History of Dermatology in Shropshire and Mid-Wales

by Alan B Shrank, October 2009

Prior to the start of the NHS in 1948 it would appear that the management of skin disease must have been in the hands of the highly competent and self-reliant general practitioners, who served the community in Shropshire and Mid-Wales. The nearest hospitals were in Aberystwyth with no dermatology facility and in Birmingham 50 miles away from Shrewsbury, where the Skin Hospital in George Street provided care.

With the advent of the NHS, itinerant dermatologists started to visit the area. Ann Lawton drove the 50 miles from Hereford to run weekly clinics at the Royal Salop Infirmary (RSI), a hospital with the reputation of being the tenth founded hospital in the country and in the centre of the old town. She eventually had the help of two clinical assistants, Wyn Watson resident in Shrewsbury, and John Turpin, a GP in Newtown, some 40 miles from Shrewsbury. Douglas Oakley from Wolverhampton held clinics in cottage hospitals in Wellington, Bridgnorth and Much Wenlock but without any assistants. Bernard Tate, consultant at the Birmingham Skin Hospital, held a regular Saturday morning clinic in Shrewsbury. There were no allocated beds for dermatological care.

By 1967 it was realised the service left much to be desired, and Alan Shrank was appointed resident dermatologist with a nine session part-time contract to serve Shropshire and Mid-Wales with commitments to hold clinics at the RSI and the Wrekin Hospital and to provide services on demand at the renowned Robert Jones & Agnes Hunt Orthopaedic Hospital in Gobowen. Fortunately the two clinical assistants agreed to continue to help in Shrewsbury, so the itinerant dermatologists were no longer required. Dr Shrank negotiated the allocation of up to 12 beds for in-patient care, most of them in single bedded rooms in the Isolation Unit, and two beds in the Wellington Cottage Hospital run by local GPs.

Providing a service as a single-handed consultant has its advantages in that management is simple, but illness causes chaos. Ann Lawton fell ill in 1968 and the Regional Hospital Board couldn't find a locum to replace her in Hereford until she recovered. Since Alan Shrank was 'only part-time', he was persuaded to help out, which meant a 100 mile drive twice weekly to Hereford to hold a morning clinic and an occasional 140 mile drive when an afternoon clinic was also held in Wellington. This lasted for eighteen months until Ann Lawton was fit to return to full-time work.

The facilities provided were inadequate for the modern style of dermatological care for which Alan Shrank had been trained, but with the development of a new out-patient unit at the Wrekin Hospital the opportunity to provide them arose. By designing a unit occupying the space of two standard consulting rooms, it proved possible to provide two consulting rooms, two examination rooms with four changing cubicles in addition to a small operating theatre all on one side of the single storey building. They were used for two days of the week allowing for patch testing to be read at 48 hours, and enabled a clinical assistant to help with the increasing workload that developed with the growth of the new town, initially called Dawley New Town but eventually designated as Telford. The system was designed to permit consultation, examination, investigation and treatment - surgical if necessary - all at the first visit. Travelling distances are considerable in this part of the UK, so solving problems at the first and often the only visit was of great advantage to patients.

The RSI built in 1824 in the town centre was in need of replacement, and the 1978 new hospital in the suburbs provided another opportunity to swap the two consulting rooms provided in 1967 with a suite of rooms and an up-to-date small operating theatre as well as a small study. So it had taken ten years to establish adequate facilities for modern dermatological care in the far west of England. It was later followed in 1984 by the building of a nucleus hospital in the northern part of Telford to meet the demands of the growing population. Because of the traffic system in Shropshire, the Shrewsbury facility served most of Shropshire except for the Telford area and also Mid-Wales on the eastern side of the Cambrian Mountains. The Welsh coastal towns were served by a visitor from Swansea.

The service was supported by excellent nursing and secretarial staff. Word-processing and computer facilities were introduced in 1988 to increase the efficiency of the service. Letters were dictated at the end of each and were always ready for signature at the next clinic two days later. It meant that many patients could be directly referred back to their GP. This reduced the number of follow-up visits and allowed more new patients to be seen at each clinic.

Neverthless the clinical load and the waiting times in Shropshire steadily increased. More clinical assistants were needed and Sandra Hallett and then Marilyn Hammerton joined the team. Each colleague started their apprenticeship with short periods of training at Sheffield and St John's Hospital in London, and eventually their skills were recognised and they attained Medical Assistant status. And then a second dermatologist was needed. When the funding became available Susan Kelly was appointed in 1993 to share the clinical care. She introduced phototherapy for psoriasis and other conditions. When Alan Shrank was due to retire in 1997 no successor was found, so he continued as a locum tenens until 1998. Eventually Stephen Murdoch was appointed in 2000 with an interest in dermatological surgery and laser treatments, but he retired to private practice in 2005.