The Jewish Consumptives Relief Society

A Tale of *Chessed* One Hundred Years Ago

BY DEVORAH KLEIN

Benjamin Saritzky, a Jewish immigrant from Russia, came to the United States in 1898. He settled in New York, like millions of other immigrants, and found employment in the garment industry. Most likely Benjamin worked in an overcrowded factory with appalling sanitary conditions. By 1910, he was suffering from tuberculosis, known then as consumption, a dreaded infection of the lungs that was the leading cause of death in the United States at that time.

Leaving his wife and four children behind, Benjamin traveled to Denver, Colorado, where he found refuge at the JCRS, the Jewish Consumptives Relief Society. Benjamin was one of the fortunate ones; he was discharged from the JCRS only eight months later. Many others succumbed to the disease.

However, whether a patient was fighting the early stages of tuberculosis or suffering from advanced symptoms, everyone who arrived at the JCRS sanatorium received the best possible care — as only one Jew can provide for another.
Why Denver?

In 1882, a group of fifty Russian immigrants started a farming community in Cotopaxi, Colorado, funded by the Hebrew Immigrant Aid Society of New York. Unfortunately, within two years the settlement failed, and many of these immigrant farmers relocated to nearby Denver, joining other Jews who had already settled there.

The community grew, and by 1904 about 1,500 Jews lived in and around Denver. Many small shuls and businesses catering to Jewish needs filled Denver’s West Side, mostly around West Colfax Avenue near the Platte River. Many of these residents were poor, and they formed several societies to care for each other spiritually and physically.

As early as the 1860s, even before Colorado became a state, Denver was a magnet for individuals seeking a cure for tuberculosis (TB) in its dry, sunny climate, and impoverished Jews from the East Coast were no exception. There were no publicly supported institutions for consumptives at the turn of the century, so the challenge of adequate care for these people was left to private organizations.

The Jewish community of Denver was the first to come to their aid with the founding of the nonsectarian National Jewish Hospital for Consumptives, which opened in 1899 and treated all patients free of charge. However, the hospital treated only patients in the early stages of the disease and did not provide kosher food. Besides, the Eastern European immigrants felt that the well-to-do, modernized German Jews who founded the hospital looked down on their Old World customs and manners.1

Formation of the JCRS

In 1903, a group of concerned community activists in Denver gathered to address the needs of their fellow Jews. The result was the Jewish Consumptives Relief Society, a benevolent organization established to care for penniless tuberculosis patients who found their way to Colorado. They founded the institution as a nonsectarian sanatorium to treat TB patients in all stages of the disease, free of charge.

At the forefront of these efforts were Rabbi Elias Hillkowitz, who was considered the dean of the Orthodox rabbis of the West Side of Denver at that time; his son, Dr. Philip Hillkowitz, who served as the president of the organization from the time it opened until his death in 1948; Dr. Charles David Spivak, who acted as executive secretary until his death in 1927; and Dr. Adolph Zederbaum, its treasurer. Rabbi Hillkowitz suggested the society’s motto: “He who saves one life saves the world.”

The founders of the JCRS were very
proud that their organization was run by a group of poor, simple citizens, many of whom were sick themselves, rather than by wealthy individuals. This small group of working men began to raise funds, and although there was some initial opposition from other Jewish groups, they persevered and succeeded. Many people came forward with significant donations of money and goods to help support the cause.

September 4, 1904, when the JCRS sanatorium opened its doors, was a joyous day in the Denver community. Dr. Philip Hillkowitz said a year later at the first annual meeting, “All who [were] fortunate enough to be present on that auspicious day ... will never forget the enthusiasm that prevailed there. It seemed as if the Jewish community of Denver realized for the first time that a great and glorious institution was born on that day.”

The Early Days

The JCRS sanatorium quickly earned an excellent reputation for its high level of care — medical, physical, and emotional — and its accommodation of the requirements of its religious patients. From the reports of its annual meetings, it is clear that the founders and directors had only the patients’ best interests in mind — something that could not necessarily be said of other sanatoriums at the time.

For example, in his address at the first annual meeting, Dr. Spivak described the great advantages of the sanatorium’s location near the outskirts of the city, which had a plentiful water supply, arable land, abundant shade trees, and an inspiring view of the foothills and peaks of the majestic Rocky Mountains. In addition to providing the clean, dry air known to benefit TB patients, he noted, the scenic setting would raise their spirits and promote their recovery.

At first, patients were housed in what they called “tents” in order to provide

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TB: A Dreaded Disease

Tuberculosis (TB) is a bacterial infection of the lungs, which if left untreated kills more than 50 percent of those who develop an active infection. Although it is mostly unheard of in today’s developed countries, about 5 to 10 percent of the United States population still test positive for a latent infection. Millions have succumbed to the disease in Third World countries even in recent years.

In the 1800s and early 1900s, the disease caused widespread concern and was one of the most common causes of death throughout the world. Since it is highly contagious, it was often associated with the overcrowded and unsanitary living and working conditions that existed in many big cities at that time.

Before the development of antibiotics in the 1940s, TB patients often gathered in specially designed sanatoriums. It was assumed that a proper regimen of rest and good nutrition, along with lots of fresh air, offered patients the best chances of recovery. It was especially recommended that tuberculosis patients travel to dry climates in high altitudes. In addition, these sanatoriums served to isolate patients to an extent, thereby protecting the rest of the population.

TB sanatoriums were maintained in various parts of the world until antibiotics became widely available and tuberculosis ceased to be a major public threat. By the 1950s, most of them had been demolished or adapted to serve new objectives.
them with the maximum possible exposure to fresh air. These tents were of the most modern design available at the time, with an ingenious ventilation system that kept them airy and comfortable. On cold winter nights, the patients were given extra blankets and remained in the tents. Several years later a pavilion was constructed, but the patients were encouraged to spend as much time as possible outdoors, and many beds were moved out onto the large porches that circled the building.

A farm was established on the grounds, which not only provided fresh milk, eggs, fruit, and vegetables, but allowed those who were healthy enough to engage in farm work as a source of wholesome activity.

The patients who arrived at the JCRS were in various stages of tuberculosis. Some needed medical treatments, while others simply needed to rest and recover in the salubrious environment; some were bedridden, others were able to move about freely.

However, most patients had one thing in common — they were all impoverished. They came from large cities where they had been weakened by working in congested factories and workshops in which they had most likely contracted the contagious disease. Generally, these individuals had spent whatever money they had in an attempt to survive their illness; by the time they arrived in Denver, they had lost both their health and their money.

A Personal Testimonial

Ben and Bessie Glass were both patients at the JCRS sanatorium in the 1920s. In a recorded interview, they recalled the superior conditions that existed there and the benevolence of the directors. “The way they received patients was heaven, like you had come to the best hotel,” they testified. “There was the best service. This was the aim of the hospital — to make the patients physically comfortable and to make them feel at home.”

This nurturing environment was critical for the very sick people in the sanatorium — people who had been torn away from their families and who were fighting a disabling and contagious disease with limited hope for recovery. At the same time, the disease created common ground that enabled the patients to form close bonds.

The Glasses noted in their interview, “The hospital was like its own city, and like a family as well. It was sad to be away from home, and the uncertainty about the future was great. The fear of death was all around. Every patient had the same fear, and therefore became close and friendly...”

“The experiences of a patient are sad; they can’t do the things normal people do, and they are broken off from the rest of the world. ... The fear of contamination was great, and every patient dreamed of recovery so [he or she] would be able to re-enter the world. ... Turnover was very frequent, many patients died, others became...”
healthy. It was very sad, very depressing and taxing.

“The hope for a cure was not great because there were no drugs. ... It wasn’t a very happy life, even though we were well fed and cared for, you were made to feel comfortable and at home.”

A Truly Benevolent Society

In the face of grim prognoses, the Society’s workers were devoted to caring for the patients in every way and creating an environment that did not remind them constantly that they were public charges. The wonderful success and pleasant conditions at the sanatorium earned widespread recognition — and the financial assistance of a broad base of supporters.

In a statement eerily reminiscent of modern-day medical ethics debates, Dr. Zederbaum stated, “The secret of our success can be explained by the fact that our organization has undertaken the task of caring for patients in all stages of the disease. ... Surely, it is the man or the woman who is broken in health,
wrecked with pain, shattered with cough, consumed by fever ... who brings forth in a healthy human being all the latent sympathies. We may not be able to save him from the clutches of death, we may not be able to return him to his family ... we may actually ‘waste’ money without any hope for return; nevertheless, we feel that he or she must receive our care and attention, that whole-souled and wholehearted charity is, after all, the only true, pure, and unalloyed charity."

In addition, the officers of the JCRS expressed concern for the patients’ families. In his remarks at the first annual meeting, Dr. Spivak noted that of the twenty patients who lived at the sanatorium then, eleven were fathers to a total of forty children. “What a

The Shul at JCRS

Most of the patients at the JCRS sanatorium were frum Yidden, and the Society took great pains to accommodate them and maintain a religious environment. In 1911, Isaac Solomon funded the construction of a shul on the grounds in memory of his son, Isaac, who had died of tuberculosis.

In 1920, that building burned down, and noted architects William and Arthur A. Fisher subsequently designed a one-story brick-and-stucco synagogue in a distinctive Moorish style. The building was completed in 1926. Located in the heart of the JCRS campus, with room for seventy people to daven, it was used daily.

In 2001, the JCRS Isaac Solomon Historic Synagogue Foundation began its mission to restore the shul building as a living testament to the principles on which it was founded and as a tribute to the memory of those who created, supported, and were treated at the JCRS. Restoration plans include a museum that will have exhibits depicting the history of the JCRS and its impact on the development of Denver and the surrounding region.
In my own magazine, in the year 5772, the tragedy these cold figures represent! he exclaimed. "These eleven unfortunate souls are all their lives, and now their mothers and fathers have left them to shift for themselves, penniless and forsaken."

The directors sought to nurture the patients emotionally, keeping those who were well enough busy with work and entertainment. Services and amenities offered at the sanatorium included a social-services department, a library with nine thousand volumes, a dental office, a pharmacy, a technical school, a monthly magazine, a cooperative store, a post office, and a barber shop. In 1924, a bookbindery was established at the JCRS, with the goal of providing employment and activity to those who were well enough to participate.

In 1907, in order to offer partial aid to the families of the patients, the Denver Jewish community established the Denver Sheltering Home for Jewish Children to care for the children of these unfortunate patients.

Furthermore, to its great credit, the JCRS maintained a religious environment. Only kosher food was served, and Shabbos and Yamim Tovim were observed. A shul was also established on the premises, giving the patients a place to gather and daven.

A New Mission

Over the next fifty years, the JCRS continued to provide all of its services free of charge, and ten thousand TB patients passed through its doors before it changed its mission to cancer treatment in 1954. During that time the JCRS became one of the leading tuberculosis sanatoriums in the country, serving as a beacon of hope for thousands of victims of tuberculosis and showing the world the meaning of true Jewish chessed.

Hamodia thanks Mrs. Jeannie Abrams, director of the Ira M. and Perly H. Beck Memorial Archives, for her assistance in preparing this article.

3. Ibid.
4. Interview with Ben and Bessie Glass, Beck Archives of the University of Denver, 1978.