



**The *Great* Canadian
Catholic Hospital History Project**

Documenting the legacy and contribution of the
Congregations of Religious Women in Canada,
their mission in health care, and the founding and operation of Catholic hospitals.



**Projet de la *Grande* Histoire
des hôpitaux catholiques au Canada**

Retracer l'héritage et la contribution des
congrégations de religieuses au Canada,
leur mission en matière de soins de santé ainsi que la fondation et l'exploitation des hôpitaux catholiques.

**The Frères de la Charité
and the
Louisbourg Hôpital du Roi**

by
A.J.B. Johnston

Source: Canadian Catholic Historical Association
CCHA Historical Studies
#48 (1981)
<http://cchahistory.ca/historical-studies/>

The Frères de la Charité and the Louisbourg Hôpital du Roi

by A.J.B. JOHNSTON
Sydney, Nova Scotia

... un ordre de religieux ... qui se consacre uniquement au service des pauvres malades. Ces religieux ... sont sans contredit les plus respectables de tous ... puisqu'ils sont précieux à la société par leurs services en même temps qu'ils le sont à la religion par leurs exemples.

*Encyclopédie ou Dictionnaire Raisonné ... (1757)*¹

French colonial policy in the sphere of religion was firmly rooted in the belief that there would be no religious communities established overseas except those which were demonstrably useful to society. Contemplative orders were considered an extravagance which both the colonies and the king's treasury could live without. Colbert's remark that "the religious of both sexes ... produce only useless people in this world, and very often devils in the next world" is the best illustration of that utilitarian attitude. Where *religieux* definitely were welcomed was in the broad field of public welfare. Charity to the poor, education of the young and health care for the sick and disabled were some of the areas generally left to the church. To religious communities who met such needs the secular authorities offered "protection..., assistance in the way of open passages, freight allowances, exemptions, special concessions and subsidies."²

Louisbourg, as a populous fishing base, commercial entrepot and garrison town, had obvious requirements in the area of public welfare. Among the most important was the need for suitable hospital care for its resident and transient population. When officials within the Ministry of the Marine addressed themselves to that question during the early years of settlement on Isle Royale they turned to a well-known hospital order, the Frères de la Charité de l'Ordre de Saint-Jean-de-Dieu.

¹ M. DIDEROT et M. D'ALEMBERT, eds., *Encyclopédie, ou Dictionnaire Raisonné des Sciences, Des Arts et des Métiers* (Paris, 1757), Tome VII, p. 301.

² Cornelius J. JAENEN, *The Role of the Church in New France* (Toronto, 1976), p. 95.

The Frères de la Charité were mendicants dedicated to the care of the sick and infirm. Founded in Spain in the mid-16th century by Saint John of God, the order spread through France and Italy in the 17th and 18th centuries. By 1789 there were 355 Frères serving in 39 hospitals in France and its colonies, with a total of about 5,000 beds under their care.³ Each brother took four vows, those of poverty, chastity, obedience and hospitality. Collectively, they were regarded by their contemporaries as conscientious and skilled.⁴ On the basis of that reputation the Frères de la Charité were asked in 1716 to go to Isle Royale to operate the nascent colony's hospitals. The order accepted the responsibility and four brothers, accompanied by four servants, sailed for the island that summer. For several years they were dispersed in different settlements. Then, with the decision in 1719 to make Louisbourg the principal town and stronghold of the Colony, the brothers were all brought together in the capital. Unfortunately, very few of the Frères' Isle Royale records and none of their correspondence has survived. As a result, the story of their years in the colony must of necessity be pieced together from other sources, especially documents prepared by royal officials.⁵

At Louisbourg, the Frères de la Charité were initially in charge of a rudimentary hospital on the north shore of the harbour. When a larger and more sophisticated Hôpital du Roi with 100 beds and its own apothecary, bakery, chapel, kitchen, laundry and morgue was completed in 1730 on a centrally-located town block, the brothers moved in and began to run it.

Day-to-day tasks in the Louisbourg hospital were in the hands of several brothers and their servants, all of whom worked under the direction of their resident superior. Overall administrative responsibility, however, did not lie with the brothers. Since the substantial capital and operating costs of hospitals like the Hôpital du Roi in Louisbourg were paid for out of the royal treasury, the king required that royal officials oversee the facilities to ensure that the state and the patients got the best possible return for the money spent.

³ Joseph-G. GÉLINAS, "Des Oubliés," *La Revue Dominicaine* (1922), pp. 218-29.

⁴ DIDEROT et D'ALEMBERT, eds., *Encyclopédie ...*, Tome VII, p. 301; Louis-Sébastien MERCIER, *Tableau de Paris, Nouvelle Édition* (Amsterdam, 1783), Tome XII, pp. 21-22.

⁵ These documents, numbering in the thousands, are preserved in several archives in France, with the most useful material being in the C11B and B series of the Archives Nationales. There is also information of great interest in the various G series of the Archives d'Outre Mer and in the Archives de la Guerre. Unless otherwise noted, all analysis is based on documents from these archival sources. A complete list of references is available on request from the Archives of the Fortress of Louisbourg, Louisbourg, N.S.

To achieve that end hospital facilities and records were scrutinized by various officials. The particular duties with which the royal officials were charged were outlined in a 1689 ordinance of Louis XIV.⁶

On Isle Royale, principal responsibility for the hospital fell to the commissaire-ordonnateur. Each new appointee to that position received general instructions from the Minister of the Marine directing him to keep the cost and quality of health care at acceptable levels. The single most important thing the commissaire-ordonnateur did to meet that goal was to assign a clerk to the Hôpital du Roi whose duties included verifying the admission and departure of patients and the quality and quantity of medicine used. That position appears to have been filled first in 1731 when Philippe Carrerot was named to the post.⁷

Uncertain as to how well the commissaire-ordonnateur and his staff would carry out their responsibilities, the Minister of the Marine notified the colonial governor that he too must ensure that the hospital was well run. Specifically, he was to conduct periodic inspections of the facility. The Frères de la Charité did not always share the royal officials' perspectives on what constituted adequate health care, so it was probably inevitable that conflicts would develop. The most contentious issues were those which related either to the attitudes and behaviour of the brothers or to the cost of the health care they provided.

The early years of the Frères de la Charité on Isle Royale were characterized by relatively peaceful relations with the royal officials. The few quarrels that arose appear to have been short and not very serious. It was a decade after the establishment of the brothers on the island before the first major criticism was made.

In 1726 Governor Saint-Ovide complained that for quite some time the sick in the north shore hospital had been poorly looked after by the brothers. He claimed that the *religieux* were so preoccupied with treating civilians in town, including giving shaves, that they were neglecting the soldiers, sailors and others in the hospital. Particularly scandalous was the fact that there was frequently no surgeon in the facility. The governor's outrage was brought to a head when a soldier with a broken arm was taken to the hospital and given no care whatsoever. Seventeen hours after the man was admitted his arm had swollen to a size larger than his thigh. The soldier's agony did not end until Governor Saint-Ovide sent one of the staff officers to locate a surgeon to treat

⁶ *Histoire Générale de la Marine*, Tome III (Amsterdam, 1758), "Code Des Armées Navales ...," Ordonnance de 1689, pp. 324-31.

⁷ *Dictionary of Canadian Biography/Dictionnaire Bibliographique du Canada*, Vol. III, p. 98.

the ma's injury. The governor relayed the incident to the Minister of the Marine as an illustration of how the brothers were ignoring their responsibilities. The Comte de Maurepas appears to have been persuaded by the story. He passed on Saint-Ovide's remarks to the provincial of the Frères de la Charité, adding that he expected such neglect to end.

The brothers seem to have taken the minister's advice to heart. Over the next few years there were no further comments about their lack of attention to hospital patients. In 1730 new complaints began, but they related more to the recently finished Hôpital du Roi than to the *religieux*. The strongest criticism came from the acting commandant of Isle Royale, François le Coultre de Bourville. On the basis of reports from military officers who made daily visits to the hospital, Bourville asserted that the facility was barely adequate. Vermin in the building, rotten mattresses, a shortage of sheets, shirts and bed surrounds, wards that were cold due to a lack of firewood and food worse than in the barracks were the most serious problems. Those shortcomings required royal expenditure if they were to be corrected. The only failing for which the brothers were directly responsible was the absence of a competent surgeon in the hospital. The Frère who occupied that position was described as "très peu Capable." Bourville had attempted to have the surgeon-major of the garrison, Jean-Baptiste La Grange, assigned to the hospital but the superior of the brothers refused to allow it. Consequently, the acting commandant asked the Minister of the Marine to order the brothers to send out a trained surgeon the following year. As requested, a *religieux* who was a "très bon Chirurgien" arrived in 1731.

The furnishing and supply situation at the hospital improved during 1731 and 1732. Nonetheless, the brothers were still without hundreds of essential articles. On their behalf the commissaire-ordonnateur submitted a long list of the bedclothes, instruments, tools, utensils and other things which the facility was still without. Gradually, the orders were filled. As the needed supplies came in the tasks of the Frères de la Charité were made that much easier. Concomitantly, the assessments of the brothers' abilities became increasingly favourable.

In 1732 hospital care must have suffered a setback when three of the *religieux* at Louisbourg died,⁸ quite likely victims of the smallpox epidemic which struck the town that year. Replacements were sent out the following year. As of October 1734 there were five brothers and six servants in the hospital, the superior being Felix Camay and the surgeon Boniface Viméux.

⁸ Hermas BASTIEN, *L'Ordre Hospitalier-de Saint-Jean-de-Dieu au Canada* (Montréal, 1947), p. 59.

The only complaint about the Frères de la Charité during the early 1730s was of their tendency to show disrespect and a degree of insubordination towards royal officials in the colony. Such an attitude was considered unacceptable and the minister hoped that the new brothers sent out in 1733 would be “plus tranquilles and plus traitables.” Moreover, he encouraged the commissaire-ordonnateur to exercise, albeit carefully, his authority over the hospital. The combination of more amenable Frères and a more assertive commissaire-ordonnateur seems to have ended, at least temporarily, the brothers’ obstreperous attitude toward the civil authorities.

After a few years of harmonious relations the brothers petitioned the Minister of the Marine for numerous improvements to the Hôpital du Roi. Among the things asked for and granted were rooms for sick officers, additional servants from the pool of salt smugglers (*fauxsauniers*) sent to the colony each year, another grant of meadow land for grazing animals and a new hospital kitchen. The last item was particularly needed since the existing kitchen was below ground level and there were often problems with water leakage and with the fireplace smoking too much. While there were some other requests of the brothers which were turned down, the relative speed with which royal officials agreed to the above items indicated a shared concern for the amelioration of hospital care in Louisbourg. Excluding the wrangles over patient costs during the period (which are discussed below), the late 1730s was a time of generally good relations between the civil authorities and the Frères de la Charité.

The apparent harmony became somewhat strained after François Bigot arrived in 1739 as the new commissaire-ordonnateur. There were several factors at play. To begin with, twice during the 1740s the commissaire-ordonnateur clashed with the superior of the brothers over who, or rather what kind of case should be admitted to the Hôpital du Roi. The first incident occurred in 1740 when Bigot thought that a prisoner who had begun to manifest “marques de la folie” should be placed in the hospital. The superior, Boniface Vimeux, disagreed strongly. The commissaire-ordonnateur ultimately broke the impasse by using his full authority over the facility and forcing admission of the man. The fact that the man suffering from *folie* would be placed in a room with bars on the windows seems to have helped relieve the brothers’ fears about accepting him as a patient.

Although Vimeux bowed to Bigot’s wishes in that particular case he was unwilling to agree that a principle was established whereby he was forced to admit people suffering from mental illnesses. The superior indicated that he would seek a different decision from the authorities in France. François Bigot’s opinion was that the brothers should be obliged to accept such cases. He felt that if a mentally ill patient was “furieux,” as the man in 1740 was not, he could be left alone in a room with hands and feet tied. Indeed, the

commissaire-ordonnateur recommended that two small stone cells be constructed in the tower of the hospital specifically reserved for the mentally ill. The individuals detained in those cells were eventually to be returned to their home parishes. If the Minister of the Marine took a stand on the issue, his views have not been found. Certainly, the stone cells suggested by Bigot were never constructed.

A separate dispute which arose between François Bigot and Boniface Vimeux in the 1740s concerned the admission of patients with venereal diseases. During the early 1730s soldiers in the garrison who had a venereal disease were routinely being sent back to France to receive mercury treatments for their afflictions. The brothers at Louisbourg maintained that they had not been trained to treat such maladies and that they would not accept any cases in the Hôpital du Roi. Undoubtedly the brothers feared that the diseases would spread to other patients and possibly to themselves. Such fears were commonplace at the time so the practice was to keep people with venereal diseases carefully segregated from other patients. An observer in France commented that it was impossible for a human being to be attacked “d’une manière plus hidieuse & plus cruelle”⁹ than to suffer from venereal afflictions. Evidently the Frères de la Charité did not think they could ensure a satisfactory degree of isolation for those cases and hence did not want to admit them. The governor and commissaire-ordonnateur, on the other hand, argued that it would be more convenient as well as cheaper if the brothers would treat the diseases in the Louisbourg hospital. In 1736 the colonial officials apparently reached an agreement with the brothers so that the latter would receive 200 *livres* for each soldier they treated afflicted with venereal disease.

By 1741 the agreement had fallen through and the brothers were protesting that they did not wish to accept people with the afflictions. However, as was the case with the man with *folie*, François Bigot simply overruled the objections and had soldiers suffering from venereal diseases admitted to the hospital. It took almost two years but at last, in 1743, the Frères de la Charité were accustomed to the idea of treating such soldiers, and did so without protest. During the 1750s the approach to the treatment of venereal diseases changed slightly, with the Louisbourg brothers looking after only minor and intermediate cases, while the worst ones were sent back to France.

The admittance of unwanted patients to the hospital was only one of the issues straining relations in the 1740s between the Frères de la Charité and royal officials like François Bigot. Of at least equal importance were the concerted efforts made by the commissaire-ordonnateur during the same period

⁹ MERCIER, *Tableau de Paris*, Tome VIII, pp. 11-14.

to reduce hospital expenditures on patient care. To understand that issue it is necessary to look at the background to the financing of the hospital.

Before the Frères de la Charité came to Isle Royale it was the expressed hope of the Minister of the Marine that most of the operating expenses of a major hospital in the colony would be met through the collection of a tax on the cod fishery. The custom at Plaisance had been for the fishermen and merchants to contribute to the hospital there on the basis of their involvement in the fishery. Their contributions paid for food, supplies, laundry and some staff salaries. The minister assumed that a similar arrangement could be instituted at Louisbourg. In 1715 a tax of a *quintal* (48.95 kilograms) of cod per shallop was imposed on Isle Royale which generated an income of 4,524 *livres*. The sum was considerable but it was obtained in the face of strong opposition from those taxed. Ship captains and fishing proprietors complained that since there was no major hospital near their fishing base at Louisbourg neither they nor their crews were receiving the hospital care for which they were paying. The officials within the Ministry of the Marine agreed and in 1716 the tax was lifted.

Five years later, with construction underway on the major hospital on Block 13, the governor and commissaire-ordonnateur of Isle Royale suggested that the tax could be reimposed without opposition. They believed that the fishing proprietors and ship captains would see the obvious benefits such a facility would confer on the community and willingly contribute. They estimated the tax would bring in about 5,000 *livres* annually. The imperial authorities in France were more than pleased to hear of the change in attitude among the colonists. Accordingly, in 1722 they issued an ordinance re-establishing a tax of a *quintal* of cod per shallop. Initially the proceeds were to help offset the cost of hospital construction; thereafter they were to pay for the building of a parish church and presbytery. Contrary to expectations, the tax was not well-received by those active in the fishing industry. By November 1723 only about 1,500 *livres* had been contributed. As a result the tax was withdrawn for the second and final time.

The failure to impose any kind of hospital support tax meant that virtually every cost associated with the treatment of the sick and injured had to be met with funds from the royal treasury. The dependence on royal grants was in sharp contrast to the situation at a hospital like the Hôtel-Dieu in Montreal, where only nine per cent of its revenue came from the king.¹⁰ At the Louisbourg hospital, the king paid for the construction of the massive building as well as for firewood, furnishings, medical supplies and provisions.

¹⁰ Jacques DUCHARME, "Les revenus des Hospitalières de Montreal au XVIIIe siècle," in *L'Hôtel-Dieu de Montréal, 1642-1973* (Montréal, 1973), p. 224.

As for patients, the groups whose care was entirely paid for out of royal funds were soldiers from the garrison, sailors off king's ships, discharged soldiers, poor inhabitants, and prisoners of war. During the 1750s military officers were also treated in the hospital at royal expense.

In almost every year the vast majority of patients came from the ranks of the ordinary soldiers of the Louisbourg garrison. Generally they outnumbered all other groups combined by a ratio of eight or nine to one (see Table 2). The only time when another category was close to that ratio was when large ships arrived in port and disembarked dozens of sick sailors or soldiers, the latter often being destined for Canada. In 1744, for instance, two-thirds of the crew (84 of 120) of a *Compagnie des Indes* ship were so ill that they were admitted to the hospital shortly after anchoring.¹¹ A much worse situation occurred a dozen years earlier when three king's ships sailed into port with a total of about 300 sick aboard. Obviously, not all of them would be cared for in the hospital with its 100-bed capacity.

Such experiences prompted the local officials to recommend that a separate health care facility be constructed on the far shore of the harbour capable of accommodating 120-160 patients from ships. The proposal was not adopted during the first French occupation but it seems to have been acted upon during the 1750s. At least there is a 1754 plan which identifies two small hospitals on the north shore which are for the "usage des vaisseaux de Roy." Even with the addition of those hospitals it was still not always possible to accommodate all the sick in the town. In 1755, for instance, the ill crew members of *La Valeur* had to be cared for on two ships moored in the harbour while their officers were housed in town. Except in unusual circumstances the Frères de la Charité had little to do with these special hospitals for visiting ship crews. Their concern was the Hôpital du Roi.

At the king's hospital there was one category of patients whose hospitalization costs were not paid for out of royal funds: civilians who could afford to pay for their own care. As it was, not many of that group seem to have gone to the hospital. They preferred instead to be treated and, if it came to it, to die in their own beds. Their reluctance to enter the hospital seems to support Cornelius Jaenen's contention that during the 17th and 18th centuries such facilities were "associated more with death than healing."¹²

By the 1730s, at which time the Hôpital du Roi was completed and there were normally five or six brothers serving there, the annual allocation for hospital expenses stood at 13,600 *livres*. The breakdown was as follows: 500 *livres* for each of six brothers, 3,000 *livres* for the upkeep and replacement of

¹¹ *Boston Weekly News-Letter*, 20 September 1744.

¹² JAENEN, *The Role of the Church in New France*, p. 115.

furnishings and instruments, 600 *livres* for medical supplies, 1,000 *livres* for the brothers' living expenses in the colony and 6,000 *livres* for patient expenses. In terms of total royal expenditures on Isle Royale the allotment for health care was relatively small, generally from two to four per cent. As long as hospital expenses remained within their allotted ceilings there was no complaint from officials within the Ministry of the Marine. Commencing in 1733, however, the cost of patient care consistently exceeded its 6,000 *livres* appropriation. In both 1734 and 1736 expenditures on that item reached over 8,700 *livres* (see Table I).

The Minister of the Marine, the Comte de Maurepas, was understandably distressed. In his view, the Frères de la Charité were well provided for in the colony and there should be no need for expenditures beyond the allotment. In addition to the pieces of land they had been granted on the north shore of Louisbourg harbour and on the Mira River, where the brothers were to raise crops and animals to help feed their patients, they received per patient payments far in excess of those paid elsewhere in New France. For example, at Québec, the hospital order there was paid 6 *sols* per day for each hospitalized soldier; at the Hôtel-Dieu in Montréal, the figure was 11 *sols* 3 *deniers*.¹³ In Louisbourg, by the 1730s, the brothers were receiving 16 *sols* for each day a soldier spent in the hospital, as well as that soldier's ration. For all the other categories of patients (sailors, poor inhabitants, prisoners, etc.) the brothers were compensated at the rate of 25 *sols* per person per day.

Commissaire-ordonnateur Le Normant responded to the minister's criticism of rising hospital costs with the explanation that there were two factors causing the increase. The first was the deplorable lifestyle of the soldiers, who comprised the largest single category of patients. According to Le Normant, the soldier's leisure time was often characterized by an excessive consumption of alcohol, with the result that they were particularly susceptible to illnesses and accidents. The second factor was that the brothers were not prompt about discharging patients whose health had been restored. As a result, the expense mounted needlessly. Le Normant was not optimistic of improving either situation. He claimed he could do nothing about the soldiers' recreational pursuits and he was not hopeful of changing hospital procedures. While he supported Governor Saint-Ovide's proposal to have a military surgeon make weekly inspections looking for healthy patients, he worried that the Frères de la Charité would object strenuously. The Minister of the Marine refused to accept that either situation could not be rectified. Anxious to see a reduction in hospital expenses, he instructed Saint-Ovide to

¹³ Guy FRÉGAULT, *Le XVIII^e Siècle Canadien, Études* (Montréal, 1968, p. 110.

curb drunkenness in the garrison and informed Le Normant that regular inspections of the hospital by the surgeon-major should be introduced.

The minister's directions reached Isle Royale in the spring of 1737. The more difficult instruction to implement would seem to have been the one to diminish drunkenness among the soldiers. What action, if any, Governor Saint-Ovide took on the question is not known. The second instruction, the one concerning hospital inspections, should have been relatively easy to carry out. Yet Le Normant moved very slowly on the matter. Given Maurepas' clear direction on the issue his tardiness is difficult to understand. A possible explanation lies in the commissaire-ordonnateur's handling of another hospital matter around the same time.

In that issue the Frères de la Charité placed a sign with the order's motto, *Charitas*, above the main door to the hospital. Le Normant had the sign removed because it erroneously implied, at least to him, that the hospital belonged to the order rather than to the king. Having drawn the lines of jurisdiction so precisely on that issue, the commissaire-ordonnateur may well have been reluctant to introduce inspections out of a fear that the brothers would protest they were an encroachment into their specific area of concern. Although it is not known whether or not the incident over the sign contributed to Le Normant's attitude on the subject, the fact remains that he failed to initiate regular visits to the hospital by a military surgeon. Admittedly in 1737 and 1738 the cost of patient care declined to between 7,100 and 7,500 *livres*, but those figures were still well above the 6,000 *livres* appropriation. The difference that inspections would make was not to be seen until 1739 when a new commissaire-ordonnateur, François Bigot, arrived in the colony.

Unlike Le Normant, Bigot did not hesitate to initiate regular hospital visits by military surgeons. The Frères de la Charité soon became accustomed to the measure and the desired reduction in expenditures was achieved. The contrast between hospital costs during Le Normant's period as commissaire-ordonnateur and Bigot's is striking. In Bigot's first year in the colony the cost of patient care was only slightly above 6,000 *livres*; during the next three years the figures were below the appropriation, even dipping to below 5,000 *livres* one year. In 1744 expenditures did climb to over 8,000 *livres* again, but that was due to extraordinary circumstances. With the declaration of war that spring and the incarceration of hundreds of English prisoners in the town during the summer months it was inevitable and acceptable that patient costs would exceed the appropriation. Thus, in general, during François Bigot's term as commissaire-ordonnateur, hospital costs were kept within the financial bounds set by the Minister of the Marine (see Table I).

Notwithstanding Bigot's success in bringing down expenses from the high levels of the 1730s, the commissaire-ordonnateur hoped for greater savings and increased efficiency at the Hôpital du Roi. In 1742 he recommended to the Minister of the Marine that the Frères de la Charité be withdrawn from Isle Royale and the hospital operation handed over to a women's medical order, the Soeurs Grises, whom Bigot stated would be more economical. Perhaps Bigot's jaundiced view of the brothers was coloured by the disputes he had had over the admittance of the man with *folie* and of soldiers with venereal diseases, but perhaps not. The proposal may have been based purely on a heart-felt conviction that the colony would be better served with the grey nuns running the hospital. The commissaire-ordonnateur claimed that the sisters were not only more economical than the brothers but also that they were more charitable, and that they would keep the hospital cleaner and the patients better fed. The minister acknowledged that Bigot's suggestion had merit, yet not enough to cancel the *lettres patentes* which had been issued to the Frères de la Charité. Consequently the brothers continued to serve in Louisbourg until the events of 1745 forced them to leave.

The siege of Louisbourg in the spring of 1745 must have had a profound impact on the Frères de la Charité. The opening of hostilities meant that the brothers were faced with far more and graver injuries than was normal, injuries which often called for immediate attention. Midway through the siege the hospital itself came under fire when an enemy cannon shot smashed through a wall of the chapel. During the latter half of the attack the Hôpital du Roi was undoubtedly among the busiest places in Louisbourg. As the bombardment of the town grew steadily heavier, injuries to soldiers and civilians alike probably kept the brothers and their servants active around the clock. The best indication of the immense workload faced by the Frères during the siege and its aftermath are the cost incurred by the brothers on behalf of their patients. The total for 1745 reached over 19,000 *livres*, more than three times the average figure from the 1740s (see Table I).

The siege ended in late July but the medical work did not end then. Thereafter the sick and injured had to be made ready for the trans-Atlantic crossing to France. When the soldiers and inhabitants departed in July so did the brothers. The last one to leave, having stayed behind to sail on the final ship, was Grégoire Chomey.

Shortly after the Frères de la Charité disembarked at Rochefort the Bishop of Québec recommended to the Minister of the Marine that if Isle Royale was

returned to France the brothers should not be sent back to Louisbourg.¹⁴ Bishop Pontbriand did not mention who he had in mind to replace them but it is probable that, like Bigot in 1742, he favoured the Soeurs Grises. As before, the minister chose not to act on the suggestion. His view was that if the colony was handed back the brothers remained the order chosen to serve the Louisbourg hospital. Interestingly enough, when Isle Royale was actually returned to France by the Treaty of Aix-la-Chapelle (1748), François Bigot was among those advocating that the Frères again be put in charge of the Hôpital du Roi. He even specified that Boniface Vimeux should be sent out again as the brothers' local superior. Bigot's wish was fulfilled in the summer of 1749. Accompanied by four brothers and numerous servants, Vimeux once more took charge of the hospital.

In the four years since the French had been in Louisbourg the hospital had undergone drastic changes. One estimate of necessary repairs placed the cost of renovating the building at 21,735 *livres*. An initial lack of beds might be overcome rather easily, but the same was not true of other shortcomings. For instance, there was a serious problem of smell. Used as a barracks for four years by the English, the large wards had picked up a strong disagreeable odour which no amount of cleaning could eliminate. The only solution was to replace the floors and whitewash the walls.

The renovations in the hospital continued into 1751. In an effort to increase illumination two new casement windows were constructed in each of the ground floor wards. For security those new windows and all existing ones on the ground level were barred. There was a minor disappointment that year when a supply of beds arrived from France. The quality of the beds was satisfactory but they were judged to be too narrow for two patients and too wide for just one. As a result, the beds were made smaller. Other work was done on the hospital chapel, sacristy, kitchen and lodgings of the brothers.

The operation of the Hôpital du Roi after 1749 was characterized by the same problem which had surfaced frequently in the first period; namely, that the expenditures on patient care were excessive. However, unlike the period before 1745, the brothers were not blamed during the 1750s when costs consistently outstripped the allocation. The appropriation for that item was raised from 6,000 to 10,000 *livres* during the second period on the basis of an initial 500 man augmentation to the Louisbourg garrison. Initially, the increase in *livres* and manpower were roughly proportional. After 1755, in which year 1,000 more troops arrived in town, the attempt to keep the allocation proportional to the size of the garrison was given up entirely.

¹⁴ *Rapport de l'Archiviste de la Province du Québec* (1935-36), pp. 277-78, Mgr l'Évêque de Québec, 3 novembre 1745.

The commissaire-ordonnateur, Jacques Prévost, always claimed that the overexpenditures on patient care were understandable, the result of exceptional circumstances. The worst year was 1752 when costs exceeded the appropriation by over 100 per cent (see Table I). Prévost explained that the expenses mounted because of the unexpected stay in port over the winter of *La Fidèle*. To have driven hospital costs up to that level many of the crew off the king's ship must have recuperated for several months in the hospital. In another very high year, 1757, the commissaire-ordonnateur attributed the excessive patient costs to other causes: the large numbers of English prisoners detained in the town and the extreme fatigue of French soldiers encamped along the coastline during August and September.

A glimpse into the kind of treatment certain types of illnesses received from the Frères de la Charité during the 1750s is provided by Michel-Pierre-Auguste-Thomas Le Courtois Des Bourbes. An officer in the Louisbourg garrison, Des Bourbes went to the brothers for medical treatment in early 1756, after having suffered through eight months of nightmares, heartburn, indigestion and migraine headaches. In the opinion of the brother who treated Des Bourbes, the officer's problem was that his blood was too thick and that he had "mauvais levains" in his stomach. The cure was thought to lie in bleedings and in the taking of appropriate potions of infusions (*ptissannes*) to purge the sickness from his body. Unfortunately the effect of the treatment, which lasted for a month, was the opposite of that which was intended and Des Bourbes became even more ill. As a result the brother recommended that he enter the hospital where it would be easier to look after him. Des Bourbes agreed and was admitted to the officers' ward. In the course of the next three weeks he was bled six more times and given four different medicines. He was then released, not feeling much better but rather considerably weaker.¹⁵

Ineffectual as it was, the treatment which des Bourbes received was probably basically the same as that which he would have received anywhere else in that era. Bleedings, enemas and infusions were the common remedies for a wide range of afflictions. Sometimes they worked, but more often they did not. One simply submitted to them and hoped for the best.

Des Bourbes' medical complaints seem to have been real enough, but the same does not appear to have been true of some other patients during the 1750s. In 1756 the commissaire-ordonnateur alleged that officers in the Artois and Bourgogne Regiments were sending soldiers to the hospital for the sole

¹⁵ Gaston DU BOSQ de Beaumont, ed., *Les Derniers Jours de l'Acadie (1748-1758), Correspondance et Mémoires Extraits du Portefeuille de M. LE COURTOIS de SURLAVILLE* (Paris: Librairie Historique des Provinces, 1899), p. 186, Des BOURBES à Surlaville, 18 avril 1756.

reason that their men could obtain fresh meat there. When some apparently healthy men were turned away the brothers received much abuse from the officers. The following year Prevost asserted that there were Marine officers who, whenever they were sick, had their servants admitted to the hospital with them. Prevost asked the minister to put a stop to the unjustifiable practice, which cost the royal treasury 25 *sols* per day per servant. While they were not held responsible for the high patient care costs of the 1750s, the Frères de la Charité did not go through these years without criticism. In 1753 Jacques Prevost complained to the Minister of the Marine that the brothers' latest superior, Alexis de la Rue, was openly flouting the commissaire-ordonnateur's authority over the hospital.

Prevost cited two incidents to support his contention. The first concerned the butchering of meat for the hospital. Prevost explained that until recently the required supply of fresh meat had been prepared by the butchers of Louisbourg. Following Alexis de la Rue's appointment as superior in 1752 the practice had changed. De la Rue had begun having cattle slaughtered on the hospital property, presumably in an effort to save money. When the town butchers protested the innovation and the corresponding loss in income Prevost requested brother Alexis to stop butchering until the minister gave his opinion on the subject. De la Rue chose to ignore the commissaire-ordonnateur's suggestion, claiming that the hospital was the convent house of the brothers and therefore exempt from normal regulations over matters like butcheries. Prevost did not share that interpretation and turned to the minister for a ruling.

The second incident revolved around a drummer who was injured in a duel and admitted to the hospital. Much to the irritation of the commissaire-ordonnateur, who held principal responsibility for justice in the colony, Governor Raymond tried to take the lead in the investigation of the duel. As the royal officials disputed over the case Alexis de la Rue did what he could to increase his own power and authority within the hospital. According to Prevost the superior was claiming rights and privileges which were totally unwarranted in a building belonging to the king. As with the butchery issue, the commissaire-ordonnateur asked the minister to put a stop to the superior's pretensions. The minister's response to the above issues has not been located but it is likely that in both cases he gave his support to Prevost.

The 1750s also witnessed charges about improper behaviour by the Frères de la Charité. One allegation was that the Frères may not have strictly observed their vows of chastity. In January 1752 Governor Raymond reported to the Minister of the Marine that he had been forced to speak to the brothers, and even send one back to France, because of the irregular lives some of them were leading, especially with regard to women. Another critic hinted at sexual

irregularities when he claimed that the Frères often went separately to visit their Mira River and Barachois properties where they kept, respectively, a pretty young servant and a young woman.¹⁶ The third person to suggest that some of the brothers were less than chaste was Thomas Pichon. In a work published after his defection to the English, Pichon recalled that during his years in Louisbourg as Governor Raymond's secretary the Frères de la Charité frequently treated civilians in their own homes, a practice which he thought enabled them to do great "mischief"

I believe that if there are some married women who do not complain of them, there may be several husbands who have a great deal to lay to their charge. Indeed in the chirurgical business, the branch which pleases them the most is manmidwifery, and probably they have more reason than one to be fond of it. In short, indecent as these things may appear in the recital, they are far from being exaggerated ... I am for absolutely expelling them all.¹⁷

Largely because of the brothers alleged improper behaviour, Pichon, like Raymond and several others, thought that Louisbourg and the hospital would be better served if the Frères de la Charité were replaced by the Soeurs Grises.

Yet another complaint which surfaced during the 1750s was that there were not enough brothers to serve the hospital adequately. The blame for that shortcoming of course did not lie with the brothers in Louisbourg, but with their provincial in France who was responsible for deciding who and how many Frères were sent to the colony. The problem was first identified in 1749 when colonial officials stated that seven not five brothers would be required. The accuracy of that prediction was soon borne out. In 1750 the commissaire-ordonnateur maintained that with the larger garrison not only were additional brothers required but also more nurses and servants. By the end of 1751 the number of brothers in Louisbourg had increased to six, still one short of the desired number. The situation remained the same for several years because the arrival of new brothers appears to have been always balanced by the departure of an equal number of others.

In 1754 a new problem was identified which prompted Jacques Prvost to call for yet another brother. Prévost claimed that the Récollets friar assigned

¹⁶ Canada. Québec. Archives du Séminaire du Québec, Polygraphie 56, No. 64, Sotises, No. 65 (sic).

¹⁷ Thomas PICHON], *Genuine Letters and Memoirs Relating to ... Cape Breton* (London, 1760), pp. 202-03.

to the hospital chapel was often being forced by his superior to neglect his duties to the patients. A shortage of Récollets to meet all the needs of the parish lay behind the problem, but Prevost was not hopeful of more friars coming to the colony. A better solution, he thought, would be to have one of the Frères de la Charité who was ordained as a priest sent out to assume the duties of the hospital chaplain. The idea seems to have been accepted but it is not known when the first priest of the order arrived in the colony. In 1758 there was a 48-year old priest named Odilon Bonet serving in the Louisbourg hospital.¹⁸

The staff shortage at the Hôpital du Roi at last came to an end in mid-1756. Four Frères de la Charité were despatched to the colony in the spring, bringing the number of brothers in Louisbourg to seven. Unfortunately, the situation was short-lived. In March 1757 two brothers died, in October another passed away and in November two more expired, among them hospital superior Alexis de la Rue. The impact on the hospital of the five deaths is easily imagined. As of late November 1757 there were but two young, inexperienced brothers left to run the demanding hospital operation. Those two were “assez bon sujets, mais sans expérience dans la médecine et dans la chirurgie.” The commissaire-ordonnateur beseeched both the provincial of the brothers and the Minister of the Marine to do everything they could to send out six brothers, at least two of whom were trained surgeons, and four servant nurses at the earliest opportunity in 1758. On the latter point Prevost explained that the hospital had lacked qualified nurses for years. More out of desperation than choice the practice had been to use soldiers in that capacity. But by 1757 the soldiers did not want such jobs anymore, the chances of illness or infection being too great.

The plight of the Louisbourg hospital was quickly and fully appreciated. By January 1758 it was decided that the first ships to sail to Isle Royale in the spring would carry six Frères de la Charité and six *garçons infirmiers* (apprentice or servant nurses). One of the brothers coming out, Potentin Bernard, was named to be the new, and as it turned out the last, superior of the Hôpital du Roi.

A short time after the contingent reached Louisbourg the town was blockaded and besieged by English sea and land forces. The first English troops came ashore at Kennington Cove on 8 June. The very next day Odilon Bonet, the priest sent out by the order to serve the hospital, passed away. His death was apparently unconnected with the enemy assault as the first English battery did not commence firing until 19 June. Thereafter, until the French

¹⁸ BASTIEN, *L'Ordre Hospitalier de Saint-Jean-de-Dieu ...*, p. 59; GÉLINAS, “Des Oubliés,” *La Revue Dominicaine* (1922), P. 228.

capitulated on 26 July, the firing was often heavy, with numerous casualties and great damage done to the town. On 20 June a Frère de la Charité named Paster Harreault was killed after being hit by a cannon shot.¹⁹ During the night of 6 July mortar bombs rained down on the town. One struck the Hôpital du Roi killing the surgeon-major of one of the regiments and mortally wounding two of the brothers. The hospital was evidently seriously damaged as the following day Governor Drucours requested Admiral Boscawen to provide a location where the French sick and wounded could be treated. Boscawen offered Drucours the choice of either the island where the Island Battery was or a vessel anchored in the harbour. Drucours' answer is not known. Less than three weeks later the siege was over, with about 100 French dead and over 200 injured.

The workload of the four remaining Frères de la Charité in the last weeks of the siege and then afterward must have been tremendous. Certainly the costs they incurred were extremely high. The value of the food, drugs, supplies and care they provided during the 1758 ordeal was placed at over 22,000 *livres*, a debt which was finally settled in May 1760. The year before the four brothers who had accompanied the soldiers and inhabitants of Louisbourg to France had gone to other assignments within their order.

The years which the Frères de la Charité spent on Isle Royale were not easy years. The hospitals in which they served, even the impressive Hôpital du Roi, had definite limitations and drawbacks in terms of furnishings and supplies. Moreover, relations with local royal officials were often stormy, with disputes over the cost and quality of health care as well as over other issues such as the kinds of cases which could be admitted for treatment. A few of the brothers were judged to be incompetent and there were calls to have the hospital run by a rival medical order, the Soeurs Grises. But perhaps the most serious problem which faced the brothers, particularly during the 1750s, seems to have been a simple lack of trained staff in the hospital. Working in a hospital in the 18th century had its risks at the best of times, due to the possibility of infection and disease. With the shortage of qualified personnel which sometimes existed at the Hôpital du Roi, the risks must have been higher and the work that much more arduous. Compounding the situation at Louisbourg were the sudden arrival in port of ships carrying sick and diseased crewmen and the two sieges, with their terrible impact on the town. The demands and difficulties of the work at Louisbourg apparently took its toll on

¹⁹ GÉLINAS, "Des Oubliés," p.228; BASTIEN, *L'Ordre Hospitalier de Saint-Jean-de-Dieu* P. 59.

the Frères de la Charité. In the course of the 38 years which the order served there, 13 brothers passed away in the town and another died at sea.²⁰

In spite of the many hardships and problems faced by the brothers at Louisbourg, they appear generally to have performed their duties as well as was expected in their era. Their sacrifices and service on Isle Royale were finally commemorated in 1938, 180 years after the last brother had sailed from the colony. In that year a monument of the Frères de la Charité who had served at Louisbourg was raised on Rochefort point,²¹ just beyond the ruins of the historic town.

²⁰ “Notice Sur Les Frères Hospitaliers De La Charité De L’Ordre De St.-Jean-de-Dieu, Au Canada, De 1713 à 1758,” *Bulletin des Recherches Historiques*, Vol. 33, no. 9 (September, 1927), pp. 522-24.

²¹ Albert ALMON, *Rochefort Point, A Silent City in Louisbourg* (Glace Bay, 1940), pp. 13-15.

Table 1. Annual Expenditure on Patient Care at the Hôpital du Roi, Louisbourg, 1731-58 (to nearest *livre tournois*)

Year	Soldiers	Officers	Sailors, Poor Inhabitants, Prisoners,	Total etc.
1731 ^a	834		149	983
1732	4649		1310	5959
1733	6666		526	7193
1734	6997		1719	8716
1735	7008		1279	8287
1736	6832		1882	8714
1737	6614	971	7586	
1738	5184	2002	7186	
1739	4606		2064	6070
1740	4314		619	4933
1741	5588		69 ^b	5657
1742	5382		434	5816
1743	6345		289	6634
1744	5674 ^b		2440	8114
1745				19490 ^c
1749 ^d	6036	471		6507
1750 ^b		13634	2945	16579
1751		8059	3472 ^c	11532
1752		11004	11426	22430
1753	8096	549	3227	11872
1754 ^b	6557	398	2270	9225
1756 ^a	1228	107	2480	3815
1757 ^b	6082	705	9111	15899
1758				22329 ^f

a - Figure(s) for only the last three months of the year

b - Figure(s) for only the first nine months of the year

c - Figure is for period 1 October 1744 to 31 July 1745

d - Figures are for period from mid-August to 31 December 1749

e - Precise period covered by this figure is not clear

f - Figure described as final payment for expenditures during 1758 siege

Table 2. Time Spent by Patients at the Hôpital du Roi, Louisbourg 1731-57
(in days)

Year	Soldiers	Sailors, Officers, Poor Inhabitants, Prisoners, etc.	Total	1 as % of 3
1731 ^a	1043	119	1162	89.8
1732	5811	1048	6859	84.7
1733	8333	421	8754	95.2
1734	8746	1375	10121	86.4
1735	8760	1023	9789	89.5
1736	8540	1506	10046	85.0
1737	8268	777	9045	91.4
1738	6480	1602	8082	80.2
1739	5758	1651	7409	77.7
1740	5393	495	5888	91.6
1741	6985	55 ^b	7040	99.2
1742	6728	347	7075	95.1
1743	7931	231	8162	97.2
1744	7093 ^b	1952	9045	78.4
1749 ^d	7545	377	7922	95.2
1750 ^d	17043	2356	19399	87.9
1751	10074	2778 ^e	12852	78.4
1752	13755	9141	22896	60.1
1753	10120	3021	13141	77.0
1754 ^d	8196	2134	10330	79.3
1756 ^a	1535	2070	3605	42.6
1757 ^b	7603	7853	15456	49.2

a - Figure(s) for only the last three months of the year

b - Figure(s) for only the first nine months of the year

d - Figures are for period from mid-August to 31 December 1749

e - Precise period covered by this figure is not clear