

A life insurance medical, 1848

Joseph Caplan

Most physicians wonder occasionally about the practice of medicine in days gone by. What sort of relationship did their forebears have with their patients? Did they have to cope with paperwork? What was life like for the average doctor of the time? I recently obtained, for a few dollars at a stamp collectors' auction, a life insurance questionnaire that affords a fascinating glimpse into medical practice in rural Canada more than 150 years ago.

The Canada Life Assurance Company was founded in 1847. The following year their agent in Hamilton, Canada West (now Ontario), paid 4½ pence (about \$5.00 in today's currency) to send a single foolscap-sized page from Hamilton about 50 km to Niagara (now Niagara-on-the-Lake). It was mailed May 27, 1848, to Henry Melville, MD, who received it on May 28 and completed it the next day. A brisk, professional gentleman, he was no procrastinator.

Melville was born in Barbados on July 7, 1816, and obtained his medical degree from the University of Edinburgh. He returned to practise in the West Indies in St. Vincent and eventually moved to Canada. He was an Anglican and must have had some standing in the little county town of Niagara, as he was one of the founders of Trinity College, Toronto, in 1852. He returned to England and died in London March 27, 1868, at the early age of 51.

Ralph M. Clement, the applicant, lived about 30 km away in St. Catharines. He was 36 and, I surmise, fairly wealthy. At a time when barter was common in rural Canada, he had adequate funds available to pay a regular insurance premium. Melville noted that 6 months previously he had "at-

Courtesy Joseph Caplan

CANADA LIFE ASSURANCE COMPANY.

QUESTIONS

Submitted to Dr. *H. Melville* of *Niagara*
 regarding Mr. *Ralph Clement* of *St Catharines*

I.—Are you the Medical attendant of Mr. <i>Ralph Clement</i> and how long have you been so?	<i>I am not.</i>
II.—Are you in the habit of seeing him frequently? Have you seen him lately?	<i>I do see him occasionally — I have not seen him for a fortnight.</i>
III.—What has been the general state of his health? Is it your opinion that he is of good constitution, and that he is now in perfect health, bodily and mentally?	<i>I know nothing of his general state of health. I do not consider him to be of good constitution.</i>
IV.—Are his habits and mode of life regular and temperate? And have they always been so?	<i>I know nothing of these circumstances.</i>
V.—For what diseases (of which it may be necessary that the board should be informed) has he required your professional advice and attendance, and has that attendance been frequent?	<i>I attended him once in consultation with Dr Goodman of St Catharines about six months ago he was then labouring under a laborious type of inflammation of the primary organs.</i>
VI.—Are there evident signs of his having been properly vaccinated?	<i>I do not know this fact.</i>
VII.—Has he been afflicted with gout or rheumatism? If so, in what form, and have the attacks been frequent?	<i>I am not aware of these circumstances.</i>
VIII.—Is he, or has he ever been affected with hernia? If so, in what situation? Does he wear a truss?	<i>I am ignorant of these facts.</i>
IX.—Has he had any fit, or sudden attack of illness, of any kind? Or does he seem to you likely to become the subject of such attacks?	<i>I am not aware that he has had any fit but his conformation is such as to induce me to believe that he is liable to apoplexy.</i>
X.—Do you believe that the brain, and the viscera contained in the chest and abdomen are in a healthy state?	<i>I am unable to judge, not having seen him professionally lately.</i>
XI.—Has he, in your opinion, any hereditary predisposition to any disease; and if so, to what?	<i>I do not know what he has — nor can I form any opinion on the subject.</i>
XII.—Can you state anything respecting the health of his parents or relatives, with which the Directors of this Company should be made acquainted? If so, what?	<i>I know nothing which I feel warranted in stating.</i>
XIII.—In your opinion is he likely to live as long as any other healthy person of his age (being <i>36</i> years)?	<i>I do not think so.</i>
XIV.—Is there any other information respecting his health or habits, not included in the foregoing queries, with which the Directors should be made acquainted?	<i>I am not aware of any.</i>

Dated at *Niagara* this *29th* day of *May* 18*48* P

H. Melville M.D.

tended him once in consultation” when he was “labouring under a bilious type of fever with considerable disturbance of the urinary organs” (possibly an acute pyelonephritis). To obtain a consultation from that distance in early winter would have been expensive. Melville also noted that he saw him occasionally socially, but not as a physician. They were about the same age and probably moved in the same circles.

The 14 questions on the insurance company’s form are a snapshot of the life hazards of the era. It is not surprising to find a question about vaccination at a time when smallpox was rife. The inquiry about hernia reflects an occupational hazard of the heavy physical labour of the time. Oddly, there is no reference to urine, although diabetes mellitus was known. (Perhaps diabetics died too young to take out life insurance.) The remaining enquiries would not be out of place on a modern insurance form, allowing for the rather stilted language. We might grimace, though, at the apparent lack of written patient consent as the insurer requests an account of the applicant’s past and present health, family history, recent illness and use of alcohol. It is also interesting that no specific medical examination is suggested.

Melville’s remarks are written in the clear, flowing hand of the classically educated gentleman of the late 18th century, rather than the spiky semi-legible script that became

common in the later Victorian era. His replies are frank and blunt to the point of tactlessness. He makes it clear that he is not Clement’s regular medical attendant and has seen him only once professionally. He responds “I don’t know” to basically everything. This was probably true, but it is painful to read some of his remarks; from their curtness one wonders if he suspected a degree of chicanery.

My guess is that Clement was not well and suspected it. He did what many people in similar circumstances do today: he asked a medical acquaintance who knew him only slightly to complete a life insurance form. Melville’s reputation was probably good enough that a reasonably favourable report would have been acceptable to the insurers. For whatever reason, Melville did not provide one. We can only wonder what his responses did to Clement’s premiums, or if he was even accepted at all.

This simple document tells a story of a practice that is still fairly familiar to patients and their physicians. Allowing for changing lifestyles and technologies, there has been surprisingly little alteration in this relationship.

Joseph Caplan is a Consultant Psychiatrist located in Toronto, Ont.

Acknowledgements: My thanks to the staff, Department of History of Medicine, University of Toronto, and Mr. Henri Pilon, Archivist, Trinity College, Toronto, for biographical data.