Tr. E. C. Montgomery.

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In the late months of 1884, Friends Hospital admitted Nellie Schofield for care. With little record of her stay, what remains is a series of correspondence regarding apparent issues with her reproductive system. Letters from family members are a less common record in the Friends Hospital collection. They provide a glimpse into who a family may contact and who would be in charge of making executive decisions on patient care, as well as the tone of how both parties talk about patient care and ailments. The first letter is as follows:

From a conversation I had with Dr. Winters [Assistant Physician at Friends Hospital] I am strongly inclined to believe that my sister Miss Schofield will never recover her reason until an operation has been performed. It seems to me that she must necessarily get worse until the primary cause is removed. Kindly give this your best attention as something must be done.<sup>2</sup>

It is important to note the absolutes in language, Sarah says her sister "will never recover her reason" not that the operation will benefit her state of mind, but that it is necessary that she have the procedure. She sends this letter to resident gynecologist Dr. Broomall, however, this is the first and final letter she sends to her. She goes on to contact Superintendent Robert H. Chase in the remainder of the letters, which go as follows:

Dear Sir, I am very much concerned about the condition of my sister Miss Schofield, now a patient in your asylum. I am quite sure her mental trouble is owing to womb trouble. My mother had a very serious trouble of this nature and was compelled to undergo two operations. I feel sure an operation of this nature would go far toward restoring my sister's reason, and am therefore impatient of further delay. It seems to me that the longer it is put off, the less able she will be to undergo it. If you can give me no encouragement in this direction I will consult another Physician and have him make further examination. The great expense incurred of your institution is another reason for urgency, it being more than we can continue to pay & if an operation is to be performed, I would rather it were done now than after the removal to a less expensive place.

<sup>&</sup>lt;sup>1</sup> Correspondence Relating to Patients, Q-Z, 1894 - 1895, box 22, Friends Hospital Records, Quaker and Special Collections, Haverford College, Haverford, Pennsylvania.

<sup>&</sup>lt;sup>2</sup> Ibid.

Dr. Broomall wrote me that she communicated with you & I had hoped to hear from you before this. Kindly be [illegible] at once & oblige. <sup>3</sup>

This letter would be part of the catalyst that led to a surgical procedure. In the letters that follow, there is some conversation about the superintendent witnessing the operation, which he will fail to receive in time to be present. The second to last letter explains the immediate result of the procedure and Nellie Schofields positive temperament. The letter is as follows:

My Dear Doctor:- I am very sorry indeed, that you did not get my notice in time to get in to witness the operation. It was done yesterday at the time I mentioned. The patient stood the operation very well and has been doing well since. She is more patient and resigned than I expected she would be, and, indeed, when I saw her today she struck me as unusually bright; whether it was due to the temporary condition or due to the effect of the operation, I cannot say. The entire uterus was removed flush with the vagina, so there is not a stump that remains.<sup>4</sup>

This letter alone represents past attitudes toward reproductive health through its experimental tone, it appears hopeful but uncertain, as was the state of the field overall. Much progress has occurred since then, however, these letters remind modern readers that this progress did not occur without fault. Real people, Nellie Schofield included, experienced the period of experimentation before the upward developments that led science to where it is today.

<sup>&</sup>lt;sup>3</sup> Ibid.

<sup>&</sup>lt;sup>4</sup> Ibid.