At the time of the opening of Barrington’s Hospital in 1831, conditions were far different from what they are today. Among the numerous disadvantages the citizens laboured under at that time was the complete absence of flush toilets and water on tap. This situation would have been bad enough if the water had been clean, but in many cases it was unfit for human consumption. There was a long-standing belief – which persists even today – that spring water was always pure. The water that came up in the wells and pumps of Limerick was only what went down through the filthy lanes and streets; some of these streets were cobbled, but the majority had only earthen surfaces. Almost all of these thoroughfares had channels, or, to be more precise, open sewers, running down their centres. In wintry conditions, the earthen surfaces were churned into a gooey mess of pig-manure and household slops. This frightful substance was usually dehydrated in the heat of the summer and disseminated through the atmosphere already polluted by the unsavoury odours resulting from complete lack of hygiene in the cramped living conditions.

Thus the water seeping through the city streets and lanes brought with it the contamination which afterwards failed to yield to the filtering influences deep below the surface. This situation was all the more remarkable when one considers that in the mid-1820s an elaborate scheme was launched by the newly formed Water Works Company to erect two large reservoirs at Gallows Green, on the site of the old Cromwell’s Fort; these had a capacity of 600,000 gallons of water, which was pumped from the Shannon at Rhebogue by means of a horse-power steam-engine. Most of the vast quantity of water remained at Gallows Green for many a long day, until the citizens in the old parts of the city (the Irishtown and Englishtown) were drawing water from wells and pumps almost up to the turn of the century.

As late as 1886, there was a serious outbreak of fever in the industrial schools attached to the Good Shepherd Convent. The report of the analyst who examined samples of water drawn from the two pumps in the institution’s grounds affirmed that ‘The water received on the 31st. of May is excessively hard, and excessively bad. I have never met with so-called potable water that so closely resembles sewage’. Water from other wells and pumps at that time was described as ‘turbid, highly polluted’ and ‘unfit for human consumption’.

Two years later, the water drawn from the pump in the grounds of St. John’s Hospital was also found to be ‘unfit for human consumption’.

by Kevin Hannan

Old Thomond Bridge and King John’s Castle.

Bourke House, Athlunkard Street.
human consumption.

Cholera was rampant in all built-up areas in the country during the eighteenth century; it was more or less taken for granted, and was known by many names, including the one that terrorised everyone – the ‘plague’. The word ‘fever’ softened the cruelty of the affliction. The dread visitation during the 1651 Cromwellian Siege is well chronicled, but for eighty years afterwards there is little mention of the scourge; in fact, it was not until St. John’s Hospital was in a reasonable state of effectiveness that records were kept of the dreadful toll of the disease. The appalling results of the great epidemics of the 1830s and 1840s are well written-up in our local newspapers and in Dr. John Geary’s book, A Medical Report of the Nature and Progress of Fever in this District.

Curiously, Dr. Geary placed little stress on the menace of the unclean water supply which was used for all domestic purposes and which was afterwards proved to have been the main source of the contagion. He seemed to have been imbued with the conviction that the very poor living conditions was the primary cause and only source of infection and spread of the fever: ‘In the lanes and alleys where the poor mainly reside fever in general assumes its most formidable and virulent appearance. Why not? Here we see in some places windows closed, in others the hearths shut up, and mostly in all not a change of beds or bedding for months – the father, the mother, and perhaps three, not unusually four, of their unhappy offspring lying on the same bed; and to see the almost total deprivation of wholesome and nutritious food. I recollect having last year in company with Mr. Baylee visited an infected house at the Island; we were shown into a garret no more than nine feet square, lighted by a pane or two of glass, without any ventilation whatsoever; here eleven persons of all ages and sexes were promiscuously bundled together in virulent fever; they were poor and penniless, with naught but water as their drink – what a melancholy picture! Yet it is true. Hear it ye great ones, and shudder at the thought.

From the foregoing, we can see that Dr. John Geary was a very brave man. Some years previously, in 1796, his learned colleague, Dr. Samuel Crumpe, died at the age of 29 from cholera contracted while treating a patient. Indeed, there were many heroic victims of the disease who might have remained immune if it were not for their great charity in risking their own lives to help others.

Though the bad living conditions accelerated the spread and virulence of the fever, those in good living conditions also fell victims in great numbers; the lethal water supply was shared by all. The death notice columns of the Limerick Chronicle for the 1830s and 40s contain the names of hundreds of the professional and commercial classes. These were the worst years. During that time, there was an average of 15 funerals a day from St. John’s Hospital – and from Barrington’s during part of 1832/33 – to Killaloe cemetery, near Garryowen, and as many more to St. Michael’s and Killeely graveyards. There was an ambulance service even in those trying times, though there were no flashing blue lights or blaring sirens; only the clippety-clop of the hurrying feet of the two attendants who carried the cholera cot – the ambulance – which was a simple box, about six and a half feet long, two and a half feet wide and fifteen inches deep. It had handles extended from both ends, and was probably heavy and cumbersome.

The staff at the hospitals worked under appalling difficulties. The accommodation was sorely limited, allowing space in St. John’s, in its early years, for only a few beds, each of which had four patients! Barrington’s, during its period of use as a fever hospital, was better equipped and, fortunately, the staff was augmented by a number of Sisters of Mercy from St. Mary’s Convent. The sisters also helped in St. John’s. The work of these dedicated heroines at that time will never be fully known, though we have a record of the death of Sr. M. Philomena Potter, who contracted the
fever while helping in Barrington's.

A quaint rhymester of the time has left a splendid picture of the nun's work at the hospitals. It was quoted in the informative article on Mother Elizabeth Moore by Sr. Marie-Theresa Courtney, which appeared in the Limerick Leader on 15 October, 1988:

'The hour is one. The day is fine,
Beds packed up since half past nine;
With all their needful laid in state,
On a donkey cart outside the gate;
In order thus to be conveyed,
And on their stretchers neatly made;
In that abode you know full well,
I mean St. Mary's Hospital (Barrington's),
And not alone to that, don't frown,
But one beyond the Englishtown (St. John's).
Eight sisters stand within the hall,
In cloaks and bonnets, shoes on all;
With hearts of zeal and pockets light,
You never before saw such a sight!

Referring to Barrington's, the historian Maurice Lenihan, in his 1866 work, writes:

'The Hospital is capable of containing 120 beds; it has an annual income of £100 from rents of houses in Mary Street, from the city Dispensary, which is accommodated with a portion of the hospital, and from the Mont de Piete, subscriptions from Government, and others, £45 a year; Anne Banker's Bequest £30 a year; the Bequest of the Marquis of Lansdowne, the interest on £3,000: in all about £300 a year.

In seasons of severe epidemic, as at the outbreak of the cholera morbus in 1832, the hospital was of incalculable benefit to the citizens, as it has been in all cases of accidents, whenever immediate relief is demanded by the sufferer'.

During the worst days of the cholera, corpses were piled high in the dead-houses (mortuaries), and the whole atmosphere savoured more of death and despair than life and hope. There is a distinct atmosphere and thus preventing the spread of the disease.

The worst effects of the first great cholera epidemic of 1832/33 were beginning to abate by the spring of 1833, so Barrington's was returned to the governors and became a general hospital once more: but the worst was yet to come.

The Great Famine of 1845 brought an influx of large numbers of famished and starved people in from rural areas and the Union Workhouse housed more than a thousand more than it was designed to take. The hundreds of lodging houses were full and soon the citizens were horrified by another outbreak of cholera. Great bonfires were kept lighting in the streets in the hope of purifying the atmosphere and thus preventing the spread of the disease.

Smaller outbreaks of fever occurred now and again right up to the turn of the century. During the latter half of the nineteenth century, the Limerick Public Health Committee fought a constant battle with the incredible squalor of the old city. The developments in the provision of clean water from the 1860s, the wider distribution of piped water, the establishment of public fountains and an improvement in the sewer and drainage systems saw the tide of battle turn in favour of the Committee and the end of cholera as a plague in Limerick.