

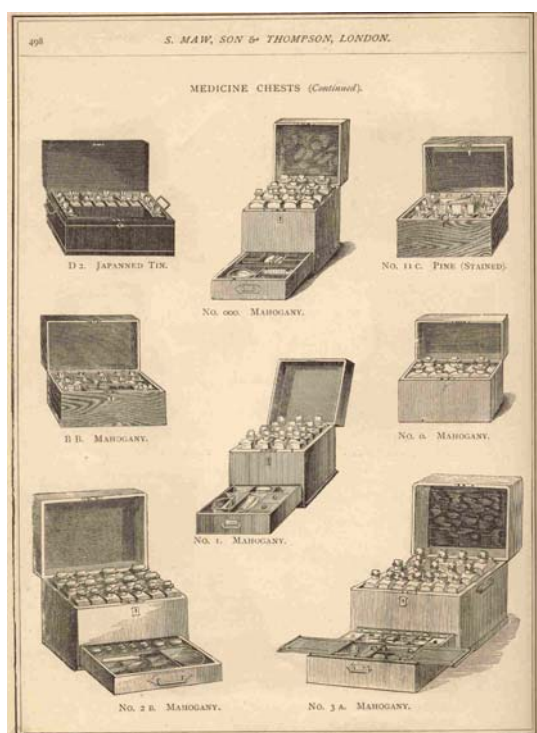
DOMESTIC MEDICINE CHESTS

OFTEN BELIEVED TO HOLD SUPPLIES FOR TRAVELLING PHYSICIANS, IN MOST CASES MEDICINE CHESTS WERE INTENDED FOR DOMESTIC OR PERSONAL USE.

History

Archaeological evidence shows that the Egyptians and the Romans had specific containers for domestic medical supplies. From the 1500s, naval and army surgeons' needs prompted the development of large medicine chests and wealthy noblemen took luxurious medicine chests on their travels. The fashionable Grand Tour increased the need for portable medical supplies.

Even though there was a long tradition of self-medication in Britain, domestic medicine chests only arrived here in the late 1700s, reaching the height of their popularity in the mid 1800s. An increase in specially-supplied chemical remedies and ready-made powders and tinctures provided many of the contents, and the growth of middle class prosperity, with consumer goods as the basis of the Industrial Revolution, meant that there were plenty of potential customers.



The chests

Cabinet makers, used to creating tea caddies and writing slopes, applied their craftsmanship to medicine chests. Frustratingly, they rarely printed their names on their products. Retail and wholesale druggists or apothecaries bought the chests and in many cases fitted them out fully. In 1808, Richard Reece's range included a Family Dispensary, Clergyman's Dispensary and a Tropical Dispensary. Chests were also fitted out to customers' specifications, meaning that the contents of surviving chests vary.

A chest's style gives some idea of its date. The earliest British chests were covered in fish skin. In the late 1700s, oak and walnut chests were popular. Mahogany, rosewood and walnut were fashionable in the 1800s. The most popular lifting lid style dates from the late 1700s, and became fashionable again in the mid to late 1800s. Small details, like handles, can also give clues. From the 1820s, military style flush brass handles were in fashion.

The knowledge

Medicine chests were used alongside manuals written for the lay public. Twenty titles were published in Britain between the 1760s and 1890s, and each ran to many editions. Copies of these books are now quite scarce. They were practical guidebooks containing lists of the chest's contents and how to use them, detailed explanations of weights and measures, tables relating dosages to a patient's age, instructions for purging, emetics, bleeding, and also first aid directions for resuscitating after poisoning or drowning. All recommended access to a qualified physician.

The contents

Medicine chests' contents provide an insight into treatments being used in the middle-class home. They tend to reflect this era of "heroic medicine" with vigorous therapies and chemical remedies, such as Dr James' Fever Powders, containing poisonous antimony, which were common to treat fevers. Medicines and equipment for purging, enemas, emetics, blistering, and blood-letting were typical. Common contents included turkey rhubarb as a stomachic, astringent and purgative, tincture of jalap, a strong purgative, and ipecacuanha as an emetic and expectorant. The only painkillers available were opium-based, usually as laudanum or tincture of opium. However, chests with homeopathic contents were also introduced alongside allopathic ones.



From the late 1700s, a chest's bottles were square or rectangular in section. Empty ones were re-filled and sometimes re-labelled by a pharmacist. The labels were usually on their shoulders so they could be read from above when placed in the chest. Most chest designs also included drawers. Early ones often had sliding covers, fitted tin boxes, and a rack to hold glass jars with parchment or chamois tie-on covers. Later, drawers also contained powders in individual paper packets.

The accessories in chests became very standardised. They usually included:

- A hand-held balance and weights, usually based on the Apothecary's Troy system (see information sheet 11). The design of the weights can give some clue to their date.
- A lancet for lancing boils and abscesses. However, blood-letting, lancing or minor operations were not recommended by the manuals unless by a professional.
- A marble or ceramic tile, a spatula and a mortar & pestle for preparing and mixing ingredients.
- A Seidlitz measure, for two powders (collectively called a Seidlitz Powder) which were dissolved in water as a treatment for indigestion.
- A funnel, used to refill bottles. This was silver or pewter in earlier chests, glass in later ones.
- Blistering items – a blistering plaister (or plaster) was gently heated, spread on linen or cotton with a plaster iron, and applied to the skin. The resulting blister was believed to "move" existing pain, as a "counter irritant."
- A probang – a long flexible device used to dislodge anything stuck in the gullet.
- Curved glass leech tubes – to direct a leech's attention to problem areas like a gumboil.
- Caustic stick in a case – silver nitrate used to burn warts out.

The decline in medicine chests has been explained by the growth of available supplies and advice from hospitals, pharmacies, and doctors, public health improvements that meant less epidemics and hygiene-related illnesses, and changes in the preparation format of medicines with a greater use of tablets. Medicine chests continued to be made and sold into the early 1900s. But today, the bathroom cabinet, and the first aid kit have replaced the medicine chest as our source of immediate domestic medical supplies.

The illustration overleaf is from S Maw, Son and Thompson's 1882 wholesale catalogue.

This page shows some of the contents of a medicine chest in the Museum's collection, dating from around 1800. (DAE5)

This sheet was researched particularly from A.M.Young *Antique Medicine Chests* (Vernier Press, Brighton, 1994).

**This information sheet is also available in a large font size.
Please contact us on 020 7572 2210 or email museum@rpsqb.org.**