

# BEN AVON AREA HISTORICAL ASSOCIATION

## NEWSLETTER

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### **Dr. Chevalier Quixote Jackson**

Laryngologist and Ben Avon Resident  
November 4, 1865-August 16, 1958

A Summary of His Life Based on His  
Autobiography

By Tracy Ferguson

Born in Pittsburgh just months following the end of the Civil War, Chevalier Quixote Jackson survived a childhood and young adulthood full of poverty and cruelty by his own sheer determination. He became a physician, inventor, painter and writer who dominated the field of laryngology in the early 1900's and saved thousands of lives during his lifetime and beyond.

As a child, he always had the urge to create things and was allowed to tinker with wood and sharp tools by the age of four. He was a frail boy with loving parents and two brothers, Stanford and Shirls, who grew up in farming and coal-mining country with rough and tough schoolmates. He preferred not to play with other children and soon became the steady object of cruel and dangerous bullying by the older and much bigger students. The boys stole his lunch or sprinkled it with coal ash or rotten eggs, took his occasional penny for candy, forcibly removed his boots and filled them

with snow on his way to school so that his feet froze, ruined his homework, dipped him in the watering trough, and broke his sled or crushed his lunch pail under wagon wheels. On a more violent level, they killed his dog, and repeatedly choked or beat him into unconsciousness. In one horrible incident, they bound Chevalier and left him in a deserted mine shaft, cold, dazed and frightened. Fortunately, a miner and his dog accidentally found him hours later. From these frequent and terrifying experiences, he learned how to deal with hunger and deprivation, gained a sense of ingenuity in solving problems, and developed a strong determination to overcome odds and to persevere. He never confided the tortures to his mother, but later in life wrote in his autobiography, *The Life of Chevalier Jackson*, that "Certain it is that all subsequent trials and tribulations seemed as nothing by comparison."

Chevalier's family lived one mile from the Greentree School in Idlewood, a few miles west of Pittsburgh. His father ran a livery and held a degree in veterinary medicine. The house was filled with books and young Jackson was encouraged to read, explore ideas, sketch, and invent. He had an "instinctive, inborn incentive for research." His father, William S. Jackson, found it necessary to turn their

home into a summer hotel for income after an employee embezzled their money, leaving them near bankruptcy. The elder Jackson had a gentle approach to humans and animals and used his knowledge to deal with the often brutal and drunken teamsters who drove coal wagons with teams of four horses. He taught these rough men how to get their horses to perform without whipping them into submission or crippling or killing the horse. The roads in Western Pennsylvania were typically mud tracks and often the horses would become mired in the mud up to their bellies. William was able to quietly and calmly convince the teamsters to unload the wagons and pull them out of the mud while empty, rather than shouting at and whipping the horses which caused many flesh and muscle injuries as the horses lunged in response. Chevalier was impressed by the calming effect his father had on both the angry teamsters and their horses and would employ this technique later in his own life.

During his early teenage years, Jackson attended the Western University of Pennsylvania, now the University of Pittsburgh, for his pre-medical education. He did his homework on the train during his one-hour commute. He then spent a year as an apprentice under Dr. Gilmore Foster. To earn money for the next step in his education, medical school, he took a job painting decorative motifs on glass and china objects. The drawing and painting skills he honed were also helpful later in his life when he made medical illustrations of what he saw through the bronchoscope. In October of 1884, Chevalier enrolled at the Jefferson Medical College in Philadelphia. He lived in a state of poverty and learned to prepare meals on a minimal budget. Letters from home revealed his parents

were in similar circumstances and thus were unable to aide him financially. At the end of his first year of medical school, he was penniless and homesick. Although he wanted to visit his family, Chevalier took a job selling medical books in Massachusetts to help their finances and to pay for medical school. He stayed in the cheapest lodgings, walked long hours and ate very little. He studied the books he was selling. When he finished covering his territory, his clothes were "threadbare, my only remaining shirt on my back. My shoe soles were worn through, there were holes in the toes." But, he had "a good stock of books to my credit; all I should need to finish my collegiate work."



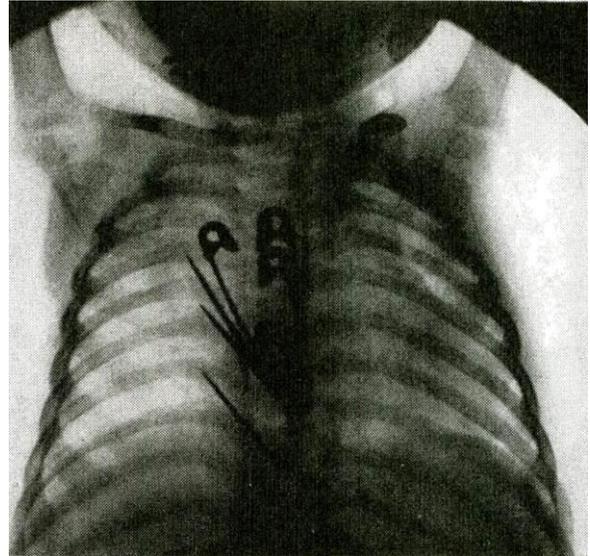
Chevalier Jackson begins practice at 21

Chevalier also earned money while in medical school by working as a cook on a cod-fishing schooner. He graduated on April 2, 1886 with an M.D., but his parents could not afford to attend the ceremony.

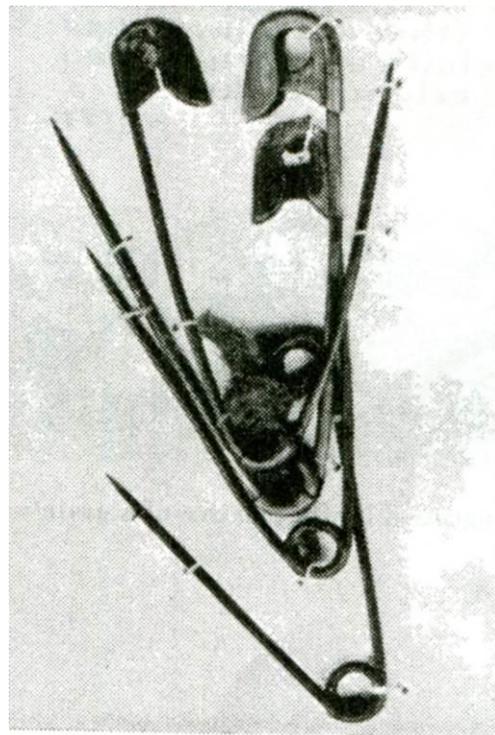
At the time, only one medical specialty practice was recognized: diseases of the eye. Therefore, when Dr. Jackson decided to specialize in laryngology, he had an uphill battle for recognition both personally and for his field of medicine. He went to London and briefly studied under the renowned Sir Morell Mackenzie. His funds soon ran out and he returned to Pittsburgh. When he was just twenty-two years old, Chevalier opened a two-room medical office on Sixth Street. His father died unexpectedly two years later, leaving his family destitute. The young physician was also living in poverty, because most of his patients were charity cases. Too many men were drunkards who spent their wages on drink instead of food, clothing and medical care for their families. Dr. Jackson never refused a patient, stating "my peculiar psychology seemed to get recompense enough from the achievement itself; I could not translate it into terms of dollars." Even though he worked sixteen-hour days, he did not earn enough in those early years to keep his family or himself from the shackles of poverty.

Pittsburgh in the last decade of the 19th century was a dark and sooty city. "Many times daily, he (a Pittsburgher) must 'clean out the chimney crocks,' which meant rotating his handkerchief-covered little finger in each soot-lined nostril in turn. The pockets bulged with the necessary supply of handkerchiefs." Constantly falling soot raised the costs of running an office. "Artificial light was necessary all day long. Illuminating gas,

manufactured from bituminous coal, was expensive; we were not allowed to use natural gas for lighting in the city." It was also necessary to hire "the constant service of a char woman with soap, mop and scrubbing brush. Laundry bills were large."

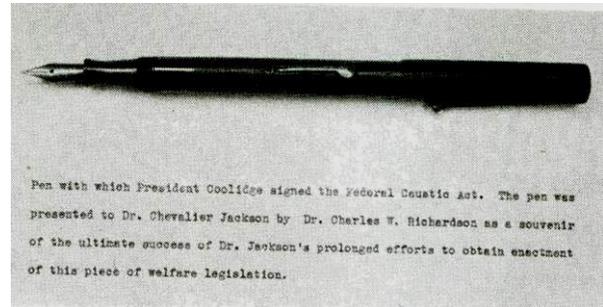


X-ray of a nine month old infant above below the removed pins arranged to match.



The financially strapped physician travelled extensively by request to present his medical knowledge, but at his own expense. Eventually, telephone and electric light service became available in the city and both became necessities. The innate ability to sketch, design and create served him well, in that he often created his own instruments or turned his designs over to an instrument maker. In 1902, he developed an esophagoscope which had a light to see into the esophagus and forceps to remove objects. Chevalier sketched what he saw for medical demonstrations. The list of objects he removed grew steadily, including dental plates, coins, open safety pins (he called "danger pins") and small toys. He performed many tonsillectomies and in diphtheria cases, tracheotomies. Sadly, he also treated numerous children who had swallowed lye, a common household product used to make soap. The lye resembled sugar, and when swallowed would burn the esophagus. Most of these children would die, because they could not eat or drink due to the terrible burns and scarring. By inserting the esophagoscope, any plug of mucous or food could be removed and the stricture expanded slightly; the child could drink water. Dr. Jackson then developed a method for slowly expanding their scarred, restricted esophagus by using his esophagoscope regularly over time, sometimes two years, so that the afflicted child could eventually eat and drink normally again. He was so affected by these cases that he campaigned tirelessly for years to change the situation. "Obviously these lye burns were preventable accidents. Two things were to be done. A warning label must be put on the containers, and a nationwide campaign of education must be inaugurated so that these caustic poisons

would be kept out of the reach of children." It took him many years and countless documented cases of poisoned, starving children to finally convince the politicians to pass the federal Caustic Act on March 2, 1927. Lye and other caustics were required to have large-print POISON labels and the antidote listed.



This could be considered a forerunner of today's Mr. Yuk stickers. Coincidentally, these stickers were conceived by a Pittsburgh pediatrician, Dr. Richard Moriarty, and subsequently created by the Pittsburgh Poison Center at Children's Hospital. Dr. Moriarty founded the Pittsburgh Poison Center.

Chevalier married Alice Bennett White, the sister of a patient, in 1899. That same year, he began work on developing a bronchoscope as a means for removing foreign objects that were inhaled rather than ingested. He practiced on manikins, cadavers and then dogs, before feeling confident enough to use this new device on humans. Without the use of anesthesia, he used the calm, reassuring voice learned from his father to relax and comfort his patients as he inserted the metal bronchoscope. Dr. Jackson was able to extract the object within minutes and save a life; for most certainly, if left alone the object would fester and cause eventual death. The selfless physician shared his knowledge, device and technique with as many doctors as he

could, to save as many lives as possible. He became well-known for his work in this country and abroad.

Catastrophe arrived in 1911 when he was diagnosed with pulmonary tuberculosis. By this time he had a young son, Chevalier Lawrence Jackson, and a home in Ben Avon where he could recuperate in the fresh country air. No medicinal cure existed for TB, just bed rest, fresh air and a special diet consisting of lots of milk and meat. He would rest in bed for twelve hours, sleep for eight, and do paperwork for four. In six months' time he was much better. However, two years later he had another attack and was forced to resume bed rest. He used the time to write an authoritative book on bronchoscopy, esophagoscopy and laryngeal surgery titled, "Peroral Endoscopy and Laryngeal Surgery." Over twenty years of documented experience went into the writing of his book that was not just well received, but sold out in its first edition and eventually translated into foreign languages. It also came "to be regarded as marking, if it did not help to create, a new era: that of direct inspection in the diagnosis of disease."

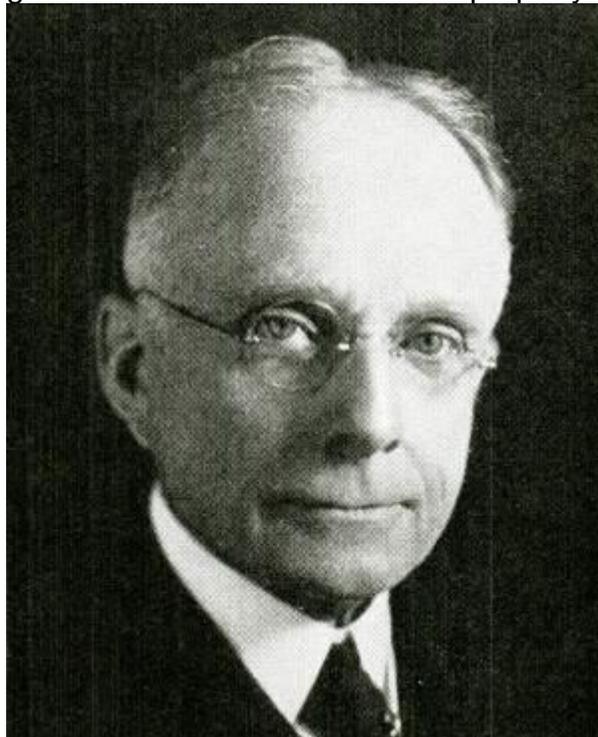
The small stone house in the Ohio River hills of Ben Avon was dubbed, "The Old Shoe" by Jackson. Alice purchased it from J. Palmer O'Neil and his wife, Elizabeth B. O'Neil, for \$1,250. The family owned it from 1903 until 1919, and a "crude outdoor sleeping porch was built" for him to receive fresh air while resting. The cellar was built from locally quarried rock. He wrote, "Those were happy days, notwithstanding the restrictions of activities imposed upon me by the rigid anti-tuberculosis regimen of Doctor John W. Boyce. Writing in bed was continuous from dawn till dinner. After the evening meal the sunset and

the ever changing effects of fading daylight on the Ohio River hills were calm, peaceful, and conducive to a good night's rest. The family at this time consisted of my wife, her mother and sister (always Mother and Sister to me), and my son Chevalier Lawrence. It was a happy little family, a beautiful life, with never a jar nor a harsh word." The Chevalier Jackson home is now known as 237 Forest Avenue and wood shingles cover the stone. Many homes were built in the surrounding area since Chevalier's time.

Dr. Jackson's accomplishments and reputation began to spread across the nation and to other countries. Patients often travelled for days to reach Pittsburgh and his treatment. One case involved a nine-year-old boy from Texas who when he was seven inhaled a brass cap from a bedstead that he used as a whistle. For two years, he suffered recurring bouts of pneumonia and failing health, until a priest told his mother about a man in Pittsburgh who was performing miracles with a bronchoscope. A three-day journey to Pittsburgh ended with the successful removal of the cap in an eighteen-minute procedure at Allegheny General Hospital. In another case, he removed a nail from the lungs of a three year old who came to Pittsburgh from Australia. This case was reported in the newspapers. Quite often, he would travel by horse-drawn carriage or on horseback to the patient's home to perform his surgeries; a time-consuming and tiring process. As his reputation grew, so did the offers to teach at universities. Dr. Jackson eventually became a professor at a number of medical schools, including the University of Pittsburgh, Jefferson Medical College, the University of Pennsylvania, Temple University School of Medicine, and the Woman's Medical

College of Pennsylvania. At one point, he was on staff at fourteen hospitals in Pittsburgh. It is, however, necessary to note that as was the norm, he never received payment from hospitals or from teaching in medical schools, or from royalties on his books. No instrument he invented was ever patented. He only received payment from his patients, and for many years, nearly all of his patients were charity cases. Chevalier did amass a collection of the objects he removed, more than two thousand of which are still on display at the Mutter Museum in Philadelphia.

Dr. Jackson was invited in 1916 to Philadelphia to open a bronchoscopic clinic. Within two years, his family was settled into their new home, Sunrise Mills, in the country about 35 miles outside Philadelphia. The family restored a 1765 gristmill and sawmill on the property.



Chevalier Jackson at age 65

They also built a study in the house with “concrete walls, floor and roof, to

avoid all possibility of destruction of the irreplaceable case records; there were about thirty-five hundred cases of foreign bodies, and about as many of diseased conditions.” When Chevalier finally had more patients who could pay for their care, although he maintained a charity ward at the clinic, his family was able at last to live comfortably without financial worry. He continued his caseload, trained other doctors, gave lectures world-wide, and became one of the most highly respected doctors in his field in the 1900’s. Some have called him the Father of Laryngoscopy. His son also became a laryngologist and a professor at Temple University.

At only a slender 5’8” tall, Chevalier Q. Jackson was a giant in his medical specialty and in the developing field of preventative medicine. In his quiet moments, he sketched and painted, wrote books and articles, perfected his woodworking and metalworking skills, and enjoyed nature. He was a champion of women physicians and of children. In his own words, he was “mild by nature, but had courage and bulldog tenacity.” Chevalier had complete confidence when operating that he attributed to a “clear eye and steady hand unimpaired by alcohol or tobacco.” In addition, he was “generous to a fault.” Dr. Jackson died on August 16, 1958 in Philadelphia at the age of 92, and was buried in West Laurel Hill Cemetery, Bala Cynwyd, Pennsylvania. Countless lives were saved through the decades because of his pioneering work and the generations of physicians following in his footsteps.

## Water in Perspective

By Dick Herchenroether

Water usage a century ago was a fraction of the 50 to 100 gallons per person delivered each day by water companies today. That range indicates regional as well as seasonal fluctuations. In 1900 the rate was about five gallons a person, daily. For a large majority of people back then, that average is misleading. Only 15% of households included flush toilets and fewer had bathtubs.

Two flushes might use five gallons so the average usage for the few households with toilets and bathtubs would be much higher. The usage rate for the majority of households falls well below five gallons. Bathing really was a once a week event for the great majority of people.

Homes built before 1900 now have bathrooms, of course. The addition of plumbing and fixtures resulted in spaces which are laughingly small today.

Because residential housing in our local area was built in the period of rapid change in standards, individual homes show a range of design ideas. By 1920 advertisers of fixtures and soap were promoting daily bathing. What a concept!

Once water companies convinced home owners of the advantages of fresh, clean water at the tap, ways to use it took off. Washing machines, hoses for gardens and washing the car (also new) were early trends. Dishwashers, garbage disposals and lawn sprinklers added to the demand. In no particular order add water beds, swimming pools, hot tubs, misting and TV health gurus pushing eight (or whatever) glasses per day.

Meanwhile the original convenience of indoor plumbing, cleanliness and

waste removal, expanded to multiple facilities. Not only does the older home need to find a way to fit in a bathroom, there is a power room or half bath for the first floor. How about separate fixtures in a master suite? Maybe a wash sink for the mud room, or etc., etc.

Before 1900 the lack of bathing was not a life style choice. Rather it showed how valuable water was. The effort to find relatively clean water and get to where it was used was simply too great to "waste" on bathing. Adjustments we might make to ease the demand for water seem minor in perspective.

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