

Gebhard (L.P.)

ADDRESS

BEFORE THE

Philadelphia County Medical Society.

DELIVERED

Box 8.

FEBRUARY 8, 1865,

BY

LEWIS P. GEBHARD, M.D.,

AT THE CLOSE OF HIS OFFICIAL TERM AS PRESIDENT.

PUBLISHED BY ORDER OF THE SOCIETY.

PHILADELPHIA:  
COLLINS, PRINTER, 705 JAYNE STREET.  
1865.



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*Presented by  
Henry March,*

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The Secretary of the Executive Committee of the  
 Board of Directors of the American Society for  
 the Improvement of the Condition of the  
 Colored People, New York, N. Y., has the  
 honor to acknowledge the receipt of your  
 letter of the 10th inst. and to inform you  
 that the same has been forwarded to the  
 proper authorities for their consideration.  
 It is the policy of the Society to receive  
 and to act upon all communications from  
 individuals and organizations interested  
 in the welfare of the colored people.  
 The Board of Directors will meet on the  
 15th inst. and will consider the matter  
 at that time. You will be notified of  
 the result of their action. Very  
 respectfully,  
 Secretary

## ADDRESS.

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FELLOW-MEMBERS OF THE PHILADELPHIA COUNTY MEDICAL SOCIETY:—

IN retiring from my former position of Presiding Officer of this Society, it is due from me to its members to express my gratitude for the lenity and forbearance they have exercised towards me, while imperfectly performing the duties appertaining to said office. Another year has passed away, and we have been again permitted by a kind and beneficent Providence to meet together under the most favorable circumstances; but, while we have been surrounded by so many mercies and favors, we are, nevertheless, called upon to mourn the loss of a very valuable member of this Society in the death of ROBERT P. THOMAS, who was elected, one year ago, one of the Vice-Presidents of this Society. A man of talent and great moral worth. He was endowed by Providence with no ordinary mind, which, by industry and due application, was so cultivated as to make him shine as a highly conspicuous member of the profession. This, combined with a social and gentlemanly deportment, together with the daily exhibition of just, honorable, and Christian principles in all his walks of life, endeared him to his medical associates, and all with whom he came in contact. He left an interesting family to mourn his loss, and a large community to sympathize with them, more particularly the members of this Society, among whom he was prominent and distinguished, and who, by frequent intercourse with him, were best calculated properly to appreciate his worth.

Some of my medical friends suggested as the subject of this address, Reminiscences of Facts and Incidents as they occurred within my own knowledge full half a century ago. Your indulgence is requested while imperfectly sketching some of them. You will readily perceive that, from necessity, egotism must, to some extent, enter into the narrative.

In the year 1809, fifty-six years ago, he who now addresses you, residing in the State of New York, after having passed through a preliminary course of study, preparatory to entering upon the study of some profession, selected that of the practice of medicine, which he commenced in the office of Dr. Bay in the village of Claverack, four miles east of the city of Hudson. Dr. B. is still living, in the city of Albany, in the ninety-third year of his age. The student continued in the office of Dr. B. until October, 1811, immediately after which he arrived in the city of Philadelphia to attend a course of lectures at the University of Pennsylvania. He passed by the city of his native State, preferring to receive instructions in an institution so justly popular—an institution more renowned than any other in this country, and, no doubt, fully equal to any in the world. The Faculty was composed of six professors, Dr. Benjamin Rush, of the Institutes and Practice of Medicine; Dr. Benjamin Smith Barton, of *Materia Medica*; Dr. Philip Syng Physick, of Surgery; Dr. John Redman Coxe, of Chemistry; Dr. Caspar Wistar, of Anatomy; and Dr. Thomas C. James, of Midwifery.

Dr. RUSH was pre-eminent as a lecturer, a man of great experience and close observation, the whole weight of which was thrown into his lectures, making them not only instructive, but highly interesting. His diction was fine, his observations pertinent, his voice euphonious, clear, and distinct, and his illustrations admirable. Taking all these endowments together, he might be considered the great lecturer of the age. Then his gentlemanly deportment and urbanity of manners added a lustre to all his other qualifications. His great hobby was the unity of disease.

Dr. BARTON was talented as a lecturer on *materia medica*, but not so precise and methodical as he might have been in the arrangement of his lectures. The small scraps of paper on which he had written them, not unfrequently becoming deranged, he was compelled occasionally to give us a lecture from memory. This derangement did not apparently embarrass him in the least, as he always appeared prepared to give us an interesting lecture without the use of his notes. Possessing great facility in extemporizing, he was never at a loss in elucidating his subject. He was alto-

gether an instructive and interesting lecturer. He was a great admirer of the Brunonian system, as also of Dr. Brown, who originated it; always dwelling for an unusual length of time on the subject of opium. He was remarkable in some of his peculiarities.

Dr. WISTAR might be justly said to be master of his subject. His demonstrations of anatomy were highly satisfactory to the student. His voice, though a little inclined to be feminine, was clear and distinct. He had no hesitation whatever in elucidating his subject extemporaneously. He was very gentlemanly and mild in his demeanor, although easily excited, and much inclined to timidity. On one occasion, some maliciously disposed person posted a placard on the walls of the building announcing the probability of a negro mob making an immediate attack on the anatomical portion of the building, including the dissecting-rooms. The doctor entered the lecture-room, evincing the greatest perturbation of mind, trembling from head to foot. He dismissed the class instantly, with the particular request that not even any of the dissecting class should make their appearance near the premises for the next two or three days. No mob made its appearance, nor was there any symptom afterwards of any such intention; it was the natural timidity of the professor that excited such fearful apprehensions in his mind on that occasion. It was no uncommon thing at that time to have one subject on the tapis for several weeks during the winter season, the odor emanating from which was by no means agreeable to the Schneiderian membrane of the student, while the professor assured the class at the same time that he was not sensible of any unpleasant odor arising from it, although he was in such close proximity to it; it was fortunate for him that his sensibility was so defective on all such occasions. He was an interesting lecturer, and deservedly a highly popular one.

Dr. PHYSICK, the Professor of Surgery, was a man of very few words, fitly expressed, all practical, nothing theoretical about him. His voice was decidedly feminine, though distinct and audible to the farthest extremity of the lecture-room. His genius was mechanical, being particularly adapted to the improvement of surgical instruments which were necessary in performing surgical operations, which faculty, added to his superior judgment and skill

as an operator, matured by extensive experience, made him the great surgeon of the day, having attained to a celebrity unequalled by any other surgeon. His name was as a strong tower and as a magnet to draw hundreds and thousands around him to sit under his teachings and witness his operations.

Dr. JOHN REDMAN COXE, Professor of Chemistry, was a man of learning. Possessing a mind well stored with useful knowledge, some of which he presented to the world in his writings, but not possessing the facility of communicating it to others satisfactorily as a lecturer, was the principal cause of his not being classed as among the most popular of lecturers.

Dr. JAMES, the professor in the obstetrical chair, was mild, courteous, and gentlemanly. He was the personification of amiability, and of necessity could not be an energetic lecturer; but if he lacked energy, it was more than compensated by the beauty of his composition. His style was chaste, lucid, and comprehensive. He wielded a pen equal to the most able of his compeers.

The ages of the professors ranged between forty and sixty-seven years, Dr. Coxe being the youngest and Dr. Rush the eldest. In stature they varied but little from the medium size. The fashion of wearing cues still existed to some extent at that time—they were worn by the professors and by all gentlemen who had passed the meridian of life, and continued to be worn to the terminus of their earthly existence. Could I now place before you a diagram or a photographic representation so constructed as to depict in the liveliest colors all the countenances, the gestures, the personal appearance, and the peculiarities of that interesting group, together with the genius and talent manifested in the adaptation of each to the different spheres in which he was engaged, and such as now appears before my mental vision with all its freshness as if it had occurred but yesterday, methinks it could not fail in interesting and even delighting you all. But such pleasant impressions, unfortunately, are incapable of being transferred to any other being, and can only be enjoyed by those who witnessed them.

A distressing catastrophe occurred in December, 1811, in the burning of the Richmond Theatre, in which the lives of the Governor of Virginia, and of a sister of one of the students attending the lectures, were lost, as well as of some relatives and friends of

other students. Great excitement prevailed in our city for several days in consequence of it. A very large procession of students, and young men of the city who sympathized with them, to the number of one thousand, formed at the University in Ninth Street, and marched to the corner of Fourth and Pine Streets to hear a discourse from the Rev. Dr. Alexander, the pastor of that church. The text was "Weep with them that weep." It was truly a solemn occasion.

The lectures, as before stated, closed about the first of March every year. It was required of all the students who intended coming forward for graduation to write a thesis on some medical subject, upon which it was expected they would be examined by the professor into whose hands the thesis came, which generally was received by the professor who lectured on the subject contained in said thesis. The whole of March was generally occupied in the examination of students. The number who graduated on the first of April, 1813, the day of the commencement, was sixty, very few of whom are now living.

It may not be considered as entirely out of place here to advert to the manner in which these examinations were made at that time. The professors having received the theses, which were presented immediately after the lectures closed, made all due preparation for examination, and accordingly notified each student on what day and hour to appear before them for examination. At the time designated, the poor fellow was introduced into a large vacant room in the back part of the then University building, on Ninth Street below Market, precisely on the same spot on which the building now devoted to the literary department stands. When the proper time for examination arrived, the dean conducted the student into his new abode, the green box, and shut the door upon him. He stood there solitary; no eye beheld him, nor did he see the face of any one. In a few moments he heard the voice of one of his previous teachers interrogating him, to which he responded; questions were put and responses followed until the professor was satisfied *pro* or *con*. The professor of another branch interrogated him in a similar manner, to which he responded for weal or for woe. This was to some a fiery ordeal to pass through before attaining the object in view. After the interrogations were closed, instead of his fears being

allayed, they were greatly aggravated for the time being, for he well knew that the ballot was to be taken. He listened, and heard the dropping of the first ball; then another and another fell, until the whole six were cast. In this suspense he was left until, the dean having counted the balls, the door opened. If successful, the dean introduced him to the whole faculty as Doctor of Medicine, with whom he shook hands, they individually wishing him all the success in life he could possibly enjoy. This event constituted the happiest day of his life. The introduction being ended, he was requested to walk in the front apartment of the building, to affix his name as one of the successful candidates. If, on the contrary, success did not crown his former efforts, he silently and unobservedly passed through the back part of the building into Tenth Street, to elude the notice of his former friends, and was in all probability the occupant of the first stage for the place of his nativity. Fortunately such a state of things did not often occur; but when it did occur, it required no ingenuity to ferret out or no superior judgment to discern the cause of the failure: it was simply that industry and perseverance, which can effect almost anything that is capable of being effected, were lost sight of and practically ignored—a circumstance to which are due all the failures in all the avocations of life, whether mechanical, commercial, or professional.

At the time of taking tickets for the full course of lectures it was customary to take a hospital ticket also, in order to have the privilege of attending twice a week or oftener during the time in which the two courses of lectures were delivered. This was justly considered, if properly improved, of great practical advantage to the student.

Although more than fifty years have passed away, very little change in the institution or its surroundings is perceptible at present to the casual observer, particularly as it relates to the size of the trees or the appearance of the building. There was then a whole vacant square of ground on the east, west, and south sides of it, belonging to the institution. The Almshouse then occupied the whole square from Tenth to Eleventh Streets, between Spruce and Pine Streets; several years after which it was removed to its present location over the Schuylkill. The County Prison was then located at the corner of Walnut and

Sixth Streets, extending to Prune Street, with Potter's Field opposite to it, now Washington Square. Walnut Street Prison, together with the prison in Arch Street above Broad for vagrants and untried prisoners, were removed to Moyamensing many years since, constituting what is now called the Moyamensing Prison.

As already mentioned, the first day of April was fixed upon as the day of the commencement, which was held at the hall in Fourth Street below Arch Street, accompanied by appropriate ceremonies, on which occasion each graduate was to receive his diploma, signed by all the faculty of medicine and also by the provost of the literary department of the University, Rev. Dr. Andrews. This last-named officer signed each diploma, but previous to the day of the commencement he passed away to that bourne from which no traveller returns. Dr. Rush, who was also present at the commencement, in perfect health, was also called away nineteen days after the commencement, aged sixty-seven years. The sixty graduates were divided among the six professors, and invited to dine with them on the day of graduation. The day of the consummation of all their earthly wishes—the goal which they had for so many years striven to reach, was attained, as well as all the honors emanating therefrom. As one of the recipients of these favors, it became necessary for me to return to my native place in the State of New York, and thence to Troy, where the commission of Assistant Surgeon was conferred upon me by a regiment then about to march to the northern frontier, to protect the State from the invasion of the enemy. There were then no railroads or steamboats in vogue. There was a line of stages, called the Swift Sure Line, which engaged to convey its passengers to New York, both safely and swiftly, in thirty hours, a great achievement in those days. The line started from Fourth Street and Appletree Alley every morning, reaching Summer-ville, New Jersey, that night, and New York the next day at noon. There were then two steamboats on the North River, that had just commenced running to Albany at the rate of four miles an hour, which was considered as a great improvement on former travelling, inasmuch as there was a great certainty of its accomplishment in a given period of time. The Hudson River was the great commercial thoroughfare from the city of New York to Albany, which was previously traversed by sailing vessels, being

entirely controlled by the winds and tides. If the north wind blew freshly, the voyage from Albany to the city of New York, 150 miles, could be made in a very short time; but if a calm or opposing wind prevailed, it might take a week or more to effect the object; hence the four miles an hour, as attained by steam, although very slow, was, by reason of its certainty, considered a great triumph at that time. It required at that rate thirty-six hours to go from New York to Albany by steam; it now requires only four hours to go the same distance by railroad. The present celerity is consequently nine times greater than the improvement by steamers in 1813. What mind then conceived the idea that the time was not far off when the distance which it required thirty six hours to traverse by the locomotion then existing, could be accomplished in four hours, without the hoof of an animal or the wheel of a vehicle touching the earth over which it passed, requiring not the equestrian, and scarcely the terrestrial, in its accomplishment?

Several years before the completion of the magnetic telegraph, in conversation with Mr. Morse, he stated to me that his brother and himself were engaged in maturing a plan, by which, through the medium of magnetic influence, a common wire could be made to communicate intelligence, even through unlimited space, quicker than the lightning flash. This was accomplished, and was justly considered the wonder of the world.

Less than eighteen months since, in conversation with the same individual, on the subject of the improvements that had been made in science and the arts within the last semi-centennial period, he stated it to be his firm conviction that, in the semi-centennial period just commenced, as great improvements would be made in the arts and sciences as in the last, and even, if possible, productive of more important results; among which was mentioned the introduction of heated air, instead of steam, as a propelling power, which he firmly believed was not only capable of, but actually would be effected, within the period above designated. He appears to be as confident of its success as he was of the magnetic telegraph in his earliest thoughts upon the subject. If the heated air could be thus effectively brought into operation, so as to take the place of steam, it would, in a humanitarian point of view, far excel in importance anything ever yet developed by the

genius of man. The genius of this gentleman is now engaged in fathoming out the deep recesses of this intricate subject. May the time be not far distant in which his investigations and success may be fully consummated. Other minds are engaged in investigating other subjects, so that we may expect a progressive movement in the arts and sciences on every hand, in all time to come, to the astonishment of the world.

While attending the lectures of 1812 and 1813, we were involved in a war with Great Britain; it was called the War of 1812. During this time, we frequently heard of our victories on the sea, and that, too, with a nation that was considered as the greatest maritime power on earth. We had a very small navy at the time, notwithstanding which, in combat with England, we showed our superiority in activity and nautical skill. In five engagements out of six on the sea, we were victorious. We were also successful on Lake Erie under Perry, and on Lake Champlain under McDonough—in both instances against superior forces. This demonstrated clearly our superiority as a maritime power. Upon investigation it was found that our success depended upon activity and skill. We fired three guns to their two throughout the whole of the engagements, besides aiming our guns with more precision, and consequently with more effect, which fully unravelled that which was at first thought to be a mystery. This event, by reason of England's inferiority, placed her in a position categorically as the second maritime power on the ocean. Her motto, "Britannia rules the wave," was no longer a just appellation when she thus lost her prestige. We humbled her pride in that in which she prided herself most. We plucked the laurel from her brow. Though in a small way, it was nevertheless conclusive and decisive. It then occurred to me, though young and inexperienced, that she would never again declare war against this country. Although in one sense her progeny, we nevertheless are constituted a new and highly revised, corrected, improved, and embellished *edition*, which will always hereafter cast the old one into the shade.

In the beginning of July, 1822, the bilious remittent fever made its appearance in the district of Spring Garden and in the adjoining country, extending along the Schuylkill for several miles above the city, and also prevailed to a great extent

throughout the Western and Southwestern States. The part of the then district of Spring Garden to which your attention is particularly directed at this time was situated between Seventh Street on the east, and Tenth Street on the west, Green Street on the north, and Vine Street on the south, containing about two thousand inhabitants. Directly north of Callowhill Street there was a stream of water called Pegg's Run, originating from a spring in the vicinity of Green and Broad Streets, running southeasterly, a very short distance above Callowhill Street, then emptying itself into the Delaware River. The inhabitants of the district, being principally victuallers or butchers, were in the constant habit of emptying their offal into the run, and also sinking barrels to contain the blood which accumulated for weeks together, in order to sell it to the sugar refiners, for the purpose of refining sugar, it being thought at that time an indispensable article for that purpose. By being so long kept, it necessarily became very offensive, and, together with the offals, rendered the atmosphere very obnoxious to the olfactories of those passing by or living in its vicinity. It was several years after this that the run was culverted over, forming what is called Willow Street, on which is now placed a double track of railroad running from the Delaware to the Schuylkill. This nuisance, however, was not the cause of the disease, as it had existed for many years without producing any disease whatever—the inhabitants of that region enjoying as good health as in any part of the city. The disease was produced not from animal, but from vegetable decomposition. The part of the district above Green Street was composed of lots of ground which had been dug out for the purpose of obtaining clay from which to manufacture bricks. These lots constituted an extended area, being filled with stagnant water, in many instances quite offensive, from which emanated an effluvia or miasma, productive of disease, and which no doubt caused the concentration of the affection within the small space above alluded to—not one case of fever occurring, to my knowledge, south of Vine Street. At that time the streets of the city running north and south were only opened to Callowhill Street on the north. Marshall Street, Seventh Street, Lawrence (now Franklin) Street, Ninth, Tenth, Eleventh, Twelfth,

and all the streets west as far as the Schuylkill River, were only opened as far north as Callowhill Street.

The whole district, which did not then contain more than two thousand inhabitants, but which now contains a population of at least two hundred thousand, had more than one-half of its number prostrated by the fever within the space of a few weeks. In my own practice three hundred cases occurred, all sufficiently ill to be confined to their beds. In some families, scarcely one escaped. The disease was ushered in, as acute bilious affections generally are, with a chill, more or less violent, accompanied with fever, headache, pain in the limbs, &c. The violence of the symptoms varied very much with the state of the system at the time of the attack, as well as the peculiarities of temperament of the patient previous to his illness. These different phases of course required a corresponding difference of treatment, as the nature of the case required. The same kind of treatment was pursued in all the cases, only modified in form and extent to meet present exigencies. All, whether the case was sthenic or asthenic, required a mercurial cathartic before any other remedy was ordered, very mild or drastic, as the state of the system called for, or which the safety of the patient would dictate. After cleansing out the primæ viæ, or acting upon the biliary secretions satisfactorily, the extract of bark was administered during the remission, which generally occurred in the morning. The extract then took the place of the powdered bark, which had been previously given in all such cases; the extract being more concentrated, was less bulky, more easily taken, and of course preferable to the previous mode of administering it. This was several years previous to the introduction of the sulphate of quinia or cinchonia into practice. During the exacerbation refrigerants of various kinds were employed. When any local symptoms occurred requiring treatment, applications were made to the affected part, such as cupping, leeching, blistering, or counter-irritants of various kinds, as the nature of the cases might require.

The bilious remittent was in very many cases succeeded by intermittent fever. This was frequently produced by too much exposure and too much exertion being made use of during the convalescence of the remittent, which exposure was in many

instances made necessary in consequence of the poverty of the patients compelling them to return to their former avocations to supply their wants before their strength was sufficient to endure the fatigue. The frequent recurrence of the chills, after they had apparently been cured, was very harassing not only to the patient but to the physician attending. This led me strictly to scrutinize the nature of the case. It was found that the effects of the cinchona left the system exposed to another attack in fourteen days from the preceding chill. It then occurred to me that, by giving the extract of cinchona every twelfth day, thus anticipating the chill two days, and continuing every twelfth day to give the remedy for four or five times in succession, the concatenation of action existing in the system in the reproduction of this disease would be effectually dissevered. My anticipations were perfectly realized. Forty-three years have nearly transpired since my introduction of this plan, which has been pursued by me ever since to my entire satisfaction.

Of three hundred cases of bilious fever under my care, all but three recovered. These three cases of necessity could not be expected to recover, inasmuch as they were so connected with other affections as to make their cure next to impossible. The cases of fever just alluded to were very different from the cases which are generally met with at present. There was then less tendency in the disease to run into the typhoid state, and of course less danger to be apprehended as to a fatal result. The youngest patient in the group of those affected was one day old, having a chill soon after birth; that patient was not treated by the extract, as it was too bulky to be taken by so young a child. The Fowler's mineral solution was substituted satisfactorily. The mother of this child was the only patient that was prostrated into a typhus state, requiring a pint of brandy a day for several days in succession until the recovery was sufficient to dispense with the stimulus. The oldest patient was ninety-three years old, and also recovered.

The principal object in view in giving a sketch of this epidemic, is to exhibit to you the wonderful effects of cinchona on the human system. Periodicity, pyrexia, apyrexia, intermissions, remissions, and exacerbations, all fade away before its magic touch. All the turmoils and stormy excitements through which

the system passes in all such cases, are quelled by its power. A calm succeeds it; the calm of health. But these are not all of its merits, it is one of the greatest tonics we have. In all anæmic diseases, and in all diseases in which tonics are required, it stands pre-eminent. The Countess of Cinchon is said to have been the first one to take the bark to Europe, in consequence of which Linnæus honored her by calling it *cinchona*. Why cannot we, who know so much more of its merits, go a little further and crown it the *queen of tonics*.

The apothecary store that compounded nearly all the prescriptions that were used in this epidemic was located at the corner of Chester and Race Streets, there being no apothecary north of Race or ~~east~~<sup>west</sup> of Third Street at that time.

In consequence of the great drain for some years past on the cinchona tree in different parts of South America, the attention of Holland and the East India Company has been called to the subject, and they have undertaken to acclimatize cinchona plants in the East, with a reasonable prospect of success. It is also suggested that the area of the cinchona tree be extended to climates and soil congenial to its growth, which, it is to be hoped, will eventually cause the supply far to exceed the demand for all time to come.

The question was frequently asked, how it was that nearly the whole district alluded to came directly under my care. It was simply this: The physician formerly practising in that vicinity had just removed to another location some distance off. My friends, having previously introduced me into a few families in the district, brought me at once into the very midst of the epidemic. Living then in Race Street below Fourth, it was no trifling matter to visit, as a pedestrian, so many patients. While the disease was at its height, as many as seventy-five patients were visited every day for three days in succession, many of whom, being very ill, were visited two or three times a day during that time. After the disease had in a great measure passed away, having been exposed for many weeks to such an atmosphere, the malady became riveted in my system, so that the prescriber had now to be prescribed for, being prostrated for more than four weeks on his pallet, to imbibe the nauseating doses he had so often prescribed to the poor fellows under his charge.

In the interrogations which have so frequently been put to me, my good health has been alluded to as enabling me to perform the amount of exercise which was usual for me to take from day to day. The supposition was not correct. It was not my health that enabled me to do so much; but, instead thereof, it was the very exercise that was instrumental, under Providence, in giving me such a portion of health as to enable me to perform it. At the age of ten years, my life was placed in great jeopardy, by reason of dyspepsia, and ever since has been more or less affected by it, notwithstanding which, it has been partially subdued in consequence of the exercise. It affords me much pleasure in seeing our worthy President and many of my medical associates, whom I so much respect, whose good health enables them to enjoy a good ride with so much zest. They will, no doubt, be willing to reciprocate to me the same pleasure, when they see me perambulating the streets in search of that health which they so much enjoy, and at the same time they will accord to me the same pleasure while performing so much on my *physical undertakings*.

In the year 1825 (that is, forty years ago), it was estimated that at least 30,000 of the citizens of this country descended prematurely into a drunkard's grave every year; nor was the estimate considered by any means extravagant. This state of things was appalling. Rum and whiskey held a prominent position in all the avenues and business transactions of life. It then appeared urgently necessary to make some effort to stay the torrent of death and destruction which was sweeping over our land—an effort for the suppression of these evils, by discouraging the use of the articles above alluded to. It was my privilege, with some others, to enter early into the arena and take an active part in combating with such a formidable foe; a privilege it might well be esteemed, and even a luxury, to aid in any degree in diminishing such evils as these. Temperance societies were formed and all the necessary intelligence placed before the people to enlighten them on the subject,\* nor were these efforts

\* The first temperance society was formed in my parlor, in July, 1827, composed of laymen from the different religious denominations in the city. Dr. George H. Burgin, Dr. Elijah Griffiths, Peter Hay, now Alderman, Charles J. Suter, Daniel Smith, David McClure, and L. P. Gebhard, and another, whose name I

*Hugh Dehaven*

in vain in the production of important results, in the reformation of many abuses with which we were then surrounded. Previous to this time, there was a sideboard in the parlor of every respectable house in the city, on which was paraded a large waiter containing a number of cut-glass decanters filled with various colored liquids, all of an intoxicating character, calculated to captivate the eye and allure the taste. If a friend or acquaintance happened to make a call, he was introduced into the parlor, and, after the common salutations of the day were passed, the question was put, "What will you take to drink to-day?" This was invariably put as an act of hospitality. The visitor rarely declined, as politeness dictated the necessity of partaking of such hospitality. Thus, no doubt, many drunkards were made by simply yielding to the solicitations of some friend or acquaintance. In less than two years from the commencement of this effort, not a sideboard could be found in the parlor of any of the houses where they previously existed, having been withdrawn to give place to sofas, which have occupied their place ever since. This change was very desirable, inasmuch as it did away with an obnoxious practice miscalled hospitality.

At that time, also, merchants were in the habit of treating their customers coming into the city to purchase goods, by keeping liquor on the back part of the counters in their stores. By this means many a customer, having thus partaken, in various places, of the bewitching draught, was induced to purchase more goods than he was able to pay for; and thus unwittingly the plan that was adopted to allure the purchaser fell with a crushing weight on the seller. It frequently occurred to my mind, at that time, that the loss of millions of money to the city, through the defections of Western and Southwestern merchants, was probably due to that cause, or at any rate that the practice militated very much against the customer's ability to fulfil his contracts. That obnoxious custom also yielded to the reformation of the day. The

do not now recollect, constituted the meeting, which afterwards became the State Temperance Society of Pennsylvania.

While thus engaged, it gives me pleasure to allude to the names of Drs. Condie and Bell, who were engaged in other localities in resisting the onward march of this direful scourge—soon after which Messrs. Carey, Newkirk, Dr. Jewell, and a host of others came in to aid the work.

same habit, also existing among mechanics, who treated their journeymen and apprentices, and among farmers, who treated their laborers, was likewise abolished.

At that time the whole community was literally steeped in rum or its satellites. A child could not be born, or a person married, or a house built, or any convocation whatever be assembled for any important object, or any smaller number of individuals collected together for the transaction of any business, without being more or less contaminated by the article. A persistent effort was therefore necessary to render the practice unfashionable.

At the birth of every child, it was considered necessary by the nurse to wash the child from head to foot with whiskey, and whenever the child was dressed the same process was pursued, which was very strenuously opposed by me in every instance. The greatest objection to this practice was, that the nurse not unfrequently washed her palate with the same article to the great injury of the mother, whose life was thus placed in jeopardy by a drunken nurse. As soon as this practice was laid aside, we were relieved from drunken nurses and from the danger to which the mother and child were previously exposed.

Another fashion prevailed at that period. Immediately after the child was born, or as soon as the nature of the case would permit, a cap was placed on the child's head, being in accordance with an old English custom. The fashion was injurious, inasmuch as it exposed the child to take cold by the frequent change of caps from a thick linen to a fine lace one. Mothers manifested great pride in furnishing themselves with a number of these lace caps, to outvie their friends and acquaintances in the beauty and costliness of the article. It was, therefore, no easy matter to overcome former prejudices when coming in contact with pride and personal appearance. This difficulty, however, gradually yielded to the solicitations of the physician and the more matured reflection and consideration of the mother.

Although, from what has been said, it must be conceded that the temperance effort was instrumental in effecting much good to the community at large, for the time, it is nevertheless to be deeply deplored that within a few years past a retrograde movement has commenced which bids fair to involve us, as a community, sooner or later, in the same ruin. One of the most efficient

agencies in producing such a result is the extensive introduction of what are called tonic bitters, of various stamps, the only object of which is sordid gain to the vender; these so-called tonics being nothing more than rum or whiskey of an inferior quality, in which are infused a few bitter herbs to conceal the rummy taste, and palmed off upon the unsuspecting and unwary as a certain cure for dyspepsia and every disease to which the human system is liable. Newspapers, placards, and pamphlets laud up these remedies as panaceas capable of curing all the ills to which man is heir; whereas they never cure, but almost invariably, by being frequently partaken of, lead to drunkenness and ruin. Many of our most respectable citizens are now partaking of these poisonous articles simply because they are sold as medicines. It is, therefore, the duty of the medical profession, on all occasions, to denounce them as pernicious and highly destructive to the human system, particularly when partaken of for any length of time.

Much more might be said on the various topics introduced into this address, but the intention was simply to take a bird's-eye view, as it were, of different incidents and facts which came within my knowledge from forty to more than fifty years ago. These, though imperfectly given, may still possess some interest to those who are too young to have any personal knowledge of the facts or incidents therein contained.

In relation to our afflicted, and, at the same time, beloved country, what can we say? May He who swayeth the sceptre of empires, and controls the destinies of man, grant us such a peace as shall be consistent with His heavenly and divine will—such a peace as shall produce prosperity, unity, and harmony throughout all our borders, that soon we may be a happy and united people, whose *God* is the *Lord*.

After reading my address before this Society, it was thought by some of my medical brethren, and so expressed to me, that giving a sketch of the most prominent physicians residing and practising in Philadelphia in the latter part of the last and the beginning of the present century, would be appropriate on the present occasion, which induced me to bring the subject now before you. It was also suggested to say something of the yel-

low fever of 1820, the influenza of 1825, and the cholera of 1832.

I am indebted to Dr. Condie, who was then or soon after a young practitioner in the southern part of the city, for his short sketch of the physicians living and practising in that locality at that time, being in the majority of cases personally acquainted with them. I will give you his account of them verbatim, which he was so kind as to send to me at my request, embracing those with whom I had very little if any personal acquaintance.

#### PROMINENT PHYSICIANS.

“The more prominent physicians of the southern portion and adjoining districts of Philadelphia, during the latter part of the last and the early part of the present century, were

1. Dr. ADAM KUHN, the fellow pupil and correspondent of Linnæus, and the first Professor of Materia Medica in the Philadelphia Medical School. I do not think that Dr. Kuhn ever had a very extensive practice. As early as 1808 he had entirely retired from business. He died in 1817, at the age of 75 years.

2. Dr. WILLIAM CURRIE. He commenced practice in 1784, after having served as surgeon in the Revolutionary army. He was a gentleman of profound learning, an indefatigable student, a close observer, and most successful practitioner. He devoted himself for many years to a careful study of the more prevalent diseases, endemic and epidemic, of the United States, especially in reference to their etiology, diagnosis, and course. His various publications, more particularly those relating to the endemic fevers of the country, are distinguished by careful analysis and accuracy of delineation; they may be consulted even now with profit. He died in 1829, aged 74 years.

3. Dr. BENJAMIN DUFFIELD practised from 1774 to 1799.

4. Dr. SAMUEL DUFFIELD, from 1754 to 1814. The practice of both of these gentlemen was very extensive; they ranked among the most extensively engaged and successful obstetricians of their day.

5. Dr. SAMUEL P. GRIFFITHS. This gentleman had a most extensive practice. His medical career extended from 1781 to 1826. He was particularly distinguished in his services during

the prevalence of yellow fever in the summer and autumn of 1793 and 1798 and subsequently. To the exertions of Dr. G., we are mainly indebted for the establishment and efficiency of the city and district dispensaries. Upon the meetings of these institutions he was assiduous in his attendance, and noted for his strict punctuality as to time. This was the more to be commended, inasmuch as he never rode either to these meetings or in attendance upon his patients.

6. Dr. JOHN RUAN was in practice from 1793 to 1844. This gentleman enjoyed also a large practice, and secured and maintained the esteem and confidence of his numerous patients.

7. Dr. THOMAS PARKE, President of the College of Physicians from 1818 to 1834, both inclusive. He died in 1834, at an advanced age. The manners of Dr. Parke were plain and unassuming. He was what might with some propriety be denominated a quiet practitioner. He ranked among the most skilful and successful physicians of his day. By the poor he was highly esteemed.

8 and 9. Among the early medical practitioners of the southern parts of the city and adjacent districts we must include Dr. MONGES and LA ROCHE, Sr. Both of these gentlemen ranked very high in the profession. They are said, but especially Dr. Monges, to have been particularly successful in the treatment of yellow fever in their day, one of the common autumnal epidemics of our city.

10. Dr. THOMAS T. HEWSON, from 1800 to 1848. Dr. Hewson at one time had a large practice in all the departments of medicine, among the families residing in the lower wards and districts of Philadelphia. During the prevalence of the yellow fever in 1804, he is reputed to have attended the greater part of all the cases which occurred in the then district of Southwark.

11. Dr. HENRY NEILL, from 1807 to 1845. As an obstetrician, he was extensively employed in what are now the first, second, third, fourth, and twenty-sixth wards of the city. He was popular, and is said to have been highly successful.

12. Dr. JOSEPH HARTSHORNE practised from 1807 to 1850. Dr. H. had a very considerable practice among some of the most influential families of the southern districts of Philadelphia, whose

confidence he retained up to the period of his demise; the same remark may also be made in reference to

13. Dr. JOSEPH PARRISH.

14. Dr. CALDWELL, during his residence in Philadelphia, strove to establish himself in practice in the southern part of the city. He did not succeed, however, to any great extent. His manners were not adapted to acquire for him any degree of popularity with that class of citizens who inhabit the district in which he was desirous of locating himself as a physician.

15. Dr. KLAPP for nearly half a century engrossed to a very great extent the medical practice of Southwark, Moyamensing, and Passyunk. He was well informed, of polished manners, and good address. As a physician he was eminently successful, and enjoyed the esteem and confidence of the families in which he had been employed in the commencement of his medical career up to the period of his death, which occurred suddenly.

16. Dr. HARVEY KLAPP, the brother of Joseph, enjoyed a large practice in the southern districts."

As relates to Drs. Ruan, Hewson, Neill, Hartshorne, Parrish, and Klapp, I can fully indorse all that has been said of them as correct, inasmuch as I was personally acquainted with them, and am pleased to be enabled to add something more in commendation of those worthy men, not only as physicians but as men.

Dr. Parrish was mild and amiable in his demeanor, pleasant and agreeable in conversation, and in personal appearance rather attractive. He had an extensive practice, which necessarily gave him much experience in the treatment of disease, and was hence justly appreciated as one of our first physicians, being frequently called in consultation with younger practitioners. He had a large number of students to whom he gave private lectures, which were very interesting, inasmuch as they entered into the minutiae of every day's practice, such as are not generally dwelt upon in the medical lectures of the schools, the time necessary to devote to such minutiae not admitting of it.

Dr. Parrish, in the benevolence of his heart, was in the habit of inviting the poor to his office one hour every day, to prescribe for them gratis, which custom he continued for many years. The motive was good, and the act praiseworthy, particularly if confined to

those for whom it was intended. But no doubt this kindness was frequently taken advantage of by many resorting thither to partake of its benefits, who were amply able to remunerate him for his services, and thus defrauded the doctor out of his just due. Such cases came within my own knowledge. Such impositions as these have led physicians of late to adopt a different plan, and only prescribe gratuitously for those who are really known to be in want.

Other physicians were also in the habit of doing the same thing, only not to the same extent, their gratuity being principally confined to patients within their own private practice.

Dr. Hartshorne in his appearance was very different from Dr. P., being more quiet and reserved in his manner. He was particularly so in the sick-room, being satisfied to make no more remarks than were absolutely necessary to the full investigation of the case. Among his medical brethren he was much more conversable and sociable; he was engaged in a very large practice, which gave him much experience, which matured his judgment in prescribing for the cases brought before him. His consultation practice was very extensive. One qualification he possessed in an eminent degree—that was a strict punctiliousness in the observance of medical etiquette, which ought to be observed and highly estimated by every member of the medical profession. It gives me great pleasure to be enabled to say that, in all my intercourse with physicians for a long series of years, they have been with very few exceptions great advocates for its faithful observance. This subject is more particularly alluded to in the present case in consequence of a much greater intimacy with Dr. H., having more frequently met him in consultation than with any others of the profession. In all his walks and transactions in life, whether in or out of the medical profession, his uniform conduct was that of a just and honorable man and a social companion. Dr. Hartshorne graduated at the University of Pennsylvania in 1805, and died in 1850, aged 70 years.

Dr. JOHN C. OTTO graduated at the University of Pennsylvania in 1796, and died in 1844, at the age of 70 years. He was a gentleman of the old school, rather dignified in his appearance, though plain and affable in his demeanor, and accessible to all. He was justly considered as an excellent physician; was fre-

quently called in consultation with young practitioners. His practice was not very extensive, but nevertheless very respectable. It was among that class of citizens who never hesitated to pay their bills. It was only necessary to know that the doctor previously attended the patient and an assurance came that one dollar per visit would be cheerfully paid. It was very pleasant to tread in the footsteps of such a predecessor. It only showed the advantage of schooling patients in the way of doing that which was right in a pecuniary point of view. Dr. Otto attended in the yellow fever of 1797 and 1798 as well as in the year succeeding. He was a non-importationist as well as a non-contagionist.

Dr. THOMAS T. HEWSON was physically very small in stature, but mentally was far higher than ordinary men of full growth. He was so dignified in his deportment as always to command the respect of all with whom he associated. Although he was apparently somewhat stern in his manner, he was nevertheless courteous and gentlemanly. He had a finely cultivated mind, with an enlarged experience, and was generally esteemed as a good practitioner.

Dr. CHAPMAN was appointed an adjunct to Dr. James in obstetrics. He afterwards was appointed to the Chair of the Practice of Medicine in the University of Pennsylvania. In consequence of a defect about the palate, his enunciation was neither clear nor distinct, but after hearing him for a while the defect became gradually less observable. He was a fine writer, and possessed a well-cultivated mind, naturally above the ordinary capacity. He was altogether an interesting lecturer. He was a great advocate for the doctrine of sympathy and sympathetic diseases. He died in 1853, aged 74 years. He was a graduate of the University in 1801.

Dr. EBERLE was a practitioner in Philadelphia in 1816, and had a respectable practice. He came from the interior of the State; had a German accent; and was plain and social in his manner. He wrote a book on the Practice of Medicine, generally approved, and far from being devoid of merit. He was appointed a professor in Jefferson College when it was first instituted; a few years after which he was appointed a professor in a western institution, which he accepted, and soon after left the city. He was also editor of the "Medical Recorder" for several

years in this city. The Doctor graduated in the University in 1809, and died in 1838, aged 54 years.

Dr. JANNEY graduated in the University of Pennsylvania in 1813. He located himself in the Northern Liberties, and soon after his graduation commenced practice in that vicinity, and continued there until his death, in 1859. He had a very extensive practice; was highly esteemed both as a man and a physician. His deportment in life was just and honorable, such as to call forth the esteem of the community at large.

Dr. WM. P. DEWEES graduated in the University of Pennsylvania in 1806. He delivered private lectures during my attendance at the University in 1811, 1812, and 1813, which were attended by many of the University students, supposing them to be advantageous in consequence of the great practical experience of the Doctor. In his lectures he stated that he had then delivered six thousand women, probably a larger number than had been delivered by any American physician before. He was, notwithstanding, a fine ruddy-looking man, apparently no worse from wear and tear or having passed through such a fiery ordeal. He was a clear and distinct lecturer, manifesting great facility in the elucidation of his subject. He possessed decided ability as a lecturer. He died in 1841, aged 74 years, a number of years after having been appointed to fill the obstetrical chair in the University of Pennsylvania.

I became acquainted with Dr. FRANKLIN BACHE in 1811. He was then a private pupil of Dr. Rush, and also attended the lectures. He graduated in 1814. I quote from Dr. Rand's introduction of 1864 before the Jefferson College. "While yet a student he entered the army as surgeon's mate, and was appointed full surgeon in 1814. In 1816 he resigned from the army and entered into private practice. He was physician to the Walnut Street Prison from 1824 to 1836, and to the Eastern Penitentiary from 1829 to 1836. During the fearful ravages of cholera he was conspicuous for his humanity and assiduity. He was a public lecturer at the Franklin Institute in 1826. In 1831 he was appointed Professor of Chemistry in the Philadelphia College of Pharmacy, which he held for ten years. In 1841 he was chosen Professor of Chemistry in the Jefferson College. As a lecturer the Doctor made no pretensions to oratory, but was, notwith-

standing, a very satisfactory lecturer. In 1853 he was elected President of the American Philosophical Society; in 1855 Vice-President of the Philadelphia College of Physicians, two of the oldest and most distinguished institutions of sciences in the United States, the former dating from 1743 and the latter from 1787. In private life he was warm hearted and genial; witty, with a keen sense of humor. His unostentatious charities will be long and gratefully remembered by their former recipients. Besides numerous contributions to scientific publications, Dr. B. edited "Turner's Chemistry," "Ure's Dictionary," "Cutbush's Pyrotechny," and also twelve volumes of the "North American Medical and Surgical Journal." He published in 1819 a "System of Chemistry" for the use of the students of medicine, but his great work has been the authorship, in connection with Professor Wood, of the "United States Dispensatory," a work of immense labor, and so valuable to the profession that there is hardly an educated practitioner of medicine, or competent druggist in the land, who is not possessed of it and finds it of almost daily use. It has passed, since its first issue in 1833, through twelve editions, the last now in press, reaching nearly two thousand octavo pages. Dr. Bache's writings were characterized by the same faithfulness and absolute accuracy which were displayed in his lectures. He was a laborious student, keeping pace with the rapid strides of modern science, and carefully incorporating all new discoveries into his lectures year by year, and into the Dispensatory upon the issue of each new edition."

"In less than six months from the death of Professor Bache we had occasion to deplore the loss of another member of the faculty" (I quote from the introductory of Professor Rand), "one who had been associated with the College in its earliest days, and to whose untiring energy, sagacity, and forethought it has owed much of its success. He was born in 1794, in Virginia. In the war of 1812 he was drafted, and obtained the appointment of assistant surgeon in the army. After the close of the war he removed to Philadelphia, and soon became a most successful practitioner, especially in the department of obstetrics. In 1838 he was elected to the Chair of Obstetrics and Diseases of Women and Children in the Jefferson Medical College, and on the reorganization of the school in 1841, Professor of Materia Medica and Gen-

eral Therapeutics. Failing health compelled him to resign the latter chair in 1855, when he was elected Emeritus Professor of the same branch. He was Dean of the College until the session of 1854-5, and his abilities as a clear-headed business man were especially displayed in the remarkable success with which he discharged the duties of that arduous office. He was one of the founders of the Philadelphia Gas Works, and it was to his efforts mainly that they were established. Dr. HUSTON, as a lecturer, was especially happy in his remarks on general therapeutics. His admirable common sense, his keen intellect enabled him to take a position in this branch far beyond the views then generally promulgated. The record of these two venerable men has in it a lesson for us. Without brilliancy, or, in its ordinary acceptation, genius, but with the most absolute integrity, unwearied industry, and indomitable perseverance, they have left for themselves an imperishable record. Beyond the time allotted by the Psalmist they have peacefully passed to their rest regretted by all, leaving no unkind feeling in a single heart, having achieved all that the most ambitious could crave, and all that the most humble could wish."

It was my pleasure to become acquainted with them both from the commencement of their career as medical men, and can bear testimony to their rectitude as men, and the high estimation in which they were held by all with whom they were in constant intercourse.

Very soon after Dr. WM. PEPPER commenced the practice of medicine, I became acquainted with him. Although the son of a wealthy gentleman of our city, and of course not compelled from necessity to enter into what is called the drudgery of our profession, he nevertheless from the commencement sought every opportunity to search out and investigate as far as possible the hidden mysteries of the medical art. He was voluntarily a working man. He frequently expressed to me his abhorrence of idleness under any circumstances. It was this early searching after wisdom which necessarily made him a prominent man in his profession. The Doctor was frequently called in consultation in pulmonary affections, in consequence of being considered as superior to many others in their treatment. Auscultation no doubt was a prominent means in giving him such a character.

A fine auditory nerve contributed in a great degree to make him an accomplished listener in all such cases, giving him the advantage of discriminating with more accuracy the different sounds as manifested in the different stages of the disease. How far such a knowledge is productive of a better treatment, it is not for me to decide. It may be an adjuvant in forming a more correct diagnosis in all such cases. In the year 1860 he was elected to the Chair of the Practice of Medicine in the University of Pennsylvania, which he filled with credit to himself and satisfaction to the students. He was permitted to fill that position for only three years, when his declining health compelled him to resign. He soon after fell a victim to the same malady, which, while he was in active practice, he was so often called upon to relieve. He died as it were in the very meridian of life. He was justly esteemed as a worthy citizen and a first rate physician. He graduated at the University of Pennsylvania in 1832, and died in 1864.

Dr. J. K. MITCHELL was no ordinary man. He had a fine mind, well cultivated; his demeanor polite and gentlemanly. He was classed among the first of our physicians. He was Professor of the Practice of Medicine in Jefferson College for many years; he possessed great facility of expression, which, together with a pleasant and agreeable manner, enabled him to fill his position acceptably to all. Dr. Mitchell graduated at the University in 1819, and died in 1858.

Dr. ISAAC REMINGTON graduated at the University of Pennsylvania in 1824; was elected a Fellow of the College of Physicians in 1850; was chosen President of the County Medical Society in 1860. He died November 10th, 1862, in the 59th year of his age. I became acquainted with him soon after his graduation. He was frank and candid as well as social in his manner. He acquired a good practice through industry and perseverance, as all young physicians are required to do if they wish to be successful. He was esteemed as a very respectable physician. Within the last few years of his life he was elected to the Presidency of the County Medical Society, which situation he filled with credit to himself and satisfaction to the society. He possessed a good character and fine moral and religious principles, for which he was highly esteemed by those with whom he was acquainted.

Dr. T. D. MUTTER graduated at the University of Pennsylvania in 1831. He was social and gentlemanly in his manners; was esteemed highly as a practitioner of surgery in particular. He was elected to fill the Chair of Surgery in Jefferson College, which he held for several years until compelled by declining health to resign. He was an interesting lecturer; but after retiring from his active duties, his most conspicuous act consisted in his liberal benefactions to the College of Physicians in a literary, artistic, and pecuniary point of view, which will confer upon his name, through an appreciating medical profession, an imperishable monument of praise.

Dr. GEORGE UHLER, with whom I was well acquainted from the commencement of his practice, graduated at the University of Pennsylvania in 1815. He soon after located himself in Front Street below Brown in the Northern Liberties, where, by industry and perseverance, he acquired a very extensive practice. His manner was plain and unassuming, nevertheless sociable and friendly, well adapted to please the inhabitants of that portion of the city who looked more to respectability than appearance. From the extensive experience he acquired, he became well qualified to pursue his medical career successfully. He continued in practice for many years, when his health gradually declined, which compelled him to retire from its active duties. His brother John, who graduated at the University in 1822, succeeded him in his practice, but not to the same extent. He also continued in practice for a number of years, and was considered a successful physician. They have both passed away from this terrestrial scene to give an account of their stewardship.

Dr. RITER was born in Germantown, Pennsylvania, in 1794; died in 1841, aged 47 years. He commenced practice at an early age in Roxborough, Pennsylvania, and then removed to the city, and had an extensive practice for many years. He resided in North Sixth Street above Willow, and while in the city continued to attend his Roxborough patients. His extensive practice gave him much experience, which, combined with a good judgment, made him a successful practitioner. In his demeanor he was frank, courteous, cordial, and gentlemanly, by which he readily ingratiated himself into the good feelings of all with whom he associated. I had the pleasure of his acquaintance for many

years previous to his death and attended him in his last illness, which was long and protracted, and which he bore with patience and resignation.

Notwithstanding so many able and worthy physicians have been taken from among us, others remain to fill their places, of equal talent and ability. All those who from age or physical inability have declined from their active duties as professors or teachers of medicine, as well as all those who from similar causes have retired from active practice, have those to succeed them who are willing to bear the burden and heat of the day, not only as teachers, but also as practitioners, whose province it is to traverse our streets from day to day, entering into the apartments of the sick and the dying, dispensing remedies to relieve both mental and physical suffering, who are made instrumental in many cases of restoring such to health, comfort, and happiness; and if not able so to do, to pour the oil of consolation into the distressed bosom, thus preparing them to be reconciled to any event which a kind Providence may see fit to dispense to them. And it may also be a source of great pleasure to him, if through his medical ministrations he is made instrumental in wiping away the tears of a family circle by the restoration of a beloved relative to health, so that the tear of sadness shall yield to feelings of thanksgiving and praise to a kind Providence for providing an instrumentality so satisfactory in its results. I would, therefore, say to my young medical friends, if they would wish to reap such a reward, be industrious, be vigilant and attentive, in season and out of season, in the pursuit of your profession. Never be weary in well doing, for remember that the race is not always to the swift nor the battle to the strong, but unto him who endureth unto the end.

#### YELLOW FEVER.

A few words in relation to yellow fever as it appeared in Philadelphia. Its first appearance was in 1699,\* only seventeen

\* This fatal epidemic of 1699 led the citizens of Philadelphia in 1700, the year following, to represent their exposed situation to the Colonial Assembly, which met at New Castle, William Penn being present. to institute a system of regulations for the government of sickly vessels. This resulted in the enactment of the first quarantine law in this country.—*From Historical Sketches of Quarantine, by Dr. Jewell.*

years after its first settlement, being then only a village. It also made its appearance in Philadelphia in 1741, 1747, and 1762. The city then had a long immunity from this direful scourge, not reappearing until 1793, although it appeared in Charleston in 1703, 1728, 1732, 1739, 1745, and 1748, and in New York in 1791. It made great ravages in 1793, the deaths amounting to more than three thousand, while the city contained less than forty thousand inhabitants, out of which number it was computed that from twelve to seventeen thousand (Carey says 17,000) were out of the city at the time. In 1794, the mortality was comparatively smaller. Some few cases appeared in 1795 and 1796. It then appeared in 1797, when, Dr. Rush says, it was more malignant than in 1793 and 1794. In the cases affected by it, according to Dr. Pascalis, the deaths were thirteen hundred, in consequence of being spread over a less extensive surface. Dr. La Roche says in 1798 it was the most extensive, in point of malignity and mortality, of any that had previously occurred in the city. Dr. Currie estimated the number of deaths to be three thousand eight hundred and six, a truly fearful mortality. It also appeared in 1801, 1802, 1803, 1804, and 1805 in Philadelphia, on which occasions it was comparatively moderate in violence and extent, with deaths proportionally less.

From 1805 to 1819 Philadelphia escaped the disease. In 1819 there were comparatively but few cases. In August 2, 1820, according to Dr. S. Jackson's account, it first broke out in Water Street, near Race, then appeared about Walnut Street wharf on the 9th of the same month. It next showed itself in a few scattering cases in Water Street, between Market and Arch Streets, in Front between Walnut and Chestnut, in Letitia Court, and in Second Street near Shippen Street, afterwards in the Northern Liberties. It did not extend to the westward of Front Street—all the cases were traceable to the space included between Front Street and the river; it was very malignant in its character. Although malignant, it was rendered less fatal in consequence of the measures adopted by the Board of Health for arresting its progress. Of the cases reported, eighty-three died and forty-two recovered.

During this epidemic, I was called to visit a man, a butcher by trade, by the name of Sowers, who contracted the disease by

supplying the vessels daily with meat while lying at the wharves near Walnut Street, in the infected district. His relatives lived in Callowhill Street, below Tenth, where he was taken sick, and where I first visited him. The attack was such as we usually meet with in bilious fevers, such as chilliness, fever, headache, weariness, &c. The fever was very high from the inception of the attack, accompanied by delirium. A mercurial purgative was administered. The second day sickness of the stomach came on, and, being delirious, he spit up mouthfuls of dark matter resembling coffee grounds in appearance, which adhered to the wall on the side of his bed, which occurred from the delirium rendering him uncontrollable. Dr. Otto, at my request, was called in consultation, knowing that he was conversant with the yellow fever, having attended in that disease in 1797 and 1798, and subsequent years. As soon as he saw the case he pronounced it a very malignant case of yellow fever. The illness of my patient was very short, having died within four days of the attack.

Another case of the same character, contracted in the infected district, also came under my care with similar results, in which Dr. Otto was also called in consultation.

Believing, from the mass of evidence that had been previously adduced, that it was not contagious out of the infected district, or, in other words, that the disease could not be taken out of the infected district, it was my determination still further to attest the truth of my theory by allowing the relatives and friends who desired it to have free access to his sick-room, and afterwards I permitted them to attend his funeral in the same way as if he had died of any other non-contagious disease. No case of sickness whatever occurred in any of the individuals who availed themselves of such permission, which ought to be considered as an additional test of its non-contagiousness.

While on this subject, permit me to allude to the action of the College of Physicians in relation to the importation of yellow fever previous to 1793. The College consisted of thirty-eight Fellows, thirty-one of whom, being residents of the city, declared (in answer to the Governor's inquiry) that, in their opinion, the disease was imported. Three of the Fellows, Dr. Redman, President, Dr. Foulke, and Dr. Leib, dissented. The three non-resident Fellows, making the thirty-four, were no doubt of the same opinion

as the thirty-one, as Dr. Rush merely speaks of the three Fellows above mentioned who dissented. The noble stand taken by Dr. Rush and the three Fellows above mentioned, and by Caldwell, and the Academy of Medicine, and some others in the defence of the non-importation and non-contagiousness of the disease against such a formidable array of learning, talent, and respectability, deserves the highest commendation. The Board of Health at that time also concurred with the College of Physicians in its importation and contagiousness.

#### INFLUENZA.

In the latter part of December, 1825, the influenza made its appearance in Philadelphia in a very violent form. Scarcely a citizen within my knowledge at the time escaped the attack. It was no doubt rendered more severe and fatal in consequence of a spell of warm weather which prevailed, producing a fog which lasted day and night for nearly a week, so dense at night as to render one unable to perceive one lamp from another when perambulating the streets.

During the preceding August, a three-story house was commenced being erected under my supervision in Race Street above Sixth, which premises I was anxious to occupy previous to the commencement of another year, which required that the completion of it should be hurried as rapidly as possible. In order to effect the object, particular instructions were given to finish the third story, comprising three rooms, before finishing any other part of the building, with the intention of occupying the same as sleeping-rooms. As soon as these apartments were plastered, a ten-plated stove (such as was then used for the burning of wood) was placed in one of them, communicating with the other two, in which a fire was kept up during every day for nearly two months previous to moving, thereby drying the walls before being occupied as sleeping apartments. When my friends heard of my intention to move into my house previous to the termination of the year, they remonstrated with me for so doing. Finding me persistent in pursuing my own course, they considered me almost insane on that subject; but I thought I understood my own business best, and accordingly moved into the house just de-

signated, on the 24th of December, 1825; a very few days after which the influenza made its appearance in the violent manner previously alluded to, in which many cases terminated in pneumonia, and not a few in death. My family consisted of six adults and four children, none of whom, though equally exposed to the external atmosphere as all other citizens were, contracted the disease, perfectly escaping any appearance whatever of catarrhal symptoms. This may be considered as fully demonstrating that the inhalation of the external atmosphere was not productive of the disease, but that it was produced from the sudden transition of temperature from below a freezing point to one ranging from 60 to 70 degrees, causing the inequilibrium between the external atmosphere and that existing in a confined and ill-ventilated apartment. The fire being kept up prevented the entrance of the frost into the house, thereby producing an equable temperature between the internal and external air, notwithstanding the sudden elevation of the latter, by which means the family suffered no inconvenience from the change either as regards want of comfort or the production of disease.

No set of men are better acquainted with these sudden changes than the medical profession. We are called upon, in the very warm weather, to visit a patient. We are conducted into a cold parlor, in which no external air is or has been for some time admitted. The first impression is that of cold. In a few moments the Schneiderian membrane becomes irritated by the change, and sneezing is the consequence. If the apartment is left without delay, the impression on the mucous membrane passes away. But suppose we are detained in the same position for any length of time: the sense of coldness increases; the sneezing is repeated; the impression extends to the fauces, producing sore throat; then into the larynx, producing hoarseness; then into the lungs, producing cough, and thus extending through all the ramifications of the lungs, until every part of the whole pulmonary system becomes involved, producing chills and fever and all the symptoms appertaining to the disease. This constitutes what might be called a violent case of influenza. But suppose every citizen has to encounter the same kind of cold in an uncomfortable and ill-ventilated apartment, and be compelled to inhale the atmosphere emanating therefrom for a whole night or nights in suc-

cession, would there not necessarily be produced a general *influenza*? This state of things is not a mere supposition but an absolute fact. In the chamber of every house in which warm air is not admitted, or the external air of an elevated temperature is excluded, preventing the immediate establishment of an equilibrium between the external air and that confined in the house, the case becomes much stronger and more necessarily injurious when applied to the sleeping apartments in every dwelling. There is a prejudice in the minds of persons generally adverse to the admission of damp air into their chambers. The admission of such warm air, although damp, would soon restore the equilibrium, and thereby relieve the difficulty by inaugurating a homogeneousness of action, by which the former atmospheric influence would be dispelled, and a perfectly salubrious one be substituted in its stead.

The inference to be drawn from this fact shows that it is the coldness combined with the dampness, as inhaled at night while the system is in a dormant state, and not the warm damp atmosphere of the day, that produces the disease. The only therapeutic agent necessary in averting such a calamity is the one adopted in the case above stated; and I firmly believe that if every house had been warmed as mine was at that time, there would have been no influenza in Philadelphia or any other place thus protected. The facts, I think, bear me out fully in drawing such an inference.

At that time there was little or no coal used in the warming of our houses. In 1820 the Lehigh Coal and Navigation Co. sent to Philadelphia from their mines 365 tons of coal, as the first fruits of their labors. This quantity, small as it was, completely stocked the market, and was with difficulty disposed of during the whole of that year. No coal from any other source came to our market before the year 1825, the year in which the influenza appeared. Hence, very few houses were warmed by it at that time. It was not thought necessary then to warm any sleeping room except in case of sickness. The gas was then about being introduced into our city. The warmth and the dryness of our houses, from the heat derived from these two sources, have done much in improving not only the comfort but the health of our citizens, more particularly as it relates to the warming of our

houses, and which I have no doubt does contribute much to lessen the sickness and mortality arising from such sudden transitions of atmosphere.

In 1824, the year previous to the appearance of the influenza, the Marquis de Lafayette paid a visit to our country. He who left his all behind him to aid us in our Revolutionary struggle for freedom at the risk of his life, without the expectation of any fee, favor, or reward, save that of an approving conscience, was hailed by every individual for the services he had rendered our country, and all greeted him with a hearty welcome. The highest moral act a man can perform towards his fellow man in greatness, is disinterested benevolence. This he manifested in an eminent degree in his aid to our cause in the darkened hour that tried men's souls. His act of benevolence in this case as far transcended the disinterested benevolence of the day, as the risk of his life transcended the giving of money or any other kind act for the attainment of the object in view. He was truly the greatest man of the age, and whom any nation or people might be proud of. For several weeks previous to his expected visit preparations were making for a grand reception by erecting triumphal arches on the route through which he was to pass and other displays worthy of a patriotic and grateful people. When he arrived, the grand procession and the demonstrations throughout were a complete success.

The Jefferson College was instituted in June, 1825, with Drs. G. McClellan, Green, Beattie, N. R. Smith, Eberle, and Rhees as professors, Rev. Dr. Green being president of the Board of Trustees. Since that, all the original professors have withdrawn, and nearly all, if not all, have died. Their places, however, were filled by men fully equal in talent; and, so, changes have occurred in the professorships by death or resignation from time to time, with rather an advantage than otherwise to the College, by which it has not only been sustained, but has flourished, and is now, and has been for years past, justly considered as among the first of the medical institutions of the day.

The Pennsylvania College of Physicians was instituted in 18—, and continued for many years in successful operation, the professors' chairs being filled by men of ability and talent, but in consequence of being preceded by two popular medical institu-

tions in our city, the emoluments arising from it did not remunerate them sufficiently to make it an object for them to continue it. It was, therefore, discontinued after having, however, satisfactorily dispensed to hundreds of students, all that was required to qualify them amply to enter upon their professional career.

#### CHOLERA.

On the 22d of February, 1832, a few months previous to the appearance of the cholera, the centennial anniversary of Washington, the greatest patriot living, was celebrated in this city by the most gigantic civic and military procession that had ever taken place in this country. It was the most auspicious day that could have been chosen for the event. The clear sky, the mildness of the circumambient air, the state of the streets and all the surrounding circumstances demonstrated more the appearance of a vernal than a winter's day. A smile of approbation and delight appeared to pervade the interesting scene. The military of this and the surrounding States participated, as also the firemen and all the trades and mechanical associations—the different mechanical branches working at their respective trades, elevated on a platform erected for the purpose, accompanied by appropriate music. The procession was so long as to require two hours and forty-five minutes to pass the window at which I stood. It was the most splendid and interesting pageant I ever beheld. When speaking of Lafayette, I considered him the greatest man in point of disinterested benevolence, while Washington was the greatest *patriot*. These two men, possessed of such bravery and exalted moral worth, were engaged together in liberating our country from the grasp of a powerful and despotic foe. Praise and adoration should be given to that *Power* who raised up such instruments to save our country.

It is my intention to close my remarks by calling your attention for a few moments to the epidemic cholera (usually called Asiatic) as it appeared among us in July, 1832. A commission of three of our most respectable physicians, in anticipation of its arrival here, repaired to Montreal, where it was then raging, to ascertain if possible something of its treatment, in order to throw more light upon the subject, in preparation for its visitation

among us. I will give you a short extract from their report, as it relates to its appearance in various places, before it reached our shores. Very little, if anything, of importance to aid us in its treatment was elicited at the time, nor could it be expected, as the cases which occurred were so variable in their character and symptoms, that no uniform or settled treatment could be applicable to all, or even to a portion of all, as they presented themselves.

The cases which have come under my own observation have been so diversified in their character and symptoms that scarcely two could be found to bear the same image out of a vast number of cases. In some cases of the most violent character there was no vomiting, or purging, or perspiration, or any disturbance whatever of the alimentary canal, or any symptom by which to designate the disease as it frequently occurs. Nevertheless, it was the disease. Prostration of the system to an alarming degree sometimes occurred, without any manifest cause; so that symptoms, alone considered, would throw but very little light on the subject. In such cases, general principles must be taken into consideration, and a general treatment inaugurated, from which we may expect the most satisfactory results.

“The epidemic cholera commenced its ravages in various parts of the delta formed by the mouth of the river Ganges in India during the summer of 1817. Presenting many of the features of the ordinary cholera morbus, it had some symptoms superadded which distinguished it from that disease. The chief of these latter are the suddenness of the attack and the rapidity of its course, the extreme exhaustion of the animal powers, the distressing cramps or spasms of the muscles of the limbs and body which commonly attended it, and more especially its strongly marked epidemic character. Continuing its ravages from the period mentioned, by the end of 1818 the disease had pervaded nearly all of Hindostan from the Himalaya Mountains on the north to Cape Cormoran on the south, and from Bombay and Surat on the west to Sythet on the east. In 1819, it broke out in the kingdom of Arracan on the east, Peran and Java on the southeast, and in the Isles of France and Bourbon on the southwest. The effects of the epidemic were also experienced still further to the southeast, over the whole of the Indo-Chinese peninsula. In 1820 it prevailed in Siam, Malacca, and the Philippine Islands, the southern provinces of

China, and at Guzerat in India. In 1821 it occurred in Muscat on the southern extremity of the Arabian peninsula, and again in the island of Java. During this season Bushire, Sebiras, and other parts of Persia, Bassora and Bagdad in Arabia, the island of Bahrein in the Persian Gulf, and the island of Borneo suffered very severely from the epidemic. During the succeeding winter the disease became dormant both in Persia and Syria; but in the spring of 1822 it made its appearance again among other places in Ispahan, Teheran, Tabriz, Moussoul, and Diarbekir. By the end of the year, indeed, almost every place of note in Persia had been ravaged by the pestilence. In the spring of the year ensuing, 1823, it broke out at Latokia, Antioch, Tortori, Tripoli, and other towns along the eastern shores of the Mediterranean and in the Spice Islands as well as still further south in the island of Timor near New Holland. Previously to the autumn of this year the disease had prevailed throughout the provinces of Asiatic Turkey, from Bassora and Bagdad to Erzeroum and to Antioch. Egypt, however, escaped until a much later period. In August of this year the disease prevailed in the province of Shervan and in Backu as well as in other places on the western side of the Caspian Sea, and it finally made its appearance in the city of Astrakhan near the mouth of the Volga. Subsequent to the year 1823, the disease continued its ravages throughout China and in various parts of India, and towards the close of 1826 it almost depopulated several cities of Mongolia, occurring as far north as the borders of Siberia. In 1820 it appeared at Tiberius in Judæa. In Persia it reappeared several times, the city of Teheran being ravaged by it in 1829. In 1828 the disease was once more in the Russian dominions, appearing unexpectedly at Orenburgh, a town situated on the Ural River four hundred and eighty miles northeast of Astrakhan. On the setting in soon after of cold weather, it however completely and promptly ceased. But in the summer of 1829 it recommenced its ravages with greater severity, and occurred at many places also in the neighborhood. About the middle of June, 1830, it made its appearance in Tiflis, a city in Georgia, and in the mean time occurred at Backu, by the 20th of July. Astrakhan was for the second time a sufferer from it. This disease occurred successively in various towns and villages situated along the shores of the Volga, and

from the south of the Caspian Sea, Iver, and Vologlia; then at Archangel on the north and Poland on the south, ravaging in fact the principal places from Prussia to Odessa, and from Odessa to the White Sea.

“In the middle of September it appeared in Moscow in 1830. In April, 1831, in Warsaw; Riga in May; Archangel in June; also in Petersburg; and in July in Cronstadt. In May, 1831, it appeared at Dantzic in Prussia, and also in Brody and Lemberg in Austria; in Berlin in August, and Vienna in September; and in various parts of Hungary. Before the close of the year it had desolated nearly fourteen towns and villages. In October it suddenly appeared in Hamburg and in different parts of the kingdom of Hanover. In August in the eastern part of England, in Sunderland, a seaport town of Durham, at the mouth of Wear River; it did not attract much notice till the end of October. In December in New Castle on the Tyne, north of Sunderland; at Gatesend on the south; then in various parts of Scotland. In London the epidemic appeared in 1832, and in Dublin and different parts of Ireland; and in May to an alarming degree in Paris and its vicinity. In June it appeared in Montreal and Quebec, attended with great mortality. In the same month it appeared in New York and at Philadelphia; in July presenting there, however, at that time, but sporadic cases, but became epidemic afterwards.”

Previous to its arrival in Philadelphia the anticipation upon the minds of many of our citizens was very depressing, and in some instances dreadful. The anticipation far exceeded the reality. When it did arrive, the terror abated, and the mind was comparatively relieved as to its danger and fatal tendencies. On the evening of Aug. 2d, 1832, about ten o'clock, I was called upon to visit a married woman about 50 years of age who lived in a low building with a damp cellar within a square of my house. For supper that evening, not more than three hours previous, she ate a cold apple dumpling. I found her body bathed in a profuse perspiration as cold as death, with a very feeble pulse, without any sickness at stomach or evacuation from the bowels. From the commencement of the attack she lay perfectly quiet, apparently insensible, without the power of deglutition to any extent. It was, therefore, impossible to administer remedies in-

ternally with any satisfaction. I, therefore, agreeably to the recommendation of the committee who visited Canada, ordered very warm applications externally with very little effect. She sank gradually, and died within seven hours of the first attack. The perspiration literally ran in a stream from every pore. Within three hours from the attack her hands assumed the appearance of a washerwoman, shrivelled up from the effects of the perspiration.

After the termination of this case I was induced to pursue a general mode of treatment, calculated to act in a prompt and decided manner upon the biliary secretions, which was attended with the most happy results.

I was called to see a young man of very dissipated habits, with a prostrated state of system produced by the disease. I administered ℞j of hyd. chlor. mit. at one dose. In a very short space of time, I might say almost immediately, the perturbed state of the alimentary canal became quieted, no evacuation per ore or per anum having occurred for more than a day afterwards, and recovery was the immediate consequence. Some time afterwards, in consequence of his bad habits, he had a second attack, and was as soon relieved by the administration of the same remedy in the same quantity.

A merchant of our city, T. W., who had just returned from New York in the night line of stages (previous to the introduction of railroads), sent for me early in the morning of his arrival. Not being in when called, he came for me himself, which was several squares off, and returned before I saw him. Although his physical strength was preserved to such a degree as to enable him to walk such a distance, he was without a pulse. I immediately ordered him to bed and administered ℞ss of hyd. chlor. mit. Although he was nauseated during his ride, there had been no vomiting or evacuation per anum. Within a few hours ℞ss more was given, all which produced no evacuation from his bowels or no vomiting. For more than two days afterwards his whole alimentary canal was in a perfectly quiescent state. The pulse soon returned, and his recovery was rapid.

Other cases came under my notice, in which there was little or no disturbance of the primæ viæ, but great prostration of strength,

in which the employment of the same remedy was effective in producing a rapid recovery.

Very soon after the cholera made its appearance in Philadelphia, it broke out in the prison in Arch Street above Broad Street in a malignant form. The inmates of the prison were composed of untried prisoners and vagrants, who were sent there as the most dissipated and degraded of human beings, and unable to take care of themselves. This mode of living, consequently, very much impaired their constitutions, and made them fit subjects for the disease. When it first appeared, great havoc of life ensued, many died within its walls in the space of a very few hours from the attack, and many more were sent to the different cholera hospitals in the city on stretchers, some of whom were in articulo mortis at the time, and others, not so severely attacked, recovered after being removed; the most of them, however, died. The prison was thus cleared of the dead, the dying, and those who afterward recovered, within the space of a few hours—amounting in all to over two hundred.

The three diseases just alluded to, are more general and formidable in their character than any we have had to encounter.

The yellow fever might be considered endemic in consequence of its local character, the same as intermittent fever in marshy regions, only extending as far as the effluvia arising from decomposed vegetable matter extends. The yellow fever acts not only upon the hepatic system, increasing, and, at the same time, vitiating the secretions, but also it acts on the chylopoietic viscera, producing inflammation in the gastric region, evinced by nausea and vomiting of the most vitiated bile from the stomach, no doubt emanating from the inflamed state of the organ.

The influenza may be considered as an epidemic disease, inasmuch as it is produced by a more extended atmospheric influence, and affects the mucous surfaces extending from the most extreme nasal process to every ramification of the whole pulmonary system, terminating not unfrequently in pneumonia.

The cholera is an epidemic of a different complexion, which affects the chylopoietic viscera, and the hepatic system at the same time, producing a torpid state of the liver by which it locks up, as it were, its secretions, which is evinced by not one particle of bile entering the primæ viæ during the whole period of the dis-

ease; whereas in yellow fever the hepatic secretions are increased, which is clearly manifested by the bilious matter ejected from the stomach as well as the jaundiced state of the skin. Such being the nature of the case, it appears to me that the proper and only general remedy that can be relied upon in yellow fever and cholera asphyxia is the mercurial course—in one instance to carry off the biliary secretions, which are too abundant, and in the other to stimulate into action the whole hepatic apparatus, so that the secretions reproduced may be equal to the emergency of the case. This at first sight appears paradoxical, that the same remedy should be capable of producing two opposite effects of an important nature in the same organ. The enigma, however, appears to me easy of solution. This remedy acts as a specific on the hepatic region by restoring the whole secreting system (however affected as applied to that particular organ) to a normal or healthy state, altogether through the medium of such specific action, which, though true, is difficult *a priori* to comprehend.

Dr. Benjamin Franklin first called the attention of our citizens to the introduction of water from Wissahickon Creek and making the Schuylkill navigable. The first plan seriously considered, of bringing water into the city was by the Union Canal Company, chartered in April, 1792; by a reservoir in Broad above Callowhill Street, then to be carried through the streets into private cisterns and fountains to be pumped up by ordinary pumps; this failed in Councils. After much difficulty, a basin was formed at Chestnut Street, on the Schuylkill, and the water passed to the centre engine house, which was a round building, located in the centre of Market and Broad Streets, built of white marble, which, by cutting off the communication through those streets at that point, made it necessary to form a circular street around the square for the accommodation of the travelling community. This building was removed when the Fairmount building was completed. The water was then raised by steam and distributed through the city by wooden pipes. The works commenced supplying water in 1801. In 1817, the plan previously suggested by Messrs. Graff and Davis was carried into effect by erecting steam water works below Fairmount dam, and the city was supplied from that source. Councils passed a resolution to

build the present water works in April, 1819, since which time they have been in constant operation.

The Pennsylvania Hospital, for the treatment of mental and physical diseases, was instituted one hundred and thirteen years ago, being the first establishment of the kind in this country. It is now twenty-four years since the Insane Department was removed to West Philadelphia. A magnificent building was there erected for their accommodation. The institution, with all its improvements, together with an improved system of treatment, have aided much in facilitating the recovery of its inmates.

It is forty-six years since an asylum was instituted near Frankford for the relief of persons deprived of the use of their reason, which is principally sustained and conducted by the Society of Friends, and has been very efficient in restoring many to their former health and reason, and is still in successful operation in carrying out the beneficent object for which it was instituted.

Three other institutions, intended to alleviate the condition of suffering humanity, will receive a passing notice, namely, the Blind Asylum, the Deaf and Dumb Asylum, and Wills Hospital. The Blind Asylum is located at Race and Twentieth Streets. Although the foundation of it is dated in March, 1833, Dr. Caspar Morris states that in 1824, 1825, and 1826 Mr. Roberts Vaux frequently alluded to the subject of providing means for the Instruction of the Blind, which, through his instrumentality and that of Dr. Morris and J. Francis Fisher, as well as that of some others, had its foundation in 1833. Since which time it has been increasing in extent and usefulness, so as now to be the largest establishment in the world, with the exception of the one in the city of Paris. Mr. Julius R. Friedlander was appointed its first principal, March 3, 1833, by the display of whose talent in this wonderful branch of science, together with the ability by which it has since been managed, the institution has prospered and grown to its present dimensions.

If it is a fact that the sensorium commune is only capable of transmitting a certain degree of sensation externally through the medium of the five senses, and if either one or more of these senses is destroyed by some natural defect in its organization, or

by disease, or by any other casualty whatever, and such a defect of necessity increases the sensibility of the remaining ones, then we can readily understand why the sensibility in the ends of the fingers of the blind, through which their touch is so acute and capable of receiving the most delicate impressions, should manifest themselves in such a remarkable degree as those retaining all their other senses could never attain to, and demonstrates the natural tendency in the human system of restoring, as far as possible, through some other medium, that which is lost, and enables us to recognize clearly the power and beneficence of a Divine Hand in raising up those who shall be instrumental in effecting such glorious results as we see manifested every day in this noble and praiseworthy institution—who are thereby initiating a course of instruction which is capable of restoring in some degree to a social and comparatively useful life those who were previously immured, as it were, in some secluded apartment, as a useless member of society, not unfrequently dependent upon the cold charity of those who are bound by the ties of nature to succor them.

The Wills Hospital had its origin in a will made by James Wills, of this city, on the 8th day of March, 1823, bequeathing to the city of Philadelphia, in trust for the use of Wills Hospital for the Relief of the Indigent Blind and Lame, a sum amounting after the settlement of the estate to \$122,548 $\frac{57}{100}$ . A lot was purchased and a building erected for the purpose in the early part of the year 1832, in Race Street, between Eighteenth and Nineteenth Streets. This beneficent institution has been in successful operation ever since, dispensing relief to all for whose benefit it was founded.

Permit me to call your attention, a few moments, to the subject of American colonization in Africa. The names of Finley and Stockton will never be forgotten in that enterprise. The first public meeting in this country was called by the Rev. Robert Finley, D. D., at Princeton, N. J., in reference to the object; which was prior to the public meeting held in December, 1816, at the city of Washington, at which the Hon. Henry Clay presided. It was then resolved to form a society for the *colonization of the free people of color*, with their consent, in Africa or elsewhere. A

constitution was adopted in January, 1817, when the American Colonization Society held its first meeting, at which time the Hon. Bushrod Washington was chosen President; Rob't Finley, D. D., Gen. Andrew Jackson, Robert Ralston, Henry Clay, and nine others as Vice-Presidents. On the 3d of October, 1817, Dr. Finley, the great pioneer, was called away by an inscrutable Providence to his reward on high. Though Finley rested from his labors, his colonization mantle fell upon his former colonization pupil, Lieutenant Stockton, who was instrumental in laying the corner stone of the Republic of Liberia, by securing for the use of the American Colonization Society Cape Mesurado and the adjoining territory, where Monrovia, the capital of the Republic, is located. The first location proved unfortunate, being an unhealthy part of the coast, where the first colonists nearly all sickened and died—among whom was Dr. Samuel A. Crozer and other able agents. Lieut. Stockton was the medium through which a more eligible location on the African coast was effected, and to his exertions the colonization cause will ever owe a debt of gratitude. Since that time the cause has been gradually progressing, and must and will succeed eventually in civilizing and Christianizing the whole of Africa, under the guidance of an *arm that never fails, but doeth all things well.*

A number of gentlemen, of this city, friends to the formation of an auxiliary society to the American Society, assembled in October, 1826, at the house of Dr. J. K. Mitchell; Samuel Archer, Esq., presided, and Dr. Mitchell was chosen Secretary; at which time it was resolved to form in this city an auxiliary colonization society.

I have felt myself deeply interested in this cause from its commencement, and have been desirous of lending my feeble aid and enlisting as a common hand on that slender and frail barque, which I had faith to believe would be guided by such a pilot as would enable it to ride out every storm of difficulty, and would with certainty arrive at the desired haven at last. The developments of every day have shed such a lustre on this scene that it does not require a prophetic eye to see that at no distant day the consummation of all our hopes, as it relates to the triumphant success of the colonization cause, will be permanently and satisfactorily accomplished.

All that has been introduced into this Address, however incongruous in character, only extends to 1830, as the reminiscences of an earlier day, during my residence in Philadelphia since 1816. Many more incidents and facts might be related or alluded to; but time and space forbid. When we take into consideration the different medical and literary institutions and the numerous benevolent associations of a previous day with which our city was adorned, including the effects of that noble hall which shone so conspicuously on the 4th of July, 1776, shedding such salutary influences over us ever since, can we not truly say that for literature, benevolence, and patriotism, our city occupied the pre-eminent position of that day? Neither do I think that she may not now justly claim the same position in every sense of the word, with the exception of losing *cast* in a commercial point of view. She is no longer, I am sorry to say, the commercial metropolis of this country, which I have no doubt she might have retained, had her merchants and business men manifested the same thrift and enterprise in commercial affairs as they did in the earlier period of her history.

## A D D E N D A .

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THE following institutions were in existence prior to 1830, in the city of Philadelphia :—

### *Dispensaries of Public Charities.*

1. The Philadelphia Dispensary was established in 1786. A commodious building was erected for it in Fifth Street between Chestnut and Walnut Streets in 1801, where it is still in successful operation.

2. The Northern Dispensary was established in 1816 at No. 373 N. Front Street.

3. The Southern Dispensary was instituted in 1816 in Shippen Street between Third and Fourth Streets, and still continues in operation.

The public Almshouse, or House of Employment for the Poor, situated in the square between Spruce and Pine and Tenth and Eleventh Streets, which was established at an early day, is now removed over Schuylkill.

The Friends' Almshouse, in Walnut between Third and Fourth Streets, in operation for many years, has been long since removed.

The Orphans' Asylum was instituted by a society of ladies in 1814. The building was erected in 1817 for the accommodation of the orphans, and was destroyed by fire in 1822, when twenty-three of the inmates perished. It has been rebuilt, and is now in the full tide of successful operation.

St. Joseph's Orphans' Asylum for Catholic Orphans was established in 1807.

The Asylum for Indigent Widows and Single Women was instituted in 1817.

The Pennsylvania Institution for the Deaf and Dumb was incorporated in February, 1821, and is located at Broad and Pine Streets.

Christ Church Hospital for Widows and Single Women was founded by Dr. Kearsley, a physician of Philadelphia, in the latter part of the last century.

The Provident Society was established in 1824, No. 3 South Alley. An Asylum for Lost Children in 1825.

Female Society for the Poor was formed 1793.

Female Hospitable Society was instituted in 1809, No. 1 Appletree Alley.

The Savings Fund Society was instituted in 1819, No. 66 Walnut Street.

Fuel Savings Society was established in 1821.

Soup Societies in different parts of the city were organized about the same time.

The Humane Society for the Recovery of Drowned Persons was established in 1780.

The Magdalen Society was instituted in 1800.

The Philadelphia Society for Alleviating the Miseries of Public Prisons was formed in 1787.

Besides the institutions just alluded to, there were in 1835 upwards of 150 societies to afford their members and strangers assistance.

The House of Refuge was projected in 1826, and commenced operations in 1829 at the corner of Ridge Road and Coates Street.

#### *Banks.*

The United States Bank was established in April, 1816. Capital, \$35,000,000.

Bank of North America, the oldest bank in the United States, was established in 1781. Capital, \$1,000,000.

Bank of Pennsylvania was incorporated in 1793. Capital, \$2,500,000.

Bank of Philadelphia was instituted in 1804. Capital, \$2,000,000.

Commercial Bank, incorporated in 1814. Capital, \$1,000,000.

Mechanics' Bank, incorporated in 1814. Capital, \$1,000,000.

Schuylkill Bank, incorporated in 1814. Capital, \$1,000,000.

Bank of the Northern Liberties, incorporated in 1814. Capital, \$200,000.

Girard Bank; the capital supplied by Stephen Girard.

Bank of Penn Township, incorporated in 1828. Capital, \$250,000.

Bank of Southwark, incorporated in 1825. Capital, \$250,000.

Kensington Bank, incorporated in 1826. Capital, \$250,000.

#### *Marine Insurance Companies.*

An insurance office was established as early as 1720 by John Copson. In 1792 William Bradford opened an insurance office—the first joint stock company for that purpose was incorporated in 1794.

Insurance Company of North America. Capital, \$600,000.

Insurance Company of Pennsylvania, incorporated 1794. Capital, \$500,000.

Union Insurance Company, incorporated 1804. Capital, \$300,000.

Phœnix Insurance Company, incorporated 1804. Capital, \$480,000.

Delaware Insurance Company, incorporated 1804.

Philadelphia Insurance Company, incorporated 1804. Capital, \$400,000.

United States Insurance Company, incorporated 1810. Capital, \$200,000.

Marine Insurance Company, incorporated 1809. Capital, \$300,000.

Atlantic Insurance Company, incorporated 1825. Capital, \$300,000.

#### *Fire Insurance Companies.*

Philadelphia Contributionship, incorporated 1752, was mutual.

- Mutual Insurance Company, incorporated 1784.  
 American Fire Insurance Company, incorporated 1810. Capital, \$500,000.  
 Fire Association, incorporated 1820.  
 Pennsylvania Fire Insurance Company, incorporated 1825. Capital, \$400,000  
 Franklin Insurance Company, incorporated 1829. Capital, \$400,000.  
 Pennsylvania Insurance for Lives, incorporated 1812. Capital, \$250,000.  
 Chamber of Commerce was formed in 1801.

*Literature, Sciences, Arts, &c.*

The City Library, a noble institution, owes its origin to Benjamin Franklin. It was founded in 1731, and kept in a small room in Pewter-platter Alley. In 1773 it was transferred to Carpenters' Hall; in 1791 to the neat edifice in Fifth Street below Chestnut Street. The Loganian Library was incorporated with it, and it is now called the Library Company of Philadelphia.

The Athenæum was established in 1814, nearly opposite the Library of Philadelphia in Fifth below Chestnut Street.

Friends' Library, commenced in 1740 by Thomas Chalkley at Fourth and Arch Streets.

Apprentices' Library was instituted in April, 1821.

Mercantile Library was instituted in 1822.

Southwark Library was commenced in 1822.

The Northern Liberties Library was established in 1830.

The Law Library was instituted in 1802 for the accommodation of the members of the bar.

The American Philosophical Society, founded in 1743, principally by the exertions of Dr. Franklin, was united in 1766 with the Society for Promoting Useful Knowledge. In 1785 a commodious building on State House Square was erected for their accommodation.

The Academy of Natural Sciences was formed in 1812 and incorporated in 1817.

The Philadelphia Museum was commenced in 1784 by Charles Wilson Peale.

The Pennsylvania Academy of Fine Arts was founded in 1805 by voluntary contributions of our citizens, and was chartered in 1806.

The College of Physicians was instituted in 1787 for the advancement of medical science, the lessening of human misery, and the investigation of diseases and remedies peculiar to this country.

The Philadelphia Medical Society was incorporated in 1792.

The Philadelphia College of Pharmacy was instituted in March, 1821, and incorporated in 1822.

The Kappa Lambda Society was formed about the same time to promote social intercourse and harmony among medical men.

The Franklin Institute for the Encouragement of Manufactures was established in 1824.

The Musical Fund was established in 1820 and incorporated in 1823, and the hall built in Locust above Eighth Street.

The PRESS of Philadelphia is decidedly beyond that of any other city of the United States in the number and character of its productions.

The first prison in Philadelphia was situated in Letitia Court, opposite Penn's Mansion, before which stood his gate to the surrounding enclosure, and before which the proclamations of the day were made. Penn's Mansion was built in 1682, and now stands (1865), and occupied as Penn Hotel, apparently in good condition. The bricks of which it was built were brought from England. The prison was then removed to Third and Market Streets. In 1784 the buildings and walls were pulled down and sold by government.

The Walnut Street Prison, at the corner of Walnut and Sixth Streets, was commenced in 1774, being 200 feet on Walnut, and 400 feet on Sixth Street, and was built of stone.

The Arch Street Prison, at Arch and Broad Streets, erected by the State in 1807, was afterwards purchased by the city and county and used as a debtor's apartment and for untried prisoners, and also for vagrants.

The Eastern State Penitentiary, in which the separate confinement of every convict day and night was to be fully accomplished, was commenced in May, 1823, in Coates Street, and is the most extensive building in the United States.

The first regular theatrical entertainment by a regular company was in April, 1754, in a building erected for a store in Water Street, north of Pine Street. In 1766 a theatre was erected in South Street between Fourth and Fifth Streets. In 1792 a theatre was erected in the Northern Liberties in Front Street above Poole's Bridge. In 1793 a theatre was erected in Chestnut Street near the corner of Sixth Street. The Arch Street Theatre in Arch above Sixth Street, was built in 1828. The Walnut Street theatre, at the corner of Ninth and Walnut Streets, called the Olympic Theatre, was built in 1809, originally constructed for a circus.

There were six public squares laid out by Penn in Philadelphia—Washington, Independence, Franklin, Penn, Logan, and Rittenhouse Squares.

#### *Educational Institutions.*

The building occupied once by the University of Pennsylvania, in Ninth Street below Market Street, was *originally* intended for Washington's residence, which, being declined by him for that purpose, was purchased by the trustees of the University in 1798. An addition to it was erected in 1807 for the accommodation of the Medical School, but was torn down in 1829 for the erection of the present buildings—one for the literary and the other for the medical department.

The Academy of the Protestant Episcopal Church was instituted originally in 1784, and incorporated and endowed March, 1787.

Friends' Schools for Promoting Literature, was incorporated in the charter granted by William Penn in 1697.

*Lectures on Science and the Arts.*—The number of private lecturers on

various branches of science and the arts, may be estimated at about 70. There are still many other academies and seminaries for classical learning and mathematical science that have not been enumerated for want of space.

*Public Schools*, for the purpose of educating children without means, were very early introduced among us, which went into full operation in 1818. During twelve years more than 34,000 children were instructed in them.

*Sunday Schools*, to the number of 125, where 14,581 scholars received instruction, were in operation in 1816.

The Philadelphia Society for the Establishment and Support of Charity Schools was instituted in 1799.

The School for the Education of Negro Children was founded by Dr. Bray in 1696.

The Pennsylvania Society for the Promotion of Public Schools was established in 1828.

The Aimwell School Society was established in 1796 for the free instruction of female children by members of Friends' Society. The Philadelphia Union Society was instituted in 1804 for the same purposes by ladies of the Presbyterian Church.

Free Schools of the Episcopal Church, and of the German Lutherans and Calvinists, also a free school attached to the University of Pennsylvania, were also established.

Two Arsenals were established in the vicinity of Philadelphia, one on the Schuylkill, and the other near Frankford.

The Marine Asylum, an immense structure near the Schuylkill, was erected early in the present century.

The entire amount expended by the city of Philadelphia on the successive operations for the introduction of Schuylkill water is \$1,443,385.36. By the method adopted the water raises itself, requiring only two men to attend to the raising of 2,000,000 of gallons every twenty-four hours.

The Fire Department is very efficient in Philadelphia, embracing 27 engines and 15 hose companies.

#### *Internal Improvements.*

The Chesapeake and Delaware Canal was early opened.

The Union Canal Company was incorporated as early as 1791.

The Schuylkill Navigation Company in March, 1815.

The Lehigh Navigation in 1822.

There are two bridges over the Schuylkill, one at the Falls and another at Flat-rock, and a floating one at Gray's Ferry, besides the Market Street Bridge. The latter, a costly structure erected by a private company and incorporated in 1798, was six years in building, costing \$235,000, besides \$40,000 for the site.

The bridge over the Schuylkill below the water-works consists of a single arch.

The public buildings consist of the old Court House at the head of Second and Market Streets, erected in 1709, forming the eastern extremity of the market.

The State House was commenced in 1729 and finished in 1735.

The Almshouse over the Schuylkill is of magnificent proportions, 500 feet front.

Philadelphia is celebrated for its markets: High Street Market, erected in 1720. South Second Street Market; North Second Street; Callowhill Street, Kensington, and Wharton Street Markets.

Two shot towers were erected, one in Southwark in 1807; the other, now removed, stood near Schuylkill, in 1808.

The *Monument of Penn's Treaty* was erected in 1682. The stately tree under which the treaty was made was uprooted by a storm in 1810, being 283 years old. It was 155 years old when the treaty was made.

The Board of Health is appointed annually by the councils of Philadelphia and commissioners of adjoining districts. There are also appointed by the Governor a physician who resides at the Lazaretto, called the Lazaretto Physician, and another residing in the city, called the Port Physician, a health officer, and a quarantine master. The quarantine operations commence June 1, and close October 1, each year.

These reminiscences only extend to 1830.

When the greatest number of the institutions and associations above alluded to were formed and in operation, the population of the city was less than 200,000, while now it exceeds 700,000.





