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**‘Who was I?’ Seeking the
herbalist in English history from
Henry VIII’s Charter to the
foundation of the NAMH**

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Who was I? Seeking the herbalist in English history from the charter of Henry VIII to the foundation of the National Association of Medical Herbalists



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Based on Graeme's PhD thesis at Lancaster University Dept of History, now being written up as "*English herbs for English bodies.*" The promotion of native plant remedies 1548- 1659'; and Alison's Masters by Research, dissertation completed at the University of York "Herbal medicine in nineteenth century England: the career of John Skelton."

Part 1: Graeme

Do you see yourself or a colleague here?

William Trigge (fl. 1630-56), empiric and one of the best known unlicensed practitioners in London, originally a shoemaker, then a distiller, who provided powders and cordials in time of plague and was hounded, fined and even imprisoned by the College of Physicians' censors before finally getting off on a technicality to continue practice of medicine, his most famous remedy being the 'Golden Vatican-Pill'. (Oxford DNB)

After Nicholas Culpeper married in 1640, he moved with his wife Alice to Spital fields from where he would travel through Bishopsgate and Threadneedle Street to the shop of his friend and newly qualified apothecary Samuel Leadbetter, with whom he had agreed terms for seeing his own patients and dispensing medicines for them from the shop. (Woolley, 2004).

Mrs. Mary Green of Chancery Lane advertised in 1693 that she possessed the Archbishop of Canterbury's licence to practice and was expert at curing a range of conditions that doctors had failed to remedy and she appended testimonials from satisfied patients (Porter, 1989).

Elizabeth Gobby, brought up by an herbwoman in Newgate market, subsequently held her own herb stall there between 1725 and 1737 (Burnby, 1983).

1. It is probably anachronistic to imagine the 'herbaries' as local cunning men, healers outside the medical system like today's herbalists, who were familiar with and could name the English herbs Turner was describing. For, the names attributed to herbaries are without exception Latin names in Turner's text, as were those used by the apothecaries. None of Turner's entries suggests that 'herbaries' and apothecaries used different names for a plant, but rather it is as if one name was common to both groups.

Two possibilities arise here. Most likely is that these herbaries were suppliers of herbs in bulk, part of the trade of apothecaries but involved in wholesale supply to them rather than in sales from premises (Lat. 'officinae'). Many would have been members of the Company of Grocers, whose very name 'grocer' derives from 'peso grosso' or a hundredweight (112 lbs.) (Hunting, 1998), implying that their occupation included volume purchases and sales. Trade links with the provinces, through Company contacts or by attending local fairs allowed druggists to distribute their wares more widely and by 1637 over two hundred towns in England had a distribution service with London on at least a weekly basis (Curth, 2006).

On the other hand, if herbaries were not in the apothecary business but were local cunning men and women, then their vernacular names for many herbs appear to have been Latin ones. Turner provides a shred of evidence for this possibility; he wrote in the *Libellus de re herbaria novus* (1538) he knew of no English name for Narcissus and on one occasion while out rambling met a girl with Narcissus flowers in her hand. When he inquired of folk in the neighbouring cottages and villages what they called this plant, 'they all replied that the herb was called "laus tibi"

and I was unable to fish out of them any other name'.¹ The existence of local Latin names of plants may imply that the inhabitants had learned of the use of some plants through educated healers such as the 'infirmarer' of a religious house in the area, who might have called the plants in the herb garden or the medicine dispensed by a Latin name (Harvey, 1993), or from a local apothecary or priest who healed his parishioners.

2. 'Herbalist' and 'herbarist'

seem to have been used most often to refer to any writer of herbals from the past but eventually could mean an unlicensed practitioner:

- In Gerard 'that famous herbarist Clusius', 'the notable herbarist Anguillara', 'sent and convided by one friendly herbarist to another', 'Robert Abot an excellent and diligent herbarist', 'the reverend and learned herbarist Matthias Lobell'.
 - In Edward Phillips' *A new world of English words* (1658) herbalist and herbary = 'one that hath knowledge in the nature and temperaments of herbs'.
 - In Elisha Coles' *An English dictionary* (1677), herbalist, 'herbist' and herbary all mean 'one skilled in herbs'.
 - Charles Goodall's (1684) account of the proceedings of the College of Physicians against unlicensed practitioners equated, in the case of John Butler, herbalist with empiric.
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3. But we are not unlicensed, we have a statutory right to practice!

Statutes of the Realm 34 & 35 Henry VIII, c.8. (1542/3)

- Recalls the requirement made in 1511 for all practitioners in the capital to be examined, approved and admitted by the Bishop of London "amongest other thinges for the advoyding of sorceryes, witchecrafte and other inconveniences",
- But notices members of the new Company of Barber-Surgeons, for reasons of monetary gain and becoming careless of their patients, trying to enforce their monopoly by harassing 'divers honest persones, as well men as women, whome God had endued with the knowledge of the nature, kinde and operacion, of certaine herbes, rotes and waters...and yet the saide persones have not takin any thing for theyre peynes and cooning, but have mynistered the same to the poore people oonellie for neighbourhode and Goddes sake and of pitie and charytie".
- Therefore from this parliament and at all times henceforth, any other act or statute notwithstanding, those with this knowledge and experience of the nature of herbs etc. can, without vexation or trouble in any part of the realm of England or of the King's dominions, treat with herbs, ointments, baths, poultices a range of external diseases, and administer 'drinckes for the stone, strangurye or agues'. (Furnivall, 1888)
- Under Mary Tudor in 1553, *Statutes of the Realm* 1 Mary, c.9 rescinded Henry's Act, recited the 1511 act requiring a bishop's license to practice medicine and restored the College of Physicians' monopoly control over medicine in London and for 7 miles around
- Roberts (1964) notes that this act was the basis on which herbalists claimed the right to sell herbs and simple mixtures but was superceded by the Pharmacy and Medicines Act of 1941, which Hilda Level (1943) writes bitterly about .

¹ William Turner, *Libellus de re herbaria novus* (1538), Biiiv. 'Respondebant omnes herbam vocari Laus tibi, nec aliud nomen potui ab illis expiscari'. In *The names of herbes*, Evir, a further vernacular name of 'whyte daffodyl' is added.

Table 2: Diseases allowed by the Act to be treated by those with a knowledge

diseases named in the Act	Meaning (from OED)
‘women’s breasts being sore’	Various
‘Pyn and the Web in the eye’	Cataract or corneal opacity accompanied by conjunctivitis or pterygium or corneal ulcer
‘Uncomes of handes’	Whitlows (Furnivall)
‘scaldinges, burninges’	Obvious
‘sore mouthes’	Various
‘the stone’	most likely here: bladder stone
‘strangurye’	Disease of the urinary organs characterised by slow and painful emission of urine
‘saucelin’ = ‘saucefleme’	Inflammation of the face with swelling
‘morfew’ = ‘morphew’	Various skin conditions characterised by localised or generalised discoloration of the skin
‘agues’	Disease characterised by acute, high fever, such as malaria; a malarial paroxysm.
‘and suche other lyke diseases...’	But not internal treatments for dyspepsia, angina, migraine, depression etc.

Our attempt to identify a herbalist by what he does in comparison to professionally organised practitioners 1500-1700:

Table 3

Activity of modern day herbalist	Like physician	barber-surgeon	apothecary
Has place of practice	some	√	√ not herbarry
Owens shop		√ not all	√
Holds university degree	√		
Apprenticeship or university	University	apprenticeship	apprenticeship
Member of professional body	√ from 1518	√ from 1540	√ from 1617
Diagnoses/assesses patients	√	√	By 18 th c.
Prescribes internal treatment	√	By 18 th c.	By 18 th c.
Prescribes external treatment		√	By 18 th c.
Dispenses medicine	In later 17 th c.	√	√
Makes own remedies		√	√
Collects from wild			
Has knowledge of botany	Very few	Very few	Very few
Purchases bulk supplies		(√)	√
Is familiar with pharmacopoeia	√	(√)	(√)
advertises		Shop sign	Shop sign
Scale of fees		√	
Writes, teaches or has apprentice	√	√	√

4. Table 4 The primary occupations of those pursued by the College

714 irregular practitioners pursued by the College of Physicians 1550-1640 (Pelling (2003) pp.136-88)		
Primary occupation	Number of irregulars	% of irregulars
(Barber-)surgeon	114	16.0
Apothecary	95	13.3
Physician (MD)	86	12.0
Practitioner of physic (not a graduate)	64	9.0
Empiric	45	6.3
Barber(-surgeon)	24	3.4
Physician (university, no MD)	23	3.2
Miscellaneous medical	19	2.6
Total Medical	470	65.8
Non-medical or unknown	89	12.5
	155	21.7
Total	714	100.0

Table 5: Lists of irregular practitioners:

Lists of irregular practitioners				
Named as	In 16 th century England Wear, French & Lonie (1985)	In 16 th century France Lingo (1986)	In 16 th century Germany Brevart (2008)	In 16/17 th century England Pelling (2003)
itinerant	'charlatans'		+ 'charlatans'	
empiric	+ 'herbalists'	√	'more or less qualified rural practitioners'	'practitioners of physic'
Trained physician, surgeon, apothecary	√ √ √	'reprobate' √ √ √	√ √ √	√ √ √
barber	√		√	
priest	'and their wives'	√		√
magician	√	√	'wise men and women'	
witch	'wise woman'	√		
midwife		√	√	√
alchemist		√		'a chemical distiller'
charmer	√			
astrologer	√			
other trade				

other		'house-fathers'		The butcher, the baker the candlestick maker
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Part 2: Alison

Introduction

My interest in the 18th and 19th century herbalism arose from the study of Thomsonianism - I was trained, in the mists of time, in the physiomedical tradition in at the Liverpool NIMH training clinic. This led to my recent research on John Skelton (1805-1880). He was born in rural Devon, was a shoemaker and labour leader, a signatory of the People's Charter in 1839, and then became Albert's Coffin's assistant in 1848 and remained in practice throughout his life. But what was the context for his thinking? – this drew me into the byways of medical thought in the 18th century.

Throughout his life he remained an advocate of domestic self-care using herbal medicines. However, this aspect of herbal medicine has received little attention as historians have been more interested in looking at the increasing conflict between doctors and herbalists or other unconventional practitioners. The focus of much of the literature on 18th and 19th century medicine has been on the political pressure for the establishment of a statutory medical register which led to the Medical Act 1858. This campaign was led by Thomas Wakley (1795-1862), editor of the *Lancet*, and Radical MP for Finsbury from 1835-1852. There was a conflict between Wakley's radical political views and his desire to establish the boundaries of medical practice, such that Wakley was seen not as a "beacon of healthful reform", but as "another species of medical monopolism" by herbalists.² This focus highlighted difference and marginalisation of herbal practitioners as "irregulars." Roy Porter located Skelton in the "Victorian fringe," the "medical equivalent of Chartism."³ Reflecting on this – Chartism succeeded – everyone got the vote!

Pluralism

I would advocate a pluralist model which does not favour any one medical system or strand of thinking. This approach builds on more recent studies. James Bradley has argued for a "symmetrical treatment of competing nineteenth-century medical systems," and used his study of hydropathy to show that orthodoxy "was itself evolving, mutating and ever so slightly amorphous."⁴ Bradley and Marguerite Dupree made a detailed study of practitioners of hydropathy in the period 1840-1858.⁵ They argued that many and various rationales for treatment were proposed in this period both amongst the medical mainstream, and amongst hydropaths who were medically qualified,⁶ and caution against the risk of assuming conformity amongst medical practitioners.⁷

Looking at the same period, Michael Brown argued that the move towards regulation of the medical profession raised complex political issues in that it threatened the liberal values of individual responsibility for personal choice.⁸ The hot topic of debate in the 1840s was the campaign for repeal of the Corn Laws and free trade. Paul Pickering and Alex Tyrrell's account this campaign gave a vivid account of people involved, and their many and varied beliefs and activities.⁹ Their account of the involvement of women supports the argument made by Kathryn Gleadle that women played an active role at the interface between domestic, social and political life. Gleadle took five areas of mid-century healthcare: vegetarianism, hydropathy, homeopathy, hygeism and medical botany and argued that women were active

² Ian A. Burney, "Medicine in the Age of Reform," in *Rethinking the Age of Reform: Britain 1780-1850*, ed. Arthur Burns and Joanna Innes (Cambridge: Cambridge University Press, 2003), 175-81.

³ Roy Porter, *Health for Sale* (Manchester: Manchester University Press, 1989), 233.

⁴ James Bradley, "Medicine on the Margins? Hydropathy and Orthodoxy in Britain, 1840-1860," in Waltraud Ernst, *Plural Medicine, Tradition and Modernity, 1800-2000* (London: Routledge, 2002), 20-21.

⁵ James Bradley and Marguerite Dupree, "A Shadow of Orthodoxy? An Epistemology of British Hydropathy, 1840-1858," *Medical History* 47, no. 2 (2003): 174. <http://www.ncbi.nlm.nih.gov/pubmed/12754763> free online

⁶ *Ibid*, 178-81.

⁷ James Bradley and Marguarite Dupree, "Opportunity on the Edge of Orthodoxy: Medically Qualified Hydropathists in the Era of Reform, 1840-60," *Social History of Medicine* 14, no. 3 (2001): 419-20. <http://www.ncbi.nlm.nih.gov/pubmed/11811187>

⁸ Michael Brown, *Performing Medicine: Medical Culture and Identity in Provincial England, c. 1760-1850* (Manchester: Manchester University Press, 2011), 212-16.

⁹ Paul Pickering and Alex Tyrrell, *The People's Bread: A History of the Anti-Corn Law League* (London: Leicester University Press, 2000), 88-138.

in all these areas. The slogan could have been “Every woman her own physician” which somewhat prefigures the twentieth century feminist slogan “The personal is political.”¹⁰

Self-reliance

In 1852, Skelton published the *Family Medical Adviser*, so that readers might “become partakers in the free gifts of nature . . . to cure disease, either in ourselves or children, irrespective of legal restraint, inasmuch as the laws of nature ever take precedence over the laws of man.”¹¹

The sentiment was reminiscent of Dr William Buchan (1729-1805) who bemoaned the situation that, in contrast to other subjects, medicine was not studied by “men of sense and learning” but remained a closed art such that “implicit faith, everywhere else the object of ridicule, is still sacred here.”¹²

Skelton was making a democratic argument, but he was also building on an important aspect of 18th century life which was “freedom of choice” – in religion, in political views and in choice of medical method or medical care. Looking back at 18th healthcare, it is easy to assume that the wealthy consulted elite doctors, the “middling” and artisans consulted apothecaries, and everyone else made do as they could. However, the picture painted by historians suggested a far more complex world, where people of every status relied on self-care. The literature on self-care in the “medical marketplace” builds on the work of Dorothy and Roy Porter who gave a vivid account of the choices available to the prospective patient in Britain in the 17th and 18th centuries,¹³ where competition was rife between practitioners of every persuasion¹⁴ in a milieu where professional medical advice was secondary to self-care.¹⁵ They argued that eighteenth-century doctors were perceived by their clients as individuals rather than as representatives of the medical profession, and therefore asking for a second medical opinion in person or by letter was not uncommon. Their account relied on evidence such as diaries and so reflected the financial choices of the middling classes and “the Quality.” Steven King also used unpublished sources to suggest that self-care was the norm in all parts of society in rural Lancashire. He found reliance on domestic recipes, made using herbs or minerals, and on patent remedies which were available by post or from local shops or markets.¹⁶

A similar picture was painted for self-care in America by Lamar Murphy, who argued that self-care arose from a desire for self-reliance rather than just to avoid expense.¹⁷ Self-reliance depended not only on practical experience and oral knowledge, but also on literacy and purchase of one of the numerous domestic health guides published on both sides of the Atlantic during the eighteenth and nineteenth centuries.¹⁸ Murphy has shown that the eighteenth-century American reader was able to obtain a startling variety of guides and noted an early American text entitled *Every Man his Own Doctor*, published in 1734.¹⁹ Murphy used a substantial range of nineteenth-century sources to argue that there was a change of tone in domestic health guides over the century, and that writers of all persuasions insisted that the practitioner should direct medical treatment, and the lay person should fulfil a supportive role by taking responsibility for their own healthy lifestyle.²⁰ This proposition was part of the wider argument that, over the course of the nineteenth century, medical authority gained power at the expense of the medical market place.²¹

¹⁰ Kathryn Gleadle, “The Age of Physiological Reformers’: Rethinking Gender and Domesticity in the Age of Reform,” in *Rethinking the Age of Reform*, edited by Arthur Burns and Joanna Innes (Cambridge: Cambridge University Press, 2003).

¹¹ John Skelton, *Family Medical Adviser*, 1st ed. (Leeds: Moxon and Walker, 1852), 12. See <http://books.google.co.uk/>

¹² William Buchan, *Domestic Medicine: Or, a Treatise on the Prevention and Cure of Diseases by Regimen and Simple Medicines.*, 3rd ed. (London, W. Strahan, 1774), xvii; See <http://books.google.co.uk/> for later editions.

See C. J. Lawrence, “William Buchan: Medicine Laid Open,” *Medical History* 19, no. 1 (1975), 23-25;

¹³ Dorothy Porter and Roy Porter, *Patient's Progress: Doctors and Doctoring in Eighteenth-Century England* (Stanford, CA: Stanford University Press, 1989).

¹⁴ Porter, *Health for Sale*, 21-59.

¹⁵ Porter and Porter, *Patient's Progress*, 33-69.

¹⁶ Steven King, *A Fylde Country Practice: Medicine and Society in Lancashire, C.1760-1840* (Lancaster: Centre for North-West Regional Studies, University of Lancaster, 2001), 42-58.

¹⁷ Lamar Riley Murphy, *Enter the Physician: The Transformation of Domestic Medicine, 1760-1860* (Tuscaloosa: University of Alabama Press, 1991), 9-15.

¹⁸ Murphy, *Enter the Physician*, 6-9, 15-25, 109-15, on the influence of the Edinburgh Medical School 22-23, 109-115.

¹⁹ The author was John Tennent, see Murphy, *Enter the Physician*, 72, 254n5.

²⁰ Murphy, *Enter the Physician*, 227-28.

²¹ Michel Foucault, *The Birth of the Clinic* (London: Routledge, 2003); William F. Bynum, *Science and the Practice of Medicine in the 19th Century* (Cambridge: Cambridge University Press, 1994).

Returning to John Skelton who was born in 1805 in Holbeton, Devon which is a small village in South Hams. He recounted the “delightful labour” of collecting herbs for his grandmother with his grandfather, Will Edwards, gardener to the local landowners.²² On a memorial stone erected by Skelton in 1855 in the graveyard of All Saints, Holbeton, he described his maternal grandmother, Mary Edwards (1750-1821) as “for many years the skilful doctress and midwife of the village.”²³

The family moved to Plymouth before he was ten, and Skelton gave a vivid account of an incident when he was “waiting outside a shoemaker’s shop” in Basket Street, Plymouth. A man who had moved from Scotland was telling the shopkeeper that he couldn’t find any *Parietaria judaica* Pellitory which he had been in the habit of drinking to relieve urinary problems. Skelton knew the herb as he had collected it for his grandmother, and scurried off to some orchard walls, “at the bottom of Burying place lane, or as it is now called Westwell street.” The old man was delighted and gave the boy sixpence.²⁴

Herbalists in the early 19th century

Much more work is needed on the demography of herbal practice. The empirical studies of P.S. Brown²⁵ and Hilary Marland²⁶ have revealed the diversity amongst herbal practitioners and their place in the wider medical world. An empirical study by Brown of healthcare practitioners in Bristol found 31 herbalists who identified themselves as herbalists, medical botanists, Thomsonian practitioners and American herb doctors.²⁷ Brown made the crucial point that within the broad category of “herbalist,” there was wide variation in social class, ethos and size of practice, adding that much of this information would not be revealed in published sources. Brown noted that many lived in the poorest parts of the city, and that of the twelve people identified in the 1841-1861 censuses, only three appeared in trade directories. Two families of practitioners and two husband and wife partnerships were identified. This formed part of a wider study of healthcare practitioners, and was the first local study to begin to throw light on nineteenth-century herbal practice.

Marland carried out a study of healthcare practitioners in Wakefield and Huddersfield. Coffin had visited Huddersfield in 1845, and in the trade directory of 1853 there was one medical botanist. By 1861 there were four medical botanists and a herbalist, by 1866 there were two herbalists, and five again in 1870. By way of comparison, in 1861 in Huddersfield, there were twenty-three qualified medical practitioners and eighteen chemists. In 1868, one of these chemists was an “appointed agent” of Skelton and sold “all Dr Skelton’s preparations, and also every variety of Herbs used in Medical Botany,” and the herbalist Richard Bean held consultations there every Wednesday.²⁸

Brown and Marland recorded people who identified themselves as healthcare practitioners, but this was only a partial picture as lay practitioners, women in particular, might not declare their occupation in the census. Marland identified practitioners such as bonesetters, midwives, dentists and leech women, and identified two women in Huddersfield. The first was an expert in the application of leeches, and the second was called in for “any bad cases of fever, or lunacy, of exceptional emergency” and would act as “nurse, friend and physician all in one.” Furthermore, Marland set her account within a context of “self-diagnosis and dosing” noting that family recipes were published locally, and that chemists advertised their willingness to make up family recipes.²⁹

Botanic societies and American influence

Anne Secord undertook a careful study of botanical societies in Northwest England in the early nineteenth century. She suggested that, in any locality, someone would own a copy of *Culpeper’s Herbal* or Wesley’s *Primitive Physic*. She gave an evocative description of the garden of a Lancashire herbalist in 1817, “the whole of the ceiling is hung with cords stretched horizontally, ...covered with herbs either drying or dried...whilst numerous large bags of paper,

²² John Skelton, *Plea for Botanic Medicine* (London: J. Watson, 1853), 50-51.

²⁴ Skelton, *Plea*, 51-54. He added that the incident could be corroborated by John Brownson, shoemaker, now of Tavistock.

²⁵ P.S. Brown, “Herbalists and Medical Botanists in Mid-19th-Century Britain with Special Reference to Bristol.” *Medical History* 26, no. 4 (1982), 405-20. <http://www.ncbi.nlm.nih.gov/pubmed/6757600>

²⁶ Hilary Marland, *Medicine and Society in Wakefield and Huddersfield, 1780-1870* (Cambridge: Cambridge University Press, 1987).

²⁷ Brown, “Herbalists and Medical Botanists,” 405-408, 414-16, 419-20.

²⁸ Marland, *Medicine and Society*, 214-28, 235. Richard Bean was Skelton’s son-in-law. He practiced in Leeds, and had worked with Skelton for many years.

²⁹ Marland, *Medicine and Society*, 214-22.

containing other herbs, are suspended from every available hook or nail . . . [and] a garden with the beds neatly laid out . . . every inch of ground being matted with herbs and plants."³⁰ Such an image may well be applicable to the house and garden of Skelton's grandmother.

Thomsonian practice was introduced into England by Albert Coffin (1798-1866) who settled here in 1839.³¹ Coffin's methods of treatment were comparable to those of Thomson as they relied on steam baths and similar herbs including *Capsicum annuum* Cayenne. In Britain, Coffin gave lectures, and set up local groups of the Friendly Botanic Society of Great Britain. Membership was granted along with purchase of the *Botanic Guide to Health*. Like Thomson, Coffin insisted that his agents only purchase supplies from his warehouse. He came in for criticism from the Liverpool branch of the British Friendly Medico-Botanic Society, who recognized that Coffin's system was not as unique as he claimed.³² They could have discovered by reading imported American texts or consulting *Medical Reform*, published in 1847 by John Stevens who explicitly set out the Thomsonian system.³³

Analysis of the *Family Medical Adviser* shows that Skelton used British and American sources. He referred to the Thomsonian course of treatment and theory of fevers.³⁴ He praised Coffin for introducing "American vegetable practice, or medical botany" into Britain.³⁵ He also used publications by other American Thomsonians, for example, Dr John W. Comfort,³⁶ but equally those of the Eclectic, Wooster Beach.³⁷ Skelton used British books, in particular that of Robert Thornton (1768-1837), lecturer in botany at Guy's Hospital.³⁸ Amongst the eighteenth-century books that Skelton used was Buchan's *Domestic Medicine*.³⁹ Equally, he probably owned *Primitive Physic* by John Wesley.⁴⁰

On 16 June 1848 the third annual convention of the British Friendly Medico-Botanic Association was held in Manchester.⁴¹ Their twenty-four branches listed in *Coffin's Botanical Journal and Medical Reformer* in 1848 were mainly in Lancashire, and all north of Derby.⁴² In 1852 Skelton criticized the Medico Botanic Society, established in 1851, in particular as Rule 1 was that agents use "only those remedies which they believed to be pure and genuine and, "procured from the establishments of Drs Coffin and Harle."⁴³ This organization appears to be related to the National Medical Reform League, established in London in 1853, but this period remain unclear!⁴⁴ But we can conclude that there were many associations.....and styles of practice.....

³⁰ Anne Secord, "Science in the Pub: Artisan Botanists in Early Nineteenth-Century Lancashire," *History of Science* 32, no. 97 (1994), 276n42, 287n120. <http://philpapers.org/rec/SECSIT>

³¹ Alison Denham, "Origins and Proponents of the Revival of Herbal Medicine in 19th Century Britain," in *The Western Herbal Tradition: 2000 Years of Medicinal Plant Knowledge*, Graeme Tobyn, Alison Denham, and Margaret Whitelegg (Edinburgh: Churchill Livingstone, 2011), 29-35.

³² *Coffin's Journal*, no.19 (July 1848): 153. The name of the society had changed slightly between 1845 and 1848.

³³ John Stevens, *Medical Reform, or Physiology and Botanic Practice, for the People* (Birmingham: John Turner, 1847), 28-96, 304-13. Another edition with a different Preface was also published in 1847. John Stevens, *Medical Reform, or Physiology and Botanic Practice, for the People* (London: Whittaker & Co, 1847), iii-v. See <http://books.google.co.uk/>

³⁴ The edition of Thomson's *New Guide to Health* used by Skelton cannot be identified as the passage on fevers is the same in the 2nd edition of 1825 and the British edition of 1849. Samuel Thomson, *A Narrative of the Life . . .* 2nd ed. (Boston: Printed for the author by E.G. House, 1825); *New Guide to Health; or Botanic Physician* (London: Simpkin, Marshall & Co., 1849), 10-15. See <http://books.google.co.uk/>

³⁵ Albert I. Coffin, *A Botanic Guide to Health, and the Natural Pathology of Disease*. (Leeds: Samuel Moxon, 1845); *A Botanic Guide to Health, and the Natural Pathology of Disease*, 15th ed. (Manchester: British Medico-Botanic Press, 1850). The 1850 edition, edited by Thomas Harle, was little changed in later editions. See <http://books.google.co.uk/>

³⁶ John W. Comfort, *The Practice of Medicine on Thomsonian Principles, . . .*, 3rd ed. (Philadelphia: A. Comfort, 1850). Comfort was a qualified medical practitioner who studied at the Jefferson Medical College, Philadelphia, in 1832-33. See <http://books.google.co.uk/>

³⁷ Wooster Beach, *The American Practice of Medicine, . . .* (New York: The Author, 1850) This was first published in 1833; *The American Practice Condensed. Or the Family Physician*, 10th ed. (New York: James M'Alister, 1850). The 10th ed. was published in 1847, and entered according to Act of Congress in 1842. This one volume work was 911 pages long but still ran to 56 editions. See <http://books.google.co.uk/>

³⁸ Robert J. Thornton, *A New Family Herbal* (London: Richard Phillips, 1810), ix-xvi. Thornton qualified in medicine in 1793, and was a serious botanist who devoted many years to producing an illustrated British flora on Linnean principles.

³⁹ Buchan, *Domestic Medicine*. According to Christopher Lawrence, the text was little altered after the 3rd edition. Lawrence, "William Buchan: Medicine Laid Open," 22. First published in Edinburgh in 1769, there were 142 editions in English over the next 100 years. See Charles E. Rosenberg, "Medical Text and Social-Context Explaining William Buchan's *Domestic Medicine*," *Bulletin of the History of Medicine* 57, no. 1 (1983), 22.

⁴⁰ See the publications of Deborah Madden who has written extensively on John Wesley. <http://www.sussex.ac.uk/history/people/peoplelists/person/11849/publications>

⁴¹ Coffin's Journal 1, no 19 (July 1848), 156.

⁴² *Coffin's Journal* 1, no. 21 (September 1848): 177.

⁴³ *Botanic Record*, no. 51 (August 1852): 49-53.

⁴⁴ *Botanic Record*, no. 21 (January 1854): 311-15; no. 23 (March 1854): 341-50; "Union of Action: how can it be obtained and what are its conditions?" *Botanic Record*, no. 24 (April 1854): 369-76.