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1 1/2 Years in Death Valley

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1 1/2 Years in Death Valley

Abstract
This paper is an exploration into the historian as an independent source of history. Homer T. Rosenberger was an amateur historian in Pennsylvania during the better part of the 20th century. His works on Pennsylvania history, early American history, and contemporary historical events are valuable, if unknown, resources in those fields. However, Rosenberger becomes his own source of history when his battle with cancer is examined in the context of the American 1950's. Rosenberger's reactions to his plight help illustrate the mindset American brought to cancer in the 1950's and the transition in American society since then.

Keywords
Cancer, 1950s, health history, Rosenberger, cancer treatment

Disciplines
Cultural History | History | History of Science, Technology, and Medicine | Social History

Comments
This paper was written for HIST 300: Historical Methods, Fall 2013.
The study of the Homer T Rosenberger papers at Gettysburg College provides a case study in the world of cancer treatment in the 1950’s. The ways in which cancer was treated medically and socially are very different from today. The stigma of cancer laid heavily on those suffering with it in the early twentieth century.
One aspect of the study of history that tends to be neglected is the historian himself. Except for some of the most famous historians, Herodotus and Plutarch perhaps, very little attention is paid to the historian writing what we study.\(^1\) After all, it is hard enough keeping track of the countless names, locations, titles, and historical jargon that inevitable clutters historical works. Adding the author’s name and background seems frivolous, unless the author is a popular historian whose bias is well known and must be considered. Otherwise, why bother?

But to overlook the historian is to overlook another rich facet of history. The historian himself is a window into the past, and provides context for the work he presents. Why did this man pursue the study of history? What influenced his choice of sources? How did they define their roles as historians? Historians must not only study the history presented to them, but the presenter as well. The motives of historians color the history they present. So too must it be with the Rosenberger archives.

Homer Rosenberger is clearly not a famous man outside of Pennsylvania historical circles. Yet, it is in understanding this man that historians can better interpret the documents he left us. What is, for this class, common knowledge, is that Homer Rosenberger was a civil engineer and an amateur historian from Pennsylvania. He lived from 1908 to 1982 and over the course of his lifetime, acquired many documents pertaining to the history of Pennsylvania as well as creating some historical documents of his own. His collection, which was later acquired by Gettysburg College, consists of forty heavy boxes of primary and secondary materials.

I choose to delve into the last box of the Homer Rosenberger collection, box #40. My box contains a large number of hefty files concerning Mr. Rosenberger’s public service work. These

\(^1\) Unless he is alive and doing something scandalous, like plagiarizing. Then people will know him.
are excellent materials for crafting a history of post-World War II federal bureaucracy. There is a sizable supply of documents about the creation of the Pennsylvania Department of Public Roads, of which Rosenberger was a founding member. He served as an educator of new engineers, a theme of his career as a public servant. He includes a large collection of class photos of civil engineers and a vast assortment of correspondences concerning the daily functions of the Pennsylvania bureaucracy. Rosenberger’s files on the Department of Public Roads would be indispensable in tracing the history of that Department. Financial information abounds in these files and would serve well as a case study of Federal management and spending on a local level.

There are also more personal files, though fewer in number, pertaining to his social, academic and business life. He preserved a number of travel records on trip for his work at the Federal Bureau of Prisons and the Pennsylvania Department of Public Roads, including brochures and personal notes written on hotel stationary. He appears to have collected memorabilia from other regional bureaucratic offices on these trips, including a poem written by a contemporary in Oregon about a failed building project that flooded some private properties with sand. He also included a number of copies of his church’s newsletter, Saint Luke’s United Methodist Church. One file contains nothing more than a ticket to commencement, an old Albright College bulletin, and a copy of his alma mater’s 1955 reunion publication, in which he is in a total of one picture. As a final note, there is a typed sheet from New Year’s Eve, 1963 in Nigeria where, on a trip for work, Rosenberger summarizes his family’s successes and

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2 These engineers would have most likely been his students. Homer Rosenberger served as an educator and trainer of new staff.
3 And you can barely even tell it is him!
challenges of the past year, noting how blessed they all are.⁴ Such documentation would serve archivists well in understanding the personal life of Homer Rosenberger.

But it was the file titled “1 ½ Years in Death Valley” that drew my attention. Nestled next to a file titled “Grand Canyon” and another titled “Experienced Traveler,” I naturally assumed that Mr. Rosenberger had spent some time across the country, visiting Death Valley and other natural wonders of the West.⁵ Perhaps it was for business, travelling to Death Valley to learn from civil engineers at the Yosemite National Park. Or perhaps he was visiting family and friends who had moved across the country. So imagine my surprise when I opened the file only to find doctor appointment cards, personal notes, and health pamphlets.

On Wednesday, December 20, 1950, Mr. Rosenberger was diagnosed with oral cancer.⁶ He was forty-two years old. Specifically, a tumor developed on his tongue, negatively affecting his speech. He had been nursing a sore on his tongue for about two months, since October of that year.⁷ The folder contains much valuable information, including a plethora of doctor’s appointment cards, useful in crafting a chronology of treatment, as well as official correspondence with colleagues in the civil service concerning his condition.

But the most valuable documents are the scrawled notes written on the backs of envelopes and torn strips of paper. Titles like “Adversity” stand out and the raw emotion of a suffering man can be discerned in the text. Naturally, there is something of a challenge in reading

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⁴ Something I would have liked to look into had I discovered it sooner.

⁵ It should be noted that Rosenberger DID travel extensively and exhaustively across the country in his line of work. For example, Rosenberger was preparing to travel to Atlanta, Georgia; Montgomery, Alabama; and Tallahassee, Florida before the events of December 1950. His autobiography also contains several chapters of his work abroad, including trips to Nigeria and Venezuela.

⁶ However, there is a second note contradicting this date, stating that “I did not know I had a tumor until December 26, 1950.” Rosenberger explains in chapter 12 of his autobiography that the tumor was identified on the 20th, but was not determined to be malignant until the 26th.

such documents, especially when time has not been kind to the graphite he wrote in. However, it is in the study of these personal notes of a deteriorating man that the historian can better understand Rosenberger’s collection and what it can teach us.

I personally found these scribblings on scraps to be the most valuable documents in box #40. These were written at times when Rosenberger feared for his life. They each represent a moment of upheaval in his life that he thought best to write down and create a record. For a man in his early forties, this is a serious mid-life crisis, where he does not know if he will live long enough to overcome it. Consider how such an event would have impacted his thinking. A modest historian and collector, Rosenberger is devastated by his diagnosis. His books are unfinished, his collection incomplete, and his legacy insecure. Caught up in a whirlwind of treatments and operations, Rosenberger does what he does best: records what happens.

The first note is “Adversity,” written shortly after Rosenberger’s diagnosis. In “Adversity,” we see a man rallying himself for the coming battles.

It is possible for the world to naturally crash about any one of us in the space of a few days. Each of us must be strong in spirit and meet these emergencies with confidence and intelligence when they confront us. If we do so they may not be nearly as serious as we at first think, & by nature of our spirit, candor & use of intelligence may turn out reasonably well. In fact they may actually develop in us desirable qualities which we previously did not possess, or further develop our best qualities.

This note was written on December 26, 1950 in the hospital bed at Georgetown University Hospital, the night before his first operation. It was preserved in his hospital nightstand during his recovery. In retrospect, he considers it an optimistic note, full of the bluster and high

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8 His tendency to write in the margins and double back on the page surely did not help.
9 The Papers of Homer T. Rosenberger, Box 40, Gettysburg Special Collections.
10 Homer T. Rosenberger, Adventures and Philosophy of a Pennsylvania Dutchman, 460.
principles needed to see him through the trials of the coming days.\textsuperscript{11} He tries to face his newfound struggles head on, so that they may be both less daunting and more constructive than they truly are.

Later on, in a wide variety of notes, Rosenberger describes some of the treatment process, though he goes into more depth in his autobiography. He describes his fears of radiation overdose, counting down the seconds on his fingers while exposed to the radiation machine. He recalls the struggles with the feeding tube and the drainage tube, as his mouth could no longer handle regular food and seemed to be secreting pus. A young nurse nearly drowned him one night trying to put his feeding tube in properly.\textsuperscript{12} He describes days and nights spent with his wife at his bedside, periods that only she can remember.

Concerning his treatment, it should be noted that Rosenberger underwent the best treatments available in the 1950’s. He underwent two operations\textsuperscript{13} and a large number of radiation treatments, which appears to have collectively cost him a third of his tongue and his hair.\textsuperscript{14} Of course, thanks to the advance of science, the best available methods of the 1950’s look downright archaic in the 2010’s. To see how archaic, I sat down with Professor Steven James, MS, PhD, Associate Professor of Biology,\textsuperscript{15} in his office at Gettysburg College on October 2, 2013. According to Professor James, Rosenberger received a dose of radiation “in line with what

\textsuperscript{11} Homer T. Rosenberger, \textit{Adventures and Philosophy of a Pennsylvania Dutchman}, 460.
\textsuperscript{12} Homer T. Rosenberger, \textit{Adventures and Philosophy of a Pennsylvania Dutchman}, 461.
\textsuperscript{13} Only the first operation is described in any detail at all. Rosenberger seems to have neglected his note-taking by the second operation, which occurred April, 1952. He also passes over it in his autobiography. The only note I found related to this second operation is a nearly illegible note concerning how to collect and publish his unfinished works should he die. It appears that by the second operation, Rosenberger had met his “emergencies with confidence and intelligence” only to discover that they \textit{were} as serious as he first thought.
\textsuperscript{14} Attached to an April 28, 1951 doctor’s note concerning baldness is a personal note about Rosenberger’s distaste for losing his hair, despite knowing that “many a bald man looks very distinguished.” However, I have no photographic evidence of this loss. There are photographs years later showing him with hair, but no photos from that period of his life.
\textsuperscript{15} Professor James specializes in Genetic and Molecular Damage and had served as the Radiation Safety Officer of Gettysburg College for twenty years.
we use today.” According to his autobiography, Rosenberger received 37 radiation treatments over 42 days, with a dose of about 6,000 roentgens (approximately 5,000 rems)\textsuperscript{16} each time.\textsuperscript{17} While the dose of radiation is consistent with what is used today, the frequency of administrating the radiation is unusually high. “One would typically do a week on, then on a week off and do several week cycles like that. The fear is, in the short term, it’s the damage to normal tissue and in the long term it is the danger of reintroducing cancer,” according to Professor James. However, such a frequency of treatment appears to have only resulted in burns on his tongue, which should be considered standard for radiation therapy today, rather than a recurrence of cancer or radiation poisoning.\textsuperscript{18} His experience serves to illustrate both how far cancer treatment has come and how little has changed.

But what must be the most important document I uncovered in this file is the July 13, 1951 National Archives presentation note. In it, Rosenberger runs us through the gamut of cancer related troubles on his road to recovery. Six months after his return home from the hospital, he was asked to speak at a meeting of the Pennsylvania Historical Association. Here is an annotated version of his account of his presentation:

I had founded the organization and most of those attending on that evening had been my friends for at least several yrs. How many knew of the malady I did not know, but I knew that at least six were fully aware & that a few others were partially aware of it. I made no mention at the meeting of having any speech difficulty or illness. I got up to speak ... But by the time I had proceeded for 5 min. I began to wonder if the talk was acceptable (because of pronunciation of words.) As I continued I wondered ??? how poor my speech

\textsuperscript{16} It should be noted that the scientific community no longer uses roentgen as a unit of radiation. Today, radiation is measured in rems. There is no simple conversion factor between roentgens and rems. However, Professor James has worked with these figures and, for the purposes of this paper, states that 6000 roentgens equals 5000 rems.\textsuperscript{17} Homer T. Rosenberger, \textit{Adventures and Philosophy of a Pennsylvania Dutchman,} 462.\textsuperscript{18} Radiation poisoning and death by radiation should be briefly explained here. The danger of radiation poisoning is in the amount of rems and the coverage. In other words, 10,000 rems is not fatal when administered locally to the thyroid, but 600 rems is fatal when administered in equal measure to every part of the body. For more information see, “Radiation, how much is considered safe for humans?” MIT News, last modified January 5, 1994, accessed October 2, 2013 \url{http://web.mit.edu/newsoffice/1994/safe-0105.html}.\textsuperscript{18}
(pronunciation) was and I wondered if I was imposing on the group by speaking to them. I had long previously learned to read an audience rather well but could not tell now what the audience was thinking. The meeting seemed to become very formal... Perhaps they were being polite and hiding their surprise, or even disgust. These thoughts disturbed me quite a bit but I kept on with the talk…

I spoke for almost a hr. & then sat down. The response was enthusiastic. In the informal discussion following I thought those attending had forgotten whatever speech defect they had observed in me & were absorbed in the sub. matter of the evg & in other things they were interested in at the moment. I felt I had won an important struggle with myself.

Geo Korson, then Ed in Chief of the Am Red Cross, and others in attendance told me at the close of the meeting that the presentation was excellent. & made no mention (in facial expressions or in words) of a speech defect. They were very encouraging. It helped!

This was Rosenberger’s first public speaking event since his surgeries, and his challenges were daunting. During his surgeries, he had his bottom row of teeth completely removed and he had been working with a replacement denture for several weeks at this point. Throughout his presentation, he was painfully aware of the slurs and quivers in his voice and pronunciation. Every little ‘s’ and ‘ch’ sound is a hurdle to be cleared. He removes some of his more amusing commentary, afraid to seem unprofessional. He begins to wonder if his friends in the historical society are patronizing him, trying to buoy his spirits, making it seem like old times. But his fears are unfounded. He holds himself up respectably, plowing through his presentation and engaging in the informal questions session afterwards. He declines to mention his condition to anyone and finds the outpouring of praise genuine and reassuring. As Rosenberger put it, “[i]t helped!”

His autobiography also covered this event, though in much less detail. Indeed, I found Homer Rosenberger’s autobiography somewhat bland when compared to his notes. For example, in his autobiography, he describes his original attempts to diagnose the soreness on his tongue in one paragraph, only vaguely hinting at his displeasure with the physicians who saw him. His notes are more interesting and scathing:
I never went back to Dr. Barbsdale19 & did not tell him of the radiation. He never contacted me. I saw him only the two times in his office. What type of man could he be, not even following up on a patient of his who he must have known had some susceptibility to cancer? MD’s of his type probably cause many persons to be carried to the cemetery long before their time is due to inexcusable carelessness ??? ignorance on the MD’s part…

He condemns his first doctor by name, accusing him of being unprofessional and negligent. He lashes out against “MD’s of his type” for killing countless patients through inexcusable neglect. But he later tempers his critique with a plan to help the medical profession weed out these “incompetents” through patient input, professional review, and education. None of this seems to have made the cut for his autobiography. He vaguely describes a new advanced clinic he visited, where the doctors were less than professional. Only in these notes do we see the depth of Rosenberger’s frustration with those caring for him. It appears that time and his successful recovery had tempered his rage against the infamous Dr. Barbsdale, whose name would have been lost to us were it not for this note.

Strangely, for such a serious and strenuous period in his life, Rosenberger is rather modest in his discussion of it. In his autobiography, the entire affair receives only ten pages, 457-466, making for a very short chapter 12.20 Considering that Rosenberger was in charge of training new recruits to the civil service and gave a great many presentations, and that he also gave presentations for a number of historical societies, he treats the subject of nearly losing his speech rather lightly. The autobiography is more helpful for facts about his treatment, and provides excellent context for all of the notes written during this time. But it lacks some of the passion, fear and frustration of the ad hoc notes he took on the scene.

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19 This is the best transcription of this doctor’s name I could manage.
20 For comparison, the following chapter, *Highways for All America*, runs for 26 pages, nearly three times as many.
But what is the underlying reason for neglecting this period of his life, where he had, at best, a 30% chance of recovery? In the beginning of the chapter, he informs the reader that this “is included in this chapter as a case study of ‘hope’ rather than as a gory recital of drab minutia.” It could be that modesty would not permit him to expand upon such a severe ordeal and ultimately aggrandize himself for surviving it. But, if he was concerned with modesty, we must ask why he had self-published his own autobiography? Instead, perhaps Rosenberger’s silence reflects a natural desire to avoid dredging up painful memories and his own looming mortality. Or, perhaps his silence says something deeper. Perhaps, he believed it was improper to discuss in any deep detail the particulars of his case. Rosenberger grew up in the early twentieth century. It might have been that he had learned to regard cancer as the AIDS disease of his time. According to him, he did not know that cancer was not contagious and had to be reassured twice that it was not, overcoming his fear of being a leper. Rosenberger may have internalized the cultural rule that cancer is not a proper topic for public discussion. It must be noted that Rosenberger lived during the Roosevelt administration, which, in cooperation with the press, went to incredible lengths to hide the president’s disability, a testament to the cultural norms Rosenberger would have experienced growing up. In my interview with Professor James, he affirmed the idea that there was, in his words, a stigma associated with cancer, stating that, “there was a societal and cultural prescription against discussing cancer. It was an unspeakable thing.” It is possible that Rosenberger was a product of this culture of masking physical ailments from

21 Homer T. Rosenberger, Adventures and Philosophy of a Pennsylvania Dutchman, 460.
22 A tendency he chooses to indulge in for the rest of the book oddly enough.
23 By AIDS disease, I mean to imply a disease that is socially unacceptable to contract, a disease that modern medicine has not caught up to, and that terrifies the public imagination. For more insight, see Mathew Algeo, The President Is a Sick Man: Wherein the Supposedly Virtuous Grover Cleveland Survives a Secret Surgery at Sea and Vilifies the Courageous Newspaperman Who Dared Expose the Truth, (Chicago: Chicago Review Press. 2011), 40.
25 Professor James also shared the story of his grandmother’s death from cancer and how the details of her condition were kept secret in the 1970’s.
public scrutiny, and that only his ingrained desire for historical accuracy led him to include any account of the event in his autobiography at all.

Reconstructing a man through his papers has been a joy for me. Though I struggled to interpret his script, this work helped turn Homer Rosenberger into a living person. I saw him at his weakest, his most desperate. I felt his joy at successful recovery at the National Archives and commiserated with his terror over his legacy ending as unpublished works moldering in his closet. This is the most invested I have ever been in a history project, because rather than crafting a thesis and searching far and wide for evidence, I found evidence and crafted a thesis from it. This was a tiring endeavor, but an enjoyable one.

By studying Dr. Homer Rosenberger’s struggle with cancer, the reader becomes more invested in his work. His personal suffering casts his collection in a new light. We see that his collection was more than an academic exercise or a symptom of hoarding. His collection is his legacy. Every photograph, every pamphlet, every odd scrap of paper represents the idea that, to Rosenberger, history is everywhere. Rosenberger sought to be remembered as a primary source of history, rather than a nameless participant. We would never know about the civil engineer who survived the depression, lived during WWII as a contentious objector, fought through debilitating oral cancer, corresponded with Hebert Hoover and Ulysses S. Grant 3rd, and was leader of the Pennsylvania Historical Association were it not for his collection. By preserving Pennsylvania history, with all its minutia, Rosenberger preserved himself. And preserved in Rosenberger are all the nuances of the period of history he lived through. By exploring the challenges of his life, we can make Homer T. Rosenberger an integral part of his collection.

26 Though many may contend this last point.