HOW SMOKING KILLED FOUR KINGS
Above: King George V dies a 'painless' death in 1936. But the run-up to it wasn't. His chronic bronchitis, caused by heavy smoking, led to a 'prolonged and terrible illness'. Edward VIII, his successor, began the habit in his teens and died with cancer. Right: George V on Britannia, 1920.
SMOKING:
THE KING-SIZE KILLER

Little is officially released on the health of British monarchs. Now, for the first time, Oliver Gillie, medical correspondent of The Sunday Times, reveals how smoking killed four of our kings

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The King often spent a part of the winter in Biarritz where the climate was more congenial. When he arrived there in March, 1910, he collapsed and refused to receive visitors—he was suffering from his old complaint, bronchitis. The King appeared to recover and returned to England via Genoa but caught a chill at Sandringham. Coughing and wheezing he returned on May 2 to Buckingham Palace. The King insisted on giving his formal audiences as arranged but his weakness and pallor aroused fears for his health. A medical bulletin signed by his doctors that evening announced that he had bronchitis and that his condition caused “some anxiety”.

The next day he received Sir Ernest Cassel at noon and smoked a large cigar. After luncheon in his bedroom he collapsed while sitting at his open window. A series of heart attacks followed and the King fought for breath. His lungs were irretrievably damaged by years of smoking. The doctors examined him and abandoned hope, giving him morphia to deaden the pain. The King insisted on staying in his chair resisting all attempts to get him to bed. During a lucid interval he was told by his son, the Prince of Wales, that his horse, Witch of The Air, had won the Spring Two-year-old Plate at Kempton Park by half a length. He said: “I am very glad” before lapsing into a coma. He was lifted to bed and died the next morning aged 69.

Sixty-nine years is a fair age, but if the King had never smoked he might have lived for another 10 years and could have been spared much suffering. The history of...
1939: George VI, takes a drag as Princess Elizabeth shakes the hand of an Empress of Britain officer. Princess Margaret and Queen Elizabeth look on.

Britain might also have been different. At the time of King Edward VII's death the country was in the throes of a constitutional crisis. Asquith had asked King Edward to create enough Liberal peers to pass his Parliament Bill through the Lords, in order to prevent the Lords from blocking legislation originating in the Commons. Sir Philip Magnus says that Edward was advised by Lord Knollys to reject Asquith's advice. This might have intensified the political crisis or led to a national referendum. Magnus writes: "But after death had deprived him [Lord Knollys] of the comfortable support of his old master's immense pre-eminence, he urged King Edward's untried successor to adopt, at the ultimate moment, the opposite course."

Throughout the reigns of the last four kings of England - Edward VII, George V, Edward VIII (Duke of Windsor) and George VI - Benson and Hedges have been in receipt of the Royal Warrant as 'Purveyors of Cigars and Cigarettes to His Majesty'; and now they are appointed to Queen Elizabeth. Although the four kings no doubt smoked other brands of cigarette, Benson's must have been a favourite.

In their centenary catalogue, the company relates: "Whereas the Queen's [Victoria] attitude held back smoking in polite society, another Royal figure did more than anyone else to make smoking respectable. Edward, Prince of Wales, was an enthusiastic smoker and it was his emergence as the stylish leading light in London life which greatly advanced sales and had a profound effect on the future of Benson and Hedges."

Benson and Hedges were primarily cigar-sellers but they had the foresight to dedicate one of their brands of pipe smoking tobacco to Edward even before he became Edward VII. They called it 'Prince of Wales Mixture' but it was cigarettes which eventually made the fortune of the company now part of American-owned company Gallahers who sell £750-million of cigarettes in Britain every year.

The rags-to-riches story of William Hedges's rise to fortune is also told in the centenary book: "If ever one cigarette and one man could be said to make a company, it was the strangely named 'Cairo Citadel' cigarette and the Prince of Wales." This was the time when Britain was interested in Egypt and the Suez Canal and tobacco from Egypt had a reputation for quality.

The Prince was sent a parcel of choice Egyptian tobacco. William Hedges was summoned to the Palace and the Prince gave him exact instructions how to blend the mixture to his taste. The tale continues: "These instructions were followed faithfully and the cigarette was one of the first London-made Egyptian cigarettes and the first of a long line of Benson and Hedges cigarettes to become famous." The Cairo Citadel cigarette was born.

The Prince of Wales who was regarded as the doyen of fashion throughout Europe introduced the habit of smoking cigarettes "immediately after dinner" and Alfred Hedges was called in to provide miniature cigarettes especially for the ladies. And so 'Cigarette Turc' was introduced in coloured containers to appeal to fashionable women. Benson and Hedges was then still a small family firm catering to the needs of an exclusive clientele mainly in Mayfair and London's clubland. Now, after several mergers, the company has the biggest-selling king-size cigarette on the U.K. market.

King George V, like his father Edward VII, was a heavy smoker. Later in life George V suffered from frequent bronchitis attacks - one of the most common and often killing results of smoking. King George's bronchitis first seriously threatened his health in November 1928 when he fell ill with a feverish cold. Lord Dawson of Penn, one of the King's doctors, was called for and he immediately realised that a serious illness was impending. A blood test showed that the King had septicaemia - an infection of the blood with bacteria. The source of the infection of the blood was identified as the base of the right lung. The King had pneumonia which is always a serious condition, but was still more dangerous at that time before antibiotics such as penicillin were available.

The Prince of Wales, who was in East Africa, was informed and decided to return to England. The newspapers heard of his return and so a bulletin was issued from Buckingham Palace on December 2 which referred to a "decline in the strength of the heart". The King's health had declined to the extent that a Council of State was appointed to act for his Majesty, who signed an order for it at the bedside.

Lord Dawson took X-rays of the King's chest to search for the source of infection and also explored the chest with needles but without success. It appears that the focus of the infection was behind the diaphragm at a point which could not be
seen on the X-rays and which was difficult to drain. On December 12 Lord Dawson believed he had found where the focus of infection lay and decided to make an attempt to drain the abscess which threatened the King’s life. The same day an operation was performed in which one of the King’s ribs was removed in order to get access to the infection.

Throughout Christmas the King’s life was in danger and churches were kept open day and night so that prayers of intercession could be heard. By the end of December the King began to show signs of recovery and on February 9, almost three months after his illness started, he was well enough to convalesce, near Bognor. On February 12 the King was allowed to smoke for the first time in three and a half months. It was not until May that the King was well enough to return to Windsor.

No sooner did the King return than he suffered a relapse and Lord Dawson was again summoned. A further abscess had formed at the site of the operation. It appeared to respond to treatment and the King was well enough to attend a thanksgiving ceremony on July 7. The King’s wound still had not healed. Nevertheless, he received Mr J. H. Thomas – who had a reputation for entertaining His Majesty with ribald jokes. The King laughed so vigorously at one of Mr Thomas’s stories that the wound became inflamed and he had another relapse. Two days later, on July 15, the King had to have another operation and a second rib had to be removed. The wound eventually healed on September 25.

George V never fully recovered his strength after this and he continued to smoke. He suffered another serious attack of bronchitis in April 1931, and was confined to his room for four weeks. On April 9 he wrote in his diary: “The doctors again appeared and said I was better, but I don’t feel so.” Smoking had caused permanent damage to the King’s lungs. He was suffering from chronic bronchitis which was to plague him for the rest of his life. The King had been a physically active man and the curtailment of his sporting activities, which must have diminished his fitness, left him severely depressed. The death of a life-long friend, Sir Charles Cust, and the weight of his responsibilities also affected the King. The doctors said that he was suffering from nervous depression.
Edward VII, as Prince of Wales, with
Prince Alexandra at Cowes in 1870.

The King's health continued to
be a cause of anxiety and in February
1935 his bronchitis became noticeably
worse and he had to spend most of
March in convalescence. For the rest
of the year the King was in poor
health until in January he was forced
to take to his bed. On January 20
he held his last Council of State
but he was scarcely strong enough to
sign his name. He died the same
night at five minutes before midnight,
aged 70 years.

The immediate cause of George
V's death is not known but it was
quite likely a virus infection such as
influenza which he might easily have
survived if his lungs had not been so
weakened by years of smoking.
Winter virus infections which cause
a healthy person a few days of acute
discomfort are a killer for people who
suffer from chronic bronchitis. If the
King had not smoked he might have
lived another 10 years.

George VI and his brother
Edward VIII, the Duke of Windsor,
began smoking when they were young
naval cadets at the training school at
Osborne on the Isle of Wight. They
were only 12 or 13 but it seemed to
be accepted in the family, where both
their father and grandfather had
smoked heavily, that they should
smoke, too, even though they were so
young. Both eventually died from
diseases caused by smoking.

On November 23, 1948, it was
announced from Buckingham Palace
that King George VI's visit to Aus-
tralia and New Zealand, planned for
early in the following year, would be
cancelled. The King was suffering
from an obstruction to the circulation
of the right leg and was ordered by
his doctors to rest. This was the
first information to reach the public
that the King, who was only 52 years
old, was suffering from a serious
degeneration of his arteries. Privately
the King's doctors feared that gan-
grene might develop in the King's
right foot and that it might have to
be amputated. The King did not
know then, and the public never
suspected, that he had only three
years to live. The King's illness
was caused by smoking. The King is
reputed to have smoked 40 to 50
 cigarettes a day, and it was cigarettes
of whatever brand - which tragically
were killing the King.

He was suffering from intermit-
tent claudication and appears to have
had Buerger's disease, which involves
the arteries of the legs and causes pain
on walking. Ninety-five per cent of
people who suffer from this disease
are smokers. People who suffer from
intermittent claudication find walking
painful as insufficient oxygen
reaches the muscles causing cramps.
The condition is brought on by
smoking and smoking also aggravates
the condition.

George VI was treated by a team
of seven doctors who for a while were
able to improve the circulation in his
legs. But progress was not entirely
satisfactory, because in February 1949
the King had a major operation.
Surgeons performed a sympathe-
tomy - that is, nerves going from the
spinal cord to the legs were cut in the
hope that this would allow the blood
vessels to dilate and the circulation
to improve. This operation evidently
saved the King's right leg from the
threat of amputation. The King
himself was certainly pleased. While
two of his doctors, Professor Paterson
Ross and Professor James Learmonth,
were bending over his foot to see if it
was any warmer the King suddenly
drew a sword from behind his pillows
and knighted them.

Although the King's leg was
saved he could not return to all his
old outdoor activities. His doctors
advised him to take things more
easily and change his interests so that
he could lead a quieter life. However
the King continued to shoot at
Balmoral. He was not able to ride but
used a pony to help himself along.
Little more was heard publicly of
the King's health until early in June
1951 when his doctors sent out
another bulletin from Buckingham
Palace saying that he had been
confined to his bed with influenza
for a week. The bulletin added:
"There is now a small area of
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Edward VII, as Prince of Wales, with
Princess Margaret in British Guiana, 1958. Pictures like these threaten to give smoking a good name so members of the Royal Family no longer smoke in public. Benson and Hedges cigarettes have carried Royal Warrants through the reign of four smoking Kings—the Queen still firmly smokes.

The surgeons did their work on the King. They performed a lung resection—the operation which is most frequently performed on people suffering from cancer of the lung. Sections were removed from two of the King’s ribs and then the surgeons were able to see the extent of the diseased tissue in the King’s chest. The surgeons were worried about cutting the recurrent laryngeal nerve which passes near a cluster of glands at the top of the lung. These glands were probably invaded by cancer and had to be removed, but one small slip and the surgeons would cut the nerve and leave the King without the power of speech which is controlled through this nerve. Three surgeons agreed that despite this risk they must go ahead and attempt to rid the patient of cancerous tissue. They removed the whole of the left lung which was badly diseased and fortunately the King’s voice remained largely unaffected.

It was revealed many years later that Clement Price Thomas, then senior surgeon at the Westminster Hospital, agreed to operate on the King only if he was treated like any other patient. Price Thomas insisted on having his usual assistants and nurses. When it came to closing the wound Price Thomas left it to his assistant saying: “I haven’t stitched up a chest for 20 years and I’m not going to start practising on the King.” The King’s chances of living long once lung cancer was diagnosed were small—only a few lucky people with lung cancer recover to live more than a year to two after it is discovered. The King’s doctor also feared the dangers of thrombosis—blood clotting—following the operation. A blood clot from the wound might lodge in the King’s coronary arteries which they knew were already damaged by arteriosclerosis—a sitting up of the arteries—caused in part by the King’s smoking.

The King appeared to recover satisfactorily from the operation but a cough began to trouble him in early December and a second bronchoscopy was performed. After the bronchoscopy the King’s voice appeared to improve although it was still hoarse as was apparent in his Christmas broadcast to the nation. The broadcast was recorded bit by bit as the King’s strength allowed.

His biographer Sir John Wheeler-Bennett writes of this period: “A great sense of well-being returned and he looked forward to a period of years during which he could devote himself to the training of Princess Elizabeth in the art of statecraft.” But it was not to be. The King’s doctors examined him and declared him fit and well at the end of January, The King was at Sandringham.
and on February 5, 1952, went out as usual and shot hares. He was relaxed and contented at the end of the day and planned the next day's sporting event. Early in the morning of the next day, February 6, the King died peacefully in bed. The immediate cause of his death was a coronary heart attack.

The Daily Telegraph commenting on the cause of the King's death said that little could be done to guard against a coronary thrombosis except by reducing both mental and physical work. "The King did not spare himself. It is true to say that his constant service was a factor in causing the disease that was the immediate cause of his death." However smoking is the major cause of lung cancer and intermittent claudication and is a major contributory factor in coronary heart disease. If the King had not smoked he might have been alive today.

Professor Charles Fletcher, formerly a chest physician at the Royal Postgraduate Medical School, Hammersmith, says: "George VI was killed by smoking. It was the critical factor in all the three diseases which he suffered. He must have smoked at least 40 or 50 cigarettes a day."

George VI's brother Edward, Duke of Windsor, also smoked heavily most of his life. The Duke, reigned as Edward VIII for less than a year until he abdicated in December 1936 so that he could be free to marry the then Mrs Simpson. The Duke of Windsor did much in his youth to popularise smoking in fashionable circles and, although a heavy smoker, outlived his brother George who succeeded him to the throne.

The Duke was operated on in 1964 for an aneurysm of the aorta—a weakening of the walls of the main vessel taking blood from the heart to the rest of the body. This condition is often caused by atherosclerosis, which occurs in this extreme form more frequently in heavy smokers. The condition may be fatal if it is not diagnosed and treated promptly. The Duke was operated on at the Methodist Hospital in Houston, Texas, by Dr Michael de Bakey. Asked why he went to the United States for his operation the Duke replied: "I came to the maestro."

In May 1972 Queen Elizabeth visited the Duke of Windsor in his house in the Bois de Boulogne, Paris. The former King was not well and this visit was to mark a reconciliation which had not before been publicly expressed. It was known to a small circle of people close to the family that the Duke of Windsor was suffering from cancer of the throat caused by years of smoking. He could not live more than a few weeks. The Queen was received by Mrs Simpson and taken to the Duke who was too weak to leave his bedchamber. The Queen returned to England shortly after May 20 and the Duke died on May 28. He was aged 78, but if he had not smoked he might have lived another five years.

The Queen, Elizabeth II, does not smoke herself, although she did before she came to the throne. A photograph entitled Princess Elizabeth at Work taken in the 1940s showed the Princess sitting at a desk with a packet of cigarettes in front of her—it caused a scandal and Royalty have seldom since been photographed with cigarettes. Princess Margaret is a heavy smoker and the Queen Mother is reputed to smoke. The Queen Mother awarded a Royal Warrant to John Player and Sons of Nottingham as recently as 1974. Mr Mike Brayley of John Player and Sons says that the company has supplied cigarettes to the Royal Family for many years. He says: "It is highly likely that we supplied cigarettes to the Queen Mother's household before the late King died."

The risks to health of smoking were only just becoming widely accepted when George VI died in 1932. Therefore no-one can be blamed for causing the deaths of our last four Kings. Nevertheless, the history of their illnesses shows how a family can suffer for three generations as a result of their enthusiasm for tobacco. History would certainly have been different if they had not smoked and done so much to popularise the habit.

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