

The Haverhoeks and their Patients: the Popularity of Unqualified Homoeopaths in the Netherlands in the Early Twentieth Century

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IN JUNE 1906 THE EDITOR of the *Homoeopathisch Maandblad*, the monthly journal of the Society for the Advancement of Homoeopathy in the Netherlands, published the following warning:

In The Hague a so-called homoeopathic pharmacy has been set up by R. Haverhoek. We direct our readers' attention to the fact that this R.H. is neither a pharmacist nor a doctor, and we therefore strongly advise against ordering the homoeopathic medicines to be had there, or seeking his 'gratuitous advice'. At the same time it should be imparted that, according to the daily newspapers, the judge of the sub-district court of Nijmegen has sentenced R.H., who calls himself a dealer in homoeopathic medicines ... for unlicensed practice of medicine to a fine of 200 guilders or two months imprisonment.¹

This warning is interesting for several reasons. The alarmed editor was N.A.J. Voorhoeve (1855–1922), the chairman of the Society for the Advancement of Homoeopathy in the Netherlands since its foundation in 1886, a homoeopathic practitioner at The Hague, and according to Dutch law fully qualified as a medical practitioner. Voorhoeve will not have been very pleased that Haverhoek had chosen his domicile in The Hague for it was beyond all doubt that Haverhoek not only represented a

threat to unsuspecting patients but also to homoeopathy's respectability. It is unlikely that this respectability was also a matter of concern to the judge in Nijmegen. It was his responsibility to be concerned about the unlicensed practice of medicine whether or not it was labelled as homoeopathic. Practising medicine without a medical degree from a Dutch university was forbidden by law, except in emergencies when no qualified doctor was at hand.² There was no such restriction on the sale of medicines. Unlisted medicines, including homoeopathic medicines, could be sold freely.³ Indeed, Haverhoek was only tried for the unlicensed practice of medicine.

Voorhoeve's warning illustrates that both the supply of and the demand for homoeopathy could assume various forms. Except for homoeopathic practitioners like Voorhoeve, whose numbers rose from 14 in 1900 to some 35 in the early 1920s, unqualified homoeopaths like Haverhoek could be consulted, or perhaps the local parson or some other person who dabbled in homoeopathy. Not only between, but also within these different categories the interpretation of what homoeopathy was or should be could vary significantly.⁴ Moreover, the supply of homoeopathy also comprised homoeopathic self-help manuals and medicine chests. Dr Willmar Schwabe in Leipzig was the main provider of homoeopathic medicines in the Netherlands. By the beginning of the twentieth century his medicines were distributed from nine depots in general pharmacies situated in various parts of the Netherlands. In 1909, C.T. Voorhoeve, son of N.A.J. Voorhoeve, set up the first Dutch all-homoeopathic pharmacy in The Hague. Schwabe, in his turn, upgraded his main Dutch depot in Zaandam to a special branch for manufacturing Schwabe homoeopathic medicines, run by F. van Dijk.

Given the diversity of homoeopathic supply, it hardly comes as a surprise that the demand for homoeopathy was also fairly varied. Patients could choose to consult a homoeopathic doctor, an unqualified homoeopath, ask the advice of the parson or some other person they trusted, or experiment with homoeopathic self-medication. It should be realised also that not all homoeopathic patients were convinced adherents of homoeopathy. Most readers of the *Homoeopathisch Maandblad* or, at least, the members and supporters of the Society for the Advancement of Homoeopathy in the Netherlands (in 1904 some 655 people),⁵ will have belonged to this category. The majority of homoeopathy's clientele, however, may well have been shopping on the medical market without becoming regular users of some form of homoeopathy. Even so, it should be borne in mind that some of homoeopathy's clients may not have realised that they were consulting a homoeopath or were using homoeopathic

medicines. Indeed, they may have been unaware of, or ill-informed about, what homoeopathy or a particular homoeopath stood for.

This essay will focus on the clientele of Rudolph Haverhoek (1860–1932), the person against whom the readers of the *Homoeopathisch Maandblad* were warned, and on his younger sister, Femia Haverhoek (1874–1948), who also practised as a homoeopath. Although they attracted only a limited segment of homoeopathy's clientele during the years they practised – Rudolph from about 1900 until 1932, when he died, and Femia between the early 1920s and the early 1930s – they attracted quite a lot of attention from the police, the judiciary, the press and the monthly journal of the Society for the Repression of Quackery (SRQ), in fact far more than from the *Homoeopathisch Maandblad* itself. The material for this essay is derived from these sources. It allows questions to be tackled such as: who were the patients of these healers; why did they choose to consult Rudolph or Femia Haverhoek; what happened during the consultation; what types of remedies were prescribed; and, although much more rarely, what were the results? However, before discussing these matters, the choice of these particular healers will be further accounted for, and they themselves will be more fully introduced.

The Dutch Offensive against Unqualified Homoeopaths

SINCE ITS FOUNDATION IN 1880, and to this day, the SRQ has waged a war on what it considered to be quackery.⁶ Already in 1885 their monthly journal, the *Maandblad tegen de Kwakzalverij*, appearing from 1881, labelled homoeopathy as a grave scientific error.⁷ However, over time the relationship between the repression of quackery faction and the Society for the Advancement of Homoeopathy in the Netherlands improved. In January 1931 the editors of the *Homoeopathisch Maandblad* even wholeheartedly congratulated the SRQ on its golden jubilee.⁸ Obviously, it was a matter of common concern that unqualified healers were prosecuted, and that the production and distribution of medicines should be more strictly regulated.

Between 1900 and 1940 the *Maandblad tegen de Kwakzalverij* reported on 10 unqualified homoeopathic healers. Only Rudolph and Femia Haverhoek figure fairly prominently in the journal. Between 1900 and 1932 the journal reported on 12 series of criminal proceedings for unlicensed practice of medicine against Rudolph Haverhoek; and between 1923 and 1931 on 10 criminal proceedings against Femia Haverhoek. However, the criminal trial archives revealed three more criminal proceedings for

unlicensed practice of medicine against Rudolph Haverhoek, and four more against his sister, bringing the total respectively to 15 and 14. In addition, Rudolph was criminally tried for indecency, and twice he went bankrupt. In the majority of the trials for unlicensed practice of medicine one or more of their patients testified. The testimonies were provided by 25 of Rudolph's patients (in two cases the patient's parents or mother testified) and 32 of Femia's patients, or 29 if the three policemen are subtracted who posed as patients at her weekly consultation sessions in the town of Zwolle in 1927.⁹ It was the police, rather than disappointed patients, who were pursuing the Haverhoeks. Only in three cases did the patient lodge a complaint, all being against Rudolph Haverhoek. In 1904 the parents of a 20-year-old, severely ill tuberculosis patient were advised by their regular doctor in Charlois (Rotterdam) to ask for their money back after Haverhoek had made matters worse.¹⁰ An eczema patient, who had consulted Haverhoek in Amsterdam in September 1930, had the prescribed pills examined by a pharmacist who reported that they were worthless. Moreover, when the patient had come across a reader's letter from someone who had been deceived also by Haverhoek, he had filed a complaint with the public prosecutor.¹¹ The third case concerns a rheumatic patient who had consulted Haverhoek in Amsterdam in 1931 and who testified in the same trial as the previous patient. After discovering that the prescribed granules were worthless, and having read in the newspapers that an action had been instituted against Haverhoek, he had also asked for and received his money back. On this occasion he had called Haverhoek a swindler. According to Haverhoek his female partner had then said to the witness: 'this you must prove, that mister [Haverhoek] is a swindler.' The three of them had then gone to a nearby police station. There Haverhoek had been told that he had to come back in a fortnight, which he had not done because, as he said: 'I am not Kajefas [sic], but a believing Catholic.'¹² The patient may not have lodged a complaint himself, but he did provide the police and the court with damaging information.

Of course, it is scarcely possible to establish whether or not these testifying patients represented a cross section of Rudolph's and Femia's clientele at the time. Moreover, the patients' testimonies only tend to reveal the type of information which was considered to be relevant in the circumstances, i.e. to prove Rudolph or Femia guilty of unlicensed practice of medicine. Except for the occasional acquittal they were repeatedly sentenced to a fine, risking detention if they failed to pay. At the beginning of the century Rudolph was fined between three and 25 guilders per offence whilst, in the 1920s and early 1930s, Rudolph and Femia had to pay

finer from 100 to 300 guilders per offence. Moreover, Femia was thrice sentenced to imprisonment in Rotterdam: once, in 1919, to six months for having practised as an abortionist, and twice, in 1924 and 1930, to two months for unlicensed practice of medicine within two years of her previous conviction.¹³ Whether she continued her 'medical' activities after this last sentence is not yet clear.

The Careers of Rudolph and Femia Haverhoek

WHEN RUDOLPH HAVERHOEK settled in Utrecht in 1896, at the age of 36, he was registered as a dealer in spectacles. Soon after he was to start his 'medical' activities. Haverhoek testified that, already in 1901, he had a business selling glasses, nursing articles and homoeopathic medicines. Only from 1904 did he also advertise himself as a homoeopath, putting up a nameplate with this qualification. He had been convicted in 1900 and 1901 on four occasions for the unlicensed practice of medicine. After two more trials he moved to Nijmegen where he was registered as having a pharmacy and was, once more, convicted for unlicensed practice of medicine in 1906.¹⁴ In that same year he moved to The Hague where he opened another pharmacy, but went bankrupt in 1907. After this debacle he returned to Utrecht where, on arrival, he advertised his 'perfect homoeopathic remedy against cancer, stomach ulcers, stomach catarrh and all other diseases'.¹⁵ In 1915–16 Rudolph Haverhoek was again tried in Utrecht after putting up a nameplate with a different spelling: *Homoeophaat* instead of *Homoeopaath*.¹⁶ The ruse did not result in an acquittal. At this trial Haverhoek presented himself as the proprietor of a cancer institute. Whether or not he spoke the truth, it would soon become clear that he was still prepared to treat all sorts of diseases. Towards the end of 1916 Haverhoek advertised that he gave daily 'free advice on cancer, lupus, skin diseases, diabetes, paralyses, and all other diseases at his address in Utrecht in the Homoeopathic Pharmacy of R. HAVERHOEK JR.'¹⁷ The pharmacy's proprietor was Haverhoek's eldest son, Rudolph Pieter Lodewijk (born in 1885). After assisting his father from at least 1904, he was registered between 1907 and 1928 as a salesman of homoeopathic medicines in Utrecht, between 1928 and 1936 as a dealer in medicines in The Hague, and in De Bilt (near Utrecht) in 1936. After many years of silence and a presumably flourishing business – the *Homoeopathisch Maandblad* reported that Haverhoek wore a fur coat and drove a luxury car¹⁸ – 1927 proved to be a difficult year for Haverhoek senior. He was sentenced to a fine of 1,000 Dutch guilders for indecency¹⁹ and he went bankrupt shortly after. In 1928 he moved to The Hague, together with his

eldest son and his family. Again, the son ran a pharmacy and the father advised the clientele. As a result Rudolph Haverhoek was put on trial in 1928–29 but he was acquitted by the Supreme Court.²⁰ Thus, the reason for Rudolph Haverhoek publishing the following advertisement, for which he was once more put on trial:

Warning

Old mister R. Haverhoek at present gives ... free advice on Cancer, Lupus, Skin Diseases, Diabetes, Paralyses, Ruptures, Milk Crust and all other diseases.

Surgery daily from 9 a.m. to 2 p.m., closed on Sundays.

Completely acquitted by the Supreme Court of the Netherlands ...²¹

In 1930 Haverhoek moved from The Hague to De Bilt, where he received board and lodging from Elisabeth Maria Geertruida Harm (b. 1892), a dealer in homoeopathic medicines. In return, Haverhoek was expected to attract and advise clients, while Harm earned good money from selling the medicines she had bought from 'Dr W. Schwabe in Zaandam'.²² This resulted in another series of criminal proceedings for unlicensed practice of medicine against Haverhoek, two in Amsterdam between 1930 and 1932, and two in Utrecht in 1931 and 1932, the year of his death.

Haverhoek's younger sister Femia moved to Rotterdam in 1913, when she was nearly 40, with her children but not her husband, Bernardus Tap. It appears from criminal proceedings in 1919 that she had been earning money from treating at least one woman who wished for an abortion.²³ In 1923, when Femia Haverhoek was next put on trial, this time for unlicensed practice of medicine, she was recorded as a dealer in homoeopathic medicines, also bought from the Schwabe firm in Zaandam.²⁴ Two more similar trials in Rotterdam would follow shortly afterwards. In 1924 she defended herself by saying 'that she had only been selling homoeopathic medicines, which is permitted, and that her other actions and statements towards the witnesses [i.e. patients] had only been fake actions which should be denied any value.'²⁵ Three years later Femia was registered as a clairvoyant. From 1927 until 1930 Femia left an impressive trail of trials, from Haarlem, Heusden together with 's-Hertogenbosch, Zwolle, Utrecht, Rotterdam, The Hague, Middelburg and Tiel, to Sommelsdijk and Overflakkee plus Rotterdam itself. On these occasions Femia was recorded as a clairvoyant and/or a herbalist although it is not clear if she stopped her 'medical' activities after the trials in 1930. The trial proceedings show that Femia had been having considerably more financial worries than her brother Rudolph, at least before he went bankrupt in 1927. In the meantime

their relationship had become strained. In 1929 Femia even advertised in a Rotterdam newspaper, presenting herself as *Homoeophate* (note the spelling) and warning the readers against the firms in Utrecht and The Hague that supply under the name of 'Haverhoek Herbs and Homoeopathic Medicines'. In the criminal trial on 7 May in Utrecht 'it has been confirmed that only the said Mrs Haverhoek is entitled to use this legally deposited trade name.'²⁶ Obviously, this move did not prevent further trouble. Femia's eldest son, Adrianus Petrus Johannes Tap, born in 1897, glass-cutter by profession and living in Rotterdam, looked after the mailing of medicines prescribed by his mother at her consultation sessions.

Profiles of Rudolph and Femia Haverhoek's Patients

WHO WERE THE PATIENTS WHO TESTIFIED at the Haverhoek trials? Combining data from these trials and from population registers the following profiles can be constructed with respect to their sex, age, occupation, religion and place of residence. Both Rudolph and Femia Haverhoek's testifying patients were fairly evenly divided between the sexes, the age groups between 20 and 60 were best represented, and most of them were married and belonged to the lower middle classes. While Rudolph seems to have attracted a religiously mixed and mainly urban clientele, nearly all of Femia's testifying patients were Protestants and she also attracted rural patients. Eleven out of Rudolph Haverhoek's 25 patients were men. However, they were fairly underrepresented at the trials between 1900 and 1906, and strongly overrepresented at the trials between 1928 and 1931. Apart from the small numbers, this demonstrates that generalisations about the gender of the patients have to be made with care. Femia Haverhoek's 28 testifying patients – not counting the abortion client from 1919 and the three policemen who posed as patients – were evenly divided between the sexes throughout the short period of the trials from 1923 to 1930.

It appears that most of the Haverhoeks' testifying patients should have been earning an income or fulfilling other family obligations. Rudolph Haverhoek's patients, or their husbands or fathers, had occupations varying from workman, shop assistant, coachman, carpenter or shipbuilder to butcher, bookseller and tradesman. They belonged mainly to the lower middle classes and, to a lesser extent, to the working classes. As long as Haverhoek asked relatively modest prices, as he probably tended to do at the beginning of the century, people with relatively low incomes could afford to consult him. In the late 1920s and early 1930s the prices that

had to be paid for the medicines – Haverhoek advertised and testified that the consultation itself was free – were fairly high at six or seven and, occasionally, even 10 guilders.²⁷ Femia's clientele had occupations such as casual labourer, night watchman, porter, skipper, engine driver, clergyman of the Reformed Church, shoemaker, carpenter or farmer. Her clientele may have been from a slightly lower stratum than that of her brother. The prices that Femia normally asked tended to be somewhat lower at five-and-a-half guilders for the medicines and, in 1930, an extra guilder for urine analysis.

Around 1910 Rudolph Haverhoek switched from the Evangelical Lutheran to the Roman Catholic Church. Femia was always a Roman Catholic. Apparently their religious affiliation was either unknown amongst their clientele, or it was not considered to be relevant, for they attracted many Protestants. Initially, Rudolph's clientele was recruited mainly from Utrecht, although the incidental traveller and bookseller from Zwolle could, of course, stumble across him, and the Charlois (Rotterdam) family persuaded him to come and see their severely ill son. He must have attracted also patients from Tiel and its surroundings, as he did from Nijmegen during his short stay there and, likewise, from The Hague. Later, when he advised his son's clientele in The Hague, there were some clients who had travelled quite a distance coming, for example, from Velsen and Zaandam in the province of North Holland. Once Rudolph started his co-operation with Elisabeth Harm they seem to have done more travelling than their patients. At their weekly sessions in Amsterdam in the hotel 'de Pool', not far from the Central Station, they attracted a mainly Amsterdam clientele. Femia's clientele, at first, came from Rotterdam and its surroundings. At her weekly consultation hours in Haarlem, from 1926 to 1927, she attracted patients from Haarlem, Amsterdam and nearby places like Beverwijk and IJmuiden. Thereafter, she also attracted a rural clientele, especially when she had her weekly consultation sessions in Middelburg and Sommelsdijk in 1930.

It is hardly possible to compare the clientele of the Haverhoeks with the clientele of qualified homoeopathic practitioners at the time. First, only part of the Haverhoeks' clientele has been traced, and whether this part is representative of the rest is hard to establish. Secondly, no systematic research has been done into the clientele of qualified homoeopathic practitioners. However, the *Homoeopathisch Maandblad* contains some indications. It may be assumed that the subscribers (especially those who were active in the Society for the Advancement of Homoeopathy in the Netherlands at the national or local level), and those who were givers of gifts, donations or legacies, will have belonged to the regular clientele of

these practitioners. Members of the nobility and the higher classes were fairly prominent in one or more of these roles, but also many others who were less well situated. Gifts from one to 15 guilders were quite common. There were also much larger donations, otherwise the homoeopathic hospital would not have been established, or the homoeopathic out-patients' clinics where free treatment was offered to the poor. In Utrecht, for example, such an out-patients' clinic was opened in 1900, and in Amsterdam in 1902. These clinics certainly filled a gap in the medical market. They were, at least, an important addition to the already existing forms of homoeopathic supply to the poor such as homoeopathic collective health insurance funds and the participation of homoeopathic practitioners in general health insurance funds.²⁸ Thus, there is a varied company of supporters and clientele from the higher circles and the fairly well off to the truly poor. The Haverhoeks catered for an in-between public or, perhaps, with a partial overlap upwards. Yet, this is not the whole story for, as Gewin stated in 1926, homoeopathy's Dutch following, to a large extent, consisted of orthodox Protestants, mainly to be found in lower middle-class circles, among Christian schoolteachers, clergymen and members of 'society'.²⁹ Whether or not these orthodox Protestants were regular clients of homoeopathic practitioners, homoeopathic self-medication may well have been especially popular in these circles. However, if the Haverhoeks, or rather Femia, attracted part of their clientele from this group, homoeopathic self-medication was never mentioned at the trials.

Why Choose a Haverhoek?

IF HOMOEOPATHY HAD BEEN their favourite therapy, the clients of the Haverhoeks could have chosen to consult a qualified homoeopathic practitioner. Both Utrecht and Rotterdam had two homoeopathic practitioners at the time that Rudolph or Femia Haverhoek practised there. In most other towns where the Haverhoeks operated at one time or another, like The Hague, Amsterdam, Haarlem, Zwolle and Middelburg, at least one resident homoeopathic practitioner could be consulted. This was not the case in Nijmegen and Tiel, or in the province of North Brabant and the South Holland island of Overflakkee, at the time of Rudolph or Femia Haverhoek's sessions. So, why choose a Haverhoek if a homoeopathic practitioner was available? Given the fairly high prices the Haverhoeks asked, it is hardly likely that it was a matter of cost. It may well have been the personal reputation of the Haverhoeks, whether or not in combination with advertising themselves as homoeopaths, that made people decide to

consult them. This happened mostly when 'ordinary' doctors had not been able to cure them. Only a few of Rudolph Haverhoek's early Utrecht patients related why they had chosen to consult Haverhoek. At the 1900 trial none of the group of seven patients, five of whom were told by Haverhoek that they had cancer, provided this type of information. However, they may have read Haverhoek's advertisement in the *Utrechtsch Nieuwsblad*, saying:

The biggest miracle can be experienced by immediate recovery from Headache and Toothache with fever and pain in the Joints, also advice for all secret and the severest Skin diseases, also available here the famous *Wouterbalsem*, good for all wounds, and the finest nickel-rimmed glasses.

Surgery from 9 to 12 p.m., except for Tuesdays and Fridays.

Address with R. Haverhoek Concordiastraat No 1, Utrecht.³⁰

Interestingly, on this occasion Haverhoek did not advertise his special skills with respect to cancer. Some information can be gained from three of the six patients who testified in 1901. A girl of 19 had been advised by her father to have a swelling in her mouth treated by Haverhoek.³¹ A middle-aged woman declared that she had cancer in her stomach and abdomen, and that her doctor had let her down after he had told her that she was in a bad state.³² A young woman had consulted Haverhoek for her sore toes on the advice of her mother-in-law, who had shown her a piece of paper on which were reported a great many of Haverhoek's 'miraculous cures' of persons referred to by name.³³ None of these early patients mentioned Haverhoek's homoeopathic medicines as a reason for consulting him. The bookseller from Zwolle, who testified in 1904–05, had intended to consult a homoeopathic doctor in Utrecht for his lung disease. Noticing Haverhoek's nameplate he had consulted him straightaway. Afterwards he had been told that he had consulted the wrong one. He had then consulted one of the homoeopathic practitioners in Utrecht.³⁴ In 1904 the Charlois parents with the seriously ill son had been advised by an acquaintance to consult Haverhoek. Like the bookseller they assumed also that Haverhoek was a proper doctor and, therefore, must have been doubly disappointed when his treatment failed. It may have been Haverhoek's personal reputation rather than being a homoeopath that induced the acquaintance to recommend Haverhoek, otherwise he could have advised the parents to consult one of the homoeopathic practitioners in Rotterdam itself.³⁵

While none of Haverhoek's later patients in The Hague mentioned

why they had chosen to consult him, his patients in Amsterdam did. A mother declared that her son of eight who, according to Haverhoek, suffered from scrofula, had been treated by various doctors for the last four years. This had been to no avail 'and I did not fancy them lifting his skull, which was what they wanted to do.' When she and her son had been walking on the Nieuwendijk in the centre of Amsterdam in October 1930 a booklet had been presented to her which stated that R. Haverhoek gave free advice for all sorts of complaints, and that he could be consulted every Monday in the hotel 'de Pool'. She had immediately taken her son to Haverhoek. The booklet she spoke about was deposited in the courtroom. It had a blue cover. On the front the following words were printed:

The greatest miracle. R. Haverhoek. All homoeopathic medicines obtainable from Miss E.M.J. Harm. Adviser: old mister R. Haverhoek ... De Bilt. Every Tuesday from 9-2 p.m. in Furmerend, in Hotel van 't Hoff, Koemarkt 57. Every Monday from 9-2 p.m. in Amsterdam in Hotel 'de Pool', Damrak 42-43.³⁶

At the back there was a portrait of the suspect. The other three patients in Amsterdam, among them the plaintiff (the book printer), and the one who had called Haverhoek a swindler, a trader in fancy goods, had consulted Haverhoek for their eczema or rheumatism on the advice of an acquaintance. Again, none of them mentioned homoeopathy or homoeopathic medicines as a reason for choosing Haverhoek, although they may have been informed about this connection. Perhaps, it was also or even mainly homoeopathy that made them choose Haverhoek.

Except for the patients who testified in Zeeland, very few of Femia Haverhoek's patients mentioned why they had chosen to consult her. A young man in Rotterdam related in 1923 that he had been suffering from a rupture for several years, and that there had been a nameplate on the house of the suspect, on which was written: 'Homoeopathy, surgery 9-3 p.m.'. His young wife had been with him and she had also consulted Femia 'because she did not feel well'. She remembered a slightly different text on the nameplate, namely 'Homoeopathic Institute Mrs Haverhoek'.³⁷ From the other four patients who testified in Rotterdam in 1924 and 1925 only their complaints are known, for example, the night watchman who suffered from deafness or the widow with an inflamed foot. The same applies to the six patients who testified in Haarlem, such as the engine driver with backache or the casual labourer with nervous pains in his whole body. More information was provided in 1927 by the clergyman in a village in the province of North Brabant. His 23-year-old daughter had been ill for about

five years and the doctors had always supposed that she was suffering from nervous complaints. When Femia Haverhoek was visiting the clergyman's neighbour, the daughter had also wanted to consult her. Both father and daughter had supposed her to be a clairvoyant as homoeopathy was not mentioned at all.³⁸

The first witness at the trial in Middelburg (Zeeland) in 1930, a sergeant of the military police in Flushing, did not say why he had chosen to consult Femia Haverhoek, but he did reveal that a booklet with patients' attestations (*attestenboekje*) had been enclosed with the medicines that had been sent him by post. On the cover of the booklet was 'Mrs Haverhoek Dr Homoeopath'. The other six witnesses all testified that they had decided to consult Femia after they had read this *attestenboekje*. They did not provide further details,³⁹ nor did the six patients who testified in Sommelsdijk and Rotterdam in 1930. However, they did mention that they had been informed about Femia through an advertisement in the regional newspaper, announcing that she 'would be in session every Wednesday during certain hours in Sommelsdijk in hotel Harmonie and could be consulted for all diseases'.⁴⁰

The patients' testimonies tell more about how they had come to know about Rudolph or Femia Haverhoek, than about their reasons to consult either of them. Thus, it is hard to establish if homoeopathy was the deciding factor. It may be suspected that quite a few of these patients were prepared to try anything, whether or not it was homoeopathy, though perhaps not anybody, after regular doctors had failed. The personal recommendations, the nameplates, the advertisements and the booklets about Rudolph's or Femia's wonderful cures will certainly have helped.

Consultations, Rituals and Results

HOW MIRACULOUS WERE THEIR RESULTS, and what happened at their consultations? Both Rudolph and Femia Haverhoek are known to have visited patients at home if they were unable to go out. Most of the testifying patients, however, had come to their shop or surgery. In most cases the patients first offered information about their complaints, or were asked to do so. This was followed by some sort of examination, a diagnosis and the prescription and selling of medicines. Sometimes a patient had decided not to offer information immediately, as in the case of the clergyman and his daughter. They declared that they had decided to wait and see what Femia herself, as a clairvoyant, could discover. They obviously did not recognise the possibility that Femia could read their minds

and thus replicate the doctor's diagnosis, or that she had been informed already by the neighbours.

Over time the ways in which Rudolph and Femia examined their patients underwent some changes. Their methods ran partly parallel, but they also diverged. At first, Rudolph tended to touch his patients, but later he developed into an iriscopist. He assumed that he would no longer be convicted for unlicensed practice of medicine if he refrained from touching his patients, but examined them by simply looking at their eyes through a looking glass.⁴¹ He also sometimes examined his patients' urine. Femia first and foremost examined her patients' urine, while later she also relied on her other gifts as a soothsayer, or by looking at her patients' eyes. Whether Femia's methods can be called masculine, as Willem de Blécourt has recently suggested, depends of course on historical definitions of masculinity and femininity.⁴² It would seem that soothsaying at any rate was a mainly feminine business at the time. If examining the patient's urine was not, it would still be uncertain to conclude that Femia's choice of this method would have stemmed from its supposedly masculine connotations. After all, the repertoire of diagnosis was not all that large for unlicensed practitioners. What made Femia resemble her male colleagues was her medical entrepreneurship. She attempted, however unsuccessfully, to make a living out of 'medicine', competing with her predominantly male colleagues. Yet even if her tactics and methods very much resembled those of her male colleagues, would this also have impressed her potential clients as being masculine? And if so, what difference would this have made?

Both Rudolph and Femia had, at one stage or other, assistants. Their eldest sons assisted them, for example, with the mailing of medicines. In Rudolph's case this happened early on in his career, in Femia's case this is mentioned only at the later trials. For the rest the pattern diverges. When Rudolph had gone bankrupt in 1927, he himself became dependent as he subsequently assisted his eldest son in The Hague and, thereafter, Elisabeth Harm. Naturally, he did this still in his role of practitioner. Femia, on the other hand, availed herself of various types of assistants, apart from her eldest son. In Zwolle it was a medical practitioner who served unsuccessfully as a safeguard against prosecution by being present at her consultation sessions. In Haarlem it was a nurse or a seamstress who assisted Femia, in Sommelsdijk it was a woman who presented herself as an Italian somnambulist.

What happened during the consultations and what were the results of the cures? Rudolph Haverhoek's Utrecht patients, who testified in 1900, were told that most of them had cancer. Apparently, they had not used

this term themselves when they informed Haverhoek of their complaints. The remedies that Haverhoek prescribed and sold varied from granules to ointments or liquids for external use. Some of these patients consulted him two or three times. A female patient of just over 50 died soon afterwards. Whether or not the others were cured by Haverhoek, they at least survived for the time being. In 1901 a middle-aged woman declared that she had cancer in her stomach and abdomen. Haverhoek advised her to syringe herself with an irrigator, which he sold her, filled with tepid water.⁴³ She died more than three years later. Another patient was cured after Haverhoek had removed a swelling from her mouth. The other patients were treated with granules and ointments for complaints like stomach ache, open wounds or sore toes. They all remained alive for the time being, while a few of them testified that they had been cured.

From Rudolph Haverhoek's early consultations only one extensive testimony, from 1904, is available.⁴⁴ It is a fairly atypical case, as it does not concern his usual Utrecht clientele, but the young tuberculosis patient in Charlois (Rotterdam). His parents first went to see Haverhoek in Utrecht. They told him about their son's illness and his admittance into hospital some months previously, and they asked Haverhoek to come and see their son. Haverhoek consented on the condition that they would pay him 25 guilders, and that they would first fetch their son from the hospital and bring him home. They agreed to do this. After the son had come home with the instruction to lie on a plaster bed, the parents had called in their own medical practitioner. He had put a drain in a wound in the boy's groin and continued treating him for about four days. At that stage, the boy's father had told the doctor that his son would receive homoeopathic treatment. The boy's condition had been fairly good, according to the doctor. Then it was Haverhoek's turn. The parents testified that he had examined their son by means of percussion, although they did not use this term themselves. Haverhoek denied that he had examined the boy. According to the parents, Haverhoek had also taken out the drain and put it in again, after cleaning it in water. Again, Haverhoek offered a different version. In reply to the father's question whether the boy still had to use the plaster bed, Haverhoek's answer had been: 'let those bastards from the hospital lie in it themselves, that murderous scum'. Haverhoek testified that he had answered: 'if it were my son, it would not happen'. Haverhoek confirmed that he had supplied a jar of ointment and a box with granules, including instructions. A few days later some more ointment, a syringe and sublimate pastilles had been sent to them by mail. Haverhoek testified that perhaps his son had mailed these articles, but he had not as he had fallen ill

shortly after his visit to Charlois. He denied also that he had written to the parents, telling them that they should continue the cure, or that they had sent him the boy's urine for examination. The boy's condition deteriorated and Haverhoek gave up, two months after he had started treating the boy. Apparently he advised the parents to seek another doctor. They then called in their own doctor, who had the boy hospitalised again. Two years later the boy would die. The boy's parents testified that they had assumed that Haverhoek was a qualified doctor and that they had not discovered that he was not until much later. Obviously Haverhoek's ways had not given them cause for suspicion as he must have behaved like a proper doctor.

Later this was much less the case. Haverhoek no longer touched his patients, but diagnosed by looking into their eyes. However, if a patient brought his or her urine for examination, Haverhoek would not decline to comply with the patient's wish. An impression of Haverhoek's later consultations may be gained from the example of a butcher's wife, 50 years old, who consulted Haverhoek in Amsterdam in 1931. She testified as follows:

For a few years I have been suffering from rheumatic pains. After an acquaintance had told me about the defendant, and after I had also received a booklet with the name of R. Haverhoek on it, his address and mention of 'the greatest miracle', I understood from the testimonies in this booklet by several people, that the suspect could cure ill people, and I decided to consult him. For that reason I went on the morning of 9 March 1931 to hotel 'de Pool' on the Damrak in Amsterdam. After I had taken a ticket (I can't remember if I paid for it) I was ushered into a waiting room, and after that I came into another room, where I saw the defendant sitting and where also a large woman [Elisabeth Harm] was present. When I walked towards the defendant he said: 'so, little woman, also pain in the leggies?' The defendant told me to be seated on a chair opposite to him and asked me, what I came for. I answered, that rheumatic pains gave me a lot of trouble. Then the defendant put a big loupe to his left eye and said: 'look at me', which I did ... 'Poor dear', he said, 'what a lot of pain you are suffering'. I had indeed pain. The defendant then said that I had sciatica and that I shouldn't use meat or coffee. I had brought my urine in a small bottle and gave this to the suspect, who handed it to the aforementioned woman ... who heated it over a flame ... The defendant told me that I had a problem with my kidneys and that I suffered from diabetes ... This announcement utterly confused me, for a doctor had examined me only a short while before and told me that I was not suffering from diabetes. When I told this to the defendant he changed the aforementioned diet and said that I was allowed meat and two or three potatoes ...⁴⁵

This is not the end of the woman's story. She went on to say that

she had to pay 10 guilders, which was quite a lot of money, and that the woman gave her two boxes with pills, one bottle of medicine, and some herbs. After consulting Haverhoek she took her urine, just to be sure, once more to a doctor to have it examined, but again he told her that she did not have diabetes. It is not known what happened to the woman afterwards, except that she was still alive in 1941, when she moved from Amsterdam to Haarlem. Of two other patients who consulted Haverhoek in Amsterdam and who expressed their dissatisfaction, one could not be traced, the other was to die four years later at the age of nearly 68. Three of the other six patients from the later trials testified that they had visited Haverhoek for a second time. However, none of them indicated whether Haverhoek's cure had been successful. Except for an older man with cancer, four of them survived for the time being, while two could not be traced.

Femia Haverhoek's patients at the Rotterdam trials from 1923 to 1925 all told similar stories about their consultations, although their complaints varied. They had all brought their urine and offered information about their complaints. Femia then held the urine over a methylated spirits flame and inspected it. Sometimes she also looked at the sore part of the body. She then told the patient what was wrong or whether she saw progress. The medicines she prescribed consisted of pills, ointments, liquids and, unlike Rudolph Haverhoek, also herbs for making tea. After paying Femia five guilders the patient had to collect the medicines from her homoeopathic pharmacy in the same house,⁴⁶ or she provided the medicines herself. Only one of these six early patients had consulted Femia Haverhoek for a second time. On that occasion she told him that she saw progress.⁴⁷ None of these patients mentioned if they had benefited from Femia's treatment, but the three who could be traced all survived for the time being.

The patients who testified in Haarlem in 1926 and 1927 told similar stories. It appears, moreover, that it made no difference to Femia if she did not see the patient in person. All she needed was the patient's urine. Thus, the wife of a middle-aged engine driver from Amsterdam testified that she had gone to see Femia in Haarlem in 1926. She had brought her husband's urine and told Femia that he suffered from backache. Femia had held the urine over a methylated spirits flame and had said: 'your husband is much sicker than you think, your husband's pain moves from his back to his stomach. I will send drops, herbs and plaster ...'. A fortnight later, the wife had brought another bottle with her husband's urine. Holding it over the flame Femia had said: 'splendid, it is improving'. Indeed, the third time the patient was able to travel to Haarlem himself.⁴⁸ One of the six patients who

testified in Haarlem, a young casual labourer with nervous complaints, said explicitly that he had found relief from Femia's herbs and pills.⁴⁹ But the husband of another patient reported that his wife had not benefited from the cure. One of the older patients died nearly five years later. The other five could not be traced any further.

At her weekly sessions in Haarlem Femia was first assisted by a young student nurse and later by an elderly seamstress. The student nurse testified that she had been employed by Femia for about two years and that most patients had come to Femia for urine analysis. Some of them had been physically examined by Femia. At times a doctor had been present at these examinations, but not when she had been there. The nurse added that she had resigned from her job because she did not agree with Femia's way of behaving, for 'the defendant [Femia Haverhoek] never examined the patients' urine, but just put it in the kitchen and left it at that.'⁵⁰ Whereas the nurse did not report what her tasks were, her successor, the seamstress, was more explicit. At the second trial in Haarlem, she testified that it had been her task at Femia's sessions in both Haarlem and IJmuiden to collect the five guilders and 40 cents for the herbs and pills that Femia prescribed, and to forward the money to a son of hers, together with a card on which were written the name and address of the patient. The son then looked after the mailing, continuing to do so in the following years.⁵¹

Further information comes from the clergyman and his daughter in a North Brabant village. This time Femia seems to have eliminated testing the urine. The clergyman testified that he had requested Femia to come to his house in August 1927 stating:

That she [Femia Haverhoek] had taken his daughter's hand in hers, had looked into her eyes, and soon after had asked to see her left leg; that the defendant had looked at the leg and had turned it around with her hand and said: 'yes, she is also nervous', and that she was not free from tuberculosis; that the defendant had then given his daughter a diet and had said that she would send medicines; that he [the clergyman] had then asked the defendant: 'and what do you say of me?', that the defendant had then answered, after having looked at him: 'your stomach is not in order, your heart is alright, but weak', and that she had a remedy; that he had then told her, that he suffered from transpiration when preaching; that the defendant then answered that she would send medicines.⁵²

The daughter was to die two years later while the father lived into old age.

In Zwolle, the three policemen who had posed as patients testified, in 1928, that Femia had examined them by looking into their eyes.⁵³ She

asked one of them to send her his urine for examination at a later stage, after he had been using her medicines for some time. Apparently a medical practitioner had been present at her sessions and Femia was reported to have acted as his assistant. She had asked the patients questions which the doctor had required, after which he would name a number which corresponded to the patent medicines the patient should get.⁵⁴ Later in 1928 a patient testified in Utrecht that Femia had looked into her eyes with a magnifying glass.⁵⁵ The correspondence with her brother's behaviour is very striking. However, this was to change shortly afterwards. At the trials in Middelburg and Sommelsdijk/Rotterdam in 1930 it appeared that Femia no longer examined her patients' eyes, not even her blind patient's eyes. She had returned to her old and trusted method, the examination of the patient's urine. The urine could either be brought to the consultation, or it could, as advertised, be sent to Rotterdam.⁵⁶ Some of the patients testified that they had sent their urine to Femia in advance. It was also reported from her Sommelsdijk sessions that Femia was assisted by a woman whom she called her pharmacist. The assistant herself seems to have preferred a less prosaic title. According to the *Maandblad tegen de Kwakzalverij* Miss Kleerenbezem, as she was called, advertised herself as the Italian somnambulist.⁵⁷ The patients' testimonies also reveal a totally new element. It was reported repeatedly that Femia had attributed the patient's complaints to impurity of his or her blood. Thus, the sergeant of the military police in Flushing testified that:

... he was suffering from pain in his belly. He had had his urine sent to the defendant [Femia Haverhoek] in advance. The defendant told him that she had examined this urine and had seen what was wrong with him, telling him that it was in his blood, that his blood was not pure and that it should be purified, and that she had the gift to see in people's urine what was wrong with them.⁵⁸

Femia's prescriptions remained the same, herbs and homoeopathic pills, drops or ointments, but she sometimes indicated that these remedies would only have the desired effect with God's help. None of these Middelburg and Sommelsdijk patients, 13 in all, reported whether the treatment had been successful. Six patients could not be traced further. Two patients, the elderly man and a young man with a lung disease, died soon after consulting Femia. The others were more fortunate.

Epilogue: Patients' Choices and Patients' Voices

THE PATIENTS WERE ALL SHOPPERS on the medical market. Most will have chosen to consult a Haverhoek after regular doctors had failed to cure them. Only a small minority proved to be fatally ill. Whether the patients of the Haverhoeks felt especially attracted to homoeopathy is difficult to establish, as only a few mentioned that it was homoeopathic treatment they wanted. It may well have been the Haverhoeks' personal reputation, whether or not in combination with their homoeopathic medicines, that made people decide to consult them. Personal recommendations, nameplates, advertisements and booklets about the Haverhoek's miraculous cures all contributed to direct people's attention to these homoeopaths. The patients' voices reveal only a small part of their medical history and motivations.⁵⁹ Even if their testimonies had revealed more, this would not have sufficed. To gain a fuller understanding of patients' choices, knowledge of the relevant medical market and, more particularly, of the available alternatives is needed. The popularity of unqualified homoeopaths like Rudolph and Femia Haverhoek partly depended on what other options were available to the patients.

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Notes

- 1 *Homoeopathisch Maandblad (HM)* 17 (1906), 143.
- 2 On the Dutch medical laws of 1865, see D. Cannegieter, *Honderdvijftig jaar gezondheidswet* (Assen, 1954).
- 3 Medicines which contained ingredients mentioned in the so-called 'list C' could, below 50 grammes, only legally be sold by pharmacists. See A.I. Bierman, *Van artsenijsmengkunde naar artsenijsbereidkunde. Ontwikkelingen van de Nederlandse farmacie in de negentiende eeuw* (Amsterdam, 1988), 41–44.
- 4 See Marijke Gijswijt-Hofstra, 'Homoeopathy and its concern for purity. The Dutch case in the early twentieth century' (forthcoming).
- 5 *HM* 16 (1905), 33.
- 6 On the Society for the Repression of Quackery (SRQ), see Gerrit van Vegchel, *Medici contra kwakzalvers. De strijd tegen niet-orthodoxe geneeswijzen in Nederland in de 19e en 20e eeuw* (Amsterdam, 1991).
- 7 'Homoeopathie', *Maandblad tegen de Kwakzalverij (MtK)* 5, 2 (1885), [1–2].
- 8 '50 jaren van ongelijken strijd', *HM* 42 (1931), 1.
- 9 *MtK* 48, 8 (1928), [3–4].
- 10 Rijksarchief Zuid-Holland (RAZH), Arrondissementsrechtbank (district court) Rotterdam, inv. nos. 331 and 475, no. 425, deposition 11 May 1905 and sentence 25 May 1905.
- 11 Rijksarchief Noord-Holland (RANH), Arrondissementsrechtbank Amsterdam, inv. nos. 48 and 74, no. 458, deposition 23 February 1932 and sentence 8 March 1932.
- 12 RANH, Arrondissementsrechtbank Amsterdam, inv. nos. 48 and 74, no. 456, deposition 23 February 1932 and sentence 8 March 1932. Caiaphas, the high priest from Matt. 26:3, 57.
- 13 RAZH, Arrondissementsrechtbank Rotterdam, inv. no. 580, no. 1460, sentence 15 August 1919; inv. no. 632, no. 605, sentence 30 December 1924; inv. no. 661, nos. 617–19, sentence 30 December 1930.
- 14 Rijksarchief Gelderland (RAG), Kantongerecht Nijmegen, inv. no. 281, no. 783, sentence 25 May 1906.
- 15 *MtK* 27, 10 (1907), [2].
- 16 Rijksarchief Utrecht (RAU), Kantongerecht Utrecht, inv. nos. 1609, nos. 3213 and 3387, sentence 3 December 1915 and confirmation sentence 24 December 1915; Arrondissementsrechtbank Utrecht, inv. nos. 196 and 271, no. 93, deposition 14 February 1916 and sentence 21 February 1916. Algemeen Rijksarchief (ARA), Hoge Raad, inv. no. 311, no. 248, judgement 29 May 1916.
- 17 *MtK* 36, 12 (1916), [2].

- 18 HM 39, 10 (1928), 83–85. See also RAU, Arrondissementsrechtbank Utrecht, inv. no. 596, documents concerning Rudolph Haverhoek's bankruptcy, 30 November 1927. Haverhoek's assets amounted to just over 15,000 guilders, his debt was over 26,000 guilders. Haverhoek's car (make 'Paige') was sold for 3,500 guilders.
- 19 RAU, Kantongerecht Utrecht, inv. no. 300, no. 155, sentence 22 February 1927. ARA, Hoge Raad, inv. no. 431, no. 177, judgement 12 March 1928.
- 20 RAZH, Kantongerecht Den Haag, inv. no. 1270, no. 11556, deposition and sentence 29 November 1928; Arrondissementsrechtbank Den Haag, inv. no. 625, nos. 391–92, sentence 7 February 1929. ARA, Hoge Raad, inv. no. 433, no. 32561, judgement 3 June 1929.
- 21 MtK 49, 11 (1929), [1]. RAZH, Arrondissementsrechtbank Den Haag, inv. no. 633, no. 478, sentence 6 March 1930.
- 22 RANH, Arrondissementsrechtbank Amsterdam, inv. no. 47, no. 540, deposition 10 March 1931.
- 23 RAZH, Arrondissementsrechtbank Rotterdam, inv. no. 580, no. 1460, sentence 15 August 1919.
- 24 MtK 44, 11 (1924), [2].
- 25 RAZH, Kantongerecht Rotterdam, inv. no. 261, nos. 8839a and 10133, deposition and sentences 30 November 1924.
- 26 RAZH, Arrondissementsrechtbank Rotterdam, inv. no. 657, no. 594, sentence 12 November 1929. See also MtK 49, 6 (1929), [2–4] and 49, 11 (1929), [1].
- 27 An unskilled worker would have earned about 30 guilders per week.
- 28 On early developments in Amsterdam, see HM 13 (1902), 55.
- 29 Everard E. Gewin, 'De kring van aanhang der homoeopathie', *Stemmen des tijds* 15 (1926), 341–51.
- 30 RAU, Kantongerecht Utrecht, inv. no. 1453, no. 2494, sentence 28 November 1900. Advertisement of 19 March 1900.
- 31 RAU, Kantongerecht Utrecht, inv. no. 1467, no. 3778, sentence 3 December 1901.
- 32 RAU, Kantongerecht Utrecht, inv. no. 1467, no. 3778, sentence 3 December 1901.
- 33 RAU, Kantongerecht Utrecht, inv. no. 1466, no. 2475, sentence 22 November 1901; Arrondissementsrechtbank Utrecht, inv. no. 50, no. 21, sentence 6 January 1902.
- 34 RAU, Kantongerecht Utrecht, inv. no. 1505, no. 4599, sentence 31 December 1905; Arrondissementsrechtbank Utrecht, inv. nos. 61 and 249, no. 116, deposition 2 February 1905 and sentence 9 February 1905.
- 35 RAZH, Arrondissementsrechtbank Rotterdam, inv. nos. 331 and 475, no. 425, deposition 11 May 1905 and sentence 25 May 1905.

- 36 RANH, Arrondissementsrechtbank Amsterdam, inv. nos. 47 and 66, no. 540, deposition 10 March 1931 and sentence 24 March 1931. Unfortunately no copy of the booklet could be found. A similar booklet was also distributed in Utrecht, see HM 39, 10 (1928), 83–85.
- 37 RAZH, Kantongerecht Rotterdam, inv. no. 423, no. 3221a, sentence 27 April 1923.
- 38 Rijksarchief Noord-Brabant (RANB), Arrondissementsrechtbank, inv. nos. 722 and 651, no. 8383, deposition 2 February 1928 and sentence 16 February 1928.
- 39 Rijksarchief Zeeland (RAZ), Arrondissementsrechtbank Middelburg, inv. nos. 143 and 321, no. 518, deposition 12 November 1930 and sentence 26 November 1930. Unfortunately no copy of the attestensboekje could be found.
- 40 RAZH, Arrondissementsrechtbank Rotterdam, inv. no. 661, nos. 617–19, sentences 30 December 1930.
- 41 RANH, Arrondissementsrechtbank Amsterdam, inv. no. 48, no. 457, sentence 23 February 1932.
- 42 Willem de Blécourt, *Het Amazonenleger. Irreguliere genezeressen in Nederland, c.1850–1930* (Amsterdam, 1999), 141–43.
- 43 RAU, Kantongerecht Utrecht, inv. no. 1467, no. 3778, sentence 3 December 1901.
- 44 RAZH, Arrondissementsrechtbank Rotterdam, inv. nos. 331 and 475, no. 425, deposition 11 May 1905 and sentence 25 May 1905.
- 45 RANH, Arrondissementsrechtbank Amsterdam, inv. no. 48, no. 456, deposition 23 February 1932.
- 46 It is not mentioned who assisted her.
- 47 RAZH, Kantongerecht Rotterdam, inv. no. 261, no. 8839a, sentence 30 September 1924.
- 48 RANH, Arrondissementsrechtbank Haarlem, inv. no. 156, no. 307, deposition 21 April 1927.
- 49 RANH, Arrondissementsrechtbank Haarlem, inv. no. 156, no. 585, deposition 15 September 1927.
- 50 RANH, Arrondissementsrechtbank Haarlem, inv. no. 156, no. 307, deposition 21 April 1927.
- 51 RANH, Arrondissementsrechtbank Haarlem, inv. no. 156, no. 585, deposition 15 September 1927.
- 52 RANB, Arrondissementsrechtbank 's-Hertogenbosch, inv. no. 722, no. 8383, deposition 2 February 1928.
- 53 Rijksarchief Overijssel, Arrondissementsrechtbank Zwolle, inv. no. 938, no. 361, sentence 5 July 1928.
- 54 ARA, Hoge Raad, inv. no. 432, no. 32121, judgement 29 October 1928.

- 55 RAU, Kantongerecht Utrecht, inv. no. 1775, no. 3098, deposition and sentence 31 October 1928.
- 56 RAZH, Arrondissementsrechtbank Rotterdam, inv. no. 661, no. 618, sentence 30 December 1930.
- 57 *MtK* 51, 2 (1931), [4].
- 58 RAZ, Arrondissementsrechtbank Middelburg, inv. no. 321, no. 518, sentence 26 September 1930.
- 59 See also Eberhard Wolff, 'Perspectives on Patients' History: Methodological Considerations on the Example of Recent German-Speaking Literature', *Canadian Bulletin of Medical History* 15 (1998), 207–28.

