
The life and times of Henry Croker Garde (1855-1932)

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Abstract

Henry Croker Garde (1855-1932), medical practitioner engaged robustly in politics (state and local), ran a successful sugar plantation, raced horses, and served at Gallipoli. His words and deeds demonstrate a timelessness in the affairs of men. A century ago, he was railing against inadequacies in our public hospitals, arguing passionately that poverty ought not to be a factor in health care, and strenuously opposed the Labor Party, those who abused the welfare system, closure of schools at weekends, double-taxing of parents wanting to send children to private schools, and permission for criminals to vote at elections. *Plus ça change, plus la même chose!* This biographical summary records the advocacy of a doctor before his time.

Background

Henry Croker Garde was born on 9 February 1855 in Cloyne, County Cork, son of Thomas W. Garde (Church of England rector) and Eliza (née Croker). His forebears were Huguenots displaced from sectarian-torn France before they settled in southern Ireland. For some generations before his birth, the family had been linked with medicine. His grandfather, Abraham Colles (1773-1843), served as Professor of Anatomy and Surgery in Dublin's College of Surgeons from 1804 to 1837. It was Colles who gave his name to the standard treatment of the fracture of the carpal end of the radius. Educated at Dublin's Middleton College and Queen's University, Garde became a Licentiate of the celebrated Apothecaries Hall in Dublin in 1877, the following year graduating as Licentiate of the Royal College of Surgeons and

the Royal College of Physicians in Edinburgh. In 1886, he satisfied requirements for Fellowship of the Royal College of Surgeons (Edinburgh), also gaining a Diploma as Lecturer in Midwifery of the King's College of Physicians (Ireland), along with the Gold Medal awarded for highest marks.

In 1879 the young medico worked his way as a ship's doctor to Queensland's Maryborough (population 10 500), a town which boasted the only hospital between Brisbane and Rockhampton. At the time it was in the hands of Resident Surgeon, Dr J. H. Harricks—thereafter to be a close friend and colleague. Aged but twenty-four, Garde was already richly experienced as a medical practitioner, having served as a ship's doctor on freighters plying to all corners of the globe. At his death in 1932 (aged seventy-seven), his family recalled a special medal struck in his honour by crew-mates for 'saving life at sea'.¹ Details are still shrouded in mystery, but not the tangible evidence of a gift from those who know best 'the lonely sea and the sky'. During the great floods of 1893 Dr Garde received another citation for service to mankind when he flung himself into the floodwaters surging down Maryborough's Sussex Street to save a drowning man. For that he received the Royal Humane Society's Certificate of Merit. Helping his fellow man was simply part of his nature, further exemplified in 1915 when, aged sixty, he enlisted during World War I. With the rank of Major in the Australian Army Medical Corps, he served with distinction in Egypt and Gallipoli, his part in the latter theatre of war being aboard hospital ships. Repatriated with severe shrapnel wounds, he resumed duties at Maryborough Hospital.

Commitment to a healthy hospital system

Garde's years at the Maryborough Hospital best capture his life's work. There he made an enduring mark, locally and nationally, with some of his operations written up in the medical journals.² As recently as 1995, Dr Ronald Wood, Brisbane Ophthalmologist, brought to my

1. *Maryborough Chronicle*, 10 August 1932.

2. Two of these are quoted in detail. Others worthy of note include 'Bullet wound of head—extraction of bullet on sixth day—recovery', *The Australasian Medical Gazette (AMG)* 20 March 1897, p. 122; 'Treatment of bite of brown snake', *AMG*, Nov. 1890, p. 40; 'Notes of a case of hydatids of liver, treated by incision and drainage', *AMG*, 15 Sept. 1893; 'Three cases of depressed fracture of skull', *AMG*, 20 Aug. 1896, pp. 317—18; 'Two amputations of leg at seat of election by Farabeuf's Modification of Sedillot's Operation', *AMG*, 20 February 1897; 'The anti-toxin treatment of diphtheria', *AMG*, 20 July 1895.

attention that one of Garde's turn-of-the-century eye operations had been cited as a valuable cataract case when he himself attended Medical School four decades later.³ Garde took up the position of Resident Surgeon at Maryborough Hospital in 1884, almost immediately demanding an urgent upgrading of surgical procedures within the hospital. That March he advised the Hospital Committee that the hospital instruments were 'wholly insufficient'—at a time when surgery was in its infancy. 'There is a plethora of knives and saws and other ominous weapons', he told them bluntly, 'but the variety of instruments is nevertheless confined'.⁴ The same bluntness characterised his sojourn in Parliament as Member for Maryborough from 1902 to 1904.

When Maryborough won a new hospital in 1887, Garde was reappointed Resident Surgeon on a salary of £300 a year. Within months his salary was boosted by 50 per cent to £450. The authorities never had occasion to regret their decision since through his achievements the reputation of this rural hospital spread throughout the state. Locally, a number of citizens confirmed the wisdom of his appointment with huge monetary gifts to the hospital to further his work. Under him, the Maryborough Hospital became the equal of its counterparts anywhere in the Colony, including Brisbane. The point was reinforced by Dr Garde himself twelve years after his appointment. Patient care was his only concern, as an 'off-the-cuff' report in the local paper explained in 1896. He had striven to make Maryborough Hospital the equal of the best hospital in the land, and the hospital had been 'running very smoothly' during the last three years in particular. 'Of course it was impossible to please everybody, and occasionally they met with a few cantankerous patients, but they were very few and far between'. He observed:

The work . . . he liked, and he endeavoured to perform to the best of his ability. He did not think there was any necessity of late for patients to leave the town or district to have operations performed, as the institution would compare favourably with other institutions in the colony. They took everything that came. Nothing was turned away.⁵

3. See R. F. J. Wood, 'Ophthalmology in Colonial Queensland', *Australian Journal of Ophthalmology*, 1982, 10, 141—5.

4. *Maryborough Chronicle*, 19 March 1884.

5. *Ibid.*, 21 July 1896.

It was a statement of fact, not a boast, but his very words highlight concerns voiced in today's Australia where proper medical care is not available.

The Hippocratic Oath

Undoubtedly possessed of the identical human frailty of other men, Henry Croker Garde led a life of service in keeping with his Hippocratic Oath. Nowhere was that more evident than at the funeral of his friend and colleague, Dr J. H. Harricks, who died in 1896. 'In losing him, I have lost a colleague who would scorn to do an unprofessional act', said Garde, 'and who always strove to act up to the highest traditions of the medical profession'.⁶ The words mirror both the man and the public image, then and now, of the noble profession in which he laboured.

His medical achievements

In July 1894 Garde read a paper entitled 'Case of absorption of fibroid tumour of uterus after abdominal section'.⁷ It concerned his Maryborough patient (Mrs J. S.)—married four years, pregnant four months—who sought his advice about 'an enlargement above the brim of the pelvis, mostly in the left hypogastric region'. Garde found a hard tumour, fairly movable, which he advised her to leave untreated. Ten days later she had a severe haemorrhage during which she miscarried, discharging the fetus but retaining the tumour intact. Garde's internal examination revealed it to be a mass 'about the size of a fetal head full term'. Mrs J. S. 'soon got about again but was determined on having an operation performed with a view to removing the tumour'. Accordingly, on 18 November 1892, Garde operated, making an incision about five inches long in the mesial line to expose the tumour, but upon encountering difficulty in removing it from the pelvis, he seized it with a large, sharp-toothed forceps and drew it forward to make a manual examination. Finding it firmly wedded to the uterus, he followed what he deemed the prudent course by replacing it in the uterus despite the strong temptation 'to complete an operation when once begun'. Within three weeks (on 17 December) the tumour had shrunk, and by the end of December had almost gone. By 17 January 1893, no trace remained at all. Within eighteen months

6. *Ibid.*, 20 July 1896.

7. *AMG*, 15 September 1894, pp. 296—7.

Mrs J. S. appeared to have regained good health. To ascertain an explanation of her recovery, Dr Garde confronted his medical colleagues through the journal: 'Could it be due to the fact of her having the miscarriage two months before operation, and the progress of involution of the uterus going on to absorb the fibroid?' he asked.

Could the abdominal section have an any decided effect on it, as one sees in cases of tubercular peritonitis, or could the grasping of the tumour with the sharp-pointed forceps, along with the manipulation it received when exposed, account in any way for the absorption or atrophy, or at any rate, disappearance of it?⁸

Then, as now, there is a scholarly exchange of information. Little has changed except the swifter access to such data through the Internet. In this case, Garde had pored over some thirty-seven cases in the *Transactions of the Obstetrical Society of London*, yet holding grave doubts as to the accuracy of some of the diagnoses.

Another of his operations—to remove a massive abdominal tumour—was written up in the *Australasian Medical Journal* on 20 October 1898. Four months earlier Garde had operated on a thirty-seven-year-old patient experiencing unbearable pain:

An incision from the ribs to the pubes, a little to the left of the median line, was first made, but as it was found impossible to get the spleen through the opening, one was made at right angles extending back to the lumbar region; the hilum was found to be short and flattened in the antero-posterior direction, so some trouble was experienced in placing large pressure forceps in position, and applying the ligatures which were of strong silk. The hilum was next cut close to the spleen, and the lower portion of it drawn through the opening. Adhesions . . . were found. . . there was not much oozing from the broken down adhesions; one of the arteries in the pedicle bled freely but was secured and ligatured; the abdomen was next washed out with a weak saline solution, about three parts of which was allowed to remain, and the abdominal wound closed.

The tumour, almost fourteen inches long and eighteen inches in circumference, weighed almost eight pounds. What of the patient? In Dr Garde's words: 'The operation was performed at 10 a.m., and he died at 11.30 p. m. of shock'.⁹

8. *Ibid.*, p. 297.

9. *Ibid.*, 20 October 1898, p. 434.

Unresolved dilemmas

Below are five problem areas identified by Garde in his day, all unresolved a century later. There are still periodic eruptions of 'new-State-itis' inspired by a perception of cavalier treatment from the 'big end of town'. There are still regular outbursts of criticism of unmarried mothers and those who abuse the welfare system. There remain major health policy differences between conservative parties and Labor. And State Aid to schools and our fundamental philosophy of prisons (rehabilitative or punitive?) have not been resolved. *The more things change . . .*

1. **Does Brisbane receive more than its share of rates and taxes vis-a-vis the rest of Queensland?** 'At this moment, at Maryborough, ships cannot get up or down the river at low tide for want of dredging—a work of much more importance than building a number of shops at the southern end of the Victoria Bridge'.¹⁰
2. **Should poor, unmarried mothers be admitted to maternity hospitals for second and subsequent children?** 'The Lady Musgrave Lying-In Hospital has obtained money from the public by misrepresentation, and seeing that it received endowment from the Government, the poor should be the very first to be recognised. One purpose for which the hospital was used was for taking single girls in confinement, thereby preventing the tendency to infanticide. It suited that purpose admirably. After a while, married cases were taken, and it proved a very admirable institution, and continued to do so until within a couple of years. Owing, however, to the inquisitorial examination to which girls were subjected when they entered the institution, that class of patients has disappeared altogether . . . the number of illegitimate births has not decreased . . . The hospital should be kept to its legitimate purpose as a lying-in hospital. The rule that unmarried mothers cannot be admitted more than once should be expunged, and such patients should be maintained. What is the government for if not for the maintenance of poor patients? The rich can look after

10. *Queensland Parliamentary Debates*, 16 October 1902, p. 871.

11. *Ibid.* 22 October 1902, p. 919.

themselves.¹¹

3. **Dr Garde was an independent Member of Parliament opposed to rigid party constraints, and especially the ideological planks of the Labour Party.** 'We have nothing to hope for from the Labour party. I wish to leave no person under the impression for one moment that I agree with the Labour side in the slightest. . . The Labour Party have always been crying out about cutting down salaries, especially the big salaries, but when it comes to cutting their own salaries, they voted against that—every one of them to a man. . . I would do away with the payment of members . . . I am not tied to Trades Hall'.¹²
4. **Should the valuable infrastructure of the state school system be thrown open to public usage at weekends? And should parents who choose to send their children to private schools be doubly-taxed?** 'There is no school on Saturdays, that that six days' work has to be done in five, and the children are sacrificed for the sake of teachers in order that they might get two holidays a week. School should finish at 3 p.m. There are too many holidays. While parents pay for twelve months education for their children, they get only eight months . . . A very large section of the public, for reasons of their own, do not send their children to state schools, and the consequence is that they are double-banked. They have to pay pro-rata for the education of other people's children as well as the education of their own'.¹³
5. **Should criminals be able to retain the vote, even in gaol?** 'If prisoners and the Dunwich inmates are to have a vote, I shall be absolved from my promise and vote against it. What is it that this Franchise Bill proposes to do? It proposes to put all men on an equality. Of course men are born equal, but to say that one man is as good as another is the most nonsensical theory that was ever propounded. It is proposed to put the man who does not want to work, and the man who won't work, on a level with the hard-working, honest man who earns his living and brings up his family respectably. Such a thing is contrary to reason. It gives a working man a

12. *Ibid.*, 29 July 1903, p. 108.

13. *Ibid.*, 30 October 1903, p. 985.

lot of trouble, under this Government, to be honest and frugal and thrifty. If he is frugal and thrifty, a puts by a little to keep him out of Dunwich in old age, he is taxed for it. And the more thrifty he is, the more he is taxed. Is that the way to encourage thrift? I say decidedly not. And the worst of it is that these hard-working and thrifty men are taxed to keep the loafers of the State, and unfortunately the loafers of the State are a very considerable number'.¹⁴

Conclusion

Dr Henry Croker Garde epitomises in many ways exemplary citizenship. He gave to medicine in goodly measure, but still found time for other deeds outside medicine that abundantly show an honourable man wanting to help his fellow men. His medical achievements merit special attention as significant contributions to his calling, but his whole life amply demonstrates service to mankind, even his words articulating deeply-held convictions. Not everyone agreed with them at the turn of the century. Not everyone accepts his views without demur today. But the point is that they make good sense then and to many people, they still make enormous good sense. Some important things in the affairs of men never change.

Stafford Heights
Queensland

14. *Ibid.*, 26 May 1904, p. 122.