

# When Human Touch makes the difference. The legacy of Charles West (1816-1898), pediatrics pioneer

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**Abstract.** The life and writings of Charles West - the bicentenary of whose birth falls this year (2016) - offer much food for thought about the current debate on the need for more “human touch” by medical and other healthcare professionals. This is the right moment to rediscover the father of British pediatrics and founder of Great Ormond Street Hospital in London, as a possible role model about such a relevant topic. Charles West’s caring attitude towards the sick, especially the little ones, was not merely a vaguely sympathetic approach. From the beginning of his career – while equipping himself with unusual scientific skills (thanks to a very precocious international experience) - West worked out a complete system of dedication to the patient concerning time, gestures, tone of voice, language, appropriate use of diagnostic tools and therapeutic remedies, sensitiveness, communication, material environment... This contribution tries to explore his early writings to find out relevant indications of such a system, which finally proves to be perfectly suited to our times, too.

**Key words:** Charles West, history, pediatrics, soft skills, London, Great Ormond Street Hospital

## Introduction

In recent years, many concerns have been raised about an increasing lack of *human touch* in health care professionals. The problem seems to be rooted both in the process of selection and education of medical students (1), and in the constraints of health care system:

«Yet what happens to students who graduate with their compassion intact and are able to communicate effectively and sensitively with patients? Our system forces them to have time-constrained patient interactions that challenge even the most caring doctors to apply their training »(2).

The topic, of course, is manifold (even more if we think of the children doctor) and it doesn’t come down to a matter of personal attitudes, more or less innate. If history can still be regarded as *magistra vitae*, the bicentennial of Charles West (1816-1898), can suggest us a role model towards a medicine both more caring *and* more effective, a concrete path leading from a good past to a better future.

Charles West is frequently referred to as the “father of British pediatrics” (3). But you can define him, as well, the “father of pediatric nursing” and the founder of Great Ormond Street Hospital for Sick Children in London, one of the world leading institutions for children diseases.

Many have often wondered what has allowed a physician still in his thirties, as Charles West was at that time, to overcome strong resistances and prejudices of Victorian society towards a hospital exclusively dedicated to sick children.

In a town where at the middle of 19<sup>th</sup> Century the diseases of children were so serious “that one child in five die[d] within a year after birth, and one in three before the completion of the fifth year” (4), many enlightened and influential people (among them, Florence Nightingale) (5) argued that a hospital solely devoted to children was unnecessary, too costly and even dangerous for the risk of spreading infectious diseases (6).

Many factors came into play in West’s achievements, not least his great capacity to involve people

even more influential than his adversaries. Such as Charles Dickens, who played a decisive role in turning public opinion in favor of West's ideas. Be that as it may, West eventually succeeded and the Hospital for Sick Children opened in 1852, quickly consolidating its reputation during the following decades (7), and directly inspiring, in 1855, the foundation of the first US hospital devoted exclusively to the care of children: the Children's Hospital of Philadelphia.

West's contemporaries did not have many doubts in identifying his *secret*:

«His success was due to the marvelous sympathy with suffering and power to inspire the feeling that his whole mind and affectionate interests were his patients' for the time being. Children especially, with their wonderful faculty of recognizing those who love them, went to him at once» (8).

This is beautiful, but we look for more. His attitude towards the sick, especially the little ones, was not merely a vaguely sympathetic approach or a willingness to listen. From the beginning of his career – while equipping himself with unusual scientific skills (thanks to a very precocious international experience) – West worked out a complete system of dedication to the patient concerning time, gestures, tone of voice, language, appropriate use of diagnostic tools and therapeutic remedies, sensitiveness, communication, material environment...

We just have to explore his early writings to find important indications of such a system, perfectly suited to our times too.

## Children

Much has been said about time dedication in physician-patient relationship, since a seminal research on JAMA revealed that physicians listened to their patient's statements for a mean of 23.1 seconds, before interrupting them (9).

Charles West considered it normal to visit a sick child three or four times a day, even though it was not a case of special urgency or severity (4). «But also, when there, you try to gather information from the expression of his countenance, but the child is fretful, and will not bear to be looked at; you endeavor to feel his

pulse, he struggles in alarm; you try to auscultate his chest, and he breaks out in a violent fit of crying» (4).

Many practitioners in West's time were unable to surmount these typical difficulties of visiting a child and his/her diseases remained “a sealed book to them” (4). The conditions of an effective approach were “patience, the most untiring, and good temper, the most unruffled” (4). The doctor who does not feel humiliated by the need to resort to something to distract or amuse his little patient (“as your watch or stethoscope”) is starting to communicate with him in the right language and can attempt to interrogate him:

for though the infant cannot talk, it has yet a language of its own, and this language it must be your first object to learn, if you mean ever to acquire the character of successful practitioners in the diseases of children. (...) it is a language of signs, and these signs are such as will escape the notice of the careless; if you are not fond of little children, you cannot learn it, for they soon make up their minds as to who loves them, and when ill they will express their real feelings, whether by words or signs, to no one else (4).

His constant references to tact and gentleness did not prevent him from resorting the rude therapeutic armamentarium of his time, including bloodletting and leeches: “four or six leeches beneath the *scapulae*” of a two years old child (10)!

And if we are not surprised of the “the many anxious hours” he spent, during this uncertain course of treatment,<sup>4</sup> we have to highlight his insistence on the need to create a serene, cheerful and even playful environment for the sick child. (Don't forget that we are mainly talking about the poor children of the Victorian London, the unfortunate peers of Oliver Twist, Nell Trent and Tiny Tim) (6).

For West, even the dreaded *therapeutic bath* could be turned into an occasion of fun (“put in a couple of corks or bungs with feathers stuck in them, for baby to play with”) (11) and caring doctors and nurses couldn't be ever “at a loss in finding a story to tell” (11).

When his *Hospital for Sick Children* finally opened its doors in Great Ormond Street, on February 1852, many curious visitors began to wander among the cots of the little sick. Two rather special ones, just a few weeks after the opening, were Charles Dickens and Henry Morley. Their extraordinary pens managed to

popularize how much the ideals of West were proving effective:

«We followed, up the spacious stairs into a large and lofty room, airy and gay. It had been the drawing-room of the old house. A reviving touch had passed over its decorations; and the richly-ornamented ceiling, to which little eyes looked up from little beds, was quite a cheerful sight. The walls were painted, in panel, with rosy nymphs and children; and the light laughter of children welcomed our entrance. There was nothing sad here. Light iron cribs, with the beds made in them, were ranged, instead of chairs, against the walls. There were half-a-dozen children - all the patients then contained in the new hospital; but, here and there, a bed was occupied by a sick doll. A large gay ball was rolling on the floor, and toys abounded» (12).

As Dickens and Morley summarized their impressions:

«Good thought had been evidently directed to a good purpose everywhere» (12).

## Nurses

With the first generation of nurses he trained for his hospital, West was as demanding as with himself. West loved to quote this old proverb: *‘Whatever is worth doing at all, is worth doing well’* adding that “about nothing can this be more true than about an occupation on the well-doing of which wealth and life depend” (11).

He was not willing to turn a blind eye on “any bad temper, any angry feeling, any impatience, any neglect, or careless watching of those whose life or health is entrusted to you” (11). Even a gesture as simple as waking a child, meant for him a *quality procedure*:

«It must not be suddenly roused, nor roughly awakened; but after being half aroused by gently touching it, it may then be softly called to by name, or by some customary term of endearment, while it is always desirable that a face which it knows and loves should be the first to catch its eye on awaking» (11).

All this made somebody fearful that nursing children was excessively time consuming and therefore the monetary costs of a children’s hospital would soon go out of control (6). But Charles West was always more

ready to embark on a new fundraising campaign, than to reduce his high standards of hospital care.

But, while demanding this all-round professional vision, West did not forget to focus also on the nurses’ motivation and reward:

«The delight of seeing a sick child recover; of watching all its little baby ways come back one by one; of feeling that you have its confidence and love (...) this is a source of pure and daily returning happiness, such as no other occupation brings with it, such as ought, I think, to make for you what a good man called “music at midnight”» (11).

No wonder that children nurses themselves considered him as a role model. The testimony that the most famous and influential of them, Catherine Jane Wood, gave to the *British Medical Journal* after West’s death is worth quoting:

«He it was who, in 1862, introduced the trained and educated gentlewoman into the wards of the Children’s Hospital, and from that year may be dated the immense advance that took place in the nursing of children’s diseases. Dr. West from the first superintended the new arrangements himself, and he gave the most unremitting attention to all the details of the nursing; nothing escaped his notice; he knew each nurse; and he constantly enquired as to their progress and aptitude for the work. A nurse was not only to be proficient in her work, but she was to succeed in making her patients happy and in winning their confidence, or she was not worthy to be on the staff. (...) There was no more touching sight than to see Dr. West make his round; the little patients welcomed him as their friend, and the fractious or frightened child could not long resist the magic of his smile or the winning gentleness of his manner» (13).

## Women

The human touch of Charles West was not reserved to children. Even adults were entitled to it. The obituarist of the *BMJ* added this unexpected story to his portrait:

«That skillful sympathy which children felt without recognizing, drew older patients, and especially women in sorrow or distress, back to him year after year, not only for medical advice, but for help and counsel in the trou-

bles of their lives. One old lady, to whom he had been a great help in sorrow, the widow of a very well-known artist, used to come to him regularly, and putting his fee on the table say, "I have nothing the matter with me, but I want a talk, and I am not going to have it for nothing. You always send me home better and happier"» (14).

I insist: all this was not only a matter of natural good and jovial temper. That was the way he had forged himself along a hard professional path.

We cannot forget that West was a worldwide recognized authority not only for his *Lectures on the diseases of infancy and childhood* (1848) (15), but also for his *Lectures on the diseases of women* (1856) (16). The man who, in his later years, was so much sought after by "women in sorrow or distress" looking "not only for medical advice, but for help and counsel in the troubles of their lives", when young or middle-aged always made a point of trying to avoid, during a general or gynecological examination, any risk of wounding his female patient feelings with "any needless delay, any careless exposure of her person, any apparent want of delicacy and consideration" (16).

Accordingly, so he concluded his lecture on this topic:

«I am therefore all the more anxious to impress upon you that the delicacy with which you ought to conduct all your investigations into the diseases of women, is not a thing which can be assumed for the nonce, but that it must be the habit of the mind, must therefore have been acquired now during your pupilage, and in the midst of your intercourse with the poor"» (16).

And *delicacy* paid, not to mention the savings for the health care system when you sent your patients "home better and happier"!

## Students

Can you imagine how did behave a man like this with his students? When still a student himself, West had experienced and suffered from the lack of interest with which the new pupil was often met, as he "began his arduous duties at our schools of medicine without any preliminary word of explanation, advice, or encouragement from his future teachers" (17). He tried to be different and eventually succeeded. One of his own pupils left this testimonial:

«A more zealous instructor never was. His aid, night or day, was ever available for the student. He was still, to himself, essentially a student, I think, all his professional life» (6).

That's why, when only 34, he addressed the newcomers to St Bartholomew's medical school, stirring up their

«Desire to distinguish yourselves [...] not by scientific attainments only, but by moral worth» (17).

## Conclusion

Charles West was not a faultless man. Those acquainted with the run of his life, know that his painful contrast with the management of his hospital, that eventually led to his removal from his creature, was also due to what some have called abrasiveness and lack of diplomacy towards his colleagues (6).

Nonetheless, his vision of the medical role and of the educational path towards it is exactly what today we feel so much need of. Although we may not know how to express it so clearly as Charles West could do:

«But, in order to obtain that personal acquaintance with your patient which is often so absolutely essential to your treating his malady with success, you must take a real interest in him and all that concerns him; an interest different from and far deeper than that with which you would regard him, if looked at merely as an object of scientific inquiry. It must be an interest in him as a fellow-man, bound to the world by like ties with yourselves; the sharer in the same hopes and fears, and heir to the same immortality. This, however, will not spring up spontaneously in your minds, even in this place, so well adapted to cherish it; or rather there is some risk lest, without due care on your part, those feelings which our common humanity may at first engender should be extinguished in the overwhelming interest, in a scientific point of view, of all those processes of disease and remedy which you will see every day going on around you. Were I to appeal merely to selfish considerations, however, I should yet urge you to cherish and keep alive such feelings, for they are essential to your understanding your patient aright, essential to your gaining his confidence, essential to your own success» (17).

Probably, it's time to learn these *simple* lessons again.

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