

Transcription of report on the various methods of force feeding

I saw Dr Smalley, the Medical Inspector who has dealt with several of the English cases at e.g. at Newcastle, Birmingham and Bristol. The comments on Sir T. Fraser's memo which his recent experience suggested were solely on matters of detail. In general he fully agreed with the memo.

(1) He agreed in thinking the nasal method preferable in general. Where however the artificial feeding is likely to be necessary for a long period owing to the length of sentence and the prisoner's probably obduracy there are advantages in the "oesophageal catheter" method because more nourishing food (e.g. finely chopped meat) can be applied by this method.

(2) He had found it easier to conduct the operation with the person in a sitting position. Four persons may then suffice as operators.

(3) He said that resistance usually became less on the occasion after the first. Often the woman seemed only to be resisting for her "credit's sake" and in fear of reproaches from the Society if she did not bear herself valiantly; and reputation could be maintained without displaying great violence.

(4) As to the form of the document to be issued to prison officials he suggested it should not take too definitely the shape of an "order". "Orders" are apt to be literally obeyed and if anything goes wrong the man concerned is apt to say that it was not in the orders, whereas the artificial feeding is a subject which all well-informed medical men ought to understand without special instructions and moreover a professional man in such circumstances must exercise discretion and may be confronted by unexpected occurrences. Therefore Dr Smalley suggested that the information should be sent to the prison medical officers rather in the form of a document summarising the accepted practice and suggesting that it be followed in general. But attention might with advantage be called to the M[edical] O[fficer]'s responsibility for exercising his own intelligence and discretion in particular cases.

(5) He argued as to time of starting i.e. as soon as possible after 48 hours.

(6) It is scarcely necessary to add that in the first and subsequent occasions the woman should always be given a chance of "going quietly" by being offered food before artificial feeding begins

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