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A COMPARATIVE STUDY IN PUBLIC HEALTH:

THE HISTORY AND CAUSES OF THE DECLINE OF LEPROSY
IN ENGLAND AND IN INDIA

- by -

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P R E F A T O R Y N O T E

This Thesis has been compiled from many sources. It is wholly the work of the writer. For its compilation some time has been spent at Oxford in gathering together the materials relative to the History of the disease in the British Islands. The Indian portion of the work has been gleaned from many Anglo-Indians and some natives and from a large mass of material issued by the India Office.

The object of the Thesis is to compare what is known of Leprosy in the British Islands with that which is known of the disease in the Indian Empire. A very large quantity of literature has been carefully studied of which there is no record made.

The writer feels he should here express his gratitude and obligation to Mr. Jonathan Hutchinson, F.R.S., Hon. Sec. of Executive of the National Leprosy Committee, for his invariable kindness, and for advice as to the best sources of information: also to Mr. M. E. Sadler, M.A., of Christ Church, Oxford, and the Librarian of the Bodleian Library for assistance in obtaining much valuable literature.

It has not been intended to gather together every fragment of information previously compiled and repeat it, but to add to that, if possible, information not before compiled.

A list of Dates relative to the History of Leprosy in the Britain and several maps accompany the Thesis (The dates have been printed for convenience).

It existed in Egypt in the reign of Husapti at least three thousand years before Christ. It was common in India and China four hundred years before Christ and was known in Spain, Italy and England about sixty or more years before Christ. These are only approximate dates, it probably occurred much earlier. 6000 A.D. witnessed an increase in leprosy in the British Islands (3) and about the same date "mundabat leprosos" is recorded of the Glasgow saint, Kentigern. Sir James Simpson (1) states that the Blythe Leper Hospital at Nottingham was established in 625 A.D. other authorities think it was 638 and the majority believe the first English leper House did not exist until the eleventh century. It is however almost certain that Leper Houses existed in Ireland as early as 869 and Leprosy was certainly prevalent at the beginning of the 10th century. Hoel Dha (a Welsh King and famous law-giver who died about 950) enacted several laws relative to Leprosy. (4) "That a married female was entitled to separation and the restitution of her goods and property provided her husband was affected with Leprosy." (Celtic General Repository, vol.111.p.199. It was about this time that a Law was instituted in England causing Leprosy to be a valid cause for Divorce.

(3) Parton. loc. cit. Nichols, Leicestershire. Lanigan, Eccles. Hist. of Ireland. vol.111.83-88. (1) Archaeological Essays, vol.11. (4) Erasmus Wilson. Lancet: 1856: Simpson, loc. cit.

It was in the eleventh century that the first "Hospitals" and pest houses were built. But we must not necessarily assume that the existence and building of leper houses and like institutions implied a new or even an increasing disease. The Leper House period - roughly from the 11 - 14 centuries inclusive - may have been due to the awakening of humanitarian ideas or to some rough medical or ecclesiastical intention of thereby preventing the spread of the disease. In all probability leprosy was at its zenith certainly not later than the twelfth century and yet many leper houses date after that: whether that be the exact period of its zenith it seems quite clear that leprosy was a pre-Norman disease in the British Islands.

Some have said the returning Crusaders "brought" leprosy back to England. This now is surely a discarded view. The first return of any Crusaders cannot have been before 1098 for they only left in 1095. Yet there were at least three famous leper houses before that date, (Canterbury, Northampton, Chatham) and Hugh, Bp. of London and other note-worthy people of the time had died of Leprosy.

From the establishment of the Leper House at Canterbury before 1089 up till the end of the 15th century British history has many like establishments to record. (11) The

(1) Mr. Macnamara suggests 112: the accompanying lists of leper Houses, dates &c, will show how inadequately small such a number is.

Ireland from the fifth century till the eighteenth.

The disease was present in Scotland from the time of Stephen till the commencement of the seventeenth century and in Ireland from the fifth century till the eighteenth.

With these preliminary remarks I will take some of the chief leper Houses and outline something of their history.

The first of which we have much record is Canterbury. Somner (1) states that leprosy became " a national malady and accordingly in all parts provision was made for the receipt and relief of the infected persons." There are" he says " three Houses at Canterbury, St. James', St. Laurence's and Herbal." Other historians give St. James' St. Nicholas' and St. Laurence's and others only two. There can be no doubt that Lanfranc, then Archbishop of Canterbury founded a hospital here before 1089 (2) and it is recorded that previously to this Becket performed miracles giving health to the leprous. (3) Northampton (4) and Chatham (5) were established very shortly thereafter. Both in the eleventh century and probably both in the reign of William II. The latter was founded in 1078, on the south side of what is now the High Street, by the celebrated Bp. Gundulph for the reception of lepers of both

(1) Somner's Antiquities of Canterbury. p.80. (2) Simpson. loc. cit. - Somner, Antiquities of Canterbury. (3) Matthew Paris. (4) Brigges, History of Northampton. (5) Tanner, Notitia Monastica. 1744. p.211.

sexes. The endowments were small and though they were afterwards augmented by different benefactors the proceeds were seldom sufficient to support the inmates who were hence accustomed to be supplied with provisions from the priory at Rochester. These lepers seem to have lived a corporate life and were possessed of a common seal. A chapel was built for them in the reign of Henry I. (1100 - 1135) St. Bartholomew's was increased by Henry III. Edward I. and Edward III. and underwent various royal additions up till Edward IV.

Remegius, Bp. of London was the first builder of the House at Lincoln. It was primarily intended for ten lepers who were to be outcasts and slaves, (villani, servi) of Lincoln - in the space of 200 years from its foundation the character of its inmates had changed, for Edward III's commissioners found nine poor brethren or sisters in it, only one of whom was a leper. In 1457 it was by order of Henry VI. annexed to the large and famous Leper House at Burton, in order as it was stated in the charter "for the better maintenance of three of the King's servants that should happen to be lepers, either at Lincoln or in the Hospital of St. Giles near London." (1) Provision was also made for the possibility of other lepers

(1) Monasticon Anglicanum. Sir William Dugdale. p.627.

requiring its shelter. One hundred and fifty years after the establishment of the Holy Innocents, Lincoln had another leper house. (1280) (1) "The place where the leper house stood" says Cookson (2) "is now called "the Malandry Closes" and stands on the Lincoln and Sleaford turnpike just outside little Bargate, the ancient south entrance to the city. "Malandry" is a corruption of "maladerie"."

York and London had Hospitals almost simultaneously with the first foundation at Lincoln.

There was near the city of York a lepers' hospital during the time of Maud the Empress (daug. of Henry I. m. Emperor of Germany and disputed Stephen's right to the throne in England.) Maud was the benefactress and it was probably the same as that afterwards known as St Nicholas outside Walmgate Bar, which was of royal foundation. It consisted of officers and several male and female lepers and at the Dissolution (1536 - 40) had rents and lands of the yearly value of nearly £30. (3) It is not improbable that a number of hospitals existed at York. Although Tanner cites one for lepers we have authority for believing that previously to 1365 there were 4 Hospitals especially set apart for Lepers, (4) and from a

(1) Tanner, Notitia Monastica. Ed. by Nasmuth. 1787.
(2) Lincoln Topographical Soc. 1841. (3) Tanner, loc. cit. - Dugdale. loc. cit. (4) Testamenta Ebor. vol.1.75; vol.11. 26: 55; & 93.

number of York wills in various years up till 1454, four Leper Hospitals are mentioned. (1)

Of the Leper Houses in London, St. Giles' (2) situated in Fields to the N.W. was the largest and best known. (3) This arose from the munificence of Matilda (daug. of Malcolm, K. of Scotland) Queen to Henry I. Matilda's charter ordained 40 lepers, and 3 officers, to which were added afterwards when revenues increased various other officers. The original endowment was £3. Some think this amount very small (Maitland) but it must be remembered that ~~the~~ inmates were allowed to beg and accept alms. As at the markets of Chester, Shrewsbury and elsewhere they did this systematically using the advertising medium of a clap-dish(4.5) In some localities this begging reached such a degree that Proctors were appointed (6) to go round to the churches and other assemblies of the public and plead and collect alms on behalf of the

(1) Robertson, Appendix, Arch. Essays, vol.11. (2) St. Giles, the patron of this and other Hospitals in England and abroad was an Athenian (nobility) by birth, and flourished at the end of the VII century. He lived in great piety in a Hermitage at the mouth of the Rhone and afterwards in a forest near Nimes. He was fed by a tame hind whom various hunters tried to kill. He obtained the favour of the French King and his Abbey became a centre of the Benedictine Monks. A considerable town was built about it called "St. Giles" which played a considerable part in the wars of the Albigenses. (3) Parton, History of St. Giles. (4.5) Ducange v. Scandelloe. Izache, Exeter. p.11. (6) Phillips, History of Shrewsbury.

lepers. This as might naturally be supposed was after a time grossly abused, all sorts of idlers claiming to be Proctors for the collection of alms. Funds for the St. Giles Hospital were augmented by royal grants of land in Middlesex and Holborn&&c in addition to Henry II's liberality which included 60/- from his private purse on every St. Michael's Feast Day. There was also 30/5 "perpetual alms" to buy them lights. This generous charter seems to have no date affixed. But William de Mandeville, Earl of Essex was one of the witnesses (therefore between 1166 - 1189) . There was a still further increase of wealth in the time of Henry III. From Pope Alexander IV. the Hospital received a confirmation of its estates and priveleges and it was also taken under the special protection of the Roman See. It thus disabled John's interdict. The probable date of this fully confirmatory bull was during Henry III's reign. Edward I. granted the Hospital 2 charters, the first in 1290 for the recovery of debts and certain rents which it seemed impossible to get without. Indeed it was about that time that owing to many dissensions and quarrellings the influence and position of the Hospital began to decline. It was so with many others in England. In his second charter Edward I. refers to these disorders and after more or less radical changes took the whole institution

under his special charge and appointed Geoffry de Birston, Master. Edward II. issued two charters, the one relative to the carrying on of the convalescent home (or "middle court" as it was called) the other on the subject of the persisting abuses. For the first time also the charter refers to the necessity of no one being admitted who was not a leper, (it appears that matters of diagnosis had become very slack) and that there should be no mixing of the healthy with the diseased. In the time of Edward III., by the King's command St. Giles was annexed to Burton Lazars (in 1354 it is said Edw. III. sold it for 40 marks annually) owing to the continued abuses and disorders. In 1347 owing to Edward III.'s Proclamation that all lepers do leave the city within 15 days, 14 lepers applied and enter St. Giles' Hospital. This was at the time of the great Plague, and it is possible that some of these 14 were not truly "lepers". When the Hospital was handed over to Burton Lazars the number of lepers therein was greatly reduced. It would seem that in 1392 Richard II. re-sold the benefaction to the Abbot of Tower Hill for 110 marks annually. Henry VIII. in 1539 dis-possessed St. Giles: first keeping it and its revenue to himself for six years and then bestowing it on one of his favourites, Lord Lisle, in 1545 together

with the authority and funds of Burton Lazars: Lord Lisle fitted it up as a private residence and leased out subordinate parts to tenants. The number of lepers in Hospital at its dissolution must have been very small compared with what had been in the past. Parton (1) thinks the decrease was caused "from the reduction of the income for their maintenance and from the decrease of the disorder itself, which about that period (1539) was in many places beginning to disappear".

It will be noticeable from the accompanying map that the leper houses - not necessarily the leprosy, but probably - were more frequent in some parts of England than others. The western counties were comparatively free in comparison with the eastern - and of the latter Norfolk with its capital Norwich affords a striking example of the numerous lazerettes. Norwich itself boasted of six different hospitals. There is evidence to prove that Norwich was not a very healthy city, for during the Plague of 1348 -9 nearly "60,000 people died in that city alone," (much more likely 5,000; the whole population of Norfolk in 1349 cannot have been more than 10,000). (2)

The following is the list recorded by Simpson (3) and Tanner. (4)

(1) Parton, Hist. of St. Giles. (2) Dugdale, Geographical Encyclopedia. (3) loc. cit. (4) Nostitia Monastica, 1787.

St. Mary Magdalene. -	founded before	1119.
St. Mary & St. Clement.	" " "	1370.
St. Giles.	" " "	1249.
Without St. Magdalene's gate.	" "	1370.
Without St. Bennet's gate.	"	"date unknown.
Without St. Stephen's gate.	" "	do.

The last of the pre-Stephen leper establishments was at Oxford. (1) About half a mile from Magdalene Bridge and a little to the North of the Road to Cowley there stand some of the remains of the ancient hospital of St. Bartholomew's (founded by Henry I.) for lepers. Henry established it soon after the erection of his palace at Beaumont. He intended it for 12 men and endowed it with £23. per annum from the fee-farm anciently payable to the crown from the city of Oxford. Several other contributions, lands, &c. were afterwards added, yet in the reign of Edward II. it was reduced to so great poverty that the number of "leprous brethren" was necessarily reduced to 6 in addition to whom were 2 "whole brethren". A new charter was obtained at this period. This institution like so many of the others was by no means free from in-

(1) Rot. Chart. Turr. Lond. vol. 1. 99.

ternal disputes and quarrellings, only in the present instance they were between the corporation and colleges, especially Oriel. At the second foundation of the Hospital in the reign of Edward II, the sum of ninepence per week was fixed for each of the inmates. (1)

In many instances the Leper Hospitals were situated at the gates of the city (2) - as in London, York, Norwich, &c. - and the lepers were not allowed entrance within the walls. Frequently one finds the remains of hospitals in the midst of the city or town in the present day, but in the middle ages they were on the outskirts of the towns and the enormous increase in size of the towns may make it appear that the hospitals were situated in the midst of them. Bury St. Edmunds was just such an example. About a century ago the 5 gates of the town were all pulled down to afford a more convenient passage for traffic - but in the 14th century there were remains of 5 different Hospitals, (St. Saviour, St. John, St. Peter, St. Stephen and St. Nicholas.) Of these St. Saviour's was the most celebrated in Bury and must have been a very extensive building for it is said that Parliament assembled there in 1446. (3) (Dr. Creighton says that St. Saviour's was not for lepers.) (4)

(1) Robert Gardner, Hist. of Oxford, 1852. (2) Ducange v. Scandelloe. (3) Thomas Dugdale, England & Wales. vol. 11.327. (4) Epidemics in Britain. Creighton.

At this period (Stephen's reign) it was found necessary to establish Leper Houses in Aylesbury, St. Albans, Bristol, Maiden-Bradley, Shrewsbury, Gloucester, Pilton, Warwick, Ilford, Colchester and a few years later the great Burton Lazar House to which in after years others were annexed.

Eudo Dapifer, in the reign of Henry I., founded St. Mary Magdalene's, eastward of St. Botolph's at Colchester. King Stephen augmented this endowment and Richard I. granted the lepers "liberty to hold a two day's fair." (1) We shall have occasion to notice that amongst the different methods for supplying necessary funds this quaint and curious plan of "fairs" was adopted.

At Ilford in Essex a Hospital was instituted in the reign of Henry II. or before. (Lysons) It was dedicated to the Virgin Mary and St. Thomas the Martyr and was founded by Adelicia. Re-patronage of the House was confirmed by at least two Kings, Richard II. and Henry IV. Amongst the old regulations there were two which read as follows:-

"That no married leper be admitted unless his wife
at the same time become a Nun."

"That the lepers go not out of the enclosure without leave." (2)

(1) Thomas Dugdale, England & Wales. vol. lll. 503. Sir William Dugdale, loc. cit. p. 631. (2) Sir W. Dugdale, loc. cit. 628.

The primary establishment was for "thirteene pore men beyng Lepers, two pryests and one clerke - thereof there is at this day but one pryest and 2 pore men:" such was the report in the Commission of Edward VI. By the same Royal Commission (1547) most of the leper houses in England were reported as empty, although many apparently existed in Scotland and Cornwall. Harehope in Peebleshire would appear to be the first leper house north of the Tweed. It was founded by David I. who endowed it with land before 1150.

Gloucester had one of the few westerly Leper Houses.

(1) It was situated in St. John's Parish and dedicated to St. Margaret. The exact date of its foundation is not known but Alford, Bp. of Worcester granted the lepers of it the privelege of burial in their own church-yard about the middle of the twelfth century. Near to this is the Hospital of St. Mary Magdalene (or King James' as it is otherwise called) which owed its foundation to the Priory of Lanthony and like St. Margaret's was originally intended for persons afflicted with leprosy. It was however in the reign of James I. diverted from its original object and made a charity for "19 poor persons."

(1) Bigland, Gloucestershire. Dugdale, England & Wales. vol.V.

Another of the chief Hospitals in the West was at Shrewsbury. (1) (2) (3) It stood without the town in the east suburb. It existed unquestionably in the reign of Henry II. (Owen and Blakeway speak of it having a Prior as early as 1136.) The expressions in Henry's charter seem to imply not a new foundation but a gift to one already existing. It was supported and confirmed by royalty up till the second year of Henry V. John in 1204 granted the Shrewsbury lepers the privilege of taking a handful of corn or flour from all sacks exposed in Shrewsbury market.

Maiden Bradley. (4) This like many others of its kind, was founded by the liberality of one great family, the Bisets (cupbearers to Henry II.) In the beginning of the 14th century one of the heiresses, being herself a leper, gave her share of the heritage to help establish an Hospital for leprous women at Maiden-Bradley in Wiltshire. This hospital was in all probability founded by Manser Biset on the family land in Wiltshire. In King John's wars Ralph d'Auxeville was imprisoned and threatened with death. But the leprous sisters of Bradley

(1) Blakeney, Hist. of Shrewsbury. (2) Phillips, Hist. of Shrewsbury. (3) Tanner, loc. cit. p.640. (4) Hoare's Wiltshire. Tanner, loc. cit. Burton's Bewdley. p.83. Burton's Kidderminster, p.15.

came to the rescue and provided a ransom. On account of this kindness d'Auxeville granted them lands as endowment for their hospital. (5 virgates = 150 acres) and these lands with all the men that worked on them were to be the support of the Hospital, and much of this property including Cumberton, oldington and the Mill of Mytton remained in the possession of Maiden-Bradley for upwards of 300 years. Lord Manser Briset conferred the church and living of Kidderminster upon the lepers of Bradley and Walter Cantilope Bp. of Worcester assigned to them certain tithes of his parish in 1241. At the suppression of the Monasteries and Hospitals (1536 - 40) by far the larger portion of their property went to the avaricious courtiers of Henry VIII. Maiden-Bradley passing into the hands of one of the most grasping of these plunderers, John Dudley, best known as the Duke of Northumberland. (Burton)

Sir William Dugdale (1) states that John, Earl of Moreton, afterwards King of England, gave a plot of land in the 12th century without the Lachford gate at Bristol on the road leading to Bath to build a Hospital for the lepers of the town (St. John's.) In 1437 the patronage of it was held by the Mayor of Bristol. There were 2

(1) Monastic. Anglican. Ep. 670. 1806. Sir W. Dugdale. loc. cit. p. 631. Tanner, loc. cit.

other hospitals for lepers at Bristol. An interesting legend ascribes the discovery of the virtues of the Bath Springs to King Bladud, "son of Lord Hudibras, King of Britain" about 2,000 years ago. In his youth he became infected with Leprosy: and at the petition of the courtiers, who feared the contagion, his father banished him from the palace. The Queen on his departure gave him a ring~~asaa~~ token by which he should make himself known to her if he ever recovered. The young prince when he reached Keynsham met with a swine-herd by whom he was retained as an assistant. In a short time he perceived that he had tainted the pigs with leprosy. The pigs, "impelled by sudden phrenzy" ran up the valley to the spot where the hot springs boiling up, mixed their waters with decayed weeds and formed a bog. On washing them with this water the leprosy was dispelled. He doing likewise became whole and returned to the palace with the ring. Hence, so it^{is} said, arose the value of the Bath springs. Probably legendary only.

Buckinghamshire had many records of the disease but not many hospitals, because there were so few places to establish them. But at Aylesbury there were 2. (1) They were both empty and destitute by 1360 - which seeing Leprosy was by no means extinct by that date, is significant of the common mismanagement of these places.

(1) Magna Britannica. Lysons. 1806. Sir W. Dugdale. loc. cit. p. 631. Tanner. loc. cit.

In the neighbouring county of Hertford, Geoffry de Gorham the Sixth Abbot, founded, in the time of Henry I., a Hospital at St. Albans. (1) He was a man of great energy apparently, and enlisted the interest of 2 Popes and 2 Kings. In 1344 Abbot Michael de Mentmore made special regulations for the government of the Hospital. It was intended for six lepers and officers. Henry II. gave it a charter confirming its position and rights " sciatis me concessisse et presenti carta confirmasse " firmaose leprosis sancti Juliani de Heord quiquid Gan- " fridas, Abbas Sancti Albani, consilio et communi as- " sensu totius conventus sui, et alii eis rationabiliter "concesserunt et dederunt."(2)

The following were some of the rules to be observed by all the lepers in the St. Julian Hospital: (3)

"That those who were infected were to humble themselves below all other men.

That they should wear a habit suitable to their infirmities viz. a tunic and upper tunic of russet cloth, a hood and black cloak, stockings and flat shoes with upper leathers about their ancles.

(1) Speed, Hist. of Great Britain. 1632. (2) Add.Hist. de S. Albano. Sir W. Dugdale. loc. cit. p.618. (3) Monastic. Anglican. 1718. p.157.

That those admitted be single persons, or if married to part by consent and vow chastity, and if afterwards found incontinent to be expelled. To go to church regularly and continue in brotherly love.

None to go beyond the bounds prescribed.

None to go into the bake-house or brew-house.

None to touch anything, because persons under such a distemper are not to handle what is for the common use of men."

Their diet was not very varied. Each leper had 7 loaves every week, five of white and two of brown or black bread. Each seventh month each man had 14 gallons of ale, and on Christmas Day each had 40 gallons of ale, on St. Martin's Day each had a pig from the common herd.

"For some years previous to 1349 (according to Mr. Trail) (1) only one two or three of the six beds could find leprous occupants."

The Mastership of Julian's is twice mentioned in the Abbey Chronicles as a valuable piece of preferment. In 1254 the lands of the hospital were so heavily taxed for the King and the Pope that the miselli according to Matthew Paris had barely the necessities of life. In 1350 the revenues were too large for its need, and new stat-

(1) Social Life in England. H.S.Trail, D.C.L. 1893. Simpson. loc. cit., the number of its inmates being

utes were made: the accommodation of its six beds was by no means in request, the number of inmates being never more than 3. the fate of the other leper houses of St. Alban's Abbey and that of St. Mary de Pratis founded by Abbot Warren about a century after St. Julian's for women is not less instructive. The date of foundation is unknown but in 1254 it had a church and a Hospital occupied by misellæ. A century later we hear of the house being shared between sisters and nuns. (1)

Hampshire had its fair share of leper institutions even though the population was at one time very scant indeed (so much of the district being covered with forest). The leper house on Magdalene Hill at Winchester was perhaps the most important in the locality. It possessed a handsome chapel, one of the first in England that survived till the XVIII. century when it was wholly demolished.

There were Hospitals for lepers also at Christ Church, Andover, Newport (I. of Wight) and Southampton. (see list)

St. Louis brought 12 of the Knights of St. Lazarus into France and entrusted them with the superintendence

(1) History of Epidemics in Britain. C. Creighton, M.D. 1891. p.91.

of the Leper Hospitals of his Kingdom. They acquired a footing in England in the time of Stephen, especially at Burton Lazars in Leicestershire - possibly for that very reason one of the foremost Leper Hospitals in Britain, (1) and to which Hospital all the others in the country were made subject. (2) As the Maiden Bradley Hospital was established by the interest of a great family so also was the Hospital at Burton, for it was founded by one of the Mowbrays "a gentleman (as Hals says) who was tainted with the disease:" (3) most of the revenue for its endowment seems to have been obtained by a general subscription throughout the country. Hals and Polwhele agree that it was at this period (Stephen and HenryII) that leprosy "generally spread itself over this kingdom." And it was therefore natural enough that the decree De Leprose Amovende should be then issued for the removal of

(1) Tanner. loc. cit. Hals. History of Cornwall. Part II. - 1750. pp.160-. Sir W. Dugdale. loc. cit. p.632. Nichols' Leicestershire. 1795. (2) Polwhele. Hist. of Cornwall. p.88. (3) Roger de Mowbray, Richard Orange, Mauser Biset, the son of the Earl of Leicester, Henry III, Henry IV, Baldwin IV, Robert the Bruce and the Duchess of Brittany were amongst celebrities who were said to be lepers.

lepers to the various hospitals. Leprosy disabled the subject of it from suing any action either real or personal as first that he was a leper and that by the writ de leproso amovendo was "propter contagionem morbi predicti" as the writ said, "et propter corporis deformitatem" to be removed from the society of men to some solitary place: and therefore as Bracton (1) said "talis placitare non protest; nec hereditatem petere". And herewith agreed John Breton (2) and also Fleta (3) saying:- competit etiam fit exceptis propter lepram manifestum ut si petens leprosus suerit et tam deformis quod a communione gentium merito debet separari talis enim morbus petentem repellit ab agendo, which was grounded upon God's law in Leviticus and Numbers. (Nichols)

It was decreed in the Council of Lateran 1179:- "That Whereas numbers of leprous people are gathered together in the community they shall be permitted to enjoy to themselves a church, a church-yard of their own; but they must take care that this be in no way injurious or prejudicial to the rights of the parish churches; yet shall not the leper or lazar houses be compelled to pay tithes for the increase of their own cattle." (Nichols)

The Hospital was destroyed by fire in the 14th century through the carelessness of a plumber. Its charter

(1) Bracton. Lib. V. fol.421. (2) Breton. vol. XXXIX.
(3) Fleta. Lib. VI. cap.39.

was confirmed many times, by John, Henry II., and Edward III.

Exeter, (1, 2) was one of the first founded in the south-west of England. The Hospital was dedicated to St. Mary Magdalene. Lysons thought it the most ancient institution of its kind in England and says it was in existence "long before 1163" when certain priveleges were granted to it by Bp. Bartholomew Iscanus. Oliver (3) says that "St. Mary Magdalene (lying beyond the south gate and adjoining the Parish of Holy Trinity) was, not improbably erected before the Crusades" - a conjecture sanctioned by expressions in the charter of Bp. Bartholomew with reference to their long possession, ancient custom, remote times. Probably (Madds) the establishment was increased in consequence of the Crusades when we know leprosy became very common in Europe . "In this diocese there was in the suburbs of most towns an Hospital for the reception of persons afflicted with this disorder." Bp. Bartholowew granted 5 merks yearly, one tenth of the rents at Morchard and the profits arising from the bark of Chudleigh wood, and with his approbation the cathedral chapter allowed them 14 loaves weekly for ever. Oliver

(1) Lysons, Britannica, vol. VI. (2) Izachus' Exeter. p.11. (3) Monasticon Diocesis Exoniensis. G.Oliver, D.D. 1846.

states that Bartholomew's charter ordered that none of the lepers should enter the city of Exeter - but he did arrange for a Procter to collect alms. In 1437 the Bishop of the Diocese pronounced excommunication on certain persons who had stolen documents from the leper house unless returned within 155 days . The number of lepers therein was confined to 13 and amongst other restrictions they were prevented from going into the city. (Lysons) This is denied by Hals (1) who affirms that they were not sufficiently provided for, since on every market day they went into the market (whether that was within or without the city wall, it is clear they must have more or less mingled with the public) with a clap-dish, and went from one to another to beg corn and all other victuals there brought to be sold. They claimed this liberty it seems from the aforesaid will of Bp. Iscanus who cranted them a toll of all corn and bread sold in the several markets and fairs of the city; also that they should collect the citizens' alms on certain days of the week. They accordingly came into the city with their clap-dishes demanding the said toll &c, but Hals states that they found little relief. This occasioned a permutation to

(1) Hals MSS. in Roche, Brice. p.548.

be made between the Mayor of the city and the Bishop, viz. that the Bishop should become Patron of St John's and the Mayor of St. Magdalene's Hospital. (Brice affirms (1) that there were several leper Hospitals at Exeter).

In addition to this systematic begging it appears that the Hospital was also supported by means of funds accruing thereto from a Fair (2) which was held at the Festival of St. Mary Magdalene. In 1463 it was granted to the corporation of Exeter, either to use on behalf of the lepers or to withhold as seemed desirable. In 1454 the Mayor himself, Richard Orange, "although of noble parentage" (he came from a foreign stock of nobility) - became infected with Leprosy. Thereupon he submitted to be removed to dwell in the said lazeretto, and there ending his days he lies buried in the chancel of the chapel belonging to the Hospital. (This chapel was a ruin at the end of the seventeenth century but was repaired in 1750.) "A mayor of a city so patiently yielding to be set apart" was considered a piece of superlative goodness and piety. That Leprosy prevailed in the diocese of Exeter we know on a high authority. (3) The

(1) Brice, loc. cit. (2) Lysons, loc. cit. vol.VI.
(3) Lancet, 1890. T.C.Button of Exeter.

will of Thomas Button, Bishop of Exeter dated 1307, contained 39 legacies to the lepers in his diocese at the following places:-

"Exeter, Okehampton, Tavistock, Sutton, Plymouth, Cleve, Modburi, Chadelyntone, Dertermuth, Tottene, Honiton, Teignmouth, Nijweton, Ferrars, Toppesham, Deveneburi, Barnum and Pylton, Launceston, Treweton Setus Germanus, Lis Kyret, Dyn-mur, Bodmin, Lanford, Tony, Ponsmur, Schiepstalle, Resuregby, Coygon, Truru, Argel, Helleston, Glas, Moushole, Madern, S. Sancred Redruth, S. Brioc, Oldestowe, Medeschole."

At Carlisle (1) in the southern suburbs near Botchardgate, stood a Hospital for 12 (Lysons) or 13 men (Simpson) dedicated to St. Nicholas before 1180. It was supposed to be of royal foundation, and John in 1201 sent letters of protection. Indeed in 1326 Thomas de Goldyngton then Master of the Hospital, brought a prohibition against the Bishop, who was about to visit this house as a suggestion that it was a royal foundation and therefore visitable only by the King's Commissioners; and in 1341 the said Bishop was commissioned by the King to visit this Hospital. (2)

It is said that when the Newcastle and Carlisle

(1) Tanner, loc. cit. Sir W. Dugdale, loc. cit. p.757.
(2) Nicolson and Burn, Hist. of Westmoreland & Cumberland. Vol. II. 250. (1) Lysons, Vol. IV.

Ry. was being made a considerable number of human bones and urns were found on the site of the old Leper Hospital.

It was last destroyed during the civil wars, (1) 1646. It had been destroyed frequently before, in 1296 and again by the Scots in 1326. It was burnt in 1337.

The earliest reference discoverable is 1180 but by whom it was founded it is not known, (probably William II. In Edward I.' time an "inquest" was held. Edward claimed the patronage of St. Nicholas against the Bp. of Carlisle and secured his desire by the decision of a jury.

Things went quietly for a time then in 1371 on a complaint being made by the Master that the house was cheated and defrauded of a great part of their sustenance, the Bishop (Thos. Appleby) issued an order that all unjust "detainers of thraves" of corn and other goods belonging to the Hospital should make full payment within 10 days on pain of excommunication.

Sherburn Hospital, near Durham, was one of the richest endowed charities in the North of England and certainly the largest leper establishment in the county. It was founded by the opulent Hugh Pudsey, Bp. of Durham for the reception of 65 lepers with a Master and other officers

(1) Jefferson, Hist. of Carlisle.

about the year 1184 just when Leprosy was so prevalent in England. (1) "The old Hospital stands on the west side of a square area of one acre, and consists of a neat but low building having a Hall in the centre and a wing at each end: on the east side of the area is the Master's house, the chaplain's apartments and a house for a chief farmer; on the north side stands the chapel and the rooms of a new hospital built in 1820."

Such is the description by Dugdale. The square area above referred to was situated about one and a half miles S.E. of Durham, and to the east of Sherburn water. There were early in its history many lands and donations granted to the Hospital, probably through the wide influence of Pudsey, "the joly Byshop of Durham," We have the record of many interesting details of the inner life of a leper Hospital such as this in Surtees' history, (vol. 1. pp.127 - 138) and Allan's Collections. From these sources we learn that the daily allowance of the lepers was a loaf weighing five marks and a gallon of ale each; and between every 2 lepers one mess or commons of flesh three days in the week, and if fish, then cheese or butter on the remaining four days: on high festivals a

(1) Dugdale, England & Wales, vol. VII. Simpson, loc. cit.. Sir W. Dugdale, loc. cit. p.668.. Surtees, Hist. & Antiq. of Co. Palitine of Durham, 1816. vol.I 127.

double mess: and in particular on the feast of St. Cuthbert in Lent fresh salmon if it could be had; if not then other fresh fish, and on Michaelmas Day 4 lepers messes on one goose. With fresh fish, flesh or eggs, a measure of salt was delivered, (the 20th part of a razer).

When fresh fish could not be had, red-herrings were served three to a single mess, or cheese and butter by weight, or 3 eggs³). During Lent each had a razer of wheat "to make furmenty", and 2 razers of beans to boil; sometimes greens or onions; and every day, except Sunday, the 7th part of a razer of bean meal, but on Sunday a measure and a half of pulse to make gruel. Red-herrings were prohibited from Pentecost to Michaelmas; at the latter each received 2 razers of apples.

The lepers shared a common kitchen, a common cook, and utensils and firing for cooking &c., viz: a lead, 2 brazen pots, a table, a large wooden vessel for washing or making wine, a laver, 2 ale-pots and 2 bathing pots. The sick - (i.e. those unable to get about at all) had fire and candle and all necessaries, donec melioretur vel moviatur, and one of the chaplains was assigned to hear the confessions of the sick, and read the gospel to them on Sundays and Holy Days and to read the burial

service for the dead. The old woman who nursed the sick and the grave-digger were both fed extra when extra work had to be done. Each leper had a yearly allowance for his clothing, of 3 yards of woolen cloth, white or russet, 6 yards of linen, 6 yards of canvass: and on the day on which the "taylor" came to cut the clothes he had his meat and drink. Four fires were allowed for the whole community. From Michaelmas to All Saints they had two baskets of peat on the mess days, and 4 baskets daily from All Saints to Easter. On Christmas Eve they had 4 Yule clogs, each a cart-load, with 4 trusses of straw; 4 trusses of straw on All Saints Eve and Easter Eve, and 4 bundles of rushes on the Eves of Pentecost, St. John the Baptist and St. Magdalene and on the anniversary of Martin de Sancte Cruce every leper received 5/5 in money.

The lepers had the liberty of seeing their friends: and strangers who came from a distance were suffered to rest in the Hospital all night, but visitors from the neighbourhood departed in the evening and when the bell sounded for supper the gates were closed.

Disobedient members were punished at the discretion of their Prior and Prioress by corporal correction, per ferulam modo scholarium, and offenders who refused to submit to the usual discipline were reduced to bread and

Medicorum Regis super Morbo Lepre. Certificatio

1268
Edw. I
Excellentissimo et serenissimo in Christi Principi et in
Domino Edwardo, Dei gratia Regi Angliae et Francie et
Domino Hibernie, Nos, humilium oratores vestri, nunc
Willielmus Mattheclyste, Rogerus Marchall et Dominicus
de Berego Artium et Medicina Doctores, vestri medici
et ad Personam vestram tutelam Jurati debitam Rever-
entiam cum humilitate et honore,

Cum nuper in Cancellaria vestra vobis suppli-
cassetur de amorendo a communi hominum consortio
Johannam Nighthale de Brentwode in Comitatu in
Essexia, eo quod presumeretur per quosdam esse in
vicinis suis ipsam foeda Lepre contagione Infectam
et de facto Leprosam existere

Propter quod quoddam breve vestrum tunc ibidem
confectum et superinde vicecomitem comitatus præ-
dicti directum fuit in hæc verba.

Quia accepimus quod Johanna Nighthale
Leprosa existit, et inter Homines Comitatus prædicti
communiter conversatur et cum eis tam in Locis in
Publicis quam privatis communicat et se ad Locum
Solitarium promptioris est, et ad ipsum pertinaret, in
transferre recusat ad grave Vampnum Hominum
prædictorum et propter contagionem morbi sui
prædicti Periculum manifestum,

Nos, huiusmodi Periculum prout ad nos per-
tinet præcavendum et super præmissis quod jus-
tum est et usitatum fieri volentes.

Tibi præcipimus quod assumptis tecum
aliquibus discretis et legalibus Hominibus de
comitatu prædicto non suspectis qui de Persona

prædictæ **J**ohanne et de hujusmodi morbo noti-
tiam habent meliorem et ad ipsam **J**ohannam
accedas et ipsam in Præsentia prædictorum
hominum facias diligenter videri et examinari.

Et, si ipsam **L**eprosam esse inveneris ut
prædictum est, tunc ipsam honestiori modo
quo poteris, a communicatione **H**ominum in
prædictorum amoveri et se ad locum solitar-
ium, ad habitandum ibidem prout moris est,
transferre in dilate, ne per hujusmodi com-
munem conversationem suam **H**ominibus præ-
dictis Dampnum vel Periculum eveniet quovis-
modo.

Teste me apud **W**estmonasterium decimo
Die Julij, ann. reg. nostri octavo,

Super quo præfata **J**ohanna antequam
præfatus Vicecomes Executionem Brevii prædicti
fecerat, Notitiam inde habens in Cancellariam
vestram prædictam pro Remedio et Relevo suo
in hac parte habendo veniebat,

Quo prætextu **R**everendus in **C**hristi in
Pater et **D**ominus **R**obertus **P**ei gratia **B**atho-
niensis et **W**ellensis **E**piscopus, Cancellarius
vestri Angliæ, Nos super eundem consulit, eadem
que **J**ohannam nobis decrevit debere Præsentari,
ea potissimum intentione ut, juxta id quod
ex scientia medicina percepimus, vestram
celsitudinem in cancellariam prædictam
redderemus certiores an ipsa eadem **J**ohanna
de facto **L**eprosa esset necne.

Nos itaque vestra celsitudini morem
gerere cupientes, ut super isto clarissima ver-
itas eidem patisieri posset et deberet in hunc
modum Processimus,

Primum de Persona sua consideravimus et juxta quod Antiquiores et sapientissimi medicina Auctores in hujusmodi casibus faciendum docuerant Ipsam Tractavimus et Palpavimus, per signa, hujusmodi morbi declarativa. **D**iscursum fecimus si in ea repererentur mature diligenter et prout oportuit Inquisivimus,

Inspectisque et consideratis singulis qua nobis, pro elicienda vera Notitia, hujus ambigui, inspicienda et consideranda videbantur debebantque videri invenimus ipsam mulierem nequa quam fuisse aut esse Leprosam, neque ex ea causa a communi Hominum consortio segregandam,

Docemur equidem ex scientia medicinati morbum leprae in communi per plurima signa, Item, unamquamque ejus morbi speciem (quae quattuor sunt Alopecia (videlicet) Ciria, Leonina et Elephantia) per aliqua signa debere cognosci et discerni, unamque ab alia specificè distingui,

Itaque, in hoc casu, mulieris nobis oblate per viginti et ultra signa leprae in communi famosiora discurrentes non invenimus ipsam ex illis aut eorundem sufficienti numero posse convinci Leprosam,

Et hoc quidem generaliter pro liberando ipsam a dicta Praesumptione sufficeret, cum non sit possibile Lepra quemquam laborare in quo non multa pars hujusmodi signorum reperiat,

Ceterum et ut de singulis speciebus feramus sententiam per quadraginta et ultra specierum Leprae signa distinctiva transeuntes non Reperimus ipsam mulierem ex aliqua quattuor in speciebus Leprae notandam, sed ab omni specie

lepra liberam prorsus et immunem quem admodum
et vestra celsitudinē vivis vocibus in cancellariam v
vestram predictam significavimus paratque sumus
idem per **P**rocessum scientificum, si et quando, erit
opus eidem vestra celsitudinē plenius declarare,

Certificamus itaque vobis, in Cancellariam
vestram predictam quod mulier saepe dicta nū
Johanna **N**ightynqale, nobis presentata per nos
inspecta, visitata et in hoc casu, juxta rei exig-
entiam, in omnibus ut gravaverat, Tractata, n.
Inventa est sana, Libera nulla penitus specie
Leprosa contagionis infecta.

In quorum omnium **F**idem et testimonium
Nos dicti, **W**illielmus **H**atteclyffe, **R**ogerus **M**archall,
et **D**ominicus de **S**erego manibus nostris propriis nos
ipso presentibus inscripsimus et sigilla nostra alt-
ernatim apposuimus.

Dat, primo **D**ie **N**ovembris, anno **R**egni **R**egis
Edwardi **Q**uarti post **C**onquestum **A**nglia octavo,

Et memorandum quod predicti, **W**illielmus
Hatteclyffe, **R**ogerus **M**archall et **D**ominicus de
Serego venerunt in **C**ancellariam **R**egis, apud nū
Westmonasterium, septimo **D**ie **N**ovembris, anno
presenti et Recognaverunt scriptum predictum
et omnia contenta in eodem in forma predicta.

water, and after the 3rd offence and monition were liable to be ejected. All these constitutions Bp. Richard Kellaw did by his charter confirm and order to be ever thereafter inviolably observed. (1)

Yet before the lapse of a century abuses were complained of, the lepers neglected and the whole Hospital hastening to decay. Hence Bp. Langley's interposition and after application to the Pope Eugenius IV. Langley made new regulations and ordinances for the better government of the Hospital. (Nova ordinatio sine Reformatio Hospitalis de Shireburne per Thomas Langley Episcopium ex Commissione Eugenii Papæ 4ti, 22. Inti, 1434). "on account of the reduced state of the Revenues (of the causes of which reduction no account is given) the Master was only charged with the maintenance of 13 poor brethren and of 2 lepers, in memoriam primarioe foundationis si in partibus reperiri possunt." (Surtees.)

The Hospital continued under the Langley statutes till 1557. Then further complaints that the Master (Sir Thomas Leigh) had leased the whole possession to his own connections and had reduced the number to be maintained to 8. (thus as the funds increased "the poor brethren " diminished in number from 65 to 13 and then to 8).

(1) Constitutiones Domus de Shireburne.

In 1593 there was appointed a general Commission to enquire into all the charities in the Diocese of Durham. In that report the Brethren of Shireburne are stated "to be chosen of one sex only, viz.: Men, but of sick or whole lepers or way-faring, there is no distinction in the same foundation." Surtees affirms that "long ago it would have been difficult to find a real leper in England" and so far the change in the original institution was satisfactory and entirely necessary.

Just about the time that Baldwin King of Jerusalem was compelled to resign his crown owing to disablement from Leprosy there were about 2,000 leper Houses in France and two Popes, Lucius III. and Clement III. made decrees concerning the Disease. Approximately it was the time of the appearance of leprosy in Ireland: and though not for the first time by any means (Belcher) a Hospital was founded in Ireland at Waterford. Belcher (1) believes leprosy was prevalent in Ireland in 432 A.D. (2) and from that date it existed more or less (endemically) till 1775 when Waterford Hospital had its last case. A hundred years after its "first notice" it seems that there was

(1) Hebrew, Medieval & Modern Leprosies compared, J.W. Belcher, M.D. 1864. (2) Colgan's Acta Sanctorum.

(what was termed) a Pestilence of Leprosy (550) (1)

"The Rickets are of late very rife in Ireland" said Dr. Boate (2) in 1652 "where a few years ago unknown: so on the contrary it hath been almost quite freed from another disease, one of the very worst and miserablest in the world, viz: the Leprosie, which in former times was very common there, especially in the province of Munster: the which therefore was fitted with Hospitals expressly built for to receive and keep the leprous persons. But many years since Ireland hath been almost quite freed from this horrible and loathsome disease and as few leprous persons are found there, as in any other countrie in the world; so that the hospitals erected for their use having stood empty a long time are quite decayed and come to nothing."

The earliest notice of a Leper Hospital in Ireland was in 869 when the Hospital flourishing at Armagh was demolished and sacked during Arlaf's invasion.

The Hospital at Waterford was established before 1185. (3, 4, 5,) The Leper Hospital of St. Stephen was its name and it stood by St Stephen's St. and was first endowed by the wealthy and influential family of

(1) Chronicon Scotorum. (2) Natural History of Ireland.
(3) Monasticon Hibernicum. Mervyn Archdale M.A. 1786.
(4) Smith's Waterford, p.123. (5) Dub. Quart. Med. Journal. 1868. (Belcher)

Powers. They gave it land (called Leper Town) in the parish of St. Killea about five miles from Waterford. The Hospital was under the direction of a Master " who was appointed during the pleasure of the mayor sheriffs and commons at a small salary and has a clerk as an assistant. Formerly about 50 poor used to receive a yearly allowance by the Master's hands. But as it was thought that a public infirmary would best answer the intent of the pious benefactor, since leprosy is not now (1740) a disease much complained of"; (1) hence endowments &c. went to establish an infirmary. (2) William Dobyne, Esq. left ten barrels of wheat yearly for ever to the lepers in 1663.

Kilbrixy in Co. West Meath followed according to Archdale in 1192.

Then came Dublin with its Hospital on Lazar Hill. Several others follow there in the XIII. & XIV. centuries. There was one at Lepertowne between Dublin and Bray - another in Dublin at St. Stephens, a fourth near Kilmainham, a fifth where old Mercer's Hospital now stands. There were Hospitals also at Kilchief (Co. Down) and at Carrickfergus (3) and Downpatrick. The majority of them

(1) Ancient and Present state of Waterford, p.183. Charles Smith, M.D. 1745. (2) Dub. Quart. Med. Journal, 1868: Belcher. (3) Hist. and antiq. of Carrickfergus; Mac Skimin.

were however established in Munster (at Waterford, Wexford, Calt, Cloyne, Dungannon and Lismore) Lismore Hospital had considerable wealth in lands and paid an annual rent to all the other lazar houses in Ireland.(1)The word lour, lower, lowre indicate leprosy in names of places thus: Knockaunabour, Ballylowre, &c. - Boate said that ill-diet caused leprosy in Ireland and it stopped when the English changed the diet by protecting the salmon fisheries. There was practically no leprosy after the XVII. century.

There were many other leper hospitals also founded in England or already in existence before the end of the XII. century. Practically speaking up to this date may be considered to be before the time of the Returning Crusaders.(2) Leprosy was at this period prevalent in England but in all probability upon the decline.

"In the border counties of Scotland before the year 1200 there existed various hospitals for the exclusive reception of Lepers , and in the immediately adjoining English counties of Northumberland, Cumberland and Durham. Three alone of these Hospitals contained as many as 91 lepers in all", (3) one of these was of course the famous

(1) Waterford, Smith. p.22. (2) Of course Crusaders had returned since 1098. (3) Eclin. Med. & Surg. Journal. Sir J.V.Simpson. 1841.

hospital at Durham (65) the second at Carlisle with 13 and the third at Bolton in Northumberland also with capacity for 13 lepers. It was founded by Robert de Roos to support, "a master, three brethren, three chaplains and 13 leprous laymen." (1)

The only settlement of the Knights of St. Lazarus in Scotland was at Linlithgow. (Simpson) This was founded during the reign of Alexander II, and restored under James I. (of Scotland) It was endowed and had also a Fair to augment its income. (2) But it may be assumed that leprosy did not in any case become prevalent in Scotland (using the word in comparison with leprosy in England) till the ^{XIV}~~XVI~~ century.

There were in England in the XIII. century a number of leper hospitals founded, of which detail mention is not necessary as it would closely resemble what has been already said. (For the full list of XIII. century hospitals see list of dates.

The Earl of Chester founded the Sponne Hospital, Mary Magdalene, at Coventry in Henry II's reign, with half a carucate of land for any lepers in or around Coventry. Dugdale states that shortly afterwards it was appropriated by the monks.

(1) England & Wales. Thomas Dugdale, vol.11.231. (2) Leper Hospitals in Scotland at the Reformation. Spottiswood. vol.11.874.

The Stourbridge Hospital in Cambridge was founded by King John, the one King in England who cared greatly about his leprous subjects. The Bp. of Ely seized it later and used its income for his own purposes.

Thetford in Norfolk (1) seems to have been quite a centre for lepers, for it possessed four different hospitals; Taylor believes that there were other hospitals in the diocese with chapels attached of which there is no record. (2)

St. John the Baptist Hospital (before 1216) was found to be insufficient for the need and hence during Henry III's reign the Earl of Warren built St. Mary Magdalene and bestowed lands, houses and liberties as endowment. Like others mentioned it also had a Fair.

St. John's some authorities believe, was in existence before the Norman Conquest as a kind of charitable institution but in the time of Richard II. it was changed into a leper Hospital (3) and it contained as such till the Dissolution. The same sort of experience befell the Hospital of St. Margaret. (4) Amongst its privileges was an Indulgence allowed by the Bp. of Ely (J.Fordham)

(1) History of Norfolk. F.Blomefield. 1739. Index Monasticus of diocese of ~~Norwich~~. R.Taylor. (2) Ibid: p.14. (3) History of Thetford, Thos. Martin, F.R.S. (4) Regr. Fordham, fol.175.

to all people who assisted the lepers by donations.

It has been said that St. Margaret's was converted into a leper hospital in the time of Edward III. (when more leper accommodation was necessary) and then transferred into a chapel again at a later date. (1)

During the XIV. century various mandates and regulations were made. In 1346 (2) Edward III. ordered "that all persons who have such blemish (of leprosy) shall within 15 days from the date of these presents quit the city and suburbs aforesaid" to solitary country life. The mandate also ordered "that no persons shall permit such lep~~ed~~ persons to dwell in their houses" on pain of forfeiture of house and property. In the same document there are references to the prevalence of lepers and the mixing of the diseased people with the healthy, and that this should be prevented and fewer errors made and skilled informants to decide as to who was a leper and who was not" certain discreet and lawful men who have the best knowledge of the disease" shall make careful and diligent examination of suspicious persons.

Some 25 years later we hear of a case in point -

we hear of a cas

(1) MSS. North. fol.vl. (2) 20 Edw.III.Letter Book.F.folio CXVI.

"John Mayer, (1) baker, smitten with the blemish of leprosy was sworn before the Mayor and aldermen at the Husting holden on the said Monday that he would depart forthwith from the city and would make no longer stay within the same." (2) And many other cases might be brought forward to illustrate not only the prevalence of the disease of "leprosy" but also the difficulty that the municipal authorities had in controlling lepers coming in and going out of the city. It was only three years after the case of Mayer that the Porters at the city gates of Aldgate, Bishopsgate, Cripulgate, Aldwichesgate, Newgate, Ludgate, Bridge-gate and the Postern (near the Tower) were sworn before the Mayor and Recorder "that they will not allow lepers to enter the city or to stay in the same or in the suburbs thereof." (3)

In 1389 a curious revelation is brought to light of the method of management of misconducting lepers in the city hospitals: viz: A royal exemption of "our dear and well-beloved Robert Yvyughoo and Gilbert Rothyng, keepers and overseers of the lazars" from various munici-

(1) It seems that no special trades were more infected by leprosy than any others. Simpson states in his Archaeological Essay that "ropemakers" were frequently attacked. This was because of their extract and social position. Generally speaking it was the "villeins" amongst whom the leprosy spread and next to them the "bordarii" (Eg. in Norwich.) (2) 46 Edw. III. Letter book.G.fol. cclxxxix. (3) 49 Edw. III. Letter book.H.fol.xx.

pal duties like inquests, juries, summonses, &c. because it is their duty "to chastize and punish offenders (lepers) against their rule" and "in doing these things the said Robert and Gilbert are oftentimes occupied and hardworked" and "cannot occupy themselves about their trades and business so much as they find themselves occupied in their said duties", therefore considering "their meritorious labour, their unpleasant and onerous occupation" &c. they are to be exempted as above. (1) By which it would appear that the lepers were disorderly and also that their "overseers" were traders and business men giving some of their time to attendance and supervision of leper Hospitals. All of which would confirm me in my belief that the general arrangements of the affairs of the leper houses were in almost every way lax and irregular.

The separation of lepers above referred to was in no way a new regulation. Leprosy "being highly contagious" the lepers were separated from all human society. (2) (Carlisle believes that is why there was no leprosy in England in the seventeenth century) (3) A like arrangement had been an established rule from the earliest an-

(1) 13 Richard. 1389. Letter book. H. folio. ccxlii (2,3) Historical account of the origin of the Commission. N. Carlisle. 1828.

tiquity. But to what extent this separation was enforced one may learn from the method of enforcement of the writ De Leprosos Amovendo: which applied to a man who was a leper dwelling in any town who persisted in coming into the church or amongst his neighbours where they were assembled, to their annoyance and disturbance. Then he or she of the assembly might sue forth that writ for to remove him from their company. The writ arranged for examination and removal to a solitary place. But it seems that if a leper kept himself within his house and did not converse or mix with his neighbours that then he was not to be moved out of his house. (1)

This at once shows how very lax, careless and useless the "segregation" was. Besides if Leprosy were contagious, would not this arrangement have been a most definite assistance to the spread of the disease by contagion - for as it is certain that many lepers were confined in the hospitals, it is just as certain that more were not.

They were kept out of the churches also. In the year 1200 at the Provincial Synod holden at Westminster, Hubert Archbishop of Canterbury decreed: when so many

(1) Historical account of the origin of the Commission. N. Carlisle. 1828.

leprous persons were assembled that might be able to build a church with a church-yard to themselves and to have one especial Priest of their own, that they should be permitted to have the same without contradiction: and in this manner they would be no longer injurious to the old churches. This arrangement was an almost exact counterpart of the ^{21st article of the} Lateran Council, 1179. This same canon dispensed such communities of lepers from payment of tithes. But this part fell into disuse for we are told by Strype (1) that in 1562 while Bobling Leper House was "not charged with any tenth" the leper Hospital of St. Lawrence at Canterbury is taxed and payeth the perpetual tenths.

In many places this was done and the leper not only formed in such places a social colony, but also an ecclesiastical one: and this in addition to the before-mentioned fact that most of the "hospitals" in England were ecclesiastical institutions.

But in most places of course this special church and graveyard were quite impossible through lack of funds and lack of lepers. In many of these places arrangements were made by which the lepers were enabled to take some

(1) Strype's Life and Acts of Matthew Parker.

share in the church services by means of the Leper window or Squint-window or Hagioscope. The exact reason for the squint-window is not quite clear. It was established at the wish of the public, either because they feared the contagion of leprosy or because they disliked the sight and presence of the lepers whose poverty and disease caused them to be generally unsightly, and hence shunned. The first reason is the most likely but probably both played a part in the custom.

The Hagioscope consisted of an opening or aperture obliquely disposed, carried through the thickness of the wall at the N.E. angle of the south aisle and the S.E. angle of the north aisle of the church, or of the chapels eastward of the aisles and which oblique apertures opened into the chancel. Thus at high mass the elevation of the host at the high altar and other ceremonies might be viewed from the chantry or other chapel or outside at the E. end of each aisle, contiguous to the chancel. In general these apertures are mere plain, narrow oblong slits; sometimes however they partake of a more ornamental character as in a chantry chapel on the S. side of Irthlingborough church, Northamptonshire, where the head of the aperture of this kind is arched cinque-foiled within and finished above with an embattled

"moulding. In the N. and S. transepts of Minster Lovell
 "church in Oxfordshire are oblique openings, arch-headed
 "and foliated and in the N. of Chipping Norton church in
 "the same county is a singular hagioscope obliquely dis-
 "posed not unlike a square-headed window of three foliated
 "arched lights with a quatre-foil beneath each light" (1)
 An aperture of this description is to be met with in a N.
 chapel on the N. side of Standground church near Peterborough.
 A number of leper windows existed in churches along the
 sea-coast. (2) These apertures though not general are
 by no means uncommon in our churches. I have found ex-
 amples existing at the following places:- (in some of the
 places being the only remnant left of the lepers).

Ludlow. (Salop.)		Lynn. (Norfolk)
Irthlingborough. (Northampton.)		York.
Chipping Norton. (Oxfordshire.)		Christ-Church. (Hants.)
Minster Lovell.	" "	Northamptonshire. (Several.)
Burford.	" "	Mullion Church. (Cornwall.)
Oxford.	" "	Kirkbampton. (Cumberland.)
Oxford.	" "	Beaumont. (")
Dorchester.	" "	Standground. (nr Peterborough)

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1. Principles of Gothic Architecture. M. H. Bloxam.
 2. Pathology. Soc. Trans. pp. 1069-1890.

Studland. (nr. Swanage)

Bridgwater. (Somerset.)

Minster. (Isle of Thanet.)

Dunchurch. (Warwick.)

Bidborough. (Kent.)

Sende. (Surrey.)

Donnington. (Salop.)

Packwood. (Warwick.)

Tenby. (SouthWales.) (Several)

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Not only was there the Hagioscope but other churches possessed a stone slab let into the sill of the window and so placed that the leper could receive without actual contact with the administrator of the sacrament.

Nor were lepers compelled by the Provincial Synod of 1200 to give any tithes of their gardens or increase of cattle. Nor had they any rights or claims in a common law -court. Nor were they ever called upon to fulfil any public judicial or responsible post.(1) They were disqualified for making a will ; or inheriting property. This latter law had been known for two centuries for according to the Venedotian Code, "should her husband be leprous and she leave her husband, the wife is to have the whole of the property," i.e. it should not pass into the hands of a leper. They were dead in the eye of the law.

The leper was not looked upon in the eye of the law

1. Anc. Laws of Wales. Dinnatian Code.

as defunct, for not only was he cut off from the church and not allowed to share in some of its chief services but in many cases the solemn ceremonial of the burial of the dead was performed over him on the day in which he was separated from his fellow men and consigned to the Leper Hospital. (1) He was from that moment regarded as a man dead amongst the living and legally buried though still breathing and alive. The ritual of the French Church retained until a late period all the various ceremonies and forms to which the leper was subjected.

Although not in chronological order I may refer here to some of the old laws of Scotland regarding Leprosy.

"No lepers are to be permitted to enter the borough" in the neighbourhood of which was the Hospital. (2) But this was paid so little attention to that very shortly afterwards, "the Chamberlain at his ayre is to enquire whether the Bailies thrice a year hold a visitation to put lepers out of the burgh." (3) Which curious regulation naturally enough encouraged a species of smuggling and deceit at the times of the "visitation" of the Bailies, and in the intermediate periods secret and sometimes open disobedience to the regulation. (4) These

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1. Leprosy. C. N. Macnamara, F.R.C.S. 1892.
 2. Stat. Gild. c. 18. 1. 343.
 3. Art. Ing. I. 680 a
 4. Art. Ing. I. 681

laws dated from the beginning of the XV. century and 25 5
years afterwards it was found necessary to make less 5
stringent arrangements seeing that the previously stricter
law had been openly transgressed. Hence the following:-)
"Lepers are not to come into burghs except on Mondays,
Wednesdays, and fridays from 10 to 2 o'clock; when a
market falls on these days they shall delay coming till
the following day; lepers are to beg only at their own
hospital and at the town-gate and at other places outside
the burgh." (5)

This is very significant; and certainly cannot be
described as "strict "segregation". It is difficult to
understand why the lepers in England might attend markets
and in Scotland they might not. The same law continues:-
"Bishops, officials and deans at their visitations are to
enquire if there be any lepers and to denounce "or report")
them if laymen to the King and if clerks to their bishops;
this statute to be observed under pains." (6)

By another law a century later a provision was made
for the removal of wandering beggars to their own par-
ishes, but in the case of lepers this was cancelled on two
separate occasions - (7) by which they were allowed to go
where they chose and beg what they could or reside in

5. *E. 1427. c. 8. 2. 16*

6. *1427. c. VIII. 2. 16*

7. *1574 + 1579. c. XII. 3. 88. 141.*

any leper Hospital to which they could get admittance.

A regulation in support of all hospitals all over the land was in some way an apology for this :-, viz:-

"Tainted salmon or pork to be sent to the leper house"

(1) in the neighbourhood, and "if there was not one, then destroyed!" - and again "when a wild beast be found dead or wounded in the forest its flesh shall be sent to the nearest leper house," (2)

At the beginning of the XIVth century Leprosy was still sufficiently common to call for further Hospitals. This was less so in England and more so in Scotland. In England probably before the commencement of the century a hospital of some importance existed in Chester. (2)

In the records pertaining thereto we find various items which add to our information of leper customs at this time in England. Ormerod (3) tells us that the Hospital was situated at the east end of Forest street in a small extra-parochial district. It was founded by Earl Randle Blundeville and was further confirmed and supported by Hugh Kevelioc and Edward III. During the siege of Chester in 1645 it was completely destroyed. In the Harleian MSS. (4) may be found some account of the method

1. *Fragg. Collect. c. 48.*

2. *Leg. For. c. xxii. l. 692*

2. *Notitia Monast. Tho. Tanner M. a. 1787*

3. *Hist. of Chester. Ormerod*

4. *Harl. Mss. 2115. fol. 195.*

of augmentation of income by means of tolls :- Certain toll from everything carried to sale at Chester market: one handful from every sack of wheat, vetches or barley: 2 handfuls from every sack of oats or malt carried either on a horse or cart or in any other way: and wheat, vetches, barley, oats, salt fish and produce of any other kind and particularly salt, one handful from a sack and 2 from a cart: one cheese from every horse load or cart-load of cheese: one salmon from every horse or cartload: and in other fish such as sparklings, flukes, eels &c. five ^d from every horse's pannier and one from every man's load. From fruits of trees one double handful from each horse-load and 3 double handfuls from each cartload. From fruits of the earth whether horseloads or cartloads one handful. From all packages of earthenware one piece of the same; to have one horse from the horse-fair and from all carts drawn by oxen or horses carrying wood or brick, one piece of the same. To have also one boat with a fisherman above or below Dee bridge with stall-nette, flotnette, or dragnette or any other kind of nette night and day: and three stalls in Dee called single lyne stalls: and not to be amenable to the justice, sheriff or any other officers of the prince except in the court of the Hospital aforesaid."

(In this plea are recited two charters of Randle Blundeville) 15 Henry VII. ^{Hart.} ~~Hast.~~ MSS. 2115. fol. 195.

Many other Hospitals were supported by voluntary or compulsory tolls at markets. Proctors secured funds for others. The munificence of benefactors sufficiently endowed many others, and yet other like establishments were financed by means of Fairs. Perhaps the most famous of these was held at Storbidge in the interest of the Hospital at Cambridge. It was held in a field bounded by the Cam in the N. and Sture in the E; the origin of it is involved in uncertainty but it appears to have been granted by King John. (1199 - 1216) Henry VIII. ultimately granted it to the Corporation of Cambridge. Its legal duration was a fortnight and the chief articles for sale were wool, hops, leather, hardware, and on one day, horses: and the business transacted was extensive. (1) Other authorities say it lasted four weeks and owed its success to the near ports of Lynn and Blakeney - hence there were many foreign goods sold there and many foreigners present. (2) English people came from all parts of the country and mixed freely together and hence the Fair became a centre for lepers and their interests.

1. Dugdale. loc. cit. vol. 11. 71.
2. Gibbs. Historical (Industrial) of England.

Some regular amount either proportionate or actual went from this Fair to the Hospitals at Cambridge (St. Anthony and St. Eligius) which were in existence sometime previous to the XVI. century. One of these Sturbridge endowed Hospitals was unjustly seized some 30 years before Edward I. time by Hugh Northwold, Bp. of Ely, whose successor retained it, having placed in it certain officers and others, to the exclusion of the pepers who ought to have been as in the past, there supported. (1)

At Lynn, Langwade, Hardwick in Norfolk, and Beccles and Eye, in Suffolk, Leper Hospitals were established as late as 1330. But there can be no doubt that leprosy was very much on the decline in England even in the Eastern counties.

The two localities where it seems to have flourished many years after it had died out in other places were in Scotland and in Cornwall. During the XIV. century various leper institutions and leper laws, both ecclesiastical and political were established over the Tweed.

As far back as the XII. century the disease was not only known there but hospitals were by that time actually erected for the seclusion of its victims.

1. *Lysans. Britannica. 153.*

At Kingcase, or Kilcais (as it was formerly called) (1) Ayr, was one of the few wealthy leper hospitals in Scotland. Simpson.)

Kingcase, on the coast of Kyle, was in the parish of Prestwick and the Hospital was dedicated to St. Ninian. (2) Tradition relates that the founder of this establishment was King Robert Bruce who was, so it is said, himself afflicted with Leprosy - "the result of hard fare, hard living and hard work" - the hospital was endowed with various lands in Dundonald parish and other places. Mackenzie Walcott also states that it was dedicated to St Ninian, was half a mile from Ayr and was endowed by Robert I. under a chaplain, for 8 lepers. Like the leper hospital at Aberdeen it was in 1654 subdivided into huts. (tuguria) (3)

As the foundation charter of this hospital does not exist it cannot be ascertained what number of persons were originally maintained in it. It appears however to have been governed by a guardian and a prior and it also had a chaplain. In the reign of James II, the lands and hereditary office of Governor were acquired by Wallace of Newton, and it passed through various hands by

Hist. Ayr. - W. Robertson: Caledonia, Chalmers: Statistics, Sir J. Sinclair: Stat. Acc. of Scotland
(1) ~~Lysons, Britannica, p.153.~~ (2) Ninian, b.360. in the country of the Novantes near the Leucophobia of Ptolemy, ordained at Rome: instructed in monasticism by Martin of Tours: and returning before the year 397, he freed his countrymen from superstitious errors and taught them the most important truths. He founded a Monastery at Whithern and erected a church which Bede declares to be the first built of stone. D.432. (3) Ancient Church of Scotland, Walcott. p.336 et seq.

v. 173.

by auctions. Later it and its funds were used for any incurable disease and in 1790 it was purchased for the Borough of Ayr which still holds the patronage.

Spottiswood (1) states that the Kingcase Hospital had 8 lepers in it "who are each to have 8 bolls of meal and 8 merks yearly: and if there is but one he has the whole." As late as 1693 there were, according to Simpson, lepers still at Kingcase. In March 1693 a complaint it seems was lodged by the Procurator-Fiscal, "anent the intruding of the Lepers of Kingcase upon the priviledges only proper to the Burgesss and freemen (of Prestwick) by there resorting to the shoar and taking up certain timber and other wrack and casting greater quantities of peats and turf off the common, and moss &c., which being seriously pondered by the magistrates they ordained that none of the said lepers of Kingcase do so under the penalty of ane hundredth pund, toties quoties, to be paid by ilk ane of them in caise of faillye." (2)

It is singular to note what a large number of Hospitals there were in Scotland at a very early date. (3) Only a very limited number of these were set apart for

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1. *Lepers Hosp. of Scotland. Spottiswood. 476.*
 2. *Records of Prestwick. p. 342.*
 3. *Spottiswood, loc. cit.*

the reception of Lepers. At the same time leprosy seems to have "continued prevalent in the northern islands of Scotland long after it had disappeared from the mainland and indeed all other parts of Great Britain." (1)

"It had been known in the north as well as in Ireland for centuries. It was at Lerwick as late as the early part of the XVII. century." (2) Leprosy was certainly existent in some parts of the Shetlands as late as the XVIII. century: in the island of Papa Stour till 1740. (2) Then it appears to have gone still farther north to the Faroe and Iceland. (Iceland in 1768 had 280 Hospital lepers, and accounts record lepers there up to the present day)

The well known entry in the Session Records of Walls (Papastour) regarding the "disappearance" of leprosy in 1742 is as follows: [-

"The Moderator proposed to the session that considering that a gracious Providence had not only delivered the Island and country from the burden and necessity of maintaining and otherwise providing for the poor lepers formerly in this island but had also put a stop to the spreading of that unclean and infectious disease so that

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1. Simpson. *loc. cit.*
 2. *Statistical Acc. of Scotland. Sinclair*

there is no appearance of the symptoms thereof in any person now in this place, the session should therefore ordain a day to be set apart for solemn thanksgiving for so great a deliverance throughout this ministry excepting Fowla which we can have no access to inform. The Session having heard the Moderator's proposal was cordially satisfied therewith and did agree unanimously that a day be set apart for solemn thanksgiving on the above account throughout the bounds of the ministry excepting Fowla as above said." (1)

Several cases of Leprosy did appear in 1772 and 1776. In 1778 there were further cases - some of which were sent to the Hospital at Edinburgh. (2) The last actually reported case of endemic leprosy in the Shetlands was in 1798 and lay for some time in the Infirmary wards at Edinburgh.

It is recorded that in 1809 "scarcely an instance of it is to be met with" in Shetland, though but a very little time before it "obscure degrees" of it had occurred. "Formerly when this affection was prevalent the unfortunate individuals who were seized with it were removed to small huts erected for the purpose and here

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1. *Inss. Session Register of Walls. March 17. 1742. vol. xx. 101*
 2. *Rannie, session clerk of Papaastair.*

received a scanty allowance of provisions daily until the disease put a period to their miserable existence. The parish of Walls and the island of Papastour on the west side of the country appear to have been among the places in which it raged with the greatest malignity." (1)

We shall learn of the progress and decline of the disease in Scotland by some short notice of the various Leper Hospitals in the country.

The famous Greenside Hospital at Edinburgh, according to some authorities started in the XIV. century, as a Leper House, others think as an ordinary Hospital, and it became a leper House as the need arose at a later date. (2) It is recorded as existent in 1584. (3) Probably it was built in conjunction with the Act of the Magistrates of Edinburgh in 1589. Sir James Simpson points at "an awld fundation of the Lipperhous besyde Dyngwall," which formerly stood near Shakespeare Square. In 1591 all authorities agree that it had at least 5 lepers in it. (4) Spottiswood is of opinion that it was established in the XV. or XVI. century. (1479)? (5) It did not apparently last very long for in 1652 it was demolished by the Magistrates.

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1. *Anc. & Present State of Zeland Is.* - A. Edmonstone *MSD.* vol. 11. 102.
 2. *Chambers, Omn. Ann.* I. 227; *Chalmers, Caledonia* ii. 760; *Wilson, Eccles. Hist.* 11. 191. : *Arnott*, 257
 3. *City Council Records, Edin.* 1584. 4. *Simpson, loc. cit.* ii. 13. et seq.
 5. *Leper Hosp. in Scot. at Reformation.* Spottiswood.

The lepers it seems were kept in awe by the gallows as the latter was the penalty for opening the gate between dawn and sundown. By turns at the door the lepers sat silent, only ringing a clapper to collect alms which were dropped into his cup. Their allowance was only 4/ (Scotch) a week to each inmate. John Robertson a merchant was the founder. The regulations though apparently strict as regards entering and leaving the Hospital were not so in all respects, for we are told that sometimes the lepers' wives lived with them. The begging too was differently arranged in comparison with the hospital in the sister city of Glasgow where the lepers were allowed to go about the city and district with a cloth over their faces drawing attention by means of the clapper and asking alms. (1)

At Glasgow according to Simpson there was an Hospital as early as the middle of the XIV. century. (2) It was dedicated to St. Ninian, (3) was founded by the Lady of Lochoy during the reign of David II. and was fairly well endowed with lands. (4) In 1589 there were 6 lepers in the House. (5) Walcott believes that it was founded in the middle of the XV. century. (6) He tells us further (7) that the characteristics of a

1. *anc. Ch. of Scotland* Walcott. 33 & 6. follows :-

2. Robertson says not in XIV cent. but in 1494: Simpson, loc. cit. ii.
3. Chalmers *Caledonia* iii. 657: Maclure, 52: *Rec. Eccles. Glasgou*. 4 & 9.
Walcott, loc. cit.: Spottiswood, loc. cit. 4. Spottiswood, loc. cit.
5. Simpson, loc. cit. 6. Walcott, loc. cit. 7. Walcott, loc. cit. 384.

leper-hospital in Scotland were as follows :-

A lazar house was composed of separate cells (domus, hospitia) ranged round a quadrangle and contained a well, a chapel, a common hall, kitchen and dormitory; and a mansion for the "sound". " The lepers were not in community (non sociati). Dr Robertson tells us (1) that in 1528 James Houston, subdean of Glasgow ordered 12 pennies to be distributed yearly to lepers beside the Bridge at Glasgow. The town-Kirk was on the north side of the Clyde and in the Burgh, and therefore in 1592 lepers were allowed in the burgh. The feeling to lepers however was not the same in 1593 when all lepers were banished from Glasgow by Kirk-session. (2)

It was in 1584 that the Magistrates of Edinburgh issued orders for finding a place for lepers, and just about the same time that the Kirk-session of Glasgow ordered "the lepper Folks House or Spittal beyond the Bridge should be visited to see how the same should be reformed." This was done in 1587 and repairs were undertaken in 1588. In 1589, 6 lepers were in the Hospital. (3) It was just at this period that there seems to have been an increase of leprosy in Scotland. In 1593 all the lepers were cleared out of the town of Glasgow for fear of in-

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1. Appendix to Arch. Soc. rep., 11. 1872. J. Robertson LL.D. p. 162
 2. Acta Parl. Scotie, vol. i.
 3. Woodrow, Biographical Collect. vol. ii. pt. ii. 40

fection and in addition the admittance into the Hospital was limited to towns-people only. (1) In 1593 rental of Leper House amounted to £7. "and 18 bolls of meal."

Aberdeen. A leper hospital (St. Anne's) existed here previously to 1519. It was supported by public funds of the city, and consisted of several separate houses. (2) Dr. Robertson states that the hospital existed before 1363, and was subdivided. (3) The Regent and Priory Council interposed for the repair and restoration of the hospital in 1574. In 1578 it was placed under the charge of a Master and there were still patients in it in 1591. (4) If there really was a new access of leprosy in Scotland (1580 - 1590) it was speedily abated, at least in Aberdeen, for the Hospital was empty in 1604. (4) In the same Aberdeen Records we are told that 2 merks were to be given "to lepper woman laitlie put in the lepper-Hous, becaus she will not gett any of the rent of said Hous till Martenes next." In 1612 another leper appeared on the scene in the shape of an alien, not an Aberdonian, and in 1661 the last scene of endemic leprosy seems to have occurred in the razing to the ground of the hospital. (5)

1. Woodrow, loc. cit. :

2. Simpson, loc. cit.

3. ~~Major~~ Registrum Episcop. Aberdonensis
vol. II. 283.

4. Eccles. Rec. Aberdeen. pp. 20-23 + 34.

4. Ibidem.

5. Heutznar, Promptorium Parolorum, 298.

Other leper hospitals were at Aldnestun (1) as early as the XII. century, under the jurisdiction of Melrose; Aldcambus in Berwickshire also in the XII. century; (2) Ligerswood in Lauderdale (St. Mary Magdalene) founded by William, son of Alan; (3) Govan (St. Ninian's) founded in the XIV. century by the Lady Lochaw; (4) Dingwall Castle, a leper House under the Provost of Trinity College; (5) Rothfan in Elgin (St Peter's) founded by John Byseth (or Biset) for a prior, chaplain and 7 lepers. (6,7) Simpson believed it was founded early in the XIII. century in the reign of Alexander II. (son of William the Lion). By way of endowment it had the patronage of the Kirk of Kyltalargy. (8)

Dr. Robertson speaking of the Rothfan Hospital ^{9.} says *its first charter granted 1224 to 1226. He affirms* that the founder Bissett was a kinsman of Manser Bissett who aided various leper establishments in England in the time of Henry II. It appears that in 1296 Friar William Corbet (Master) had letters for the restitution of his lands directed to the shewiff of Edinburgh from Edward I. of England as over-lord of Scotland. (10) In 1376 a charter was granted by Robert II. with regard to

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1. Walcott, loc. cit.: Simpson, loc. cit.:
 2. *Ibidem*; et Caledonia, Chalmers, loc. cit.
 3. Caledonia, Chalmers, loc. cit. 4. Walcott, loc. cit.
 5. Walcott, loc. cit. 6,7. Antiq. of Aberdeen ii. 142: Walcott, loc. cit.
 8. Spottiswood, loc. cit. 9. Appendix Arch. Socys. vol. 11. Robertson.
 10. Rob. Scotie. vol. 1. 25.

lands belonging to the lepers at Harehope. (1) In 1563 the Hospital was worth £35. In 1798, £3.

Stirling possessed a lazaretto also at the end of the town founded in 1463 (2,3) and there were lepers there as late as 1512. Perth.; a leper hospital existed on "Leper-Croft" (4) and in the Records pertaining thereto we are told that it was a "public leper-hospital" and that "such hospitals were maintained beyond the walls of every considerable burgh in Scotland."

At Harehope, in the S.W. of Eldneston parish in Peebleshire there was a leper Hospital founded by David I. who endowed them with certain land for maintenance. (5)

The XIV. and XV. centuries were an important period in the decline of endemic Leprosy in England. Edward IV. (1461,-1483) appears to have made various attempts, all of which were more or less successful to make manifest to the public the satisfactory and progressive decline of leprosy. In 1468 he ordered ~~his three court physicians~~ to report concerning a case of alleged Leprosy, and their certificate herewith appended is one of the few English medical reports concerning the disease still left to us.

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1. Reg. Majni. Sigilli. Reg. Scot. p. 132
 2. Walcott loc. cit :
 3. Rot. Scaecarii Regum : Scot. Mus. in Register House.
 4. Reg. of Sheriff of County of Perth: Eccles. Annals, Perth: R. S. Fittis.
 5. Spottiswood, loc. cit.

At the end of the middle ages Leprosy was almost extinct in Italy and very shortly thereafter Pope Innocent VIII. suppressed the Leper order of St. Lazarus on account of the marked decrease in the disease. It was the time of an immense developement of new life in Europe. Printing had been introduced and also gardening. Discovery and colonization had widened the world and Men's thoughts, and it is noticeable that just as this period was reached (the end of the XV. and the beginning of the XVI. century) was the end of what may suitably be called the Dark Ages in England, so also with two significant exceptions (Scotland and Cornwall) it was the end of the ravages of endemic leprosy in these Islands. Between the years of 1530 and 1540 occurred (by the order of Henry VIII.) the suppression of the monasteries, including many of the existing Leper Houses. Carlisle's (1) enumeration of the objects supposed is as follows :- 645 convents, 90 colleges, 2734 chantries and 110 hospitals. Speed (2) also gives these same figures: Tanner (3) differs. He gives more than 200 general Hospitals in England up to the time of Henry VIII. when, as he says, "that deluge arose which at once swept away what

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1. *Hist. Act. of Commission of Charities. N. Carlisle.*
 2. *Hist. of Great Britain. 1632. John Speed*
 3. *Act. Monastic: Tanner. Preface. pp. v-viii*

the mistaken zeal and piety of many ages had raised."

He described these Hospitals as places "originally designed for relief and entertainment of travellers upon the roads, and particularly of pilgrims." Even Kings lodged at them in their journeyings. (1) These statements throw considerable light on the exact part these so-called Hospitals fulfilled: they were apparently but little more than wayside inns. He does seem to agree with other authorities that the Leper Hospitals were places set apart for Lepers, of whom he says there were many, partly as a relief for them and partly as protection to the public health.

The suggested causes of the Dissolution are various :-

1. It is believed by many that one cause was the disorderly state of affairs prevailing at many of these places. The management in many cases was superlatively bad, and the priveleges grossly abused. It is probable that if they had not been suppressed, it would have been wholly necessary to very radically reform them.

2. It was the time of the Reformation and Martin Luther, and this was in some measure the active cause of the throwing off by England of the supremacy of the Pope of Rome, and with that naturally came the throwing off of the great influence of the Monastic orders. As has been seen, many of these Hospitals were in the hands of the Friars. "The work of the Friars was physical as well

as moral. The rapid progress of population within the boroughs had outstripped the sanitary regulations of the Middle Ages, and fever and plague or the more terrible scourge of leprosy festered in the wretched hovels of the suburbs. Their first work lay in the noisome lazarehouses, it was amongst the lepers that they commonly chose the site of their homes. At London they settled in the shambles of Newgate; at Oxford they made their way to the swampy ground between its walls and the stream of Thames." (1) So that it is easy to understand that if the monks' influence had to go, then the monastic institutions in the country would practically lose their power and support.

3. Some authorities think that the act of Henry VIII. was a pious and good deed: that he wished (a) to prevent the monastic revenues from being squandered and mis-spent, as doubtless they had been: (b) and to put down the wickedness and immorality that occurred. (2)

4. A far more likely cause is that Henry wanted the money, and as the people were anxious to save their own pockets any additional taxation, the suppression of the monasteries was to all concerned the easiest way out

1. *Hist. of English People*. J.R. Green

2. *Hist. of Great Britain*. vol. VI. 434.

of the difficulty.

"The monasteries suggested themselves to him as an easy prey and he knew that an attack upon them would not displease the growing Protestant party in the country. These institutions were in many cases not fulfilling their ancient functions properly and were often far from being the homes of religious virtue." (1)

This cause is all the more likely to be the correct one, for we possess confirmation of it in the fact that Henry bestowed many of the lands and monastic inheritances upon favourites at his court. At least £32,000 came annually to the crown (2) (Gibbins says £161,000 was the annual income of the suppressed Houses - Not a little of this Henry spent in founding some schools and bishoprics to blind the people).

5. There can I think be no doubt at all that many of the Leper Hospitals which were suppressed at this time, were closed simply because there was no more need for them to be open. Dr Steele believes that "though the suppression of the monasteries in this country put a stop to the infirmaries connected with them, the leper houses continued their operation till the disease itself

1. Indust. Hist. of England. Gibbins. p. 83

2. Tanner, loc. cit.

gradually disappeared from the kingdom." There were" he adds "two if not three leper establishments affiliated with St. Bartholomew's Hospital (in London) so late as the XVIIth. century." (1) In this view I entirely share, only I think that there is evidence to show that the majority of the Leper Houses were in 1539 empty. We cannot accept the Suppression of Monasteries as in any case caused by the diminution of leprosy, though there were, and had been, in some cases for a long period, empty leper houses which were then closed. Endemic leprosy in the time of Henry VIII. was far too rare to call for more than a very few hospitals in the whole length of the land. Indeed it was only a very few years after that Edward VI. appointed a Royal Commission to enquire into the state of the Leper Hospitals not suppressed, and it reported (in 1547) that most of the leper houses in England were empty.

By slow gradations the disease had greatly abated although it had not entirely disappeared among the common people, but in the event of any contagion spreading - which was more or less believed in and feared - lepers were not compelled (by the Act, in the first year of

1. *Statistic. Society. 1878. D. Steele.*

Edward VI.) to leave their domicile, like the monasteries on the suppression of religious houses :-

Act, 1. Edward VI. c. 3.S.19.

"All leprous and bed-rid creatures whatsoever may at their own libertie be allowed to continue in such houses appointed for lepers or bed-rid people and shall not be compelled to repair into other countries or places appointed by this Act." And it was "made lawful for all lepers to appoint Proctors for each House not more than 2 to gather alms of all such inhabitants who were within 4 miles of the said House ." (1) This permission was speedily abused . Sturdy beggars went about with a clap-dish and pretending they were Proctors to a Spital House terrified people into contributing. (Proctors were put down by Act, 39. Elizabeth. c.4.)

Soon after the middle of the XVI. century it is significant to note an inexplicable increase of Leprosy almost solely confined to Cornwall and the surrounding district.

The Hospital of St. Margaret about half a mile from Honiton (2) on the road to Exeter was founded according to Lysons in 1530. (3) for lepers, by Thomas Chard, the last Abbot of Ford. Oliver in his notes from Bp. Bran-

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1. Dunkin, History of Dartford.
 2. Sir W. Dugdale, loc. cit. 759 : Lysons, loc. cit. vol. VI. 283
 3. Hildesheim. (Lysons)

tingham's Register declares that it existed as early as 1374 which I think is very likely. After the Dissolution of College and Hospitals the representatives of Chard became possessed of this Hospital by the Act of Henry VIII. to be trustees thereof on behalf of the 4 lepers then in residence. In 1642 it was ordered that the Hospital should be henceforth under the management of the Rector of Honiton who should appoint the governor and 4 lepers (this appeared to be the capacity) or in default of such objects, other poor persons. The lands belonging to the Hospital were then valued at more than £25. per ann.

Plympton, Plymouth and Pilton were also centres of Leprosy: founded according to Sir W. Dugdale (1) and Lysons (2) in 1370, 1374, 1197. (3) That at Pilton Lysons thinks may have been in existence in 1190, and was for both sexes, it flourished up till a recent date but was quite empty and obsolete in 1800.

At Totnes in Devon the Hospital of St. Mary Magdalene was founded for 11 lepers. In 1547 at the time of the Commission there were 8, and it also was empty for many years before 1800.

Bodmin. (4) About one mile E. from the town which

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1. *Loc. cit.* 759.
 2. *Loc. cit.* vol. vi
 3. *Soc. Antiquities* 1795. *Incl. dom. of Pilton.*
 4. *Monastic. Exon.* - G. Oliver. *J.D.* - Lysons, vol. iii.

is situated between two hills, stood the Lowres Hospital (from Loure, Lower, a British term meaning a leper) for lepers, dedicated to St. Laurence. It is not known when the Hospital was established, but in 1395 Bp. Stafford granted an indulgence which was repeated in 1435. (1) Queen Elizabeth granted a charter in which it is stated that there were and had been "a great company" of lepers in this hospital. James I. granted them - there were then according to Lysons 39 lepers - a few months after his accession, a weekly market on Wednesdays and "an annual Fair with a court of Piepowder, on the festival of St. Luke." "In the time of Elizabeth" says Polwhele "Leprosy seems to have been frequent in Cornwall." He believes that the disease first spread in England about 1100 and was largely due in Cornwall to traders. It would appear that at the Bodmin Hospital - even though the Leproso amovendo was in action - the custom was that none were to be admitted by the Governors "unless the leper so brought in paid them 5L a pot for dressing his meat, a purse (and a penny in it) to receive alms." In 1800 there were no lepers in the Hospital "nor indeed any one person touched with the disease in the whole county of Cornwall." Although the "chappel" adjoining

1. *Monastic Econ.* - Oliver, *loc. cit.*

was frequently used. Elizabeth not only granted a fresh charter and thus took the Bodmin lepers under her authority, but she augmented the lands and priveleges with the Jurisdiction of a Court-leet within the precincts of its manor of Ponte-by. (A white rod to be erected yearly while the Court sat. She also assisted it materially in revenue.) (1)

Launceston. (2) St. Leonards, founded at an early period but the site was removed towards the middle of the XIII. century to Gillemartin at or near the junction of the rivers Kensey and Tamar. At one time there were constant complaints of the lepers that they were defrauded of their rights.

The close of the XVI. century witnessed further efforts on behalf of Queen Elizabeth to amend the position and attention paid to the lepers. In 1597 she had an Act passed for the suppression of Proctors. The system of Proctors was established to overcome the difficulty of allowing the Lepers to parade the cities and mix with the public on the plea of obtaining alms: so great was the fear of contagion which was fully and widely believed in till the XVII. century when Fernelius and Forestus

1. Hist. of Cornwall. W. Hals. 1750.

2. Lepers, loc. cit. vol. iii : Carew, Cornwall, p. 186.

See W. Dugdale, loc. cit. 757.

first called it in question. But one can readily believe that such a system of Proctors would very soon be abused - so it happened and the Proctor system was put down by legislation. (1) Two years later it is recorded that Hentzner travelling through England was struck with the frequency of leprosy.

Salads, carrots, turnips, potatoes, tobacco, tea, hops and watches, became now common in England during this century, and it is not to be doubted that the whole social life and diet had materially altered since the XIV. century. But in addition the opening of the XVII. century witnessed the rise of Modern Science. Leprosy was at that time of very rare occurrence in England and may be considered to be extinct as an endemic disease, with the exception of the Northern Islands, Shetland, Orkney, Faroe and St. Kilda. (the Hebrides.)

In this lonely island, the most westerly of the Hebrides, leprosy apparently "broke out" in 1684 (2) or later. (3) In the middle of the XVIII. century there were two families labouring under the disease.

1. 39 Eliz. cap. iv.

2. Simpson, loc. cit.

3. Martin, Voyage to St. Kilda, 1753.

REGARDING THE DECREASE IN LEPERS IN ENGLAND.

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After a careful investigation covering a very large mass of literature I am decidedly of the opinion that Leprosy commenced to show material and perceptible signs of decline during the XIII. and XIV. centuries. There are it is true some references and authorities which place the commencing decline a century earlier, but the vast majority declare the end of the XIV. or the middle of the XV. century to be the period of decline. (1) It is of course impossible to produce any exact evidence on the point. Statistics are almost wholly lacking.

The disease probably reached its zenith during the XIII. Century.

One of the earliest records dealing with any decline of lepers or leprosy in England may be found in an old statute of the St. Albans Hospital drawn up in 1350 in which decrease is noted in the words; "in general there are now not above three, sometimes only two and occasionally one." This of course may have had relation to the locality only: or may have been due to many other lesser

1. Simpson, loc. cit: Hunstanton; ~~44~~ 40 + 41 Hy. iii: Hutchinson, B.M.J. 1896. 655.
Macnamara, Hygiene in warm Climates: Rose, Leprosy & Prevention:
Benton, England in XV century: White, Nat. Hist. of Selborne: Hirochi, Geog. &
Hist. Pathology: Thin, Leprosy: Deland, Itinerary: Kapsai: Hebra (Skin
Dis.) Green, Hist. of Eng: Jessop, Six Hundred years ago:
Third Rep. Hist. Commission. 271.

causes besides decrease of the disease. In 1344 the womens' Leper Hospital at Tannington was empty.

Still there can be no doubt I think that long before this lepers were disappearing or getting displaced from Houses specially founded for them. (1) And I am quite prepared to agree generally with the statement of Dr. Creighton that the amount of true leprosy would not be much higher than the leprosy per-centage in India (example in Burdwan) at the present time. But I think his figures are if anything too low. (viz: 2.26 per 1,000) Trail² declares that the leper houses were never numerous "not more than 50" and only a small fraction of all the charitable houses in England, perhaps $1/6$ or $1/8$." This calculation is entirely below the mark and wholly incorrect. His total number of "beds" in all the British Hospitals amounts to under 100. In the 3 of the northern Hospitals above, there were 90 "beds". Certainly, ~~by~~ his calculations, if contemporary history is to be trusted in the least degree, ~~are~~ altogether incorrect. ~~th~~That the Oxford Hospital was nearly empty in the time of Edward II. was due, not to the decrease in disease, as Mr. Trail infers, but to the fact that the Hospital was bankrupt through disorderly management and thieving: and even then it was not as he says empty, but contained 6. Mr. Trail assures us also that the

1. *Hist. of Epidemics in Britain*. C. Creighton: *msd.* 1891.
2. *Soc. England*. H. D. Trail, *J. C. L.* 1893. 367-370.

Cambridge Hospital was "alienated from the lepers" by the Bp. of Ely - undoubtedly it was and by him handed by treachery to his successors in the Bishopric - that was not because it had no lepers - for it was well supplied - but because it had a handsome revenue from the Sturbridge Fair. Trail is correct in stating that in 1349 (the middle be it noted of the XIV. century) St. Albans had not sufficient leprosy for its endowments and revenues - But no authority that I can discover attributes the decrease of inmates at Sharnburn in 1434 to a decrease of national leprosy The cause of the new regulations for the great Durham Hospital is stated to be "on account of the reduced state of the revenues" (1) (of the causes of the reduction Langley gives no account for a very obvious reason) and hence "si in partibus" 2 lepers might be found: which after the incessant persecution and maltreatment that the lepers had received there, for 70 years, was not to be expected. I think there can be no doubt that in 1434 leprosy was decreasing, but it is in no way proved so because certain Hospitals were nearly or entirely empty. The religious fervour of the Friars was dying out: and the wealthy revenue of many of their

1. *Nova Ordinatio sine Reformatio: Bp. Langley. loc. cit.*

institutions was a temptation to avaricious neighbours too great to be resisted. From the middle of the XIII. to the end of the XV. centuries these endowments were plundered all over England.

In his second volume Trail remarks: "we may be sure there was no longer leprosy in the country" in the XV. century. This is incorrect, leprosy flourished in Cornwall and Scotland in the XVI. century. "The disappearance of leprosy from England" he says "in the XV. century may be taken as absolute." Comparatively with the XI. and XII. centuries it was probably so: but of course not actually: such a sweeping statement is incorrect.

Mr. Denton (1) declares that leprosy was exceedingly common in England. That endowed houses for the reception of lepers existed up and down the country "at the entrance of almost all our towns, the number of these lazar houses, however great, was insufficient to accommodate more than a small proportion of those suffering from the disease." Many writers seem to judge the increase or decrease of leper houses as a fair criterion of the increase or decrease of leprosy. But it is not so. Many lepers without doubt could not get admittance and wandered on the highroads. In London it was possi-

1. England in the XV. cent. 1888. 206. st. 5sq.

ble to prevent, in a generally lax manner, the entrance of lepers and the detention of such who entered, in the Hospitals.(1) But in the country it was not possible to do so nor could the lepers be prevented from soliciting alms and mixing at choice with the public. "It was long before this disease ceased to be common amongst the poor in this country. It lingered far beyond the Middle Ages, especially in Cornwall and other places". (2,3) I think so too, but I believe it began to decline in the beginning of the XIV. century.

The Commission of Edward VI. recorded a very definite decrease in leprosy all over the country and cited various examples - referring to the Ilford Hospital (instituted in the reign of Henry II.) the Commissioners declared that though established for 16 men, "there is at this day (1547) but one pryest and two pore men." It must not be forgotten that Edward's Commission was only an enquiry into the Leper Hospitals, not an enquiry into the progress or otherwise of Leprosy. Ilford is a very fair example of the general state of the leper houses. The lazar house at Newton Bushell was founded about this time (1540) in the deed of which its object was recorded as follows: "For the releff of power lazar people where-

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1. Riley, Memorials of London. 384.
 2. Eng. in XV. cent. Denton. 206. Et seq.
 3. Evelyns, Diary - p. 150: R. C. P. Rep. 1867.

of grete number with that diseases be now infectid of moche people to whom they use to resort and be conversant with- all, for lacke of convenyent hospitals in the county of Devon for them." (1)

In 1547 the Herboldowne Hospital was providing relief for 15 "brethren and 15 "sisters" and out-door relief for as many more. (Creighton.)

Hentzner in 1598 travelled through England and observed in his Itinerary: "Angli laborant frequenter leprâ albâ vulgo dictâ." (2) And it is not infrequent to find references to the existence of Leprosy as an endemic disease as late as the time of James I. (3) and even down to 1712, (4) 1737, (5) 1786. (7)

"A few cases of indigenous origin have been met with in the British Islands during the present (XIX.) century" but it is probable that all or most of these were not strictly indigenous or endemic. (6)

It must be borne in mind that these various dates may depend upon an imperfect or incorrect diagnosis. Very much of the diagnosis of leprosy was left to the untrained and even uneducated. Diseases far removed from leprosy were doubtless frequently classified with it.

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1. Carta Barthol. Episcopi - Proleprosis: St. Mary Magd. 402. Camden, Leicestershire: Hooker, MSS. fol. 502, p. 402.
 2. Itinerary, Hentzner, 1598: 3. Carew, Cornwall, loc. cit:
 4. Old Bath Lezacies. Strobe. 5. Berry's cure of leprosy at Bath.
 6. R.C.P. Rep. 1867. LXXII. 7. Old Bath Lezacies, Strobe.

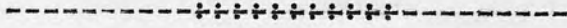
Gate-porters, police-men, priests and monks were frequently the judges in suspected cases. Ever now-a-days such people would not, nor would be expected to, be able to correctly form an opinion on such matters. Much less were they able to do so in the ignorance of the Middle Ages. We shall never know exactly what diseases were classified under the term "leprosy" - but we do know that they were many, and that many different skin diseases found refuge in the lazar-houses. Some authorities go so far as to say that "lazar-house" was a term equivalent to "poor-house." This is probably not so. There were "poor-houses" in addition to "lazar-houses" and we may feel assured that the lazar houses were especially the refuges of the leprous. At the same time there can be no doubt that "diseases having no affinity with true leprosy or with one another have been confounded together by want of precision in their nomenclature. The confusion has been increased by the two-fold meaning of the term "lazaret." Originally it denoted exclusively an asylum for lepers, but subsequently it was applied to all places for the detention of persons labouring under infectious distempers." (1)

1. *Rep. Coll. Phys. Rep. 1867: LXXXIV*

"The distinction between a Bede-house and a Mala-
derie was in some places "says Dr. Cookson "well observed.
The former being for the sick and infirm - the latter for
lepers. In the case of Brown's Hospital at Stamford,
(Lincolnshire) the regulations as compiled in Henry VII.
time ordained that "no leper be admitted into the said
almshouse lest he should affect his sound fellows."(1)
Many such regulations were "compiled" but few were system-
atically enforced.

1. *Lincoln's Topograph. Soc. 1841. Cookson.*

THE KIND OF LEPROSY IN THE MIDDLE AGES.



Creighton is strongly of the opinion "that Leprosy as correctly diagnosed was a disease of Europe and Britain in the middle ages," (1) and with this view Trail and Denton agree. The former says: (2) "It is clear that the medical writers about the beginning of the XIV. century knew true leprosy when they saw it, and that they described it from actual observation." Simpson (3) believes also that the incurable disease which was known in the lazar house charters and oldest histories of this country under the same name as on the continent, and which prevailed here during the same periods as on the continent, was entirely the same disease as that described by the medical authors of the middle ages. His classical and clear statement I will give in full :-

(Arch. Essays. vol.11.71) He states from much given evidence :-

9L (1) "That the leprosy of the Middle Ages as the disease prevailed upon the continent of Europe was identical with the Elephantiasis Græcorum and :-

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1. Hist. of Epidemics. C. Creighton M.D. - p. 71.
 2. Loc. cit.
 3. Arch. Essq. vol. ii. 135.

99(2) that it was for the victims of this specific malady that the numerous leper houses were established, they alone being the individuals who were intended to be adjudged, separated from the people and consigned to the lazar-houses. ("judicati" - "a populo seques-trandi" - "in Malenteria ducendi.")

(3) various authors who personally witnessed the leprosy of the middle ages upon the continent of Europe; in describing it, have described a disease having all the most characteristics of Greek Elephantiasis.

(4) in England a cutaneous disorder prevailed at the same period bearing the same name - presenting the same chronic incurable character - having its victims subjected to the same civil laws and restrictions - marked (as we know from Gilbert Gaddesdon and Glanville's observation and writings) by the same train of nosological symptoms - and hence identical with the continental disease and with the Elephantiasis of the Greeks.

(5) in Scotland we find a malady having the same similarity in its general date - in its name - in its course - and in the civil regulations regarding it, in its symptoms as they are accidentally described by Henryson in the XVI. century, identical with the Greek Elephantiasis.

(6) in a part of the country where the disease has continued to prevail down to a later period, the infected, as described by eye-witnesses in the earlier part of the century, presented the most unequivocal signs of the affection alluded to.

(7) we have high medical evidence (William Thomson) for asserting that the malady was seen, in members of a Shetland family in which it had been hereditarily transmitted - and hence one of the last, if not the very last Scotch leper was decidedly marked by the true and genuine marks of the Elephantiasis Græcorum."

Many other authorities might be mentioned as agreeing with this view. The following will act as confirmation of the general authentic belief that Elephantiasis Græcorum (true leprosy) prevailed in England. Gilbert, (1270) (1) John of Gaddesden, Professor of medicine at Oxford, (1307 - 1325) Rogerius, Rolandus, Ledwich, (2) Vontroil, (3) Chevalier Bach, (3) Maitland; (4) Theoderic, Bachuone, Lanfranc, (the last three contemporary physicians with Gilbert) Gordon, (5) Guy de Chanliac, Vitalis de Furno, Petrus de Angelata, (all of them authorities in the XIV. century,) and they had claimed as fellow-believers men who had lived so long before as Ætius, (541) Marcellus, Oribazius, (360) and Constantius of Carthage, (school of Salerno) (1087).

1. *Compendium medicinae*. 2. *Hist. of London*. 3. *Nat. Hist. of Iceland*: 105.
2. *Antiquities of Ireland*: 1804 81 5. *De lepra*.

In our own times the weight of the greatest authority has also been on the side of the same belief; including Simpson, Wilson, Virchon, Hutchinson and many others.

Both Willan and Shapton while agreeing with the general view thus held, are inclined to the idea that a very gross amount of "leprosy" in England was not of this type at all. "In consequence of the general application of the term "leprosy" to the Elephantiasis, to the leprosy of the Jews, to the proper scaly Lepra (groecorum) and even to other cutaneous affections which have no affinity to either of the diseases just mentioned, almost every person afflicted with any severe eruption or ulceration of the skin was deemed leprous and was received into the lazarettoes." (1)

Dr. Shapton of Exeter who wrote in the beginning of the present century is of opinion that there was a good deal of exaggeration anent the disease. He draws various conclusions which may be culled from various parts of his book. They are as follows :-

(1) That Leprosy was an established European disease anterior to the Crusades.

(2) That institutions of Refuge for the afflicted were numerously provided.

1. Diseases of the Skin: Willan. p. 418.

(3) That the lepers themselves were under the especial care of the church and that the movement on their behalf was largely an ecclesiastical movement.

(4) That from their very first establishment these institutions were not founded as "separating" houses or houses of pestelential seclusion, but that they were solely the charitable resorts of those afflicted with a peculiarly distressing and loathsome disease. These immense charities were at length administered under great abuses and afford no accurate ground upon which to calculate the extent or prevalence of the disease.

(5) That the ignorance and superstition of the Middle Ages, and from the European authors of these early times owing their medical knowledge to the writings of the Arabian physicians and not to their own observations, the common leprosy and cutaneous deprecations[?] were invested with all the horrors of the Elephantiasis Groecorum. And thus that the word "leprosy" included many cutaneous diseases similar in character to cutaneous diseases now occurring. Much of the horror entertained with regard to "leprosy" is due to the above mistake; also, to the general deficiency of medical skill; to the supposed

highly contagious nature of the complaint; to the superstitious ignorance of the times and to the exaggerated histories of the returning Crusaders filling the ears of greedy listeners with tales of dread. (1) Indeed so

Indeed so strong was the belief that leprosy was supernatural and beyond all assistance that in a trial for witchcraft at Edinburgh so late as 1597, a person is actually accused that "she affirmit she could haill leprosie, quhilk the maist expert men in medicine are not abill to do." (2)

With these general conclusions I entirely agree as regards 1, 2, 3, 4. ~~Respecting conclusion 5 it does not seem to me that the middle ages' authorities are so much under Arabian influence that their accounts of the medical aspects of the leprosy are worthless. Gilbert made many personal observations of leprosy as it existed around him and they are recorded, (3) He divided the disease into 5 different forms : viz:- Alopecia, elephantine, leonine, tyrie and a general form, and drew to a very large extent his own conclusions. This may also be said of Bernhard Gordon, (4) who wrote extensively on the subject, entitled "De Lepra," in which he discoursed on the signs of leprosy as he saw it around him.~~

1. *Leprosy in Middle Ages*. Chapter: 72. 3. *Compend. medicine*.
2. *Criminal Trials in Scotland: Pitcairn*. vol. ii. 29.
4. *De Lepra: cap. xxii. pp. 95. 711.*

common at this period (an "epidemic" of syphilis occurred in England in 1498 and Scotland in 1497) but it does not alter the general fact that even though many diseases - tuberculosis in many forms, small-pox, leucoderma, lichen, eczema, psoriasis and syphilis - were mis-diagnosed as "leprosy", (1) at the same time Elephantiasis Groecorum was from all authoritative accounts the disease rightly called leprosy and exceedingly prevalent in England during the XI., XII. and XIII. centuries. (2,3,) And we may consider that the two diseases were on the whole but little confused with, and had little relation to, each other.

(1) Vide Phil. Transact. Royal Soc. xxxi. 58. (2) Vide Bernard, Gilbert, Hunstanton &c. loc. cit.

(3) At the present day some believe that syphilis is intimately related to leprosy and may be an early stage of the disease. Dr. Fitch believes that "leprosy invariably follows" the introduction of syphilis into virgin races. Sir William Moor, K.C.S.I., M.D. &c, also argues that the two are closely related. Such relation was denied by the Sep. Com. 1841. Some think ERGOTISM was also mixed up with leprosy. Probably not so as it would appear that the first undoubted case of Ergotism occurred in the XVIII cent. (C. Creighton M.D.)

be leprosus. Even the detection of leprosy was left to the laity and inferior officers who were almost wholly ignorant of this disease. Undoubtedly the general public had a strong dislike to meeting or communicating with a leper - partly because of his unsightliness, partly because of superstition, partly because of supposed infection&c. - undoubtedly therefore the lepers were much shunned and lived much in solitude - but that there was in any sense a strict separation of the diseased from the healthy, or that the De Leproso Amovendo (1) was strictly and constantly enforced, I can find no substantial evidence. But I have found a very large mass of evidence wholly to the contrary. A recent writer states : "the great object (of the Leper Hospitals) in view was not the cure of leprosy, for then as now leprosy was deemed incurable, but to arrest the spread of it, to prevent the contamination of the sound by contact with the infected." (2) This pre-supposes at the outset that Leprosy was infectious or contagious, a point I shall have occasion to refer to later on. But to my mind it perverts the facts of the history of the disease. No one can carefully read the detailed accounts of the various leper hospitals in England and feel assured that.

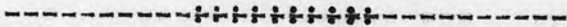
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1. De Leproso Amovendo. vide p. ~~40~~ 40 a.
 2. XIX cent. 1884. Agnes Lambert.

they acted as "arresters" of the spread of the disease. Unless segregation is carried out strictly and in toto, the point and principle of it is obviously lost. I do not doubt that segregation was "the object in view" but I can find no proof that it was in any case satisfactorily carried out. It has been pointed out that two or three generations of segregation (like that of the middle ages in England) if enforced in India, would practically exterminate the disease of leprosy in that country. If so, why is it that it took six or seven centuries to accomplish that in England! Many authors apparently share the view above expressed that "isolation" and "strict segregation" was carried out rigorously in the leper hospitals and was the cause of the decline of leprosy. (1) Let me repeat the well-founded conclusion of Shapter : (see p.82) that these Institutions were nothing more than "charitable resorts" - and in many cases that were too good a name for them, for it is not difficult to discern the avaricious abuse that went on in connection with these places. With the view of Shapter Sir James Y. Simpson wholly agrees. (2) Mr. Hutchinson also is of opinion that it is "an utter mistake to believe that efficient segregation was practised." (3)

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1. C. N. Macnamara. *loc. cit.*: Robert Ross, *Leprosy & Prevention*: Munro, *Edin. Med. Journal* 1877: Thin, *Leprosy* 1891.
 2. *Arch. Essays*, vol. II. *loc. cit.* 3. *Brit. Med. Jour.* 1890. 655.

PHYSICAL AND SOCIAL CONDITIONS IN ENGLAND

DURING THE LEPROSY PERIOD.



At the outset it may be as well to consider something of the physical and social condition of England itself at the time when Leprosy was endemic.

The condition of Europe during the Middle Ages is not readily conceived. The last two or three centuries have radically and completely altered the whole life of Europeans, and even down to physical matters the conditions now are immensely different from what they were then. From the fifth century, when the Empire at length fell under the repeated assaults of the northern invaders, to the tenth century, the finest parts of Europe lay in a state of devastation; little cultivation was practised, all the arts were neglected or lost; the clothing, habitations and food were alike insufficient and unwholesome. For three centuries more this devastation was increased, if such were possible, by the incessant wars and invasions that were waged.

In the XIV. century there were 14 European plagues, with intervals of about six years between each. In

England the food consisted during that time and later, of much salted provisions especially in winter and of a hard black-bread, chiefly rye. There was practically no corn and much of what there was grown was so ergoted and diseased that it was scarcely usable. The cultivation of vegetables and gardening was not understood or taken up until the XVI. century. (1) In all the towns of Europe the streets were unpaved and ill-constructed, every sort of filth was permitted to be thrown into the streets and remain there; vaults and common sewers were seldom adopted and the drains ran above ground; the office and duty of scavenger was imperfectly or not at all executed; the supply of water was deficient and the narrowness of the streets prevented any free circulation of air. In all the large towns under such circumstances it is not to be wondered at, that pestilence and plague raged every year. The general prevalence of such maladies was also greatly increased by the internal domestic arrangements of the houses, which were injudiciously placed and too close together; and having no cleanliness or ventilation afforded the most favourable nidus for the propagation of disease. From the XIII. to the XVI. century most of the towns of England and Europe were in the condition above described. The streets of London were filled with commonlay^s stalls

1. Northouck, *Hist. London*. Bk. 1. c. 7.

of all manner of filth and garbage which the people were in vain ordered to remove from their own doors: the sewers, the few that existed were much more harm than good, and large drains ran above ground; the access of air into the narrow streets was prevented by the projecting houses which almost met at the top, and the intervening space below was filled up with enormous sign-boards. (1)

In 1349 the streets were so abused with common-lay stalls that a Proclamation was made "that no person whatever should presume to lay any dung, guts, garbage, offal or any other ordure in any street, ditch, river, &c. upon penalty of £20." (Rees.) "The homes of the people were wooden or mud houses, small and dirty without drainage or ventilation," (2) the floors of earth or clay were covered with rushes, straw and other rubbish which were "occasionally renewed; but underneath lies unmolested an ancient collection of beer, grease, fragments of fish, spittle, the excrements of dogs and cats and everything that is nasty" (3)

Close by the door stood "the mixen," a collection of every-abomination, streams of filth from which polluted the houses and neighbourhood, including any river at hand. (4)

In addition to these conditions the people in the towns lived in a crowded state and knew little of decency,

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1. Rees, *Cyclopædia*. 2. Sir J. Fayer, *Pres. Address, VII Congress 1891*.
 3. *Letter, Erasmus to Wolsey*. 4. *Six Centuries of work & wages*. Rogers.

cleanliness and order.

Soap was in the XIV. and XV. centuries scarcely used at all and certainly to the labourer was a luxury he could rarely afford to buy. Hence a life of dirt in consequence. He slept upon heaps of decayed vegetable matter, and yet there were no fresh vegetables to eat. The contents of the gardens were very different from the vegetables we see now; there were perhaps a few cabbages, onions, parsnips and carrots, and apparently some kind of beet or turnip. The potato had never been heard of. (XIII.) Meat was scarce, and during whole months of the year he ate little beyond salted meat and fish - much of which had suffered from keeping. Before 1349 he frequently received damaged corn instead of wages (1)

By way of example of the deplorable method of storing food, I may quote from the kitchen accounts of Humphrey, Duke of Buckinghamshire (1443 - 4) mention is there made of the purchase and storage of "10 barrels, salt herrings: 11 cades, fresh herrings; 6 cades, sprats: 3,379 salt fish: 3060 stock fish: 6 barrels, salt salmon: 1 barrel, cod: 1 barrel and 13 salt eels: 1 barrel, sturgeons: 12 lampreys: 1 pair of porpoises." (2)

In 1466 at the feast to commemorate the instalment of George

1. Denton, Hist. of XV cent. 206.

2. *Compta Domestica*: Duke of Buckingham's Kitchen accounts.
pp. 14-15.

Nevile as Archbishop of York 608 pikes and 12 porpoises were used. At a similar ceremony in 1504 when Warham was made Archbishop of Canterbury, the following quantity of fish was used: 3000 ling, 600 cod, 7 barrels salted salmon, 40 fresh salmon, 14 barrels white herrings, 20 cades, red herrings (600 herrings in each cade) 5 barrels salted sturgeons, 2 barrels salted eels, 600 fresh eels, 8,000 whelks, 500 pikes, 400 tenches, 100 carp, 800 bream, 2 barrels salted lampreys, 1,400 fresh lampreys, 134 salted congers, 200 great roaches, and a quantity of seals and porpoises with a considerable quantity of other fish. This feast occurred as it is stated on "a fish day."

These examples i think it will be agreed, are appreciable evidence of two important oft-disputed facts viz :- that much storage of salt food occurred in medieval England, and :-

that even in the Midlands away from the coast, a very large amount of fish was eaten.

There is much more evidence to prove the latter, of which I will take two examples: Sir William Dugdale affirms tat there was in the Muddle Ages a great trade in oysters and other shell-fish at Colchester: which

trade also extended far into the Midlands, where stale oysters were much sold. (1) Another writer states that in pre-Norman times in England "various kinds of fish" were eaten throughout the country, but chiefly and most largely, eels." "They used eels" says Turner "as abundantly as swine." Two grants are mentioned, each yielding 1,000 eels, and by another 2,000 were received as an annual rent. 4,000 eels were a yearly present from the Monks of Ramsay to those of Peterborough. In one charter, 20 fishermen are noticed who furnished every year 60,000 eels to the Monastery. Eel-dykes are often mentioned in the boundaries of their lands" (2) "Fish" says Wright "was a great article of consumption in the Middle Ages. (3) Many cases might be quoted where enormous quantities of fish were left as legacies to the poor in certain parishes, especially in East Anglia. In the XIV. XV. and XVI. centuries many laws were made with regard to protecting the Fishing interests. A prevalent smuggling system on the shores of the Wash was stopped. It had been customary there for the people on the shores to live by robbing the fish from the boats that landed: fish cargo along that coast; and we are assured that large quantities of fish for the Sturbridge and Ely Fairs

1. *Monastic Anglican.*

2. Sharon Turner, *Hist. of Anglo-Saxons*, vol. iii. bk. vii. c. iii

~~3. *Lincoln Topograph. See 1841. Cookson.*~~

3. *Domestic Manners in Middle Ages. T. Wright. p. 149.*

never got there at all. Much fish had been dried, salted and secretly stored previously to an Act of Edward III. (1) Dr. Cookson declares that "provisions long salted were a common article of diet" from the noble to the peasant. Fish was largely consumed, sometimes pickled, sometimes preserved in a dry state: it was then called stock-fish, because it had to be beaten in a stock, or wooden anvil, with a mallet before it could be employed for culinary purposes". (2)

As Mr. Hutchinson has frequently pointed out that nearly for 100 days fish only could be used because of the numerous fasts, so salt fish must have gone practically all over populated England; and it is quite certain (from various laws to the contrary in Edward III's time) that a good deal of storage went on; and doubtless fish was used frequently besides on fast days. It is equally certain as has been pointed out, that an oyster, shell-fish and "stock-fish" trade was carried on between the seaports on the Wash and East Anglian coast, and the Midlands.

Fishing came in very much with the Scoto-Saxons, though there was none previously with the Celts. (3)

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1. 31 Edward III. st. i. c. i. et cap. i. ii. iii. et seq.
 2. Lincoln Topograph. Soc. Cookson. 1841.
 3. Caledonia, Ghalwers 1807.

Salting down the animals for the winter consumption was a very serious expense; for a couple of bushels of salt often cost as much as a sheep. This must have compelled the people to spare salt as much as possible and it must have been only too common to find the bacon more than rancid, and the ham alive with maggots.(1) White bread was a rare delicacy.

Little wonder therefore that "the sediment of the town population in the Middle Ages was a dense slough of stagnant misery, squalor, famine, loathsome disease and dull despair, such as the worst slums of London, Liverpool or Paris know nothing of." (2) It is perfectly obvious that such a life would soon result in disease.

"The whole of London, especially the city, was polluted by the dead and the living. Small-pox and typhus were perpetual epidemics. The deaths in London were greatly in excess of the births." (Rogers.)

The absence of vegetable, and insufficiency of ordinary food, the dirty skins, the sleeping at night in the clothes worn during the day, and the total neglect of all hygienic or sanitary laws, made cutaneous diseases frightfully common. This was worst of course, in the towns, but it was bad also in the villages, for the surrounding uncultivated country was not infrequently

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1. *The Coming of the Friars*. A. Joseph D.D. 90. 188.
 2. *Ibidem*: 6.

covered with marshes and stagnant water." According to Defoe "1/15 part of England consisted of unreclaimed marshy land." 5.

During the XII. and XIII. centuries, the cities had grown not a little outside their gates; in the crowded courts under the walls, or else in the marshes of the river, there hoarded together masses of men and women neglected and outcast. "Amid those multitudes the foul plague of leprosy stalked like a remorseless demon, and there the Friars from the first sought and found their work. All Franciscan novices were made to undergo a period of training in the leper hospitals." (1)

The terrible scourge of 1349 is supposed to have destroyed "not much less than one half of the population." (2) Rogers also believes that it had the effect of doubling the wages, (3) and of completely changing the farming system in consequence; the modern system of letting was introduced, and the permanent distinction between the farmer and labourer established. (4) But it was not till 1666 that radical changes occurred in London, nearly three hundred years after the first sanitary Act. (1388) - In many ways the fire of London was beneficial. The streets were made wider in the new London, the lay-stalls

1. C. D. Trail, *loc. cit.* 2. *Hist. of Prices, Rogers. i. 60.*
3. *Ibid. 265.* 4. *Wm Stubbs, Const. Hist. of England, vol. ii. 418.*