

“Globulizing” the Hospital Ward

**Homœopathic Hospitals and Medical Legitimacy in
19th Century London and Madrid**

Felix Stefan von Reiszitz

Winner of the Hans Walz Prize

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Introduction

This thesis comprises a comparative study between two charitable medical institutions in London and Madrid: the London Homœopathic Hospital (LHH), founded by Frederick Hervey Foster Quin (1799–1878) in 1849 and the Instituto Homeopático y Hospital de San José (IHHSJ), founded by José Nuñez Pernía (1805–1879) in 1878.¹ As their names suggest, both were founded as specifically homœopathic hospitals, combining two important strands of nineteenth-century medical history: on the one hand, new and radical ‘alternative’ medical practices, not limited to homœopathy but including such diverse strands as hydropathy or mesmerism among others; on the other hand, the birth of the clinic, as a site for teaching and research but also as a seat of power, saw the importance of the hospital as an institution rise to the point of becoming the epicentre of the ‘orthodox’ medical world’s shift towards an increasingly ‘scientific’ medicine.² The crossover between two seemingly diametrically opposed worlds, an ‘orthodox’ institution and an ‘alternative’ practice, that these homœopathic hospitals represent is a phenomenon hitherto afforded only scant attention, particularly outside the German and American context, even though such institutions were established throughout the nineteenth century across Europe, the United States, the British Colonies and beyond. This study provides a novel approach to this topic, both with regards to location and scope, fitting neatly into the historiographical fields of both Spanish and English hospital history as well as into the wider history of ‘complementary’ or ‘alternative’ medicine. In particular, this thesis scrutinizes both institutions’ foundational histories, taking into account their respective founders’ ‘paths’ to homœopathy to understand how the practice took root in both locations.

¹ The homœopathic hospital in Munich (Germany), a version of which survives to this day as the Krankenhaus für Naturheilweisen was originally chosen as a third institution, the *tertium comparationis* advocated for comparative history of medicine by Lutz Sauerteig among others (“Vergleich: Ein Königsweg auch für die Medizingeschichte? Methodologische Fragen Vergleichenden Forschens” in N. Paul and T. Schlich (eds.), *Medizingeschichte. Aufgaben, Probleme, Perspektiven* (Frankfurt: Campus, 1998), 266–291.) Unfortunately an initial exploration of the scarce relevant sources available in institutional, municipal and regional archives proved this to be an endeavor beyond the scope of this dissertation.

² Michel Foucault, *Naissance de la Clinique: une archéologie du regard médical*, 8^{ème} éd. (Paris: Presses Universitaires de France, 2009); Mark Weatherall, “Making Medicine Scientific: Empiricism, Rationality, and Quackery in mid-Victorian Britain,” *Social History of Medicine* 9 (1996): 175–194.

Through contemporary sources, both hospitals' activities – clinical and 'ancillary' – are examined to reveal similarities and differences to other contemporary medical institutions in their respective settings. Through a survey of the medical work achieved within the wards but also through scrutinizing their educational and socio-professional networking activities, it is possible to ascertain what demonstrative, institutionalizing and, critically, legitimizing effects the institutions were expected to facilitate. Above all else, the struggle for homœopathy's legitimacy in the eyes of both patients and the medical profession is an omnipresent central concept in the histories of both hospitals, as well as in those of their founders, medical officers and supporters. The selection of these two hospitals for a comparative study follows a survey of European homœopathic institutions, most of which have long ceased to exist. Both institutions were established in or around the second half of the nineteenth century, in very socio-politically disparate countries, by men deemed leaders of their country's homœopathic field, both laying claim to direct links to the discipline's founder Samuel Hahnemann (1755–1843). Additionally, both institutions were intended to provide their respective countries with a central hospital of sufficient size to be comparable with the internationally famous homœopathic institutions of Paris or Vienna. As both London's and Madrid's hospitals achieved – at least temporarily – considerable international recognition among homœopaths, they can both be seen as comparably important 'national ambassadors' of homœopathy in Britain and Spain. In particular, the very different situations in which 'orthodox' medicine found itself in both countries at the time of homœopathy's arrival allows such a comparison to examine whether common trends in these institutions' development happened independently of their background or whether – and how – this brought an influence to bear upon them. Crucially, sufficient archival and other contemporary sources could be identified for both institutions to make a comparative analysis possible, albeit with the caveat of some asymmetry in certain areas, detailed further below.

It is necessary to clarify some of the wider concepts and nomenclature used in this study, following which some of the existing relevant literature will be surveyed before finally outlining the structure of the following chapters in which the thesis's questions will be addressed.

i.1 Nomenclature and 'Background' Concepts of Homœopathic History

In considering any topic involving two opposing medical factions, one has to be mindful of Jütte's warning about implied value judgements presented by

dichotomies that stem from historical – and to an extent current – medico-political discourse.³ Casual or careless use of words like ‘orthodox’ and ‘heterodox’, ‘conventional and un-conventional’ or ‘regular’ and ‘irregular’ when comparing the two aforementioned institutions can present potential interpretative semantic pitfalls. At the same time, the contributions contained in the tomes edited by Cooter, Bynum and Porter show us that, even in their own time, such definitions – including even seemingly unambiguous epithets like ‘quack’ – and boundaries of what constituted ‘heterodoxy’ or even the ‘fringe’ of ‘orthodoxy’ were inherently flexible and could be applied differently depending on point of view or period.⁴ The terms chosen for this study as purely descriptive terms by which to identify two opposing groups of medical practitioners were deliberately selected from the examined institutions’ main players’ viewpoint, regarding what most of them – subgroups emerging within the homœopathic camp are not explicitly considered here as they are only of limited relevance to this study – understood as a clear separation between those following the homœopathic system (“homœopaths”) and those who represented the bulk of their opponents in the established medical sphere, for whom Hahnemann coined the term “allopaths” – later also referring to their practice as the “inefficient method” (“die Allopathische oder Schlendrians-Methode”).⁵ In order to understand the principal differences between these two factions, it is necessary to briefly examine the terms and what they referred to. ‘Homœopathy’ (“Homöopathie” in its original German) is a composite of the Greek words ὅμοιος (similar) and πάθος (suffering) and describes a system of medicine whose leitmotiv is the so-called ‘simile-principle’, *similia similibus curentur* or “let like be cured with like.” Simply put, in Hahnemann’s “rational art of healing”⁶ –

³ Robert Jütte, “Alternative Medicine and Medico-Historical Semantics,” in *Historical Aspects of Unconventional Medicine: Approaches, Concepts, Case Studies* ed. Jütte, Motzi Eklöf and Marie C. Nelson (Sheffield: EAHMH Publications, 2001), 11–26.

⁴ W. F. Bynum and Roy Porter, eds., *Medical Fringe & Medical Orthodoxy, 1750–1850* (London: Croom Helm, 1987) and Roger Cooter, “Alternative Medicine, Alternative Cosmology,” in *Studies in the History of Alternative Medicine*, ed. Roger Cooter (New York: St. Martin’s Press, 1988), 64.

⁵ Jütte, *Geschichte der alternativen Medizin: Von der Volksmedizin zu den unkonventionellen Therapien von heute* (Munich: C. H. Beck, 1996), 25; On Samuel Hahnemann see also: Richard Haehl, *Samuel Hahnemann: His Life and Work...*, ed. J. H. Clarke and F. J. Wheeler, transl. Marie L. Wheeler and W. H. R. Grundy, 2 vols (London: Homœopathic Publishing Co., 1922) and Jütte, *Samuel Hahnemann, Begründer der Homöopathie* (Munich: DTV, 2005).

⁶ Samuel Hahnemann, introduction to *Organon der rationellen Heilkunde* (Dresden: Arnoldische Buchhandlung, 1810), v.

the supposed irrationality in all other forms of healing being implicit in his choice of words – every group of symptoms constituting a particular disease had a corresponding specific remedy that would produce the same symptoms in a healthy person (the so-called “provings”) yet cure them in their morbid state, its effect supposedly increased or “potentized” proportionally to its dilution. If homœopathy was therefore the medicine of similars, allopathy, from the Greek *αλλος* (other) was the opposite, provoking symptoms in the patient that bore no relation to the actual disease.⁷

Since the intricacies of the homœopathic system beyond its opposition to allopathy play only a minor role in this study, this brief description must suffice, though I refer the reader to the existing body of work by Rapou, Tischner, Dinges and Jütte,⁸ among others, for further details and more general histories of homœopathy’s beginnings. Beyond such ‘general’ works, encompassing not just German aspects but introductory studies on homœopathy around the world, the Robert Bosch foundation’s Institute for the History of Medicine’s (IGM) on-going series of publications must also be considered as they represent the most wide-ranging studies of the practice’s many facets, covering such diverse themes as patient journals; individual patients’ treatment; examinations of homœopathic practitioners’ and patients’ networks; surveys of homœopathic clinical and academic efforts in Germany but also some more general histories of homœopathy’s introduction to Switzerland, Central and Eastern Europe and the Indian sub-continent.⁹ Some of these relate to aspects tangential to the subject of this thesis and will therefore be referred to in more detail below.

⁷ Jütte, *Geschichte der Alternativen Medizin*, 25.

⁸ Auguste Rapou, *Histoire de la doctrine médicale homœopathique*, 2 vols. (Paris: J.-B. Baillière, 1847); Rudolf Tischner, *Geschichte der Homöopathie* (Leipzig: Schwabe, 1939); Martin Dinges, ed., *Weltgeschichte der Homöopathie: Länder, Schulen, Heilkundige* (Munich: C. H. Beck, 1996) and Jütte, *Geschichte der Alternativen Medizin*.

⁹ Institut für Geschichte der Medizin der Robert Bosch Stiftung, ed., *Quellen und Studien zur Homöopathiegeschichte*, 16 vols. (Heidelberg; K. F. Haug; Essen: KVC, 1995–2012); Samuel Hahnemann, *die Krankenjournalen*, 10 vols. (Heidelberg: K. F. Haug, 1991–2007) and *Kleine Schriften zur Homöopathiegeschichte*, 3 vols (Stuttgart: IGM, 2006–2008).

i.2 Historiography of British and Spanish Homœopathy

Homœopathy in Britain has mostly been studied in the context of controversy and conflict, with work focusing on the efforts of medical associations and colleges, supported by a campaigning medical press, to subdue, ostracize and even – unsuccessfully – outlaw homœopathy and its practitioners. It is likely that the growing issue of allopathic professionalization and specialization significantly aggravated allopathic reactions to the new practice. Nicholls, in his extensive study of homœopathy's relations with the established medical profession, suggests that the practice, increasingly fashionable among wealthy nineteenth-century patients, might have been perceived – at least initially – by many outside the London-based 'elite' as simply another medical specialty in which fees could be earned.¹⁰ Consequentially, those who opposed the practice saw themselves in need of protection from such competition in an already overcrowded medical marketplace.¹¹ Nicholls argues that the ensuing aggressive ostracizing of homœopaths served only to position them as 'underdogs', garnering them further public support, all the while allopathy covertly assimilated homœopathy's "remedies and lessons regarding dosage and drug proving," narrowing the gap between the two practices yet never relenting in the persecution of homœopaths.¹² The author further argues that, by homœopathy in turn espousing allopathic developments, it made itself increasingly indistinct from allopathy and as such lost much of its initial appeal for many followers, as well as its relevance as a practice, distancing itself ever more from the principles established by Hahnemann. The problem with such a strict dialectic as Nicholls proposes is its requirement of two monolithic opponents; something the author himself admits was not the case.

Going beyond the acrimonious relations between homœopathy and the allopathic medical profession in Britain, Morrell's history of British homœopathy provides a general overview of the practice and its principal followers between 1830 and 1995.¹³ This is also summarized in Nicholls and Morrell's chapter on

¹⁰ Phillip A. Nicholls, *Homœopathy and the Medical Profession* (London: Croom Helm, 1988), 51.

¹¹ *Ibid.*, 103

¹² *Ibid.*, 104–105.

¹³ Peter Morrell, "British Homœopathy during two Centuries" (MPhil thesis, Staffordshire University, 1999).

Britain in Dinges' *Weltgeschichte*, which includes the lay facet of British homœopathy.¹⁴ Some further articles, focusing on more specific themes such as patients, prescribing methods and individual practitioners will be examined below.

As late as 1994 Albarracín remarked on the lack of unbiased, chronological and systematic approaches to the history of Spanish homœopathy.¹⁵ The existing body of work consisted mainly of contributions to the history of pharmacy, with biographical accounts, examinations of the homœopaths' struggle for dispensing rights and studies of the period between 1849 and 1855, considered the years of "maximum ardour" in the anti-homœopathic fight.¹⁶ While not providing anything like a comprehensive history of Spanish homœopathy, these small-scale studies help 'flesh out' the initial period of the Sociedad Hahnemanniana Matritense (SHM) and hint at the discord that existed at times between Madrid's homœopaths, something further examined in this thesis relating to the two main factions' struggle for supremacy and eventual control of the homœopathic hospital. They also offer some useful biographical details of some of the men involved in the eventual development of both SHM and IHHSJ.

Alfonso provided the first general overview of Spanish homœopathy in her contribution to Dinges's *Weltgeschichte*, though this necessarily presents only a very concise summary, taking in one hundred years of history across the Iberian Peninsula in a relatively short article.¹⁷ Nevertheless she highlights two aspects that must be borne in mind in this study, namely the lack of a lay element in Spanish homœopathy – though as this thesis will show, lay involvement outside actual practice was both extensive and essential – and the fact that its opposing allopathic medical profession remained in deep disarray for much of the nineteenth century.¹⁸

¹⁴ Nicholls and Morrell, "Laienpraktiker und häretische Mediziner: Großbritannien," in Dinges, *Weltgeschichte*, 185–213.

¹⁵ Agustín Albarracín Teulon, "La homeopatía en España," in *Historia y Medicina en España: Homenaje al Profesor Luis S. Granjel*, coord. J. Riera Palmero (Valladolid: Junta de Castilla y León, 1994), 215–235.

¹⁶ María Teresa Alfonso Galán, "Cesario Martín Somolinos: Farmacéutico homeópata," *Bol. SEHF* 39 (1988): 167–175; María Luisa de Andrés Turrión and María José Fernández Alcalá, "El auge de la homeopatía en España (1845–1857)," *Bol. SEHF* 37 (1986): 117–134; Andrés Turrión, "Homeopatía: Años de máximo ardor en la lucha anti-homeopática, 1849–1855," *Bol. SEHF* 38 (1987): 307–318.

¹⁷ Alfonso Galán, "Homöopathie in zwei Hauptstädten: Spanien," in Dinges, *Weltgeschichte*, 225–239.

¹⁸ *Ibid.*, 225.