Dundee’s Hospitals Through the Ages

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ABSTRACT

The provision of healthcare has changed massively over the last hundred years. In order to provide this ever-changing healthcare hospitals have had to change too. In this article, we are delighted to have Dr Graham Lowe (Honorary Medical Curator at the Tayside Medical History Museum) discussing the history of Dundee’s hospitals through the ages.

Key Words: NHS Tayside; Dundee; medical history

Pre-Reformation

In medieval times, most hospitals in Scotland were church-driven and designed to provide care for the poor, aged and chronically disabled rather than for patients with acute illness. Treatment as such was geared towards rest, diet, hygiene and a pleasant environment, and residents were given a great deal of spiritual support from religious services and daily rituals. There were probably four medieval hospitals in Dundee. The Hospitals of St John the Baptist and St Anthony were first mentioned in 1443, although St John’s may have existed earlier. The only other house of the Hospital Brethren of St Anthony in Scotland was at Leith, built in 1430 for the poor and sufferers from St Anthony’s disease (erysipelas); the Dundee hospital may have been run on a similar basis. The leper house was first referred to in 1498, but may have been in existence earlier as similar hospitals had appeared in Scotland by the 12th century when leprosy was at its height. These three hospitals all suffered at the hands of the English in 1548, and none were repaired. The fourth dates from a 1390s Charter granting to the Trinitarian Red Friars monastery an adjacent building for use as a hospital, which following the Reformation came into the hands of the Town Council. Situated at the foot of South Tay Street where Dundee Contemporary Arts is today, it was latterly described as ‘a large and splendid hospital for old men’, or put more quaintly ‘decayit burgesses’, but by the eighteenth century the practice of taking in sick and decayed persons for the remainder of their lives had become outmoded.

Voluntary Hospital Movement

After the Reformation, practically no new hospitals were founded in Scotland until the voluntary hospital movement gained momentum in the 18th century. Around the same time dispensaries were also developed for treating the sick poor who did not require admission to a hospital. Dundee Royal Infirmary’s Foundation Stone contained amongst other items a list of Dispensary Subscribers dating back to 1735, but we have no further information about Dundee’s Dispensary until 1782 when the Parish Minister Rev Robert Small and surgeon Robert Stewart opened a fresh subscription to meet the growing need for medical attention in the region. The town was divided into four districts, each served by a surgeon who visited the sick poor in their own homes to dispense free advice and prescriptions.

The first formal meeting of the Infirmary subscribers in 1793 chose a committee of country lairds, doctors, members of the Town Council and the Nine Trades together with merchants and manufacturers, invested ‘with full power to uplift the money already subscribed, to
endeavour to procure more subscriptions, to wait on the Committee of the Dispensary and to purchase a proper place for building a House’. Here then were the medical profession, churches and community at large working together in harmony to provide the skill, financial support and management necessary to ensure success of the Voluntary Hospital.

The Voluntary Hospital Movement arose from an intricate combination of factors, different parts of the country having their own particular driving force of necessity, socio-economic pressure or charitable intent. Inter-civic rivalry and dominance of towns over their hinterlands would have been strong factors. Middle class money and organisational skills would confirm their benevolent stewardship of the ‘common good’ and reinforce ‘respectable values’ among the working classes, who had their own self-help ethos stimulated by dangerous work conditions of the time.

Fund-raising came in many forms from wealthy benefactors, church collections and all manner of social events. Particular support came from the working classes, whose increasingly important contributions did not perhaps receive the credit in the Dundee Infirmary Annual Reports that they merited. Neither were the working class invited onto the prestigious Infirmary Board of Management, unlike Glasgow where there was greater competition for charitable funds.

The first Dundee Infirmary, later Royal Infirmary, served the needs of the community from 1798 until 1855 (Fig 1).

![Fig 1: The First Dundee Infirmary (drawn in 1798)'](image)

In the early days, patients bearing with them a subscriber’s letter of recommendation were admitted at the discretion of the Attending Surgeon on a Thursday morning, with exception being made for those who had come from a distance, usually for an accident requiring immediate aid or the patient was labouring under a contagious fever. In time, these waves of epidemic fevers escalated to such an extent that 85% of admissions were suffering from infectious diseases in 1847/48. In the 1820s, the Town Council had acquired an isolated tenement at the shore for use as a special hospital, and when Asiatic cholera arrived in the
city in April 1832 this building was well-used (see Fig 2) as there were more than 800 cases and a high mortality.

Fig 2: Cholera Hospital

However, when the epidemic had passed, the building was sold and subdivided into houses, although for many years continued to be known as the Cholera Hospital. It was later demolished to make way for Whitehall Crescent, and subsequent outbreaks of cholera had to be coped with at the Royal Infirmary.

Nineteenth Century

By the mid-nineteenth century, the combination of rapid rise in population, inadequate bed space in the face of epidemics and the hospital being hemmed in by an enlarging city made clear that expansion of the Infirmary was required. The old building at Victoria Road (long since demolished) was declared obsolete, and a new Royal Infirmary (see Fig 3) was opened at the top of Constitution Road that served the city until 1998, exactly 200 years after the original Infirmary had opened.

1867 saw the first attempt to separate infectious from non-infectious patients when the Local Authority erected temporary hospitals on the outskirts of Lochee for reception of patients with smallpox and typhus. These structures, together with another temporary hospital at Clepington Road for patients with scarlet fever, were demolished when Kings Cross Hospital was opened as Dundee’s fever hospital in 1889 (see Fig 4). A smallpox hospital was built a mile to the north 4 years later, and last used in 1927. It was demolished in 1979 following global eradication of this once formidable enemy.
The Eastern Hospital opened in 1893 as a ‘Sick Hospital for the Dundee Poor’. It was situated adjacent to the East Poorhouse that was built to house 800 paupers, with a separate building for 100 sick and 100 lunatics. The Eastern went on to become Maryfield Hospital, underwent considerable development and upgrading, and gradually divested its ‘Poor Law’ image. A new geriatric unit was opened at the hospital by Princess Margaret in 1957. Maryfield was also the site of a pioneering general hospital psychiatric unit, under the medical direction of Sir Ivor Batchelor. Maternity, Child Health and Geriatrics were all based at Maryfield before it closed in 1976 with services moved to Ninewells.

The Royal Victoria Hospital beside Balgay hill opened for ‘incurables’ in 1897 to commemorate the sovereign’s Diamond Jubilee (see Fig 5). Ashludie (Monifieth) and Sidlaw
(Auchterhouse) hospitals were built as sanatoria that later served other functions (see Fig 6 + 7). The Limb Fitting centre in Broughty Ferry, a converted former infant hospital, was opened by the legendary amputee air ace Group Captain D.R.S. Bader. Just along the road at Monifieth was the tiny Gerard Cottage Hospital, established from the will of a local long-serving parish minister.

Fig 5: Royal Victoria Hospital – Balgay

Fig 6: Ashludie Hospital (closed in the summer of 2012)
Charities aimed to help women were poorly represented in Dundee, a curious omission in ‘the woman’s town’. The absence of a lying-in hospital was a particularly striking feature, lagging a full hundred years behind other Scottish cities. Perhaps pregnancy and childbirth were just too sensitive issues for the pious middle classes. Small wonder Dundee had no Magdalene asylum or Lock hospital either. Prostitution and its consequences were not an acknowledged problem in a town trying hard to clean up its image.

The lunatic asylum was initially established as part of the Infirmary, the 1819 Royal Charter separating the hospitals’ properties and funds within a corporate body. The first asylum just off Albert Street later moved to West Green, a later 1875 Charter separating it entirely from the Royal Infirmary. Private patients were accommodated in Gowrie House. Under the NHS, Gowrie House and West Green were amalgamated in 1958 and became known as Royal Dundee Liff Hospital 5 years later. A new psychiatric unit was opened in 2001 in the grounds of Ninewells Hospital to allow for the closure of the main building at Liff.

Baldovan Institute on the north bank of the Dighty underwent several name changes before becoming Strathmartine Hospital in 1959. Set up by Sir John and Lady Ogilvy, this was Scotland’s first residential hospital for learning disabled children, and only the second in Britain. When financial problems beset the Institute in the 1920s, a consortium of local county authorities took over the hospital, although not Dundee Corporation. It was not until the advent of the National Health Service that Dundee children could once again attend Baldovan.

Ninewells Hospital & Medical School
Before the close of World War II, arrangements were made by the Secretary of State for Scotland for a survey of hospitals in Scotland. The Eastern Region report focused on the inadequacy of accommodation at Dundee Royal Infirmary (DRI) and Maryfield, and that neither site was adequate to provide a modern hospital with associated medical school. A further Report commissioned by the University of St Andrews, which was planning a considerable expansion of the Medical School, disagreed with the Scottish Hospitals Survey, and a firm of London architects formulated a scheme to develop DRI, extend Maryfield and construct a new Medical School in Dudhope Park. The University Court deferred a decision pending the imminent formation of the new Regional Hospital Board. The newly constituted
Board lost no time in addressing this issue and concluded that in the interests of the region as a whole, the new hospital and medical school should be built on a single and accessible site on the periphery of Dundee. The University Court concurred and approval in principle came from the Secretary of State for Scotland in 1949.

The Board had hoped to concentrate all acute hospital services on the one site, but a centrally imposed bed limitation necessitated a complete reappraisal of content and function of the new hospital. From this came the concept of Ninewells supplemented by a modernised and expanded Maryfield, each hospital providing patient care, student teaching and clinical research, with DRI closing on the opening of Ninewells. This plan was however later reversed in 1963, giving DRI a temporary stay of execution.

The widely held theory of hospital planning of the time was of a multi-storey block of wards on top of a low spreading diagnostic and treatment building. At Ninewells, an alternative concept of a predominantly low group of buildings to facilitate ease of movement, face-to-face contact and future expansion was put forward by the architects. The slope of the site was used to facilitate segregation of internal traffic, each level having its distinct point of access on the north side. Thus the wards were located on the quiet south and west aspects to minimise noise and maximise light. The concourse at the heart of the hospital allowed direct access to both clinics and medical school. Ample space was provided for future expansion.

A lot of thought went into the design process. A model was made, and £50,000 spent on mock-ups to test certain key areas of planning and design. These proved to be immensely valuable to both client and architect. The ward unit was designed to give patients some degree of seclusion, in particular to minimise ward traffic for the most ill patients in bay 1. The high ceilings and through ventilation of Nightingale wards was replaced by positive extract ventilation from the central core of each ward. The traditional twin-theatre arrangement was rejected for reasons of cross-infection, each theatre being provided with its own ancillary accommodation with separate ‘clean’ and ‘dirty’ access and viewing gallery. In the event, students made little use of the windows, which were later boarded up.

25 years after approval was agreed in principle, Ninewells eventually opened in 1974 with justifiable pride (see Fig 8). Indeed, the Project was such a major scheme it attracted visits from all over the world, and the feature that always impressed visitors was the ‘embedding’ of the medical school in the hospital. A visit from the International Hospital Federation following viewing of other big Scottish centres led to Ninewells being described at the time as the ‘Jewel in the Scottish Crown’.

In the last couple of years, the University of Dundee Medical School has begun a major development of its existing facilities (see Fig 9). This is being completed in three phases with the aims of delivering new small group seminar rooms and a critical extension to the Clinical Skills teaching area, building a major new extension to create a modern library and learning facility alongside complete refurbishment of the three lecture theatres. It is hoped that this redevelopment will return Ninewells Hospital and Medical School back as the ‘Jewel of the Scottish Crown’.
Fig 8: Ninewells Hospital - aerial image 1974

Figure 9: Artistic Impression of the newly developed Dundee medical school