

Asserting medical identities in mid-nineteenth-century Ireland: the case of the water cure in Cork¹

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The phenomenon of hydropathy, or the cold water cure, has been the subject of numerous studies since the 1980s. While straightforward accounts of its institutional history form the basis of early and recent histories of the hydropathic spa and leisure business,² several additional strands of investigation have emerged. Early studies of hydropathy focused on the water cure as a 'fringe', lay or oppositional practice on par with mesmerism, patent medicines and homeopathy, a product and casualty of battles for the professionalization of medicine.³ More recent research into British hydropathy by James Bradley and Marguerite Dupree has questioned its fringe status, pointing out, as had often been noted, that it had numerous supporters among qualified physicians, and that the line of demarcation between orthodox and heterodox, regular and irregular practices and practitioners was at the time of hydropathy's emergence by no means settled.⁴

1 My thanks go to the Irish Research Council for the Humanities and Social Sciences, the Royal Irish Academy Third Sector Research Programme and the Humanities Research Institute of Brock University for their generous support. I thank Juliana Adelman and the anonymous referees for their insightful criticism and comments. **2** R. Metcalfe, *The rise and progress of hydropathy in England and Scotland* (London, 1912); A. Durie, 'The business of hydropathy in the North of England, c.1850–1930', *Northern History*, 39 (2002), 37–58; M. Dupree, A. Durie and J. Bradley, 'Taking the waters: the development of hydropathic establishments in Scotland, 1840–1940', *Business and Economic History*, 26 (1997), 426–37; K. Rees, 'Water as a commodity: hydropathy in Matlock' in R. Cooter (ed.), *Studies in the history of alternative medicine* (Houndsmills and London, 1988), pp 28–45. **3** L. Barrow, 'Why were most medical heretics at their most confident around the 1840s? (The other side of mid-Victorian medicine)' in R.K. French and A. Wear (eds), *British medicine in an age of reform* (New York and London, 1991), pp 165–85; R. Jütte, 'The paradox of professionalization: homeopathy and hydropathy as unorthodoxy in Germany in the 19th and early 20th century' in R. Jütte, G.B. Risse and J. Woodward (eds), *Culture, knowledge and healing: historical perspectives of homeopathic medicine in Europe and North America* (Sheffield 1998), pp 65–88; R. Price, 'Hydropathy in England, 1840–70', *Medical History*, 25 (1981), 269–80. **4** J. Bradley, 'Medicine on the margins? Hydropathy and orthodoxy in Britain, 1840–60' in Waltraud Ernst (ed.), *Plural medicine: Orthodox & heterodox medicine in Western & colonial countries during the nineteenth & twentieth centuries* (Florence, KY, 2001), pp 19–39; M. Dupree and J. Bradley, 'A shadow of orthodoxy? An epistemology of British hydropathy, 1840–1858', *Medical History*, 47 (2003), 173–94; J. Bradley and M. Dupree, 'Opportunity on the edge of

Although water had long had its uses in medical practice, the cold water cure that swept through Europe in the 1840s proclaimed its origins in the authentic healing power of nature as discovered by the Silesian peasant Vincent Priessnitz. According to popular legend, Priessnitz had been injured in a farming accident but had cured himself by the application of cold, wet compresses and by drinking water. After perfecting his methods on animals and neighbours, he opened a treatment centre at Gräfenberg in Austria, which became a Mecca for the fashionable but ailing middle and upper classes of Europe. Although the cure itself was a demanding and uncomfortable regime of cold baths, boring food and teetotalism, it quickly became associated with the well-established spa culture and setting.⁵

Priessnitz did not develop a consistent medical theory himself, leaving it to his followers, most especially to the self-styled hydropathic missionary, 'Captain (R.T.) Claridge' to elaborate the basis of the cure. Cold water, inside and out, became part of a holistic physiological purification process that drew toxins, including those left by allopathic treatment, out of the organs, eliminated them through the skin and stimulated the body's self-healing capacities.⁶ Medical practitioners expressed scepticism about this explanation, which carried an implicit criticism of standard medical practices. Nonetheless, the therapy attracted the attention not only of laymen, but also of many physicians, who sought to establish the physiological basis of the cure and who often refined Priessnitz's austere methods into a broad variety of treatments including wet sheet wraps, hot and cold showers of varying strength and baths for different parts of the body. From this uneasy status of hydropathy, which lay between lay traditions of natural healing and scientific explanation, Bradley and Dupree conclude that hydropathy had a dual existence:

On the one hand it *was* a heterodox practice, supported by the radical underbelly of Victorian society; on the other, it was perched uncomfortably on the edge of orthodoxy, adhering to a received idea of pathology and physiology, but contesting the mode of therapeutic intervention advocated by most orthodox practitioners.⁷

English and Scottish hydropathy have been the subject of several studies, but the reception of the cold water cure in Ireland has received scanty attention.⁸ Admittedly,

orthodoxy: medically qualified hydropathists in the era of reform, 1840–60', *Social History of Medicine*, 13:3 (2001), 417–37. Also noted by K. Rees, 'Water as a commodity: hydropathy in Matlock', p. 30. ⁵ See Durie, 'The business of hydropathy'. ⁶ R.T. Claridge, Esq., *Hydropathy; or, the cold water cure, as practised by Vincent Priessnitz, at Graefenberg, Silesia, Austria* (3rd ed. London, 1842), p. 74. Claridge was supposedly an asphalt contractor who was cured of his chronic diseases by Priessnitz at his spa in Graefenberg. See Price, 'Hydropathy in England', p. 272. ⁷ Bradley and Dupree, 'Opportunities', p. 421. ⁸ Teresa Breathnach's essay deals mainly with the Turkish bath, a later modification of the cold water cure to the hot steam bath. See T. Breathnach, 'For health and pleasure: the Turkish bath in Victorian Ireland', *Victorian Literature and Culture*, 32 (2004), 159–75.

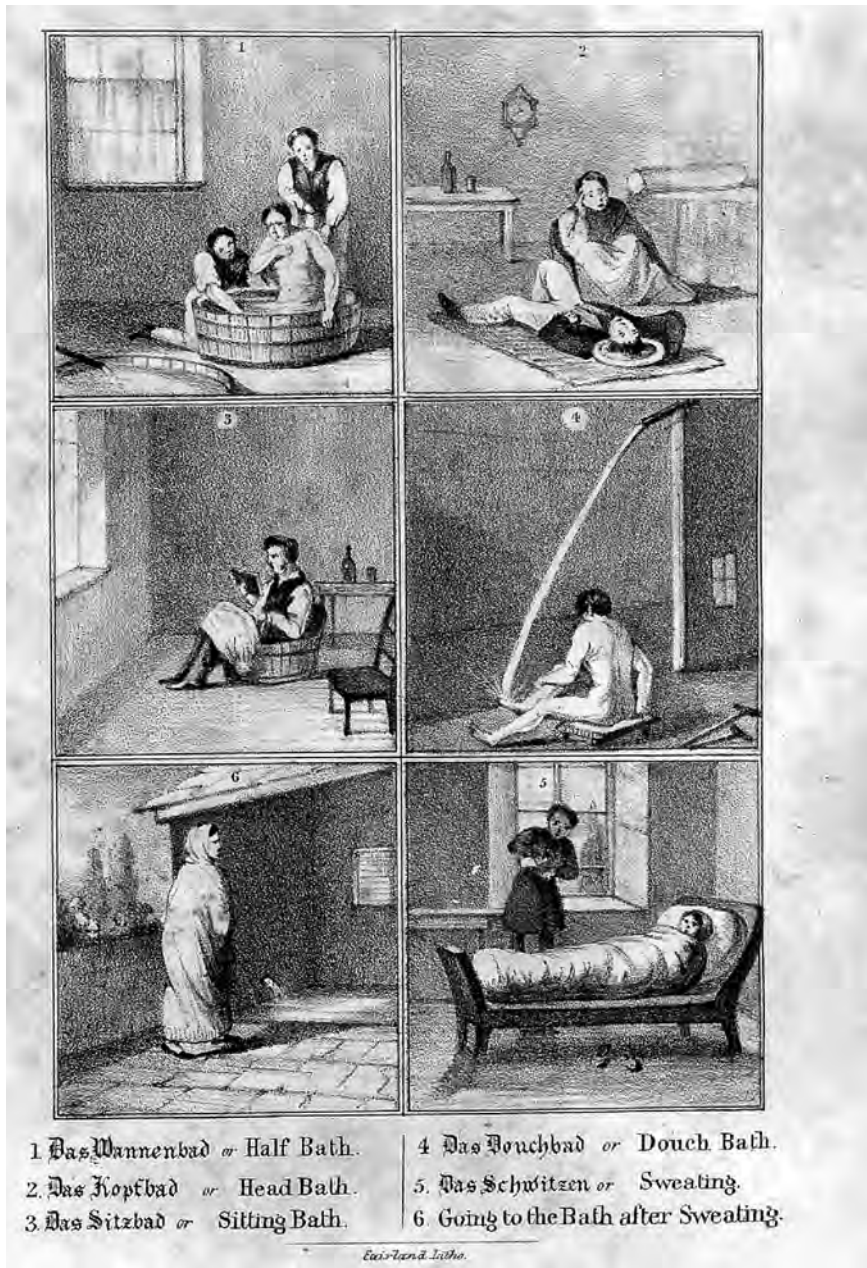
Ireland produced few spas of note, with the exception of Dr Richard Barter's establishment, St Ann's near Blarney, Co. Cork, which was popular with the Victorian middle and upper middle class of Britain and Ireland. Nonetheless, Irish medical practitioners and the Irish public were well aware of British debates and medical trends and innovations, and local newspapers noted the cold water cure and its controversies with interest. At the same time, Irish medical practitioners were affected not only by the same laws and regulations governing the British medical profession, but also by acts, regulations and pressures directed at them in particular. In this situation, it is worthwhile to ask whether Irish hydropathic debates mirror English and Scottish debates or whether factors specific to the Irish situation also emerged. The fate of hydropathy and hydropathists in the case study of the provincial town of Cork offers the possibility of identifying some of the factors affecting the reception of the cold water cure in Ireland.

SETTING THE SCENE: CAPTAIN CLARIDGE IN CORK

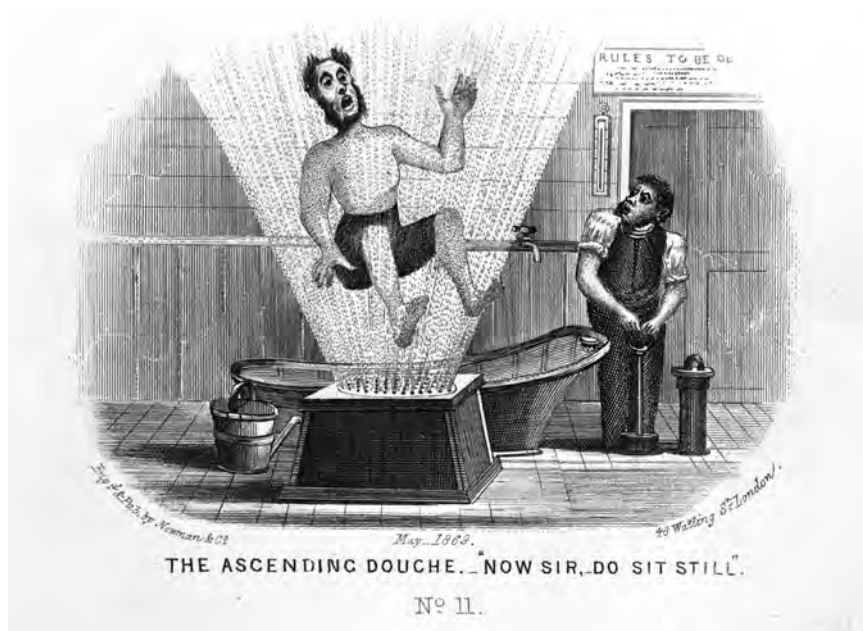
In 1843, Captain Claridge toured the south of Ireland, lecturing on the cold water cure. He arrived in the town of Cork in mid-July, after having been warmly received in Limerick, Kilrush and Killarney.⁹ In Cork, Claridge was given use of the ballroom of the Imperial Hotel without charge. Although entrance was free, the large audience (400–500) consisted nonetheless of townspeople of the better social classes, including several medical practitioners.¹⁰ Claridge's sojourn in Cork led to a flurry of local activity. A few days after his lecture, a meeting was held in the rooms of the Royal Cork Institution, the town's prestigious, incorporated science society. At one time, this institution had aimed to emulate its London counterparts, the Royal Society of London and the Royal Institution of Great Britain, but by the 1840s, it had become a general upper-class meeting place rather than an institution with original scholarly ambitions. This meeting was attended by several local physicians as well. Its immediate aim was to discuss the foundation of a water cure society in Cork, similar to that which had been formed in London.¹¹ Despite its provincial situation, Cork had a clearly metropolitan orientation.

Shortly afterward, a public meeting to discuss the cold water cure took place in the Cork Court House. This gathering of medical practitioners and leading citizens discussed a number of issues, many of them familiar to historians of British hydropathy, including medical explanations of the physiological mechanisms of the water cure, connections between hydropathy and temperance, the suitability of the cure for a 'utilitarian' age, and witness reports of miraculous hydropathic restoration.

⁹ 'Water cure', *Limerick Reporter*, 27 June 1843; 'Hydropathic Society', *LR*, 30 June 1843; untitled, *LR*, 4 July 1843. ¹⁰ 'The water cure meeting at the Imperial Hotel: lecture of Captain Claridge', *CE*, 14 July 1843. ¹¹ 'Hydropathy: meeting at the Cork Institution', *CE*, 19 July 1843.



2.1 Frontispiece, R.T. Claridge, 'Hydropathy, or the cold water cure, London 1842. Reproduced with permission of the Wellcome Library, London.



2.2 'The Water Cure Illustrated in Twelve Subjects', London 1869.
Reproduced with permission of the Wellcome Library, London.

More specific to the Irish situation, however, for some contemporaries the positive potential of the water cure was embedded within criticism of the medical care given to the poor through the medical charities system and criticism of the politics of dispensary and hospital appointments.¹² This position carried significant implications. While medical charity in Ireland relied primarily on voluntary donations and local government decisions, the early 1840s saw heated debates about British government proposals to remove the medical charities from this dependence on good will and intransparent appointment politics and place them under Poor Law Commission supervision.¹³ In this context, criticism of the existing provision system was politically sensitive, whatever the intentions of the critic.

Two concrete plans of action emerged from this discussion. Firstly, Alderman Thomas Lyons suggested that the poor relief fund invest part of its reserves in a hydropathic project. This proposal was discussed some days later and will be elaborated more fully in the following section. Secondly, Dr James Richard Wherland, local physician, professor of anatomy and physiology and head of the Cork School of

¹² For a detailed study of the Irish medical charity and dispensary system, see L.M. Geary, *Medicine and charity in Ireland, 1718–1851* (Dublin, 2004). ¹³ 'Report of the Poor Law Commissioners, to the secretary of state of the home department, on medical charities in Ireland' (1841); Geary, *Medicine and charity*, ch. 7.

Anatomy, Medicine and Surgery, one of Cork's several medical preparatory schools, announced his intention of travelling to England to observe with his own eyes the methods of the cure. On his return, he stated, he intended to open a hydropathic establishment where he would treat the poor without charge. Although Dr Richard Barter, who was also present at this discussion, had previously expressed interest in water as a curative agent,¹⁴ the motivation behind Wherland's turn to hydropathy is unknown. Whether he had prior interest in the cure, was converted through Claridge's presentation, or sensed a business opportunity and a way of distinguishing himself from the local medical competition in Cork, cannot be precisely known, but Wherland's actions following Claridge's visit may throw some light on this question.

The meeting closed with Claridge's thanks and flattering reminder 'of the discovery made by the French and Scotch philosophers, of the physical superiority of the Irish over the inhabitants of any other country'.¹⁵ He left soon after to continue his tour of Munster, spreading the word in Youghal, Lismore, Waterford and Wexford, where his visit inspired further acolytes to further education travels and led to the establishment of a Hydropathic Society in the town of Enniscorthy, Co. Wexford, and several hydropathic establishments in the region.¹⁶

SITUATING HYDROPATHY WITHIN CORK MEDICAL POLITICS

Claridge's departure marked the beginning of hydropathic discussion and controversy in Cork. If his visit had taken place in an atmosphere of general curiosity and novelty, the debates that followed his stay illustrate the emergence of differences and the demarcation of specific interests and positions, both among physicians and among local inhabitants.

Immediately following his departure, the subscribers and trustees of the poor relief fund met to discuss Alderman Lyon's proposal to invest part of its funds in hydropathic research. This fund had, as a subscriber stated, been set up 'for the relief of actual destitution, and to provide against the scarcity and even famine which unhappily were so common to our country and our poor',¹⁷ and the question of whether this mandate should be expanded to include the provision of medical care guided the discussion. Two points in particular were cited in support of their inclusion: cost considerations and humanitarian concerns. Supporters of the plan maintained on the one hand that it would be much more economical to treat the sick poor by wrapping them in cold, wet sheets than by giving them medicine, an assertion that was vehemently refuted by an anonymous contributor to the *Dublin*

¹⁴ 'Barter, Richard', *Compendium of Irish biography* (1878), www.libraryireland.com/biography (accessed 5 Feb. 2010); M. Shifrin, 'Victorian Turkish baths', www.victorian-turkishbath.org (accessed 5 Feb. 2010). ¹⁵ 'The cold water cure: meeting of citizens', *CE*, 21 July 1843. ¹⁶ 'Hydropathy', *Wexford Independent*, 13 Jan. 1844; 'Walsh's general bathing & hydropathic establishment', *CE*, 20 May 1844. ¹⁷ 'Hydropathy: meeting of subscribers to the poor relief fund', *CE*, 26 July 1843.

Medical Press shortly after.¹⁸ On the other hand, they argued, the poor should be allowed to benefit from advancements in medical science, and the curative potential of hydropathy should not be withheld from those already disadvantaged by poverty.

Lyon's plan was not without its critics, but significantly the efficacy and legitimacy of hydropathy itself was not at stake, and none of the leading citizens and physicians involved in this discussion expressed outspoken opposition to the cure. Although subscribers could be divided into supporters of hydropathy and moderate sceptics, differences of opinion concerned the proper use of the subscribed poor relief funds, not hydropathy itself. While some trustees thought the potential benefits of the cure promising enough to warrant investing funds in investigating it, others considered such a use to be outside its mandate, since the monies had been donated for a different purpose. As a compromise, it was proposed to test the usefulness of the cure in the city's public hospitals and that those interested in testing the methods on the poor start their own, separate subscription.¹⁹

In addition, some subscribers, while disposed to support hydropathy, were uneasy with investing these funds in a therapeutic practice they deemed to be still experimental. As one cautiously approving sceptic expressed it,

No one admired and appreciated the enthusiasm of Captain Claridge more than he did, but the citizens of Cork were not to take the as yet unsupported testimony of Captain Claridge, for that gentleman had himself declared that he had no scientific knowledge of the anatomy and physiology of man.²⁰

Instead, this sceptic recommended that they wait until the physicians had returned from their educational travels and let them be the judges of hydropathy's merits. Claridge's lack of medical credentials meant that his therapy and theory, as compelling as they might seem, needed expert confirmation.

Studies of the water cure frequently point out that, in contrast to assessments of hydropathy as a 'fringe' practice, most early hydropathists were medically qualified.²¹ The Cork case study confirms these results. In total, three local physicians, two of them from competing medical schools, travelled to England to observe the practice of the water cure in various locations. Although little is known of the credentials and affiliations of Richard Barter,²² his Cork colleagues, James Wherland and Timothy

18 Medicus, 'Hydropathy. To the editors of the *Medical Press*', *DMP*, 16 Aug. 1843, 107–10 at 110. **19** There is no indication that this was attempted in a systematic manner.

20 'Hydropathy: meeting of subscribers to the poor relief fund', *CE*, 26 July 1843. **21** Bradley, 'Margins'; P.S. Brown, 'Social context and medical theory in the demarcation of nineteenth-century boundaries' in W.F. Bynum and R. Porter (eds), *Medical fringe and medical orthodoxy, 1750–1850* (London, 1987), pp 216–33 at p. 223. **22** The *Compendium of Irish biography* lists only his 'duties of his profession as a dispensary physician at Inniscarra, where he was elected honorary secretary of the County of Cork Agricultural Society, and contributed materially to improve the husbandry of the south of Ireland' www.libraryireland.com/biography/RichardBarter.php (accessed 5 Feb. 2010).

Curtin, were professionally unremarkable. Like many Irish practitioners, Wherland had received his medical degree from a Scottish university, the University of Glasgow. He was a licentiate of the Royal College of Surgeons in Ireland, member of the Cork Medical Society and professor at the Cork School of Anatomy, Medicine and Surgery, as well as physician at the South Lying-in Hospital and Dispensary for Women and Children. Curtin had likewise received his MD in Scotland, at the University of Edinburgh, and was a member of the Royal Medical Society of Edinburgh as well as professor of mid-wifery at the Cork Recognised School of Medicine, which had strong Scottish affiliations.²³ All three opened hydropathic establishments in Cork and its vicinity immediately or shortly after their return, although they followed differing business models. While Wherland and Curtin initially remained in the town and opened fairly utilitarian baths for medical treatment and hygiene, Barter was by far the most successful of the three. His medical resort at St Ann's with its extended gardens, indoor exercise corridors and comfortable, heated dining hall with food supplied from its own farms, attracted an enthusiastic middle- to upper-class clientele.²⁴

None of these hydropathic physicians regarded themselves as dabbling on the fringe. In contrast, all sought to integrate the water cure into their professional arsenal of therapeutics, to make hydropathy a part of standard medical practice and to pull it away from the fringe and from empirics. Thus, like many of their medically qualified hydropathic contemporaries,²⁵ all emphasized that it was crucial that the cure be applied scientifically by a trained physician and warned in the direst terms not to attempt self-treatment. To be beneficial, it needed to be, as Wherland stated, 'judiciously and properly applied under medical advice'.²⁶ Barter as well emphasized that injudicious use of the water cure could be fatal. Indeed, already in September of 1843, only weeks after Claridge's visit, the first hydropathic fatality was reported in Lismore. A lay practitioner, a member of the Dean and Chapter of Lismore, had tested the method on an object of charity, an inmate of the Protestant Almshouse, with unsatisfactory results.²⁷

Local disputes about the cure had already begun, however, and they took a different path than disagreement among the poor relief fund trustees. Whereas the subscribers had cited Claridge's lack of medical credentials as a reason to have the

²³ *The medical register 1860* (London, 1860), 83, 362; R. O'Rahilly, 'The pre-collegiate medical schools in Cork', *Irish Journal of Medical Science*, 23 (1958), 31–4. Most Irish practitioners were graduates of the Universities of Edinburgh and Glasgow and/or licentiates of the Dublin or London Colleges of Surgeons. Geary, *Medicine and charity*, p. 135.

²⁴ For a contemporary description of the spa at St Ann's, see 'Hydropathy: Dr Barter's establishment in Blarney', *CE*, 16 Aug. 1844. Barter achieved further fame for being the first to introduce the Turkish (steam) bath and later the Turkish cattle bath to Ireland. See Breathnach, 'Health'; G.R., 'Dr Barter's cattle bath', *Ciba Symposia*, 1 (1939/40), 164. ²⁵ Brown, 'Social context', p. 225. ²⁶ 'Notice. Hydropathy or water cure', *CE*, 7 Aug. 1843. See also 'Hydropathy' (advertisement for Dr Curtin's establishment), *CE*, 11 Nov. 1846.

²⁷ 'Progress of Hydropathy', *CE*, 20 Sept. 1843.

cure approved by trained physicians, that its efficacy was confirmed by physicians led to divisions within the Cork medical community. The first blows came from Dr John Murphy, member of the Royal College of Surgeons in Ireland who taught at least occasionally at Wherland's medical school.²⁸ Murphy concentrated on discrediting the doubtful personage of Claridge, and questioned Claridge's right to carry the title of 'Captain', since his name could not be found on Army or Navy lists. He then proceeded to discredit the knowledge of the Cork physicians, who 'formerly professing to understand and administer the curative resources of legitimate and scientific medicine',²⁹ had spent a week and a half travelling England to learn about the cure and now considered themselves to be experts on the subject. Murphy not only attacked them for approving the hydropathic system despite their credentials, but also questioned their claims that they had visited nine scattered hydropathic establishments within ten days. It was, he implied, a physical impossibility. With this veiled accusation of deception, he cast doubt on the characters of Barter and Wherland. Although Murphy did, eventually, dissect and ridicule Claridge's medical reasoning, his first line of attack was character, since, it implied, if the therapist was not respectable, the therapy could not be either.

This was a local dispute, and the chastisement from a peer did not prevent Wherland from opening his hydropathic establishment shortly after. It was left to the *Dublin Medical Press* to try to bring him to his senses. With the involvement of the *DMP*, however, the doings in Cork stopped being a mere local affair and became part of the wider Irish medical world, part of a conflict between metropolis and province about the organization of medicine and the process of professionalization.

THE POLITICS OF PROFESSIONALIZATION: THE LOCAL GOES NATIONAL

Hydropony emerged at a particularly sensitive stage in the professionalization of medicine in Britain and in Ireland, situated between the Apothecaries' Act of 1815, which introduced regulations for the training, qualification and certification of apothecaries and surgeon-apothecaries, and the Medical Act of 1858, which laid out the educational qualifications and stipulated registration for physicians.³⁰ As Anne Digby notes, this drive for professionalization coincided with increasing competition on the medical market and aimed at least in part at restricting competition and reducing the number of practitioners.³¹ Defining standard and acceptable medical practices was one way to control entrance into the profession. By excluding partic-

²⁸ Surgeon Murphy, 'Hydropony, or the cold water system. To the editor of the Cork Examiner', *CE*, 28 Aug. 1843; 'Lecture on surgery', *CE*, 1 Nov. 1844. ²⁹ *Ibid.* ³⁰ For a discussion of the goals and results of the Apothecaries' Act, see S.W.F. Holloway, 'The Apothecaries' Act, 1815: a reinterpretation', *Medical History*, 10 (1966), 107-29; 221-3. ³¹ A. Digby, *Making a medical living: doctors and patients in the English market for medicine, 1720-1911* (Cambridge, 1994), pp 42-3.

ular therapies as unorthodox, especially those that did not require initiation through learning an approved skill and knowledge set (that is, those therapies that could be practiced by laypeople), reforming physicians sought to solidify the status of their specialist knowledge.

The *Dublin Medical Press* was, like the *Lancet*, a metropolitan organ of professionalization. Founded in 1839, it both emulated the *Lancet* and reacted to it, or at least to Thomas Wakley's position on Irish medical politics.³² It was, in addition, closely associated with the Royal College of Surgeons in Ireland, of which both Wherland and Murphy were members. It was part of a drive among the reform-oriented membership of the RCSI to unify the Irish medical profession, implement comprehensive reforms of medical education and licensing, and define standards of professional behaviour.³³ It thus not only discussed the scientific aspects of medicine, physiology, medical theory and surgical techniques, but considered itself primarily a medico-political organ and covered a variety of debates and issues, such as the role of coroners, the vaccination and medical charities acts, dispensaries and the politics of positions, as well as all official debates and acts that could affect the body of medical practitioners that it was trying to whip into a medical profession. Politically, it was committed to medical reform. Professionally, it was committed to creating unity among Irish practitioners. In this regard, it was, like the *Lancet*, greatly interested in defining what constituted acceptable practice and it did this both by polemically condemning 'quack medicine' and by attempting to discipline provincial physicians, who were often open to heterodox therapeutic approaches, into metropolitan professionalism. Hydropathy was not the only front in its provincial battles. The *DMP* invested particular energy in condemning those provincial physicians who were prepared to let their names be connected to mesmerism, patent medicines or 'puffery' and was infamous for the rhetorical and polemical vehemence of its attacks.³⁴

The hydropathic doings in Cork had not escaped the attention of the *DMP*. Only weeks after Claridge's first appearance in the city, notified by a disdainful medical student, they began their anti-hydropathic crusade. They singled out Wherland in particular for their condemnation, perhaps because he was a member of the RCSI.³⁵ As P.S. Brown remarks, 'the medical journals generally concentrated their attack on the medically qualified hydropaths, orthodoxy being less concerned about activity well outside the profession than about the breach of its own

32 R.D. Cassell, 'Lessons in medical politics: Thomas Wakley and the Irish Medical Charities, 1827-39', *Medical History*, 34 (1990), pp 412-23 at p. 422. **33** R.J. Rowlette, *The Medical Press and Circular, 1839-1939: a hundred years in the life of a medical journal* (London, 1939), pp 16-17. Central figures were Arthur Jacob, Henry Maunsell (editors of the press) and Richard Carmichael. **34** Rowlett, *Medical Press*, pp 22-4. **35** A medical student, Cork, 'Hydropathy. To the editors of the Medical Press', *DMP*, 10, 2 Aug. 1843, p. 77; Medicus, Skibereen, 'Hydropathy. To the editors of the Medical Press', *DMP*, 10, 16 Aug. 1843, 107-10; Anon., 'Water witches in Ireland', *DMP*, 10, 16 Aug. 1843, 110-111; Anon., 'Promoting the reputation, honour and dignity of a college', *DMP*, 10, 23 Aug. 1843, 126-7.

defences'.³⁶ Wherland, a leading Cork citizen and man of local standing, gave a feisty response. Like his colleague Barter, he took the position that hydropathy was not an illegitimate, quack practice, but constituted a further therapeutic weapon in the physician's arsenal. As Wherland defended himself, '*I have not laid aside one particle of information I previously possessed for the water cure – no, far from it; I have merely taken it up in addition to my previous stock of remedies, as a grand remedial adjunct to medical science*', one that must be administered by qualified physician.³⁷ Hydropathy thus did not constitute a threat to the profession, and resistance to its use, he implied, was merely the product of professional jealousy.

His response, however, was less a defence of the water cure per se than a stance against being dictated to at a distance by this self-declared voice of professional medicine. Wherland adopted the position of an insulted and maligned provincial practitioner being attacked by a metropolitan interest group and self-interested cartel. In essence, he told the editors of the *DMP*, who he viewed, not without reason, as representatives of the reforming RCSI, that his connection to hydropathy was none of their business. He further stated that he was not surprised at the attack made on him for, 'daring to have an opinion without the sanction of the learned editors of the medical press, who seem to have usurped to themselves a cathedral chair, as regards medical affairs in this country'.³⁸ Even worse, he accused the *DMP* and the physicians and surgeons associated with it of using the banner of medical reform to look after their own personal, 'place-hunting' interests. Wherland did not grant the *DMP* any legitimacy to speak for the medical profession or medical practitioners in general. With this, he was not alone, however. The College of Physicians and Trinity College were also prepared to question the legitimacy of the lower-status surgeons to speak for all.³⁹

The adversity, with which their attempt to establish the water cure as a therapeutic practice was met, led to a radicalization among the three Cork hydropathic physicians. In 1847, despite two of them belonging to rival medical schools, they banded together to fend off attacks on their system.⁴⁰ In a petition made at a time when Cork had been hit by a fever epidemic, they took a more radical stance against what was now becoming medical orthodoxy. While pointing out the beneficial effects of the cure in treating fever, they distanced themselves from the extravagant claims made by the lay supporters of the hydropathic movement. The cure was, they stated, not an 'infallible remedy', but 'a splendid reform in the treatment of disease'.⁴¹ While they positioned themselves as moderates against the lay hydropathists and their claims, they also positioned themselves as therapeutic reformers against mainstream medical opinion, stating that the cure had a '*decided superiority over ordinary practice, being always safe, and not calculated to injure*'. At the same time, they continued,

³⁶ Brown, 'Social Context', p. 223. ³⁷ Dr J. Wherland, 'To the editor of the Cork Examiner', *CE*, 4 Sept. 1843, emphasis in original. ³⁸ Dr J. Wherland, 'To the editor of the Cork Examiner', *CE*, 4 Sept. 1843. ³⁹ See Rowlette, *Medical Press*, pp 17–18. ⁴⁰ 'Hydropathy, or the water cure', *CE* 17 May 1847. ⁴¹ *Ibid.*

we consider the Water Cure perfectly compatible with any medicines or medical appliances, that we deem essentially requisite; but *we repudiate all such systematic Drugging* as WE KNOW to be *conjectural, hazardous and not infrequently destructive*.⁴²

Continued opposition from the established medical mainstream had radicalized their approval of the water cure as an addition to their medical repertoire into a critique of mainstream therapeutic methods. If the *DMP* claimed to speak for medical reform in terms of careers and professionalization, the hydropathic physicians claimed for hydropathy and themselves the role of therapeutic reform and reformers.

Although all three hydropathic establishments remained open, through the persistent attacks hydropathy had lost much of its support among many former enthusiasts in Cork. In the mid-1840s it had been a popular topic for discussion in science societies. By 1847, a member of the Cork Literary and Scientific Society had to fend off attempts to have comments on the water cure censored from his essay presentation. Reporting on this incident, the editor of the *Cork Examiner* contrasted the public reaction to hydropathy on this occasion with the first enthusiastic response in the wake of Claridge's visit in 1843:

It was clamorously contended that the subject of the essay was unfit for public discussion, although, on a former occasion, when the subject was new in Cork, and the public not so capable of estimating it, a medical gentleman [Barter, EN] read before the society an essay on hydropathy. On the present occasion, the water cure was denounced as a humbug, and its friends and advocates as fools and knaves.⁴³

Hydropathy did not disappear from Cork or from medical practice in the late 1840s, despite its loss in status and increasing marginalization by the medical community. It did become less a cause for excitement and controversy, however, perhaps because the dividing lines had become clearer, perhaps also because in Ireland during the Famine and its aftermath epidemics and deficiency diseases became more immediately relevant medical concerns. New hydros and Turkish baths were opened in the 1860s and later, but, as in other locations, the emphasis on spa culture, hygiene and general well-being became more prominent than specifically medical use.

Turning back to the early reception of hydropathy as a medical practice, the Cork case study seems to confirm much of what Marguerite Dupree and James Bradley have observed about hydropathy in Britain. Far from being a fringe practice from the outset, hydropathy fell into divisions among qualified medical practitioners about therapeutic methods. Cork's hydropathic physicians took a different view of the merits of hydropathy than lay practitioners, seeing in it an addition to their

⁴² Ibid. Emphasis in original. ⁴³ J. Gibbs, 'Cork Scientific and Literary Society: attempt to suppress an essay on the water cure', *The Water Cure Journal*, 1 (1847/48), 240–5.

therapeutic repertoire and not as a replacement. Continuing attacks, however, led to a radicalization of their position into a critique of mainstream practices, as demonstrated by the Cork petition.

This case study also reveals an aspect in which hydropathy in Ireland adds a significant nuance to the British story. Studies on British hydropaths have often noted that the water cure was frequently supported by marginalized medical practitioners, who had not been able to secure lucrative hospital positions.⁴⁴ For these marginalized physicians, hydropathy functioned both as a source of income and as a means to distinguish themselves from a mainstream they felt ill-done by. The hydropathic physicians of Cork do not seem to be socially marginalized. Two taught at Cork's medical schools, one had a hospital appointment, and all were respected personalities, well integrated into local middle-class associational life, although they were almost certainly striving to distinguish themselves within Cork's competitive medical market. Marginalization need not be only individual, however, and the Cork case study adds to the dimension of individual social marginalization the aspect of provincial marginalization at a time when professionalization efforts came overwhelmingly from the metropolis. Criticism of hydropathy, like criticism of phrenology or mesmerism, was one way in which centralized metropolitan medical organs tried to name, shame and discipline provincial physicians into following the professionalization standards they were trying to establish. Provincial physicians, for their part, often resented this metropolitan intervention and defended their diversity of practices against the perceived self-interest of these organs of professionalization. As Alison Winter remarks in her study of mesmerism and popular culture, this divide 'was exploited by metropolitan and provincial reformers to promote their own individual projects [...]'. Provincial mesmerists, she concludes, 'would not, despite the assumptions of the Londoners and the efforts of the provincial professionals, allow themselves to be defined as the passive and ignorant objects of "reform"'.⁴⁵ A similar resistance can be found in Cork, where the metropolitan project of medical professionalization collided with the self-assertion of provincial practitioners.

Hydropathy's place in the conflict between metropolitan and provincial views of practices and professionalization in Cork is, of course, only one part of the story, and many open questions remain. Although the popularity of Barter's spa at St Ann among the British and Irish Victorian middle and upper middle classes is documented, and Curtin later (1858) also opened a spa bath,⁴⁶ less is known about the use of the water cure among other groups. Infrequent references to both successful cures and fatalities at charitable institutions indicate that hydropathy was at least on occa-

⁴⁴ See especially Bradley and Dupree, 'Opportunity'. ⁴⁵ A. Winter, 'Mesmerism and popular culture in early Victorian England', *History of Science*, 32 (1994), 317–43 at pp 330–1.

⁴⁶ For example, 'Hydropathy: Dr Barter's establishment in Blarney', *CE*, 16 Aug. 1844; 'Hydropathy: Mr Barter's institution for the restoration of health', *CE*, 1 Jan. 1845. For Curtin's spa establishment, see: M. Shifrin, 'Victorian baths and family hotel and Dr Curtin's hydropathic establishment', *SSNCI full text for typesetter.docx* www.victorianturkishbath.org (accessed 10 May 2010).

sion practiced on the poor, but, despite Wherland's association with the South Lying-in Hospital, there is little evidence to suggest that it was applied systematically as part of medical charity.⁴⁷ Even less is known about the clientele of the city hydropathic baths. Devoid of spa culture, they were more utilitarian in nature, but if a price list from an establishment in Youghal is any indication, only better-situated townspeople would have been able to afford some of its services.⁴⁸ Advertisements for Wherland's establishment in the 1840s vacillate between calling it a hydropathic establishment and referring to it simply as a 'bath', and indeed it may have been valued as much for its hygienic as for its medical utility among the town's population.

Finally, the relationship between the water cure and temperance deserves more attention. As Alastair Durie has shown, connections between hydropathy and temperance were strong in Scotland.⁴⁹ Certainly, Irish contemporaries noted their compatibility, and affinities in Ireland would be particularly intriguing due to connections between the mass temperance movement of the 1840s and the Repeal movement. Significantly, Durie begins his essay on hydropathy and temperance with a quote by a Dublin Unitarian convert, James Haughton. Haughton, who belonged to a wealthy Quaker family, was one of Ireland's leading temperance advocates, and a man strongly committed to Repeal, abolition and the education of the working classes.⁵⁰ Cork brush-maker Isaac Varian, as well, combined Irish nationalism, teetotalism and hydropathy, while Father Mathew, charismatic leader of the 1840s Irish temperance movement, also expressed his support for hydropathy, sending a temperance medal to Priessnitz and to Claridge.⁵¹ With water implying both internal and external purity in teetotalism and hydropathy, a connection between the two would not surprise. Nonetheless, these connections, which were so strong in Scotland, do not seem to have had an immediate counterpart in Ireland. At the current stage of research, explanations of this difference would be speculative at best, but two factors deserve consideration. Firstly, the Irish Temperance movement was at its strongest in

47 For a cure by Barter, see: 'Hydropathy: foundling hospital', *CE*, 26 Jan. 1844; for a hydropathic fatality, see 'Progress of hydropathy', *CE*, 29 Sept. 1843. According to Malcolm Shifrin, Barter did later open a bath for the destitute poor in the 1860s. M. Shifrin, 'Turkish baths for the destitute poor known as the people's Turkish bath', www.victorian-turkishbath.org (accessed 10 May 2010). **48** 'Dr Curtin's hydropathic establishment', *CE*, 5 May 1845. Prices ranged from 4d. for a cold shower to 1s. 6d. for a hot douche bath or vapour bath at: 'Walsh's general bathing & hydropathic establishment, Friar-Street, Youghal', *CE*, 20 May 1844. **49** A. Durie, 'Almost twins by birth: hydropathy, temperance and the Scottish churches, 1840–1914', Paper given at the Scottish Church History Society, Nov. 2001, www.schs.org.uk/samplepaper.htm (accessed 24 Nov. 2004). **50** See, for example, 'To Dr William Macleod from James Haughton', *The Water Cure Journal*, 2 (Dec. 1847), 188–91; J. Haughton, *On the connexion between intemperance and crime* (Dublin, 1849); Idem, *The use of alcoholic liquors: economically, socially and morally wrong* (Dublin, 1849). **51** For Varian's support of hydropathy and temperance, see: 'Temperance institute', *CE*, 26 Sept. 1845; 'Excursion of the members of the Cork Temperance Institute to the Groves of Blarney, and to Dr Barter's hydropathic establishment', *The Irish Temperance Chronicle*, Sept. 1846; Durie, 'Almost twins', 1–2.

the years between 1840 and 1843 and was ebbing as a mass movement just as the water cure was becoming well known in Ireland. Secondly, while the temperance movement was largely carried by Irish Catholics, there are some indications that more interest in hydropathy was to be found among Irish Protestants. That support of medical (and scientific) theories can correlate with political and religious positions is well known. Whether this holds true in the case of hydropathy in Cork, or in Ireland in general, however, is a question that remains to be answered.