HISTORICAL BACKGROUND

When most people think of Civil War medical care, they think of soldiers who have been wounded on the battlefield. However, disease was the number-one killer of soldiers during the war; while about 200,000 men died from battle wounds, more than 400,000 perished from disease. When the war broke out, scientists were still developing the germ theory of disease, so poor sanitation was the rule in army camps and hospitals, although improvements were made over the course of the war. Crowded camps included many soldiers from rural areas who had not been exposed to common childhood diseases. North and South, soldiers suffered from a range of illnesses, including dysentery (a form of diarrhea), typhoid, malaria, pneumonia, mumps, measles, and whooping cough.

Civil War battlefield wounds, whether from cannon balls or the recently developed minie ball, were horrific. Surgeons had very little experience with gunshot wounds and had to learn on the spot. Doctors did not know how to do blood transfusions, and, of course, antibiotics had not yet been developed to treat infections. However, the idea that Civil War surgeons were butchers who operated on patients without giving them any anesthesia is largely a myth. Surgeons used ether or chloroform and could complete amputations quickly before these drugs’ effects wore off. Surgeons learned that if they amputated wounded limbs promptly, they could save lives. Wounds to the chest and abdomen were highly likely to be fatal.

A major challenge during the war was to get sick and wounded men the care they needed as quickly as possible. After the first major battles of the war, both armies were overwhelmed by the number of sick and wounded; neither had a system in place to care for so many injured and ill men. Civilians stepped in to assist through such organizations as the U.S. Sanitary Commission. Women gradually received acceptance as nurses; among the most famous are Clara Barton and “Mother” Mary Ann Bickerdyke. Over the course of the war, military doctors, especially Union surgeon Jonathan Letterman and Confederate doctor Samuel Stout, made major strides in developing systems to evacuate the wounded, treat them on site, and transport them as painlessly as possible to general military hospitals.
SUGGESTIONS FOR TEACHERS

- It’s not difficult to get kids interested in Civil War medical care, which has a definite “gross” factor. Ask students what they know about the topic and try to separate myth from reality (this Web page will help).
- Review with students all of the sources related to people who took care of sick and injured soldiers. List the different types of caregivers, both military and civilian. Have students choose the source that most surprises them. Compose an exchange of letters between a soldier and a caregiver.
- Ask students to choose an image of a field hospital and an image of a general hospital. What were the benefits of each? What were the drawbacks?
- Disease was the primary killer of Civil War soldiers. Examine the sources. Are there more sources related to disease or to battle-field wounds? Why?
- Improvements in sanitation and medical care took place during and after the war. Ask students to do some research to determine at least three medical advances that occurred.

Sick and Wounded Soldiers

Joseph J. Dimock, 82nd N.Y. Inf.
Died of disease, June 22, 1862

Robert King Stone, Notes for a lecture, 1865. [Report on Lincoln’s Death and Autopsy.]
Barton, Clara. War Lecture. [Ca. 1866].

The hospital at Fredericksburg, Va., May 1864. [Stereograph]

Seeking for the wounded, by torch-light, after the battle [1862 March 8]
Sick and Wounded Soldiers

[Savage Station, Va. Field hospital after the battle of June 27] [30 June 1862]

Walt Whitman, Hospital notebook "At Antietam" [See partial transcription].

Gen. S.P. Heintzelman and group, convalescent camp, near Alexandria, Va. [Between 1861 and 1865]

Hospital ship, Nashville [Between 1861 & 1865]

Print #18, Smuggling medicines into the south [Etching] [1863; detail]

A Ward in Armory Square Hospital, Washington, D.C. [Between 1861 & 1865]
Caregivers

I have no one to send. [Pictorial envelope] [Undated; detail]

[Unidentified soldier in Union assistant surgeon uniform with Ames medical sword] [Between 1861 and 1865]

Hospital Slippers for the Sick and Wounded Soldiers of the Union, [1861]

[Washington, D.C. Field relief wagons and workers of U.S. Sanitary Commission] [1865 April]

Mary E. Walker [Civil War surgeon; between 1860 and 1870]
Clara Barton. [Ca. 1862]

Major General Rosecrans on contributions for the sick and wounded. Headquarters Department of the Cumberland. Murfreesboro, February 2, 1863.


May 24, 1865
[description of Clara Barton; see final paragraph of May 24 entry]

[Unidentified officer in the Confederate Medical Corps] [between 1861 and 1865]

[Fredericksburg, Va. Nurses and officers of the U.S. Sanitary Commission] [1864 May [20]]
Caregivers

George W. Demers to Abraham Lincoln, Friday, August 14, 1863 (Requests permission for his father to visit his wounded brother) [Pg. 2; transcription]

Death and Mourning

Fredericksburg, Virginia. Burial of Federal dead [1864 May 19 or 20; detail]

Lincoln's last hour, [c. 1865]

The soldiers funeral, By John Ross Dix. [1864]
Teachers: Providing these primary source replicas without source clues may enhance the inquiry experience for students. This list of citations (Chicago Manual of Style) is supplied for reference purposes to you and your students.


Metropolitan fair, for the relief of sick and wounded soldiers---I present to you the claims of the Metropolitan fair for the benefit of the U.S. Sanitary commission…New York, Feb. 25, 1864.” Form. 1864. From Library of Congress, An American Time Capsule: Three Centuries of Broadsides and Other Printed Ephemera. http://memory.loc.gov/cgi-bin/query/r?ammem/rbpebib:@field(NUMBER+@band(rbpe+1250040d))


