BONESETTING - RECOLLECTIONS OF A DYING GIFT

Robin Bywater ©

We are pleased to have been given the opportunity to publish this interesting paper by one of our members.

After qualifying as a vet (1964) and a period in general practice, Robin Bywater (BVMS, PhD) became staff member at the Department of Veterinary Pharmacology of the Faculty of Veterinary Medicine, Edinburgh University. He later occupied several leading R&D positions, most recently with Pfizer as Director of Scientific Affairs. During his career he was closely involved in the development of oral rehydration therapy and of veterinary antimicrobials, and was presented with a Lifetime Achievement Award by the European Association of Veterinary Pharmacology and Therapeutics. He is now an independent consultant on Animal Health issues especially related to antimicrobial agents.

‘Bonesetters’ are people with a particular skill or gift for joint manipulation. They resemble chiropractors but without the training, qualifications, and waiting rooms furnished with models of the spine. Particularly in a rural community where farming was physically stressful, bonesetters were in the past the first port of call for the many fractures, dislocations and strains associated with farm life. For these joint problems, bonesetters often inspired greater confidence than did qualified doctors who, until recent years, furiously denounced the work of their unqualified competitors yet were themselves singularly ineffective in treating joint and pain. To this day the ‘bad back’ remains difficult to treat for the average GP and many back problems remain poorly understood. It was therefore no surprise that many people used the services of untrained but gifted bonesetters, if only for the good reason that the treatment appeared to work.

In this area, two well-known bonesetters were Jim Bywater of the Heath Farm and Ruth James of Firney (see photos on page 2). These were my father and sister respectively, so I have seen the practice of bonesetting at close quarters – although I personally have no apparent aptitude. In this short account, I aim to describe what I have seen of bonesetting, particularly in the context of childhood on a Shropshire farm. In addition, I will mention how the gift has appeared sporadically in past generations of the family, speculate as to how bonesetting produces relief from pain, and add a few thoughts about its future.

Bonesetting at the Heath

The Heath Farm in the 1940s and 50s was a typical mid-sized mixed farm of 360 acres, being then part of the Ripley estate. Activities included a herd of single-suckled Herefords, cattle in yards being fattened over winter, and a breeding flock of 200 or so ewes. In addition there were 60 acres of corn and swardy fields of swedes, rape, kate etc needed to support the stock. Below right is a watercolour of the Heath Farm painted in 1943, while to the left is a photograph of the farm as it is today from the same vantage point.

We produced (and sold) milk in distinctly primitive conditions. The cowshed consisted of a standing for some 10-12 cows, chained in front of a manger with hay rack above and corridor behind. The shortcomings of the accommodation

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were numerous. The roof of the cowshed consisted not of a solid structure, but of cross timbers rather randomly covered with a layer of ancient hay forming the floor of the loft above. This hay hung down between the joists and was laden with dust accumulated over many yeas. Needless to say, dust and debris fell into the bucket during hand milking. There was no water supply to the cowshed, and drainage consisted of a hole in the wall to help access to the manure heap (accurately depicted in the painting on page 1) nicely placed in front of the house. Processing of the milk consisted of straining it through muslin directly into the churn before being sent for sale to the Milk Marketing Board.

Leading from the cowshed was a windowless cell or 'calf-skit' into which calves were removed shortly after birth. This was the scene of many dying calves, since it seemed ideally placed to challenge them with bacteria accumulated over many past generations of calf rearing. The frustrating experience of watching calves die rapidly and regularly of the dreaded 'calf scours' was a factor in the choice of research I was later to follow. Commercial milk production ceased in due course but only when tuberculin testing was introduced, which found that several of the cows were reactors and that the facilities were certainly not up to the standard required under the new regulations. No surprises there!

The farm with its pre-war methods was an ideal environment in which to grow up. Rabbits may have been a scourge, but in the pre-myxomatosis days, they gave excellent sport, whether ferreting, shooting (air-rifle, much disliked by Hatfield the keeper, who remained convinced that his beloved pheasants were also in our sights), or on the harvest field waiting to chase the rabbits leaving their ever-decreasing refuge as the binder circled the remaining corn.

An ever present part of life at the Heath was the flow of people suffering from joint and muscle problems, or even people paralysed by past accidents. As father's reputation grew, so the impact on our lives also grew. The phone rang constantly, although the booking system usually referred to luncheon time on a particular day, or 'Sunday afternoon between two and four'. This latter booking time was the one when father could be relied on to be around, and led to cars filling the yard in front of the house from mid-day onwards, and to queues down the drive to the main road. Waiting times were proportionally long. However, the prospective patients were entertained by my sister Sally, who would work her way along the queue of cars and talk entertainingly to one and all. She still does, which goes well with her job as Senior Practice Nurse in the Porteullos surgery in Ludlow.

Father's reputation spread around the Welsh border region at a time when human medicine was very antagonistic to bonetters, and even to the whole principle of manipulation as an approach to joint and back problems, which generally were (and are) not very well treated. This was highlighted in a story recounted to me very recently by the daughter of the person involved. Her father had been knocked down by, of all things an ambulance, and spent some months in Hereford Hospital. Despite this long stay he remained unable to move his shoulder properly, and became disillusioned by the chance that medicine could help that problem. As he left the hospital he grabbed his startled consultant with these parting words: "I see more cripples leaving this place than I seen coming in, but I know a bloke near Bucknell who will put me right!". The next day a dislocated collarbone was fixed and the normal movement returned immediately. I have heard many such tales over the years, and saw a number myself.

We even had our celebrity patients: Mr Moreland, founder of England's Glory matches, tottering up the garden path with a package dangling from the string he held in his hand to be greeted with great anticipation - surely something for us children? - it was after all a lager box ... of matches. Then there was Mr Jensen, of Jensen cars. His visit was made worthwhile by his impressive sports car. But by far the most profitable from our point of view was Cyril Mills of Berrnam Mills Circus. His contribution was tickets for the circus which was playing in Hereford. Now that was memorable!

In addition to seeing patients at the Heath, father would take a room in a pub on the weekly market day in Ludlow and in Knighton. This was convenient for the patients - but also for father, being a legitimate reason for his favourite environment, the pub. Sadly, too many patients would insist on buying him a drink ... or three. Father was a fine bonetter but, as suggested, was an even better socialiser. However, it was a shock to family and community when his liver gave up the unequal struggle in 1956 when he was aged just 48.

Following his death we were obliged to leave the Heath as our tenancy lapsed and Sir Hugh Ripley decided to take over the farm, install a manager and farm it himself. In his memoirs, he referred to taking on 'this rather neglected and run-down farm' [Witsley for Tea: Hugh Ripley, The Book Guild 1991]. The description was probably accurate, but the neglect was largely the result of the estate being chronically short of funds.

Leaving a farm is never an easy process, and neither was it for us. Ruth the eldest of the family had already left home, and brother John had set out on his medicine course. Later as a GP, he was to do some manipulation especially having qualified at St Thomas', which was fortuitously the first medical school to recognise the benefit of this approach. But John (who died in 2003) never claimed to have the family gift and would refer difficult back-pain cases to sister Ruth. For me the departure from the Heath meant a change of plan, from a future in farming to one in veterinary medicine and research. It is a change which in retrospect leaves me with no regrets, but more than a passing interest in the rapidly changing face of Heath Farm - the scene, for me, of what might have been, had father lived for a few more years. Under the then tenancy regulations, I would have had a good case for retaining the tenancy.
Bonesetting at Firney – Ruth James

How does bonesetting work?

The mechanism by which a bonesetter achieves results is not always obvious. Undoubtedly many of the back pain cases were a result of prolapsed intervertebral disc. These are lodged deep in the back between the vertebrae and surely too far away to be able to be affected by the thumb pressure on the surface. So what is going on when these cases show improvement, sometimes quite spectacularly? I believe that the thumb is removing pressure from ligaments and from tense muscle bands pressing onto adjacent nerves, or even stimulating the inhibitory nerves which reduce pain (acupuncture may well work in this way). Otherwise it is hard to see how a prolapsed disc can be affected directly.

Dislocations and fractures of limb joints are much easier to explain being, apparently, the result of the bonesetter’s ability to recognise the misalignment and, through suitable manipulation, to correct it. Fractures were traditionally part of the bonesetter’s work and bones were aligned as best they could be without x-rays and fixed using splints. I experienced this process at the age of four when, having fallen in front of a galloping pony, I suffered a fracture of my leg above the ankle. No doctor was called, no ambulance arrived, no casualty department was approached. Father did not feel that he wished to have the responsibility alone, so he summoned Caleb Drew, a distant cousin, also a farmer, also a bonesetter. Together they straightened the leg, fixed it with splints and consigned me to bed for two to three weeks. Looking back it is not clear whether keeping this ‘in-house’ was a reflection of limited confidence in the hospital, overwhelming faith in father, or a need to avoid the fees involved in the pre-Health Service era – this was 1945. Anyway, the outcome was very successful with no shortening or distortion of the leg.

When Ruth was asked how she was able to achieve the effects she produced, she would shrug and say “nothing to do with me, dear. I am just a tool. I do feel a sort of energy going down to my hands and it does leave me feeling very tired”. This does raise the question of faith healing, and whether there is a non-physical aspect to what is happening when bonesetters work. There is certainly good evidence that confidence in the practitioner (a feature of many of the patients visiting either Ruth or father) increases the chances of a positive outcome in almost any treatment medicine has to offer. On the other hand, where manipulation is carried out on animal patients, as I saw on many occasions in childhood, any cure can hardly be said to be psychological in origin. And cures there were! While it is not at all clear exactly how bonesetters achieve their results (beyond the physical correction of dislocations), what I can say having been close to the process over the years is that it does work and occasionally spectacularly so.

The Lloyd family – source of the gift

Bonesetting in my family came through my maternal grandmother whose maiden name was Lloyd. In each generation of the Lloyd family there has been at least one, and sometimes several individuals, who appear to have a gift for joint manipulation. Interestingly they appear to use varying techniques to correct what they recognise as an abnormality. Thus father and sister Ruth when fixing a back problem, would use thumb pressure to achieve treatment. Father’s second cousin Eddie Drew, another bonesetting farmer, used a quite different technique reportedly involving seizing the patients from behind and shaking them vig-
A website (www.Lloydsofbaynham.com) has been set up to follow the family tree and features members of the family as far back as the late 1700s. In the detailed descriptions of each recorded member is a reference to their profession. Many were described as ‘farmer’ but a surprising number were defined as ‘bonesetter’. In total these amounted to 55 names on the family tree whose description included the term ‘bonesetter’. Moreover, the list is clearly incomplete since it excludes both Jim Bywater and Ruth James, suggesting that the true total is even greater.

A widely known family member was ‘Silver John’ Lloyd, who has entered Radnorshire folklore. The website gives more details, summarised below:

‘Silver John’ Lloyd. This unfortunate individual was born in the late 18th century and lived on the border of Herefordshire and Radnorshire. He became adept at setting and splinting broken bones in his sheep flock and in treating dislocations as they occurred. The story goes that one day he was asked to set a broken leg for a neighbour’s son, which he did very effectively. For this he was given a silver button by the grateful neighbour. Subsequently he became well-known in the area and his skill earned him many silver buttons and other small silver ornaments. The buttons and buckles were worn on his cloak which became heavy with the burden. Understandably this cloak was only worn on high days and holidays or when John was selling his sheep at Builth market. On the day of the Michaelmas fair, he set out aboard his horse and cart wearing the cloak with its cargo of silver. The horse and cart arrived but he did not. Neither was there any sign of him until later, during a severe frost, a girl skating on the icy pond outside the Forest Inn looked down and saw, staring up at her through the ice ... the body of Silver John. His cloak had been stripped bare.

Bonesetting in the 21st century

It is an open question whether bonesetters will emerge in the present or future generations of Lloyd descendants, although personally I rather doubt it. There is so far no sign of a talent emerging among younger Bywaters or their cousins. Nor is this very surprising. Past generations were predominantly farmers, where hands-on treatment of animals or humans was normal and necessary — the avoidance of veterinary or doctor’s bills would have been reason enough. Only a minority of the present young generation are close to the land and in many cases are not even aware that a family gift exists. It may be that this accessible, logical and popular alternative therapy may die out and that gifted individuals may never even recognise what they have inherited. This would be sad because, however they achieve their results, bonesetters really do have something special, and if such gifts are neglected or never even recognised in our rapidly changing society, then we will be the losers.

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