

Surgeon's Journal of Her Majesty's Female Convict Ship Phoebe
between the 7th day of September 1844 and the 9th Day of January 1845
Mr AF Macleroy, Surgeon
Adm. 101/59/5

NAME	WHEN PUT ON SICK LIST	AGE	QUALITY	DISEASE OR WOUND	WHEN PUT OFF SICK LIST	HOW DISPOSED OF
CHARLES ROBERTS	Sept. 16	22	Seaman	Wound	Sept. 23	To Duty
DANIEL McNAMARA	Sept. 21	37	Boatswain	Wound	Sept. 30	To Duty
ANN KERR	Sept. 25	56	Convict	Phthisis	Jan. 3 1845	Hospital
MARY ANN MAJOR	Sept. 26	28	Convict	Gonorrhoea	Oct. 21	To Duty
JULIA BOLAND	Sept. 26	25	Convict	Mamy. Abscess	Oct. 11	To Duty
JOHN ALLAN	Sept. 28	21	Seaman	Hernia Humoralis	Oct. 11	To Duty
ELIZABETH KELLY	Sept. 30	24	Convict	Mental Aberration	Oct. 21	To Duty
ELLEN REILLY	Oct. 7	33	Convict	Febricula	Oct. 23	To Duty
HONORA REGAN (Margaret McCarthy)	Oct. 9	24	Convict	Dysentery	Oct. 13	Dead
ELIZABETH LEE	Oct. 9	52	Convict	Syncope	Oct. 25	To Duty
JUDITH BYRNE	Oct. 9	24	Convict	Dysentery	Oct. 24	To Duty
ANN HOURIGAN	Oct. 10	25	Convict	Psora	Oct. 25	To Duty
JANE CONNOLLY	Oct. 12	20	Convict	Psora	Nov. 8	To Duty
ELLEN RIORDAN	Oct. 12	30	Convict	Ophthalmia	Oct. 17	To Duty
MARY CONNOLLY	Oct. 12	19	Convict	Psora	Oct. 18	To Duty
MARY SHERIDAN	Oct. 14	32	Convict	Menorrhagia	Nov. 10	To Duty
MARGARET BYRNE	Oct. 15	22	Convict	Febricula	Oct. 28	To Duty
MARGARET COLLINS	Oct. 16	30	Convict	Febricula	Nov. 10	To Duty
MARY HEFFERNAN	Oct. 18	18	Convict	Psora	Nov. 10	To Duty
CATHERINE QUINN	Oct. 21	30	Convict	Febricula	Oct. 23	To Duty
GEORGE MONROE	Oct. 21	20	Seaman	Dysentery	Oct. 31	To Duty
MARY TAAFE	Oct. 22	40	Convict	Dysuria	Nov. 2	To Duty
FRANCES McAULEY	Oct. 23	40	Convict	Dysentery	Oct. 31	To Duty
MARY BRYAN	Oct. 23	40	Convict	Syncope	Oct. 28	To Duty
MARY ANN NORMOYLE	Oct. 23	18	Convict	Constipation	Oct. 25	To Duty
BRIDGET HUGHES	Oct. 24	33	Convict	Hysteria	Nov. 15	To Duty
SARAH O'BRIEN	Oct. 25	21	Convict	Colic	Nov. 1	To Duty
JULIA BOLAND	Oct. 28	29	Convict	Ulcer	Jan. 3 845	To Hospital
MARGARET FINNEGAN	Oct. 28	26	Convict	Ulcer	Dec. 23	To Duty
BRIDGET JOHNSON	Oct. 28	25	Convict	Febricula	Nov. 3	To Duty
MARY BURNS	Oct. 30	34	Convict	Dysentery	Nov. 11	To Duty
MARGARET LEE	Oct. 30	36	Convict	Colic	Nov. 2	To Duty
MARY PARSONS	Oct. 30	21	Convict	Constipation	Nov. 2	To Duty
CATH. TIMS	Oct. 31	25	Convict	Febricula	Nov. 5	To Duty
CECILIA HIGGINS	Nov. 1	40	Convict	Febricula	Nov. 10	To Duty
BIDDY J McKENNA	Nov. 2	35	Convict	Febricula	Nov. 6	To Duty

NAME	WHEN PUT ON SICK LIST	AGE	QUALITY	DISEASE OR WOUND	WHEN PUT OFF SICK LIST	HOW DISPOSED OF
MARIA LEESON	Nov. 6	25	Convict	Dysentery	Nov. 25	To Duty
MARY KELLY	Nov. 7	39	Convict	Nostalgia	Jan. 7 1845	To Duty
MARY GORMAN	Nov. 8	30	Convict	Ophthalmia	Nov. 14	To Duty
ELIZABETH KELLY	Nov. 8	24	Convict	Phlegmon	Nov. 14	To Duty
MARY PARSONS	Nov. 8	21	Convict	Scald	Nov. 23	To Duty
CHAS. TROTT	Nov. 9	20	Seaman	Wound	Nov. 22	To Duty
JOHANNA FITZGERALD	Nov. 9	26	Convict	Epilepsy	Nov. 14	To Duty
MARGARET ROONEY	Nov. 11	25	Convict	Febricula	Nov. 22	To Duty
CATH. TIMS	Nov. 12	25	Convict	Phlegmon	Nov. 15	To Duty
JULIA BYRNE	Nov. 12	30	Convict	Hysteria	Nov. 15	To Duty
MR. APPLGARTH	Nov. 13	20	3rd. Mate	Contusion	Nov. 16	To Duty
MARY McLANE	Nov. 13	19	Convict	Concussion	Jan. 2 1845	To Duty
BRIDGET HYNES	Nov. 15	30	Convict	Colic	Nov. 17	To Duty
ELIZABETH LEE	Nov. 16	52	Convict	Syncope	Nov. 24	To Duty
CHARLOTTE HAUGHRAN	Nov. 18	28	Convict	Dysentery	Dec. 13	To Duty
ALICE McQUAIDE	Nov. 20	36	Convict	Parturition	Dec. 5	To Duty
MARGARET STRITCH	Nov. 21	22	Convict	Syncope	Nov. 25	To Duty
ELLEN DWYER	Nov. 22	28	Convict	Febricula	Nov. 26	To Duty
MARY McCARTHY	Nov. 22	27	Convict	Febricula	Nov. 27	To Duty
MR. APPLGARTH	Nov. 23	20	3 Mate	Febricula	Nov. 26	To Duty
CATHERINE CROMIE	Nov. 24	36	Convict	Febricula	Nov. 28	To Duty
ANN FOOT	Nov. 25	43	Convict	Febricula	Dec. 5	To Duty
MARY REILLY	Nov. 25	30	Convict	Colic	Nov. 28	To Duty
BRIDGET HUGHES	Nov. 26	33	Convict	Hysteria	Dec. 5	To Duty
MARY ANN NORTH	Nov. 27	44	Convict	Contusions	Dec. 15	To Duty
MARGARET COLLINS	Nov. 28	30	Convict	Colic	Nov. 29	To Duty
MARY RYAN	Nov. 29	40	Convict	Diarrhoea	Dec. 3	To Duty
MARY GORMAN	Nov. 30	30	Convict	Ophthalmia	Dec. 6	To Duty
ANN NEILL	Dec. 3	33	Convict	Wound	Dec. 15	To Duty
ELIZABETH HULTON	Dec. 3	40	Convict	Wound	Dec. 17	To Duty
BRIDGET BRADY	Dec. 3	22	Convict	Contusions	Dec. 6	To Duty
EDWARD CAMPBELL	Dec. 10	24	Seaman	Diarrhoea	Dec. 12	To Duty
LINDSAY McINTOSH	Dec. 10	14	Seaman	Diarrhoea	Dec. 12	To Duty
CATHERINE CROMIE	Dec. 10	36	Convict	Phlegmon	Dec. 20	To Duty
SARAH WARD	Dec. 12	26	Convict	Abortion	Dec. 21	To Duty
MARY GORMAN	Dec. 13	30	Convict	Ophthalmia	Dec. 22	To Duty
FRANCES LANGSTAFF	Dec. 22	32	Convict	Contusion	Dec. 24	To Duty

NAME	WHEN PUT ON SICK LIST	AGE	QUALITY	DISEASE OR WOUND	WHEN PUT OFF SICK LIST	HOW DISPOSED OF
SARAH O'BRIEN	Dec. 22	21	Convict	Ammorrhoe	Dec. 23	To Duty
MR. BROMFIELD	Dec. 23	22	2nd. Mate	Contusions	Dec. 24	To Duty
PHILIP PAGET	Dec. 23	22	Butcher	Rheumatism	Dec. 29	To Duty
CHARLOTTE HAUGHRAN	Dec. 25	28	Convict	Dysentery	Jan. 2 1845	To Duty
CATHERINE HARKIN	Dec. 26	20	Convict	Tumour	Jan. 3 1845	To Hospital
ALLEY ANN WATSON	Dec. 29	27	Convict	Parturition	Jan. 2 1845	To Duty
MARGARET FINNEGAN	Dec. 30	26	Convict	Ulcers	Jan. 3 1845	To Hospital
MARY REILLY	Jan. 1 1845	30	Convict	Catarrh	Jan. 4	To Duty
FRANCES LANGSTAFF	Jan. 1 1845	32	Convict	Catarrh	Jan. 6	To Duty

Medical and Surgical Journal of Her Majesty's Convict Ship Phoebe between the 7th day of September 1844] and the 9th day of January 1845 during which time the said ship has been employed in a voyage from Ireland to Hobart Town, Van Diemen's Land

Nature of Disease	No. of Case	Men's Names, Ages, Qualities, Time when and where taken ill, and how disposed of.	The History, Symptoms, Treatment, and Daily Progress of the Disease or Hurt.
Phthisis	1	Ann Kerr Aged 56 Convict Sept ^r 25 th 1844 Kingston Ireland Discharged To Hospital at Hobart Town January 3, 1845	Of a thin emaciated appearance. While engaged today in "berthing" Prisoners below, observed the subject of this case labouring under severe cough; ordered her to the Hospital for examination & shortly afterwards had an opportunity of visiting her, when I found much Depression of Spirits - general soreness of the Chest - a very troublesome cough & a frequent pulse - gave her a draught containing <i>Tinct. Opii g^{tt} xxv & Spt Ether Nitras. g^{tt} xxx</i> September 26 Complains of pain in the left side of chest increased on inspiration or coughing - pulse 100 small & soft - no expectoration - bowels confined - thinks she "caught cold" on the Evening of the 24 th by sleeping without her bed which in the confusion of the first night on board, she has been unable to find after leaving it a few minutes while she went to talk to a friend - says she has been troubled with a cough for some years & that she has frequently expectorated blood: <i>Applicat Emp. Vesicat. pectore. et Habt S.S. Magnes cum [Tinct]. Aut. - ter in die</i> 27 th Blister risen well - pain less severe - breathing accelerated - cough troublesome but softer - some mucous expectoration but no

			<p>appearance of blood with it - pulse still frequent - patient extremely dejected, less perhaps from dread of her disease than the terror of transportation - <i>Contin. Solut.</i></p> <p>29th Was much the same as yesterday; complains more of general soreness today arising most probably from the motion of the ship, caused by a heavy swell, & the want of sleep in consequence - pain of left side certainly easier & cough less troublesome - breathing continues frequent - expectoration free of a muco-purulent character - some nausea, proceeding most likely from Sea Sickness as she evades taking the medicine whenever she can - pulse 90 soft blister healing - <i>omitt Solut.</i></p> <p>Oct 3rd The cough during the last two days has been much less severe; the expectoration has gradually diminished and she has otherwise improved - this morning however she again complains of soreness in the chest, accompanied by a teasing dry cough & loss of appetite - pulse 92 full & soft - bowels regular - <i>Rept. Visicat. Pector; et Habt Mist pro tusse cum Tinct Digital</i></p> <p>5th Says she is much easier this morning - cough frequent but expectoration free purulent in appearance, & containing small clots of florid blood - pulse 86 full & soft - no appetite - bowels regular - blister discharging - allowed Rice or Sago as she feels inclined - <i>Contin.</i></p> <p>8th Much better - appetite improving - no pain "only a soreness in the chest" - expectoration free, muco purulent & still shewing a small streak or clot of blood - blister nearly healed - <i>contin.</i> --allowed a little soup occasionally.</p> <p>12th Little complaint but weakness, and occasional cough - appetite indifferent - continues to use the mixture now given without the Digitalis.</p> <p>20th Has been free from all complaint but weakness & cough until yesterday when she again caught cold from sitting some time near the Hatch way - today she seems very desponding & much in dread of dying; the Matron of the ship also adds much to her alarm. While she is evidently suffering (as she frequently does) from Sea Sickness, tho' it is seldom so severe as to cause vomiting - cough troublesome - expectoration free, chiefly mucous without any appearance of blood - complains of soreness all over the chest, particularly on the left side - respiration frequent - pulse 90 regular & soft - has very little appetite at any time, & at present takes nothing but a small quantity of Tea at intervals; even the Tea she now seems indifferent about - she is constantly in bed, lying in a cramped, apparently uncomfortable position, either on her right side with the knees</p>
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			<p>drawn up; or resting on her elbows & knees by which she seems to obtain greater facility in breathing -bowels confined - <i>Tartar Emetic</i> ointment ordered to be rubbed on the chest, & <i>Habt. Pil. Hydrarg. g^r.v. Pulv. Rhei: g^r.xii statim-Rx Ext. Hyosciami. g^r.xxiv. Pulv. Ipecac. g^r. xxx. Ol Menthe pip. g^{ss}. viij. Mucilage. Acaciae q.s. ft Mass.et divide n. pilul. xii - 1 nocte et mane sumend..</i></p> <p>28th Patient with the exception of less soreness in the chest, has been going on in much the same condition as described in last report, occasionally benefitted by, & frequently sleeping better after, being brought on deck two or three hours each day, during fine weather; at the same time, the appetite has not improved; she takes but a small portion of soup lately, daily presented to her, & is evidently weaker - The friction with the ointment producing but a small crop of pustules, after frequent application, has been continued daily over those parts of the chest left unaffected by the previous rubbing: the skin is now well covered with pustules, & the inflammation produced thereby causes so much uneasiness as to form at present the principle complaint - cough still troublesome - expectoration easy, & more natural - breathing more regular - pulse 80 - allowed a little Port Wine daily - <i>Omitt. Pil</i> - Throughout the whole passage no change worth detailing took place in this case - the cough & soreness of the chest recurred frequently & were again relieved by free expectoration which was often purulent & sometimes contained blood - the patient never left her bed excepting as above mentioned, & always showed much reluctance being conveyed from below to the more free air, & Sunshine of the Deck - Blisters & Tartar Emetic Ointment were frequently made use of to the chest, for the purpose of exciting counter irritation & external discharge - Expectorant Mixtures, Anodynes etc were also freely given as occasions required, and as the Weakness continued to increase, Quinine was added to the daily allowance of Port Wine & on the 3rd day of Jan^y 1845 one day after reaching Hobart Town she was Discharged to the Hospital at that place.</p>
Ulcers	2	<p>Julia Boland September 26th 1844 At Sea Discharged to Hospital January 3rd 1845</p>	<p>Of a strumuous habit & apparently much older than she describes herself to be: complains of pain in the right mamma which on examination is found generally enlarged and covered with an erysipelatous blush: the greatest redness is on the inner surface, & immediately underneath this part there is a thickened portion of the breast, nearly circular, about three inches in diameter, well</p>

			<p>defined at the edges, hard, and painful to the touch: by her own account, she felt it coming on some days ago, but made no complaint owing to the excitement attending her removal from the Prison to the Ship; the same reason appears not only to have prevented her paying proper attention to it, previous to her arrival, but in all probability since she came on board yesterday, has frequently subjected it to injury - she is now nursing a thin weakly child about two months old - no deficiency of milk in either breast - no fever - general health apparently pretty fair. Habt Sulph. Magnes Zifs statim - ordered to keep up evaporation from the mamma by the constant application of clothes wet with cold Vinegar & water, avoiding the nipple in order that the child may be applied as often as the patient finds agreeable</p> <p>28th September. Inflammation of the skin less extensive but more intense over the indurated part of the breast which seems inclined to point - the rest of the breast feels softer - Omitt Lot. - Cataplasm</p> <p>30th Abscess pointing and fluctuation distinct, an opening was made giving egress to nearly two ounces of matter, some of it of a solid & curdy nature - Contin. Catap.</p> <p>Oct. 2nd Supply of milk still good in both breasts - little discharge from the ulcer which is partly filled with a slough of cellular membrane: edges & parts adjacent, more oft, & lip painful - Contin. Cataplasm & to have a small quantity of Pulv. Cinchon. sprinkled over the sore, each time of changing the poultice.</p> <p>4th. Slough detached - ulcer looking well, & dressed now with dry Lint & the edges brought together with sticking plaster.</p> <p>11th. Ulcer healed - Discharged</p> <p>Oct. 28th Came aft today & shewed a circular ulcer about one & a half inches in diameter, on the inner side of the left leg, four or five inches above, & a little in front of the inner maleolus; The ulcer is shallow, thin at the edges, & occupies part of the cicatrix left by an old sore over which it seems rapidly extending - the Tibia at this part presents a hollow, the sides of which, on being traced by the finger are found indurated and irregular: the cicatrix seems to cling to the bone, while the surrounding soft parts rise abruptly from the cup like spot, swollen & œdemateous the swelling is greatest about the ankle & foot giving to the leg a crooked appearance; altogether presenting sufficient proof of previous extensive exfoliation. Patient allows that several pieces of bone have been detached from the leg at different times, but gives a very indistinct account of the commencement & progress of the disease. Her general health appears much the same</p>
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			<p>as when she was last upon the sick list, tho' the breasts now yield but an indifferent supply of milk for the child. The Leg being hot & painful, the patient is retained in the Hospital for the double purpose that she may have no excuse for neglecting it, & that the child may be taken care of occasionally by another patient, (Kerr who has voluntarily undertaken the duty) when necessary - the Ulcer has been covered with lint, the leg bandaged from the toes to the knee, & the patient ordered to keep it constantly wet with cold water, retaining the leg as much as possible in the horizontal position.</p> <p>29th No change with the exception that the ulcer is still spreading - Bandage reapp^d. Contin.</p> <p>31st Leg easy - swelling reduced. Ulcer now occupies all the old cicatrix & is discharging freely - Contin.</p> <p>Nov^r. 4th Very little pain - swelling much abated - ulcer still superficial, continues to discharge freely, but is gaining new skin at the edges. Contin.</p> <p>6th granulations becoming very high, have been touched this morning with the Cupri Sulphas - lint & bandage applied & water used as before.</p> <p>8th Ulcer painful & inclining again to spread - patient loosing colour and looking thinner - supply of milk nearly gone - Child thriving well on Arrow root & Sago - patient allowed a portion of Soup daily & to have one ounce of Port Wine & two grams of Quinine twice a day. The remainder of this case contains nothing of interest,- no detachment of bone took place from the ulcer, which although several times nearly closed, never completely cicatrized during the rest of the passage & at the time of her discharge was nearly as large as when she first presented it to me - the general health continued to be supported by a free allowance of Medical comforts; the sore was treated according to circumstances, sometimes with pledgets dipped in Laudanum to relieve pain, at other times with dry Lint & different ointments according to the quantity and nature of the discharge, & on the 3rd. of January 1845 she was removed to the Hospital at Hobart Town Van Diemens Land.</p>
Dysentry	3	<p>Honora Regan or Marg^t. McCarthy Aged 24 Convict Oct^r 9th at sea Died Oct^r. 13th. 1844</p>	<p>Of a sallow complexion and emaciated frame. Has been afflicted according to her own account with a looseness during the last three months, & since she came on board the "Phoebe", on the 24th ultimo, she has several times complained of a troublesome diarrhoea, for which I have given her Dovers Powder, Rhubarb, chalk mixture, & Catechu. -</p>

			<p>complains this morning of constant inclination to go to stool, with much tenesmus- countenance anxious & dejected- pulse frequent but soft - much thirst - abdomen painful on pressure, & somewhat enlarged – <i>Rx Tinct opii g^{tt} xxx Spirit Ether Nitros. g^{tt} xxv Ol Menth Pip g^{tt}ij. Aqua Zifs statim sumend-</i> Fomentations to the abdomen. At Noon four hours after taking the draught, find the symptom unabated - stools frequent, frothy & tinged with blood - ordered a Pill composed of <i>Calomel g^r iifs, Opii g^r fs 4^{ter} quaque hora-</i> Rice water or Tea for drink. has taken two pills - appears easier - stools less frequent. <i>Contin.</i></p> <p>Oct^r. 10th Says she slept pretty well in the early part of the night & was not disturbed from the time I saw her, (near 8 pm) till sometime after midnight, when the purging again returned & has since continued, attended with nausea occasional vomiting - pulse still frequent, small & soft - abdomen still painful on pressure - countenance much dejected - some Tincture of opium applied with Fom to the Epigastrium, having produced no effect on the nausea, a pledget dipped in Ol Terebinth was substituted which checked the vomiting & afforded some relief to the pain - ordered the Pill to be continued, & waiting to see her take one, observed her pretend to swallow & afterwards attempt to secrete it – asserts strongly that she has taken all the rest of the pills at the regular periods, tho’ it would seem that she has not taken more than the three first - Pill discontinued, & a sixth part of the following mixture (previously well shook up) to be given every four hours instead. <i>Rx Cret. 6pt. zifs Tinct Catechu ziifs Mucilag Acaciae Zijj, Aqua Zv. Tinct opii Zfs, Ol. Menth. pip gtt.x fi Mist?- Contin. Fomant.</i></p> <p>Vespere. vomiting less troublesome - purging continues - patient very weak - ordered to have a table spoonful of Port Wine mixed with water every three or four hours, and an Anodyne Enema to be immediately administered.</p> <p>October 11th Hospital nurse reports that patient was disturbed only four or five times during the night & that she slept fairly - seems easier this morning but extremely weak - pulse much the same - <i>Contin.</i> mixture & wine. Vespere- Stools have been frequent & as usual streaked with blood - on pressing the abdomen, says there is less pain - vomiting troublesome whenever the patient takes more than a limited quantity of drink at a time - the suffering from severe pain evidently from a different character from that she had hitherto experienced; the marked manner & appearance of the patient while the pain lasted, its going off during my presence, & the nurse in reply to a</p>
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			<p>question having stated that she had a similar attack a short time previous, convinced me that the patient was in labour: this however she stoutly denied, at the same time she declined replying to my question on the subject - the pains continuing at very short intervals, she was soon induced to submit to examination, & a very small Foetus was found partially delivered; the feet already protruding from the vulva - had her placed at once on a bed and at 11½ completed the delivery of a dead Foetus of about 4 or 5 months; the Secundines were expelled shortly afterwards - very little hemorrhage took place, but the Dysentery continuing, patient became so much exhausted that after giving her an anodyne, I was under the necessity of ordering double the quantity of wine to be given in the form of Negus at the same intervals.</p> <p>12th. Patient slept little during the night, tho' she was comparatively easy & free from pain, until about daylight, & since which time the Stools have again become frequent producing great exhaustion - no evidence of any vaginal discharge - stools small, dark & very offensive - pulse 110, feeble - pressure on the abdomen appears to give little uneasiness - has taken the medicine, & wine, regularly since last night - declines to allow another Anodyne enema to be given. <i>Contin.</i> - Vespere Tried a little cold Tea twice or three times during the day, but each time it was immediately rejected by the stomach - vomiting is now very frequent - the purging still continues & the patient is sinking fast - a sinapism to the Epigastrium & afterwards a pledget dipped in Tincture of opium have had no effect on the vomiting & every medicine is immediately rejected.</p> <p>13th. Became gradually weaker during the night & died at 9½ this morning.</p>
Ulcers	4	<p>Margt. Finnegan Convict Oct. 28th 1844 At Sea Discharged to Hospital January 3rd. 1845</p>	<p>Of a robust habit -Right Leg much swollen from the knee downwards - skin discoloured, scaly & covered with numerous small spots of ulceration, extending from the middle of the calf to the ankle, none of them exceeding the size of a Shilling & all superficial - general health good -says she has been thus afflicted upwards of two years & that the ulcers first appeared after an attack of Erysipelas: Has never before complained since she came on board, & seeks relief now in consequence of additional pain & swelling - small pledgets of Lint being laid on the sores, a bandage was applied from the toes to the knee, & the patient ordered to remain in the Hospital, keeping the bandage constantly wet with cold water</p>

			<p>Oct. 29th Disliking the constraint of the Hospital, the patient remained there but a short time, when she again moved forward on the Lower Deck: finding that she was likely to be troublesome in the Hospital, she was ordered (with a view to save her leg from injury) to occupy a spare berth in "midships" adjoining her own mess, instead of going to her usual place, & the bandage which had become loose being reapplied, she was strictly enjoined not only to keep the leg constantly wet, but to give it as much rest as possible.</p> <p>Nov^r. 1st Swelling much reduced - little change in the appearance of the ulcers which discharge a good deal - patient exceedingly careless, dirty & disobedient, taking advantage, of every opportunity when free from pain, of moving about & even dancing when unobserved, so that the bandage is often rendered worse than useless - no advice nor even the threat of punishment appears to have the slightest effect in restraining her conduct - Lint to ulcers & Bandage applied as usual - Allowed Solution of Citric Acid for drink</p> <p>.Nov^r. 12th The state of the leg since last report has at times altered much; always putting on a healthy aspect when the patient submits to rest & proper treatment, but invariably becoming inflamed & angry, whenever she makes use of undue exertion - today it is more inflamed than usual in consequence of its having been found necessary yesterday to inflict upon her the punishment of 12 hours confinement for attempting familiarity with the crew - she has again been placed in the berth lately allowed her, & retained under the same treatment as before, tho' with little probability that she will become more careful either about her leg or person - Throughout the whole progress of this case there has been so little veracity in the treatment or condition (further than described) that to go in detail would be but to repeat - the patient far from improving in her behaviour, appeared to get daily more neglectful & had to be punished several times by imprisonment for various more grievous offences - The more cool weather however, experienced, as we approached a higher Southern Latitude, at length appeared to produce a change, the sores put on a healing aspect and the swelling disappeared, so much that although the skin was still scaly and discoloured to some degree, she was considered well enough to be discharged on the 23rd of December. Only seven days afterwards, observed her walking with a halt in her gait, which she had seldom done before, even when the leg was in its worst condition; on examination it was found much inflamed, and nearly as bad as ever; similar treatment was had recourse to & on the 3rd of Jany.</p>
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			1845 she was discharged to the Hospital at Hobart Town.
Concussio	5	Mary McLane Convict Novr. 13th 1844 At Sea Discharged to duty January 2 nd . 1845	<p>While in the Hospital today at 10 am. heard some one fall heavily on deck & was immediately called to attend the subject of the present case, whom I found near the after Hatchway in a state of insensibility, the consequence of a fall on the left Temple, occasioned by the slippery state of the deck & excessive motion of the Ship - The Master having witnessed the fall, observed, that she shuddered much at the moment - found the pulse slow & scarcely perceptible - breathing sterterous - some foaming at the mouth - pupils much contracted - limbs paralytic - extremities cool - no appearance of external wound on the head. In about fifteen minutes the pulse had recovered a little & she became sufficiently sensible to answer questions, but did not seem to recollect anything of the fall. had her conveyed to the Hospital. A few minutes afterwards the pupils were observed to become dilated to a much greater degree than the limited light of the Hospital could possibly account for - gave her <i>Cal.g^r vi. & Jalap g^r.xvi.</i> immediately, in the form of Electuary - Enjoined perfect quiet in the Hospital, & placed a guard outside in order to prevent any noise near that part of the deck.</p> <p>Noon. complains of headache without referring the pain to any particular part - pulse 80 small & very soft - skin cool - pupils much dilated - patient dull, drawling & depressed, at the same time evidently suffering much from Nausea, making frequent attempts to vomit.</p> <p>Evg. Nov^r. 13th Vomited several times during the afternoon - refers the pain to the forehead - pupils still much dilated - pulse 80 fuller but soft - skin becoming warm - Ord. cold vinegar & water to the forehead.</p> <p>Nov^r. 14th Quite sensible - slept a good deal during the night - complains of pain in the left temple & points out a little tumefaction there, painful to the touch - pupils less dilated tho still large - occasional vomiting - pulse 80 soft - skin warm - no operation from the medicine: <i>Rx Cal. g^r v Ext Col. Co. g^r vi. Pulv. Scarmmon g^r iij. ft. pil. Iij statim Sumend.</i></p> <p>Vespere. No operation - patient vomited several times during the day but no trace of the pills could be discovered in the matter ejected which consists chiefly of water & Tea that she had been allowed to drink - no change on the pulse etc. - <i>Contin app. Frigid.</i></p> <p>15th No operation yet - complains of pain across the forehead & temples - pulse 90, soft - skin warm</p>

			<p>- pupils much the same - tongue very foul - patient drinks much water & Tea, but inclines for nothing else</p> <p><i>Rx Calomel gr̄ x. Pulv. Jalap ʒI-</i> Cold applications to be continued to the head - Vespere No Action on the bowels yet, but the stomach has been very quiet since taking the medicine - other symptoms much the same - The Calomel (<i>gr̄ x</i>) repeated in the form of two pills accompanied by two drops of Croton Oil, on a little sugar.</p> <p>16th Two operations late this morning - complains of pain across the forehead increased by pressure on the eyeball - much giddiness on raising the head - pulse 96 small - skin warm - pupils still large - nausea continues - tongue very foul - <i>Rept. Cal & Ol Croton</i> - continue Cold applications.</p> <p>17th No action from the medicine which most likely was rejected, the nausea & vomiting having been troublesome yesterday - today patient appears listless & dejected - says the headache & giddiness are no better - pulse 80, large, soft & indistinct - pupils, tongue & skin, the same - less nausea. <i>Rept. Cal & Ol. Croton & contin. Applicat. Frigid.</i></p> <p>18th Only one motion from the medicine - no change on the headache or other symptoms with the exception of the skin, which has been cool all the morning - takes almost nothing nut tea & cold water, has been offered rice but declined it. The cold applications to be discontinued.</p> <p>24th Very little change has taken place since last report, tho' the patient is certainly stronger - takes now at intervals a small quantity of Rice or weak Soup & begins to move about the Hospital, but the headache, giddiness & vomiting are still present - the pupils continue large & the pulse which has ranged between 80 & 96, has still the same soft indistinct feel under the finger more like a waving of the vessel than a distinct beat - the temperature of the skin has been variable, but not apparently much influenced by the state of the pulse - the bowels continue sluggish & are never moved without medicine Croton Oil has been most serviceable from its activity and being almost the only medicine that will rest on the stomach; two drops given on a little sugar, generally produce one motion: Sulphate of Magnesia has been tried with the intention of being given in frequent doses but the patient refused to take it more than once on account of increase of nausea - yesterday a blister was applied over the forehead & temples but having only partially risen it has been removed & reapplied where required.</p> <p>26th Some excitement was produced in the patient yesterday evening by a disturbance on the lower deck, causing an immediate effect on the</p>
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			<p>pulse & increasing the headache - the pulse this morning is more regular but the headache continues - less nausea - blister discharging little.</p> <p>30th Gaining strength, but still listless & depressed - pulse remains steadily between 80 & 90 retaining its peculiarly soft character - pupils more natural - tongue always foul - no nausea - bowels as usual, only acted on by medicine - during the last two or three days the patient has exhibited a degree of deafness or rather sluggishness of comprehension when addressed - Blister being quite healed another was applied today. From this time the patient steadily & gradually progressed towards recovery the blister continued to be reapplied whenever the skin had again healed sufficiently to admit of it - Blue Pill with Rhubarb were substituted for the Croton Oil & by the middle of December she was well enough to be discharged to duty, but being of a turbulent & quarrelsome disposition, she was retained upon the sick list as a check on her behaviour until the 2nd . of January in order to avoid the consequences likely to arise from undue excitement.</p>
Parturition	6	<p>Alice McQuaide Aged 40 Convict Nov^r 20th 1844 At Sea Discharged to duty December 5th 1844</p>	<p>Observing the condition of this case told her about a fortnight ago to attend to the Hospital at the usual hour of morning visit, accordingly she next day appeared & informed me that the present was her first pregnancy; that she had still six weeks to complete the proper period of gestation; & that she was 36 years of age, tho' it was evident she was much older; gave her the usual directions to attend to the state of the evacuations & she has consequently applied several times since for medicine - was called today at 12½ & found her sitting in front of her berth apparently in pain with evident proof on the deck etc. of the escape of a considerable quantity of Liquor Ammi- On enquiry was informed that she had been observed to be uneasy during the last twenty four hours and that the first signs of the "waters coming away" took place about two hours previous to my being called - Had her at once conveyed to the Hospital & discovered on examination an arm presentation at the same time it was apparent from the absence of any further discharge that the Liquor Ammi had entirely escaped: Returned the arm & sought for the feet for the purpose of turning without success; as the child was still high in the uterus & each attempt only excited renewed contraction - at 2 pm. the pains continuing troublesome & teasing without having any good I gave the patient an anodyne Draught without effect: repeated it at 4 pm. & took fourteen ounces of blood from her arm, still the introduction of the hand, which was attempted</p>

			<p>every favourable opportunity, invariably brought on uterine contraction; the arm had once more descended so far into the vagina, that the shoulder could be distinctly felt & both so filled the passage that to reach the feet was now impossible; neither the anodyne nor the bleeding were of the slightest service, the pains continued growing gradually more frequent & severe, so that at 8 pm. the right hand & fore arm protruded externally: after this there was no further progress: the pains however continued; each succeeding pain becoming more violent than the last, & the intervals also were shorter and at length the patients suffering became so intense that at times she was quite frantic, calling loudly on those around her, for immediate distraction - thus she continued without any advance on the labour until 11½, when finding the pulse beginning to flag it became evident that the only remaining means of relieving the woman were absolutely necessary, & I proceeded to perforate the Thorax of the child already apparently dead from compression - Having first removed the arm (in consequence of the impediment it presented to was then easily accomplished, and a ready exit given to the contents of the Thorax - the pains, which up to this time had been severe, now relaxed a little, & the patient after expressing the relief she felt, was quiet for some time, but did not sleep in consequence of a "heavy swell" causing the ship to roll greatly - Shortly after 12 she again began to complain & by 12½ the pains were once more vigorous; the anterior part of the collapsed chest slowly advanced assisted by the finger, which being occasionally introduced to facilitate the discharge of the Thoracic and abdominal contents was also used as a hook in aiding the efforts of the uterus - about 1 o'clock the abdomen had advanced so far (the child being bent double backwards) that I succeeded in getting the forefinger sufficiently behind the loins to enable me more effectually to assist the uterus in bringing down the pelvis - another very short period of relaxation succeeded, after which the efforts of nature again became active, gentle assistance was given with the hand & the pelvis with the lower extremities were brought down followed immediately by the head which came away easily at 1½ - no hemorrhage followed - the patient soon afterwards inclining to doze, was supported in the wood cradle as well as circumstances admitted by the addition of another bed &. to counteract the motion of the ship & slept soundly till near 4 am at Placenta was expelled.</p> <p>Nov^r. 21s . - 8 am Patient calm & easy - Vespre. no change - Tea for drink</p> <p>22nd Appears still calm and comfortable, having</p>
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			<p>no complaint - allowed a little Rice & Sugar occasionally</p> <p>23rd Doing well - having no motion from the bowels since her delivery, she had six drachms of <i>Ricini</i> today, but it did not rest long on the stomach: In the evening patient thought she could retain one of the powders such as I had previously given her & accordingly she had half a drachm of <i>Pulv. Jalap. Co.</i></p> <p>24th Two operations from the medicine - seems quite easy.</p> <p>25th Complains of pain in the back today - pulse 72 - thinks the discharge not so plentiful as it ought to be -ordered Formentations</p> <p>Vespere. Has been much alarmed this evening by the noise of a disturbance that took place in the Prison - seems a good deal excited - complains of headache - pulse 94 - still some pain in the back - succeeded in calming the patient & repeated the Puly.</p> <p>26th. Much easier - pulse 80 - headache gone - still some pain in the back - one operation from the medicine.</p> <p>30th. Doing well - sits up at times - still complains occasionally of pain in the back - allowed soup.</p> <p>December 5th. To Duty</p>
Abortio	7	<p>Sarah Ward Aged 26 Convict December 12th 1844 At Sea Discharged to duty December 21st . 1844</p>	<p>Short in stature, slender & of a sallow complexion - Is evidently not less than five or six months pregnant but says she cannot tell the time & seems averse to being questioned on the subject. Complained yesterday evening of constant pain in the back with occasional pain in the lower part of the abdomen - found the pulse soft & natural, at the same time according to the patient's statement there was frequent nausea: she was immediately conveyed to the Hospital where on further enquiry she would not admit having lately received any injury, or that there had been any recent discharge. After the administration of an Anodyne, she was placed in one of the wood cradles & secured as well as possible against the ships rolling motion, directions being given to have her kept as cool & quiet as possible - This morning she appeared more easy & comfortable; the motion of the ship had diminished & she had slept comfortably during the night: on enquiring again into her condition, the nature of the pains etc. she replied by so many absurd assertions & constant contradictions (even after being cautioned against the danger likely to result to herself from falsehood on such an occasion) that it was too evident no reliance could be placed on anything she said. Saw her take <i>six drachms of Ricini in Menth. Pip.</i> & gave further</p>

			<p>instructions to ensure her being kept cool & quiet was called again this forenoon & found her suffering under frequent pains “coming on every few minutes” - the pulse in the interval was soft & regular; countenance palid & anxious but not dejected - skin cool and moist - no unusual flaccidity of the mammae - Having again cautioned her about the necessity of speaking the truth I proceeded to question her once more on the subject of her case & in reply to several direct questions regarding the motion of the child she says that she has felt no motion for some time, that she cannot tell when she last felt the motion and strongly asserts that there has been no discharge at any time during her pregnancy, which, on the same authority is the first - On proposing an examination through one of her comrades, she strongly & rather indignantly refused: with some difficulty I was allowed to try auscultation, but no sign of Foetal pulsation could be distinguished - has had one natural motion from the Castor Oil - Vespere. Having been informed this evening by several parties that the patient received a fall during the gale of wind that took place on the 1st Inst. & another on the 9th . she was taxed with the information & confessed to both, adding that she “thought” she “had hurt herself” on both occasions - pain still frequent with some appearance of “bearing down” - no evidence of any discharge even to the Hospital attendant whose word I think is to be depended on - Anodyne repeated.</p> <p>13th. Was called at 1am & found the patient in labour - The pains more frequent & severe, yet she still persisted in the same opposition to examination; some appearances of hemorrhage being now observed, I took advantage of the first pain to overcome the reluctance & found the feet presenting; at the same time I could perceive (during the intervals between the pains) a slight hemorrhage - keeping hold of the feet in order to assist nature, the contractions continued brisk, and in fifteen or twenty minutes afterwards a dead Foetus of about 6 months was delivered followed almost immediately by the Secundines; the hemorrhage in the short interval was by no means profuse & as the contraction of the uterus was complete after the expulsion of its contents, the discharge at once ceased. On examining the Foetus, the cuticle was found much abraded & so easily detached , that there was no doubt of its having been dead some time - left the patient calm & inclined to sleep.</p> <p>14th Slept pretty well & now feels easy - very little discharge - allowed Tea.</p> <p>15th Complains of pain in the back & lower part</p>
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			<p>of the abdomen - some discharge in which clots of blood are occasionally seen - no stool – <i>Habt Ol Ricini zvi.</i></p> <p>16th . Medicine operated freely - says the pains are easier & that there is little discharge - complains of soreness in the breasts – <i>Habt Solut Sulp Magnes. pro re nata..</i></p> <p>17th. Breasts much swollen hard & painful - got one of the patients friends to suck the breasts by which she obtained great relief - bowels free. Ordered to keep both Mammae constantly wet with vinegar & water. <i>Contin Sul Magnes.</i></p> <p>18th. Breasts less swollen, but still painful, always receiving great relief by the withdrawal of their contents, which her friend continues to attend to with great assiduity - no pain otherwise - vaginal discharge natural</p> <p>21st Quite well but a little weak - discharged to Duty</p>
Tumour	8	<p>Catherine Harkin Aged 20 Convict Decr 26th 1844 Ar Sea Discharged to Hospital Jany 3^d 1845</p>	<p>Previous to receiving the subject of this case at Kingstown I was informed that she was afflicted with a tumour in the right side of the abdomen, supposed to be Ovarian, but as it had already lasted some time without apparently affecting the general health, it could not be looked upon as an impediment to her removal. Early on the passage she complained of occasional pain in the abdomen & was relieved by laxative medicine - the tumour then presented anteriorly a globular form, twice the bulk of an orange situated in the upper part of the Hypogastric & right Iliac regions, but as it was quite moveable particularly in the recumbent position it could easily be pushed one or two inches in any direction. During the passage she was troubled at intervals with colic pains & constipation but they always readily gave way to the usual remedies & although the tumour in the meantime seemed gradually increasing in size, there was still no affection of the system nor other inconvenience further than those just mentioned & until today there never has been occasion to place her on the sick list. Dec^r. 26th . Complains of unusual pain in the tumour, which on examination is found softer, less moveable & evidently enlarged since the first examination in the proportion of about one third former bulk - pain increased by moderate pressure - pulse for the first time a little quickened - some heat of skin - accounts for the sudden accession of pain by having over worked herself yesterday when cleaning her Mess & thinks she “hurt the swelling” by falling against the Form on coming out from the lower berths of her Mess place -<i>Habt Ol Ricini Zvi</i> ordered to keep her bed & to</p>

			<p>have a <i>formentation of Cammomile flowers</i> to the pained part 27th Easier this morning tho' there is still some pain on pressure - Medicine has operated well - pulse 90 soft - skin moderately warm & moist - <i>Contin Foment.</i> 28th Tumour bears moderate pressure without pain- pulse & skin natural - patient otherwise as usual - <i>Omitt Foment. et Habt S.S. Magnes pro re nata.</i> 30th. Patient appears to have recovered from the effects of her late accident & is now in her usual condition - Tumour does not diminish - <i>Omitt S.S. Magnes</i> January 3rd. No change - discharged to Hospital.</p>
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A Nosological Synopsis of the Sick Book kept during the Period of this Journal, in conformity with the 30th Article of the Surgeons' Instructions.

Diseases Nosologically arranged	Numbers						Nos. of such Cases as are detailed in the Journal
	Total	Discharged to Duty	Sent to the Hospital	Died on board	Invalided	Remaining	
Pyrexiae							
Ord. I. Febres.							
Internulleates Quotutiana Tertiana							
Remittentes	14	14					
Continua Synochus							
Typhus							
Ord. II. Phlegmasiae.							
Phlogosis	12	11					8
Pneumonia	1						
Rheumatismus	1	1					
Cynanche							
Bronchitis							
Ophthalmia	4	4					
Ord. III. Exanthemata.							
Variola							
Rubeola							
Erysipelas							
Vaccina							
Ord. IV. Haemorrhagiae							
Haemoptysis							
Phthisis incipiens	1						1
Phthisis cosfirmata							
Menorrhagia	1	1					
Abortio	1	1					7
Parturition	2	2					6
Ord. V. Profluvia.							
Catarrhus	2	2					
Dysenteria	8	7		1			3

Neuroses.							
Ord. I. Comata.							
Apoplexia	1						
Concussion	1	1					5
Ord. II. Adynamiae.							
Dyspepsia							
Syncope	4	4					
Ord. III. Spasmi.							
Asthma							
Diarrhoea	3	3					
Colica	5	5					
Hysteria	3	3					
Epilesia	1	1					
Ord. Iv. Vesaniae.							
Amentia							
Mania	1	1					
Cachexiae.							
Ord. I. Marcores.							
Tabes							
Ord. II. Intumescenciae.							
Anasarca							
Ascites							
Hydrothorax							
Ord. III. Impetigines.							
Syphilis							
Scrophula							
Icterus							
Scorbutus							
Locales.							
Ord. I. Dysaethesiae.							
Amaurosis							
Ord. II. Dysorexiae.							
Nostalgia	1	1					
Ord. III. Dyscinesiae.							
Ord. IV. Apocenos.							
Gonorrhoea							
Ord. V. Epischeses							
Ischuria							
Obstipatio	2	2					
Dysuria	1	1					
Amenorrhoea	1	1					
Ord. VI. Tumores.							
Aneurisma							
Ord. VII. Ectopiae.							
Hernia							
Prolapsus							
Luxatio							
Ord. VIII. Dialyses.							
Vulnus	5	5					
Ulcus	3	1	2				2 & 4
Psora	4	4					
GENERAL TOTAL	82	77	4	1			
NOTE.—Medical Officers are desired particularly to Notice that the Numbers in each Disease and the general Total must not only correspond with the Sick Book, but also with the particulars contained in the several							

Nosological Returns for the period.

GENERAL REMARKS

A.F. Macleroy
Surgeon Superintendent

On the 7th. September 1844 the "Phoebe" hired Convict Ship sailed from Deptford for Kingstown Island where on the 24th. of that month one hundred & twenty eight Female convicts and Twenty eight Children all apparently in good health were received on board; next day on putting to sea one case was placed on the sick list with soreness in the chest attended by cough & purulent expectoration tinged with blood; the patient continued unwell with only occasional relief until Discharged to Hospital on our arrival at Hobart Town.

During the first six weeks of the passage Seasickness was the prevailing complaint, accompanied as usual in females with Syncope & Hysteria in various degrees & shapes, many cases being very troublesome tho' not placed on the Sick List.

On approaching the Tropics a few Cases of Dysentery made their appearance, but they were generally tractable & readily gave way to medicine.

One case however terminated unfavourably; it occurred in a young woman, pregnant, but not known to be so, until the disease having resisted the usual remedies for a time. I was called suddenly on the night of the 11th October & found the patient on the chair in great pain as if in Labour. At first she was averse to give information on the subject suspected, but a recurrence of pain induced her to submit to examination & a dead Foetus of about four or five months was found partially delivered - the delivery was immediately completed: no hemorrhage took place, but the tenesmus continued unabated in defiance of every means used to check it - vomiting became super added to the purging & the patient two days afterwards, died exhausted.

Prickly Heat was very prevalent amongst both women & children while in the Tropics & most of the younger children were at the same time afflicted with a peculiar vesicular eruption attended by slight fever: the vesicles were large, containing a thin yellow serum & after increasing in size for several days, these burst or were broken, leaving a dark scab, & occasionally a sore rather tedious in healing - in consequence of these eruptions & the previous Sea Sickness, vaccination was deferred until a later date; it was then tried at different periods on about twenty cases but none of them exhibited any other effect than a slight reddening of the skin.

One case of Labour described in the Journal occasioned some anxiety; it was an "Arm presentation" & the child already apparently dead from compression, caused by the fruitless efforts of Nature for its expulsion, had to be perforated in order to save the mother - the other case of Labour did well & a few days afterwards the mother & child were landed in good health.

The case of Nostalgia contains no point of interest fit for detailing: the patient was chiefly remarkable for great irritability of temper & very filthy habits; at times she refused all proper food & medicine, but at length by a continuation of firmness & temporizing she began to take her food more regularly & with the assistance of Quinine (given in Port Wine) she recovered strength so as to be discharged to duty before leaving the Ship.

With these & a few other exceptions the Prisoners were generally very healthy - Every day weather admitting they were allowed on deck from an early hour until near sunset & the afternoon whenever practicable was occupied in various recreations affording amusement and exercises - the weather throughout was for the most part favourable & only two severe gales of wind were experienced towards the conclusion of the passage.

AF Macleroy
Surgeon Superintendent