Almost 7 decades ago, a young English doctor answered a British Medical Journal ad that called for “strong energetic medical women . . . for country work in Western Canada.” A few months later, 25-year-old Mary Percy Jackson of Birmingham, England, was living in a log shack tending to the medical needs of settlers, Métis and Indians. Her part of northern Alberta was so remote that it did not yet appear on government maps.

Jackson was the first — and only — doctor in the Battle River District when it had no roads, no electricity, no telegraph lines and no services. Before her arrival, finding the nearest doctor involved a 3-day journey south. The district itself is 600 km north of Edmonton.

Called out at all hours, she rode to her patients on horseback, packing her saddlebags carefully to keep her medical equipment from rattling and scaring her gelding, Daniel. In winter she travelled by dogsled and cutter, and only occasionally by automobile. She set fractures, sewed up axe wounds, dealt with difficult deliveries, removed inflamed appendixes and opened abscesses. She battled an outbreak of dysentery, quarantined families stricken with scarlet fever, and cared for Métis and Indians ravaged by tuberculosis.

She also served as district health officer and coroner, and pulled teeth for patients who had tramped through the bush to see her. She attended a Polish woman giving birth in a poplar-pole shack with pigs under the bed and chickens scratching around the dirt floor. She arrived at a Ukrainian

family’s mud hut for a delivery to find the baby already born and the mother energetically scrubbing the floor and planning to get breakfast and then do the washing.

When winter came, Jackson gave up bathing to avoid the need to haul water up the steep bank of the Notikewin River and heat it on a wood stove. At night, she had to get up 3 or 4 times to restoke the stove to keep her medicines from freezing. Once she was called out for an emergency and left her lunch on the table. She returned hours later to find her entire meal — bread, butter, ham, oranges, apples, canned milk and a full teapot — frozen solid.

Still, she wrote to her parents in August 1929, a few weeks after her arrival: “I wouldn’t come back to England for a 1000 dollars just now! I know I’m doing the right job.”

Planned to stay 1 year

Jackson's enthusiasm for medicine in remote areas endures today. Now 93, she has spent almost all of her adult life in northern Alberta, although she initially planned to stay only a year. She served as government doctor in the Battle River District for nearly 2 years before marrying an English-born fur-trader and farmer and moving 100 km further north to Keg River, where she practised for another 43 years.

“I had a passion for medicine and I was seeing all kinds of things that would have had to be treated by specialists,” she said during a recent interview at her home in Manning, the town that grew up in the valley where her log shack once stood alone. “Some of the stuff I did was out of my depth really, but I was the only one there.”

She was also the lone doctor in Keg River. In the midst of the Depression, the Alberta government turned down a petition to appoint her district doctor. She practised any-
way, often without getting paid. Her husband was frequently conscripted as an anesthetist, and her house was sometimes pressed into service as an emergency ward. She drummed up charitable funds to provide drugs to her patients, and had Edmonton doctor friends send her their drug samples. Family Christmases — Jackson had 2 children of her own, and her husband had 3 by his first wife, who died — were inevitably interrupted by emergency calls.

In recognition of what has been called “one of the most unselfish lifetime contributions on Canada’s northern frontier,” she was awarded the Order of Canada in 1990.

Although Jackson retired in 1974, medicine remains her passion. A copy of the latest edition of CMAJ was open on her kitchen table; her well-perused 1920 edition of Gray’s Anatomy is held together with black friction tape. “It is one of the books I have worn out,” she says.

With a trace of an English accent, she talked animatedly of her attempts to discover why Indians never got scurvy, her first use of the new wonder drug penicillin — it cured a baby dying of pneumonia — and the prevalence of iodine-deficient goiter when she arrived in Keg River. “There was one girl whose goiter was so big she couldn’t see to tie her moccasins,” she says.

**Cure for rickets**

She touched on science’s renewed interest in the use of leeches, reminisced about performing delicate neck surgery on a Polish boy on her kitchen table in Keg River, and talked about witnessing the cure for rickets being discovered in England. Under the direction of Dr. Leonard Parsons, children at a Birmingham hospital who had rickets were being fed cod liver oil. “The [ward] sister met us at the door and said, ‘You’ve got it. They’ve stopped crying,’” says Jackson. “And this was after one dose. Once we knew the answer, it was only a matter of months before it became the standard treatment.”

Besides her enduring fascination with medicine, Jackson has also never lost the spunk and verve that helped her surmount the challenges and difficulties of frontier life. Last year, when the National Film Board interviewed her for a half-hour documentary, she ruffled the crew’s urban sensibilities by offering to plug a squirrel that was disturbing their sound recording. “I said, ‘Well, I could go and get the .22,’ which shocked them,” she recalls. “I guess it was the wrong thing to say.” Hungry for meat, Jackson had bought herself a rifle in 1929 to learn how to shoot prairie chickens. Later, she went moose hunting.

In recruiting the young English intern, the Alberta government undoubtedly took advantage of both her love of medicine and her adventuresome spirit. Jackson came to Canada without knowing what she would be paid. “Had I not spent the previous 7 years in hospitals as a medical student and an intern, I would have been inquiring what they were paying, what fringe benefits there were and what the going rate was,” she says.

The going rate was certainly more than the $160 a month she received. The government deliberately recruited foreign female doctors to work in the province’s least developed districts because they could be paid less than Canadians, who had their choice of town openings. Female doctors could also be expected to tend house for themselves.

Jackson soon discovered she was underpaid but she also realized that practising medicine in the Canadian bush was a unique professional opportunity and an enriching personal experience. “The salary is not huge,” she wrote to her parents in July 1930. “But in a year I’ve gained a reputation that I might never have got in a lifetime in England. Above all, the work is worth doing.”

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