



*knee-deep in history*

# The Scribe

July 2020

Palmerton Area Historical Society  
www.palmertonhistorical.org

## **Pandemics** **1918 Influenza**

Americans, by their very nature, have short memories. They are quick to forgive and they do not hold grudges over extended periods. Often, enemies of one generation become friends in subsequent generations. To an extent, we are poor historians in that we choose to ignore what is unpleasant and to concentrate on what gives us a feeling of well-being.

As we social distance to protect ourselves against Covid-19, it may be helpful to review our past experiences with the tiny viruses that have wreaked havoc upon us in the past century - experiences that have, perhaps, faded from our memory. To younger generations, words like smallpox, polio, measles, AIDS, and the “flu” have little significance. In this issue of *The Scribe*, a brief history of some of these threats provides a reminder of how fragile life can be.

In 2018, the noted historian and *New York Times*-bestselling author Kenneth C. Davis published an eminently readable and well-researched

account of the great influenza pandemic of 1918. His book - *More Deadly Than War* – provides some insight into what was to occur two years later as the world struggles with Covid-19. His story, and others on the subject, should be read today – and in the future – so that we do not become complacent and fail to heed warning signs.



*The pandemic came from the heartland of the United States.*

Inaccurately labeled “The Spanish Flu”, the first cases of this highly contagious disease were observed in March 1918 in Kansas among army recruits being trained for transport to Europe to support the war effort. At that time, no one fully understood the nature of viruses. They were far smaller than bacteria and were not physically seen and identified until the invention of the electron microscope in the 1930’s. As the troops boarded packed railroad cars and headed for East Coast ports and the transport ships that were to take them to the conflict in France, these tiny but deadly pathogens quickly spread.

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# Palmerton Area Historical Society

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## **The Kibler School**

### ***A Return to the One-Room Schoolhouse***

If you have never experienced the atmosphere of late nineteenth century learning, now is the time to visit the Kibler School at 6495 Pohopoco Drive on the north side of Beltzville Lake. On three Thursday evenings in July (weather permitting) the following outdoor programs will be provided –

### **Thursday, July 16th**

Jack Branch - “Early Settlers of Pohopoco”

### **Thursday, July 23rd**

Josh Finsel - “Lore of the Elderberry”

### **Thursday, July 30th**

Scott Christman - “Responsibilities and Activities of the Pennsylvania Fish & Boat Commission”

Cheese and sweets are always welcomed. You may wish to bring your own lawn chairs.

The Kibler School is maintained by the Friends of the School and by the Historical Society. A recent grant from Thrivent Financial will support this effort and we express our thanks to the thoughtful member of the Society who helped make this special gift possible.

## **Artwork for Display**

The Heritage Center refreshing is almost completed. The corona virus interruption was a temporary setback. We are still looking for early works by Palmerton area artists that can be displayed when we reopen. Limited space is available. If you would consider lending a work, or wish further details, please call Jane Borbe at 610-824-6954.

# 1918 Influenza

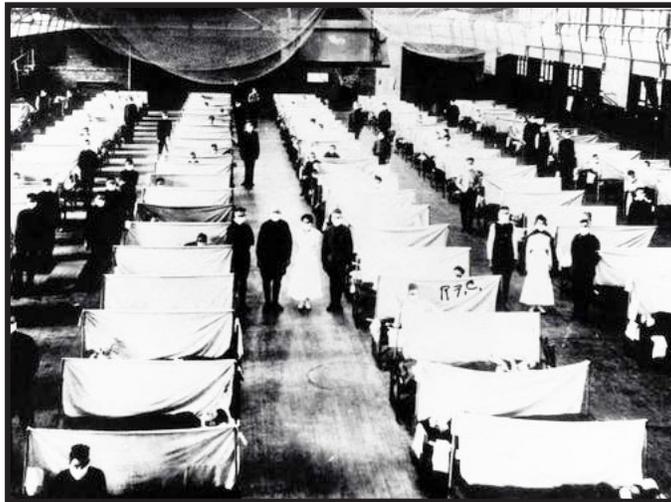
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The Great War was to end in about six months after millions of soldiers and civilians had already died in the previous four years. The urgency to end the conflict required the mobilization of hundreds of thousands of young, healthy Americans. Less than two weeks after the first cases were observed in Kansas, the disease had spread to more than 20 other training camps. Recruits were dying before even seeing battle and the rush to get them to the front lines hastened the spread. There was no thought of “contact tracing” as the troops carried this far deadlier enemy to the European trenches.

By June 1918, both sides in the war were being devastated by the virus. Then, as quickly as it had appeared it seemed to vanish in August – only to have a second, more potent wave strike the United States in September. People panicked. Fear, rather than the disease itself, became a major societal problem. The urban centers, with their high population density, became clear targets. Boston, New York, and Philadelphia were particularly susceptible to the spread of the virus. Bodies were stacked in the streets. Debate raged over whether to close schools. Some cities kept them open arguing that there

was an even greater chance of having children contract the disease in their homes than in the more controlled environment of a school.

The virus was not challenged by distance. The Alaskan frontier seemed to be far removed from the virus – yet Red Cross medical teams came across village after village near the Arctic Circle with as many as 90% of the inhabitants dead of the virus. Nor were rural communities spared in the Dakotas and Nebraska. Despite the high incidence of contagion on the troop ships, more soldiers were still being sent to France. Finally, the disease became so overwhelming the US Army Provost Marshall cancelled the September 1918 draft call for 142,000 men.



*Warehouses were converted to makeshift hospitals.*

Again, the virus ebbed until a third wave took hold early in 1919. Before it had waned entirely in 1920 almost 700,000 Americans had died. This number paled in comparison to almost 20 million in India and millions more throughout the world. In all, global death estimates range from 50 million to at least twice that number. Almost 5% of the world’s total population at that time died from the virus and almost half the population was affected and suffered – often with lingering consequences.

**Smallpox**

**A Scourge for Thousands of Years**

The earliest evidence of smallpox - a highly infectious and deadly viral disease was found in archeological digs dating to the Egyptian dynasties. Its spread was traced through Asia and eventually it was observed in Europe in the fifth century. By the 1700s, smallpox was claiming more than 400,000 lives each year as it made its way across the continent. It was transported to the Western Hemisphere by early explorers who often traded smallpox contaminated blankets with the native Indian tribes.

Two thousand years ago, the Chinese tried to control the disease by performing experiments with dried powder from pulverized smallpox scabs and inhaling it into the nose. Although crude and unsuccessful, it demonstrated some basic understanding of what was later to lead to a more effective approach.

Credit for immunization against smallpox goes largely to Edward Jenner, an English medical student. He and others had observed that milkmaids were almost universally free of smallpox. He noted that they often contracted a much milder and relatively benign case of cowpox from handling the cow’s udders. Jenner took a leap forward in 1797 and began a series of experiments in which he took pus from a

cowpox pustule and inserted it into a small incision in the arm of an eight year old boy. He eventually performed similar experiments on other children including his own one year old son – with outstanding results.

Jenner published his work on “vaccination” – a word he derived from the Latin word *vacca* or cow – but he had to contend with several years of ridicule before his methods were recognized for their true worth. Although techniques were greatly improved in the following years, the underlying discovery of vaccination against smallpox did not occur in a laboratory but rather in a simple observation made by a country doctor.



*Edward Jenner - vaccination pioneer*

Francis Galton, a 19th Century English statistician and sociologist, said that in science credit goes not to the person to whom an idea first occurs, but to the person who convinces the world. Jenner fit this description and is appropriately recognized for his achievement.

Most Americans under the age of forty did not have to experience a vaccination against smallpox. In 1977 the world’s last naturally occurring case of smallpox was identified and in 1980 the World Health Organization certified complete global eradication. Prior to that time, if you wished to travel to many

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countries outside the United States you had to show evidence that you had been successfully vaccinated against this disease. Today, small quantities of the virus are carefully preserved in two laboratories – one in the United States and one in Russia – as a hedge against any future reoccurrence of the disease.

### **Poliomyelitis**

No words struck more fear into parents during the three decades spanning the 1930's through the 1950's than "infantile paralysis" and no image was more terrifying than lines of casket-like stainless steel machines in hospital wards throughout the country.

Polio, as it is more commonly known, is a highly infectious viral disease that can attack a person's spinal cord and cause paralysis. Not only does it impair a victim's ability to move, it can make breathing so difficult that a mechanical respirator enclosing most of a person's body was needed for survival. This device, referred to as an "iron lung" saved thousands by mimicking the way the body's chest muscles move air into and out of the lungs.

The polio virus was frightening in that it was spread directly from person to person and an infected individual might be asymptomatic for up to six weeks. During this time the individual could infect others and once infected there was no specific treatment.

The first documented outbreak in the United States occurred in Vermont in 1894 and although there were relatively few cases, the disease was feared for its consequences. Children were particularly vulnerable – hence the reference to infantile paralysis.

The disease respected no social boundaries and adults were not immune. In 1921, future President Franklin Delano Roosevelt was stricken at the age of 39. The subsequent lack of mobility in his lower body forced him to lead the country for four terms from a wheelchair. Tanaquil Le Clercq, principal ballerina with the New York City Ballet, was stricken in 1956 at age 27 at the height of her career. Until her death in 2000, she remained paralyzed below the waist but used her great talent as a teacher to educate others.

The cruelty of this debilitating disease forced a major effort to develop a vaccine that would protect against it. In 1953, Dr. Jonas Salk announced the development of a vaccine that was eventually licensed for use in 1955. It required an injection and was based on an inactivated virus. Two years later, Dr. Albert Sabin developed an oral vaccine from weakened strains of the virus and it became commercially available in 1961. Today, polio has been almost entirely eliminated through the use of vaccines such as these. Worldwide cases have declined from 350,000 in 1988 to only 33 cases in 2018.

## Measles

Measles is a highly contagious viral infection that prior to 1970 was commonly referred to as a “childhood disease” because one infected child could easily infect as many as nine others. Although, the death rate in the United States at that time from measles was one in 1,000, the complications were serious especially when the disease was passed on to an adult who had not been previously afflicted.

Before the availability of an effective vaccine, approximately two million measles related deaths were recorded annually worldwide. Most occurred in third world countries where health care was poor or unavailable.

Around 1970 a vaccine became available that, when administered to toddlers, was highly effective in preventing the disease and conveying lifelong immunity. Worldwide deaths dropped to 536,000 in 2000 and to 142,000 deaths in 2019. Still, these numbers are staggering.

As a result of the efforts in the United States to vaccinate children there was a dramatic decrease in cases and the disease was effectively eradicated here. In 2010, only 63 cases were reported. However, there has been a resurgence over the next decade and 1,282 cases were reported in 2019. This has been due to laws that allow parents to opt-out of vaccination for their children on religious or personal grounds.

## Palmerton and Covid-19

Over the past three months, Palmerton, like the rest of the country, has been affected by the corona virus. As this issue of *The Scribe* goes to press, the area is slowly returning to some degree of normalcy. Restrictions still apply to gatherings in public places. Restaurants with open-air capabilities are finding ways to adapt and libraries are providing curbside service to patrons.

Questions still remain. Will an effective vaccine become available? Will schools be able to

reopen? Will it be necessary for the public to continue to observe distancing protocols? Will the conveniences we have come to cherish disappear into a web of regulations? Will our lives continue to be filled with anxiety over an unseen enemy?



The history of the 2020 pandemic is yet to be written. The sociological, economic, and political issues will provide important lessons for the future. Will we learn from them?

## 2020 Monthly Program Schedule

*all programs are held in the Knight's Gallery of the Palmerton Library at 7pm unless otherwise noted*

**July 13**

***History and Demonstration of the  
High Wheel Bicycle***

Donald R. Serfass  
Borough Park

**August 10**

***Annual Picnic***

**September 11-13**

***Palmerton Community Festival***

Borough Park

**October 12**

***PA German Gravestones***

Michael Emery  
PA Historical Museum Commission

**November 9**

***A Photographic Journey***

Lynn Shupp  
PA Historical Museum Commission

**December 6**

***Ecumenical Service &  
Christmas Party***

***The Palmerton Area Heritage Center remains closed until  
protocols are in place to permit a safe reopening.***

## Have You Renewed Your Membership for 2020?

***Check Your Label for a "Red Dot"***

We don't want to lose you! Please check the mailing label for a RED dot. If it is there it signifies that we haven't yet heard from you. Of course, that could be our mistake – but if you haven't renewed for 2020, memberships start at only \$15 per year. Your membership is valued and demonstrates your interest in the unique history of this National Historic District.

**Stay in touch and  
stay healthy!**





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PO Box 267  
Palmerton, PA 18071

**Palmerton Area  
Historical Society  
Heritage Center**

410 Delaware Avenue  
(610) 824-6954

**HOURS**

**Wednesday** - 12:30-3pm

**Thursday** - 10am-2pm

**Friday** - Noon-4pm

**Saturday** - 10am-2pm

