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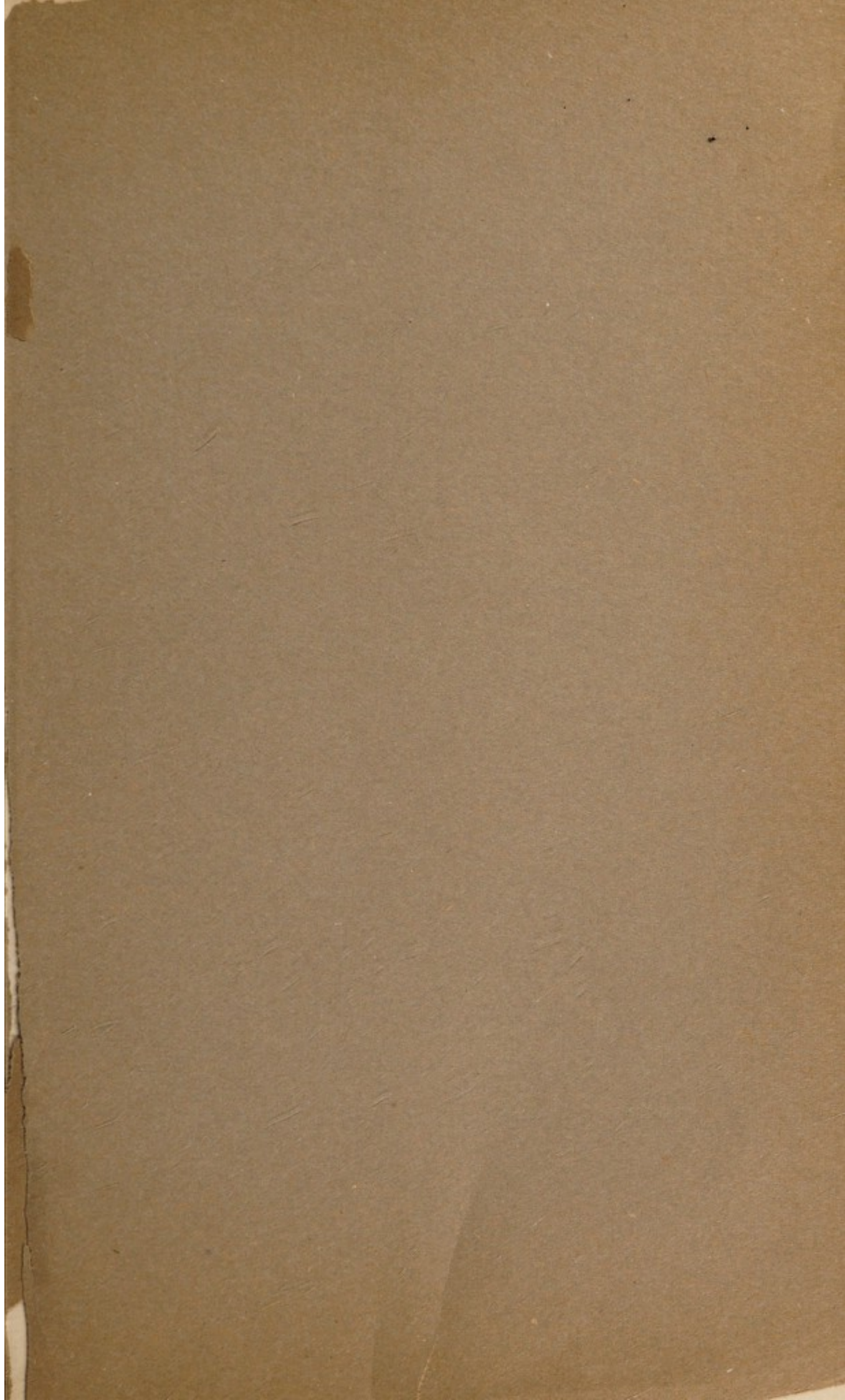
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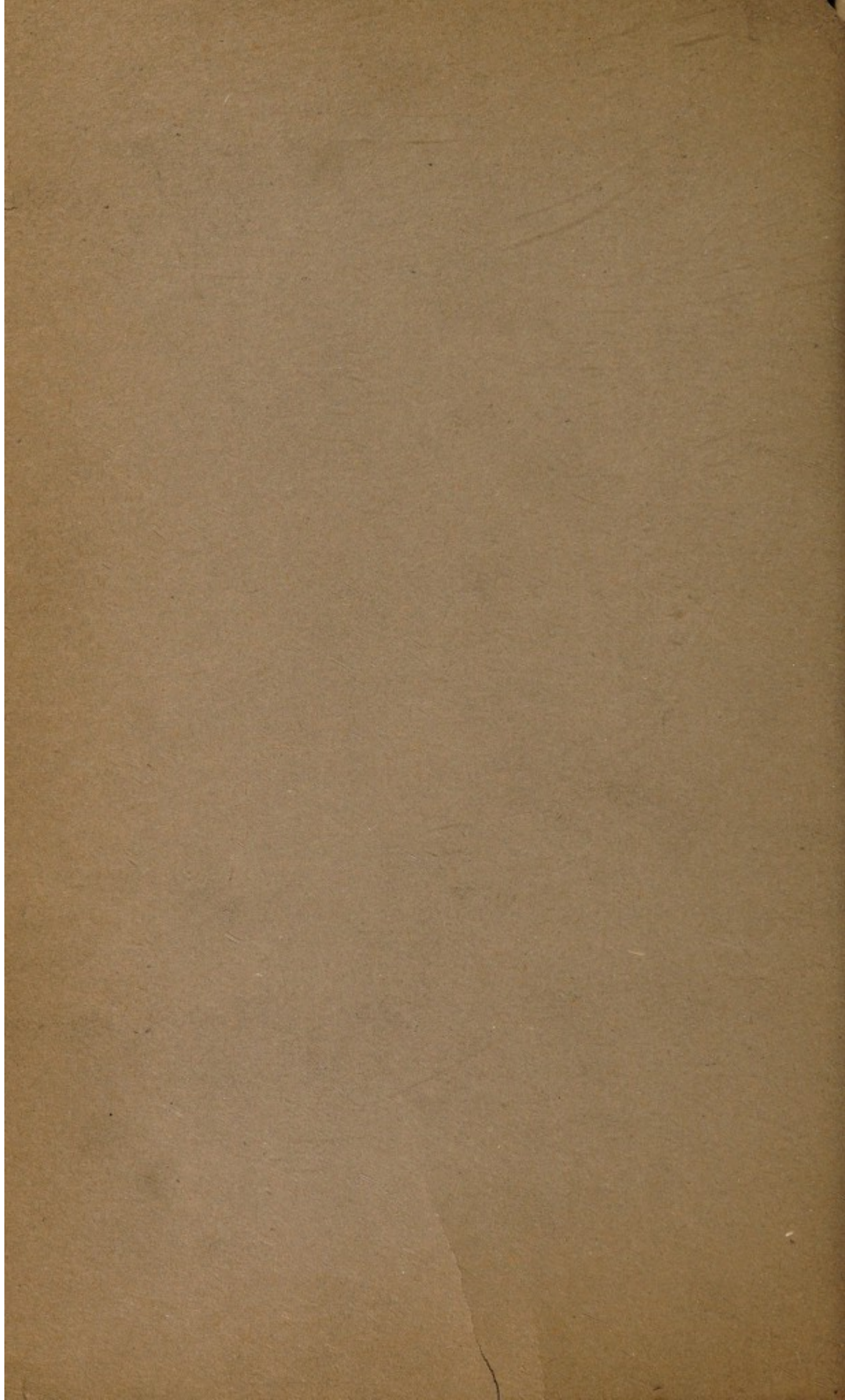
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SOME PERSONAL RECOLLECTIONS OF THE CIVIL WAR.¹

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THE story of the part played in the Civil War by our profession is nowhere told in a satisfactory manner. Histories of regiments, war biographies from private to general, the countless volumes of the rebellion record, relate the tale of battles lost or won, and of the military glory commemorated by monuments or rewarded by pensions. Except as to our technical story we alone are unrecorded.

I know of no book which tells the personal life of a war surgeon; what he did day by day on the field or in the hospital. I can imagine that such a book might be very interesting, and there are men in our own midst who could tell the story, and tell it well. It would have its romance, its pathos, its humor.

Surgeon Letterman left a volume giving an account of service with the Potomac army. It is a briefly told story of the difficulties of the army surgeon and what was required of him in the field.

There are men here to-night of whose careers as brilliant and courageous war surgeons most of you know nothing. They are quiet gentlemen who no longer talk war, and it might be well for some of you to read with what respect and admiration the surgeon-in-chief of the Potomac army speaks of the competence of William Thomson and John H. Brinton.

The other book on the history of the war is in the form of an official history of the medical department of the United States

¹ Read April 5, 1905.

Army by Harvey E. Brown, and was published by the surgeon-general's office in 1873, but has been long out of print. The portion which deals with the rebellion is not more than thirty-five or forty pages. It has the dry, technical quality of official records and does no justice to a subject which should tempt some abler pen.

When on April 12, 1861, we heard with shame and anger, such as few here can realize, that the flag had been fired on at Fort Sumter, the medical department of the army consisted of 30 surgeons and 83 assistants. Of these 24 resigned to take part in the rebellion and 3 were dismissed for disloyalty; 13 were natives of the South, but stood true to the flag. Two surgeon-generals, owing to death or resignation, succeeded one another rapidly, and finally, soon after the beginning of the war, it was found necessary, owing to age, to permit the surgeon-general, who had difficulty in fulfilling the duties of that office, to retire. He was an old army surgeon; had done excellent work, but was quite unfitted to meet the task which fell upon a totally unprepared nation. Owing largely to the great pressure made by the sanitary commission and the profession, his place was filled by lifting from the rank of an assistant surgeon Dr. William A. Hammond. He fell at once into an enormous business spreading over great spaces of country, increasing in perplexity, and making fresh demands every week, and at last so large that there was expended for ice alone in one year more than the whole amount of money which in peace sufficed for the entire medical service of the army. The organization also demanded complete revision. The surgeons of volunteers had to learn their surgery at bitter cost to many a wounded man. The regular army surgeons were little used to seeing grave wounds, and, as the surgeon-general said, there was not an aspect of his work which was not foggy with embarrassments.

Whatever else may be thought or said of William A. Hammond, nothing is more sure to me than that he duly saw and grasped a great opportunity; that he served his country as few could have done; that he created the Army Medical Museum; that he saw the

need for and advised the creation of the Army Medical School; that he pointed out the men who were to direct the Army Museum and the Army Library. Until the end of his army career he was the unfailing friend of scientific study, and created special hospitals for diseases of the heart, lungs, and neural maladies. For this latter I and others have especially to thank him, and personally I owe him thanks for chances which modified valuably my entire medical life.

The great need for medical and surgical help caused the creation of hospitals in and about our great cities. This subject might occupy an hour, but suffice it to say that there were around this city upward of 25,000 beds at one time in hospitals constructed and admirably managed by men who were in many cases fresh from civil life. As concerns this, and all other departments of the service, it may be said that at the end of the third year of the war the service had never been equalled. I doubt a little, even with what we hear now, whether it has ever yet been excelled. To take medical charge of the vast army put into the field two new grades were created, that of brigade surgeon and medical cadet. In the latter rank were Collins Warren, John Curtis, Professor Tyson, and among others my brother Edward, who died in service a victim to duty and a prey to diphtheria in the Douglass Hospital at Washington.

It became also necessary to provide additional help in the hospital service, and this was supplied by employing what were known as acting assistant surgeons. They served at home, but were liable to be called into duty in the field. Except in the case of Antietam and Gettysburg this was rare. Among these were Agnew, Gross, Morton, Stille, Da Costa, Harry Hart and many more.

Before leaving the subject of the personnel of the war I return for a moment to the service of Surgeon-General Hammond. I have spoken of his great usefulness, of his large grasp of the immense business of the war. He had, however, defects which lessened his influence. An impulsive temperament and great self-confidence led him into inconsiderate action, as when, seeing

that the Western volunteer surgeons were using mercury in excess, the surgeon-general issued an order stopping all use of calomel.

It was, of course, disobeyed or disregarded.

A word more as to the position of the army surgeon. He fired no shot, but was often forced to operate under fire, was greatly exposed, and, as statistics show, suffered seriously. I am indebted to the surgeon-general of the army for the following statement of casualties in the medical corps:

MARCH 31, 1905.

In reply to your note to the Surgeon-general, I find that of the medical officers of the Union Army during the War of Secession 41 were killed, 83 wounded, of whom 10 died: 4 died in prison, and 281 of disease incident to active service.

I regret that we have no statistics of the losses among medical officers in the Confederate Service.

Very truly yours,

J. R. KEAN.

In Brown's *Medical Notes* the matter of exchange of non-combatant officers is fairly well dealt with. It was an irregular business. In some cases they were returned, and in others were held by the enemy. Some of them were as long as a year in rebel prisons. In many cases surgeons on both sides remained with their own wounded after defeat. Toward the close of the war I am under the impression that neither side held the surgeons who thus elected to become prisoners, but there was no constant rule of action.

I remember that when I inspected Fort Delaware I found there over forty surgeons, many of whom had been classmates of my own.

My own service in the war was in the grade of contract surgeon. I was only once called into the field, and that was after the third day of the Gettysburg fight.

One of the earliest hospitals established here was in the old armory building at Sixteenth and Filbert. I there began my first hospital service with, if I remember rightly, Dr. Breed as the head of the hospital. It may amuse you to know that the

only account of that hospital is to be found in my first novel, *In War Time*.

I began here to take interest in cases of nervous diseases, which, at that time, nobody desired to keep for the reason that they were so little understood and so unsatisfactory in their results. I was therefore allowed to accept these cases from other wards, transferring in return ordinary types of disease. When this became known to the surgeon-general he was at once interested and set aside a larger ward for neural maladies. When this overflowed with cases we took over the building known as Moyamensing Hall, on Christian Street. This was opened May 5, 1862, and closed October 29, 1864. Dr. Morehouse and Dr. Keen, then acting assistant surgeons, were ordered hither, and Dr. I. P. Reese, U. S. A., was placed at the head of the hospital. It was entirely devoted to nervous diseases, and very soon also to injuries of nerves.

Again the space proving insufficient, a suburban estate on Turner's Lane was rented in August, 1862, and pavilions built for 400 men. One was assigned to Da Costa, and afforded him a chance for a classical study of exhausted hearts and for other able papers. With Drs. Morehouse, Wm. W. Keen, and Surgeon Alden, as surgeon in chief, and by a special order relieved of much of the time-killing, red-tape business, we set to work. Both Morehouse and I had at that time increasing general practice, but a morning visit to the hospital disposed of the routine work, and about 3 P.M. or later we went back. Keen, Morehouse, and I worked on at note-taking often as late as 12 or 1 at night, and when we got through walked home, talking over our cases. Usually the work took four or five hours, and we did it all in person. The late hours came two or three times a week, and usually followed an inflow of cases of injuries to nerves after some serious battle.

I have worked with many men since, but never with men who took more delight to repay opportunity with labor. The opportunity was indeed unique, and we knew it. The cases were of amazing interest. Here at one time were eighty epileptics, and every kind of nerve wound, palsies, choreas, stump disorders. I

sometimes wonder how we stood it. If urgent calls took us back into town, we returned to complete the work. In fact it was exciting in its constancy of novel interests.

Thousands of pages of notes were taken. There were many operations and frequent consultations. About midway we planned the ultimate essays which were to record our work. Of these you know. There was a small book on neural injuries full of novelty, a short essay on reflex palsies, etc. One of the most notable was Keen's essay on malingering. Others on epilepsy muscular disorders, and on acute exhaustion were never written because of accidental destruction of notes by fire. The full notes on cases of acute exhaustion would have entirely anticipated the delineation of the condition we now accept as neurasthenia. Some of our conclusions in regard to these subjects found a place in my later volume.

In this hospital massage was first used to restore action to limbs in which healing nerve wounds left the muscles palsied, or for the rigidity of splinted cases.

Here atropine was first employed hypodermically for muscular spasms, and here first the combination of atropine and morphine was used, and the results recorded in a paper. Our studies of the influence of nerve lesions on nutrition and temperature on wounds of the sympathetic and reflex palsies are now a part of common medical knowledge, but were at that time brilliantly fresh.

Added interest came from the fact that the victims were men worn out from fever, dysentery, and long marches; hence was it that some of the symptomatic expressions have never been seen since in like intensity. The chapters on the neuralgias of wounds and causalgia were received in England with sharp critical doubts as reporting cases before unheard; and so, indeed, they were. In one year 40,000 injections of morphine were used, but time lacks to describe cases of neuralgia of such intensity that the pain was increased by the vibrations of band music, the rustle of dry paper handled. I have seen men pour water into their boots to lessen the vibration which the friction in walking caused. No,

I have encountered no such cases since. And, too, we had hospital gangrene. I leave Dr. Keen to speak of this appalling ravage.

I have kept you long enough and said not half I had in mind. It would, however, be interesting to entertain you with the matter of malingering, but this, too, I leave to Dr. Keen.

I permit myself to say that a few years ago, with the utmost difficulty, Dr. John K. Mitchell re-examined all the survivors of nerve wounds whose cases were detailed in our papers or in my later work, and who could be found for personal study. This unusual and difficult task added a valuable chapter to our knowledge of nerve injuries.

When in June, 1865, our ward work was at an end, the new surgeon-general ordered that all of our notes be turned over to the department. As the unused cases were of value to us alone, we were much troubled. At once we copied or employed persons to copy this whole mass of records, thousands of pages, and within a fortnight turned over to the surgeon-general these original case-books.

Long afterward Dr. Da Costa lamented to me that he had obeyed the order, and somewhere (pigeon-holed) are many of the valuable observations of that brilliant student of disease. We were told then that we had been insubordinate, but we were out of service, and I remain pleased that for once in my life as an army surgeon I disobeyed my superior.

A word more to close this too disconnected effort to revive memories of a great contest. It were desirable that next winter we gather here some confederate surgeons to tell us the sad story of the surgery and medicine of war under less propitious circumstances.

The war so trained vast numbers of country doctors that for a long time the cases for grave operations ceased to be sent to the cities as had been usual. The constant mingling of men of high medical culture with the less educated had also value, and the general influence of the war on our art was, in this and other ways, of great service.

We had served faithfully as great a cause as earth has known. We had built novel hospitals, organized such an ambulance service as had never before been seen, contributed numberless essays on disease and wounds, and then passed again into private life, the unremembered, unrewarded servants of duty.

The history of this College is to be credited with Fellows who created, organized, and conducted the Medical Museum and Medical Library in Washington, who made the unequalled catalogue, constructed many of the great pavilion hospitals, planned and carried out the vast volumes of the medical history of the war, and who did more for the general scientific literature of the war than all the rest of the army medical service.

The total number of living Fellows of the College of Physicians on the list dated 1864 was 174. A number of these (130) were connected in one way or another with the service of the army or navy during the four years of that bloody struggle. These gentlemen were either regular surgeons, assistant surgeons, or acting assistant surgeons.

Certainly this is a record of honor of which the College may well be proud.