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The Criminal Corpse, Anatomists and the Criminal Law: Parliamentary Attempts to Extend the Dissection of Offenders in Late Eighteenth-Century England

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Abstract

In the later eighteenth century two schemes were introduced in Parliament for extending the practice of handing over the bodies of executed offenders to anatomists for dissection. Both measures were motivated by the needs of anatomy — including the improvement of surgical skill, the development of medical teaching in the provinces, and for conducting public anatomical demonstrations. Yet both failed to pass into law due to concerns about the possibly damaging effects in terms of criminal justice. Through a detailed analysis of the origins and progress of these two parliamentary measures — a moment when the competing claims of anatomy and criminal justice vied for supremacy over the criminal corpse — the following article sheds light on judicial attitudes to dissection as a method of punishment and adds to our understanding of why the dread of dissection would come to fall upon the dead poor (rather than executed offenders) in the nineteenth century.

INTRODUCTION

On Friday, 12 May 1786, the distinguished philanthropist and social reformer, William Wilberforce, stood up before the House of Commons. It was his intention, he announced, to introduce a bill for extending the practice of handing over the bodies of executed offenders to anatomists for dissection — not just those convicted of murder (as was already sanctioned by law), but also those condemned for a host of other capital crimes, namely high treason, rape, arson, burglary and highway robbery.¹ “This notice, from the contrast it exhibited to the subjects which were just before discussed,” commented the *Public Advertiser*, “excited the risibility of the House in a very great degree.”² Having passed through the Commons, Wilberforce’s “Dissection of Convicts Bill” (as it will hereafter be referred to) was ultimately thrown out following heavy criticism in the House of Lords. Yet just ten years later, in March 1796, the backbench MP Richard Jodrell similarly put it to Parliament that a bill be introduced for punishing criminals executed for burglary and highway robbery with anatomization and dissection.³ In this instance the motion was immediately dropped following widespread opposition from MPs in the Commons. As will be shown, both these legislative efforts in the later eighteenth century to extend the practice of dissecting offenders were decisively motivated by the needs of medical science, yet each failed to reach the statute books due to concerns about the damaging effects the measures would have in terms of criminal justice. Through a detailed examination of the events of 1786 and 1796, the following article aims to make a valuable addition to the historical narrative of body

supply and anatomy in the eighteenth and early nineteenth centuries first set out in detail by Ruth Richardson in her path-breaking work *Death, Dissection and the Destitute*, and in the process it aims to make a wider contribution to the history of medicine and the criminal law.⁴

Put very simply, that narrative is as follows. Since the time of Henry VIII's edict of 1540 which first granted the Company of Barber-Surgeons with the bodies of four criminals each year, executed offenders had constituted the sole legal supply of cadavers available to anatomists — and that supply limited to incorporated anatomists alone, not the far greater number of unincorporated anatomists at the mushrooming private hospitals who in the eighteenth century were increasingly taking on the bulk of anatomy teaching by hands-on experience of “practical anatomy”.⁵ Throughout the later seventeenth and early eighteenth centuries, both the Company of Barber-Surgeons (later known as the Company of Surgeons following their split from the Barbers in 1745) and the Royal College of Physicians went to great lengths to enforce these royal privileges, by prosecuting those rescuing bodies from the gallows; bribing the hangman; and giving money to the condemned for permission to take their bodies.⁶

The introduction of the Murder Act in 1752 — which first established dissection as a systematic punishment for convicted murderers — extended the supply of criminal bodies still further. Yet this supply proved far too small due to the rapid development of anatomy as a teaching method in the eighteenth century, resulting in a huge increase in the demand for bodies. Many anatomists therefore turned to illegal or at least illicit methods for securing cadavers — body-snatching especially — culminating in the infamous “Burking” scandals of the 1820s and 1830s.⁷ These horrifying events provided an important catalyst for the passage of the 1832 Anatomy Act, a seminal piece of legislation which (although the statute deliberately did not specify such institutions) effectively allowed anatomists to take the unclaimed bodies of those dying in workhouses, prisons, asylums and other institutions which were mostly inhabited by the poor.⁸ In Richardson's words, “what had for generations been a feared and hated punishment for murder became one for poverty.”⁹ The Act's powerful legacy was to instil a dread of dissection amongst the destitute which was to last well into the twentieth century. This narrative is crucial for any understanding of the development of anatomy and medical science in Britain over the last three hundred years or so.

Richardson's pioneering research and the work of numerous other scholars has revolved around the question of how and why this situation came to be. Attention has, however, largely focused on the role of body-snatching in the introduction of the Anatomy Act. This article instead concentrates on an important subject raised by Richardson which has not been so fully explored. As she points out, alternatives to the appropriation of the dead poor certainly existed. And though we know that these options were ultimately unsuccessful in deflecting the movement to make poverty subservient to anatomy, nevertheless the nature, feasibility and failure of those alternatives deserves examination.¹⁰ In order to fully understand why the dread of dissection came to rest upon the poor, we need to know why other options were not explored, and if they were explored, then why such alternatives failed to materialize. This article thus specifically focuses on the criminal corpse as a contested

medical object in the eighteenth and nineteenth centuries. The criminal body had long been appropriated for anatomy, although certainly not without controversy. The simple question therefore stands out: why was the dissection of criminals not more extensively exploited (in law at least) beyond executed murderers and the handful of bodies that were granted as privileges to a few chartered medical groups?

Although the subject of dissecting criminals has been given some brief attention, medical historians have not examined the efforts that were made in Parliament in the later eighteenth century to harness the criminal corpse for the ends of anatomy.¹¹ The attempts of 1786 and 1796 ultimately failed to produce new legislation due to concerns about the implications for the criminal law. Exploring why the schemes of 1786 and 1796 were dropped therefore also provides some important insights for criminal justice historians on attitudes to dissection as a penal measure, a subject which has so far received little attention. The hanging tree, and far less the dissection table, has been the end point for much of the voluminous work published on the history of capital punishment in England. In his monumental and otherwise excellent work on execution in the eighteenth and nineteenth centuries, V. A. C. Gatrell for instance makes only brief mention of dissection as a judicial punishment.¹² A number of works have discussed the introduction of the 1752 Murder Act, and Peter Linebaugh has provided an engaging analysis of the battles between the surgeons and the crowd over criminal bodies at the gallows.¹³ Yet we still have little understanding of the use, meanings and role of dissection within the English criminal justice system. An examination of the cases of 1786 and 1796 provides some insight into these issues.

We begin with a detailed discussion of Wilberforce's 1786 Dissection of Convicts Bill, from its origins and introduction through to the debates which it sparked in Parliament. Attention then turns to Jodrell's 1796 motion for the dissection of robbers and burglars, which has many similarities with the events a decade earlier. A final section then draws together some conclusions. In the later eighteenth and early nineteenth centuries there appears to have been broad support for putting the criminal corpse to greater use by extending the practice of dissecting offenders, although the motivations for such support were by means uniform, coming as it did from a wide range of groups including anatomists, politicians and the poor.¹⁴

Yet despite this support, the attempts made in Parliament to extend the practice of dissecting criminals were few in number and weak in nature. Far from anything like a concerted campaign, the efforts of 1786 and 1796 were ad-hoc and lacked a uniformity of purpose. In the first place, while some anatomists certainly viewed executed criminals as a useful source of bodies (which might be further exploited), others clearly had misgivings about the negative effects of their association with judicial punishment — an association which led to the denigration of anatomists as the “last finishers of the law”.¹⁵ Even more worryingly for the medical fraternity, insinuations were made that it was the surgeon's lancet and not the hangman's rope which truly put the condemned to death.¹⁶ The schemes of 1786 and 1796 might also be seen, as we will see, as something of an anomaly — a product as much of specific contexts and the actions of their progenitors as of broad-based agitation.

The later eighteenth century represents a particular moment when the competing (but on occasion, complementary) claims of anatomy and criminal justice vied for supremacy over the criminal corpse. The events of 1786 and 1796 give us a fascinating window into the power of medical and judicial interests within particular contexts, and provide an early instance of what was to be a recurrent theme within the development of medical science throughout the nineteenth century and beyond.

ORIGINS OF THE 1786 DISSECTION OF CONVICTS BILL: THE CONTEXT OF CRIME AND JUSTICE IN THE 1780s

Before going on to explore the origins of Wilberforce's 1786 Dissection of Convicts Bill in relation to matters of body supply and anatomy, it is first necessary to consider the context of crime and justice at the time of the Bill's introduction, for it had potentially serious implications for penal practice. It proposed to inflict one of the most severe punishments sanctioned by law, not only for murder, but also for some of the most common capital crimes, including burglary and highway robbery, as well as high treason, rape and arson. The Bill stipulated that "the body of each and every offender" tried and convicted of such crimes should be ordered by the judge, upon "application", to be "delivered by the sheriff... immediately after execution to such surgeon or surgeons so applying for the same", such surgeon being either a member of the Company of Surgeons or a member of staff at a hospital or infirmary (if the execution be in London), and to be selected by the judge or other proper legal authority (if the execution be in any other part of Great Britain).¹⁷ On average, around seventy extra criminals each year in Britain would be subjected to the shame, ignominy and horror of anatomization under the terms of the Bill.¹⁸ Few hanging crimes which regularly resulted in executions were beyond the proposed bounds of the scheme.¹⁹ In effect, the Bill proposed to turn death and dissection for capital crimes from the exception to the rule.

The 1786 Bill was also introduced at a time of serious concern about crime and amid growing doubts about the efficacy of the criminal law and the execution ritual as then put in practice. In the late 1770s, and especially following the end of war with America in the early 1780s, an overwhelming tidal wave of criminality seemed to be sweeping over the nation. In response, in September 1782 the government resolved that, without exception, no offenders convicted at the Old Bailey of burglaries or robberies attended with circumstances of cruelty should be pardoned.²⁰ Executions increased largely and rapidly as a result. In 1785, more offenders were hanged in London than at any time since the reign of the early Stuarts.²¹ Yet the number of prosecutions for serious offences (which contemporaries took as indicative of the level of 'real' crime) continued to grow. This combination of mass executions and a continually rising level of prosecutions led to frequent criticisms in the press that the policy of unwavering justice was not working, and that hangings were not having their intended deterrent effect. These criticisms fed into the wider calls for an amelioration of the capital code and a move towards milder, more certain modes of punishment which had been gaining momentum since the publication of Cesare Beccaria's *Of Crimes and Punishments* in 1767.

In short, the mid-1780s saw a greater attack on the traditional system of hanging and deterrence by terror than ever witnessed before. William Pitt the Younger and his

administration were not deaf to such criticisms, and by the summer of 1785, as Simon Devereaux explains, “the government was entertaining serious doubts about the practical value of a policy of enhanced and unswerving severity.”²² In the next five years there were signs that the government had abandoned its policy of mass executions, as the proportion of capital convicts who actually reached the gallows fell sharply (after 1787) and as the government began to explore alternative solutions to the crime problem. These included an emphasis on prevention; reform of the police; renegotiating poor relief and new approaches to vagrancy; transformations in the punishments meted out to convicted offenders; confining convicts to the hulks; and a desperate search for a replacement location for transportation, culminating in the first fleet to Botany Bay, Australia, in May 1787.²³

Wilberforce’s introduction of the Dissection of Convicts Bill seems therefore to have gone against the prevailing mood in the press and in the government in 1786. To be sure, amidst the calls for an amelioration of the capital code and for alternatives to hanging, proposals continued to be made on the contrary for more severe forms of punishment in order to stem the crime wave through deterrence by terror. In April 1785, for instance, commodore Edward Thompson — a keen supporter for establishing a penal colony on the West Coast of Africa — had suggested to Thomas Townshend, first Baron Sydney — then serving as Pitt’s Home Secretary and the government leader in the House of Lords — that

the many executions of late, and the increase of crimes and criminals, have so greatly alarmed society in general, that any mode which might be introduced to lessen the one and spare the other will be highly acceptable to the state and the nation. By a long attention to the last confessions of our malefactors, I have often discovered a greater solicitude about the body than the soul: and that they have always confessed more dread at the dissection of their dead bodies than any particular distress about the death on the gallows.²⁴

It was upon this belief that Thompson recommended ordering all executed offenders for dissection. This would also be a means, he added, “of leaving our dead friends at peace in their graves. For at present, for the want of subjects for the surgeons, there are not less than two bodies a day furnished by the resurrection men for dissection.”²⁵ Two months earlier, the *Times* had likewise suggested that a bill would soon be brought into Parliament directing that the bodies of all offenders executed for burglary should be given over for dissection (a motion which did not materialize).²⁶

Nevertheless, by 1786 it seems that the mood had shifted away from a belief in the efficacy of further examples of spectacular justice. It is unclear whether Wilberforce’s Bill effectively prevented the granting of pardons (and thus whether it would have led to more executions).²⁷ Some contemporaries certainly believed that it would. But whatever its potential impact upon the *quantity* of executions, the Bill undoubtedly proposed a powerful change to the *qualitative* nature of punishment. The Bill covered a large portion of the most common capital offences, and would have made aggravated forms of capital punishment the norm. England’s “Bloody Code” would, quite literally, be bloodier. The Bill also sits uneasily with what we know about Wilberforce’s own views on capital punishment. In 1787, just a year after his introduction of the Dissection of Convicts Bill, Wilberforce complained

that “the barbarous mode of hanging has been tried too long and with the success which might have been expected of it.”²⁸

Indeed, Wilberforce’s biographers have pointed to another clause of the 1786 Bill which they have taken as more consistent with his character as a humanitarian reformer.²⁹ For as well as stipulating the dissection of convicts, the 1786 Bill also proposed to abolish the punishment of burning at the stake for women convicted of high and petty treason.³⁰ But far from being Wilberforce’s primary motive, this clause had in fact been quickly tagged onto the Bill on 23 June 1786 — more than a month after the Bill (containing only the cause for the dissection of convicts) had been originally introduced in Parliament — in the wake of a public outcry surrounding the burning of Phoebe Harris outside Newgate for coining just two days previously.³¹ As Simon Devereaux has convincingly argued, whilst more enlightened and chivalrous attitudes towards women likely played a part in efforts to abolish the burning of women at this time, it was also crucially abetted by material circumstances such as concerns about the effects of conducting public punishments in the urban heart of the metropolis.³² Moreover, it seems that for some the issue was not that women in particular should be punished less severely than men, but rather that they should only be treated the same.³³ By the terms of Wilberforce’s Bill, whilst women convicted of petty treason were spared burning at the stake (in practice only carried out after the woman had first been strangled to death), they would now be liable to the same ignominious and horrifying punishment of dissection as were men.³⁴

Leaving aside the issue of what the 1786 Dissection of Convicts Bill reveals of Wilberforce as a humanitarian reformer, it is clear that the Bill was introduced at a moment of crisis about crime and capital punishment, and that it moreover had serious ramifications for penal practice. Yet as will now be argued, it was expressly not intended as a criminal justice measure. In terms of the Bill’s origins and introduction, it was clearly instigated with the needs of anatomists and anatomy in mind. The statutory intentions of Wilberforce’s 1786 Bill were medical, not judicial.

MOTIVATIONS BEHIND THE 1786 DISSECTION OF CONVICTS BILL: THE CRIMINAL CORPSE AS MEDICAL OBJECT

When introducing the scheme in Parliament, Wilberforce drew attention to “the extreme difficulty which surgeons experienced in procuring bodies for dissections, and the shocking custom of digging them up after burial.” The bodies snatched from graves were often in such a poor state, he also argued, “that their dissection had proved fatal to the anatomists themselves, and put an end to their lives, instead of contributing to lengthen the lives of others.”³⁵ In order to furnish the schools of anatomy with an adequate supply of bodies, Wilberforce believed there could be no objection to extending dissection to include traitors, rapists, arsonists, burglars and highway robbers. The Bill’s title is also suggestive: it was to be an act, “for regulating the disposal, after execution, of the bodies of criminals executed for certain heinous offences.” The title therefore made no reference to the Bill as a means of preventing crime or increasing the terrors of the law, as had been the case with the 1752 Murder Act, which was intended (as the preamble to the statute stated) to “better prevent the horrid crime of murder” by adding “some further terror and peculiar mark of infamy to the

punishment of death, now by law inflicted on such as shall be guilty of the said heinous offence.”³⁶

It was instead with an attention to the needs of anatomists and anatomy that Wilberforce (and perhaps also the government) promoted an extension to the practice of dissecting executed offenders. As will now be shown, surviving records also allow us to delve even deeper into the motivations behind the 1786 Bill, providing us with some initial clues as to why anatomists themselves might have welcomed such a measure. For although it was Wilberforce who introduced the Dissection of Convicts Bill in Parliament, the scheme in fact originated with his close friend and medical advisor, the eminent surgeon of Leeds, William Hey. A letter from Hey to Walter Spencer-Stanhope (MP for Hull and close political ally of Wilberforce) in May 1785 makes this clear. After noting that he had already taken the liberty of giving Wilberforce “the heads of a Bill” proposing dissection as a punishment for *all* executed criminals, Hey requested that Stanhope might “assist in carrying it through the House whenever it is presented.”³⁷

Born in 1736, the son of a prosperous dry-salter in Leeds, Yorkshire, William Hey rose to become the foremost surgeon of the county. Following apprenticeship to a local surgeon-apothecary, Hey had trained in London under some of the most famous surgeons of the eighteenth century, later returning to Leeds to set up in practice. He played a key role in establishing the Leeds General Infirmary in 1767, serving as the hospital’s senior surgeon between 1773 and his retirement in 1812. A man of deep religious convictions, Hey had joined the Methodists in 1754, parting from them in 1781, but remaining a fervent Anglican until his death in 1819.³⁸ Hey proposed his scheme to Wilberforce not just as a constituent of Yorkshire, but more importantly as a close friend, bound by the bonds of faith, morality and mutual indebtedness. As medical advisor to the Wilberforce family, Hey had supported William through periods of ill health and chronic eye conditions.³⁹ Both were engaged in similar social projects — as S. T. Anning notes, Hey was an early protestor against the slave trade, and frequently hosted Wilberforce at his Leeds home, describing the visits as “among the most agreeable occurrences of his life.”⁴⁰

For his own part, Hey seems to have had a number of possible motivations in mind for wanting to extend the practice of dissecting executed criminals. Hey was in many ways unique, and we should be cautious of drawing out conclusions from this case too far. In this respect, efforts will be made to put William Hey and the situation in Leeds within the wider context of anatomy, body supply and medical education in England as a whole. But at the very least the case of the 1786 Bill and William Hey’s motivations behind the measure provide a previously-unseen and valuable window onto a fascinating aspect of medico-legal history.

Hey’s letter to Walter Spencer-Stanhope in May 1785 is the only direct statement we have from him on his motivations for wanting to extend the dissection of executed offenders. Hey began by arguing that although anatomical science was deemed by many to be “absolutely necessary” to society, the legal supply of bodies currently available to anatomists via executed murderers was nowhere near adequate. Anatomists were thus dependent on body-snatchers, “a set of the greatest rascals, whose nightly employ is to commit depredations,

sometimes on the living, sometimes on the dead.” The bodies taken from graves, Hey complained, were often so tainted with “infectious matter” that they had proved fatal to the anatomists themselves. Upon such considerations it appeared to Hey that a proper plan would be “to deliver up the bodies of all executed criminals to the teachers of anatomy,” such bodies being “the most fit for anatomical investigation as the subjects generally die in health, the bodies are sound, and the parts distinct.” “Why should not those be made to serve a valuable purpose when dead,” Hey concluded, “who were a universal nuisance when living?”⁴¹

Ruth Richardson has shown that complaints were levelled against body-snatching throughout the eighteenth and early nineteenth centuries, both amongst anatomists and society at large.⁴² But within this general context of long-standing concerns, there appears to have been a specific crisis about body-snatching in the early 1780s. This may well have been a motivation for Hey to act and for the government’s support of the Dissection of Convicts Bill when it came before Parliament in 1786. Concerns arose following the prosecution and conviction in May 1785 of the renowned surgeon and teacher of anatomy in London, Thomas Young, for conspiracy to prevent the burial of a person who had died in Shoreditch workhouse.⁴³ “All unprejudiced people are extremely anxious about the fate of the surgeons whose zeal in their profession has subjected them to the lash of the law, for employing persons in the search of dead bodies” the *Times* had argued in February 1785.⁴⁴ And indeed, eight months later, a correspondent to the *Times* recommended that parish officers should be allowed to sell the bodies of executed felons to the teachers of anatomy. For, the correspondent argued, “people seem in general disgusted at the means taken to procure bodies for dissection, and it is essential to the health of the living, that lectures should be held upon the bodies of the dead.”⁴⁵

A deeper examination of Hey’s background moreover suggests that he may have proposed his scheme with three additional aims in mind. In the first instance, Hey’s belief in the importance of dissection and his early experiences as an anatomist must surely have convinced him that executed criminals were a useful source of cadavers. He undoubtedly had an earnest passion for dissection, and believed this to be crucial for enhancing medical knowledge and good surgical practice. According to his former student and contemporary biographer, John Pearson, Hey “considered anatomy to be the foundation of all medical and chirurgical science,” and sought “to acquire a competent knowledge of the human body.”⁴⁶ From his first days of training at St George’s hospital in 1757, Hey devoted himself to anatomical lectures and dissections, and he “seldom employed less than twelve hours daily in the lecture and dissecting rooms during the whole winter.”⁴⁷

This commitment to dissection proved crucial to Hey’s subsequent professional success. The anatomical knowledge and surgical skill which he acquired from dissections gave Hey an essential advantage over other practitioners in Leeds, in what was then a competitive marketplace for medical services.⁴⁸ In the eighteenth century, medical practice was as much a private business as a public profession.⁴⁹ Hey was called upon to conduct all the major surgical operations in the town, and his reputation soon reached such heights that patients travelled from across the county, and even as far afield as Cumberland, to be treated by him.⁵⁰ As more and more trained surgeons set up practice in Leeds in the 1770s and 1780s,

it must have been essential for Hey to continue improving his knowledge and skill in order to maintain his position as the most sought-after surgeon in the area.

As discussed below, the public dissection of criminals was a performative spectacle which was used by medical men such as Hey to promote their own image. But in practical terms too, dissection was crucial in the development of surgical skill, and it was upon the basis of good surgical practice that medical reputations were increasingly being established in the later eighteenth century.⁵¹ Varying levels of status existed amongst medical practitioners in this period, even within the category of the formally qualified (and not including the wider world of the “unqualified” and quacks). Status could rise and fall depending upon both the practitioner’s ability to heal and their skill in effectively marketing themselves above the competition. Of course, in this competitive medical marketplace it is highly unlikely that Hey intended that the criminal corpses made available under his proposed scheme would be distributed equally amongst medical men within particular locations. As the wording of the 1786 Bill makes clear, the bodies of executed offenders would only be given over to *teachers* of anatomy, as directed by the judge. It would only have been individuals with the kind of prestige and influence enjoyed by William Hey that could expect to receive such criminal bodies.

Criminal dissections were almost certainly a prominent feature of Hey’s time as a medical student in London, and in pushing for greater use of the criminal corpse he may well have been following the lead of his “anatomical entrepreneur” predecessors.⁵² As a student of William Bromfield, demonstrator of anatomy at Surgeons’ Hall since 1744, Hey would have attended the dissections of criminal bodies conducted there during the 1750s.⁵³ Indeed, given that Hey had the honour to be chosen as Bromfield’s dresser, it is highly likely that he would have seen such dissections first-hand.⁵⁴ The fact that Hey himself later conducted public anatomical dissections on the bodies of criminals at the Leeds General Infirmary (discussed below) akin to those conducted at Surgeons Hall in the 1750s, suggests that he was deeply influenced by his early experiences of criminal dissections in London. Indeed, there was a long tradition of public anatomical demonstrations conducted on the bodies of criminals in the metropolis, although, as Anita Guerrini explains, such demonstrations could vary greatly in terms of audience, aims and content.⁵⁵ In the early decades of the eighteenth century, Frank Nicholls undertook public anatomy courses at both Oxford University and in London, using corpses taken from the gallows.⁵⁶ As “the leading teacher of anatomy between 1730 and 1740”, Nicholls had an influence upon William and John Hunter, both of whom likewise played an important role in advocating the importance of dissection in medical education and in the use of the criminal corpse to this end.⁵⁷

Eminent anatomists at the established medical centres were thus crucial in inspiring men like Hey. So too were the London teaching hospitals which led the way in the development of anatomy education in the eighteenth century by actively fostering students’ hands-on experience of dissection. Indeed, Hey’s motivation to push for greater use of the criminal corpse may also have been based on a desire to emulate the situation in London by developing similar forms of medical education in the provinces. Even before his attempt to solicit the assistance of Stanhope in May 1785, Hey had evidently sought feedback on his proposal from others in high places, for on 8 April of that year he received a letter from his

former apprentice, Richard Walker, who was then serving as apothecary to the Prince of Wales. Having considered the proposal for dissecting convicts, Walker assured Hey that he would be glad to lend any assistance “in promoting so desirable an object.” But he nevertheless made it clear that Hey should not expect any support from the London faculty of anatomists, who feared that such a scheme would facilitate the development of provincial anatomy schools and thus challenge their dominant place within England’s medical education system. “Perhaps indeed suspicions of this nature have may have their origin in envy and selfishness,” Walker lamented, but “the London practitioners and teachers would be... backward to support any measure, that may hereafter supersede the necessity of young men coming to town in quest of anatomical knowledge.”⁵⁸ In the competitive market for medical education in eighteenth-century Britain, fee-paying teaching was a lucrative business.⁵⁹ Body supply was thus an emotive topic for cash-flow reasons as much as anything else.

Hey evidently took this advice on board, and anticipated medical politics as the key barrier to the success of his proposal. Indeed, in his letter to Stanhope the following month, Hey forcefully denied that increasing the supply of criminal bodies for dissection would allow medical men to establish provincial anatomy schools which might threaten the profits of those in the metropolis. “I know the London teachers will be jealous of such a law,” Hey noted, “imagining it may cause a rivalryship [sic] in the country...”

But the executions take place at an improper season of the year in the country; so that were we [provincial anatomists] disposed to commence teachers, this law would not serve our purpose. The weather is too hot from April to August; and all the criminals who are executed suffer in this part of the year, except those who are condemned for murder at the spring assizes, which usually are held in March.⁶⁰

Yet contrary to his denials, there is evidence to suggest that Hey may well have been motivated by a desire to develop medical education in Leeds. In the first place, Hey’s defence was somewhat disingenuous: many criminals *were* in fact executed in March, including those convicted of crimes other than murder. Moreover, Hey was undoubtedly teaching in some capacity by 1786 when he put forward his proposal. Between 1759 and 1804, Hey took on at least nine privately indentured apprentices, charging a substantial fee from each.⁶¹ Apprentices are first mentioned in Hey’s *Medical and Surgical Casebooks* in 1766, with the term “pupil” first used in 1779, and then in the plural. Tellingly, Hey often commented in his medical notes that dissections were carried out in order that pupils might observe.⁶²

Susan Lawrence has shown that in the London hospitals at this time, whilst autopsies to establish the cause of death had become officially recognized and authorized by hospital governors, ‘practical anatomy’ (meaning full dissection of the corpse by students for hands-on experience) by contrast was an open secret which caused a degree of public and professional concern.⁶³ It may be that this was one of Hey’s fears. By the 1760s he was evidently conducting post-mortems so that students could observe. Yet he might have worried that allowing students themselves to conduct dissections of dead patients (and not just to observe) would cause some disquiet. Criminal bodies provided a potential solution to

this problem, by allowing students to get practical experience without causing a scandal over the use of patient cadavers.

It was certainly the case that similar forms of medical education to that practiced in London were also being developed in other parts of England besides Leeds in the second half of the eighteenth century, based around the rapid growth of private anatomical lectures and teaching hospitals which allowed students to engage in ‘practical anatomy’. Some twenty-eight provincial voluntary hospitals were founded in the years 1736–1800, offering a “thriving industry” in medical education, often as a supplement to formal training in the metropolis.⁶⁴ Hey may well have been inspired by such developments, or was perhaps wary of falling behind the competition. Of course, it would be inaccurate to subsume the various forms of medical education available in provincial England within a single developmental pattern — the situation in Birmingham and Manchester was very different from the surgeons’ guilds in Newcastle and Bristol, for example, or the unique medical centres of Oxford and Cambridge.⁶⁵ The many voluntary hospitals set up outside London in the eighteenth century were founded on similar principles, but also had strong local roots which, as Adrian Wilson notes, made for a great deal of variety in actual practice.⁶⁶

The varied developments which were taking place outside London nonetheless do at least offer some suggestions as to the kinds of practices which William Hey might have sought to follow. Inspired by the rapid growth and success of the private anatomy schools and teaching hospitals in eighteenth-century London, similar initiatives were also launched in the provinces, acting as important progenitors for the numerous medical schools later established in the first three decades of the nineteenth century (including Leeds in 1831).⁶⁷ As Jonathan Reinartz has shown, for instance, the Birmingham practitioner Thomas Tomlinson (who, along with William Hey, was a student of William Bromfield at St George’s Hospital in the 1750s) provided his apprentices with the first series of practical anatomy lectures in the town in 1768, with further lectures delivered at the establishment of the Birmingham teaching hospital in 1779.⁶⁸ The new provincial hospitals of the eighteenth century moreover began to offer instruction in surgery in a similar vein to that provided in London, building upon a widely-held belief that public infirmaries were an important feature of any medical education.⁶⁹ Criminal corpses may well have figured in such instruction — judicial records make it clear that the bodies of executed murderers were handed over to several hospitals in the second half of the eighteenth century which were based in assize towns, including (amongst others) the Devon and Exeter hospital, the Winchester county hospital and the Worcester infirmary.⁷⁰

Finally, another of Hey’s motivations was his desire to carry out anatomical demonstrations on the bodies of executed criminals, not just for the benefit of his pupils, but also for the entertainment and instruction of a broader public audience. Again, Hey was likely inspired to do this by other prominent London and provincial anatomists. According to the Minute Books of the Leeds General Infirmary, in 1773 (Hey’s first year as senior surgeon to the hospital) the Trustees authorized a payment of £1 15s 0d “to the gentlemen of the faculty for expenses incurred by the procurement of the body [of the executed murderer John Early] from York lately dissected at the Infirmary.”⁷¹ No evidence has been found to suggest that Hey conducted a *public* demonstration on this occasion. But he undoubtedly carried out at

least four such demonstrations on the bodies of murderers in the first decade of the nineteenth century, and he would have done so earlier if a body had been available. In the spring of 1800, according to Hey's contemporary biographer, John Pearson,

Mr Hey gave a course of anatomical demonstrations, consisting of twelve lectures, at the Leeds Infirmary. The first eleven lectures were delivered on the body of a malefactor [Michael Simpson], executed at York for murder. He demonstrated the common integuments, the viscera of the thorax and the abdomen, the brain, the muscles, the circulation of blood etc.; introducing rather copious physiological observations, but treating more briefly of the diseases and accidents to which these several parts of the body are particularly exposed; thus rendering the subjects more instructive and interesting to a general audience. These lectures were given with the design of benefitting the pupils of the Infirmary, and such professional men in Leeds as might chuse [sic] to attend them; but he purposed, further, to furnish a rational and instructive amusement to those persons who might desire information on the subjects...⁷²

These lectures were apparently unsuitable for women, for Pearson notes that it was only in the twelfth and final lecture — on the structure of the eye and the theory of vision — that “ladies were admitted.”⁷³ Hey was also worried about drawing the wrong crowd: in order to prevent the intrusion of “improper persons” tickets were issued at half a guinea for the course, the clear profits of which were given to the Infirmary, amounting to some £27 6s 0d.⁷⁴ A second course of public anatomical lectures was delivered by Hey in 1803, this time upon a request from the “judge and counsel” that one of the two murderers recently convicted at York assizes be dissected at Leeds. Assisted by his son, William jnr. (who carried out the dissection itself, but gave none of the lectures), the demonstration proved extremely popular. About one hundred tickets were distributed to gentlemen, and some fifty ladies attended the final lecture, again on the eye. This resulted in profits to the Infirmary of £47 11s 6d. A similar course of lectures carried out in 1805 upon the body of the murderer John Wilkinson produced £47 7s 0d.⁷⁵

But it was the fourth and final public anatomical demonstration conducted by Hey in 1809 which netted the greatest profits for the Infirmary, some £80 14s 0d. “The attendance was larger than on any of the former occasions,” commented Pearson, because the subject dissected was one Mary Bateman, the “Yorkshire Witch”, a “woman of atrocious character” whose trial for the murder (by poisoning) of Rebecca Perrigo, “had excited great interest.”⁷⁶ Indeed, the *Leeds Intelligencer* reported that the road from York to Leeds had been “thronged with foot passengers, horses and gigs,” returning from Bateman's execution. Even by eleven at night, “when the cart with her body approached the town, it was met by a number of people.” On the following day her body was exhibited in the Surgeons' Room at the Leeds General Infirmary, with admission charged at three pence per person. “An immense number of people were admitted,” it was reported, “some of whom evinced predominant superstition, by touching the body before they left the room, to prevent her terrific interference with their nocturnal dreams.” The receipts to view the body reportedly amounted to upwards of £30 alone. “Mr Hey is now delivering a course of twelve lectures

on the body, for the benefit of the institution” the *Leeds Intelligencer* concluded, “and has diffused much edifying information to a crowded auditory.”⁷⁷

William Hey was not alone in this endeavour. Indeed, he may well have been inspired by the similar demonstrations conducted by others at this time. In London throughout the first half of the eighteenth century the Company of Baber-Surgeons publicly dissected the bodies of executed criminals.⁷⁸ Hey’s lectures share many similarities with those demonstrations, including exposing the recently-executed body to the public gaze, and lectures which focused on such topics as the abdominal and thoracic viscera, ending with a lecture on the eye. As the Surgeons’ Company lectures began to wane around mid-century, however, private lectures proliferated in the metropolis, the most popular of which were those conducted by William Hunter.⁷⁹ In the provinces too, a number of pioneering anatomists established anatomy lectures. One of the first such instances was that given by the physician and philosopher, Erasmus Darwin, who in 1762 delivered a series of anatomy lectures in the West Midlands upon the body of a recently executed offender.⁸⁰ In an advertisement placed in the local press, Darwin stated his intention to hold an initial lecture and to “continue them every day as long as the body can be preserved”, and encouraged members of the public — “of whom the love of science may induce” — to attend.⁸¹

As Susan Lawrence has argued, these public anatomical demonstrations were an important means by which surgeon-anatomists attempted to promote themselves as “medical gentlemen” within their localities.⁸² Public dissections were heavily performative displays which could attract significant crowds, and formed part of the broader relationship between anatomical and exhibitionary practices which deepened throughout the latter half of the eighteenth century.⁸³ Opening up the dissection of criminal bodies to a wide audience served not only to enhance the ignominy of the punishment — in pursuit of the law’s stated aim of deterrence by terror — but also to endorse the anatomist as a man of advanced medical knowledge, a master of medical language and a skilled surgical operator.⁸⁴ This was particularly relevant for men such as William Hey and Thomas Tomlinson who, in the 1760s and 1770s, were keen to establish themselves as amongst the foremost surgeons in Leeds and Birmingham respectively.

In conducting his public anatomical demonstrations, Hey might also have been following the practice of his fellow surgeon-anatomists in the nearby city of York, who, it is important to note, had privileged access to the bodies of executed murderers in Yorkshire. A telling annotation added to a manuscript copy of Pearson’s biography of Hey — which was not actually included in the published edition — states that Hey could only procure a criminal body when there happened to be two executions for murder at any one time in York, “the surgeons of the York hospital always claiming the body when there was but one.”⁸⁵ Indeed, James Atkinson, a surgeon-anatomist of York, was at a particular advantage in his position as acting medical officer to the county gaol (a position he inherited from his father, Charles), the place at which all the capital convicts for the county of Yorkshire were held immediately prior to their execution.⁸⁶ In an advertisement for his course of anatomy lectures in 1786, Atkinson as such noted that “criminals sentenced by law will have lectures read over them at the [York] Hospital for the general good of the pupils.”⁸⁷ This situation explains why Hey does not appear to have undertaken a dissection of a criminal body between 1773 and 1800,

for in that period no more than one murderer was executed at York at any one time.⁸⁸ In short, Hey may well have wanted to conduct a public anatomical demonstration before 1800, but no criminal bodies were (at least formally and legally) available to him to do so.

William Hey evidently had a number of aims in mind for making more criminal bodies available. While we should not assume that Hey was entirely representative of eighteenth-century surgeon-anatomists more widely, we have seen that others in the capital and the provinces were also carrying out dissections of executed criminals for the purposes of both teaching and public anatomical demonstrations. Many anatomists furthermore followed a similar career path to Hey, and may well have shared his motivations.⁸⁹ This backdrop sets in context how and why Hey sought Wilberforce's support for a new piece of legislation on the issue of body supply, to which we now turn.

“A BILL UNDOUBTEDLY OF THE FIRST MAGNITUDE”: DISSECTION AS A JUDICIAL PUNISHMENT

The Dissection of Convicts Bill introduced by Wilberforce in 1786 passed through the House of Commons, but was later thrown out by the Lords. As will now be shown, whilst some in Parliament may have supported such a scheme, others had deep misgivings about its implications for crime and justice. Far from being universally popular, concerns about the Bill transcended the political divide, and the particular nature of Parliament in the eighteenth century meant that judicial interests would ultimately have greater influence. Wilberforce's attempt to harness the criminal corpse for the benefit of anatomy was rejected, not on the grounds of medical politics (as Hey had expected), but instead upon ideas about the proper use and role of dissection as a criminal justice measure.

In the House of Commons, the Dissection of Convicts Bill received the support of Pitt and key members of the administration. When Wilberforce first raised the issue in Parliament, Pitt helped him to frame the motion for leave to bring in a bill. The proposal then received the sponsorship of Henry Duncombe (Wilberforce's fellow MP for the county of Yorkshire) and Michael Angelo Taylor.⁹⁰ Two of the government's leading legal officers subsequently contributed to the administration of the measure. Appointed to the position of Solicitor General by Pitt in 1784, Sir Archibald Macdonald first drew up the Bill.⁹¹ It was then corrected by the Attorney General, Sir Richard Pepper Arden, whose merit, one commentator claimed, “seemed to consist principally in the strong predilection manifested towards him” by Pitt.⁹²

The Dissection of Convicts Bill therefore had the (at least administrative) support of several prominent members of the government, not least Pitt, who, by 1786, had cemented his position as Prime Minister with a healthy majority in the Commons and popularity outside of Parliament. Yet the Bill soon came under fire in the Lords, particularly from Lord Loughborough, Alexander Wedderburn, then serving as Lord Chief Justice of the Common Pleas. In the first instance, Loughborough launched a blistering attack on Wilberforce and the “extraordinary manner” in which the Bill had been introduced. He complained of “the loose and inaccurate manner in which the Bill was drawn, a circumstance which sufficiently proved, that the author was not used to the subject upon which the Bill professed to go.”

And he reportedly dwelt for some time “on the impropriety of men not conversant with law, turning projectors in respect to it, and in moments of vivacity coming forward with raw, jejune, ill-advised and impracticable schemes for the alteration of the mode of distributing and carrying into execution the criminal justice of the country.”⁹³

In the account of the event later published by Wilberforce’s sons, Loughborough’s criticisms were denounced as the product of a “bitter oppositionist” whose only intention was to “discredit the lawyers who adhered to Mr. Pitt.”⁹⁴ There is certainly some truth to this. Loughborough was a bullish careerist and political partisan who was not above attacking others to promote his own position. A lawyer on the make, Loughborough used Parliament as a means to rise through the profession.⁹⁵ He had been deeply disappointed in 1783, therefore, when his life-long ambition of becoming Lord Chancellor was dashed following the demise of the Fox-North Coalition and the political success of Pitt.⁹⁶ It is perhaps evidence of Loughborough’s biased and partisan views that several of his criticisms of the 1786 Bill were either exaggerated or inaccurate. If Loughborough’s complaint that the proper criminal law authorities had not been consulted was true, Wilberforce assured Hey, “then you would have just reason to complain of my having taken so little pains to ensure the success of your proposal.” “But,” he went on, “the case is directly the reverse: I was aware how necessary it was to secure the concurrence of the gentlemen of the profession, and to put the business a good deal in their hands.” According to Wilberforce, not only was the Bill drawn up by the Solicitor General and corrected by the Attorney General, it was then transmitted “to one of the most active judges,” who endeavoured to put it before the rest of the bench. “Some principal lawyers” were moreover called upon “to bespeak a favourable reception” of the Bill “with any of the judges over whom they possessed influence.” Amendments to the Bill were put to Wilberforce as a result, and whilst he admitted that he disliked the alterations, he apparently submitted to them “on grounds of policy.”⁹⁷

We must therefore treat Loughborough’s comments with a great deal of caution and scepticism. But it is nevertheless the case that several of his criticisms *were* accurate, and that arguments made by Loughborough were echoed by others in Parliament, even those who were closely allied to Pitt and the government. Loughborough’s charge against the “loose and inaccurate” wording of the Bill was for instance justified. As he argued, the Bill wrongly referred to justices of assize in London and Middlesex, whereas no such thing in fact existed.⁹⁸ It is also unclear from the Bill who actually had the power to decide if an offender was to be subjected to dissection, and whether the Bill revoked the discretion of the judges to respite criminals sentenced to death. Legal ambiguities over the dissection of criminals had arisen after the introduction of the 1752 Murder Act, and it may well have been that authorities on the criminal law such as Loughborough were wary of the same problems following any attempt to extend the punishment to offences other than murder.⁹⁹ It certainly seems that Wilberforce and others involved in the introduction of the Bill made strategic errors which opened up space for those with personal sensitivities against the government to attack the Bill in the Lords.

But even besides the allegedly poor manner of the Bill’s introduction, Loughborough and others were disturbed by the detrimental effects it would likely have in terms of crime and

justice. Applying dissection to offences beyond murder would, it was argued, undermine its effectiveness as a penal measure. The introduction of the 1752 Murder Act “had been found of essential advantage to the community,” Loughborough observed. Even those criminals who were “hardened in vice, and practiced in villainy,” who had “stood with a firm countenance during trial, and had even heard sentence of death passed on them without emotion,” when the judge informed them, “that their bodies were to be deprived of sepulture [sic], and that they were to undergo a public dissection, their countenance changed, they grew suddenly pale, trembled, and exhibited a visible appearance of the extremest [sic] horror.” Such spectacles moreover made a forcible impression upon the minds of bystanders. Loughborough had witnessed this in his own capacity as a judge, and he “was sure every other justice, must have seen repeated instances of the effects” produced by the sentence of dissection. Was it wise, Loughborough therefore asked, “to destroy this salutary effect, by making the deprivation of the rights of burial a common and an ordinary consequence of every conviction of almost every capital offence?”¹⁰⁰

It was also argued that applying dissection as a punishment for virtually all capital offences would act as an inducement to commit greater crimes. For as Loughborough noted, “if the same punishment were to attend the convict for burglary as for murder, breaking open a house would generally be attended with murder, as robberies in France were, the criminals there knowing that the commission of the one crime was to receive no greater punishment than the other.”¹⁰¹ Added to which, the Bill would in the eyes of some push the English criminal law towards the blood-thirsty penal practices of the continent. Only for the very worst of crimes, that of murder, and that “in a manner giving no great degree of personal pain, was the utmost inflicted by the English law upon convicts.”¹⁰² By contrast, the object of Wilberforce’s Bill, in Loughborough’s eyes at least, “was not lenity but pure cruelty, and that without a prospect of any the smallest advantage to the community, but a certainty of much serious disadvantage.”¹⁰³

Loughborough was undoubtedly an influential figure within the Lords, and his criticisms must certainly have carried some weight. Indeed, the *Annual Register* for 1786 noted that Loughborough had in that year “taken the lead in the proceedings of the House of Lords, decided upon, and caused the rejection of bills, and seemed to be a moderator of that assembly.”¹⁰⁴ Thomas Townsend, first Baron Sydney, Pitt’s Home Secretary and government leader in the Lords, had proven to be less effective than his predecessors in controlling the that House. Complaints were made that the government lacked speakers in the Lords who were able to stand up to oppositionists such as Loughborough.¹⁰⁵ That said, it would however be an exaggeration to assume that the 1786 Dissection of Convicts Bill failed due to the overwhelming influence of a “bitter oppositionist”. In the first instance, there were at least some government supporters in the Lords, even if their numbers were on the wane in the 1780s, and they were unlikely to have rejected the Dissection of Convicts Bill on the basis of opposition sentiment.¹⁰⁶ Yet despite this support, not a single peer voted in favour of the Bill, and it was defeated without a division.

Moreover, it seems that other members of the Commons and the Lords shared Loughborough’s concerns, even those in political alliance with the government. Henry Dundas, commissioner of the Board of Control and the second man in the Commons on the

government side, expressed his doubts when Wilberforce first proposed the scheme in Parliament.¹⁰⁷ He called on Wilberforce to be specific about the motion, “as the subjecting all bodies that were hanged to the same treatment, would, in a great measure, destroy the intent of the bill,” for “the prejudices of mankind, relative to what came of their bodies after death were very great.”¹⁰⁸ In the Lords, Sydney attempted to rescue Wilberforce’s character from Loughborough’s imputations. Yet having insisted on Wilberforce’s good intentions, Sydney nonetheless conceded that he agreed with Loughborough’s arguments, and thought it advisable that the Bill should be deferred.¹⁰⁹ Similarly, while Henry Bathurst, the second Earl Bathurst, put it to the Lords that greater care had been taken with the Bill’s introduction than Loughborough claimed, he nevertheless agreed with a number of the criticisms levelled against the proposal and declared that he was indifferent to the fate of the Bill either way.¹¹⁰ And although the Solicitor General, Sir Archibald Macdonald, helped to draw up the Bill, we might well question the extent to which he personally agreed with the measure. Just a year previously, in June 1785, Macdonald had complained that “extreme severity, instead of operating as a prevention to crimes, rather tended to promote them, by adding desperation to villainy.”¹¹¹ Even amongst the legal contingent who drafted the Bill, there were personal reservations, and these came out during its readings. Furthermore, similar concerns were raised just ten years later when another attempt was made in Parliament to extend the practice of dissecting executed offenders.

THE 1796 MOTION FOR THE DISSECTION OF ROBBERS AND BURGLARS

In March 1796, Richard Jodrell proposed to the Commons that a Bill be brought in for handing the bodies of all those executed for burglary or highway robbery over to anatomists for dissection.¹¹² What were Jodrell’s motivations for proposing this extension to the practice of dissecting offenders? When introducing the motion in Parliament, Jodrell first advocated it on the basis of crime and justice, warning that robberies and burglaries had lately “increased in a most alarming manner, and required the serious attention of the legislature.”¹¹³ The dread of dissection would, Jodrell argued, serve to check this wave of criminality. He had consulted some of the highest authorities in the criminal law, including Lord Kenyon, Lord Chief Justice of King’s Bench, and John Skynner, the Recorder of Oxford, whose ideas, he said, accorded with his own, and from whom he had “received the most flattering encouragement to go on.”¹¹⁴

But far from being an attempt to harness the criminal corpse for the ends of criminal justice, Jodrell’s scheme was in actual fact primarily intended to deal with the problem of body-snatching. Along with Wilberforce, Jodrell had keenly supported a Bill for “more effectually preventing the stealing of dead bodies from church yards, burying grounds, and other places of interment” which had failed to pass through the Commons in June 1795.¹¹⁵ The “pernicious practice” of grave robbery had, the preamble to that Bill claimed, reached new heights, owing to the “small and inadequate punishments” annexed to the crime, resulting in “much disquiet, disturbances, and commotions to the great annoyance” of the public. The Bill had stipulated more stringent punishments for body-snatchers, as well as greater rewards for anyone assisting in the detection and prosecution of resurrectionists.¹¹⁶ Jodrell lamented the fate of the Bill, and hoped that his own scheme for the dissection of robbers and burglars “would produce all the effects” which the earlier legislation had in view.¹¹⁷

Jodrell seems to have been deeply upset by grave robbery, which “from his habits of thinking, and from his education, he entertained the utmost horror.”¹¹⁸ Indeed, Jodrell’s overwhelming concern was to prevent body-snatching, rather than to purely benefit anatomists and their craft. The depth of Jodrell’s outrage came through clearly in his speeches before the Commons. In defending the Body-Snatching Bill of 1795, Jodrell defiantly asserted that little would dampen the ardour of its supporters, and thought it disgraceful that the Bill had been so badly treated in the Commons.¹¹⁹

Much like the events of 1786, a decade later there was remarkably little discussion of dissecting criminals in relation to matters of medical science and body-snatching, despite the fact that this was Jodrell’s principal concern. The debates again centred on the implications for crime and justice. Not only did the Chief Justice of Chester (and former Recorder of London), James Adair, think that the scheme would fail to furnish surgeons with the requisite number of bodies, he was more decidedly opposed to the motion upon the basis that, whilst it might lead to the improvement of anatomy, this “bore no proportion to the importance of other considerations.”¹²⁰ In short, if Adair was indicative of other Members of the Commons, then the debates surrounding Jodrell’s motion included little discussion of body-snatching because it instead presented more pressing and negative implications for the criminal justice system. The possible benefits to medical science were seemingly far outweighed by the likely evils placed upon the criminal law. Adair concluded that he was “not such an enthusiast for the promotion of the science of anatomy, as to advance it at such a price and by such means.”¹²¹

Three main objections were voiced against Jodrell’s proposal on the basis of criminal justice. This was not, however, opposition to the practice of post-execution dissection *per se*, but instead a criticism that extending it to other offences would destroy its deterrent effect in cases of murder and would confound moral distinctions between crimes of a very different hue. Many expressed a continued belief in the efficacy of dissection as a penal measure for the very worst crimes. MPs considered it especially effective in preventing murder. The Attorney General, John Scott, observed “that the experience of those who were employed in administering the criminal law of the country must frequently have shewn [sic] them how often the dread of anatomization had arrested the arm uplifted to commit a murder.”¹²² Others even suggested that dissection might be effectively extended to other execrable offences, although not so indiscriminately as to undermine its power of deterrence. Philip Francis thought that it might be added “as a mark of greater severity” to cases of aggravated theft in which “attacks were made and wounds inflicted,” or “in the case of nocturnal attempts at burglary.”¹²³

Adair moreover argued that Jodrell’s scheme would subject the severest punishment permitted by English law equally to the “ragged boy” stealing two pence worth of ribbon through a shop window in the dark afternoons of winter, as to the nocturnal burglar who entered a house whilst the victims lay asleep in their beds. Neither could he consent to support a scheme which would “break down that barrier which God and nature had established between murder and other crimes.”¹²⁴ As with the Parliamentary debates on Wilberforce’s 1786 Bill, in 1796 it was charged that extending dissection to other offences would lead to the committal of more murders. Amongst other objections, John Scott noted

the scheme's tendency "to increase the crime of murder, by making it immaterial, whether a man, in the commission of a burglary, added murder to it."¹²⁵ George Vanistart, MP for Berkshire, similarly thought that "criminals might be induced sometimes to commit murders, which they would not otherwise have done, in order to escape detection."¹²⁶

There is much less reason to believe that the objections voiced in 1796 resulted from partisan politics, compared with Wilberforce's Bill of 1786. The fact that Jodrell's motion was rejected by the House without a division indicates that it had little support from the administration. Moreover, whilst oppositionists spoke against the measure, so did MPs who in other instances proved to be strong supporters of the government. Although Jodrell voted with the government on all major issues, by the mid-1790s a "degree of truculence" marked his announcements in the Commons, and in 1796 he came into conflict with Pitt over the Curates' Maintenance Bill.¹²⁷ In no way then could Jodrell be seen as figure of the administration. There would be little political capital for oppositionists in attacking a minor parliamentary figure such as Jodrell who was only loosely associated with the government side. Jodrell himself admitted that the general sense of the House seemed to be against his motion, and he therefore avowed not to pursue the matter. A second parliamentary attempt to extend the practice of dissecting executed offenders in the space of ten years had thus failed to result in new legislation.

CONCLUSION

What conclusions can be drawn from the events of 1786 and 1796? And what does this add to the historical narrative of body supply and anatomy in the long eighteenth century and beyond? The progress and passage of the Anatomy Act in 1832 in some sense demonstrates the growing power that the "medical profession" was coming to hold, both within Parliament and amongst society at large.¹²⁸ In the later eighteenth century, however, with respect to the schemes of 1786 and 1796, the interests of medical science could not match the power of judicial interests within Parliament — the latter of which held that the dissection of criminals should first and foremost serve the needs of criminal justice. Most influential, it seems, were ideas amongst the judges and other criminal law authorities — who constituted a key section of the Lords and who had a powerful voice within the Commons — about the role of dissection within the criminal law. In short, the later eighteenth century represents a particular moment when the claims of medical science competed with those of criminal justice in harnessing the power of the criminal corpse. The nature of Parliament and the influence of judicial interests within that arena — combined with the as-yet relatively weak (although growing) influence of the medical profession — help to explain why executed offenders were not more fully exploited as a solution to the problem of body supply.

The events of 1786 and 1796 were a learning experience for all involved. For Wilberforce, this first legislative initiative of his career as an MP left a bitter taste, and must surely have shaped his subsequent efforts at abolition of the slave trade and penal reform. As late as 1816, Wilberforce was still complaining about the failure of his Dissection of Convicts Bill, due to (as he saw it) the partisan animosities of Lord Loughborough.¹²⁹ Strategic errors had been made by Wilberforce and the government in the management of the 1786 Bill. If

Loughborough and others could be said to have acted from political opportunism, the fact remains that the supporters of the Bill had made mistakes which created space for criticism. Wilberforce was still a young man in politics in 1786, and he likely learnt a great deal from this early foray into law-making.

For anatomists too the events of the later eighteenth century were to throw up lessons which were to be repeated many times over the next century and beyond. Perhaps more than anything else, the failed attempts of 1786 and 1796 made anatomists recognize the limits of what could be achieved. The eighteenth and nineteenth centuries witnessed a series of overlapping tensions in the medical world. Increasing acceptance of the importance of the use of the dead to the living clashed with horror over violations of the grave, and body supply continued to be a pressing issue even after the introduction of the Anatomy Act in 1832. In William Hey's hometown of Leeds, the problem of acquiring cadavers resurfaced with the establishment of the town's medical school in 1831.¹³⁰ Such were the difficulties in obtaining subjects for dissection that applications were made to a number of neighbouring towns and parishes for bodies.¹³¹ The development of medical teaching in parts of the provinces — which, as already noted, varied from place to place — and the threat that this posed to the finances of the metropolitan schools in what was a lucrative market for medical education moreover added to the mix of tensions. Not forgetting, of course, the tension which existed between those who viewed the criminal corpse as a viable medical object and those who were troubled by the negative public image which penal dissection conferred upon surgeon-anatomists, nor the conflict between the dissection of criminals as a medical practice on the one hand and as a judicial punishment on the other. Those who looked to advance the cause of anatomy had to learn to navigate these tensions, to probe the limits of possibility, whether in terms of medical politics, entrenched interests within Parliament, or prevalent beliefs about death, the body and the afterlife. This was to be a defining feature of the development of anatomy throughout the nineteenth century, and even into the twentieth.¹³² Likewise, as the events of 1786 and 1796 showed, medical science of itself could not effect change for its own benefit. Rather, as anatomists in the later eighteenth and nineteenth centuries became all too aware, the development of anatomy would fundamentally rely upon its ability to align itself with broader social, cultural and political change.

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18. A total of 735 offenders were executed in England, Wales and Scotland in the ten years between 1776 and 1785 for the offences covered by the Bill. This has been calculated for English provinces using Sheriffs' Cravings, T 90/161–165, held at the National Archives, Kew, England (hereafter TNA). The data for Wales has been calculated using the National Library of Wales. *Crime and Punishment*. website (http://www.llgc.org.uk/sesiwn_fawr/index_s.htm). The data for Scotland is taken from Young, Alex F. *The Encyclopaedia of Scottish Executions, 1750 to 1963*. Orpington: 1998. I am extremely grateful to Simon Devereaux for providing me with the data for London.
19. The most common capital offences not included within the terms of the Bill included forgery, housebreaking and animal theft.
20. Devereaux, Simon. *Recasting the Theatre of Execution: The Abolition of the Tyburn Ritual*. *Past Present*. Feb.2009 202(no. 1):127.
21. Devereaux, Simon. *Imposing the Royal Pardon: Execution, Transportation, and Convict Resistance in London, 1789*. *Law and History Review*. 2007 Spring;25(no. 1):123.

22. *Ibid.*, 125–6.
23. For an excellent discussion of this, see Tim Hitchcock and Shoemaker, Robert. *London Lives: Poverty, Crime and the Making of a Modern City, 1690–1800*. Cambridge University Press; forthcoming chapter seven, “The State in Chaos”. I am very grateful to the authors for providing me with a manuscript copy of their forthcoming work. On the search for a new transportation location, see Christopher, Emma. *A Merciless Place: The Lost Story of Britain’s Convict Disaster in Africa and how it Led to the Settlement of Australia*. Oxford: 2010.
24. “Notebook of Letters written by Commodore Edward Thompson, 1 August 1784 — 9 August 1785, re: Matters Pertaining to his Service on the West Coast of Africa in HMS GRAMPUS,” THM/6, Archives of the National Maritime Museum, Greenwich, England.
25. *Ibid.*
26. *Times*. Feb 7.1785
27. The framing of the Bill does not address this point, an issue which (as we will see) was later levelled against Wilberforce as one of the major faults in the Bill.
28. Quoted in Follett, Richard R. *Evangelicalism, Penal Theory, and the Politics of Criminal Law: Reform in England, 1808–1830*. Basingstoke: 2001. p. 94
29. Coupland, R. *Wilberforce: A Narrative*. Oxford: 1953. p. 53 Hague, William. *William Wilberforce: The Life of the Great Anti-Slave Campaigner*. London: 2007. p. 98 Pollock, John. *Wilberforce*. Eastbourne: 2007. p. 66
30. Radzinowicz, Leon. *A History of English Criminal Law and its Administration from 1750*. Vol. 5 s. London: p. 1948-1990, p. 476-9.
31. HOC Papers. *Journals of the House of Commons (JHC)*; Jun 23. 1786 930 p.
32. Devereaux, Simon. *The Abolition of the Burning of Women in England Reconsidered*. *Crime, History and Societies*. 2005; 9(no. 2):73–98.
33. *Ibid.*, 77.
34. Although Wilberforce had limited his proposal to petty treason (the murder of a husband by his wife), it was suggested by the Attorney General, Richard Pepper Arden, that the clause for abolishing burning should also extend to women convicted of high treason, thereby encompassing the offence of coining for which Phoebe Harris had been burned at the stake in June 1786. This extension was agreed to by the Commons, and added to the final draft of the Bill.
35. HOC Papers. PR; May 16. 1786 227 p.
36. 25 Geo. II, c. 37.
37. Letter from William Hey to Walter Spencer-Stanhope, 21 May 1785, Spencer-Stanhope MSS, SpSt/11/5/1/2, West Yorkshire Archive Service (WYAS), Bradford, England. In a biography of their father, Wilberforce’s sons likewise noted that Wilberforce “undertook the measure” at the “suggestion” of William Hey — see Wilberforce, Robert Isaac; Wilberforce, Samuel. *The Life of William Wilberforce*. 1843; London: p. 60-1.
38. DeLacy, Margaret. *Hey, William (1736–1819)*. In: Goldman, Lawrence, editor. *Oxford Dictionary of National Biography*. online edition. Oxford: <http://www.oxforddnb.com/view/article/13163> hereafter *ODNB* [accessed 8 November 2013]
39. Lloyd, Josephine Margaret. Unpublished University of Leeds Ph.D. thesis. 2005. *The Casebooks of William Hey FRS (1736–1819): An Analysis of a Provincial Surgical and Midwifery Practice*; p. 116
40. Anning ST. *William Hey, FRS: The Father of Leeds Surgery*. *Proceedings of the Leeds Philosophical and Literary Society*. 1980; 17:109.
41. Letter from Hey to Stanhope, 21 May 1785, Spencer-Stanhope MSS, SpSt/11/5/1/2, WYAS.
42. Richardson. *Death, Dissection*. See also the works cited in footnote 7 above.
43. *Times*. 7 May and 11 May 1785. A similar case emerged three years later — see *Times*. Dec 12.1788
44. *Times*. Feb 7.1785
45. *Times*. Oct 21.1785
46. Pearson, John. *The Life of William Hey, Esq. FRS*. London: 1822. p. 8
47. *Ibid.*, 8.

48. Rimmer WG. William Hey of Leeds, Surgeon (1736–1819): A Reappraisal. *Proceedings of the Leeds Philosophical and Literary Society*. 1961; 9:198.
49. Loudon. *Medical Care and the General Practitioner*. :7.
50. Anning. William Hey. 103:107.
51. Loudon. *Medical Care and the General Practitioner*. 24 Lane, Joan. *A Social History of Medicine: Health, Healing and Disease in England, 1750–1950*. London: 2001. p. 23
52. For the concept of “anatomical entrepreneurs”, see Guerrini, Anita. *Anatomists and Entrepreneurs in Eighteenth-Century London*. *Journal of the History of Medicine and Allied Sciences*. 2004; 59:219–39. [PubMed: 15109154]
53. Bevan, Michael. Bromfield, William (bap. 1713, d. 1792). ODNB.
54. For more on the anatomy lectures at Surgeons Hall, see Lawrence. *Charitable Knowledge*. :83–90.
55. Guerrini. *Anatomists and Entrepreneurs in Eighteenth-Century London*.
56. Sinclair, HM.; Robb-Smith, AHT. *A Short History of Anatomical Teaching in Oxford*. Oxford: 1950. p. 26-31. Guerrini, Anita. Nicholls, Francis [Frank] (bap. 1699? d. 1778), *Anatomist and Physician*. ODNB. *Ibid.*, 227–31;
57. Sinclair, Robb-Smith. *A Short History*. :29. For useful overviews of the Hunters, which also note the influence which their predecessors, such as Nicholls, had on them, see Bynum, WF.; Porter, Roy, editors. *William Hunter and the Eighteenth-Century Medical World*. Cambridge: 1985. p. 1-34. Peachey GC. *A Memoir of William and John Hunter*. 1924 For other prominent dissectors of criminal corpses in the first half of the eighteenth century, see Guerrini, Anita. *Alexander Monro Primus and the Moral Theatre of Anatomy. The Eighteenth Century*. 2006; 47:1–18.
58. Letter from Richard Walker to William Hey, 8 April 1785, Hey Family Correspondence, MS 1990/4, Leeds University Special Collections, Leeds, England.
59. See Digby, Anne. *Making a Medical Living: Doctors and Patients in the English Market for Medicine, 1720–1911*. Cambridge: 1994.
60. Letter from Hey to Stanhope, 21 May 1785, Spencer-Stanhope MSS, SpSt/11/5/1/2, WYAS.
61. Lloyd. *The Casebooks of William Hey*. p. 112
62. *Ibid.*, 110–14.
63. Lawrence. *Charitable Knowledge*. :76–90.
64. Wilson, Adrian. *Conflict, Consensus and Charity: Politics and the Provincial Voluntary Hospitals in the Eighteenth Century*. *The English Historical Review*. Jun.1996 111(no. 442):602. On the “thriving industry” in medical education, see Loudon. *Medical Care and the General Practitioner*. : 49.
65. For Birmingham, see Reinartz, Jonathan. *Health Care in Birmingham: The Birmingham Teaching Hospitals, 1779–1939*. Woodbridge: 2009. Reinartz, Jonathan. *The Birth of a Provincial Hospital: the Early Years of the General Hospital, Birmingham, 1765–1790*. Stratford upon Avon; 2003. For Manchester, see Brockbank, W. *Portrait of a Hospital, 1752–1948: To Commemorate the Bicentenary of the Royal Infirmary, Manchester*. Manchester: 1952. Pickstone, J. *Medicine and Industrial Society: A History of Hospital Development in Manchester and its Region, 1752–1946*. Manchester: 1985. For Bristol, see Fissell, Mary E. *Patients, Power and the Poor in Eighteenth-Century Bristol*. Cambridge: 1991. Smith, GM. *A History of the Bristol Royal Infirmary*. Bristol: 1918.
66. Wilson. *Conflict, Consensus and Charity*.
67. Anning, ST. *Provincial Medical Schools in the Nineteenth Century*. In: Poynter, FNL., editor. *The Evolution of Medical Education in Britain*. London: 1966. p. 121
68. Reinartz, Jonathan. *The Transformation of Medical Education in Eighteenth-Century England: International Developments and the West Midlands*. *History of Education: Journal of the History of Education Society*. Jul; 2008 37(no. 4):549–66.
69. For good overviews of medical education in the provincial hospitals, see Lane, Joan. *Medical Education in the Provinces in Eighteenth-Century England*. *The Society for the Social History of Medicine Bulletin*. 1987; 41:28–33. [PubMed: 11621356] Reinartz, Jonathan. *Towards a History of Medical Education in Provincial England*. *Medical Historian*. 2005–2006; 17:30–7.

70. The names of the surgeons and hospitals to which the bodies of executed murderers were granted are recorded in the Sheriffs' Assize Calendars, E 389/247–252, TNA.
71. Lloyd. *The Casebooks of William Hey*. p. 120
72. Pearson. *The Life of William Hey*. :56.
73. *Ibid.*, 57.
74. *Ibid.*, 57.
75. *Ibid.*, 57–58.
76. *Ibid.*, 58. The case of Mary Bateman is renowned in the historiography of the period. See in particular Davies, Owen. *Cunning Folk: Popular Magic in English History*. London: 2003.
77. *Leeds Intelligencer*. Mar 27.1809
78. Lawrence. *Charitable Knowledge*. :83–90.
79. Reinartz. *The Transformation of Medical Education*. p. 556
80. King-Hele, D. *Erasmus Darwin: A Life of Unequalled Achievement*. London: 1999. p. 13-15. For more on Darwin's medical activities, see the various chapters in Smith, Christopher; Arnott, Robert, editors. *The Genius of Erasmus Darwin*. Aldershot: 2005. p. 35-46.
81. Reinartz. *The Transformation of Medical Education*. p. 557
82. Lawrence, Susan C. *Anatomy and Address: Creating Medical Gentlemen in Eighteenth-Century London*. In: Nutton, Vivian; Porter, Roy, editors. *The History of Medical Education in Britain*. Amsterdam: 1995. p. 199-228.
83. Chaplin, Simon. *Dissection and Display in Eighteenth-Century London*. In: Mitchell, Piers, editor. *Anatomical Dissection in Enlightenment England and Beyond: Autopsy, Pathology and Display*. Farnham: 2012. p. 97p. 101
84. On the publicity value of surgical skill in the eighteenth century, see Barry, Jonathan. *Publicity and the Public Good: Presenting Medicine in Eighteenth-Century Bristol*. In: Bynum, WF.; Porter, Roy, editors. *Medical Fringe and Medical Orthodoxy 1750–1850*. Beckenham: 1987. p. 33
85. *Manuscript Biography of William Hey, MS 504/2, Leeds University Special Collections, Leeds, England*.
86. Brown, Michael. *Performing Medicine: Medical Culture and Identity in Provincial England, c. 1760–1850*. Manchester: 2011. p. 129
87. *Ibid.*, 129.
88. This has been checked through the use of the Sheriffs' Cravings and Assize Calendars: T 90/165–169 and E 389/247–252, TNA.
89. For a similar career path to that of Hey, see Lane, Joan. *Eighteenth-Century Medical Practice: A Case Study of Bradford Wilmer, Surgeon of Coventry, 1737–1813*. *Social History of Medicine*. Dec; 1990 3(no. 3):369–86. [PubMed: 11622535]
90. *HOC Papers*. JHC; May 16. 1786 815 p. [accessed 8 November 2013] *The History of Parliament Online*. <http://www.historyofparliamentonline.org/> hereafter *HOPO* Biographies of Members (hereafter "Members"), "DUNCOMBE, Henry (1728–1818)." Taylor was indebted to Pitt for recommending him to the seat for Poole in the same year — see *HOPO*, Members, "TAYLOR, Michael Angelo (?1757–1834)."
91. *HOPO*, Members, "MACDONALD, Archibald (1747–1826)."
92. Without such support, it has been suggested, Arden would "never have reached such heights of the law" — *HOPO*, Members, "ARDEN, Richard Pepper (1744–1804)."
93. *HOC Papers*. PR; Jul 5. 1786 p. 160-5.
94. *Wilberforce and Wilberforce, The Life of William Wilberforce*. :60–1.
95. *HOPO*, Members, "WEDDERBURN, Alexander (1733–1805)."
96. "Wedderburn, Alexander, first earl of Rosslyn (1733–1805)," Alexander Murdoch in *ODNB*.
97. *Wilberforce and Wilberforce, The Life of William Wilberforce*. :60–1. *HOC Papers*. JHC; Jun 27–28. 1786 942 p.945 p. The printed Parliamentary Papers indicate that the Commons committee had indeed made several amendments to the Bill — see
98. *An Act for Regulating the Disposal after Execution of the Bodies of Criminals, 1786, HL/PO/JO/10/2/61, Parliamentary Archives, London, England*.

99. On the legal ambiguities arising from the 1752 Murder Act, see Radzinowicz. *A History of the English Criminal Law*. I:207–8.
100. HOC Papers. PR; Jul 5. 1786 160 p.
101. HOC Papers. PR; Jul 5. 1786 163 p.
102. *Morning Chronicle*. Jul 6. 1786
103. HOC Papers. PR; Jul 5. 1786 164 p.
104. Reprinted in Montagu, Basil. *The Opinions of Different Authors upon the Punishment of Death*. Vol. III. London: 1813. p. 179-80.
105. McCahill, MW. *The House of Lords in the Age of George III*. Chichester: 2009. p. 233-4.
106. Government supporters in the Lords included Charles Mahon, the third Earl Stanhope; Willoughby Bertie, the fourth Earl Abingdon; and James Brydges, the third Duke Chandos.
107. *HOPQ*, Members, “DUNDAS, Henry (1742–1811).”
108. *General Evening Post*. May. 1786 18
109. HOC Papers. PR; Jul 5. 1786 164 p.
110. *Morning Chronicle*. Jul 6. 1786
111. Radzinowicz. *A History of the English Criminal Law*. I:343.
112. HOC Papers. PR; Jun 23. 1785 888 p. Born in 1745, the first son of Paul Jodrell, Solicitor General to the Prince of Wales, Richard was bred to the bar in the family tradition, but did not persevere with the law, instead making a name for himself as a classical scholar and playwright. Elected as MP for Seaford in 1790, Jodrell did not stand for re-election in the autumn of 1796, and was never again in the House.
113. HOC Papers. PR; Mar 11. 1796 287 p.
114. *St James’s Chronicle*. Mar 12. 1796 *Evening Mail*. Mar 14. 1796
115. HOC Papers. PR; 16 March 1795, 54, and 3 June 1795, 512
116. HOC Papers. House of Commons Sessional Papers (SP); 1795.
117. HOC Papers. PR; Mar 11. 1796 288 p.
118. HOC Papers. PR; Mar 11. 1796 288 p.
119. HOC Papers. PR; Jun 3. 1795 512 p. *The Oracle and Public Advertiser*. Mar 12. 1796
120. *The Oracle and Public Advertiser*. Mar 12. 1796
121. HOC Papers. PR; Mar 11. 1796 289 p.
122. *The Oracle and Public Advertiser*. Mar 12. 1796
123. HOC Papers. PR; Mar 11. 1796 288 p.
124. HOC Papers. PR; Mar 11. 1796 289 p.
125. *The Sun*. Mar 12. 1796
126. *The Oracle and Public Advertiser*. Mar 12. 1796
127. Goodwin, Gordon; Skedd, SJ. ODNB. *HOPQ*, Members, “JODRELL, Richard Paul (1745-1831)””; “Jodrell, Richard Paul (1745– 1831),”
128. For particularly good studies of the medical profession in the eighteenth and nineteenth centuries, see Brown, Michael. *Medicine, Quackery and the Free Market: The ‘War’ against Morison’s Pills and the Construction of the Medical Profession, c.1830–c.1850*. In: Jenner, Mark S. R.; Walliss, Patrick, editors. *Medicine and the Market in England and its Colonies, c.1450–c.1850*. New York: 2007. Corfield, Penelope J. *Power and the Professions in Britain 1700–1850*. London: 1995. chap 6 Peterson, M. Jeanne *The Medical Profession in Mid-Victorian London*. 1978; London:
129. Letter from William Wilberforce to Henry Addington, first Viscount Sidmouth, 5 February 1816, 152M/Box 32/Family/1, Devon Record Office, Exeter, England.
130. Anning, ST. *The General Infirmary at Leeds*. Vol. Volume 1: *The First Hundred Years 1767–1869*. London: 1963. p. 54
131. Anning, ST. *The History of Medicine in Leeds*. Leeds: 1980. p. 139
132. Elizabeth Hurren for instance has recently demonstrated how medical science made the most of welfare cut-backs in the late-Victorian period which significantly increased the number of bodies

available — see her *Dying for Victorian Medicine: English Anatomy and its Trade in the Dead Poor, c.1834–1929*. Basingstoke: 2012.