“Because of the fine balance demanded by nature, no evil ever befalls the race without bringing some good. We in the medical profession had to put our shoulder to the wheel of life in an effort to restore and reconstruct the human wrecks left by the First World War.”

—Fred H. Albee, MD (1876-1945)
In 1916 United States President Woodrow Wilson, campaigning under the slogan “He Kept Us Out of War,” was re-elected by a close vote. And at that time Surgeon General William C. Gorgas, anticipating America’s entry into the war despite Wilson’s efforts, advised the Congressional military affairs committees about the urgent need to reorganize and expand the U.S. Medical Corps.

During the following year, Wilson realized that his efforts for peace with the Central Powers (Germany and Austria-Hungary) were futile, and on April 2, 1917 he asked Congress for a declaration of war. Four days later the Senate and House of Representatives passed a war resolution by large majorities.

Later that year, Colonia, New Jersey resident and well-known orthopedic surgeon, Fred Houdlett Albee, MD, was named the first civilian director of a proposed United States Army Hospital. During his childhood in Alna, Maine, his grandfather taught him fruit-tree grafting, a skill which Albee credits for his later work in the development of bone-grafting operations. Albee graduated from Bowdoin College and Harvard Medical School and practiced and taught orthopedic surgery in New York City hospitals. Later he and his wife, Louella Berry Albee, purchased the Cannon property in Colonia which was close to the Pennsylvania Railroad mainline for convenient commuting to the city.

Albee began a nation-wide search for a suitable location for the new veterans’ hospital. At that time there were approximately 140 Army hospitals located throughout the United States. With 9,530 beds available they were equipped to handle minor medical problems that would arise during peace time but were unprepared to treat the thousands of wounded American soldiers who would be returning from the trenches of France. Albee credited Gorgas for his foresight in seeing the broad picture of the realities of war and described him as “as a man of strong courage and wisdom.”

A Chance Meeting

Quite by chance at this time Albee met his neighbor, Charles D. Freeman, on a train to New York City. A member of the New York Cotton Exchange, Freeman also owned an extensive estate on Dover Road in Colonia. When Albee told him that he was heading to Indianapolis to inspect a possible hospital site, Freeman immediately objected.

“But why Indianapolis? A hospital is needed here to help the wounded boys as soon as they land.”

“But,” protested Albee, “there isn’t any hospital here.”

“Build one. Let them take my land and home, if they haven’t anything better. I will give you power of attorney over my estate to use as you see fit for such a purpose.”

The next day Albee found that his trip to Indiana was in error. He proposed the Freeman estate to Gorgas who advised him to make a formal application for a hospital, which was at first identified as
“Army Reconstruction Hospital No. 3.” Although applications for US Hospitals No. 1 in Washington, DC and No. 2 in Boston had already been submitted, these hospitals were not built during the war. “The seeds of their inspiration had fallen on the stony soil of local objection, red tape, and lack of initiative.”

On June 7, 1917, Albee mailed his application for the Colonia hospital to Colonel H. P. Birmingham of the War Department and boarded a train to Canada to inspect veterans’ hospitals in Toronto and Montreal. When he returned, Albee wrote to Birmingham to explain that many of the Canadian veterans’ hospital problems were caused by unpreparedness for the overwhelming wartime emergency.

Albee suggested the establishment of a medical and surgical “clearing house” hospital at the ports of entry in New York City and Hoboken, New Jersey, for the returning wounded doughboys. In this way the various cases could be quickly sorted out on the basis of their medical requirements and promptly sent to the proper military hospitals for their care. Albee also stressed the need for an orthopedic hospital since large numbers of the returning wounded would be suffering from orthopedic injuries as had been already classified by the Canadian government:

“A. Derangements and disabilities of joints, simple and grave, including ankylosis. B. Deformities and disabilities of feet, such as hallus rigidus, hallus valgus, hammer toes, metatarsalgia, painful heels, flat and claw feet. C. Malunited and ununited fractures. D. Injuries to ligaments, muscles, and tendons. E. Cases requiring tendon transplantation or other measures for irreparable destruction. F. Nerve injuries complicated by fracture or stiffness of joint. G. Certain complicated gunshot injuries to joints. H. Cases requiring surgical appliances.”

Not only did Albee bring his broad medical and organizational skills to the planning and operation of the Colonia hospital, he also brought firsthand knowledge of the functioning of veterans’ hospitals of Europe. In the spring of 1914 he was invited to open the German Orthopedic Surgical Congress in Berlin. Later he realized that the invitation which had seemed such an honor at first proved to be otherwise. The German doctors were especially interested in his invention of the “bone mill,” a power-driven cutting tool with many applications in orthopedic surgery, later known as the Albee Bone Mill. They knew that such an instrument would be invaluable for rapidly returning
hospitalized soldiers to the battlefields of the impending conflict.

In 1916 Albee declined another German invitation to demonstrate the bone mill in various military hospitals. However, he and Louella sailed to France that year for a stay at the American-British hospital at Ris-Orangis outside Paris where Mrs. Albee served as a Red Cross nurse.

Here the couple saw firsthand the horrors of the British and French wounded as they were brought from the war zones, first by stretcher bearers to casualty clearing stations, and finally by ambulance trains to the base hospital which handled their particular type of injury. These experiences proved invaluable as Albee confronted the operation of the new hospital at Colonia.

**The Formal Acceptance**

Although the US military departments placed limitations on and objections to the proposed hospital, Freeman received formal acceptance of his offer of land within two weeks from Secretary of War Newton D. Baker. Since Freeman was unable to fight for his country because of his age, he was especially anxious to have his land used for the veterans' hospital as an expression of service to his country.

Congress appropriated funds to build the rehabilitation center in Colonia, now named US General Hospital No. 3. Originally planned for 500 beds, the War Department later decided that a larger hospital with 2,000 beds would be more economical.

Albee wrote in his autobiography that "No surgeon in the United States Army ever had the authority that Surgeon General Gorgas conferred upon me at that time. So far as I know, I was the only civilian surgeon, during the First World War, who stepped into the army and organized a general army hospital. "Given carte blanche by the Secretary of War, Surgeon General Gorgas, Colonel Russell, and the Red Cross, through Colonel J. R. Kean, I went to work to appoint a staff and drew up plans for the hospital in which I considered not only facilities for the medical and surgical program, but also provisions for psychological rehabilitation of the wounded."7

The Quartermaster’s Department arranged for the plans to be finalized by the architectural firm, Crow, Lewis, and Wickenhoeffer, who donated its services. Albee worked with the company and made numerous recommendations. He especially requested an operating pavilion which housed a filtering plant to sterilize all water used in the operating rooms, a general laboratory, and pathological and bacterial departments.

**Construction Begins**

In February of 1918, the actual building of the hospital began. Two months later the storehouses, garages and eighteen one-story wards were completed and the commanding officer, quartermaster and medical property officers were at their posts. The following few months saw the arrival of enlisted men to be stationed at the hospital as well as medical, surgical and nursing personnel.

On July 5, 1918 the first patient, Private Charles Blalock, was admitted from Company D, 14th Machine Gun Battalion. He suffered from tuberculosis of the spine. The first contingent from overseas, 17 wounded men from the
Battle of Chateau Thierry in France arrived on August first. “As the wounded settled down in their spotless cots, the ugly memories of death, blood, vermin, infested trenches, mud, rain and chilly wintry winds began to fade from their minds, and peace crept into their souls once more.”

The hospital grew to 110 buildings located on 200 acres. There were about 2,000 beds, a 50 x 100 foot swimming pool, a central heating plant which burned 65 tons of coal a day, five kitchens and mess halls, a laundry plant, fire department and a telephone network with 80 extensions. Religious services were held in a building shared by the Young Men’s Christian Association until a separate chapel was built in early 1919.

And, of course, there were extensive medical services, including orthopedics, general surgery, neurology, anesthesia, artificial limb manufacturing, and the eye, ear, nose, and throat department. The construction of General Hospital No. 3 cost three and a half million dollars and was believed at the time to be the most complete hospital in the country with the largest orthopedic, military surgical service.

Albee and Gorgas agreed that it was vital for the returning veterans to receive more than treatment for their wounds. They must be re-educated for a successful return to civilian life and receive training in areas where they could find useful employment. “These boys returning from the Front, in other words, needed much more than medical care as we had known it in the past. They had to be taught how to walk on artificial legs, how to work with artificial arms, how to talk and eat with manufactured jaws.”

As the first patients arrived from overseas, often with gaping, infected wounds, Albee introduced the Carrel-Dakin solu-
tion which he had observed in use in the European veterans’ hospitals to prevent the fast-spreading infections common with such injuries. This neutral solution of sodium hypochlorite and boric acid developed by a French doctor and an English chemist during the war is still in use today.

In the 15 months of the hospital’s existence, more than 6,000 wounded Yanks arrived at Colonia with the majority able to return to active civilian life. Albee remembered individual patients with warmth and affection. Les of the Red Star Division of the 127th Infantry who had been sent to Paris in an old canal boat on the Marne River with a fractured, infected shoulder; sixteen-year-old Tommy who faked his age at enlistment and had been blown out of his tank; Pat of the Engineers Corps whose knee injuries took five operations to allow him to walk again; Allen, a young Southerner, who lost both hands but overcame his handicap by sheer willpower, and 18-year-old Sunny who lost both legs just below the hips and later recovered to run a successful automobile agency in New Jersey. Albee marveled at the courage and humor among his seriously wounded patients and took great pride in their rehabilitation.

Another vital aspect of Albee’s work was the restoration of the veterans’ mental health, conditions often described as “shell shock” at the time. He had observed horrifying mental illnesses among returning soldiers while visiting the European hospitals as well as observing men on the home front who were afraid of the changes the war might make in their lives as well as their fear of killing other human beings.

The Curative Workshop
Albee initiated the Curative Workshop at the hospital where patients would be paid to work under actual industrial conditions and would feel a true sense of accomplishment. Many veterans also helped to make their own artificial arms and legs, familiarly known as “wings” and “peggies” (peglegs) at the workshop, activities which strengthened their resolve to move on on their own again. Major Franklin W. Johnson, on leave from Teacher’s College at Columbia University, was a fortunate choice to lead the hospital’s educational department.
Since the patients’ backgrounds ranged from college degrees to illiteracy, Johnson offered a wide range of subjects to be taught at the Curative Workshop by many talented instructors. These skills included elementary school subjects, left-handed penmanship, salesmanship, shop mechanics, advertising and one-handed typing taught by a one-armed superintendent of schools from Pennsylvania. A newspaper, *Over Here*, became an integral part of the educational program with a circulation of 3,000 copies. It was printed on a linotype machine in the hospital print shop. Ballroom dancing or “Amputation Dances” as they were known at Colonia became a popular activity to help patients acquire balance and social skills.

Albee named Major Emil Altman as Chief of the Neuro-psychiatric Service and described him as “a sturdy believer in the application of common sense.” The Major astounded the hospital Commandant, Colonel A. P. Upshur, by telling him that he wanted to burn down the guardhouse because it was filthy and “no man in it could be expected to keep his self-respect.”

Altman explained that young soldiers stationed at the hospital were often consigned to the detention center for rowdy behavior on an evening’s pass by second lieutenants showing their newly acquired importance. Often far from home for the first time these inexperienced boys could not be expected to act like West Point graduates. Altman requested that a clean, sunny ward be set aside for the new prison. Upshur reluctantly agreed although he doubted that the idea would work. No one broke jail at the Colonia hospital again.

The physical therapy building included 110 barracks-type buildings with 18 wards, 5 mess halls with kitchens, a central heating plant, telephone exchange, swimming pool, libraries and a newspaper “Over Here.”
The Mercy Committee

Louella Albee and other local women volunteered in many capacities at the hospital. In 1915 they had helped organize the Mercy Committee of New Jersey which concentrated on shipping supplies to allies overseas. When the Colonia Hospital opened, the committee furnished 170 beds for the wards. Mrs. Charles D. Freeman served as president. The Mercy Committee also operated a motor service, handled flower deliveries, assisted in the wards, and contributed $7,000 for a baseball field and outdoor track at the hospital. According to Mrs. Albee, the committee’s most important contribution was the establishment of The Mercy House. A cottage on the Freeman estate was furnished as a guest retreat for visiting relatives of the patients with meals served at a nominal cost.

A Tragic Fire

A fire broke out one night in the officers’ quarters causing many injuries and two deaths. Witnesses could not agree on where the fire had started. Inspectors later discovered that the “fireproof” material sold to the Government was indeed flammable, and a fireplace built by a well-intentioned enlisted man had been constructed around a wooden beam. Albee wondered “if the contractor’s enjoyment of his profits was ever dimmed by the memory of those charred bodies.”

Welcome Home Day

On ‘Welcome Home Day’ at Perth Amboy (June 30, 1919), the ‘Victory All-Star Vaudeville—8 Big Feature Acts’ from U. S. General Hospital No. 3 packed the Majestic Theater both afternoon and evening. It was managed by one of the patients who had been an actor in civil life.

The number which will be remembered by those who saw it was the exhibition drill. It opened with a bugle call by Corporal Jimmie Palmquist, in a wheelchair. Then, as though from a great distance, could be heard the even tread of approaching troops. The ‘one, two, three, four’ grew louder and louder. When the men finally marched onto the stage, every one of the sixteen was on crutches.

They drilled around the stage, doing squads right and left, circling, squatting, and never a man out of step. Finally they went through the manual of arms, the right crutch serving as a gun. The crutches descended to the floor as though they were one instead of sixteen; and the manual was executed with snap and precision.

The audience cheered again and again. The men retired from the stage for a few minutes, and when they reappeared the audience received a distinct shock. Each man was walking on two legs—the crutches had disappeared. During the interim, the men had donned their new artificial legs, and proceeded to show their skill in using them. This time they went through the same formations, and did almost as quickly and well as though they had never undergone an amputation.

The Closing

In the spring of 1919, months after the Armistice was declared on November 11, 1918, there were almost 2,000 patients at Colonia. Albee was astounded to receive an order from the Surgeon General’s office ordering him to dismiss half of his professional staff. Since there were still many seriously wounded veterans needing con-
stant care, Albee went immediately to the Commandant to question such an order. After much persuasion the Commandant agreed to write a letter to Washington.

Albee protested that a letter would not carry enough weight and insisted that the Commandant go to Washington in person to intervene. The doctor explained that many patients had been sent to Colonia for more extensive treatment than was offered in other veterans' hospitals.

The Colonel did travel to Washington but returned the next day to tell Albee that he had tried but the hospital would have to close. Albee still disagreed and caught a train to Washington himself. After much persuasion and explanation from the doctor, a commanding officer finally allowed Albee to keep the hospital open with the understanding that he would downsize the staff as much as possible.

The final directive to permanently close US Hospital No. 3 came in October 1919, and Albee was now able to follow the order. “Those sixteen months showed me, as nothing else before or since, the magnanimity of human nature under terrific stress; the remarkable possibilities of

reconstruction surgery in warfare with automatic power-driven tools...the curative power of well-selected and directed manual and mental work in restoring function.”

Albee also made some thought-provoking comments in his autobiography about the nature of war itself and how advances in medical science help to prolong conflict. He believed that Germany would have been defeated more rapidly if its doctors had been less able to rehabilitate the wounded soldiers and return them to the battlefields.

Dr. Fred H. Albee stands as a stalwart pioneer in the field of orthopedic surgery, and his contributions to the healing of many World War One veterans are countless. US Hospital No. 3 may have long disappeared from the Colonia, New Jersey landscape, but its importance as a place of medical and mental rehabilitation for many who fought in the war that was supposed to end all wars cannot ever be forgotten.
About the Author

Basking Ridge resident Virginia Bergen Troeger, a retired public school library media specialist, graduated from Woodbridge High School, Goucher College and Kean University of New Jersey. She is the author of two photohistories of Berkeley Heights, NJ, (Arcadia Publishing Co., 1996 and 2005.) She has also written two photohistories of Woodbridge, NJ, 1997 and 1999 and Woodbridge, New Jersey’s Oldest Township, 2002, (all Arcadia Publishing ) with co-author, the late Robert J. McEwen. Mrs. Troeger has also published a historical fiction book for children in grades 3—5, Secret Along the St. Mary’s set in 17th century Maryland (Silver Moon Press, 2003) and articles on children’s literature in educational and library journals.

Sources

2. Colonia is one of the municipalities that comprise Woodbridge Township in Middlesex County.