STABLER-LEADBEATER APOTHECARY SHOP

United States Department of the Interior, National Park Service

1. NAME OF PROPERTY

Historic Name:	Stabler-Leadbeater Apothecary Shop
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Other Name/Site Number: Stabler-Leadbeater Apothecary Museum

Designated a National Historic Landmark by the Secretary of the Interior January 13, 2021.

2. LOCATION

NPS Form 10-900

Street & Number: 105 and 107 South Fairfax Street

City/Town: Alexandria

State: VA

County: n/a

3. CLASSIFICATION

Ownership of Property

Private: Public-Local: X **Public-State:** Public-Federal:

Number of Resources within Property

Contributin	g	Noncontributing
buildings	2	buildings
sites	0	sites
structures	0	structures
objects	0	objects
Total	2	Total

Number of Contributing Resources Previously Listed in the National Register: 2

Name of Related Multiple Property Listing: n/a

Code: 510

Category of Property

Building(s): X

District:

Structure: **Object:**

Site:

Not for publication:

Vicinity:

Zip Code: 22314

4. STATE/FEDERAL AGENCY CERTIFICATION

As the designated authority under the National Historic Preservation Act of 1966, as amended, I hereby certify that this _____ nomination _____ request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property _____ meets ____ does not meet the National Register Criteria.

Signature of Certifying Official

State or Federal Agency and Bureau

In my opinion, the property _____ meets _____ does not meet the National Register criteria.

Signature of Commenting or Other Official

State or Federal Agency and Bureau

5. NATIONAL PARK SERVICE CERTIFICATION

I hereby certify that this property is:

- ____ Entered in the National Register
- ____ Determined eligible for the National Register
- ____ Determined not eligible for the National Register
- ____ Removed from the National Register
- ____ Other (explain): _

Signature of Keeper

Date of Action

Date

Date

6. FUNCTION OR USE

Historic: Health Care

Sub: medical business/office

Current: Recreation and Culture Sub: museum

7. DESCRIPTION

ARCHITECTURAL CLASSIFICATION: Early Republic: Federal Mid-19th Century: Greek Revival; Gothic Revival Late 19th and 20th Century Revivals: Colonial Revival

Materials:

Foundation:stone (107 South Fairfax); brick (105 South Fairfax)Walls:brickRoof:stone (slate) (107 South Fairfax); asphalt (105 South Fairfax)Other:

Summary Statement of Significance

The Stabler-Leadbeater Apothecary Shop in Alexandria, Virginia is nationally significant under NHL Criterion 1 in the areas of Commerce and Health/Medicine for its exceptional ability to convey the history of drug stores in the United States from the early nineteenth century through the early twentieth century. The period of significance begins in 1805, when apothecary Edward Stabler moved his shop into a newly constructed building at 107 South Fairfax Street; Stabler and his son began using the adjacent building at 105 South Fairfax Street in 1829. The period of significance ends in 1933, when the Leadbeater Drug Corporation, run by Edward Stabler's great-grandsons, filed for bankruptcy and closed.

The Stabler-Leadbeater Apothecary Shop illustrates broad national patterns in the history of pharmacy in the nineteenth and early twentieth centuries, particularly the evolution of drug stores and the changing role of pharmacists. When Edward Stabler founded the business in 1792, apothecary shops were located primarily in cities and large market towns. Apothecaries typically learned their trade as apprentices, and they mixed, or compounded, many of the remedies they sold. By 1933, drug stores were common features of commercial districts throughout the United States, and sold a wide variety of pre-packaged and manufactured remedies, as well as some compounded medicines. The pharmacists who owned and operated them were licensed by state governments, often had studied pharmacy at a college or university, and were required to adhere to federal drug laws.

Like many nineteenth-century drug stores, the Stabler-Leadbeater business was multi-faceted, encompassing a retail pharmacy, wholesale drug sales, and the production of proprietary medicines. The history of the business and its buildings illustrates how drug stores and pharmacists were affected by important developments in the history of pharmacy, including professionalization, state licensing regulations, the rise of patent medicines, the development of industrial drug research and manufacturing, and early federal drug laws. In the early twentieth century, the growing dominance of large pharmaceutical manufacturing companies, stricter federal drug laws, the proliferation of chain drug stores, and changes in store design and merchandising techniques transformed the way Americans purchased medicines. By 1930, the Leadbeater drug store was already a relic of an earlier era, as the owners made little effort to adapt to the changes in the retail and wholesale pharmacy business.

The Stabler-Leadbeater Apothecary Shop is unparalleled in its ability to illustrate the history of drug stores in the nineteenth and early twentieth centuries. Compared to other historic pharmacies, it retains a high degree of integrity, particularly with regard to the elements of the building that are unique to nineteenth-century pharmacies. The 1851 interior of the main retail pharmacy remains intact, and the property contains rare examples of well-preserved work spaces associated with the wholesale pharmacy and small-scale drug manufacturing. Although the storefront was re-designed in the 1930s using some historic materials stored in the building, the footprint of the buildings and the exterior of the upper stories exhibit only minor alterations, most of which affect the rear elevation.

Describe Present and Historic Physical Appearance.¹

Summary Description

Located in Alexandria, Virginia, the Stabler-Leadbeater Apothecary Museum comprises two early nineteenthcentury commercial buildings associated with a pharmacy and wholesale drug business run by the Stabler and Leadbeater families in this location from 1805 until 1933. The building at 107 South Fairfax Street is the older

¹ The fieldwork for this nomination was completed in 2014. With the exception of the replacement of the roof on 107 South Fairfax Street (which is noted below), no major alterations occurred between 2014 and 2020, when the nomination was finalized.

of the two, and was built for Edward Stabler in 1805 to house his apothecary shop. The adjacent building at 105 South Fairfax Street was constructed in 1815, and Edward Stabler acquired it in 1829.

The three-and-one-half-story, three-bay, brick buildings are separated by a party wall and stand within a row of four nineteenth-century brick buildings, all of which were at one time associated with the Stabler-Leadbeater pharmacy business. The present storefronts are the third in the buildings' history and date to the late 1930s. Designed in the mid-1930s by architect Thomas T. Waterman based on architectural evidence, both storefronts incorporate early nineteenth-century woodwork that was stored in the buildings. The upper stories of 107 South Fairfax Street are typical of Federal-style commercial architecture, while the upper stories of 105 South Fairfax Street reflect the influence of the Greek Revival style.

The interior of the first-floor shop in 107 South Fairfax Street is an outstanding example of a nineteenth-century retail pharmacy. Most of the built-in shelving, counters, and furniture were installed in or before 1851, with some display furniture added in the late nineteenth century. The buildings' upper floors illustrate the behind-the-scenes operations of a retail pharmacy and small-scale wholesale drug company. Historically used as work and storage areas, these spaces have minimal interior finishes and contain a wide variety of built-in shelving, work counters, and office furniture associated with the Stabler-Leadbeater business. The attic of 105 South Fairfax Street features an early nineteenth-century hoist used to move goods between the floors of the building.

Site and Setting

The Stabler-Leadbeater Apothecary Museum is located on the west side of South Fairfax Street in downtown Alexandria, Virginia, less than one block from the city's courthouse square, which has served as the site of the city's government since its founding in 1749. Directly across the street from 107 South Fairfax Street is Swift Alley, which leads east to the Potomac River and historically provided a direct route from the building to the riverfront wharves.

The façades of 105 and 107 South Fairfax Street abut the existing sidewalk, and the rear elevations face a small area in the interior of the block that is paved in poured concrete. The buildings stand in the middle of a row of four attached commercial buildings that extends south from the corner of King Street and South Fairfax Street. At various times during the late nineteenth and early twentieth centuries, the Stabler-Leadbeater business occupied the buildings immediately to the north and south, but neither building is part of the Stabler-Leadbeater Apothecary Museum. Most of the other buildings in the block were constructed in the nineteenth or early twentieth century as commercial buildings or dwellings. An office building constructed in 1973 stands to the west of the buildings.

107 South Fairfax Street (1805)

Exterior

The brick commercial building at 107 South Fairfax Street stands three-and-one-half-stories tall on a randomrubble stone foundation. The front (east) elevation features Flemish bond and a four-course, corbelled brick cornice. The rear and side walls are constructed using three-course common bond; the rear elevation has a threecourse, corbelled brick cornice. The side-gable roof has half-round metal gutters and slate shingles that were installed in 2015 to replace the previous slate roof. The chimney rises through the west slope of the roof, near the building's southwest corner.

The symmetrical façade incorporates a first-floor storefront, three windows on each upper story, and a centered, front-gable dormer. The storefront, which was installed in 1936-1938 and designed by architect Thomas T. Waterman, comprises two shop windows flanking a central, recessed door with transom, all set within a wood

surround. The cornice of the storefront has a wide frieze band and a concave curve at each end. Reeded pilasters with molded capitals sit on either side of the thirty-light, fixed windows. The three center columns of panes in each window curve outwards. Two stone steps lead up to the doorway, which features paneled jambs and a leaded transom. The double, six-light-over-one-panel wood doors curve inward and are the only early nineteenth-century component of the storefront. The second- and third-story window openings have stone sills and brick flat arches that extend four brick courses above the opening. The windows on the upper stories and in the dormer are six-over-six wood sash. While the storefront is constructed in the Colonial Revival style, the upper stories convey the original Federal-style design of the building.

On the rear elevation, a narrow, one-story, brick addition constructed circa 1830 extends across the full width of the first story. The east wall of an adjacent building (demolished in the mid-twentieth century) originally formed the west wall of the addition; a vertical seam, a brick arch, joist pockets, and other marks in the addition's west wall are associated with the adjacent building. The roof of the addition slopes down from south to north, with its highest point roughly in the middle of the second story. The tall parapet (approximately three feet tall) is capped with concrete and metal. Sanborn Fire Insurance maps indicate that in the early twentieth century, the addition had a glass roof.²

Like the front elevation, the rear elevation has three evenly spaced windows on each of the upper stories. The openings have stone sills and flat arches that are one brick high. Non-historic, single-light, fixed windows occupy the window openings; the third-story windows are boarded on the exterior. Pintles that once held metal shutters are visible next to many of the rear window openings.

Interior

All levels of 107 South Fairfax are undivided on the interior. The first floor functioned as the main retail space for the Stabler and Leadbeater families' pharmacy business. The basement, the second and third floors, and the attic are unfinished spaces that were used for storage, packaging merchandise, and compounding medicines.

Basement

The basement of 107 South Fairfax Street has herringbone brick floors and random-rubble stone walls; on the ceiling, the joists and the undersides of the floorboards for the first floor are exposed. The walls and joists are whitewashed. The north and west walls each feature a brick relieving arch with stone infill. At the west end of the south wall, a brick relieving arch for the chimney abuts the foundation wall. All of the original ceiling joists are sistered with modern lumber to compensate for structural weakness as a result of termite damage.

A door opening in the north wall provides access to the basement of 105 South Fairfax Street. A bricked-in doorway that led to a former bulkhead entrance is located in the east (front) wall; a window opening, also bricked in, is situated to the south of the bricked doorway. The west (rear) wall has two window openings with brick light wells that are covered by the rear addition. Non-historic wood bars set within a wood frame fill the window openings. A section of historic wood trim with an inside bead remains on the north window.

² Sanborn Map Company, *Insurance Maps of Alexandria, Alexandria County, Virginia* (New York: Sanborn Map Company, 1907, 1912, 1921).

In the northwest corner is a set of enclosed, straight stairs that lead to a trap-door opening on the first floor. The stairs and enclosure are constructed of salvaged wood, including two glazed cabinet doors. At the center of the basement is a circular brick well that originally extended to a depth of approximately thirteen feet.³

First Floor

The first floor is an undivided space with wood plank flooring, plastered brick walls, and a plaster ceiling. A wide arched opening separates the main space from a narrow rear addition that was constructed circa 1830. Built-in shelves, drawers, and counters run parallel to the north and south walls, creating a wide center aisle. The opening between the two south counters is roughly centered, while the opening in the north counters is located closer to the front of the building and lines up with a doorway leading to 105 South Fairfax Street.

Built in the Gothic Revival style, the cabinets and counters are associated with William Stabler and John Leadbeater's renovation of the shop in 1851. Most of the early nineteenth-century trim and built-ins were removed during the 1851 renovation, but a few elements remain. The ceiling medallion, a segment of wood chair rail in the cabinet at the southwest corner of the main room, and a piece of baseboard behind drawers on the south wall may be original to the building. The paneled wood intrados in the arched opening at the rear of the first floor and the paneled wood door and frame of the southwest cabinet probably date to circa 1830, when the rear addition was constructed. The metal strongbox in the southwest corner and the wood panel in the hatchway also pre-date the 1851 renovation.⁴ A chimney and fireplace at the west end of the south wall likely survived the 1851 renovation, but the owners later removed the fireplace, probably in the early twentieth century. The chimney stack may remain encased in plaster at the rear end of the built-in shelves along the south wall.

The counters feature decorative woodwork on the sides that face the center aisle. Engaged columns with crenellated capitals frame blocks of three panels and six lancet arches. Marble slabs are set into or on top of the wood countertops on the south counter. At the front (east) end of the south counter is a countertop partition constructed of wood paneling topped by turned wood balusters. Metal and glass display cases cover much of the top surface of the north counter. The drawers behind the counters are generally faced with unfinished wood and have simple drawer pulls. A wood sink is located underneath one section of the south counter.

The wood built-in cabinets that line the north and south walls consist of painted shelves set atop unpainted drawers. A modillioned cornice extends along the top of the shelving. Engaged columns, a scalloped wood arch with a trefoil motif, and scrolled modillions frame each bay of shelves; the bases and capitals for the columns may be later replacements.⁵ Wood cabinets with two-light, awning doors and painted glass were added to most of the bottom shelves during the second half of the nineteenth century; gold-painted letters advertising products sold in the store adorn the cabinets near the front of the store.⁶ The drawers below the shelves are generally faced with unpainted, finished wood and exhibit a variety of decorative drawer pulls from different time

³ Pamela J. Cressey, "Archeological Insight at the Apothecary Shop" (unpublished report, 1985, Alexandria Archeology, Office of Historic Alexandria, City of Alexandria, Virginia), 1.

⁴ Matthew J. Mosca, "Historic [Interior] Paint Finishes Report: The Stabler-Leadbeater Apothecary Museum," prepared for Gadsby's Tavern Museum (November 30, 2010), 5–6, 23, 32–33, 35; John Milner Associates, Inc., *Historic Structure Report [HSR]* for the Stabler Leadbeater Apothecary Museum (prepared for Stabler Leadbeater Apothecary Museum, Alexandria, Virginia, May 2000), vol. 1, 2–12.

⁵ There are several reasons to believe that the existing bases and capitals were installed after 1851. On the westernmost column on the south wall, the capital fits awkwardly, not lining up with either the column below or the arch above. Several other capitals and bases are crooked or placed off-center as well. In addition, the design of the capitals is more consistent with the late nineteenth-century Italianate style than with the mid-nineteenth-century Gothic Revival style, and the capitals and bases on the built-in shelves do not match the columns and bases on the faces of the counters, which are more typical of the Gothic Revival style.

⁶ Mosca, "Historic [Interior] Paint Finishes," 3.

periods. Labels for medicinal substances appear on many of the drawers, typically on the drawer pull or painted onto the drawers themselves. At the west end of the south shelving, a large metal safe occupies the former site of the fireplace.

A built-in desk is centered at the rear end of the room, and its northeast corner abuts the corner of the north counter. The woodwork on the lower portion of the built-in desk is similar to that on the counters, except the engaged columns frame panels of glass painted with the dates 1792 and 1892 to commemorate the centennial of the Stabler and Leadbeater families' apothecary business in Alexandria. A metal-framed panel on top of the desk displays the names of the business from 1792 to 1860; painted in reverse at the bottom right corner of the panel are Edward S. Leadbeater's initials and the date "4-20-[18]63." The back of the desk features drawers, shelves, and a slanted writing surface.

Busts of George Washington and Benjamin Franklin are set on pedestals attached to the wall at the upper corner of the arch that separates the main room from the rear addition. The words "E.S. Leadbeater & Bro., Established 1792" appear in gilt lettering above the arch. Affixed to the solid brick wall at the back of the building are a large clock that rests on a wood bracket and two wood windows with semicircular fan lights and painted glass. Both were likely in place by 1850.⁷

As the Stabler and Leadbeater families expanded their business into adjacent buildings, they added door openings to provide interior access among the buildings. Two door openings in the north wall connect the building to the first floor of 105 South Fairfax Street. The opening near the front (east) of the building was likely created circa 1830, and the 1851 Gothic Revival woodwork on the built-in shelving continues above the door opening. The door opening at the rear of the north wall was added sometime between 1921 and 1941, and currently contains a non-historic metal fireproof door.⁸ In the south wall of the rear addition is a door that leads to a small alcove and a bricked-in opening that provided direct access to 109 South Fairfax Street.

The stairs to the basement are located beneath a board-and-batten door in the floor behind the north counter. Since 1851, the only way to access the second floor of 107 South Fairfax Street has been via the stairs in 105 South Fairfax Street. A hatchway in the ceiling near the front entrance of 107 South Fairfax Street allowed goods to be lowered directly from the second floor to the first floor.

Second and Third Floors

When 107 South Fairfax Street functioned as a pharmacy, the second and third floors were not open to the public. As a result, the interiors exhibit few decorative finishes. Both floors have exposed ceiling joists, unpainted brick walls, and wood plank floors; the window openings have neither trim nor sills. The doors to 105 South Fairfax Street remain in place on both levels. Historic doors covered in metal sheeting occupy these openings. After the business moved out of 109 South Fairfax Street in the 1910s, a second-floor door in the south wall was sealed shut, and a third-floor door opening on the same side was bricked in. Double-door, board-and-batten hatches are located in the floor near the front of the building on both of the upper floors.

The only finished area in the upper floors is located in the southwest corner of the second floor, where plastered brick walls, a riven lath and plaster ceiling, and a window opening with molded wood trim and a wood sill mark the location of a former office. The partition walls enclosing this area were removed prior to 1933. The chimney stack was located within the office, but bins and shelving currently conceal the chimney's location. Probably in the early twentieth century, the owners set up an office area near the front of the second floor. This area is

⁷ Ibid., 6, 25–26.

⁸ The door opening is not shown on the 1921 Sanborn Fire Insurance map, but does appear on Thomas T. Waterman's floor plan in the Historic American Buildings Survey record (VA,7-ALEX-55).

enclosed with a combination of half-height walls constructed of salvaged wood, and chicken wire set within wood frames.

The second floor includes a variety of built-in drawers, cabinets, bins, and counters associated with the Stabler-Leadbeater pharmacy business. Most of the built-ins were constructed in the mid- or late nineteenth century, but some may date to the early nineteenth century. Storage bins and drawers line the north and south walls, and a row of shelves extends perpendicular from the west wall. Several shelves are suspended from the ceiling. Near the center of the second floor is a built-in counter with drawers and shelves below. Much of the floor surrounding this counter has black stains likely associated with its use for mixing chemicals or compounding medicines. The bins and drawers throughout the second floor are labeled with the names of materials used in the pharmacy business. Many of the shelves were constructed with salvaged wood, and some have graffiti written by pharmacy employees. The stairway from the second floor to the third floor is located in the northwest corner and runs along the north wall. Vertical plank siding and a board-and-batten, beadboard door enclose the straight, open-string stairway.

On the third floor, wood shelves are located along the walls, in the center of the room, and above the stair to the second floor. In general, the shelving here is more lightly constructed than on the second floor, and the spacing of the shelves more irregular. Roughly centered in the north wall is a set of steep steps with narrow treads and no risers that leads to the attic. The shelves and stairs are constructed of salvaged wood, some of which displays graffiti or writing associated with the wood's previous use. For instance, the string for the stairs bears the name "Thomas Leadbeater," one of the business owners, painted in black. The chimney stack is visible in the southwest corner, but there is no evidence of a fireplace opening.

Attic

The attic has unpainted brick walls and random-width, wood plank flooring. Along the south edge of the stair opening, two boards are nailed to square wood posts to provide a railing. The chimney stack is located in the southwest corner, and wood shelving extends along the south gable end wall.

The rafters are mortised into the roof ridge using lap joints, and the tie beams are worked into the rafters with half-dovetail joints. An original rafter bisects the dormer, and the two beams on each side of the dormer are continuous through the rafters to the front of the dormer. In the west slope of the roof, near the roof ridge, is a hatch with a metal handle.

105 South Fairfax Street (1815)

Exterior

The brick commercial building at 105 South Fairfax Street shares its south wall with 107 South Fairfax Street. It is similar in form to 107 South Fairfax Street, with a side-gable roof and a symmetrical three-bay façade. The front elevation features Flemish bond brick work, while the side and rear walls are laid in three-course common bond. Corbelled brick cornices adorn both the front and rear rooflines, and a chimney rises from the south end of the west roof slope. In addition to the front dormer, the building also has a centered rear dormer. The roof and dormers are clad in asphalt shingles.⁹ Half-round metal gutters extend the full width of the front and rear elevations.

The front (east) elevation includes a first-floor storefront, three windows on each upper story, and a centered dormer window. Architect Thomas T. Waterman designed the storefront, which was built between 1936 and

⁹ The asphalt-shingled roof was replaced with a slate roof in 2016.

1938 and encompasses a fixed, 24-light, wood window on each side of a recessed door opening with flat wood jambs. On the windows, a horizontal mullion divides the upper eight panes from the lower sixteen panes; paneled wood occupies the area below the two windows. The double, three-panel, wood doors and the leaded transom date to the early nineteenth century, and were found in storage in the building in the 1930s. A molded wood cornice with wide frieze band extends across the top of the storefront. A metal ramp providing wheelchair access to the building covers the stone steps leading to the front door and crosses over a bulkhead entrance beneath the south window. The window openings on the second and third stories are capped by flat sandstone lintels, with a bulls-eye block set beneath the lintel on each side of the window. The prominent rectangular lintels and the bulls-eye blocks reflect the influence of the emerging Greek Revival style. All upper-level windows are six-over-six wood sash.

The rear elevation has openings in the south and center bays; the north bay is windowless. On the first story, the south bay is covered by a brick addition dating to the first half of the twentieth century; its roofline and west wall are continuous with the rear addition on 107 South Fairfax Street. The wall of an adjacent building originally formed the addition's west wall, but that building was later demolished. A bricked-in door opening forms the addition's north wall, and a metal door was added to the west wall in 2004-2006. Non-historic stepped brick walls extend from the north elevation of the addition and shield HVAC equipment. Immediately to the north of the addition is a bricked-in opening that has functioned as a door and window at various times.

Each of the upper stories has two non-historic, single-light, fixed windows that are covered with tin panels on the exterior. The two second-story windows and the north window on the third floor have metal pintles for shutters. The gabled rear dormer holds a six-over-six, wood window that was installed in the 1980s or 1990s to replace an aluminum window.¹⁰

Interior

Originally, all floors of 105 South Fairfax Street were undivided, and the stairs were located in the northwest corner. Ghost marks for the earlier stairs and floor joists are visible on the north wall. In 2004-2006, the existing stairs were removed and replaced with stairs meeting current building codes. Located within a rear stair hall, the new stairs extend from the basement to the second floor and are separated from the main room by a frame and drywall partition wall. Single-leaf, metal doors provide access between the rear stair hall and the remainder of the building. The wood stairs have square newel posts, a solid balustrade, and a round handrail, and the landings feature stained beadboard ceilings and wood floors. The brick chimney stands within the rear stair hall, at the west end of the south wall.

Basement

In the basement, a four-course brick water table topped by a row of header bricks runs along the brick foundation walls, which are laid in seven-course common bond. The brick foundation and the exposed ceiling joists retain some whitewash. The poured concrete floor was laid in the 1980s to encapsulate hazardous materials in the soil and to preserve archeological resources. The basement is currently divided into a rear stair hall, a hallway along the south wall, and three rooms along the north wall. A metal, walk-in safe forms the center room. The frame walls between the hallway and the other two rooms are clad in drywall and have single-leaf, metal doors. Ducts, HVAC equipment, pipes, and communications conduits are located in these rooms and on the ceiling of the hallway.

A brick relieving arch for the chimney and a bricked-in stovepipe hole are located at the west (rear) end of the south wall. At the north end of the rear wall, a relieving arch extends over a circular well and cistern constructed

¹⁰ Cole and Denny Drawings (1989), Sheet A-5, in John Milner Associates, HSR, vol. 2, Appendix J.

of dry-laid brick. Rainfall from the alley and roof was channeled into the exterior portion of the cistern (which is no longer visible from the exterior), then collected in the circular well.¹¹ Near the front of the building, a circular pattern of bricks in the floor marks the outline of a brick shaft. Both the cistern and the shaft were filled with concrete in the 1980s due to the presence of hazardous chemicals in the soil.

A door opening at the east end of the south wall connects the basements of 105 and 107 South Fairfax Street. All other door and window openings, including a former bulkhead door opening in the east wall, and a doorway in the north wall that led to the adjacent building, have been filled with brick or concrete block. The east and west walls each have one bricked-in window opening.

First Floor

The first floor comprises the rear stair hall, a main room that serves as the museum gift shop and reception area, a non-historic bathroom in the northwest corner of the main room, and a small rear addition. The brick perimeter walls are plastered, though much of the plaster in the rear stair hall is missing or deteriorated. The chimney stack is also plastered and features brick corbelling on the west side; there is no evidence of a fireplace opening. The flooring in the main room is wood plank. In 2004-2006, the floor level was raised to be level with that of 107 South Fairfax Street; a wood ramp with metal railings leads up from the front door to the new floor level. The beadboard ceiling in the main room was replaced between 2002 and 2006, but the historic hatch opening was retained.

Two door openings in the south wall provide access to 107 South Fairfax Street: a historic, sliding metal fire door in the main room and a non-historic, single-leaf, metal door in the rear stair hall. A non-historic, single-leaf, metal door set within a historic door opening at the south end of the west wall leads to the rear addition. Two former doorways in the north wall have been bricked in and are not currently visible.

On the east (front) wall, the interior of the storefront features wood trim with a single bead; vertical boards cover the area beneath the wide window sills. The window openings in the rear stair hall feature stone sills and no trim. Non-historic, free-standing shelves line much of the north and south walls in the main room. A dumbwaiter enclosed with vertical beadboard stands just west of the door opening along the south wall, and was likely installed in the late nineteenth or early twentieth century.

Second Floor

On the second floor, the north wall is plastered brick, and the other brick walls are painted. The chimney is painted as well. The brick fireplace in the rear stair hall is the only extant fireplace in the building. It has no trim or mantel, and the brick hearth is covered by the flooring.¹² The floor plan of the main room consists of an open area with a recessed kitchenette along its west wall. The random-width wood flooring was installed in the 1960s, and the ceiling is composed of exposed, unpainted joists and plywood panels that were inserted between the joists to provide additional support for the wood flooring above.

On the south wall is a sliding wood door clad in metal sheeting. Two former door openings in the north wall have been bricked in, leaving no visible seams. There are hatch openings in the floor and ceiling in the center of the main room, near the front of the building. The floor hatch is covered with double, wood, board-and-batten doors, and the ceiling hatch is partially covered by a wood panel that is suspended from the framing for the

¹¹ Pamela J. Cressey, "Archeological Insight at the Apothecary Shop" (ca. 1985) and "Summary of Excavations at the Stabler Leadbeater Apothecary Shop (44Ax44)" (ca. 1989), in John Milner Associates, *HSR*, vol. 2, Appendix E.

¹² John Milner Associates, *HSR*, vol. 1, photo 17.

hatch. The former opening for the dumbwaiter is visible in the ceiling next to the south wall. The window openings in the east and west walls have wood lintels and non-historic wood sills.

Third Floor

The third floor, which is undivided, has wood plank flooring, unpainted brick walls and chimney, and exposed ceiling joists. The board-and-batten hatch in the floor may be original, though the hinges have been replaced. The stairs from the second floor were removed in 2004-2006; since that time, the only access to the third floor is through 107 South Fairfax Street.

On the south wall, a historic, single-leaf, metal door leads to 107 South Fairfax Street; there is graffiti written by workers at the pharmacy on both sides of the door. A former door opening in the north wall has been removed. The window openings on the east and west walls have wood lintels but lack both trim and sills. Shelving associated with the Stabler-Leadbeater pharmacy business lines the walls and extends perpendicular from the east wall; additional shelving is suspended from the ceiling joists. The hoist apparatus for the dumbwaiter is located next to the south wall.

Attic

The interior of the attic is unfinished, except for random-width wood plank flooring. The brick in the north gable wall is irregularly laid, with many areas of patched mortar. In contrast, the brick in the south wall, which originally served as the exterior wall for 107 South Fairfax Street, is regularly and neatly laid. The rafters are attached with lap joints at the ridge, and the collar beams are mortised into the rafters with half-dovetail joints. The two dormer windows have no interior trim.

A large wood hoist mechanism that likely dates to the early nineteenth century extends approximately seven feet across the hatch opening, which is the only means of access to the attic. The drum of the hoist is attached to two chamfered posts, one on each side of the hatch. Each post rests on a wood block that is attached to the floor joists; at the top, the posts are anchored to the tie beams. A large spoked wheel at the south end of the hoist was used to turn the drum. Metal, V-shaped guides along the wheel's felloe held a rope that looped over the wheel, then hung down to the third floor through holes in the attic floor.¹³

Historical Evolution

Stabler-Leadbeater Era, 1805–1933

Between 1805 and 1933, the Stabler and Leadbeater families made several changes to 105 and 107 South Fairfax Street in order to accommodate their growing business and changing architectural styles. The most significant exterior changes were the replacement of the storefronts and the construction of the rear additions. On the interior, they added new door openings between buildings and altered the main shop space on the first floor of 107 South Fairfax Street.

In the early nineteenth century, both buildings had Federal-style storefronts that incorporated curved windows and paneled wood doors and jambs. No images of the original 107 South Fairfax Street storefront remain, but a photograph of the original storefront for 105 South Fairfax Street shows a central door flanked by bow windows with three-paneled shutters. Each window has a molded wood cornice with frieze band, and there is no trim around the doorway. In 1869, Edward S. Leadbeater removed the existing storefront on 107 South Fairfax

¹³ See photograph #20 in the HABS record (VA,7-ALEX,55).

Street and replaced it with an Italianate-style storefront.¹⁴ In the 1870s, he installed a similar storefront on 105 South Fairfax Street. These storefronts, which are documented in historic photographs, incorporated bay windows on either side of centered, two-light, double doors with star-shaped motifs in the lower panel. Projecting cornices with wide frieze bands and decorative woodwork typical of the Italianate style extended across the top of the windows and transoms. On 107 South Fairfax Street, a large mortar and pestle was attached to the arch in the center of the cornice. These storefronts remained in place when the business closed in 1933. Elements of both the Federal and Italianate storefronts—including doors and shutters—remain in the Stabler-Leadbeater Apothecary Museum's collection. [Figure 1, circa 1870 photo shows both eras of storefronts]¹⁵

During the period that the buildings functioned as a pharmacy, the rear elevation of 107 South Fairfax Street featured twelve-over-twelve wood windows on the second floor, and eight-over-twelve wood windows on the third floor.¹⁶ In 1933, the rear second-story window openings on 105 South Fairfax Street held six-over-six, wood windows that were not original to the building; single-leaf metal shutters covered the windowless third-story openings.¹⁷ Twelve-light, eight-light, and six-light window sashes stored in the buildings may be the original rear windows. The owners installed metal shutters on the rear windows sometime in the nineteenth century.

Circa 1830, the Stablers built a narrow, one-story addition at 107 South Fairfax Street, filling the space between the main building and the property line. Paint analysis shows that the earliest layer of paint in and around the arch between the original building and the addition date to circa 1810-1830.¹⁸ The expansion was likely connected to the Stablers' acquisition of 105 South Fairfax Street in 1829, which made it possible for them to build up to the rear property line yet still have a small outdoor space behind the building. The addition may have been constructed with a skylight to provide natural light for the prescription desk near the arch; Sanborn Fire Insurance maps show that a skylight was certainly in place by 1907.¹⁹

Since the first floor of 107 South Fairfax Street served as the main shop for the Stabler-Leadbeater pharmacy, the owners focused most of their interior improvements on this space. The first known changes occurred in conjunction with the acquisition of 105 South Fairfax Street in 1829 and the construction of the rear addition circa 1830. At this time, the wide arch between the main room and the addition was created, and the original stairs between the first and second floor were likely removed as well.²⁰ In 1851, owners William Stabler and John Leadbeater renovated the main retail space in the Gothic Revival style; these fixtures remain in place.²¹ During the second half of the nineteenth century, the owners added glass cases to the counters and shelves, replaced drawers, added the painted glass and mirrors to the desk at the rear of the shop, and installed gilt lettering with the words "E.S. Leadbeater & Bro., Established 1792" above the arch.

¹⁴ The original newspaper announcement of the storefront improvement in 1869 has not been located, but the text was transcribed by a researcher for the Landmarks Society of Alexandria, which operated the Stabler-Leadbeater Apothecary Museum from 1939 until 2006.

¹⁵ When the owners replaced the Federal-style storefronts in 1869 (107 South Fairfax Street) and in the 1870s (105 South Fairfax Street), they stored the doors, shutters, and some of the wood paneling in the building. These architectural elements remained in the building when it closed its doors in 1933 and continue to be part of the museum's collection.

¹⁶ HABS No. VA,7-ALEX-55.

¹⁷ W. Brown Morton Report (1984), 14, in John Milner Associates, HSR, vol. 2, Appendix D.

¹⁸ Mosca, "Historic [Interior] Paint Finishes Report," 18-21. The addition was built after 1815, since a Mutual Assurance Company drawing from that year shows that the building did not extend to the rear property line (John Milner Associates, *HSR*, vol. 2, Appendix F.

¹⁹ Sanborn Map Company, Insurance Maps of Alexandria (1907).

²⁰ These stairs would have blocked part of the new arch at the rear of the building, and the owners and workers could access the second floor through 105 South Fairfax Street.

²¹ Alexandria Gazette, January 28, 1851, 3.

As the business expanded into adjacent buildings, the owners created new door openings on all levels except the attic in order to provide interior access among the buildings. Since some of the chemicals used in the pharmacy business were highly flammable, the interior connecting doors on the upper levels had metal sheeting on the jambs and metal-clad doors in order to prevent the spread of fire.²²

In 105 South Fairfax Street, a ladder stair led from the basement to the first floor and a quarter-turn staircase connected the first, second and third floors. The materials and configuration of the staircase (removed 2004–2006) suggest that it was constructed in the late nineteenth or early twentieth century.²³ The Stablers rented out the first floor from 1829 until 1851 then used it as retail space until the early twentieth century. As a result, the first floor may have once had some built-in shelves or counters. Sanborn Fire Insurance maps suggest that the Leadbeaters converted the first floor into a warehouse or work space sometime between 1912 and 1921, which could account for the lack of interior features in the 1930s, when architect Thomas T. Waterman noted that "none of the interior [of 105 South Fairfax Street] was even finished."²⁴ The Stablers and Leadbeaters used the second and third floors, the basement, and the attic as storage and work space.

Thomas T. Waterman Restoration, 1934–1938

Within a few months of acquiring 105 and 107 South Fairfax Street in 1934, the Landmarks Society of Alexandria²⁵ engaged architect Thomas T. Waterman to restore the buildings to their early nineteenth-century appearance. Waterman focused his efforts on replacing the Italianate storefronts with ones that he designed to look like the storefronts that were present in the early nineteenth century. Architectural evidence from the surrounding brick provided Waterman with the size of the original storefronts, as well as the size and location of door and window openings. For the design, he gathered evidence from original doors, shutters, and jambs that were stored in the building; most of these materials remain in the Stabler-Leadbeater Apothecary Museum's collection. He used curved, paneled shutters that were in storage to determine the size and curvature of the windows on 107 South Fairfax Street, and installed a pair of curved, glazed, paneled doors from storage that fit in the original door opening. Due to budget constraints, Waterman did not attempt to replicate the original configuration of the 105 South Fairfax Street storefront. Instead, he filled the existing window openings with multi-light windows, and placed early nineteenth-century paneled doors and a leaded transom from storage within the existing door opening.²⁶

Although Waterman drew upon architectural evidence for his designs, he admitted that many elements, including the transom on 107 South Fairfax Street, the wood surrounds, and elements of the windows, were conjectural.²⁷ His designs for the woodwork are likely heavier and more elaborate than the original. For example, in a circa 1870 photograph of the 105 South Fairfax Street storefront before the Italianate renovation, there is no trim around the door opening and the curved windows are surmounted by a nearly flat frieze band

²² Sanborn Fire Insurance maps indicate the presence of fireproof metal doors between the buildings.

²³ John Milner Associates, *HSR*, vol. 1, 2–4 to 2–5.

²⁴ Sanborn Map Company, *Insurance Maps of Alexandria* (1921); Thomas T. Waterman, "Report on the Condition of the Leadbeater Shop," undated, Stabler-Leadbeater Apothecary Museum (SLAM) Archives, 4, Alexandria, Virginia (hereafter cited as SLAM). The 1921 Sanborn Fire Insurance map labels 107 South Fairfax Street as "Retail Drugs" and the other buildings simply as "Drugs," which suggests that 105 South Fairfax Street was no longer part of the retail pharmacy. The reduction in offsite warehouse space following E. S. Leadbeater & Sons, Inc.'s 1916 bankruptcy may have prompted the owners to convert the first floor of 105 South Fairfax Street into storage or work space.

²⁵ At the time that the society acquired the building, it was known as the Association for the Preservation of Alexandria Antiquities. The organization changed its name to the Landmarks Society of Alexandria by 1938.

²⁶ Thomas T. Waterman, "Historical Information," Leadbeater-Stabler Apothecary Shop, HABS No. VA,7-ALEX-55 (May 10, 1941), 1; Thomas T. Waterman to Henry Francis "Harry" DuPont, 3 November 1953, Winterthur Library, Delaware; Thomas T. Waterman, "Report on the Condition of the Leadbeater Shop," undated, SLAM.

²⁷ Thomas T. Waterman, "Report on the Condition of the Leadbeater Shop," undated, SLAM, 2–3.

and a square-edged drip mold. In contrast, Waterman's surrounds extend across the entire façade and feature multiple tiers of molding. Although Waterman based the 107 South Fairfax Street windows on the curvature of surviving shutters, it was unclear whether all shutters survived, how the shutters were configured, or to what building they belonged.

Between acquiring the Stabler-Leadbeater Apothecary shop in 1934 and opening it as a museum in 1939, the Landmarks Society commissioned repairs to the buildings' façades. The slate facing on the dormer at 107 South Fairfax Street was removed and replaced with wood. On the upper stories of both buildings, local brick mason William Hughes removed the exterior paint, replaced damaged bricks in the walls and jack arches, and repointed some areas. In addition, the wood lintels were removed from the basement-level door and window at 107 South Fairfax Street and the openings bricked in.²⁸ On the interior, the openings in the north wall of 105 South Fairfax Street were bricked in, and the gilt lettering above the arch in 107 South Fairfax Street was removed.²⁹

Museum Renovations, 1939–2015

The Landmarks Society of Alexandria, which operated the Stabler-Leadbeater Apothecary Museum from 1939 until 2006, worked to stabilize the buildings and to provide a safe environment for staff, visitors, and the collections. Prior to 1984, the organization replaced the slate roof on 105 South Fairfax Street with asphalt shingles, re-floored some areas, and replaced a ceiling that collapsed in 1955.³⁰ In 1984, repairs were made to the brick foundation at the northeast corner of the basement of 105 South Fairfax Street in order to address water infiltration that threatened the stability of the foundation. This work prompted archeological investigations of both basements that unearthed numerous artifacts. The excavations in the basement of 105 South Fairfax Street also revealed the presence of toxic and hazardous materials that were probably pharmaceutical chemicals that were dumped or spilled in the basement. In order to encapsulate the hazardous materials and preserve the archeological resources beneath the building, the brick shaft and the cistern were filled with concrete, and a concrete floor was laid throughout the basement. Other alterations in the 1980s and 1990s included removing vinyl tile in the first floor of 105 South Fairfax Street and replacing the original windows on the rear elevation of 107 South Fairfax Street with single-light windows.

In 2004-2006, the buildings underwent an extensive renovation in order to improve visitor access, meet building and fire codes, install heating and air conditioning, and upgrade communications systems. The renovation primarily affected the basement, first floor, and second floor of 105 South Fairfax Street. The existing stairs between the basement and second floors were removed and replaced with a code-compliant staircase in a rear stair hall. Wiring and ductwork associated with new HVAC and communications systems were placed in the basement, which was partitioned into three rooms and a side hall. On the first floor, the flooring was raised several inches to be level with the first floor of 107 South Fairfax Street, and a ramp was constructed from the front door to the new floor level. The beadboard ceiling was replaced in kind. In addition, the rear windows on 105 South Fairfax Street were removed, and joists and flooring were reinforced. Exterior changes to 105 South Fairfax Street included placing a movable metal ramp in front of the entrance and installing tin panels in the

²⁸ William Hughes to Alexandria Landmarks Society, Mrs. Robert M. Reese, 29 October 1938 and 7 November 1938, SLAM.

²⁹ Thomas T. Waterman, "Report on the Condition of the Leadbeater Shop," undated, SLAM, 3. The lettering is present in 1933 Associated Press photograph (SLAM Archives) of the shop interior, but not in photographs taken in 1941 for the Historic American Buildings Survey.

³⁰ John Milner Associates, *HSR*, vol. 2, Appendix A, 5. Photographs of the building taken in 1941 show slate shingles on 105 South Fairfax Street, while W. Morton Brown III's 1984 report (*HSR*, vol. 2, Appendix D) indicates the presence of asphalt shingles. The 1955 ceiling collapse may have occurred in the first floor of 107 South Fairfax Street, as portions of that ceiling have been replaced (*HSR*, vol. 1, 2–12; Mosca, "Historic [Interior] Paint Finishes Report," 33).

rear windows.³¹ In January 2015, the Museum re-installed the late nineteenth-century gilt lettering above the archway in 107 South Fairfax Street.

Evaluation of Integrity

The Stabler-Leadbeater Apothecary Museum buildings at 105 and 107 South Fairfax Street retain a high level of integrity of location and setting. Their location remains unchanged since the Stabler and Leadbeater families occupied them. Situated within the Alexandria National Historic Landmark District, 105 and 107 South Fairfax Street stand within a block filled primarily with buildings that were constructed within the period of significance (1805-1933). The east wall of a non-historic, brick office building faces the Museum's rear elevation. Though non-historic, this solid brick wall is similar to the solid brick side elevations of commercial buildings that abutted the rear property line during the period of significance.

The buildings possess a strong association with the history of pharmacy both historically and physically. Their connection with the Stabler-Leadbeater retail and wholesale drug business is well-documented in manuscripts and published materials, and significant elements of the buildings and their contents are unique to the pharmacy business. Most of the built-in cabinets, shelves, bins, and drawers carry the names of medicinal substances, and several of the counters have marble tops that reflect their use for compounding medicines. In addition, the buildings contain nearly all of the materials that were present in the shop and work spaces when the business closed its doors in 1933.

The buildings retain a high level of integrity of design, materials, workmanship, and feeling, particularly on the interior. Most of the interior finishes remain as they were in 1933, and the contrast between the finished first floor and the unfinished basements and upper floors effectively illustrates the distinction between public spaces and work spaces. In 107 South Fairfax Street, the built-in furniture remains virtually unchanged since the business closed in 1933. The building at 105 South Fairfax retains its most important features that are associated with the pharmacy business, including a cistern and well in the basement, a late-nineteenth-century dumbwaiter, built-in shelving on the third floor, and a rare early nineteenth-century hoist in the attic.

Throughout the buildings' history as a museum damaged or deteriorated ceilings and floors have been replaced in kind. Accommodating the buildings' function as a museum has required some alteration to the interiors. Most of these modifications have taken place in 105 South Fairfax Street, particularly in the basement and on the first and second floors, areas that retained few historic interior features associated with the pharmacy and wholesale drug business. The most significant alterations—the construction of new stairs between the basement and second floors, raising the floor height in the first floor, and subdividing the basement—occurred in 2004–2006 as part of a larger renovation that was partially funded by a Save America's Treasures grant, and met the *Secretary of the Interior's Standards for Rehabilitation*. By modifying the less well-preserved spaces in 105 South Fairfax Street, the museum has been able to preserve the interior of 107 South Fairfax Street, which retained significantly more historic architectural features, in a nearly unaltered state.

Overall, the exteriors of the buildings retain integrity of design, materials, workmanship, and feeling. No new additions are present, and the masonry, roof configuration, and fenestration remain largely unaltered. Although constructed outside the period of significance, Thomas T. Waterman's Colonial Revival storefronts are consistent with overall feeling of early nineteenth-century commercial buildings. The design of the storefront at 107 South Fairfax Street is based on architectural research and evaluation, and both storefronts incorporate materials from the early nineteenth-century storefronts from commercial buildings owned by the Stabler and Leadbeater families. Because business owners frequently updated storefront designs and materials to follow

³¹ Ann Cameron Siegal, "Drugstore Cure-All: Renewal of Rickety 200-Year-Old Shop in Alexandria Loaded with Problems," *The Washington Post*, September 23, 2006, F1.

changing fashions, the survival of any materials from early nineteenth-century storefronts is rare. Moreover, even before the Colonial Revival storefronts were installed, the buildings' storefronts were not strongly associated with the history of pharmacy. The façades of nineteenth-century apothecaries and pharmacies typically were indistinguishable from those of other types of businesses; it was the contents of the display windows, symbols such as the mortar and pestle, and the arrangement of the interiors that marked buildings as pharmacies. Other exterior alterations include the asphalt roof on 105 South Fairfax Street and the panels and single-light windows in the rear window openings. Though removed from their original locations, the earlier rear windows and elements of the Italianate storefront remain in the museum's collection, making it possible to see and investigate these elements of the historic exterior.

8. STATEMENT OF SIGNIFICANCE

Certifying official has considered the significance of this property in relation to other properties: Nationally: \underline{X} Statewide:_Locally:

Applicable National Register Criteria:	A <u>X</u> B _ C _ D _
Criteria Considerations	
(Exceptions):	A _B _C _D _E _F _G _
NHL Criteria:	1
NHL Theme(s):	V. Developing the American Economy2. distribution and consumption6. exchange and trade
Areas of Significance:	Commerce; Health/Medicine
Period(s) of Significance:	1805–1933
Significant Dates:	1829, 1851
Significant Person(s):	n/a
Cultural Affiliation:	n/a
Architect/Builder:	unknown; Thomas T. Waterman (restoration)
Historic Contexts:	XII. Business B. Manufacturing Organizations 1. Food, Beverages, and Tobacco (Human Consumption) D. Trade 3. Retail XIII. Science F. Medicine 2. Non-Clinical Specialties

State Significance of Property, and Justify Criteria, Criteria Considerations, and Areas and Periods of Significance Noted Above.

The Stabler-Leadbeater Apothecary Shop in Alexandria, Virginia, is nationally significant for its exceptional ability to convey the history of drug stores in the United States and to reflect the role pharmacies played in American commerce and medicine in the nineteenth and early twentieth centuries. Edward Stabler (1769-1831), a Quaker, established the business in Alexandria, Virginia, in 1792, and constructed the building at 107 South Fairfax Street in 1805. The early history of the business illustrates the establishment of drug stores and pharmacists as integral components of health care in the United States. Like most early American apothecaries, Stabler and his son William mixed—or compounded—many of the medicines they dispensed. Along with Edward Stabler's son-in-law John Leadbeater, who joined the business in 1844, they regularly provided medical diagnoses as well as remedies, reflecting the considerable overlap in the occupations of physicians and pharmacists. The Stabler-Leadbeater business sold medicines, medical supplies, and personal hygiene products not only to local residents but also to doctor's offices, general stores, and a growing number of drug stores in the surrounding areas.

Over the course of the nineteenth and early twentieth centuries, changes in medical treatments, drug manufacturing, and drug laws transformed pharmacists' roles in the production, distribution, and regulation of medicines. Dramatic increases in the number of proprietary (or patent) medicines helped fuel the growth of the Stabler-Leadbeater drug store. The Leadbeaters manufactured and sold their own proprietary medicines, and with more medicines on the market, they were able to increase wholesale drug sales in the decades after the Civil War. As the nineteenth century drew to a close, government regulation, the continued growth of industrialized drug manufacturing, and consolidation in the wholesale drug market, made it difficult for small-scale wholesalers and manufacturers such as the Leadbeaters to remain competitive. At the same time, independent drug stores faced competition from chain stores that carried more products and embraced modern store design and merchandising techniques. In the 1920s, Edward S. Leadbeater, Jr. struggled to remain competitive with large wholesale drug firms and modern, self-service drug stores. In 1933, just days before Edward S. Leadbeater, Jr.'s death, the Leadbeater Drug Corporation filed for bankruptcy and closed its doors.

Thanks to the efforts of local citizens and the American Pharmaceutical Association, the buildings at 105 and 107 South Fairfax Street were preserved intact, with all their contents, including medicines, machinery, the family's library, and a large collection of documents chronicling the history of the business. Despite changes to the storefront and the interior of 105 South Fairfax Street, the Stabler-Leadbeater Apothecary Museum is the most well-preserved and well-documented resource in the United States associated with the history of drug stores between the Early Republic and the Great Depression.

Early American Pharmacy, 1790–1865

The primary responsibility of apothecaries, or pharmacists as they came to be known in the nineteenth century, was to dispense and compound (mix) drugs. In addition, they sold a variety of items related to health or personal hygiene. Since pharmacists often worked with botanical remedies and were thus knowledgeable about plants, they sometimes branched out into selling seeds and plant-based dyes. Likewise, their knowledge of chemistry led them into the sale of paints and varnishes, and their need for glass bottles made window glass a logical sideline. For many pharmacists, the sale of such items constituted the bulk of their business, since it was difficult to make a profit solely on medicines.³²

³² Glenn Sonnedecker, *Kremers and Urdang's History of Pharmacy*, reprint, 4th ed. (Madison, WI: American Institute of the History of Pharmacy, 1986), 293–94; David L. Cowen and William H. Helfand, *Pharmacy: An Illustrated History* (New York: Harry N. Abrams, 1990), 186–87.

Most early American apothecaries and pharmacists set up shop in port cities and in towns that served as trade centers for interior settlements. As the number of pharmacists increased in the late eighteenth and early nineteenth centuries, smaller towns were more and more likely to have a pharmacy. Yet most Americans still lived far from the nearest pharmacy and purchased medicines from physicians or rural merchants, or relied upon folk remedies prepared at home. Despite their small numbers, early American apothecaries and pharmacists played crucial roles in providing medical care. Acting as wholesale druggists, pharmacists supplied medicines to general stores and physicians' offices. Moreover, apothecaries and pharmacists frequently provided some of the same services as physicians, including offering medical advice, diagnosing illnesses, and prescribing medicines.³³

Because there was significant overlap between the responsibilities of pharmacists and physicians, individuals could move relatively easily between pharmacy and medicine. One distinction between the two occupations was in their training: while apothecaries typically trained as apprentices to physicians or to other apothecaries, physicians were more likely to attend medical school. However, even this distinction was blurred in the colonies and in the early United States, where there were few medical schools and most doctors did not hold medical degrees.³⁴ During the Revolutionary War, the US Continental Congress codified distinctions among doctors, surgeons, and apothecaries in its organization of the military medical corps, helping to lay the foundation for the development of American pharmacy as a field that was clearly distinct from medicine or surgery.³⁵

In the first half of the nineteenth century, the work of pharmacists and physicians began to diverge. Following the lead of physicians, pharmacists created their own educational institutions and professional publications. Founded in 1821, the Philadelphia College of Pharmacy offered public lectures aimed at "cultivating, improving and making known a knowledge of Pharmacy, its collateral branches of science, and the best modes of preparing medicines and their compounds...." Pharmacists in New York, Baltimore, St. Louis, and Chicago established similar schools before the Civil War, and a few colleges and universities offered courses in pharmacy as well.³⁶ Although only a small proportion of American pharmacists studied at these colleges and an even smaller number received degrees, these institutions played important roles in defining pharmacy as a skilled medical profession based on scientific knowledge.³⁷ In the mid-1820s, the Philadelphia College of Pharmacy kept practitioners abreast of the latest developments in pharmacy, chemistry, and medicine, while *The Druggist's Manual*, also published by the Philadelphia College, offered a current list of medicines, chemicals, and other items commonly sold by pharmacists, as well as measurement conversions and chemical tables.³⁸ Pharmacists' growing influence and status within the medical professions was evident in their evolving role in writing and publishing the *U.S. Pharmacopoeia (U.S.P.)*, which served as the primary

³³ Sonnedecker, *Kremers and Urdang's*, 153, 155–58, 163, 184, 290–91; Cowen and Helfand, *Pharmacy*, 110; David L. Cowen, "Pharmacists and Physicians: An Uneasy Relationship," *Pharmacy in History* 34, no. 1 (1992): 8–9.

³⁴ Sonnedecker, *Kremers and Urdang's*, 180, 181, 227; Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1982), 40.

³⁵ Sonnedecker, *Kremers and Urdang's*, 164–168; Mary C. Gillett, *The Army Medical Department*, 1775-1818, Army Historical Series (Washington, DC: U.S. Government Printing Office, 1981), http://history.amedd.army.mil/booksdocs/rev/gillett1/default.html, 201

³⁶ Philadelphia College of Pharmacy, *The Druggist's Manual* (Philadelphia: Solomon W. Conrad for the Philadelphia College of Pharmacy, 1826), U.S. National Library of Medicine, http://resource.nlm.nih.gov/61750290R, ix (quotation); Sonnedecker, *Kremers and Urdang's*, 190–95. On the establishment of medical schools in the Early Republic, see Starr, *Social Transformation of American Medicine*, 42.

³⁷ John Eicholtz Kramer, *The First Century of the Philadelphia College of Pharmacy, 1821-1921* (Philadelphia: Philadelphia College of Pharmacy and Science, 1922), http://books.google.com/books?id=fpk-AAAAYAAJ, 143; Sonnedecker, *Kremers and Urdang's,* 227, 229; Gregory J. Higby, "Professionalism and the Nineteenth-Century American Pharmacist," *Pharmacy in History* 28, no. 3 (1986): 117–18, 120.

³⁸ Sonnedecker, Kremers and Urdang's, 192–93; Philadelphia College of Pharmacy, The Druggist's Manual (1826).

reference work for prescribing and preparing remedies. Doctors wrote the first edition of the U.S.P. in 1820, but within thirty years, pharmacists secured official representation in the convention that met to revise the pharmacopoeia.³⁹

The organization of the Union and Confederate medical corps during the Civil War reflected the limitations of pharmacists' efforts to establish themselves as a separate medical profession on the same footing with physicians. During the war, hospital stewards performed the duties of pharmacists. They compounded and dispensed remedies in the field and in hospitals, and managed inventories of medicines and medical supplies. Although military doctors were officers, hospital stewards were noncommissioned officers with limited promotion potential. Near the end of the war, hospital stewards in the Union Army protested their low rank and pay, arguing that their jobs required specialized knowledge and education beyond what was required of other noncommissioned officers. A committee of the Philadelphia College of Pharmacy took up their cause, lobbying Congress to require stewards to pass examinations and to allow them to move into the officer corps. Their efforts were unsuccessful, but laid the groundwork for postwar efforts to implement a system of examinations and licensing for pharmacists.⁴⁰

Between 1790 and 1865, American pharmacists faced rapid changes in the numbers and types of medicines available. The medicines of the seventeenth and eighteenth centuries were not much different from those of the medieval era, and comprised primarily natural substances and simple chemicals. Their purported medicinal qualities were generally based on tradition, anecdotal evidence, and grand—and as it turned out, generally false—theories about disease and the human body.⁴¹ In 1804, a German pharmacist discovered the first alkaloid (the active ingredient in a medicinal substance) when he isolated morphine from opium. Other alkaloid discoveries soon followed, as chemists and pharmacists identified substances such as strychnine, quinine, and caffeine.⁴² At the same time, Americans became increasingly dissatisfied with the widespread use of heroic medicine, which treated illness by bleeding and purging in order to restore the body's balance of fluids. This dissatisfaction contributed to the emergence of new medical theories such as Thomsonian medicine and homeopathy, which in turn placed new remedies on pharmacists' shelves.⁴³

³⁹ Sonnedecker, *Kremers and Urdang's*, 260–64. Pharmacopoeias listed the standard formulas for medicines and provided directions for mixing, or compounding, remedies.

⁴⁰ Michael A. Flannery, *Civil War Pharmacy: A History of Drugs, Drug Supply, and Provision, and the Therapeutics for the Union and Confederacy* (New York: Pharmaceutical Products Press, 2004), 79, 80–89, 173–74. In both the Confederate and Union military forces, medical purveyors were responsible for acquiring and distributing medicines to soldiers and sailors. However, physicians—not pharmacists—filled these positions.

⁴¹ Marvin N. Fischbaum, "Drugs," in *Manufacturing: A Historiographical and Bibliographical Guide*, Handbook of American Business History, vol. 1, ed. David O. Witten and Bessie E. Whitten (New York: Greenwood Press, 1990), 146–47. Most remedies fell into two broad categories: galenicals and chemicals. Galenicals were medicinal plants, animal products, or minerals. The term "galenicals" pays homage to Galen (ca. 131–ca. 201), a Greek physician from the Roman Empire whose organization and classification of remedies continued to influence Western European pharmacy well into the eighteenth century (Cowen and Helfand, *Pharmacy*, 32–34; Sonnedecker, *Kremers and Urdang's*, 19–20, 459). Chemical remedies required some transformation from the original substance found in nature, and derived from the work of Paracelsus (1493–1541) and his followers, who challenged Galen's medical theories. Whereas Galen held that the curative powers of medicines came from their ability to restore imbalances among the four "humors" within the body, the Paracelsians believed that illness resulted from localized, chemical abnormalities within the body and that there was therefore a specific chemical remedy for every illness (Cowen and Helfand, *Pharmacy*, 59–60; Sonnedecker, *Kremers and Urdang's*, 40-45).

⁴² Cowen and Helfand, *Pharmacy*, 124–26; John P. Swann, "The Evolution of the American Pharmaceutical Industry," *Pharmacy in History* 37, no. 3 (1995): 77.

⁴³ Starr, *Social Transformation of American Medicine*, 42; Sonnedecker, *Kremers and Urdang's*, 175–77. Heroic medicine also proved ineffective during deadly epidemics of yellow fever and cholera that ravaged towns and cities in the early decades of the nineteenth century. Between the 1830s and 1850s, physicians gradually retreated from the theory and practices of heroic medicine, yet many of the old remedies remained in widespread use. In their turn away from heroic medicine, orthodox medicine began to differentiate among diseases, prescribed smaller doses, and focused treatment on the specific part of the body that was ill.

The number of patent medicines, also known as proprietary medicines, increased exponentially in the first half of the nineteenth century.⁴⁴ American pharmacists, doctors, and even people with no medical training concocted pills, syrups, and ointments to treat nearly every disease and ailment. These remedies typically contained some combination of botanical substances, chemicals, alkaloids, alcohol, and flavoring, and were far more palatable than the violent treatments associated with heroic medicine. With the expansion of the market economy and improvements in overland transportation networks, makers of patent medicines could distribute their wares across wide areas of the growing country. Because of intense competition among the many varieties of cure-all remedies, manufacturers advertised extensively and creatively. They developed trademark images and memorable names to capture the public's attention, and ran numerous large ads in newspapers, whose numbers swelled in the early nineteenth century.⁴⁵ Retail and wholesale pharmacists played important roles in marketing and distributing proprietary medicines. Advertisements usually identified one or more druggists who sold a particular medicine, a practice that simultaneously provided publicity for the local pharmacy and enabled manufacturers to take advantage of the pharmacist's reputation for medical expertise and for dispensing safe and effective medicines.⁴⁶ Some pharmacists capitalized on the growing demand for patent medicines by expanding their local and regional wholesale drug sales. At the same time, some of the larger wholesale drug firms in port cities and urban areas abandoned retail pharmacy to focus on drug production and wholesale distribution.47

As the drug business expanded so too did instances of fraudulent, contaminated, and diluted medicines. However, there were only feeble attempts at regulation prior to 1865. The issue of drug quality briefly attracted the attention of the federal government in the 1840s, after a string of deaths in the Mexican-American War were attributed to adulterated medicines. The Drug Importation Act of 1848 placed inspectors in six major port cities to prevent the importation of adulterated medicines, but the law proved ineffective. At the same time, many pharmacists were becoming increasingly concerned about drug quality, since it was difficult for them to dispense safe remedies when the strength, purity, and quality of pre-packaged medicines, alkaloids, and other drugs varied widely. In 1852, they banded together to form the American Pharmaceutical Association, whose first purpose was "To improve and regulate the drug market, by preventing the importation of inferior, adulterated, or deteriorated drugs, and by detecting and exposing home adulteration."⁴⁸ In its early years, the association had little effect on drug quality, and adulteration remained common. However, the founding of the association was a significant step towards self-regulation, and presaged pharmacists' later role in ensuring drug purity and safety.

Stabler & Leadbeater, 1792–1865

Edward Stabler, the founder of the Stabler-Leadbeater pharmacy business, opened his first apothecary shop in Alexandria, Virginia, in 1792, in a building not far from the present site of the Stabler-Leadbeater Apothecary Museum. Born in Petersburg, Virginia, in 1769, Stabler learned the apothecary trade from his older brother, William, who trained as an apothecary as an apprentice to a doctor. When he moved to Alexandria, Edward Stabler turned to family members and fellow members of the Society of Friends, or Quakers, to help him get the

⁴⁴ British patent medicines were readily available in port cities and large towns in colonial America after about 1750. James Harvey Young, *The Toadstool Millionaires: A Social History of Patent Medicines in America Before Federal Regulation* (Princeton, NJ: Princeton University Press, 1961), 3–4, 6–15.

⁴⁵ Young, *Toadstool Millionaires*, 32–43, 165–67.

⁴⁶ Ibid., 42, 167–69.

⁴⁷ Sonnedecker, *Kremers and Urdang's*, 176 [caption].

⁴⁸ Ibid., 198–202 (quotation on 201); James Harvey Young, "Federal Drug and Narcotic Legislation," *Pharmacy in History* 37, no. 2 (1995): 59. This kind of analysis was made possible by the discovery of alkaloids and advances in chemistry. For instance, the purity of opium could be measured by ascertaining the level of morphine.

business started.⁴⁹ Alexandria was an attractive place for Stabler to establish his business. In the last two decades of the eighteenth century, it thrived on the grain and flour trade, and in 1791, the city became part of the District of Columbia, home of the new national capital. Alexandria's trade networks and connection to the national capital offered opportunities for Stabler to develop a successful apothecary shop as well as a wholesale drug business.

In 1805, Stabler purchased the property at 107 South Fairfax Street, then demolished the existing building and constructed the Federal-style, brick building that stands today.⁵⁰ Stabler moved his shop into the first floor and used the upper stories for compounding and packaging remedies, and for storing medicines, supplies, and merchandise. A second-floor office provided Stabler and his successors a private space to manage the increasingly complex business.

Edward Stabler trained his sons to be apothecaries, and in 1819, brought his son William (1795-1852) into the business.⁵¹ William soon took over day-to-day management, while his father, who was also a Quaker preacher, spent more time preaching and writing. After Edward Stabler died in 1831, William Stabler purchased the shop from the other heirs. He trained his younger brothers in the trade, and in 1840, his brother Henry became a partner in the business. After Henry set off on his own in 1844, Stabler entered into a partnership with his brother-in-law, John Leadbeater, the husband of William Stabler's sister, Mary Pleasants Stabler. Born in England, John Leadbeater studied pharmacy before immigrating to the United States in 1829 or 1830.⁵² Before becoming a partner in the Stabler business, Leadbeater studied dentistry in Philadelphia, and worked as an apothecary and dentist in Alexandria. After William Stabler died in 1852, John Leadbeater owned and ran the pharmacy and wholesale drug business until his own death in 1860. Like Edward and William Stabler, he trained his sons to join the family business; his oldest son, Edward Stabler Leadbeater, became a partner in 1857, and took over after his father's death.

The Stablers were well-known in Alexandria not only as apothecaries but also for their efforts to help enslaved people. By the time that Edward Stabler moved to the city in 1792, the Society of Friends opposed slavery on theological and moral grounds. In the 1790s and early 1800s, Quakers in Alexandria disciplined members who owned or hired slaves. They signed petitions to Congress pleading for gradual emancipation and an end to the slave trade in the District of Columbia (which at that time included Alexandria). In the 1790s, Edward Stabler led the Society for the Relief of People Illegally Held in Bondage, a local organization dedicated to aiding and educating enslaved African Americans, convincing whites to oppose slavery, and advocating for changes to the laws governing slavery. In 1804, however, he withdrew from the organization, which he came to see as a

⁴⁹ William Stabler, *A Memoir of the Life of Edward Stabler: Late of Alexandria in the District of Columbia* (Philadelphia: John Richards, 1846), 17–19, 24. https://books.google.com/books?id=z08XAAAAYAAJ. When he first arrived in Alexandria, Stabler boarded with fellow Quakers, and borrowed money from his maternal uncle, William Robinson, a Quaker merchant in Philadelphia, to help start the business. A copy of Stabler's first supply order from Quaker druggist Townsend Speakman, dated June 25, 1792, is in the SLAM Archives. George Griffenhagen and Sarah Becker, "Edward Stabler in Alexandria, 1792–1796," *Pharmacy in History* 39, no. 1 (1997): 19.

⁵⁰ Jenkins, "A Brief History of the Stabler Family and the Stabler-Leadbeater Apothecary Shop of Alexandria Virginia," ed. John G. Motheral, Alexandria Archaeology Publications, Number 26 (Alexandria Archaeology, Office of Historic Alexandria, City of Alexandria, VA, 1994), 17; Dr. Edward R. Cook, William J. Callahan Jr., and Dr. Camille Wells, Dendochronological Analysis of Stabler-Leadbeater Apothecary, Alexandria, Virginia (December 2013), 3. Three sources provide evidence for an 1805 construction date. Local property tax records indicate that the 1806 value of the building was significantly higher than the 1805 purchase price, and Edward Stabler's financial records indicate that in 1805 he purchased numerous building supplies from local iron merchant Charles Slade, including a pulley, nails, screws, and door hardware. Finally, dendrochronological investigation of the wood used to build 107 South Fairfax Street confirms this construction date.

⁵¹ The name of the business changed as the owners and partners changed. A full list of the various names of the business, with dates, is included at the end of Section 8.

⁵² Pharmaceutical Era 17 (1897) 6; J. Ledbetter, Baltimore, Maryland (1830, 380), in Ancestry.com, U.S. and Canada, Passenger and Immigration Lists Index, 1500s-1900s [database on-line] (Provo, UT, USA: Ancestry.com Operations, 2010).

misguided approach to combatting slavery. In the mid-1820s, Stabler argued that political efforts to abolish slavery were counter-productive because they put slaveholders on the defensive, and made them deaf to the moral and religious arguments against slavery.⁵³

Edward Stabler believed that he could better help enslaved people by working on his own to manumit them individually. He and other prosperous Quakers in Alexandria filed freedom suits on behalf of enslaved people. They even purchased slaves in order to free them from bondage. Stabler served as witness to many such transactions, and the family's papers include legal documents proving the free status of several free blacks. Their possession of these papers suggests that the Stablers kept the documents for safekeeping should they be needed in court to prove status as a free person. Several of his sons continued in this work after Edward Stabler's death in 1831. In the 1830s and 1840s, white Virginians increasingly opposed antislavery efforts, and Alexandria became a center of the domestic slave trade. Nevertheless, the younger Stablers continued to purchase and emancipate enslaved people and to serve as witnesses to manumissions. William Stabler signed an 1828 petition to Congress calling for the gradual abolition of slavery in the District of Columbia.⁵⁴ Although Edward Stabler certainly taught his children that slavery was contrary to the Quaker faith, Stabler's first and second wives—who left few written records—likely supported the family's antislavery work and contributed to the children's antislavery education. Both his first wife, Mary Pleasants, and his second wife, Mary Hartshorne, were the daughters of Quaker men who led or established antislavery societies in the late eighteenth and early nineteenth centuries.⁵⁵

From the time that Edward Stabler opened his shop in Alexandria in 1792 through the mid-nineteenth century, the proprietors of the Stabler-Leadbeater apothecary compounded, or mixed, many of the remedies that they sold. In his 1834 advertisement in the city directory for Washington, D.C., William Stabler promised, "Physicians' prescriptions compounded with great care."⁵⁶ To guide them in preparing medicines, Edward and William Stabler and John Leadbeater relied on pharmacopoeias and dispensatories. Edward Stabler's library, which was handed down to his son and son-in-law, included eighteenth-century British works on pharmacy, as well as a first edition of the *United States Pharmacopoeia* (1820) that bears Edward Stabler's signature.⁵⁷ However, most of the books in Edward Stabler's library that were published in or before 1820 were medical treatises, reflecting both the breadth of his knowledge and the range of services he provided. Like most apothecaries and pharmacists of their day, the proprietors of the Stabler-Leadbeater shop performed many services more often associated with doctors, including diagnosing ailments and recommending suitable remedies. In 1805, for instance, a mother wrote Edward Stabler to ask his opinion about whether her twelve-year-old son had the measles and to request a remedy for his fever and vomiting. Although some of Edward

http://www.freedmenscemetery.org/resources/documents/manumissions.shtml (accessed September 23, 2020).

⁵³ Virginia Jenkins, "Edward Stabler, 'A Kind Friend and Counsellor': A Quaker and Abolitionist in Alexandria Virginia: 1790-1830," ed. John G. Motheral, Alexandria Archaeology Publications, Number 27 (Alexandria Archaeology, Office of Historic Alexandria, City of Alexandria, VA, 1995), 1-15; A. Glenn Crothers, "Quaker Merchants and Slavery in Early National Alexandria, Virginia: The Ordeal of William Hartshorne," *Journal of the Early Republic* 25:1 (Spring 2005): 51-70; Stabler, *Memoir*, 39, 109-111.

⁵⁴ Jenkins, "Edward Stabler," 2-4, 17; Crothers, "Quaker Merchants," 66-68. The archival collections of the Stabler-Leadbeater Apothecary Museum contain several examples of emancipation documents, bills of sale for enslaved people that members of the Stabler family purchased in order to manumit, and documents proving the free status of three free black men. Additional examples of the Stablers' participation in manumissions and freedom suits can be found in "Historical and Genealogical Resources: Slave Manumissions in Alexandria Land Records, 1790-1863," *The Friends of Freedmen's Cemetery*,

⁵⁵ Stabler, *Memoir*, 14; William Fernandez Hardin, "The Virginia Society for Promoting the Abolition of Slavery," *Encyclopedia Virginia* (Virginia Humanities, December 20, 2019, accessed September 23, 2020); Crothers, "Quaker Merchants," 62-67, 75.

⁵⁶ "William Stabler, Druggist & Pharmaceutist," 1834 City of Washington Directory, in Milner, *HSR*, *Vol.* 2, Appendix H, n.p. Appendix H in the HSR is a collection of photocopied newspaper clippings related to the Stabler-Leadbeater Apothecary business. The clippings are mostly organized chronologically. This particular clipping is located with the articles from the mid-1790s, not with the 1834 articles.

⁵⁷ Eleven of the books listed in the inventory remain part of the Stabler-Leadbeater Apothecary Museum collection. Cowen and Helfand, *Pharmacy*, 100–02; Sonnedecker and Griffenhagen, *Kremers and Urdang's*, 7, 14–16.

Stabler's customers called him "Dr. Stabler," he did not use the title himself. His son William, on the other hand, referred to himself as "Doct. William Stabler" in a 1835 advertisement for his wholesale business, and in other documents. In 1847, Mary Custis Lee, wife of General Robert E. Lee and occupant of nearby Arlington House, addressed John Leadbeater as "Dr. Leadbeater," suggesting continued confusion about the distinction between pharmacist and doctor.⁵⁸

The medicines that the Stablers and John Leadbeater sold changed over the course of the early nineteenth century as a result of scientific discoveries and new medical theories. In 1793, most of the medicinal substances that Edward Stabler had on hand came from plants, animals, or minerals. Only a few chemical substances, such as mercurous chloride (calomel) and magnesia carbonate, appear in his 1793 inventory.⁵⁹ In contrast, William Stabler and John Leadbeater sold a much larger number of chemical medicines, including alkaloids such as strychnine, quinine, and morphine. The growing importance of chemistry to the practice of pharmacy was also reflected in how John Leadbeater and William Stabler described themselves and their business. They tended to use the terms pharmaceutist or chemist, suggesting a more scientific approach to their work than the more antiquated "apothecary." Whereas Edward Stabler advertised "GENUINE DRUGS & MEDICINES" for sale, his successors described the business as a "Drug & Chemical Store" and described the products for sale as "Drugs, Chemicals &c."⁶⁰

William Stabler and John Leadbeater carried an extensive selection of patent (or proprietary) medicines, capitalizing on the ever-growing supply of—and demand for—these medicines. When Edward Stabler first opened his Alexandria shop in the early 1790s, he sold a few patent medicines imported from England.⁶¹ In contrast, William Stabler and John Leadbeater advertised more than one hundred different American patent medicines for sale between 1832 and 1858, including Swaim's Panacea (one of the most popular antebellum patent medicines), Bryan's Pulmonic Wafers, Dally's Pain Extractor, Dr. Kennedy's Medical Discovery, and Rice's Worm Destroying Drops, as well as water from mineral springs such as Saratoga Springs in New York and White Sulphur Springs in Virginia, which similarly promised to cure all ills.⁶² Stabler and Leadbeater also bottled and sold a few of their own proprietary medicines, including Balm of Columbia (1846) and Stabler's Pepper Lozenges (1847).⁶³

Customers who came to the drug store at 107 South Fairfax Street found not only medicines, but also a variety of products related to health and hygiene. From the 1790s through the 1850s, the Stabler-Leadbeater shop sold medical equipment such as syringes (catheters), lancets, surgeon's instruments, and thermometers, as well as toothbrushes, hair brushes, shaving supplies, soap, perfume, eyeglasses, and baby bottles. Some items seemingly had little to do with medical care or hygiene, but were related to the skills, knowledge, or tools of

⁶¹ Griffenhagen and Becker, *Kremers and Urdang's*, 20–23; Edward Stabler Inventory, 1793, SLAM.

⁵⁸ Sonnedecker and Griffenhagen, *Kremers and Urdang's*, 6; "Horticultural" [Landreth seed advertisement], 14 February 1835, in John Milner Associates, *HSR*, Vol. 2, Appendix H; M[ary]. C[ustis]. Lee to John Leadbeater, 1847, SLAM. Mary Custis Lee lived at Arlington House, north of Alexandria, with her husband, Robert E. Lee.

⁵⁹ Griffenhagen and Becker, *Kremers and Urdang's*, 20–21.

⁶⁰ "Edward Stabler, Druggist and Apothecary [advertisement]," 23 March 1796; "William Stabler, Of the late firm of EDW. STABLER & SON [advertisement]," 25 March 1831; "William Stabler, Druggist & Pharmacutist [*sic*]," 1834 City of Washington Directory; and "Horticultural [advertisement]," 16 February 1835. All articles are in John Milner Associates, *HSR*, Vol. 2, Appendix H.

⁶² "Saratoga Water [advertisement]," 7 September 1832; "Freshly Imported Drugs [advertisement]," 21 January 1837; "Drugs, Chemicals, Oils [advertisement]," 17 April 1846, in John Milner Associates, *HSR*, Vol. 2, Appendix H, n.p. The museum has several mineral water bottles in its collection. On the medical and social context for the curative powers of mineral waters, see Charlene Boyer Lewis, *Ladies and Gentlemen on Display: Planter Society at the Virginia Springs, 1790-1860* (Charlottesville, VA: University Press of Virginia, 2001), 68–78.

⁶³ Milner, HSR, Vol. 2, Appendix H, n.p. (9 November 1838 advertisement).

pharmacists; examples include window glass, dyes, paints, varnishes, insect and rodent poisons, and garden seeds.⁶⁴

In addition to the retail pharmacy, Edward Stabler sold drugs and other products wholesale to ship captains, doctors, general merchants, and other apothecaries. William Stabler and John Leadbeater expanded the wholesale portion of the business, aided by the growing demand for patent medicines. At the same time, transportation improvements such as turnpikes and railroads enabled them to ship products more easily, and the proliferation of newspapers gave them the opportunity to advertise their wares more widely.⁶⁵ The growing wholesale and retail operations, combined with increases in the number of available medicines, required more space. In 1829, Edward Stabler purchased the brick building next door at 105 South Fairfax Street, which had been constructed in 1815. The upper stories of the building provided additional space for storing and packaging items for resale, and in the early 1850s, William Stabler expanded the shop into 105 South Fairfax Street.

In 1851, William Stabler and John Leadbeater replaced the outdated, Federal-style interior of the shop at 107 South Fairfax Street with Gothic Revival shop furnishings.⁶⁶ Shelves displaying various medicinal products lined the walls, counters stretched almost the full length of the interior, and drawers beneath the counters and shelves provided storage for medicines and ingredients used to prepare medicines. At the rear of the shop was a large desk that likely functioned as a prescription desk. This interior arrangement was typical of American apothecaries and pharmacies and reflected architectural traditions carried over from Europe and Great Britain.

After John Leadbeater died in 1860, his son Edward S. Leadbeater ran the pharmacy. Under his leadership, the business survived the Civil War, largely because Alexandria was controlled by the Union throughout the war and served as a supply and transportation hub for the Union Army. Although many local residents fled the city after Union forces occupied it in 1861, the Leadbeater family remained and kept the drug store open. Because Alexandria was in Union territory, Edward S. Leadbeater could supply the store with goods from wholesale druggists in Boston, Philadelphia, Baltimore, and New York; in contrast, pharmacists in Confederate territory had difficulty acquiring medicines due to Union blockades. Leadbeater's wartime customers included the US Army Quartermaster in Alexandria, as well as individual soldiers and civilians. He also sold prescriptions to treat contrabands, who were formerly enslaved people who gained their freedom by escaping to Union-held territory such as Alexandria.⁶⁷

Proprietary Drugs, Professionalization, and Regulation, 1865–1930

The Civil War was a turning point in the development of drug manufacturing and in the evolution of pharmacy as a profession. During the war, the sheer number of sick and wounded soldiers created unprecedented demand for medicines to relieve pain and to treat illnesses such as malaria and dysentery. Wartime drug factories owned by the US government and by civilians in the northern states faced the daunting task of producing drugs on a large enough scale to supply the Union forces. After the war, many of the civilian factories expanded production, and some of the men who led government-run drug manufacturing facilities used their expertise to

⁶⁴ Edward Stabler Inventory, 1793, SLAM; John Milner Associates, *HSR*, Vol. 2, Appendix H; Griffenhagen and Becker, *Kremers and Urdang's*, 20–21; 1852 Inventory, SLAM. Soon after opening his shop in Alexandria, Edward Stabler began selling garden seeds, a line of business that his son and son-in-law developed and expanded. In 1796, Edward Stabler imported seeds from Europe, but by 1830, William Stabler established a regular relationship with the Landreth Seed Company of Philadelphia. "Edward Stabler…Fresh Garden Seeds," 23 March 1796; "Edward Stabler & Son," 11 March 1830; "Landreths' Warranted Garden Seeds," 18 March 1834. All advertisements in John Milner Associates, *HSR*, Vol. 2, Appendix H.

⁶⁵ Stabler and Leadbeater Daybooks, SLAM; "Drugs, Chemicals, Paints...," 16 April 1847, in Milner, *HSR, Vol. 2*, Appendix H, n.p.

⁶⁶ Alexandria Gazette, January 28, 1851, p. 3.

⁶⁷ Flannery, *Civil War Pharmacy*, 192–201; Prescription Book, Stabler-Leadbeater Apothecary Museum Collection. Local Quakers and then the U.S. military operated a hospital for contrabands about six blocks from the Stabler-Leadbeater Apothecary.

establish their own factories. By 1900, companies such as E. R. Squibb and Sons, Eli Lilly, Parke Davis, and Upjohn were mass-producing fluid extracts, chemicals, alkaloids, tinctures, and syrups. They also established scientific research labs to monitor drug quality, and expanded their labs in the early twentieth century to conduct research on new drugs.⁶⁸ During World War I, the federal government allowed American companies access to patents owned by German pharmaceutical firms, which were at the forefront of drug research and manufacturing. Developing the processes to manufacture German drugs and to ensure safety and standard potency accelerated the growth of American drug companies and research laboratories in the 1920s.⁶⁹ Because of their scientific approach to drug production and concern for safety and standard potency, these companies became known as "ethical manufacturers," distinguishing them from the more numerous manufacturers of proprietary drugs.

The mass production of common medicinal substances, combined with urbanization and the expansion of rail networks, contributed to a period of astounding growth in the proprietary medicine industry in the late nineteenth century. Between 1859 and 1904, the total value of the proprietary medicines sold in the United States increased from \$3.5 million to \$74.5 million.⁷⁰ Start-up costs were low and regulations virtually nonexistent, which made it an attractive business for aspiring entrepreneurs, who needed only to concoct a remedy then assert—but not prove—that it treated any number of medical conditions. Success depended largely on effective marketing, spurring proprietary manufacturers to innovations in the field of advertising. They placed advertisements in newspapers and shop windows, along roadsides, and on practically any blank space in cities. Proprietary medicine manufacturers also published medical books and almanacs, and organized traveling medicine shows to promote their products.⁷¹

The growth of industrialized drug manufacturing and the proliferation of proprietary medicines contributed to changes in the profession of pharmacy and the role of the pharmacist. Before the Civil War, pharmacists identified compounding as their most distinctive and defining skill. Yet in the decades after the war, when both doctors and patients had an ever-growing array of proprietary and manufactured medicines to choose from, demand for that skill began a slow but steady decline.⁷² At the same time, the high level of competition within the proprietary drug industry tempted manufacturers and wholesalers to dilute, adulterate, or mislabel the medicines that ended up on the shelves of community pharmacies. In the late nineteenth century, the popular press regularly carried stories of untimely deaths due to adulterated or mislabeled drugs, and chronicled examples of morphine- and alcohol-laden proprietary medicines causing addiction and death. Some of these reports not only castigated the manufacturers, but also criticized pharmacists and merchants for risking people's health by selling dangerous or contaminated drugs in order to make money.⁷³ In response to the dangers posed by unregulated proprietary medicines, pharmacists took on the role of verifying the content and purity of

⁶⁸ John P. Swann, "The Evolution of the American Pharmaceutical Industry," *Pharmacy in History* 37, no. 3 (1995): 80; Sonnedecker, *Kremers and Urdang's*, 327–331; Flannery, *Civil War Pharmacy*, 98–114, 205–06, 232–34; Cowen and Helfand, *Pharmacy*, 161–64; John Parascandola, "The Emergence of Pharmaceutical Science," *Pharmacy in History* 37, no. 2 (1995): 70–73.

⁶⁹ Swann, "Evolution of the American Pharmaceutical Industry," 81; Jan R. McTavish, *Pain and Profits: The History of the Headache and Its Remedies in America* (New Brunswick, NJ: Rutgers University Press, 2004), 67–75; Sonnedecker, *Kremers and Urdang's*, 331–32.

⁷⁰ Swann, "Evolution of the American Pharmaceutical Industry," 79; Young, *Toadstool Millionaires*, 110.

⁷¹ Young, *Toadstool Millionaires*, 101–24, 190–202; Susan Strasser, "Sponsorship and Snake Oil: Medicine Shows and Popular Culture," in *Public Culture: Diversity, Democracy, and Community in the United States*, ed. Marguerite S. Shaffer (Philadelphia: University of Pennsylvania Press, 2008), 98–105.

⁷² Higby, "Professionalism," 119; John S. Haller Jr., "With a Spoonful of Sugar: The Art of Prescription Writing in the Late 19th and Early 20th Century," *Pharmacy in History* 26, no. 4 (1984): 174–76; Jonathan Liebenau, *Medical Science and Medical Industry: The Formation of the American Pharmaceutical Industry* (Baltimore: Johns Hopkins University Press, 1987), 6.

⁷³ Young, *Toadstool Millionaires*, 212; Joseph M. Gabriel, "Restricting the Sale of 'Deadly Poisons': Pharmacists, Drug Regulation, and Narrative of Suffering in the Gilded Age," *Journal of the Gilded Age and Progressive Era* 9, no. 3 (2010): 322, 330–334.

medicines. This shift in the role of the pharmacist was evident in the 1882 revision of the *U.S. Pharmacopoeia*, which included detailed information on how to assess potency and determine the contents of medicines, and eliminated many compounded remedies.⁷⁴

To secure the public's trust, pharmacists also supported professional licensing and specialized education, fashioning an image of themselves as scientific experts devoted to protecting public health. Due in part to the efforts of the American Pharmaceutical Association, by 1900, nearly every US state and organized territory had passed legislation creating a board of pharmacy to set and enforce professional standards for pharmacists.⁷⁵ Pharmacists who were already practicing when the laws were enacted were licensed based on their experience and/or an examination, but many state licensing regulations required that new pharmacists attend a school of pharmacy at a college or university. Through licensing and education, pharmacists aimed "to define their trade as both reputable and specialized by defining themselves as unwilling to adulterate due to their code of ethics and their allegiance to science." In doing so, they joined a larger movement among professionals who used these tools to set themselves apart from other occupations and from the general public and to restrict competition.⁷⁶ For pharmacists, licensing and education set them apart from grocers and general merchants who sold proprietary medicines but had little or no understanding of their use, effects, or safety.

Although pharmacists spearheaded efforts to enact licensing laws, they were initially ambivalent about laws regulating the content of medicines, fearing that regulation would adversely affect their businesses.⁷⁷ But around the turn of the twentieth century, calls for federal drug laws grew louder, as temperance activists, the General Federation of Women's Clubs, and other reformers took up the cause. Their efforts were part of the Progressive movement, a spirit of reform that emerged and gained strength in the late nineteenth and early twentieth centuries. Reformers concerned about the safety of medicines echoed common Progressive themes, highlighting the ways in which mass production and unfettered competition in the drug industry led businesses to prioritize profits over people. One of the leading advocates for federal laws to protect the public was Dr. Harvey W. Wiley, who became chief chemist of the U.S. Department of Agriculture in 1883. Along with state and federal agricultural chemists, Wiley conducted research on adulteration and misbranding in the food and drug industries. In the 1880s and 1890s, he proposed several federal laws aimed at ensuring the purity and safety of both food and drugs, but none passed Congress.⁷⁸

In the first years of the twentieth century, Progressive journalists exposed the dangers of proprietary medicines, paving the way for successful drug laws. Building on Wiley's research, they showed that consumers' trust in products such as Lydia Pinkham's Vegetable Compound (Lydia Pinkham House, NHL, 2014), Mrs. Winslow's Soothing Syrup, Peruna, and Liquozone was dangerously misplaced. In 1903, *Ladies' Home Journal* editor Edward Bok decried the presence of harmful ingredients in proprietary medicines and criticized manufacturers for using deceptive advertising. Two years later, journalist Mark Sullivan reported in *Collier's Magazine* that manufacturers' advertising contracts with newspapers included a clause (typically printed in red) stating the contract was void if the state enacted any laws "restricting or prohibiting the manufacture or sale of proprietary medicines." Since newspapers depended on drug advertisements for revenue, this "red clause" prevented many

⁷⁴ David L. Cowen and William H. Helfand, "The Progressive Movement and Its Impact on Pharmacy," *Pharmaceutica Acta Helvetiae* 54, no. 11 (1979): 320–22. The American Pharmaceutical Association began overseeing the revision process for the *U.S. Pharmacopoeia* in 1872. Sonnedecker, *Kremers and Urdang's*, 266–67.

⁷⁵ Higby, "Professionalism," 120; Gabriel, "Restricting the Sale," 316, 322–24, 326–27, 333; David L. Cowen, "The Development of State Pharmaceutical Law," *Pharmacy in History* 37, no. 2 (1995): 49–50; Peter Temin, *Taking Your Medicine: Drug Regulation in the United States* (Cambridge: Harvard University Press, 1980), 22, 24.

⁷⁶ Gabriel "Restricting the Sale," 322 (quotation); Higby, "Professionalism," 120–21.

⁷⁷ Young, *Toadstool Millionaires*, 208–09; Cowen and Helfand, "The Progressive Movement," 319–20.

⁷⁸ Cowen and Helfand, "The Progressive Movement," 317–19; Young, *Toadstool Millionaires*, 227–37; Sarah Stage, *Female Complaints: Lydia Pinkham and the Business of Women's Medicine*. New York: Norton, 1979), 169; Temin, *Taking Your Medicine*, 27–28.

editors from discussing state or federal drug regulation in their publications.⁷⁹ In 1905, Samuel Hopkins Adams wrote a series of scathing articles for *Collier's* arguing that proprietary drugs were "The Great American Fraud." Adams charged that many of these medicines—including ones intended for infants—contained sizable amounts of alcohol, morphine, or cocaine, while other commonly used drugs consisted primarily, or completely, of substances with no medicinal value. Advertisements and labels, Adams noted, not only failed to disclose the presence of dangerous ingredients, but also offered false testimonials, provided misleading information about the drug's medicinal properties, and promised to cure incurable diseases such as cancer.⁸⁰

The publication of "The Great American Fraud" brought national attention to the perils of proprietary medicines, but it was Upton Sinclair's 1906 exposé of the food industry (*The Jungle*) that served as the catalyst for federal legislation. Together, the two publications marshaled widespread support for a law regulating the food and drug industries in the interest of public health, and in 1906, Congress passed the Pure Food and Drug Act.⁸¹ The drug-related provisions of the act required that medicine labels declare any deviations from the standards outlined in the *U.S. Pharmacopoeia* and the *National Formulary*. Labels also had to state the presence and quantity of dangerous and addictive substances such as alcohol, morphine, opium, cocaine, heroin, chloroform, and cannabis. Although the law did not require manufacturers to print the strength or purity of the medicine on the label or to disclose the ingredients, it did say that any such claims had to be true.⁸²

Although the 1906 law set an important precedent for federal intervention in the domestic drug industry and helped reduce the amount of alcohol and narcotics in proprietary medicines, it had several significant limitations. Samuel Hopkins Adams wrote in 1907 that among manufacturers, "I find a general disposition to obey the law in the letter, though to evade it in the spirit." For instance, rather than print accurate statements about a drug's ingredients or potency, manufacturers generally chose not to state that information on labels.⁸³ In addition, the law placed no restrictions on what manufacturers could say about their products in advertisements, nor did it regulate statements about curative effects. In 1912, Congress attempted to remedy the latter omission by enacting the Sherley Amendment, which forbade manufacturers from making false or intentionally misleading claims about what conditions a medicine could treat or cure. However, this law proved difficult to enforce. In an era where the effects of various drugs were only beginning to be evaluated scientifically, it was hard to prove that a manufacturer knew with certainty that a particular medicine did not have the advertised effects. In practice, therefore, the Sherley Amendment only led manufacturers to be vaguer in their therapeutic claims.⁸⁴

Paradoxically, by providing reassurance that proprietary medicines were safe, the 1906 Pure Food and Drug Act and the Sherley Amendment increased consumer confidence and boosted sales. Between 1909 and 1914, the value of proprietary medicines produced in the United States increased by 22 percent to over \$100 million; between 1914 and 1919, the value doubled, reaching over \$200 million. The most notable change in the industry as a result of the federal drug laws was a decline in the number of small-scale drug manufacturers. Between 1914 and 1919, the number of companies producing these drugs decreased even as the number of

⁷⁹ Stage, Female Complaints, 160–62; Young, Toadstool Millionaires, 211–215 (quotation on 211).

⁸⁰ Young, *Toadstool Millionaires*, 217–24; Cowen and Helfand, "The Progressive Movement," 318–19.

⁸¹ Young, *Toadstool Millionaires*, 224–25, 239–40; Cowen and Helfand, "The Progressive Movement," 310.

⁸² Temin, Taking Your Medicine, 30–31; Cowen and Helfand, "The Progressive Movement," 319; Young, Toadstool

Millionaires, 243–244; James Harvey Young, The Medical Messiahs: A Social History of Health Quackery in Twentieth-Century America (Princeton, NJ: Princeton University Press, 1967), 37. The American Pharmaceutical Association began publishing the National Formulary in the late nineteenth century, after many commonly used medicines were deleted from the 1883 edition of the U.S.P. See Sonnedecker, Kremers and Urdang's, 275–76.

⁸³ Young, *The Medical Messiahs*, 44 (quotation); Stage, *Female Complaints*, 183; Temin, *Taking Your Medicine*, 32; "The Food and Drug Act," *The Druggists Circular* 51, no. 1 (January 1907): 22.

⁸⁴ Stage, *Female Complaints*, 172–73, 177–78; Young, *The Medical Messiahs*, 47–50, 55–56; Temin, *Taking Your Medicine*, 32–34.

people working in the drug manufacturing industry rose.⁸⁵ With limited economic resources, the smaller businesses—including retail pharmacists who also did small-scale manufacturing—found it more difficult to maintain drug standards, provide the necessary labeling, and remain competitive. The larger firms, meanwhile, were able to adapt to the new regulations and profit from the public's increased confidence in the safety of their products.⁸⁶

Aside from leading many pharmacists to curtail or abandon the production of proprietary medicines, the 1906 Pure Food and Drug Law and the 1912 Sherley Amendment brought few changes to the profession of pharmacy. In contrast, the Harrison Narcotics Act of 1914 added a new dimension to pharmacists' professional responsibilities. Even after the 1906 law, narcotics such as morphine, heroin, and cocaine were still easy to obtain. The Harrison Narcotics Act required patients to have a doctor's prescription for narcotics and mandated that everyone who imported, distributed, or sold narcotics be licensed by the federal government and complete standard government forms documenting all narcotics sales.⁸⁷ These provisions placed pharmacists in the position of enforcing laws to protect the public from dangerous drugs and continued the trend towards pharmacists taking responsibility for ensuring the safe use of medicines.

As the number of proprietary and manufactured medicines exploded in the late nineteenth and early twentieth centuries, drug stores competed more directly with general merchants, grocers, and department store owners who sold many of the same medicines. Intense competition among wholesale druggists and retailers led to price-cutting, creating a slim profit margin on the sale of manufactured and proprietary drugs. Since pharmacists relied more heavily on drug sales than did other merchants who sold a wider variety of products, price-cutting affected them more severely.⁸⁸

Pharmacists responded to these economic pressures in several ways. Organizations such as the National Wholesale Druggists Association, the National Retail Druggists Association, and the American Pharmaceutical Association endeavored to control price-cutting and protect the interests of small pharmacies and wholesalers, but met with limited success.⁸⁹ In order to draw customers into their stores and increase profits, a growing number of pharmacists began offering food and beverage service. Soda fountains first appeared in drug stores in the 1860s, and their numbers grew steadily in the late 1800s. As the movement to outlaw the sale of alcoholic beverages gained momentum in the early twentieth century and local prohibition laws shut down bars and saloons, drug store soda fountains became popular social gathering places. After the Nineteenth Amendment (1919) to the United States Constitution outlawed the sale of alcoholic beverages nationwide, even more drug store owners installed soda fountains. By 1933, sixty-six percent of all drug stores had soda fountains. Other drug store owners introduced ice cream parlors and lunch counters.⁹⁰

In the early decades of the twentieth century, retail pharmacists faced competition from another source: chain drug stores. In 1900, there were fewer than fifty chain drug stores operated by a handful of companies. Twenty

⁸⁵ Stage, *Female Complaints*, 171–72, 178; Young, *The Medical Messiahs*, 46–47, 53, 57; U.S. Department of Commerce, Bureau of the Census, *Fourteenth Census of the United States Taken in the Year 1920, Volume X: Manufactures*, 669. The statistics compiled by the Bureau of the census show that while the number of people working in the proprietary drug industry increased by 23 percent between 1914 and 1919, the number of proprietors declined by 22 percent and the number of businesses decreased by 15 percent.

⁸⁶ Sonnedecker, *Kremers and Urdang's*, 330; Temin, *Taking Your Medicine*, 26, 34; Cowen and Helfand, "The Progressive Movement," 318; Young, *The Medical Messiahs*, 45–46, 57.

⁸⁷ Temin, Taking Your Medicine, 30; Cowen and Helfand, "The Progressive Movement," 320–322.

⁸⁸ Gabriel, "Restricting the Sale," 317–21, 326; Cowen, "The Development of State Pharmaceutical Law," 52; Sonnedecker, *Kremers and Urdangs*, 295–96; Cowen and Helfand, *Pharmacy*, 186.

⁸⁹ Young, *Toadstool Millionaires*, 106–07; Sonnedecker, *Kremers and Urdang's*, 205–06, 211, 323; Gabriel, "Restricting the Sale," 32; Higby, "Professionalism," 121–22.

⁹⁰ Sonnedecker, *Kremers and Urdang's*, 309; G. G. C. Simms, "Washington City a Half-Century Ago," *The Druggists Circular* (January 1907): 183; U.S. Department of Commerce, *Retail Distribution*, 4.

years later, 315 individuals or corporations operated 1,563 chain drug stores.⁹¹ By 1929, the number of chain drug stores more than doubled, rising to 3,526; 38 percent of these were part of drug store chains of more than one hundred stores.⁹² The rapid growth of chain stores prompted anxious responses from pharmacists, who worried that they could not compete. Young pharmacists and clerks wondered if they would ever have the opportunity to own their own drug store. Responding to these concerns, trade periodicals explored the secrets of the chain stores' success for clues about how independent drug stores could remain competitive. Although drug store chains offered lower prices, contemporary observers attributed their success more to store location and merchandising techniques. The largest and most successful drug store chains set up shop along busy thoroughfares in urban areas, locations that generated a large volume of business. They also adopted modern principles of store design, merchandising, and service. Chain drug store layouts were less crowded, merchandise was placed in attractive and easily accessible displays, and managers emphasized customer satisfaction even at the expense of a sale. By 1920, pharmacists' periodicals and organizations were urging independent drug store owners to adopt these same principles, arguing that better merchandising was the best way to fend off the challenge from chain stores.⁹³

Edward S. Leadbeater and Sons, 1866-1933

Edward S. Leadbeater, who took over management of the drug store in 1860, ran the business in partnership with his brother Thomas from 1869-1892, and then with his sons, Clarence, Edward Jr., and John.⁹⁴ In the decades after the Civil War, increases in the number of mass-produced drugs and proprietary medicines fueled the expansion of the Leadbeaters' wholesale drug business into neighboring states. Edward Leadbeater and his sons also developed their own line of proprietary medicines, including Leadbeater's Beef Wine and Iron, Dr. Murphy's Croup Syrup, Leadbeaters' Whooping Cough Syrup, Wine of Coca, and Leadbeater's Lubricating Liniment. They used their chemical and compounding skills to produce non-medicinal products such as Dr. R. B. Donaldson's Tooth-Powder, Mount Vernon Triple Extract Perfume, and a variety of flavoring extracts. Like many retail pharmacists, the Leadbeaters marketed these products locally, making no effort to compete with national brands such as Lydia Pinkham's Vegetable Compound or Hostetter's Bitters.⁹⁵ In the late 1890s, to accommodate their growing wholesale business and proprietary medicine production, E. S. Leadbeater & Sons leased the building at the corner of King and Fairfax Streets, as well as additional warehouse space.⁹⁶ The Leadbeaters still compounded medicines for individual customers, but the demand for compounded medicines was beginning to decline in the face of industrialized drug manufacturing and the plethora of patent medicines.

⁹¹ Paul C. Olsen, *The Merchandising of Drug Products* (New York: Appleton and Company, 1932), v-vi; "Chain Drug Stores in the United States," *The Druggists' Circular* (May 1920): 161; "Meeting Chain Stores Competition," *The Practical Druggist* 38, no. 12 (December 1920): 22. The information on chain drug stores in 1900 comes from articles written in 1920, and reflect the authors' estimates and known examples of early chains.

⁹² U.S. Department of Commerce, *Retail Distribution*, 10, 14. The table on page 14 includes only those drug stores operated by chains that only operated drug stores; the report notes that 210 chain drug stores were operated by chains that were predominantly composed of other types of stores (9, 10).

⁹³ W. V. Morrow, "Today's Chance for the Drug Clerk," *Drug Trade Weekly* (March 18, 1922): 487–88; "Chain Drug Stores in the United States," 161–63, 182; "Meeting Chain Stores Competition," *The Practical Druggist* (December 1920): 22–25; Sonnedecker, *Kremers and Urdang's*, 298–99; Olsen, v-vi, 141–44; U.S. Department of Commerce, *Retail Distribution*, 5.

 ⁹⁴ From 1866–1869, Edward S. Leadbeater co-owned it with his sister, Anna Slaymaker. In 1869, Edward bought his sister's share in the business, and his brother Thomas became a partner. Thomas (1848–1895) left the business when he became Secretary of the Alexandria Water Company in 1892.

⁹⁵ On Lydia Pinkham's Vegetable Compound, see Stage, *Female Complaints*, and Alexandra M. Lord and Roger Reed, "Lydia Pinkham House," National Historic Landmark Nomination Form (Washington, DC: U.S. Department of the Interior, National Park Service, 2013). James Harvey Young discusses Hostetter's Bitters in ch. 9 of *Toadstool Millionaires*, 125–43.

⁹⁶ John Milner Associates, *HSR*, Appendix G, 5-7; "A Growing Firm," *Alexandria Gazette*, 29 June 1899; *Richmond's Directory of Alexandria for 1897–8* (Washington, DC: Richmond & Company, 1897), 245, in Ancestry, *U.S. City Directories, 1822–1995*, http://search.ancestry.com/search/db.aspx?dbid=2469.

Since the drug business was vulnerable to price-cutting that eroded profits, retail sales of non-medical products were important elements of the Leadbeaters' income. Advertisements for E. S. Leadbeater's store highlighted the availability of paints, oils, varnishes, and glass, as well as personal hygiene products such as hair brushes and soaps. By 1877, Edward S. Leadbeater was a sales agent for two brands of sewing machines, and produced his own brand of sewing machine oil.⁹⁷ To attract customers into the store, Leadbeater replaced the storefronts of 105 and 107 South Fairfax Street with fashionable Italianate storefronts. Installed between 1869 and 1875, the new storefronts featured large windows for displaying merchandise and advertisements.

After Edward S. Leadbeater's death in October 1899, three of his sons—Clarence, Edward Jr., and John—took over the business. In February 1905, they incorporated as E. S. Leadbeater & Sons, Inc., with Clarence as president, Edward Jr. as vice president, and John as secretary and treasurer.⁹⁸ The three brothers were the first owners of the Stabler-Leadbeater pharmacy business who were required to pass an examination in order to practice pharmacy, thanks to an 1886 Virginia law that created a State Board of Pharmacy to examine and license all new pharmacists.⁹⁹ In 1895, John Leadbeater became the first of the store's proprietors to earn an academic degree in pharmacy when he graduated from the National College of Pharmacy at what is now George Washington University in Washington, D.C.¹⁰⁰ All three brothers were active in professional organizations such as the National Wholesale Druggists' Association and the National Association of Retail Druggists.¹⁰¹ In the five years after they incorporated, the Leadbeater brothers aggressively expanded their proprietary medicine and wholesale operations. The firm acquired four warehouses in Alexandria, moved into the building immediately south of 107 South Fairfax Street, and opened a branch office in Washington, D.C.¹⁰² In 1905, they established a separate company to manufacture and distribute Quybon, a medicine that they marketed primarily as a cure for fever and chills.¹⁰³

In the midst of this period of expansion, the Leadbeaters were dealing with the implications of the 1906 Pure Food and Drug Act. Soon after the act was passed, the Leadbeaters enclosed notices in many of their wholesale shipments, explaining that certain goods were omitted because the labels were not yet in compliance with the new federal law. Noting that they faced the "stupendous task" of re-labeling "tens of thousands of packages," the Leadbeaters asked for their customers' patience and affirmed their commitment to complying with the law. In addition to labeling their own products, they also had to wait for manufacturers to send new labels for medicines that the Leadbeaters purchased before the law went into effect. In 1907, they joined other wholesale druggists in Virginia in a letter to manufacturers, pleading with them "to place their goods in a salable shape,

⁹⁷ City Atlas of Alexandria, Va. (Philadelphia: G. M. Hopkins, 1877).

⁹⁸ "Alexandria Affairs," Evening Star (Washington, DC), February 11, 1905, 8,

http://chroniclingamerica.loc.gov/lccn/sn83045462/1906-04-01/ed-1/seq-8/.

⁹⁹ Pharmacy Licenses, SLAM. Because the law granted licenses to practicing pharmacists without requiring them to study at a college of pharmacy or pass an exam, Edward S. Leadbeater did not have to pass an exam.

¹⁰⁰ "Pestle Pounders Graduate," *Washington Times*, May 16, 1895, 1 (Chronicling America, Library of Congress). Although the first John Leadbeater reportedly studied pharmacy in England before immigrating to the United States, it is unlikely that he earned a degree.

¹⁰¹ M. Carey Peter, "The National Wholesale Druggists' Association," *The Western Druggist* 27, no. 4 (April 1905): 221; "National Association of Retail Druggists," *Merck's Report* 12, no. 2 (November 1903): 334; "N.A.R.D.," *Meyer Brothers Druggist* (1902), 109, https://books.google.com/books?id=pelXAAAAMAAJ&pg=PP1#v=onepage&q&f=false.

 ¹⁰² Sanborn Map Company, Insurance Maps of Alexandria, Alexandria, County, Virginia (New York: Sanborn Map Company, 1907); Alexandria, Virginia Directory, 1910 (Alexandria: Hill Directory, 1910), 299 and Boyd's Directory of the District of Columbia for 1909 (Washington, DC: R. L. Polk, 1909), 74, in Ancestry, U.S. City Directories.

¹⁰³ "Charters Granted," The Times Dispatch (Richmond, VA), October 14, 1905, 10,

http://chroniclingamerica.loc.gov/lccn/sn85038615/1905-10-14/ed-1/seq-10/; "Quybon [advertisement]," *Alexandria Gazette*, September 22, 1891, 3, http://chroniclingamerica.loc.gov/lccn/sn85025007/1891-09-22/ed-1/seq-3/; Quybon was first produced in the 1890s by the Gray Medicine Manufacturing Company of Alexandria. See Virginia Secretary of the Commonwealth, *Annual Report of the Secretary of the Commonwealth to the Governor and General Assembly of Virginia for the Year Ending September 30, 1903* (Google Books), 164.

especially the slow-selling ones" by sending new labels or guarantees of compliance with the federal law.¹⁰⁴ Although enforcement of the drug laws was inconsistent, federal officials did catch at least one of E. S. Leadbeater & Sons' suppliers. In 1910, the US government charged the Mecklenburg Mineral Spring and Hotel Company with shipping adulterated mineral water to E. S. Leadbeater & Sons. Government inspectors claimed that the water was "unfit for human consumption, and consisted in part of filthy decomposed and putrid vegetable substances, and deleterious ingredients, rendering the water injurious to health."¹⁰⁵

In 1916, probably as a result of over-expansion in the years after incorporating, E.S. Leadbeater & Sons, Inc. filed for bankruptcy. The company defaulted on the mortgages on their buildings on Fairfax and King Streets, sold their warehouses, and returned unsold merchandise to suppliers.¹⁰⁶ After paying off its creditors, the company reincorporated as the Leadbeater Drug Corporation, with Edward as president and John as secretary and treasurer; Clarence, the oldest brother, retired from managing the company. The reorganized Leadbeater Drug Corporation quickly repurchased the buildings at 105 and 107 South Fairfax Street and 300 and 302 King Street, but made no moves to acquire any of the other buildings.¹⁰⁷ The Quybon Manufacturing Company appears to have folded around this time as well.

Less than a year after emerging from bankruptcy, the Leadbeaters suffered another blow when John Leadbeater died at the age of 46. In the 1920s and early 1930s, Edward S. Leadbeater Jr. had trouble getting the company back on its feet. As wholesale druggists and manufacturers of patent medicines, the company found it difficult to compete with large wholesale firms, industrialized drug manufacturers, and national brands of proprietary medicines.¹⁰⁸ The company produced a line of flavoring extracts, but that effort also struggled in the face of competition from larger manufacturers.¹⁰⁹ In 1930, the Leadbeater Drug Corporation ran afoul of federal drug laws, when the government seized a batch of one of the company's proprietary medicines, alleging that the label carried false statements about the medicine's effects, placing it in violation of the Sherley Amendment (1912) to the 1906 Pure Food and Drug Act.¹¹⁰

The Leadbeater Drug Corporation continued to operate a retail pharmacy in 105 and 107 South Fairfax Street and 300 King Street, but retail sales steadily declined, partly as a result of competition from chain drug stores. Between 1918 and 1926, Rexall and People's Drug Stores established chain stores in Alexandria, including one located just four blocks from the Leadbeater Drug Company.¹¹¹ Other retail pharmacies added soda fountains or lunch counters, offered self-service shopping, and updated displays, storefronts, and interiors to suit modern tastes. In contrast, Edward S. Leadbeater Jr. left the retail shop virtually unchanged since his grandfather and great-uncle had installed new shop furniture in 1851, and he retained the Italianate storefronts built for his father in the late nineteenth century. Nearing the end of his career, he was unable or unwilling to make the changes necessary to remain competitive in twentieth-century wholesale or retail pharmacy.

¹⁰⁵ "Pure Food Laws Broken, Is Charge," *The Times Dispatch* (Richmond, VA), February 24, 1910, 1.

¹⁰⁴ "Goods Omitted on Account of Food and Drugs Act," n.d., SLAM; "Virginia Wholesalers Want Manufacturers to Label and Guarantee Their Goods," *Merck's Report* 16 (January 1907): 25, https://books.google.com/books?id=70M1AQAAMAAJ.

¹⁰⁶ Jenkins, "Brief History," 21.

¹⁰⁷ Washington [D.C.] Herald, March 31, 1917, 4.

¹⁰⁸ Sonnedecker, *Kremers and Urdang's*, 325; Court Order, E. S. Leadbeater & Sons, Inc., No. 149 in Bankruptcy, U.S. District Court for the Eastern District of Virginia, May 15, 1916, SLAM.

¹⁰⁹ Alexandria (Virginia) City Directory, 1926 (Richmond, VA: Hill Directory Co., 1926), 28, and Hill's Alexandria (Virginia) City Directory, 1930 (Richmond, VA: Hill Directory Co., 1930), 33, in Ancestry.com, U.S. City Directories.

¹¹⁰ "17956. Misbranding of Cassapine," in U.S. National Library of Medicine, *FDA Notices of Judgment Collection*, 1908–1966, http://archive.nlm.nih.gov/fdanj/bitstream/123456789/53430/4/FDNJ17956.pdf.

¹¹¹ The first chain drug store listed in the Alexandria City directories was a Rexall at 616 King Street, which appears in the 1918 directory. By 1926, there were two more Rexall stores in Alexandria, as well as a People's Drug Store. *Alexandria, Virginia Directory, 1919* (Alexandria, VA: Hill Directory Co., 1918), 42, and *Alexandria (Virginia) City Directory, 1926, 509–510, in Ancestry.com, U.S. City Directories.*

The onset of the Great Depression in 1929 exacerbated the company's difficulties, but ultimately, it was Edward's declining health that was the catalyst for closing the business. In early 1933, he suffered a stroke, and his condition deteriorated over the ensuing months.¹¹² Clarence Leadbeater, who was in his sixties, had little interest in leaving retirement to run the company again, and no one from the next generation stepped forward to carry on the business. Just days before Edward S. Leadbeater Jr. died on May 15 at sixty-four-years-old the Leadbeater Drug Corporation declared bankruptcy and closed the doors of 105 and 107 South Fairfax Street, marking the end of the Stabler and Leadbeater families' 141 years in the drug business.

The Emergence of Modern Pharmacy, 1930–Present

Between 1930 and 1970, changes in drug regulations, the growing dominance of large pharmaceutical manufacturing companies, and the rise of chain drug stores transformed American pharmacy. Federal laws enacted during this period set the overarching framework for federal drug regulations up to the present. These laws tightened regulations on drug advertising and labeling, and required that new drugs be approved by the Food and Drug Administration (FDA). Starting in 1951, federal law also required a doctor's prescriptions for certain types of medicines (in addition to narcotics), establishing the present distinction between prescription and over-the-counter drugs. Laws requiring drug labels to disclose the active ingredients, combined with the requirement for FDA approval, played an important role in the decline of proprietary medicines. Even if the medicines were safe and effective, the manufacturers of proprietary medicines often lacked the scientific skills and financial resources necessary to meet FDA requirements and seized an ever greater share of the drug market.¹¹³ For pharmacists, the new regulations and the growing dominance of large drug manufacturers spelled the demise of compounding. The percentage of prescription drugs that required compounding plummeted from 80 percent in 1926 to 26 percent twenty years later. By 1962, less than 5 percent of all prescription drugs required compounding.¹¹⁴

By the mid-twentieth century, pharmacists' primary duties were dispensing medications, monitoring patients' use of prescription drugs, advising customers on the use of non-prescription drugs, providing health information, and ensuring compliance with state and federal drug laws.¹¹⁵ Increasingly, pharmacists held academic degrees, as the older pharmacists who were licensed based on examinations or experience retired. In addition, growing numbers of pharmacists worked for chain drugstores, which continued to expand in the mid-twentieth century. Chain stores increased self-service options and introduced a wider range of non-medical merchandise, creating the "super drugstore." In the 1950s and 1960s, many independent drug stores found it difficult to compete with chain drug stores and shut down.¹¹⁶ In the late twentieth century, the number of independent community pharmacies continued to decline.

Architecture of Pharmacies, 1805–1930

From the colonial era through the early twentieth century, the exteriors of American pharmacies were similar in design to other retail establishments and generally followed broader trends in commercial architecture. Between 1850 and 1900, when pharmacists faced growing competition from each other and from other businesses selling proprietary medicines, many store owners remodeled storefronts and interiors to keep up with changing fashions and to attract customers.¹¹⁷ A 1907 article in *Druggists Circular* recalled the effects of such

¹¹² "Paralysis is Fatal to E. S. Leadbeater," *Washington Post*, May 16, 1933, 5, ProQuest Historical Newspapers.

¹¹³ Sonnedecker, *Kremers and Urdangs*', 221–22, 333–34; Young, "Federal Drug and Narcotic Legislation," 61–63.

¹¹⁴ Sonnedecker, *Kremers and Urdang's*, 314–15.

¹¹⁵ Ibid., 311–16.

¹¹⁶ Ibid., 299–300, 306; Cowen and Helfand, *Pharmacy*, 219.

¹¹⁷ William H. Helfand, "The Design of American Pharmacies, 1865–1885," *Pharmacy in History* 36, no. 1 (1994): 28–30.

modifications: "Now all obstructions are taken out; the glass is made in enormous panes, the background of the window is elaborately finished..."¹¹⁸ In addition to being more fashionable, these remodeled storefronts also created more space in the front windows for displaying merchandise and advertisements.

Although the decorative details of drug store interiors changed with the times, the arrangement of fixtures in American pharmacies followed European and British traditions that dated back to the Renaissance. From the eighteenth century through the early twentieth century, apothecary shops and drug stores featured built-in furniture along the side walls, with arrayed bottles of various medicinal substances on the shelves: "...these bottles, matched and orderly, ... convey[ed] an impression of well-organized professionalism." Drawers below the shelves had decorative faces or handles with the names of the medicines contained within. Counters separated customers from the pharmacist's wares, provided space for compounding medicines, and often included an enclosed area where the pharmacist could work out of sight of customers. By the late nineteenth century, many drug stores had a tall prescription desk located at the rear of the store, reflecting the rise in the use of prescriptions as fewer doctors dispensed their own medicines. Drug store owners who installed soda fountains or lunch counters often used the existing counters for serving food and beverages.¹¹⁹

The 1930s saw the beginning of significant changes to the interior arrangement of drug stores. Trade periodicals and published guides advised drug store owners on ways to more effectively display and promote merchandise by modifying the exterior of the building, redecorating the interior, and rearranging shop fixtures. For example, the U.S. Department of Commerce's 1932 report Drug Store Arrangement used survey and sales data to understand customer behavior, and advocated design changes that were intended to entice customers to make purchases. Authors Wroe Alderson and W. H. Meserole took aim at several of the characteristic elements of nineteenth-century drug store design. They criticized the "unbroken lines of counters and cases," especially closed cases, arguing that they made it more difficult for customers to see the merchandise.¹²⁰ Even drug stores that did not offer self-service (though that was a growing trend) could increase sales by making displays more accessible to the customers, giving them the freedom to browse the products for sale. In the modern drug store, prescription departments were integrated into the main retail space, rather than being separated from it by a wall or tall desk. With this arrangement, Alderson and Meserole argued, customers could see the professional and scientific work of the pharmacist. Regarding the design of display furniture, the authors declared: "Heavy cornices, scroll work, carvings, and other decorative nonessentials are now obsolete. They take the customer's attention from merchandise."¹²¹ Gradually, over the course of the mid- to late twentieth century, many drug stores with nineteenth-century interiors either remodeled or closed because the small space and outdated shop fixtures made it difficult to compete with larger stores with modern interiors and displays.

Stabler-Leadbeater Apothecary Museum, 1933–2016

After the Leadbeater Drug Corporation declared bankruptcy in 1933, the bankruptcy trustees announced that the buildings' contents would be sold at public auction. Concerned about the possible loss of early American artifacts and documents, local residents and the American Pharmaceutical Association began raising money to purchase historically significant items that remained in the buildings. The first of seven hours of the July 20, 1933, auction was broadcast on a local CBS radio affiliate, due to popular interest in the shop's history and the fact that it had for many years served the Alexandria citizenry, including many wealthy and noted residents including George and Martha Washington and Robert E. Lee and his family. L. Manuel Hendler, a Baltimore

¹¹⁸ M. P. Gould, "A Glance at Fifty Years of Drug Store Advertising," The Druggists Circular 50, no. 1 (January 1907): 60.

¹¹⁹ Cowen and Helfand, *Pharmacy*, 187–88 (quotation on 188); Helfand, "The Design of American Pharmacies," 30–33; Gabriel, "Restricting the Sale," 329.

¹²⁰ Wroe Alderson and W. H. Meserole, *Drug Store Arrangement*, Domestic Commerce Series, #57 (Washington, DC: U.S. Government Printing Office, 1932), 30.

¹²¹ Ibid., 31 (quotation), 34–35, 107–10.

ice cream merchant who was interested in the history of pharmacy, purchased most of the collection and archives. However, upon hearing that the newly formed Association for the Preservation of Alexandria Antiquities (APAA) planned to purchase the buildings and open them as a museum, Hendler agreed to leave the collections and archives in place and promised to donate them to the APAA for the planned museum.¹²²

The APAA—which soon changed its name to the Landmarks Society of Alexandria—formed just one week before the auction with the goal of keeping the artifacts and documents in Alexandria and saving the buildings. Led by Rebecca Reese, the Landmarks Society worked with local civic and patriotic associations to raise the funds necessary to purchase 105 and 107 South Fairfax Street. George A. Ball of Muncie, Indiana, one of the leaders of the company that made Ball canning jars, donated \$1,000 to the cause. The society also collected donations from local residents, even in the midst of the Great Depression. Finally, in July 1934 the Landmarks Society purchased 105 and 107 South Fairfax Street, ensuring that the collections would remain in the building, just as they were when the business closed.¹²³

After purchasing the buildings, the Landmarks Society began contracting for repairs and engaged Thomas T. Waterman (1900-1951) to restore the storefronts to their early nineteenth-century appearance. Waterman participated in many of the most significant historical restoration and building preservation projects of the first half of the twentieth century. From 1928-1932, he worked as a draftsman, designer, and researcher for the restoration of colonial Williamsburg, Virginia. Although it is difficult to separate Waterman's work at Williamsburg from those of other draftsmen, plans and archival records indicate that he worked on several of the most prominent buildings, including the Wren Building at the College of William & Mary, the Capitol, Raleigh Tavern, and the Governor's Palace.¹²⁴ In his Williamsburg projects, he created accurate reconstructions of buildings and architectural elements as well as conjectural designs based on meticulous research, immersion in the architecture of the era, and his own sense of aesthetics.¹²⁵

Waterman's later historical restorations similarly combined accuracy and conjecture, though the balance between the two varied according to the nature of the project, his clients' preferences, and his own evolving views on the relative merits of each. From 1933-1942, he worked for the National Park Service as the architectural director for the Historic American Buildings Survey (HABS). In addition to directing the documentation of historic architecture, he oversaw the restoration of historic buildings owned by the NPS, including Pierce Mill in Rock Creek Park in Washington, D.C. and three buildings in the Morristown National Historical Park in New Jersey. While he was working for the National Park Service, he also completed projects for private clients. Among these was the storefront restoration of the Stabler-Leadbeater Apothecary Shop, which he completed in 1938 and documented in HABS. His work on the storefronts typified his restoration work. They combined careful research into the configuration of the openings at 107 South Fairfax Street,

¹²² Hendler formally donated the collections and archives to the Landmarks Society (the former APAA) in 1948. Landmarks Society of Alexandria, *Portrait of a Historic Apothecary Shop* (Fairfax, VA: PrintHouse Express, 1993), 14; "Old Leadbeater Collection Goes Under Hammer," *Washington Post* (July 20, 1933), 7; "Drive to Keep Historic Store in Alexandria," *Washington Post* (November 26, 1933), 15.

¹²³ "Citizens Plan to Save Noted Drug Concern," *Washington Post*, July 6, 1933, 5; "Drive to Keep Historic Store in Alexandria," *Washington Post*, November 26, 1933, 15; Executive Committee of the Association for the Preservation of Alexandria Antiquities, pre-printed letter, undated (Summer/Fall 1933), SLAM.

¹²⁴ All of these buildings are within the Williamsburg Historic District (NR #66000925), which was designated a National Historic Landmark in 1975. The Wren Building (NR #66000929) was also designated a National Historic Landmark as an individual building in 1960.

¹²⁵ Fay Campbell Kaynor, "Thomas Tileston Waterman: Student of American Colonial Architecture," *Winterthur Portfolio* 20, no. 2/3 (Summer/Autumn 1985): 103-125.
immersion in the designs of the early nineteenth-century architectural elements in storage in the building, re-use of historic materials, and some conjectural elements based on research and aesthetics.¹²⁶

Other restorations for private clients completed during this time include Decatur House and Dumbarton Oaks in Washington, D.C., Elmwood and Belle Isle in Virginia, Readbourne in Maryland, and period room installations at Henry Francis DuPont's Winterthur Museum in Delaware. His body of work also includes new designs that were inspired by historic architecture. For Caithness, his country house in Port Royal, Virginia, Waterman looked to the historic architecture of the Caribbean and Mediterranean. He designed the museum wing at Dumbarton Oaks and the cottage at Winterthur to be compatible with but distinct from the historic architecture of the property. His philosophy that new additions or new buildings on historic properties should be clearly distinct from but compatible with the historic architecture remains present in the Secretary of the Interior's *Standards for Rehabilitation*. In his published works and in his designs, he articulated other principles that continue to influence the preservation movement today, including appreciation for the evolution of buildings over time, a preference for repair over replacement of historic materials, and the value of adaptive re-use as a means of preservation.¹²⁷

The Landmarks Society opened the Stabler-Leadbeater Apothecary Shop as a museum in 1939. Until the 1990s, the organization used the first floor of 105 South Fairfax Street as a consignment shop; the proceeds from the shop supported operation of the museum and maintenance of the buildings. Due to lack of funds and the need for extensive renovations and repairs, the Landmarks Society closed the museum in 2004. Two years later, the City of Alexandria purchased the buildings and reopened them as a museum.¹²⁸

Comparison with Related and Similar Properties

By illustrating the development of drug stores, the Stabler-Leadbeater Apothecary Shop complements the existing National Historic Landmarks (NHLs) that are nationally significant for their association with the history of pharmacy in the United States; the existing NHLs are associated with the proprietary drug industry and pharmaceutical research. Among historic drug stores listed in the National Register of Historic Places, the Stabler-Leadbeater Apothecary Shop is the only one that functioned continuously as a pharmacy from the early nineteenth century through the early twentieth century. As a result, its history and architecture are able to convey the evolution of drug stores over a long period of time, rather than providing a snapshot of the history of drug stores during one or two decades. Moreover, the Stabler-Leadbeater Apothecary Shop is the only nineteenth-century pharmacy to retain original work and storage spaces with historic built-in shelving and

¹²⁶ Kaynor, "Thomas Tileston Waterman," 117-133; Pauline K. Eversmann, "Evidences of American Home Life: Henry Francis du Pont and the Winterthur Period Rooms," *Winterthur Portfolio* 46:2/3 (Summer/Autumn 2012): 185-187; "Leadbeater-Stabler Apothecary Shop," Historic American Buildings Survey No. VA,7-ALEX, 55- (1941). Pierce Mill (NR #69000014) and the Morristown National Historical Park (NR #66000053) are listed in the National Register of Historic Places. At Morristown, Waterman worked on restorations of the Wick House, the Guerin House, and the Ford Mansion. On HABS and the Colonial Revival, see Annie Robinson, "A 'Portrait of a Nation': The Role of the Historic American Buildings Survey in the Colonial Revival," in *Re-creating the American Past: Essays on the Colonial Revival*, ed. Richard Guy Wilson, Shaun Eyring, and Kenny Marotta (Charlottesville: University of Virginia Press, 2006), 99-117.

¹²⁷ Kaynor, "Thomas Tileston Waterman," 125, 131-140, 142-147. Decatur House (NR #66000858) is a National Historic Landmark, while Dumbarton Oaks (NR #67000028), Elmwood (NR #70000790), Belle Isle (NR #73002031), and Readbourne (NR #73002134), and Winterthur (NR #71000233) are listed in the National Register. The National Register nomination for the Port Royal Historic District counts Thomas Waterman among the town's notable residents. However, the 1970 nomination form does not have information on individual buildings, and the district inventory available on the Virginia Department of Historic Resources mapping system does not include any buildings named Caithness or the Waterman House.

¹²⁸ Clement E. Conger, "150 Year Old Pharmacy in Alexandria Restored as Museum," *Washington Post*, May 21, 1939, T8; John Milner Associates, *HSR*, Vol. 2, Appendix N; Jerry Markon, "Old Apothecary Back in Business," *Washington Post*, November 16, 2006, T14.

drawers, and is the only early nineteenth-century pharmacy that retains a substantial collection of artifacts directly associated with the property.

National Historic Landmarks

Two National Historic Landmarks relate to the history of pharmaceutical manufacturing: the Lydia Pinkham House (NHL, 2014), and the Parke-Davis Research Laboratory (NHL, 1976). The Lydia Pinkham House in Lynn, Massachusetts, is significant during the period 1877 to 1886 as the combined residence and office of Lydia Pinkham, the founder of the Lydia Pinkham Medicine Company, during the important early period of the development of the company. The Lydia Pinkham Medicine Company was one of the most successful and innovative manufacturers of patent medicines.

Built in 1902, the Parke-Davis Research Laboratory in Detroit, Michigan, was the first industrial research laboratory devoted to pharmacology, and is significant in the development of pharmaceutical manufacturing and research. Neither property is associated with the history of how medicines were distributed and sold to consumers.

The Dr. Ephraim McDowell House in Danville, Kentucky, (NHL, 1966) includes an apothecary shop attached to Dr. McDowell's house and office, but the property was not designated for its association with the history of pharmacy. Instead, it is designated for its association with the first successful abdominal surgery. The property is associated with the history of pharmacy during the period 1795-1820, and illustrates the period in the eighteenth and early nineteenth centuries, when the distinctions between physicians and pharmacists were blurred. The Kentucky Pharmaceutical Association dismantled and re-built the deteriorating apothecary building in 1955, and it is furnished with period furniture and artifacts, including a few pieces of equipment used by Dr. McDowell.¹²⁹

Drug Stores in the National Register of Historic Places

The Hugh Mercer Apothecary in Fredericksburg, Virginia, (Fredericksburg Historic District, National Register of Historic Places, 1971) is associated with pharmacy during the colonial era, before independent apothecary shops were common and reflects a different era in the history of pharmacies. Mercer, a physician who was born and educated in Scotland, set up an apothecary adjacent to his doctor's office in Fredericksburg in 1761. In 1776, he left medical practice to become an officer in the Continental Army, and died the following year as a result of wounds sustained during the Battle of Princeton.¹³⁰ The apothecary was restored and reconstructed to the time when Hugh Mercer was working in Fredericksburg and today is open as a historic site.

Most of the surviving nineteenth-century pharmacy buildings listed in the National Register of Historic Places were constructed after 1880 and thus primarily illustrate the history of pharmacy in the twentieth century. Notable among the few early nineteenth-century pharmacies is La Pharmacie Française (Vieux Carre National Historic Landmark District, 1966) in New Orleans, Louisiana. The building was constructed in 1837 for Louis J. Dufilho, one of the first licensed pharmacists in the United States. Dufilho studied pharmacy in his native France, then returned to New Orleans in 1816 and obtained his pharmacy license. The present building housed his pharmacy from 1837 until 1856, then functioned as a pharmacy and doctor's office until at least 1867; by the 1880s, it was no longer a pharmacy. A residence occupied the upper stories of the building, which retains few or no historic built-in fixtures associated with its mid-nineteenth-century use as a pharmacy.

¹²⁹ McDowell House Museum, Inc., "McDowell House: Virtual Tour," http://www.mcdowellhouse.com/tours/virtual-tour/.

¹³⁰ Samuel K. Fore, "Hugh Mercer," *Digital Encyclopedia of George Washington*, The Estate and Gardens of Mount Vernon, http://www.mountvernon.org/research-collections/digital-encyclopedia/article/hugh-mercer/.

Historic Names of the Stabler-Leadbeater Apothecary Shop

Year	Business Name
1792–1819	Edward Stabler
1819–1831	Edward Stabler and Son
1831–1840	William Stabler
1840–1844	William Stabler and Company
1844–1852	William Stabler and Brother
1852–1857	John Leadbeater
1857–1860	J. Leadbeater and Son

- 1860–1865 Leadbeater and Company
- 1865–1869 E. S. Leadbeater and Company
- 1869–1892 E. S. Leadbeater and Brother
- 1892–1905 E. S. Leadbeater and Sons
- 1905–1916 E. S. Leadbeater and Sons, Inc.
- 1916–1933 Leadbeater Drug Corporation

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Previous documentation on file (NPS):

_ Preliminary Determination of Individual Listing (36 CFR 67) has been requested.

X Previously Listed in the National Register. NR# 82001796, Listed November 24, 1982

_ Previously Determined Eligible by the National Register.

X Designated a National Historic Landmark. NR# 66000928, Designated November 13, 1966 as contributing

resource to Alexandria Historic District

X Recorded by Historic American Buildings Survey: #VA,7-ALEX-55

_ Recorded by Historic American Engineering Record: #

Primary Location of Additional Data:

- _ State Historic Preservation Office
- _ Other State Agency
- _ Federal Agency
- _ Local Government
- ____ University
- X Other (Specify Repository): Stabler-Leadbeater Apothecary Museum (SLAM) Archives

10. GEOGRAPHICAL REFERENCES

Acreage of Property: 0.04 acres (1,600 square feet)

UTM References:

Zone: 18 **Easting:** 322619 **Northing:** 4297037

Verbal Boundary Description: The boundary corresponds to City of Alexandria Parcel No. 075.01-08-04.

Boundary Justification: The boundary encompasses the two buildings that have the longest association with the Stabler-Leadbeater business and that retain the highest level of integrity. The boundaries of the lots associated with these buildings have not changed since the early nineteenth century when Edward Stabler owned the properties. The building at 300–302 King Street was associated with the business in the late nineteenth and early twentieth centuries, but is excluded because it no longer retains a high level of historic integrity due to later alterations of the interior and exterior to accommodate a restaurant and apartments. The building at 109 South Fairfax Street is excluded because it was associated with the Stabler-Leadbeater business for only a brief period of time.

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NATIONAL HISTORIC LANDMARKS PROGRAM

July 2, 2021



Stabler-Leadbeater Apothecary Shop Alexandria, Virginia NHL Location Map

The NHL boundary is shown as the solid line on the map above.

UTM Reference:

Zone: 18 Easting: 322619 Northing:

Northing: 429703 Datum: WGS84

Imagery Date: April 11, 2015

Site Plan



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia

SITE PLAN













Figure 1. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia Italianate storefront on 107 S. Fairfax Street (left) and Federal storefront on 105 S. Fairfax Street (right). circa 1870 Courtesy of Special Collections, Alexandria Public Library.



Figure 2. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia Italianate storefronts on both buildings, circa 1900

Courtesy of Special Collections, Alexandria Public Library. Also reproduced as HABS VA,7-ALEX,55-14 in the Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS).



Figure 3. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia. Interior of first floor of 107 S. Fairfax Street, 1928. Edward Stabler Leadbeater Jr. (left), and his cousin, Edward R. Stabler (right). Courtesy of Special Collections, Alexandria Public Library.



Figure 4. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia During reconstruction of storefronts, ca. 1936. Courtesy of Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS), HABS VA, 7-ALEX, 55-1.



Figure 5. "Interior View, Main Floor Shelving and Storage [3rd floor, 107 S. Fairfax Street, looking southwest]," by Jack E. Boucher.
Courtesy of Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS), HABS VA, 7-ALEX,55-25.



Figure 6. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia. "Interior View, Main Floor Shelving and Storage [3rd floor, 105 S. Fairfax Street, looking northwest]," by Jack E. Boucher.

Courtesy of Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS), HABS VA, 7-ALEX, 55-24.





Figure 7. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia. "Leadbeater-Stabler Apothecary Shop," by Tarquin M. Rachelle, 1940. Courtesy of Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS), HABS VA, 7-ALEX, 55- (Sheet 1 of 2).

NPS Form 10-900	USDI/NPS NRHP Registration Form (Rev. 8-86)	
STABLER-LEADBEATER APOTHECARY SHOP		
United States Department of the Interior, National Park Service		



Figure 8. STABLER-LEADBEATER APOTHECARY SHOP, Alexandria, Virginia.

"Leadbeater-Stabler Apothecary Shop," by Tarquin M. Rachelle, 1940.

Courtesy of Library of Congress, Prints & Photographs Division, Historic American Buildings Survey (HABS), HABS VA,7-ALEX,55- (Sheet 2 of 2).



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Front (east) elevation of 105 (right) and 107 (left) South Fairfax Street Photo by Anna Frame, February 2017



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Storefront of 107 South Fairfax Street (east elevation) Photo by Anna Frame, February 2017



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Rear (west) elevation of 105 (foreground) and 107 (background) South Fairfax Street Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia First Floor looking west, 107 South Fairfax Street Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia First Floor, east end of counter, 107 South Fairfax Street Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Basement 107 South Fairfax Street, stairs to first floor Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Basement 105 South Fairfax Street, cistern Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Second floor 107 South Fairfax Street, center work table Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Second floor 107 South Fairfax Street, built-in storage and door to 105 South Fairfax Street Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Second floor 105 South Fairfax Street, floor and ceiling hatches, cabinets, and kitchenette Photo by Anna Frame, October 2016



STABLER-LEADBEATER APOTHECARY SHOP Alexandria, Virginia Third floor 105 South Fairfax Street Photo by Anna Frame, October 2016