



Washtenaw Impressions

OCTOBER, 1974

PRESIDENT'S COLUMN

Our dream of a Washtenaw Historical Society Museum took a small step forward on October 1st when our membership approved a resolution by Dave Pollock offering to purchase from Frederic Matthaei, Jr., four acres of land on Fleming Creek. The site includes the grist mill that we would like to restore plus enough land to build a museum and all the additional necessary structures including a parking lot. It had been determined by our attorneys that an offer to purchase the land must be approved by a majority of the members present at a special meeting called for this purpose. We had a good turn out—far more than the required quorum—and after the informative speeches, many questions and a spirited discussion, it was voted overwhelmingly to make the offer. The committee of board members working on this acquisition has met several times and by the time we go to press will have met with Mr. Matthaei. However, we do not expect to have an answer to our offer for several weeks. We will keep you informed.

We've received many expressions of approval on the first issue of the Washtenaw Impressions. The suggestions of larger type and black ink has been incorporated in this issue. Additional suggestions on contributions will be appreciated by the staff. I'm sure the entire membership of WHS expresses a warm "thank you" for the job they are doing.

It has been requested by some members that we hold meetings during the day due to the various difficulties of traveling at night. In considering this idea we feel we should be able to reach a feasible compromise. Therefore, you'll

note that our November meeting will be held on Sunday the 24th at three in the afternoon. If you need a ride to either the October (night meeting) or the November meeting, call Dr. Everett at 663-5723 and a member living near you will pick you up and deliver you home safely. **COME TO YOUR WHS MEETINGS. THEY ARE INTERESTING AND FUN AND YOU MEET THE NICEST PEOPLE IN WASHTENAW COUNTY.**

W.H.S. GENEALOGY SECTION NAMES DELEGATES TO THE MICHIGAN GENEALOGICAL COUNCIL

The Genealogy section of the Washtenaw Historical Society named the following persons as delegates to the Council at its meeting held in Manchester on Sunday, September 15, 1974.

Dr. William F. Bender (D.D.S.)
2310 Ayrshire, Ann Arbor, 48105
Telephone 313-668-6925

Ralph W. Muncy, 1015 Martin Place, Ann Arbor, 48104

Mrs. Bender (Polly) is Secretary of the Genealogical Section

Mrs. Leigh Anderson (Alloa) is Chairman of the Task Force which is organizing and supervising the collection of records of "First Settlers" of Washtenaw County. Her address is 1120 Lincoln Ave. 48104, Tel. 313-663-2128

NOVEMBER MEETING

In November we will look at American education through the perspective and experience of Lydia and Ralph Muncy. Their presentation

will be, "Educational Development in America".

The meeting will be November 24, at 3:00 p.m. in Liberty Hall at Ann Arbor Federal Savings, Liberty and Division streets, Ann Arbor.

The Muncys have been long time members of the Society. Last year they organized the Genealogy Section of the Society and Mrs. Muncy organized a group interested in early crafts. The Muncys have been active in Sesquicentennial activities in Ann Arbor, assisting in a number of projects. Recently, Mrs. Muncy was appointed to the Washtenaw County Historic District Commission.

ALICE ZIEGLER NAMED EDITOR OF THE WASHTENAW IMPRESSIONS

Alice Zeigler, a former editor of the Ann Arbor News, has been named editor of the Washtenaw Impressions.

Upon graduation from the University of Michigan where she majored in Journalism, Alice joined the Ann Arbor News. She served as Church Editor for five years. During her years at the News, she wrote a number of historical articles which fostered a growing interest in local history.

In 1966 Alice wrote a history of her country school, the Superior Townline School on Joy Road. The school building at the time was 100 years old.

She resides at 537 Riverview Drive with her husband and two sons.

PRACTICE OF MEDICINE IN THE REVOLUTIONARY WAR

By C. Howard Ross M.D.

INTRODUCTION

Through what strange means did I become exposed to such a subject? To begin with, a far-off stimulus, my paternal grandmother, related the tales of her grandfather, William Henry Louthan VI. He stood in the second line and witnessed the surrender of Lord Cornwallis' Army to George Washington at Yorktown in 1781.

My maternal great-great grandmother was Dr. Harriet John, the first "she-doctor" in the State of Ohio. She was born about the time the Treaty of Paris was being signed in 1783, closing the Revolutionary War. Her mother was an herbal grannie, who dispensed her herbal extracts with an incantation. Therefore, we can classify her as a witch.

These four personalities started me going on my journey. Dr. John was brought into the world too soon. No woman could enter a Medical School in her day. Women's Lib. failed her. Therefore, she studied via the apprenticeship route.

TIME-BELT FOR REVOLUTION

Before we can nail ourselves down to this subject, we must jiggle the centuries for a count-down. I once heard a Professor of History state that we must go back to find the seeds of our Revolution in Runnymede, June 19, 1215, when King John signed the Magna Charta. That was a bit before Chris Columbus became nervous and sailed West. Our professor was disputed by a further expert, who claimed that our Revolutionary Period began in England, during the "Glorious Revolution" of 1688, when William and Mary crossed the Channel and became Co-rulers of England, kicking James II off the throne.

The Prologue of our Revolution thus contained King William's War, Queen Anne's War, King George's War, the French and Indian War. The latter was ended by the first Treaty of Paris in 1763, only 10 years before the Boston Tea Party, which apparently instigated our private war with England. The Epilogue was described by the War of 1812, which finally terminated with Andy Jackson's Battle of New Orleans, early in 1815.

Thus our Revolutionary Period could have lasted 127 years. If we boil it down from the Boston Tea Party to the second Treaty of Paris, we come up with a limited decade.

MEDICAL REVOLUTION

Some two years ago I addressed this group on the subject, "Revolutions in Medicine". Tonight we must offend several dozen heroes, and merely bow to Father Hippocrates in Greece, fifth Century B.C., in the "Golden Age of Medicine". A nod to Clarissimus Galen, second Century A.D., Roman physician, will suffice. He wrote so vehemently, talked so loud and recommended himself so highly, that medicine was stilted for some thirteen Centuries.

We now find a new fatherhood in the Renaissance. Will it be Phillipus Marcus Aurelius Theophrastus Bombastus Paracelsus von Hohenheim (1493-1541)? He has many critics, but at least he gave Galen an historical kick in the pants.

Let me present Andreas Vesalius (1514-1563). After five years of anatomical research at Padua, he gave to the world the most beautiful and immaculate text-book plates of the human body. With a little revving up here and there, they could be shoved before the modern Freshman medical

student, nominating studious success.

Then comes Ambroise Pare (1510-1590), the French battle surgeon, Old "Blood and Guts", who frowned upon the battle technique of pouring boiling oil into open wounds. He also stopped the process of controlling arterial bleeding by applying hot pitch to the wound. He invented the arterial forceps and secured the tip with a ligature. His old Professor, Dr. Etienne Gourmelen, took Pare to task for these two innovations. The battle surgeon replied, "While I was struggling on the field of battle, you were chattering in your chair."

We call Pare the father of our Revolutionary battle surgery.

And now, for physiology:

We must hie to England and meet Dr. William Harvey (1578-1657), who gave us the true circle of the blood. Before Harvey's time, many neo-experts almost, but not quite, completed the blood cycle. Harvey dreamed up the capillary bed, to connect the small arteries to the small veins. He had never seen a capillary. His public lecture in 1616 antedated Galileo's microscope by eight years. Galileo's telescope revealed the first three moons of Jupiter in 1610.

Harvey wrote out and published his theory in 1628, the year of baby Malphigi's birth. The babe grew up to become the greatest microscopist of his day and viewed the capillary exchange in the living tissue of the frog's lung a few years after Harvey's death. That - to me - is the most romantic episode in medical history.

While we are engaged in the subject of microscopes, let me leap across the Channel to the Low Countries. The year is now 1715.

The Old Pretender and Louis XIV are about to kick George I off the the English throne, but the death of Louis spoiled the fun.

Antonj van Leeuwenhoek (1632-1723) was the dapper draper of Delft. He had a good income as an interior decorator, but at night he entered his hobby room. There, downstairs, he fiddled with lense combinations, creating many microscopes. He was the first microscopist in the world to view the "dance of the microbes" under high power lense.

In 1715 Peter the Great, the Czar of all the Russias, came to Europe on an Educational Bender. "Van" took him by hand, leading down the stairs, where Peter was the first Czar to view the microscopic dance of the germs, becoming also the first royal person in the entire world to do so.

In Leyden the great Dr. Hermann Boerhaave (1668-1738) was the bouncing and appealing lecturer and coordinator of all acceptable medical knowledge. His foreign students were so captivated by this fascinating man, that they returned to their own countries and founded Medical Schools, retrieving and dispensing new scientific disciplines to their expectant classes.

Enters Peter the Great. He sits in Boerhaave's class-room and watches the exchange between master and subjects, Peter knew not a word of Dutch, but felt the urge to surge. Returning to St. Petersburg, he selected a dozen or so bright boys, granting them a crash course in the Dutch language and shipping them off to the "Wondrous William".

They eventually came back home and brought Western Medicine to the sluggish Slavs.

Boerhaave's predecessor in the Leyden chair of medicine was Pitcairn of Edinburgh. John Munro sired Munro Primus, Secundus and

Tertius, in 3 further generations, all professors of Anatomy at Edinburgh. Tertius taught a lad from Philadelphia, John Morgan (1735-1789). Morgan was so stirred up by the four Munros, by Pitcairn and Boerhaave, that he returned to Philadelphia and founded the first Medical School in Anglo-Saxon America. The year was 1765. New-York followed in 1768; Harvard: 1782; Dartmouth: 1798; Transylvania: 1799.

MEDICAL EDUCATION IN AMERICA

Morgan's inaugural address before students and faculty lasted for fifteen hours, split up in two days sessions. Mexico was ahead of him, having founded their Medical School in 1580. There was as great a gap between Mexico and Philadelphia as the time elapsed between Washington's first Inaugural address and Nixon's second Inaugural Address.

John was a blue-blood and eventually became "Physician-in-Chief" to the American Army.

His second Professor was William Shippen, (1736-1808) whose parlor bedroom was the abode of George Washington, when he visited Philadelphia. The maiden name of Benedict Arnold's wife was Shippen.

The third Professor was Benjamin Rush (1745-1813) a signer of the Declaration of Independence and - later - was appointed Treasurer of the U. S. Mint in 1797.

Morgan was dismissed by Congress in 1777. This wonderful man now became a bitter back-biter, surging his anger upon Shippen, lashing his tongue like a pizzle-whip, and resigning from the Medical School. He retired from Society. Later, when George Washington was about to become our first President, Dr. Benjamin

Rush made a horse and buggy call to the outskirts of Philadelphia. There, in a tumble-down shack, presided over by a slattern washer-woman, in a disheveled bed surrounded by manuscripts, books, notes and pencils - lay John Morgan thoroughly dead.

It seems terrible to relate this sad circumstance to you, but I must remind you that many great men have died in dire distress.

However, I salute John Morgan. He trained many of our regimental surgeons, who served in the Revolutionary War. And what is his heritage today? I nominate 115 Medical Schools on the docket and seven more on the drawing boards.

Dr. Benjamin Rush rose to the position of Chief Medical Consultant to the Continental Army.

He and others rather accurately described many disease entities occurring in epidemics, including the Great Pox (Syphilis), Small Pox, Measles, Scarlet Fever, Yellow Fever, Chicken Pox, Tuberculosis, Cholera, Typhoid Fever and Typhus. The latter two were not actually separated until 1837.

Rush claimed a great cure for yellow fever. He blamed it upon emanations from rotting garbage in the streets. Said he: "I have cured hundreds of cases with the lancet and calomel!" The mosquito had not yet entered the picture.

A cartoon story regarding Benjamin Rush goes like this: "After the war a reporter arrives from London. Dr. Rush, said he, your fame has reached England. What are the great inspirations in your medical life? Rush replied, Write this down: I bleed 'em; I purge 'em and I puke 'em. The youth wrote to his editor: There three famous and beneficent modes will soon depopulate the human race

Rush published the first text-book in America on Psychiatry and advocated humane treatment of the insane. He related apical abscesses to arthritis.

In spite of the bleedings and purgings, he arose as a great figure of a man, and Rush Medical School in the Chicago area is to his honor today. Rush listed the deadly sins as slavery, tobacco and alcohol.

THE BREEDING GROUND

Now, how did we become exposed to the discipline of Medicine before 1765? There were several sources of knowledge or neo-knowledge.

The herbal grannie was the only bit of wisdom in some villages, and she only hit the jack-pot once in 500 times. Her poultice for boils consisted of the chopped bulb of the spatter-dock (yellow cow lily), boiled and placed within a cloth, warm and moist, to "draw the head". The results were good.

"Squaw Medicine" was practiced in the back-woods.

Ships' Surgeons and English regimental Surgeons offered their bit in spare moments.

Our first M.D's were immigrant doctors. They stepped off the ship with their bed-roll under one arm, and their sheep-skin under the other.

Consider some of their names:

Dr. Cadwallader Colden,
Dr. William Douglas,
Dr. John Moultrie, the Elder,
Dr. Alexander Garden.

Later we meet a Dr. Cadwallader Evans, and two pastor doctors, Gershom Bulkeley and Jared Eliot.

The Pastor Doctor must needs take time for meditation before the Wednesday evening prayer service and quite a bit of Saturday, in preparing two sermons for Sunday.

Also, Sunday afternoons were gobbled up by the parishioners, coming to call.

The Pastor-Doctor made medical house-calls, praying by the bed-side before the laying on of hands. If he failed in his medical administrations, he gained by preaching the funeral service. There, he could state, "The dear brother's passing is the will of God." That made him feel better and gave security to the family. Some of the mourners held tongue in cheek.

The immigrant doctors trained apprentices, who became the elder regimental surgeons in the Revolutionary War. The apprentices of the apprentices were the junior officers.

APPRENTICESHIP TRAINING

Since the apprenticed doctors were so vital to the welfare of the wounded, let us take a moment to ascertain how they got that way.

The seasoned Veteran and the blushing boy had to get together. If the lad's father were well-to-do, a tuition fee was charged. If not, the youngster simply moved in, bag and baggage, and money was out of the picture.

On Saturday nights the doctor might lend him the horse and buggy to squire a damsel to a church sociable. There for a shilling both could be served a piece of hickory-nut cake, smothered with fruit snow. (Crushed fruit, beat up in whipped cream).

The boy looked after the doctor's yard, keeping it trim, especially at the side entrance to the office. He scrubbed the porch and beat the carpets.

In the rear was a goodly sized stable, containing two or three horses and a pony for the kids. There were at least two buggies, a pony cart of wicker, a sleigh and a surrey for family rides. The

apprentice arose in early dawn, watered, fed and groomed the horses; soaped and waxed harness and saddles; cleaned out the stables and then sneaked to the summer kitchen. There he shed his horsey-smelling clothes; dived through a door to his quarters and took an ice-cold sponge bath from a basin of water. Then he dressed for the day.

He swept out the Doctor's office; kept the Doctor's books and ran the little pharmacy. He assisted the Doctor with his patients. When the going became rough, and two deliveries were due at opposite ends of the township, the Doctor drove to one, and the apprentice took the other.

When did it all end? One fine day, two or three years later, the Doctor said, "My boy, you know as much as I do." He then wrote a letter to the Colonial Medical Society, recommending his charge to the practice of Medicine. But there was no Colonial Medical Society until Boston initiated the Venture in 1735. Before that, the young Doctor accepted the letter, and on that strength began his practice.

In Maine there was a famous case, where the apprentice simply lingered on. When the Doctor died, his widow became the house-mother. When the bride arrived, she found a mature shoulder to lean on. When the children arrived, they had a built-in baby sitter. The widow even assisted the new physician, until his apprentice arrived. There was never a "letter". The young man just kept at his job and matured with the years, growing out of apprenticeship on his own.

Dr. John Moultrie, the Elder, set a fine pattern at apprenticeship schooling. Many men did not complete either their apprenticeship training or their medical school curriculum, but were called "Doctors" because they called

themselves "Doctors". Quacks also abounded.

MEDICAL PUBLICATIONS

The first American Medical Text was published in 1708 by Culpepper, and its title read, "The English Physician". Culpepper felt so close to mother England, that the word "American" never entered his mind. The text was good for its day. It listed formularies and compendia and gave testimonials. A physician quoted, "I have tried this modality and recommend it: 32 lived and 18 died." You say, "Horrors!" Let me ask you, if a heart transplant surgeon today could list 64% of his patients alive after five years, would he hit a world record? Yes, indeed, a thousand times.

Then came "Medical Transactions", which began by fits and starts in 1714 and 1716. The Reverend Cotton Mather was a "Nader Raider" in his day and in 1721 wrote up "Ingrafting" in the Transactions, a means of securing immunity to Smallpox by inoculation of pus from mild cases. There was no cowpox technique until Edward Jenner (1749-1823) applied it in England in 1796. Our Revolutionary War was fought with bullets and ingrafting.

Cotton Mather was like Sir Francis Bacon Chancellor to James I of England. Neither was a scientist, but they both poked the scientists in the ribs and "rang the bells that called the wits together."

Ingrafting reached London in 1717, described in a letter written by Lady Mary Wortley Montagu, wife of England's Minister to Turkey. Lady Mary was walking down the main drag in Constantinople one day, and took a short-cut through the park. There under a palm tree sat an old perfume saleslady, performing an extra-

curricular duty. From a half nut-shell, full of pus, that she had raked off from pustules of mild small pox cases, she inoculated the passers-by, for a small coin in payment. The theory called for "mild pus" to create "mild case". However, at times the virus became a Dr. Jeckyl, and hemorrhagic smallpox and death were the results. Nonetheless, more good was recorded than disaster.

Lady Mary wrote that she hoped the Doctors in London would become less selfish in depleting their fees for the good of humanity.

England was slow to react. The news spread to America, and, via Rev. Mather's probing, Dr. Zabdiel Boylston inoculated his first patient in 1721. By 1722 the Royal grandchildren of George I followed suit. The word "Vaccination" comes from "Vacca", the cow. Ingrafting infers "human" as the source.

In 1735 "Lead Poisoning" was reported in the Transactions by Dr. Thomas Cadwallader. The lead pipes of the rum stills were eliminated, and prevention was thus accomplished in those days, where we fail in these modern times. Old lead paint, in inner city mansions, now assigned to the ghetto, becomes deadly to the chewing and crawling babies. We suffer from the inertia of the dollar sign, the inertia of the landlord, the inertia of the parents, and the ferocity of the kids. What is needed are two things: A modern Dr. Thomas Cadwallader and ten billion dollars. (Cadwallader is an old seventh Century Welch name, meaning "Bottle leader".)

Scarlet Fever was first described by Dr. William Douglas in 1736. He was opposed to ingrafting, stating that Smallpox was a righteous wrath from God, punishing the wicked human race. Said he, "I would rather die from the fire of God than survive by the

benificence of the human hand." He had his wish and died of Smallpox in 1752.

Lionel Chambers reported on Tetanus in 1754. His essay greatly influenced limb amputation in the Revolutionary War, since the mysterious danger to life could only be eliminated by removal of the mangled member. See "Hospitals."

Our first Surgical Textbook in America was written by John Jones in 1775 the year that Washington took command of the Army. This book became the Bible of the army's treatment of wounds and fractures. It was 120 years before x-ray was introduced by Roentgen. Therefore, the fracture had to be reduced by the sight and the feel. A 60% reduction was good, since Nature would heal the opposing bone ends, and Nature would round off the bumps.

Techniques of amputation were followed by field surgeons. Elbow flaps and extra Knee skin were preserved to cover fat and muscle bundles and avoid painful stumps. Peg legs could then be worn, and a living could be earned by the returned soldier.

Our first Pharmacopoeia was published by William Brown in 1778, when the war was half over. At least the Doctors began to know their limits, even though many traditional "cures" were listed.

The Medical Repository issued its first number in 1797. Eleven other medical journals appeared upon the scene by the time that George III died in 1820.

HOSPITALS

Pest houses first appeared in Boston in 1717, the year of Lady Montagu's Constantinople letter on ingrafting. Philadelphia followed in 1742 - and Charleston, S.C. by 1752 - and New York by 1757.

As ugly as it seems the pest house was the fetus of the future

hospital. A pest house was not created for the benefit of the patient but it "put him away" for the protection of the public, sort of a miniature leper colony, "unclean" and all that.

My own experience in early March 1917, when I was a High School teacher in Illinois, brought out the notion of the Revolutionary War pest house. Self-diagnosis of Smallpox was frowned upon by the Doctor. He finally yielded. To the pest house we drove, out in the country, next to the cemetery. It was an unpainted shack, 10' x 14', possessed with dirty sheets and soiled dishes. Running a temperature of 105.5, I was my own nurse, cook and housekeeper. There was a gasolene stove for cooking and no fuel. A coal stove for heating nudged an empty bin. There was no food, no soap, no linen, and the nearest water was from a faucet in the cemetery, 500 feet away. Bathroom, telephone, electric lights - all were zero in listing. The kerosene lamp was empty. The only items missing of 1776 vintage were whale oil lamps and a wood pile.

With quick connections to the Governor of Illinois, a photographer, a reporter - and the President of the Women's Club, rapid actions followed. Editorials, supplies and a new Isolation Hospital on the drawing board - all began to pop. When I recovered, my shack was sold at public auction for \$25.00. The experience of 1776 in 1917 was a contribution to Public Health - and was all to the good.

Hospitals for the chronically ill ("poor houses") first appeared in Charleston, S.C. about 1738 and gradually worked their way north.

Our first general hospital was constructed in Philadelphia by Thomas Bond in 1752. Samuel Bard followed in New York, being

commissioned in 1771, but no patient was admitted until 1791.

The first public mental hospital opened its doors in Williamsburg, Va. in 1773.

Military Field Hospitals were Dispensaries on the move. A fractured wrist could be set without requiring a bed assignment. Civilian dispensaries did not appear as such until Philadelphia opened its doors in 1785 by Benjamin Rush. New York followed in 1791.

MILITARY HOSPITALS

A first aid quickie in no-man's land consisted of a crawling buddie, who tore a piece of shirt, fashioning a tourniquet by twisting a stick, to allay hemorrhage. After the shooting quieted down, the wounded man could be dragged or carried to a cow pasture in the rear, where a regimental surgeon, with the assistance of a medical orderly, could perform an amputation then and there. Besides Tetanus there was the danger of gas gangrene, plus septicemia. The surgeon saved lives by eliminating three causes of death. Corn whiskey, if available, was splashed on the wound, the instruments, and possibly on the surgeon's hands. Chemotherapy and antibiotics were reserved for the 20th Century.

Oliver W. Holmes did not tell us to wash our hands until 1843. Louis Pasteur gave us the principle of Bacteriology in the mid 19th Century, followed next by Lord Lister's aseptic surgery. The Revolutionary War surgeon was on his own, without these future coaches to aid him. Nerve-grafting must wait for Karl Huber in Ann Arbor, Michigan, who initiated the technique in 1917.

Thus, a field hospital could be a cow pasture, or a great lady's parlor, or a log school-house, or a log cabin, or a church, or even a warehouse.

The most definitive military hospital was located in Boston, under the tutelage of John Warren, the father of the Dr. John C. Warren, Professor of Surgery, Harvard University. The latter performed the first published surgical operation under ether anaesthesia in the ether dome, Mass. General Hospital October 16, 1846. This convenience and far-flung technique was denied our patients, wounded by British bullets.

HOME-GROWN DOCTORS' WHO STUDIED ABROAD

John Moultrie, the younger, was our first youth, of this soil, to study abroad. Beginning in 1740 he was followed by 40 others, lasting until after the Treaty of Paris in 1783. They visited Universities in London, Edinburgh, Leyden and Paris.

This list must not forget Morgan, Shippen and Rush.

The "cream of the crop" came home to us and either taught apprentices in their offices - or lectured in Medical Schools.

Our equivalent to Morgan in London was John Hunter, private physician to George III and Surgeon-General to the English army. Hence was he our worst enemy? Not so. John Hunter raised up surgery from a lowly trade to a lofty profession. Therefore, he was our dearest medical friend. Also, he was the mentor and teacher to Ed. Jenner of vaccination fame.

AFTERMATH

And so, our boys came hobbling home on their peg legs.

Medical prescriptions in the army consisted of fever bark powder for Malaria; Joe Pye weed extract to produce sweating in pneumonia; purges and blood letting. Digitalis was not promoted from the grannie to the Doctor by Dr. Withering of England until 1783, the year that

terminated the war. Before digitalis, the heart was "aided" by the purple myrtle, ironweed, the pendant red berries of Lily-of-the-Valley - and the blue squill. In my sophomore year at the University of Michigan Medical School, Cushney and Edmunds said in Chapter VII of their text on Pharmacology: "Digitalis is the drug par excellence". The last paragraph

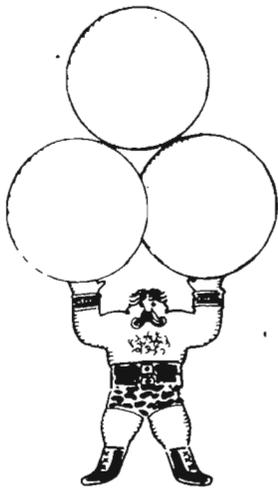
quoted: "When digitalis fails don't forget the squill." Now, I feel we have forgotten it.

Tincture of opium, belladonna, lobelia and numerous herb extracts and alkaloids were prescribed.

The War physicians were compelled to elicit chest sounds by applying the ear to the naked skin. No Stethoscope was at hand until

Rene Theophile Hyacinthe Laennec of Paris (1781-1826) - made the first move in 1816. Blood pressure was a variable in the mind of the Doctor. Our first accurate clinical sphygmomanometer was presented by Von Basch in 1880.

The peg legs returned to the farms, and production began. Sons were sired, and good deeds were accomplished in the new full life.



STUART THAYER TO BRING CIRCUS HISTORY TO OCT 24 MEETING

Stuart Thayer, who will speak to the Society at the October meeting on "Circus History", has a book on the subject in preparation. Professionally, Mr. Thayer is a partner in the Thayer-Innis Insurance Agency.

History has been an interest of Mr. Thayer's for many years. He is a member of the Society. But his special field is the circus. He is one of a small group of circus enthusiasts who have organized a national group devoted to recording and preserving the history of circuses.

Recently Mr. Thayer was appointed to the Washtenaw County Historic District Commission. He resides in Ann Arbor Township on Sumac Lane.

ENOUGH FOR ONE BED

Emigration to the state of Michigan was so great during the years 1835-36 that every house was filled every night with travelers wanting lodging. Every traveler there at the time will remember the difficulty of obtaining a bed in the hotels, even if he had two or three strange bedfellows.

The Reverend Hosea Brown, an eccentric Methodist Minister stopped one night at one of the hotels in Ann Arbor and inquired if he could have a room to himself. The bar-keeper told him he

could, unless they should be so full as to render it necessary to put another person in with him. At an early hour the reverend gentleman went to his room, locked the door and soon retired to his bed. Along towards midnight he was roused from his slumbers by a loud knocking on his door.

"Hello you there".

"What do you want now?" (Particular emphasis on the last word.)

"You must take another lodger, Sir, in with you," said the landlord.

"What! Another yet?"

"Why yes-there is only one in

here, is there?"

"One! Why here is Mr. Brown, a methodist preacher, and myself already, and I should think that enough for one bed even in Michigan".

The landlord seemed to think so too, and left the trio to their repose.

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