

Why the French Riviera became the place to be for English pharmacists

In this article, **Stuart Anderson** describes the background to the annual migration of affluent Victorians to the French Riviera and the life and work of the English pharmacists who went with them

The “French Riviera” describes the eastern end of the Côte d’Azur, stretching from Cannes in the west to Menton, near the Italian border, in the east. Nice is between the two. Other resorts include Juan les Pins, Villefranche-sur-Mer, Monaco and Monte Carlo.

The English love affair with the French Riviera dates back at least to the middle of the 18th century. Originally, Italy was the focus of the Grand Tour but, as relations with France improved, the virtues of the French Riviera became better known.

The English and the French Riviera

By 1755 the first trickle of English aristocrats had already discovered the sunny charms of a Riviera winter. Tobias Smollett, a doctor and novelist, spent a year in Nice in 1763 and in 1766 he published a book called ‘Travels through France and Italy,’ describing his experiences.¹ It was an instant success, not only among the aristocracy but also among the increasing numbers of the well-off middle-class travellers who were reaping the benefits of capitalism and colonialism.

Smollett’s book made the eastern Côte d’Azur irresistible to the British. By 1787, there were enough British citizens spending their winters in Nice to support a casino, an English theatre, an estate agent and a newspaper. In 1830, when a frost killed all the orange trees, the English community raised funds to give jobs to the unemployed. Funds were used to build a seafront promenade, which is still known as “la Promenade des Anglais”. Part of its purpose was to keep delicate English girls away from the rough local boys, a function which it patently failed to achieve.²

The 1830s saw a number of developments in the flow of English to the south of France. The arrival of the railway greatly reduced journey times. The rapid progress of the industrial revolution meant that a new group — les nouveaux riches — could afford to winter abroad. Other resorts developed along the eastern end of the Côte d’Azur and elsewhere in southern France, such as Biarritz. Initially, the normal arrangement was to rent a villa for the season but, with increasing numbers of visitors,

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a number of high class hotels began to open and staying at a hotel became the pattern in the later decades of the 19th century.

Those renting villas were following the example of an English aristocrat. In 1834, the 3,000 or so fishermen and farmers of the village of Cannes were going about their business when Lord Brougham, who had recently retired as Lord Chancellor, checked into its one and only hotel with his sick daughter. They were stuck in the village because a cholera epidemic in France had closed the border with Savoy, now part of Italy. As they waited for the epidemic to pass, Lord Brougham was so taken with the climate and the scenery that he built a villa there and began to spend every winter in the south of France. Naturally, Lord Brougham shared his enthusiasm with his friends and acquaintances back home and, before long, substantial numbers of them followed his lead and built their own villas nearby.³

The journey to the south of France was a major undertaking in itself. Before the railway arrived, it took at least two weeks to reach Nice from Calais. But the railway was eventually extended to Nice in 1861, which became the favoured resort for both the English and Russian elites — by 1890 some 20,000 of them were spending their winters there. Only 20 years later the number of foreigners had increased to over 150,000 each winter.

Among the regular visitors to the Riviera was Silas Burroughs, who had set up the pharmaceutical business of Burroughs Wellcome in 1878 with his friend Henry Wellcome. In fact, Burroughs died suddenly in Monte Carlo in February 1895, aged only 48, after he had contracted pneumonia. His grave can be seen in Monte Carlo today.⁴

Queen Victoria and the Riviera

Queen Victoria paid her first visit to France in 1843. This was her first trip abroad. She and Prince Albert stayed at the Chateau d’Eu with King Louis-Phillippe. But the King was forced to abdicate in 1848 and it was another seven years before Victoria and Albert visited France again. This time they were welcomed by the Emperor Napoleon III and the Empress Eugenie. It was the first visit to Paris by an English monarch since Henry VI was crowned King of France in 1431.⁵

This second visit made a great impression on the Queen, but it was another 26 years before she considered visiting France again. By this time the Riviera was becoming fashionable with the English. In 1879 she accepted the offer of an Englishman, Charles Henfrey, to make use of his villa at Baverno on Lake Maggiore in Northern Italy. Henfrey had made a fortune building railways in India and Italy. The Queen greatly enjoyed this holiday, and when Henfrey offered her the use of his house at Menton, she gladly accepted.

One of the reasons Queen Victoria went to Menton was to be with her son, Prince Leopold, who suffered from haemophilia. The Queen arrived at Menton for the first time in March 1882. She was 62 years old, and had been on the throne for 45 years. She was welcomed with brass bands and cheering crowds. This was to be the first of nine visits to the Riviera, each lasting up to two months, staying at a number of different resorts. In 1887 the Queen stayed in the Villa Edelweiss in Cannes, but later visits were to the relative quiet of the suburb of Cimiez in Nice. Prince Leopold is credited with having introduced croquet to Nice, where he died in 1884. The Queen went to Cannes in 1887 as a direct

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View of Cannes from the Villa Edelweiss, where the Queen stayed in 1887. She disapproved of Cannes where the Prince of Wales engaged in his womanising but went there because of Prince Leopold

result of Prince Leopold's death. She wanted to see the Villa Nevada where he had died and the Church of St George that had been built in his memory.

The Queen's last visit to the Riviera was in 1899 when she was aged 79. She had planned to go again in 1900, but this visit was cancelled because of the outbreak of the Boer War in October 1899.

Medical services on the Riviera

One of the main reasons why the Queen and other foreigners visited the Riviera was for their health. Menton had been heavily promoted as a health resort by the president of its medical society, Dr James Bennet. Dr Bennet had tuberculosis and, in 1859, he went to Menton "to die in a quiet corner, like a wounded denizen of the forest". To his surprise, his condition rapidly improved.

Many health benefits were attributed to the effects of winter sunshine. Bennet kept careful meteorological records. He soon discovered that the Riviera was not "a land of perpetual spring or eternal summer", but what he also found was that the relentless progression of tuberculosis might be slowed, life could be prolonged and even cure could be effected if the patient could winter in the south. Bennet's proof was that he was surrounded in Menton by "a phalanx of cured and arrested consumption cases".

Those requiring medical attention could rely on the attention of a visiting English physician or perhaps an English-speaking French doctor. The influx of so many well-heeled but infirm English families attracted

large numbers of English doctors to attend to them.⁶ Menton alone had no fewer than 50 English doctors. Across the Riviera there would have been several hundred.

Pharmacy services on the Riviera

For less serious matters, or to have a prescription dispensed, a visit to a pharmacy was required. By law, these were owned and managed by French pharmacists, many of whom had little command of English. The answer was to employ competent English assistant pharmacists who had at least a basic fluency in French. As with the doctors a not insignificant proportion of the pharmaceutical register was engaged on overseas duties during the late Victorian period.

The posts were normally described as "dispensers". Suitable candidates were recruited through an agent based in London, who advertised appropriate opportunities in *The Pharmaceutical Journal and Transactions*. Suitable applicants needed not only to be registered as pharmaceutical chemists with the Pharmaceutical Society of Great Britain, but also to be good salesmen so that they served well behind the counter. Good salaries and working conditions were offered, and passage was invariably paid. This was an attractive option and it is clear that a substantial number of pharmacists took it up. For many, the annual visit to the south of France became a regular event. MacEwan's 'Art of Dispensing' of 1900 records that: "It is now becoming a regular custom with English assistants, at least to the number of about a hundred, yearly to go to the south of France for the winter season, and

many later on endeavour to get into a Parisian pharmacy."⁷

The duties of the English pharmacist

Life on the Riviera for the visiting Victorians was as ordered and regimented as it was at home. The English day began with breakfast, was followed by a morning stroll, before returning to the hotel to attend to correspondence. Then it was time for lunch, followed by an afternoon stroll and five o'clock tea. Other afternoon activities might include some gentle shopping, or listening to a concert at the bandstand.⁸

The English rarely ventured into "foreign" shops, relying almost exclusively on familiar products imported from England. Every conceivable need was met by an influx, in substantial numbers, of the relevant trade or profession. The English imported nurses and ladies' maids, gardeners and grocers, lawyers and estate agents and, of course, pharmacists.

The working day of the English pharmacist was also ordered and disciplined. Duties were generally confined to attending to American and English customers and dispensing their prescriptions. The life of the English pharmacist on the Riviera has been described by one of them: "Our pharmacy is large and well-arranged. The garçons do all the dusting and look after the place from about six till eight in the morning, when we make an appearance. 'We' includes a German, a Swiss and myself. I attend to the English and Americans, and they see to the others. Each alternate Sunday I am on duty all day, except three hours for meals. On week-days we are

External view of a French pharmacy, 1905

on duty alternately till seven and ten, or half-past nine. We have an hour and a half for lunch at twelve o'clock, and the same for dinner at seven."⁷

Accommodation was provided with the job: "We sleep in, but board out, and many of us go to the same restaurant, where, for 90 francs a month, we eat, drink, and make merry."⁷

Although the pharmacies were owned and managed by French pharmacists, the English pharmacists felt completely at home in them. One of them has described what pharmacies were like: "English patent medicines are greatly in evidence. We have separate English labels for many of our specialties, and of course for dispensing. In fact, we have so many English things about on the counter and elsewhere that our customers remark on its being quite like an English chemist's shop. We have English weights and scales and measures and, in fact, everything there should be in a well-appointed pharmacy."⁷

The often elderly or infirm nature of the clientele, particularly those suffering from tuberculosis, meant that there was a need for substantial quantities of oxygen to assist with breathing problems. This was manufactured within the pharmacy, although the method used appears somewhat Heath-Robinson: "Oxygen is in great demand for chest and throat troubles. We make it ourselves from potassium chlorate and manganese, store it in

a small gasometer, and retail it in India rubber bags."⁷

Impact on pharmacy in Britain

The loss of considerable numbers of experienced dispensers to the Riviera might, reasonably, have been of concern to employers back in Britain. But experience of this kind appears to have been supported and encouraged by the English pharmaceutical establishment of the time. MacEwan expressed the prevailing view in 1900: "This sort of practice initiates the English assistant thoroughly into French methods, he gets his French brushed up, and then if he requires a better insight into French pharmacy he may endeavour to get into an establishment which is pure French, or where he will have a share of all the dispensing done. The experience is worth getting, especially as a finish-off to pharmaceutical studies, and after experience in a good English, Irish, or Scotch dispensing house."⁷

On Queen Victoria's death in 1901 the throne was taken by her eldest son Prince Edward. So began the Edwardian era. But the early years of the 20th century were the heyday for leisure, travel and adventure among the English upper classes. Many thousands continued to spend the winter months in the south of France. The Edwardian age officially came to an end in 1910, with the death of Edward VII, and his succession by George V. But the "finish-off to pharmaceutical stud-

ies"⁷ available on the French Riviera was to come to an abrupt end with the outbreak of the Great War, during which many of those who had enjoyed a taste of continental life returned there for a different purpose.

Young pharmacists taking a gap year at the beginning of the 21st century, particularly those gaining pharmaceutical experience in other countries, follow in the footsteps of their pioneering predecessors from the late Victorian period. This article also illustrates that the increased mobility of medical labour within the European Union that we are seeing today had a precedent at the beginning of the 20th century.

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