introduction to the Indian story in Pennsylvania. I know no other as useful.

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History of the Pittsburgh Mercy Hospital 1847-1959. Compiled by Sister M. Cornelius Meerwald. (Privately reproduced by the Sisters of Mercy; edition limited to fifty copies—346 pages exclusive of indices and appendix.)

This book is an extraordinary document, destined to be a source book for many papers yet to be written. It presents in minute detail the story of a great hospital and covers more than a hundred years of its history. Since the hospital was founded and developed by a religious order, its records have been kept with scrupulous care much as the records of a posterity conscious family. There is continuity. The author, a member of this Community, obviously has had access to documents that probably would not be available to any outsider. She quotes freely not only from the hospital day books and reports, the administrators' records, the minutes of meetings, and the housekeepers' accounts; but also from the private diaries and letters written by members of her Community and preserved in the archives of the Motherhouse. The ordinary materials of research: the medical journals, the newspapers, magazine articles, she has obviously consulted with meticulous care. Her own long association with the hospital has made her the ideal person to record this history.

While the title page says “compiled” by Sister Cornelius Meerwald, the author does far more than compile the material. The mark of her personality is on every page. It is immediately evident that she is a trained medical observer, conversant with medical and surgical terminology. Brightening the almost overwhelming accumulation of facts, both historical and medical, are flashes of penetrating humor and shrewd appraisal of the people of whom she writes. She has enriched her work with anecdote after anecdote. Finally, demonstrating the continuity of the story, she shares with her readers the reminiscences of the very old Sisters told to the young Sisters at recreation. For example she remembers as a novice hearing Sister Madeline O'Donnell, then a jubilarian, recount her experiences as a nurse in the Civil War, invariably beginning, “I was in the army when I was nineteen.”
In the light of Pittsburgh's present position in the world of medicine and medical research, opposition to the founding of the first hospital is startling. There was a crying need for something more than the abandoned coal shed in Cecil Alley designated by the city fathers as a shelter for smallpox victims. Yet there was violent objection on the part of the citizens to the establishment of "a permanent pest house to spread contagion." Finally, His Excellency Michael O'Connor, Roman Catholic Bishop of Pittsburgh, would no longer tolerate the neglect of the sick poor. He appealed to the Sisters of Mercy, who were already visiting the sick in their homes, and assured himself of their cooperation. There was no money: the Bishop had none and the Sisters had none. The Bishop called a meeting of the men from the three Catholic parishes and so fired them with his enthusiasm that they formed a committee to raise money and supervise the construction of a hospital.

The Sisters did not wait for permanent quarters. They set up a temporary hospital in Concert Hall, 638-640 Penn Avenue. A group of women, the first Auxiliary, helped them gather furniture and make quilts and hem sheets. There were no sewing machines. The newspapers encouraged and applauded. On January 1, 1847, the doors were opened.

"No one in the whole city," the author writes, "was sick enough nor desperate enough to risk accepting the proffered service of the new hospital."

Advertisements in the newspapers—"Three dollars a week in the general ward; $5 a week in a private room: medical attention included," brought no response. Finally on January 11, J. B. Guthrie, Surveyor of the Port of Pittsburgh, sent John Coghill, a sick marine. The hospital was in business. In the 16 months during which it functioned in Concert Hall, 254 patients were admitted. During that time its fame spread abroad—cleanliness, kindness, and efficient medical care. Nineteen typhus patients had been nursed; fifteen had recovered. But of the nursing Sisters, four had contracted the disease and, too worn out to resist its ravages, died. The hospital had been through its baptism of fire. The public had learned to respect and trust it.

The site of the permanent hospital was "in a rural area located on the side of the hill between Pennsylvania Avenue and the Monongahela River near the tollgate." The architect was Hayden Smith, the contractor J. M. McClelland. The money had been raised by the Bishop's Committee and their wives, six thousand dollars. Soon
there were more requests for admittance than the 40 beds would hold.

While the author does not emphasize unduly the financial struggle to keep the institution operating during the years, no one reading this history could be blind to it. No one could fail to recognize with respect, the sublime courage of this group of women. Income from patients was negligible. Although neither doctors nor Sisters received recompense, equipment, medicines, food, and some lay help had to be paid for. There was no endowment. Relying solely on God's Providence, the Sisters continued their work. They were never disappointed. During the hard times in the seventies, when the Sisters decided there was no alternative but to close the doors, Mr. James P. Barr obtained an annual appropriation from the Legislature. Much later when the appropriation was withdrawn, a trust fund bequeathed to Mercy by Henry Clay Frick compensated for the loss. When new laboratory facilities were required, the Christopher Magee endowment became available. There have been thousands of benefactors and with their help the hospital has grown, flourished, and paid its debts.

No hospital can function effectively without a strong administration and a dedicated medical staff. Mercy has both. The medical staff at Mercy was from the very beginning one of exceptional ability and courage. The hospital record reports, "Six leading medical men of this city visit the hospital regularly and with spirit characteristic of the profession, gratuitously. They are: Joseph Gazzam, William Addison, Daniel McMeal, George Bruce, Robert Snyder, and Alexander Pollock."

It took courage in those days to change the slightest method in medical procedure as well as to explore the fields of surgery. Dr. Gazzam, of the first staff, was the first to use ether in an operation. Dr. Oswald Werder, after he had performed an abdominal section in the home of the patient, "was surrounded by the arms of the law. If the patient had died!—but the patient lived." Moreover it was not the general public alone that opposed innovations. The older members of the Staff often objected seriously to the work of the vital younger men who despite discouragement pushed ahead both in medicine and in surgery. Four young doctors are known as the fathers of modern surgery in Pittsburgh: Dr. Oswald Werder, Dr. J. J. Buchanan, Dr. R. W. Stewart—of Mercy; and Dr. R. S. Sutton of Western Pennsylvania Hospital. These men were friends—well trained and dedicated. When aseptic as well as antiseptic surgery was accepted, the chances of the patient's survival were increased
tremendously. Surgery had come a long way from the kitchen table in the corner of the pharmacy.

Mercy's list of surgical firsts is impressive. Dr. Buchanan is given credit for the first open operation in Pittsburgh for fracture of the patella. Dr. Werder performed the first two laparotomies in Pennsylvania and the first Caesarian section. Dr. Stewart among other firsts is accredited with the first radical treatment of cancer of the cervix by igni-extirpation. Dr. Pollock performed the first ovariotomy. The Sister administrator encouraged the young men in spite of the expressed disapproval of the Seniors. Down through the years one pioneering attempt after the other has been made. Today delicate heart and brain surgery only dreamed of by the first surgical staff are common procedures. The progress of medicine, while less dramatic, is equally admirable: from leeching and physicking to serum therapy, chemotherapy, and the use of a well staffed clinical laboratory for diagnosis. With surgery had come specialization. The author follows this step by step. Her final list of the staff shows nine separate surgical and six medical specialties.

The first Superior set the pace for strength, courage and enterprise. Sister Cornelius shows us Mother Francis War sitting in a straight chair for two days and two nights in the covered wagon that brought her from Chicago to aid in preparing the hospital at Concert Hall. In days when there were no mechanical aids such as we know now, the administrators worked side by side with the nursing Sisters in the housekeeping as well as the nursing duties. The debt and the interest on the debt as well as funds for current expenses were her responsibility. Sister Cornelius paints a vivid picture of Sister Dolores Lambert with a companion starting out to beg for dinner for her patients. The grocer had refused further credit. When they reached the office of William Thaw that gentleman gave them $25 and offered to underwrite their bills at the grocer's. Sister Dolores gratefully accepted the money—it saved the day—but characteristically did not use the credit. "She did not know if she could repay it." Administrators like doctors had to face opposition to progress. One example: Sister Magdalen Phelan, concerned about what she considered a loss of attention to patients, established the first continuous medical service in Western Pennsylvania. She met opposition not only from the medical staff, whose members resigned rather than conform, but from every Sister in the hospital except the housekeeper. She persisted and the change was
made. It was she who decided to open a school of nursing. Again
the opposition was hot and vocal. Until 1893 only Sisters had nursed.
These changes were not made without preparation. We read again
and again of Sisters being sent to eastern hospitals for special train-
ing in a field before it was introduced at Mercy. In response to
the requests of the medical staff and to meet the needs of the public,
wing after wing has been added until now there are eleven structures.
From forty beds available to patients when the hospital opened there
are now about eight hundred.

Many things have been developed in the history that could not
be mentioned in this review—the cooperation with the University
of Pittsburgh, Mercy College, and Duquesne University in the train-
ing of doctors, pharmacists, and nurses developed over the years.
The present administrator, Sister Ferdinand Clarke, has been as far
sighted and progressive as any of her predecessors. “Perhaps one
of the distinguishing features of this administration is the presence
of many technicians working or studying in the hospital.” Begin-
ing with 1953, the author lists fifty items—of renovation, building,
modernization of which Sister Ferdinand has been responsible.
Perhaps obtaining the cobalt bomb for treatment of deep and ad-
vanced cancer is one of the more important.

What could have been a very dull recital replete with statistics
and medical terminology, is fascinating reading because it is enriched
by anecdote. There is the story of Sister Stephana who was lost
behind the Confederate lines during the Civil War. We hear that
Dr. J. J. Buchanan, returning with victims of the Johnstown flood,
reached into his ulster pocket and brought out a new born babe.
We shudder at the burning by the neighbors of the annex in which
the Sisters had nursed cholera patients. We witness a payroll “grab.”
We understand perfectly the motive which prompted Henry Clay
Frick’s gift of a rubber tired ambulance. It had been a long trip
over cobblestone streets from Homestead to Mercy in an iron wheeled
vehicle.

The plan of the book is roughly chronological. The chapters
on the Civil War, the cholera epidemics, H. C. Frick, could each be
considered an historical essay in itself. In the discussion of the
change in medical and surgical techniques the author has found it
advisable to back-track frequently. For example in discussing diag-
nostic facilities, the notes of the hospital superintendent of 1877 are
quoted to show that in that day a microscope, test tubes, litmus paper,
and some pipettes were the only implements available. Those of us
who have been subjected to a battery of tests in a modern clinical laboratory find this astonishing.

This volume makes no pretense of being a finished product. It was written primarily for the use of the Sisters. Before it is printed for general distribution, this reviewer suggests reorganization. Material dealing with the affairs of the Religious Community and other material not relevant to the hospital itself, while interesting, should be deleted in the interest of a clear-cut picture. The documentation which is complete is included in the body of the text. Use of the footnote method would simplify. The index and lists of personnel need to be completed. In the historical sketch written by Sister Cornelius for the centennial booklet, *Footsteps of Mercy*, more complete lists are given. These might well be used. In a final edition the maps and illustrations included in that booklet would greatly enhance the value. It seems to me that there is in this volume ample material for two books—the story of Mercy and the story of the people who have made it a great institution.

To have put between covers in a permanent form the richness of Sister Cornelius Meerwald's research has been a wise move on the part of her superiors. For this, future historians will, indeed, be grateful.

*Pittsburgh*  

LORETTA P. BYRNE

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**Gifford Pinchot, Bull Moose Progressive.** By MARTIN L. FAUSOLD.  
(Syracuse: Syracuse University Press, 1961, 270 pp., $4.50.)

Gifford Pinchot was not a native son of Pennsylvania, for he did not move to the Keystone State until 1910, which is the first of the half-dozen years studied in this book. Although born in Connecticut in 1865, and a resident of various places before 1910, Pinchot came to regard his family estate at Milford, on the upper Delaware, as his permanent home. His grandfather settled in Milford in the second decade of the nineteenth century, and his father, James Pinchot, built "Grey Towers," the Norman manor house designed by Richard Morris Hunt, which became famous as the home of the great conservationist and two-term governor of Pennsylvania.

This book was written to describe the important role which Gifford Pinchot played in the Progressive Movement which began in 1910, and faded away in 1916. As Chief Forester and a member of