## HALE COLUMBIA

## Columbia, Pa. Medical Record, 1893-1905

Joseph W. Lahr M. D.





Lena Agle, age 2½, died of diphtheria on October 9, 1893. Just one week earlier, Dr. William Taylor had reported her illness to the Columbia Board of Health—a newly formed agency within the government of Columbia borough. Lena was just one of 153 cases of diphtheria recorded in the log of "Infectious and Contagious Diseases" between September 1893 and December 1894. The Borough of Columbia kept this written record, the "Ledger," from the start of the diphtheria outbreak until September 1905 (Infectious and Contagious). The same volume also contains records of births and deaths in Columbia from 1893 to 1900. This book, stored at the Lancaster County Archives and also available on microfilm, provides valuable insight into the relationship between government, public health, medical personnel, medical institutions, and society from the end of the nineteenth century and into the beginning of the twentieth century.



The new Columbia Hospital opened on Thanksgiving day, 1903. It was located at 7th and Poplar Streets in Columbia.

Photo from a post card (No. \_22103) Souvenir Post Card Co., New York, with 1 cent postage

## The Ledger

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Over an eighteen-month period from January 1903 through June 1904, Columbia suffered through an epidemic of scarlet fever. The outbreak began with ten cases in January 1903, built slowly to a peak of forty-one cases in June, tapered off during the late summer, but re-emerged with over thirty cases in both October and November. The outbreak slowly abated through the first half of 1904. Fortunately, the disease was mild, with only six deaths out of 302 cases — a mortality rate of only two percent. Unlike epidemics in the 1840s, when scarlet fever was more deadly, the experience in Columbia was similar to other areas during this time.

One must remember that the cause of scarlet fever was unknown and there were no effective treatments. If a child contracted the illness, the best a parent could expect was a week to ten days of high fever, a rash, and hopefully, no serious complications such as rheumatic fever, nephritis, or meningitis.



Streptococcus pyogenes, the causative agent of scarlet fever, is a gram-positive, non-motile, coccoid bacterium that occurs in chains. It possesses the Lancefield Group A antigen and will cause betahemolysis of red cells when grown on blood agar. Thus, the diseasecausing entity is often referred to as Group A Beta-Hemolytic Strep.

Photomicrograph of *Streptococcus pyogenes* (in red) stained with Pappenheim's stain and magnified 900X. The Specimen was obtained from pus, and the large blue objects are white blood cells.

Credit: Centers for Disease Control and Prevention's Public Health Image Library (PHIL), identification #2110.