The British Empire was fading when I was growing up during the Second World War. Nevertheless our family, like so many others, had an unshakeable faith in what great uncle this-or-that had accomplished in the colonies. There was no room for criticism.

We took particular pride in Dr. John B. Christopherson, the kindly old uncle, the intellectual star of his generation. For almost two decades, in Sudan, beginning in 1901, he had battled away in heat and extraordinarily trying conditions, to bring medicine to Europeans and Africans, both sorely in need of good medical attention. In 1917 he achieved something spectacular: he found the cure for bilharzia (schistosomiasis)—a scourge of the tropics, a debilitating and sometimes fatal parasitic illness. Decades later he concluded his career as a consultant in the elegant Harley Street area of London.

This is the story of one man’s experience in Africa when tropical medical was coming into its own, a time seen retrospectively as the ‘golden age of tropical medicine.’ Opportunities for discovery, treatments, cures, and maybe even the reward of a knighthood, were all possible.

The cream of our family crop had passed the Indian Civil Service (ICS) or the Indian Medical Service (IMS) exams, and gone out to the colonies to rule for the betterment of the world, or so it was understood. Those who settled for that pseudo-colony, the Anglo-Egyptian Condominium, were graded for character and prowess in sports: written exams were not required, nevertheless, they enjoyed the same high regard in the family.

It was my discovery of a recent book about the Sudan Medical Service in the Wellcome Trust Library in London, England that made me reconsider Jack Christopherson’s reputation.¹ The author quoted from a letter written in 1908 by the Governor General of Sudan, Sir Reginald Wingate: “…there can be no doubt that he [Christopherson] has

altogether failed to obtain the friendship or the confidence of any of his Profession, including even those actually in his own Department.”

I was taken aback. Maybe the Christopherson story would be worth investigating. Was this the same man, known to be kind to animals and people alike, credited with building a hospital in the desert of Sudan and treating all comers during his two decades in an outpost of empire?

Jack Christopherson died in 1955. I read his obituaries. Many were laudatory of course, but one written by his friend Sir Philip Manson-Bahr, a colleague in the field of Tropical Medicine, was more candid than the others:

During his service in the Sudan he [Christopherson] rediscovered the spirochaete of the local relapsing fever and there ensued a battle about the nomenclature of this parasite with Andrew Balfour—a battle that resounded throughout the deserts and filtered down the Nile to the Tropical School in London. It was indeed a battle-royal and in the end Christopherson won.

But this was by no means his only claim to fame: we owe to him entirely the antimony treatment of bilharzia disease (schistosomiasis), which he discovered in 1917 in Khartoum.

Manson-Bahr also disclosed that Christopherson had been involved in one of those ‘who published first?’ academic squabbles: “Although there have been other claims to this discovery there can be no doubt that the credit goes to Christopherson, though it has not always been accorded to him, as he undoubtedly deserved.”

I soon learned that this was the least of Christopherson’s problems in Sudan. Against the background of Empire and the Sudan Medical Department, the maverick Dr. Christopherson managed, without even trying, to make life uncomfortable for his superiors in the capital city of Khartoum. Others have written about those who refused to compromise their values. Albert Memmi considered the subject in The Colonizers and the Colonized; and Clive Dewey in Anglo-Indian Attitudes looked at the troubles evoked by a couple in India who chose not to fit the mould, and socialized with Indians.

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2 Ibid., p. 24.
3 Sir Andrew Balfour, director of the Wellcome Laboratory on the Nile.
5 Ibid.