

1883

# BIRMINGHAM AND MIDLAND EYE HOSPITAL

CHURCH STREET

1983



It was in October 1823 that the first meeting was held to establish Birmingham an infirmary "for the relief of the poor afflicted with diseases of the eye" Six months later in April 1824 the doors of "The Infirmary for the Cure of Diseases of the Eye" were opened in Cannon Street, Birmingham.

Over the years the work of the infirmary slowly increased and the scope of surgery enlarged - the infirmary desperately needed bigger premises, so after 30 years at Cannon Street, in 1853, a house was bought in Steelhouse Lane which was converted into a 15 bed hospital known as the Birmingham and Midland Eye Institution. However, by as early as 1861 these premises had also become inadequate with the number of patients in one year having reached 3,992; 341 of whom were admitted to wards. The Steelhouse Lane property being offered to the Birmingham and Midland Free Hospital for Sick Children - which had just been established - at a sum of £2,250, the Eye Institution moved in 1862 to property in Temple Row known as Dee's Royal Hotel, which provided room for 50 beds. The building carried a public house licence and the hospital governors grasped the opportunity and spent £400 on the renovation of the public house letting it to a "responsible tenant" at £300 a year. It was at this time that a resolution was passed "That the name of the Institution be altered to the Birmingham and Midland Eye Hospital". This "partnership" of a hospital and an inn lasted for the next 20 years and even after the hospital's removal to its next site, a rent from the lease was still being collected. But by 1866 the number of patients had passed the 10,000 a year mark and once again the building had become too small

In February 1880 a meeting was held to discuss the design for a remodelled hospital in Temple Row. Certain of the architects who were approached to tender for the work replied that it was virtually impossible to build a hospital large enough to accommodate all the facilities required on the land available "unless the buildings were raised to a height which would interfere with the existing rights of light and involve compensation to adjoining owners, and expenses in working the establishment".

Such was the discord over the feasibility of enlarging the hospital to an adequate size on the land available that Mr. E. Chesshire, an Honorary Surgeon at the hospital tendered his resignation on the 12th of August 1881 because he was firmly of the opinion that it was impossible to erect a building on the Temple Row site which would meet the

requirements of the Midland Counties even for a few years to come. In his letter of resignation Mr. Chesshire commented, "I have been favoured with the offer of a donation from a lady friend of the Charity to the Building Fund when the site is fixed upon, the contribution I know would be a munificent one, but I could not conscientiously, advise her to contribute towards a hospital building which I know would be altogether inadequate for the large district throughout which it dispenses its benefits".

However, by December 1881 most outstanding matters concerning the new hospital had been resolved and the final design for the building agreed which included a waiting room to accommodate 200 people, two main wards providing a total of 70 beds, two contagious wards, an operating theatre, nurses rooms and a library.

The new hospital was officially opened on 26th July 1884 by Lady Leigh whose husband Lord Leigh had been president of the hospital. By the end of the first year, 15,772 patients had been seen and 1,201 operations performed at a total cost of £3,213. It was claimed as the finest Eye Hospital in the country and the number of patients from the city and surrounding countryside rapidly increased.

By June 1892 the premises were yet again proving inadequate and so an application was made to acquire property in Edmund Street adjoining the hospital. In November 1895 the new wing was opened by Viscountess Newport providing a children's ward, another male ward and a pathology laboratory. By 1910 adjoining premises in Barwick Street had also been acquired for use as a nurses and domestics home. In 1909 a private ward block had been opened bringing the bed complement to 110 which increased to 114 after various structural alterations in 1926.

During the 1914-18 war the hospital offered the War Office up to 40 beds for the disposal of the military authorities, an allowance of 3/- per day being made by the War Office per bed occupied by military personnel. In October 1914 the hospital authorities stated that they would be willing to treat Belgian refugees suffering from disease or injury to the eye, and two months later a house in Sparkbrook which had been donated to the hospital was loaned for use as a home for the Belgian refugees. After the cessation of hostilities a letter was received from the administration of the 1st Southern General Hospital thanking the governors of the hospital for the great services rendered during the war.

The period between the world wars saw an increase in the services offered; however, due to advances in medicine some of those such as the ophthalmia neonatorum ward and clinic, the ultraviolet ray clinic, and the septic theatre had become obsolete, and the niches filled by departments catering for the needs of a modern eye hospital. In 1936 the gift of Burcot Grange for use as a convalescent home brought up the total number of beds to 146.

In 1982 the hospital dealt with 2,731 in-patients, 50,338 out-patient attendances and 26,132 casualty attendances.

Between the advent of the National Health Service and the present day there has been a marked increase in the number of specialist departments and clinics with the result that the fourth Birmingham Eye Hospital is bursting at the seams.

#### The Birmingham and Midland Eye Hospital 100 years at Church Street

Today the Birmingham and Midland Eye Hospital has 65 beds in use. The Medical Staff comprises of nine consultant ophthalmic surgeons, one consultant pathologist, eight senior registrars, seven registrars, ten senior house officers and twenty one clinical assistants. There are 52 trained nurses, 36 student nurses and 12 auxillary nurses, and more than 150 other staff.

The history and work of various departments and clinics in the hospital are set out below:-

#### PHARMACY

The pharmacy was in existence prior to 1884 although at the time of the move to Church Street the staff consisted of only a single dispenser. By 1983 the number of staff had increased to 11

The department has a very large out-patient work load dealing with approximately 60,000 prescriptions per year.

The manufacturing laboratory prepares non-commercially available eye drops, injections, and solutions, approximately 68,000 units are produced each year.

The service provided is mainly for the district, but eye drops are also sent to other hospitals in the region, and to retail chemists, generating revenue for the hospital.

#### PATHOLOGY

Although a room was set aside for pathological investigations in 1884, the hospital did not have the services of a pathologist until 1913: before that date tests had been performed by the dispenser, and reports issued by the consultant surgeon. It was not until 1926 that Dr. E.W. Assinder was appointed on a part-time basis, from that date the department gradually developed until in 1963 a Regional Consultant Pathologist was appointed. At present the department has a staff of eleven, and comprises of haematology, microbiology, and histology laboratories; the latter providing a regional ophthalmic pathology service, although specimens have been received from as far afield as Australia, India, East Africa and Canada.

#### X-RAY

In 1918 Dr. H. Black was approached to take charge of the X-ray department, with Mr W. Meggeson the dispenser, acting as the radiographer. Today the staff consists of a part-time radiologist, and two radiographic staff [1 being part-time].

The work performed may be divided into three categories: pre-operative screening, investigation of systemic conditions where there is ocular involvement, and casualty work. Specialities of the department include the localisation of intra and extra-ocular foreign bodies, and dacryocystograms. Most patients referred are from the district, but some come from the West Midlands region and some from other regions.

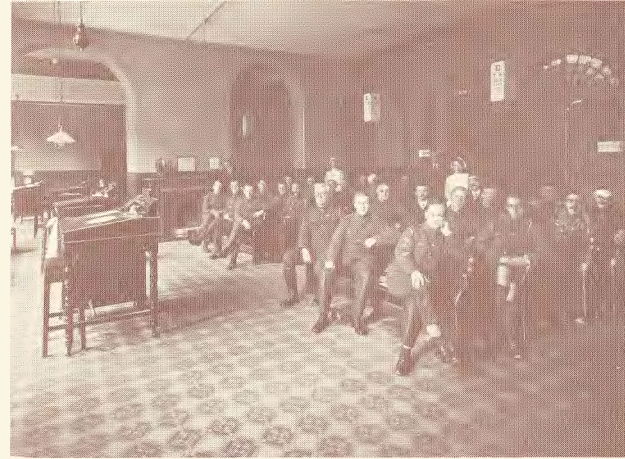
#### ORTHOPTIC DEPARTMENT

The Orthoptic Department was founded in 1932. It has a permanent staff of 16.

The work of the department involves mainly the diagnosis and treatment of patients with defective binocular vision or abnormal eye movements. Much of this work is done with children suffering from different kinds of squints where orthoptic exercises can help the restoration of normal binocular vision.



Consulting Room during  
First World War

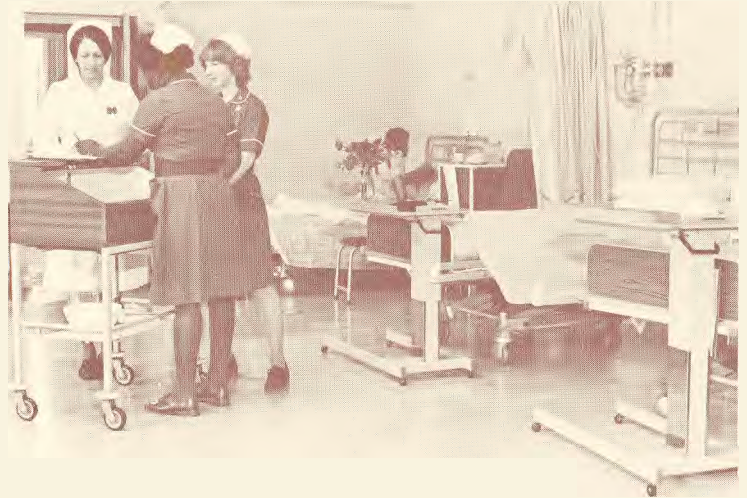


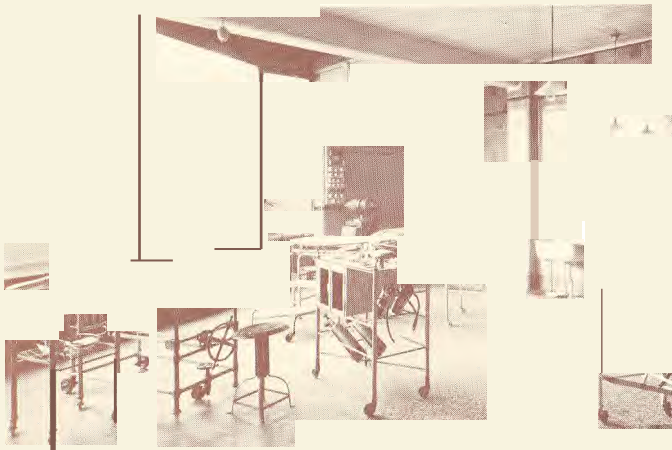
Consulting Room 1983



Male ward  
circa 1930

Female ward  
1983





Operating Theatre  
Circa 1940

Operating Theatre  
1983





Refraction Cubicles  
during the 1930's



In 1982 the department dealt with more than 15,500 attendances of which 1,000 were new cases. Patients are mainly from Birmingham, although there is some regional work.

#### OPTICIAN'S DEPARTMENT

This was established in 1948 and has a present day staff of two full-time opticians, and nine sessional staff. The services may be divided into three categories: 1] Refraction, 2] Contact lens clinic, and 3] Low visual aids which may be sub-divided into optical aids, and electronic aids. The department is one of only five centres in the United Kingdom giving an electronic aids service, e.g. closed circuit television, and works in conjunction with the Manpower Services Commission. The service is inter regional.

#### MIGRAINE CLINIC

In common with the Biochemistry and Retina Departments the Migraine Clinic evolved from the Research Department. Between 1948 and 1949 Dr.K.M. Hay established the department as a separate entity. It is one of only a few provincial clinics and offers a regional service. Treatment involves not only the use of drugs, and diet, but also psychological techniques. A number of innovations have been established by the department and at the present time research is being carried out into the biochemical aspects of migraine.

#### GLAUCOMA

The Glaucoma department was established in 1962. It has four members of staff whose work concerns the detection and investigation of glaucoma. Investigations include visual fields, tonometry, and tonography [with variations of these tests]. The work is partly regional. More than 5,400 old patients and about 500 new patients are seen in a year. The department also runs a survey for the relatives of known glaucoma cases.

#### RETINA

The Retina Department evolved from the Research Department, and was established as a separate entity in 1962. It now has a staff of seven. The function of the department is to carry out clinical electrophysiological diagnostic tests on pre and post-operative cases suffering from a variety of conditions, and on certain genetic conditions: e.g. retinitis pigmentosa. It is also involved in plotting visual fields, carrying out colour vision analysis and dark adaptation.

In 1972 less than 1,000 patients were seen: by 1982 the number had increased to almost 3,500, more than 550 of these having come from outside the Region. This has been partly

due to the advances in technology as a wide range of tests are now available

#### BIOCHEMISTRY

The department evolved from the Research Department established by Dr. Dorothy Campbell in 1944. At present the department has a staff of six. The work involves routine biochemical investigations such as the screening of pre-operative cases, and cases where the underlying cause of the eye condition may be a systemic disease: research into the biochemical changes in patients suffering from migraine: and some specialised tests such as the estimation of Vitamin A and thiocyanate levels in serum specimens, a service which is provided for hospitals in different parts of the country. In 1966 less than 1,000 tests were performed per annum, by 1982 the number of tests carried out had risen to more than 40,000.

#### MEDICAL SOCIAL WORKER

There is one full-time member of staff and one part-time providing counselling services for patients with any kind of visual difficulties. A regional service is provided with liaison with other social workers and other local authorities. There is also liaison with the educational manpower rehabilitation services. A cataract group provides basic information about the condition and its problems: post-operative after care information is provided together with help with mobility. The department attended to 763 referrals in 1983, 175 of whom were from outside Birmingham.

#### FLUORESCEIN ANGIOGRAPHY/LASER

Fluorescein angiography is involved in the diagnosis of a wide range of retinal disorders including those resulting from diabetes, which is now the most common cause of blindness. Laser therapy is used for the treatment of retinal conditions many of which are the result of diabetes. With the help of the laser, diabetic retinopathy can be treated successfully in 70% of cases if the treatment is given early enough.

#### MEDICAL OPHTHALMOLOGY CLINIC

In addition to the diabetic eye service, the Medical Ophthalmology Clinic is responsible for the investigation and treatment of patients with other disorders, such as retinal vessel problems, eye tumours, hereditary eye disease and senile macula degeneration

#### ULTRASONOGRAPHY/ORBITAL CLINIC

Orbital surgery was first performed at the Birmingham and Midland Eye Hospital in 1971. This resulted in the development of the first ultrasonography clinic in the country to offer a fully comprehensive service. The work of this clinic may be sub-divided into two categories: orbital ultrasonography for the detection of orbital lesions; and ocular ultrasonography for the detection of intraocular conditions, e.g. detached retina.

#### PHOTOGRAPHY

There is only one member of staff in this department. The work includes providing a clinical recording and teaching service to the hospital. Clinical recording may be divided into; a] Pre-operative and post-operative cases and b] Diagnostic fluorescein angiography.

#### SUPPORT SERVICES

The Medical, Nursing and Paramedical sectors receive valuable back-up services from Administration/Clerical, Catering, Domestic, Porter and Works Staff. In a small hospital where team work is essential to ensure satisfactory patient care, these staff are trained to be aware of the special problems that relate to diseases of the eye, and close liaison between different sectors of the hospital is encouraged.

#### SPECIAL CLINICS

The hospital now runs the following special clinics:-

- Ultrasonography/Orbital clinic
- Ophthalmic Genetics
- Migraine
- Ocular plastic
- Cornea specialised Ocular Trauma
- Medical Ophthalmology
- Retinal detachment/Vitreotomy
- Neuro-ophthalmology
- Glaucoma
- Ocular Motility



### TEACHING

#### MEDICAL

The Birmingham and Midland Eye Hospital is the only undergraduate training centre for Ophthalmology in Birmingham. Postgraduate training facilities involve all departments. One half day a week a grand round is held followed by a lecture given by the consultant staff of the hospital. Visiting consultants attend regularly. This provides a planned course of higher surgical training and assists junior medical staff to prepare for higher examinations.

#### NURSING

Hospital records show that by the early 1920's a hospital training scheme was in existence with prizes of one guinea and ten shillings and sixpence being awarded to the two best nurses in each intake.

In 1952, Ophthalmic Nursing became a recognised speciality with the setting up of the Ophthalmic Nursing Board for Great Britain and Northern Ireland. The hospital was inspected and approved by the new board as a recognised and Ophthalmic Nurse Training School

At present courses are available for the Ophthalmic Nursing Diploma for Pre-registration and Post Registration Nurses, and the Ophthalmic Proficiency Certificate for Enrolled Nurses. There are four intakes annually and at present 36 students in training.

#### ORTHOPTICS

The Midland Orthoptic School which was founded in 1932 has twenty four students in training, eight students being admitted each year.

In addition to the above, all the specialist departments have some teaching commitments in addition to medical post graduate training. These include "in service" training, Regional schemes and inter-departmental training and teaching of pre-registration graduates.