

*The New York World*  
December 2, 1888

*Visiting the Dispensaries*

*Nellie Bly Narrowly Escapes Having Her Tonsils Removed*

*Treated as a Charity Patient in the Throat, Skin and Ear Infirmaries*

*She Joins the Throng of Poor Invalids and Finds Out How Free Medical Aid is Dispensed—One Brusque Old Doctor Probes Her Throat and Nose and Wants to Perform an Operation—A Young Physician Tells Her Never to Wash Her Face with Soap—The Druggists' Big Profits—What she Saw and Heard*

I started out the other day to investigate some of the New York dispensaries and see for myself how the poor girls fare who are really sick and have to seek charity. Naturally I concluded before I started that only the very poor were the recipients of free medical aid, so I spent some time over my make-up. When it was completed I flattered myself that I looked as poor as any of them.

My first visit was to the Metropolitan Throat Hospital, 351 West Thirty-fourth street. As I read the words, "open the door," on a big silver plate, and was obeying the order, I heard the most heartrending cries from an inside room. I stood holding the door for a moment and heard again those dreadful cries of pain:

"Ow! Ow! Doctor! Ow!"

My bangs curled at these sounds, yet I stretched my ear-drums lest I should miss one.

"I won't hurt you. I won't hurt you, my good woman. Keep perfectly still one moment," came the answer in a sharp, metallic voice. Then in lecture style, slow, with many impressive pauses, it continued:

"This, causes the tonsils, to turn, outward, and, so allows, a—a better view, of the—of the throat."

"O-w!!" a prolonged cry.

"Don't move; I am doing that on purpose." Then resuming the discourse: "You see, in this way"—

"Ow! My! Doctor!"

"Keep still. I am only spraying your throat." A strong whistling sound like a stage storm, then the lecture goes on. "The object, is, to make them, wear away, gradually, not to, make them burst, as was, formerly the practice. By this method, they come away, in white, or opaque chunks. It is as well"—

By this time I had come to the conclusion that some poor girl had called to have her throat attended to and had been taken into the operating room as an illustration for a lecture closing the door, I entered and quiet set down beside a woman who occupied one end of a long

bench in the hall. She was better clad than I, which made me feel quakish on my ability to “make up” appropriately, A woman with a very small waist and extra large shoulders came out of the first room and looked me over.

“Do you wish to see the doctor?” she asked.

“Yes,” I replied, curtly.

“throat?”

“Yes.”

“Come in here,” she said, leading the way into the room she had just left. It was a small, uncarpeted hall room, with long benches on one end. The front end, cut off with an iron fence, held a desk and a small apothecary shop. Over the mantel was a black table inscribed in commemoration of John D. Jones, esquire’s gift of the building in 1886. Below it sat a small box, whose plain face bore the words: “Charity Fund for the Hospital.”

“What is your name?” asked the girl behind the railing.

### THE PRELIMINARY EXAMINATION

“Norah Simpson,” I replied modestly, as she dipped her pen in the ink preparatory to recording my answers.

“Where were you born?”

“Rhinebeck.”

“New York State?”

“Yes.”

“Where do you live?”

“At 110 West Twenty-fifth street.”

“Married or single?”

“Single.”

“Present occupation.”

“Making scarfs.”

“Ever been here before?”

“No.”

All these questions were printed in a small book in which she wrote my answers. Then marking my copy “9,585,” she gave it to me with this card, one side of which was printed in German.

METROPOLITAN THROAT HOSPITAL  
831 West Thirty-fourth street.

Dr. CLINTON WAGNER’s patient  
NORA SIMPSON                      No. 9,585  
Will attend on  
MONDAY AND TUESDAY, at 2 o’clock

Medical staff:  
Clinton Wagner, M.D., 34 West Fifty-first street.  
William J. Swift, M.D., 40 East Thirtieth street.  
G. B. Hope, M.D., 34 West Fifth-first street.

Clinical Assistant:  
J.D. Aspinwall, M.D.    J.H. Billings, M.D.  
Medical Superintendent, Clinton Wagner, M.D.

“Sit out in the hall, and when the doctor is ready for you I will tell you,” she said.

“They have had her in there for an hour,” whispered the woman beside me on the bench. “They’re experimenting on her so as to teach a young doctor. I wish the old doctor won’t go away afore my turn. I hate young doctors to learn on me.”

I echoed her sentiments.

“What is wrong with the woman?” I asked, her “ouches!” occasionally punctuating our conversation.

“She thinks she has cancer,” she whispered. “It’s all down here,” indicating the middle of the collarbone, “and it’s hard to get at. She suffers awful with it. Hear how bad they have made her voice. It wasn’t so husky at first.”

“How are the doctors, kind?” I asked.

“Oh, yes, they’re kind enough. Then it doesn’t cost anything unless you let ’em know your man gets good wages; then they’d want ter visit your house an’ be paid.”

More patients were coming. First came a young man, who I should judge from his clothing was in comfortable circumstances. Then a young woman came whose gown was so neat that I thought she had mistaken the place; but no, she sat down on the bench opposite. Two more young men, likewise well clad, joined the group. I was the poorest dressed in the hall.

A bell tapped twice and the young woman came from the room to say that the doctor wished to see the new patient first. It was I.

### A HORRIBLE SITUATION

Stepping suddenly into the room from the dark hall made the brilliancy of the gas and reflectors dazzle me. Only for an instant, though; then I saw a doctor sitting at one side of the table motion to me. I sat down facing him and glanced about. The walls were covered with pictures of the throat in all conditions. The table was strewn with all sorts of gleaming instruments. Large reflectors made an unusual brilliancy. On the opposite side of the table, trying to make a young man open his mouth wider than nature had most liberally made it, was another doctor. Standing near by, intently watching every move, was a bald-headed pupil. Both of the doctors had glass reflectors bound over their right eyes. It looked so much like an engine headlight in a snow-storm that when it was turned on me I had a lively impulse to laugh.

“What is wrong?” he asked, curtly, taking my book and glancing through it.

“My throat,” I replied, with ebbing spirits.

“Let me see,” he said, taking a small instrument out of a finger bowl. “Open your mouth wide.”

I opened it. I did not want to, but I knew I was in for it. He caught my chin firmly and ran the instrument down my throat. Just then the horrible thought came that with the same thing he had looked into the other woman’s throat. And she had cancer! Ugh!

“What’s wrong? What’s wrong?” he asked sharply as I involuntarily jerked away and held my breath to prevent my disgust from materializing.

“I’m sick, that’s all,” I replied, faintly.

“Well, if you’re going to pull away in that manner I can’t do anything for you. Open again. Now saw ah—ah.”

“Ug—ng,” I grunted, he meanwhile holding my tongue down.

“Ee—ee,” he commanded.

“Iok—e--! I’em thiek,” I pleaded.

“Very well. I want you to be,” unfeelingly. “If you get sick it won’t hurt you. I am making you that way on purpose.”

The thing goes away down my throat again. My stomach rocks most frightfully. I know it is useless to beg off. I have half an inclination to laugh and half to box the doctor’s ears.

“That tonsil needs a piece cut off,” he said, dropping the probing instrument and taking up another whose bright gleam gave me a chill.

I’ll do a great deal, I think pathologically, to get a story, but I won’t give up half a tonsil. But how to get away? I can’t run for the door, and if I object to giving up all claim to a useless tonsil, he will discover that I am not a bona fide patient.

I look at him in fear and alarm. He takes up a piece of linen. He throws his headlight into my eyes. I am blinded! With a quick movement he catches my tongue and wraps the linen tightly around it. I am by force speechless! Mercy, mercy, will he cut a tonsil out and not allow me a word of explanation?

Many warnings, which my acquaintances have hurled at me, time after time, about some day getting caught in my own trap flash like a specter before me. It’s an agonizing thing to be able to think and not to speak in moments like these. Upon disagreeable realizations one always thinks of unpleasant things, instead of comedies, the latest jokes and the last minstrel show. I couldn’t keep my mind off the doctor and the silver knife, try as I would.

He turns, still holding my tongue—more than I can do myself. I see again; he reaches for the dreaded instrument. I wildly catch his hands with both mind and pull my tongue free.

“I won’t be cut,” I cried. “I am too nervous, don’t you know. I—I will come again when—when my nerves are better.”

“That’s all foolishness,” he answered, shortly. “You must not give way to your nerves.”

“But, somehow, I do lately,” I pleaded, eagerly. “I am run down. My nerves are very bad today. I will come again.”

“That’s very foolish” (rubbing the knife). “They are no worse today than they will be any day.”

“Oh, but I sat out there and heard that woman yell, and that has shattered me,” I explained.

“I did not hurt that woman. Let me make one more examination.” He took a piece of cotton, and wrapping it around a probe, dipped the end into a bottle of dark fluid. He held my head back and ran this up my nose until I could almost feel it touch my brain. It left a burning sensation in my nose and throat, and as he removed it I half choked.

“Spit it out, spit it out,” he said. Too late!

“It’s gone down,” I gasped meekly.

“I can’t do anything for you if you are going to act this way.” Then writing something in the book, he told me to leave it where I got it, and so I left.

## TRYING THE HOSPITAL

My mood was anything but cheerful the next day when I started out on my second visit. I had started it and I would persevere. I decided this time to complain of my ear. I had no idea as to the manner of treating such cases, but I felt confident that they could not attempt to amputate an ear. Anything but cutting for me. This visit was to the West side German Dispensary, 411 West Thirty-eighth street. It occupies the parlor floor in a small brick building with a high stoop. No one ever heeds the bell, so tiring out at last I open the door and walk into the uncarpeted hall, back to a half open glass door. In this room, waiting on the bare benches, are some half dozen men and women. One corner held a little drug store, and near it a conspicuous sign gave forth this warning:

“None but the poor treated here.”

A man in a wet, worn suit sat shivering on a bench. I sat down between him and a woman who had herself and her baby wrapped in one shawl.

“Is the doctor engaged, do you know?” I asked the woman. She had one knee crossed over the other. When I addressed her she set the under goot into a soothing movement, for the benefit of her babe.

“Yah, him mit a sick voman.”

“Has he been in there long?”

“Yah, mit some time already.”

“Is your baby sick?”

“Yah, him vas sick mit him’s ears.”

“Oh, how sad!” I reply sympathetically. Then, with a harrowing remembrance of my throat experience, I ask cautiously, “How does the doctor treat your baby?”

“Dreat him? Vas es dot—doctor him? Yah, yah! Him dakes mine Yocob and runs him drough mit his nose to his ear. Mine Yocob schreams so loud as never vas, und den all der dimes mine doctor he runs it mit mine Yocob’s ear again some more. Mine gracious! I shust tink der nefer vas notings so bad.”

“Do you mean that he probes through the nose to the ear?” I asked in horrified accents.

“Yah, yah! Dot es it.”

No. I did not stay to be probed. I got up and quietly made my way to the door. My breath came with more regularity when I was outside and my heart resumed a more dignified pace.

Over a half million people every year receive free treatment in the New York dispensaries and hospitals. It may be well to state here that dispensaries are maintained by charity. Many bequests are made by private people, and some of the dispensaries have been richly endowed. They are intended only for the use of the worthy poor, but many times are they imposed upon by people well able to pay. For this very reason some of the medical journals have protested against there being so many dispensaries. They claim that treating people who are able to pay robs young physicians. Then again, wrong can be done by a physician opening a dispensary and working it for an advertisement, at the same time charging a small fee “because he does not want to be blamed for taking patients away from his opponents.” A ten-cent fee will make a dispensary pay very well. I don’t think there is any law to prevent a doctor from opening a dispensary if he chooses, and the chances for abusing it are great.

I have understood that probably one or two dispensaries pay their physicians. The majority do not. Young physicians, while waiting their practice to grow to a supporting point, are glad of the chance to gain experience. Dispensaries are especially beneficial to young physicians who wish to make a specialty of any disease, so while benefiting the poor gratuitously they do the same for young physicians.

The Northwestern Dispensary, corner of Thirty-sixth street and Ninth avenue, was the next one I visited. Although the rain was coming down in torrents I found people going there as they go to church—in squads. I followed in their wake, up bare stairs, through empty, deserted looking halls, to a dark inside room. The only windows in it were shut off by the drug department.

### IN THE CROWD OF CHARITY PATIENTS

This dark room was filled with benches. Each bench held from two to half a dozen specimens of humanity with all sorts of aches and ills. I quietly slipped into the last bench so as to command a view of the room. A pale, sad-faced woman, with silver-gray hair sat beside me. On her knee she held a baby whose misproportioned head, half covered with a gray wool hood, reminded me of photographs I have seen of an 8-1/2 head on a six months' old baby. The case of "big head" did not seem to interfere with the child. He beat a tattoo with his woolen hells on his mother's knee, meanwhile tugging away, with dirty fists and mouth, at something tied up in a linen cloth which had once been white.

On towards the front were women in shabby gowns, many nursing babies, others holding little tots by their sides. They were some few young girls who made an attempt at display in their apparel. Tottering, white-haired men, strong young workmen with bandaged arms or heads, sad little boys with large bottles were waiting. Everything was as quiet and orderly as in a church. Sometimes one woman would gossip in low tones with another. Then a mother would whisper, "Sh, sh," to her fretful babe. Then a new patient would quickly enter and take a place among us. A continual stream kept going with bottles and boxes in their hands to the drug window. An iron rail prevented crowding. They would hand in their prescriptions and bottle or box, as the case called for, and when it was returned moved more quietly out.

At last a man came into the room in a quiet, jerky way and took a stand near a hall door. "Those to see the doctors come this way," he called, and an assistant helped get me in line.

"What is wrong with you?" he asked the first.

"An aching in my joints," replied the old man in a quavering voice.

"That room," pointing somewhere out in the hall. Then to the next, "What is wrong with you?" and so on down the line until it came my turn.

"What is wrong with you?" he inquired.

"My skin is rough," I replied.

"Breaking out?"

"Yes, a little," I answered, stretching the truth a trifle to fit the occasion.

"Room two. Next—What is wrong with you?"

I went into the room indicated. Two old men were waiting there. One sat in a corner in a drooping, despondent way; the other, in the opposite corner, leaned back with a rakish air as if the world pleased him well. He was old, but roguish. I was conscious that he was trying to catch my eye. At last when he did so, he gave a little smile. I was surprised at his audacity and looked again, thinking my sight deceived me. No, he smiled again, and I kept my eyes fixed on the blank wall thereafter.

A good deal after the right hour a young doctor came bustling in.

"First," he called, entering a small room at the end. One of the old men went in.

"Have you been here before?"

“Yes, sir,” I heard the old man reply.  
“Where’s your card?”  
“Sir?”  
“Where is your card? You must bring your card if you want to be treated.”  
“I forgot it, sir. I will bring it the next time, sir. My leg, sir, is much worse.”  
“Have you received regular treatment?”  
“No, sir; I ’aven’t been ’ere more’n a month.”  
“You will never get well if you do not come regularly. Get this prescription filled and apply the salve every night. Good day. Next.”

### NEVER WASH YOUR FACE WITH SOAP

The third time he said “Next,” I went in. I found the room as bare as the others. Two chairs, one table and a wooden box filled with sawdust, for the use of wood inebriates.

“Have you ever been here before?” the doctor asked, and when I answered in the negative he asked my name, address and occupation, all of which he wrote in a large book on the table before him.

“What ails you?”

“My face gets rough when I wash,” I replied.

“Do you use soap?”

“Yes.”

“Well, no young lady can have a good complexion and use soap. It ruins the skin.”

“But how will I keep clean?”

“Bathe your face in hot water and rub with a coarse towel. I keep clean and I have not used soap for eight years. Take this prescription,” handing me one, “have it filled—you must bring your own box for it, you know—and every night, before retiring, bathe your face in hot water—as hot as you can stand, then rub this salve well into your skin. In a short time you will have a nice complexion. Come back next week, I may have to put you under other treatment. Always bring this card with you.

NORTHWESTERN DISPENSARY

ALWAYS BRING THIS WITH YOU.

Come at 2 o’clock

DISEASES OF THE SKIN.

MONDAY, WEDNESDAY AND FRIDAY

No. 76

Date, Nov. 26

DOCTOR S. J. O’NEIL, 421 E. 86

Keep this clean. Do not roil or break it.

I went to the drug department and handing the man the prescription asked what it would cost.

“Ten cents,” he replied. “Where’s your box?”

“I have none today. I’ll bring it back tomorrow. Do you ever charge any more for other prescriptions?”

“Certainly not. All prescriptions are 10 cents each.”

### HOW THE DRUGGISTS GET RICH

Hoping to gain some estimate of what druggists’ profits are, I decided to have the prescription filled at an independent drug store. Dispensaries fill all prescriptions for 10 cents and yet they are said to clear all expenses by their drug department alone, and make a profit. What becomes of this profit? Whether it returns to the original charity fund I could not learn. This is the prescription I was given:

R.—

Mag. Sulph.....Z

b. Appy

O’NEIL

A druggist near the union of Broadway and Sixth avenue filled it.

“How much, please?” I asked as he handed me the small box.

“Fifty cents,” he said, and I paid it. This makes the druggists’ profit over and above the dispensary profit 40 cents, less the price of a small glass jar not costing more than two or three cents.

I did not wait to be treated at the Demilt Dispensary, corner Second avenue and Twenty-third street. It is one of the oldest in the city and is kept in splendid running order. In disguise I visited several more, among them Bellevue Hospital Dispensary, but found nothing of especial note differing from that which I have already described. In all I found the poor kindly treated, although in many instances the doctor’s manners were quite brusque.

I have come to four conclusions—

First—That New York is the most charitable city in the world.

Second—That charity is daily outraged in numerous cases.

Third—That the poor have a much better chance to improve their conditions than those in moderate circumstances.

Fourth—That too much and ill-directed charity breeds pauperism.