Dawbeney Turbervile, MD (1612-1696)

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The most Expert, and Successful Oculist that ever was, perhaps that ever will be.
Walter Pope

The year 2012 marks the quatercentenary of the birth of Dawbeney Turbervile, MD (1612-1696), one-time Royalist soldier and later ophthalmologist to England’s Princess Anne,1 the diarist Samuel Pepys,2 the natural philosopher Robert Boyle,3 and the astronomer Walter Pope.1 Turbervile is remarkable for many reasons: He specialized at a time when generalization was prized; though he was a qualified physician, he also practiced the trade of surgery. Furthermore, he provided in his communications with the Royal Society early descriptions of achromatopsia, ocular foreign body removal with a magnet, and tic doloreaux.4 He is a forebear worth remembering.

Born at Wayford in Somerset, England, in 1612, Dawbeney Turbervile was the son of George Turbervile, gentleman, and his wife, whose maiden name was given to their son as a forename.1 At the age of 19 years, Turbervile matriculated at Oriel College, Oxford University, where he was awarded by decree his bachelor of arts in October 1635 and his master of arts in July 1640. His medical career was interrupted by the English Civil War, and it was not until the restoration of the monarchy that he earned his doctor of medicine degree at Oxford University in August 1660.5

Turbervile participated in the English Civil War as a combatant but quit the King’s service after the surrender of Exeter in 1646 to Parliamentary forces, the terms of which allowed for him to relocate to Wayford, where he married Ann Ford; their union was childless.1 It was at Wayford and the neighboring market town of Crookhorn (now known as Crewkerne) that Turbervile set up his first practice. According to the brief biography by Pope, the enterprise was so successful that Turbervile found these towns “not capable to entertain the multitude that resorted to him;”1 thus, he relocated to London. However, the air of England’s capital did not agree with Turbervile’s constitution and because of health concerns, he ultimately settled in Salisbury, where eager patients traveled not only from all over England “but also from Scotland, Ireland, France, and America”1 to seek his help. Although his principal practice remained in Salisbury for more than 30 years, he undertook visits to London for extended periods so as not to deprive “Persons of Quality”1 his expertise.

In 17th-century England, specialist medical practice was the realm of cranks and charlatans while surgery was considered a manual trade in which physicians should not engage. The Oxford-educated Dr Turbervile—who both specialized and performed surgery—clearly did not conform to convention. Pope wrote that it was Turbervile’s mother who prompted his study of the eye, suggesting that it “would turn to good account.”1 This was sage advice because interruption of his career and subsequent late award of this medical degree almost certainly would have made it difficult for him to have achieved distinction as a general physician. Although he was a specialist, Turbervile’s medical interests were not always limited to ophthalmology. For example, in a letter to Boyle dated November 17, 1664, he “includ a description of the monstrose birth I writt of last which is now carry’d to london to bee shewne.”3 While Turbervile was

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ahead of his time in some regards, in others he was very much a product of his times: For example, in his letter to Boyle dated October 6, 1664, he writes of the combination of decoctions, purgatives, snuff, bleeding, and the application of leeches as “the cure of Gutt Serena” (loss of vision without visible signs of disease). Pope also wrote of his fondness for prescribing head shaving and tobacco for all, adding Turbervile’s observation that it often did good and never did harm.¹

Turbervile was distinguished for his professionalism. Pope wrote that “he curd the poor Gratis, and received from others what they pleased to give him.”¹ Furthermore, he was careful to manage the expectations of his patients and avoided offering false hope, even if he might gain financially by doing so. One such occasion is recorded by Pope:² Turbervile was asked to take on a “Great Lord” as a patient, but he believed that the man’s condition was not curable. We are told that after an initial refusal, Turbervile was offered £100 as an incentive, which he refused, saying, “I will joyfully give a hundred Guineas out of my own purse, to the Person who shall restore your Sight in that Eye. I confess I am not able to Cure it, but I can reduce it to a better figure.”¹ As predicted, the “Great Lord” remained blind in this eye for life. Pope wrote that part of Turbervile’s skill as a surgeon was in case selection and careful management: “in knowing when the comatous cataract is fit to be couched, in having a steady hand, and skill to perform the operation, to be able to prevent, or at least remove the pains which usually follow.”¹

In his letters that form the basis of his 2 publications in the Philosophical Transactions of the Royal Society,⁴ Turbervile reported several cases. These case reports are remarkable for their brevity and the reason for this is made clear in both publications: Their purpose was to prompt discussion.⁴ Thus, Turbervile gave us little insight into his own theories regarding the etiology of the conditions he reported. Most notable among his case reports is perhaps the maid from Banbury, who he comments could “see very well but no colour beside Black and White.” We are also told that this 22- or 23-year-old woman had at one stage suffered visual hallucinations: “She had such scintillations by night, (with the appearances of Bulls, Bears, & c.) as terrified her very much.”⁵ It is probable that this same maid was also the subject of an extended and insightful treatise by Boyle,⁶⁄⁷ who elucidates the maid’s preceding history of unspecified illness and temporary loss of vision. Thus, Turbervile and Boyle provided the first case description of acquired cerebral achromatopsia, possibly secondary to encephalitis/ meningoencephalitis.⁵ Turbervile also details a case of a foreign body on the “iris” (it is thought that he actually refers to the corneoscleral limbus),⁸⁄⁹ which proved recalcitrant to removal by a spatula. Not to be deterred, he wrote, “I then applied a Loadstone to it, and immediately it jumped out.” This is one of the first descriptions of the use of a magnet to remove a metallic ocular foreign body, whose only recorded antecedent is the use of a magnet in a similar case by Wilhelm Fabry and his wife.¹¹ Turbervile’s communications published by the Royal Society are also remarkable for his early description of tic doloreaux. Turbervile wrote of a man who had “a long time been troubled with a great pain, and convulsions in his cheek . . . the Convulsions pul’d his Mouth, Face, and Eye aside.” This description precedes that of Fothergill,¹² who is credited with the earliest full description, by almost 90 years. The successful treatment included repeated cupping and application of a plaster.

While he appears to have earned the admiration of some famous patients, Turbervile did not avoid the ire of the diarist Samuel Pepys, who expressed concerns in his diaries about failing eyesight and sought out Turbervile at the prompting of Boyle in June 1668.² The doctor-patient relationship began well, with Pepys commenting positively on their early consultations. Turbervile prescribed drops and pills for what has been conjectured to be multifactorial asthenopia.¹³ Despite Pepys’ initial optimism, this ultimately did little to improve his condition, as is evidenced by the fact that he soon after sought other remedies. His disillusionment is reflected in his diary entry of July 3, 1668, where Pepys makes a snide reference to Turbervile’s fascination with comparative anatomy in a description of a show dissection of ovine and bovine eyes in a public house.² Pepys offers a suggestion for Turbervile’s great interest: That he had not seen such specimens before “or but once.”² The veracity of this claim is questionable because Turbervile makes explicit reference of his intention to experiment on “calves, and sheeps heads all things be-longinge to them” in a letter to Boyle dated October 1664.³

Notwithstanding Pepys’ unsatisfactory experiences, Turbervile gained many admirers including his biographer, Walter Pope, who succeeded Sir Christopher Wren as professor of astronomy at Gresham College, London, and who was forced to retire because of his poor ocular health. We do not know precisely the symptoms of Pope’s recurrent inflammation except that at its worst, his vision was so bad that “with the best (eye) I could not perceive a Letter in a Book, nor my Hand with the other.”¹³ However, Turbervile proved equal to the task of curing this malady twice, though by unrecorded means. In any case, Pope refers to Turbervile as “him, to whom, under God, I owe my Sight, a blessing, in my opinion, equal, if not preferable, to Life itself.”¹ The natural philosopher and father of modern chemistry, Robert Boyle, clearly held Turbervile in high regard, referring to him as “that Ingenious and Experienced Oculist.”⁸ Boyle had been troubled by poor eyesight after a bout of illness in 1654,¹⁴ and he maintained correspondence and a doctor-patient relationship with Turbervile for close to 30 years. Boyle also obtained from Turbervile research subjects,⁹ at least one of whom he included in his study Some Uncommon Observations about Vitiated Sight.¹⁰ The most lofty of Turbervile’s recorded patients was Princess (later Queen) Anne, daughter of the Duke of York, who was a child at the time of consultation. The nature of Anne’s eye disease is unclear, although it is known that she
suffered a “defluxation” of the eyes from infancy. One possible explanation for her excessive lacrimation is nasolacrimal duct obstruction. Thus, the “dangerous inflammation in her Eyes, and breaking out in her face” that Turbervile was called on to treat was possibly secondary dacryocystitis/cellulitis. This condition had exercised and ultimately baffled the court physicians but not Turbervile, who was able to wrought a cure—though it is unclear how. His success earned him the sum of £300 (half of a total of £600 promised to him), the royal family’s gratitude, public notoriety, and the enmity of the court physicians.

Turbervile remained in Salisbury to the end of his days; he outlived his wife and died on April 21, 1696, leaving the majority of his estate to his sister (who carried on his practice) and his niece by marriage. Generous to the end, he left £100 in trust to the parish of Wayford to purchase land to earn a rental income as provision to the poor. He was accorded burial in Salisbury Cathedral, where his epitaph proclaims him “the most Expert, and Successful Oculist that ever was, perhaps that ever will be.”

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