### Part IV: Generation Four More Information

### Mary Giggey; Sarah Crabtree Gill; and Elijah Crabtree

#### **Mary Giggey Crabtree**

Information from a biography of Mary and Richard Crabtree's son James, states that Mary was born in Virginia and that her parents were natives of the Lowlands of Scotland. There is also information that Mary was born in New Brunswick, Canada. It would seem if she was born in around 1787, that Mary would have been born in New Brunswick where many of the Loyalists, including Richard's parents had moved.—Louise Smith **\*** 

#### Sarah Crabtree Gill Applies for a Widow Pension

Sarah provided an affidavit signed by Daniel Gill and William L. L. Gill. An additional affidavit from 1st Lt. William Freeman of Co. F, 13th Maine, stated his personal knowledge that "Leonard F. Gill was killed by a gunshot wound at the Battle of Pleasant Hill, Louisiana."

The claim seems to have hit a slight bureaucratic snag as on August 5, the papers were returned to have "the official character of the magistrate before whom the marriage evidence was taken may be certified by the proper person." In spite of this, the claim pushed forward and on August 16, 1864, notice was sent of the authorization of an \$8 per month pension to date from April 9, 1864. That means that Sarah received back payment to that date.

An act of July 1866, provided for an increase in pensions and Sarah filed for the increase on September 5, 1866. She provided an affidavit signed by her and witnesses D.C. McCallan and Mrs. L. Emily Gill.

The claim was still pending in May 1867, when she provided another affidavit attesting that she had not abandoned support of her children nor permitted any of them to be adopted. This document was signed by Amos Peaslee and Mrs. L. E. L. Gill, both of Portland, Maine. She received an increase of \$2 per child effective May 24, 1867. She would now receive \$14 per month total pension.

Sarah moved to Chicago in the summer of 1868. Her claim was transferred effective September 4, 1868.—*Cal Bivens*

Note: There is more information about Sarah Crabtree's Widow Pension on page 156.

PHYSICIAN'S CERTIFICATE OF DEATHIssued by State Board of Health.	
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<ul> <li>8. How long resident in this State. In 974.</li> <li>9. 1Place of death /0 70 Ponton St.</li> <li>10. 1Cause of death Horizon - Horizon - St.</li> </ul>	13Ward or town. Complications
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lijah Harris Crabtree's death certificate.	

### The Potato Famine

Family information says that Great Great Grandmother, Mary Higginson's father, John Donaldson, died about 1846, and her mother, Mary Johnson, died about 1846. The years are so close to the years of the potato famine, that I wonder if the famine caused John and Mary's deaths.—Louise Smith

The white potato originated in the Andean Mountains and was probably brought to Europe by the Spaniards. The Irish potato as it is called today, was introduced to Ireland about 1590. The potato could grow in the poorest conditions, with very little labor, making a cheap and plentiful food source for the rural pleasants who often lived off little else. The Great Famine changed all this.

The Great Famine started in 1845, when about half of the Irish potato crop failed as a result of a fungus—phytophthora infestans or potato blight which infected Ireland's potato crop. The blight or fungus produced black spots and a white mold on the leaves, which rotted the potato and made it unedible. The spores of the blight were carried by wind, rain and insects and came to Ireland from Britain and the European continent. Spraying a solution of copper sulphate would have prevented the disease from taking hold, but that was not known until 1882.

There was hardship after the blight struck in 1845, but the true famine did not come until the following year. More potatoes than ever were planted that spring because people did not expect the blight to strike again. It did.

The hardest hit were the landless labourers who rented small plots of land to feed themselves and their families. When their own crops failed, they had to buy food with money they did not have. The price of a hundredweight (112 lb or 50 kg) of potatoes in Dublin more than doubled from September 1845 to April 1846, and doubled again by October 1846. Wages did not keep pace. Some landlords treated their tenants well, but most did not. Evictions were not uncommon and tenants who were evicted were left without means to support themselves.

During the winter of 1846, the worst started to happen. People died of starvation in their houses (or what passed for houses), in the fields, and on the roads. Dysentery and typhus became epidemic. Each took their toll, especially among the very young and the old. By 1847, a large proportion of the population died from disease or starvation.

By the summer of 1847, over three million people were being fed by government soup kitchens and those organized by Quakers. Mass graves were made as so many people died in such a short of time. Cholera hit in 1849, and killed many of the survivors. More people died of disease than of starvation.

The blight struck again in 1850, but not to the same extent. Hundreds of thousands of small holdings had disappeared with the people who lived on them. Many of the marginal plots that had been in use were never cultivated again.

One article stated the opinion that the blight provided the catalyst for the famine, but that the calamity was essentially man-made, as a result of blind politics, scientific ignorance, rural suppression and enforced poverty.

According to this account, many Irish landlords sent grain and cattle to England for profit instead of keeping it for the poorer classes. In November of 1845, the prime minister had £100,000 worth of Indian corn imported from America for food relief. This cheap Indian meal contained little or no nutrients and contributed to the spread of the disease. The majority of Famine victims died from malnutrition-related disease such as dropsy, dysentery, typus, scurvy, and cholera, rather than directly from starvation.

The alternative to disease, starvation or eviction from tenant lands, was emigration. As a result of the famine, Ireland lost a quarter of its eight million population in six years. A million more fled to North America, Australia, and New Zealand. Thousands died in horrific conditions on the Famine Ships.

County Down was less badly affected by the Great Famine than many other counties. There was a large exodus from the rural areas to the city of Belfast, part of which is in County Down. The population of Down in 1841, was 368,000. In 1851, this had been reduced by approximately eleven percent. **\*** 

# Medical Diseases by Cal Bivens

#### Cholera

An infectious disease with symptoms of headache, diarrhea, and severe, persistent vomiting. Muscular cramps commonly start in the extremeties and involve the calves of the legs; later even arms, hands, and feet and trunk. Unquenchable thirst and hiccoughs sometimes develop. The mind is usually clear until shortly prior to death when coma develops. This stage lasts for a few hours or 1–2 days (the stage of collapse).

#### **Consumption or Tuberculosis**

An infectious disease usually acquired from contact with an infected person, infected cow, or by drinking infected milk. The disease may exist for a while in an arrested or inactive state.

Symptoms: fatigue, weight loss, and cough. With a rise in temperature in the afternoon and evening and night sweats, the victim begins to cough up thick and sometimes blood streaked sputum, as well as frothy bright red blood. As the disease advances the victim becomes weak and emaciated and may have chest pains causing dyspnea.

#### Diphtheria

A fever producing disease that is infectious and contagious. The air passages become coated with a membrane formed by a fibrous inflammatory discharge or secretion.

#### **Dropsy or Edema**

An abnormal accumulation of serous fluid in the body as a result of heart disease (congestive heart failure), kidney disease (nephritis), cirrhosis of the liver, and other causes (excess sodium retention).

#### Malaria

A fever producing disease. It occurs in fits or attacks, each marked by chill followed by high fever and sweating. Various derangements of the digestive and nervous systems also occur. It is transferred to man by the bite of the anopheles mosquito.

#### Typhoid

An infectious disease introduced in infected water or milk supplies. Well water was sometimes contaminated through the soil by outhouses. Typhoid was common in early adult life and especially prevalent in fall and early winter.

#### **Smallpox**

Smallpox was more common during the colder seasons. The onset of this disease is abrupt. It produces a high fever until the third or fourth day when the temperature drops sharply. Lesions erupt on the face and extremeties and to a lesser extent on the trunk. These form scabs which fall off at the end of the third or fourth week. Recovery in those days was doubtful.

#### Dysentery

A disease attended with inflammation of the large intestine, gripping abdominal pain, diarrhea with passage of mucous or blood, persistent desire to empty the bowel or bladder, with involuntary, ineffectual straining efforts. In the malignant form the symptoms are very pronounced, progress is rapid, and it is usually fatal.

#### Whooping cough

In its early stages the symptoms suggest a common cold; slight fever, sneezing, rhinitis, dry cough, irritability and loss of appetite. After two weeks the cough is more violent and consists of short coughs followed by long drawn inspiration (inhalation) during which the whoop is heard. The face becomes cyanotic (blue) and assumes the expression of worry or terror. Vomiting is common; the cough is precipitated by eating or drinking.

#### **Scarlet fever**

Scarlet fever, an acute, contagious disease, is characterized by inflammation of the narrow passage of the mouth to the pharynx and a scarlet rash.

Note: All the above from Merck's Medical Manual.

#### Phthisis

Pulmonary consumption; It is known by emaciation, debility, cough, hectic fever, and purulent expectoration; the disease of the lung now known as Tuberculosis.

Note: The above is taken from the Antiquus Morbus: A glossary of Archaic Medical Terms, Diseases, and Causes of Death.

# **Remedies and Treatments**

In the 1800s tonics, medicine, and home concoctions were abundant. Sparsely settled communities and isolated cabins led people to depend upon self-medication.

Many of the cures were plant-based. Many plants were known by experience to be useful in alleviating certain symptoms; for example, the use of willow bark for relieving pain. Much use was made of lemon.

Medical books containing recipes for plant cures as well as others were very popular because doctors were not readily available.

To stop a nosebleed a child was given a wad of paper and told to chew hard. The motion of the jaws was believed to stop the flow of blood.

Vomiting was simple to cure with kitchen ingredients. Black pepper, table salt, vinegar and hot water were mixed and taken every 5 to 10 minutes.

For sickness in general, beef tea seasoned with salt, pepper, and mace or nutmeg was highly recommended. Raw beef was used as a cure for diarrhea.

Other home remedies included: Onion poultices for fever; turpentine and lard for chest colds (a method used on me as a baby according to my mother) applied to the chest, back, and bottoms of the feet; black silk tied around the neck to prevent the croup; and Denver Mud—a mint smelling, puttylike substance—applied to a sliver or a sore.

Clay used to make red brick was used to try and cure tumors and rheumatism. Calomel and castor oil were used as purgatives; paragoric, laudanum, and morphine for pain; and essence of peppermint for digestive problems.

In the 1840s and 1850s, anti-fever pills made from Peruvian bark (quinine) were a recently developed treatment for fever and ague.—*Cal Bivens* 

Note: From my US history text book and various sources; my mother remembered some of them from her childhood.

#### From the 1917 Manual of Military Training

In case of sore or blistered feet, considerable relief could be obtained by rubbing them with tallow from a lighted candle and a little whiskey or alcohol in some other form, and putting socks on at once.

It was recommended that blisters be pricked and the water let out, but the skin not be removed. An adhesive plaster on top of the blister was suggested to prevent the skin from being pulled off. *®* 

## Some Family War Veterans

#### **Abraham Pense**

Note: Mr. Pense was a Crabtree neighbor and probably very close friend in Nebraska and South Dakota.

- August 15, 1862 to June 29, 1865; 2y, 10m, 14d.
- Pvt. Co B 34th Iowa Infantry.
- Co. K Veteran Reserve Corps.
- Darnall, Keya Paha Co., Nebraska.
- Disabilities—Rupture (27 yrs) Brights (?) 25 yrs.
- Dyspepsy & liver complaint (27 yrs.).
- Invalid pension app: Feb. 24, 1888, NE: granted.
- Widow pension app. (Sarah E.): Dec. 1912; Nebraska; granted.

#### **George M. Shattuck**

- January 3, 1864 to October 15, 1865; 1y, 9m, 12d.
- Corp 9th Illinois Cav.; Co. E 13 US Cav.
- Marlbank, Keya Paha County, Nebraska.
- No disabilities listed in 1890 Veterans census.
- Invalid pension app: Nov. 4, 1890; filed from NE.
- Widow pension app (Mary): Dec. 22, 1905.

#### **James Beecham**

- Son of Amy Crabtree and Thomas Beecham and cousin of John L. Crabtree.
- Private in Co. A 52d Illinois Infantry.
- From Virgil township, Kane Co.
- Invalid pension app: Mar. 21, 1884; Iowa; granted.
- No widow pension app. mentioned.

### Arnold B. Wallace

- Co. A, 8th Illinois Cavalry.
- Invalid pension app: June 26, 1882, Iowa granted.
- Widow pension app: Feb. 7, 1888, Iowa; granted.

### David H. Fillmore

- Co. A 8th Illinois Cavalry.
- Invalid pension app: Oct. 15, 1884: granted.
- Widow pension app. (Anna): Nov. 1, 1915: granted.

#### **James Crabtree**

- · Co. A 10th Michigan Cavalry.
- 1890 vets census: Howard City, Reynolds Twp., Montcalm Co., MI
- Disabilities: sunstroke, blind.
- Remarks: "served Mexican War".
- Invalid pension app: Feb. 21, 1873: granted.
- Widow pension app. (Mary L.): Feb. 13, 1892; granted: Michigan.
- —Cal Bivens 🛞