Sir Thomas Barlow, specialist in childhood diseases and sometime physician to Queen Victoria, Edward VII and George V, was one of a remarkable group of doctors and medical scientists who trained at University College Hospital in the early 1870s. Qualifying in 1870, MD in 1874, his contemporaries included Rickman John Godlee (1849–1925), Alfred Pearce Gould (1852–1922), William Smith Greenfield (1846–1919) and Edward Albert Schafer, later Sharpey-Schafer (1850–1935). He is remembered chiefly for his work in identifying infantile scurvy—so-called Barlow’s disease—in the early 1880s. Although widely known and admired during his lifetime, Barlow has not received much notice from students of medical history, and it has been left largely to members of his own family to draw attention to his contributions to medical science and practice.¹

It was through these same family members that Barlow’s surviving papers came to the Western Manuscripts collection of the Wellcome Institute Library. His daughter Helen donated a quantity of papers in her possession, enough to fill six archive boxes, some years ago. In 1990 the then Curator of Western Manuscripts Dr Richard Palmer discovered that additional correspondence and papers were still held at Barlow’s London home, 10 Wimpole Street, in the care of Dr Andrew Barlow, Sir Thomas’s grandson. Thirteen boxes and packets of papers were subsequently deposited in the Wellcome Library and in 1992 Dr Barlow generously arranged for this second accession to be converted into a gift. The way was now clear to reunite the two parts of a collection which seemed to have been divided somewhat arbitrarily. The second accession included almost all the family correspondence and papers, including papers of Barlow’s wife Ada, and of his children.² Professional and research papers were to be found in both places, as were Helen Barlow’s notes, which provided invaluable information about the identity of various family members and other

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² James Alan Noel Barlow (1881–1968); Thomas Dalmahoy Barlow (1883–1964); Patrick Basil Barlow (1884–1917); Helen Alice Dorothy Barlow (1887–1975). A younger daughter died in infancy.
Richard K. Aspin

correspondents. Unfortunately, the circumstances of Miss Barlow’s gift are not clear, but presumably she had made a deliberate selection from her father’s papers for the purpose of permanent preservation. It is evident that she spent a good deal of time and effort in arranging and labelling the papers.

Thomas Barlow came from a comfortable commercial background in industrial Lancashire. His father was a Bolton mill owner and J.P. The family was staunchly Methodist. Barlow never entirely lost touch with his provincial origins, despite his later integration into London high society. He maintained close ties with his Lancashire-based younger brother and sister, and retained something of a northern accent. His early education was local and unremarkable, and rejecting a career in his father’s business he matriculated at Owen’s College, Manchester, in 1865 to read Chemistry. He graduated BSc in 1867, with Honours in Geology and Palaeontology. Thus far little in Barlow’s development suggested a future in medicine, beyond an interest in natural history. The papers shed some light on this part of his life. From about 1862 he began to make observations and diary entries in an old company ledger (BAR A/1), continuing intermittently until 1890, which reveal a rather earnest young man with interests in literature, geology and botany. Entering University College London in May 1868, Barlow proved a competent rather than outstanding medical student. Medicine one suspects was not his vocation. In his twenties and thirties he continued to pursue and develop non-medical interests and to travel. His first foreign journey, apart from a childhood trip to Paris with his parents in 1854, seems to have been an “oriental tour” in early 1868, to Egypt and Palestine, during which Barlow kept a brief journal (BAR A/2). Thereafter there were trips to Belgium and southern Germany in 1869, Italy and Switzerland in 1871, the south of France and northern Italy in 1876, and Brittany and northern France in 1878 and 79, usually in company with his younger brother John Robert. There are journals and notebooks relating to these tours (BAR A/3–12), which evidently encouraged Barlow’s love of art and architecture, particularly church architecture. The art, history and literature of France and Italy remained subjects of interest and study for the rest of his life.

In 1870 Barlow finished his pre-clinical training, passing the qualifying examinations with a second. The move across Gower Street to University College Hospital seems to have galvanized his interest. In particular he came under the influence of Sir William Jenner (1815–98), whom he served as house physician and with whom he later corresponded on professional and private matters until Jenner’s death. Jenner claimed that he had “never had an assistant who discharged [his] duties more completely”.3 There is comparatively little in Barlow’s papers concerning this part of his career. The entries in his journal become more perfunctory and there is practically no surviving correspondence. A clinical notebook covering the period 1870–4 (BAR D/1) contains lecture notes and entries relating to various conditions and diseases, especially tuberculosis, a subject on which Barlow would soon publish a number of case studies. There are no case notes included, which would have been interesting in view of Barlow’s later reliance on minute clinical investigation in his work, although it is tantalizing to read his lecture notes on rickets in the hope of finding the germ of his later research interest in that condition.

3 Testimonial for Barlow, 10 April 1874 (BAR K/5).
Rickman Godlee later recalled Barlow as "one of the keenest of the students and an indefatigable worker". He passed his second MB and BS in 1873, both with first class honours, and, after a few months as obstetric assistant at University College Hospital, became registrar at the Hospital for Sick Children, Great Ormond Street, in April 1874. It seems unlikely that Barlow was predisposed to children’s medicine. As a child he had lost two younger brothers to diphtheria, but such family tragedies were not infrequent in Victorian England. His specialization in paediatric medicine was no doubt mainly the result of the direction which this first appointment lent his career. He later obtained posts at Charing Cross, the London and the London Fever Hospitals at various times, as well as returning to University College Hospital in 1880, but he maintained a continuous association with Great Ormond Street from 1874 till 1899. Barlow’s new colleagues at the Children’s Hospital included Walter Butler Cheadle (1835–1910) and Samuel Jones Gee (1839–1911), both of whose researches were soon to impinge on Barlow’s own. But they were somewhat older than him, and Godlee later wrote that the men of his and Barlow’s generation had founded a “Clinical Club”, partly in imitation of the so-called “Postpathologicals” held by their senior colleagues after the fortnightly meetings of the Pathological Society. “It consisted of nine or ten members”, he continued, “—Nettleship, Greenfield, Coupland, Pearce Gould, Sturge, and Parker being amongst the most active members.* One of us read a paper or showed some cases, after which he was heckled with searching questions, and raked with unmerciful criticism”. Barlow took notes of the meetings (BAR D/2), the first of which took place on 15 November 1875, until 27 April 1877. His notes broadly confirm Godlee’s list of members and description of proceedings, whilst betraying little of the animation of debate.

Barlow’s first published case study was written while he was still at University College Hospital, appearing in 1873. Subsequently he produced a regular stream of publications, mainly case histories and analyses of cases of tuberculosis, meningitis, heart disease and other crippling or fatal conditions, often associated with congenital syphilis. There is some documentation on his early research activities in Barlow’s papers, including an interesting letter from David Ferrier, author of The functions of the brain (1876), written in that year, complimenting Barlow on his description of a case of lesion of the brain which he had sent him (BAR C/10). Barlow published the case the following year in the British Medical Journal. Another early letter from Sir William Jenner in 1877 comments on the possible causes of capillary haemorrhage in the brain (BAR C/13), a subject which Barlow addressed the following year in Transactions of the Pathological Society of London. There seems to be no trace in his papers of Barlow’s work on cervical opisthotonos in infants, an important contribution to the differentiation of various types of meningitis in children.

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* Edward Nettleship (1845–1913); Sidney Coupland (1849–1919); William Allen Sturge (1850–1919); Robert William Parker (d. 1913).

1 R. J. Godlee, ‘Sir Thomas Barlow, Bart., F.R.S.’, University College Hospital Magazine, 1910, 1: 4.
2 Ibid., pp. 5–6.
3 On a case of pericardial effusion, in which paracentesis was performed, Practitioner, 1873, 11: 65–70.
4 On a case of double hemiplegia, with cerebral symmetrical lesions, Br. med. J., 1877, ii: 103–4.
5 Military aneurysms on a branch of the anterior cerebral artery in a case of apoplexy, Trans. path. Soc. Lond., 1878, 29: 6–9.
6 On the cervical opisthotonos of infants’, with Samuel Gee, St Bartholomew’s Hospital Records, 1878, 14: 23–42.

335
However there survives the casebook in which Barlow recorded cases of rheumatic nodules he encountered at Great Ormond Street and University College Hospitals between 1978 and 1883 (BAR D/3), many of which he used for his paper with Francis Warner to the International Congress of Medicine in 1881, establishing the association of subcutaneous nodules with cardiac disease in children with rheumatic fever.  

It is ironic that the work which made Barlow’s name and for which he is now best known should have left so little mark on the collection. In 1883 he read a paper to the Medico-Chirurgical Society of London on cases of “acute rickets”. This was the first stage in his clinical identification of infantile scurvy as a distinct disease. There are no surviving case notes or manuscript draft of the paper, nor any correspondence bearing on his research. Barlow later addressed a meeting of the Royal Medical Society of Edinburgh on the same subject, much of the content of his address reappearing later in his celebrated Bradshaw lecture of 1894, published in the *British Medical Journal*. If one were to judge by his surviving correspondence these events might have passed contemporaries by. Nevertheless, there are drafts of both the later papers (BAR E/2–3), the first of which was never apparently printed. There is also a draft of a contribution on infantile scurvy for an unidentified medical “cyclopedia”, probably composed in about 1895 (BAR E/4), and an article on the same subject (BAR E/5) for the second edition of *Traité des maladies de l’enfance*, a French compendium of paediatric medicine published in 1904.

Barlow also worked and published on neurological illnesses, an area of study for which there is happily more evidence in his papers. He had a long-standing interest in Raynaud’s disease, a condition of numbness and pain in the extremities. There survive a number of papers on this phenomenon in the collection (BAR E/4–9), including texts of unpublished lectures, one at least delivered at University College Hospital in 1896, and what appears to be an early draft of his article on the disease for Allbutt’s *A system of medicine*, published in 1899. Barlow also contributed an article to the same textbook on erythromelalgia, a related condition mainly affecting the feet, and kept a notebook from about 1908 detailing his own and others’ cases (BAR D/7). He does not seem to have published anything further on the subject. In 1906 Barlow addressed the Neurological Society of the United Kingdom, of which he was president, on nervous complications of acute febrile diseases, his paper later appearing in *Brain*. Two volumes of notes and various manuscript drafts of his address survive (BAR D/5–6, E/10–12). In the nature of presidential addresses this was a wide-ranging review of the current state of knowledge, rather than a research paper, as indicated by the fact that it was written on board ship returning from America. At a comparatively early stage in his career Barlow’s research interests began to give way to

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10 *On subcutaneous nodules connected with fibrous structures occurring in children the subjects of rheumatism and chorea*, London, J. W. Kolchmann, 1881.

11 ‘On cases described as “acute rickets” which are possibly a combination of rickets and scurvy, the scurvy being essential and the rickets being variable’, *Medico-Chirurgical Transactions*, 1883, 66: 159–220. Barlow’s contribution to the identification of infantile scurvy is outlined by K. J. Carpenter in *The history of scurvy and vitamin C*, Cambridge University Press, 1986.

12 ‘Infantile scurvy and its relation to rickets’, *Br. med. J.*, 1894, ii: 1029–34.

13 ‘Scurbut infantile’, in J. Grancher, J. Comby, and A. B. Marfan (eds), *Traité des maladies de l’enfance*, 2nd ed., vol. 1, Paris, Masson, 1904, pp. 903–19.

14 ‘Raynard’s disease’, in T. C. Allbutt (ed.), *A system of medicine*, vol. 6, London, Macmillan, 1899, pp. 577–607.

15 ‘On some of the nervous complications of specific fevers’, *Brain*, 1906, 29: 303–31.
Plate 1: Barlow with his sons, c. 1888. From left to right: Alan, Basil, TB, Thomas. (BAR P/1/1, Wellcome Institute Library.)

Plate 2: Barlow (seated, centre) with students, nurses and patients at University College Hospital, c. 1900. Barlow was on the staff of the Hospital from 1880 to 1910. (BAR P/1/2, Wellcome Institute Library.)
Plate 3: Barlow as royal physician. Offset lithograph after ‘Spy’, published in a supplement to Vanity Fair, 12 April 1906. Appointed a physician to the royal household in 1896, Barlow subsequently served as Physician-Extraordinary to three successive sovereigns. (Wellcome Institute Iconographic Collections.)

Plate 4: Barlow in old age. Sketch by Ruth Spooner, 6 September 1931. (BAR M/4, f. 20, Wellcome Institute Library.)
The papers of Sir Thomas Barlow

teaching and private practice. Most of his important clinical investigations had been accomplished by the age of thirty-eight. If he is now best known for the eponymous Barlow's disease, to his late Victorian and Edwardian contemporaries he was above all the model hospital practitioner and "Harley Street" physician.

Evidence of Barlow's teaching activities in the collection is almost non-existent. He rarely gave lectures, preferring to instruct students on the wards. His work as a hospital practitioner is largely reflected in his published case studies. He acquired a reputation for unusual solicitude and good humour in relation to his poor patients. A former colleague, writing to congratulate Barlow on his baronetcy in 1901, recalled "those old days at Charing Cross when I would find you in the midst of the squalling babies of untidy mothers, and leave you with a sense of surprise and pity mixed".16 Significant records of Barlow's private practice remain, despite the loss of almost all his patients' books to feed the wartime paper shortage. One such book, of which there were at one time about seventy, survives—whether by chance or as a specimen of the type—covering the period March to November 1883 (BAR F/2). The presence of a certain number of interleaved letters from fellow doctors in the volume suggests that a good deal of clinical correspondence was also lost when the patients' books were pulped. In addition, the index volume to all seventy or so books was kept (BAR F/1), so it is possible to gain an overview of Barlow's private patients from 1876 until he gave up regular practice in about 1918. His practice seems to have moved steadily up the social scale until he was made a royal physician in 1896. Already in the later 1870s, Godlee recalls, Barlow had "started practice like a family man in a house in Montague Street, Russell Square, while the rest of us were content with a brass plate and two rooms apiece".17 He did in fact marry in 1880, his wife a nursing sister at Great Ormond Street, Ada Helen Dalmahoy (1843–1928). In his diary Barlow recorded his professional income for the years 1885 to 1887. The annual total rose from £1185 14s. 1d. in the first year to £1300 3s. 8d. in the second and £1607 3s. 2d. in the third, fees accounting for about three-quarters of the total in each year.18 There is nothing in his papers to indicate other sources of income, although it is likely he had some independent means. As a correspondent observed in 1883, "there is scarcely a man in this town (London) who lives on his practice".19

As Barlow's patients become more notable his surviving correspondence increases. This is because he usually kept letters from famous names while generally discarding others. He rarely seems to have made copies of his own letters, although he corresponded regularly with his wife when away from home, and there are consequently many surviving letters in her papers. In 1887 the Barlows moved to 10 Wimpole Street and from about this time Barlow began to attract patients from the highest levels of society. They included peers like the dukes of Rutland and Grafton, statesmen such as Lords Salisbury and Selborne, and churchmen, notably Randall Davidson, later archbishop of Canterbury. It may have been through Davidson that Barlow came to the attention of Queen Victoria, since he was dean of Windsor from 1883 to 1891, and was under Barlow's care for a serious illness in that year. In 1892 Sir James Reid, physician-in-ordinary to the Queen,

16 Letter from John Mitchell Bruce MD, FRCP, 11 Jan. 1901 (BAR C/354).
17 Godlee, op. cit., note 4 above, p. 6.
18 BAR A/1, ff. 55–6.
19 Letter from Theodore Maxwell MD, 16 August 1883 (BAR C/22).
Richard K. Aspin

reported that “she was very much pleased with [Barlow’s] appearance, and with [his] ‘frank kindly manner’”. Barlow’s mentor Sir William Jenner was also a former royal physician. From this moment it is possible to chart an inexorable social progression in Barlow’s career. Appointed a physician to the royal household in 1896, his services to the crown reached their apogee in 1902 when he successfully steered Edward VII through his appendectomy, “a big thing to have done”, in the words of Lord Haldane, “a very big thing”.  

There is a rich historical seam to be mined in Barlow’s correspondence with his patients, although the content does not always concern medical matters. The Duchess of Rutland sought Barlow’s advice about the treatment of her daughter Katherine, who was apparently suffering from a nervous or mental illness of some sort. Her mother feared that she had fallen under the malign influence of a certain Dr Coghill at Ventnor, where Katherine was lodging; “Coghill passes an iron heated to blue heat up and down the spine”, the Duchess complained, although her daughter had never had any spinal illness. Female patients especially seem to have confided in Barlow, if only because as mothers they usually had more frequent occasion to consult him. There are interesting letters from the wives of two of the Liberal grandees of Edwardian politics, Lords Curzon and Selborne. Lady Curzon seems to have turned to Barlow after the birth of her first daughter in 1896, and relied upon his advice in the upbringing of all her children thereafter, even when in India. Lady Selborne was also a patient of some long standing when she wrote to Barlow from South Africa, where her husband had been appointed High Commissioner in 1905. On one occasion she announced that she did not think the case for the “dust dissemination of diseases” theory was very strong, since in South Africa typhoid and dysentery were more prevalent in the rainy than the dry season. In another remarkably frank letter she confessed her fears for the political stability of the future Union of South Africa, and her concern for the well-being of the blacks—“the object of all white legislation is to ‘keep the black man in his place’ as an unskilled labourer; please do not quote me,” she ended, “as I am not supposed to have any political opinions”.

Apart from patients, a number of interesting letters to Barlow are from colleagues, men with whom he had trained at University College Hospital or worked in earlier years and with whom he maintained a lifelong friendship. There are numerous letters from Robert Bridges, the poet, who was at one time on the staff of St Bartholomew’s Hospital. There is a rather touching account by E. A. Schafer of the death of his first wife, whom Barlow attended during her last illness. Edward Nettleship recalled his long friendship with Barlow, regretting that he had not made more of the personal contacts Barlow had provided: “there is a child’s book”, he noted, “called ‘Winners in Life’s Race’, and I think most of the winners are gregarious animals”. As Barlow became more eminent in the medical profession his advice was increasingly sought on matters of public or institutional

20 Letter to Barlow, 18 July 1892 (BAR C/90). Extracts from some of Barlow’s letters to Reid are given by Michaela Reid in Ask Sir James, London, Hodder and Stoughton, 1987.
21 Letter to Barlow, 4 July 1902 (BAR C/419). The operation was performed by Sir Frederick Treves.
22 Letter to Barlow, 19 Jan. 1893 (BAR C/92).
23 Letter to Barlow, n.d. (BAR C/1205).
24 Letter to Barlow, 2 Feb. n.y. (BAR C/1206).
25 Letter to Barlow, 8 Oct. 1896 (BAR C/125).
26 Letter to Barlow, 20 Jan. 1901 (BAR C/368).
policy. Some letters of this type survive, although their historical value is rather undermined by Barlow’s failure to keep a copy of his reply. Lord Wolseley, the commander-in-chief, brought the grievances of army nurses to Barlow’s notice in 1898: “I am afraid there is a prejudice against them entertained by the unthinking section of our army doctors, and the fact that the soldiers like to see them about their beds rather increases this feeling”.27 As late as 1927 Neville Chamberlain, minister of Health, was asking Barlow’s opinion on his proposed Poor Law Reform Bill.28

Chamberlain addressed the 82-year-old Barlow as one of the “leaders of the profession” but by that time, of course, his pre-eminent status was purely honorary. Barlow reached the peak of his professional career in the years leading up to the First World War. He was made a baronet by Queen Victoria in 1901 and KCVO by Edward VII the same year. In 1909 he was elected Fellow of the Royal Society (largely for his work on infantile scurvy), and the following year was elected President of the Royal College of Physicians, a position he held for the next five years. In 1913 he presided at the 17th International Medical Congress in London, and incidentally opened the Wellcome Historical Medical Museum on the same occasion. These activities are reflected in the papers by manuscript drafts of his various presidential addresses (BAR G/6–11), as well as innumerable letters of congratulation. Barlow was naturally much in demand for public occasions such as the formal opening of medical schools and college prize-givings, and indeed he took a keen interest in medical education, as some surviving drafts of addresses to medical students on such occasions show.29 As for surviving correspondence a final spate of letters of condolence marks the death of his youngest son Basil in France in 1917, before the quantity falls away following Barlow’s retirement from regular practice in about 1918.

In his retirement, which lasted for many years, Barlow was able to devote more time to interests outside clinical medicine—art, literature, history. He was an accomplished amateur historian of medicine, having delivered the Harveian Oration to the Royal College of Physicians in 1916 on ‘Harvey, the man and physician’, a corrected draft of which is among his papers (BAR H/1). In 1919 he presented the Murtle Lecture at Aberdeen on ‘Fra Paolo Sarpi and his time’, which was printed only after his death.30 There are manuscript drafts of the lecture in the collection and a book of research notes, with some inserted related correspondence, including a letter from the Cambridge historian A. W. Ward (BAR H/2–4). Barlow spent most of the last twenty-five years of his life at his country home near Wendover. Numerous commonplace books survive from this period, full of notes on books read, cuttings from the Times Literary Supplement, family reminiscences and so forth. He continued to see some patients—there is a patients’ book covering the period 1922–30 (BAR F/4)—but there is little evidence of a continuing close interest in medical matters. Already well before his retirement Barlow seems to have been turning his attention increasingly towards social questions, particularly temperance. He was president of the National Temperance League from 1923 to 1930, and there are numerous drafts of temperance speeches in his papers, mostly from the post-war period.

27 Letter to Barlow, 31 Oct. 1898 (BAR C/164).
28 Letter to Barlow, 28 Jan. 1927 (BAR C/1081).
29 For example his inaugural address for Sheffield University College medical school in 1897 entitled ‘Individualism in medical education’ (BAR G/1).
30 See Helen and Alan Barlow op. cit., note 1 above, pp. 55–75.
Richard K. Aspin

He was an especially authoritative propagandist for the temperance movement concerning the medical consequences of alcohol abuse, particularly in relation to children. One of the last public addresses he gave was at Norwich for the Church of England temperance jubilee in 1932, on ‘Five cases of alcoholism recorded in some pages from a doctor’s old note books’. The text of this address is among the papers, the first case, identified by Helen Barlow as that of John Trivett Nettleship (1841–1902), the animal painter, having been cured by isolation in an unspeakable north of England hydro (BAR J/6).

Overall Barlow’s surviving papers give a fairly good picture of the range of his professional and private activities over a long life. If they provide few fresh insights into his clinical research or his hospital teaching and practice they nevertheless shed an interesting light on the private practice of a late Victorian and Edwardian West End physician. In this way they should contribute to our understanding of the historical development of the medical profession. As for Barlow the man numerous incongruities persist, at least for the time being. The devoted, even obsessive research clinician who gave his career over at a relatively young age to hospital and private practice; the plain speaking north countryman who nonetheless commanded the fees of London society; the left-leaning Liberal and supporter of women doctors who pleased Queen Victoria; these and other apparent contradictions remain unresolved. Barlow gives little away about himself in his surviving papers, probably because he was a truly self-effacing man. It may be that his correspondence with his wife, which is voluminous but rather difficult to use as it has come down to us in some disorder and is rarely dated, would reveal more of his personality. In addition, letters of Barlow survive in other places, such as the Davidson and Bell papers in Lambeth Palace Library, and the autograph letter collections in both the Royal College of Physicians and the Wellcome Institute. The papers of other regular correspondents, such as the Bryce papers in the Bodleian Library, would also probably repay searching. Any full picture of Barlow’s life and work would need to draw on external sources such as these.

31 See for example ‘The use of gin in infantile disorders’, National Temperance Quarterly, 1925, 70.