous especially in the 19th century, because they led to dehydration. Without abundant clean water, it was difficult for the sick to be re-hydrated. This disease swept across the world in the 19th century, destroying societies and killing millions of people. Typhoid fever was also a present epidemic in the 19th century that caused many deaths in Europe and abroad. Smallpox at one point killed more than 400,000 Europeans in a year and was responsible for one-third of human blindness in the Victorian era.\(^1\) Scarlet Fever and Measles, two diseases that are still found in present-day society, spread rapidly and had high mortality rates in the 19th century. In Great Britain during the Victorian era, Measles “never killed fewer than 7,000 people a year.”\(^2\) Lastly, in the Victorian era, approximately one-fifth of the London population died from the effects of Bubonic Plague outbreaks, and historians estimate that about 45,000 of the victims were under the age of fifteen.\(^3\)

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Highly infectious diseases such as Cholera were quickly spread for multiple reasons, and were unfortunately highly untreatable in the 19th century due to lack of adequate medical technology. One major cause of the outbreak of diseases was poor housing situations. As the Industrial Revolution boomed in Europe, the population density in cities grew rapidly, therefore increasing the number of bodies spreading diseases in cities. Victorians recognized the correlation between poor housing and disease outbreak, and also developed the Miasmic Theory, the idea that bad smells from the streets or sewers led to disease. Some scientists believed that Cholera was related to the Miasmic Theory; however, in 1854 John Snow discovered that drinking contaminated water was correlated with falling ill. This idea was not accepted for over 30 years due to lack of information on microbiology. Since the idea of microbiology was not yet widespread, handwashing was not a common practice amongst European society, which allowed Typhoid to be easily passed on. Scarlet Fever was highly contagious, and was often spread in areas with an infected milk supply. When “a child in the dairyman’s family at Castlehead, near Paisley, caught scarlet fever,” the mother of the child refused to send her child to the hospital, but asserted that she would keep him confined to a solitary environment as to not spread the disease. The fever eventually spread throughout the dairyman’s house, and all his children were infected. The mother and father continued to milk their cows and deliver their dairy products around the town, and the fever eventually “broke out in five ‘villas’ whose occupants bought milk from the dairy.” Although the parents claimed to never have touched their children while they were ill, they still spread the disease, which shows that germs and bacteria can be transferred as airborne pathogens.

After recognizing the causes and effects of serious diseases in the Victorian era, multiple scientists and doctors began to develop new solutions and remedies

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5 McAlpine, “Diseases England.”
7 Ibid
for these often fatal situations. In 1868, surgeons joined together to form an association, which led to developments of regulations and rules in the medical practice. Solutions to the growing health problems in Victorian England began with sanitation and slum clearance, which improved the health of the general population. Inadequate sewage systems caused tainting of water wells; however, the 1848 "Health Towns Act" cleaned up water supply systems and drainage problems in both Wales and England. Alexander Fleming discovered and applied penicillin in antibiotics, which helped to eliminate scarlet fever. Another scientist, Pierre Louis, was acclaimed for his work in microscopical research and revolutionized the method in which information on a patient is recorded. He asked his patients open ended questions that did not lead to a specific answer, which could potentially taint the diagnosis of a patient. He also kept very careful records of his patients’ histories in appearance, pulse, and temperature. Before the advent of the printing press, information of a medical nature or otherwise could not be easily published. Therefore, medical practices in the home were usually centered around wives tales and methods passed down through generations by word of mouth. After the rise of the printing press, women as caretakers had access to medical information that was previously only available to doctors and surgeons. Both herbal and chemical remedies, such as dried dill in honey for a cough, or iron filings in beer for paleness in skin, were deemed acceptable to use for sick children. Scarlet fever was often treated with an herbal remedy of compounded maidenhair, elder-blossoms, and goose-grass that was imbibed by the ill, and said to improve their health. Adult remedies on the other hand, were often related to the Ancient Greek belief that

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9 Lowry, "An Introduction to Housing and Health," 1261.
11 Payne, “Children and Youth in History.”
13 Payne, “Children and Youth in History.”
14 Payne, “Children and Youth in History.”
“the body was composed of four substances, or humors, created from the digestion of food. The four humors were choler or yellow bile, phlegm or mucus, black bile, and blood, and all had properties of being hot/cold and dry/wet.”\textsuperscript{16} If all of these humors were balanced, than an individual was said to be healthy. However, if said humors were not naturally released by tears, sweat, urine, or other bodily functions, doctors would practice cupping or force vomiting to try to regain a balance of the humors in an individual.\textsuperscript{17} As the development of microbiological research continued, vaccinations became the greatest weapon for doctors against smallpox. The upper classes of people readily accepted the use of vaccinations; however, the lower classes were unconcerned about disease and saw the use of vaccinations as an irrelevant use of monetary resources.\textsuperscript{18} Although the people’s health in the 19th century was generally negative and unstable, it led to a boom in medical discoveries and the development of new remedies and practices.

During the Victorian era, the number of working people increased significantly as the Industrial Revolution boomed; therefore, multiple health problems evolved in the workplace. Many of these health problems were caused by overpopulation and uncleanliness in cities. Often, factories and business managers had little concern for their employees’ health, and work environments were not always suitable for good health, which led to the decline in physique and health of factory workers. Many Europeans employed foreign apprentices, who also contributed to the cause of many outbreaks in Europe. Not only did foreign apprentices bring new cultures with them to Europe, but they also brought new germs and diseases that were often spread rapidly among urban populations.

The unhealthy conditions of factories had distinct and serious effects on certain fields in the workforce. Between the years of 1858 and 1871, Sir John Simon recognized that potters had been deteriorating in physique, each successive generation becoming more dwarfed and less robust. It was also recognized that

\textsuperscript{16} Payne, “Children and Youth in History.”
\textsuperscript{17} Ibid
\textsuperscript{18} Smith, \textit{The People’s Health 1830-1910}, 158-170.
pulmonary disease had become a rising issue amongst miners, metal workers, and jewelers.\textsuperscript{19} The presence of apprentices from other countries also posed a health threat in the workplace for many people. By migrating from other countries, foreign apprentices brought with them unfamiliar diseases which contributed to societal issues such as the Plague outbreak from Africa and Marseilles in the early 18th century. Foreign apprentices were also partially responsible for the Gibraltar Sickness (yellow fever), which wiped out one-third of the Gibraltar population.\textsuperscript{20}

After recognizing that factory environments were unsafe and unhealthy for people to work in, an array of regulatory laws and procedures were cultivated by health professionals. In the later portion of the Victorian era, state intervention became necessary regarding industrial diseases. As a result of increasing state awareness of the issue, the Medical Inspectorate of Factories was created. Another regulatory law, called the Health and Morals of Apprentices Act of 1802, suggested that every workspace used in a mill or factory be well and sufficiently washed with Quicklime and water at least twice a year, and that in every factory there should be a certain number of windows and openings to allow for fresh air. In many factories, monthly observations by certifying surgeons were required in order to maintain the health of employees. The Employment Medical Advisory service gave advice to employers and others who were concerned about medical matters related to the workplace. The service also studied the health hazards in factories and offered examinations and surveys of workers in connection with their fields of employment. The Nuisance Removal Act of 1855 was created to penalize factory owners who did not utilize the best safety precautions on restricting health issues, which helped to regulate the facilities and conditions in which people worked. It was also deemed unlawful by the Factory and Workshop Act of 1878 for children to work in certain industries such as the silvering of mirrors, which led to mercurial poisoning.\textsuperscript{21}

After the drastic causes and effects on industrial health were recognized, medical

\textsuperscript{19} Lee, “Emergence of Occupational Medicine in Victorian Times,” 121-123.
\textsuperscript{20} Lee, “Emergence of Occupational Medicine in Victorian Times,” 121-123.
\textsuperscript{21} Ibid
practitioners and employers cultivated solutions through the use of regulatory laws and procedural suggestions.

Not only was the health of those in the workforce affected in the 19th century, but the health care of women and children also started to develop in the Victorian era. In the mid-19th century, antenatal care was not as well developed as it is today. For upper and middle class women who received a higher rate of care, pregnancy was confirmed in the fourth month, one-third of the way into the second trimester. As higher class individuals, these women had access to servants who allowed for increased rest, and large houses that provided indoor dwellings with cool rooms. In the later 1800’s, doctors started ordering physical exercise and strengthening foods for pregnant women. At that time, pregnant women were to eat the following: beef, mutton, and veal, generally plainly cooked without spices or coarse vegetables; fish without sauces, jellies, chicken broth, and beef broth. Pregnant women were forbidden from excessively drinking wine, spirits, teas, and coffee, and were not allowed to eat chocolate, vegetables, or fruit. In the Victorian era, the average mother had 7-8 live births in 15 years, along with multiple miscarriages and failed pregnancies.

Adults were not the only ones who suffered from health issues due to working. In fact, children in the workforce experienced dangerous issues in the 19th century as well. Factory overlookers, factory owners, and parents can all be held partially accountable for the suffering of children in factories. Children, who were usually over the age of eight, were often seriously injured in work related accidents. Many of these children were simply overtaxed in their factory jobs, which led to maiming or death in serious cases. In 1833, medical practitioners began deciding who was and who was not of the age of nine, which then determined if children were allowed to work. Before 1836 and the Registration of Births Act, there was no way for factory owners to factually determine how old an individual was, so child labor ages could

22 Smith, The People’s Health 1830-1910, 15.
23 Payne, “Children and Youth in History.”
24 Ibid
25 Smith, The People’s Health 1830-1910, 171.
not be definitely determined. It was not until after 1846 that children with new birth
certificates from the Registration of Births Act began entering the workforce.\textsuperscript{26}

Children in Victorian England were very susceptible to disease and hardship. They were specifically at great risk from bubonic plague, smallpox, measles, and influenza. In fact, 30% of England’s children under the age of 15 died from unidentifiable fevers, bloody flux, scarlatina, whooping cough, influenza, smallpox, or pneumonia.\textsuperscript{27} Without the development of modern medicine, antibiotics, surgery with anesthesia, knowledge of bacteria, or hand washing, remedies for children generally consisted of a nourishing diet and warmth. Children were primarily cared for in the home by their mothers, sisters, or other women. They were hardly ever treated by trained physicians because not only were they expensive, but they also utilized very extreme remedies such as bloodletting, rectal purging, and forced vomiting. In the presence of a broken limb or bladder stone, parents usually called upon a surgeon, trained by apprenticeship, to operate on the child. The branch of medicine now called pediatrics had yet to emerge; therefore, children were simply treated as small adults in the medical world. Later, scientists would discover inoculation and vaccination for smallpox, both of which were beneficial to the general health of children.\textsuperscript{28} Overall women and children did have access to certain types of medical attention, and developments in the fields of pediatrics and antenatal care continued to flourish as the Victorian era continued.

The general health of society in the 19th century was poor and disease ridden; however, eventually the importance of clean water to one’s health was discovered, and scientists began developing vaccinations and medical remedies to certain diseases. During the Industrial Revolution, the workplace was not the safest environment to dwell in due to lack of concern for the employee’s health, but with the instalment of regulatory laws, factory environments became slightly more suitable for humans to work in. As infant mortality rates slowly started dropping and

\textsuperscript{26} Lee, “Emergence of Occupational Medicine in Victorian Times,” 120.
\textsuperscript{27} Payne, “Children and Youth in History.”
\textsuperscript{28} Ibid
children became statistically more likely to live longer, the development of pediatric and obstetrical care became pertinent to the well being of society, and factory owners and businessmen were forced to take into consideration the age and ability of children in the workforce. Overall, though many health and wellness issues developed due to overpopulation and lack of medical knowledge in the 19th century, scientists and medical practitioners experimented and developed new remedies and regulatory laws to help combat the destructive health effects of the Industrial Revolution and social reform in the late Victorian era.
Bibliography


