





Sumter to Appomattox

The Official Newsletter of the of the American Civil War Round Table of Australia (New South Wales Chapter)

Patron: Professor the Hon. Bob Carr

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Please visit our website <u>www.americancivilwar.asn.au</u>

A Message from Our Chairman

My informants in the audience of the first two WEA presentations on the origins of the war have reported that Bruce McLennan and John Morrison have done a great job of those presentations. Whilst several people are involved in research, presentation planning, preparation and presentation, I want to draw attention to the leading role that Bruce has had in making the course happen and establishing a very high standard. I know he is proud of it and so he should be.

Thank you to Jane McDonald for her interesting insight at our last meeting into the surgery practices of the era. At the next (AGM and end-of-year) meeting we will experiment with an opportunity for more people to contribute to the program. Look elsewhere in this issue for how to get involved. I hope we have too many volunteers and have a carry over to the 2020 meetings.

Lastly, Brendan O'Connell has informed us that he will not be standing for re-election to the Committee and so his long service as Treasurer will end. We have only ever had one Treasurer and he was also Secretary for the first few years. Brendan has our thanks and deep appreciation for a remarkable contribution.

On our **Website** you will always find the date of our next meeting. Our Facebook page is also easily accessed from our website www.americancivilwar.asn.au

Our Next Meeting

Our Christmas Function and AGM

Monday, 25th November
6.30 at The Roseville Club

What is your Personal Favourite Civil War Story?

For the Christmas Function on 25th November, we are inviting members to present a brief outline of their own personal favourite Civil War story, anecdote or personality. We intend to have several members make a brief five-minute presentation. Anyone interested in participating should contact John Morrison by email (johnjmorrison@bigpond.com) or by cellphone on 0411 197 935.

Spouses, partners and friends most welcome!

IMPORTANT – Booking essential

As in previous years, the evening will be a fixed price affair to facilitate catering. We therefore need to advise the club our numbers and we will be charged for that number.

RSVP to John Morrison (above) before Thursday **21**st **November**

Jan Mc Intyre

Cur Last MeetingAnaesthetics in the Civil War

Presented by Jane McDonald and John Morrison

Our very informative presentation on a specialized and not generally-known topic was introduced by member John Morrison who, with his usual flair, began with background details. He then introduced a member of the recent US tour, Jane McDonald, who is herself an anaesthetist and thus has a personal interest in the topic.



As illustrated in the above photograph of a shattered femur, Civil War weaponry caused more horrible and damaging wounds than current weapons according to John. Rifle ammunition at that time had been developed into a soft lead, spreading Minie ball which inflicted injuries similar to modern ammunition. Limbs were shattered by these Minie balls but, interestingly, surgeons at the time of the Civil War developed amputation procedures similar to those used today. But, as Jane would explain, germ theory was not understood at the time.

Jane began her presentation by describing her interest in military history, which began with family involvement in war over several generations. As background to the topic, she summarized the development of an aesthetics up to the point of the Civil War. She described early operations using Ether by William T.G. Morton for the first time in October 1846, in the Massachusetts General Hospital. Its first use in the U.S. in a military situation was in the U.S.-Mexican War under the supervision of military surgeon, Edward H. Barton, who used Norton's apparatus and Ether in amputations. Despite this, however, Ether was not used extensively for some years although the Civil War did accelerate its use. Even so, the U.S. Army discouraged its use, feeling that it could cause problems and therefore was best avoided.

In 1847, an alternative anaesthetic to Ether had been introduced by James Young Simpson, who used Chloroform and published a paper on its use. After this, others used Chloroform independently and announced its advantages over Ether, including the fact that it is not flammable and can be used in smaller quantities.

Following this initial use, there was lively debate regarding which anaesthetic was superior despite the first death from Chloroform occurring – that of a 14-year old girl suffering from an ingrown toenail (this

death was due to an overdose, according to John Snow, the renowned scientist).

During the Crimean War of 1853-56, there was controversy over the use of anaesthetics, including a belief expressed by Sir John Hall in 1854 that pain was necessary for a successful outcome. Altogether, during this war, 25,000 French and 20,000 British received an anaesthetic and only one died.

During the Civil War, anaesthetics were used in large quantities. Prior to this period, they were manufactured in the North or in Great Britain. Consequently, the Confederacy had great difficulty getting supplies but used runners or circumvented the blockade to access them.

Administration of anaesthetics at the time were simple, with application involving use of a mask. At that time, there was little knowledge of techniques and expertise was gained by reading. Between 1846 and 1861, 30 different masks were used with different explanations as to how best to use them, including the use of handkerchief or cloth. In relation to their application, Chloroform caused the patient to fall asleep and waken more quickly but could kill with incorrect amounts administered whereas Ether was slower to act and was also highly flammable and thus dangerous with the candles and open flames of the time.

Civil War medical and operating practices were initially very disorganized but improved through the course of the war. In 1861, the U.S. Sanitary Commission was founded with the aim of promoting clean and healthy conditions in the Union Army camps, thus introducing comprehensive Union medical care. No similar Commission existed in the South. However, for the U.S. Sanitary Commission, the 1st Battle of Bull Run in 1861 was a disaster in medical care with chaotic organization and no wounded transported to Washington. In 1862, William Hammond was chosen as Surgeon-General of the Union Army and he quickly and efficiently reorganized the Army Medical Department by standardizing medication tables, establishing laboratories and a Medical Museum, collecting information and writing the industry standard on hygiene. Statistics collected in the Civil War were the first ever collected on a war and are still studied today. Union army statistics show that of the 80,000 cases of operations with anaesthetics, 76% involved Chloroform and 14% Ether. Confederate statistics were unfortunately destroyed by fire.

Jane spoke at length (with comments also from John) about the damage caused by the use of newly-perfected soft lead bullets which spread and caused devastating damage to bodies. Most damage, however, was caused to limbs, which accounted for the high number of limb amputations during the war.

Another major issue was that there was little knowledge of infection or hygiene issues so medical staff broke rules of cleanliness. As a result, the main cause of death was infection.

Jane referred further to a significant figure in the medical history of the period – William T.G. Morton, a

rather notorious figure in his lifetime. Initially a dentist, he worked in the field as a volunteer surgeon in 1862 at the Wilderness and Spotsylvania. In this capacity, he applied Ether in operations on 2,000 wounded soldiers. It was conceded that doctors were experimenting on their patients, often sacrificing them in the process but that this moved medicine on and established the field of anaesthetics in medical history.

John Morrison

John spoke of his own interest in medical history and Civil War museums. He began with a discussion of the importance of professional medical services in the collection of war procedures, statistics and rehabilitation services, leading to modern military medical practices. Wars lead to breakthroughs even today because there is so much raw material. John gave as examples the developments in blood transfusions in WW1, antibiotics in WW2, cardiovascular surgery in the Korean War and tropical medicine in the Vietnam War.

John spoke further about the importance of Civil War museums with their preservation of, for example, surgeons' instrument kits including amputation saws. He spoke of the fact that most injuries occurred to limbs because, in heavily-wooded areas, combatants were able to seek protection behind trees, exposing only their limbs. Many who were shot were found in a disheveled state as if checking to see where they were shot. If it was in the abdomen, they knew they would succumb to peritonitis since a great deal of debris was also carried into wounds with the bullet including mud, cloth and even saddle leather.

Too late for the Civil War, germ theory was not developed or widely accepted until 1867 by Robert Koch (based on the work of Louis Pasteur). In fact, it was not until the First World War that sterility was thought about and, for every soldier who died of wounds in the Civil War, two died of disease or infection.

John contributed many interesting facts. For example, Field Hospitals, where the wounded were treated before evacuation, were first used in the Civil War. Female nurses, following their introduction in the Crimean War, were also employed. To cover the shortfall in nurses, Doreatha Dix was chosen as the first superintendent, specifying that applicants be "35 – 50 years old, in good health, of high moral standards, not too attractive, and willing to dress plainly". Altogether, 3,000 nurses served in the Union Army through Dix and more through other means.

After Jane and John's presentations, there was a lively question and answer session and general discussion. This was an informative and enjoyable meeting.

This publication is the official newsletter of the American Civil War Round Table of Australia (New South Wales Chapter). All inquiries regarding the newsletter should be addressed to the Secretary of the Chapter by telephone on 0411 745 704 or by email to: secretary@americancivilwar.asn.au

WEA Course

Why it's worth studying the American Civil War

Introduction by our esteemed Life Member Len Traynor



At the first meeting of the 8-week WEA Course, the presenters (all members of the ACWRTA) were introduced to the audience and then we were all privileged to have the opportunity to listen to Len Traynor's wide-ranging discussion on the importance of the American Civil War. Len was introduced by John Morrison, who outlined the broad – and deep - knowledge that Len was able to bring to the course after a lifetime of studying it.

Len began with some revealing statistics as to why understanding its importance is central to any study of this War.

In terms of its military impact, it was the greatest war between English speakers; it was the first old war and the first new war and therefore transitional; it was the greatest testing ground of weapons and warfare until the First World War.

In terms of its non-military impact, many of its developments were revolutionary but are now commonplace. It was the first battle using iron clad vessels – the first revolution in a new type of ships of war; it was the first use of Plaster of Paris for setting limbs; the first use of instant coffee. However, of great significance, according to Len, was the changing role of women, which Len considered in depth.

Before the Civil War, women were wives, mothers and homemakers in a world dominated by men. They wore

restrictive clothing and were prevented from having opportunities because of the social attitudes at the time. The War changed that. While men went to war, women became government secretaries and clerks, soldiers and spies and they worked in factories and managed plantations. And they became nurses, looking after non-related males. Women had been nurses in the Crimea but, in the Civil War, against the resistance of medical authorities, they were enlisted by the Government at 40 cents per day. It was their efforts that made nursing what it is today.

Len moved on to discuss the reasons for the Civil War. Why did the country turn against itself? One reason was related to the extreme differences that had developed between Northern and Southern states, compounded by hostility, fear and jealousy and fueled by politicians, newspapers and individuals. All this caused emotions to boil over and when it was all over, a stunned nation looked around and found that two classes had been eliminated – slave-owners and slaves – and there was widespread devastation in the South.

The consequences did not end with the end of the War. The cost in human lives was estimated to be between \$10b. and \$20b. (\$25b. in today's money). And after the last shot was fired, there were the costs of artificial limbs and care of veterans (the last pension was paid out in 2009).

There were other financial costs. Before 1861, 70% of government income came from tariffs. In order to make up for the loss of this income, paper money was issued for the first time, as well as personal taxes, other taxes and war bonds (which were borrowed from banks and wealthy individuals and are still a main source of government income today).

However, it was the staggering cost in lives that should be considered. It is estimated that over 700,000 participants died (possibly as many as 800,000) and 60,000 died of ill-treatment in POW camps. Many more continued to die in the War's aftermath from wounds, suicides and illnesses contracted on the battlefield. The loss of life is equivalent to 8 million today. As well, 1.5m. horses and mules died. Besides the mortality figures, half a million combatants were wounded and 60,000 had limbs amputated as a result of the devastating effects of the Minie ball. In all, over the four years, there were 76 battles, 10,500 lesser ones and 3.5 million particular events.

Another 'first' was the creation of a system for collecting the wounded. Before this period, the wounded lay for days waiting to be rescued. The Ambulance Service of the Potomac was established by Major Jonathan Letterman, who took over the control of the Medical Service and introduced mobile field hospitals, Standing Operating Procedures, triage, and control of horses and mules to transfer the wounded (previously these had been the domain of the Quartermaster). Incidentally, the Ambulance Service collected from both sides and is the same service that is copied today.

WEA Course delivery

Our WEA course "Origins of the American Civil War – How did it come to this?" has been years in the making. Bruce and Dan met with the WEA Education Officer early last year and, in the middle of last year, called for volunteers to research over sixty topics. Many members rose to the occasion and later told us how much they enjoyed the research.

In conjunction with WEA it was decided that the course would be presented on a weekday for eight sessions of two hours each. Several new topics were added – notably including a topic on how the Enlightenment found its way into core American values. Late last year we "test-drove" two topics and learnt more about the style and content of the materials to be used for the course. The research notes were turned into Leader Notes. Progressively, PowerPoint presentations were also prepared and refined.

The WEA – based at 72 Bathurst Street (www.weasydney.com.au) – is a democratic organisation that encourages students to participate in their own education. Seven of our members are presenting the topics. Each topic takes about 20 minutes and duel instructors support each other, alternating from one topic to the next.

Several months ago the WEA Term 4 (Spring) program was released – including our course under World History. A copy of their program is sent out to every subscriber of the *Sydney Morning Herald*, as well as every past student.

Twenty-one students enrolled. The course commenced on 30 October with an outstanding talk from our Life Member Len Traynor (see separate article). We are hoping to present the course again in coming years.

Each student received a specially-labelled ACWRT "Keep Kup" designed to "start a conversation"...:



Some students have already expressed an interest in joining our Round Table.

Civil War Profile Mary E. Walker M.D. Thanks to member John Morrison



In a war that produced so many truly extraordinary characters, Mary Walker stands out. It is remarkable that so few people, even Civil War afffectionados, know much about her.

Mary was a strong woman and a forceful personality in an era when women's primary role was to remain silent and genteel. She was to remain a free-thinker and an agitator throughout her life.

Mary was born in Oswego New York on 26 November, 1832, the youngest of seven children. Her parents were quite progressive - even revolutionary – for the time. They nurtured Mary's spirit of independence and sense of justice - qualities that she showed throughout her life. Although devoted Christians, the Walkers were also "free thinkers". They raised their children to question regulations and restrictions and also demonstrated non-traditional gender roles to their children regarding work around their farm.

Mary's parents founded the first free schoolhouse in Oswego in the late 1830s, believing that their daughters should receive the same educational opportunities as their sons. Mary continued her education through the progressive Falley Seminary in Fulton, New York. She worked as a teacher in order to pay her way through Medical School. She graduated from Syracuse Medical College with honors in 1855 – the only woman in her class.

Unfortunately, there was little acceptance of a female physician – even amongst other women. Her practice in Rome New York with her husband (also a physician) failed - as did her marriage. When the Civil War broke out there was a desperate need for medical personnel so Mary abandoned her struggling practice in Cincinnati Ohio and volunteered for service with the Union Army. She was offered the role of a nurse but declined and chose to volunteer as a surgeon for the Union Army as a civilian. Since the U.S. Army had no female surgeons, she was allowed to practice only as

a nurse for the first three years of the war. It was not until 1864 that she secured an appointment as a contract surgeon with the 52nd Ohio regiment.

Mary was in a position to move across Union and Confederate lines, and she became an active spy. In October 1864, she was finally comissioned as an assistant surgeon by the army – a position she held until her resignation in June 1865. During this time, she attended wounded on both sides and spent four months in a Confederate prison, having been captured while treating a Confederate soldier on the battlefield. She was released in a prisoner exchange in August 1864

Mary received the Medal of Honor (almost as an alternative to a brevet commission after the war) for her work during the Civil War. At that time, the Medal of Honor was not expressly given for gallantry in action; it was, in fact, the only military decoration during the Civil War. Walker remains the only woman to receive the medal and one of very few civilians to receive it.

Her name, along with more than 900 others, was deleted from the Army Medal of Honor Roll in 1917. Upon being told of this, she replied "They can have it over my dead body!". She died poor and alone on 21 Feb 1919 - 6 days after the Board of Medals formally revoked her Medal of Honor. Fortunately, the award was officially reinstated in 1977.

After the war, Mary was a writer and lecturer, supporting the women's suffrage movement until her death. Throughout her life, Mary rejected the boundaries set for the women of her time. As a result, women of her day scorned her and even her own family shunned her as a militant. Mary was infamous for contesting traditional female wardrobe. She criticised womens dress of the time as being not only uncomfortable and impractical but unhygenic. As a young woman, she began experimenting with various skirt-lengths and layers, all with men's trousers underneath. By 1861, her typical ensemble included trousers with suspenders under a knee-length dress with a tight waist and full skirt - the dress she wore throughout the Civil War.

