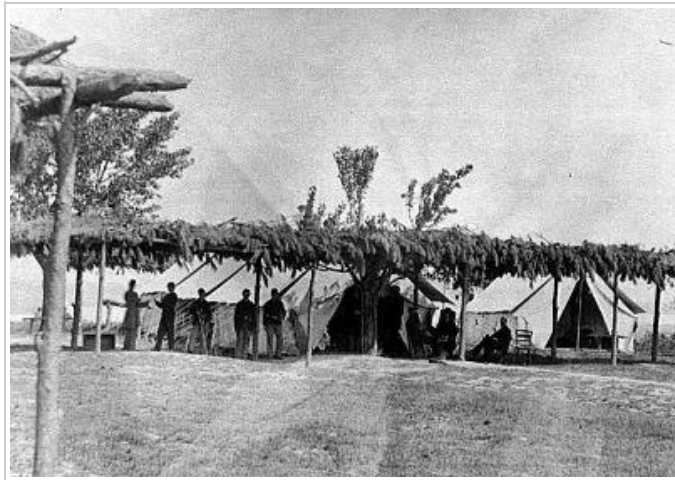


MEDICAL CARE FOR CIVIL WAR SOLDIER

Providing medical care for the number of sick and wounded soldiers during the Civil War was an enormous task for which neither side was prepared. In January 1861, there were only 98 surgeons and few medical administrators in the Union army that numbered 16,000 men. Over the next four years, medical complexes were set up to serve the massive number of casualties resulting from unhealthy camp conditions and battlefield action. Hospitals ranged from simple, quickly-constructed field hospitals near the battles to larger general hospitals located in major cities. In urban areas factories, warehouses, schools and private homes were often used as temporary medical centers.

Medical knowledge and treatment during the Civil War were primitive by today's standards. In the 1860's, the relationship between mosquitoes and malaria, water and typhoid, and un-sterilized instruments and infection were unknown. More soldiers died from infection and disease than gunshot wounds. Appalling sanitary conditions in the army and prisoner of war camps, lethal wounds, and the lack of knowledge about germs and infection accounted for the war's high morbidity and mortality rates. Although most physicians were dedicated and skilled, many soldiers dreaded hospitals and had little faith in the medical profession.

Many Civil War soldiers became sick or died from diseases that would be controlled in subsequent years such as: malaria, typhoid, dysentery and smallpox. Childhood diseases like measles and mumps were rampant in the crowded camps, and hit unexposed soldiers in rural areas. Typical drugs of the day included quinine, morphine and laudanum, and were prescribed for everything from colds to malaria.



Civil War doctors understood the value of anesthetics like ether and chloroform which had been introduced in the 1840s and 1850s. Late in the war, when anesthetics were scarce, some patients literally had to "bite the bullet" during operations. Amputation of wounded arms and legs were the most routinely performed surgical procedures. Limbs were removed as quickly as possible to prevent the spread of life threatening infections such as gangrene and tetanus. In coping with countless cases of gunshot wounds and sickness, surgeons also experienced the hardships of war. Many were over worked and lacked the time and equipment necessary to provide satisfactory care. One hospital surgeon wrote his wife that he had operated steadily for four days and two nights, "yet there are a hundred cases of amputations waiting for me. Poor fellows come and beg almost on their knees for the first chance I have to have an arm taken off. It is a scene of horror such as I never saw."

Along with the widespread use of anesthetic drugs in surgery, two other innovations in medical care emerged during the war; the establishment of a military ambulance service and a women's

nursing corps. These reforms grew out of the work of the U. S. Sanitary Commission, a civilian organization set up in 1861 after intense lobbying by women's groups and relief societies to improve the North's medical care system. A comparable Sanitary Commission was never set up by the Confederate government, although many Southern women's aid societies and civilian groups performed similar roles. They provided medical services and supplies for the cause, raised money for sick soldiers and their families, and helped run much needed medical supplies through the Northern blockade.

Evacuation of the wounded from battlefields was a serious problem until the creation of an organized U. S. ambulance corps in 1864. In the early part of the war, the ambulance service lacked sufficient equipment and trained personnel. Initially both armies used soldiers "least effective under arms" and regimental musicians, many under eighteen, as drivers, stretcher bearers and surgeon's assistants. Ultimately, the ambulance corps was improved to such an extent that it was used as a model for European wars until World War I.

The contribution of women to military medical care was significant. Once limited to making bandages, knitting socks for soldiers and nursing only in the home, women were finally enlisted as hospital nurses during the Civil War. Dorothea Dix, the reformer of asylums for the mentally ill, was appointed the first Superintendent of Female Nurses in the North. She began recruiting army nurses according to rigid standards; women had to be past 30, healthy, "plain almost to repulsion in dress, and devoid of personal attraction." Eventually, Northern and Southern women of varying backgrounds and qualifications served as nurses, from camp followers who also worked as cooks and laundresses to refined and gently bred women.

The magnitude of death and disease caused by the Civil War was phenomenal. Three out of four soldiers died of disease rather than battle wounds in a war that lasted four years and claimed over 600,000 lives. Often lacking resources and overwhelmed by the huge numbers of soldiers needing aid, doctors, nurses and concerned citizens strove to alleviate human suffering and provide the best care possible.