



My life with asthma

Harold Beck, now 78 years old, has had more asthma treatments than most – from asthma cigarettes to a device to change the shape of his jaw. Here, he tells his story.

North Kensington, London, 1927-1934

I was told that I developed asthma after an attack of measles when I was three years old. One of my earliest memories is of waking up on a number of occasions in the middle of the night, shoulders up, struggling for breath, then sitting on the landing stairs where there was a much higher ceiling and seemingly fresher air. Often mum or dad would call out for me to come into their bed, which was warm and snug. This was quite a perk, but I hope for my parents' sake it did not happen too often.

The standard treatment at that time was Potters Asthma Cure, a powder that was poured

on to a saucer to form a cone, which was then lit at the top. The pungent smoke from this spitting Vesuvius had to be inhaled deeply. Its beneficial effects were short lived - the inhalation provided some relief but was certainly not a cure. Later I switched to the upmarket Potters Asthma Cigarettes, which were more convenient to use and less intrusive on other members of the family.

I would guess my mother started on the trek around London hospitals and clinics in search of a cure as soon as my asthma was diagnosed, but I remember only the later episodes. At one time it was thought that inhaling sea air instead of the polluted and sometimes thick and acrid air of London would do the trick. When I was about five

'After each hospital visit we went to a Lyons tea shop where I had a "milk and a dash" - nearly all milk with a trace of coffee.'



'I had a special pocket for my atomiser fitted in suits I had made, and used it surreptitiously so most colleagues and new friends did not know I had asthma.'

years old I spent four months in a convalescent home at Ventnor on the Isle of Wight. Similarly, family holidays were taken at places like Hunstanton, on the Norfolk coast, which was reputed to be "good for asthma".

I underwent allergy tests to determine sensitivity to various substances. A nil result was obtained. Likewise with visits to an osteopath, who twisted my neck on the theory that this would alleviate my asthma. Presumably there was another theory that I needed both external and internal lubrication, for he also prescribed that I should wear a band of cotton wool soaked in castor oil around my neck, and imbibe a nightly cocktail of castor oil and port. It was not the best induction to the joys of drinking in general and port wine in particular. I was also taken to see a psychologist who, after giving me several tests, pronounced me as too intelligent (so my parents said) to benefit by that method.

North Kensington and Regent Street, 1934-1939

I had lost much schooling when I was at Oxford Gardens LCC infant and primary schools, due to days off for asthma treatment and asthma attacks. However, by the time I started my secondary education at Regent Street Polytechnic, there had been a great step forward in the treatment of asthma, namely the atomiser. It came from Germany, and used a pumping device containing a liquid called Bronchovydrin. This produced a spray of droplets that had to be breathed into the lungs, producing relief in a much more socially acceptable manner and with fewer side effects than the Potters method.

By good fortune the UK sales office for the

atomiser was just off Regent Street. In that office was a motorised atomiser (which we now call a nebuliser) and I was invited to make use of it whenever the hand operated atomiser proved insufficient to control an attack. So at lunchtime on some days I would make my gasping way slowly down Regent Street, past Mr Forte's new milk bar and Hamleys, to the wonderful machine in the sales office. There was a spring in my step on the return journey and occasionally I even stopped to look at the toys in Hamleys.

The school was very understanding of my condition and gave me permission to ride up in the lift when I had an asthma attack. Many of our classes were held on the 4th floor and some, such as physics and chemistry, were, I think, even higher. So riding in the lift was a very helpful concession. Indeed it was something of a perk because some well known people used the lift. I got quite a thrill when I was a fellow passenger to Griffiths Jones, a popular film star of the late 1930s.

I applied myself to my studies and did quite well. However, as I was the youngest in the form it was decided that I might be less prone to asthma attacks if I took an extra year. Sport was then regarded as out of the question so my muscles and coordination were very underdeveloped. I was a tall and very weedy child and my father affectionately referred to me as "Tin Ribs". The search for solutions to my asthma continued: I remember having to take soya flour, lettuce and honey in a tin for lunch, but that didn't last for long.

Weare and Minehead, Somerset, 1939-1942

My school was evacuated two days before the outbreak of the Second World War. One of my brothers and I went to Weare and were billeted on a farm. It was harvest time and, needless to say, within a day or two I was in the throes of an asthma attack. I was moved into the village proper to stay with two kindly schoolteachers and within a few days I was able to breathe normally again.

Soon, the whole school moved to Minehead and there I tried some sport by entering a team for a high jump competition. I considered the short run up would enable me to make the effort before the asthma triggers had time to notice, but I made such a hash of the take off that I never tried again. I did, however, get some exercise walking on Minehead's North Hill, in the lovely combes accessed from Alcombe and over Grabbist to Dunster.

Bristol, Blackpool and London, 1942-1944

When I joined King's College, London, it was in its final year of evacuation to Bristol. The heavy bombing of Bristol had taken place earlier. The only asthma related incident that I remember is when I took beginners classes in rowing: lack of strength and breathlessness forced me to give up and concentrate on swimming.

Sometime during the year my parents moved to Blackpool to provide a safe base for the scattered family. While on a visit there, I sustained a particularly paralysing and persistent attack. I remember a GP coming and giving me injections of

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adrenaline and morphine until I could breathe well enough again. When the attack subsided it was agreed by my parents and the GP that I should have a course of Peptone injections, which apparently were universal desensitisers. What good they did me I cannot say, but at least they appeared to do me no harm.

When in 1943 King's College moved back to the Strand, London, I was referred to a chest hospital for treatment. This consisted of fitting me with an orthodontic device that changed the shape of my jaw. It was explained to me that as there was virtually no asthma among people in the Middle East, there might be a connection between that and the fact that Middle Eastern people were lantern jawed. If I was made lanternjawed, I might be rid of asthma. (I am relating here what I understood was said to me as a 19 year old student.) So I was fitted with a plate with springs in it pressing against individual teeth. The net result was that there was no discernible improvement in my asthma and I was left with a somewhat lopsided bite.

North Kensington, 1944-1947

In addition to the atomiser, the treatment for more persistent attacks was ephedrine and belladonna. Thus when a persistent attack took place in June 1944 while I was taking the final exams of my two year wartime degree course, I was dosing myself with these compounds. Asthma was certainly not the only reason why I failed to get my degree first time round I did not work hard enough but the ephedrine in particular, while improving the breathing, also produced in me a feeling of jittery excitement that probably affected my judgement to a considerable extent.

Meanwhile having no degree made me eligible for call up. I was asked to report for a medical and as a result was declared unfit for military service. I left retaking finals a year but continued studying, while I researched an electronic circuit and ran a radio business to bring in some money. I got my degree in 1947.

London, Chrishall, Saffron Walden, Cambridge and Harpenden, 1947-2003

From when I started work after graduation and got married, my asthma for most of the time took the form of wheezing and some shortage of breath, especially in the evenings and at night. It was easily controlled using the atomiser, which became my constant companion. But there were constant external reminders of its existence, such as a 20% reduction in pension insurance benefits and reports of scarring of my lungs due to asthma whenever I went for mass X ray. I gave up my moderate smoking of cigarettes and a pipe in the mid 1960s, and cigars about ten years later.

In 1986 I had my first serious attack of asthma in nearly 40 years. My peak flow was found to be 150. I was sent to St Albans Hospital where I was immediately put on a crash course of Prednisolone steroid tablets, and was loaned a nebuliser and ventolin capsules. In a few days the attack was under control. This was the point at which I caught up with advances in asthma treatment - the change from its treatment as an acute problem to regarding

it as a long term condition, with preventers as well as relievers. Since then I normally have one dose of Duovent followed by one of beclomethasone (with spacer), night and morning. I measure my peak flow each night and morning and adjust the number of doses accordingly. I also have a nebuliser to increase inhalation of my reliever on the rare occasions it is necessary.

In the mid 1990s, conscious of the debt I owed to research into asthma, I spent two years of intense activity as chairman (and sometimes also secretary and treasurer) of the local branch of the National Asthma Campaign, raising funds and disseminating information. I am now 78 years old and, thanks to the application of asthma research, the complaint that I have had for 75 years is far less of a problem than it was. Telling my story has also led me to realise how much my brothers and sister were affected by my asthma - yet I never heard a word of resentment from them, for which I owe them my lungfelt thanks.



'I am now more careful to take precautions, such as wearing a dust mask while engaged in DIY and avoiding smoke from bonfires.'