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Chapter 6- Unusual Jefferson Alumni, pp. 153-230

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When Jefferson Medical College was founded in 1824, Philadelphia was the undisputed medical center of the United States. It then could boast of two rival medical colleges in which that of the University of Pennsylvania was the oldest in the country. From its inception, Jefferson attracted more students from outside Pennsylvania than the University. Until the time of the Civil War, medical students from the south were attracted to Philadelphia for the prestige attached to its diploma. In Jefferson’s first graduating class of 1826, among the twenty, eleven were from Pennsylvania, eight from outside the state, and one from Ireland. As the enrollment increased and even exceeded that of the University, the number of students from the south comprised about one third.

It seemed of interest to highlight the career of one of the students from the south in Jefferson’s first graduating class, that of Atkinson Pelham. A book, *Gallant Pelham: American Extraordinary* by Charles G. Milham, published in the Public Affairs Press, Washington, D.C., 1959, although a biography of the doctor’s son, Major John Pelham of the Horse Artillery in the Civil War, provided the details of Dr. Atkinson Pelham’s life, herein narrated. Full acknowledgment is made to this valuable source of information about an early and significant Jefferson graduate.

Atkinson Pelham (JMC, 1826) was born in Maysville, Kentucky, on November 21, 1797. His ancestors may be traced back to the Pelhams who migrated from London to Boston in 1726. Successive Pelham generations moved from Boston to North Carolina and Virginia, then to Kentucky, then back to North Carolina, and finally into Alabama.

The doctor’s Pelham forebears were truly illustrious. His great-grandfather, Peter Pelham, was the widely known portrait painter and artist in mezzotint, who died in Boston in 1726. Son of the artist and grandfather of the doctor was a second Peter Pelham, who became one of the well known musicians of colonial days. This Pelham moved to Williamsburg, Virginia, where he installed the first church organ in America, and became its organist in 1754. He performed as organist for nearly fifty years while holding other important positions: musician at the Hallam Theater near the Capital where he conducted “The Begger’s Opera” in 1768; served as committee clerk of the House of Burgesses; and was warden of the state prison, built in 1701.

The doctor’s father was Major Charles Pelham who served in the American Revolutionary War.
in different regiments of Virginia in 1776 and 1779. In 1781 he served again after several months of incarceration as a prisoner of war. He subsequently was awarded land for his service in the War. Major Charles Pelham married Louisa Atkinson, and Atkinson Pelham, the future doctor, was the third son of this marriage. His Christian name was thus derived from that of his mother’s family.

It must be presumed that young Atkinson was academically gifted and supported by a family of means. In 1817, at age 20, he studied at the University of North Carolina, but just how long is undetermined since the University’s records were burned by Federal troops in 1865. He did attend Transylvania Medical College for the session of 1822/23, and his lecture tickets are in the Archives of Thomas Jefferson University (Fig. 1). He then came to Philadelphia, where he graduated from the newly founded Jefferson Medical College in its first class of 1826, having received a year’s credit for his lectures at Transylvania. His graduation thesis was “Mania a Potu”, a complication of alcoholism known today as delirium tremens. His lecture tickets at Jefferson are also preserved in its archives (Fig. 2).

A curious and unexplained puzzlement is the fact that the signature of Atkinson Pelham appears twice on the back of the document that designates Jefferson Medical College of Philadelphia as the Medical Department of Jefferson College in Canonsburg (Fig. 3). It is undoubtedly his handwriting since it is the same as on his lecture tickets. Actually, it was this signature that instigated a search for information concerning Dr. Pelham that led to the writing of this article. How a document of this historic importance would have obtained his signature on the reverse side may never be explained. Considered to be Jefferson’s “Birth Certificate” it was acquired by George McClellan (grandson of George McClellan, the Founder and Professor of Applied Anatomy at Jefferson, 1905-13). The latter McClellan passed it on to Dr. Ross V. Patterson, his personal physician and the Dean of Jefferson (1916-38). It remained hidden in the Dean’s vault in the Medical College and was only lately discovered in December, 1989, by Julie Berkowitz, the University Art Historian, and Dr. Robert Lentz, the former Head University Librarian (see Jefferson Medical College Alumni Bulletin, Spring, 1990). At any rate, interest in the further career of Dr. Pelham does not stop at this juncture.

Through the influence of his mother’s family, Dr. Pelham started his medical practice in North Carolina. There he met his wife, Martha Mumford McGehee, whom he married in 1833, seven years after graduation from Jefferson. Their first two children were born in that state.

In 1837, at the age 40, Dr. Pelham received a letter from his father-in-law William McGehee of Alabama. It stated: “You had better come down here with us. People are beginning to come into this section and there is a good chance for a doctor. Living is cheap; the soil is just right for cotton and

Fig. 2. Lecture tickets of Atkinson Pelham at Jefferson Medical College.

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you can buy plenty of good land from the Government for almost nothing." In the spring of 1838, Dr. Pelham and his wife heeded the advice and headed for Alabama. Traveling by road and river, they brought their infant sons, their horses, and household goods, including especially a cook-stove.

The Pelhams found temporary lodging in the large log-house that William McGehee had built for his family of twelve children on a knoll overlooking Cane Creek. The old McGehee homestead is still standing (1959), although surfaced with clapboard and further concealed by several additions.

The doctor immediately started to build a home of his own. Construction was delayed by the many calls for his services that assured his success in practice. His wife Martha was pregnant with her third son, John ("The Gallant") and she preferred for security reasons to stay with her mother. After birth of this child on September 7, 1838, the Pelham family moved into their home several miles down Cane Creek. They installed their cook-stove which was the first such stove in Benton County.

The family continued to live in the house on Cane Creek until 1847, during which time the children increased to seven (six boys and one girl). The wilderness also changed to frontier life. The population of Alabama was increasing rapidly. From the approximately 127,000 in the census of 1820 it had increased to 500,750 by 1840. In 1850 there were 777,623 inhabitants and in 1860, 964,296. Among the latter, 526,534 were whites, 2,650 free Negroes, and 435,132 slaves. In Benton County of the Pelhams the increase was less rapid. In 1860 its population was 21,539, of whom 4,342 were slaves.

In 1847 the Pelhams moved to the County Seat in Jacksonville, where there was a school for the children. In addition to the six living children, a seventh (boy) had lived only three days. The doctor's father-in-law (William McGehee) sold him 1,000 acres of land, near the recently settled village of Alexandria. This became a plantation for which Dr. Pelham engaged a manager, since his medical practice prevented him from overseeing it himself except on sporadic occasions.

The discipline of the Pelham sons fell mainly to the firm hand of their mother, since the doctor was occupied with frequent calls to attend the sick thirty and forty miles away. Under her supervision the boys grew up in stern Presbyterian faith. There were daily family prayers and no work or play was allowed on Sundays, not even cooking. All of the family, including the doctor, attended church regularly. After the service, the children were required to memorize passages from the Bible.

Dr. Pelham bought four acres in Alexandria where he built the house that was the family home until his death in 1880, at age 83 (Fig. 4). All six of the Pelham's sons joined the Confederate cause. His third son, Major John Pelham of the Horse Artillery ("The Gallant Pelham") fell mortally wounded in the battle of Kellysville, March 17, 1863.

At times, history has a strange way of repeating itself and going full circle. Edward H. McGehee (JMC '45), from Mobile, Alabama is a direct descendant in the McGehee line of Dr. Atkinson Pelham's mother. He is Ellen M. and Dale W. Garber Professor of Family Medicine at Jefferson whose portrait was commissioned by the class of 1976. His brother, John M. McGehee, is a Jefferson graduate in the class of 1952 and practicing in Mobile, Alabama; James W. McGehee (JMC, 1888) was from South Carolina; Daniel M. McGehee (JMC, 1879) from Mississippi; and David M. McGehee (JMC,
1836) from Alabama. These family ties are just another example of Jefferson's rich heritage and tradition.

Fig. 4. Tombstones of Atkinson Pelham (JMC, 1826) at left, and his wife Martha in cemetery at Jacksonville, Alabama. (Courtesy of Edward H. McGehee, JMC, '45)

Anson Jones (JMC, 1827): Last President of Republic of Texas
by Henry H. Sherk (JMC, '56)

Anson Jones, M.D., is a fellow Jeffersonian about whom the alumni know little or nothing. Yet the fact is he was famous in his day and influenced our national destiny in a unique and important fashion. His story deserves to be retold.

Dr. Jones (Fig. 1) was born poor in upstate New York. He was hired out as an apprentice to several local physicians but was unable to develop a practice on his own. He came to Philadelphia to enroll in the newly established Jefferson Medical College and graduated in the second class in 1827. Thereafter, Jones opened his practice in Philadelphia but was not successful. He attracted too few patients to make a living let alone satisfy his creditors. After they had repossessed even his watch, he decided in 1832 to try his skills in New Orleans. There he became ill with yellow fever. He recovered slowly and again found it difficult to attract patients. Still in debt with several suits pending against him, alone, friendless, and without prospects, he decided in 1833 to move on to Texas.

Texas in those years was politically still part of
Mexico. The Mexican government had welcomed and indeed encouraged Anglo-American immigration to this vast, largely empty, tract of land. Soon the Anglos grew dissatisfied with a paternalistic unrepresentative central Mexican government and began to rebel. The Mexicans, attempting suppression of the Anglos, unleashed a series of events which culminated in Santa Anna's massacre of Texans at the Alamo in March of 1836. In the three years preceding that event, Jones had landed in Brazoria, Texas, begun practice, and for the first time in his life achieved reasonable success. After the disaster at the Alamo, however, he joined Sam Houston's army and headed for the showdown fight at San Jacinto. He served with distinction as a private in the ranks during the battle and regimental surgeon after it. The battle of San Jacinto won independence and resulted in the establishing of the Republic of Texas. Jones by this time was a highly respected physician, well known, with a large practice. He was apparently a calm person, politically astute, thoughtful, and reticent. These qualities were evidently in short supply in the young Republic and it was logical that Jones should run for and be elected to the Texas Congress.

By this time, Jones had gained the respect and confidence of President Sam Houston who eventually appointed him to the post of Texas Ambassador to the United States of America. Initially, Jones fared poorly in this role since the President of the U.S., John Tyler, was slow to receive him. Tyler, himself, was on the horns of a dilemma. Most Texans, including both Houston and Jones, favored annexation of the Republic of Texas into the United States, and while southern states also supported annexation, Texas would be a slave state and annexation was anathema to the north. To force the issue, Houston and Jones developed a strategy of offering commercial treaties to England, France, and other European nations. The Europeans wanted cotton and Texas had the capability of producing the best cotton in the world at low cost and in great quantity. The prospect of Texas becoming a British or French protectorate was not attractive to the United States and led to tortured negotiations between Texas, the U.S., Great Britain, France, and Mexico. Jones was in the thick of all of this and rose from Ambassador to Secretary of State and eventually was elected to the post of President of the Republic of Texas. Finally, during the closing months of the administration of John Tyler, the Congress of the United States approved the annexation of Texas into the Union. Anson Jones had played a pivotal role in the complex tangle of international intrigue which eventually resulted in Texas becoming The Lone Star State instead of the Lone Star Republic. It was fitting that it should be he who with his own hands lowered the Lone Star flag of the Republic of Texas in the annexation ceremony before the capitol building. Immediately thereafter, it was also he who with his own hands raised the flag of the United States of America.

Tragedy and failure had stalked Anson Jones for much of his life and these specters were not yet through with him even at that moment of triumph. Jones left politics and returned to private life. He was successful but restless. He left medicine and became a planter. His plantation was not a large one but the yields were high due to his intelligent and thoughtful management. Nevertheless, he decided to run in 1856 for the U.S. Senate. He campaigned as vigorously as he could, seeking votes in the Texas state legislature which was the body he hoped would send him to Washington. To his dismay, however, he received not a single vote. The
rejection was more than Jones could handle. By now he was in his late fifties and obsessed with a sense of failure. He tried once again to open a practice, this time in Galveston. Before he could begin to have begun, depression overwhelmed him and in January, 1858, he committed suicide by putting a bullet through his head.

Anson Jones was a Jefferson alumus whose life should be remembered and honored. That at the end he considered himself a failure does not give credit to the extraordinary life he led.

Jonathan M. Foltz (JMC, 1830):
Surgeon General, United States Navy

New Year’s Eve, 1829. Jonathan Messersmith Foltz, age 19, a Jefferson student already in a leadership role, was a party to an event which would have major career implications for him. Dr. William P.C. Barton, Professor of Materia Medica and Botany and recently Dean, (Fig. 1) was ordered to sea duty as fleet surgeon by the Secretary of the Navy and would be obliged to leave Jefferson. Dr. Barton had been in Naval Service since 1809 but had long intervals between tours of sea duty. As class representative, Foltz was summoned to Dr. Barton’s office where the Professor explained with emotion his concern about his obligation to the students to complete his series of lectures and even offered to engage Dr. Benjamin Rush Rhees, Professor of the Institutes of Medicine, to take on his lectures so he could retain his commission. Foltz called a class meeting and it was decided that Dr. Barton should be excused provided he would sign the diplomas for the class and Dr. Rhees would serve. In a letter to his parents of December 29, 1829 Foltz stated — “There are seven assisting naval surgeons attending these lectures who are waiting the examination of the Naval Board for promotion, and through Doctor Barton, I am acquainted with all of them”. (C.S. Foltz: Surgeon of the Seas, pg. 16, Indianapolis, The Bobbs-Merrill Company, 1931). He went on to indicate his own desire to enter naval service but we are not informed regarding the origin of this determination. It is possible that it resulted entirely from his admiration for Dr. Barton whether or not there was prior acquaintance relative to their common connections in Lancaster, Pennsylvania. In any case this is the first time that Jefferson historians have noted the presence of the naval assistant surgeons in the early classes.

Jonathan M. Foltz was born in Lancaster, April 25, 1810. Although we have no specific record of his preliminary education except that it was “academic”, his journal excerpts give evidence of good writing quality. He pursued his navy lead vigorously early in 1830 as one of two hundred applicants for the examination of the Naval Medical Board that year. Seventeen were selected, five passed, and Foltz was the leading candidate. The five were recommended to President Jackson for commissions as assistant surgeons. For his visit to

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Jackson he was able to obtain letters from six Lancaster people of prominence including Congressman James Buchanan, (later President). Foltz walked from Lancaster to Washington and President Jackson appointed him on the spot April 4, 1830. He was ordered to sea duty at once on the new sailing frigate Potomac and his career was under way (Fig. 2). It was not to end until his mandatory retirement in 1872.

A curious sidelight on Foltz’ graduation relates to his age. Jefferson required graduates to have attained the age of twenty-one. On reviewing his credentials and receiving his thesis, Dean Samuel McClellan “wished to know my age. I told him my birthday would be on the 25th of April. ‘Well,’ said he, ‘you will be examined in March and one month will not make any difference’. I will be only twenty on the 25th of April, but unless they make very particular inquiry, they will not find that out, as I do not find myself obliged to tell them”. Foltz may thus have been the youngest graduate in all Jefferson’s history.

Beginning with a voyage to the East Indies on a punitive expedition in 1831, Foltz experienced navigational and combat circumstances he probably never dreamed about when he was pursuing his objective of becoming a naval surgeon. The voyage around the world from west to east included South American and South African ports, East Indian visits for securing American trade facilities there, stops in the South China Sea, Manila and Honolulu, and a stop at the Galapagos Islands one year following the visit of the “Beagle” bearing Charles Darwin on his epoch-making voyage. The entire trip stretched out to three years. It was described by Foltz in a book published in 1837 - Medical Statistics for Three-year Circumnavigation of the Globe. The same year he received the Master of Arts degree from Yale “for distinguished achievement in medical and surgical science”.

For several years Foltz practiced in Washington while retaining his commission. In 1839 he was promoted to Surgeon but during the interval he made many important acquaintances including Edgar Allen Poe and Samuel F. B. Morse.

Assigned to the island of Minorca he sailed aboard the “Great Western”, a new steamship, where he met and was befriended by the veteran hero of the United States Navy. Commodore Isaac Hull was commander in the War of 1812 of the U.S.S. Constitution in its epic engagement with the British H.M.S. Guerriere. Hull was at the time Commander of the U.S. European Squadron. The son of President VanBuren was also a passenger. Foltz’ diary records many experiences in Europe and in Mediterranean ports, including the acquaintance of a French Captain MacMahon who in 1873 was to become President of the Republic of France. Upon leaving Minorca in 1841, Foltz served for a time directly under Commodore Hull on his flagship “Ohio”. In 1844 he was promoted to the rank of Fleet Surgeon.

Foltz’ experiences during the decades from 1840 to 1860 consisted of long periods of sea duty including South American actions and the Mexican War. Stationed in Washington for several long periods, he became closely attached to the career of James Buchanan and in 1847 his personal physician. In 1848 he published “Report on Scorbutus” in the American Journal of the Medical Sciences, detailing his experiences with scurvy in seamen who were nutritionally deprived prior to and during the Mexican War for long periods in spite of the existence of knowledge for its prevention.

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Fig. 2. Jonathan M. Foltz, M.D. (JMC, 1830), Assistant Surgeon, U.S. Navy, at 21 years of age (from an oil painting).
In 1854 Foltz married Rebecca Steinman of Lancaster following a secret engagement of more than two years, marriage having been deferred by sea duty. Three sons were born and the family established residence in Philadelphia while Foltz was on duty at the Naval Home and other assignments. The youngest son, Charles S., was a West Point graduate who became an army general, and a third son, Jonathan Clinton, was a physician. Their home at Broad and Chestnut Streets in Philadelphia provided ready access to Dr. Foltz's varying activities, especially prior to and during the Civil War when he moved freely between Philadelphia and Washington alternating with sea duty. He served as Fleet Surgeon under the great Admiral David G. Farragut between 1861 and 1863 after which he was a member of the Medical Board in continuous session in Philadelphia.

Having been so closely associated with national and international events and personages, Foltz had personal encounters politically and militarily. His own career was influenced by his relationship already mentioned with President Buchanan. Since he had been close to the new President prior to inauguration, Foltz was ordered to duty to attend him and given a room at the White House. The relationship cooled as Foltz perceived that Buchanan was irresolute in all political appointments and actually believed that the Union was about to break up into two republics. Buchanan also failed to carry out his promise to appoint Foltz as Chief of the Naval Medical Bureau.

Dr. Foltz' steadfast devotion to the Union caused him to oppose his friend, General George B. McClellan for the Presidency in 1864 despite the fact that his brother Dr. John H.B. McClellan was the Foltz family physician. Loyal to President Lincoln, Foltz accompanied him at a reception at the Union League in June, 1864. As the President arrived, Surgeon Foltz stood beside him with the reception committee at the head of the Broad Street stairway. "Just behind Mr. Lincoln were two young men, his sons, and, peeping between the legs of the group... two little boys, the sons of the Naval Surgeon."

The last important sea duty that Foltz experienced was from 1867 to 1870 when the United States sent a squadron to numerous European ports on a major diplomatic and commercial mission. Admiral Farragut personally requested the assignment of Foltz as Fleet Surgeon and he served during the entire grand tour. Once more Foltz was able to observe the complexity of international diplomacy with the Franco-Prussian war soon to erupt.

Returning home Dr. Foltz was close to mandatory retirement in 1872 at age 62 (Fig. 3). Another honor came his way when in June, 1871, he was commissioned Medical Director of the Navy and in October that year he was appointed Surgeon General of the Navy and Chief of the Bureau of Medicine and Surgery. This appointment would extend for less than a year but was an appropriate vindication of his skills and loyalty over a period of forty-two years. It also carried with it valued personal contacts with President Grant. Foltz was given two post-retirement positions, Inspector General of Hospitals and Fleets as well as Chief Surgeon of the Naval Hospital of Philadelphia. These he resigned in April, 1873.

Dr. Foltz' relations with Jefferson are not well documented but his son states that he delivered an address to Jefferson Medical College in 1874 when he was elected a Vice-President of the

![Fig. 3. Dr. Foltz, Surgeon General and Chief of the Naval Bureau of Medicine and Surgery (1871).](Unusual Jefferson Alumni 161)
Alumni Association which had just been organized in 1870 and was mounting a major fundraising campaign for the erection of the new hospital in 1877.

The career of this early graduate, associated as it was with powerful forces in governmental and especially naval affairs, was pursued in a linear fashion from the day of his graduation and culminated with full recognition of his many important contributions during some of the most critical years of American History.

Ninian Pinckney (JMC, 1833):
Civil War Surgeon of the Fleet

Many young Americans were attracted to the United States Navy in the early years of our Nation's history. The names of Captain John Paul Jones, Commodore Isaac Hull, and the adventures of "Yankee" seamen during two wars provided romantic interest. The early exploits of the "clipper ships" continued the stimulus. Medically this appears to have been reflected in the planning of careers of numerous young Jefferson students in the early 1830s. Thus Jonathan M. Foltz (JMC, 1830) wrote his parents on December 30, 1829: "There are seven assisting naval surgeons attending these lectures who are awaiting the examination of the Naval Board for promotion, and through Doctor Barton, (Dr. William P.C. Barton, Professor of Materia Medica, on Naval duty since 1809, called to sea duty in 1830-Ed.) I am acquainted with all of them. They are of the most temperate and exemplary habits and of superior intelligence, and the more intimately I become acquainted with them the more desirous I am to enter the service." Foltz went on to a distinguished naval career. In the fall of 1831 another navy-bound youth matriculated at Jefferson and proceeded to lifetime naval service with many adventures.

Ninian Pinckney (Fig. 1) was born in Annapolis, Maryland, but curiously none of his immediate ancestors was associated with sea-going traditions. His father, however, was a Lieutenant-Colonel in the American Army in the War of 1812, but died in 1824 when Ninian was 13 years old. Ninian’s boyhood home on the Severn River was acquired in 1845 as a site for the United States Naval Academy. His education began at home and continued through the local Saint John’s College from which he received the B.A. degree in 1830. He began the study of medicine with a preceptor and attended some lectures at the University of Maryland, but in 1831 matriculated at Jefferson. His student years were highlighted by an acquaintance with Professor of Anatomy, Granville Sharp Pattison, a relationship described by Pinckney’s brother after his death:

"He there at Jefferson enjoyed the privilege of sitting at the feet of Granville Sharp Pattison and George McClellan. ...As he drank in the marvelous eloquence of Pattison, and marked the not less marvelous skill of McClellan, he grew imperceptibly into the likeness of the men he so much ad-

Fig. 1. Ninian Pinckney (JMC, 1833), Surgeon of the Fleet, U.S. Navy (from an early Daguerreotype).
mired. Pattison he considered the prince of lecturers, the mightiest orator of his age.

"It was his custom once a week to summon to his hospitable mansion his young students, and discuss with them the mysteries of their noble science; and it was there that he threw over them the spell of his peculiar fascination. In these informal interviews, as in the classroom, he was quick to discern the genius of the young man... Pattison was proud of him, and he showed it in many ways, but in no way so remarkable as in designating him in after years as one who was qualified to fill the chair he occupied, and in making provision that his library should pass into the possession of his former pupil at a nominal price, if he so desired. That library was Surgeon Pinckney's at the time of his own death."

Beyond the acquaintance with naval aspirants at Jefferson, there is no clear indication of Pinckney's motivation toward Naval Service. Application for examination for admission to the Medical Corps of the Navy must have been made following graduation since he received a letter in December, 1833, from Hon. Isaac McKim, member of the House of Representatives, authorizing him to be admitted to the examination February 1, 1834. Passing the examination easily he was commissioned Assistant Surgeon and ordered to duty on the U.S.S. Erie. Following an extended cruise in South American waters, Pinckney spent his leave at Jefferson in 1837 as an early postgraduate student, especially renewing his acquaintance with Professor Pattison. This relationship was furthered when he was ordered to duty at the Naval Hospital of Philadelphia in April, 1838. The following year he was assigned to duty aboard the frigate Brandywine for an extended foreign cruise. On this tour for the second time he was forced to answer charges of "disrespectful conduct and provoking language" to a superior officer and was suspended from duty for eight months. Curiously the Squadron Commander, Commodore Isaac Hull, asked him to carry important dispatches from the Mediterranean to London during that suspension. Pinckney found opportunity to see London and make important medical contacts, thus turning adversity to advantage. He made the acquaintance of Sir William Fergusson, Sir Astley Cooper and Sir Benjamin Brodie as well as the Surgeon to the Queen, Sir James Clark. With such surgical contacts in London and further visits to Baltimore and Philadelphia, Pinckney was able to advance his surgical training and experience so that on his next tour he was ready for major surgery.

With expiration of his suspension in 1841 he was ordered to South American duty, headquartered at Callao, Peru, where the Navy had a major base at the time. He quickly established a reputation as a surgeon and was privileged to serve not only naval personnel but some local people as well as sailors from other ships. He even developed a lucrative practice which could have continued in Callao and Lima if he had left the Navy, but after three years he returned to duty in Baltimore until 1846 when he was ordered to the U.S.S. Albany for duty in Mexican waters under Commodore Matthew C. Perry. There he was in the midst of the action at Vera Cruz in the Mexican War. He was cited for "gallant and meritorious conduct," in the care of the sick and wounded but vehemently expressed his opinion that the war was illegal, unjust and a violation of the founding principles of our country for which "of course he, James N. Polk, will be impeached,..."

By this stage of his career, Pinckney was well established in the Navy but his restless personality caused him to look for advancement. In February, 1848, he was an applicant for a position on the Naval Board at the Naval Academy and took a course in chemistry to round out his qualifications. He was not successful, probably for political reasons, but he was appointed to the Naval Academy in 1852, where he served for three years.

During the 1850s Pinckney broadened his interests and contacts. He became involved with the recently (1847) founded American Medical Association and enlisted its help in supporting a bill in Congress to secure rank for the medical staff of the Navy. He also represented the society in two foreign delegations and was elected Vice President in 1876. He was in demand as a public speaker including delivery of the principal address at the
Naval Academy in 1855 on the occasion of the presentation of the flag which Commodore Matthew Calbraith Perry had raised in Japan in his dramatic opening of that country to international commerce in 1853.

Returning to sea duty in 1855 he was present with American and British vessels off the coast of Ireland in 1856 at the first attempt to lay a transatlantic cable. He again spent a good deal of time in London. He had hopes of being appointed Chief of the Bureau of Medicine and Surgery of the Navy, but having made a speech against the "Buchanan Dynasty", Buchanan's victory over Fillmore in 1857 dashed these hopes and he was again ordered to sea on a ship sailing for the African coast.

The Civil War found Pinckney ready and able. His first duty was at the Naval Hospital in Washington from which quarter he toured military facilities including the battlefield of Antietam in September, 1862. He was an admirer of General McClellan (son of Professor George McClellan) whose removal from command of the Army of the Potomac he objected to vehemently. In December, 1862, he was appointed Surgeon of the Fleet to the Mississippi Squadron and attached to the flagship "Blackhawk" of Acting Rear Admiral David D. Porter at Cairo, Illinois. This was the beginning of a life-long friendship.

Historically the Civil War career of Ninian Pinckney is associated with the "Red Rover," the hospital ship of the Mississippi Squadron (Fig. 2). This vessel, a former confederate side-wheeler, had been refitted as a hospital ship, but when Pinckney was appointed he assumed full responsibility, so far as Naval protocol would permit, for its operation and maintenance. It became well known as a facility where care was unusually effective and Pinckney was given much credit for its efficiency.

For the first time, Catholic Sisters were employed as volunteer nurses aboard a naval vessel and contributed greatly to the success of its operations. On August 11, 1863, Sister Angela of the Holy Cross wrote to Pinckney to assure him that the Sisters would continue their services so long as they could continue to attend Mass and she thanked him for his "great kindness" to them. Upon his retirement she wrote again indicating her appreciation of "one who holds so high a place in the esteem of all the Sisters of the Holy Cross." The battle for the Mis-

Fig. 2. The Red Rover. Pinckney's hospital ship which under his command set a standard for management of naval casualties.

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Mississippi River was in full cry and the efforts of army and navy were directed to opening it to New Orleans. As the crucial Battle of Vicksburg approached, casualties mounted. The "Red Rover" became known as a luxurious refuge for the sick and injured under Pinckney's determination to make it a model for their care. His reputation was responsible for the opening of a hospital in Memphis which at the order of Admiral Porter was designated "Hospital Pinckney." During the period of 1862 to 1865, Pinckney was indefatigable in supervising and ordering the medical affairs of the Squadron, covering an estimated 82,000 miles in the course of his duties as medical advisor over a fleet of 120 ships. The battle of Vicksburg with its surrender July 4, 1863, completed the conquest of the Mississippi, and freed the Squadron for further operations at the Gulf Coast, culminating in Admiral Farragut's victory in the Battle of Mobile Bay in August, 1864.

At the end of the war, Pinckney cherished the ambition of appointment as Chief of the Bureau of Medicine and Surgery. This was not to be. Upon termination of his Mississippi Squadron service July 15, 1865, he received many laudatory letters but politically he was on the wrong side and his post-war service was intermittent and temporary. He served on the Board of Visitors at Annapolis, then on its Board of Examiners as well as a board for special duty at the Naval Academy. Following an extended European tour accompanied by his brother, Episcopal Bishop of Maryland William Pinckney in 1869, he was ordered to the Washington Navy Yard in 1870 where he remained until his retirement in 1873. During this period he was again in demand for speeches and addresses at college commencements, literary societies and political organizations. His effort to define naval rank for medical personnel was finally successful when in 1870 such a law was enacted with the support of Admiral David D. Porter.

In 1873 Dr. Pinckney was retired from the Navy to his farm near Londonderry, Maryland, where his many interests kept him active until his death from intestinal obstruction December 15, 1877. He was a man who made many close friends through his outgoing personality and firmly expressed convictions, but he also had many detractors. He was indefatigable, stating that he never slept more than five hours during the two and one-half years of the Mississippi campaign, while carrying out inspection of all the ships of the Squadron. He was physically a small man but commanded the respect and admiration of his associates. At the time of his death an old friend expressed regret that his entire career was devoted to the Navy, thereby denying the public of his "wonderful skill in surgery, with his impressive eloquence."

The Jefferson - U.S. Navy connections during the nineteenth century were somewhat remarkable. In some respects the careers of Dr. Ninian Pinckney and Dr. Jonathan Foltz were parallel and it is curious that late in their careers they were at least somewhat intimately acquainted. While Foltz served as Fleet Surgeon to the New Orleans Squadron under Admiral Farragut, Pinckney was Fleet Surgeon to the upper Mississippi Squadron under Admiral David D. Porter. There is no record of their meeting during the Mississippi Campaign but in 1872 Foltz wrote to Pinckney praising his efforts on behalf of navy medical officers and in May, 1873, he wrote: "You are now on the eve of your retirement and leaving Washington. I hope yourself and Mrs. Pinckney will enjoy it as much as we do —— Please give my regards to that 'ace of trumps' Admiral Porter. I often think of the happy hours passed in your house where I always got the best coffee in America..."

Of further interest is the closeness of both these Jefferson graduates to the Naval powers. David Porter (1780-1843) was the intrepid Captain of the Essex during the War of 1812. His adopted son was David G. Farragut who became the Navy's first full admiral and his natural son was David Dixon Porter who was named the Navy's second Admiral (1870). Both Foltz and Pinckney were intimate with the two Admirals. It is noted that Admiral Farragut died in 1873 at Portsmouth, New Hampshire, where he was cared for in his last illness by another Jefferson alumnus.
Jefferson may add to its heritage the name of John Stough Bobbs, first surgeon in the world to operate upon the gallbladder. This heroic accomplishment, at first barely noticed and little appreciated, occurred in Indianapolis on June 15, 1867. The patient, Mary Wiggins, age 31, had experienced over a period of four years an enlarging mass in her right abdomen which became increasingly tender to the extent that she was unable to walk or to operate a sewing machine for her living. It is not only Jefferson’s privilege to lay claim to her illustrious surgeon but to highlight the other aspects of his distinguished career.

John S. Bobbs (Fig. 1), the son of Elizabeth and Conrad Bobbs, was born in Green Village, Pennsylvania, on December 28, 1809. He received his early education in the village schools of this Pennsylvania Dutch area. His early inclinations were shown when at the age of 18 he decided to break loose from this region of limited opportunity to go by foot to Harrisburg. He managed to engage a prominent physician to accept him in a preceptorship. During three years of reading and serving in the office of Dr. Martin Luther, he is stated to have taken one course of formal lectures, but where and to what extent at that time is unknown. Although not having obtained an M.D. degree, he was considered and accepted as a "doctor." On this basis he went to Middletown, Pennsylvania, where he engaged in practice for the next four years.

In 1835, at age 26, he again exhibited his enterprising nature by moving to Indianapolis to start a new medical practice. Realizing his serious interest in surgery, he decided to study in Philadelphia at Jefferson Medical College. The surgical exploits of its Professor of Surgery, George McClellan, were well known and doubtlessly attracted him, as it did another student who would become even more famous, - Dr. J. Marion Sims (JMC, 1835). At any rate, Bobbs is stated by his biographers to have taken two courses of lectures at Jefferson at this time. Archival records indicate that he matriculated but was not awarded the M.D. degree. It is unlikely that he would have failed the examinations. There is no specific record that he attended any other medical college but Jefferson.

Bobbs spent the remainder of his life in Indianapolis where he achieved high standing as a physician and surgeon. In 1848 he was active in the formation of the Indianapolis Medical Society of which he was the first secretary. The following year, he was equally active in the organization of the Indiana State Medical Society.

In 1849, Bobbs was appointed Dean of the newly formed Indiana Central Medical School and served as its Professor of Anatomy and Surgery. This school ended three years later, but lasted long enough to establish Bobbs as an outstanding leader in surgery.

In 1856, Bobbs was elected to a four-year term as a State Senator. He took on this responsibility as a civic obligation rather than a position of his liking. His wife, Catherine Cameron, was the sister of a United States Senator, Simon Cameron,

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Fig. 1. John Stough Bobbs, first to operate upon the gallbladder (1867).
who served in Lincoln's cabinet. It is possible that family influences may have caused him to dabble in politics. Around the 1850s, Bobbs participated in plans and erection of buildings of the Indiana Hospital for the Insane. His interest extended also into development of schools for the blind and the deaf.

At the time of the Civil War, Dr. Bobbs was 52 years of age, but aided the North in a civilian capacity. Although not officially listed in the Army, he did serve for a time with General T. Morris in the first campaign of the War, and was stationed at Laurel Hill, Virginia. During this engagement, he was cited for an heroic act in which he quelled panic among some young recruits. He also acted as medical director for the District of Indiana and tended prisoners of war at Camp Morton in Indianapolis.

Robert S. Sparkman, M.D., in his article entitled "Dr. John S. Babbs of Indiana: The First Cholecystotomist" (The Journal of the Indiana State Medical Association, 1967, Vol. 60, p. 541-48), made this statement about Babbs' operation: "It is likely that this was the first major medical contribution of the postwar era in America." The 31-year old patient had been told by various physicians that she had an ovarian tumor. Babbs himself thought that such a diagnosis was unlikely and was reluctant to operate. Upon the insistence of the woman, he carried out a laparotomy on June 15, 1867. He was assisted by six doctors and a medical student.

The operation was conducted on the third floor of a wholesale drugstore in downtown Indianapolis under chloroform anesthesia. He initially employed a right lower abdominal incision as if for an ovarian tumor, but had to extend it above the umbilicus, where there was encountered a mass about five inches in length and two inches in width surrounded by adherent omentum. In cutting into the mass, a limpid fluid escaped in what could be interpreted today as hydrops of the gallbladder. Several solid bodies (gallstones) about the size of ordinary "rifle bullets" escaped. Additional stones were hooked out by the surgeon's finger, but one impacted in the neck could not be dislodged, - the usual pathogenesis for hydrops of the gallbladder.

The gallbladder was sutured closed, as well as the abdomen, without drainage.

The year 1867 was the same in which Lister proposed his "Principles of Antisepsis." Bobbs was unaware of antiseptic precautions and it is to be expected that his patient developed a wound infection. This was manifested at the end of a week with outpouring of pus from the wound. Except for urinary retention that required frequent catheterization, she recovered sufficiently to be discharged at the end of one month. During a follow-up period of ten months, she experienced some intermittent fever and impaired digestion, but was able to return to her work. The patient lived to age seventy seven and died in 1913.

Bobbs reported his "Case of Lithotomy, of the Gall-Bladder" in Transactions of the Indiana State Medical Society 18:68, 1868. This was an obscure journal, the distribution of which was mainly limited to members of the society. This accounts for the slow and late recognition of this historic operation.

Bobbs was suffering from a pulmonary problem at the time of his famous operation and had but three more years of life remaining. He developed shortness of breath on climbing stairs, forcing him to recline on a couch. This was in evidence on his visits to the third floor of his cholecystostomy patient. Nevertheless, he was able to serve as President of the Indiana State Medical Society in 1868. In his inaugural address, he urged the establishment of a medical school for the state of Indiana, as well as a medical journal. He lived to see the organization and construction of the medical school building the following year. He was appointed President of the Faculty and Professor of the Principles of Surgery. He also delivered the address at the opening session of the new college on March 1, 1869.

Dr. Bobbs died of an acute respiratory tract infection on April 23, 1870, at age sixty one. He left $5,000 in his will for the development of a free medical library under the direction of the Indianapolis library. He also bequeathed an additional $2,000 for a City Free Dispensary which became a part of the Hospital under the direction of the In-

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diana University School of Medicine.

Of the first four operations in the world performed upon the gallbladder, three were by Jeffersonians: Drs. Bobbs, Sims and Keen. It would have been beyond the imagination of these brilliant men to envision advances in the next century and a quarter that would lead to dissolution of gallstones by lithotripsy or removal of the gallbladder by means of a laparoscope.

John H. Dix (JMC, 1836): Early Ophthalmic Surgeon

In 1834 John Homer Dix (JMC, 1836, Fig. 1) began his medical career with a preceptorship under Dr. John Jeffries, co-founder of the Massachusetts Eye and Ear Infirmary in Boston. Having graduated with a B.A. from Harvard College the same year, he thus became one of the earliest Jefferson alumni to embark on his career in medicine with a clear direction toward a specialty. His college degree provided an additional advantage. Upon graduation he became the first resident at the Eye and Ear Infirmary. He proceeded to acquire special skills in ophthalmology and was regarded by many as the first American full-time specialist.

Dix proved to be a venturesome surgeon. Although research as presently understood was primitive in his time, he was able to make numerous contributions to knowledge in his field. Among numerous articles, he published a paper entitled "A Treatise on the Nature and Treatment of Morbid Sensibility of the Retina, or Weakness of Sight", which won the Boylston Prize for 1848. He was also one of the founders of the American Ophthalmology Society.

In 1846 Dix was involved in the early use of ether for general anesthesia for a protracted operation only one month after its first demonstration on Ether Day, October 16, 1846, at Massachusetts General Hospital. In fact the surgical procedure on November 18, 1846 was probably "the first case in which the patient was taken down to stage III or true surgical anesthesia." The operation performed by Dix is not specified but the difficulties of regulating the level of anesthesia are well noted. Between the first instance of October 16th and the Dix operation, several others were done at Massachusetts General but the lack of direction and need for experience with the new method were clearly demonstrated.

Among his other accomplishments was his priority in the use of the newly invented ophthalmoscope and he published the first article describing it in the United States (On the Ophthalmoscope: Boston Medical and Surgical Journal 52, 411, 1855.) He was also the first in America to divide the internal rectus muscle for correction of congenital strabismus, an operation originated by Dieffenbach. This was reported in the Boston Medical and Surgical Journal, September 30, 1840.

As a non-medical contribution to American living Dr. Dix in 1856 erected the Hotel Pelham in Boston, introducing the apartment house concept, the idea for which he borrowed from the French.

Fig. 1. John H. Dix (JMC, 1836), pioneer ophthalmic surgeon.
Edward R. Squibb (JMC, 1845): Produced Pure Ether

Among the most colorful of the early graduates of Jefferson in a non-academic setting was Dr. Edward R. Squibb, the founder of a major pharmaceutical company which survives as a part of the Bristol Myers Squibb Co. Dr. Squibb's genius in the purification of ether for anesthesia was the first success in a life of dedication to principle, searching for perfection in the purity of drugs, and integrity of purpose. He was also one of a very few early alumni who returned to Jefferson for a period of "rubbing up", the term applied to post-graduate study. This occurred in 1851.

Edward Robinson Squibb (Fig. 1) was born July 5, 1819 in Wilmington, Delaware, to a Quaker family whose ancestors had accompanied William Penn to Pennsylvania. His mother died in 1832 and Edward was cared for by his Grandmother Bonsell in Darby, Pennsylvania, until he set out on his own in Philadelphia in 1837. At that time while continuing school work he took a part-time job with a pharmacist and then went to work for the pharmaceutical house of J.H. Sprague. He had thus acquired a good deal of knowledge of drugs and medicines prior to his matriculation at Jefferson in 1842. This experience surely influenced his career and it is probable that he continued some connection with pharmacy during his Jefferson period.

Upon graduation in 1845 he stayed in Philadelphia, apparently beginning some level of medical practice until early 1847, when after a good deal of soul searching by reason of Quaker opposition to anything military, he joined the United States Navy as Assistant Surgeon. He was ordered to sea duty and promptly was subjected to all of the adventures of naval personnel in an interesting period of our country's emergence as a world naval power. Repeated assignments extended his sea duty into 1851 with many experiences that he carefully recorded in private journals. During these years he was distressed to find drugs and medicines on shipboard and in naval facilities badly managed and often adulterated.

Having been assured of an extended shore leave, Squibb spent a few months with Grandmother Bonsell in Darby, renewing acquaintances and sharing with relatives his adventures in European waters. In the fall of 1851 he registered for lectures at Jefferson for his "rubbing up", preparing for examinations for promotion. His maturity now resulted in more interpretative evaluation of the professors, the lectures and the status of medicine than he could have made in his student years. He carefully recorded all of these impressions in his journals. In addition he made intimate acquaintances with the professors, at times being invited to social events as well. Favorites were recorded as Dr. Franklin Bache, Professor of Chemistry and co-author with Dr. George B. Wood of the first Dispensatory of the United States, Dr. Robley Dunglison, and Dr. Charles Delucena Meigs, then regarded as the leader of obstetrics in the United States. Underlining his interest in drugs, Squibb referred to Bache and Wood as "liberal and accomplished scholars." A curious duty assigned to him

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Fig. 1. Edward Robinson Squibb, M.D. (JMC, 1845), photograph ca. 1850, prior to his laboratory fire.
while a graduate student was the collection of funds from Jefferson’s faculty (assessed $1.00 each) for the erection of a monument in London to Edward Jenner as a “belated centennial memorial to the one who introduced vaccination against smallpox”. He turned over the $10 he collected to Dr. Dunglison.

Squibb’s “rubbing up” was suddenly interrupted by his having been peremptorily ordered to sea duty on January 14, 1852. On arrival at the Brooklyn Navy Yard he found his ship would be delayed. This provided opportunity for him to make contacts which resulted in his trading sea duty for an assignment at the Brooklyn Naval Hospital, an arrangement largely managed by its commandant Dr. Benjamin Franklin Bache, nephew of Jefferson’s Professor Bache. The trade-off became especially attractive when Dr. Bache agreed heartily with Squibb’s plans to upgrade the acquisition of drugs and appliances for the Navy and to attempt to purify those he regarded as adulterated. Squibb was assigned to ward duties but was permitted to clear an unused area to serve as his laboratory. The advanced status of his thinking is evidenced by his additional duties during this period. He served as pathologist to the hospital and performed autopsies as well as using his own microscope at a time when most teaching institutions still did not own microscopes. One of the spin-offs of Squibb’s contacts with Dr. Bache was his marriage in October, 1852, to Caroline Cook, the beautiful eighteen year old sister of Mrs. Bache.

Dr. Squibb began with an inventory of drugs in the Naval pharmacies and the summary discard of those he believed worthless. He soon was making ammonia, blue pill, potassium iodide, syrup of squill, citric acid, and zinc cerate. He made tincture of colchicine from colchicum seeds ground up in an old coffee mill. Soon the Naval Laboratory was making drugs for the hospital, for ships calling at the Brooklyn Navy Yard and for the Pensacola Naval Station. Noting the quality of Squibb’s work, Bache arranged for a visit to the laboratory by the Secretary of the Navy who was accordingly impressed and promised funds for its expansion. Before long he authorized separation of the laboratory from the hospital but it remained under Dr. Bache who relieved Squibb of all duties except those of the Naval Laboratory.

The new arrangement permitted Squibb to pursue the planned effort to produce pure ether. He had long been aware of the variability of the commercial ether both clinically and chemically and regarded its purification as important and urgent in view of the greatly increasing demand for ether for anesthesia. A basic process for distilling ether was soon in place but it required two years of trial-and-error experimentation before Squibb was satisfied that he had a reproducible accurate and safe method for the production of high quality ether. In September, 1856, he published a detailed description and diagram of his apparatus in the *American Journal of Pharmacy*, thereby declining any effort at patenting or any other profit from his achievement. Fifty years after his death it was still claimed that the giant ether still in use at Squibb Laboratories in New Brunswick, New Jersey, was basically of the same design as the one he developed at the Naval Laboratory in Brooklyn.

The discovery and refining of the ether manufacturing process was a fulfillment of Squibb’s basic principle of supplying pure and unadulterated medicines for his profession. His success was a manifestation of his lifetime commitment to integrity. Having accepted Quaker principles early in life, he was careful never to compromise under any circumstances especially for his personal benefit. A promise made by him was a sacred trust. He never advertised his products, relying on their quality for approval or rejection. He also never patented an invention or copyrighted a publication. On one occasion when an employee through an error exposed himself to chemical agents which caused his death, Squibb promised to pay funeral expenses and provide a year’s salary for his widow. The discovery that the disaster had occurred because the man was intoxicated did not change his promise. Any financial commitment was strictly adhered to.

The success with the production of pure ether led to a similar one with chloroform, and he went on to experiment with the manufacture
of other medications employed by the Navy. In 1855 he made silver nitrate, potassium iodide, cyanic acid, aromatic sulfuric acid and ammonia among other products.

Although the naval authorities were aware of Squibb's success in the Naval Laboratory and recognized its benefits, there was no increase in Squibb's salary at a time when his responsibilities were increasing. Having considered for some time resigning to develop his own business, in 1857 he accepted an opportunity to do so from two Louisville, Kentucky, entrepreneurs to join them as a partner in their new Louisville Chemical Works. The arrangement had promise but after a year he was enticed back to Brooklyn by the promise of pharmaceutical orders from the United States Army if Squibb could develop his own business. Thus in 1858 he rented a building (Fig. 2) and proceeded to outfit it, financing being assisted by an old Georgia friend, Dr. Samuel White. Orders soon trickled in and by December 1, 1858, production was begun. Disaster in the form of a fire occurred at the end of the month and the building was gutted. Squibb, after efforts to control the flames, tried to save his records and scientific data but almost lost his life in the effort. He escaped with severe facial and upper extremity burns but his eyesight was saved, although the scarred eyelids became everted, requiring adhesive strips to close his eyes when asleep. Squibb's reputation in Brooklyn and New York had already been established by his scientific pursuits. His medical friends collected a fund to enable him to finance the replacement of his facilities. In character, he obtained a complete list of contributions and accounts which he insisted on repaying with interest over the next two years. His physical recovery was protracted but his determination unchanged, and he was able within a few months to achieve some production. In a year his business was thriving and he was able to undertake innovative chemical and pharmaceutical analyses, especially in relation to the needs of the U.S. Army (Fig. 3).

Dr. Squibb's subsequent career in the pharmaceutical business was never serene. In addition to purification of drugs and elimination of adulterants he also became concerned with assurance of drug effectiveness, since many current medicines were proving worthless. Imported drugs, formerly assured to be beyond question of purity, were studied by Squibb and some shown to be adulterated. He questioned the motives behind the marketers and producers of patent medicines and tried to have the products controlled without much success, since political influences were well established. He published numerous articles and papers especially for the American Journal of Pharmacy. Many of his suggestions for improvement were "well received" but no actions were taken. He worked for years with New York medical associations to develop a "pure drug law", after having failed to achieve action at a national level through the American Medical Association. Finally, in 1880 a "Pure Food and Drug Act" largely written by Squibb became law in New York and New Jersey but national action was not achieved before 1906. At that time Dr. Harvey W. Wiley who

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had collaborated with Squibb since 1876 was the prime mover on behalf of the American Chemical Society. The Society was formed in 1876 and Wiley was later President while Squibb served two terms as Vice President. Squibb did not live to see the federal law passed but his efforts over a period of 40 years were ultimately rewarded.

The Squibb business was entirely in his own name until 1892 when he admitted his two sons to co-partnership as E.R. Squibb & Sons. It was his lifetime principle which emphasized individuality, responsibility and hard work that prevented him from acquiring management help. At no time was his business marked with stability or ease. There were constant distractions including another fire which destroyed a plant developed to manufacture acetic acid. The comparative lack of enthusiasm of his two sons, both M.D.'s, for the business also led to his having remained exclusively at the helm. His medical skills and experience also were constantly recalled especially relative to the application of ether and chloroform in anesthesia. When his scarred left hand showed changes "typical" of epithelioma in 1896 and amputation was advised, he helped plan the operation along lines taught by his old Professors Pancoast and Mutter at Jefferson and began the anesthetic himself by inhaling vapor from an open flask of ether.

Squibb's rugged individualism, his methodical work habits, his keeping a detailed journal and his relentless pursuit of his goals might imply that his family life was supportive and placid (Fig. 4). This was not the case. His attractive wife Caroline was not a good family manager and Squibb assumed household supervision himself. His devotion to her never flagged in spite of his early difficulty in acceding to her somewhat extravagant tastes. The most devastating problem began in 1861 with the occurrence of seizures which at first he regarded as hysterical but before long became established as grand mal epilepsy. In an effort to develop some pattern of occurrence of the attacks, Squibb carefully noted their timing and relation to other circumstances but only in later years was he able to exert some control by administering bromides. The many sleepless nights and interruptions occasioned by her illness were taken in stride. Caroline outlived her husband, dying in 1906 at age 72.

As Dr. Squibb was advancing in years the expansion of his business led him to enlist his sons, but with limited success. At his death October 25, 1900, Edward wished to continue his father's conservative programs but Charles wanted to incorporate and expand the business. This was done, the corporation of Edward R. Squibb & Sons being formed in 1901, and within a few years control passed out of the family. The development of the Squibb corporation into a pharmaceutical giant followed. Dr. Squibb would probably not have approved.

As one of the few early graduates of Jefferson to return for "rubbing up", Squibb's association with Jefferson continued during his naval years through the Bache family. There is no record of any later Jefferson contacts, although it is intriguing to speculate that his classmate, Dr. Lawrence Turnbull was in touch with him during the writing of his textbook Artificial Anesthesia: A Manual of Anesthesia Agents and Their Employment in the Treatment of Disease (Blakiston, 1878).

The Squibb saga, with its early forward thrust at Jefferson Medical College, is a reassuring success story emphasizing character, responsibility, and devotion to principle during a period of United States history when these attributes were often obscured.

Fig. 3. Squibb laboratories and offices, 36 Doughty Street, Brooklyn, New York, 1862. (©Bristol-Myers Squibb Co.)

Fig. 4. Edward Robinson Squibb, M.D. (JMC, 1845). Photo in later years showing scars of 1858 burns. (©Bristol-Myers Squibb Co.)
Jefferson matriculants have been motivated toward medicine for many reasons. Few have committed themselves for the purpose of winning a wife. William Camac may have been an exception (Fig. 1). Born of distinguished and wealthy parents in 1829, it was not essential that he work for a living, but he fell in love with a Quaker lady whose strong orientation toward a working career caused her to refuse his marriage proposal until he was committed to useful employment. For this reason and because of his scientific proclivities, he enrolled at Jefferson and received his M.D. degree in 1852. When he was rewarded with the hand of his bride is not exactly stated, but she did accept his proposal in due course. His interest in natural science, however, apparently limited the uses he made of his medical training and he proceeded to learn as much as possible about wild life. There is evidence that he performed some medical services during the Civil War, working at the Officers Hospital located near Camac Woods at 11th and Berks St. The hospital was later moved to center city. He is also stated to have served with the First Troop of Philadelphia City Cavalry. Following the war he never engaged in medical practice.

Dr. Camac was of Irish and English descent. His family had extensive holdings in Ireland and he made frequent trips there as well as to England and the Continent. On his travels he had opportunities to visit zoological gardens in Europe, but he also was interested in public affairs with membership on various committees, - the Academy of Natural Sciences, the Franklin Institute, the Horticultural Society, and the Academy of the Fine Arts. He thus had the opportunity to know leaders in these organizations, many of whom shared his views. During the late 1850s he began to promote actively the idea of founding a zoological society in Philadelphia. In 1859 he called a meeting at his home to discuss ways and means of accomplishing this. The meeting was attended by a number of distinguished citizens including John Le Conte, M.D., one of the nation’s outstanding naturalists and John Cassin, the best known ornithologist of the period. Several meetings were held during the spring and summer leading to the adoption of a code of laws. On March 21, 1859, the Zoological Society of Philadelphia was incorporated under the laws of Pennsylvania “for the purpose of acquiring and maintaining a collection of animals for the instruction and recreation of the people.” Dr. Camac was elected president. The enthusiasm of the group, however, failed to evoke a response from the public, and pleas for financial support fell on deaf ears. The Civil War soon intruded and the project was deferred.

In March, 1872, a reorganization meeting was called with only eight members in attendance. Progress was made promptly and Dr. Camac was re-elected president. Ultimately a site for the proposed facility was selected with the approval of the Fairmount Park Commission and on July 1, 1874, the Philadelphia Zoological Garden, America’s first zoo, opened with a census of 282 animals on exhibition.

The location of the zoo had several interesting associations. One related to the selection of the
site at the western end of the new Girard Avenue Bridge. It included "Solitude", the mansion of John Penn, grandson of William Penn (Fig. 2). Another is the fact that the zoo was accessible by steamboat on the Schuylkill River, "the most comfortable and pleasant means of visiting it."

Dr. Camac was responsible for the acquisition of zoo specimens. At the beginning, but prior to opening, he was able to recruit from Australia, Frank I. Thompson, a noted animal collector, and even arrange for him prior to arrival to acquire unusual animals from Australia and India. The zoo was an instant success, although patrons had much to learn regarding respect for the animals on exhibit. As the first zoo in America the attendance of visitors from afar was attracted with many favorable comments. Growth, however, required grants from the City and from charitable sources, since the cost of acquiring, maintaining and expanding the animal supply proved an unpredictable expense.

Dr. Camac, having realized his dream, continued his interest in wild life, but after 1880 was no longer active in zoo affairs. For a number of years he lived in a houseboat on the Nile. He died in 1900.

Jefferson people have had numerous relations with the zoo. As early as 1874, Henry Cadwalader Chapman, M.D., who in 1880 would become Jefferson's Professor of the Institutes of Medicine, was appointed prosector at the zoo. Having already had experience in comparative anatomy, this appointment was fortuitous and appropriate. Dr. Chapman was able to bring to the zoo advanced ideas which accorded very well with on-going studies at the Academy of Natural Sciences where he was also active in anatomical investigations and natural history. His zoo experiences included autopsies on many animals as well as publications of dissections on new discoveries such as the Palm-civet, a cat not described before 1821. Chapman also contributed greatly to the survival of the animals with his careful monitoring of their food, temperature and cage design which related to their health and survival. These details assumed larger

Fig. 2. "Solitude," the John Penn Mansion at Philadelphia Zoo. (©Zoological Society of Philadelphia).
significance when it was found that primates in the zoo were particularly susceptible to tuberculosis. When the tubercle bacillus was discovered (1882) and the tuberculin test was developed, it became possible to control its spread among the animals and to protect them from human spectators by using glass partitions.

It is of interest that in 1925 Dr. William Harvey Perkins served briefly as Pathologist to the Zoo upon his return to Philadelphia from Siam where he had worked for four years. This was during his postgraduate study program in preparation for his return to Siam as Professor of Medicine at Chulalonghorn University. A number of Jefferson faculty members have also participated in the affairs of the Zoo in various capacities.

The initiative of Dr. Camac in the development of the Zoological Society of Philadelphia has been a major factor in the scientific and cultural life of the city. The location of the zoo in Fairmount Park has contributed greatly to recreational opportunities as its popularity has increased in recent years along with more sophisticated methods of animal exhibition. The zoo’s research program has also made important contributions to knowledge of animal anatomy and pathology which have been of value in veterinary as well as human medicine.

William B. Atkinson (JMC, 1853): Eminent Medical Historian and Permanent A.M.A. Secretary

It is fascinating that two nationally prominent medical historians should have emanated from the Jefferson Class of 1853. One, Joseph M. Toner, additionally became President of the American Medical Association in 1874, and the other, William B. Atkinson, served as permanent secretary of that organization from 1864 to 1899. The latter in this capacity worked intimately with Jefferson A.M.A. Presidents Samuel D. Gross (JMC, 1828) in 1868, his classmate, Joseph M. Toner (JMC, 1853) in 1874, and J. Marion Sims (JMC, 1835) in 1875. Atkinson’s career is featured in this article.

William Biddle Atkinson (Fig. 1) was born on June 21, 1832, in Haverford, Pennsylvania, the son of Isaac S. and Mary R. Biddle Atkinson. His paternal ancestors were among the earliest settlers in Burlington, New Jersey. He received A.B. and A.M. degrees from Central High School in Philadelphia. In those times, these degrees from that prestigious high school would be comparable to those of today from liberal arts colleges.

Atkinson took his three years of preceptorship under Dr. Samuel McClellan, the brother of George McClellan, founder of Jefferson Medical College. Samuel McClellan was Professor of Midwifery at Jefferson (1832-39), which may account for Atkinson’s interest in obstetrics and diseases of women and children during his later clinical activities. He graduated from Jefferson Medical College in 1853 in a class of 223, essentially the size of such graduating classes today.

His literary bent evidenced itself immediately after graduation in that, in addition to the practice

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Fig. 1. William B. Atkinson (JMC, 1853), medical historian of national prominence.

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of medicine, he taught mathematics and the classics at Gregory's Classical School.

Only one year after his graduation from Jefferson, Atkinson joined the Philadelphia County Medical Society, served as its secretary for seven years, was a reporter of its proceedings for medical journals, and following service as its Vice-President, became the President in 1873.

Atkinson began his medical teaching as assistant professor of obstetrics and diseases of women and children in the Pennsylvania Medical College in 1859, holding this position for two years until this college became defunct as a result of attrition during the Civil War. Throughout this time, however, he conducted the only gynecologic clinic in the city. From 1877 to 1886, he was lecturer on diseases of children at Jefferson Medical College, and the following year was made professor of military science and pediatrics in the Medico-Chirurgical College.

He served for two years during the Civil War as acting assistant surgeon. He then remained clinically active as president of the staff of Howard Hospital in Philadelphia, and from 1886 served as medical inspector of the State Board of Health in Pennsylvania.

All of these pursuits in Atkinson's busy life were matched or possibly overshadowed by his medical literary activities. Early on, he was correspondent for the New Jersey Medical and Surgical Reporter, the New York Medical Times, the New Orleans Medical Journal as well as others. In 1858, he co-edited the Medical and Surgical Reporter, and one year later became the obstetric editor for Professor Samuel D. Gross of the North American Medico-Chirurgical Review. These writing activities sharpened his skill for his later magnum opus, namely his book of medical and surgical biographies. His last work of this sort was editing of the Medical Register and Directory of Philadelphia.

As just alluded to, his most important literary work was his book on Physicians and Surgeons of the United States, 1878. This carefully documented the lives of 1,873 eminent members of the medical profession. It included the career of James Aitken Meigs (JMC, 1851) Professor of the Institutes of Medicine and Medical Jurisprudence at Jefferson, who died suddenly the following year. A second edition of this book with supplement appeared in 1880. It is a much used and reliable reference book until the present day. The volume of his writings may further be judged by his editing of the annual transactions of the American Medical Association, the publication of several annual editions of the Philadelphia Medical Directory and many monographs on obstetrics and gynecology.

In 1867, he married Miss Jennie R. Patterson who died four years later, leaving a son. His second marriage was to Miss S. J. Hutchinson with whom he had another son and one daughter. He died on November 23, 1909 at the age of 77, at his home in Philadelphia.

Dr. Atkinson deserves remembrance as another alumnus in whom Jefferson may justly take pride for his contributions to the medical profession, - its organizations, its clinical progress and teaching, and its history.
David W. Mauull (JMC, 1853): Participant in Reform of Military Mortuary Practices

A number of Jefferson Alumni served with great distinction during the Civil War, among them Jonathan M. Foltz, Ninian Pinckney, Jonathan Letterman and John Hill Brinton. They were involved in unusual and often unexplored aspects of wartime medicine. The career of David W. Mauull (Fig. 1) and his role in the war has only recently become known at Jefferson through the contributions of George P. Blundell, M.D., Ph.D. of Shepherdstown, West Virginia, whose early Jefferson associations opened avenues of communication which have exposed interesting historical material.

Dr. Blundell was recruited from Yale University by Dr. Randle C. Rosenberger as Associate in Bacteriology and Preventive Medicine in 1941. He remained with the Department until 1945, the year following the death of Dr. Rosenberger, and was privileged by his acquaintance with Mrs. Rosenberger to examine some of her husband’s papers. His subsequent career was characterized by variety and quality consistent with the evolving medical and scientific progress of the World War II and postwar period. Having already been awarded his Ph.D. at Yale in 1941, he was determined to complete requirements for an M.D. which he began with a two-year stint at the University of Mississippi while serving as Assistant Professor of Pathology and Bacteriology, and by two years at McGill University School of Medicine. Receiving his M.D. and C.M. he then was appointed Assistant Professor of Pathology at the Medical College of Alabama. In 1953 he was on military duty and in 1954 was assigned to the Armed Forces Institutes of Pathology. His career in laboratory medicine, infectious diseases, and forensic pathology continued as a civilian after 1955 beginning with his service as Chief, Pathology Division, Directorate of Medical Research at the U.S. Biological Warfare Laboratory, Ft. Detrick, Maryland. Varied hospital experiences in the Washington, D.C. area followed.

Dr. Blundell retired to Shepherdstown, West Virginia, from his last actual position in 1986. His home is located close to Harpers Ferry where he has pursued historical interests previously developed. His discovery of the Mauull story stemmed from his acquaintance with a patient who was the grandson of David Mauull through Julia Francis Mauull, the older daughter of David and his wife Mary. The patient, Mr. Christian Heritage, spoke of his grandfather’s Civil War career and this led to Dr. Blundell’s later pursuit of the details.

David William Mauull (JMC, 1853) was the son of a very early Jefferson alumnus, George W. Mauull (JMC, 1830), a physician of Lewes and Georgetown, Delaware. Following his Jefferson graduation, David Mauull practiced briefly with his father but soon became restless and pursued several other medical avenues including that of ship's physician. He possibly also had army medical experience. In May, 1861, a month following the attack on Fort Sumter, he and a Major Layton raised a company of Union volunteers. Three months later he was commissioned a Lieutenant in the First Delaware Regiment, beginning his career as an army surgeon. He remained in the Army throughout the war and

Fig. 1. David W. Mauull (JMC, 1853) in Union Army Uniform.

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saw action in almost every major engagement of the Army of the Potomac, including the bloody Battle of Antietam in mid-1862. He received early recognition in organizing a hospital at Norfolk. He was later promoted to Surgeon-in-Chief of the 1st Brigade and further in 1865 to Surgeon-in-Chief of the 2nd Division of the 2nd Army Corps.

Surgeon Maull appears to have had a good literary background and used his skills in communication effectively throughout the war. In addition to letters to family and acquaintances he wrote regular letters to a Wilmington newspaper describing his experiences and the progress of the war. Some of these were republished by the paper in 1912, well after Maull’s death. It is also noted that following the war his writings continued with articles in medical journals and as a correspondent for the New York Tribune.

Although Maull was credited with many surgical procedures both in the field and in army hospitals, he also had the unique experience of being responsible for developing techniques for handling the bodies of soldiers who died or were killed in action. This duty related to the fact that no specified mortuary arrangements had been made by the army early in the war and the remains of soldiers were managed in haphazard fashion. In fact “embalmers” often attached themselves to military posts, formed ways to claim bodies, make some effort at embalming and charge grieving families exorbitant fees for their return. Such practices continued through the Battle of Bull Run, July 21, 1861, when many casualties presented new challenges. Some improvement appears to have followed orders from Headquarters of the Armies of the United States after the April, 1862 appointment of a new Surgeon General, Brigadier General William A. Hammond. The new order for the care of sick and wounded included this order regarding care of the dead: “The dead likewise require the duties of the Surgeon in Charge. He selects a suitable location for a cemetery and here inter the dead, giving them a Christian burial by the presence of a Chaplain to officiate and attend to the funeral obsequies.”

Maull’s experiences relative to mortuary problems were recorded in a manuscript Some Remarks on Embalming, which he authored in 1865 describing changes in policies for handling bodies with particular reference to the responsibility given to Surgeons rather than a special corps of morticians. Although the orders made no specific reference to embalming, Maull’s paper suggests that subsequent orders were issued dealing with the subject, or that events required that embalming be included in preparation for delivery of the bodies under some circumstances.

Maull’s paper begins (Fig. 2):

**SOME REMARKS ON EMBALMING**

By

D. W. Maull, 1st Detachment

“Surgeon in Chief, 2nd Division, 2nd Army Corps

“A late order emanating from Head Quarters, Armies of the United States, excluding professional embalmers from the line of the Army, and rendering it obligatory upon the Medical Officers connected with Base and Field Hospitals to perform the part of embalmers, as occasion demands, has made this branch collateral with the Science of Medicine and Surgery, practiced in the field, and has invested the cadaver with an added interest, giving the art of its preservation, for a limited time, a more general importance than would possibly have accrued to it in a more peaceful era than the present.

“In the absence of a class, distinct from the Medical profession, especially delegated for the exercise of these cares to the patriotic dead, the offices of the Army Surgeon in that direction will be called into requisition. From time to time, so long as the fortunes of war decree that the soldier shall die in a Hospital remote from home, or be slain on the field of battle, and this labor now being incorporated with the duties devolving upon the Medical man in active military service, that he may be equal to the requirements of the case.”

The paper goes on to describe historical procedures for care of the dead, including the practices in ancient Egypt and some in other cultures. He then discusses current methods of embalming and considers how such procedures would be modi-
Fig. 2. First paragraph of Dr. Maull's 1865 paper on embalming (1865).

fied for adaptation to military requirements. The evidence suggests that medical officers took these orders seriously and carried them out with characteristic thoroughness.

As the war progressed Surgeons in the field were at least partially relieved of mortuary duties when on March 15, 1865, General Order No. 38, entitled Orders Concerning Embalmers was issued: "This order directed that embalmers be licensed, and that only then would they be permitted to remove bodies of deceased officers and soldiers; and a scale of prices was established to govern those embalmers."

Dr. Blundell, in a paper presented to the Civil War Round Table at Harpers Ferry, West Virginia, summarized his studies of the mortuary process with this comment: "The definitive article on embalming and embalmers during the Civil War was published in the Journal entitled American Funeral Directors." The article dealt with the period of 1862 and 1863 and suggests that morticians did well in spite of the very difficult conditions under which they worked. Without more specific orders and more detailed accounts of actual field practices, it is difficult to establish an accurate estimate of the mortuary situation which prevailed during most of the war. Blundell remarked: "Prior to the Civil War embalming was not a common practice in the United States. As a public health measure there were strict regulations about the shipment of bodies of the deceased with the object being to prevent the spread of infectious disease and avoid the offensive odors of decomposing bodies. Lincoln's son Willie was embalmed, and so was the body of the President. Gradually the public's resistance to the presumed 'mutilation' of embalming was overcome and the use of the 'cooling wand' only was abandoned." The extensive travel of the Lincoln funeral train served to publicize the capability of body preservation throughout the United States.
Following the War, Dr. Mauull practiced medicine in Wilmington, Delaware, where he was highly regarded and was described in his obituary (1896) as one of the “most noted physicians of the state.” He served as United States pension examiner, city vaccine physician, and as a railroad surgeon in addition to service at the Delaware Hospital. His marriage to Mary Buck took place in 1870 and they had two daughters. Dr. Mauull was buried in Brandywine Cemetery, Wilmington, (Fig. 3).

The wartime experiences of an able alumnus serve once more to emphasize the diversity of activities of Jefferson graduates and additionally to call attention to a phase of war activity which generates little publicity except when controversies erupt from personal or actual misadventures with bodies of deceased service personnel.

Fig. 3. Gravesite of David W. Mauull (JMC, 1853) in Wilmington, Delaware. (Photograph by Dr. George P. Blundell)

Joseph M. Toner (JMC, 1853): Early Medical Historian and A.M.A. President

Just as composers create music and artists paint landscapes and portraits, so do occasional writers feel the urge to record history. Certain alumni promptly come to mind for their legacy of Jefferson Medical College history, such as Samuel D. Gross (JMC, 1828), W.W. Keen (JMC, 1862), John Chalmers DaCosta (JMC, 1885), George M. Gould (JMC, 1888), and Edward L. Bauer (JMC, 1914). Interestingly, the Class of 1853 produced two important medical historians who are seldom remembered at Jefferson today. The first is William B. Atkinson, featured earlier in this chapter. The second is Joseph M. Toner who is the subject of this article.

Joseph Meredith Toner (Fig. 1) was born in 1825 in Pittsburgh of Irish Catholic parents who for sev-
eral generations had been farmers in Pennsylvania. As a farm boy, he was apprenticed at age 17 to a wagon maker, but subsequently attended the Western University of Pennsylvania for a year and Mount St. Mary’s College at Emmitsburg, Maryland, for two.

Toner tried several jobs in which he bought and operated a canal boat and then worked as a clerk in a store. In 1847, at the age of 22, his intellectual drive emerged as he began the study of medicine with Dr. John Lowman of Johnstown, Pennsylvania, as his preceptor. He and Dr. Lowman attended classes at Jefferson Medical College during the winter of 1849/50. In this session, Toner recorded in his diary that Robley Dunglison (Professor of Institutes of Medicine and Medical Jurisprudence) lectured a whole hour “without ever stopping to take a breath.”

Strangely, after this first term at Jefferson, Toner went to Woodstock, Vermont, where three months later (June, 1850) he received the M.D. degree from the Vermont College of Medicine, his thesis being “The Surgical Method of Arresting Hemorrhage.” One cannot escape the thought that a period of only three months to receive his first M.D. was based on expediency and not any fault with Jefferson as his subsequent actions revealed.

For a time, Toner practiced in Summit, Pennsylvania, a small village on the Allegheny Portage Railroad. Apparently feeling the need for further medical education, he returned to Jefferson in the winter of 1852/53 and completed the requirements for his second M.D. degree in the Class of 1853. These studious years gave Toner a somewhat wider than usual knowledge of medical and hygienic literature. After practicing briefly in Harpers Ferry, he moved (in 1855) to Washington, D.C. where there would be greater opportunities and challenges.

Toner’s practice in Washington became extensive within a few years. His natural inclinations were so strongly bent toward historical, literary and scientific pursuits that these activities interfered with his medical practice, so that in later years he prescribed treatment for only the families of a few friends. His first book entitled *Maternal In-

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the Revolution which contained sketches of the lives of nearly twelve hundred physicians and surgeons. He also wrote a Necrology of the Physicians of the Late War and Statistics of the Public Health Associations of the United States. At one time, he made a special study of epidemics and published his results in pamphlets on cholera, smallpox, vaccination and yellow fever. Free Parks and Camping Grounds in Summer for the Children of the Poor in Large Cities was another of his interests. In later life, Toner concentrated his writing almost entirely on George Washington, resulting in more than a dozen books and pamphlets, in addition to many articles in historical, literary magazines and newspapers. His interest in Washington became almost an obsession which involved accounts of wills of his ancestors, his inventions and promotions of the useful arts, his neighbors, his home at Mt. Vernon, his youth and early career, his library and manuscript records, his journeys, and finally his character, social habits and domestic relations. In March, 1876, Dr. Toner addressed the Alumni Association of Jefferson Medical College on The Medical Men of the Revolution, with a Brief History of the Medical Department of the Continental Army.

Dr. Toner, early on, developed a passion for collecting books and became a familiar figure in the stores for new and used books, at book auctions and junk shops of Washington and other cities. Starting with medical, historical and biographical literature, his scope of interest broadened to embrace local and general history related to the City of Washington and especially the District of Columbia.

The immense amount of material that Dr. Toner collected he mounted upon uniform sheets of paper and arranged them in alphabetical order for ready reference. This unique index was placed in two extensive cases of drawers which today form a part of the Toner Collection in the Congressional Library.

The most notable benefaction of Dr. Toner was his gift in 1882 of his entire private library to the Government, the first such gift to the National Library by a private citizen. It consisted of approximately 27,000 volumes on medical, historical and
miscellaneous subjects, in addition to a vast number of pamphlets and periodicals. This gift was accepted by a special Act of Congress, which expressed its appreciation by placing his bust in marble by Q.A. Ward (Fig. 2) and his full length portrait by E.F. Andrews (Fig. 3) in the Library.

Dr. Toner was a founder of the Library of the American Medical Association and served as its President in 1874. He also was President of the American Public Health Association, each of the two Medical Societies of the District of Columbia, the Literary Society, the Columbia Historical Society, and the Washington National Monument Society, in addition to activities on hosts of committees. He declined the offer of a professorship in several medical colleges.

In the last few years of his life, Dr. Toner suffered a slow deterioration in health. The end came on August 31, 1896, at the age of 71, while seated in an easy chair during a vacation at Cresson Springs, PA.

Whitfield J. Bell, Jr., Ph.D., presented a Presidential Address at the American Association for the History of Medicine on May 5, 1972, entitled *Joseph M. Toner as a Medical Historian*, published in his book *The Colonial Physician and Other Essays*. His concluding eulogy to Dr. Toner was: “He may even be judged by someone who will read his 75,000 letters preserved in the Library of Congress to have deserved that reputation in the nineteenth century and our respect in the twentieth.”

**Chandler M. Pope (JMC, 1855): Confederate Physician**

Many Jefferson graduates prior to the Civil War became Confederate Army physicians. The story of the withdrawal of medical students from Jefferson at the beginning of the War is well known, especially the role of Hunter McGuire who led a transfer of 200 Virginia students from Jefferson to Richmond when the threat of secession occurred late in 1859. McGuire was later restored to a place of honor in American medicine and received an honorary degree from Jefferson in 1888.

Among the graduates of 1855, along with famous classmates William Thomson and Carlos Finlay, was Chandler M. Pope, a native Georgian who vigorously supported the Confederate cause.

He attended the University of Georgia at Athens, Georgia, and matriculated at Jefferson in 1853. Upon graduation he established his practice at Union Springs, Alabama. Immediately upon the outbreak of the War in the spring of 1861 he enlisted as a private in the Alabama Infantry. Soon thereafter he was commissioned and became a surgeon at a hospital in Lynchburg, Virginia. After the war he practiced in Lee County, Georgia, and later in Goodwater, Alabama. His experiences paralleled those of many physicians who espoused the Confederate cause and for whom the period of reconstruction required great fortitude.
Robert Battey (JMC, 1857), LL.D.: Pioneer Gynecologist

From the deep South, young men interested in medicine, up to the middle third of the nineteenth century, had several choices for training. A few went to Europe, some practiced with only preceptorial experience, and many went north to Philadelphia, Baltimore or New York. Rather unusual in this context was Robert Battey who had the benefit of education at Richmond Academy in Georgia and Phillips Academy, Andover, Massachusetts (Fig. 1). He then joined his brother Dr. George M. Battey in 1849, working as a pharmacist and medical preceptee. This led to further education and he graduated from the Philadelphia College of Pharmacy in 1856. Having attended lectures both at the University of Pennsylvania and Jefferson, he received his M.D. from Jefferson in 1857. During his Philadelphia period he had as his advisor and preceptor Dr. Ellwood Wilson, an 1845 Jefferson graduate and father of Professor of Medicine Dr. J.C. Wilson (JMC, 1869). Dr. Battey went on to graduate study in Dublin, Ireland, where he actually performed surgery, as well as Edinburgh and Paris.

He began practice in Rome, Georgia, and quickly applied his skills in anatomy to his development as a surgeon, achieving prompt recognition. In 1859 he devised a new method for surgical repair of vesico-vaginal fistula and soon a new treatment for club foot. During the Civil War he served as Regimental Surgeon with the Confederate Army in Virginia and later in Atlanta and Macon, Georgia. Following the war he resumed his private career, going on to new ventures in surgery, including ovariotomy performed by abdominal section ostensibly for "dysfunctional ovaries." He published his results with this procedure in 1872 and also used abdominal section for ovarian tumors. His approach was said to have been the first, antedating that of Lawson Tait of England, whom he visited in 1881. For a time this became known as the Battey operation but the reasons for its performance later proved to be unsupported since he proposed excision of normal appearing ovaries for cure of various sexual disorders, dysmenorrhea, hysteria and non-specific illnesses.

Having become well established as a leader in medicine and surgery in Rome, Georgia, Dr. Battey interrupted his career from 1872 to 1875 to serve as Professor of Obstetrics at Atlanta Medical College (organized 1854, closed 1861-1865, reorganized in 1865 and consolidated with Southern Medical College in 1898) and editor of the Atlanta Medical and Surgical Journal. He returned to Rome in 1875 as Surgeon in charge of the Gynecological Infirmary and Consulting Surgeon to Martha Battey Hospital which he built and named for his wife.

Dr. Battey became active in medical and surgical societies in the United States and in 1888 was President of the American Gynecologic Society of which he was a founder. He was also a Fellow of the Obstetrical Society of Edinburgh and of the British Gynecological Society. As his practice increased he was widely recognized in medical and public circles and he served as President of the Medical Society of Georgia. Such was his popularity that when the State of Georgia was selecting

Fig. 1. Robert Battey, M.D. (JMC, 1857), prominent Georgia surgeon and gynecologist.

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two persons for the Hall of Fame in Washington, Battey was prominently considered. Chosen, however, were Dr. Crawford Long (pioneer in administration of ether) and Alexander Stephens (Vice President of the Confederate States), both Georgians of major accomplishments.

The name of Battey is preserved in Rome. A United States Army Hospital located there during World War II was taken over by the State of Georgia in 1946 and named the Battey State Hospital. First identified at that hospital was an atypical strain of Mycobacteria which was dubbed the Battey bacillus until more specifically classified in 1967 as Mycobacterium intracellulare and later included in Mycobacterium avium complex, to be distinguished from Mycobacterium tuberculosis.

Dr. Battey was a loyal Jefferson alumnus. On March 31, 1890, he delivered an address to the Alumni Association in which he eulogized the late professor Samuel W. Gross, Battey's classmate of 1857. At the same time he recalled the clinical skills of his Jefferson Professors and urged the need for physicians to cultivate the art of medicine, limiting the use of drugs. Whether original or not he concluded — "I must be allowed to express my conviction that the personal atmosphere of a truly learned physician is an ample armamentarium for the cure of most diseases, if all the drugs in Christendom were gathered together and cast into the depths of the sea!"

Dr. Battey died November 8, 1895. His statue was erected on the grounds of the Rome City Auditorium and his portrait also hangs in the Battey State Hospital.

Joseph C. Gordon (JMC, 1868):
Civil War Diarist

Mr. Jeffrey P. Yoest of Westerville, Ohio, has shared with Jefferson historians an edited copy of a diary of a Civil War soldier who began medical studies following his military service and graduated from Jefferson in 1868. Joseph C. Gordon was born in Chester County, Pennsylvania, in 1841 and his family moved to a farm near Fredricktown, Knox County, Ohio, in 1853. At age 20, he enlisted in Company A of the Twentieth Ohio Volunteer Infantry. He was trained at Camp Chase, Columbus, Ohio, and served in Kentucky and Tennessee with his regiment during 1861 and 1862, participating in several major engagements in the Tennessee River region. He was promoted to Corporal during May, 1862, soon after the battle of Pittsburg Landing. His diary entries became more detailed in January, 1863, when his unit had moved into Northern Mississippi. He recorded many of the events leading to the ultimate surrender of Vicksburg, July 4, 1863, which cleared the Mississippi River by Union forces. Joseph Gordon described the rigors of army life in a factual manner including a furlough with a river boat trip on the Mississippi and Ohio to his home and back in August, 1863. He was discharged September 14, 1864, in Chattanooga.

There is no indication of motivation toward medicine as a career in the diary entry. He remarks only statistically about casualties. There is an entry at the end which included several prescriptions, possibly those employed during illnesses he experienced while in the service.

Within a year after discharge, Joseph Gordon began "reading medicine" with Dr. J. N. Russell in Mt. Vernon, Ohio, followed by his matriculation at Jefferson in 1866. After a brief period in New Jersey, he returned to Ohio where he became a well known and locally prominent physician in Mt. Vernon. Leukemia caused his death in 1895. Dr. Gordon's diary has been donated to the Jefferson Archives.
Fulton R. Stotler (JMC, 1869): Humanist and Rural Practitioner

The tradition and heritage of Jefferson Medical College extends beyond that contributed by its eminent professors in teaching, research, public health, the military, and community life. Many alumni have carried their Jefferson experience into rural areas where their excellence as practitioners and devotion to their patients commanded the highest respect. In addition some have been “Renaissance” type individuals who have added luster and honor to the profession by their interest in the humanities. Such a man was Fulton R. Stotler (JMC, 1869) who practiced for most of his life in Wilkinsburg, a suburb of Pittsburgh, Pennsylvania. He was a good violinist, interested in languages, and closely associated with Fine Arts at the Carnegie Museum in Pittsburgh. His life is truly worthy of review.

The account which follows must be credited to John D.S. Truxall, Esq. of Pittsburgh, a close friend of Dr. Stotler during the latter’s retirement years. In addition, Mr. Truxall generously donated photographs and other material pertaining to Dr. Stotler, including a diary with his Jefferson Medical College lecture notes. Mr. Truxall, a man in his 90s at the present writing, goes daily to his law office. His physician, Charles R. Wilson, Jr., M.D. is a friend of Dean Joseph S. Gonnella who through this connection obtained this significant archival material. Dr. Stotler’s daughter Ilka (1884 - 1982) contributed much historical information in *Annals of Old Wilkinsburg and Vicinity*, published in 1940.

Fulton R. Stotler (Fig. 1.) was born on March 16, 1848, in Penn Township, Allegheny County, Pennsylvania. He was a son of Henry Bowman Stotler and Theodosia Logan Stotler who farmed a tract of land the Stotler family had acquired in western Pennsylvania shortly after the close of the Revolutionary War. The Stotler ancestry was from the Palatinate in which the original name of “Stadtler” (meaning city dweller) changed over time to Stotler.

Fulton as a boy was studious and preferred the reading of books to joining his family in chores on the farm. At the age of 15 he suffered a prolonged attack of dysentery, and it is likely that the compassionate care of his country doctor (Schreiner) influenced him to study medicine.

Young Stotler began the study of medicine at age 16 with Dr. William Reiter of Pittsburgh. In his three years of preceptorship he industriously acquired a preliminary knowledge of therapeutics, medicine, surgery, anatomy, chemistry and botany. This was integrated with a two-year course at the old East Liberty Academy in Penn Township which included Greek, Latin, mathematics and physics. He matriculated at Jefferson Medical College in 1867 and graduated in 1869 at age 21. His academic excellence may be surmised from his first-year lecture notes of Professors Jacob Mendes DaCosta, Samuel D. Gross, Francis F. Maury, Benjamin Howard Rand, Samuel H. Dixon and Ellerslie Wallace, amounting to 297 numbered pages.

Fig. 1. Fulton R. Stotler (JMC, 1869), a rural doctor and man of culture. (Courtesy of John D.S. Truxall, Esq.)
Figure 2 depicts (p. 137) in actual size a portion of Stotler’s notes from a lecture by Samuel D. Gross (December 17, 1867) on dislocations of the clavicle. One observes Stotler’s frugality in using every available space on the pages, leaving no room at the top or bottom and also no margins. This particular excerpt is chosen because Gross was the first to suggest wiring of the acromioclavicular joint after its reduction from dislocation. Stotler’s notes read:

“Dislocation of the clavicle, most frequent at the sternoclavicular articulation. It is easy to reduce, but hard to keep it in its place. It sometimes recurs at the acromioclavicular articulation. You must push the shoulder upwards, outwards and backwards and kept in position by a wire suture.”

Gross describes his suggestion of use of wire suture in his first edition (1859) of System of Surgery (Vol. 1., p. 1083), as follows:

“Seeing how difficult it is to keep these various dislocations of the clavicle reduced, I should not hesitate, if an opportunity arose, to fasten the ends of the bones with a silver wire, inserted subcutaneously, and retained until union occurred. The operation could be easily executed and would not be likely to cause any bad effects.”

It is ironic that although Gross is credited as the originator of the operation for the use of wire to hold the dislocated ends of clavicular dislocations, he stated in his sixth and last edition of System of Surgery (1882, Vol. 1, p. 1127), “I have never had occasion to perform the operation.”

Stotler’s notification (Feb., 1869) from Dean Samuel Henry Dickson concerning his examination for graduation listed as to subjects and dates in Fig. 3. Fig. 4, dated March 8, 1869, shows his notification of recommendation by the Dean to the Board of Trustees that the M.D. degree be conferred upon him. He graduated cum laude in a class of 127.

On May 1, 1869, Dr. Stotler moved into a small two-room office on “Main” Street in Wilkinsburg. It had recently been vacated by a doctor who moved to California. Ensconced in this modest little office, he waited three days for the arrival of a first patient. It started as a call to attend a negro in a nearby village who was severely ill with cholera, but who luckily survived. His first three months of practice were very lean, mostly because of an older doctor in town, John Semple, who was loathe to yield any of his established practice. Within the next few years as other physicians started to practice in Wilkinsburg, a warm and cordial fraternal friendship developed between Drs. Stotler and Semple which endured until the latter’s death. By October, 1876, Dr. Stotler had acquired enough on fifty-cent and one dollar fees for travel to Europe for graduate study at the clinics of Vienna and Munich, where at the latter city he ob-
tained surgical training in the Nussbaum Clinic. With him in Munich was a Pittsburgh friend, John W. Beatty, subsequently a distinguished artist and first Director of Fine Arts at the Carnegie Institute of Pittsburgh. Both friends took up the study of the German language. Dr. Stotler wrote home that he had three teachers, but that Fraulein Elise Boxhammer was the best. A romance began during study of the complex German grammar that developed into full courtship by correspondence after his return home.

Stotler and his German fiancee were married in New York at her arrival in 1878. After a brief honeymoon the couple settled in Wilkinsburg where the doctor built a home across from his little office. At this site there was still the well known Cannon spring and banks of lilacs and roses planted almost a half century earlier.

Dr. Stotler practiced in Wilkinsburg from shortly after his graduation from Jefferson until 1922, when the infirmities of advancing age, including failing eyesight forced him to retire at age 74. During earlier years, he was deeply involved in the community, artistic, social, humani-
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tarian and organized medical affairs not only of his own village but of Pittsburgh.

For most of his life he was the revered physician to the two Homes in Wilkinsburg for the Aged and the School for the Deaf in Edgewood. He was one of the organizers of the “Utile Dolce” Literary Society, which supported a reading room and featured lecture courses. In 1887 he was elected School Director from one of the wards in Wilkinsburg and served for 36 consecutive years. For many of these years he was president of the board, an office he held several times in the Allegheny County Directors Association and once in the State Directors Association.

One year after his retirement (1922) Dr. Stotler and his family moved from Wilkinsburg to neighboring Edgewood (Fig. 5). According to John D.S. Truxall, Esq., who remained a close friend during these years, the Stotler residence “reeked with culture.” Mrs. Stotler had been well educated in Germany and brought much charm, sociability and artistic interest to the household and community. The couple’s only daughter, Ilka, grew up in this atmosphere with much interest in languages and music. She kept a warm correspondence with the famous opera singer Geraldine Ferrar. On April 28, 1934, this faithful, beloved physician and man of broad cultural interest passed into eternity. His wife followed him 10 months later.

Although they were only collateral descendants, two other Stotlers have graduated from Jefferson Medical College, Charles Wilbur Stotler (JMC, ’41) and his son Charles W. (JMC, ’74). The elder died in 1960 and the younger Dr. Stotler is in family practice in Johnstown, Pennsylvania. A proud part of the Jefferson tradition is the many instances of successive generations of its graduates.

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**L. Webster Fox (JMC, 1878): “Pennsylvania Doctor”**

Portraits in McClellan Hall are selected because of prominence of the individual, artistic quality, and relatively large size. Among these 18 paintings is that of L. Webster Fox (JMC, 1878), at Jefferson the least well known (Fig. 1). Who was this man and how did his portrait enter Jefferson’s literal “Hall of Fame”? His place in Jefferson “Legend and Lore” was established by his daughter, Beatrice Fox Griffith, who in 1957 published his biography in a book entitled *Pennsylvania Doctor* (Stackpole Co., Harrisburg, PA, 239 pages).

Lawrence Webster Fox (Fig. 2) was born near Harriburg in Hummelstown, Dauphin County, Pennsylvania, on March 19, 1853, the eldest son in the eight children of Dr. Thomas George Fox (Fig. 3) and Diana Hershey. His ancestry was English on his father’s side and German/Swiss on his mother’s. His father was a Jefferson Medical College graduate in the Class of 1852, which also included three later professors at Jefferson, William Smith Forbes in Anatomy, John Hill Brinton in Surgery, and Jacob Mendes DaCosta in Medicine. James Fox, the first ancestor in America, had bought 5,000 acres of land from William Penn in 1685 and sailed from England to this country the following year.

Webster’s first manifestation of interest in eyes occurred at the age of twelve, when he performed “eye operations” by removing the artificial eyes from the stuffed animal heads over the mantles, from the birds in the glass cases, and from the heads on his mothers furs. His mother concealed these “specimens” and the loss as best she could from her husband who was a stern disciplinarian.

Young Webster Fox received his preliminary education at the Millersville Normal School, pres-
ently Millersville State University. He was not interested in becoming a farmer but encouraged his three brothers to work on their father’s “Sunnyside Farm.” At the age of nineteen he took a temporary teaching position in Derry Township. This was at the request of a farmer who asked him if he would come as “teacher” in charge of all the children in their small school. The farmer spoke in Pennsylvania Dutch which Webster understood and could speak. As sometimes happens, this experience was to have a profound effect on the choice of his subsequent career.

The teaching position included making fires, ringing the bell, keeping discipline and living in the farmer’s home with provision of meals. Upon arrival, Webster learned that the farmer had a daughter who was deaf, dumb and blind. This apparently “hopeless” girl filled him with “interest and compassion.” In addition to the other children, Webster began to work with her. To his gratification he taught her to touch and weave, - even to laugh and speak a few words. He discovered that within himself was a talent and love for teaching as well as the desire to help the blind and later to become interested in schools for the blind.

While working that winter with the blind girl and teaching in the small schoolhouse at Round Top Hill, Webster was reading of discoveries in physiology of the eye and noted the invention of the ophthalmoscope by Helmholtz in 1851. He began to read his father’s medical books, to collect books from his father’s doctor friends and to buy books at country auctions of doctors’ estates.

Webster went to work in Philadelphia at the banking house of his uncle, John E. Fox, a position he held for three years, and started what he really wanted to do, - to study medicine. This he did at Jefferson Medical College and graduated in 1878. His years of study in Philadelphia were enriched by occasional visits to the theatre, to orchestral concerts, and to the Centennial Exhibition of 1876. His teacher of surgery was the eminent Professor Samuel D. Gross. There is an unlikely possibility, as suggested by his daughter, that he was one of the students depicted in the Gross Clinic by Thomas Eakins, but certainly he attended Gross’s lectures there.

The elite medical education of this time entailed postgraduate study in Europe. Coming from a relatively well-to-do family, Webster was able in the fall after graduation to enter the Universities of Berlin, Vienna and Strasbourg. He was armed with letters of introduction from his internationally known Professor, Samuel D. Gross, and this facilitated personal contacts to work with some of the leading ophthalmic surgeons on the continent.
The courses included practical experience with patients, formal lectures, use of the microscope and ophthalmoscope, and operating on pig eyes. There was difficulty with the German language, but Webster was in a group of ten American students who funded the services of a “translator”. Additionally, they set up a “foundation” for the German translation benefit of subsequent American students which was kept up until World War I. Webster extended his education abroad by taking an appointment as House Surgeon and Clinical Assistant at the Royal London Ophthalmic Hospital, Moorsfields, for two years.

Upon Webster Fox’s return to America in 1881, he became the Ophthalmic Surgeon to the Germantown Hospital, the Baptist Orphanage and subsequently to the Home for the Blind in West Philadelphia. He also worked in the eye clinic of Dr. William Thomon of Jefferson Hospital and was listed in the college announcements as a Chief Clinical Assistant for 1885-87. In 1893 he was elected Professor of Ophthalmology at the Medico-Chirurgical College and Ophthalmic Surgeon to its Hospital. A senior student, David L. McDonald, wrote a report, dedicated to Dr. Fox of his “Lectures and Clinics” for the year 1906-7 in appreciation of his “ever-willing, kind and generous guidance and assistance extended to me during the four years I sat upon the benches of the Medico-Chirurgical College.” A copy of this report may be found in Jefferson’s Archives. In 1896 he was made a Fellow of the Academy of Medicine and Science of Maine. The following year he was awarded the degree of A.M. from Lafayette College and in 1908 the LL.D. from Dickinson College.

Dr. Fox had a distinguished teaching career, and contributed extensively to the scientific literature. His two textbooks, Diseases of the Eye and Practical Treatise on Ophthalmology went through multiple editions during and after his lifetime. He belonged to the appropriate local and national organizations and to the special societies in his field, including annual visits abroad to international meetings.

As an ophthalmic surgeon Dr. Fox was eminently successful. He made trips to Paris to obtain the latest and best ophthalmic instruments. His first home in Philadelphia was at 1306 Walnut Street with his office in the adjoining house at 1304. Later, he moved to 301 S. 17th Street where he had eight servants who worked at that time for five dollars a week. This house, still in good condition, occupies a half city block from Spruce to Cypress Streets.

An anecdote relating to Dr. Fox’s character and skill is in his biography, Pennsylvania Doctor, pages 221-2. A young girl born with an eye that turned inwards was brought in consultation to a prominent Philadelphia ophthalmologist. The ophthalmic surgeon in question was in his late seventies and reluctant to operate. The father of the child therefore cabled to several medical leaders in Europe, “To whom should I take my daughter?” The cables were answered, “To Fox of Philadelphia.”

The father asked Dr. Fox to take over for the other surgeon. Dr. Fox agreed to operate but only in the presence of the older surgeon.

The operation was a complete success and the girl’s father wished to show his appreciation beyond the simple payment of a fee. This resulted in his purchase of a new instrument, a motion picture camera that could record operations on the eye. It was the first such camera to come to
Philadelphia and was his gift to Dr. Fox. Dr. Fox was "like a boy in his enthusiasm" and gave it to the Clinic of the College where he had performed the operation. This story was related by the patient herself in 1956 when Dr. Fox's daughter was writing his biography.

When in 1897 Dr. William Thomson retired as Chairman of Ophthalmology at Jefferson, it was mentioned in the newspapers that Dr. Fox would probably be his successor. At this time, however, Dr. Fox was deeply ensconced in the Professorship at Medico-Chi and had developed a large and successful eye clinic. He did not consider himself a candidate for the position, but only wished that his alma mater would choose the best possible person. George E. de Schweinitz, a graduate of the University of Pennsylvania, received the appointment (1897-1902).

It is interesting that in 1906 the general feeling of the medical profession was that smoke in itself was not harmful, but that it served as a medium in large cities to convey dust and noxious germs to the lungs. Dr. Fox said "There is more smoke in Philadelphia in one month than there is in five years in London, Paris, Berlin or Vienna." With relation of smoke-laden atmosphere to diseases of the eye, Fox claimed that patients with eye complaints at the hospital were increasing rapidly and the spread of conjunctivitis could be ascribed to the growing use of soft coal with no precautions for control of the smoke. It was to take another 40 years before the harmful effect of the smoke itself would be confirmed.

Dr. Fox's marriage to Beatrice Bickerton took place in 1889 in the Chapel for the Blind in Liverpool, England. They had 42 years of happy life together, blessed with three children, the middle one of whom died of diphtheria, common in those days. Mrs. Fox was a cultured lady and fine pianist who unselfishly devoted her life to the personal comfort and welfare of her husband's career. They traveled by steamship annually to her native England for visits to her relatives while he would attend meetings and purchase the latest ophthalmic instruments.

Around 1925 Dr. and Mrs. Fox started to spend their summers in Glacier Park, Montana. Dr. Fox promptly became involved there in the Trachoma Campaign of the Indian Medical Service for the Blackfoot Indians on their reservation. A similar clinic was also conducted by him in Albuquerque, New Mexico. At these clinics he gave demonstrations that educated other physicians in this work. The newspapers of the day dramatized the conquest of trachoma in the Indian reservations.

In 1925 the portrait of Dr. Fox was painted by Richard L. Partington of California, in full academic robes with Indian's eagle feathers of the old head-dress depicted beside his left hand. Dr. Fox considered this gift from the Indians as a favorite among his many honors.

Dr. Fox died June 2, 1931, "following a year of quiet illness." He was 78. His wife died two years later.

May this tribute to Dr. Fox bring added life and meaning to his portrait, donated by his daughter, which deservedly hangs in McClellan Hall.
In seven generations of physicians, the Hewsons have spanned nearly three centuries of English and American surgery, anatomy and medicine. Two of these Hewsons entered intimately into Jefferson history and will be chronicled separately as well as in the context of their lineage.

Addinell Hewson (JMC, 1879): Outstanding Alumnus

Addinell Hewson was a fourth generation physician in this distinguished family. His great grandfather, William Hewson (1700-67), of Hexam, Northumberland, England, was a well respected surgeon and apothecary. His grandfather, another William Hewson (1739-74), studied at Edinburgh, and became a partner of William Hunter and lecturer at the Windmill Street Museum. He conducted experiments upon fish which led to the discovery of the lymphatic system in them as well as in birds and turtles. For this work he received the Copley Medal (on exhibition at the College of Physicians of Philadelphia) of the Royal Society and was made a Fellow. He enjoyed the personal friendship of Benjamin Franklin who was godfather to one of his sons and to whom this Hewson dedicated his work on the Lymphatic System. Tragically, he died at the age of 35 from an infection received by a cut while dissecting a putrid body.

Addinell Hewson’s father, Thomas Tickell Hewson (1773-1848, Fig. 1) was brought to Philadelphia in 1786 at the age of 13 by William Hewson’s widow at the advice of Benjamin Franklin. This third generation Hewson received a B.A. degree from the University of Pennsylvania in 1789, studied medicine at Edinburgh in 1795 and remained abroad until 1800. On his return he was a surgeon to the Philadelphia Almshouse (later Old Blockley and still later Philadelphia General Hospital) and physician to the Orphan Asylum. He also was one of the surgeons of the Pennsylvania Hospital and was elected Professor of Comparative Anatomy at the University of Pennsylvania (1816-28). He gave important official service in connection with the National Pharmacopoeia, was active for many years in the College of Physicians of Philadelphia and served as its President from 1835 until his death in 1848. In 1822 he established a private medical school in which he taught anatomy and in which Franklin Bache (later Professor of Chemistry at Jefferson) taught chemistry. He entered peripherally into Jefferson History in 1839 when the Faculty was dissolved by the Board of Trustees. At that time he applied for the Chair of Surgery. At the election, Joseph Pancoast received seven votes, George McClellan five, and Hewson, age 66, received one. Truly a distinguished physician, he was a member of the American Philosophical Society, the American Linnaean Society, the Edinburgh Medical Society, and was awarded an honorary M.D. degree from Harvard Medical School.
Addinell Hewson (Fig. 2) was born in Philadelphia on November 22, 1828, the eighth child of Thomas Tickell Hewson. He was reared in a most advantageous educational background. After attending the grammar school of the University of Pennsylvania, he continued through the Department of Arts from which he graduated in 1848. Thereupon he continued the tradition of his family by entering the study of medicine under the preceptorship of Dr. Joseph Pancoast at Jefferson Medical College, from which he graduated in 1850. His thesis was on the “Prostate Gland.” Silas Weir Mitchell was his classmate, but their subsequent interests were so divergent that a close relationship with each other never developed.

In the elite tradition of the time he went to Europe on a sailing vessel as surgeon. After study and attending lectures at St. Mark’s Hospital and the Rotunda Hospital in Dublin, he went to London where Sir William Lawrence offered him a partnership in practice. He chose, however, to return to Philadelphia in 1851 and became a resident at the Pennsylvania Hospital. He took up practice and residence very close to Jefferson Medical College, at first at Tenth Street below Walnut, then at 1005 Walnut (until 1860), and subsequently at the northeast corner of Fifteenth and Walnut. His practice became very large and successful. In 1875 he moved to 21st and Walnut (until 1881) and thereafter to Fifteenth and Spruce until the time of his death. This nearness to his medical alma mater explains his ability to remain very active in the Alumni Association in which he served as President in 1886.

Dr. Hewson in 1853 became a Fellow of the College of Physicians, The Philadelphia County Medical Society and Academy of Natural Sciences. He also joined the American Medical Association (1855) and the International Medical Association (1887).

When in April, 1879, Professor Samuel D. Gross was founding the Philadelphia Academy of Surgery in his office, Dr. Hewson acted as Chairman at the first meeting. He unquestionably would have served eventually as president of this organization had it not been for the progression of a neurological ailment that prevented his holding office.

The first seizures of the fatal illness which finally caused his death were in 1868 and attributed to an accident. For a time these seizures were downplayed and known by only a few. Unfortunately, a violent epileptic spasm, considered of the Jacksonian type, occurred during a clinic at the Pennsylvania Hospital which spread the information. He was treated by his physician-friend, Jacob Mendes DaCosta, with little avail. In 1872 he once more went abroad for a year in hopes of restoring his declining health as well as to contact the medical leaders on the other side of the Atlantic. He did meet with some outstanding physicians and was honored by being called in consultation to see a few others for medical problems.

Upon his return to Philadelphia, Dr. Hewson continued his large clinical practice, treating old and young, rich and poor, black and white alike. Unfortunately, his seizures ran a varying but progressively more severe course in which hopes for a cure became more and more remote. Finally on September 11, 1889, while at home, he fell on the stairs during an attack. Despite prompt medical care he failed to regain consciousness and died within an hour.

A letter from Mrs. Hewson, dated March 22, 1890, was sent to Dr. J. Cheston Morris who wrote the biographical sketch of Dr. Hewson for Transac-
tions and Studies of the College of Physicians of Philadelphi", Volume XII, 1890 (p. 33-44). It affords details of the accident which probably resulted in his seizures as well as other items of interest.

"Dear Doctor Morris:

I have endeavored to find out the date of the fatal accident to dear Addinell. I think it was in May of 1868. He was driving in a Boston gig; the horse, frightened by the children leaving school, ran away, broke the shafts from the gig, which threw Addinell against the iron bar of the gig. He came home looking pale, a bruise on his forehead, said that he was not hurt, and went to his patients on foot. He seemed perfectly well for six months afterwards, though during that time he had a great deal of anxiety and trouble. It was in October of 1868 he had his first attack. About two months passed without any return. After that they came more frequently. As you desired me to mention anything of importance, I must tell you that just before the battle of Gettysburg, Addinell took a bullet from General Meade’s side. It was not known by many persons, as General Meade did not wish his absence from the army to be noticed. He was an old patient of Addinell’s, and felt that as the army surgeons had failed to get the ball, he would like to try Addinell’s skill, which proved to be superior. General Meade was hardly well when he fought at Gettysburg. Addinell always thought he would not have been able to fight if he had not relieved him of the ball. I must tell you of Addinell’s untiring energy. When we were first married and he was lecturing for the summer class at the Jefferson school, on College Avenue, he felt that his delivery was not the best, so he would write out his lectures and go to Mr. Wood, the old actor, repeat them and be corrected. His ambition was to be a perfect teacher. In deed, his whole aim was to excel in every branch of his profession, so he never lost a chance of learning. I think it would be hard to find a more noble, perfect character until sickness attacked him and even then he bore his great disappointments and sorrows without murmuring.

Very sincerely your friend, R.H. Hewson."

In addition to twenty articles, Dr. Hewson edited the American edition of William Wilde’s Aural Surgery (1853) and Mackenzie’s treatise on Diseases of the Eye. He published The Use of Earth in Surgery for wounds and tumors, invented a fracture bed, was interested in the influence of weather over the results of surgical operations and introduced the use of the ophthalmoscope in Wills Eye Hospital.

In 1854 Dr. Hewson married Miss Rachel Macomb Wetherill, the daughter of William Wetherill, M.D. They had three sons and three daughters. One son, Addinell Hewson, Jr., continued the family tradition in anatomy and surgery.

Addinell Hewson, Jr.: Jefferson Anatomist/Surgeon

Addinell Hewson, Jr. (Fig. 3) was born on September 2, 1855, in Philadelphia at 1005 Walnut Street, at which site would be erected the 1898 Jefferson Medical College Building, and still later, in 1931, the Curtis Clinic. As the son of Addinell and Rachel Macomb Wetherill Hewson he represented a fifth generation of Hewson physicians.

After preliminary education at Episcopal Academy, he obtained an A.B. degree from the University of Pennsylvania in 1876. At Penn he was an

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outstanding athlete where he held the mile track record for four years. He is also credited while at Penn as being the first to propose the Red and Blue as the official colors of the University. The occasion arose at a track meet with Harvard and Yale at a time when the University Colors were lacking. When a heated discussion arose about this situation, it is reported that Hewson shouted, “Let’s beat them with their own colors!” It is thus that the Red and Blue were adopted.

Young Addinell, like his father, chose Jefferson as his medical college. He graduated in 1879 with two citations. His thesis was “The Anatomy of the Male Urethra”, which manifested his early and abiding interests in anatomy. In the same year he received the degree of Master of Arts from the University of Pennsylvania for his thesis “The Effects of Sunlight on the Growth of Plants.” Four of his medical classmates were also to become distinguished, namely H. Augustus Wilson, first Chairman of Orthopaedic Surgery (1904-18); Howard F. Hansell, Chairman of Ophthalmology (1902-25); Lawrence F. Flick, a pioneer in tuberculosis control; and William L. Rodman, a Professor of Surgery and at the time of his death (1916) President of the American Medical Association.

Immediately following graduation Dr. Hewson began a life long career as a teacher of anatomy and as a surgeon (Fig. 4). At Jefferson he started in 1879 as an Assistant Demonstrator of Anatomy and rose to Assistant Professor (1902-05). On the clinical side he began as a Dispensary Surgeon at St. Mary’s Hospital, Assistant in the Ophthalmic Clinic of Dr. William Thomson at Jefferson, and as Assistant in the Surgical Clinic of the Elder Gross.

In later years (1897-1928) Dr. Hewson was Professor of Anatomy at the Philadelphia Polyclinic and College of Graduates in Medicine and became Emeritus in the Chair on his retirement. Also, from 1917-1923 he was Professor of Anatomy and Histology at the Medical and Dental Schools of Temple University and from 1923 until his death 15 years later he held the Chair of Professor of Anatomy in the Temple University School of Dentistry.

Dr. J. Parsons Schaeffer in his Memory of Addinell Hewson, M.D. (Transactions and Studies of the
College of Physicians of Philadelphia, 4th Ser., No. 7, 1939/40, p. 192-7) pays fitting tribute to Dr. Hewson’s work on the Anatomical Board of Pennsylvania, “a work that was very near his heart and to which he gave his best and most devoted efforts. For more than forty years he was actively and vitally allied with the many and varied functions... In the capacity of Secretary of the Board from 1899 to the time of his death, Dr. Hewson, through the Executive Committee of the Board fearlessly and efficiently, albeit with a kindliness which was not always appreciated, administered the laws pertaining to the distribution and use of unclaimed dead human bodies for scientific purposes, thereby greatly aiding in the promotion of anatomic knowledge and the advancement of preventive and curative medicine in a fundamental manner.”

Another outstanding service of Dr. Hewson was rendered when he volunteered for the aid of the stricken in the Johnstown flood of 1889. He promulgated announcements throughout various churches, supervised the collection of clothing and medical supplies, organized and directed a medical unit from Philadelphia, and went to the site on the first relief train. For this selfless and heroic work he received a certificate for his distinguished service.

Dr. Hewson belonged to the Philadelphia County Medical Society, Pennsylvania State Medical Society, American Medical Association, American Association of Anatomists, American Association for the Advancement of Science, Philadelphia Academy of Surgery, the American College of Surgeons, and the College of Physicians of Philadelphia. A co-founder of the Oncologic Hospital in Philadelphia, member of the Sons of the American Revolution, Phi Kappa Sigma and Alpha Kappa Kappa fraternities, he also served as a vestryman in the Episcopal Church.

Among Dr. Hewson’s medical and surgical connections other than Jefferson were: the Philadelphia Orphan Society, Episcopal Hospital, and Roxborough Memorial Hospital. Although not a prolific writer, he edited two editions of Holden’s Anatomy and contributed a number of papers to scientific and medical journals.

Dr. Hewson married Miss Lucy Clabaugh of Taneytown, Maryland in 1883. Of their four children, the eldest son, William Hewson (1884-1960) became a sixth successive generation physician. He graduated from the Medical School of the University of Pennsylvania in 1910 and became a pediatrician, also teaching at Temple and the University of Pennsylvania.

A seventh successive generation of Hewson physicians is James S. Hewson (1927-), son of William, who graduated from Temple Medical School and practices as an orthopaedic surgeon in Beverly, Massachusetts. A potential eighth generation physician, William Hewson, (son of Dr. James S.) matriculated at Jefferson Medical College in 1993.

**Harry E. Campbell (JMC, 1881): Physician/Dishwasher**

Most of the Jefferson graduates discussed in this chapter are remembered for their achievements in medicine or related fields, but there are certain ones who may be described as “interesting” for other reasons. Among these, one could include Harry Edgar Campbell, M.D. (JMC, 1881), whose graduation thesis had a sophisticated implication in its title “Axillary Aneurysm by Digital Compression.” Curiously, nothing was recorded at Jefferson regarding his career until the time of his death in May, 1917. Then it was revealed that he had been highly regarded as a physician and “diagnostician” in Pittsburgh, Pennsylvania.

Dr. Campbell was found dead in a rooming house in New York City where he had worked as an $18 a week dishwasher (Fig. 1). Investigation
Dr. Campbell's body was found in a room in the home of Mrs. John Hunting, with whom he had boarded for about three years. He had told her, the woman said, that he had practiced medicine in Pittsburgh, for twenty-five years. Investigation by the police of that city have not only confirmed that statement, but also brought to light the fact that the apparently humble dishwasher at one time held the reputation of being one of the best diagnosticians and most prominent physicians in Pittsburgh.

According to former friends of the dead man in the Western city, the physician spent thousands of dollars on his stepdaughter, who, under her married name of Eleanor Cochran, is now on the vaudeville stage. For years he supported her abroad while she studied music and voice culture for the purpose of fitting herself for the career of an opera and concert singer, while his wife paid frequent visits to her there.

For a time, his friends say, Dr. Campbell, was able to keep up with the expenditures entailed, but financial reversals at last forced him to call his stepdaughter home before her education was completed. He finally became despondent over his reverses and three years ago left Pittsburgh for New York, where he had been working for some time in the capacity of dishwasher for a restaurant. During that time he had not communicated in any way with his former associates.

At about the same time that Dr. Campbell left Pittsburgh, his stepdaughter married Isaac Cochran, a young business man of Dawson. About a year ago the mother and daughter left Dawson, and six months later Cochran filed suit for divorce. The case has not yet been heard.

brought out the fact that his landlady had known about his medical background. The police then ascertained that he had committed himself to the career of his stepdaughter while promoting her education as a concert and opera singer. He sustained financial reversals and obligations which cost him his practice. Becoming despondent, he left family and friends and had no further contacts with them. While nothing is known of his own perception of his life and work, one would look with regret upon the lowering of his status after a life of promise and acceptance. The ultimate fate of the one for whom he gave up his career is not known but she was found to be working as a vaudeville singer at the time of his death.
William J. McKnight (JMC, 1884): "Resurrectionist" and Anatomical Act Facilitator

A loyal Jefferson alumnus played a key role in the Pennsylvania Legislature by his efforts in securing the passage of the Forbes sponsored Anatomical Act of 1883, as related in Chapter VII. This Act, regarded as a landmark in medical legislation, was steered through the Senate by Senator William James McKnight, whose part was at least as important as that of Dr. Forbes, but who never received the recognition his astute actions deserved. Thereby hangs a tale!

Grave robbing was a time-honored method of supplying bodies for anatomical dissection. Dating to the fourteenth century, medical schools were often hard pressed to obtain bodies for dissection and "resurrectionists" were commonly relied upon to do the job for profit. The process varied, but in England and the United States the practice was still common during the nineteenth century. In England, matters came to a head in 1828 when Burke of Edinburgh was publicly hanged for having extended the art of grave robbing to actual murder for procurement of bodies. He was further punished by having his own body dissected by Alex Munro, Tertius. Public concern having been aroused, Parliament in 1830 passed the Warburton Act providing a mechanism for supplying unclaimed bodies for warranted dissection.

Several states of the Union had made similar laws, but in Pennsylvania there were no formal arrangements, although unclaimed bodies were often supplied by coroners by special "understanding". Samuel D. Gross himself had undertaken the robbery of a grave but gave up when he suspected detection and failed to accomplish his mission. Valentine Mott (1785-1865), famous New York surgeon, was known to have personally participated in grave robberies. In 1857, 21 bodies were unaccounted for at the Philadelphia Almshouse and were traced to enterprising attendants who were found to have sold them.

Brookville, Jefferson County, in Northwestern Pennsylvania, in 1857 was apparently moderately progressive for a country town in that five doctors were engaged in practice there. Among the five was William James McKnight, a native of the town, who had just completed a preceptorship and a course at the Eclectic Medical Institute in Cincinnati (Fig. 1). When the drunken son of a runaway slave died of an infection and was buried in a local cemetery, the five doctors quickly organized a plan to obtain a specimen for reviewing their anatomy. (It is likely that most of them had not done actual dissection during their education.) Their conspiratorial venture was successful and the body was removed early Sunday A.M., November 1, 1857.

All was serene in Brookville that fall week of November 1, until one of the conspirators shared his secret in such a manner that public suspicion was aroused. The cadaver had been taken to an empty house owned by McKnight’s preceptor, Dr. Clarke, but, anxious to avoid implicating him, the group removed it from the house and placed it temporarily under the front porch steps on Monday night, November 2 (Fig. 2). Two nights later, it was

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Fig. 1. William James McKnight (JMC, 1884), frontier doctor, grave-robbing conspirator (1857) and State Senator responsible for passage of Forbes Anatomical Act of 1883.
placed in the local ice house of Mr. K.L. Blood. From Wednesday night until Saturday, the five began the dissection including removal of all the skin to pre-empt possible identification. At that point, they decided that disclosure would result unless the body were removed from the town, so they made careful plans to transport it to a rural hideaway on Saturday night. The plans went awry after the door of the ice house had been broken into and, fearing detection, the wagon stole away without the body.

Sunday morning, November 8, was long remembered. A youth, noticing the open door on the ice house entered, discovered the partially dismembered body, and fled in terror, spreading the alarm!

The public response was predictably wild and rumors soon circulated at all levels including the report that the grave robbers had skinned the cadaver and sold the skin to a razor-strop manufacturer for five hundred dollars! The doctors were quickly involved but ultimately got away with minimal penalties for grave robbing, the uproar having largely subsided when it was found that no other bodies had been disturbed.

McKnight, after hiding away for a few days was arrested, pleaded guilty to grave robbery before a magistrate, and was fined $25 plus costs. This prompt action, suggested by his brother who was a local attorney, saved him from “double jeopardy” in a later charge against the conspirators. Many stories circulated around the country but the actual facts were never revealed until 1915 when McKnight published a full account
of the “resurrection” in the local newspaper, the Brookville Republican.

Whether influenced by the 1857 experiences or not, McKnight went on to a notable career as a doctor under almost frontier circumstances. Employing three horses for wide-ranging horseback rounds under wilderness conditions, he became an effective and progressive physician.

He served in the Civil War from 1861 to 1863 and on resumption of his practice, Governor Curtin appointed him examining surgeon for Jefferson and Forest Counties, and later that year he became a United States Pension Surgeon.

No doubt by reason of his wartime experience, McKnight became interested in resuming his education. He took courses in anatomy and surgery during the 1870s, in tandem with his own very busy practice and became a leading physician and surgeon in northwestern Pennsylvania. He was politically active and in 1880 was elected to the State Senate. In 1883, he matriculated at Jefferson for the regular course and received his M.D. in 1884. His political associations were to prove definitive in the success of the Forbes Anatomical Act of 1883.

It is uncertain whether or not Dr. Forbes was even aware of the McKnight role, since at the time the bill for the Anatomical Act of 1883 was in charge of Senator Joseph E. Reyburn of Philadelphia. There is, however, strong evidence (Horace Montgomery, Journal of the History of Medicine, 21, 374-393, 1966) that without McKnight’s efforts the bill might not have been introduced at the time and its passage would have been much more dubious.

The story unfolds as the Philadelphia grave robbing scandal of 1882 led to the arrest of Jefferson anatomist William Smith Forbes (JMC, 1852) for conspiracy to “despoil graves” in the procurement of bodies for dissection. Jefferson authorities had grave misgivings about serious adverse effects of the “body snatching” which had been revealed December 5, 1882, and various meetings were held. Dean Ellerslie Wallace, fearing assault by angry citizens, persuaded local authorities to assign four officers to guard college property.

Whether or not coincidentally, Professor of Anatomy William H. Pancoast gave a dinner party for a few associates on December 10, to which McKnight was invited. It is not clear how as a medical student he would have been included among the professors at the Pancoast dinner but the likelihood is that his status as a mature physician and surgeon at the time opened the doors as did his status as a state senator. Also, his previous experiences with Jefferson professors in his interim courses may have led to friendships. In any case the conversation quickly turned to the grave robbing problem as it affected Jefferson. Pancoast responded excitedly, “The College is ruined.” Others shared his apprehension, but McKnight astutely perceived that the threatened disaster could be turned to advantage. No doubt recalling his own grave robbing adventure, he suggested that the subject of procurement of bodies might be pressed while public opinion could be turned in favor of a new law. He voiced his views with calmly reasoned arguments and succeeded in convincing most of the guests that Jefferson’s best interests would be served by pursuing the matter vigorously. McKnight volunteered to furnish rural support for a new Anatomical Act and even boasted “We will rush it through the Senate.” His first suggestion was that Pancoast arrange for the Philadelphia Anatomical Association to frame a measure to be reintroduced by Senator Reyburn. The Association met several times during January and February, and, with the cooperation of Forbes, the College of Physicians and a W.W. Keen petition, the Anatomical Act was offered to the Senate, February 28.

There were many questions raised in the legislative discussions. The interests of the cities and rural regions were variously interpreted, but many rural skeptics were unconvinced by those related to medical education and the need of Philadelphia to compete against other medical centers. McKnight heard all the arguments, then made the “longest speech” in support of the Bill. He referred to experiences in his widespread practice where specific anatomical knowledge was required for skilled medical care, and he emphasized the urgency of supplying material for teaching of all
physicians who would practice in the State. Regarding "humanity", he argued that it was "more disgusting to the living to dissect than to the dead to be dissected." The spontaneity and simplicity of his speech appeared to be the major force in an overwhelming passage of the Act by a vote of 27-6 on March 7. The House passed it with a minor amendment on June 4 and Governor Pattison signed it on June 13.

Were it not for the efforts of a medical historian and the long life and career of Dr. McKnight, his association with anatomical legislation might never have been brought to light. McKnight was apparently quite friendly with W.H. Pancoast who at the time was Head of Anatomy while Forbes was a Demonstrator. Perhaps communication between Forbes and Pancoast was not close. Perhaps Forbes was not well informed about McKnight's important senatorial position, or perhaps Forbes was preoccupied with the troubles relating to his arrest and trial. There are still a few details which are not clear, but it is certain that Forbes was the moving force in Philadelphia while McKnight's Jefferson connections and legislative skills provided the needed impetus to secure passage of the Act.

McKnight, after an eventful career in medicine and politics, in 1917, published a two-volume work entitled Jefferson County, Pennsylvania, Her Pioneers and People (1800-1915). This provided the account of his sponsorship of the Anatomical Act in addition to the history of the region. At his death in 1918, a western Pennsylvania newspaper commented in his obituary that "He performed a never-to-be-forgotten service to his fellow surgeons and to humanity when he succeeded in having a bill passed authorizing the turning over of unclaimed bodies for post mortem purposes."

It is fitting that this contribution by a Jefferson alumnus be brought to the attention not only of his fellow alumni but to the medical community at large.

E. Quinn Thornton (JMC, 1890): Unusual Physician and Teacher
by Thaddeus L. Montgomery (JMC, '20)

We, the class of 1920 of Jefferson Medical College, had finished our first year of studies, and were assembled in the (1898) old college building for the first lecture of our sophomore year. The subject was to be Materia Medica and the Professor, Doctor Edward Quinn Thornton (Fig. 1).

Up to that stage of the curriculum, our lectures had all been in the fields of basic science, i.e. anatomy, physiology, bacteriology, etc. We were looking forward to a taste of real medicine taught by real doctors. Materia Medica had to do with herbs and synthetic drugs and how to administer them.

Conversation was buzzing away in the ancient lecture room as the sun's morning rays filtered in through the tall windows. The hour hand of the pendulum clock stood at 9 o'clock when the door
of an adjacent office opened and a tall youthful figure in cutaway coat entered and took his position behind the podium.

Quiet prevailed for the moment as the students faced the new professor, and he - as he had done for years - looked out over the roomful of young men and wondered where their minds would lead them in the days to come. Then the class broke out in a welcome applause.

The professor smiled slightly and nodded his head. "Thank you, gentlemen (Jefferson had no women students at that time). I trust we will have an excellent year together.

"In this course we shall study about drugs, their action, and their place in the treatment of disease. In the laboratory you will make the tinctures, pills, capsules, and emplasters in which they are prescribed.

"It is needless to point out how important this knowledge and also your instruction in physical diagnosis will be in the conduct of practice."

Then he launched upon a classification of the drugs which were available in that year of our Lord 1918. From that point he went on with the description of individual items.

His thoughtful approach made clear what could have been a difficult subject. For almost every disease he presented instances from his own practice. Thus he taught us not only how to treat illness but how to handle patients.

In a few weeks he had become one of our favorite teachers. We thought to ourselves, "this is the kind of physician we would like to become." Later in my own career I had occasion to seek advice from him several times. I never had reason to alter my high opinion of Dr. Thornton as a physician and a man.

When I finished my internship at Jefferson Hospital in 1922, I married and settled down in Bala-Cynwyd, a pleasant suburb just outside of Philadelphia. There I did general practice for a number of years while I was serving preceptorship in Obstetrics and Gynecology.

Among our early friends there were Ralph and Bevvy Eaton with whom we played golf at the Philadelphia Country Club and established a long time friendship. At their home one evening we met no other than Jack and Nancy Heston. In the course of that evening, or shortly thereafter, Nancy - having learned that I was a graduate of Jefferson Medical College - asked me whether I had known a doctor there by the name of E. Quinn Thornton.

"Indeed I did," I replied with enthusiasm, "he was one of my favorite teachers, and incidentally what made you ask me that question?"

"Therein lies quite a bit of a story," replied Nancy.

"I would like to hear it."

"All right, but it goes back quite a distance in our family life. —— It starts like this:

"My father, William MacDonald Crowe, while still single, left the small village, Cochrain, in the north of Ireland in 1895 to come to this country. He had served an apprenticeship of two years in the preserving and marketing of foods in order to take a position with the new Acme Stores of the United States.

He disembarked at the Philadelphia Piers of the Delaware and proceeded leisurely westward on Pine Street, taking in the sights as he progressed. He had almost reached Broad when he saw a tall young man in shirt sleeves tacking a sign on the front of one of the houses. It read "E. Quinn Thornton, M.D." His curiosity was piqued.

"Good morning, sir" father said. "That is an interesting bit of work you are doing."

"Yes? You caught me putting up my shingle. This is my first day in practice."

"How interesting! This is my first day in America."

"Well, well," the tall figure put down his hammer and extended his hand. "Welcome to our country and to Philadelphia. Can I be of any help to you at this point in your journey?"

"Yes, you just might." William Crowe was by that moment more than moderately impressed by the graciousness of the young man. "I am looking for a place to lodge, of which you might have some knowledge. Also who would suspect that I would be so fortunate as to meet a young physician on my first day in this city?"

"Perhaps I could be of some service to you in
both these missions," Dr. Thornton volunteered. 

"Will you stop in my new quarters and talk things over. We are a bit unsettled but we can at least find a couple of chairs to rest on."

"I would just like to do that, Doctor" replied the visitor as the two entered the house. Then he went on, "you know there is something about this coincidence that particularly pleases me."

"In my recent home, Ireland, we were taught that the first and most important contact to make in a new village is the neighborhood doctor, to set up an arrangement for regular medical care."

"How interesting."

When in a few minutes, William Crowe had learned from Quinn Thornton a likely place to arrange for renting, he returned to the subject of a family doctor. "You know I am serious about this business of making arrangement for a doctor's care. I expect to live in this country and probably settle here in Philadelphia. I want to marry and raise a family. I will need a physician for them as well as for myself. I like your style. Would you be my physician now, and ultimately our family doctor?"

"That's what I have been training for the past eight years," E. Quinn replied, "and I don't see anything wrong about your yearly contract idea. We can start with x dollars a year, subject to adjustment when the wife and children come along."

"Done!" and the two men shook hands. That was the only contract the two ever made.

"And now Mr. Crowe," said his new doctor," I want you to come in next week when you are settled and I will make a complete physical examination to determine what kind of a health specimen I have to deal with."

"So that," said Nancy, "was how my father and E. Quinn Thornton first met and made an arrangement for care by which Dr. Thornton attended us for two generations.

"Father started as an apprentice with pay at the Acme Company. Eventually he became its first vice-president. In 1906 he married Susie Turnbull whose father was a United Presbyterian minister from Monmouth, Illinois. He and my grandmother, my mother, and my three brothers attended Monmouth College.

"As our family grew, Dr. Thornton took care of each one of them. He never sent a bill. Father increased the annual payment progressively.

"We sought no other doctors. Dr. Thornton selected a specialist when necessary for special problems. He took care of the pregnancies of my mother, my sister, and myself. He selected an obstetrician to handle the technicalities of delivery, but he himself stood by in his immaculate cutaway coat to make sure that everything went well and the baby was properly cared for. (That scene in the delivery room of the hospital has gone down in the history of Jefferson over the years.)

"Once a year he would write for three of us to come to his office. Mrs. Thornton would serve tea while each of us was being examined by E. Quinn."

"You know, Nancy," I interrupted, "your story is almost unbelievable. Did you realize that you were receiving medical attention that was superb under a unique verbal contract that worked superbly down to the last detail?"

"Oh I know!" exclaimed Nancy. 

"Father used to say that the best thing that happened to him when he landed in America was that meeting with Dr. E. Quinn Thornton when he was putting up his shingle."

"But tell me, Thad, how did you come to be such an admirer of Dr. Thornton?"

So I repeated my account of Professor E. Quinn Thornton's course in Materia Medica in our second year at Jefferson, and how all of the class came to admire him.

"We were both fortunate in having contact with this singular gentleman." I said "you know him as a devoted skillful doctor. I knew him as an illustrious teacher and one of the guiding forces of my career."

"I'll accept that," Nancy said. "It was for each of us a lifetime experience for which we can both thank God."
Another of the horse and buggy Jefferson Alumni was Howard Garret Purnell, M.D. (JMC, 1892). Dr. Purnell (Fig. 1) was born in rural Delaware in 1871 and entered Jefferson in 1889 where he had the good fortune to have Dr. W. Joseph Hearn (JMC, 1867) as his anatomy proctor.

The circumstances of his having been photographed with his group in the dissecting room are not known but the print depicts clearly his youthful appearance (Fig. 2) as compared with the graduation photo only a few years later.

Upon graduation he practiced medicine at Ansonville, in western Pennsylvania, where he is shown with horse and buggy (Fig. 3). He had three sons, one of whom, John Straw Purnell of Lewisburg, Pennsylvania, graduated from Jefferson in 1927. His son, John Straw Purnell, Jr., was in the class of 1954 and practiced in State College, Pennsylvania.
Fig. 3. Dr. Purnell on horse and buggy rounds, Ansonville, Pennsylvania.

George C. Harris (JMC, 1836) and Frederick T. Harris (JMC, '02): Father and Son

The presentation to Jefferson in 1946 of three antique medical objects by Frederick T. Harris, M.D. (JMC, '02) of Seattle, Washington, was accompanied by a few details of the career of his father, George C. Harris, M.D. (JMC, 1836) which warrant recording. The three consisted of a pocket medical case, a pocket instrument case and a dissecting kit (Fig. 1) all of which were used by Dr. George Harris in a career of remarkable variety.

Dr. Harris was born in Maryland in 1811 and began his medical studies with a preceptor in Emmitsburg, Maryland. He graduated from Jefferson in 1836 (thesis: Gonorrhea) and went on to practice in Springfield, Illinois, where he became acquainted with Abraham Lincoln. In 1849 he joined the California gold rush, going across country by wagon train, and prospered in the mining camps. He returned east on business by clipper ship via Panama, then went into the Texas cattle business. In the panhandle of Texas he did well but a blizzard cost him his entire herd. During the Civil War he practiced medicine in Missouri but in 1865, his restless spirit reasserted itself and he joined another wagon train, this time to Oregon. There he practiced in Eugene for a time but moved to a wheat ranch near Pendleton.
in 1881. He died in 1886 at age 75.

The story about his son Frederick T. is not known but some ideas about his background may be gleaned from the writings of his classmates in the student year book of 1902, *The Ganglion*. The class prophet uses these words: “F.T. Harris hails from the wild and woolly West. When he landed in town, the first thing he did was to obtain a permit to carry a revolver, solemnly averring to his friends that he wouldn’t be without his trusty colt in his hip-pocket. Fred is a stickler for Western etiquette. They do say that he wears a lasso in lieu of suspenders. Always a good fellow, Fred will get a haircut after examination and proceed to practice.”

In an even lighter view the writer of the section “Class Presentation” goes on. “We have in our class a fellow who hails from a state where the Indians scalp the paleface, where the wolf still sings his mournful wail, and upon whose sun-scorched plains the bleaching bones of the weary may be found. Harris, alias Broncho Bill, if you will kindly hand your six-shooters over to the class committee and ‘lemonade’ up this way, I will see what I can do for you.... you see before you this native of the wild and woolly west, a gentleman of daring feats and noted courage. He is a dead shot, can stand on his head and spit in his vest pocket, and holds the record for roping a steer and tying it up in the short space of thirty seconds.” Continuing in his spoof, the author concludes. “Notice his jewelry - a ring in his nose and a spur on his boot. Now, Harris, if you will give us one of those ‘hoopy doggie’ yells, I shall let you go.”

It is regrettable that we do not know the full story of the careers of either father or son but it would appear that the son was born late in the father’s life and came from Wardner, Idaho, where he presumably lived following his father’s death in 1886. While a student he was a member of the Hare Society, the Forbes Anatomical League, and the Ptolemy Society.

This father and son story is another example of the diversity of the careers of early American physicians as well as an illustration of the loyalty of Jefferson graduates to their medical school, so often encountered in our Alumni families.

Fig. 1. George C. Harris' (JMC, 1836) instrument case, medical case, and dissecting kit.
Joseph Shimoon (JMC, '03): Killed by the Turks

Time and distance have all but erased the memory of the sad and heroic story of Joseph Shimoon (JMC, '03). The poignant details of his unique career resurfaced in the Coatesville, PA, Record of October 9, 1954, (Fig. 1).

"Shimoon was born in Persia, now known as Iran. Early in life he came in contact with American missionaries and was educated in a mission school. He soon became greatly concerned over the poverty, disease and squalor among the oppressed people of his country in contrast with the luxuries enjoyed by the rich, and he felt that Christianity was the answer to this age-old problem.

"The urge to try to help his people soon became so overpowering that he decided to devote his life to preaching the religion which he had come to believe in so deeply. But he felt so ill prepared for the task that he resolved first to come to America and study theology. How he managed to raise sufficient funds and to overcome the many other difficulties connected with such an adventure is an epic story that probably never will be told.

"He arrived in America shortly before the turn of the present century. After consulting with some persons in this country, to whom he had been referred, he changed his mind about taking a theological course and decided to study medicine instead. He felt that by acquiring modern scientific

Fig. 1. Headlines from newspaper article in Coatesville, PA, Record of October 9, 1954.
skill in the treatment of disease, he could perform a service that was desperately needed in his native country, and which at the same time would bring him in intimate contact with the people among whom he planned to do missionary work.

“Accordingly he entered Jefferson Medical College in Philadelphia, and to defray his expenses he did odd jobs, sold books and spoke to groups of people, including many church congregations in this area, telling of the needs of his people, his experiences in America, and his difficulties with the English language. His talks frequently were quite amusing, especially his descriptions of the embarrassing situations that sometimes resulted from his limited knowledge of English.

“He spoke the language well with hardly a trace of a foreign accent. But the fact that so many English words have two or more different meanings often proved puzzling. One of his favorite stories concerned an invitation he received to spend a weekend with an out-of-town family. Until he received that invitation, the word “grip” to him meant only one thing, a handbag or valise. When he alighted from the train at the station he was met, not by his prospective host, but by a servant who explained that the head of the house was “in bed with grippe.” The bewildered Shimoon could not understand why anybody would go to bed with a valise, and why, once in bed with a valise, he could not get up to greet a visitor!

“Shimoon was a man of small stature with the olive complexion typical of his race. He had large dark eyes slightly sunken under heavy black eyebrows and very black hair. When he spoke he gave the impression of intense earnestness and devotion to his cause. He usually ended his talks by telling of the difficulties he expected to encounter when he returned to his native land to pursue his chosen work among a hostile Moslem people, and the dangers and sacrifices that he would be called upon to face. But he said he was completely and unalterably dedicated to this task, and come what may, he was ready and willing to go with his Master all the way.”

“One of the books that he peddled from door to door in this area was the book on Persia and her people which described the political and economic conditions that existed in that country, and the peculiar customs and habits of her people. In offering the book he would tell his story simply and concluded with the query: ‘Wouldn’t you like to know about my country and my people?’ During his student days at Jefferson he spent much time in this area, not only selling his books, but as a welcome guest in many homes where he received much help and encouragement.

“Following his graduation from the medical school he went back to Persia. But apparently no one here ever heard directly from him again, or if they did, they never mentioned it. There is no doubt, however, that when he returned he applied himself with characteristic diligence and self-sacrifice to his self-imposed task. The early record of his accomplishments in his ministry of healing of both body and soul among his oppressed and miserable countrymen may be irretrievably lost. But after his name in the great Golden Book kept by the recording angel in the realms of glory there is, without a doubt, one of the brightest chapters that the angel has ever been called upon to write.

“As the years rolled on following his departure, the memory of Joseph Shimoon and his struggle to gain an education that would enable him to bring temporal and spiritual comfort to his countrymen grew dim and faded almost completely away, even with those persons who had been most intimate with him. Eventually the first World War cast its dark shadow over the earth, and people shuddered at the reports of battle casualties, the atrocities being committed and the incomprehensible cruelties of men. Then one day in 1916, among the news dispatches of the war, they found a startling item on the inside page of their newspaper.

“It reported that a native Persian Christian missionary, Dr. Joseph Shimoon, had been captured by war-crazed Moslem bandits who attempted by torture to compel him to renounce his faith, and when he steadfastly refused they crucified him!”

The first newspaper account of the untimely death of Dr. Shimoon appeared in the Evening Ledger of April 15, 1916. “Reports of the burning at the stake and the beheading of a former Philadel-
phian, Dr. Joseph Shimoon, Class of 1903, Jefferson Medical College, and communicant of St. Stephen’s Church, a medical missionary in Persia, have been received by the Montana Church Episcopal publication. The report gives no date and it is not known here when the man was put to death.

“The church man says the doctor was martyred by Turks, who seized him at Urmia, Persia, and tried to compel him to acknowledge Islam.

"Seized by Turks, Dr. Shimoon was offered his life and a place as surgeon in their army if he would profess Islam," according to the dispatch.

"He answered: 'I cannot do that, because I am a Christian.' They then saturated his clothing with oil, told him they would give him one more chance saying 'acknowledge Mohammed to be your prophet.' He replied: 'Jesus is my saviour.' They then set him on fire, burned him to death and cut off his head.

"Dr. Shimoon was a Persian by birth who came to this country from Oroomiab for his education, according to men who were graduated with him at Jefferson. Some say they think he was a naturalized American citizen but were not sure of this. The college records show that when he was a student he lived at 745 South 15th street. The woman who lived at that number when he was a student was named Wallace. She is dead. Neighbors questioned this morning remember that Mrs. Wallace lived there and that she had roomers, but they do not remember the medical student from Persia.

"Dr. Alfred Heineberg, 1642 Pine street and Dr. John Edward Beardsley, both of the class of 1902, the latter now a member of the medical staff to Jefferson Medical College, remembered Joseph Shimoon, and spoke with real feeling when they heard of the fate of their former classmate."

Indication of the popularity of Dr. Shimoon as a Jefferson student my be gleaned from the 1902 yearbook, The Ganglion (p. 171-172), in which he, along with other outstanding members of his class, were lampooned by William Wondo Fitzpatrick at the Class Day Exercises. Unfortunately, it is inappropriate to relate this clever verbal sketch which would detract from the solemnity of his most heroic and tragic death in 1915 at the age of 36.

As a Jefferson student, Shimoon was a great admirer of his Professor of Surgery, W.W. Keen, and belonged to the Keen Surgical Society (Fig. 2). In his writings, Professor Keen referred to Shimoon as "one of my own Jefferson boys who gave up his life for his faith."

Fig. 2. Joseph Shimo (JMC, 'OJ), standing at extreme right, in group photo of Keen Surgical Society.

Legend and Lore

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April, 1914. Members of the senior class were harboring anxieties about the forthcoming final examinations for their coveted Jefferson Doctor of Medicine degrees. Spring was in the air. Students were presumably reviewing notes and texts as methodically as possible but indulging in various extra-curricular activities for brief periods of relaxation.

This "rite of spring" was suddenly blown apart by a disaster involving a senior student six weeks prior to his scheduled graduation. James William Keath, relaxing in his third floor room and attempting to step through a window into an adjacent one, fell to the concrete below and fractured his spine. (Other versions of the actual occurrence include a pillow fight, falling through a skylight, and trying to step from his room into the window next door). Emergency treatment at Jefferson revealed a transverse injury to his spinal cord with total paralysis below the waist. In spite of a grave prognosis, since at the time patients with similar injuries succumbed, Jimmy survived. His class graduated without him and he remained hospitalized while dealing with frequent complicating problems. In the process his character and determination became widely known.

During months of treatment when he was described as hovering between life and death, Keath was never known to give in to despair. Physical rehabilitation measures were primitive but he learned as much about self care as possible. He had firm support. Not only were physicians and nurses anxiously supportive, but his wife, Sally, and ten-month old daughter, Ida, provided constant inspiration. It is ironic that although marriage among medical students was uncommon at the time, Keath was one of a very few in his class who were so committed. His presence in the hospital attracted many of the doctors and nurses, but perhaps the most loyal was Dr. Roy Deck, his good friend, classmate, and fraternity brother (Kappa Psi), who served his internship at Jefferson. For the whole year there were few days when Deck did not stop for a moment or more.

Keath’s room became a focus for many visitors first to marvel at his remarkable reaction to adversity and again to observe his upbeat response, always manifested by cheerfulness which resulted in his being dubbed “Smiling Jim.”

During his prolonged convalescence, there was much time to think of his abruptly interrupted career and how to salvage it. Obviously the first step was obtaining his M.D. degree. He was supported by fellow students who supplied him lecture notes and kept him abreast of medical concerns. During early 1915 he spent most of his time studying, and since he was already a good student he prepared for his final examinations in May after a full year. His graduation in June, 1915, was a celebration probably never equaled in Jefferson’s annals. Jimmy’s progress had been followed by the newspapers from the time of his accident and they reported the events in detail, including his preparation for examinations with personal interviews.

Fig. 1. James William Keath (JMC, ’15) at graduation, June 5, 1915. After another year of hospital stay he was rehabilitated and practiced as a generalist and ophthalmologist.
Graduation Time

The celebration began with the Alumni Banquet on June 4, since Jimmy’s attendance at the earlier Class Day activities was regarded as too much for one day. *The Philadelphia Evening Bulletin* (June 5, 1915) reported in two columns a description of the event under the headline “Doctor Jim, Back Broken, Dines with Class at Bellevue.” The article began: “Puffed between pillows on a wheel bed, James W. Keath, who in spite of the fact that his back was broken, one leg amputated and the other paralyzed, won his degree of medicine this year, sat at the head of his class table last night in the annual banquet of the alumni of Jefferson Medical College (Fig. 1).” It went on: “Around him 250 fellow graduates of Jefferson gave him an ovation which would have done honor to the President of the United States.”

“Jim - no one at Jefferson thinks of calling him anything else - was in a fever of expectation, while his wife, a constant attendant at his bedside, put on his ‘banquet duds,’ as he called them, and helped the doctors move him from Jefferson Hospital to the wheel bed and then down the elevator to the ambulance.

“Every man present sprang to his feet when ‘Jim’ was wheeled into the green room at the Bellevue. On down the long aisle at the end of the room, between rows of wildly, happily applauding classmates, between rows of equally enthusiastic alumni, the man in the bed was wheeled, smiling, for it was all as he had pictured it, only more so, as he said later.”

As stirring as the banquet proved to be, the climax of the graduation events occurred at the Ninetieth Annual Commencement the next day at noon (Fig. 2). *The Philadelphia Evening Ledger* carried a story the same day but more details were included in that of the *Philadelphia Telegraph* under the headline: “Dr. ‘Jimmy’ Keath receives His Diploma after Heroic Fight.” The *Philadelphia Inquirer* and the *Philadelphia Record* also carried laudatory stories but the *North American* was most enthusiastic with its headline: “Smiling ‘Jim’ Keath Gets Diploma while Thousands Applaud.” That story went on: “A plainly engraved sheepskin diploma, representing more than a year of physically painful, will-racking, unrelenting effort, and significant of a lifetime’s ambition, was handed to ‘Jim’ Keath by Jefferson Medical College yesterday while 2,000 persons applauded.

“By that diploma, William Potter, president of the board of college trustees, conferred upon a man with a twisted, broken back, and but one leg which is paralyzed, the degree of doctor of medicine. By it James William Keath became Doctor James William Keath, with all the honor the title implies and the distinction of being the first man in a similar condition who has ever won a diploma from an American college or university.

“One hundred forty-six other diplomas were awarded at the same time to men almost physically perfect, fine specimens of American manhood, but to men of similar standard Jefferson has been awarding diplomas for more than half a century.”

The newspapers went on to describe the scene at the venerable Academy of Music. Jim was wheeled in via the stage entrance, just before the academic procession began and placed so his class-
mates could greet him. The Telegraph continues: “When the last of the graduates had passed out on the stage an attendant wheeled ‘Doctor Jimmy’ out from behind the wings. A great roar of applause arose from the audience. It venerated among waving handkerchiefs until the storm of cheers seemed to rock the old building”...

The long anticipated festivities having been concluded, Dr. Keath’s life course was by no means clear. In the ensuing months he surely regarded his potential for practice with misgivings especially when his clinical course continued rocky. At graduation time he had responded to questions about his career with suggestions of laboratory work, research, hospital work, or medical inspection of some sort, but all such plans could go no further until his clinical condition stabilized. Following the second amputation (because the remaining paralyzed leg was useless and an impediment) he showed slow improvement. During 1916 it was finally possible for him to leave the hospital.

For information regarding Keath’s subsequent career, we are indebted to Mrs. Ida K. Groff, Keath’s daughter (Fig. 3). An accomplished woman, she was a school teacher for thirty years and has engaged in numerous endeavors since retirement. She was widowed in 1980 and lives in Ephrata, Pennsylvania, in the house next door to the one previously occupied by the Keaths as office and residence.

Contact with Mrs. Groff was made by Dr. Russell H. Derr (JMC, ’40), a retired alumnus from nearby Adamstown.

Mrs. Groff was a teenager when her father died but recalls many of the circumstances of her father’s way of life. Always cheerful in spite of continuing challenges, she remembers him as well adjusted to family and community as well as his appreciation for the help he enjoyed from friends and neighbors. The exact preparation that enabled him to engage in practice was not known to her, but she knew that a recent Jefferson alumnus, Dr. Evans Dounton Russell (JMC, ’11), was very helpful. He shared his office on Main Street, Ephrata, and provided the opportunity for him to develop his ophthalmology interests along with such general practice he was able to carry on. Exactly how he acquired the needed skills in ophthalmology was not known to her, but obviously he had some training prior to beginning his practice. Mrs. Groff also indicated that her mother, Sally, worked in the office much of the time, performing services requiring ambulation and physical exertion.

The evidence suggests that the practice went relatively well with patients accepting Keath’s limitations with understanding and good will. As early as 1918 he was instrumental in arranging for recovery of vision for a Mennonite patient whom he persuaded to undergo a cataract extraction. This was accomplished by referral to Dr. Charles R. Heed (JMC, ’03), later Clinical Professor of Ophthalmology, who performed the operation at Jefferson. The result was excellent for improved acceptance of ophthalmic procedures among local Mennonites as well as improving Keath’s practice.

The Main Street office where Keath worked was almost at street level while living quarters were on the second floor (Fig. 4). For several years it was necessary for him to be carried up and down the stairs. It was his own initiative...
which resulted in the design and completion of a homemade elevator enabling him to be more independent. This type of resourcefulness surely was manifested in his practice.

For some years Keath was able to achieve his goals, a result far beyond any probability that would have been envisioned in 1914. It was far from easy but Keath never lost his smile nor his spirit. In the late 1920s, however, he experienced increasing difficulties with recurring illnesses including respiratory infections which aggravated the ever-present pressure sores on his back and buttocks. His daughter recalls her mother’s constant attention to the latter with local applications, never sufficient to bring them under control. He was forced to take increasing leaves of absence from his practice, often for a few weeks at a time. The final event was pneumonia complicating his progressive debility and resulting in his death, June 25, 1930.

Thus ended the career of a heroic alumnus who, in spite of challenges which would have defeated one of lesser character, was able to rehabilitate himself and provide a model for his family and friends.

Fig. 4. Red brick house, 20 W. Main Street, Ephrata, PA. Home and office of Dr. Keath. (Photo 1994)
There are a few Jeffersonians about whom it is generally agreed that the man is difficult to separate from the legend. George Willauer is one of these. From the time of his internship, stories and anecdotes have accumulated from many sources, most specifically verifiable, some slightly embellished. Many character traits emerge, some traceable to his heritage but others less easily identifiable. Perhaps the most obvious are the strong force of his personality, his direct straight forward manner, the cold steel of his gaze and the simple logic of his thinking. The veneer of humor is never to be overlooked. Those attributes of behavior which stand out included directness, firmness, punctuality and reliability. All combined to yield an exceptional individual. It is coincidental that his birthplace was just a few miles from that of Dr. Samuel D. Gross, both of them strong personalities, both of Pennsylvania German rural heritage, and both surgeons of extraordinary skill. Their common interest in Jefferson shows Gross as Founder of the Alumni Association (1870) and Willauer as one of the most active, productive and loyal Alumni of his time, who served as President in 1962. It is curious that at no time did Willauer refer to the commonality of origin of himself and Gross so it is unlikely that he was aware of it.

George Willauer (Fig. 1) was born in Stockertown, Pennsylvania. His education at Franklin and Marshall College (Sc.B., 1917) was followed by World War I Army services as a drill sergeant. At times it appeared that his army experience carried over into later life with his own disciplined behavior and his expectations of those around him. These characteristics were manifested during his internship at Jefferson following his graduation in 1923. An early riser, he took pride in making early morning rounds, thus always being informed about the status of his patients in anticipation of the professors’ rounds. Even then, this practice contributed to his effort to remain current with events and developments in the hospital.

Dr. Willauer and his college sweetheart, Mary Eshleman, whose love and loyalty he celebrated throughout his life, were married September 1, 1923, shortly after the beginning of the internship. At its conclusion in 1925, the Willauers spent a year in Vienna, an experience which in addition to its educational value served as a delayed honeymoon. His training in surgery began there. His experiences also contributed to his interest in the early aspects of thoracic surgery which he proceeded to develop promptly on his return to Jefferson. Establishing a practice in Philadelphia, he began as an assistant in the surgery outpatient clinic and soon progressed to ward surgery. At the same time he served in the Department of Anatomy as an Instructor in Operative Surgery. An avid observer, he quickly developed the ability to evaluate surgical practices while perfecting his own skills.

He formed opinions about people and events quickly and expressed them forcefully, often with a little sarcasm, always with some humor, and never with vindictiveness.
During these pioneering years, there was rapid development in the technical aspects of chest surgery. Problems relating to anesthesia and control of infection were challenging. Dr. Willauer learned and applied new concepts of local anesthesia, even performing some thoracoplasties with it in tuberculosis surgery because of early fears of exacerbating the disease with general inhalational anesthesia. In later years he applied the Lemmon technique of continuous spinal anesthesia to chest surgery with great success. He also introduced new procedures and designed instruments for chest surgery. Infection control continued to be a limiting problem until the advent in the 1940s of antibiotic and antimicrobial medications. His interests were not limited to the thorax, however. General surgery, head and neck surgery and vascular surgery were included in his developing skills.

With his academic advancement at Jefferson, ultimately to Professor of Surgery, he became a highly regarded teacher and mentor for interns and surgical residents many of whom remained devoted to him all his life. He also was thoracic surgeon to Eagleville Sanatorium and to the Jefferson Department for Diseases of the Chest. For some years he was supervisor in charge of anesthesia delivery by nurse anesthetists in the hospital. This role was superseded in 1955 by the formal organization of the Department of Anesthesiology. In 1948 he became Director of Surgery at Methodist Hospital. His surgical colleagues recognized his work, one Chairman of Surgery from another institution having later remarked that Dr. Willauer did the best tuberculosis surgery in Philadelphia. He served a term as President of the Academy of Surgery of Philadelphia and was a founding member of the American Board of Thoracic Surgery.

Jefferson held a special place in Dr. Willauer’s life. It has been remarked that no one has been more loyal or more devoted to its best interests. Through difficult times he contributed his talents without stint, especially relative to raising funds for new buildings and programs, but also advancing the interests of the Department of Surgery and of the Alumni Association (Fig. 2). As Alumni President in 1962 he conducted meetings with strict parliamentary discipline although never denying expression of opinion. His closing a motion after a vote was characterized by a rap with the gavel and the expression “Unanimous”. A longtime member of the Meigs Medical Association, he left his imprint on its procedures and served a term as President.

Sometime during his career, George Willauer was dubbed the “Iron Duke”. This designation was formalized at a mock ceremony at the Hoffman House Restaurant, where a group of his colleagues conferred the title with a citation and helmet (Fig. 3).

In 1965, a group of his colleagues and ex-residents presented his portrait to Jefferson. The artist, Erik Haupt, faithfully portrayed the stern countenance tempered by a softening trace of a smile also shown by numerous photographs. He retired from surgery the following year. From 1968 to 1971 he served on the Board of Trustees as Alumni Representative and in 1972 he received the Alumni...
Achievement Award. His accomplishments were recognized by his college Alma Mater when Franklin and Marshall awarded him the honorary degree of Doctor of Science as well as its Alumni Medal. He died in 1977.

Any recital of biographical data about George Willauer would fall short of portraying the real man without the inclusion of anecdotes, family relationships, and stories which he told with engaging spirit.

George and Mary had two children, Ellen and George, both of whom were exposed early to their father’s Jefferson associations. They were frequently required to wait for their father with the chauffeur, Glynn, after having been picked up from school or athletic events. (In consequence of his widespread activities and need for ready transportation, Willauer had early acquired Glynn Davis who continued with him until retirement.) Ellen recently remarked that she was as familiar with the old Jefferson courtyard where the car was parked and the Thompson Lobby as with any other place. Even the cars evoked interest. The 1935 Packard roadster was known to all, especially when Willauer wore his flowing cape in wintertime and sat characteristically erect beside the driver. A later large 1950 Dodge was just as well known and was used when “G.W.” developed the habit of sleeping en route. Both of these cars have been preserved by Ellen and George, the Dodge having been used nostalgically and appropriately for transporting the family to and from the funeral in 1977.

Mary Willauer, as indicated, was a loyal and loving wife. Never wavering in the support of her unpredictable husband, she was an able mother, a gentle hostess and an organizer with sufficient flexibility to adapt to a busy surgeon’s irregular habits and schedules. The home in Germantown for more than forty years was expandable to accommodate Mary’s aging parents, many guests, and memorable social events. In addition, George’s sister, Jessie, a poliomyelitis patient since age 16 with severe residual ambulatory disability, was a frequent visitor along with her companion who made possible Jessie’s lifelong self-supporting status in spite of her major handicap. George’s father, Charles Willauer, was in later years also an occasional household guest. He and Jessie manifested the same unswerving strength of character and directness already described in George.

George Willauer’s own reaction to illness and stress was predictable. Never one to avoid responsibility, he rarely gave in to intercurrent sickness. Early in his career he suffered a debilitating disease never specifically diagnosed but eventually conquered by a period of convalescence in Maine. His recovery was followed by a love for the Maine woods to which he resorted for hunting and fishing vacations for many years. He developed a back problem later for which he wore a heavy brace and carried on his surgery in spite of pain. This experience caused him to reemphasize his already erect bearing including the resort to a straight chair with sawed-off legs for riding in his car and for years wearing a broad leather belt for back support. An incident during surgery at Eagleville Sanatorium provides a further glimpse of his determination. A heavy brass balancing ball which was part of the operating table fell on his toe with resulting severe pain which caused him to fall to the floor. Promptly he reacted, scrubbed and re-garbed, and completed the operation. That night upon retiring, and without any comment about it, Mary asked him if he wasn’t going to take off his shoe. He replied, “I broke my toe. I am operating at 8 A.M. and if I take off the shoe I’ll never get it on in the morning”.

For all his life, George Willauer was concerned about precautions against fire. He had fire drills regularly for his family at home and always preferred lower floor hotel rooms. In addition he carried a light but strong rope with him for use if needed. He insisted that if evacuation ever became necessary, no time be wasted in trying to save objects or luggage. This policy proved itself when Mary was traveling in Norway and the wooden hotel where she was staying caught fire. Mary immediately left by the most direct exit and escaped injury in spite of numerous casualties and some deaths.

The Willauers hosted many memorable social events, usually in their home. Some of these were
stag dinners, always carefully planned and executed. On one occasion at a stag black-tie buffet dinner, each course followed in orderly sequence including rack of venison, rack of bear, wild duck and others until on checking the buffet George Willauer spotted the string beans being served with the wrong course. He exploded, “Who brought in those beans? Take them out!” Even the few in line who had already served themselves were ordered to return the beans to the serving dish which was removed, returned at the proper time and the dinner proceeded in order and good humor.

At other times the home dinners were less formal. Sometimes George Willauer saw to the cooking himself especially when more unusual dishes (codfish cheeks!) were planned. Exactness in preparation was always in character.

On the occasion of their thirty-fifth wedding anniversary, George, without Mary’s knowledge, hired a bagpipe quartet to escort each new arrival up the driveway with musical accompaniment.

At another time the Willauers were driving to a Pocono winter resort for the weekend. En route a snowstorm caused traffic delays. On approaching the main dual highway going north, G.W. found the northbound lanes completely blocked and traffic at a standstill. The southbound lanes were empty. Without hesitation he turned north in the southbound lane and proceeded to the next intersection where somehow he made his exit without more than a questioning gaze from the patrolman he encountered there.

During the early years of surgery at the Pine Street Chest Department, Dr. Willauer was about to step out of the elevator on rounds in the fourth floor (male) ward when he heard a patient holding forth about his impending surgery, how he was going to decline operation because the doctors and nurses were only interested in operating and had no concern about the patients. The other patients on the ward, being aware of Dr. Willauer’s approach, tried to warn the man but failed. Dr. Willauer stepped out and went directly to the speaker: “You have 30 minutes to get your pants on and leave the hospital. We are going to use your bed for someone who is anxious to get well and has what it takes”. Much surprised, the patient complied. The corollary is that a month or so later he returned and was operated on successfully by Dr. Willauer.

Dr. Willauer’s forceful presence generated loyal and admiring patients but occasionally there were people who did not respond to his positive approach. On an occasion when he was leaving for a Maine vacation, an anxious lady asked, “Dr. Willauer, how will I be able to reach you so far away?” He replied, “Madam, five cents on a penny postcard will not reach me where I am going!”

In a memoir published in the Alumni Bulletin (Winter, 1978) his lifelong friend and classmate, Benjamin Haskell (JMC, ’23) expressed eloquently his friendship and respect for George Willauer: “He was gifted as a teacher, and although a strict disciplinarian he was always ready to help and support those under his training when their judgement was sound. His stories, his gestures and his bearing made some of us feel that he would have made as finished an actor as he was a surgeon.

“An incident of his dramatic story telling is remembered well. One evening in the sitting room of our Maine camp he told the story of the large salmon that did not get away. George was up and down in this chair showing the use of rod and line, all so vividly that we looked for the fish to come through the floor. He was an able and enthusiastic outdoorsman and as regularly as the seasons rolled around he would head for Maine for fishing or hunting (Fig. 4).

“George Willauer was a man of great integrity who was not swayed by passing fads when they violated his firm principles; he could keep his head when others about him might be losing theirs...Tough and rigid when it was demanded, he was kindly, sometimes sentimental and always a true gentleman. He was the last of his generation and possessed a special kind of gallantry.”

Dr. Willauer was among the few accorded the title “Mr. Jefferson” by reason of his devotion and loyalty to Jefferson and all of its components. His mark has been left on many of them but most meaningfully on the students and physicians who shared his presence.

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Perhaps no better example of the "Willauer Legend" could be offered than the story of the "White Throated Song Sparrow". It is submitted as offered by its author, John Y. Templeton, III, Samuel D. Gross Professor of Surgery (1967-1968) whose own career at Jefferson has already assumed the status of legend. Told in his own inimitable style, the story not only illuminates the personality of George Willauer but also reveals the facility with words which John Templeton has so skillfully employed in conversations, speaking, and writing. [Ed]

George J. Willauer (JMC, '23) and the White Throated Song Sparrow
by John Y. Templeton, III (JMC, '41)

It is May of 1967. Joe Stayman and I sit in the wooden Peterborough on Lac Pythonga near the clubhouse in western Quebec awaiting our transportation.

Joe Stayman (JMC, '42) is chief of surgery at Chestnut Hill Hospital and beloved by generations of surgical residents and medical students fortunate enough to enjoy this affiliation. They appreciate his surgical skills and particularly his endless devotion to teaching. We are both veterans of Dr. Gibbon's surgical residency and have spent many hours with Dr. George Willauer in and out of the operating room. He is a hard taskmaster, but we love him dearly. He possesses immense clinical knowledge and surgical skills, particularly in the treatment of pulmonary tuberculosis. A born teacher, he has worked long and hard to impart this knowledge to us. He is completely honest, and for him the welfare of his patients is paramount. He jealously guards the integrity of his profession and roundly condemns any real or fancied derelictions of his colleagues. He holds his friends dear and neither gives nor asks quarter of his enemies. He is not always at one with the medical establishment and can at times be something of a maverick. For these things and more, we admire and respect him, but we are also intrigued by his unique life style. Always the impeccably dressed gentleman, he sports a black opera cape. His language is often strong and laced with colorful figures of speech. He rides in a 1935 black Packard convertible with his chauffeur Glynn.

Glynn steers and manages the foot pedals. Dr. Willauer shifts gears and gives detailed instructions as to speed and course. He makes loud critical comments, easily audible from the open automobile, about the driving habits of fellow motorists. He enjoys himself immensely.

We hear Laurentian's Beaver coming in from Rocklands, its sound rising in pitch as the pilot sets the power for landing. We go ashore and wait as Johnny Whiteduck, later chief of the Algonquins in Maniwaki, brings the floatplane up to the dock, the big R985 turning over so slowly we can hear each cylinder individually. We bid our friends farewell, load the gear and head for home, just ahead of the impending onslaught of black flies and mosquitoes that make June in that part of the North so unpleasant. As always, it has been a good trip, this time notably so because of the White Throated Song Sparrow.

Now you know and I know that there are White Throated Sparrows and there are Song Sparrows, but there are no White Throated Song Sparrows. Dr. George Willauer, however, believed in White Throated Song Sparrows, and that, for purpose of this story, is the important thing.

The American Association for Thoracic Surgery met in New York City in April, 1967. Tom Holder was there. He too had been a resident with Dr. Gibbon and had then gone on to study pediatric surgery with Dr. Robert Gross. He became a prominent Kansas City pediatric surgeon making many contributions to the field, particularly in the man-
agement of congenital atresia of the esophagus. Tom invited Dr. Willauer and me to lunch, and we repaired to the Americana Hotel. We were on holiday so that cocktails were in order. Dr. Willauer ordered a hot buttered rum against a rather dreary, cold and drizzly day. Serious problems arose. Both waiter and bartender were from the Caribbean where, probably because of the tropical climate, this drink is not very popular in spite of its rum content. Very precise instructions followed, sticks of cinnamon were found somewhere in the dark recesses of the pantry, and, in due course, a drink acceptable to the master appeared. Spirited conversation followed, spurred by the good companionship and the affection and respect that Tom and I felt for Dr. Willauer.

If there was anything that Dr. Willauer loved as much as surgery, it was the outdoors, specifically the outdoors in Maine. He had been very seriously ill in his younger days, and his classmate, Dr. Mose Burnett (W. Emory Burnett, JMC, '23), and Dean Parkinson of Temple took him to Maine to convalesce. It was his custom to return twice each year. In the spring, he fished the Allagash for speckled trout or the Narraguagas for Atlantic salmon. In the autumn, he hunted deer from Round Pond on the Allagash. An early conservationist, he took only such game as he, his family and friends could eat. He was a superb wild game cook and his venison dinners were greatly relished by those fortu-

Fig. 4. Drs. P. Victor Sencindiver (JMC, '52), Willauer, and John J. McKeown (JMC, '47) arriving at fishing camp on Miramichi River New Brunswick, on a venture into Canada from Willauer's usual Maine fishing haunts.

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nate enough to participate. His dear friend in Maine was Willard Jalbert, the famed Old Guide of the Allagash. Not only did Dr. Willauer gain much of his wilderness knowledge from Willard, but many of the colorful, pithy expressions and figures of speech that he was wont to use, particularly in times of stress in the operating room, came from Willard and his friends.

Inevitably, therefore, conversation turned to the outdoors, and I mentioned that Joe Stayman and I planned a fishing trip to the Pythonga Club in western Quebec in a few weeks. Without urging, Dr. Willauer volunteered the following instructions on how to fish northern waters correctly. As in all matters, they were well thought out, specific, detailed, and to be followed to the letter.

First, he said, the fisherman should go through the snow to the cabin at water’s edge while the lake is still completely frozen. The lake is watched closely, and, one day, a pair of loons is seen. This is the signal to put all the equipment in readiness because, the next day, the ice will go out. Spring has not yet come to the North, but the fish, voracious after the long winter under the ice will come near the surface. Vigorous fishing is begun immediately using streamer flies, Mickey Finns, Grey Ghosts, and such like. After a few days, as the water warms and the fish go deeper, lures are changed and fished at moderate depth. Then flocks of swallows appear gorging themselves on the first insects of the season. The fisherman may now use wet and dry flies, carefully matching the hatch. Eventually, the day comes when the voice of the first White Throated Song Sparrow is heard. In Maine, he says “Mr. Peabody, Peabody, Peabody”

- In Canada, “O Canada, Canada, Canada” - in descending cadence. At this sound, the alert experienced fisherman moves to the inlets where streams run into the lake and the temperature of the water and the supply of food are better. From the canoe, casts are made into the stream and the lures slowly retrieved. Finally, fishing is abandoned and the expedition terminated when the black flies arise from the water and the female simulium make their bloodthirsty attack.

Well, this was excellent lunchtime conversation, and I salted the information away. The following month, Joe Stayman and I found ourselves on Lunch Lake, a small speckled trout lake, with our French guide Michell. The morning fishing was disappointing, yielding only one small fish for a rather poor lunch at the old lean-to. The afternoon was no better, and we paddled aimlessly around. Discouraged, we were about to give it up when to my great pleasure the unmistakable song of the White Throated Song Sparrow came to ear. There he was, singing happily away in an alder at water’s edge. I announced to my skeptical companions that I knew exactly how we could catch fish and asked Michell to take us to the stream inlet. Michell’s response was “She no good there.” My response was “She no good here”; so, over we went and followed Dr. Willauer’s instructions. In short order a number of very nice speckled trout were taken. This pleased and surprised us. It would not have surprised Dr. Willauer.

So when you hear the White Throated Song Sparrow, remember Dr. George Willauer and fish the inlets of streams.

From distant Korea, Jefferson in 1927 acquired a youthful matriculant whose destiny was closely related to the world events about to evolve. His life span included situations especially involving regions recently referred to as the Pacific Rim but his career was closely associated with Jefferson Medical College.

Robert Kyun Hyun Charr (Fig. 1) was born August 8, 1904 in Sen Chen, Korea, where his family operated a large farm south of the Yalu River, the border between Korea and Manchuria. The history of the region includes frequent invasions by the Manchus and by the Japanese, so that Korea was politically insecure for centuries. Weak leadership also contributed to turmoil. Treaties between Korea (known as Chosen during the Yi dynasty) and western powers during the last quarter of the Nineteenth century were ineffective, and once more Korea was defeated. Japan officially annexed Korea in 1910 and initiated police-state policies which denied Koreans their heritage, language and culture. Robert Charr's father was once Governor of a Korean Province and his grandfather also held a high place. His mother, Wee Ron Pak Charr, came from a family long distinguished in education, public service and benevolent works. His mother was widowed early, and when Robert was six years old they became Christians. Robert attended the Presbyterian Mission School at Sen Chen. His mother became active in the new facility, at times serving as Bible teacher and preacher. During World War II and especially during the Korean War (1950), she was active in war relief for Korean people and troops after having permanently lost her farm in North Korea. On one occasion, she was jailed by the Japanese for refusal to bow down to the Japanese Shinto gods.

Following his early education under the head of the Mission School, Dr. George Shannon McCune, and an unsuccessful unarmed uprising against the Japanese, Charr, at age 15, requested his mother’s permission to go to China to study. Dr. McCune was consulted and agreed but was himself banished from Korea. In China, Charr studied at the University of Nanking where one of his teachers was Pearl Buck who with her husband was on the University staff at the time.

In 1923/24, Charr was determined to come to America to study and Dr. McCune advised that Charr come to Huron, South Dakota, where McCune had become President of Huron College. After attending the local academy to polish his English, he graduated from the College in 1927. His first thought on coming to America had been to study agriculture in preparation for return to North Korea to manage the family farm but in discussion with McCune he was advised that the study of medicine would be more useful for service in his local area. He decided to enter medical school and took appropriate pre-medical courses. An illness occurring during his senior year at Huron had threatened his health.

Fig. 1. Robert Kyun Charr, M.D. (JMC, '31). Photo from 1945 student yearbook dedicated to him.
ron progressed to acute mastoiditis that threatened his life. Dr. McCune again intervened, sending him on a stretcher by train to the Mayo Clinic where a mastoidectomy saved his life. He lost some hearing and he was treated regularly by Dr. Joseph C. Keeler, Chairman of Otology at Jefferson, both during and following his student years.

While a student, Charr became increasingly aware of the deteriorating situation in the Far East. Japanese aggression with invasion of Manchuria and China threatened Korea even more severely. Learning that Korean students who were trained in this country were not permitted by the Japanese to work in their chosen fields, and that most were in jail, he decided to stay in America until conditions improved - if ever. His student years were quietly eventful. He was a frequent victim of “passing up” before lectures, resulting from his sitting in the front row. He never acknowledged that his reason for being there was his impaired hearing. Likewise at commencement in 1931, he failed to stand when asked to do so to receive honorable mention for the Phillips Prize because he did not hear his name announced. The Phillips prize was awarded to the student recommended by the Professor of Medicine for clinical excellence. Dr. McCrae assured Charr in a letter that his honorable mention was very close to the record of the winner. As a student he earned the respect of his colleagues who wrote in the Clinic yearbook of his philosophical influence, his knowledge of languages and the humanities, and his clinical skills. The latter were enhanced by his contacts with Dr. Thomas McCrae whose friendship he valued during his student years and until Dr. McCrae’s death.

Completing his internship in 1932, Charr began private practice in Germantown. He was also appointed as an Assistant Physician on Dr. McCrae’s service at Pennsylvania Hospital and as Assistant Demonstrator of Medicine at Jefferson. A new threat developed when early in 1933 he was found to have pulmonary tuberculosis and Dr. McCrae sent him to White Haven Sanatorium for rest treatment. He began part time laboratory work there after a period of complete rest, progressing to full time appointment as Resident Physician. Again, his devotion to the patients resulted in many intimate friendships and the good will of colleagues. He was able to carry out clinical and laboratory research leading to numerous publications. In 1936, his health having recovered, he went to Germany for further study in internal medicine, aided by Sanatorium funds. His period of study in Frankfurt-am-Main coincided with that of Nazi police-state repression and he felt keenly its limitations which contrasted with American freedoms. While there he received a request from his mother in Korea that he return for a long awaited visit. He sailed for Yokohama April 3, 1936, on a Japanese ship, the Kashima Maru (Fig. 2), but after stops in Mediterranean and Indian Ocean ports, anxiety about his Chinese passport arose since the Japanese had confiscated it. English passengers who had befriended him somehow enabled him to leave the ship at Hong Kong as he feigned illness and they recovered his passport. He then had to decide whether to risk the trip to Korea or return to Germany. He decided to go to Korea, taking the chance that the Japanese would permit him to leave. At the conclusion of his visit he was able to leave for China through a ruse which sent him to Peiping University where he was offered a position by the Rockefeller Foundation. As he noted the deteriorating political situation, he decided to return to America where he once more served at White Haven, this time taking on the duties of Assistant Pathologist in addition to clinical ones.
In 1939, Dr. Charr decided that the field of tuberculosis was too limited for his inquisitive temperament so he obtained a teaching appointment at Jefferson while beginning a private practice in Philadelphia. His earlier mentor, Dr. McCrae, had died in 1935 but Dr. Burgess Gordon became interested in his progress. At the same time it was revealed that he had secretly married Miss Elizabeth Haines December 12, 1936. Betty had been secretary to Dean Ross V. Patterson since 1930 and was thoroughly familiar with Jefferson affairs. His first office was opened in the former office-residence of Dr. Lawrence F. Flick (JMC, 1879), recently deceased, whom Charr had known at White Haven.

Research and teaching were largely carried out at the Pine Street Chest Department where his skills were promptly appreciated by students, and he became well known and popular among the staff members at all levels. As World War II caused the organization of the Jefferson Hospital Unit, he attempted to join but was rejected by reason of his history of tuberculosis.

During the war, Charr’s teaching included the Pine Street duties plus lectures and physical diagnosis courses at the Main Hospital. His activities were highly successful, and the students developed great admiration for his diagnostic skills. The mode of his presentation of a difficult subject and his humor greatly enhanced their enthusiasm for a demanding course. In 1945 the students dedicated their Clinic yearbook to him (Fig. 3). The accompanying comment stated: “In this task he has endeavored to impress upon the sophomore class that in the field of medicine, one had the unlimited opportunity to delve into the inner secrets of human beings and to show to his fellow men sympathy and good will.”

At the same time Charr continued clinical research relating it to the pathology of lung diseases. Some subjects covered were: vascular changes in the lungs with tuberculosis and anthracosilicosis, thrombosis of the pulmonary artery, tuberculous cavities, cor pulmonale with silicosis, the effects of artificial pneumothorax, and the characteristics of lobar pneumonia associated with anthracosilicosis. One of his first papers was presented at the organization meeting of the American Federation for Clinical Research in 1940.

During the war, Charr became convinced that it would not be possible to return to Korea so he applied for and was granted American citizenship in 1944.

The end of the war brought with it the probability of further success with his practice and in 1946 he was able to move to a new office-residence location at 2038 Locust Street. He was then a Fellow of the College of Physicians of Philadelphia and a member of numerous medical societies including the American Trudeau Society, the American College of Physicians, and the American College of Chest Physicians. He was elected to Alpha Omega Alpha. He was a contributor to Piersol’s Encyclopedia of Medicine and editorial associate for Dr. Burgess Gordon’s revision of Hughes’ Practice of Medicine, in addition to numerous medical articles. In 1947, he was certified by the Board of Internal Medicine. He rose through the teaching ranks to Assistant Professor of Medicine.

Tranquility was short-lived. In 1948, Charr experienced a relapse of his tuberculosis and was forced to relinquish all his duties for an extended period of rest. This was a bitter blow. His wife and young daughter Betsy were a great concern and the interruption to his career at a critical juncture raised questions as to his ability to make a comeback. His friends proved to be a solid resource and while several helped to hold his prac-
Fig. 4. Dr. and Mrs. Robert Charr (center) attend luncheon meeting of Republican Women of Pennsylvania where Korean Ambassador was guest speaker (left: Mrs. Claude Shelton, right: Mrs. Harry K. Tucker).

Fig. 5. Bust of Professor Thomas McCrae by Robert Charr.

tice together, a few others including Professor Lewis C. Scheffey provided financial support. Upon his gradual return to duty the following year he was able to carry on, although his teaching duties were less strenuous.

In 1951, the resignation of Dr. Reimann as Chairman of the Department of Medicine caused Charr to resign his teaching duties as a point of honor. Although later reinstated as Assistant Professor, he transferred his academic activities to the Pennsylvania hospital where he was already quite friendly with Dr. Garfield G. Duncan, Chief of Medicine and Clinical Professor of Medicine at Jefferson.

The 1950s proved eventful and tragic. An attack of acute cholecystitis followed recurrent symptoms and led to a cholecystectomy in 1951 with the additional finding of anomalous structure of his biliary system. This event may have been a prelude to the occurrence of biliary carcinoma which led to his death in 1956. At the time, however, he made a good recovery. Also in 1951 he was cheered by the arrival of his mother from Korea. Having not seen her since 1936, the reunion was bittersweet since she soon made it clear that
she would return to Korea rather than make her home here. She was committed to her mission and relief work which she was carrying on in South Korea since the family estate in North Korea had been confiscated by the Communist government. Although she was cordially welcomed by the friends of the Charrs, her language problems also proved a barrier to her remaining in the United States. She returned home, resuming her work with missionaries and relief workers to care for the children, the poor and war refugees. This continued until 1956 when she was grief stricken with the news of her son's death and could no longer work. She became ill with cancer and was cared for by her church friends until her death February 17, 1958.

Although resigned to living his life apart from his native land, Charr never forgot his heritage. During World War II, the plight of Korea and its people received increasing attention from the United States government, especially by reason of the strategic location of the Korean peninsula in relation to Japan. The Korean ambassador, a guest speaker at a meeting of the Republican Women of Pennsylvania, was an acquaintance of the Charr family and the Charrs were invited to attend (Fig. 4). Also, Charr was secretly visited by a U.S. government person during the war seeking information about Korean railways. In addition there was a local group of Korean students, mainly those stranded here by the war, which met at intervals in Philadelphia. At least three Jefferson medical students were members while Charr was a sponsor.

Not previously described was Charr's humor. A fine story teller, his handling of the English lan-

Fig. 6. The Charr family. Left to right: Elizabeth Haines Charr (Wife of Or. Charr and Secretary to Dean Patterson), Mrs. Wee Ron Pak Charr (Mother of Dr. Charr), Betsy Charr (Daughter of Dr. Charr), and Dr. Charr.
guage often added an additional twist to the stories he told which were repeated and augmented by the students and his friends. His hearing defect also was a factor which often resulted in curious distortions which were humorous since he was not prone to request repetition. An additional talent for Charr was his art. For some years he did oil painting, especially enjoying seascapes done at the Jersey seashore, but he also produced portraits, the most notable having been one of Dr. Garfield Duncan which hung in the family dining room. Much appreciated also was a portrait of the parents of Dr. Nathan H. Heiligman, a White Haven colleague. Perhaps Charr's favorite was a bust of Dr. Thomas McCrae (Fig. 5) the artistic quality of which is difficult to evaluate but which clearly demonstrates the esteem in which McCrae was held by his erstwhile protege. The Charrs also enjoyed music.

It is clear that Robert Charr was a warm, intellectually able physician whose medical accomplishments were many. His clear thinking, warmth of personality, devotion to the well being of his patients, teaching and diagnostic skills, and his high moral character were outstanding in a period when such attributes were not always discernible. His Presbyterian faith surely contributed to his concern for other people and he followed his early teaching throughout his lifetime, having been an Elder in the First Presbyterian Church of Philadelphia at the time of his death. His wife (Fig. 6), who survives, complemented his career with her intelligence, support and ability to manage through many adversities.