



Photo: Dreaan McNicoll

## THE SPRINGFIELD MEDICINE CHEST

The *Springfield* medicine chest is a faded red velvet-lined timber box with two central lift-out trays. It is 178mm high, 350mm long and 150mm deep. The medicines are in glass bottles in compartments: eight compartments along the back, seven at the front and two each side. There are eighteen bottles, mostly with glass stoppers, and one empty compartment. The chest may have been used by several generations, the original bottles being replaced as new medicines were available or favourite remedies were restocked. All the bottles except one bear the labels of *Sloper Chemist*, some also have *From Savory Moore & Co., London*. The exception is one bottle with a label from *W.H. Mutlow Chemist Armidale*.

This is a common type of English domestic timber medicine chest, made in large quantities from 1820 to about 1900.<sup>1</sup> Medicine chests could be purchased from chemists or by mail order, and were advertised for the use of 'clergymen, private families, heads of schools and persons emigrating',<sup>2</sup> among others. They were expensive items: not every family could afford the luxury of a fitted chest.

### The *Springfield* Collection

This medicine chest is part of the *Springfield* Collection, donated to the National Museum of Australia by Mr J.I.F. Maple-Brown and Mrs D. Boyd in 2005. The *Springfield* Collection is a treasure trove of objects which document life at *Springfield* property, south of Goulburn, New South Wales. William Pitt Faithfull took up land on the Goulburn Plains in the 1820s. The house was extended and improved after William's marriage to Mary Deane in 1844 and, by the late 1800s, *Springfield* was more like a village, with over 100 people employed at the property and stud. It was a prosperous and well-run station. William's son Augustus Lucian inherited the property in 1896, and advanced the work of the previous generation to build an efficient and well regarded merino stud. Lucian's daughter Florence (Bobbie) Maple-Brown inherited the property and began the museum collection, which forms a large part of the Faithfull Family Collection at the National Museum of Australia.



### Uncle Robert

Known as 'Uncle Robert's' medicine chest, the most likely contender for the guardianship of the chest was Robert Lionel Faithfull who was born in 1853, the fifth son and sixth of the nine children of William Pitt Faithfull and Mary Deane. He attended the King's School in Parramatta and studied medicine in New York, graduating from Columbia University in 1879.

Robert seems to have covered all bases: as well as the degree of Doctor of Medicine (M.D.) from the College of Physicians and Surgeons, Columbia College, New York, he was also a Licentiate of the Royal College of Physicians, London, and a Licentiate of the Society of Apothecaries, London. In fact he was a doctor three times over, as apothecaries could practise as doctors at this time.

From New York, Robert travelled to London and also visited some cousins in Devon. He returned to Australia and married Jessie Alice, daughter of Andrew Faithfull Gibson. Jessie was the granddaughter of William Pitt Faithfull's sister Alice, who married Andrew Gibson of Tirranna, near Goulburn. Andrew Gibson was at one time Assistant Colonial Surgeon in Sydney. He took up the Tirranna property in 1828 but practised medicine very little after moving there. Possibly he did not think the medical treatments or practices at the time beneficial. In a letter to Governor Sir Richard Bourke Gibson writes: "Your Excellency is aware, I believe, that I am not in general an advocate of too much physic."<sup>13</sup>

Robert and Jessie had two sons: Reginald Gibson and Geoffrey Mervyn, and two daughters, Helen Mary and Gwyneth Deane. Geoffrey studied medicine, as did his father and great-grandfather before him.

### What is in the bottles?

Frederick E. Sloper, a member of the British Pharmaceutical Society, arrived in Sydney in 1852. He opened a pharmacy in William Street in 1853 and most of the bottles in the medicine chest bear the name 'Sloper Family Chemist, William Street, Sydney' or 'Sloper from Savory, Moore and Co, London William Street Sydney'.

Sloper was one of the lobbyists for a Pharmaceutical Society in NSW. This was set up in 1876. Sloper was one of the councillors of the new Society but resigned in 1877 after a dispute with other members of the Council. When Sloper returned to Sydney in the 1880s he opened a pharmacy at 94 Oxford Street which he owned until his death in 1903. He seems to have been quite an eccentric. There is a photograph in the Mitchell Library, Sydney, of him on a tricycle which he would ride to work through Centennial Park from his home in Kensington.

The list of contents is interesting in that it shows that some of the medicines could be used for minor complaints such as mouth ulcers or coughs. Equivalents can be found in most bathroom cabinets today. Others were very much medicines of their time, used as emetics and purges, with some containing opium or mercury.<sup>4</sup>

### Bottles in main compartment and their uses

1. Myrrh – for mouth ulcers or as mouthwash.
2. Grey powder [mercury] – laxative (also given to teething infants), syphilis.
3. Sweet spirit of Nitre – diaphoretic [promotes sweating] in treatment for colds and flu.
4. Paregoric elixir (opium) – expectorant in cough mixture.
5. Laudanum (opium) – diarrhoea, intestinal and kidney ailments.
6. Ipecacuanha – expectorant, in larger doses causes vomiting and diarrhoea. Used as a syrup to induce vomiting to treat ingestion of some poisons.
7. Chalk powder – antacid and to treat diarrhoea.
8. Spirit of sal volatile – restorative for fainting or collapse.
9. Sulphuric ether – also know as solvent ether – cleaning skin prior to surgery, removing adhesive plaster from the skin.
10. Compound tincture of bark – stimulate appetite also has astringent properties.
11. Fryar's balsam – used internally for chronic bronchitis and inhalation for bronchitis and laryngitis also used as antiseptic to treat cuts.
12. Powdered rhubarb – purgative, aperient [laxative] mild laxative for infants.
13. Essence of peppermint – used to relieve gastric and intestinal flatulence and colic, purgative.
14. Elixir of vitriol – treating diarrhoea, cholera
15. Antimonial wine – emetic, also used to treat infestations of tropical worms.
16. Magnesia – antacid used in treating gastric hyperacidity and peptic ulcer, mild laxative.
17. Tincture of rhubarb – purgative, a more pleasant form than powdered, used in mixtures as an astringent bitter and mild laxative for infants.



Photo: Dean McNicol

18. Tartar emetic – expectorant, emetic and to treat Leishmaniasis and Shistosomiasis, also used to treat venereal infections.

#### Five smaller bottles with cork stoppers

19. Grey powder (see above)  
 20. Calomel – purgative and in large doses sedative, useful in treating dysentery and cholera.  
 21. Tartar emetic – expectorant, emetic.  
 22. James' powder – expectorant and diaphoretic.  
 23. Dover's powder (opium) – used as diaphoretic (promote sweating) anodyne (relieve pain) also gastric ulceration, dyspeptic vomiting and diarrhoea.

#### Small jars with metal lids

24. Antibilious pills also known as 'after dinner pills' – laxative  
 25. Blister plaster  
 26. Blue pill  
 27. Compound rhubarb pills, more laxative

#### Common domestic cures in a bathroom cabinet today for the above complaints would include:

Mouthwash, Laxatives, Cold and flu tablets, Inhalant, Cough mixture, Gastrostop for diarrhoea, Mylanta, Antiseptic for cuts, Vermifuge, Paracetamol, Sleeping tablets, Ipecacuanha, to induce vomiting after ingesting poison, has been replaced only very recently (in the last five years).

All these medications are available from the chemist without a script. Complaints requiring stronger drugs (antibiotics) which replace mercury and opiates are pneumonia, bronchitis, abscesses and skin infections, and sexually transmitted diseases.

With good food and a healthy country life, Mary would have treated her children's minor ailments with some of the remedies listed in her recipe book and ingredients from the medicine chest. The boys would have been susceptible to diseases while travelling to and from school, at school, or visiting relatives in Sydney or nearby towns. There is no record of serious infections or diseases at *Springfield*.

The death rate for children in the towns was high. Today babies are inoculated against measles, mumps, rubella, diphtheria, tetanus and whooping cough, and other fatal nineteenth-century diseases are controlled by antibiotics. Even a common condition such as teething (known as dentition until 1880) was listed as a cause of death until 1930. It was not the teething that was fatal, it was the treatment. Doctors advised lancing the gums of teething infants, possibly with the scalpel used on previous patients and kept in the top pocket. Teething powders containing opium were also commonly rubbed on to the gums. Their use continued until the beginning of the twentieth century. A fractious child was in danger of being given repeated doses and, because of the cumulative effect, deaths did occur from teething powders. Many other supposed 'cures' contained potentially harmful ingredients including alcohol, cocaine and morphine, while some cough mixtures contained chloroform.

Life on the farm has changed enormously in the last 150 years, and so has medicine. New drugs, antiseptics, anaesthesia, and advances in surgery have totally changed the outcomes of diseases and injuries. Most doctors in the mid-nineteenth century had little knowledge of the cause of diseases, and their treatment was to use their stock-in-trade of bloodletting, blistering, purging and promoting vomiting and sweating. Doses of opium and mercury were given routinely and could be fatal.

Throughout the nineteenth century a pus-filled sore was a possible death sentence. A staphylococcus or streptococcus infection would be treated with a poultice. If the infection spread, the limb would be amputated and if not contained, the patient could die. It was not until the advent of penicillin in the 1940s that an infected wound could be healed in a couple of weeks. Today antibiotics can conquer infection in a couple of days. Even so, some infections are becoming resistant to antibiotics – this cure may no longer be so miraculous in the future.

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#### References

- 1 Dr E.P. Kremer OAM, pers. comm. April 2006
- 2 Powerhouse Museum, Sydney, Permanent Collection
- 3 Letter from Andrew Gibson to Governor Sir Richard Bourke, July 22, 1833, after Gibson had treated the Governor when he fell from his horse. Mitchell Library, Sydney.
- 4 Mr G.C. Miller, pers. comm. April 2006