The Dispensaries: Healthcare for the Poor Before the NHS
by Michael Whitfield

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This book describes the history of dispensaries in the provision of healthcare for the poor in Britain from the late 18th century until the formation of the NHS in 1948. It also poses a question: could a return to the dispensary system be the cure to some of the current problems in the NHS?

The author is a retired General Practitioner with an academic background. The book comprises four chapters on the dispensary movement in Bristol where the author is based. There are two chapters on London and regional dispensaries and one covering dispensaries in other countries. Another chapter deals with provident dispensaries. Finally, there is a chapter that asks: “Can we learn anything from the Dispensaries?”

We learn that dispensaries were charitable institutions established by local benefactors. Poor patients were seen at the dispensary provided that they had a letter of recommendation from a subscriber. Considerable variation existed among dispensaries with some having “lying-in” facilities and some treating maternity cases and accidents. They also cared for patients with infectious diseases and young children who were shunned by voluntary hospitals. Vaccination was offered and patients were visited at home if necessary. The system evolved and some provident or fee-based dispensaries developed later. The author acknowledges that there were defects in the dispensary system such as the paternalistic relationship between the subscriber and the patient.

The Dispensaries is a well researched book rich in primary source material that will interest a wide range of readers including those from a primary care background, students of the history of medicine, and social historians with an interest in the 18th, 19th and early 20th centuries. The book achieves in its main aim in describing the historical background of dispensaries and this will inform those interested in the development of organised healthcare in Britain prior to the NHS.

Whitfield does not recommend a return to the dispensary system as a solution to the current problems in the NHS but argues that “dispensary care does point to many ways in which in which the health service could be improved”. He justifies this by advocating a return to locally controlled management and hints at rationing and the introduction of fee paying in certain situations. Readers will have to judge for themselves how far they agree with the author’s conclusions.

Mike Collins
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