

Death Certificates of Personalities associated with the Ballarat Botanical Gardens.

Thank you for the invitation to talk to you this evening.

I will be referring to death certificates in the years between 1880 and 1910. This must have been an exciting time for medical practitioners as the use of chloroform, ether and nitrous oxide for anaesthesia was allowing surgeons more time for their operations, less pain for their patients and safer outcomes using the antiseptic practices of Lister. During this time phenacetin, aspirin and paracetamol were coming on the scene as antipyretics and analgesics to supplement the heroin, morphine and codeine they had already. They had available an immense amount of knowledge of medicinal medications prepared by apothecaries from plant materials which were known to be active medicinally but the active ingredient responsible had not been isolated. Like other aspects of medicine, where there is a multiplicity of treatments the efficacy of the therapies is not as convincing as it needs to be.

There was a developing understanding of disease with the identification of bacteria and the cause of infectious diseases such as typhoid, diphtheria, tuberculosis and the streptococcal infections of tonsillitis, strep throat and scarlet fever. These strep infections had severe consequences such as nephritis and rheumatic fever which, in turn, could lead to valvular disease of the heart. There was recognition that these illnesses were associated in part with poor living conditions. In Ballarat at the time there would also have been the injuries associated with mining and the associated miner's disease of silicosis.

There was incomplete knowledge of many of the illnesses we now recognise as important.. Diabetes was described as long ago as 600 A.D. and Willis had noted the sweet taste of urine in 1679 but insulin not discovered till the 1920s. The role of hypertension was beginning to be appreciated - an "abundant pulse" had been noticed in 2,000 B.C. and the sphygmomanometer appeared in 1881 becoming more widely used by 1886 enabling the recording of systolic and diastolic pressures. There was a degree of confusion regarding liver disorders - cirrhosis, hepatitis and cancer which I will refer to later.

It should also be remembered that it was in 1897 that the hospital introduced an honorary bacteriologist and demonstrator of the Roentgen Rays. Cat and MRI scans, ultrasound, all the flexible scopes were a long way in the future. Diagnosis would have depended upon the well taught tenets in those days of history, observation, auscultation^{percussion} and palpation. Physicians would depend on these methods of diagnosis as so often they would not have the means on curing the disease but rather the alleviation of symptoms.

It should also be noted that there was no International Classification of disease although a form of death certificate or Bill of mortality had been used in some cities of Italy as far back as the 15th century associated with the epidemics of the plague. This was copied in other continental countries over the ensuing centuries by other countries such as Switzerland, France and the Netherlands although in times of epidemics, not all the time. In England in 1532 the Bills of Mortality were introduced- the cause of death being determined by "wise women" or, if in doubt, a physician. It was not until Bertillon chaired a succession of international meetings in the 1890s that an international classification was embarked

upon. This explains to some extent the varied diagnoses that you will have come across in death certificates at this time.

Some 10 years ago the History section of the friends of the Ballarat gardens commenced research into the statues of Ballarat involving PROV, newspapers, Mayoral reports etc and on my retirement I became involved. At that time it became obvious that we were extending our research into the general history of the gardens which had commenced with pioneering work by Roy Mosman, aided by Jack Chisholm and Ian Smith following the formation of the Friends in 1982.

It was during this time I came across the various reports of the deaths of several of the important personalities associated with the development of the Gardens over the first 70 years from 1858. In particular I noticed that Claxton had died in 1888 of Cholera at his home at the City end of Webster St. It was interesting not only because it occurred in what would have been the "better" end of Webster St at the time but also it was an isolated case. There was an extensive Newspaper report of his life and death as was the custom at the time and it appeared that at the age of 56 he had suffered a devastating illness that carried him away in 48 hours. His son did not get up to Ballarat from Melbourne in time to say goodbye following the telegram and he died in his mother's arms. Jenny Burrell kindly obtained the death certificates of Claxton and others. I don't need to tell you about the amount of important information these certificates contain but one has to remember that they are filled out by a clerk and the doctors information would have been copied in which possibly explains some difficulties in interpretation. The doctor was expected then, as now, to state the cause of death, associated illnesses and length of time thereof. At the time the index of illnesses had not been developed but an initial attempt to do so was developed by an Australian doctor (check with Joan Hunt) but to what extent it was utilised I am unsure.

Claxton was born in Norfolk, England in 1832, arriving in Geelong in 1853 and settling in Ballarat in 1856. He worked in and later acquired a liquor store then became an auctioneer and business man. He became a Councillor in 1864 and was Mayor on 3 occasions. He was a foundation member of the City Fire Brigade, the water Commission, the hospital board, the Orphanage Committee and the Anglican cathedral Board – you name it – there he was. He was recognised by his contemporaries as being largely responsible for the development of the Lake having "water and weeds on the brain" and was also involved in the development of the gardens. After his death the Claxton memorial on the Parade outside the fernery was erected by public subscription.

Thanks to Jenny Burrell providing me with the copy of his death certificate the cause of death was "English Cholera" which was a term I had not heard before. With the help of Norma Worswick, then librarian at the Base Hospital, we traced the term in the Australian Medical Guide, 1910. It was used at that time as the name for a severe bout of vomiting and diarrhoea, "not infrequent in our Australian hot weather." The distinction was made from Asiatic cholera which was known to be associated with the cholera vibrio (germ). Apparently, according to the newspaper report, Mr Claxton had had some diarrhoea the preceding week and his death certificate does say 10 days, but he attended the sittings of the Anglican Synod that week apparently his normal cheery self, took part in the debates and had tea at the vicarage with archdeacon Julius on the Friday and the following day was down the street attending

to his business. All in all he could not have been too bad and one wonders about the report. He took to his bed on the Saturday afternoon, was seen by Dr Whitcombe who diagnosed English Cholera. He was much worse the following morning and a second opinion was provided by Dr Bradford (both eminent doctors at the time). He died at 1 p.m. My own opinion is that he died of severe food poisoning possibly Ptomaine poisoning but salmonella infection and other forms of gastroenteritis cannot be ruled out. Whilst a whole heap of medications may have been administered in the absence of intravenous fluids and antibiotics there would have been little chance of the doctors saving his life in the presence of catastrophic severe vomiting and diarrhoea.

This stimulated interest in looking at the death certificates kindly provided by Jenny. You are, I am sure, fully acquainted with the amount of material they contained at the time. From my point of view the cause of death was the most interesting.

The next certificate looked at was that of James Russell Thomson who died in May, 1886 aged 68 having, as the newspaper reported, caught a cold on the East Coast and neglected his health for too long to find relief from (guess who) Drs Whitcombe and Bradford.

He was born in Scotland in 1818. Before coming to Australia in 1852 he had enlisted in the army, serving in many parts of the world, then in the post office. He arrived with Gillies (later premier) and Campbell and came to Ballarat as a miner after working in the Ovens diggings. In Ballarat he was successful, made a fortune and then lost a lot of it but still had enough to leave the money for the Thomson statues to the City of Ballarat, no doubt stimulated by the generosity of his friend, Stoddart who had donated the 12 Stoddart statues previously. He was a bachelor.

Dr Whitcombe signed the death certificate and stated that he died of Cancer of the liver for three weeks. This doesn't quite fit in. It probably demonstrates the difficulties in diagnosis mentioned above with liver cirrhosis and cancer, primary or secondary but undetermined due to difficulties in diagnosis. The only conclusion I can reach is that he had been in failing health for some time attributed to his liver disease and had contracted a terminal pneumonia ^{possibly} probably contributed to by previous lung disease from his time as a miner.

George Longley was the first Gardener (later Curator) of the newly established Ballarat Botanical gardens in 1858. Born in Cumberland, England, in 1822 he received his gardening training at Lowther Castle and later travelled to Australia with his new wife, Helen, in 1853 and worked as a miner at Black Hill for 5 years. He died in 1899 whilst still holding his position though reduced by the Council to simply the Northern part of the Gardens. This reduction in authority, with the introduction of a curator for the Southern gardens and its associated reduction in salary caused an outcry from prominent citizens in view of his continuous attention to the gardens over many years. Nevertheless, on his own admission in letters to his relatives in Canada, he had suffered with rheumatism for many years. His death certificate, from Dr Mitchell, states that he died of valvular disease ^{of} of the heart so that we can see apart from the

movement difficulties he experienced he would also have had shortness of breath associated with heart failure and possibly lung damage following his mining days. These days it is not so obvious but the Gardens George was responsible for extended from the Southern to the present Wetlands in the north gardens, over 1.6 kilometres or 1 mile would have meant a considerable effort on his part to supervise.

Thomas Stoddart was a good friend of Thomson and acted as his executor following his death. He had travelled in Europe in the 1880s following a successful career in mining. Noticing the effect of statuary in European Botanical gardens he arranged for 12 statues from Carrara in Italy to be transported to Ballarat and erected in he gardens.

Born in Scotland in 1811, after working in the Woolwich Arsenal and the British army he travelled to Ballarat in 1854 and worked as a miner until 1862. He became a speculator and sharebroker "floating as many mining companies as any other man." He apparently caught a cold travelling from Sorrento to Queenscliffe and died on 10th February 1905 at the age of 76.

Dr W Morrison simply stated his death as cancer of the liver for 3 months. No mention is made of other causes but one suspects that these days the death would have been reported as due to bronchopneumonia with cancer of the liver being included as a contributory cause but not directly related.

Edward Morey donated the Gates of the Gardens opposite "Pipers" in 1894. He came to Ballarat as a miner in 1853 after an apprenticeship as a sailer in England and arriving in Melbourne in 1852. After a degree of success he married in 1855 and had 6 daughters and 9 sons. He was also a successful business man involved with mining companies, property and heavy machinery, importing from Europe. He was heavily involved in municipal affairs as a councillor and Mayor. He was illiterate. He died in 4/10/1907, cause of death –as recorded by Dr Scott as a cerebral embolus which occurred with a syncope 1 week previously.

His friend, David Ham who presented the 2 Lions behind the gates, died in 1908 aged 74 years of acute pneumonia for 5 days.

Thomas Rooney was Curator of the Gardens from 1898 – 1914 when he died, as reported by Dr Hardy, of "Disease of Liver and Kidneys, Dropsy and suppression of urine" for an unstated period of time. I have pondered over this for months and there is no doubt that he sustained kidney failure producing the anuria. The dropsy could be associated with this or with cardiac failure. However, the associated liver disease is difficult to explain. However, a condition of acute renal failure associated with cirrhosis of the liver, the "hepato renal syndrome" originally reported in the 1890s but not recognised as such until the 1950s has been described in the last 30 years and so I think the liver problem, whatever its exact cause was probably the prime illness.

John Young Macdonald was born in Leith, Scotland, in 1837. He arrived in Australia on the Oliver Lang in 1855 with his mother and 5 brothers. He was a successful miner and then ran a plumbing business, became a stock broker and a director of various mining companies. He was a politician being the MLC for Wellington Province from 1898 to 1907 and was involved with charitable causes, cultural societies and the City Council. His bequests, when he died in 1917, included gifts to church, school and hospital and he donated the McDonald Entrance columns to the Gardens and the McDonald bandstand.

He died on 8th September 1917 at his home. He had been unwell for some time and resigned from Parliament in the previous January. His death has been recorded as due to bronchopneumonia although the Star reported that he had heart failure. Dr Scott was the doctor concerned with the certificate and the recorded cause of death included the term "Asthonia" which caused Jenny and I to search, unavailingly, for the origin of the term. The only explanation would be that the clerk wrongly wrote that when it should have been "asthenia", a vague term indicating general and debilitating ill health. Considering he was 80 this would not be surprising, even politicians may be allowed to fade away. He was a bachelor.

I must say that I was a little surprised to see how frequently liver disease was noted in the certificates, which could indicate either a certain lifestyle or represent the understanding of liver disease at the time which I mentioned earlier

In preparing this paper I also looked at the other death certificates on the page and they too make interesting reading as in several cases one wonders what really went on, particularly with the terminology and with the lack of, or probably inaccurate length of time of the illness. I will go through these and then welcome any questions that you may have.