"My Life in Keg River" by Mary Percy Jackson

Edited by
JANICE DICKIN McGINNIS

INTRODUCTION

As she mentions in the following speech, Dr. Mary Percy Jackson came to northern Alberta in 1929 to take a position with the provincial department of health. After 18 months as District Medical Officer at Battle River Prairie (now Manning), she moved north to Keg River. She came to know the Metis people of that isolated area very well and has left us here an account of her observations as to the changes in the health of these people consequent with white expansion into their traditional areas.

This talk, given in Canada but published only in the privately circulated Journal of the Medical Women's Federation of Great Britain, constitutes the best written record she has provided of her findings and speculations on the topic of Metis health in the Keg River area. Its content is of great interest to historians of Canada, particularly those working in the areas of medicine and of native studies. It is offered here to make it accessible to such audiences. The only other statement we have on the topic by Dr. Percy Jackson is her convocation address to the University of Alberta, 20 November 1976, at which time she was given an Honorary Doctor of Laws. Her medical records have been destroyed.

Janice Dickin McGinnis, Faculty of General Studies, University of Calgary, Calgary, Alberta T2N 1N4.

Dr. Percy Jackson has had, throughout the years and despite her isolation from large centres of population, an extensive secondary career as a public speaker. She has been quoted regarding this particular talk as follows:

It seems my address to the Federation of Medical Women, which held its 1955 meeting jointly with the British and Canadian Medical Associations in Toronto, made me well known. The audience was surprised that after practicing in isolation from a farmhouse kitchen for a quarter century, I should have anything sensible to say about medicine. But I always believed that a doctor who didn't keep up to date had no right to practice; it is too dangerous.

I seemed to have made quite a hit with the psychiatrists—of all people! In my efforts to explain how well the old-time Metis was adapted to life in the North with all its hardships—including mosquitoes—I said that though he was bitten by mosquitoes and his skin itched, his mind didn't itch and therefore they didn't bother him as much!

The convention was really a wonderful experience. There were about three thousand doctors at the meetings. I listened to and also met some of England's and Scotland's most famous doctors—men who had been known to me by name for years. I also met hundreds of Canadian doctors.

Born in 1904 in Dudley, just outside Birmingham, England, Dr. Percy Jackson still lives alone in Keg River, Alberta. A volume of her letters home during her stint in Battle River Prairie will be available in early 1995 from the University of Toronto Press, under the title *Suitable for the Wilds: Letters from Northern Alberta, 1929-31*. The Hannah Institute for the History of Medicine helped fund this book. The Hannah Institute also made available to me in 1992 a travel grant which allowed me to visit Dr. Percy Jackson and persuade her to turn over to me the letters for publication. In 1994, the Institute made further money available to me to interview Dr. Percy Jackson. As of August 1994, the National Film Board started preliminary shooting for a documentary on Dr. Percy Jackson and the patients for whom she cared so much.

NOTES

1 Mary Percy Jackson, "My Life in Keg River," *Journal of the Medical Women's Federation (G. B.),* 38 (January 1956):40-56. This journal is still in publication as *Medical Women.*
4 Available from the Provincial Archives of Alberta, Acc. #94-149, 18-19 April 1994.
Although I was greatly honoured when I received Dr. Willett's letter asking me to speak at this annual dinner, I decided that it was quite unthinkable for me, who had been isolated in the bush for over a quarter of a century, to stand up and speak to a gathering of distinguished women doctors—the women who had really made a success of practising medicine.

I think the shock of the invitation threw me slightly off balance because, when I was called out to a maternity case just after reading the letter, I forgot to take an important part of my equipment, my knitting! The girl was a young Metis primipara with a large baby, and rather slow, so I had seventeen hours in the house with her, with little to do most of the time but sit and think and watch the snow drifting past the window. Your letter made me think back over my life at Keg River, remember the hundreds of hours I had spent like this in little log cabins, tents and teepees. It suddenly struck me that your invitation offered me a wonderful opportunity to talk about the Metis people—the half-breed Indians—who are my patients.

They are a people about whom most Canadians know little and care less, yet it was through their skills and endurance, as guides and hunters, canoe men and freighters, that Western Canada was opened up to white settlement. Their difficulty in adapting themselves to the white man's economy and the rapid increase in their numbers make them one of the great problems of Canada's northern areas.

When I came out from England 26 years ago, the Alberta Government sent me as District Medical Officer to the Battle River district, in the north part of the Peace River country in Northern Alberta. Eighteen months later I married an Englishman, Frank Jackson, and moved to his home still further north, at Keg River. Keg River was quite literally "off the map": the northern third of the Province used to be omitted from most maps of Alberta. The area cut off was nearly as large as England, Scotland and Wales but there wasn't much to put on a map: no towns, no roads, no railways: only the three great rivers, the Athabasca, the Peace and the Hay, flowing northwards, and half a dozen tiny settlements. In the whole 70,000 square miles or so that was left out, there were less than 7,000 people and 95% of them were nomad hunters and trappers: Indians and Metis, of the Cree, Beaver, and Slavee tribes. The Keg River area covered more than a thousand square miles but its population was less than 400, mostly Metis, with a handful of white farmers and ranchers.

The Dominion Government telegraph line, from Peace River to Fort Vermilion, was just being cut. It reached Keg River in 1930, shortly before I did, so Keg River was not as utterly cut off as it had been, but it
was pretty inaccessible. The nearest point on the railway, at Grimshaw, was about 150 miles away. The nearest road was at Battle River, 80 miles south. That’s where we used to keep our car. It sounds a bit ridiculous to have the garage 80 miles from the house but it was useless to have the car at Keg River; there were no roads. To reach the car we went on saddle-horses through forests and muskegs, fording the rivers. In summer we could also get out to civilization by boat up the Peace River but first there was a 40 mile wagon trip over a rough bush trail to reach the Peace and then the trip upstream took about three days to reach the nearest small town. In winter, once the swamps and muskegs were frozen solid, we could get out overland with horse-drawn sleighs or by dog-team. But much of the time, and always in spring or autumn, we were completely cut off from the outside world except for the telegraph line.

There had never been any doctor in Keg River and most of the Metis population had never had any contact with doctors. Their medical care had been given by their own “medicine man” and their drugs were the roots, bark and leaves of various local plants. The midwifery had been done by the old squaws. I didn’t set up in practice at Keg River. I just found myself struggling to cope with emergencies as they arose, without any help or much in the way of equipment or drugs and without being able to speak the Cree language which most of the inhabitants spoke. The nearest doctors were 80 miles south, at Battle River, and 125 miles north-east, at Fort Vermilion, but in those days they were inaccessible most of the time. Since the highway to Keg River was completed this spring, they can now be reached most of the time but mine could still be described as an unopposed practice!

It could also be described as a remarkably unprofitable one, for most of the Metis are chronically poverty-stricken and the Government does not pay for the care of Metis, as it does for Treaty Indians. But it has provided me with a life of considerable excitement and absorbing interest and an opportunity to make a long-continued study of my patients as individuals in their family settings, through generation after generation. The people marry very young, so I am not merely delivering my second generation of babies: I know and have treated four generations of many of the families and five generations of one family. I have been able to watch the changes that have occurred in their health and physique, their diets and their way of living, and their reactions to a rapidly changing environment and economy. It has been long enough for me to be able to appreciate the repeat in the family pattern and to understand why clinicians of an earlier generation attached so much importance to diathesis.

One morning in April 1931, my first spring at Keg River, an old man burst into our kitchen and gabbled an excited string of Cree to my hus-
band. Frank translated to me that “old man Bottle,” the oldest inhabitant, had suddenly gone crazy and was running amok in the village, terrifying the women. All the able-bodied men of the settlement were away on the spring hunt and only the women and children and four old men of over 80 were left in the village. It appeared to be up to me to do something about it, though they had already sent a messenger to the bush to fetch their medicine man.

Frank and I went over to the old man’s cabin and found him busy sharpening his heavy buffalo-knife. He was a thin old man, with thin white hair down to his shoulders and, even though I didn’t understand a word of the conversation, he was obviously insane. Frank persuaded him to sit down on his blanket on the floor and I gave him a shot of hyoscine. I examined him as well as I could and was enormously impressed by his muscular strength and his physical condition. His teeth were good and his eyes were perfect. His heart and chest sounded perfectly normal and his blood pressure was a rather surprising 120/80. In fact, I could find nothing wrong with him physically. We left him to sleep, watched cautiously from the doorway by the other three old men. As soon as he started to rouse, one of them rushed over to warn us. For several days we went back and forth administering food and sedatives but his mental condition was unchanged.

The problem was to know what to do with him. Alberta had a mental hospital about 600 miles from Keg River but it was completely inaccessible. The rapid melting of the winter snows had put 10 to 20 feet of flood water into small rivers like the Keg, making an overland journey to the highway out of the question. The Peace River was still frozen and it would be weeks before the boats would be put into the river. No plane on wheels could land on the water-logged prairie and there was no lake anywhere near for a plane to land on pontoons. To make matters worse, my scanty supply of hyoscine was nearly at an end and the nearest drug-store, 200 miles away, was just as inaccessible as the mental hospital.

It was not only the old squaws who were relieved when the medicine man arrived and took over! I don’t know what his treatment was but that afternoon old man Bottle was completely sane. In the early hours of the next morning, he died! I hadn’t the remotest idea what he had died of, so it was rather a relief to find that such formalities as death certificates were unknown at Keg River. One merely went ahead and buried the body. The priest, on his annual visit, made a record of the deaths in his little black book.

Nobody knew old Mr. Bottle’s age. Estimates varied between 84 and 94. In order to get an old age pension for Mr. Bottle’s widow, one had to have proof of her age. It involved writing to the various old Missions, asking them to search for any record of her baptism or marriage. As we
had only eight mails per year, it took literally years. We thought we had
the necessary proof when a record was found of the baptism of Emilieu,
her eldest son, which proved that he was 68 years old. Since everyone
could swear that she was his mother, it seemed self-evident to Frank
and me that she must be over 70. But not to the Government officials.
They required PROOF and her age was not stated on Emilieu’s bap-
tismal certificate! They finally accepted my sworn statement that she
appeared to be over 70.

She was a lean and wiry little old lady, very upright, with good sight
and good teeth and never ill until the last few days of her life. She used
to erect her teepee close to our garden fence and whenever my little
daughter disappeared from our yard I would find her sitting content-
edly beside the little fire in Mrs. Bottle’s teepee, with some of the old
squaws. We could never persuade the old lady that the rail fence along
our garden was not intended as a handy source of firewood for her; I
think that was why she chose to live there. In April 1940, we had very
high water in the Keg which washed away all the fallen trees which had
been used as bridges to cross the river. Old Mrs. Bottle asked Frank to
fell a big spruce that stood on the river bank to our pasture so that she
could cross the river to the birch swamp to make syrup. Apart from not
wanting to fell a favourite tree, Frank really thought she was getting too
old to be crossing a flooded river; but she found someone to fell a tree
for her and went and made her syrup.

It wasn’t a very good bridge, or very safely lodged on the far bank,
and I remember the glee of my children when I fell off it later that sum-
mer when we crossed to pick wild raspberries. Yet old Mrs. Bottle had
negotiated it day after day in the spring, with twenty feet of flood water
boiling along below her. Early in May, after a few days’ illness, she died
of myocardial failure but I wish I could think that my myocardium
would last as well, for—assuming that she was at least 15 years old
when Emilieu was born—she was 96 when she died. She had had
twelve children, all born in the bush without medical care.

The ages of some of the old Metis can be estimated from the records of
the Hudson Bay Company. Old Akernum, who died the year before I
came west, had been on the payroll of the Company for 96 years as a
chore-boy, canoeman, hunter and pensioner, so he must have been at
least 108 when he died.

Old Moise Richard, one of the old men who helped us care for old
man Bottle, was another Metis whose age could be guessed fairly accu-
rately. Records proved that he was one of the men who got out the logs
to build the North West Mounted Police fort in what is now Calgary. He
also put in years freighting between Fort Garry (now Winnipeg) and
Fort Edmonton. They used to make one round trip, a distance of about
2,000 miles, each summer. On one of these trips, when they were por-
taging, young Moise slipped and the boat he was helping to carry frac-
tured his spine. There was nowhere to take him, nothing his compan-
ions could do for him. They left him lying prone on the river bank, put
food and water within reach, propped a boat over him for shelter and
continued their journey. When I knew him, in his old age, three of his
lower dorsal vertebrae were fused solid but he had no deformity or dis-
ability or pain. How proud any of us would have been to have achieved
such a perfect functional result! Almost until his death in 1936 he was
able to ride out to hunt, on his old pinto pony, with his old muzzle-
loader. He was a good shot. He had to be. He had only one trade ball for
his gun and couldn’t miss his target or he would lose his ammunition.

Another old Metis, who had suffered an almost identical injury to his
spine and recovered with equally perfect function without any medical
care, was Xavier Sowan, who lived on the Peace River at Carcajou. He
was a magnificent old man, tall and gaunt, with high cheek-bones and
piercing black eyes, much more like one’s idea of the “noble red man”
than most of the Crees. When my husband first knew him in the 1920’s,
he was still hunting with a bow and arrow. He showed me the scar of
another injury he had had many years before: a compound fracture in
the region of the ankle which must have been followed by osteomyel-
itis, for he told me that it had discharged for eleven years before he
finally managed to remove a long piece of dead bone with his jack-knife
and after that it healed. He died after a very short illness, just days be-
fore old Moise Richard. They were both believed to be about 88. Xa-
vier’s widow was the only one of her generation that I knew with defec-
tive vision. She was developing cataracts and was almost blind. But she
had wonderful teeth, none missing when she was over 80, though they
were worn down so that the dentine showed. But it was quite insensi-
tive; she could still chew sinew for sewing moccasins.

Old Mrs. Auger outlived all her contemporaries and died in 1947,
when she was 103. Unlike many of these others, there was an obvious
cause for her death: she had a rodent ulcer on her eyelid. When it was
first diagnosed by a positive biopsy, it was only a small hard pimple,
growing very slowly. She was then 93, had never been out of the North,
had never seen a train, had never been washed or slept between sheets.
She spoke no English, and Edmonton—500 miles away—was too far for
her relatives to go to visit her. It seemed as though the shock of sending
her into hospital in the city might be more likely to kill her than this
slow-growing ulcer. But tragically, she went on living for ten more
years. It destroyed her eye: it ulcerated into her temporal artery and she
nearly bled to death. She got maggots into it one summer but she went
on making hay for her old saddle-horse, cutting it by hand with a big
knife. She wasn’t bed-ridden until the last few weeks.
There was one other case of malignant disease amongst them. At least, I thought it was malignant. He was a man of 72, with an enlarged and stony hard prostate. I sent him out to the hospital, where they washed him and put him to bed in pyjamas. This was quite too much for him, as Indians and Metis always sleep fully clothed, even to their moccasins. So in the dead of night he pulled out, in the hospital's pyjamas, and headed for the bush! He walked the 80 miles home. Nothing would have driven him back to the hospital, so the diagnosis was never really established. He never had any evidence of secondaries.

None of the old Metis I knew had any arthritic deformities. Their hands were slim and supple and they could walk long distances even in old age. Old widow Stoney was the only one who ever complained of "rheumatics." She had no clinical signs but used to complain bitterly each spring that her shoulder joints creaked and demand something hot to rub them with. As she always went on the spring hunt, which involved weeks of sleeping out on wet ground in damp clothes with temperatures below freezing at night and wading in icy water in the daytime, it seemed hardly surprising that her shoulders creaked! She had an attack of influenza and pneumonia in January 1933, with considerable cardiac embarrassment, but she recovered apparently none the worse. She had another attack of pneumonia in the winter of 1941, when I noted nothing abnormal about her heart.

A year later, in January 1942, she died suddenly. She was then about 73. She had visited relatives at Keg River, walked back the eleven miles to the Chinchaga River to the tiny settlement where she lived. There she had a meal with her daughter, said she was tired from the walk but seemed in excellent health and spirits. She collected the possessions she had left with her daughter for safe-keeping (a clock, a lantern, a gallon can of paraffin, a slab of moosemeat and her bedroll) and with this burden left for her home 100 yards away. When she was not seen next day, it was assumed that she had gone to her trapline but when no smoke was seen from her cabin that evening her son-in-law went to investigate and found that she had never been home. They found her tracks in the snow, going towards the river, and there, a quarter of a mile from her house, they found her frozen body, part of the way down the bank. Her can of paraffin was carefully set upright and the lantern and the clock were also upright in the snow, despite the steepness of the bank.

At post-mortem, I found the pericardium full of blood which had come through a tear an inch long in the anterior wall of the ventricle. The heart muscle in this region was very thick, almost entirely replaced by fat. I suppose she had had a coronary thrombosis at some time. But when? If it was during the attack of pneumonia in 1933, it was extraordinarily symptomless and had left her able to continue a strenuous existence for nine more years. And at what point did her heart rupture? She
must have been dying when she walked past her own house, staggered on for a quarter of a mile, yet she still had the instinct to set her treasure down carefully in the snow-bank before she collapsed.

Among all the old Metis living at Keg River in the 1930's, I never found any hypertension. Most of them had blood-pressures around 120/80, regardless of age. There was no diabetes, no gall-stones, no chronic nephritis, no arthritis. There were many old rheumatic hearts, with a fascinating collection of murmurs, but they didn't know they had heart disease and it caused most of them remarkably little disability. Even when they had periods of congestive failure, their response to digitalis was quite dramatically satisfactory and they would get back to normal existence very quickly. One of them who had been fibrillating for eleven years died recently at 84. He had had an extracapsular fracture of the femur and had not been able to go out to hunt for about five years, though he could walk a few miles. But he was still an expert at calling moose, so the young men would take him out by car to a suitable place on the trail and set him down to call the moose, which they could then shoot.

The winters of the early 1930's were unusually severe, with deep snow and prolonged spells of intense cold with temperatures as low as 70 degrees below zero. (100 degrees of frost.) They provided me with an opportunity to witness the astonishing physical endurance of some of the younger Metis and their ability to go without food for long periods. I remember making a hurried trip to Carcajou in winter. I was called by telegraph to a woman who lived 45 miles away, the other side of the Peace. I went with a dog team driven by a 40-year-old Metis. We made the 45 miles in about eight hours. Since I—with my fur coat and fur robes and bags of equipment—made a big load for the dogs, he had to run behind all the way, just catching at the handles of the cariole to balance the sleigh when we travelled on sidling slopes down the hills. The mile-long crossing of the Peace, on foot, took us more than an hour because in the autumn the river had frozen, broken again and refrozen with great blocks of ice piled jaggedly on top of one another; it was not unlike crossing a glacier. So my driver had been making nearly 7 miles per hour over the rest of the trail. Seven miles an hour doesn't sound very fast to people who travel by car at seventy. But it's about twice as fast as average walking speed.

There was a Metis lad who worked for my husband; he was caught by a big snow-storm when he was returning from Peace River with a team of horses and sleighs: the trail was drifted so deep that the horses were pushing snow with the neck-yoke; he had to break trail for them on snow-shoes. The trail followed the telegraph line, so he would walk ahead to the next telegraph pole tramping down the snow ahead of one horse, then return breaking a trail back to the other horse. Then he
would encourage the horses forward as far as he had tramped, leave them to rest while he went forward to the next pole; and so on, mile after mile. He ran out of food for himself and the horses two days before he finally reached home, little the worse.

Even in October the weather can be treacherous. One lovely Indian summer day, I had to make a visit to a patient 25 miles away. Before we started the return journey, we were politely offered a meal. It consisted of boiled rabbit, skinned but incompletely cleaned and with the head still on. It looked like a premature baby boiled in dish-water! It was served with bannock and lard and tea. Although I’d started from home at 4:30 a.m., I didn’t feel hungry enough to eat much of it! We had done only a few miles of the return journey when it clouded up, turned very cold and began to rain heavily. By 7 p.m., it was pitch dark; we couldn’t even see the horses’ tails from the wagon. The trail followed the Boyer River and had a number of short sharp hills and, finally when the horses began to hesitate, we decided that we had better stop, lest we end up in one of the deep holes in the creek.

There was no house for ten miles in any direction. We were both soaking wet, though we had a piece of tarpaulin draped over our shoulders. My teamster rigged up a shelter of sorts with the tarp and the wagon and he even managed to make a fire, though it was a poor camping place with very little wood. He became super-saturated wallowing around in the wet bushes with my flashlight, searching for something that would burn. We crouched under the tarpaulin beside the smoky, spitting fire and watched the rain turn to heavy wet snow. We had nothing to eat and I began to regret that I hadn’t eaten more of that rabbit! I shall never forget the dignity of my teamster’s face as he sat there immobile, silent, enduring without comment or grumbling. When daylight came, we were almost too cold to move. The wet snow rolled up around the wagon wheels till they resembled balloon-tires and the sharp pitches in the trail were almost too slippery for the horses to climb. We reached home at 10 a.m.

It is not only the winters that call for endurance in the North. In June, after a wet spring, the mosquitoes must been seen to be believed. They can kill a horse if he is left tied without a smudge burning. When the crew was cutting through for the telegraph line to Keg River, they bogged down in a big swamp that parallels the Naylor Hills, south of the Keg. There was no way around and to cross it involved building a long corduroy (this consists of tree-trunks laid side by side and lashed together, the whole thing making a floating bridge across water and mud). It was June and the mosquitoes, bulldogs and black-flies rose in swarms. The telegraph crew quit to a man. My husband recruited a crew of Keg River Metis and, working waist-deep in the stinking black
mud and water, they built 600 yards of corduroy. Then the white men were able to go on building the line.

It is not that the Metis is immune to attack by mosquitoes, not that his skin doesn’t react to their bites: but, though his skin itches, his mind doesn’t. I think it is more than a mere acceptance of his environment (such as an animal has), it is a more philosophical attitude. Certainly when I deloused a family of Metis children whose dirty heads were causing a good deal of excitement amongst the parents of the white school-children, their mother’s indignant remark was, “Whoever heard of a few lice doing any harm, they have to eat, don’t they?” And one of the worst tactical errors I’ve ever made was when we had a bad outbreak of scabies; I showed them pictures of the little creatures that were burrowing in their skins. As soon as they realized that it was not a disease they were suffering from but merely a little bug smaller than a “no-see-um,” there was no reason to worry about it any more!

Serious accidents and illnesses are rare in the bush but they are apt to occur a very long way from help. One Sunday morning, young Peeweno walked into my kitchen and told me that he had hurt his arm on Thursday. He had been moose-hunting about thirty-five miles away. He found his moose in heavy windfall (dead trees blown down in criss-crossed tangles). Just as he was about to shoot, the rotten tree trunk collapsed under him and as he fell his rifle swung round and discharged, laying open the back of his arm in most of its length, down to the humerus, but without fracturing the bone or damaging the nerve. He walked the seventeen miles to his home, where his wife wrapped one of the baby’s diapers round it, then came in the remaining twenty-five miles to Keg River. When I cleaned it up, I found part of his metal expanding armband embedded in his triceps but he recovered quickly, with full use of his arm.

Endurance was taken for granted amongst the Metis. It was not until during the war that I realized how much their stamina was the result of their rigorous existence. Young John Ducharme, who was subsequently killed on the beaches of Normandy, came to visit us on his last leave before going overseas. He entertained us with wonderful descriptions of the way they had taught him to load a rifle, “One, two, three, four,” and with stories of white men falling exhausted after a mere twenty-mile hike; and he laughed about the awful load of equipment considered necessary for an overnight trip. He asked if we had any freight teams going south, as he had to get back to camp and, as we hadn’t, Frank said, “I guess you’ll have to walk.” It was eighty miles but John had often done it before. He told us that he had become so fat and soft during his commando(!) training that he doubted very much whether he could make it in time. So much for the white man’s standards of physical endurance.
During the war, Keg River suddenly became much more accessible because the United States opened up the Mackenzie Highway to get to the oilfields of the North West Territories and the uranium at Great Bear Lake. The Metis obtained jobs as chore-boys and dish-washers at fabulous wages; their whole way of life began to change rapidly and with it the pattern of their diseases.

Until I had been at Keg River for over twelve years, I had never seen a blood pressure higher than 130/90 in a pregnant Indian or Metis woman. Since in the 1930's the treatment of toxaemia involved a drastic reduction in the consumption of meat, it seemed a merciful dispensation of Providence that these women, whose diet was almost exclusively meat, should be immune to toxaemia. But this conviction was shattered abruptly one afternoon in June 1946. Jean Cardinal dumped his wife on my doorstep and drove off. They lived twenty-five miles away and I hadn't seen her for seven years. This was her eleventh pregnancy but her mother had cared for her confinements. She was obviously nearly full-term, grossly obese and also grossly oedematous. Her legs were like stove-pipes and the oedema extended up to her waist. Her blood pressure was 210/140. Her urine showed a heavy cloud of albumen. She sat there half-stupefied, almost comatose. Since by this time we had a passable summer trail to Battle River and there was a small cottage hospital there, it seemed worth while trying to get her out there before she went into eclampsia in my kitchen! She did very well in hospital, had no fits, had a live 11 lb. baby a few days later. There has been an accelerating increase in toxaemia of pregnancy since then. By 1950 I had seen eight cases but, among the last eleven Metis women I have prenatalled, there have been five toxaemias.

Life expectancy has increased enormously amongst the Metis during the past twenty-five years, largely as a result of the improvement in the tuberculosis situation. Calculated from information given to me by the fur-traders and the priest, the average annual death rate from TB at Keg River in the 1920's was about 600 per 100,000. As they would not have recognized tuberculous meningitis as TB, it was probably much higher. There had been as many as twelve deaths in a house and some families were completely wiped out. Since 1948, there have been no deaths from TB at all and no deaths from TB meningitis since 1943. We have four active cases in sanatorium at present. A number of factors has been responsible I think. First, the provision of sanatorium beds for Metis cases. Second, routine patch-testing of school-children and X-ray of new positives, of contacts and of ex-sanatorium cases. Third, a vigorous campaign of education about tuberculosis in the school. (Keg River school-children have won three silver cups and two other awards for their essays in the annual contests in the last five years.) Fourth, the re-
turn of arrested cases from sanatorium has encouraged the Metis to regard TB as a curable disease instead of a death sentence.

Whooping cough was the cause of a considerable mortality in the 1930’s but, since the babies have all been immunized for the last ten years, there has been no whooping cough at all.

In 1931, goitre was present in 100% of the Metis women, varying in size from a diffuse fullness to a cyst as large as the woman’s head. But it has almost vanished since the store stocked only iodised salt for human or animal consumption. Goitre used to occur in some sleigh dogs severely enough to prevent them working, as the collars wouldn’t fit. It also occurred in the calves sometimes and litters of hairless pigs were born. But I never saw or heard of a cretin.

However, although life expectancy has increased, the number of old people is no larger and they are not living any longer than they did. Our oldest inhabitant is only 84. And in sharp contrast to those of a generation ago, most of the present old age pensioners have some disease: diabetes and obesity, gall-stones and obesity, chronic nephritis, chronic bronchitis, hypertension and heart failure, coronary insufficiency.

There are about five times as many children now as in 1931 and nowadays most of them look well-nourished. Actually they are 5/6 inch taller and 10 lbs. heavier than the average Canadian child of the same age. By contrast, the white children in the same school look thin, though they are up to average weight. But though the Metis children look well-nourished, the condition of their teeth is shockingly bad. They not only have extensive caries but some of them have teeth which are devoid of enamel. Many of them haven’t a sound baby tooth left by the time the permanent teeth begin to erupt. Often, the teen-agers have fewer sound teeth than their grandparents had when they died. There was quite a lot of caries in the children’s teeth when I first came to Keg River, though not nearly as much as now. However, the change must be a recent one, because I find in the records of the men whose medicals I did when they were called for compulsory military training between 1942 and 1945, that of the twenty-five I did (many others went out to other doctors, or to volunteer) there were nineteen whose teeth were perfect, no caries at all, three who showed slight caries in one or two teeth and only three with bad teeth. There has been no change in the fluorine content of the water; they still drink the same dirty river water they always did. Among these same twenty-five young men, there were thirteen who weighed from 10 to 35 lbs. under the average weight for height and age; ten who were average; and only two, brothers, sons of a white man, were respectively 20 and 35 lbs. overweight.

The middle-aged Metis woman tends now to be about 30 lbs. overweight and her blood pressure is often higher than was that of her mother or her grandmother, even though it is within the accepted limits
of normal. Many of the young women are overweight when they come for their first pre-natal examination. I remember how, twenty years ago, I used to take milk and eggs and potatoes to my patients after childbirth because I thought they would never establish breast-feeding successfully when they were so desperately thin. Yet they always did: but they don’t now.

So a rising standard of living and a considerable measure of social security have been accompanied by an increase in the incidence of dental caries and a falling standard of health in pregnant women and old people. I grant that those old Metis I examined twenty-five years ago were a select group, the fittest of their generation, who had survived a life of hardship to live to old age. I also fully realize that the numbers that I am dealing with are far too small for my findings to have any statistical significance. The whole change could be a coincidence. But supposing it isn’t a mere coincidence? It becomes rather intriguing to speculate on what factor or factors in their changing environment has been responsible for the rapid deterioration. The number of variables is considerably limited, for the full force of civilization has not yet hit Keg River. We suffer very few of the stresses of modern living.

Keg River is still a profoundly quiet place—or deadly dull, according to your point of view. There is none of the steady noise of a city. Working in the garden in the evening I can hear the shrill piping of frogs in a swamp half a mile away, the sound of wild ducks flying over, the sudden booming of the swooping night-hawk. An occasional truck or car goes by but there is none of the unceasing roar of traffic. There are no telephones to startle us. There is no television. Only an occasional plane flies over us, and no jets. The nearest railway is still 150 miles away and there are only three trains a week. There is no rush to catch buses and trains, no split-second timing for anything. There are clocks in most of the houses now, and the children are supposed to arrive at school on time, but the occasional meeting or dance generally starts at least an hour late. There are no pavements to weary the feet and spine; we walk on the soft dirt or the even softer mud. Crossing the road doesn’t offer the constant threat of sudden death that it does in Toronto! There are no crowds. The total population is only just over 600 and only on the annual sports day do more than about 200 ever get together.

There is the excitement of a mail service once a week. There is the excitement of an annual free movie show put on by the Forestry Service in the school house and there has been a weekly movie show on the Metis Colony for the last year or so. There is no beer parlour, no pool room, no soda fountain. It could never be described as hectic. The Metis have no taxes to worry about. Many of them work for wages on farms and in sawmills but they are very casual labour. One day they come and the next day decide to go off hunting. A harvest crew of a dozen good men
will vanish overnight if conditions seem just right for the moose to start running!

Therefore, although stress and tension, anxiety and frustration, may be the reason for the increasing incidence of hypertension in urban populations, it does not seem a possible explanation for the sudden appearance of hypertension amongst the Keg River Metis. Actually their anxieties are less now than they used to be, what with family allowances, old age pensions, widow’s pensions, mother’s allowances, permanent disability pensions and minimum wages. I can imagine that in the old days the family waiting at home to see if the hunter would come back with meat, or whether they must go on trying to live on snow-sparrows and squirrels, felt considerably more anxiety than those who now have only to wait for the next allowance or pension. I remember old Widow Richard telling me sadly of the winter when she was young when they could find no game and all the young children died.

There has been one really great change in the lives of the Metis here in the past twenty-five years and that is their diet. It is interesting to compare the diet they ate in the old days with that recommended in Canada’s Food Rules.

**MILK**

The babies were breast fed until between one and two years old (it was a fairly efficient method of birth control too) and after weaning they never had milk again.

**FRUITS**

Citrus fruits and tomatoes were unknown. Wild strawberries, raspberries, blueberries, cranberries and choke cherries were consumed in enormous amounts between July and October. The surplus was dried or stored frozen in birch bark baskets, for use later. But I doubt if there was ever much left after January.

**VEGETABLES**

None whatever, at any time, except dried beans.

**CEREALS AND BREAD**

Some rolled oats were eaten, but not a lot. Bread was never eaten. Flour was bought in as large a quantity as they could afford but the very high cost of freighting it into the north in the early days made it too expensive for use in the enormous quantities in which it is now consumed. It was all made into bannock, with baking powder, lard and salt, mixed with water. Whole wheat flour was never used. Small quantities of rice and pot barley were used.
NEITHER BUTTER NOR MARGARINE was used by the Metis. Butter is a very unsatisfactory substance in the bush. In summer it melts, and in winter it is too brittle to use when frozen and it spoils too rapidly for use by people whose trips to the store might be only at intervals of 6 months.

Lard was used in very large amounts. They also rendered the fat from the bears they killed.

MEAT AND FISH

The Food Rules suggest one serving of meat daily. You should see the Metis eat meat! One old-timer told me of a trip he made from Edmonton when the railway came no further north. Part of the 500 miles was made on Lesser Slave Lake, which is 70 miles long, and very subject to cross winds and storms. They were delayed on the lake by a storm and had run out of food before reaching the freight-teams awaiting them at the west end. The waiting freighters had put in time hunting and had just killed a moose. As there was a big set of scales amongst the freight, he suggested that they should all weigh themselves before eating and again afterwards. The gain was between 5 lbs. and 15 lbs. per man! Straight meat. The Metis who has just killed eats perhaps six times in the day and then gets up at 2 a.m. and eats again!

Some fresh-water fish was caught in rivers and lakes, usually in nets or traps, but very little at Keg River.

Large numbers of wild ducks and geese were eaten.

Beans were used in large quantities, because of their light weight and convenience for packing. They were eaten boiled with bacon or fat salt pork when they could get it.

Cheese they disliked, and never ate.

Eggs of wild ducks and geese were eaten in the spring and if the eggs turned out to be half-hatched, so much the better! For the rest of the year they had none.
Vitamin D, as cod liver oil, was being sold at the trading posts when I came to Keg River, chiefly as a medicine for the tuberculous. It was not given to babies or young children. But in spite of the long dark winters none of the old people showed any signs of having had rickets in childhood. None of the old women could remember ever having heard of a woman dying of obstructed labour, so the rachitic flat pelvis could hardly have existed. Yet, the occasional toddler had unmistakable rickets in my first year or two at Keg River.

Since 1945, the Family Allowances have put a large spending power into the hands of the Metis woman. Many of the families have between eight and fifteen children, so she gets over $50 per month. It is more than the total income the family used to get when it was obtained from the man's trapping. When I came to Keg River, the only staples purchased regularly from the trading post were flour, baking powder, lard, tea, sugar, salt, beans, jam or syrup, and bacon. Plus ammunition and tobacco, which took priority over the rest! Improved transportation has lowered prices and increased the variety of foods obtainable at the store nowadays. If you could follow the crowd after the Allowance cheques arrive, you would see the Metis woman buying candy, chocolate bars, soft drinks, sweet biscuits, pudding powders, jello, breakfast foods, soda crackers, white bread, macaroni and spaghetti, prepared and canned meats, ketchup, oranges and apples, as well as the staples she used to buy. The consumption of canned milk has risen enormously but much of this is the result of hand-feeding instead of breast-feeding the babies. Eggs are purchased in large quantities, being produced by local farmers in such excess that the price is very much lower than in the cities. They also buy pork, beef and chickens from local farmers.

Few Metis will bother much about hunting as long as there is food in the shack, so the consumption of meat is down considerably, but there is still a fair amount of wild meat, ducks, geese and rabbits eaten. They have almost ceased to be nomads, for even though the man may go off to his trap-line in winter, the family stays at home: they have to, as the Family Allowance is paid only if the children are in attendance at school. This has diminished the amount of fruit eaten as well as meat because the families used to go out and camp in the berry patches on the hills in the fall and the women and children picked berries while the men hunted the bears that were also picking the berries.

A few of the Metis settlers on the Colony, which was established in this area by the Alberta Government to try to rehabilitate them and turn them into farmers, have made some success of raising livestock and chickens and growing gardens and grain but the majority make little effort. However, many of them do get a fair quantity of potatoes from the white farmers, in payment for help given in harvesting their big potato crops.
One of the changes in their diet, which has only occurred to me since I started to think out this account, is in the flour they use. Until about 1942 the flour used at Keg River came either from Sheridan Lawrence’s mill at Fort Vermilion or from the Peace River flour mill. These were quite small mills, using local supplies of wheat. The rate of extraction was higher than that of flour produced in the big commercial mills and also there was no treatment with bleaches or improvers. It was cream-coloured rather than white and bread made from it had a flavour which I can never achieve using the flour we get these days. Otherwise, the changes would seem to be chiefly: an increase in total calorie value; a very great increase in the amount of refined carbohydrate; an increase in consumption of butter and margarine at the expense of lard and bear grease; a decrease in the amount of protein, but not to a very low level, and with more of it in the form of butcher-meat and eggs and less as wild meat; an increase in vegetables, particularly potatoes, but not to the level considered necessary for a good diet. Could any of these changes, or a combination of them, account for the changing incidence of certain diseases in the Metis people?

Lady Mellanby’s studies of London school-children’s teeth, before and during World War II, demonstrated that a rapid change in the incidence of dental caries took place in that population probably as a result of change in diet. The marked reduction in the incidence of eclampsia in Central Europe during World War I occurred when there was a sharp reduction in food intake, as did the fall in the numbers of cases of coronary artery disease in occupied Norway during World War II. In a fairly recent British Medical Journal, there was a short report on a pilot study of the toxaemia of pregnancy in sheep and its apparent connection with overfeeding of the ewes.

Could these be clues? Did my friends of the 1930’s live to a vigorous old age because they were always thin? Could it be simply because they are now getting more to eat that my present Metis patients suffer from dental caries, toxaemia of pregnancy, diabetes and hypertension? I wish I knew how to find out, for whatever the cause, the result is a tragedy.

NOTE

1 Address to the Canadian Medical Women’s Association, given at Toronto, Canada, June 1955, at a dinner in honour of the medical women attending the joint meeting of the Canadian Medical Association and the British Medical Association. [Reprinted with permission from the Medical Women’s Federation, this speech originally appeared in Journal of the Medical Women’s Federation, 38 (January 1956): 40-56.]