

MEDICAL HISTORY

‘A JOURNAL OF OUR OWN’: THE MEDICAL AND SURGICAL OBSERVER AT THE BEGINNINGS OF AN AFRICAN-AMERICAN MEDICAL PROFESSION IN LATE 19TH-CENTURY AMERICA Part One

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(Editor’s Note: This article is part of a two-part series. Part Two will appear in next month’s issue.)

On December 29, 1892, the “Initial Number” of a new medical journal, the *Medical and Surgical Observer* (*MSO*), arrived at the Library of the Surgeon General’s Office in Washington, DC (Figure 1).¹ Issues of many medical journals arrived regularly at this large government medical library where John Shaw Billings’ staff was compiling the *Index Catalogue*, a comprehensive directory to the world’s medical literature. What distinguished the *MSO* from other journals to which the Surgeon General’s Library (predecessor of the National Library of Medicine) subscribed was its ownership, audience, and much of its subject matter. At the top of the *Medical and Surgical Observer* page in the library’s serials-received record book, the clerk or librarian wrote: “Only Negro M.J. in America.”

Miles Vandahurst Lynk, MD, editor of the *MSO*, knew that fact quite well (Figure 2). He had established the *MSO* because he perceived that black physicians dispersed across the country needed a journal of their own. Although the *MSO* survived for only a little over a

year, it served as a vehicle to connect widely scattered and isolated black health professionals with each other, especially in the South, and suggested ways these physicians, dentists, and pharmacists could organize themselves. The *MSO* informed African-American physicians of news and practical ideas in the world of medicine. As more and more blacks entered the white-dominated medical world in an era of growing racism and racial segregation, the new journal did its part, under Lynk’s distinctive style of editorship, to promote the development of an African-American medical profession.^{2,3} It only partially succeeded. Despite words and letters of encouragement and support from fellow African-American physicians, Lynk had a difficult time obtaining paid subscriptions for the journal, yet his editorial call for the organization of a national black physicians’ association did succeed, although not until more than 2 years had elapsed after the *MSO*’s final issue.

Emancipation in the 1860s ostensibly opened many new opportunities for blacks including the chance to enter professions such as the law, the ministry, teaching, and medicine that previously had been the exclusive domain of whites. To educate African-Americans, members of both races established schools, primary through college and sometimes beyond, in the former Confederate states. Among the many educational institutions for blacks founded between 1868 and 1900, 14 offered training for future physicians (Table).⁴⁻¹² From those early schools emerged several hundred African-

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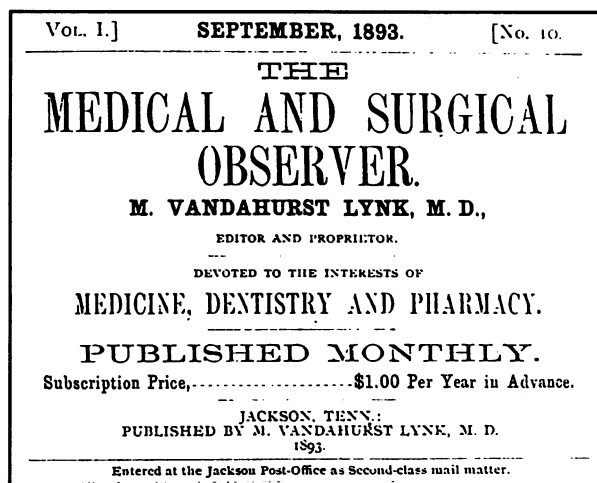


Figure 1. Typical title page of an issue of the *Medical and Surgical Observer*.

American medical practitioners who opened offices in rural areas, towns, and cities primarily in the South.¹³

The end of Reconstruction brought many changes to the region as black and white southerners adjusted to race relations after the abrupt termination of slavery. Shifting, unstable political alliances among whites, the enfranchisement of African Americans and the subsequent struggle for their vote and then for their disenfranchisement by whites, the growth of white and black farm tenancy, the burgeoning of towns with increasing numbers of wage earners of both races drawn from the countryside, and the regular contact of whites and blacks in a less structured nonslave society made for rising tensions between the races. As this anxiety expanded in the final decades of the century, resulting in Jim Crow laws, poll taxes, lynchings, and race riots,^{14,15} and as the medical profession became increasingly overcrowded owing to the uncontrolled proliferation of medical schools,¹⁶ the response black physicians received from their white colleagues was not always cordial. Some white doctors viewed physicians of color as economic competitors and as intruders threatening to upset well-established social and professional networks. They devised ways to close ranks against the newly trained black physicians joining their number.^{11,13,17}

As the profession functioned before the entry of more than a handful of African Americans (a few blacks had practiced in the United States during the antebellum period), physicians competed with one another for patients, but also worked together by consulting on difficult or puzzling cases, assisting when surgery required an anesthetist or extra hands, and organizing medical societies for professional advancement. At society



Figure 2. Miles Vandahurst Lynk in about 1900. (Source: *Indianapolis Freeman*, June 2, 1990.)

meetings, these physicians established fee structures, exchanged ideas and practical knowledge about treatments, presented problem patients for discussion and possible solutions, and socialized with others having common interests and educational backgrounds. Physicians, individually and in groups, also built hospitals where they could apply the modern surgical techniques newly developed in European and American medical centers. National, state, and local medical societies published their organizations' proceedings, papers presented at monthly meetings, and news of members, often in their own societies' medical journals.

Excluded from the usual activities that bound together most American physicians, late 19th century physicians of color often felt isolated, behind the times, and less technically skilled than their white counterparts. They were barred from joining medical societies and thus from the medical, professional, and social exchanges that occurred at meetings,^{11,18-21} forced to turn surgical patients over to white physicians at the doors of hospitals that barred them on the basis of skin color, and unable to depend on white physicians for consultation in difficult cases or on their assistance with surgery and anesthesia. Although African-American physicians presumably kept up with the latest medical thinking by reading the same journals as white physicians, they could not learn about black professional affairs or comfortably express their ideas and experiences relating to issues of race in white-owned and white-oriented journals. Some black practitioners combated these problems with varying degrees of success

TABLE. BLACK MEDICAL COLLEGES, 1868-1923

Name	City	Year Opened	Year Closed	Affiliation
Howard University Medical Dept	Washington, DC	1868	—	None
Lincoln University Medical Dept	Oxford, Pa	1870	1874	Presbyterian (local)
Straight University Medical Dept	New Orleans, La	1873	1874	American Missionary Association
Meharry Medical College Leonard Medical School of Shaw University	Nashville, Tenn Raleigh, NC	1876 1882	— 1918	Methodist Episcopal Baptist
Louisville National Medical College	Louisville, Ky	1888	1912	Independent
Flint Medical College of New Orleans University	New Orleans, La	1889	1911	Methodist Episcopal
Hannibal Medical College Knoxville College	Memphis, Tenn	1889	1896	Independent
Medical Dept	Knoxville, Tenn	1895	1900	Presbyterian
Chattanooga National Medical College	Chattanooga, Tenn	1899	1904	Independent
State University Medical Dept (Kentucky)	Louisville, Ky	1899	1903*	Colored Baptist
Knoxville Medical College University of West Tennessee College of Medicine and Surgery	Knoxville, Tenn Memphis, Tenn	1900 1907	1910 1923	Independent Independent
Medico-Chirurgical and Theological College of Christ's Institution	Baltimore, Md	1900	1908?	Independent

*Merged with Louisville National Medical College.

by attempting to establish collegial relations with white physicians in their communities; opening their own hospitals and drug stores; forming medical associations with other local black doctors, dentists, and pharmacists, and enrolling in postgraduate courses in the North.¹³

In 1891, Miles V. Lynk (1871-1956), newly graduated from Meharry Medical College in Nashville, Tennessee, entered this separate and unequal medical world. A scrapper from his youth, Lynk did not let the repressive, segregated race system of the South keep him down. He was, in many ways, a self-made man. Born of former slave parents on June 3, 1871, Lynk grew up on a farm in western Tennessee near Brownsville, Haywood County.²² He obtained his basic education at rural black schools and then studied more advanced subjects such as algebra, biology, geometry, Latin, and physics with a private tutor. To earn money for medical school tuition, he taught at a rural black summer school in 1888. Sometime during the subsequent year, Jacob C. Hairston, a recently graduated Meharry physician who had opened a practice in Brownsville,²³ became Lynk's

preceptor, a common arrangement between medical students and physicians at that time. That tutelage under Hairston enabled Lynk to shorten his medical school education by a year. Lynk's association with Hairston continued on and off for many years. (Hairston moved to Jackson in the early 1890s and joined forces with Lynk in practice for a time, then moved to other Tennessee towns, and eventually to Memphis, where he taught at one of Lynk's later enterprises, the University of West Tennessee College of Medicine and Surgery.)

In the fall of 1889, Lynk enrolled at Meharry Medical College in Nashville (Figure 3). Meharry offered, like other medical schools of the time, a 3-year curriculum. Lynk's prior education with Hairston served him well, allowing him to pass entrance examinations at a high enough level to begin Meharry with the second year medical class, and to impress both Dr Robert Fulton Boyd, a faculty member at the school, and Dr George Whipple Hubbard, the school's founder and president. After a successful 2-year career at Meharry, Lynk graduated in the spring of 1891 at the age of 19, second in a class of 13.²²

Many students at Meharry during Lynk's time there later became leaders in the nascent late 19th-century African-American medical community.²⁴ Lynk's acquaintance with them helped in his future activities. For example, one of his classmates, Commodore I. Cain of Rome, Georgia, joined the faculty of Chattanooga National Medical College in 1899. William W. Derrick, soon-to-be instructor at Knoxville College Medical Department and its successor, Knoxville Medical College, was a member of the class just behind Lynk, and Charles Victor Roman, future Meharry faculty member and historian of Meharry, and future editor of the *Journal of the National Medical Association*, graduated the year before.

Lynk decided to open his practice in home territory, western Tennessee, but in nearby Jackson rather than in the more familiar village of Brownsville. Jackson was larger, numbering 10,039 citizens according to the 1890 census.²⁵ Its black community, which accounted for just over 40% of the town's population (4160 in 1890), could boast of supporting the founding church (Liberty Church) and some of the administration of a major African-American religious denomination, the Colored (later changed to Christian) Methodist Episcopal (CME) Church, and a prominent CME-sponsored black institution of higher learning, Lane College.^{26,27}

Lynk reported in his autobiography that friends tried to dissuade him from moving to Jackson because of recent racial unrest there, including the mobbing of a black woman.²² Undaunted by this potential danger, however, and invoking his "confidence in the ultimate goodness of human character,"²² Lynk settled in Jackson in 1891. Perhaps the knowledge that he was born just a few months after and just a few miles from where the CME church was founded, that his parents had been devout CME supporters from the beginning, and that he bore the names of the CME's first two bishops, William Henry Miles and Richard H. Vanderhorst, also pulled Lynk towards Jackson.^{26,27} He thus became the first African-American physician in Madison County's seat of government. Between Lynk's open way of dealing with local white physicians, and the example one white physician set by extending an immediate warm helping hand to the newly arrived black physician, the young Meharry graduate, as he himself predicted, encountered few problems (then or later, according to Lynk's account) with his white professional brethren.²²

Winning the trust of African-American patients who were skeptical that a person of color could practice good medicine took more effort and time, he recounted, than receiving the endorsement of Jackson's white

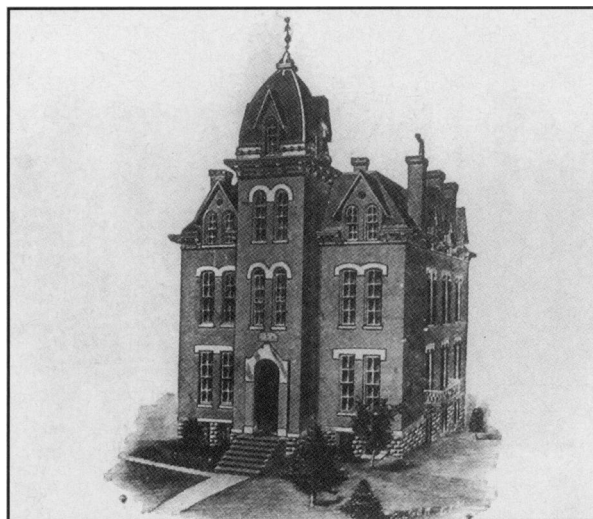


Figure 3. Meharry Medical College, Lynk's medical alma mater. (Source: *Indianapolis Freeman*, February 19, 1898.)

physicians. Following his motto, "Do all the good you can to all the people you can in all the ways you can,"²⁷ Lynk reported in 1900 that he "soon overcame their scruples and built up a large and lucrative practice."²⁸

Success encourages self-confidence. As he progressed in his career, Lynk combined self-confidence with boldness and a willingness to take risks, traits he had possessed and used well before entering medicine. Not content simply to break the race barrier in medicine in Jackson, this physician from rural western Tennessee decided to promote the professionalization and increase the number of African-American physicians across the nation and to do what he could to instill self-esteem in his African-American brothers and sisters.

Over the next 15 years, from his home base in the small town of Jackson, Lynk worked on several significant projects. He co-founded a national medical association and founded and ran a medical school that trained physicians from around the country and abroad. He wrote books and edited a magazine for African Americans on black history, literature, and culture, and established a publishing house to print and sell those books and magazines (Figure 4). (That publishing business had an impact on African Americans in his own community because it provided employment to a dozen or more black citizens.) Lynk obtained a law degree, and then opened a law school so other African Americans could become lawyers.^{3,22,28,29} It is on the first of his accomplishments after graduating from medical school and opening a practice in Jackson, Tennessee, that we will concentrate here—establishing

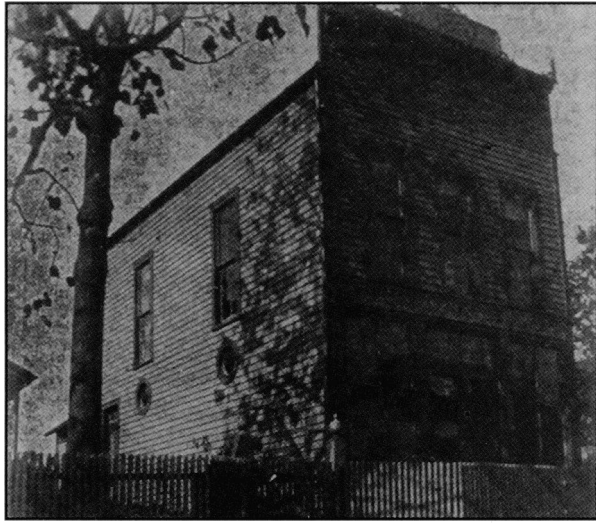


Figure 4. The M.V. Lynk Publishing House in Jackson, Tennessee. The company was one of Lynk's many endeavors, in about 1900. (Source: *Indianapolis Freeman*, June 2, 1900.)

the *Medical and Surgical Observer*, the first black medical journal in the United States.

American medical journals of the late 19th century virtually ignored the growing but still tiny presence of black physicians in the United States (909 out of 104,391 physicians according to the 1890 census). Few pages contained case reports or articles by physicians of color about their patient experiences, personal notices about African-American practitioners, minutes of local black medical societies, or information about medical schools for blacks. Lynk intended to change that situation and begin to bring unity and self-awareness to black medical professionals.

On December 1, 1892, Lynk, aged 21 and just 1½ years out of medical school, formally established a national medical journal. (He undoubtedly had been working on the project before that date.) *The Medical and Surgical Observer* appeared monthly from December 1892 through January 1894, catering to the interests of African-American physicians and other black health professionals around the country. Lynk appears to have overseen the journal's entire operation, from writing and editing its contents to selling advertisements for financial support to printing and mailing each issue. He wrote much of each issue himself, collecting items from correspondence, submitted material, and his growing network of personal contacts. In addition to publishing the articles, news items, and practice tips that African-American physicians wrote for the *Observer*, Lynk reprinted articles of medical interest from other journals.

(The journals from which Lynk reproduced articles included: *Medical News*, *Nashville Journal of Medicine and Surgery*, *Annals of Surgery*, *Memphis Medical Monthly*, *The Post-Graduate*, *The Dietetic and Hygienic Gazette*, *St Louis Medical and Surgical Journal*, *Boston Journal of Health*, *New York Therapeutic Review*, *New York Medical Journal*, *American Therapist*, *Indian Medical Record*, *Medical Age*, *Archives of Gynecology*, *Buffalo Medical and Surgical Journal*, *Journal of the American Medical Association*, *Harper's Weekly*, *Pacific Medical Journal*, and *Medical World*).

He adopted a lively, informal style when promoting the journal ("Don't start into [medical] practice before you subscribe for the *Medical and Surgical Observer*; it's your main agency upon which you are to depend for success"),³⁰ almost never taking a negative tack, especially when discussing personal and professional matters relating to the African-American medical profession. He tried to introduce black physicians, scattered and isolated around the South and the country, to each other through the articles they wrote and through personal notices, and to publish other medical gleanings he thought would engage the growing number of physicians of color in the United States.

From the beginning, Lynk made it clear that he was publishing the *MSO* for the black medical profession of the United States. One ad proudly proclaimed: "Medical and Surgical Observer. The only distinctively Negro Medical Journal published in America."³¹ Not shy of self-praise, he invited readers of the *MSO*'s first issue "to peruse its pages carefully," as he was "supplying the colored medical profession of the US, with a very necessary weapon in combating disease, ignorance and quackery."³² "The *Observer*," Lynk wrote, "like the goddess Minerva [goddess of wisdom], who sprung full-armed from the very head of Jove [Jupiter], fills a long felt want."³³

The pages of the *MSO* were open to black physicians. Lynk asked in his first editorial that readers "send us information on matters of general interest to the profession,"³⁴ presumably meaning the African-American medical profession. In a later issue, he explained that the material and suggestions readers sent would help make the *MSO* "clean, newsy and fearless." (Lynk's meaning here is unclear. Perhaps it is a misprint and the word he meant to use was "lean.") "This is your journal," he continued. "It will be what you make it."³⁵ In another issue he again solicited articles, news, letters, case reports, and practice tips from readers, saying: "Remember, every man knows something that somebody else doesn't know."³⁶ Lynk

remained true to his word: lead articles in every issue were written by practitioners of color, the people mentioned in the news items were, with few exceptions, black, and the medical schools that advertised within the *MSO*'s pages and about whom news was reported were African American. Lynk did what he could to make the *MSO* reflective of and interesting to his black colleagues around the country.

Race was an ever-present, though not usually overt, theme in the *MSO*. Editorials and news items never mentioned race except to compliment successes at one of the black medical schools, advertise the *MSO* as a medical journal for physicians of color, or to report on or suggest the need for black medical societies in the United States. Although several of the articles in the journal referred to matters of race, Lynk himself never, in print, solicited articles or comments specifically on race relations among American physicians; never mentioned the race of authors, contributors, or the physicians named in his news reports; and never commented about the problems black physicians faced in the white medical world. He did not need to advertise such issues openly; all *Medical and Surgical Observer* readers knew the reason for the existence of the journal.

Each issue of the *MSO* contained two main sections, one with longer "Original Communications" and one with briefer news items, editorials, and excerpts from other publications. Although Lynk wished that through the *MSO* "there may be inculcated and fostered among them [physicians of color] a more decided ardor for original research and investigation," the articles he published (both original and selected from other journals) focussed on the practical rather than on the scientific research aspects of medicine. They usually emphasized ways to deal with medical and business problems, not medical theories or experimental techniques.

Seventeen of the 24 "Original Communications" published in the *MSO*, all written by African-American physicians, contained case reports. Topics included malarial fever, chronic metritis, amputation at the wrist joint, endometritis, hysteria, nephritis, placenta previa, sarcoma, dyspepsia, difficult obstetric and gynecological problems, scrofula, and rectal ulceration. These articles read like case reports appearing in other medical journals of the time. A few *MSO* "Original Communications" were general overviews of a subject offering suggestions about diagnosis and treatment, as, for example, "The Importance of Physical Examination in the Disorders of the Pelvic Viscera in Females,"³⁷ "Treatment of Summer Complaint,"³⁸ and "Prevention of Some Diseases from a Practical Hygienic

Standpoint."³⁹ One *MSO* contribution offered "Practical Hints in the Practice of Medicine."⁴⁰

Each of the 15 authors of major articles in the *MSO* was a graduate of one of the three leading black medical schools of the time: six writers from Meharry Medical College in Nashville, five from Howard University Medical Department in Washington, DC, and four from Leonard Medical School in Raleigh, North Carolina. They practiced medicine in cities such as Newark, New Jersey; Meridian, Mississippi; San Antonio, Texas; Savannah, Georgia; Washington, DC; Petersburg, Virginia; Winston, North Carolina; Hot Springs, Arkansas; Selma, Alabama; and Columbia, South Carolina. These authors tended to be new physicians: 11 of the 15 had received their medical degrees within the previous 5 years. Some later became leaders of the profession; two were already well-known: Furman J. Shadd, professor of materia medica at Howard University Medical Department, and Monroe A. Majors, a leader in Texas' Lone Star Medical Association.

The news section of the *MSO* primarily related activities of African-American health professionals. Noted black physicians whose endeavors Lynk mentioned numbered only four in the journal's 14 issues. These people included Ferdinand A. Stewart⁴¹ and Robert F. Boyd,⁴² both professors on the Meharry faculty, Lawton A. Scruggs, first graduate of Leonard Medical School,⁴³ and Cornelius N. Dorsette,⁴⁴ an early Alabama practitioner and medical consultant to Booker T. Washington. Most news items were about younger physicians on their way up rather than of the more established black practitioners. They were people of Lynk's generation, often Meharry alumni, most of whom the young editor probably knew personally. Typical notices of a personal nature included:

Dr F.D.G. Harvey, of Brownsville, Tenn recently took unto himself a lovely bride. Queer indeed are the ways of hymen! [the Greek god of marriage].⁴⁵

And,

The death of Mrs Dr F.F. Mckinley has recently been chronicled. Dr Mckinley is a member of the class of '79, Meharry Medical College. Mrs Mckinley was cultured, affable and amiable. The doctor has the sympathy of the *Observer* in his sad bereavement.⁴⁶

Lynk was clearly not averse to adding his own comments to these stories, especially when he was acquainted with the people involved. In retracting a mistakenly reported story about the marriage of James T. Walton of San Antonio, Lynk, for example, quipped: "The doctor has

not been quite so fortunate.⁴⁷ He also published brief personal items about, for example, a new “Colored Drug Store” opening in Savannah⁴⁸; successful black medical practitioners in Palestine, Texas, and Helena, Arkansas⁴⁹; the trip of a Brownsville, Tennessee, physician to the bedside of his ailing father in Lawrence, Kansas⁵⁰; the visit of a Chattanooga physician of color to the Chicago World’s Fair⁵¹; and the recovery of a Meridian, Mississippi, physician from “malarial fever.”⁵²

In addition to these personal stories, Lynk reported on new books and articles by African-American physicians, such as Monroe A. Majors’ proposed “The Afro-American in Medicine.”⁵³ (The book was never published.) Lawton A. Scruggs’ new book, *Women of Distinction*, received a favorable notice and free publicity in the *MSO*.⁵⁴ When Charles C. Johnson of Columbia, South Carolina, wished to solicit information from black physicians for a paper he planned to present at the next North Carolina Medical Association meeting on the topic of black physicians’ relations with white physicians, Lynk obliged by both printing that request in the *MSO* and relating his own experiences on the subject.⁵⁵

The *MSO*’s longer articles and short pieces informed readers about who among physicians of color was willing to take the time and initiative to write on medical topics, about the kinds of medical and practical business problems fellow physicians (no women physicians were named in any of the 14 issues) were encountering and the ways others were dealing with them, and about the names and activities of other African-American physicians. Lynk’s information-gathering network was limited by his short time in the profession, the newness of the journal, and the nature of the journal’s readership, but a regular reader could learn about a segment of the African-American medical world from the *MSO*’s pages. The journal widened readers’ familiarity with some fellow practitioners’ names, activities, and, to some extent, thoughts.

The journal also acquainted readers with affairs and progress at five of the six black medical schools then functioning. Four of them (Howard, Meharry, Leonard, and New Orleans) advertised regularly in the *Medical and Surgical Observer*, listing their faculty so readers could recognize their names. Lynk’s Meharry bias showed in reporting black medical education news. Although he mentioned Leonard, Howard, and New Orleans University (later Flint) medical schools, he wrote more detailed and affectionate pieces about his alma mater. For example, after stating the number of students at Meharry in one short news item, the editor added, “The class this year will be a dandy.”⁵⁶ When it was reported in

a white medical journal, the *Medical Review*, that Dr Snead of Nashville had died in an accident, Lynk wondered in print if this was the Dr Snead who, with George W. Hubbard, had founded Meharry in 1876.⁵⁷ He included a long description of the 1893 graduating exercises at the school and bragged that the class graduating in 1894 will be “the largest class in the history of the school.”⁵⁸ When four women enrolled at Meharry, Lynk reported it.⁵⁹ Noting in another issue of the *MSO* that Meharry medical students had organized a “Medico-Literary Association,” Lynk, himself just recently a student, could not resist commenting on the need “to thoroughly prepare the students for the battle with the great medical problems with which they will have to contend.”⁶⁰

The only time Lynk waxed eloquent about another medical school was when the independent, black-owned and black-operated (not church or federal government supported) Louisville National Medical College received recognition as an acceptable medical school by a number of state boards of medical examiners:

The Louisville National Medical Catalogue has made its appearance on our desk. It will be remembered that this school of medicine was projected solely by colored physicians some 6 years ago. It will also be remembered that it begun [sic] under very discouraging circumstances—everybody hooted at the movement. But we are truly proud to say, not like the Hannibal Medical Institute, of Memphis, it has passed the probationary stage and now its diplomas are recognized by the leading state boards of medical examiners. It has turned out twenty-two graduates, among whom are two ladies. All praise to the manly efforts of [the school’s founders] Profs [William Henry] Fitzbutler, [William A.] Burney and [Rufus] Conrad.⁶¹

The improvement of standards at five of the six schools earned each a mention in the *MSO*⁶² because Lynk saw that better standards meant better educated black physicians and a better black medical profession. Hannibal, an independent school operated, like Louisville National Medical College, by physicians of color, did not meet those standards. It had a poor reputation among both black and white doctors and laypeople, including, apparently, Lynk. He never acknowledged the school’s existence in the *MSO* other than in this one backhanded reference as a foil for the Louisville school.

Lynk was very interested in providing opportunities for physicians of color to meet and talk and establish a sense of unity and of organization. To that end he: 1) reported on the activities of two existing black statewide medical societies, the Lone Star State Medical Society (founded 1886)⁶³⁻⁶⁴ and the North

Carolina Medical Society (founded 1887),⁶⁵ and on the founding of a new association in Arkansas,⁶⁶ 2) tried to make the *Medical and Surgical Observer* the official publishing organ for minutes and papers of the North Carolina group, and 3) called for the establishment of a national association of black physicians.

The idea of establishing a national association of black physicians was clearly on Lynk's mind when he wrote the inaugural issue of the *MSO*. Not only did he mention the need "for thorough organization among the increasing numbers of educated Negro physicians of the US" in his first editorial,⁶⁷ but also later in that same issue, he suggested a way to fulfill that need. Lynk reported that at the third annual meeting of the North Carolina Medical Association in Wilmington the previous May (1892), society members had proposed that African-American physicians in neighboring South Carolina and Virginia be invited to the group's fourth annual meeting in hopes of establishing "an interstate organization." The *MSO* editor now, in print, took that idea one step further: "An association of medical men of color, national in its character, we think would have a very inspiring effect upon the profession." The two state-wide African-American medical societies in Texas and North Carolina could serve as "a nucleus for the foundation of a national association." (Lynk failed to mention, in the pages of the *Medical and Surgical Observer*, the existence of a third medical association for African Americans, the Medico-Chirurgical Society of the District of Columbia, founded in 1884, perhaps revealing his Tennessee and Meharry bias.)^{18,19} Like the need he saw for a black medical journal to help draw the African-American medical profession together, Lynk felt it was essential for black physicians to have their own association. He concluded his editorial with a passionate, forceful statement: "This is a dire necessity and we shall, must and will have it."⁶⁸

Surprisingly, Lynk never again broached this subject, on which he seemed to possess such strong convictions, in the pages of the *MSO*; he apparently held on to the concept for the appropriate moment. That moment did not arise for 3 more years, until well after the demise of the *MSO*, but Lynk, apparently still intent on bringing a sense of identity and unity to black physicians, was there and ready. He had already spoken several times with his former teacher at Meharry, Robert Fulton Boyd, about forming a national organization. Most black physicians at the time, wrote Lynk in his autobiography, "considered Dr Boyd the acknowledged [leader] of the profession."²² The chance to organize arose because an international exposition brought large numbers of African-

American groups and individuals, including many physicians, together at one location. During the fall of 1895, the city of Atlanta sponsored the Cotton States and International Exposition and invited black organizations and institutions to display their products in a special Negro Building. In an era of worsening race relations and of increasing white supremacist attitudes, the Exposition provided a venue to show off the best of the South, black and white. At the opening of the great exposition in September 1895, Booker T. Washington rose to prominence as a leader of African Americans when he delivered a now-famous speech, generally interpreted as accommodationist. In it he promoted industrial education for African Americans and accepted the social inequities of a racist South. One of the most eloquent and notorious statements in the speech seemed to foreshadow the goal Miles Lynk had been working toward for more than 2 years, the formation of a national black physicians' group. Speaking of race relations in the South, Washington said: "In all things that are purely social we can be as separate as the five fingers, yet one as the hand in all things essential to mutual progress."

On the afternoon of November 18, 1895, "Doctors' Day" at the Atlanta Cotton States and International Exposition, a group of black physicians met at the First Congregational Church in Atlanta and formed what later became known as the National Medical Association. Excluded from the more social, but professionally essential aspects of the white-controlled American medical world, yet working toward the same goal as their white colleagues—better health for all Americans—black physicians had to found their own medical association, "as separate as the five fingers," just as Lynk had had to found a separate black medical journal. Lynk, not surprisingly, was one of the organizers of this nationwide black medical group, and became Vice President of this group for Tennessee. Dr Boyd was chosen the association's first president.^{22,68,69}

Literature Cited

1. List of Serials Received at the Library of the Surgeon General's Office, In: History of Medicine Division. Bethesda, Md. National Library of Medicine. Manuscript folder 149:566.
2. Our Golden Anniversary Volume. *J Natl Med Assoc.* 1958;50:55.
3. Bullock PL. *The Afro-American Periodical Press, 1838-1909.* Baton Rouge, La. Louisiana State University Press; 1981:185-189,253-254.
4. Savitt TL. The education of physicians at Shaw University, 1882-1918: problems of quality and quantity. In: Crow J, Hatley F, eds. *Black Americans in North Carolina and the South.* Chapel Hill, NC: University of North Carolina Press; 1984:160-188.

5. Hine DC. The anatomy of failure: medical education reform and the Leonard Medical School of Shaw University, 1882-1920. *J of Negro Ed.* 1985;54:512-525.
6. Savitt TL. Lincoln University Medical Department: a forgotten black medical school. *J Hist Med.* 1985;40:42-65.
7. Summerville J. *Educating Black Doctors: A History of Meharry Medical College.* University, Al: University of Alabama Press; 1983.
8. Lamb DS, ed. *Howard University Medical Department, Washington, DC: A Historical, Biographical and Statistical Souvenir.* Washington, DC: R. Beresford; 1900.
9. Dyson W. *Founding the School of Medicine of Howard University, 1868-1873.* Washington, DC: Howard University. 1929.
10. Cobb WM. *Progress and Portents for the Negro in Medicine.* New York, NY: NAACP; 1948.
11. Morais HM. *The History of the Negro in Medicine.* New York, NY: Publishers Co; 1967.
12. Savitt TL. Abraham Flexner and the Black Medical Schools. In: Barzansky BM, Gevitz N, eds. *Flexner and the 1990s: Medical Education in the 20th Century.* New York, NY: Greenwood; 1992:65-81.
13. Savitt TL. Entering a white profession: black Physicians in the new South. *Bull Hist Med.* 1987;61:507-540.
14. Woodward CV. *Origins of the New South, 1877-1913.* Baton Rouge, La. LSU Press; 1951.
15. Ayers EL. *The Promise of the New South: Life After Reconstruction.* New York, NY: Oxford University Press; 1992.
16. Ludmerer KM. *Learning to Heal: The Development of American Medical Education.* New York, NY: Basic Books; 1985.
17. Beardsley EH. *A History of Neglect: Health Care for Blacks and Mill Workers in the Twentieth-Century South.* Knoxville, Tenn: University of Tennessee Press; 1987.
18. Cobb WM. *The First Negro Medical Society: A History of the Medico-Chirurgical Society of the District of Columbia, 1884-1939.* Washington, DC: Associated Publishers; 1939.
19. Nickens HW. A Case of Professional Exclusion in 1870: The Formation of the First Black Medical Society. *JAMA.* 1985;253:1549-1552.
20. *Med Rec.* 1882;21:390.
21. Summerville J. Formation of a black medical profession in Tennessee, 1880-1920. *J Tenn Med Assoc.* 1983;76:644-646.
22. Lynk MV. Sixty Years of Medicine or the Life and Times of Dr Miles V. Lynk: An Autobiography. Memphis, Tenn: Twentieth Century Press; 1951.
23. *Meharry Medical College Catalogue.* 1888-1889:8.
24. *Meharry Medical Colleg. Catalogue.* 1890-1891:5.
25. United States, Department of the Interior, Census Office. *Report on Population of the United States at the Eleventh Census: 1890.* Vol 1, part 1. Washington, DC. General Printing Office; 1895:384,481.
26. Lakey OH. *The History of the CME Church.* Memphis: CME Publishing House; 1985.
27. Gay RG. Christian Methodist Episcopal Church. In: *Encyclopedia of World Methodism.* Nashville, Tenn: United Methodist Publishing House; 1974: 487-489.
28. Lynk MV. The Afro-American population of Jackson. Its rise and progress. Jackson (Tenn) Daily Sun. Dec 12, 1900.
29. *Indianapolis Freeman.* Feb 12, Nov 5, and Dec 10, 1898, and June 2, 1900.
30. *Medical and Surgical Observer.* Jan 1893;1:55.
31. Advertisement in the *Medical and Surgical Observer.* Dec 1892;1.
32. *Medical and Surgical Observer.* Dec 1892;1:15.
33. *Medical and Surgical Observer.* Dec 1892;1:17.
34. To contributors and correspondents. *Medical and Surgical Observer.* Dec 1892;1:14.
35. *Medical and Surgical Observer.* March 1893;1:103.
36. *Medical and Surgical Observer.* June 1893;1:148-149.
37. Walton JT. The importance of physical examination in the disorders of the pelvic viscera, in females, with special observations as to the influence of local disturbing factors, in the associated conditions of dysmenorrhoea [sic] menorrhagia [sic] and metrorrhagia [sic]. *Medical and Surgical Observer.* Apr 1893;1:107-112.
38. Alexander CR. Treatment of Summer complaint. *Medical and Surgical Observer.* Jun 1893;1:131-133.
39. Hall HH. Prevention of some diseases from a practical hygienic standpoint. *Medical and Surgical Observer.* June 1893;1:133-140.
40. Snelson SC. Practical hints in the practice of medicine. *Medical and Surgical Observer.* Feb 1893;1:65-68.
41. *Medical and Surgical Observer.* Dec 1892;1:15-16.
42. *Medical and Surgical Observer.* Dec 1893;1:214.
43. *Medical and Surgical Observer.* Feb 1893;1:84.
44. *Medical and Surgical Observer.* Dec 1893;1:214.
45. *Medical and Surgical Observer.* Dec 1893;1:213-214.
46. *Medical and Surgical Observer.* Feb 1893;1:81.
47. *Medical and Surgical Observer.* Feb 1893;1:81.
48. *Medical and Surgical Observer.* Jul 1893;1:158.
49. *Medical and Surgical Observer.* Sep 1893;1:180.
50. *Medical and Surgical Observer.* May 1893;1:127.
51. *Medical and Surgical Observer.* Sep 1893;1:180.
52. *Medical and Surgical Observer.* Dec 1893;1:214.
53. *Medical and Surgical Observer.* Jan 1893;1:49,53-54.
54. *Medical and Surgical Observer.* Feb 1893;1:84; March 1893;1: 104.
55. *Medical and Surgical Observer.* March 1893;1:104-105.
56. *Medical and Surgical Observer.* Dec 1892;1:17.
57. *Medical and Surgical Observer.* Jan 1893;1:48.
58. *Medical and Surgical Observer.* Feb 1893;1:85-86; Jan 1894;2:13.
59. *Medical and Surgical Observer.* Dec 1893;1:214.
60. *Medical and Surgical Observer.* Jan 1893;1:50.
61. *Medical and Surgical Observer.* July 1893;1:161.
62. *Medical and Surgical Observer.* Dec 1892;1:16; May 1893;1: 128; July 1893;1:157.
63. *Medical and Surgical Observer.* March 1893;1:104.
64. Chatman JA. *The Lone Star State Medical, Dental, and Pharmaceutical History (1958).*
65. *Medical and Surgical Observer.* Dec 1892;1:17; March 1893;1: 99-100; June 1893;1:149.
66. The Colored Medical Association, of Arkansas, was organized at its first session held in Little Rock, Ar, last June. *Medical and Surgical Observer.* Sept 1893;1:180.
67. Salutory [sic]. *Medical and Surgical Observer.* Dec 1892;1: 14.
68. *Medical and Surgical Observer.* Dec 1892;1:17.
69. Broderick FL, Meier A, eds. *Negro Protest Thought in the Twentieth Century.* Indianapolis, In: Bobbs-Merrill Co; 1965:4-8.