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 Two

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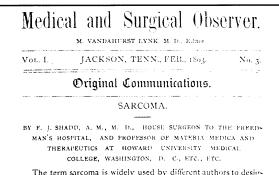
Editor's Note: This is the second of a two-part article.
Although Lynk did not solicit them, he did publish a few articles and letters in the MSO that departed from strictly medical topics, in whole or in part, to discuss mat-

strictly medical topics, in whole or in part, to discuss matters of race as they related to African-American physicians' medical practices. At least five articles described, quite directly, race problems in medical practice.

One of these articles, "Consumption Among the Colored Race," by L.L. Burwell (Leonard Medical School, 1889) of Selma, Alabama, dealt with what appeared to be a strictly scientific issue, the prevalence of tuberculosis among African Americans. Burwell, however, discussed the disease in more social terms, explaining why consumption had increased dramatically among blacks since emancipation. "I have often had the question asked me, what causes the increase of the disease among my race?" He provided answers of both a social and a scientific nature: lack of money to obtain proper medical care or to move to healthier locales with better climates, poor hygiene, poor housing, poor clothing, crowded cities, blacks' poor tolerance of cold compared to whites, little exercise and poor diet, weakening of the body because of the prevalence of syphilis, and weakening of resistance to consumption because of the mixture of white and black blood (mulattoes). Although modern medicine would reject some of these explanations, Burwell was simply passing on to MSO readers the commonly held scientific thinking of the time.²⁻⁴ He stated the problems African Americans faced quite baldly and openly, encouraging readers to discuss and attempt to remedy the very real concern of increased prevalence of tuberculosis among the black population.

The other four *MSO* articles frankly deal with race issues directly concerned with relations between black and white physicians—racial medical politics. One article previously mentioned⁵ described Dr Charles C. Johnson's solicitation from African-American physicians of answers to questions about relations between white and black doctors. Johnson, an 1888 graduate of Howard University Medical Department and a practitioner in Columbia, South Carolina, was preparing a paper for delivery at the May 1893 meeting of the North Carolina Medical Association (of which he was the corresponding secretary) entitled, "The Professional Relation Between Physicians of the Opposite Races in the South." Johnson's questions were quite pointed and provocative:

- Do you belong to any local medical association?
- Do you hold consultations with white physicians?
- Do they recognize you as a reputable practitioner of scientific medicine?
- Do they carry out the spirit of the code with reference to you?



nate certain classes of tumors, both simple as well as some malignant forms where connective tissue of embryonic character is found. The diagnosis of this kind of growth may often be very obscure-in fact microscopic examination alone can decide as to Too often physicians are careless in examination of patients affected in this way, and, after a few cursory questions, possibly handling the growth a little, they give some name to the disease. It has been the case on several occasions, when the term cancer has been vaguely used, causing consternation and terror to friends, and also depressing the vital energies of the patient. Hence, the object of this paper, with the accompanying cut, illustrating the position and size of the enormous growth which afflicted the man who came to Freedman's Hospital a couple of years ago, is not to give an exhaustive account of the etiology, pathology and treatment of sarcomata in general, but to direct the attention of the profession to the importance of thoroughly diagnosing such growths after careful examination, not only by means of all agents known to the profession coming under the head of physical signs; but to see that portions

Figure 1. Title page of an MSO article by Furman J. Shadd that contained an illustration he claimed was reproduced in a textbook of surgery without his knowledge or permission. (Source: Medical and Surgical Observer [Feb 1893], 57.)

- What is the general character of your professional relation to the white physicians of your city?
- Does the color prejudice enter into their apparent estimate of your professional rights?
- Is there an appreciable improvement since you have been practicing in regard to their professional courtesy towards you?

To encourage responses on this important topic, Lynk offered, in print, brief and positive reflections on his own experiences with white physicians: "For our part, we have received the highest degree of professional courtesy from our white colleagues. We believe this to be the experience of the average negro MD, in the South. His conduct demands it. He has received it." (As far as can be determined, Johnson's paper was never published.)

Furman J. Shadd (1852-1908) held a different view of relations between white and black physicians. A surgeon at Freedmen's Hospital in Washington, DC, and a highly regarded professor at Howard

University's Medical Department, Shadd published an article in the February 1893 issue of the *MSO* entitled "Sarcoma." He first offered a general medical discussion of sarcomas, then described the case of a patient with sarcoma on the buttocks. He made an engraving of this man's striking "very uncommon and rare" sarcoma (Figures 1 and 2), only to find it reproduced, without Shadd's knowledge or permission, in the then recently published prestigious and well-known *American Text-Book of Surgery*. Shadd complained that Freedmen's Hospital, where the man had obtained medical care for several months and "where the true type of the disease was diagnosed" received no credit in the book.

Using this incident of plagiarism as a springboard for social commentary on antiblack racism in late 19thcentury America, Shadd remarked that "courtesy at least should have caused the author [of the textbook] to give credit where it is due, even though the history [of the patient] could only have been gotten through members of a race which has been and is proscribed whenever it suits the whim and inclination of the Anglosaxon [sic]."6 The black surgeon warmed to his subject, lashing out against whites who threw up barriers against physicians of color simply because of race: "This is only another illustration of class proscription which confronts us at every step up the ladder of professional success. As gold is tried by fire we may be purified and strengthened by rebuffs and opposition. But I, for one, am getting very tired of being classed as inferior when every avenue of advancement is locked and barred against me."6

Among the avenues of advancement that black physicians found barred against them were the use of hospitals and membership in medical societies. Both of these topics were addressed in MSO articles. Dr S.C. Snelson of Savannah, Georgia, an 1890 graduate of Howard University's Medical Department and a frequent contributor to the MSO, reported in his article "Surgery in General", appearing in the August 1893 issue, that black patients generally preferred white physicians to black physicians, especially when it came to surgery. White physicians had access to city hospitals whereas African-American physicians could not use those facilities. Black doctors had to turn patients requiring hospitalization (usually for surgery) over to white colleagues, leaving them with little opportunity to build surgical confidence and skills.

Snelson reported an incident in his city to illustrate the point about black patients' distrust of black physicians, especially when it came to surgery. The family of a patient who had been shot with a pistol called Drs Snelson and Smalls, both African American, for assistance. These men treated the patient (nonsurgically) and left. "As is quite common," Snelson wrote in his August 1893 MSO article, "the [patient's] people called in two white physicians during our absence."8 Discussions between the white and black physicians centered around whether the patient should undergo surgery at the local hospital or if less invasive treatments would be more advantageous. Snelson and Smalls prevailed, but the competition between the white and black physicians was keen and evident, and mention of black physicians' inability to use hospital facilities unmentioned but implied. Throughout the article, Snelson identified physicians as either white or black, making it quite evident that race was important to him and the physicians with whom he dealt in Savannah. He made it clear in the article that he wished to maintain cordial relations with the white physicians of Savannah.8

Medical societies provided opportunities for physicians to meet with colleagues to discuss difficult cases, get advice, give suggestions, hear scientific papers, and build professional contacts for the future. As stated earlier, African-American physicians could not join medical societies in the South during the late 19th century, closing another of Dr Shadd's avenues to professional advancement. In a brief paragraph of the *MSO*'s section called "Spirit of the Medical Profession," Editor Lynk confirmed that restriction on black physicians in one state and praised the solution the state's black physicians had found to combat it:

The State Medical Association of Texas (white) has passed a resolution to the effect that all physicians in the state, that are in good standing, are eligible to membership in said Association, the negro excepted. It may be said to the negro's credit that they have formed an association known as the "Lone Star Medical Association of Texas," equal to that of the whites, and are consequently independent of the white association.9

It is interesting to note that Lynk, at the same time that he praised and encouraged the formation of black medical societies in the United States and clearly recognized the existence of segregated medical societies in the southern states, announced meetings of these same segregated societies in his journal. For example:

The West Tennessee Medical and Surgical Association will convene in this city on the 25th and 26th inst. [May 1893] A large attendance is expected and an elaborate programme has been arranged.¹⁰

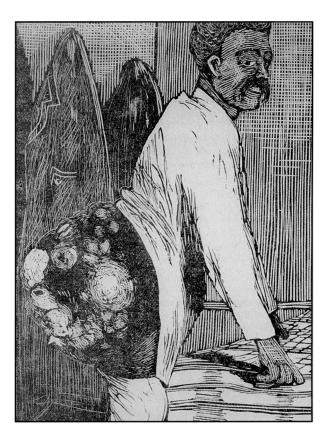


Figure 2. An illustration that appeared in the Medical and Surgical Observer of a patient at Freedmen's Hospital in Washington, DC with a sarcoma. The picture appeared without attribution and without the author's permission or knowledge in a well-known textbook of surgery. (Source: Medical and Surgical Observer (Feb 1893), 60.)

It is not clear if Lynk was accepting these segregated medical societies, black and white, in the same way that Booker T. Washington would later accept segregation in his metaphorical idea of "separate as the five fingers, yet one as the hand."

Articles like these fit with the goals of the MSO's editor— they allowed black physicians entering a profession previously closed to them on account of race to discuss race issues openly and with impunity if they so chose. In fostering community, communication, and cooperation among black physicians, Lynk was encouraging the development of a national black medical profession.

African-American physicians who read the MSO understood its editor's message. They told him so in letters of support. "I was just thinking of the advisability of such an undertaking," wrote Dr S.C. Snelson of

SAY, DOCTOR,

HAVE YOU READ THE

Medical and Surgical Observer,

The Organ of the Colored Medical Profession of North America?

It recognizes the necessity of a higher standard of medical education in this country, and will put forth its best efforts to raise and maintain the same. It contains all the progressive ideas of the profession—minus the chaff.

Read and endorsed by the profession from the Atlantic to the Pacific and from the Arctic Ocean to Mexico.

SUBSCRIPTION PRICE REDUCED TO \$1.00 PER ANNUM,

Payable Three Months from Date.

Send in your subscriptions without further delay and show your appreciation of a worthy institution. "Defer not till to-morrow what should be done to-day."

Address,

MEDICAL AND SURGICAL OBSERVER, JACKSON, TENN.

M. V. LYNK, Publisher.

Figure 3. An advertisement that appeared on the back cover of several issues of the MSO, intended to increase subscriptions. (Source: Medical and Surgical Observer [July 1893], back cover.)

Savannah, "as there are so many skillful and successful negro physicians and surgeons in our country... It [the MSO] is just what we needed." Members of both the North Carolina and the Texas black physicians associations wrote Lynk of the need to publicize the activities of their organizations in print so as to, in the words of Marcus W. Alston of Asheville, NC, "afford us development and interest as medical men." John H. Wilkins, a former president of the Lone Star Medical Association, wrote that he had "tried to get the colored physicians [of Texas] to publish a 'journal' 3 years ago," to no avail. Some of those physicians who recognized the importance of having a medical journal for blacks

thanked Lynk for finally taking action: "I highly appreciate your noble effort to enroll the negro's name on the list of medical literature," wrote Dr D.E. Caldwell of Osceola, Arkansas. ¹⁴ The most eloquent letter of thanks came from Dr Monroe A. Majors of Waco, Texas: "I have before my gaze the pride and boast of every Negro doctor—a journal of our own—a counterpart of ourselves—a real living proof of capacity in science and art. In a brief way, allow me to congratulate you for pluck, energy and forethought." ¹⁵

If the moral support Lynk received in such letters as these is an indication of support for the MSO, his new journal filled a need felt among at least some black physicians for a medical publication directed at them. How broadly felt that need was—is—difficult to determine, however. No records of the Medical and Surgical Observer remain for historians to analyze. Lynk needed more than words of praise and encouragement from a handful of readers to keep the MSO in print. He needed money. Letters like one from Dr L.L. Burwell of Selma, Alabama, probably helped lift the editor's spirits: "Dear Sir and Brother—Your spicy little medical journal came before me in today's mail. I was indeed proud to see the effort put forth. I only trust that every colored doctor will subscribe for it." Although Burwell told Lynk to "put me down as a subscriber," it appears that not many other African-American physicians followed his lead.

Lynk needed paid subscribers to sustain the *MSO*. Copies of the inaugural issue went out, gratis, to many black practitioners and to editors of white medical journals as well. In return, Lynk asked readers who found the journal useful and important to "give us a large subscription list" to assure the *MSO*'s success.¹⁷ Subscriptions for the monthly *MSO* cost \$2 per year at a time when the weekly *Journal of the American Medical Association* cost \$5.¹⁸ Mindful of the future, Lynk also sent gratis copies of issue number one to all the black medical schools and charged half the price for student subscriptions.¹⁹

At first, subscriptions came in at a reasonable rate, it appears by reading between the lines of the *MSO*. Lynk seemed surprised that prepublication publicity brought in "several actual subscriptions—even before the first number has been issued," and "encouraging letters... from scores of colored physicians." Within about 2 weeks of the first publication, the supply of *MSO*s disappeared, both because of subscriptions and free distribution. In the second issue, published in January 1893, Lynk announced: "So great has been the demand for copies of the initial number of the MEDICAL AND

SURGICAL OBSERVER that we are forced to offer 20¢ per copy, in money or credit on subscriptions, for at least 150 copies" of that first issue.²³ People were reading the journal.

But not enough people were subscribing. A request for new subscribers became a regular feature of the MSO. In June, Lynk reduced the subscription price to \$1 and made a special offer: "Subscribe for the OBSERVER. Wanted: Your name now. Dollar, 15th of next October."24 Between July and November he pushed subscriptions and his special offer with a full page notice that appeared on the MSO's back cover (Figure 3). The advertisement reflects quite nicely Lynk's writing style, vision of the journal, and need for a stronger financial commitment from fellow and sister physicians. It first accosted physicians with: "Say, Doctor, have you read the MEDICAL AND SURGI-CAL OBSERVER, The Organ of the Colored Medical Profession of North America?" Referring to letters of praise received after the first number of the journal, the ad continued: "Read and endorsed by the profession from the Atlantic to the Pacific and from the Arctic Ocean to Mexico." It concluded with an appeal and an offer: "SUBSCRIPTION PRICE REDUCED TO \$1.00 PER ANNUM, Payable 3 Months from Date. Send in your subscriptions without further delay and show your appreciation of a worthy institution." This advertisement appeared on the back cover of the MSO from July 1893 through January 1894.

Lynk claimed in the July issue, under the headline, "Our Splendid Success," that the reduced price had caused a "grand rush" on subscriptions. "Today we find ourselves dum-founded [sic] because of the numerous applications for back numbers. Those who can furnish us with Nos. 1, 2 and 3, will confer a great honor."²⁵ A couple of pages later, he proclaimed that "Hundreds of physicians have availed themselves of the opportunity to get the newsiest medical journal published and pay for it 3 months from date."26 This boastful statement was followed by an even stronger and more confident one: "Subscribers. Don't fail to keep a file of the OBSERVER and have them bound. It being the first journal of its kind, published in America, will constitute a volume equally rare as it is interesting and instructive. Copies of the first issues are now at a very great premium."26 By August, he was inserting brief reminders in the journal like: "He who doesn't subscribe for the MEDICAL AND SURGICAL OBSERVER is a son of a gun,"27 and, "Everybody reads the OBSERVER. Don't you?"28 In addition to these methods of increasing subscriptions, Lynk also published letters of support for the journal. No records exist to discover whether people who signed up for the *MSO* in the summer of 1893 actually paid for it in October.

Reducing the MSO's price from \$2 to \$1 may have increased readership and perhaps actual paid subscriptions, but revenues from advertising were also crucial to the financial stability of the journal. At first, a number of companies selling medical products and services, black medical schools, and journals placed advertisements in the MSO. Companies included Clemiana Chemical Co of Atlanta, Georgia, selling medicinal plants; Bowden Lithia Springs Co selling special water for drinking and bathing; Dr H.A. Mumaw of Elkhart, Indiana, promoting his monthly listings of physicians', dentists', and druggists' property, books, and equipment available for purchase, rental, or exchange; Lambert Pharmacal Company of St Louis, Missouri, featuring Listerine; Rumford Chemical Works of Providence, Rhode Island, selling Horsford's Acid Phosphate for Cholera; Parke, Davis & Co of Detroit, Kansas City, and New York, advertising various medicinal preparations; and "Julius Fehr, MD, Ancient Pharmacist," of Hoboken, New Jersey, selling his various talcum powders for infants and adults. A few white medical journals as well as two black newspapers (The Appeal of Chicago and The Freeman of Indianapolis) placed advertisements in the MSO, as did Howard University, Meharry, New Orleans University, and Leonard medical schools. Annual advertising rates listed in the December 1893 and January 1894 issues of the journal ranged from \$100 for a full page and \$60 for a half page to \$35 for a quarter page, payable every 3 months.

Like paid subscriptions, advertising in the *MSO* appears to have been problematic. Some advertisers may have defaulted on payments. Some advertised for a limited amount of time and then dropped out while others promoted their products or services from first issue to last. Of the 28 different advertisers who purchased space in the *MSO*, 3 (Meharry, Leonard, and New Orleans University medical schools) appeared in all 14 issues, 2 in 13 issues, 2 in 12 issues, and 3 in 10 issues. The remaining 18 enterprises advertised 6 or fewer times. (It is not possible chronologically to trace the advertising that appeared in the *MSO* because the ads in the National Library of Medicine's issues were bound out-of-order at the end of the volume.)

Lynk lost one of his key advertisers after only four issues. Full page ads on the back cover of the journal by Battle & Co, of St Louis, a chemical firm that promoted three preparations (a hypnotic, an anodyne, and a

ADVERTISERS, DO you want to advertise with a journal that will pay? Don't LOOK HERE! you believe for advertising to pay and do the greatest good you must use a medium that reaches the largest number of intelligent, enterprising and thoughtful physicians? Then, consider the following advantages of the MEDICAL AND SURGICAL OBSERVER: The OBSER-VER is the only medical journal published in Jackson, Tenn. in fact there is no other medical publication in nearly a hundred miles South and about three hundred and fifty miles East and West of Jackosn, The OBSERVER is read by a large number of physicians, dentists and pharmacists throughout the Mississippi Valley. It covers an exclusive territory, the diameter of which is nearly 450 miles. It is, therefore, one of the best paying mediums in the United States. ADVERTISING RATES. Half page 60.00 per annum Quarter page 35.00 per annum Payable quarterly. Think over this and give us a years contract to carry your "ad." Address Medical and Surgical Observer, Jackson, Tenn M. V. LYNK, M. D., Publisher.

Figure 4. An advertisement that appeared in several issues of the *MSO*, intended to attract new advertisers. (Source: *Medical and Surgical Observer* [December 1893].

combination alterative and uterine tonic), disappeared after April 1893. In May, the back cover of the *Medical and Surgical Observer* was blank except for the words, THIS SPACE FOR SALE. Lynk never again sold that space and eventually used it to promote the reduced subscription price of the journal and then to try to sell the space to potential advertisers (Figure 4). Using his usual up-beat tone and employing the typical exaggerated promotional language of the time, Lynk wrote: "ADVERTISERS, LOOK HERE! Do you want to advertise with a journal that will pay? Don't you believe for advertising to pay and do the greatest good you must use a medium that reaches the largest number of intelligent, enterprising and thoughtful physicians?" He went

on to extol the wide circulation of the *MSO* and the breadth of the territory it covered, "the diameter of which is nearly 450 miles."²⁹ Starting in March 1893, Lynk, apparently concerned about losing advertisers and anxious to please them, wrote and inserted in the body of the *MSO* short pieces of two or three sentences about some of the regular advertisers:

We call the special attention of our readers to the advertisement of the specialties kept by G.W. Powell, MD, Moriah, NY. This is a reliable firm and physicians would do well to investigate his preparations.³⁰

The use of Ch. Marchand's Peroxide of Hydrogen and Glycozone should be tried by all physicians. Write to him at 28 Prince Street, NY, for circulars and information.³¹

Dr Julius Fehr's Compound Talcum Baby Powder is one of the best preparations that can be used for all affections of the skin. See his 'ad' elsewhere.³²

Unfortunately, these efforts at increasing subscription and advertising revenues did not save Lynk's enterprise from a relatively short life. Fourteen issues of the Medical and Surgical Observer went out to the African-American medical profession, to interested white practitioners, to institutional subscribers such as the Surgeon-General's Library in Washington, DC.³³ and to other medical editors on exchange for issues of their journals. Then, following the appearance of the January 1894 issue and without fanfare, the first black medical periodical in the United States simply ceased publication. Hints of problems had emerged over time as the MSO's average monthly length dwindled from just over 26 pages in the first four issues to half that amount in the next nine. The December 1893 edition contained just eight pages. Original articles, which numbered two or three per issue in the beginning months, diminished to one or none as the year progressed. The MSO's final issue contained no explanation for the suspension of operations; it did not even announce the suspension.

What had happened to this promising journal, established with such high expectations and ambitious agenda, in the space of a year? Why did this journal that its founder and editor thought fulfilled a real need disappear so quickly? Had Lynk misunderstood his fellow black physicians? Did he miscalculate the difficulty and time required to produce a medical journal? Had he simply tired of the enterprise?

One dollar seems a small amount to pay for a journal purportedly wanted by African-American physicians. Yet even after "the grand rush"²⁵ in June when the *MSO*'s price was halved, Lynk had to continue solicit-

ing subscriptions. Why? Did the journal really fill the need Lynk felt was there? Lynk reproduced several letters of support for the journal, but these may not have represented the true feelings of the majority of the African-American medical community of the time.

Did most black physicians want a journal of their own? In the distrustful and sometimes volatile racial climate of the early 1890s South, physicians of color may not have wished to single themselves out as unique or having special interests apart from the rest of the medical profession. They may have hoped for integration or at least little notice at a time when Lynk was promoting just the opposite. Perhaps the standard medical journals were sufficient for their need to keep up with the latest innovations and ideas, and therefore they felt little need for a separate, race-oriented periodical. Where Lynk saw two professions, one white and one black, other black doctors may have seen just one. African-American physicians were trying to succeed in a previously and still overwhelmingly white medical professional world and may not have wished to draw attention to themselves.

Was Lynk's timing off? The MSO preceded the establishment of a national association of black physicians and failed perhaps because it arrived on the scene before a separate African-American medical profession could manifest and organize itself. Black physician support for an African-American medical journal did eventually develop after the National Medical Association had had a chance to form and gain strength. The Journal of the National Medical Association succeeded from its inception in 1909.

One outside force that may have affected the fortunes of the MSO was the financial panic of 1893. That economic catastrophe took its toll on most Americans, including, presumably, Lynk, MSO advertisers and subscribers, and black patients who could not pay their black physicians, who, in turn, lost spendable income. Furthermore, Lynk may have tired of the enterprise and wished to move on to another of the many projects that seemed to engage his interest during that first decade or so after becoming a physician. Certainly, overseeing the publication of a monthly journal required much time and effort. Lynk hinted at this problem in his autobiography, published in 1951: "[I]t was a pioneering venture. Pioneers clear the trees, throw up the highways and make straight the paths. Their tasks are hard because the average person hasn't caught the vision."³⁴

Did others catch the vision? Lynk thought so. Looking back on his enterprise almost 60 years later, Lynk saw that what he had started in 1892 did make a difference in the history of African-American physicians: "While the Observer has not been in the fight throughout, yet it is a scientific fact that a chain reaction is set in motion by the initial cause, sometimes apparently small."34 If, by the term "chain reaction". Lynk meant the founding of other medical journals for African Americans, the evidence is not conclusive. It took only a few years-until 1898-for another pioneering African-American physician, Alonzo McClennan of Charleston, South Carolina, to begin publishing the second black medical journal, the Hospital Herald (December 1898 through May 1900). McClennan, however, did not mention in the pages of the Herald that the MSO had served as a model or inspiration for his new enterprise. He also limited the scope of his journal to Charleston and the state of South Carolina rather than attempting to market it nationwide. Several years later, in 1909, as previously mentioned, some members of the organization the Medical and Surgical Observer had called for in December 1892 and that Lynk had helped found in 1895, the National Medical Association, produced the first issue of the Journal of the National Medical Association. The editors did not mention the MSO either.

The reasons that moved Lynk to cease publication of the MSO at the start of its second year may never be discovered. Nor is it possible to determine what effect the MSO had on the establishment of subsequent African-American medical publications. Lynk may have laid the groundwork that, by example, quietly encouraged McClennan and the National Medical Association to attempt medical periodicals of their own. Whether openly acknowledged at the time or not, however, the MSO, Miles Vandahurst Lynk's journal, did influence a number of African-American physicians to think about the needs and position of blacks in the medical profession during the late 19th century.

Acknowledgments

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We'd like to introduce you to the newest spokesman for the American Heart Association.

Just as soon as he's born.

The same baby who, ten years ago, wouldn't have lived to speak his first word. But now doctors can look inside the hearts of unborn babies, detect disorders and correct them at birth. Thanks to research, he can have a healthy, normal life.



