

FRONTIER MEDICINE

By Kathy A.W. Voegel

GRADE LEVEL: Middle School

Prepared in partial fulfillment of requirements for  
"INDIANA AND THE NEW NATION, 1776-1876"  
a project of the Historic Southern Indiana Project  
of the University of Southern Indiana  
8600 University Boulevard  
Evansville, Indiana 47712  
(812) 465-7014

FUNDED BY THE NATIONAL ENDOWMENT FOR THE HUMANITIES

THIS DOCUMENT MAY NOT BE DUPLICATED WITHOUT WRITTEN PERMISSION FROM  
THE UNIVERSITY OF SOUTHERN INDIANA



FRONTIER MEDICINE

1800-1840

Kathy Voegel

"To the pioneer doctor who boldly faced the wilderness;  
and to the pioneer who bravely faced the doctor."

"Indiana and the New Nation, 1776-1876"  
Historic Southern Indiana Project of the University  
of Southern Indiana  
funded by the Education Division of the National Endowment for the Humanities

## Frontier Medicine

During the first half of the nineteenth century, medical science lacked the benefit of antibiotics and anesthesia. It did not understand the germ theory. Today, we know that many diseases are spread and healing is slowed down when germs are present. Frontier families did not understand the importance of sanitation, the study of bacteriology, personal hygiene, and the importance of nutrients in maintaining good health. We sometimes refer to the vast unknown as a frontier. In a sense, the frontier doctor was confronting two frontiers. The pioneer physician had to deal with the struggle of life on the frontier and tried to solve the mysteries of disease at the same time. Today, we find diseases like AIDS and cancer very frightening because we do not know what causes them. Without knowing what causes a certain disease, medicine is often guesswork. Frontier doctors used intuition in making diagnoses and depended on upon basic observation techniques. The poorly equipped doctor relied on pulse readings and examined the tongue and then used his fingers, eyes, ears and nose to examine the color and temperature of the skin and listened to the sound of the patient's cough or breathing rate.

Even without the luxury of understanding what caused disease, the early medical practitioner was called upon to respond to the sick and to those suffering from frontier accidents or injuries. Doctors rode on horseback, day and night, seven days a week to care for patients. The trips were often long and unpleasant. Dr. Daniel Drake, a Cincinnati Ohio medical practitioner estimated that the early physician in the midwest traveled 12-20 miles per day or 2-4 hours on the road. One such doctor in Indiana wrote that "I found myself lost in the woods at night and had to tie up my horse and make my bed on the ground until morning." The long solitary rides amidst swamps and swollen streams were hard. The medical practitioner often practiced with only a few instruments and medical resource books because of the high cost and scarcity of these items. Until 1810 most doctors were trained by an established physician for 2 to 3 years as an apprentice. Very few physicians in Indiana were university trained in the first decade of the nineteenth century. The two elements that shaped frontier life in Indiana also described medical practices and health care in frontier Indiana. Those two elements of life were isolation and self-sufficiency. One of the most remarkable qualities of the frontiersman was the ability to make do with what he had.

The medical practitioner often practiced medicine with only a few instruments and medical books. A few lancets, scissors, a turnkey, straight and curved needles, scissors, a trephining tool that would penetrate the skull, forceps,

and the bonesaw were the basic saddlebag tools used by the doctors in frontier Indiana.

Before 1810 folk medicine was extensively practiced on the frontier with remedies and treatments being passed down from generation to generation and many French and Indian practices adopted as well. The doctor had to be his own pharmacist. He made his own pills and tinctures, compounded all of his medicines and generally carried all he required in his saddlebags.

Physicians with university training filtered into the west after 1810 and established their medical practices in the older and more established settlements like Vincennes. Of 16 physicians that settled Vincennes during the 1810 to 1840 period, 10 doctors were university trained, owned good collections of medical books in their libraries and some kept journals, diaries and account books describing their caseload.

Account books, journals, diaries and probate records are extremely interesting and wonderful source materials for junior high students. If your students have access to the Indiana State Library and Indiana Historical Society Library, their collection is superb. County and family collections make valuable historical research materials for students. Below I have listed several that are helpful and interesting for use in the junior high classroom.

- Dr. Lawrence Albert Johnson Account Book 1837-1838  
(Rossville)
- Dr. Albert Gore Ruddell Account Book 1840-1847  
(Allisonville)
- Dr. William Lindsay Journals no. 1-4 1836-1855  
(Richmond)
- Dr. Jabez Percival Account Book 1830-1841 (Ripley Co.)
- Dr. William W. Hitt Journal and Account Ledger 1819-1839  
(Vincennes)

Physicians traveled through adverse weather and still were never certain that they would be paid for their services. Newspapers in Vincennes and other Indiana newspapers were filled with advertisements warning patients to settle their accounts. Sometimes doctors would be paid for the services rendered by trade goods, seasonal crops, vegetables or smoked meats. To supplement their incomes, physicians sometimes found secondary careers such as postmaster, legislator, surveyor or druggist.

As more professional doctors came to the west, folk medicine gave way to heroic medicine. Heroic medicine rejected the "nihilistic" or "fatalistic" surrender or passive acceptance of disease. Along with the influence of the more educated physicians, they maintained a more aggressive and interventionist attitude toward disease.

In their effort to combat disease in the face of insurmountable odds with their meager supply of medical tools and inadequate knowledge, the heroic practitioners believed that disease had to be purged or flushed out of the body. It was believed that by flushing out the disease that the purge would reduce inflammation, relieve congestion, alleviate spasms, stop hemorrhaging, stifle the pain and soften the racing heart beat. By depleting the patient's excess fluids (humors), the body would then be brought back into balance. The four standard flushing methods were bleeding, purging with cathartics, blistering, and using emetics to cause vomiting. The most used therapy was "blood-letting" or venesection. A patient's vein would be opened by a lancet and blood would flow into a cup until the "correct" amount had been removed. Doctors would charge anywhere from 25 to 65 cents for the bleeding. If it was impractical or inconvenient to use the lancet, scarificator and cupping glasses for massive bleeding, leeches would be used to draw blood.

In addition to blood-letting, "heroic" doctors administered heavy doses of purgatives - powerful laxatives that cleansed the system of irritants and would specifically evacuate waste from the colon or bowels. The most drastic purgatives were cathartics like jalap, croton oil and calomel. The less harsh cathartics were tamarind, nanna, senna, cassia, castor oil, magnesia, and rhubarb. The most common "heroic" purgative or cathartic was "calomel." By cleansing the lower gastrointestinal tract, stomach upset would be relieved and the disease would be purged from the body. Calomel was mercury chloride. Unbeknown to the heroic doctors, calomel would cause mercury poisoning. In doctor's diaries the researcher notices many notations describing the excessive salivation of the patient, foam on the tongue and that the patient would drool. This was seen as evidence or proof that calomel was ridding the body of excess fluids and the disease was being purged called "ptyalization." But in actuality, the excessive salivation, gum soreness, loss of



teeth and rotting of the jaw-line were symptoms of mercury poisoning. The effects of mercury in the body accumulate and cause decay. Gamboge, manna, cream of tartar and aloes were also used as cathartics or purgatives. Blood-letting and calomel were described in many letters and never described as a pleasant experience. John Ingle wrote to his brother that "I have been labouring under an inflammation in my right eye...I have been cupped, bled and blistered and half-starved in the bargain, yet it is still bad. And when I must resign my breath, pray let me die a natural death and bid you all a long farewell without one dose of calomel."

Emetics were used to cleanse the stomach and upper gastrointestinal tract. Ipecacuanha, tartar emetic, arsenic, mercury, lime, copper, iron, nitric acid, and sulphate of zinc. Emetics caused vomiting to cleanse the body of whatever was causing the stomach to ache. Other drugs produced different ways of flushing out disease like salivation, sweating, or urination. Blood, pus, vomit, sweat, feces or urine were the tangible evidence that the dose was working well and the illness was being fought. Emetics like antimony wine, ipecac, and antimony would cause sweating. Then the heroic doctors would wrap a patient in a blanket and increase the temperature or create steam in the room. Copious perspiration would then be an indication that the disease was being fought effectively.

Heroic doctors also used blistering of the skin around the location of the patient's complaint. To blister, a physician would use a tartar emetic, a very harsh compound to burn the skin - probably to what we would call a second degree burn. The blister would almost always become infected and pus would form. The pus would be heroic "evidence" that the disease was being drawn out of the body.

The heroic practitioners believed in taking a very active stand against disease. The physicians intervened as vigorously as possible to defeat the disease. Patients and their families wanted visible signs that the treatment was working. The heroic patients suffered uncomfortable and excessively severe treatments. As the well-intentioned effort was being made by the doctors, they hoped for results would be lowered body temperature, lowered blood pressure, a softened heart beat, relaxed muscle and a decrease in body tension. The change in condition, then would show proof that the patient's "feverish and overstimulated" body was slowing down.

The first alternative to heroic medicine came from physicians who did not believe in massive blood-letting or the drastic purging. Samuel Thompson developed herbal remedies and steaming as treatment for illness. Thompson's six patented remedies and steam baths were safer and were available to

the layperson and his family. Thompson's number one remedy was made up of Lobelia which caused violent vomiting. His number two medication was made up of capsicum (cayenne pepper to heat the mouth and tonsils), rhubarb, a botanic cathartic, peppermint an aromatic mint and catnip that would produce sweating, diarrhea and nausea. His number three patent was made of onion, beef suet, honey flour and charms for an anodyne necklace or poultice. Tonic numbers 4,5,and 6 were made up of rosemary (marsh), spruce (statica) sumac, bayberry (myrrica) and pond lily (nymphaea) leaves to make an assortment of tea tonics for soothing the patient and providing nourishment. The treatments usually did no harm to patients and some of the botanics did have medical value. The foxglove plant gave us digitalis (lanoxin) that regulates heart beat. The opium poppy gave us morphine for pain relief and works as an opiate. Ergotamine (ergostat and midrin) regulates blood flow in the brain and regulates menstrual cycles. Willow twigs contain salicylic acid (aspirin) for pain relief. Peruvian barks gave us quinine which is used for treating muscle cramps and malaria.

Thompsonian practitioners had no formal medical training and were distrusted by heroic practitioners. Medical societies were formed throughout the United States to establish stricter licensing laws for medical practitioners. Botanic medicine grew in popularity especially where there was a shortage of regular doctors. During the Jacksonian period, the idea of self-dosage was attractive to the independent minded "self-made" man. Thompsonian patented medicines were imitated. By 1827, the legitimate Thompsonian practitioners were discredited by the many pretenders and con-men.

Homeopathy was the most successful alternative to heroic medicine. Dr. Samuel Christian Hahnemann developed a prominent research laboratory for drug testing. Instead of bleeding, blistering, or using massive purging, he believed in exercise for the body, proper nourishment and that fresh air could ward off disease.

For the first time  
sick rooms were not  
sealed off and  
completely closed.

Hahnemann's contribution to medicine was his study of pharmacology. He tested drugs and recorded his findings of the effects of the drug on the human body at many dose levels. He did controlled experiments on himself and recorded the effects of the drugs and different doses on the body.

Homeopathic practitioners were well educated and some were converted heroic practitioners who did not agree with massive drug regimen and drastic bleeding.

Hahnemann and his Homeopathic theory held that to restore the body's vital energy that fights disease, that a person should take a drug in small doses that gives the body the same symptoms as the disease. In the doctrine of similars, (drug "like disease") the drug regimen was given in a small dose. The small dose would give immunity to the patient because the result would provide an artificial symptom. The most important part of his work came from his pharmacopeia which described the use of drugs and medicines and gave what the dose should be for specific symptoms. Then, the practitioner could question his patient as to his symptoms and scan Homeopathic drug provings to find similar symptoms and dispense the correct drug in diluted dosages. Everything in the Homeopathic medicine was written down, and observed, tested, and evaluated by the scientific method. The drug provings and their diluted dosages seemed so much safer. Heroic medicine was based on empiricism - trying large doses of drugs and then seeing if it was too much or not enough. Nothing was systematic or measured with scientific accuracy.

The heroic practitioners began to question themselves and dissension within the medical community caused the creation of the American Medical Society.

Conflict and the medical science seem to be inseparable companions. Controversy did not disappear with the emergence of the American Medical Association and a blending of heroic, homeopathic and eclectic medicine. Controversy continued to exist - and exists today. Conflict is inevitable when there is inadequate knowledge and insufficient information. Research, experimentation, and clinically controlled testing began after 1850. The conflict between heroic, homeopathic and Thompsonian medicine would bring about this change and the quest for knowledge. The 1800-1840 period in medical history was a precursor to the scientific method of inquiry and stimulated the medical exploration that followed.

The unresolved and controversial questions continue today as we try to find the means to prevent and treat diseases like AIDS, cancer, and alzheimers. Some people compare medical science to constant efforts in solving biological riddles. Controversy and conflict are inherent in medical science.



This study of frontier medicine can be used in the junior high classroom as an enrichment program to stimulate student's curiosity and students can choose general topics that interest them. Similar enrichment topics could be transportation, music, fashions or clothing, and architecture. These topics would be given a week or two before Easter vacation. The enrichment topics allow students an opportunity for growth in independent study or cooperative learning. This type of enrichment program provide information for students, enable them to process information and evaluate primary resources and presenting new information to classmates. To make history class relevant and meaningful to our students, we have to make history real. History after all is a record of real people and their actions. Medical history can be an avenue to touch those "real people."

Throughout our history there has been an endless succession of adventurers. Immigrants tossing in the ocean for many weeks, a young bomber pilot crossing the Atlantic in 6 hours, and our historic missions to the moon. The frontier doctor was an adventurer in the battle against the diseases of his day. Frontier medicine can make use of interpretive and descriptive history techniques to make the story of humankind's struggle for victory over disease that continues today. The unit will allow the student to find "human" element in history and the opportunity to understand the challenges that the frontier doctors had to overcome in their pursuit of knowledge.

This enrichment unit could be incorporated later in the month when the classroom groups will develop their own newspaper for a specific time period. Besides the news stories, editorials, human interest stories, pictures, ads, cartoons, a medical "advice column" could be created for "heroic, homeopathic, or Thompsonian" practitioners.

A culminating trip to the Indiana Museum of Medicine would be an excellent way tie together yesterday with today and get a better perspective of the rapidity of our medical progress in 150 years.

A trip to the local pharmacy to examine labels will link yesterday to today - as would a trip to the local health store.

In the following pages I have listed a range of ideas for elementary, junior and senior high classes. By assessing your students and their abilities, you can pick those activities that might work in your classroom.

- A. As an attention-getter or a motivator:
- Video "Little House on the Prairie" with the main thrust being the treatment given by the country doctor.
  - Go on a guided imagery walk in the woods - use a narration describing the wilderness in frontier Indiana.
  - Have students describe the prescriptions or remedies that they have taken and for what ailments.
  - Discuss how early settlers lived. Weather and Health were two factors that pioneers could not control. Is this true today? Imagine through discussion techniques how early doctors lived and how were they paid.
  - Frontier medicine was a great equalizer. A person's wealth could not buy better health care. Is this true today?
  - Discuss the tools and medical technology that they did not have.
  - Discuss the tools and knowledge that they did have.
  - Have students try to identify unknown tools.
- B. Show slides of actual doctor's instruments or contact Katherine Mandusic McDonell at the Indiana Medical History Museum in Indianapolis for the medical history kit which includes:
- 3 different "doctor's bags" each containing various instruments used from 1830-1990.
  - A saddlebag from the early nineteenth century containing medicine bottles labeled calomel, jalap, rhubarb, etc.), a lancet, amputation kit, pocket surgical case, bandages, wood splints and several home remedies.
  - A buggy case from the late nineteenth century containing an otoscope, ophthalmoscope, single or monaural stethoscope, bottles containing pills, tonics, hypodermic syringe in leather case, metal splints, amputation kit and instruments.
  - Modern doctor's bag containing rubber gloves, surgical mask, modern stethoscope, ophthalmoscope/otoscope, disposable hypodermic needle, modern fracture equipment, plaster for casts, antibiotics, leaflets on CAT, PET scans, x-ray film, cholesterol test results.

- Students will conduct oral history interview with parents and grandparents. These interviews will allow students to make comparisons of technology and improved medical knowledge.
- Study the specific differences between Heroic, Thompsonian, and Homeopathic medicine.
- Let the students draw out a disease and pick which type of medical theory they prefer.
- Let students get into pairs and one will be the patient with a head injury and the other would be a doctor who would prescribe a remedy according to one of the three theories.
- Each role player can write a short description of feelings.
- Match up 1840 tools with the equivalent tools of today.
- Match illnesses with remedies. Compare with today's remedies.
- Students can list actions that they undertake to prevent the spread of germs. What kinds of unintentional actions might have been done in the 1800-1840 time period that would have spread disease without the pioneers realizing what they were doing.

C. Present the different philosophies and theories. List the remedies and the diseases that they were trying to overcome.

- Use information about Vincennes practitioners from paper entitled "Frontier Medicine: Historical Perspectives of Medical Practices in Vincennes 1800-1840." Match doctors with theories. Then use local resources in community and local library collections, newspapers to find doctors from own community. Did Homeopathic, Thompsonian, or Heroic medicine become more popular in your area of the state.
- Discuss similarities and differences between the 3 philosophies.
- Photoessays could be written describing events occurring in pictures on the following pages.

- D. Each student can adopt their own philosophy of medical care in frontier Indiana.
- Students can justify why they would prefer a specific medical theory. Write a personal account of what they would object to and why. Find today's remedies of symptoms and diseases and why they are better.
  - Write a skit about an early doctor and perform it.
  - Draw a picture, cartoon of a scene involving a medical practitioner from 1800-1840.
  - Make a poster of an early doctor's fees or one possibly posted in his office or newspaper ad.
  - Bring in samples of herbs, spices - medicine labels with ingredients listed. Borrow a pharmacopeia from the local library or pharmacy.
  - Write a story about 2 pictures (a hospital in 1840 and 1990).
  - A culminating trip to Vincennes (Lewis Library) to examine diaries, journals, probate records of early doctors. Visit local library as well as Indiana Historical Library.
  - Travel to Conner Prairie to visit Dr. Cambell's office and drugstore.
  - Tour the Indiana Medical History Museum and see the medical progress in detail.

### Probing Questions:

Throughout the 1820-1840's there was an irrepressible idea called Jacksonian Democracy that infected the national conscience. The "self-made man" or the "common-man" in America controlled his own destiny. Anti-establishment or anti-aristocracy was found on the frontier. How would the popularity of self-medication affect the medical institution?

When the Heroic practitioners were threatened by alternative medical practices, organizations were spawned to protect their established leadership in their profession. Medical Societies were formed to create stricter licensing laws. Is this a form of censorship?

Do organizations sometimes blackball those who with divergent opinions?

How do we react when we are threatened? What kinds of walls do we construct to preserve our station in life? What are some examples of medical or other types of censorship?

(chiropractors, physical therapy, those medical practitioners that advertise without AMA approval)

What kind of problems did William W. Hitt and his partner Orrick have in transporting medicine and medical supplies? How did they react to faulty packaging of medicines? What recourse did they have?

If you were a pharmacist at Hook's and you received mishandled goods what recourse would you take to solve your dilemma? How was this different from the Hitt and Orrick problem-solving steps?

In the course of the Hitt and Orrick Journal, we find that they sent large sums of money with travelers to insure safe delivery instead of using the mails. How dangerous was this practice? How is this different from today?

How would you describe this phrase and the importance that is put on it today versus 1840. "A man's word is his honor."

There is much information on the use of abortions in the nineteenth century to terminate pregnancies. Many drugs were available to induce an abortion on a fetus. Abortions were legal in the state until the twentieth century. How has the state of Indiana responded to the issue of abortion throughout our history? Describe the legislative session of 1990 and what impact the issue of abortion will play in the November elections of 1990.

Instead of dismissing the period of 1800-1840 medical care as being tragic and cruel - medical historians try to understand what made it meaningful-what made it successful. There was possibly an element of trust between patient and doctor that made the course of therapy work.

This period saw the decline of folk medicine and blood letting and introduced alternative medicines. The new idea that some illnesses are self-limiting and that the patient will survive even without treatment. That drugs can be effective in small or diluted dosages and that massive doses are not always necessary or effective.

Local collections of medical diaries, journals, account ledgers and probate records are windows of a larger world. The local history was made by people like you and me at the local level. Indiana history is a small part of the broader medical experience nationwide.

Nineteenth century medicine did work in Vincennes, Indiana. We cannot judge early nineteenth century medical successes by today's criteria or by the efficiency standards provided by our twentieth century medicine and pharmacology.

Our three most deadly diseases in the U.S. today are Coronary Heart Disease, Cancer and Stroke. These risk factors that predispose our top three killers in our society were not evident in the 1840's. The degenerative and progressive diseases were not threats to life in this period probably because of the sheer physical exercise required by work, travel and daily survival. These activities probably promoted cardiovascular health. The frontier diet was indeed, heavy on the salt, use of animal fats and frying foods in fat was popular but was probably offset by the other factors. Fresh air and poor insulation probably made environmental carcinogens non-existent. Infectious diseases were probably just quicker killers.

Other activities:

Collect photographs and make a time line in the classroom showing the changes in medical technology.

Document discussion and discovery.

Imagine that you are a young historian hired by the Indiana Medical History Museum to examine medical artifacts given as gifts to the Museum by physician's family. Tools are unknown. How could you go about identifying medical artifacts.

Search through probate records and check bills charged for services rendered and what medicines were used.

How did politics affect the establishment and chartering of the Medical University at Vincennes?  
Do politics affect the building of hospitals and universities today? How about highways?

After your visit to the Indiana Medical History Museum look at questions provided by Mike for field trips and museum visits.

Every year we have a type of social studies fair but we call it the Superbowl of History. The work completed in this medical unit could be included in this presentation to the community of work done in our classes at Castle Jr. High. The classes cooperate in this effort. My students prepare food items that reflect the particular era like cornbread, chicken chowder, hot tea, grits and maple syrup. PTA, community leaders and students are all invited. We usually have a TV newscaster or weatherperson or faculty member be judges for the displays and at the Superbowl Quiz. We also have a contest between classes in displaying their newspapers from the different time periods.

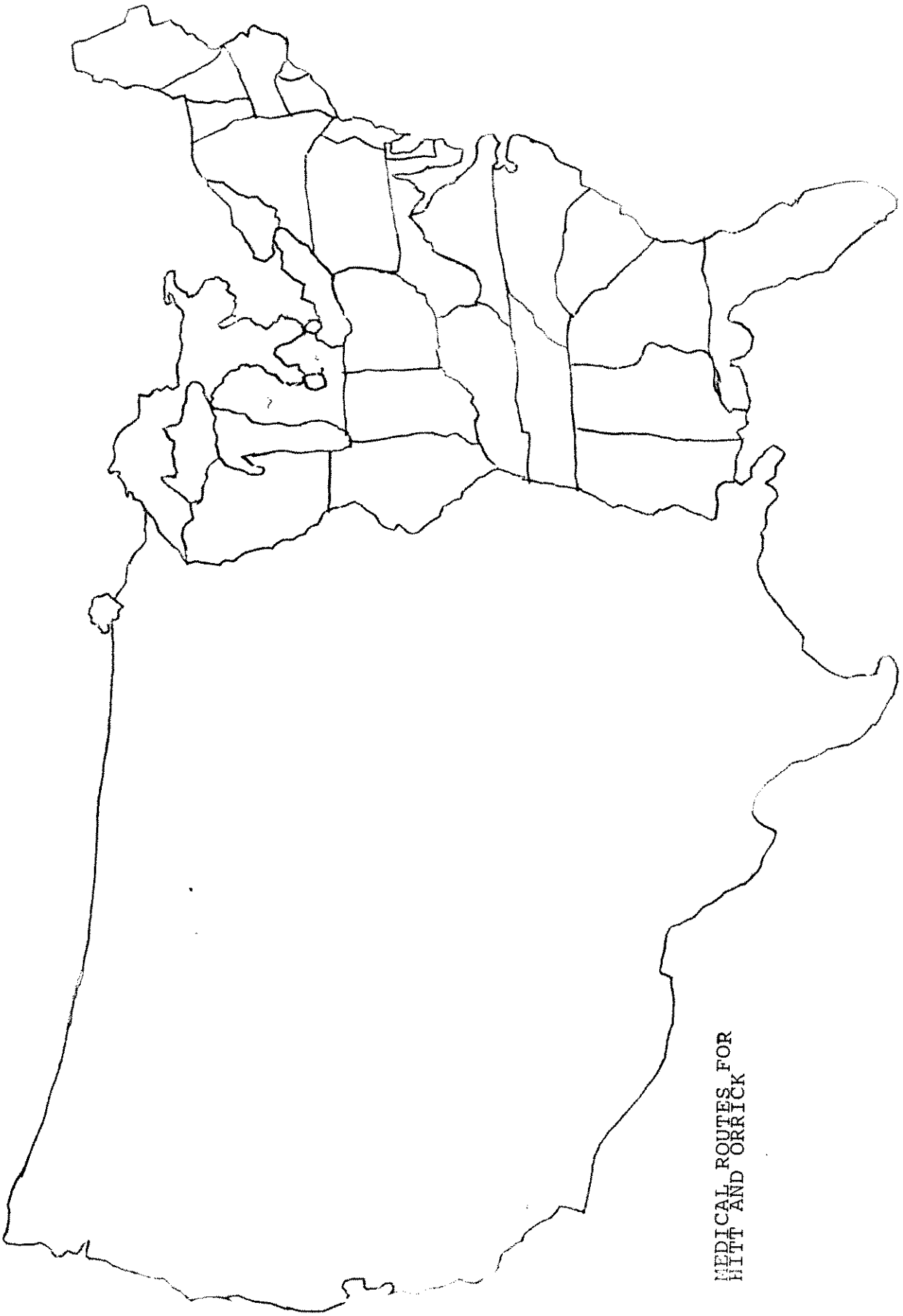


## Medical Routes for Hitt and Orrick

1. Map will enable students to identify significant geographic locations that were important for medicine transportation for frontier medical practitioners and druggists.
2. Students will be able to identify and label the Wabash, Ohio and the Mississippi River. Locate the following towns which were important for medicine distribution.
  - a. Vincennes, Indiana
  - b. Louisville, Kentucky
  - c. Baltimore, Maryland
  - d. Albion, Illinois
  - e. Evansville, Indiana
  - f. Cincinnati, Ohio
  - g. New Orleans, Louisiana
3. Students will be able to compare overland routes and water routes. Students can describe the advantages of traveling by water and by land and then describe the disadvantages of the same.

### Instructions:

1. Trace the Ohio, Wabash, and the Mississippi River with a blue colored pencil and name them in all capital letters.
2. Include the larger bodies of water: Atlantic Ocean, Pacific Ocean, Gulf of Mexico and the Great Lakes. Use a black ink pen to identify these large bodies of water.
3. Draw an inverted v for the Appalachian Mountain range. Use brown colored pencil to label the mountain range with symbol.
4. Label and pinpoint the towns below with the appropriate color.
  - Vincennes, Indiana - Green
  - Louisville, Kentucky - Red
  - Baltimore, Maryland - Purple
  - Albion, Illinois - Yellow
  - Evansville, Indiana - Orange
  - Cincinnati, Ohio - Brown
  - New Orleans, Louisiana - Pink
5. Students should try to estimate using horseback mph, stage-coach mph, flatboat mph and steamboat mph how long each trip would take. Students can then write a story about imaginary exploits if they were traveling to pick up medicine.



MEDICAL ROUTES FOR  
HITT AND ORRICK

Childhood diseases of mumps, measles, chicken pox, diphtheria, scarlet fever and influenza were prevalent on the frontier. To treat a fever heat was applied steaming was the preferred treatment. We know today that the best way to bring a fever down is to apply cold compresses and soak in a cool bath.



Catarrh was described as our cold, hay fever and influenza symptoms would be like: Congestion, fever, achiness and sore throat.

Historical fiction or pictorial essays could be used in the unit by using the pictures below. Students could describe what action is being observed in the picture.

Ministers were the first doctors the ministered to the soul and to the body.



This gentleman is suffering from the "heroic" cure.

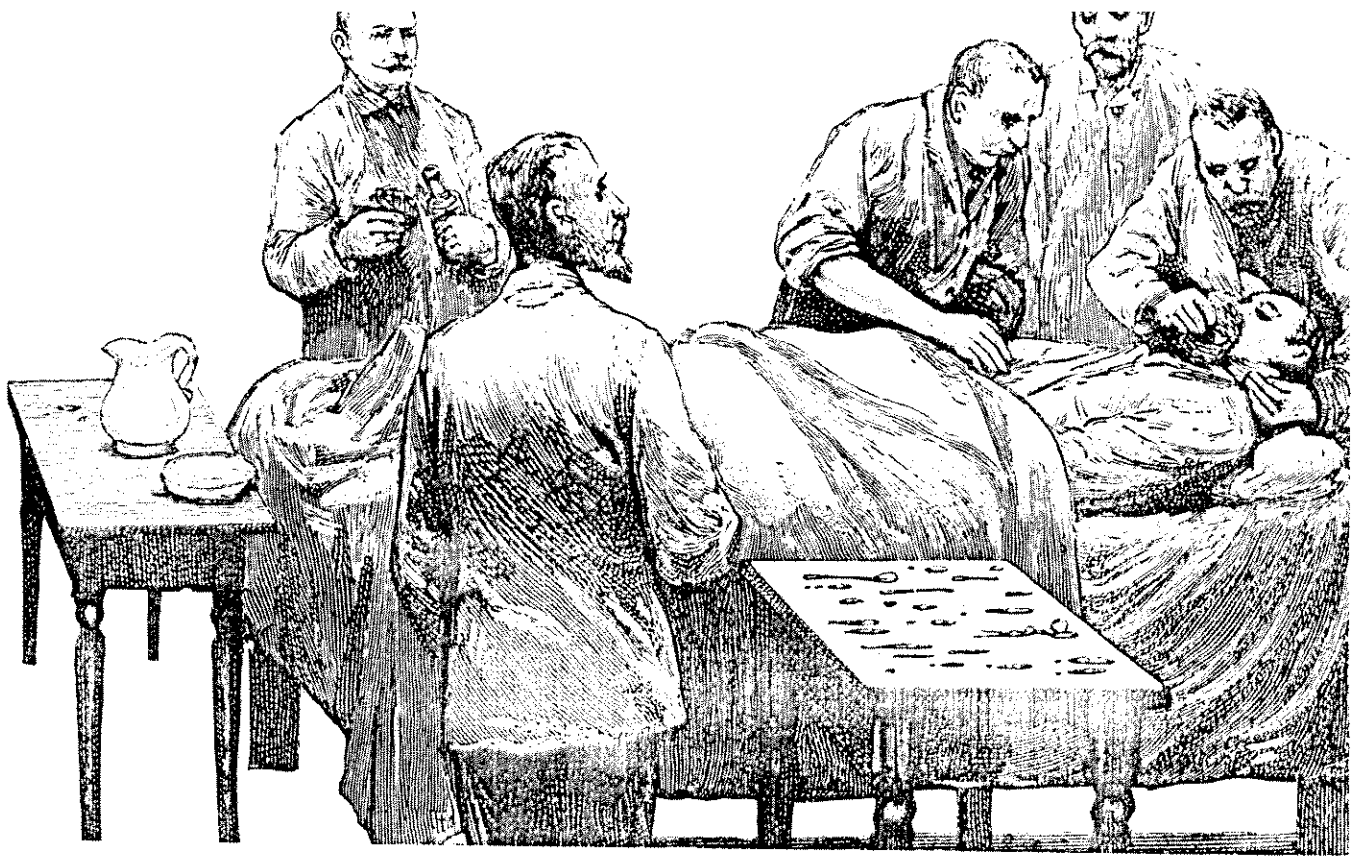


A Cartoon depicting the controversy between heroic and homeopathich treatments.

Homeopath: If you take me,  
you'll die of the  
disease.

Heroic: If you take me,  
you'll die of the cure.

Patient: It's all the same  
to me.



A scene at a hospital where Smallpox vaccines were being given. Perhaps there was a scene like this when Dr. Baty began his hospital in Vincennes, Indiana. The hospital in Vincennes was only one of forty in the United States at this time.



Anesthetics allowed doctors to perform surgery without pain. Ether on a towel is applied to the patient before his surgery. Before ether, hard liquor was used to mask pain. Later, morphine would be used as would chloroform and nitrous oxide.

## BIBLIOGRAPHY

### FOLK MEDICINE

Barger, Harry D. Teaching Indiana History: A Handbook. 1978.

Levering, Julia H., Historic Indiana, New York: G.P. Putnam and Sons, 1916.

Tyler, Vanno, Hoosier Home Remedies, West Lafayette: Purdue University Press, 1985.

### HEROIC, HOMEOPATHIC AND THOMPSONIAN MEDICINE

Marks, Geoffrey. Story of Medicine in America. New York: Scribner and Sons, 1973.

Pickard, Madge E. and Buley, R. Carlyle. Midwest Pioneer, His Ills, His Aches, His Doctors. Crawfordville: R. A. Banta, 1945.

Rothstein, William G. American Physicians in the Nineteenth Century: From Sects to Science. Baltimore: Johns Hopkins University Press, 1972.

Wm. Hill & Co. Surgeons

APRIL 20 1877

1900 20 - 117

NY 150  
Market St.

Bought of L. B. Fitzgerald & Co.

(Late & Successors of Fitzgerald formerly of J. J. & W. H. H. Co.)

Wholesale Druggists.

15	1/2 lb	15	Ammonia	25	4	75	
15	1/2 lb		Ammonia white	122		63	
5	1/2 lb		Antimony Salt	50	14		
15	1/2 lb		Basil (Pine)	122	1	20	
5	1/2 lb		Cuba (Pine)	10		50	
5	1/2 lb		Conium Maculatum	162	8	10	
10	1/2 lb		Guaiacum	122	1	25	
5	1/2 lb		Cast Iron	14		70	
20	1/2 lb		Cast Iron best and	14	40	75	
5	1/2 lb		Cast Iron	14		70	
15	1/2 lb		Sum (Guaiacum) lb	40	63	75	
10	1/2 lb		Sum (Guaiacum)	35	3	50	
10	1/2 lb		Sum (Guaiacum)	50	5	50	
5	1/2 lb		Sum (Guaiacum)	25	2	50	
25	1/2 lb		Sum (Guaiacum)	10	2	50	
5	1/2 lb		Sum (Guaiacum)	1		50	
10	1/2 lb		Sum (Guaiacum)	50	8	50	

11	1/2 lb		Precipitate	65	5	20	
4	1/2 lb		Sub Antimony	162	16	30	
15	1/2 lb		Iron (Pine)	122		50	
15	1/2 lb		Iron (Stone)	15	2	25	
25	1/2 lb		Castile Soap	6		90	
20	1/2 lb		White Bar Soap	18	4	50	
50	1/2 lb		Tooth Brushes	16	3	20	181 48
1	do		Tooth Brushes	175	3	75	
1	do		Tooth Paste (Box)		1	12	
1	do		Toilet (Box)		3	50	
1	do		Ground (Toilet)		4	50	
				325	425	500	575
				650	750		
				125	150	175	200
15	1/2 lb		Cantharides	40	6	25	
5	1/2 lb		Castor (Pine)	123	6	65	
15	1/2 lb		Castor (Pine)	90	4	50	
15	1/2 lb		Castor (Pine)	115		62	
1	do		Cast. Sarcos	10		50	
1	do		C.M. Pencils		2	50	
1	do		Amethyst Cakes		1	25	
1	do		Unpacking Pencils		1	50	
6	1/2 lb		Chamomile			88	
5	1/2 lb		E. Bottles	22	1	32	
1	do		Pine (Glasses) opt	62	3	10	
					4	50	
					81	19	181 48

(Amount last row)

81 19 184 11

2	Am. Binders	100	2.00
1	Dr. Lock's (Patent) Boxes		.44
2	Dr. Lock's (Patent) Boxes	200	10.76
	(Space)	138	2.76
	Roam White Paper		5.50
	(Blue)		3.00
36	pkts Woodlice Boxes	9	3.24
500	Quilts No 30	500	4.00
500	" " 20	600	3.00
6	lbs Card Tobacco	25	1.50
7	" Sassafrilla	37	2.59
10	" (Cathartic)	10	1.00
10	" Siquine	10	1.00
10	" (Salt)	10	1.00
15	" Soap (big)	38	1.90
10	Dr. Hook's (Patent) Boxes	750	3.75
5	lbs Fine Sponges	100	5.00
5	" Coarse	25	1.25
500	Common Syrup Labels	300	1.50
5	Cotton & Strine	38	1.90
1	Dr. Hull's Sauce		12.00
2	Com	500	10.00
1	" Child		4.50
1/2	Sheet Pad	105	6.25
1	" Case Sips		16
1	" Gumming Sips		1.25
10	lbs (Patent) Boxes		1.50
10	lbs (Patent) Boxes		1.50
10	lbs (Patent) Boxes		1.50
15	lbs (Patent) Boxes	75	2.25
1	lbs Card Tobacco		2.00
2	lbs (Patent) Boxes	50	1.00
3	lbs Siquine Sifted	56	1.68
2	lbs (Patent) Boxes	88	1.76
5	lbs Gum & Syrup Boxes	75	3.75
2	" (Patent) Boxes	75	1.50
3	" Magnesium	75	2.25
1	lbs Scammony (apple)		5.00
1	Sandarac		38
2	lbs Gum-Catechu	25	1.25
2	lbs Galle Nut	33	66
15	lbs Acetate Lead	20	3.00
5	lbs Mustard (Seed)	9	45
5	lbs Orange Mineral	15	75
5	lbs Cat (Meal)	10	30
5	lbs Sugar (Sifted)	13	65
2	lbs (Patent) Boxes	25	50
2	lbs (Patent) Boxes	100	2.00
5	lbs (Patent) Boxes	50	2.50
4	" (Cathartic)	150	6.00
2	" Cannella (alt)	50	1.00
10	" (alt)	37	3.70
1	lbs Scammony (any)		1.25
5	lbs (Patent) Boxes	125	6.25
9	" Siquine	18	54
	Amount of		70 75 352

171 00

70 75 352





1/2 doz	Morocco soap	2 oz	S
1/2 doz	Morocco soap		Rosin
4 lb	Myrrh	10 lb	Cockle shell
1 doz	Apple shells	5"	Red Sella Cast Mol good
5 lb	al. Lavender	5"	Red Rhie good
2"	" Swiss	5"	Blue Pink
1"	" Cinnamon	Small Keg	Red Rhie
6"	" Cloves	5"	Red Colman
1"	" Pulver	1/2 bar	Rosin
1/2"	" Saffron	5"	Red Saffron
3"	" Succin Root	20"	Sup Castile
5"	" Wormwood very best	50"	White
"	" Hemlock	2 keg	London
8 gal	Fin Olive oil	5 gal	Keg Sup Cast Sella
2 doz	Bot "		Blk Sol Espanol
1/2 lb	al Bergamot	10 gal	Keg Sol Rhie
1 "	" Lemon	5"	Blk. Rhie Mol good
5 "	" Perismary	2"	Spring fine
1/2 oz	" Roses	2"	" Cassia
2 lb	orris Root Pulv.	3/4 doz	Spring fine
	Adoulatz's Bals	1/4"	" 1/2 pt
10 lb	Princip Rhie	1/2"	Panama Sella
4 "	" Alb		Jan Snuff Macassar
2 oz	Peppermint	2000	Sogars Spanish
1 doz	Try Paints small	2000	" 1/2 Spanish
25 lb	Pink Root	10 gal	Keg Sella self
20 "	Pulv Rhie		" Indian
20 "	" Saffron	1 doz	Sheep Rhie
1 "	" Scilla	1/2 bar	Sol Glauc
1 "	" Scammony Alep	10"	Sac Sella
1 "	" Sanyr do	10 gal	Keg Sol Washell
2 "	" Selm Bark	2	Scamf color
2 "	Pleurisy Root		Sella for Sifting 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24
5 Reams	White paper for Aque Powder	5"	Spl Rhie fine
2 "	Coarse Blen for "		Sella Cabbage



# SNAKEROOT

## EXTRACT

PUBLISHED BY THE  
INDIANA MEDICAL HISTORY MUSEUM AND  
THE INDIANA HISTORICAL SOCIETY

NUMBER 16

OCTOBER, 1989

### SOCIETY'S ANNUAL HISTORY CONFERENCE FEATURES SESSIONS ON NURSING HISTORY

The history of American nursing will be the subject of the featured presentation and a morning-long session at the Indiana Historical Society's Annual Indiana History Conference to be held Saturday, 4 November 1989, at the Airport Hilton. The Black History Project and Medical History Committee of the Society are cooperating to present the morning session which focuses on public health nursing. Karen Buhler-Wilkerson, Ph.D., a faculty member of the University of Pennsylvania, and Earline Rae Ferguson, a graduate student at Indiana University, will be the session's keynote speakers. A documentary film on the history of American nursing will conclude the session. At the Society's noon luncheon, Fort Wayne native Peggy Seigel and three actresses will explore the experiences of Indiana women

nurses during the Civil War via a multimedia readers' theater presentation.

Although women have nursed their family members for centuries, professionalized nursing is a relatively new development. During the Civil War, mental health reformer Dorothea Dix headed the Union Army's nursing corps. Although she managed an efficient team of women nurses and provided them with some training, her work did not result in a permanent training school for nurses nor a permanent corps of army nurses. The first training schools opened in 1873 in New York, Boston, and New Haven,

*(continued on Page 2)*

*Right: A district health nurse reports to the Indianapolis City Hospital's Dispensary, ca. 1900. Photograph in the collection of the Indiana Medical History Museum.*

### MUSEUM RECEIVES GRANTS

The Indiana Medical History Museum recently received several grants. Eli Lilly and Company gave the organization \$5,000 to open an entrance to the facility, separate from the entrance to Central State Hospital. This money will be used to purchase signage and install a guardhouse north of the museum. In late October museum visitors will be able to enter the museum from Vermont Street. Cook Incorporated, headquartered in Bloomington, donated \$1,000 to the museum this past summer. The money will be used to help defray the operating expenses associated with the museum's changing exhibition gallery (also to open in late October).

In August the Institute of Museum Services awarded the museum a Museum Assessment Program (MAP) grant of \$1,400. This grant program assists museums in performing institutional assessments. The money will allow the museum to engage a consultant from another museum to evaluate its programs and operations based on generally accepted museum standards. A museum assessment is the first step toward museum accreditation by the American Association of Museums.





# SNAKEROOT EXTRACT

PUBLISHED BY THE  
INDIANA MEDICAL HISTORY MUSEUM AND  
THE INDIANA HISTORICAL SOCIETY

NUMBER 15

JULY, 1989

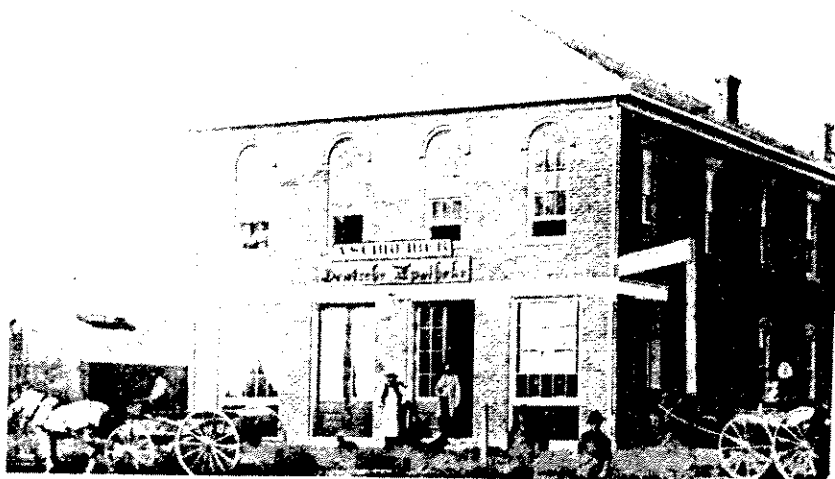
## SOCIETY RECEIVES IMPORTANT PHARMACEUTICAL COLLECTION

Over 697 boxes containing more than 350,000 individual prescriptions dating from 1866 to 1976 comprise one of the most interesting and valuable collections received by the Indiana Historical Society. These prescriptions document the history of Schreiber Drugs of Tell City, Indiana. Charles A. Schreiber, Sr., the grandson of the pharmacy's founder, recently donated the collection to the Society. Such extensive records are rare. According to the National Library of Medicine, only one or two similar collections exist in the United States.

August Schreiber (1837-1913) founded the family-owned pharmacy in the 1860s. A German immigrant, he was self-trained as were most pharmacists of his day. The first American college of pharmacy opened

in 1822 in Philadelphia, but few opportunities for formal education

*(continued on Page 3)*



*Schreiber Drugs, ca. late 1860s. In 1878, the August Schreiber relocated the drugstore across the street from this building on Main Street. The latter store was closed in 1980. Photo courtesy Charles A. Schreiber, Sr*

## SNAKEROOT EXTRACT HAS A NEW LOOK

*Snakeroot Extract* has a new look thanks to Indianapolis designer Deb Larimore. The newsletter is co-published by the Indiana Historical Society and the Indiana Medical History Museum. The logo includes design elements representing both organizations.

The half circle is a stylistic representation of windows in the library of the museum's Old Pathology Building; the broken lines surrounding the half-circle are stylistic representations of the decorative brick work near the roof line. The lettering in the logo, as well as the type style for the newsletter, is Bodoni, the same typeface used for the Indiana Historical Society's newsletter and brochures.

A white snakeroot plant is shown in the stylized window. As noted before, the title of the newsletter derives its name from the white snakeroot, a plant which was significant in Indiana's medical history. The plant contains the poison tremetol and was the cause of milk sickness. Originally, many individuals believed the disease was caused by drinking milk. However, it was discovered in the 1920s that it was caused by drinking milk from cows who had grazed on the white snakeroot plant.

Wincennes Ind. Feby 2<sup>nd</sup> 1831

Dr. Wilson Sir,

We some time ago recd the articles last ord  
and subsequently the bill for same. They came safe except  
a few vials of British oil which were broken.

Please send us by the first opportunity  
1/2 gross British oil vials & directions  
3 lb Buchelle Satts  
3" Seneca oil  
1" opium

We have a package at Chambers & Garvin, would like  
to have them all sent together. If however there should  
be an opportunity to send them by Steam Boat or Wagon  
in the course of ten or twelve days, you may send yours by  
Stage if you think it safe.

We will transmit the money for the above & former arti  
the first private opportunity - or if you wish & will  
advise us by letter or otherwise, we will enclose it & send  
by letter at your risk. Respectfully &c

Hitt & Orriek

P.S. Please send us the price of Raisins & Almonds  
by the Post in your next.

Sir

Wincennes Feby 10<sup>th</sup> 1831

In addition to the articles last ordered, if they have not as yet  
been forwarded, send us a Keg of crude Borax, from 20 to 25 pounds.  
If you must with Steam Boat conveyance send us 15 lbs Aqua Fortis,  
and Co. of oil Bitrial. If Raisins do not exceed 18<sup>3/4</sup> for pound  
Send us a Box first quality. All articles as yet want of the  
first quality unless ordered otherwise.

We suppose it will not be long before Lemons & Oranges will be  
plentiful and cheap in your place; when that is the case  
we would be thankful for such information immediately by  
letter.

Respectfully yours &c

Dr. D. Wilson

Hitt and Orrick Journal  
Vincennes February 2, 1831

Dr. Wilson Sir,  
Druggist Louisville, Ky

We sometime ago recieved the articles last ordered and subsequently the bill for same. They came safe except a few vials of British oil which were broken:

Please send us by the first opportunity  
1/2 Britich oil vials and directions  
3 lb. Bochelli salts  
3 lb. ~~seneca~~oil  
1 lb. opium

We have a package at Chambers and Garvins, would like to have them all sent together. If however there should not be an opportunity to send them by steam boat or waggon in the course of ten to twelve days, you may send yours by stage if you think it is safe.

WE will transmit the money for the above and former articles the first private opportunity - or if you wish and will advise us by letter or otherwise, we will enclose and send by letter at your risk.

Respectfully,

Hitt and Orrick

Please send us the price of raisins and almonds by the box in your next.

Sir,  
Vincennes February 10, 1831  
Sir,

In addition to the articles last ordered if they have not as yet been forwarded send us a keg of crude borax, from 20 to 25 pounds . If you meet with steam boat conveyance sed us 15 lbs. aqua forty and 10 of oil vitriol. If raisins do no exceed 18 3/4 cts. per pound send us a box first quality. All articles we get we want of the first quality unless ordered otherwise.

We suppose it will not be long before lemons and oranges will be plentiful and cheap in your place; when that is the case we would be thankful for such information immediately by letter.

Respectfully,

Hitt and Orrick

Hitt and Orrick Journal  
Vincennes April 8, 1832

Dr. T L Wilson

Louisville Sir, you will please send us by the first steam boat conveyance the following articles:

5 jalop 3 vials  
10 lbs. ? vials  
10 lb. sal soda  
10 lb. eether (not strong)  
1 1/2 doz. best sweet oil  
1 box flask

We hope the Alcohol is on its way to this place by the time as we are at present entirely out. As the Wabash is now rising rapidly we hope the above articles will get up in good time. Please send a bill of the above articles including the alcohol and the liquorise root purchased before.

Respectfully,

Hitt and Orrick

Vincennes, Jan. 24, 1831

Joel Churchill , Albion Il  
SIR,

Sometime during latter part of last fall we requested you through Mr. DAVID Bonner to send us a barrel of your best castor oil. In your reply to Mr. B/s letter you promised to do so the first opportunity, but that would in all probability be more likely to see our opportunity before yourself. We have watched most attentively and have not as yet seen any. We have been out of oil for sometime, while it has been called for almost every day. What cause to pursue we know not - to send expressly for it would enhance the price so much that our profits out would be minor ?. And to be without the article will not do. You see the dilemma in which we are placed. We therefore request that you would by the next mail advise us what to do. Mr. Bonner thinks there will be waggons from your neighborhood to this place shortly. If there should not be could you send it to Mount Carmel [Ill] with instruction for it to be sent to this place by the first steam boat ? up the River without much expense? If so let us know immediately by mail. Any incidental expense attending it, such as storage so so, if you pay, we will refund when we settle for the oil - and so soon as we recieve the oil and find it according to contract - relation to quality, we are ready at any time to pay to you on your order the whole amount.

Respectfully,

Hitt and ORrick

Sarah M. Hawley Letter  
July 26, 1833  
Transcription only  
(Indiana State Historical Library)

(unedited)

Dear FATHER and Mother

July 26, 1833

With a trembling hand and a aching heart I take my pen to give you and account of the mournful and oh so distressing scene, through which we have past this week. Yes dear parents we buried our sweet our lovely child on yesterday, last Saturday the same day I wrote you he began to cough in the morning but was not hoarse. I thought it nothing more than a common cold. When I awoke Saturday night, he wheesed and I thought he had a little of the Phthisick, but did not rise with him. On the Sabbath he still coughed but ate as usual Sabbath night. I bathed his feet (he) did not wheeze but grew hot and on monday morning he up and dressed before sunrise very playfull and in a fine humour, his breathing was bad, short and quick, coughed hard but still loose. Before I closed my letter he became uneasy but I easily diverted him untill I closed it, he then went to sleep. I left him alone and took my letter to the post office and found him asleep when I returned. He was still about though more unwell than the day before after eating his breakfast which (he did) as well as he has done many times he ate no more I think untill noon he asked for honey. I gave him the second piece of bread and butter and honey ) which he ate nearly up.

He slept in the afternoon again, after he awoke I was alarmed at his color and his appearance, and watched his heavy breathing as he slept. I called a neighbor - an experienced nurse she advised me to call in the doctor who was then within call. He came and said he must be attended to immediately, his face he said was swollen which I had not observed. As he left the house to get the medicine from his saddlebags, Mr. H. rode up. I was so glad to see him. An emetic was administered immediately which operated well and he breathed easier from this time untill he died. Two physicians attended to him a few hours before he died. Next the doctor gave him Calomel, bled and blistered him very often and gave him another emetic. Neighbors and friends were kind and attentive but it was all too late, too late. Oh, I was not aware of danger untill it was too late. On Wednesday after noon he became unable to speak and was sinking fast. I sent for the doctor in haste. He came and ordered a warm bath and a steaming. He revived a little and asked his Pa for a drink. When he had drunk he said "nice" as was common- He said "momma and pa."

As the phlegm loosened he swallowed with more and more difficulty untill he could swallow no more. He choacked with it and died about eleven. It causes me the deepest anguish that I sent not for a physician sooner. Oh, had he been taken hoarse, I should have been alarmed at once. I thought it a common cold untill too late (He was subject to a hard cough when he took a cold). I have no fault to find with any but myself - God has done perfectly right. He gave us a wonderful son to keep for him. I loved him - I thought many times that no sacrifice could I make too great for his preservation and comfort. But now it appears that through my neglect the one I loved so tenderly has suffered and died. It was not a willful neglect but such carelessness. He was such a happy child, so industrious. He loved to help his pa and helped me in the kitchen. He was so affectionate and generous. He was an obedient child just 23 months old. There are several children sick in town 2 very low but Josiah is the only one who has died this sick season. Cholera is such a dreadful disease. Do write and pray for us. This is from your afflicted daughter.

SM Hawley



Dr. William Hitt  
February 5, 1837  
Lewis Library, Vincennes

(unedited)

Feb 5, 1837 very cold, snow upon the ground to the depth of several inches. Thermometer early in the morning 7 degrees below zero - school completely closed - ? horses creep upon the ice. This is one of the coldest days this winter. The whole of it has been memorably cold - sever colds are common, and some bad cases of pleurisy, pneumonia, and several have died. A few cases will be given below:

About the 20th Decm. the weather became very cold, on the night of the 21st the thermometer fell to 10 degrees below zero. It has continued with little interruption very cold to the present time.

About the beginning of December there were several cases of Smallpox in the upper part of this county (knox) it did not however spread to any great extent - the immediate (almost universal) resort to vaccination no doubt contributed much to prevent its further ravages, out of about 20 cases only 3 died , one of them a very intemperate man.

On Jan 22nd was called to ? living four miles below town upon the east bank of the Wabash was taken ill yesterday - with pain in the right side, high temperature. 26th saw him again - medicine not operated well, tongue furred, dry, slight cough, no expectoration, bled him. I administered calomel, to be followed in four hours with castor oil. 27th No better - medicine had operated slightly - great irritability of stomach - cathartic continued. 28th much the same. 29th Bilious, extremities cold. Linaprisms to the ancles followed by blisters, cathartics continued- ? mixt. 30th Delirious, very restless, irritability of stomach better, blister expectorants - expectorates a thin glossy mucous in small quantities. 31st Died.

Hitt and Orrick Journal  
December 15  
Lewis Library, Vincennes

(unedited)

Vincennes, Dec. 15

I.S. Morris, Louisville, Ky.

Sir,

When we wrote to you some days ago, it was our intention to have put up this winter a large supply of patent medicines. We have concluded to define it to a later period. You will however send us the following articles by the bearer, Wm. Ovistt

5 lbs. calomel  
10 " pulv. Aloes Soc.  
1 " " Scammory Alep  
2 " " Gamboge  
2 " " Liquorice Ball  
1/2 " Terri Ioponica

We would send the money by Wm O but one of us Mr. Wm. Orrick will be in your place in a few weeks and will hand you the amt. of the bill, which we expect will accompany the medicines. Yours respectfully

Hitt and Orrick

We wish it to be understood that whenever we order medicines we shall expect them of the best quality unless ordered otherwise.

H and O

Hitt and Orrick Journal  
Lewis Library  
Vincennes  
February 21, 1832

Gent.

We wish to supply the merchants of the proposition, we propose we think will be sufficient to induce them to deal with us. As we expect in a few weeks a very large supply we have thought proper to address you early in the season before you get your spring supplies. We propose to sell at Louisville prices and warrant every article fresh and good. We will send them to you at our expense to sell on commission at 30 pr. ct. and will only hold you responsible for the money of those articles actually sold and such call will not be made until 12 months after the delivery of the medicines. If any remain unsold or will either take them back or dispose of them as we think proper. WE would prefer the latter proposal as we have several articles very saleable of our own preparing which do not come under the head of patent articles for which 25 pr. ct. will be allowed such as fever and ague powders and worm mixture, etc.  
Please write us on the subject Very Respectfully yours,

For Reply  
Wm Crampton, Attica  
IS Shoan , Covington  
I and I Collett, Eugesse  
Gookins , Clinton

Hitt and Orrick

Hitt and Orrick Journal  
Lewis Library  
Vincennes June 28, 1831

Gent.

We have just received your letter and bill of medicines dated 14th. First, we think we have reason to complain and as you suggested us to write freely on the subjet. We are disposed to do so. Febrary last we ordered our medicines we thought in time to reach us before the steam boats ceased traversing our river directing the heavier articles to be sent by way of New Orleans. The latter have not yet reached us. The order alluded to comprised the whole of the medicines contained in the two last bills of April and June. Expecting to recieve them all at once. We were sadly disappointed on the receipt of April bill containing that bill said not a word about the remainder of the medicines. We concluded however that they were accidentally omitted as nothing was said about them. Standing in need of them we purchased in Louisville the most of the articles contained in your last bill. The lead in del. of course we expected among the articles ordered via N. Orleans as directed but on the contrary we find it in the last bill arriving via Pittsburg. It will cut at the lowest calculation on dollar per keg to get it here added to the original cost of \$3.50 which is the selling price at Vincennes. The next complaint: Among medicines recieved per April bill ...packed in Mahogany...dust, ... and expense from overland Baltimore (was) \$4.00 per ? . Besides a number of the bottles were broken. Box no. 4 containing med. Nit. acid was set on fire on the way by the breaking or bursting of the bottle of acid and nearly ruined the contents of the boxes. Or much esteemed friend Mr. Tomelson who took charge of our medicines thinks he was not well handled by one of the young men of the store. He thinks also you should have written to him at Pittsburg as he knew not wether he would fin the goods at Pitt. or Wheeling and in consequences had well nigh missed them.

Clinton, N.Y. May 21 1832

We wish to supply the Merchants of the  
North Country with Patent Medicines &c.

The propositions we propose we think will be sufficient  
to induce them to deal with us. As we expect in a few  
weeks a very large supply we have thought proper to  
address you only in the season before you get your  
spring supplies. We propose to sell at Louisville  
prices and warrant every article fresh and good.  
We will send them to you at our expense to sell on  
commission at 30 per cent. and will only hold you  
responsible for the money of those articles actually sold.  
No such call will not be made until 12 months after  
the delivery of the Medicines. If any remain unsold  
we will either take them back or dispose of them  
we think proper. We would prefer the latter pro-  
posal as we have several articles very saleable of our  
own preparing which do not come under the head of  
Patent articles (for which 25 per cent will be allowed) such as  
Laxative & Aqueous Powders & Worm Mixture &c.

Please write us on the subject } Very Respectfully  
To Messrs

Hitt & Orrick

- Mr. Cummington - Utica
- Chas. Sloan - Van Cortright
- J. & S. Ballatt - Eugene
- J. Perkins - Clinton

Hitt and Orrick Journal  
Lewis Library, Vincennes

Vincennes Sept. 2, 1831

Gent.

Enclosed you have a list of medicine which we wish sent on with the goods of Mr. T. ? the bearer merchant of this place. He has kindly profered to take them under his care from Baltimore to this place. We have given him one hundred dollars to defray the expenses of said medicines. You may perhaps be surprized to see our orders increase in magnitude so rapidly. He is not owing ? to sales already made; our original stock being defective in quantity . We wish now to fill up ? and make complete what before was defective. It was not after we opened until several important articles were entirely disposed of and we had frequently the mortification of telling applicants that we expected more of such and such article in a few months and what added more to our chagrin and competition (messrs. McNamee and Wolverton) (who do business on a very small scale) and their friends made use of the above circumstances if possible to paralyze and ridicule our establishment. Their success however has not been realized we hope after the arrival of the present order shall save them much trouble and render ridicule ? harmless.

We did not receive our last medicines until Dec. the bill of which we received per mail. The amount of said bill we wish paid out of the funds of Wm. R. Orrick see order other side, and an acknowledgment of same and also of seven hundred dollars enclosed which is intended to meet the present order as far as it goes. As medicines fluctuate in price we would be thankful to you to give us information thereof. We wish advice, information ? to the distillation of oil ? as the ? grows spontaneously and abundantly in this county.

Hitt and Orrick Journal  
Lewis Library, Vincennes  
Vincennes Sept. 2, 1831

Dr. Wilson Sir

We do not like to complain so often but we would have been better satisfied if you had accourding our request acknowledged the receipt of the order we sent you by Wm LeRoy. You will send us the following articles by the first opportunity. We expect some goods down from Pittsburg shortly ?, if you cannot send this before please attend to it then. We wish you to exert yourselves as we are much in want of them.

Respectfully yours, Hitt and Orrick

10 gr. vials, ?  
5 lb. green camphor  
10 lb. calomel (good or ?)  
30 " cr. of Tartar  
1 " onnis root (pulv.)  
10 lb. senna, Indian

## MEDICAL HISTORY SCHOOL KIT

Please read the following description of a proposed school kit containing artifacts and materials pertaining to the history of medicine and then complete the attached questionnaire. The Indiana Medical History Museum appreciates your input into this project.

**PRODUCT OVERVIEW:** School kit containing artifacts and materials pertaining to the history of medicine for use in fourth grade social studies classes. Kit and materials (preparation and follow-up) will be prepared by the Indiana Medical History Museum.

**PREPARATION MATERIALS:**

Prior to obtaining the kit, teachers will receive these preparation materials: short essays and original source materials (excerpts from diaries and letters) on different aspects of medicine from the late 1700s to the late 1800s (including essays on health conditions, diseases, medical practices, and home remedies), a timeline (giving a brief overview of history of medicine), and discussion questions.

**KIT:**

The kit ("The Doctor's Bag") will contain three different doctors' bags. Each of these will contain various instruments (or photographs of instruments) used during a particular time period. Included will be:

- a. A satchel from the early nineteenth century containing drug bottles (labeled colic, jalap, rhubarb, red precipitate, etc.), a spring lancet, photographs of an amputation kit and a few instruments from this kit, a pocket surgical instrument case, bandages and wood splints, and several home remedies.
- b. A buggy case from the late nineteenth century containing an otoscope, ophthalmoscope, single-earpiece stethoscope, bottles containing pills and tonics, hypodermic syringe in leather case, metal splints, photographs of instruments from an amputation kit and a few instruments.
- c. Modern doctor's bag containing rubber gloves, surgical mask, modern stethoscope, modern ophthalmoscope/otoscope, disposable hypodermic needle, modern fracture equipment, antibiotics, and leaflets on CAT scans, x-rays, cholesterol tests, etc.

Also included in the kit will be a description of each item and drawings indicating how it was used. These kits will allow the children to make comparisons of medicine over time, as well as allow children to understand how technology and improved medical knowledge changed the practice of medicine and the instruments used by physicians.

**FOLLOW-UP MATERIALS:**

Children will receive a booklet with questions and games. Also, children will be requested to conduct a small oral history project by asking their parents and grandparents about medical practices and the changes they have observed. Children and teachers will also be encouraged to visit the Indiana Medical History Museum, as well as other museums which interpret the history of medicine (Conner Prairie, Hook's Historic Drugstore).

**DISTRIBUTION:**

Museum will distribute brochures and order forms for the kit to fourth grade teachers. Teachers will reserve the kit and pick it up at the Indiana Medical History Museum (3000 West Washington Street, Indianapolis, Indiana). Upon obtaining the kit at the museum, teachers will receive instructions and have an opportunity to ask questions about the kit.

**PRICE:**

\$25<sup>00</sup> per kit

Please answer the following questions regarding the medical history kit described above. Your responses are important to the development of this kit.

1. After reading the description of the medical history kit, I would be:

- definitely interested in obtaining the kit for my class.
- probably interested in obtaining the kit for my class.
- may or may not be interested in obtaining the kit for my class.
- probably would not be interested in obtaining the kit for my class.
- definitely would not be interested in obtaining the kit for my class.

2. The preparation materials for the kit are:

- very adequate
- slightly more than adequate
- adequate
- slightly inadequate
- completely inadequate

3. The quantity and variety of items (artifacts and materials) in the kit are:

- very adequate
- slightly more than adequate
- adequate
- slightly inadequate
- completely inadequate

4. The nature of the items and materials in the kit is:

- very appropriate for the grade level
- slightly more than appropriate for the grade level
- appropriate for the grade level
- slightly inappropriate for the grade level
- totally inappropriate for the grade level

5. The follow-up materials in the kit are:

- very adequate
- slightly more than adequate
- adequate
- slightly less than adequate
- totally inadequate

6. The distribution method for the kits (i.e., having teachers pick up the kits at the museum) is:

- very appropriate for this type of activity
- slightly more than appropriate for this type of activity
- appropriate for this type of activity
- slightly inappropriate for this type of activity
- totally inappropriate for this type of activity

7. The price for the kit is:

- very high
- slightly too high
- reasonable
- slightly too low
- too low

8. Please include any additional suggestions or criticisms of the kit below.

