

Dr. Richard Thomas Tracy



One hundred and twenty-four years ago, Richard Thomas Tracy had just completed what was to become the first successful ovariectomy performed in Victoria. Ovariectomy, the operative removal of an ovarian tumour, is to be regarded as the beginning of modern abdominal surgery. I can find records of two earlier attempts in this State. On 14th September, 1859, at the Melbourne Hospital, Edward Barker, later lecturer in surgery at the University of Melbourne, abandoned the operation because of what he believed were dense adhesions and the patient died the next day (Barker, 1860); and on 1st May, 1863, at the Bendigo Hospital (then more colourfully called the Bendigo Gold District General Hospital), John Cruikshank performed ovariectomy, but the patient died from peritonitis four days later (MacGillivray, 1863). It was accepted generally that Tracy held the honour of being the first successful ovariectomist in Australia (medical annotations to this effect appeared in 1861 in England in the *British Medical Journal*, the *Lancet* and the *Medical Times and Gazette*), and Tracy, at the time, believed it himself (Tracy, 1864a). However, it was not true, for George Mayo was the first to remove successfully an ovarian tumour in this country, in Adelaide on September 23, 1852 (Foster, 1963).

Tracy, a Protestant Irishman, was born in Limerick on 19th September, 1826 (Obituary, 1874). The first Tracy settled in Ireland after the conquest of Britain by William the Conqueror; the name Tracy came from a town, so-called, in Normandy. In the family crest the scallop shell is prominent and, in heraldry, this signifies usually an ancestor who had been a Crusader. It was intended by his family that Richard Tracy should be a clergyman, but he resolved on a medical career. This commenced with a valued year's practical work at the County Limerick Infirmary; then, in 1845, he began his medical studies proper in the Dublin School of Medicine. He was a student both at the Dublin General Dispensary and at Mercer's Hospital. His training in obstetrics was at the South-Eastern Lying-in Hospital, where Thomas R. Mitchell, M.D., F.R.C.S.I., was then Master. In 1848, he obtained the Licentiate of the Royal College of Surgeons of Ireland. A number of personal references from this time have been preserved, and one of these is worth recording:

by Frank M.C. Forster

I have known Surgeon Richard Tracy while pursuing his professional studies in Dublin and feel much pleasure in testifying to the zeal intelligence and persevering assiduity evinced by him in the acquirement of every department of medical knowledge, as well as to the uniform gentlemanly bearing of his conduct, and I have no doubt that his future career will be crowned with that honour and success which his talent and attainments so well deserve, and which all who know him join in wishing him.

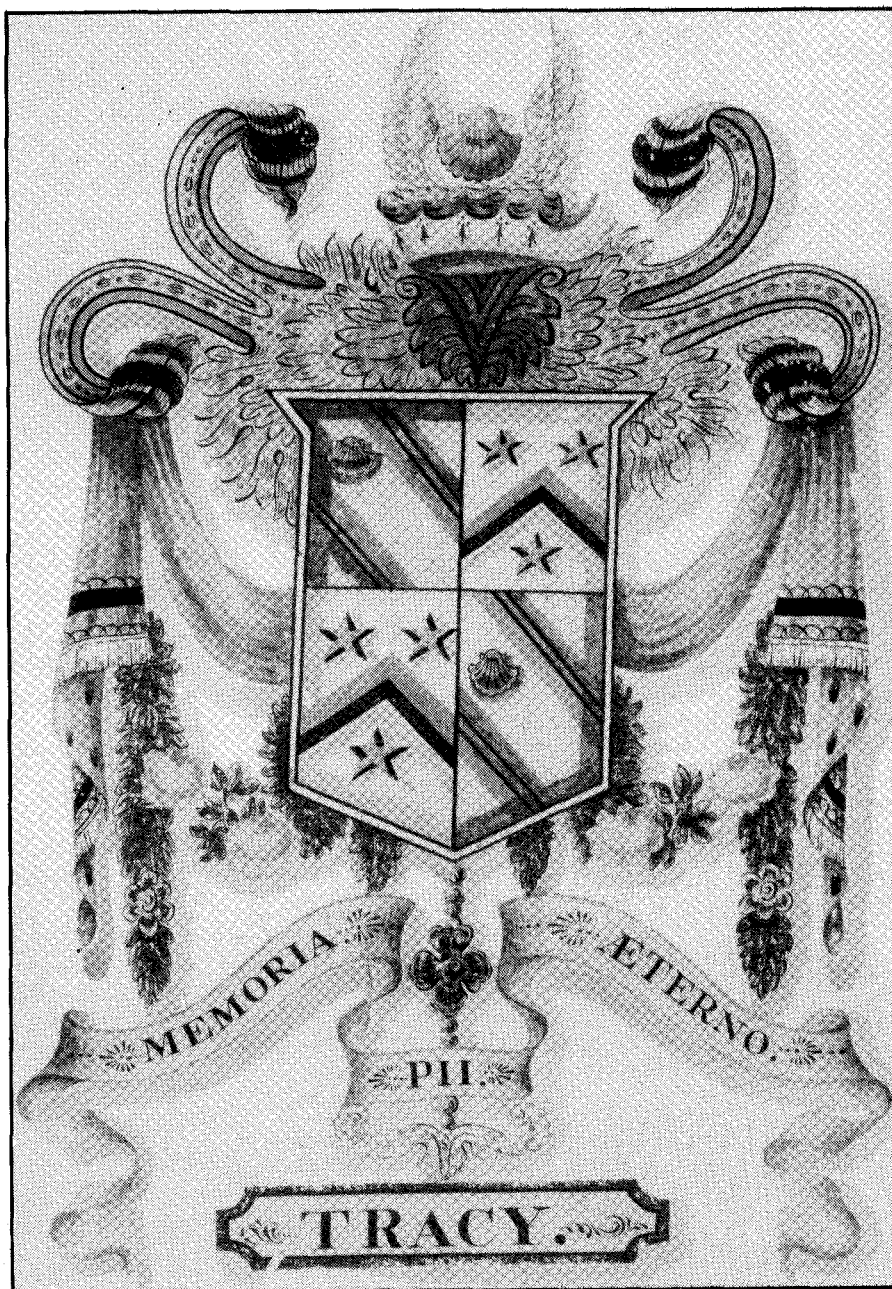
Edward Hamilton, M.D., Physn. Dublin Gen. Dispry., Lecturer on Practical Anatomy, Dublin School of Medicine.

Immediately after qualification, Tracy visited Paris. This was the eventful time

of the assumption of power by Louis Napoleon. In December of the same year, 1848, he went to Glasgow to take up an appointment at the Cholera Hospital. It contained 700 beds! He had previous experience in a fever hospital in Ireland and, indeed, had almost died there from typhus. In May, 1849, he took by examination the M.D. (with honours) of the University of Glasgow. After Glasgow, there followed short periods of practice at King's County in Ireland, and at Reading in Berkshire. Returning to London, he was undecided about his future. Friends were urging him towards both Canada and South Australia, and it was the primitive method of tossing a coin that decided in favour of the latter. He wrote at once to his intended wife, a cousin, Miss Fanny Sibthorpe of Limerick. She confirmed the decision of the coin; in actual fact, South Australia had come



Richard Thomas Tracy (1826-1874).



The Tracy family crest.

originally as a suggestion from her. They were married almost immediately and on 16th May, 1851, they sailed, he as surgeon, in a ship called the *Bal-langeich*; built 3 years and of 400 tons. They reached Melbourne on August 20, 87 days out from Plymouth, a near-record run (*Argus*, 1851: *Shipping Gazette*, 1851). The Melbourne they saw was far from impressive, for many people were packing to go or had gone already to the recently discovered New South Wales goldfields.

Tracy and his wife left shortly after for Adelaide. They struck very bad weather and the voyage took 26 days! He set up practice in North Adelaide, but towards the end of the year the news of the discovery of gold in Victoria emptied Adelaide of nearly all its male inhabitants. One reads of that time

– “In the largest chapel, the minister one Sunday looked around and cried out – I see but one man in my large congregation – immediately, the deserted wives, sisters and mothers lifted up their voices and wept bitterly” (Bonwick, 1902).

In North Adelaide, Tracy met and became a friend of a local school-teacher, James Bonwick (1817-1906), later a well-known historian, geologist, geographer and the author of many books. Bonwick wrote later (1902), “As my doctor, a clever Limerick man, had been left with no patients, for the Gold Fever killed all competing diseases, my solicitor found himself without clients, as these had fled, and I was bereft of paying pupils, there seemed nothing for it but departure”. These three men formed a party and left Adelaide for

Melbourne by a very crowded steamer in mid-February, 1852, a few weeks after the birth of Tracy’s first daughter, Eva.

The Melbourne that greeted them was very different from the one Tracy had seen so recently, and Bonwick (1902) gives a vivid description “... a town filled with men and the wildest revelry reigned. They were singing the new song, “A good time is coming boys, A good time is coming”, and they were spending their money as if that time had come. Publicans would never see such a day again, nor tradesmen realize such profits on their goods – others were flying about in cabs, with girls seduced by the clink of a coin. Offers of marriage were laughingly made and readily accepted ... and the next day, perchance, saw the couple taking different roads, with other partners for the church door. It was a mad season of brain intoxication. Anxious employers could be seen entreating men to come to work at fabulous rates of payment but were scornfully refused. Work was at a standstill ... I saw a placard signed by the Bishop of Melbourne beseeching masons to finish the Church walls – “For the love of God and thirty shillings a day” – but the Church walls had to wait’.

The small party from Adelaide was joined by others in Melbourne and with a light cart started for the Diggings. At the end of the first street, Elizabeth, the town of Melbourne ended. A map from *Notes of a Gold Digger and Gold Digger’s Guide* (Bonwick, 1852) shows their actual route and Bonwick (1902) recounts their fears of robbers in the Black Forest beyond Woodend, tells of their being lost in the Dividing Range and of their excitement at reaching the fields at Forest Creek, now Castlemaine. How they ‘out with their pans and, at once, began testing the sands or earth for the colour of gold’ – and again – ‘we induced the Doctor to mind the tent, turn cook, and pin a paper on the canvas: “Dr. Tracy from Limerick”, while the young Lawyer and the Schoolmaster were to do the digging, for all must needs do something with bread four shillings a loaf. The Doctor was a dreadful cook, but soon picked up some fees from patriotic Irishmen’. The canvas of the tent offered a handy site for advertising. This is seen best in S.T. Gill’s contemporary drawings, in two of which, ‘Fryer’s Creek, Nr. Castlemaine’ and ‘Eagle Hawk Gully, Bendigo’, there are the names of doctors, respectively Dr. Bunce and Dr. Bell.

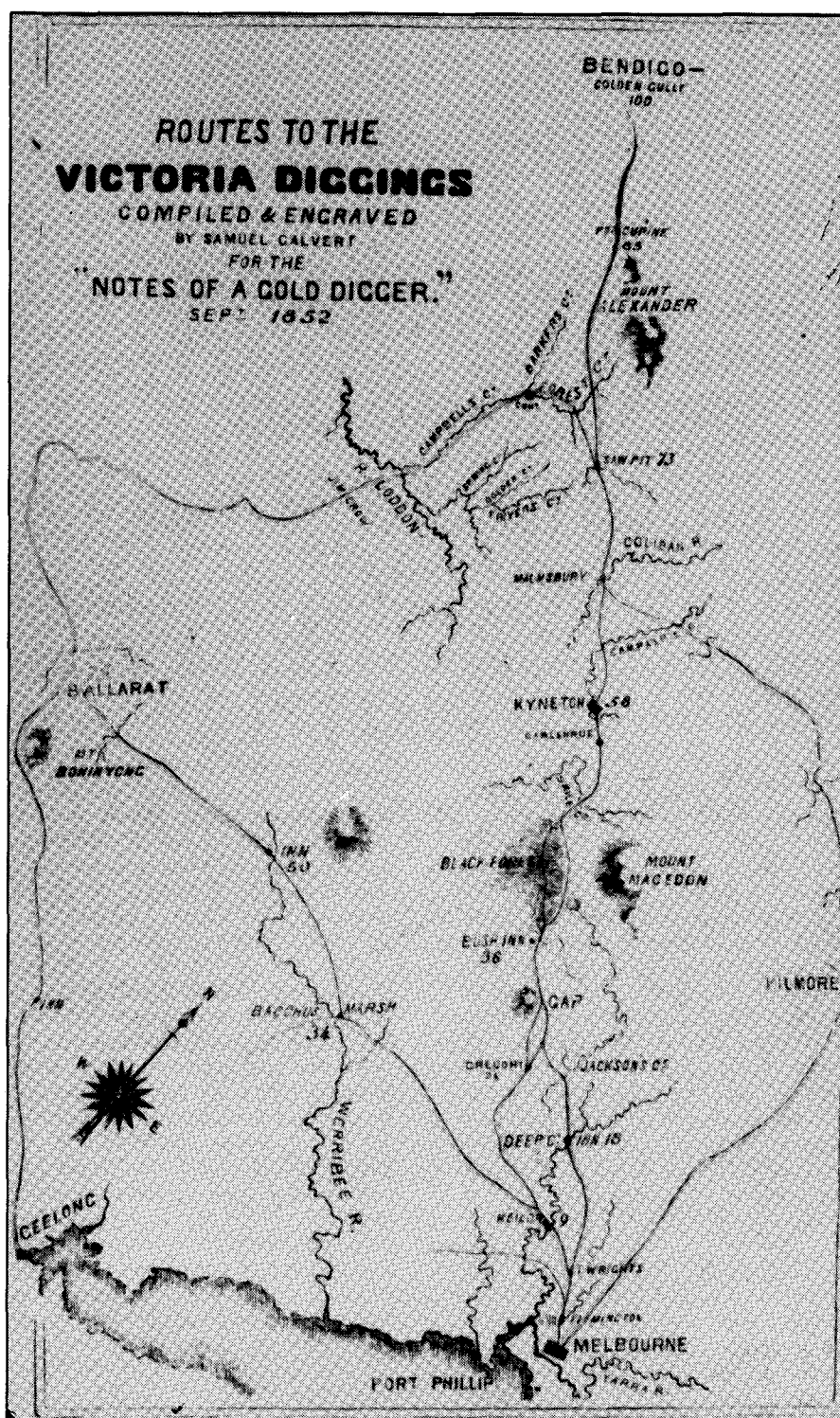
With no luck at Forest Creek, the party quickly pushed on to Bendigo where they sank a shaft at Long Gully. Tracy was getting an increasing number of patients and a calico sign measuring 32 x 20 in., with 6 in. lettering, was displayed there on his tent. It



is now in the possession of the Museum of the Medical Society of Victoria, the gift of Tracy's daughter. Blanche, the late Mrs. Charles D'Ebro (Mackay, 1936). It is superior to most doctors' signs on the goldfields, and one observes that there is no reference now to Ireland, a measure probably of the decline in the popularity of the Irish on the diggings. The following extract (Bonwick, 1852), is an interesting commentary on health at the diggings:

My friend and mate at the diggings, R.T. Tracy, Esq., M.D., has favoured me with a few hints which he thinks may be of service to his old friends at the mines. He desires to enforce upon their attention the necessity of regarding their mode of living; as carelessness in preparing meals, lying on the ground, not guarding against night chills, neglect of damp clothes, and want of variety in articles of diet, are the fruitful sources of disease. He would recommend them to get potatoes, beef, onions, preserved fish, and things called luxuries as often as they can. A filter in the dry season is invaluable; as bad water produces dysentery. In attacks of diarrhoea and dysentery, much mischief is done by persisting in the use of soda-damper and fat mutton; broths, arrowroot and leavened bread ought then only to be taken. Dr. Tracy would, also, recommend that a store at the diggings be allowed to sell port wine for strictly medicinal purposes, upon orders from medical men, as at present the sick can only obtain this stimulant by sanctioning the sly grog shops, at which, too, a bad article is sold at an exorbitant price.

At Bendigo, Bonwick and the lawyer had a small success, a small find; but then came the rain and with this and with weariness of the dirty, back-aching life and of poor food, with ill-health and with worry about wives in Adelaide, for there were rumours that the natives were contemplating a seizure of the white women left behind, with all this came disillusionment (Bonwick, 1902). At the end of June, 1852, Tracy returned overland to Adelaide, sold up everything and came again with his wife and child to Melbourne. Accommodation, except in tents, was hard to obtain, but after much trouble he settled down in make-shift quarters to practise in what is now Gertrude Street, Fitzroy. It was a Melbourne hard for us to visualize today. On 1st November, 1852, the following appeared in the *Sydney Morning Herald*: 'a worse regulated, worse governed, worse drained, worse lighted, worse watered town of note is not on the face of the globe; and that a population more thoroughly disposed, in every grade to cheating and robbery, open and covert, does not exist; that in

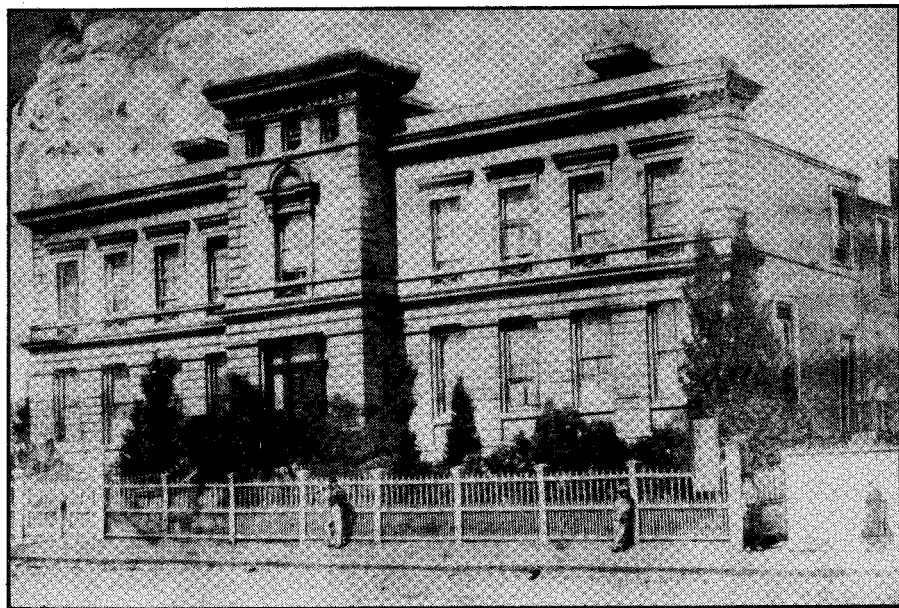


Routes to the Victoria Diggings, 1852.

no other place does immorality stalk abroad so unblushingly and so unchecked; that in no other place does mammon rule so triumphant; that in no other place is the public money so wantonly squandered without giving the slightest protection to life or property; that in no other place are the administrative functions of Government so inefficiently managed; that, in a word, nowhere in the southern hemisphere does chaos reign so triumphant as in Melbourne". With due allowance for the beginnings of interstate

jealousy, for Victoria in the next decade was to surpass New South Wales not only in wealth but in world renown, one must accept considerable truth in this description.

Tracy was rapidly successful and, in 1854, he moved into a large home which he had built in Brunswick Street, Fitzroy. I believe this house still stands, and, structurally altered, serves as an annexe to St. Mary's House of Welcome, run for those in need by the Daughters of Charity of St. Vincent de Paul. The next 10 years were both years



Melbourne Lying-in Hospital, now the Royal Women's Hospital, original building on Carlton site.

of endeavour and years of achievement, at the end of which Tracy had become by his own efforts a leading member not only of the medical profession but of the whole community.

In Fitzroy, he was a magistrate, the first health officer, and a trustee of St. Mark's Church of England, in the building of which he was keenly interested. He was surgeon to the East Melbourne Battery of the Victorian Volunteer Artillery from its formation until his death (Obituary, 1874). He was an original and active member of the Victorian Medical Association. Later, he and a few others joined the rival Medico-Chirurgical Society of Victoria and it was by their efforts that these two bodies united as the Medical Society of Victoria. He was President of this Society in 1860 (Tracy, 1861). He was one of the original committee that founded the *Australian Medical Journal* in 1856 and saw it through its early struggles: it prospered and amalgamated eventually to form the present *Medical Journal of Australia*. However, Tracy's

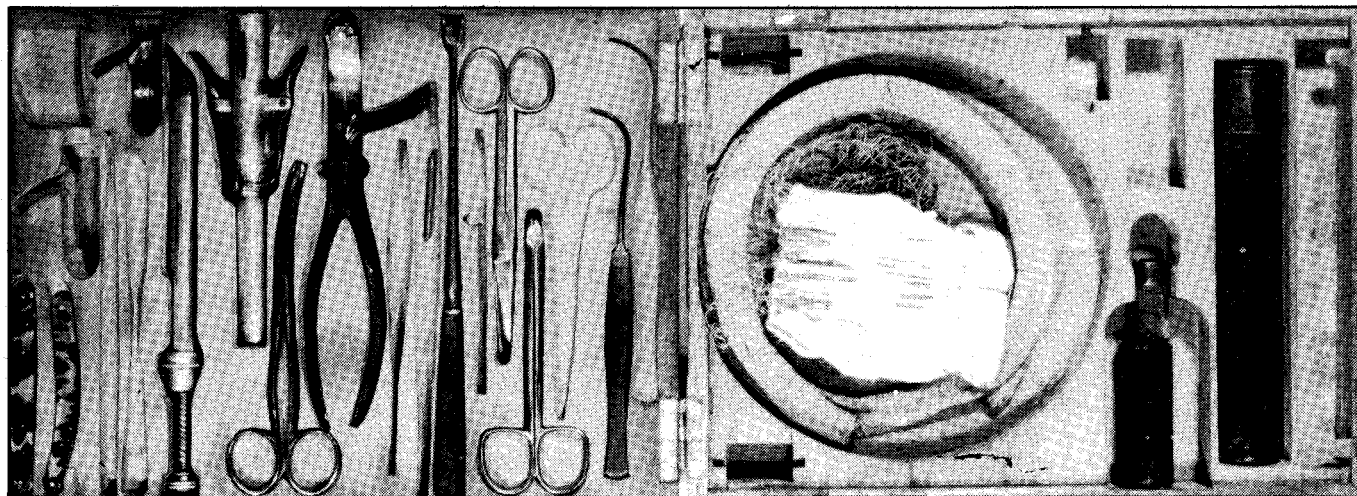
greatest contribution was undoubtedly in obstetrics and gynaecology.

The discovery of gold in Victoria in 1851 led to an explosive growth in its population – from a little over 77,000 in March, 1851, to nearly 111,000 in 1857 (Serle, 1863), close to a six-fold increase in six years. In the resultant social and economic upheaval, many women were left both destitute and pregnant. Tracy and his friend, Dr John Maund, saw the need for an institution to care for them and had actually leased a building at 41 Albert Street, East Melbourne, for a private maternity hospital, when they were approached by a committee of public spirited women who had the same end in mind. This Ladies' Committee had the support of the Dean of Melbourne, the Reverend Hussey Burgh Macartney, and much credit must be given to its extremely able and active honorary secretary, Mrs. W.U. Tripp, the wife of a prominent solicitor. At a subsequent meeting, the building in Albert Street was approved and Mrs. Fanny Perry,

wife of the first Bishop of Melbourne, was chosen as president of the Ladies' Committee. Five days later, on 19th August, 1856, through the combined endeavours of all concerned, The Melbourne Lying-in Hospital and Infirmary for Diseases of Women and Children opened as a public charity and received its first patient (*Argus*, 1856).

Two years later, the hospital moved from Albert Street to its present site in Carlton. The original building stood approximately in the position of the present Pathology Department, facing Swanston Street, then Madeline Street. It was an imposing structure (Tracy, 1870). The gynaecological wards and operating room were situated in the upper storey. The lower floor was occupied by a boardroom, offices for matron and a resident surgeon and the admitting room. The actual midwifery wards were at the rear of the building and in immediate connection with it. These wards, and there were eventually several of them, were 12 feet square and 12 feet high, each with a fire-place and a window-ventilator. The walls were painted for about 5 feet from the floor and the remainder was lime-washed. Each housed one or two patients, a reminder of how fear of the introduction and spread of puerperal infection dominated obstetrical thinking at that time. It was not until 1884 that the name of the hospital was changed to simply 'The Women's Hospital', and in 1954 it became 'The Royal Women's Hospital'.

John Maund did not live to see the occupation of the new building. Following his death early in 1858, Tracy became the dominant medical influence at the hospital, an influence that remained unchallenged whilst he lived. Tracy always gratefully acknowledged the advantages he derived from his close association with this institution, and, because of it, his practice became more and more directed towards obstetrics and gynaecology. He became in this way the first true



Instruments used by Richard Tracy at his first ovariectomy.

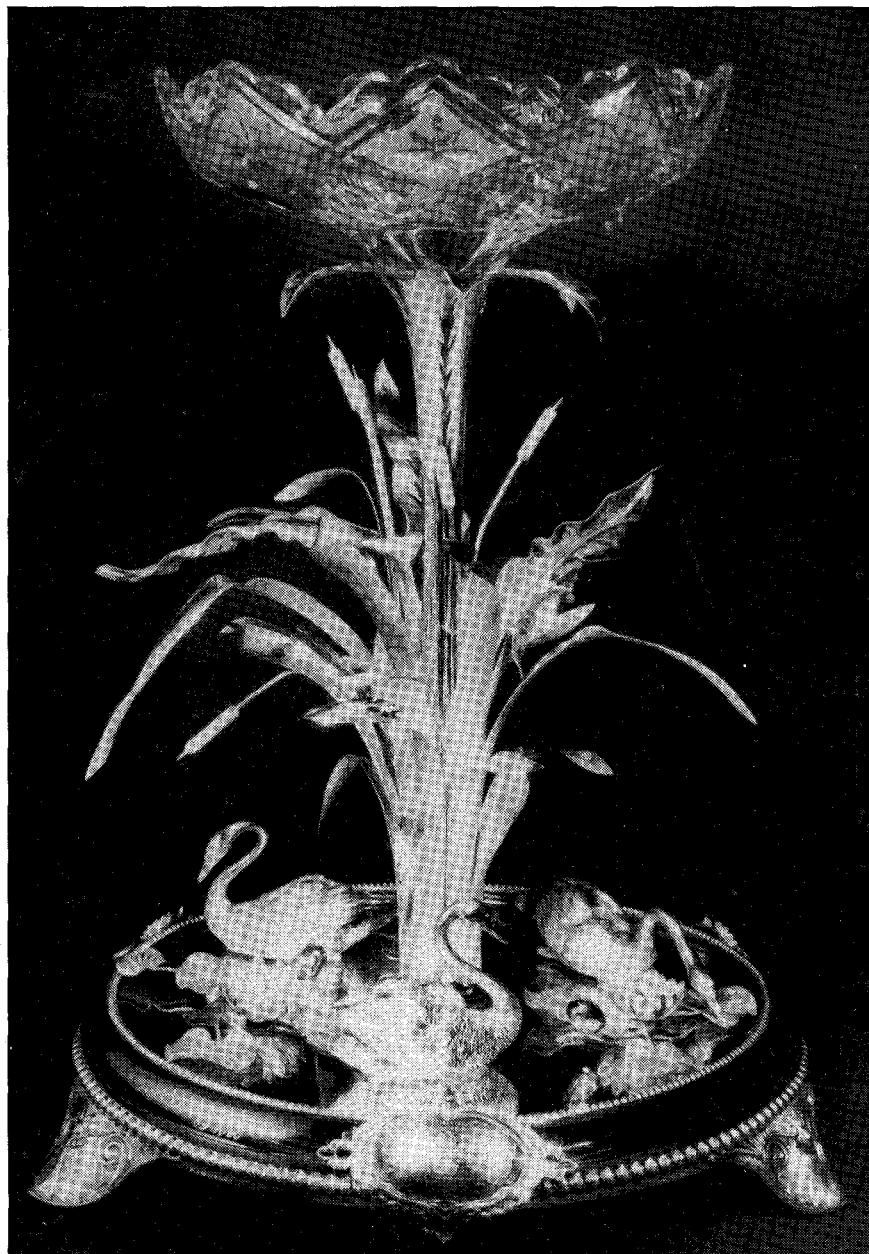


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large syphon trocar was introduced and about two gallons of dark-brown fluid drawn off. Care was taken to prevent soiling by this fluid and the cyst was drawn out of the abdomen. An adhesion had to be separated and tied, and then the pedicle was clamped and the abdominal wall closed. Tracy, of necessity, was a self-taught surgeon, but he always fully acknowledged the help he received in the communications he had with his mentor, Spencer Wells. Indeed, it was the latter who chose and sent him the case of instruments that were used in this operation. They have been preserved and were presented to the Royal Women's Hospital, Melbourne, last year, 1963, by Mr. Robert Tracy-Inglis of New Zealand, a great-grandson of Tracy. The most interesting are Spencer Wells' syphon trocar for aspiration of the cyst and Spencer Wells' pedicle clamp with detachable handles. At the time, the method of management of the pedicle of the tumour was controversial and Spencer Wells was then the great protagonist of bringing it outside the abdominal wall, if possible, and there clamping it – and this was exactly what Tracy did.

Tracy's next ovariectomy, again, successful, was performed in this hospital on 27th October, 1864 (Tracy, 1864b). In the next seven years, until his retirement due to ill-health, he operated a further 20 times with four deaths. A feature that we would regard as unusual today was that he was most particular to keep the operating room temperature between 70° and 75°F. It was agreed that he never refused surgery when it was indicated and that his operative mortality rate of 18% compared favourably with world figures: Peaslee in New York, 20%; Clay in Manchester, 25%; Baker Brown in London, 23%; Spencer Wells, 23%. To Spencer Wells must go much of the credit for establishing ovariectomy as a legitimate procedure. This he achieved (Wells, 1865) by honestly reporting all cases, openly showing his patients, freely demonstrating operations and exhibiting the tumours. In a similar way, Tracy, by meticulously reporting his cases in the local medical journals and by his very great success, firmly established ovariectomy in Victoria and then in the other colonies. His influence can be seen from a record of all known ovariectomies performed in Australia up to 1887: 130 in Victoria, and 71 in the rest of Australia (Pinnock, 1888).

Ovariectomy, at the time, still had its critics. These were found, too, in Melbourne, and criticism extended both to The Lying-in-Hospital and to Tracy. It can be seen in a virulent form in a cartoon circulated about 1867, when Lawrence Joseph Martin became honorary physician to the hospital after a bitterly



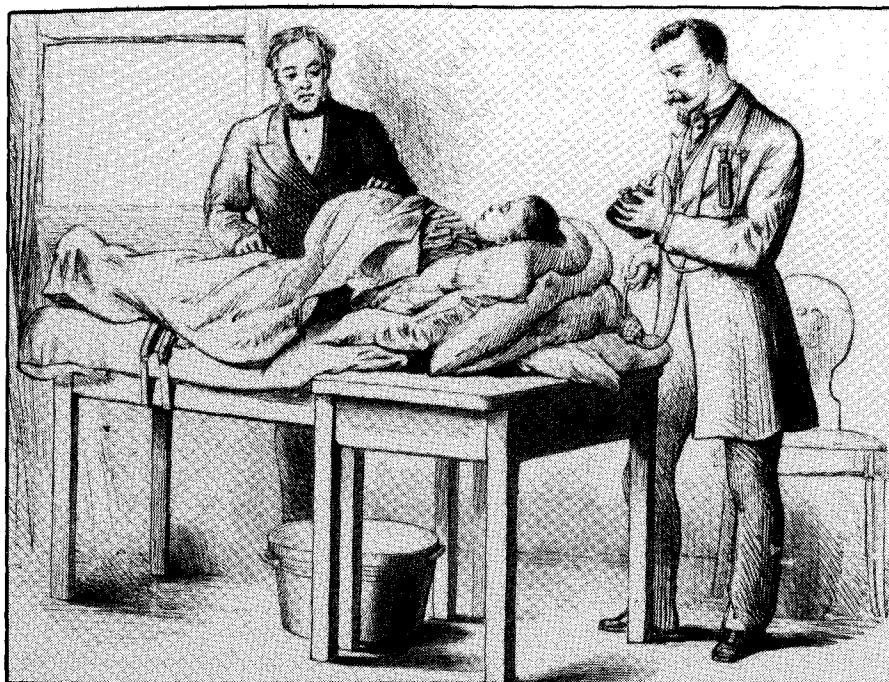
Silver épergne, presented to Richard Tracy by his friends and admirers.

fought election, in which it was thought by some that Tracy used undue influence to obtain this end. Tracy, enveloped in a toga, is shown on the steps of The Lying-in Hospital (St. Jabbars' Hospital) and Martin, servile, stands below. References are made to mistakes in the diagnosis of ovarian tumours, the finding of 'wind' and pregnancy. Tracy is castigated for an early statement that decomposing tissues could be restored by dipping them in spirit. Martin's remark refers to Tracy's failure to have a son – he had seven daughters. There are also a number of crude allusions to the Irish origin of both men and to the mortality in the hospital.

During these years, Tracy was a familiar, respected and successful figure in Melbourne. His work was

known widely abroad. In 1870, his junior colleague, Lawrence Martin, whilst travelling in Europe, read for him, to the Obstetrical Society of London, an historically important paper entitled 'A Short History and Description of The Lying-in Hospital and Infirmary for Diseases of Women and Children at Melbourne, Australia, with some account of what has been done in it' (Tracy, 1870). In 1872, Spencer Wells read for him, to the Royal Medical and Chirurgical Society of London, a paper with the title 'Case of Ovarian Dropsy. Operated on During an Attack of Acute Peritonitis' (Tracy, 1873a). This was communicated on 8th October, 1872, a day important also to Wells, for on it he submitted the results of his first five hundred ovariectomies (Wells, 1873).

In 1871 Tracy was elected an honor-



Contemporary picture of Spences Wells about to operate, with Dr. Day administrating chloromethylene. (From T. Spenser Wells, *Disease of the Ovaries*, J. & A. Churchill, London, 1873).

any fellow of the Obstetrical Society of London. This was one of the highest professional distinctions of that time and equivalent today, perhaps, to an honorary fellowship of the Royal College of Obstetricians and Gynaecologists. He was very proud of this recognition.

Towards the end of 1871 or early 1872 came ill-health and, in the latter part of 1872, his symptoms became so troublesome that he could no longer work. No diagnosis was reached and it was believed that he was in a state of physical exhaustion from 23 years of constant labour at his profession. It was recommended that his best chance of recovery lay in a trip home to Ireland. There was widespread regret at his leaving and there were many expressions of the esteem in which he was so generally held. Amongst these was a gift of £600 from friends and patients, to be spent by him on a fitting memorial of their regard, to be selected by him on his trip. The major piece chosen was a silver epergne, which is presented to the hospital today by Mrs. A.H. Barraclough, on behalf of her son, H.C.D. Barraclough, a great-grandson of Tracy.

Tracy was away 12 months and a diary he kept on his trip has fortunately been preserved. It is a most interesting document. He sailed from Melbourne on 1st March, 1873, and at first his health seemed to improve. With fresh things to see and learn and old friends and new people to meet, he was busy and, at times, one senses his determination to be well again. He arrived at Southampton on 28th April, and three days later called on his great supporter,

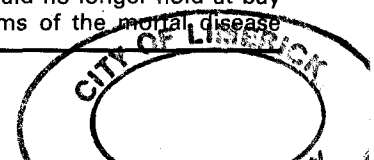
Spencer Wells. On 7th May, he attended a meeting of the Obstetrical Society of London and heard Lawson Tait present an "excellent paper" on advanced extra-uterine pregnancy (Tait, 1874), but he thought the ensuing discussion was poor. He admired Tait's ability and from him, in his own words 'received much kindness and hospitality'. Lawson Tait had just celebrated his 28th birthday and this was the year he appeared first on the London scene; the year that he was awarded the Hastings Prize for his very fine essay on ovariectomy. In the future, it was he, more than any other, who explored that world of new possibilities opened by the success of ovariectomy. It was said of Tait by one who knew him: 'He was a remarkable man. In some ways he was a giant, and the power of the man held you like a vice. As a surgeon he was a genius; justice has not yet been done to him, and possibly never will be, for the part he took in that wonderful development of abdominal surgery which occurred in the last quarter of the nineteenth century'. (Lloyd, 1911).

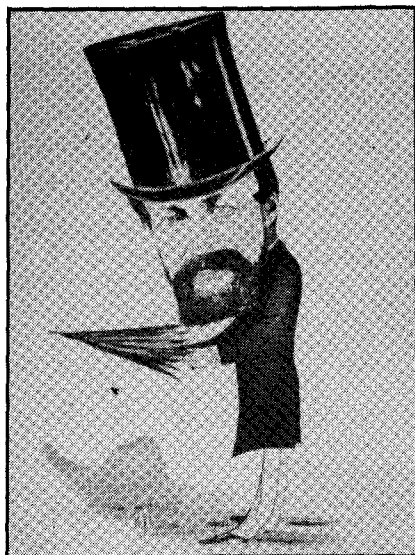
On 12th May, Tracy watched for the first time Spencer Wells perform an ovariectomy. The scene depicted in figure 8 must be very near to what he saw – Wells about to operate with Dr Day administering chloromethylene (Wells, 1882). The table shown in figure 9 depicts Wells' ovariectomies for the six months following Tracy's arrival and this was Case No. 552 (Wells, 1882). Tracy attended all operations up to and including Case No. 563, when he left for Ireland. Case No. 552 died and so did the next three, all from

peritonitis, and they constitute Wells' most unsuccessful sequence. Lister, it is to be remembered, was still in Edinburgh, and his antiseptic methods were not yet accepted in London. Tracy wrote: 'I may state, that Dr. Richardsón told Mr. Wells that he ought to operate as little as possible about the time those bad results occurred. There was a daily prevailing east wind and a falling variable barometer. Mr. Wells thought the foreboding somewhat theoretical; but there seems to be something in it' (Tracy, 1873b). At the bottom of the page in his diary carrying this sad record, he has written a single word, 'Strange'. One wonders what he thought of it all.

Of Saturday, 24th May, he wrote: 'Started at 9 a.m. for Birmingham with Spencer Wells and Dr. Daly – arrived 12.30 – lunched with Lawson Tait'. This would have been at 'The Crescent' where Tait lived and where, first the Birmingham and Midland Hospital for Women and later Tait's private hospital were situated. This building, facing an alley and most unpretentious, even for its time, was the site for the next 30 years of some of the finest surgical work in the world, a reminder that a hospital building is only a shell, a body, and that it is its medical care which is its soul. On that Saturday afternoon, Wells performed his second splenectomy, the spleen weighing 16 lb. 3 oz. The patient died three days later, again from peritonitis. This operation for Tracy was a memorable occasion. In his diary, he affirms that Wells diagnosis before operation was an ovarian or uterine tumour, but Wells, writing first about the case in 1885 stated that this 'was clearly a case of enlargement of the spleen'. Tracy's admiration for Wells was unlimited and, at this time, wrote of him: 'Mr. Wells is a truly remarkable man. He is universally acknowledged by all here as *jacile princeps* in the special operations to which he has devoted the whole power of his intellect. He at once inspires confidence. You feel that he is a master of his art: but the great peculiarity that struck me about Mr. Wells, is his unflinching readiness to meet any emergency occurring during an operation, as coolly and calmly as if it were the very thing he had expected. I do not think it would be possible to flurly him by a complication or a difficulty' (Tracy, 1873b).

Tracy visited Ireland, but was back in London by the first week in August for the president's address at The British Medical Association congress (Fergusson, 1873). On 12th August, he witnessed what was to be his last ovariectomy and, as he would have wished, Wells was the operator. But now the power of the mind could no longer hold at bay the symptoms of the mortal disease





A contemporary cartoon of Richard Tracy, 'Melbourne's most successful gynaecologist.'

that afflicted him. He became the subject of almost constant abdominal pain and gastro-intestinal upset. He went to Paris and on to Rome where he waited for the completion of a marble bust of himself by Charles Summers (1827-1878) – the bust that is preserved now in the library of this Hospital. Then, in early 1874, back to Melbourne, back to more months of suffering, but back home to the tender care of his family and his friends.

Richard Thomas Tracy died on 7th November, 1874, from advanced abdominal malignancy. He was then aged 48, but had accomplished already so much. He was universally respected and universally admired. With the passage of time, his greatness can be better appreciated, for he was a great man, the outstanding figure in obstetrics and gynaecology in Australia in the last century and, I fancy, we have yet to see his equal.

Acknowledgements

I wish to thank Mrs. A.H. Barraclough, grand-daughter of Richard Thomas Tracy, for her invaluable help; Mrs. A.E. Prytz, president of the Board of Management of the Royal Women's Hospital, for her support; Professor K.F. Russell, the University of Melbourne, for assistance in obtaining a number of documents; Miss A. Tovell, the Museum of the Medical Society of Victoria; Miss M. Johnson and Miss M. Salter, photography department of the Royal Women's Hospital; Mrs. I. Colquhoun, my secretary.

I would express also appreciation of the honour of being invited by the Executive Medical Staff of the Royal Women's Hospital to give this, the First Tracy Memorial Lecture, a lecture destined to be given annually to mark the beginning of the course of postgraduate lectures arranged by the Postgraduate Sub-committee of that Staff.

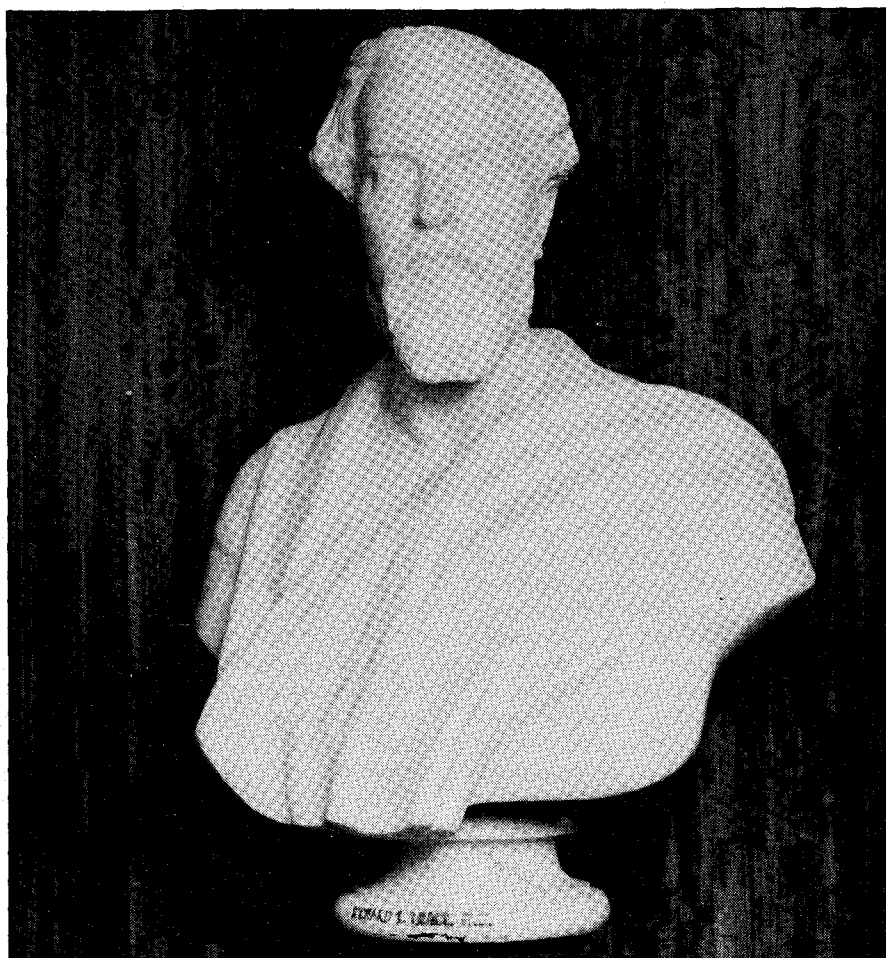
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A marble bust of Dr. Richard Thomas Tracy by Charles Summers.