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Thomas Mister of Shipston (1711–80)

JOAN LANE*

All too little is known about the actual running of eighteenth-century medical practices and it was formerly presumed that provincial surgeon-apothecaries, barely literate, kept no financial or patient records, relying merely on memory. However, recent research has shown that such men kept accounts, sent bills and wrote clients receipts for treatment, although after nearly three centuries surgeon-apothecaries’ cash ledgers and patient notes may have simply been destroyed or lie unrecognized in private archives. Far more examples of patient case-notes exist than practice cash records. Undoubtedly, eminent practitioners treating the great, titled or affluent were more likely to write up their findings, medications and results, for example, John Hall (1575–1635), William Brownrigg (1711–1800) or Erasmus Darwin (1731–1802). More representative, however, were the general practice memoirs of such men as Richard Kay of Lancashire or Christian Esberger of Lincolnshire,1 with no famous patients and only a modest way of life. If these memoirs are uncommon in archive terms, then financial records of Georgian general practice are even rarer. A partial estimate of a practitioner’s income can, of course, be constructed when his fees are traced in patients’ own records, particularly estate ledgers, or if he had been paid for institutional tasks (parish poor law work, legal cases of all kinds). Many categories of patients—chronic, hypochondriac, or fatally ill—who were correspondents or diarists wrote of medical diagnosis, treatment and especially fees, but these are only fragments of information.2 More detailed local research can show, however, that practitioners did keep cash records, itemizing patients’ names, addresses, medications and charges, nearly always indicating how slowly an account was settled, never paid or, unrecoverable, written off as a bad debt (“desperate”). In the Midlands, the records of Henry Fogg of Leek (Staffordshire) and Thomas Jones of Henley-in-Arden (Warwickshire) indicate that cash-books were a normal part of medical business in the eighteenth century;3 their scarcity today is not evidence of their original absence.

On the Warwickshire-Worcestershire border the Mister family were surgeon-apothecaries throughout the eighteenth century and for one short period an account ledger

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1 Lincolnshire Archives Office, Goulding Papers, S5/5; R W Goulding, Christian Frederick Esberger, Louth, privately printed, 1902.


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has survived, kept by Thomas Mister (II), which suggests the day-to-day nature of practice, patients and fees. The first Thomas Mister of Shipston-on-Stour (1681–1732) was licensed to practise as a surgeon by the Bishop of Worcester in August 1708. He then married and on 28 May 1711 his son, Thomas (II), was baptised, the eldest of four children. In 1724 Mister, senior, was paid £1 4s. by the nearby parish of Butlers Marston for “setting & curing Jas Hues leg” and travel charges of 3s. for the same patient. Thomas Mister, senior, indentured as an apothecary no fewer than six apprentices in the years 1714–23, each boy for the traditional seven-year term. Their premiums, so early in the century and to a market-town master, were substantial, for with four youths Mister took £40 each and with the other two £35 and £37 respectively. Three of these apprentices were from the locality; two later became London practitioners. At this period provincial medical premiums ranged from £20 to £50, with £30 most often recorded in, for example, Warwickshire, Worcestershire and Northamptonshire. A premium was essentially what the master thought the child’s parents could afford and covered board, lodging, clothes and instruction during the term of seven years. The apprentice received no pay during this time. Freeman status through apprenticeship was possible only in the old great incorporated cities, such as Bristol, Coventry and York.

Thomas Mister, senior, died in 1732 and the practice passed to his son, Thomas, at the age of twenty-one. If the young Thomas were apprenticed, it would have been in about 1725 and he would have been out of his time by 1732. No indenture has survived and no premium would have been paid by a father indenturing his own child; such indentures usually noted that the apprentice was bound “in consideration of love and affection”. The transaction therefore was not taxable under 8 Anne c. 5 and 9 Anne c. 21 and not listed in the great Inland Revenue registers. In 1745 Thomas, junior, took his only apprentice, John Welchman of Kineton, for five years with a premium of £44. The Welchmans, also a medical dynasty, were, with clerical ancestors, of higher social status than the Misters and in 1741 Thomas Mister married well when Mary Welchman (1706–73), eldest surviving daughter of the Rector of Lapworth, became at thirty-five his decidedly mature bride. She was, however, a good matrimonial prospect, for she had recently received a legacy of £500 on the death of her father in 1739. John Welchman (1729–99) subsequently himself took three apprentices (1764–85) and practised as a surgeon-apothecary in the area all his life. Thomas Mister’s second cousin, John c. 1746–90), was apprenticed in July 1760, for seven years, to William Mister, uncle of Thomas II, with whom there was a modest premium of £21. The boy, of course, may have lived at home rather than residing in the master’s house, as was usually the case for apprentices.

4 Wellcome Institute for the History of Medicine, London, WMS 3584.
6 Warwickshire County Record Office, DR 446/1 (hereafter WCR0).
7 Ibid., DR 458/24.
9 WCR0, DR 446/1.
10 Wallis and Wallis, op. cit., note 8 above, p. 412.
12 The Lapworth parish register is extremely faded for the years 1741–3.
14 Wallis and Wallis, op. cit., note 8 above, p. 637.
15 Ibid., p. 412.

366
The surviving cash-book kept by Thomas Mister covers only the four years and six months from 29 April 1765 until 29 October 1769, although some accounts were marked as having been paid much later, in 1771 or 1773, for example. It is clear that this vellum-bound ledger, originally of 118 folios, was part of a series, for one patient’s account is annotated as being accumulated “from all books”. The volume has an alphabetical index of the eighty-three patients’ names, several of whom Mister treated more than once in the four years. The ledger shows that Mister had between £250 and £300 income in a two-year period from these patients. He was also acting as poor law surgeon to the neighbouring parish of Tredington. Occasionally he was paid for attending individual cases for other Overseers, a bill of 15s. 6d. for treating Ann Plumb of Tysoe in 1754, for example.

Only eighteen of his patients were females (21.6 per cent) and ages were not recorded; none was a child. The largest group among his patients were the local clergy (eight) and gentry (seven), one of whom was female. He recorded the occupations of very few patients—two attorneys, two farmers, a glazier, a publican and a wheelwright—although...

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Thomas Mister’s practice area.

16 WCRO, DR 79/144.

17 Ibid., DR 288/17.
it is possible to discover how some other patients earned a living. There were patients in thirty different communities in this three-county Warwickshire-Worcestershire-Gloucestershire triangle; they all lived within a ten-mile radius of Shipston-on-Stour, many alongside the Fosse Way. A quarter of those treated lived in the town itself. Shipston was the natural economic centre of the area, on the high road from Woodstock to Stratford-upon-Avon, with a weekly market and annual fair. In 1776, its population was 900.\(^1\)

Mister’s bills, reflecting his clientèle, varied very greatly, from as little as 5s. to £53 13s. 10d. and most patients were treated across a period of months or years; very few were seen only once (Figure 1). A substantial group of his patients (28) were those seen for between ten and twenty months each, 25 continuously. There were also 3 people whom he attended for thirty, thirty-one and thirty-five months non-stop each and a further 13 in the twenty-one to twenty-nine months category. Some 34 patients were recorded with attention spread over periods of between one and seven months. Not surprisingly, Mister was busiest throughout the winter months, when he was presumably required to pay domiciliary visits to some of his more distant patients. Some very small sums of money were probably for medicines only. The time taken to pay accounts now appears excessive; most patients paid four or five months after attention, perhaps because this allowed Thomas Mister to send out his bills. However, seventeen accounts took a year and a half to be settled. Executors were always exceptionally tardy in paying a deceased’s medical bills, as in the case of Sir Henry Parker of Newbold, attended by Mister in February–March 1767. Sir Henry died on 8 October 1771\(^2\) and the modest account of £1 9s. 6d. was not paid until June 1773. Again, an account of £13 17s. 4d., which included treatment for a maid, incurred by the Revd Taylor of Idlicote in February 1767–May 1768, was not paid in full until October 1772. All such instances of long, free credit given to patients of quality emphasize contemporary advice that a young man setting up in medical practice in the mid-eighteenth century should be able to live on his resources initially, although this would not have been a practical problem for Thomas Mister joining a family enterprise. Bad debts were a permanent problem to practitioners and one patient’s large account of £22 13s. 10d. from October 1766 was paid off in instalments ending at Michaelmas 1770. A handful of accounts included small payments for treating servants. There were also people visiting the area and needing attention, and Mister noted these under the names of his usual patients, their hosts. Thus Miss Fortescue and her coachman were charged £5 and 5s. respectively, included in the account entry of £18 9s. 1d. for William Addington, a Talton gentleman, whose guest she presumably was. Miss Crawley of Shellingford, Berkshire, was also treated by Mister in August–October 1767, although not attached to another patient’s case entry.

Apart from Sir Henry Parker, Mister’s grandest patients were Mrs Judith Townsend of Honington and William Sheldon of Weston, both of whom had fine country houses in the area. Judith Townsend (née Gore) was the widow of Joseph Townsend, who had bought Honington Hall in 1737 from Sir Henry John Parker (Plate 1). Her husband died in 1763,\(^3\) when she presumably came to know Mister, and in the year of her treatment (1767) she

\(^2\) WCRO, DR 176/4.
\(^3\) Ibid., DR 210/3.
Figure 1: Periods during which Mister attended individual patients from January 1766 to December 1758. Each line represents a single patient.

was a five-guinea benefactor of the new Worcester Infirmary. William Sheldon (1715–80) was treated during the period from January 1766 to September 1768 with a long list of charges totalling £32 2s. 1d. (Plate 2). The range of local clergy Mister attended was striking, from Shipston and seven other adjacent parishes, some of whom were substantial patients, all but one in villages where other people were treated. Two of the eight largest bills were to clerics. A further category of patients were those who were not charged, rather than written off as bad debts. This could be for personal reasons, as for his namesake, Mr Thomas Mister (February–July 1767 and October–November 1768),

21 Joan Lane, Worcester Infirmary in the eighteenth century, publication no. 6, Worcestershire Historical Society, 1992.
presumably his eldest son born in 1743, and for the local surgeon Mr Horniblow (July–December 1768). Mister ran a contra-account for services supplied to him. Such exchange of skills rather than cash was widespread in contemporary medical practice and Mister attended a local haulier and a laundress without charge, annotating their accounts accordingly. The ledger does not specify treatment or medication for the fees charged. However, Shipston vestry accounts recorded that he received £2 2s. in April 1731/2 “for William Baylis’s Wife’s Finger taken off & Cur’d”.22

The whereabouts or even survival of other Mister ledgers remains a mystery. The Wellcome Institute bought this single volume at auction at Stevens’s saleroom, London, on 9 September 1930 as part of a mixed lot of manuscripts. It was formerly owned just before the First World War by a Mister descendant, S J A Cotterell, a Birmingham bibliographer, who considered it an “antiquarian’s treasure” and wished he could “only get Sir Conan Doyle to take the matter up”. With the ledger, Cotterell also had a Greek grammar, with the signature William Mister, 1732, in “a fine, bold hand”. He had already tried Notes and Queries to find out more about the ledger.23

Thomas Mister lived to be sixty-nine; he died on 30 August and was buried on 5 September 1780 in Shipston. His wife had died in August 1773. He was in every respect a typical Georgian surgeon-apothecary, attending all social classes from the aristocracy to the parish poor, a true general practitioner undertaking surgical and obstetric work, inoculating and supplying medicines to the same community for half a century. Belonging to a medical dynasty was commonplace in Warwickshire by this period (for example, the Bindleys of Nuneaton or the Brandishes of Alcester) and the practice area he covered was also typical for a town-based but rural practitioner. His co-practitioners seem to have been his uncle, William Mister (1672–1760), who signed some ledger entries and also receipted vouchers for parish officials, with his son, William, and his cousin, John. The entry in the 1780 Medical Register was for “Messrs Misters”.24 His grandson and a great-grandson, both John, were later to practise in the town. Thomas Mister did not write medical texts but appears to have entered the wider world of eighteenth-century medicine through communicating a report of the town’s disastrous smallpox epidemic to “a learned physician” who passed it on to Richard Mead. This account was duly expanded in the ninth enlarged edition of his Discourse on the Plague (1744), later included in his posthumous Medical works.25 There is little doubt that the September 1744 outbreak was serious; 406 inhabitants from 150 families were infected. Of these, 48 died (11.8 per cent), a greater mortality than in 1731, when 8.6 per cent had perished.26

A vagrant allegedly brought smallpox to the town in 1744; he was isolated in a little house, on a hill outside Shipston. At his death, his clothes and the house were burned, but “the wind being pretty high”, the smoke spread the infection to one side of the town, where eight people died in a few days. Mead emphasized the Mercurialis theory, that heat was “so dangerous . . . in all kinds of pestilential distempers, and so diffusive of contagion”. Smallpox stretched across the region in the mid 1740s, with peaks in Tysoe in

22 WCRO, DR 466/22.
23 SBTRO, DR 41/6 and DR 41/12.
26 The statistical analysis is the author’s.
Thomas Mister of Shipston (1711–80)

1742 and in Birmingham in June 1744. It was not until July 1746 that Worcester could claim the city’s epidemic was finished.27

The eighteenth-century poor law accounts for Shipston (1742–73) contain few individual medical entries, presumably because paupers were “farmed” or contracted to the town workhouse master for an annual lump sum, with only exceptional payments passing through the Overseers. However, these payments include £4 4s. for William Mister’s bill “dressing Sam Smiths leg” in 1751 and his “several bills” totalling £8 1s. 8d. two years later. A handful of medical invoices, archivally scarce, have also survived among the loose parish papers, including two bills receipted by Thomas Mister.28 Neither of these is noted in his ledger:

<table>
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<th>Year</th>
<th>Date</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1759</td>
<td>Oct 9th</td>
<td>Sudorific Draught, the Draught rep'd</td>
<td>1s 0d</td>
</tr>
<tr>
<td></td>
<td>Nov 7th</td>
<td>Bark in twelve papers</td>
<td>1s 6d</td>
</tr>
<tr>
<td></td>
<td>Jan 22</td>
<td>Vomit</td>
<td>1s 2d</td>
</tr>
<tr>
<td></td>
<td>[1760]</td>
<td>Electuary of the bark</td>
<td>2s 6d</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7s 2d</td>
</tr>
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</table>

[29 June 1760 receipt signed by Thomas Mister]

<table>
<thead>
<tr>
<th>Year</th>
<th>Date</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1766</td>
<td>22 May</td>
<td>a large box of ointment</td>
<td>6d</td>
</tr>
<tr>
<td></td>
<td>2 June</td>
<td>a purging potion</td>
<td>8d</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a large box of ointment</td>
<td>6d</td>
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<tr>
<td></td>
<td></td>
<td>an antirheumatic tincture</td>
<td>2s 0d</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dressing his leg several times</td>
<td>£1 0s 0d</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>£1 3s 8d</td>
</tr>
</tbody>
</table>

[25 June 1766 receipt signed by Thomas Mister]

An interesting future development in the town was that, by 1772, the parish undertook mass-inoculation of 157 paupers (17.4 per cent of the population) who were willing, work for which Horniblow was paid 6s. each; there were then 200 families in Shipston.29

In Shipston itself, with some seven or eight hundred inhabitants, there was a rival practice run by the Horniblow dynasty, who did much of the poor law work in the town and surrounding parishes. There was also the Matthews family of bonesetters at nearby Epwell (Oxon.), who were actively employed by parish officers throughout the period. Thomas Mister was presumably the most skilled man in the area, although not apparently undertaking second-opinion work and with no evidence of a specialism. His closest competitors were all well beyond five miles away and most beyond ten. Mister could not have existed on the income from treating paupers, even adding his fees for dressing

27 WCRO, DR 288/2; Aris’s Gazette, 5 June 1744; Worcester Journal, 4 July 1746.
28 WCRO, DR 446/84/53 and 56.
29 Ibid., DR 446/50.
wounds and the like, and it is clear that his non-poor patients provided his real livelihood. Even the extended credit he allowed them was tolerable in a non-inflationary period and, as the ledger indicates, there was a steady flow of cash into the practice as bills were paid. He had other non-medical sources of income; for example, he received £2 2s. a year in the 1730s from renting some of his Shipston properties to the vestry for the use of poor inhabitants. Thomas Mister is appropriately commemorated in the porch of St Edmund’s church, Shipston, as “many years surgeon in this town”, a typical, unremarkable but essential figure to all classes in the community for over four decades.

30 Ibid., DR 446/22.