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The Sisters of Charity, the 1832 Cholera Epidemic in Philadelphia and Duffy's Cut

William Watson

The Sisters of Charity, founded in 1809 by St. Elizabeth Ann Seton, were the essential caregivers in the 1832 cholera epidemic in the City of Philadelphia and its environs. The epidemic claimed over 900 lives in the Delaware Valley from July through September, and most professional medical personnel were ineffective in treating the disease. In some well-documented cases, the care was unprofessional and destructive to morale. The sisters were called upon by the City Board of Health to provide the most professional level of care possible, and they responded enthusiastically and effectively. Their services on behalf of the sick and dying constituted the one positive aspect of the region's treatment plan. Sisters were also called upon to minister to the dying Irishmen of the Duffy's Cut tragedy in Chester County that August, and their involvement in the Duffy's Cut narrative is a crucial aspect of that story.

The Sisters of Charity and Philadelphia

Elizabeth Ann Seton (1774-1821), canonized in 1975, was America's first native-born saint. Her father was Dr. Richard Bayley, a prominent physician in New York City. She was born an Episcopalian, and for the first three decades of her life was a parishioner of the venerable Trinity Church in lower Manhattan. She married William Seton, a New York businessman at age nineteen. They had three girls and two boys. Elizabeth was involved in charity work on behalf of the city's poor. The failure of her husband's health coincided, and perhaps was influenced by, a downturn in his business. The couple left America for a recuperative trip to Italy in 1803 with one of their daughters. The trip did not have the desired effect, and her husband died after a time in quarantine in port at Leghorn in late December. Elizabeth and her daughter stayed with the Catholic Filicchi family through the winter into the following spring, whom

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she and her husband had intended to visit. She returned to New York in May 1804, saddened by the loss of her husband but perhaps in a state of spiritual peace.¹

Apparently impressed by the piety of the Filicchis and their fellow parishioners, Elizabeth converted to Roman Catholicism in America on March 14, 1805. With the support of Archbishop Carroll of Baltimore, she founded the Sisters of Charity with a motherhouse dedicated to St. Joseph located at Emmitsburg, Maryland in 1809. Her order recruited young women from several Catholic families in Philadelphia and other cities along the east coast, and soon established schools and orphanages in Baltimore, New York and Philadelphia. Several decades later, the Catholic *Laité's Directory* (1833) included under the entry for the City of Philadelphia a paragraph on the sisters, describing them as “pious and well-informed ladies, who superintend the education of orphan children.”² The authors of the directory were quite aware of the role of the sisters in providing professional and effective nursing care in the cholera pandemic of the previous year, and of the consequential positive public relations dividend for the Catholic Church from their work in Philadelphia: “Too much cannot be said in praise of an institution, so commendable in its object, and so highly deserving of the community at large. Since their establishment in this city, the most happy results have attended their labours.”³ Similarly, Bishop Francis Kenrick of Philadelphia wrote, “Public opinion in Philadelphia is constantly becoming more favorable to the true religion. The heroic courage of the Sisters of Charity . . . when the cholera was spreading consternation everywhere, won for them universal admiration.”⁴

The sisters had been working in Philadelphia since 1814 in two orphan asylums, St. Joseph’s and St. John’s, and a school attached to St. John’s—the Sacred Heart Free School. Philadelphia priest John Hughes (later the bishop of New York) explained in a letter to his sister in the 1830s that St. Joseph’s contained more than forty orphans; St. John’s had twenty-five orphans, and twenty-five other children whose families provided a modest tuition. The Sacred Heart Free School at St. John’s contained 150 students.⁵

Some of the order’s earliest members came from leading Irish Catholic families of Philadelphia, including Cecilia O’Conway, Maria Murphy [Burke], Mary Ann Butler, and Mary Teresa Egan. The ecclesiastical connections in some of these families demonstrated the prominence of Philadelphia in the Federal period American Catholic community. Sister Mary Ann was the sibling of Father Thomas Butler, sometime president of Mount St. Mary’s College, Sister Mary Teresa was the sibling

1. See Joseph I. Dirvin, C.M. *Mrs. Seton: Foundress of the American Sisters of Charity* (New York: Farrar, Strauss and Cudahy, 1962), especially 124-126 on the death of her husband; Helene Roederer Bailly de Barberey, *Elizabeth Seton* (New York: Macmillan, 1927).

2. *Laité's Directory* (Baltimore: James Myers, Sands and Neilson, 1833), 107-108.

3. *Ibid.*, 108.

4. Ellin M. Kelly, ed., *Numerous Choirs: A Chronicle of Saint Elizabeth Bayley Seton and Her Spiritual Daughters, Volume II: Expansion, Division, and War, 1821-1865* (Evansville, Ind.: Mater Dei Provincialate, 1996), 64.

5. *Ibid.*, 53.

of Father Michael De Burgo Egan, likewise sometime president of Mount St. Mary's, and she was also the niece of Bishop Michael Egan.⁶ The order officially came to serve in Philadelphia on October 6, 1814, some five years after the initial request by city clergy for their assistance. Father Michael Hurley of St. Augustine's Church had first requested that Mother Seton send several Sisters to take over St. Joseph's Asylum. Three sisters came after Bishop Egan's formal request in 1814: Sister Rose White, Sister Susan Clossey, and Sister Teresa Conroy.⁷

The Industrial Revolution, the New Immigrants, and the Arrival of Cholera

By the third decade of the nineteenth century, the Industrial Revolution was transforming the American economy, and many public and private enterprises emerged to facilitate the production and transportation of goods. Philadelphia had been the second largest English-speaking city in the world at the time of the American Revolution, and shortly after the war, it was the Federal capital. Political and business leaders alike recognized the need to open the West to trade and settlement. In an atmosphere of increasing competition with neighboring states, the Pennsylvania state legislature authorized the creation of a Canal Commission in 1826 to oversee the construction of the Main Line of Public Works linking Philadelphia and Pittsburgh. This "Main Line" was intended to be a combined canal and railroad system that would shorten the travel time across the state from three to four weeks by Conestoga wagon to only three to four days. Among the most important supporters of the plan were Philadelphia merchants who feared that their city might lose out in economic competition with New York City and Baltimore, given the construction of the Erie Canal and of the Baltimore and Ohio Railroad in the 1820s.⁸

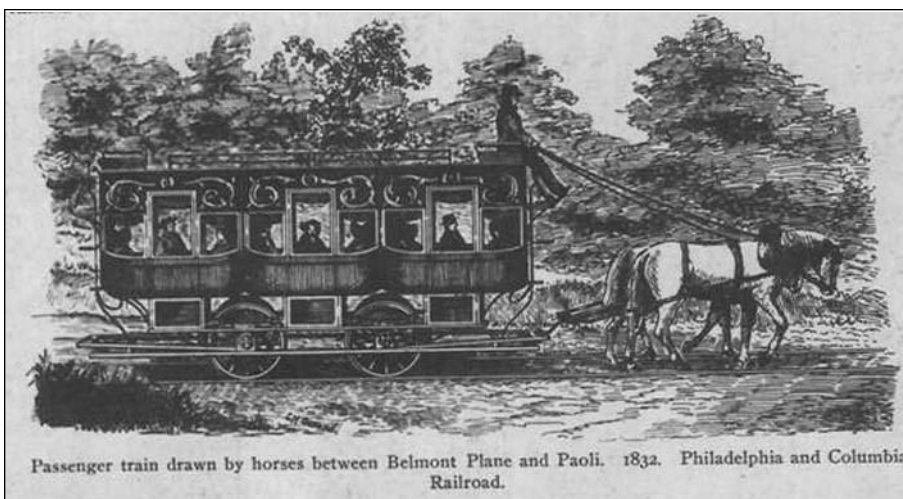
The Main Line consisted of four parts. First was the Philadelphia and Columbia Railroad, stretching westward for eighty-two miles from the Schuylkill River in Philadelphia through the counties of Montgomery, Delaware, Chester, and Lancaster, to the town of Columbia on the Susquehanna River. Second was the Eastern Division of the Pennsylvania Canal, which conveyed passengers and freight to Hollidaysburg on the Juniata River. The route then went through the Alleghenies by the Portage Railroad (employing five inclined planes) to Johnstown. The final path to Pittsburgh went via canals and streams of the Western Division of the Pennsylvania Canal. The

6. Martin I. J. Griffin, "St. Joseph's Orphan's Asylum, Philadelphia," in *American Catholic Historical Researches* 14 (1897): 9-11.

7. *Ibid.*, 12.

8. A historiographical essay is found in David W. Messer, *Triumph II: Philadelphia to Harrisburg 1828-1988* (Baltimore: Barnard, Roberts, and Company, 1999); Dan Cupper, *The Pennsylvania Railroad: Its Place in History, 1846-1996* (Wayne, Pa.: Pennsylvania Railroad Technical and Historical Society, 1996). See also Samuel Hardin Church, "America's First Railroad" (Philadelphia: Pennsylvania Railroad, 1925), reprinted from *The New York Times* (February 12, 1925).

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Contemporary engraving of the Philadelphia and Columbia Railroad in 1832, an industrial project that brought waves of European immigrants to Pennsylvania in the summer of 1832.

project was expected to be completed in 1832, but was delayed for more than a year by the peculiar geographical difficulties at Mile 59 in Chester County, and the outbreak of cholera at that location, known later as Duffy's Cut.⁹

Much of the construction of Pennsylvania's early industrial infrastructure was undertaken by new waves of Irish and German immigrants. German immigration to English-speaking North America had been substantial in colonial days, and remained steady through the early Federal period. The nature of Irish immigration changed with the advent of the Industrial Revolution. While most Irish immigrants in the colonial period were Scots-Irish Presbyterians from Ulster, the first few decades of the nineteenth century witnessed the arrival of increasing numbers of poorer Catholic laborers from all counties of Ireland. These workers were frequently employed in the northeastern states in difficult and dangerous conditions on a variety of canal and railroad construction projects, including all parts of Pennsylvania's Main Line. The arrival of the first large waves of Irish Catholic immigrants in Pennsylvania happened to coincide with the arrival of the first global pandemic of cholera in North America.¹⁰

9. There is no definitive work on the construction of the Philadelphia and Columbia Railroad, but see Messer above and the memoir of William Hassell Wilson, *The Columbia-Philadelphia Railroad and Its Successor* (York, Penn.: American Canal and Transportation Center, 1992). See also Egbert Hedge, *Sketch of a Railway* (New York: Egbert Hedge, Railroad Journal, 1841). For the Philadelphia and Columbia and Duffy's Cut, see William E. Watson, Joseph F. Watson, John H. Ahtes, and Earl H. Schandelmeier, *The Ghosts of Duffy's Cut: The Irish Who Died Building America's Most Dangerous Stretch of Railroad* (Westport: Praeger Publishers, 2006).

10. General connections between immigrants and disease are discussed in Alan M. Kraut, *Germes, Genes, and the "Immigrant Menace"* (New York: Basic Books, 1994).

Cholera originated in India, and spread beyond the subcontinent for the first time in the 1830s due to the contemporary improvements in transportation to become a global pandemic. It started in an outbreak in Bengal in 1826. From there, it spread overland to Russia in 1830. The disease appeared in Western Europe, including the British Isles, in 1831, and it crossed the Atlantic to North America in the summer of 1832. It arrived first in Canada, snaked its way southward via the Hudson River to New York City, and from there it moved to Philadelphia and points south. By the time it subsided, the disease killed some 150,000 people worldwide, including perhaps 10,000 in the United States.

The cause of cholera is the bacterium *Vibrio cholerae*, which is spread primarily by the presence of human fecal matter in drinking water. When it is ingested, the bacterium settles in the intestines and releases toxins that prevent the absorption of water. Its symptoms include extreme abdominal pain, violent diarrhea and vomiting, with parts of the intestines flaking off and being discharged as a peculiar “rice water.” Death comes rapidly from severe dehydration and shock in some forty to sixty percent of cases.¹¹

The connection between unclean drinking water and cholera was first suggested by John Snow in Britain in 1854, but the microorganism was not discovered until 1883 by Robert Koch. The prevalent etiology in 1832 was the miasma theory that bad air caused the spread of the disease, a theory strengthened by the observation that it was often the poorer neighborhoods with improper sanitation and bad odors that had the highest numbers of casualties. Such revolutionaries as Edwin Chadwick, advocate of sewers in Britain, and nursing pioneer Florence Nightingale believed in the miasma theory. Most physicians at the time doubted that the disease was contagious, and were complicit in the pervasive social and moral judgments made against its victims.¹²

The Epidemic in Philadelphia

Charles E. Rosenberg’s groundbreaking work *The Cholera Years: America in 1832, 1849 and 1866* explored primarily the 1832 outbreaks in New York and Boston.¹³ J. S. Chambers wrote in *The Conquest of Cholera* of what he termed “Philadelphia’s near escape from the pestilence,” stressing “the dry season,” the Schuylkill River, and city’s aggressive “purification programs” utilizing river water.¹⁴

11. See Robert V. Tauxe, “Cholera,” in Alfred S. Evans and Philip S. Brachman, eds., *Bacterial Infections of Humans*, 3rd Edition (New York: Plenum Medical Book Company, 1998), 223.

12. For cholera in Britain, see Norman Longmate, *King Cholera: The Biography of a Disease* (London: Hamish Hamilton, 1966). For Koch, see Thomas D. Brock, *Robert Koch: A Life in Medicine Bacteriology* (Madison, Wis.: Science Tech Publishers, 1988).

13. Charles E. Rosenberg, *The Cholera Years: The United States in 1832, 1849, and 1866* (Chicago: University of Chicago Press, 1987).

14. J. S. Chambers, M.D. *The Conquest of Cholera: America’s Greatest Scourge* (New York: Macmillan, 1938), 72.



Clay pipe found at Duffy's Cut by William E. Watson in November, 2005, with an image of the old Irish Erin go bragh flag. It was typical of the pipes brought by European immigrants to America at the time of the 1832 cholera epidemic.

In fact, parts of the Delaware Valley were notably humid and hot during the summer of 1832, and such conditions encouraged the spread of cholera. Furthermore, despite the advantages that Philadelphia possessed over other cities (discussed below), cholera death rates in the city often exceeded those of New York City during the height of the epidemic in the month of August. The diary of a twenty-year-old Quaker girl named Deborah Bowman (in the collection of the Chester County Historical Society), whose family had businesses in Philadelphia and homes in Willistown, Chester County and Lower Merion, Montgomery County, recorded thirty-four rainy days in the summer of 1832—nine in June, ten in July, and fifteen in August. Deborah also reported excessive heat on many days, especially in August.¹⁵ In reality, the epidemic in Philadelphia has yet to be explored in depth.

Philadelphia indeed possessed several advantages over other American municipalities in its ability to deal with the 1832 cholera pandemic. Foremost was the presence in the city of the nation's leading medical training facility, the Philadelphia College of Physicians. Philadelphia doctors were highly regarded by their peers and by the public, and they were quick to react to the approach of the epidemic. The city's prior experiences in the Yellow Fever epidemics of 1793 and 1798 led to the creation of a municipal board of health to oversee public health endeavors, including setting up hospitals (which, however, were privately owned) and establishing guidelines for the quarantine of both people and food in the event of an outbreak. The board of health had earlier established a quarantine station for immigrants arriving in the Port of Philadelphia in 1799 called the Lazaretto, located outside the city, in Tinicum,

15. The Bowman diary is discussed in depth in Watson, et. al., *The Ghosts of Duffy's Cut*, 92-93.

Delaware County. With so many overland access routes into the city, however, it was impossible to guard against the arrival of cholera.¹⁶

Some of the most detailed reports of the 1832 cholera epidemic in Philadelphia were recorded in the Quaker newspaper, *The Friend*. The May 12 issue contained an article entitled “Progress of the Cholera,” which explained that Philadelphians were indeed aware of “the successive advances made by Asiatic cholera, from the country of its birth, beyond the banks of the Ganges westward into the very heart of Europe.” Details of the ravages of the disease in England, France, and Russia, were followed by the qualification that men seemed more prone to the disease than women, and that all classes of society were equally liable to contract it. Although anyone could get the disease, the paper declared that “its greatest ravages have been among those whose constitutions had become impaired by poverty and wretchedness, or ruined by intemperance and vice.” It cautioned, “Should this destructive disease be permitted to visit our country, the circumstances of the poor will demand the peculiar sympathy of every one who has at heart the welfare of his fellow creatures; and the alleviation of their condition will become to an especial degree a necessary public virtue.”¹⁷

In early summer, cholera had indeed crossed the Atlantic, and was present first in Canada and then in New York State. *The Friend* reported on June 30:

The appearance of this fatal malady in our favoured country is calculated to awaken the most serious reflections, and to excite the mind to close self-examination. That is a dispensation permitted to a wise and gracious Providence as a chastisement for the sins of the people, and as a solemn warning to repent and amend their ways, I have not the smallest doubt.¹⁸

The themes of chastisement and repentance during the epidemic were prominent in all Christian denominations in the United States and Britain. Cholera sermons were often excerpted in newspapers and reprinted in booklet forms for the edification of the public.

The medical community in Philadelphia reacted quickly, and the city’s Sanitary Committee appointed a medical commission consisting of three of the city’s most qualified physicians (Samuel Jackson, Charles D. Meigs, and Richard Harlan) to visit Montreal and Quebec to observe the epidemic there and learn of possible precautions that could be taken if or when the disease arrived in Philadelphia. The findings of the commission were recorded on July 8 and printed in the July 14 issue of *The Friend*. It was intended “to allay the public anxiety.”

First, the commission clarified the terminology—Malignant cholera, Asiatic cholera and Spasmodic cholera were all the same disease. The doctors questioned whether the disease was contagious and stated that “a general predisposition exists in

16. For an overview of Philadelphia’s experiences, see Chambers, *The Conquest of Cholera*, 68-78.

17. *The Friend* (May 12, 1832), 248.

18. *The Friend* (June 30, 1832), 303.



The skull of one of the Irish immigrant railroad workers who died in the 1832 cholera epidemic and was buried in the mass grave at Duffy's Cut. This man, excavated in August, 2009, has a cranium that shows signs of perimortem violence.

the whole community, from which very few individuals are exempt.” The specific symptoms of a “predisposition” of the disease are described:

. . . embarrassed and difficult digestion, sense of heat, fullness, uneasiness or pain in the abdomen, irregularity of bowels, a furred and pasty tongue, a sense of general debility, with frequency of cramps or contractions in the muscles of the extremities, especially at night.

The commission argued that the “state of predisposition will not give rise to an attack of the disease, without the application of an exciting cause.” The exciting causes consisted of a variety of factors:

moral excitements, especially from the passions of fear and anger; intemperance in the use of fermented and spirituous liquors, or in eating, overloading the stomach; acid drinks, or large draughts of cold water; the use of crude indigestible food, whether animal or vegetable, particularly the latter; excessive exertion or fatigue in the heat of the day; exposure to night air, sitting in currents of air, and particularly sleeping with too light covering, and with the windows raised, except the rooms are very small and confined.

The public should be aware, according to the doctors, that the attacks mainly “occur in the night, from 11 or 12 o’clock, to 3 or 4 in the morning.”

If it is caught in the “forming stage,” it was thought the disease could be treated. The symptoms of the “forming stage” consisted of

a sudden looseness of the bowels, the discharges becoming thin, watery, and colourless or whitish, with little odour—vertigo or dizziness—nausea, oppression, pain and cramps of the stomach, with retching and vomiting of a fluid generally resembling dirty rice water, attended or soon followed by cramps of the extremities, particularly of the legs or thighs.

In order to guard against the disease, the doctors recommended the following precautions:

the wearing of flannel particularly on the body, keeping the feet warm and dry, the avoidance of improper food and drinks, tranquility of mind and body, are almost certain guarantees against the disease, and disarm the pestilence of its malignity.¹⁹

Consumption of alcohol was regularly listed among the proscribed activities, and the list of improper foods swelled during the period of the outbreak. On August 22, the Washington, D.C. Board of Health declared a ninety-day ban on the importation and sale of cabbage, green corn, cucumbers, peas, beans, parsnips, carrots, egg plant, cimblias or squashes, pumpkins, turnips, watermelons, apples, pears, peaches, plums, damsons, cherries, apricots, pineapples, oranges, lemons, limes, cocoanuts, ice creams, fish, crabs, oysters, clams, lobsters, and crawfish. Potatoes, beets, tomatoes, and onions were to be “used in moderation.”²⁰

Responses to the Epidemic

Contemporary medical opinion in America and Britain was that cholera’s origin was atmospheric (the miasma theory) and physicians doubted that it was contagious. If the disease were deemed to be contagious, quarantine might be an effective measure to stem its spread. Business interests were opposed to quarantines, as commerce would be hindered if neighborhoods were routinely closed with onset of new cases. The British Board of Health, however, tried quarantine measures in 1831 to contain the epidemic, suggesting that some British physicians and officials believed the disease to be contagious. Existing treatments were primitive—calomel (which, with its mercury base, frequently caused yet more extensive health problems), laudanum (with an opiate base), chamomile, camphor, morphine, quinine, leeches, bleeding, and enemas.²¹ None of these *per se* could have been responsible for a cure, and most recoveries were due to the initial constitution and cleanliness habits of the infected victim.

19. *The Friend* (July 14, 1832). 317-318.

20. *National Gazette and Literary Register* (August 25, 1832), v. xii, no. 1788.

21. A few of these are discussed in the English source T. Forster, *Essay on the Origin, Symptoms, and Treatment of Cholera Morbus and other Epidemic Disorders* (London: Keating and Brown, 1831). In Philadelphia, see *The Friend* (July 14, 1832), 318. See also Chambers, *The Conquest of Cholera*, 67.

After the first case appeared in Philadelphia on July 7, city officials began “purification” policies to try to stem the spread of the disease. Water from the Schuylkill River was pumped into many neighborhoods to clean the streets and “night soil” was removed when possible in the mornings.²² Poorer neighborhoods, frequently containing substantial numbers of immigrant laborers, had more wells located near privies and it was difficult to prevent the contamination of local drinking water. The disease did not immediately spread in epidemic form, leading city officials to believe their policies of “purification” were sufficient through the month of July. Only a few more cases appeared to the end of the month.²³

Episcopal Bishop William White organized an inter-denominational day of “fasting, humiliation and prayer” on July 19 “to entreat the God of Providence to avert the awful disasters of His righteous judgment.” Bishop Kenrick agreed, and issued an additional address to the Catholic clergy (which was in effect until September 22, after the epidemic was considered to be over):

The excess too frequently committed in eating, and still more frequently in drinking, must be abandoned by all who wish to flee the wrath to come and escape the overflowing scourge. As the use of vegetables and fish is considered by eminent gentlemen of the faculty to predispose the system to disease, the obligation of abstinence from the use of flesh meat during the continuance of the alarm or prevalence of the malady will be dispensed with.²⁴

In early August, however, there was a dramatic spike in cases and *The Friend* reported on August 4 that “the pestilential principle, which, like the electric fluid, seemed to have been suspended in the atmosphere, had begun to show itself by its fearful effects.” Many citizens began fleeing from the city to the countryside, but it was “satisfactory to observe the calmness which in general marks the demeanor of those who stay.”²⁵ *The Friend* began providing weekly statements of casualties in the city. The cases were itemized by district on August 18 (the county was not incorporated for another two decades). The “city” proper (population 80,462) had 199 cases; Northern Liberties (population 28,872) had 63 cases; Kensington (population 13,394) had 39 cases; Southwark (population 10,202) had 125 cases; Moyamensing (population 6,822) had 109 cases.²⁶ Other districts had an additional 23 cases. The working

22. An important description is found in the “Account of the Cholera the day it broke out at Arch St. Prison in 1832 written by my dear Father Lewis Walker,” from the Priscilla Walker Sheets Papers, Friends Historical Library, Swarthmore College: “Our streets are so completely censed [sic], and the gutters well drenched with a copious stream of the Schuylkill water and every known nusince [sic] removed and all the cellars white washed and every foul filth whatsoever deposited ferretted [sic] out and yet very many are on the wing and are just waiting to take their flight. Whither to they know not. None of the small towns within a few days ride of this may be exempt.”

23. Chambers, *The Conquest of Cholera*, 69.

24. Fr. Joseph L. J. Kirilin, *Catholicity in Philadelphia* (Philadelphia: J. J. McVeigh, 1909), 278.

25. *The Friend* (August 4, 1832), 344.

26. *The Friend* (August 18, 1832), 360.

class neighborhoods with many of the new immigrants were hardest hit, as would be the case throughout the period of the epidemic in every American city.

The Friend reported on August 4 that during the period from July 28 to July 31 a total of forty-six cases and twenty-two deaths had occurred in the “City and Liberties.” Of these, five cases and two deaths occurred in private practice; nine cases and five deaths occurred in hospitals; five cases and two deaths occurred in the Almshouse. Then, on August 1, there were twenty-one cases in the “City and Liberties” and eight deaths. On August 2, there were forty new cases and fifteen deaths, with the Arch Street Prison counting thirteen of the cases and one death. On August 3, there were thirty-five cases and fourteen deaths.²⁷ The prison contained some 210 criminals (mostly cases of vagrancy, petty theft, disorderly conduct and drunkenness), and twenty-one debtors. The number of cases quickly increased in the prison to about eighty of those incarcerated. Chambers states that on August 5,

Confusion and panic reigned. The crazed prisoners were possessed of the idea of flight. The dead and the dying were everywhere. Many good citizens . . . obtained the release of the petty criminals well enough to leave. . . . Citizens also raised funds for the release of the debtors and thus emptied the prison except for the sick and the dead.²⁸

By August 6, there were well over a hundred cases a day and the number of deaths increased dramatically. During the week of August 4-10 there were 830 cases and 326 deaths in the “City and Liberties.” The worst days in the city were August 6, when there were 176 cases and 71 deaths, and August 7, when there were 136 cases and 73 deaths. By comparison, in New York City, the highest numbers in this general period were July 28 and August 4, when there were 145 cases and 68 deaths on each day.²⁹ An almost total breakdown of discipline began to occur within the medical profession, but the directors of the Almshouse (on Spruce Street, between Tenth and Eleventh) had a solution: the Sisters of Charity. The report from the Committee of the House (August, 27) explained:

When cholera made its appearance in the different wards of the Almshouse, and led to the belief that the atmosphere of the whole institution was infected, the nurses and attendants became clamorous for an increase in wages, and after their demands were gratified, such was the appalling nature and extent of the disease, that fear overcame every other consideration, and it was found impracticable to keep the nurses to their duty or to obtain, at a reasonable price, proper persons to attend to the sick. . . . In a disease which requires unremitting attention from nurses, those employed in the in the wards (a few excepted) were by no means suitable. . . . In one ward where the disease raged in all its horrors, where one would suppose that the heart would be humbled and the feelings softened at the sight of distress, the nurse and her attendants were in a state of intoxication, heedless of the groans of patients and fighting over the bodies of the dying and the dead. . . . The few good nurses

27. *The Friend* (August 4, 1832), 344.

28. Chambers, *The Conquest of Cholera*, 75.

29. *The Friend* (August 11, 1832), 352.

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were broken down by loss of rest and by fatigue, and the remainder abandoned the sick from fear of disease or resorted to intoxication. . . . Under these circumstances the committee came to the determination of soliciting the Sisters of Charity at Emmitsburg to take charge of the wards, and for this purpose they applied to Bishop Kenrick. . . . The application was received by him in the spirit of Christianity and kindness.³⁰

Bishop Kenrick wrote in his diary that Jesse Burden, one of the directors of Almshouse, solicited him for help and, with the full support of Father John Hickey, superior of the order, eight sisters set out from Emmitsburg on August 9 to join about five others of their number already in Philadelphia.³¹ They were given appropriate accommodations in the eastern tower of the Almshouse, and eight of them worked at that location (Gabriella Zwyer as sister servant, with Sisters Mary Joseph Rivell, Pelagia McWilliams, Euphrasia Dix, Sylvestre Barry, Baptista Dowds, Joachim Harris and Adria Bowen).³² Father John Hurley, pastor of St. Augustine's (on Fourth Street, between Race and Vine), gave his residence over to the care of cholera patients under Dr. Oliver H. Taylor, with the assistance of two other Sisters of Charity, Sisters Olympia McTaggart and Isabella Devoy. A well-known calculation is that of 370 patients treated at St. Augustine's, only sixty-three were Catholic.³³

Bishop Kenrick commented on the heroism of the sisters and also of the priests:

displaying an example of heroic fortitude, with certain peril to their lives, the Sisters took charge of the pest-stricken patients in that Hospital . . . priests proved their character and their strong virtues, caring for the sick in the exercise of their ministry; while non-Catholic ministers generally fled from the city.³⁴

The epidemic continued to be fatal through late August, but the numbers of new cases and deaths steadily decreased. From August 18 to 24, there were 358 cases and eighty-five deaths, and from August 23 to 29, 201 cases and forty-seven deaths. The highest numbers of cases and fatalities at that time were in private houses (72 cases, 17 deaths) and hospitals (116 cases, 31 deaths). There were ten deaths a day in the city on August 23-25, but things had gotten so much better that four of eight cholera hospitals were closed in the city by August 23. Deaths by cholera in the Almshouse almost disappeared by then.³⁵

30. Reprinted in *Year Book for Nineteen Twenty-Three in Aid of All Saints Chapel* (Philadelphia: Philadelphia General Hospital, 1923), 3-4.

31. *Diary and Visitation Record of the Right Reverend Francis Patrick Kenrick* (Philadelphia: Archdiocese of Philadelphia, 1916), 76-77.

32. Kelly, *Numerous Choir*. 50.

33. *Ibid.*

34. *Diary and Visitation Record of the Right Reverend Francis Patrick Kenrick*, 76-78. Also see Christopher J. Kauffman, *Ministry and Meaning: A Religious History of Catholic Health Care in the United States* (New York: The Crossroad Publishing Company, 1995), chapter three, "Epidemics: The Cholera 1832-1859," 27-50.

35. *The Friend* (August 25, 1832), 368; *The Friend* (September 1, 1832), 376; *Niles Weekly Register* (September 1, 1832), 5.

By early September, cholera had mostly run its course in Philadelphia, and the Board of Health publicly thanked the sisters, Bishop Kenrick, and Father Hurley for their valuable assistance in the epidemic. Furthermore, the Almshouse Committee wrote on August 27 that as the sisters' "services are invaluable," they had been given "the sole control of the female department of the Almshouse, and of such medical and surgical wards of the male department as they may consent to." The sisters would continue working there through the following spring. The Almshouse committee report continued:

These ladies . . . left a healthy home to visit an infected city, to encounter a dreadful disease, to live in an atmosphere dangerous in the extreme, to watch by the bedside of strangers, of the friendless, of the outcast, of those who generally proved themselves unworthy of kindness.³⁶

Various Christian denominations met in the Philadelphia district on October 12 to choose a day of Thanksgiving to God for "arresting that dreaded pestilence the Cholera, and delivering them from its ravages so much sooner than they had reason to expect." They decided on Thursday, November 15.³⁷ Silver plate was offered by the city to each of the sisters, as well as to thirteen physicians who had officiated at the city's hospitals during the epidemic (John C. Otto, N. Chapman, Joseph Parrish, John K. Mitchell, Thomas Harris, Samuel Jackson, Charles Lukens, W. E. Horner, Charles D. Meigs, Richard Harlan, Hugh L. Hodge, Oliver H. Taylor, and Gouverneur Emmison). The sisters declined the offer and, at Sister Olympia's suggestion, the money that would have gone to create the silver vessels was instead applied to the finances of the orphan's asylums administered by the order, as well as the Female Free School on Prune Street.³⁸ Sister Gabriella received from the city a sum of \$100 on September 18 for replacement clothing (i.e., habits) damaged in the course of the sisters' work at the Almshouse.³⁹ Miraculously, none of the sisters working the city died, although one was ill for a time.⁴⁰ Several sisters in Baltimore did actually perish in the epidemic there.⁴¹

36. *Year Book for Nineteen Twenty-Three in Aid of All Saints Chapel*, 4. See also "Our Sisters in Two Crises of Medical History," *Extension Magazine* (January 1919), 9. in Archives of the Daughters of Charity, De Paul Provincial House, Albany.

37. *National Gazette and Literary Register* (November 10, 1832), v. xii, no. 1821, 1.

38. "The Cholera in Philadelphia," in Archives of the Daughters of Charity, De Paul Provincial House, Albany. Record Group 11-01, Box 1, Folder 03-02, item #1; Letter of John Hickey to the Board of Managers of the Philadelphia Almshouse (May 15, 1833), Records of the Board of Health, in the Archives of the City of Philadelphia. See also Martin I. J. Griffin "The Sisters of Charity and the Cholera in Baltimore and Philadelphia, 1832," in *American Catholic Historical Researches* 14 (1897): 114-116.

39. Minutes of the Board of Managers of the Philadelphia Almshouse, May 20, 1833, Records of the Board of Health, in the Archives of the City of Philadelphia.

40. According to the "Tribute From Board of Almshouse for Service of Sisters of Charity," one sister "had slight symptoms of the disease, which were readily relieved." Handwritten notice in Archives of the Daughters of Charity, De Paul Provincial House, Albany. Record 7-6-1, 1-1, #9a.

41. Griffin "The Sisters of Charity and the Cholera in Baltimore and Philadelphia, 1832," 114. The sisters who died in Baltimore—Sister Mary Francis and Sister Mary George—were listed in a notice by Mayor William Steuart, who mentions each sister by name who served in the various hospitals of that city during the epidemic (something which cannot be recreated so precisely in Philadelphia, unfortunately).

The Sisters and Duffy's Cut

Mile 59 of the Philadelphia and Columbia Railroad in Chester County was the most difficult stretch of the entire eighty-two mile line to construct due to the rough terrain and the need to build a 300-foot earthen fill in lieu of a bridge. The contract went to an Irish immigrant labor contractor named Philip Duffy (1783-1871), who was in the business of providing his fellow Irishmen to work on the railroads of Pennsylvania. Duffy had contracts with the Philadelphia and Columbia Railroad from 1829 to 1849, and also with the West Chester Railroad and the Reading Railroad. While the average contract for a mile of railroad construction in the 1830s varied between \$4,000 and \$6,000, Duffy's contract for mile 59 of the Philadelphia and Columbia was for \$23,000 (and by the time it was eventually completed, it would cost an astounding \$32,000). On June 23, Duffy met an arriving bark called the *John Stamp* on the Philadelphia docks that had sailed from Derry in April with a shipload of Irish laborers, mainly Catholics from Donegal, Tyrone, and Derry. He acquired his work crew for mile 59 primarily from the men of the *John Stamp*. The site eventually was named Duffy's Cut for the "cut" in the landscape made to lay the tracks.⁴²

The men were in the midst of building the fill when cholera struck their camp in mid-August. Within two and half weeks, all were dead of cholera, and possibly some also to violence at the hands of local Nativist vigilantes, who feared the disease as much as they despised the Irish Catholics in their midst.⁴³ A unique source for the deaths of the men is the Pennsylvania German historian Julian Sachse, who wrote that when cholera broke out in their camp, men tried to flee to local homes for assistance, but doors were shut on the men and they were forced back into the valley, presumably by the East Whiteland Horse Company.⁴⁴ Mile 59 had been owned by the same family (Pratt) that ran the horse company, and in 1829 *The Village Record* reported, in regard to Duffy's contract for the adjacent mile 60, that difficulties would come to the "sturdy-looking band of the sons of Erin" if the railroad, its contractors and laborers, did not take care to preserve private property along the line, especially that of the homeowners living adjacent to the tracks.⁴⁵

42. The only full narrative of the construction is in Watson, et al., *The Ghosts of Duffy's Cut*.

43. This happened elsewhere in the 1832 epidemic in Pennsylvania. Charles Rosenberg writes in *The Cholera Years* of the outright murder of suspected cholera patients and the man harboring them in Chester (p. 37). James D. Dilts writes that Irish workers were lured away from work sites to die alone and unattended on Maryland's Chesapeake and Ohio Canal. See *The Great Road: The Building of the Baltimore and Ohio, the Nation's First Railroad, 1828-1853* (Stanford: Stanford University Press, 1993), 193-194.

44. Julian F. Sachse, "The Legend about Duffy's Cut on the Pennsylvania Railroad between Malvern and Frazer," in Pennsylvania Railroad File No. 004.01 "C," "History of Duffy's Cut Stone enclosure." Transcription in Watson, et al., *The Ghosts of Duffy's Cut*, 163-166.

45. *Village Record* (June 9, 1829) in clipping files of the Chester County Historical Society: "It is a matter of the first importance to preserve a good understanding between the people living adjacent to the route, and the contractors and hands employed in the work. The disregard of this has been the fruitful source of disorders and riots in some parts of the country."

According to Sachse, however, four Sisters of Charity were called upon to minister to the dying men at Duffy's Cut. It cannot be known whether Duffy or someone else called for the sisters' help. Sachse's source was an anonymous eyewitness, who may have been Isaac Williams, a local member of the Old Hickory Club. Memory of their hopeless mission was recalled by Sachse:

How these four brave women, clad in the habit of their order, in the hot blazing August sun started cheerfully to walk up the turnpike, carrying large parcels of supplies and medicines, was a sight not to be forgotten even after this long lapse of years . . . so great was the fear of contagion that they [the four nuns] could get neither shelter nor conveyance, and tradition tells us that although jaded and worn out as they were by their vigils and duty to the dying laborers, they were forced to walk all the way back to the City, twelve miles, according to the milestones, but to these four weak females, frail in body but strong in spirit, it seemed more like two hundred. It is stated that at the sight of their habits doors would be closed and all assistance refused to these persons, who had themselves risked their own lives to save that of their unknown fellowmen.⁴⁶

No record of their mission, however, has survived in archdiocesan records, due perhaps to the order's tradition of anonymity, or the fire during the Nativist riots at St. Augustine's in 1844.

After the sisters returned to Philadelphia, the project blacksmith, Malachi Harris, was charged by Duffy with burning their shanty and burying the men in the fill. It is interesting that the railroad itself, both in an 1833 internal memo by Philadelphia and Columbia Superintendent William Mitchell and in the later official Pennsylvania Railroad File of the event stated that all 57 Irishmen had died in the valley where they had worked.⁴⁷ That none of the sisters died there or in Philadelphia had to do with their personal hygiene and physical constitution. Several newspapers including the *National Gazette and Literary Register* in Philadelphia and *The Village Record* in West Chester made negative character assessments of the Chester County cholera victims, implying that they were depraved in various ways. *The Village Record* even downplayed the number of victims who died at Duffy's Cut in a November 9 rewrite of the full story that had appeared in an October 3 article which was pulled from circulation at or near the time so effectively (presumably by the Horse Company) that no copy of that one particular issue has survived in any archive today.⁴⁸ An example of the kind of characterizations is the following from the September 8 *National Gazette and Literary Register* on victims in East Whiteland:

All were intemperate, and ALL ARE DEAD! The house, or rather hovel, in which they lived, with all its contents, was burnt immediately after the bodies were buried.⁴⁹

46. Sachse, "The Legend about Duffy's Cut on the Pennsylvania Railroad between Malvern and Frazer."

47. William Mitchell to James Clarke, Esq., 1833, from microfilm records of the Pennsylvania Canal Commission, Pennsylvania State Archives Harrisburg.

48. Discussed in Watson et al, *The Ghosts of Duffy's Cut*, pp. 73-76, 98.

49. *National Gazette and Literary Register* (Sept. 8, 1832), v. xii, no. 1794, p. 1.

The railroad subsequently did its best to cover up the tragedy at Duffy's Cut, making the official accounts of it off limits to the public, and suppressing the repetition of the story in even internal railroading publications such as *Pennsylvania News*. Elements of the story were preserved (albeit imprecisely) in local folklore in East Whiteland—even a detail that several sisters had died helping the men. The more precise account was preserved by three later railroaders. First was Irish immigrant track laborer Patrick Doyle, who worked for the Pennsylvania Railroad (PRR) at the site around 1870, and who indeed may have learned of the events from Harris himself. Second was Martin W. Clement, the PRR assistant supervisor at Paoli in 1909-1911, and later president of the PRR during the 1930s and 1940s, and who learned of the story from Doyle's sister and brother-in-law with whom he lived in Frazer. Clement erected a stone wall around the supposed burial spot earlier marked by a wooden fence erected by Doyle, and he also created the official PRR file on the event, File number 004.01 'C,' "History of Duffy's Cut Stone enclosure east of Malvern, Pa., which marks the burial place of 57 track laborers who were victims of the cholera epidemic of 1832." The file contains invaluable interviews and earlier reports, and it was Clement himself who decided to keep it off limits to the public. Third was Joseph F. Tripician, Clement's personal assistant who later became director of personnel for the PRR, and preserved the file when the PRR collapsed in 1968. These railroaders also were responsible for preserving Sachse's account of the sisters' work at Duffy's Cut in the official PRR file of the event—important because the account does not appear in any archdiocesan records.

Conclusion

The departure of the sisters from the Almshouse and their return to Emmitsburg in May 1833, closed an important chapter in Philadelphia medical history. The professional nursing care that they provided in the Almshouse and hospitals was one of the few heroic aspects of the epidemic in Philadelphia. Their pious work contrasted dramatically with the moral crisis that existed among the healthcare workers in the Almshouse when casualties in the epidemic reached enormous proportions in early August. Their high level of nursing professionalism was a model for future generations of nurses in Philadelphia. The old Philadelphia General Hospital, descendant of the Almshouse, published accounts of the sisters' work into the twentieth century, and had plaques prominently displayed to inform the public about the sisters. The latter played an important spiritual role also in the Duffy's Cut story in 1832, preserved in the official railroad files. Ironically, however, the sisters' Female Free School and St. Augustine's Church, where the sisters had served as nurses, were both burned to the ground by Protestant Nativists in the 1844 anti-Catholic riots just twelve years after the terrible epidemic of 1832.