Much of what follows is extracted from the diary of Nicholas Gesner (1765-1858), a farmer who lived in Palisades (then called Rockland) during the early 19th century. The task of transcribing and editing some 1600 pages was begun in 1958 by Alice Munro Haagensen who continued until she reached 100 (she lived to 105.) Later the project was completed by her daughter Alice Gerard and published in 2015.

In addition to farming, Nicholas Gesner (NG) of Palisades served variously as surveyor, schoolteacher, lawyer and census taker. The portion of his diary that remains covers much of the period between 1829 -1850 and his ungrammatical and sketchy entries not only described personal activities, but served as an almanac and account book. In addition to notes about weather conditions and local gossip, particular attention was paid to prayer meetings of which NG was a frequent and enthusiastic participant. He recorded the subjects of sermons given in town by itinerant preachers, named those who attended or didn’t, and described regional camp meetings which sometimes attracted hundreds, even thousands. Also the bitter rivalry between two opposing Methodist factions - “the Old Side” vs. NG’s “Reformers” - was related in considerable detail.

Interspersed among all of this, and the subject of this essay, were fragmentary references to health matters which provide vivid insight from the patient’s perspective about medical practice and practitioners during the 1830s and 1840s - a time when “bleeding, blistering, purging and puking” predominated. Occasional diary entries referred to certain local doctors (Jonathan Marvin, Samuel Perry, Abraham Verbruyck, ?Barto, ?Wright) who might draw off blood or prescribe plasters and potions to family members. In a dire emergency physicians in New York City could be consulted and on one occasion in June 1832 when NG’s son Herbert sustained a severe injury which led
to amputation of his foot and then infection set in, he was taken across the river to the
College of Physicians and Surgeons where a below the knee amputation was
performed by Valentine Mott, the leading surgeon of the day, “with 8 or 9 students
present.” The competency of country doctors was limited and there was little uniformity
between their practices, except for their prescribing toxic drugs, e.g. calomel (mercury),
laudanum (opium), cayenne pepper and other unpleasant remedies. Indeed, in routine
cases it was difficult to distinguish “regular” doctors from quacks as was illustrated by
the following diary entry from June 15, 1833:

A pretended Botanist and Stranger passed my door to Day, pretended to cure
Rheumatism and also the fever and Ague in 13 or 14 Hours and never to have it
again. Also the Salt Rheumatism, the tooth ache in 2 Minutes with many other
complaints. His upper lip was unshorn, had on it long hair. Said he had been
educated a Regular bred physician in France, had been in Canada as much as
15 or 16 years Among the Indians there and had acquired a Knowledge of
Botanical Medicine. I fancy his long lip beard was a Stratagem to make people
believe he knew something and he could speak well; but instead of French I think
he is Irish by tongue. I got a plaster of him for Jake 4 shillings. A man with him
who carried his medicine.

Although this stranger seems to have been an itinerant, several members of NG’s family
were proponents of the popular Thomsonian movement, a gentler botanical alternative
to the “heroic” style favored by mainstream practitioners, and usually their herbal
remedies were tried before reluctantly calling a doctor. The following sequence from the
summer of 1834 illustrates a typical doctor-patient relationship:

Aug. 9: [Exhausted after 4 days labour] I gave up just before 12 having brought
in One load of Hay from little field, grew very sick at the Stomach and much
Weakness, the family having thought it best, sent for the Doctor…Doctor Hopson
came in the evening to see me. He saw it necessary to Administer Medicine, I
thought in short time the pain in My back seemed to diminish. This was Saturday evening (perhaps some laudanum) rested middling easy that Night.
Aug. 10: Dr. Hopson here early; saw me more favorable, Early in the afternoon [he] was going up in the point to see David Parsels arm, stopped in, Whether this will be counted I Know Not….This afternoon my pain (not by way of spasms) increased to a great degree all round my body down each thigh and leg [sciatica] so as to render me really miserable, had draughts to feet Morning miserable.
Aug. 11: Doctor Hopson this Morning after hearing my situation the last Night left Physic - it appeared good as a purge however I was some easier before He came…This night I did sweat in an excessive degree, began to feel moist on the Skin before evening, the sheet under and over me was Wet as water as far as it could Spread…This seems natures effort for no medicine for this purpose has been administered, all the time very wet weather. My pain ceased with the sweating.
Aug. 12: Doctor Hopson visited me this morning, considered the sweating would be of much service, admonished me to be careful and not venture outdoors too soon, left nothing to take, since I appeared so much better…In all this time eat little or nothing, using some brook Mint tea. But retained great thirst. However I felt quite comfortable in the forenoon.
Aug. 13: Hopson visited me Again to Day, thought I was doing well….Today I enjoyed a tolerably good Day as to sickness.
Aug. 14: I sweated the Bed shirt and Wet again the past night But not quite equal to Monday Night…Doctor again to Day.
Aug. 15: Hopson came in…left 12 powders to be taken at the interval of one hour this being in the afternoon. I had Grown worse taken with a smart chill [which] left me very sick. I have a constant and insatiable thirst.
Aug. 16: Doctor paid no visit to Day, concluded the 12 powders left on the 15th would terminate the fear……[later] quite sick, light headed some.
Aug. 17: Doctors 8th Regular visit
Aug. 19: *Doctor in this evening enquired into my state left no Medicine. Said he would call tomorrow and leave me some tonic Medicine for the Stomach; I expected he had done; this should not be called a Medical Visit.*

Aug. 20: *I am a little better…Doctor Hopson here about 11 o’clock this morning left some tonic Medicine. I had not expected him Again and therefore he Ought not to make charge*

Aug. 22: *I feel something better this morning*

Aug. 26: *I mowed Spread and Raked Some, with much fatigue and trembling*

For the next month NG continued to suffer intermittent weakness and fever, but what’s most interesting about this narrative is his skepticism about the efficacy of Doctor Hopson’s medicines and his frustration about being charged for what he believed were unnecessary home visits - ten of them over two weeks!

**MORE ABOUT DOCTORS’ FEES**

Exasperation with Dr. Hopson was evident again in the following sequence from 1835 concerning NG’s wife Gracy who suffered from recurrent gastric symptoms:

It starts as a “plague” in the stomach, fly’s up in her throat, almost chokes her. Harsh medicine sends it down a Moment, but starts up again as though it would flee from the severity of the Stuff taken - large portions of the spirits of turpentine has been taken. Doctors medicine and every harsh attempt to destroy it has hitherto failed.

Oct. 16: *Doctor Hopson came to see Gracy, she has a longtime complaint of Great distress at the Stomach, she thinks it is Worms, an empty Stomach she feels very bad, Weak faint, sickness at the Stomach; perceives a Crawling up in her throat. He thinks it may be Worms.*

Oct. 17: *Gracy bad last Night About 12 o’clock, she said she thought she could not live till Morning, thinks that she is devoured With Stomach Worms; she seems quite poorly for About one Hour…She took the Doctor’s Medicine - a little Better this Morning.*
Oct. 21: Gracy very ill this morning with her stomach, judges it to be Worms, she is very weak....Doctor Hopson to visit her this Morning, left some more Medicine, this is his 2nd visit to her

Oct. 25: Gracy is considerably better, Doctor Hopson was to see her friday...Which is his 3rd Visit, did Nothing for her

Oct 29: Doctor Hopsons 4th visit to see Gracy, came this Morning

Gracy continued to suffer from some live Animal on her Stomach, creeping up in her throat, half choking of Her...and giving her much Misery. Again, three weeks later: Gracy is much troubled with Some living Animal on her Stomach, wears her down a long time already, best part of a Year. It’s not clear whether Gracy really suffered from worms or from some other chronic ailment, but her self-diagnosis was plausible. The People's Common Sense Medical Adviser in Plain English or Medicine Simplified, published by R. V. Pierce, MD in 1889, had this to say about intestinal worms:

The round worm, termed by naturalists ascaris lumbricoides, varies from six inches to a foot in length. It infests the small intestine and seldom migrates into the stomach or large bowel. Instances are reported, however, in which it has crept upward in the esophagus, larynx, nostrils and eustachian tube....The symptoms which the long worms occasion are frequently obscure. Thirst, irregular appetite, colicky pains, excessive flow of saliva, enlargement of the abdomen, itching of the nose, pallor of the face, offensive breath, disturbed sleep and grinding of the teeth are kA common symptoms...The passage of this species of worms from the bowels, or their ejection from the stomach, is the only positive evidence of their presence.

Nov. 27, 1836: Gracy quite ill 2 or 3 Days, especially in the Evening with her throat and Stomach is quite sore. It appears that her complaint is Worms, one came from her Mouth a few evenings Ago.

Feb. 2, 1836: I Paid Doctor Hopson’s $4.50 being in full, he was in front of house on his way to New York.
When Gracy, suffered the same complaints in 1838, she was attended by a different doctor (Abraham Verbyck) who probably was no more successful but might have been cheaper. Like his mother Gracy, NG’s son Jacob suffered from recurrent pains in his abdomen and right side: *violent spasms, apparently fainting or fit under the excessive pain in his side, his legs feet toes hands in the most awful condition with Cramps; a poor unfortunate Sufferer is he.* On October 4, 1832 Jacob consulted the long established Dr. Abraham Cornelison of West Nyack but wasn’t pleased with the visit. When Jacob failed to pay the bill, the doctor sued and more than a year later (November 6, 1833) NG intervened as mediator:

> I went to Nyack to settle Jacob Gesner’s Bill of Medicine with Doctor Cornelison, he had a Summons served on Jacob Gesner for 10 shillings. Jacob Gesner considered this bill an extravagant Charge for a trifle of drops. Jacob Gesner had offered him pay at the time When he got the Medicine but he, the doctor, Refused to take it. The cost was 6 shillings 6 pence but the Doctor Agreed to take 6 shillings and the Cost 5 shillings = 11 shillings. This I paid. Jacob gave 8.

Jacob continued to suffer from colicky pain and in 1834, young Dr. Hopson, then just beginning practice in nearby Piermont and presumably less expensive than Dr. Cornelison, was called to see him.

> Sept. 15: Jacob Gesner exceedingly poorly with his Side, attended with paintings and violent Cramps, and Seemingly several turns like fits, the neighbors called in and Some happened in. This was truly a Mournful sight; the extreme Agony, the faintings the Cramps and apparent lifeless turns could but excite the Sympathy of the hard-heartedest enemy truly a deplorable and pitiable condition… Doctor Hopson sent for came almost 10 at Nt

Another example of NG intervening in settling a doctor’s bill was described in the following entries made in 1841.
Oct. 30: I drew up a paper for Peggy Concklin who is and has long been the object of sore affliction and excruciating pain With the Stone in the bladder, the Doctors Bill [Dr. L.B. Wright] with some Medicine was 115 Visits amounting to 118 $ Brought in a few Days ago. The use of an instrument was almost daily necessary, a great sufferer — this paper Was to try to collect it for her in her Name…

During the early 19th century, because invasive surgery to remove bladder stones was hazardous, a safer approach employed urethral catheters to crush the stone and then flush out fragments. Although 115 daily catheterizations seems like a remarkable number, probably Peggy’s bladder stone, like a ball-valve, caused intermittent obstruction and the catheter pushing up and away provided temporary relief.

So who was Dr. L.B. Wright? During the 1850s advertisements frequently appeared in local newspapers proclaiming his “astounding cures.” One that appeared in the Rockland County Journal (see HRVH, Jan. 15, 1859) modestly claimed Dr. Wright’s Antidote was “the most potent remedy ever yet discovered.” The liquid cathartic could be purchased at apothecaries throughout the county, including in Piermont, and cured several dozen conditions: piles, pimpled faces, hysterics, impotency, summer complaints, flatulence and was “a sovereign remedy” for female weakness. And yes, Dr. Wright’s Antidote also was claimed to be “triumphant” for “gravel or stone in the bladder.” One wonders why with such amazing efficacy that daily house calls and catheterizations for Peggy Concklin were necessary, and it’s understandable that her husband was perturbed. Henry was able to pay $29.18 for “Labour in Hay and Sundry other articles” and $32 more was raised from the community making $61.18. But this still was insufficient. As a compromise, Henry Concklin gave Dr. Wright a promissory note of $18 bringing the total to $79.18. The rest the Doctor “abated” promising “to Attend Peggy when necessary while he Remained in the neighborhood gratis.” Presumably, Dr. Wright didn’t plan to spend much more time in that neighborhood.
THE PORTLY DR. CORNELISON

NG may not have appreciated fees charged by the likes of Drs. Cornelison and Hopson, but they were among Rockland County’s best and it’s worth considering each of their stories in more detail. Abraham Cornelison (1755-1835) of Nyack did his medical training in New York City as a private student of a well-known and rather notorious physician Nicholas Romayne. By special arrangement the Trustees of Queen’s College in New Brunswick issued diplomas to Romayne’s students and in order to complete his studies, Cornelison submitted a thesis titled *An Inaugural Dissertation on the Hooping Cough* which was dedicated to his mentor. After describing the clinical features, he concluded, “The cure of this disease is both difficult and tedious…When the contagion is present, and continues to act, we know not how to expel if from the system; neither do we know how to correct its acrimony.” He recommended “antiphlogistic” treatments - e.g. calomel, antimony, opium and Peruvian Bark (quinine) — and cold baths, “to brace the relaxed fiber, and give vigor and energy to debilitated systems.”

After receiving his degree and license in 1798, Abraham Cornelison wasted no time getting to work in Clarkstown (now West Nyack.) One local (Tunis Smith) would recall in his *Remembrance* that, along with eight others, “I was Noculated for the small Pocks by Doctor Ab. Cornelison” The doctor was always neatly dressed and described as “portly” - in his maturity he weighed more than 300 pounds. According to legend, when he was called to make a house call, Cornelison first would fortify himself with a glass of whiskey - so did many other country doctors and alcoholism seems to have been an occupational hazard.

In 1816 Dr. Cornelison was asked to participate as judge in a “witch trial.” Jane Kaniff, known to the locals as “Naut,” was the widow of a Scottish physician and in her later years treated her neighbors with herbs and various folk remedies she’d learned from her husband. Naut was considered to be eccentric, perhaps because she had a black cat and a talking parrot. A historian (Green) writing in 1866 recalled,
She was odd in dress, preferring parti-colors of wondrous diversity, queer in fashion of arranging her hair. She was unsocial in a neighborhood where everyone knew each other, and morose or erratic when forced to meet people...From her deceased husband she had gathered a smattering of medicine and now, when placed where she could get at the herbs known to her Materia Medica, she made wondrous decoctions with which she treated such as came to her for aid and...with most excellent results.

Some regarded old Naut as being insane, but others said that she was a witch who was influenced by the Devil. When strange things began to happen - like a cow suddenly producing no milk - it was decided to put the matter to a test. Some favored binding her head and foot and then throwing her into the mill pond to see whether or not she floated. If she drowned it would prove that she was not a witch! Cooler heads said that was too drastic and also illegal. Instead she was taken to a nearby grist mill and placed on one side of the great flour weighing scales; an iron-bound, wood-covered family Bible placed on the balancing side. The idea was that if she outweighed the good book, it would seal her fate as a witch. Dr. Cornelison, perhaps disturbed that he was losing potential patients to the witch doctor, agreed to serve as a not-so-impartial judge. It was a good thing for Naut that they didn't place the portly doctor on the other side! Naut Kanif was exonerated and later it was reported that she was allowed to return to the companionship of her cat and parrot. It was the last witch trial in New York State and one of the last in the country.

In 1829 Abraham Cornelison was instrumental in forming Rockland County’s first Medical Society and was elected its president. But by then he was approaching the end of his long career and life and a newly arrived member, young Dr. Hopson was just getting started in Tappan Landing (soon to be renamed Piermont) where he would work for more than a half century.

**DR. HOPSON OF PIERMONT**
James A. Hopson was born in South Carolina in 1809 and for unknown reasons moved at age 19 to New York City. Soon afterward he enrolled in a medical school near Utica (The College of Physicians and Surgeons of the Western District) graduating in 1833. Just when he arrived in the Piermont area is unclear (reports vary between 1828 and 1834, but his credentials weren’t filed with the county clerk until 1837.) The New York & Erie Railroad began construction in 1832 on what would be the eastern terminus of a line to Lake Erie and, no doubt, the village’s economic prospects seemed bright; the population was growing and Tappan Landing must have seemed like a good place to start a practice. Dr. Hopson’s office was located along the “Slote” (ditch) - now known as Sparkill Creek - and during the town’s brief years of prosperity his practice flourished. He was well respected, appointed a trustee of the village and in 1877 served a term as president of the county medical society. (His home, built in 1850 still exists in Sparkill adjacent to Tallman State Park.) At a Flag Day rally in Palisades in 1861, the former Southerner made a fiery speech declaring that the time had come to draw the line on slavery: “Either we have a country great, glorious and free or we shall have anarchy and confusion.” Although NG did not attend the event, he noted the doctor’s participation in his diary: Dr. Hopson, of whom it was said, exceeded them all - a month later at a July 4 ceremony at the Baptist Meeting House, Hopson read the Declaration of Independence aloud. When economic hard times came to Piermont, during the 1860s and 1870s, the local population dwindled to the point that it was difficult to sustain a viable practice. The oldest of Hopson’s nine children, Edmund who had followed in his fathers footsteps and shared the practice for several years, after serving in the Civil War, heeded Horace Greeley’s advice for young veterans to go west to seek their fortunes. He prospected in the gold fields near Durango, Colorado for a few years but died there of an unknown cause at age 43.

CHOLERA COMES TO PIERMONT (A longer version of this section is available)
From early times there were occasional outbreaks of smallpox, yellow fever and measles in Rockland County, but during the 19th century the most deadly scourge was cholera. America’s first epidemic of cholera began in June 1832 and by the end of that year, 3,515 people were dead in New York City out of a population of 250,000
(equivalent to more than 100,000 victims with today’s population.) Few medical men believed that it was a contagious disease; the presumed cause lay in the atmosphere (miasma), illness brought about by direct exposure to filth and decay. It was an era long before germ theory and the sanitation movement, a time when few bathed or washed, privies and cesspools were ubiquitous and public water supplies contaminated by sewage. Acute dehydration could cut a healthy person down within hours and quarantine methods did no good because cholera wasn’t transmitted from person to person or by animal vectors. Popular belief held that cholera was a disease of poverty and sin and it wasn’t until the 1880s that it was learned the causative organism was spread by drinking polluted water or ingesting fecal matter on unwashed fruits and vegetables or contaminated raw fish. (Oysters from the Hudson were a favorite local delicacy.) The culprit was bad water, not bad air.

In a diary entry on July 3, 1832, NG noted the following: Cholera in New York. People moved out this last week, hundreds. Some vessels have Stopped Running. Sorrowful time. I understand the Banks about shutting. Then, in later entries:

July 6: Many hundred families move from New York for to flee from the Asiatick Cholera. It began at Quebec and Montreal, crossed the Atlantic. It appears that it began there sometime in the first of January last.

Aug. 31: Cholera raged a few Days past in Closter. Several Died. Mrs. Bogert, in digging up her Sons cloths which were buried to wash them - she and a boy took it and both died. Cholera is now spread pretty much over all the United States. A Solemn Judgement [by God upon sinful mankind.]

Sept. 1: Robert Sneden poorly…with Bloody flux. Mrs. Chapman has Cholera in point.

Sept 4: Jacob Gesner’s wife Betsy bad with Relax [described elsewhere by NG as bloody and Slymy excrement.] I got Away to go for Dr. Perry, little after 10 o’clock night. Dr. Perry came late in the night, intending to go to New York from Fort Lee and stopped and concluded that Betsy had the (Bloody) Dysentery.
Sept. 6: Jacob’s wife continues poorly. Doctor Perry stopped last evening on his return from Fort Lee.

Sept. 7: Piercy preached excellent sermon, yea extraordinary. Good number hearers, suppose about 200 hearers. Many out doors. Text Amos: “prepare thyself to Meet thy God.”

Sept 8: A full house 8 or 10 Mourners…Oh! the tears, cries. The Lord present, we all on our knees praying to the Lord. Altho a mournful penitential time, yet what a Glorious time.

The cholera “plague” of 1832 soon abated but sporadic cases recurred during the next two summers. Indeed on August 8, 1833 NG, himself, reported, I was taken before Day-light this morning with Cholera Morbus. (This was a term frequently used for acute gastroenteritis appearing in the summer.) Two days later he was still vomiting and purging but within another week he reported, I am considerably better. My appetite is better. I use circumspection. Devout people believed that the pestilence was “God’s justice” and local prayer meetings were well attended - like with the flood and the plague of locusts, cholera was a means by which the Lord achieved moral purification. In New York City a day was set apart for “public fasting, humiliation and prayer on account of the malignant disease.” Haverstraw’s North River Times (1834) noted that one of the victims (Judge Cowen) was “a man remarkable for his temperate habits and universally esteemed,” but added that for every such estimable person affected, there were perhaps twenty more victims who are “addicted to habits of intemperance or uncleanness and are swept off.” Or, as an article in The Rockland County Messenger put it, cholera was “chiefly confined to the vicious and filthy.” (August 10, 1854)

When epidemic cholera returned again in 1849 neighboring Piedmont felt the full force:

Sept. 19: Died at Piermont last Night 5 with Cholera and 12 Cases said And at Petersons (near Jerry) a Boarder died little before 12 to Day - a few Days Ago 2 also at Piermont….Sickly in the place

Sept. 20: The Cholera Rages at Piermont, 3 died last Night
Sept. 21: It is said that 5 Deaths to Day at Piermont with Cholera.

That year in New York City more than 5,000 died of cholera and those who could “eloped” to the pure air of the country, no doubt some via river transport to the Piermont pier. Standard Rockland County history books fail to mention a cholera epidemic and unpublished histories of Piermont refer vaguely to an outbreak that “swept through in 1849.” However, records of the First Baptist Church (located on the site of the present Village Hall) noted that three of their elders died of cholera that summer: Brother John I. Wilne, age 41, Deacon Adrian Onderdonk, age 38, and Brother John Gahanna who while “administering to the wants of a large number of families who were afflicted with the cholera, was himself called to fall a victim to its fearful power in his 63rd year.” How many more of the anonymous poor who were not church members were infected or died is unknown.

The last entry in NG’s diary was made on July 20, 1850, but just two weeks later a far more reliable chronicler of local events the Rockland County Journal began publishing as a weekly newspaper. The editor proclaimed in its first issue that it would not indulge in “frivolous gossip” and vowing to provide “pungent, high-toned articles on the topics of the day.” So it was that five years later in 1854 when Piermont was gripped by another outbreak of cholera, probably less severe than the pandemic of 1849, an unnamed reporter went over to see for himself and reported back in graphic detail. (See August 5 and 12 issues, on-line, HRVH Historical Newspapers.)

RAVAGES OF THE CHOLERA IN PIERMONT

It becomes our painful duty this week to record the existence beyond a doubt of Cholera in Piermont. During the last few days, the most exaggerated rumors have been in circulation and in order to arrive at the exact truth, we made a personal visit on Wednesday among all the dwellings in the infected district. Although, as we anticipated, the case was not as bad as rumor has made it. still, we witnessed scenes that would make the heart of a stoic ache. The first probably defined case of cholera was that of Timothy Driscoll who was taken on
the 22d of July and died. On the last Sunday, Timothy Cronan on the hill, was taken and died the next day. The same night his little daughter, about ten years old was taken and also his wife who died on Tuesday. At the time of our visit, the little girl was laying on a heap of old bedding on the floor with no one to care for her or heed her wants. The flies literally fastened to her eyelids. As we looked on the pitiful scene we could not help wondering where the overseers of the poor were….Up to Wednesday noon, eleven deaths had occurred from this cause and about twelve cases more were under treatment. The village Board of Trustees commenced the erection on Wednesday of a building to be used as a hospital selection for the site the ground near the river in the rear of Odd Fellows Hall [currently the Macedonian Baptist Church.] It stands about 400 yards from any dwellings, and obviates the necessity of carrying the patients any great distance. There seems to be a complete panic especially among the railroad laborers, and those who have no families are leaving the place with as much haste as possible. It is our opinion that the disease is not contagious, and we hope for humanity’s sake, the citizens of Piermont will not shun through fear their duty, especially toward the stricken.

That same week there were 5 deaths at Haverstraw (another port city) but by the following week the situation in Piermont was improved, although there’d been two more deaths.

PROGRESS OF THE CHOLERA AT PIERMONT
Since our gloomy record last week of the ravages of the dreadful disease at Piermont, we have paid another visit, in company with Dr. Hopson, Physician of the Board of Health, through the infected districts. Though we cannot, as we hoped, record this week the cessation of the frightful scourge, yet it has evidently reached its climax and a reasonable hope may be indulged that it will cease entirely. Were it in our power to convey an exact description of some of the scenes which actually occur during the prevalence of this pestilence, this would scarcely be credited. The idea of grappling with such a terrible visitor, surrounded
with all the palliatives comforts which affection and wealth can throw around, is sufficiently terrifying but to see it in the abodes of the suffering poor, attended with want, destitution and desertion, is the very refinement of horror.

The cholera outbreak of 1854 wasn’t as lethal as those in 1832 and 1849, but more than 1,400 people died of cholera in Chicago alone. That same summer Dr. John Snow in London famously discovered that the cause of a cholera epidemic was contaminated drinking water from a single public pump. Also that year the causative bacteria *vibrio cholerae* was first isolated in Italy although its significance wouldn’t be appreciated until the work of Robert Koch in Germany some three decades later. NG’s observations in 1849 established that a health crisis existed in Piermont and because this transit hub apparently was more effected than nearby towns, it is likely that the deadly bacterium arrived from downriver. At mid-19th century the village was going through a growth spurt with a population of more than 2,000, many of them unmarried Irish railroad workers probably living in filthy conditions, mostly along the creek. In 1852 a booster writing to the *Rockland County Journal* (June 19) praised the new developments but described “shanties which will very soon be torn down and a neat row of cottages will supply their place.” If wealthier people were less ravaged, it was not because of any superior morality but their drinking water was less likely to be contaminated.

Histories of Piermont at mid-19th century conventionally describe the contributions of civic leaders, completion of the new pier in 1838, incorporation and renaming the village and the opening of the railroad on the great day (May 14, 1851) when President Millard Fillmore, Secretary of State Daniel Webster and other notables rode the first passenger train from Piermont to the West. But the scant primary sources from those exciting years cited here suggest a scarcely told alternative narrative. NG’s diary and local church records in 1849 and the newspaper accounts from 1854 described a frightful scourge, suffering poor, panic among railway workers living in shanties, destitution and desertion, deaths of church elders who tried to help, need for a cholera hospital. Some of this may have been overwrought but clearly everything was not celebration and
prosperity in Piermont during its glory years — however, writers of local history seem to prefer triumph to tragedy.

On August 19, 1854, one week after his second visit to Piermont, the same unnamed reporter for the *Rockland County Journal* reflected on what he had just witnessed and bitterly criticized the wealthy class who in his judgment had distanced themselves from poor victims:

_They never enter the cabin of the afflicted lest their garments should be soiled or their reputations in certain circles depreciated. They can scarcely pass within a hundred yards of the abode of pestilence and poverty without turning up their dainty noses… and that is one train of thought suggested by Our visits through the cholera districts of Piermont._

After this report nothing more seems to have been said in print. Perhaps others tried to help and many years later, (February 5, 1887) the *Rockland County Journal* reported the following:

_Dr. James A. Hopson, whose funeral was held last Saturday, was a resident of this village for many years, and at one time was the leading physician in our county; but through misfortune, for the past ten years his practice was very limited. During the cholera epidemic of 1849 he was of great assistance to the poor people of this town, and although he has not practiced of any account for the past few years, he will be missed by a great many who used to see him pass their door daily. The Doctor died of softening of the brain._

**NICHOLAS GESNER’s LATER YEARS**

Entering his seventies, NG continued to engage in farm labor although diary entries suggest that he was feeling the strain:
June 30, 1837: *I am Very ill with my back and pain through My body, left side. Mostly, Kidney for upwards of 5 Weeks…..I am very much Afflicted with pain in Small of the back, but the seated pain seems in the left kidney.*

Aug. 21, 1838: *I am ill with pain in the back and round my Whole body.*

Perhaps NG suffered from lumbago (low back pain) or even kidney stones but, typically, within a few days he would be up and back to farming or some stressful activities. In 1841 the still spry 76 year old walked over to Piermont, about six miles roundtrip, to view the new railroad works at the end of the “long pier.” During the summer of 1850, by now in his mid eighties, NG reported feeling *excessively bad and painful….some days little better and then Worse.*

June 11: *I am extremely Afflicted with Rheumatism, Shoulders, hips, legs, can Scarcely stir for 3 or 4 weeks, especially for the latter part of the time.; can’t get in or out the bed, walk, stand or Sit without continued Misery.*

June 21: *It darts it pains, then in one place, then another, sometimes by Moving a finger or just moving My hand excites a Miserable pain in the Shoulder, and so of Any other part. My whole body seems as if bruised to pieces, and the least Movement of any place or part gives the Severest acute pain, leaving the parts with a Serious pain sometimes More than a day. At present I cannot and for 10 or 12 days get in the Bed, nor out, dress or undress without Suffering immensely — At night a great sufferer.*

July 9: *I am Wonderfully afflicted, continues painful and suffering.*

That summer NG was visited several times by Dr. James J. Stephens, a well known physician of Tappan (described in Bayley’s history of Rockland County as “of the Manor born” but eccentric and “neglectful of personal adornment.”)

July 16: *Doctor Stephens the 5th visit, Just in. Gave Another Medicine to Rectify the Stomach, the first Guaiia Stopped a While, linament Brandy to be continued.* (guaia or guaiacum was a popular homeopathic resin.)
July 18: *I continue bad with Rheumatism, Much pain.*

July 20: *I seem some Afternoons better.*

But that was NG’s last diary entry. We presume that Dr. Stephens was paid, grudgingly, and Nicholas Gesner lived on for another eight years, dying at age 93 in 1858.

**MEDICINE IN TRANSITION**

Medical practice in Rockland County was a microcosm of what was happening elsewhere. Early in the 19th century there were bitter rivalries between orthodox “Regulars” and a melange of distinctly unorthodox “Irregulars. In truth, neither camp could claim superior results — neither were particularly effective — but, at least, the remedies of homeopaths, hydropaths, herbalists et al were less obnoxious than those of the traditionalists. In 1833, Dr. Moses Hasbrouck of Nyack, probably the most well respected doctor in the area and then president of the Rockland County Medical Society, in addressing his colleagues noted, “Our profession presents the remarkable spectacle of an art sinking in public estimation and in the confidence of its own practitioners, while the science on which it is founded is applauded for the conquests it is constantly making.” Nevertheless, he expressed “abiding confidence in the curative matters of medicine,” which even if it didn’t necessarily cure directly, at least “put things in condition for nature to cure.” Dr. Hasbrouck remained devoted to “the true faith” - i.e. aggressive bleeding, emetics and cathartics in “full dosage.” However, by the late 19th and early 20th centuries orthodox medicine was confronted by other challenges than which system worked best. There were dramatic new discoveries - e.g. bacteriology and germ theory, radiology, anesthesia - medical education was transforming to a more science-based model, there was increased enthusiasm for specialization, the locus of care was shifting from home to hospital and all of these effected how medicine was practiced. There continued to be conflicts between traditionalists and forward thinkers and much of this was exemplified by the careers of three later physicians of Palisades and Piermont whom, in closing, I’ll describe as being representative of their times.

**C.R. AGNEW**
At mid-19th century among several wealthy New Yorkers who purchased summer homes in the area was Dr. Cornelius Rea Agnew (1830-1888.) In 1852, the same year he graduated from Columbia University’s College of Physician and Surgeons, Agnew was appointed surgeon-general of New York State. During the Civil War he was active on Frederick Law Olmsted's United States Sanitary Commission, serving on a hospital ship during the Peninsula Campaign. Immediately after the war he purchased Hillcrest, the former home in Palisades of famed botanist John Torrey and, although his professional work was entirely in New York City, Agnew was active in local affairs. He helped establish the Presbyterian Church, worked to improve the school system and on July 4 1876 he read the Declaration of Independence at a Liberty Pole ceremony (just as Dr. Hopson did in 1861.)

C.R. Agnew was an early specialist in diseases of the eye and ear and for more than two decades was a national leader in medical education. He was a prolific contributor to medical literature and in an article published in *The New York Medical Journal* (“The Limits of Medical Ethics,” Oct. 1, 1882) took on a contentious matter which concerned country practitioners as much as academics like him. When the American Medical Association had organized in 1847, it issued a code of ethics which banned consultation by its members with their “irregular” competitors. But during the 1870s Dr. Agnew led a rebellion by an elite group of New York specialists (some of whom benefited financially from such referrals) who convinced the state medical society to issue its own “new code” of ethics which differed from the AMA’s “old code” mainly by deleting the no consultation clause. New York's revision didn’t distinguish between different categories of medical care - as it said, “The term physician may be applied to anyone who publicly announces himself to be a practitioner of this art.” In response, at the next annual AMA meeting, the New York delegation was denied participation which led to further bickering among themselves. Dr. Agnew insisted that he was conservative and of “the old school” and argued that orthodox doctors understand the “fallacies of homeopathy and evils of quackery.” However, he viewed alternative systems of practice to be “more an error than a sin.” He argued that doctors should be permitted to follow their own consciences without being held to binding codes: “Leave members of a liberal
profession free to go as advocates of truth wherever called….If a patient in the hands of an ignorant pretender, under whatever trademark, calls in consultation a competent practitioner, it is a step in the right direction.” In C.D. Agnew’s high-minded opinion, such a patient would benefit from the services of enlightened and properly motivated physicians - of course, specialists like him also would benefit. (For more on this see John Harley Warner, “The 1880 Rebellion Against the AMA Code of Ethics” in The American Medical Ethics Revolution, ed. Robert Baker, JHU Press 1999.)

THE PITCHING SURGEON
Dr. George Aloysius Leitner (1865 -1937) was born in Piermont and lived there nearly his entire life. How he became a doctor was distinctly atypical and worth describing. During the late 19th century Rockland County was a hotbed of baseball and young George was an ace pitcher on Piermont’s championship team. After high school he attended St. Johns College (later called Fordham) where he starred on the team but after graduation he couldn’t afford medical school tuition. In order to raise cash, George Leitner signed a professional contract in 1887 with the Indiana Hoosier club which that year joined the National League. The average salary in those days was about $3,000 and although Leitner pitched for the Hoosiers only one year he earned enough to pay for Bellevue Hospital Medical School and an internship at St. Francis Hospital in New York City. No doubt his decision to seek other employment was influenced by his limited skill on the diamond. After “Doc Leitner” won his first game against the New York Giants at the Polo Grounds 10-7, his success was short-lived.His record for the year was 2 and 6; ERA 5.68; in 65 innings he struck out 27 but walked 41. As a hitter he batted .148 - just four singles in eight games. That year the Indiana Hoosiers finished dead last behind the likes of the Detroit Wolverines, Chicago Whitestockings, Philadelphia Quakers, Boston Beaneaters. The team would remain in business for only three years. When George Leitner died in 1937, an obituary in the New York Evening Post reported that “when he finished his medical training…he started practicing medicine in his home town, refusing to continue his ball playing despite attractive offers from the New York Yankees and other teams.”
However, there was a postscript to Doc Leitner’s baseball career. In 1904, seventeen years after his brief fling in the National League and four years after the opening of Nyack Hospital, a benefit game was played between the local doctors and clergymen. It raised $400 for the cash-strapped facility and, naturally, Doc Leitner pitched for the medics. But, as reported in the Rockland County Times, “The doctors were so heavy in avoirdupois and so light at the bat that the dominies won by a score of 18 to 6.” One would think that afterward George Leitner stuck to his doctoring but he did sponsor his own team and a photograph taken in 1920 showed him still in uniform and looking fit at age 55.

Unlike C.D. Agnew, George Leitner’s practice was limited to Rockland County. In 1900 he was one of five physician founders of Nyack Hospital where he headed the Department of Surgery and became a Trustee. His later years coincided with the Great Depression and, like all physicians, he often had to accept payment in services from his destitute patients. A lady I know grew up near Leitner’s home-office and recalls that as a small girl she cut her hand and needed stitches. Her father couldn’t pay the doctor’s bill so he went into his backyard, killed and dressed a chicken and delivered it to Dr. Leitner. No doubt, he was pleased to receive anything - not merely chicken feed but the whole chicken!

But George Leitner was more than a simple country doctor. He was involved in local, state and national medical affairs and for some twenty-five years represented Rockland County as a delegate at AMA meetings. As a trustee of Nyack Hospital he must have been involved in the decision of the struggling hospital in 1935 to join one hundred other hospitals in the Metropolitan area offering an innovative “3-cents-a-day” ($10/year) pre-paid insurance plan that would provide hospital care “for wage earners in the lower brackets.” This turned out to be an economic life-saver for many hospitals and would evolve into Blue Cross hospital insurance. Although we don’t know Dr. Leitner’s personal position, he was a loyal AMA member and that organization’s leaders vigorously opposed what they called “socialized medicine.” Which leads us to our last local physician and, appropriately enough, brings us back to where we began for he
was the husband and father of the two Alices of Palisades whose combined efforts resulted in publishing Nicholas Gesner’s diary.

CUSHMAN HAAGENSEN

In 1941, some eight decades after C.R. Agnew came to Palisades, another celebrated physician C.D. Haagensen (1900-1990) moved there with his family. Like Agnew his main theater of operations was Columbia-Presbyterian, but sometimes he provided care for his neighbors - notably Mary Lawrence Tonetti whom he attended during her final days in 1945 when she was dying of leukemia in her home in Sneden’s Landing.

Born in North Dakota of Norwegian stock and the son of a country doctor, Cushman graduated from Harvard Medical School in 1925. After completing an internship at Boston City Hospital, he contracted tuberculosis and took the conventional three year “rest cure.” The time was well spent. Not only did his lungs improve, but this turned out to be a most productive period: the first year mostly he rested and read; feeling better, the second year, he took the sea air as doctor on a cruise ship. On one trip he spotted a comely young woman returning home after a visit to Europe and arranged to have her seated at his dining table — by the end of the voyage they were engaged. Much of the third year, the young marrieds spent in Europe based at a villa in Florence. In 1929, refreshed and with his intellectual horizons expanded, Cushman reentered medicine and three years later began a lifetime of work at Columbia P&S and affiliated hospitals.

Cushman Haagensen was such a monumental figure that a brief discussion of his surgical career seems appropriate. He was a strong proponent of radical mastectomy for breast cancer, an approach developed during the 1880s by famed Johns Hopkins surgeon William Halsted. Some fifty years later Haagensen assumed Halsted’s mantle and, in time, was called “the first breast specialist.” When his textbook Diseases of the Breast appeared in 1956 it became a classic - and by the time the the third edition appeared, grown to more than one thousand pages, the author was age 86! The premise of radical mastectomy was that every cancer cell must be removed if “cure” is to be achieved. After nearly a half century personally following more than a thousand
patients, Dr. Haagensen maintained that a woman who opts for less “is risking her life.” Like Halsted, Haagensen insisted on meticulous technique, some described it as elegant. It was necessary to take the time “to do it right” meaning a minimum of five hours, sometimes much longer and nurses and surgical assistants dreaded the exhausting procedures. In time, resistance grew against radical mastectomy which many surgeons considered unnecessary, disfiguring and insensitive to psychological trauma experienced by patients. George “Barney” Crile, Jr. of the Cleveland Clinic, a leader of the opposition, promoted simple mastectomy or lumpectomy which Dr. Haagensen characterized as “human experimentation.” A surgeon who performs these lesser approaches “is nothing less than a coward.”

Cushman Haagensen was an outspoken perfectionist who clung to his beliefs. He continued to see patients into his eighties, charging only $25 per office visit regardless of the patient’s ability to pay. Many of his patients were devoted to him; so were many of the next generation of physicians. As one former pathology resident recalled, “He kept us on our toes.” Although Dr. Haagensen was authoritarian, a cult of personality evolved among young surgeons for whom he represented the finest traditions of their field; a reincarnation of Halsted himself. (For more on this, see Barron Lerner’s The Breast Cancer Wars, 2001.)

During the 1970s controversy raged about the significance of so-called ductal and lobular carcinoma in situ. The prevailing belief was that these were dangerous lesions that warranted breast amputation. Based on their own extensive experience, Dr. Haagensen and some of his colleagues at Columbia argued that the name for the condition was “misleading and unfortunate” because it implied that the lesion was cancerous and warranted breast amputation. In 1978 they suggested a more appropriate term “benign pathological-clinical entity” for which the best approach was watchful waiting. In 2015 the controversy about carcinoma-in-situ continues, but current data suggests that the scales are tipping in favor of Cushman Haagensen’s more conservative approach.
However, this “old school” doctor could be prescient in areas that had nothing to do with breast disease. Shortly after the Haagensens moved to Palisades, Cushman published a book *A Hundred Years of Medicine*. Although it revealed an impressive range of knowledge it was a rather conventional recitation of famous events, but the book’s last chapter, called “The Doctor’s Dilemma,” addressed societal challenges during the late 1930s which remain relevant today. Despite objections from the AMA, in 1927 an independently funded study group, the Committee on the Costs of Medical Care, was formed to investigate the medical expenses of American families. After several years of deliberation they concluded that group practice and group payment was the best way to go. AMA spokesman Morris Fishbein called the report “an incitement to revolution” and the battle raged throughout the 1930s. Because certain features of the proposed plan involved government involvement, the president of New Jersey’s medical society warned that “federalized medicine” would lead to “federalization of all our economic and social life.” What we got was social security and disability insurance during the New Deal; then voluntary Blue Cross-Blue Shield plans; later Medicare and Medicaid and, still later, “Obamacare.”

However, Cushman Haagensen had a different perspective from the majority of his medical colleagues; Alice Gerard suggests it may have reflected his early experiences in Europe and the influence of English friends. What follows is paraphrased from the last chapter of his book which was published in 1943.

*The doctors’ dilemma today is how best to utilize our vast modern armamentarium of medical knowledge for the benefit of society….Medical care costs so much that most of the people cannot buy it. Our modern medical knowledge, which can so often accomplish what in a previous century would be regarded as miraculous, is only partly used….While physicians ponder their modern dilemma, a new voice is heard. It is the social consciousness of a new individual right, the right to adequate medical care….The health of every individual is a social concern and responsibility…The insurance principle is beyond doubt the best way of meeting the cost of medical care because it makes*
saving money for this purpose compulsory and because it distributes among the many who are insured the excessive and fortuitous burden of large medical expense that falls upon the few. . . . Freedom from lack of adequate medical care will be, it is hoped, one of the fundamental freedoms of our future democracy. . . . A way of lowering the cost of medical care, as well as of improving the quality, is for physicians to form groups…organized in close associations with, if not actually within the walls of a good hospital, for we have seen that the hospital is the workshop of the modern physician. . . . The spirit of medicine goes beyond shallow economic distinctions. It is the stuff of life itself that physicians deal with - and this is too precious a material to be given or taken away on a monetary basis. It is because most people know this that there is hope that they will one day succeed in making adequate medical care available for everyone.

Cushman Haagensen’s wise voice from the past anticipated medical matters that continue to challenge today. The more things change, the more they are the same. One thing is certain though - Palisades and Piermont were populated by some colorful characters.

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