The 17th of August 2009 marked the 150th anniversary of the laying of the foundation stone of the New Somerset Hospital.

**Bailey’s brainchild**

The original Somerset Hospital was built in 1818 in an area bounded by the present Prestwich, Alfred, Hospital and Chiappini streets. It was the brainchild of Dr Samuel Bailey, who served in the Royal Navy as a surgeon and retired in Cape Town. He set up in private practice at 57 Long Street and became convinced of the necessity for a civil hospital in Cape Town, as the only hospitals at that time were for military, naval and government personnel.

In 1816 Bailey approached the Governor of the Cape, Lord Charles Somerset, to elicit official support for his project. The Governor gave him the land and offered his wholehearted support, but provided no financial assistance. As the Governor was the patron he was permitted to name it Somerset Hospital. It was built in 1818 at Dr Bailey’s own expense and functioned well under his direction, but by 1821 the burden of debt became too much for him and, in terms of the tenure of the land given by the Government, the hospital became the property of the Burgher Senate. As an interim measure Leopold Wehr and Louis Liesching were appointed to manage the hospital until 1832, when Dr Henry Bickersteth was appointed to succeed Dr Bailey.

**The New Somerset Hospital**

Dr Bickersteth realised that the hospital was becoming unsuitable to serve the community, so in 1845 he began his campaign to raise funds for a new hospital and on 18 August 1859 the foundation stone for the ‘New’ Somerset Hospital was laid by Sir George Grey, then Governor of the Cape. This last official function of the Governor before returning to England delayed the departure of the passenger liner to enable him and his party to embark. The hospital received its first patients in August 1862. Sadly Dr Bickersteth died at the age of 49 years, just 17 days before this historic occasion.

Dr John Laing was then appointed as First Resident Surgeon and therefore became the first superintendent of the hospital. The hospital fell under the direct control of the Cape Government, and it was not until 1898 that a Board of Management was appointed to manage the property and funds of the hospital and to appoint and dismiss non-clinical staff. This remained the position until the creation of the Cape Hospital Board in 1913.

**Clinical teaching**

Somerset Hospital became the first centre for the teaching of clinical medicine in South Africa in 1918. However, Dr Bickersteth had sown the seeds for this in about 1840, as acknowledged by Dr Henry Anderson Ebden in a paper entitled ‘Colonial medical education’ in the *Cape Monthly Magazine* of November 1858. Ebden advocated the establishment of a medical school in Cape Town, and in this quest had been inspired by his predecessor Dr Bickersteth: ‘He had taken a lively interest in Medical Education and even in 1840 he had done his best to institute a system of Medical Education by giving lectures and carrying out dissections. He fostered a hope of the conversion of the Somerset hospital into a practical school of Medicine.’

It took almost 40 years for these hopes of a medical faculty at the University of Cape Town (UCT) to be realised. It came about through the ideas and efforts of Dr E Barnard Fuller, who joined the staff of Somerset Hospital in 1895, and a small group of others. The first step was the establishment of an anatomy and physiology department, endowed by the mining magnates Alfred Beit and Otto Werhner, in 1912. Students who enrolled at the faculty could do only their first two years of study at UCT, and completed their clinical studies overseas. In 1913, the Cape Hospital Board was created to take charge of
the management of the hospitals in the Cape Peninsula. This Board offered its full co-operation with the medical school to find a suitable hospital for clinical teaching. The choice lay between the New Somerset, Woodstock, Rondebosch Cottage and Victoria hospitals, as these were the only hospitals in the Cape recognised by the Colonial Medical Council as training schools for nurses. The only one that was large enough and close enough to the university was the New Somerset Hospital. In 1918, therefore, with the sanction of the Hospital Board and the University Council, medical students were admitted for their clinical training at Somerset Hospital. Drs Louis Mirvish and Jacob Benjamin Solomon were the first to complete their studies fully in Cape Town, graduating with the degree MB ChB in 1922.

Clinical professors

The reputation of the Somerset Hospital and the UCT Medical School was greatly enhanced when in 1920 the three clinical professors were appointed: Professor A W Falconer in Medicine, Professor C F M Saint in Surgery, and Professor E C Crichton in Obstetrics and Gynaecology. Their calibre soon established an international reputation for the UCT Medical School and dampened the discontent felt by local doctors, already on the staff of the Somerset Hospital, who had felt overlooked in the appointments of the clinical heads of the departments. To assist with the teaching part-time honorary clinical staff was appointed, mainly from the doctors on the staff of Somerset Hospital. The legendary Professor Frank Forman joined the staff of the hospital in 1924, enhancing the high standard of teaching.

Somerset Hospital’s prestige as a training centre for clinical medicine was lost when Groote Schuur Hospital (GSH) opened in 1938 and took over its clinical teaching mantle. After closing in 1938 for refurbishment it opened again in 1939 as a hospital for the ‘non-European’ population of Cape Town and was once again able to live up to its motto of ‘Serving the Community’.

Because of the increasing demands at GSH, UCT again turned to Somerset Hospital to provide teaching facilities for medical students. The hospital placed 32 beds in the King Edward Ward at the disposal of the Medical School, supplemented in 1942 by an additional 50 beds in the Shipley Ward to teach obstetrics to medical students and for training midwives. UCT provided the consultants for the Shipley obstetrics ward and built a hostel for students doing their midwifery training at Somerset Hospital.

As demand for beds for ‘non-European’ patients became a concern at GSH, in 1945 UCT negotiated with the Cape Hospital Board for additional beds at Somerset Hospital for teaching purposes and was allocated 32 medical beds in the King Edward Ward. In 1954 a gynaecology ward was opened for the use of the Medical School. Dr Harry Jordaan, the first coloured registrar to be appointed by the UCT Medical School, was allocated to the ward. After obtaining his MD in Obstetrics and Gynaecology, Jordaan became the first coloured Honorary Consultant in the Gynaecology Department at UCT.

Somerset Hospital therefore remained a clinical teaching division of UCT Medical School. The willingness, calibre and dedication of the doctors at Somerset Hospital carried forward the traditions laid down by their predecessors. Meriting special mention was Professor Mark Horwitz, who became internationally recognised in the field of rheumatoid arthritis. He based himself at Somerset Hospital rather than at GSH so that he could pass on his vast knowledge to the ‘non-European’ students and later registrars who studied at Somerset Hospital. His mission was to ensure that the high standards of teaching associated with GSH were applied equally at Somerset Hospital. Professor Roy Keeton continued this tradition. His gentle manner in communicating with his patients served as an object lesson to his students on how to respect the dignity of each individual patient rather than regarding them as an ‘interesting case’. His missionary zeal for teaching acted as a stimulus for his students and registrars to continually strive to improve their capabilities. Many GPs in the area availed themselves of his encouragement to attend his teaching rounds for registrars to keep up to date with clinical medicine.

Part-time honorary doctors also played an important role in teaching and providing services to the patients of the hospital. Dr Aubrey Schiller played an important role in resuscitating the ENT department and taught registrars despite his busy private practice. At his own expense he had a film made to teach postgraduate students and his colleagues new operative techniques that he had learned overseas.

Honorary surgical staff such as Drs Louis Blumberg, Ralph Ger and David Stein ensured that the high standards set by Professors Charlie Saint and Jannie Louw were maintained at the Somerset Hospital.

The West Wing

In 1959, on the occasion of the 100th anniversary of the laying of the foundation stone, the Administrator of the Cape announced that the province was negotiating with the Department of Defence to purchase land adjacent to the hospital to build a new hospital to serve the ever-increasing population in the Green Point, Sea Point and Camps Bay area. He cautioned, however, that this could only occur after a hospital had been built in the Athlone area, a project that never materialised. By 1973 a new hospital was opened adjacent to the existing New Somerset Hospital. As it was regarded as an integral part of the existing hospital, the name remained Somerset Hospital. In keeping with the apartheid policy this new hospital was designated for use by ‘whites’ whereas the ‘old’ hospital was to be used only for ‘coloured’ patients. To differentiate between the hospital buildings they were referred to as the ‘West Wing’ and the ‘North Wing’, which had nothing to do with their compass orientation but was a euphemism denoting ‘W’ for white and ‘N’ for non-white!

Continuing development

Many of the increased numbers of younger doctors became imbued with the Somerset tradition of ‘Serving the Community’. An example was Professor Frank Spracklen, a cardiologist who became intrigued with a new manifestation of a condition thought to be due to the newly described human immune virus, which seemed to be associated with a new
entity called AIDS. Owing to his efforts Somerset Hospital soon became a prime referral centre for the treatment of AIDS. Inspired by Spracklen’s example, Dr Robin Wood opened the first AIDS research unit at Somerset Hospital, funded by the Diana, Princess of Wales Trust. Because of the prominence of Somerset Hospital’s treatment of HIV and AIDS the first antiretroviral distribution centre was established there in 2005. To establish this centre funds were raised by a professional fund-raiser appointed by the Somerset Hospital Facility Board.

An intensive care unit (ICU) was also established as a result of the enthusiasm and dedication of the younger medical staff, one of whom was Dr Peter Chapman. The Hospital Board again played an important role in the purchase of some of the sophisticated equipment required for the ICU.

Nursing

Complementing the work done by the doctors, Somerset Hospital has been blessed by the active support of a well-trained, caring and dedicated staff of nurses, who ensure the high standard of care for patients in the Somerset tradition.

The British people raised a sum of £50 000 for Florence Nightingale, ‘the angel of the Crimea’, as a sign of gratitude for her services during the Crimean War. She used this to establish the Florence Nightingale School for Training Nurses, the first of its kind in the world. An aim of the Nightingale system was to send nurses trained in this system to other hospitals as teachers and mentors for the profession. Some of these nurses arrived at the Cape Colony, and some were appointed to the Somerset Hospital. One of them was Sister Helen Bowden, who had trained at the University College of London and was well acquainted with the Nightingale system. In 1877 she became the first fully qualified nurse to be appointed as Matron of Somerset Hospital. During her 5 years as Matron she oversaw the training of an efficient body of nurses to replace the men who had previously acted as male nurses. This system of training was continued by Sister Mary Agatha, who succeeded Helen Bowden when the latter was recalled to London. In 1886 Sister Mary Agatha re-organised the nursing department and started a formal nurses’ training school at the hospital. A contemporary was Sister Henrietta Stockdale, who worked in Kimberley. These two were instrumental in bringing about the first Nurses Registration Act in 1891.

After Sister Mary retired the nursing department fell into disarray and arrangements were made for Miss Lowry to accept a temporary post as Matron of the hospital in order to re-organise the nursing department. As a graduate of the Somerset Hospital nurses’ training school she took pride in improving the training system during the 3 months she was there. She was succeeded as Matron by Miss J C Child, whose period as Matron (1903 - 1907) was marked by further development and improvements of the nursing department, thus enhancing the prestige and status of nurses graduating from Somerset Hospital. Miss Child was succeeded by Miss Hawkins, and during her period as Matron from 1907 to 1915 the training of nurses progressed. As a result of the financial problems associated with World War I the training of nurses suffered. Miss Hawkins was succeeded by Miss Lyle (1915 - 1921), followed by Miss Goodacre (1922 - 1935). Their period of office saw the nursing department restored to its previous high standards. Miss Pike was appointed in 1935 and remained Matron until Somerset Hospital was closed down in 1938, after which she became the first Matron of the new GSH.

Mrs G Henkeman is the current Matron, and has held this office since 2000. The longest serving member of the nursing staff is Miss F Parker, who graduated from the Somerset Hospital nurses’ training school in 1967. She has spent her entire nursing career at Somerset Hospital and is currently Assistant Manager of Nursing.

Sources

*A History of Medicine in South Africa*, by Edmund H Burrows.
*In the Shadow of Table Mountain*, by Prof. J H Louw.


Some of the information is based on personal recollections.