TREATMENT has improved greatly over the years.

1987
Only One Option: AZT
Using only one drug to treat HIV had limited success and led to drug resistance.

NOW
Many Options, Many Combinations
People with HIV generally take a combination of three medications to suppress HIV in their blood to undetectable levels.
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Submissions for the Watermark:
The Watermark encourages submissions of news and stories about events, collections, catalogues, people, awards, grants, publications, and anything else of professional interest to the members of LAMPHHS. Please submit your contributions in a timely way to Stephen Novak, as e-mail attachments. Visuals should be submitted as jpegs with a resolution of at least 300 dpi if possible. Copyright clearance for content and visuals are the responsibility of the author.

EDITOR’S MESSAGE

If any of us had doubts as to the importance of communication in times of stress and trouble, the experience of “sheltering in place” and “social distancing” should have cured us of them. Being able to make a connection with other people – if only via Zoom – is essential to what we are as human beings.

And although listservs and social media are more immediate, there’s still a place in the world of communication, I think, for an old-fashioned newsletter filled with articles on the doings of our colleagues in health sciences libraries and museums. The coming months will present unique challenges to us as we transition to working remotely for who knows how many weeks (or months?).

I hope many of you will send in articles for the next issue of The Watermark on your experiences working far from your beloved stacks and storerooms as we try to make sense of living through what will certainly be a significant episode in the history of medicine.

In the meantime, enjoy this issue. We’re particularly happy to feature Shelley McKellar’s review of the Smithsonian’s exhibit Outbreak: Epidemics in a Connected World. Besides being remarkably germane to what we’re going through, I believe it’s the first review of a museum exhibit in The Watermark since I began reading it twenty plus years ago. I hope others will be interested in doing similar reviews once we’re let out of global house arrest.

Stay well!

Stephen E. Novak
Editor, The Watermark

Dear Colleagues,

We are thinking of you during this Covid-19 outbreak. Our vocation has made us aware of all sorts of medical tragedies related to disease outbreaks. To have one threaten those around us is scary. A distracting balm is to see the history of the health sciences work continue. You all are staying remarkably busy and focused. Reading posts on our listserv and others about collection discoveries, collaborations, and so many other creative endeavors happening during closures, restrictions, and sheltering at home is really valuable. Please continue to share.

In early May, we would have met in Ann Arbor, Michigan, for the 2020 Annual Meeting. The leadership and committee members recognized before it was required (again, that history of health sciences knowledge helps!) that it was necessary to cancel such a large gathering. Thank you for understanding and continued appreciation to all those involved in the planning. As we shared via the listserv and posted on our website, we refunded any registrations. Working with our Program Committee, we are hoping to provide some form of the meeting online. We will hold our business meeting on May 7th, and we’ll share those details through our listserv.

We planned to do the grand reveal of our new name at the Michigan meeting (if we could have waited that long not to share!). After two rounds of voting, and with many thoughtful naming options, we shed light on our new name:

LAMPHHS (pronounced “lamps”): Librarians, Archivists and Museum Professionals in the History of the Health Sciences

We had a 75% participation rate in this vote. LAMPHHS received 63% of the first-place votes, making it the clear winner. Our bylaws and articles of organization were also overwhelmingly voted in.

It is also a pleasure to welcome the new members of our governance group, who have been confirmed by membership vote:
Vice-President: Polina Ilieva, Archivist, UCSF

Secretary: Jamie Rees, Museum Curator and Assistant Librarian, Clendening History of Medicine Library and Museum, University of Kansas Medical Center

Members-at-Large:
Christine Rugge, Curator, Historical Collection, Institute of the History of Medicine, Johns Hopkins University

AND
Judy Chelnick, Associate Curator Emerita, Division of Medicine and Science, National Museum of American History

Many thanks to Dawne Lucas, our Secretary, and Emily Gustainis and Beth DeFrancis Sun, our rotating Members-at-Large, for their service, which ends at the finish of our meeting on May 7th.

For next steps, we will engage our website task force to move forward on transitioning our website, work with our lawyer on incorporation and our non-profit status, and figure out a new logo, among other things.

This is our last column as presidents of our organizations. We appreciate all your support during this period of transition. There were dozens of people involved in various committees, task forces, and other groups that helped guide our efforts. Our organization thrives because of our community, and we deeply hope these changes reinforce those bonds.

May you and yours be healthy. And we will see you in person in Madison, Wisconsin, in 2021!

Stefanie Crumpton and Melissa Grafe
MEMBER PROFILES

Name: Christopher Ryland

Member of ALHHS since: 2017

Hometown: Nashville, TN

Current Employer and Position: Vanderbilt University Libraries. I’m the curator for the History of Medicine Collections and Archives. I work with our rare book and archival collections, curate exhibits, and work closely with the Special Collections library.

Education: I have a BA in English from Maryville College and an MSIS from the University of Tennessee. I also studied English literature at UNC-Chapel Hill.

Professional interests: History of medicine in Tennessee, herbals, natural magick, and community archives

Other facts, interests, or hobbies: I’m a founding member of our local vintage baseball league. We play base ball by the rules and style of 1864, when pitching was underhanded and fielders never wore gloves. I also enjoy hiking with my family and my dog, Teddy.

Name: Judith (Judy) Wiener

Member of ALHHS since: 2000

Hometown: I was born and raised near Pittsburgh, PA. However, I have called Delaware, Ohio, (just north of Columbus) home for 18 years.

Current Employer and Position: The Ohio State University Health Sciences Library Associate Library Director for Collections and Outreach.
Education: BA, History, Wheeling Jesuit University; MA, History with a concentration in Public History, Wright State University; MLIS, Kent State University

Professional interests: Although my career has moved more into a library administration direction, my professional interests still lie mostly in special collections and the medical humanities. I also have interests in library outreach and donor relations.

Other facts, interests, or hobbies: I love traveling, hiking, and visiting museums of all genres. My children are active in competitive swimming and scouting so we spend a great deal of time at swim meets and various scouting activities. I am a Cub Scout den leader and am in charge of a small but mighty group of girls who will be amongst the first in the nation to have the ability to go through the entire Scouts BSA program from Tiger Scout to Eagle (if they so desire to stick with it). I also love to garden and embroider (when I have time), and I’ve picked both up again during the COVID-19 quarantine, finding them both soothing and a great escape! Finally, my husband and I are home brewers, and we are currently preparing a batch of Märzenbier-Prost!

NEWS FROM THE HISTORY OF MEDICINE DIVISION OF THE NATIONAL LIBRARY OF MEDICINE

In accordance with recommendations from the Centers for Disease Control and Prevention (CDC) and to promote social distancing, the National Library of Medicine Reading Rooms were closed to the public starting at noon, Monday, March 16, 2020, until further notice. During this period, NLM online resources will remain available, including NLM Digital Collections and PubMed Central. NLM will continue to provide interlibrary loan (ILL) services from online collections. For latest access information, check the NLM Reading Room page at www.nlm.nih.gov/readingroom

Additionally, for the same reasons as stated above, NLM/HMD has rescheduled the March 26 NLM History Talk by Ashley Bowen, PhD, Andrew W. Mellon Foundation/American Council of Learned Societies Public Fellow, Science History Institute, on Rise, Serve, Lead… And Publish: Including Women Physicians’ Writings. The new date is December 3, 2020.
If you missed the first of NLM’s 2020 History Talks, featuring Katrin Schultheiss, PhD, of The George Washington University speaking on The Girl in the Lion Cage: Regulating Hypnotism in Nineteenth Century France—no worries! You can watch it online as part of the growing archive of our talks at videocast.nih.gov. Additionally, don’t miss our interview with Dr. Schultheiss on our blog Circulating Now.

The National Library of Medicine (NLM) is honored to announce its acquisition of the papers of Louis W. Sullivan, MD, former United States Secretary of Health and Human Services (HHS). This is the first collection of papers from a former HHS Secretary acquired by the NLM and will be part of the archival collections of the world's largest medical library and institute of the National Institutes of Health (NIH).

Louis W. Sullivan is an African American physician who served as secretary of HHS from 1989-1993 and as dean and president of Morehouse School of Medicine (MSM) from 1975-1989 and from 1993-2002. The National Institute on Minority Health and Health Disparities at NIH was first established as an Office under the NIH Director through Secretary Sullivan in 1990 and was elevated to an Institute in 2010.

The Louis W. Sullivan Papers consist of Dr. Sullivan’s HHS chronological correspondence, action/briefing files, daily calendars, speeches, news clippings, White House memorabilia, event photographs, and honorary degrees and awards. The collection documents Secretary Sullivan’s efforts to educate the public on the dangers of tobacco use, including stopping the introduction of Uptown, a cigarette designed for marketing to minority communities; introduce new and improved food labels; initiate a $100 million minority male health and injury prevention initiative; and increase the National Institutes of Health budget over $5 billion.

About his time as Secretary, Dr. Sullivan stated: “I am grateful for the opportunity to have served as U.S. Secretary of Health and Human Services, during a significant time; to oversee the expansion of its programs and contribute to the racial, ethnic, and gender diversity of its leadership. This enhanced the department’s outreach to all Americans.”
Dr. Sullivan earned his undergraduate degree from Morehouse College in 1954 and his medical degree in 1958 from Boston University School of Medicine.

After holding positions at Harvard Medical School, Seton Hall College of Medicine, Boston University Medical Center, and Boston City Hospital, Dr. Sullivan returned to Morehouse College in 1975 to serve as dean and director of the Medical Education Program. Under his leadership, the Medical Education Program became independent from Morehouse College in 1981 and was renamed Morehouse School of Medicine (MSM). Dr. Sullivan served as president and dean of MSM prior to and following his tenure as secretary of HHS. He was also chair of the President’s Board of Advisors on Historically Black Colleges and Universities from 2002-2009 and was co-chair of the President’s Commission on HIV and AIDS from 2001-2006.

Dr. Sullivan is chairman of the Sullivan Alliance to Transform the Health Professions and is the founding president of the Association of Minority Health Professions Schools (AMHPS). He is the author of *The Morehouse Mystique: Becoming a Doctor at the Nation’s Newest African American Medical School* (with Marybeth Gasman, 2012, Johns Hopkins University Press) and his autobiography *Breaking Ground: My Life in Medicine* (with David Chanoff, 2014, University of Georgia Press).

The NLM History of Medicine Division houses the papers of prominent public health leaders, including other officials of the U.S. Department of Health and Human Services (and its predecessor the U.S. Department of Health, Education and Welfare), including Faye Abdellah, Edward Brandt, Emery Johnson, and June Osborn; the papers of NIH Directors Harold Varmus, Bernadine Healy, Donald Fredrickson, James A. Shannon, Robert Marston; and the papers of Surgeons General Regina Benjamin, Jocelyn Elders, C. Everett Koop, Antonia Novello, Julius Richmond, and Luther Terry.
Information about Dr. Sullivan’s papers and the hundreds of other manuscript collections held by the NLM History of Medicine Division is available through NLM’s online finding aids, detailed research guides to manuscript collections.

Beyond these notices, several recent initiatives involving the NLM History of Medicine Division will be of interest, if they have not already crossed your screen:

- **The NLM Web Collecting and Archiving Working Group** continues to identify and select relevant web and social media content related to the COVID-19 pandemic, as part of NLM’s Global Health Events web archive. The growing COVID-19 collection now includes 228 URLs, including federal, state, and local government COVID-19 pages. The group is expanding the collecting scope to document the broad impact of the outbreak, including the work of disaster relief agencies and NGOs, life in quarantine, prevention measures, the experiences of healthcare workers, and more. The group is reviewing recommended content for inclusion in the archive, harvesting content using Archive-It crawlers, reviewing archived sites for quality, and adding metadata. Recommendations for web content to archive as part of the NLM web archive collection can be sent to Christie Moffatt via email (christie.moffatt@nih.gov). The Working Group also continues to participate as an institutional contributor to a broader International Internet Preservation Consortium (IIPC) Novel Coronavirus outbreak web archive collection at [http://archive-it.org/collections/13529](http://archive-it.org/collections/13529). The IIPC collection now includes 2924 sites selected by 31 national and academic libraries around the world. Individual recommendations for this collection can be submitted using the

- National Public Radio (NPR) recently featured several NLM posters in a story about Chinese efforts to stop the spread of COVID-19 using banners to educate the public about the virus. The NLM posters and those of other institutions featured in the article reflect past efforts to educate the public about health matters.

- Growing the corpus of recently-released fully-digitized manuscript collections in NLM Digital Collections, the papers of Charles Glenn King are now available via this resource, and the finding aid for the collection now includes links to the digitized content. The papers were digitized as part of a collaboration with our colleagues at University of California, San Francisco. Using grant funds, the UCSF Industry Documents Library digitized the collection and created metadata for inclusion in their online archive of documents related to the sugar industry and kindly provided NLM a copy of the digitized content and metadata at no cost to NLM.

EXHIBIT REVIEW


A mere seven months after the opening of Outbreak: Epidemics in a Connected World, the outbreak of the novel coronavirus (2019-nCoV) in Wuhan, China, makes this temporary exhibit at the Smithsonian’s National Museum of Natural History in Washington, DC, extremely relevant and eerily predictive. An even larger number of people will (and should) visit this exhibit because of this. Kudos to Smithsonian personnel for seizing the opportunity to bolster museum public programming to address
current events, such as “The Expert Is In: What do we know about Wuhan Coronavirus?” [February 6, 2020]. This augments an already impressive exhibit.

Outbreak is a 4,250-square-foot exhibition with a clear message: human, animal and environmental health are all connected as “One Health.” NMNH curator Sabrina Sholts, with infectious disease physician Dr. Daniel Lucey and veterinary ecologist Dr. Jonathan Epstein, thread science, history, animal behaviour, ecological changes, community response and individual agency throughout the exhibit. Organized in two parts, the first section of the exhibit shows how interconnected our world is, with microbes jumping from wildlife to humans and the spreading of these zoonotic diseases internationally. It explains how and why this has occurred by focusing on eight viruses: Ebola, Zika, Nipah, HIV/AIDS, Pandemic influenza, Avian influenza, SARS, and MERS. Succinct descriptions of these outbreaks and community responses, with consistent red box headings—Humans—Animals—Environment—for each of these eight viruses, reinforces the “One Health” interconnectedness message. The second section of the exhibit highlights the work of different groups of people—physicians, epidemiologists, scientists, veterinarians, public health workers, and citizens—“to recognize outbreaks, detect their causes, and respond effectively.” In times of outbreaks, practitioners and experts act immediately to treat the sick and to contain the spread of the disease. Text panels foreground outbreak preparedness, disease prevention, and early detection as the best strategy to reduce the frequency and severity of future outbreaks.

As a medical historian, I found Outbreak offered enough historical context alongside several interesting objects to keep me engaged for nearly two hours. It is a ‘busy’ space, with vibrant colors and interactive panels, and on the day that I visited, an engaging docent directed my attention to multiple individual experiences
profiled in the exhibit. *Outbreak* employs a judicious use of digital technologies and interactive panels (arguably aimed for younger visitors) that supports, without overtaking, the exhibit space. A good example of this includes a panel discussing the international spread of SARS in 2003. There was a short two-minute video, running on a loop, which effectively demonstrated the rapid dissemination of SARS, courtesy of air travel, over a 34-week period. I watched it multiple times and thought how useful it would be in my teaching! Likewise, interactive touch screens in the HIV/AIDS section effectively demonstrated the global nature of that disease; elsewhere, a multi-player game allows visitors to work though how best to contain an outbreak.

I liked the HIV/AIDS section for its presentation of a 50-year storyline, highlighting the role of science but also social stigma, activism, and legislative changes. The objects in this section included colorful capsules and tablets, including the AZT drug, to applaud treatment advances; an ACT UP t-shirt with the well-recognized graphic of a pink triangle against a black backdrop with the words “Silence=Death” to recognize political activism; a display of condoms alongside public health posters to highlight public awareness efforts; and more. A remarkable object in this exhibit was a large scrapbook, assembled by Ryan White’s mother, documenting her hemophiliac son’s experience with HIV/AIDS, including the school ban against her son and the passing of The Ryan White CARE Act. From there, I moved to an eye-catching display of bugs—multiple mosquitoes, tiny ticks, even tinier fleas, larger triatomine bugs and tsetse flies—that demonstrated the role of blood-sucking insects as vectors. Can’t say that I’d ever seen a “kissing” bug (vector for Chagas disease) until then! I also had never seen a smallpox vaccine needle before; this object resides in the “Eradication Smallpox” case, alongside an enlarged photo that emphasized its two-pointed end for quick and easy vaccination. The accompanying text highlighted two important technological advances developed in the mid-1960s: (1) this new type of vaccine needle; and (2) a freeze-dried vaccine that did not need refrigeration storage.
There is a lot of good history and science information in this exhibit. Anyone who visits Outbreak will leave better aware of the risks of pandemics in today’s world. How much better we have become in decreasing, or at least responding to, outbreaks may soon become clearer as we navigate the current scenario of the coronavirus (2019-nCoV). Add a visit to see this exhibit to your calendar while time permits.

Shelley McKellar
Hannah Chair in the History of Medicine
Western University

Addendum [March 17, 2020]: I wrote the above review on February 3, 2020. In support of public health measures taken to help slow the spread of COVID-19 (coronavirus), all Smithsonian museums temporarily closed, effective March 14, 2020. When the National Museum of Natural History reopens, I fully expect Smithsonian Outbreak curators and public program staff will highlight the world’s recent (ongoing) measures of self-quarantine, media reporting, scientific knowledge, medical treatment, government responses, and individual anxiety surrounding the COVID-19 pandemic, making clear connections to many of the themes and events presented in this exhibit. At that time, a visit to see this exhibit becomes even more expedient and meaningful for us all!
REPOSITORY NEWS

News from the Aufses Mount Sinai Archives
I am very happy to announce that Stefana Breitwiese has joined the Mount Sinai Arthur H. Aufses, Jr., MD Archives as our new Digital Archivist. Stefana recently relocated from Montreal, Quebec, where she was formerly the Digital Archivist at the Canadian Centre for Architecture. She received her Master of Library Science from Simmons School of Library and Information Science in Boston, MA, and her professional focus has been on preserving and providing access to born-digital archives. Please join me in welcoming her to the medical archives field!

Barbara J. Niss
Director, The Arthur H. Aufses, Jr., MD Archives & Mount Sinai Records Management Program

News from the University of Illinois-Chicago

Chicago’s first hospice donates papers to UIC: “We existed for our patients and families”

Several dozen people who had worked at or been impacted by the first hospice to open in Chicago were at the University of Illinois at Chicago recently to celebrate the role that Horizon Hospice played for hundreds of people and their families for more than 40 years.

In 1978, Horizon Hospice became Chicago’s first hospice when it admitted its first patient. Just a decade later, Horizon was serving 109 patients annually by the time the HIV/AIDS crisis was taking its toll, and it continued growing to about 2,000 patients by 2013, regardless of their ability to pay. In 2015, it merged with two suburban hospices to form JourneyCare Hospice and Palliative Care.

To celebrate the role Horizon Hospice played in the city and to share its history with researchers, officials have donated its archives to the University of Illinois at Chicago, which will house them in the Library of the Health Sciences-Chicago Special Collections and University Archives.
University Librarian and Dean of Libraries Mary Case thanked hospice founders for entrusting their archives to UIC. The collection was processed by Special Collections librarian Megan Keller Young and students Lauren Janik and Maria Vargas.

“Collections like this are a treasure trove for researchers investigating the story of care of the underserved and marginalized communities in our city, among many other topics,” Case said.

Dr. Michael Preodor, the hospice’s first medical director, recalled how everyone from the board of directors down to the volunteers and office workers believed that their focus was on — and should be on — the patients and their families.

“We remained committed to treating suffering from any cause, physical, psychological, social or spiritual and to help them find peace and meaning in their lives,” said Preodor. “[We] never lost sight of the fact that we existed for our patients and families.”

In addition to being the first hospice in Chicago, Horizon Hospice helped found the Illinois State Hospice Organization, which helped pass the Illinois Hospice Licensing Law in 1983.

AIDS patients were a particular focus for the hospice, and in 1992, it partnered with Chicago House, a residential center that provided patients with end-of-life care. Another
focus for the hospice was children, which led to the formation in 2004 of “All About Kids,” its pediatric hospice and palliative care program. Bereavement assistance was essential to its services for families, and its “BraveHeart” program served grieving children in schools in underserved neighborhoods.

“Horizon Hospice took a philosophy of care for the dying and used it to help all,” Preodor said. “When we and the world were ambushed by the epidemic of HIV/AIDS in the 80s and 90s, our volunteers, nurses, and doctors stepped up to offer hospice to a new kind of patient, a patient unfairly isolated and stigmatized.”

The doctors and nurses worked with trained volunteers to serve the patient and the caregivers. Since they knew that death was a family affair, the involvement of the family and friends helped the survivors as much as the patients.

In 2012, the hospice established the Ada F. Addington Inpatient Hospice Unit at Rush University Medical Center, named after one of Horizon’s four founders.

“Horizon Hospice is an excellent example of how citizens can invent a better way to deliver services to the community that is more effective and less expensive,” said Joan Flanagan, a founding board member and longtime patient care volunteer.

“Starting from a board of eight people, Horizon, with the support of smart grant makers and individual donors, could create a model for end-of-life care that was more patient-controlled and patient-oriented, could involve the entire family of caregivers so they had a better experience and greatly reduced expenses,” Flanagan said.

The Horizon Hospice records include 28 linear feet of organizational and operating records, annual reports, correspondence, photographs and demographic information, said Keller Young. She said the collection will be helpful to students, staff and non-UIC researchers with an interest in the history of palliative and hospice care in Chicago. In addition, a large portion of fundraising correspondence is available, which would be of interest to people looking into nonprofit philanthropy.

Keller Young said that as they were preparing the collection, they were stirred by the founders’ priorities as they were creating the hospice: to provide pain control, give the patient the opportunity to control the rest of their life, prevent patients from dying alone, prepare the patient’s family and the patient for end-of-life and to provide an environment so the patient may die at home if they wished.
“We are both moved by the passion and fortitude of the hospice personnel,” Keller Young said.

**UIC receives archives of pioneering neuropsychiatrist**

More than 80 years ago, the state-of-the-art treatment for mental illness was electric shock treatment. Cold water immersion, insulin shock, and lobotomies were other remedies for those with recurrent “nervous” disorders. The stigma of mental illness was compounded in states like Illinois, where one received a court record when released from a state hospital.

In 1937, Dr. Abraham A. Low, a neuropsychiatrist with the Psychiatric Institute at the University of Illinois, worked with his patients to form the organization now known as Recovery International, or RI, to help patients reintegrate into the community following hospitalization. He developed techniques of self-help to augment outpatient treatments by professionals. Eventually, Dr. Low’s lectures and practices evolved into the Recovery International Method, a rigorous cognitive-behavioral training and meeting standard, including readings, four-step examples and “spotting” techniques. Recovery meetings are peer-led by trained volunteer leaders who have experienced and benefited from the RI Method themselves.

Recovery International, the 80-year-old nonprofit organization focused on mental health, has donated early organizational records and the personal papers of its founder, Dr. Low, to the University of Illinois at Chicago’s Special Collections and University Archives at the Library of the Health Sciences–Chicago.

“These records provide researchers with an important opportunity to examine the history and growth of mental illness outpatient treatment,” said Megan Keller Young, special collections librarian.

Among the records are nearly complete sets of newsletters and other publications, including books, pamphlets and brochures. The records also include transcriptions of taped interviews with Dr. Low done shortly before his death, unpublished manuscripts, and Dr. Low’s correspondence with his wife, Mae, key leaders, and others.

Dr. Low was born in Poland, educated in Vienna and was a practicing psychiatrist in New York prior to coming to Chicago. The records include his diploma, medical license, personal journals, and other ephemera. Of special interest are his lectures and writings.
that constitute pioneering work in cognitive-behavioral therapy and methodology of peer-led support groups.

Once processed, the records of Recovery International and Dr. Low will be available to the public in the Special Collections and University Archives Reading Room at the Library of the Health Sciences–Chicago.

Today, Recovery International provides tools for people to deal with depression, anxiety, fear, and various forms of mental illness. Each week, RI offers more than 450 meetings in 40 areas throughout the United States, Canada, Ireland, and Puerto Rico. Participants and members live in more than 20 countries throughout the world, with books available in English, Spanish and French.

The Library of the Health Sciences–Chicago is located at 1750 W. Polk St. For more information, call 312-996-8977. The library includes materials on medicine, nursing, dentistry, pharmacology, and other health-related professions. Its special collections include the archival records of the Illinois Occupational Therapy Association and Horizon Hospice, as well as public health, medical education, nursing, psychiatry, and neurology rare book collections, among others.

ANNOUNCEMENTS

The Center for the History of Family Medicine Receives Manuscript Donation

The Center for the History of Family Medicine (CHFM) has received a donation of three manuscripts from Nikitas J. Zervanos, MD. The manuscripts focus on the history of family medicine and Penn Medicine Lancaster General Health’s Family Practice Residency Program in Lancaster, PA, one of the first approved family medicine programs in the United States. Dr. Zervanos was the founding director.

“The manuscripts from Dr. Zervanos represent 50 years of focused education regarding the family physician,” said Phyl Naragon, deputy executive director, American Academy of Family Physicians Foundation. “We are thrilled he has donated the manuscripts to the Center, where family physicians, residents, students, historians, scholars, and educators will have access to them for years to come.”
The manuscripts are separated into three books. Book I is an account of the evolution of general medical practice in America; Book II delves into the history of general medical practice in Lancaster County, as well as the history of Lancaster General Hospital; Book III is the story of Lancaster General's family practice residency program.

For more information about the collection and how to access the manuscripts, please email the Center at chfm@aafp.org or call (800) 274-2237, ext. 6007.

W. Bruce Fye Medical History Research Travel Grant

The W. Bruce Fye Center for the History of Medicine is pleased to announce its annual W. Bruce Fye Medical History Research Travel Grant. The grant is available to physicians, historians, medical students, graduate students, faculty members, and independent scholars who wish to use archival and library resources at Mayo Clinic in Rochester, MN. The grant (up to $1,500 in one calendar year) may be used for transportation, lodging, food, and incidental expenses relating to the research project. It is available to residents of the United States and Canada who live more than 75 miles from Rochester.

The W. Bruce Fye Center for the History of Medicine houses archival collections that contain official records of the Clinic and its administrative offices, official and unofficial publications, departmental annual reports, committee minutes, photographic and moving images, sound recordings, personal papers, and memorabilia relating to the Mayo Clinic, its mission, programs, and people. To search the archival holdings, please visit the online catalog (MAX).

The W. Bruce Fye History of Medicine Library is a specialized library housing important collections in the history of medicine and allied sciences. Several thousand volumes of rare medical classics (from 1479) and early journal literature (from 1665) comprise the core collection of primary literature on all aspects of medicine and allied fields. More recently published histories, biographies, facsimiles, and other support materials comprise the remainder of the collection of some 23,000 total volumes. Special strengths include anesthesiology, cardiology, dermatology, immunology, ophthalmology, and neurology. The library also has a large collection of Mayo physician bound reprints. To search the library catalog, please visit the library website (http://librarycatalog.mayo.edu/).
Applicants should send by e-mail as attachments the items listed below to Renee Ziemer:

- Abstract of your project (250 words) stating the general scope and purpose
- How historical resources at Mayo Clinic will further your research
- Abbreviated curriculum vitae (3 pages or less)
- One letter of reference that includes comments on your project

Timeline for 2021 grant:
Application deadline (all materials): November 1, 2020
Successful applicant(s) will be notified by December 31, 2020
Visit(s) to Rochester must be completed by December 17, 2021

Contact information:
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BOOK REVIEWS


The Biblical observation that “of making many books there is no end” seems to apply with special force to Andreas Vesalius’s 1543 *De Humani Corporis Fabrica*. Attacked, praised, and plagiarized practically from the moment it came off the presses, Vesalius’s landmark work has generated more commentary and scholarly activity than practically any other publication in the history of medicine. In the last 20 years or so alone we’ve had two English translations of the 1543 edition, one of the 1555 second edition, several
works on the art of the Fabrica, and even a novel, The Sensualist, in which Vesalius plays a role.

Now comes Daniel Margócsy, Mark Somos, and Stephen N. Joffe’s descriptive census of the first two editions of the Fabrica, a work that can be described as “weighty” in more ways than one. Measuring 11 ½” by 9” (29.5 cm. by 22 cm.) and weighing a few pounds, this isn’t a book anyone’s likely to read on the subway. The physical weight is matched by the book’s impressive scope: for besides being a description of approximately 731 copies of the two editions now known to exist – no small feat, even in an age of easy air travel – the book includes articles on numerous aspects of the Fabrica based on the information gained by this survey. No aspect of the physical attributes of the volume or of its reception among readers both at the time of publication and later seems to have escaped the scrutiny of the authors: pricing, binding, locations, ownership, annotations, censorship are all addressed.

Surprises abound. While scholarship since the late 19th century has concentrated on Vesalius’ groundbreaking work on the bones and muscles contained in Books I and II, it appears that based on their annotations of the text contemporary readers tended to focus on the descriptions of the internal organs in Book V, in particular Vesalius’ remarks on the sexual organs. The current emphasis on the importance of the striking illustrations seems not to have made as much of an impression on earlier readers, perhaps because, as the authors state, “for the first generation...of Vesalian readers, it was not self-evident how one should deal with the information the woodcuts provided.” (p. 79).

Other conclusions the authors reach are not so unexpected. They trace majority ownership of the Fabrica from physicians (1600), through physicians and religious institutions (1700), to libraries and universities (1900). The watershed in ownership occurred in the late 18th-early 19th century when the abolition of the Jesuits, followed by the French Revolutionary and Napoleonic secularization of religious property throughout Europe led to a flood of Fabricas on the market from dissolved monastery libraries. While the authors find censorship of copies that were located in Catholic countries after the Fabrica was placed on the Index (evidently because of its Protestant printer), they note that it was neither extensive nor consistent and often consisted of blacking out the “heretic” printer’s name and putting ink bikinis on the genitalia of the muscle men.
Based on the investigation of annotations made by early readers of the *Fabrica*, the authors find that most were “sporadic readers” – reading those parts of the tome that contained information important to them while leaving the rest unread. In short, readers treated it more like an encyclopedia or textbook to be consulted when needed rather than a narrative to be read from beginning to end.

This is an endlessly stimulating volume and will, I’m sure, be considered a landmark not only in Vesalian studies but in Early Modern European intellectual history generally. Any library supporting a program in the history of medicine, book history, or the history of reading, will want a copy of this in their holdings – the price notwithstanding. I know I will be consulting it constantly as I try to explain the riches of Vesalius’s great work to our students.

**Stephen E. Novak**  
Head, Archives & Special Collections  
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Paul E. Stepansky, PhD, who was formerly the managing director of the Analytic Press, maintains the very active, multi-topic blog “Medicine, Health, and History” from which *Easing Pain on the Western Front* arose. This book is a tremendously useful survey, and Stepansky’s reverence for nursing comes through in his frequently eloquent style. It is also much more scholarly than many of McFarland’s recent publications.

Stepansky has arranged his research around the original writings of front line nurses, and his reliance on accessibly-written primary sources helps to set his work apart from other books on the topic. These works help him to elucidate the aspects of World War I nursing of most interest to him. His questions include but are not limited to: what were nurses’ hands-on duties on the front and how did they learn how to perform them; how did they cope with constant desperate situations; what were the roles of the nurse anesthetists and the nurses working with shell shocked patients? The nurses whose writings Stepansky quotes are American or from countries now in the British Commonwealth. An oft-quoted nurse is Helen Dore Boylston, a graduate of the nursing school at Massachusetts General Hospital. Her *“Sister”: War Diary of a Nurse* (NY:
Ives Washburn, 1927), is freely available via Hathitrust.org and gives an extremely vivid, “you are there” view of her experiences. She became well-known mid-century for her “Sue Barton” series of books for young readers, responsible for the nursing careers of many readers.

Stepansky makes some wonderful connections between and among nurses, comparing and contrasting nursing practice, nursing creativity, and nursing education (both formal and informal) in the Civil War, Spanish-American War, Anglo-Boer War, and World War I. One of the book’s seven chapters delves into nursing in World War II and Vietnam, and in an all-too-relevant chapter, Stepansky reviews the role of nurses during the 1918 influenza epidemic. Stepansky also supplies some fascinating information about the post-war lives of many of these nurses whom he quotes.

There is some repetition and a few errors in names. American nurse Isabel Hampton, later Robb, is cited sometimes with her maiden name and sometimes with her married name; British nurses Grace Bignold and Enid Bagnold were both cited as Bagnold; a Boston volunteer with the Red Cross was mentioned as being a socialist when in fact she was a socialite. Certainly, one might argue with Stepansky’s statement that psychiatric nursing began in “the field hospitals of the Western front” (p. 63). Beginning in the 1890’s, America’s first trained nurse, Linda Richards, spent years “organizing schools in both general hospitals and in those for the care of the insane.” (Richards, L., 1923, Address Given at the Fiftieth Anniversary of the New England Hospital Training School, Boston. The American Journal of Nursing, 23(4), 282-285. doi: 10.2307/3406722). In 1913, the school of nursing at Johns Hopkins was the first to introduce a course in psychiatric nursing. (Videbeck S.L. 2005, Psychiatric Mental Health Nursing, 3rd ed., 2005, p. 9).

The book includes extensive chapter notes and a lengthy bibliography. Source notes do not include URLs of freely available books or articles, however. There are a modest number of black-and-white illustrations, most showing nurses actively engaged in treating patients; some images are quite graphic.

_Easing Pain on the Western Front_ (also available electronically; not seen) is highly recommended for all history of nursing or military medicine collections.

**Martha E. Stone**
Retired
Author Alan I. West is a collector of Civil War and 19th century medicine books and artifacts who previously worked for the medical and surgical equipment manufacturer Codman & Shurtleff. In 1998, West purchased a walnut medicine chest with an engraved brass plate tracing its provenance to Dr. C. H. Tebault during his service as a surgeon for the 10th South Carolina Volunteer Infantry Regiment (1862-1863).

According to the author, this purchase “began a 22-year-long quest to understand the persona of Dr. Tebault” (p. 2). This book appears to be the culmination of his research, providing comprehensive information about Tebault’s career. The author also includes background information about topics such as medical education in the antebellum South, Tebault’s extended family, Civil War leaders, Reconstruction, the “Lost Cause” narrative, and the impeachment of Andrew Johnson.

Upon graduating from the Medical College of Louisiana (now the Tulane University School of Medicine) in 1862, Dr. Christopher Hamilton Tebault (1838-1914) joined the 21st Louisiana Infantry Regiment as an assistant surgeon and was soon promoted to surgeon of the 10th South Carolina Volunteer Infantry Regiment. He was moved to Quintard Hospital in Griffin, Georgia, in 1864 and then to Ocmulgee Hospital in Macon, Georgia, where he stayed for the remainder of the war. Upon his return to New Orleans, Tebault served as a faculty member at his alma mater and a staff member at Charity Hospital, specializing in pediatric disease. He also helped advance sanitation measures in New Orleans in order to reduce yellow fever outbreaks, advocated for establishing pensions and other benefits for Confederate veterans, and fought against taxes implemented during Reconstruction. Well-respected among his peers, he was one of 34 men chosen to escort Jefferson Davis’s body from New Orleans to Richmond in 1893. In 1896, he was named Surgeon General of the United Confederate Veterans, a position he held until his death.

The author presents Tebault’s biography in six chapters, and appends four of Tebault’s publications at the end of the volume: “Modified Inoculation,” “The Drainage System Peculiar to New Orleans,” “Confederate Resources,” and “Hospitals of the Confederacy.” These publications are valuable additions, advancing two of the author’s findings: that Tebault was a “complex individual” and a “creative and compassionate surgeon who utilized the meager resources available to Confederate surgeons,” and that he was a major proponent of the South’s “Lost Cause” doctrine (p. 2).
The main part of the book, however, suffers from a lack of editorial guidance, and this reviewer questions the overall writing style. In the last paragraph of the preface, West notes that he has “endeavored to let Dr. Tebault’s own voice be heard and use extensive quotes” (p. 4). And extensive they are! The author includes more than 100 long quotations, not only from Tebault, but from a variety of other people mentioned throughout the book. In this reviewer’s opinion, these long quotes are distractions. I would have preferred shorter quotes with more explanation and analysis from the author and enjoyed the book much more once I stopped reading the quotations. Moreover, the chapters often seem to devolve into a stream of consciousness with little editing, and West relies on repeating terms such as “diseases of children,” “scalawags,” and “carpetbaggers” instead of rewording. Written and edited differently, this manuscript could have been an article printed in an academic journal, although perhaps that is not the author’s desired target audience.

Overall, *Christopher H. Tebault, Surgeon to the Confederacy* is a well-researched biography of a Confederate and New Orleans doctor and surgeon. The preface and afterword include thoughtful commentary about Tebault’s perspective as a southerner and former Confederate surgeon, as well as the present-day role of Confederate monuments. The author clearly struggled with many of Tebault’s views that contradict his own values and did a good job researching how Tebault came to have those views. However, whereas West does achieve his goal of writing Tebault’s biography, this book would have benefitted from him relying less on the use of long quotations and more on his own wording, synthesis, and analysis.

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2. *New Orleans Medical and Surgical Journal* 19 (July 1866): 36-42.
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