

## Study Guide #6, 10/18-10/20: Colonial Therapeutics

- Josselyn, John. *New-England's Rarities: Discovered in the Birds, Beasts, Fishes, Serpents, and Plants of that Country* [1672]. Edward Tuckerman, editor. Boston: William Veazie, 1865. pp. 31-35, 48-55, 71-84, 151.
- Heckewelder, John. *An Account of the History, Manners, and Customs of the Indian Nations, Who Once Inhabited Pennsylvania and the Neighbouring States*. Philadelphia: 1819. pp. 221-244.
- Ulrich, Laurel Thatcher. *A Midwife's Tale: The Life of Martha Ballard, Based on Her Diary, 1785-1812*. New York: Alfred A. Knopf, 1990. pp. 1-71.

This week the readings take us off in a new direction: we turn away from the study of disease and its causes and turn towards the responses of individuals and societies to disease. We also reset the clock: having covered patterns of disease from pre-historic to modern America, we now move back to the colonial period to look at therapeutic systems. As you do these readings, and the ones in the coming weeks about the history of medicine, keep several sets of questions in mind:

Disease theories: how do different groups (e.g. Indians, colonists, 19th century reformers) define and understand disease? Do they focus on symptoms or do they try to identify underlying causes?

Therapies: what sorts of things (animal, vegetable, mineral; physical manipulations; social activities) were considered to be therapeutic? Why were specific treatments chosen in specific cases? How did healers think their treatments would affect the disease process? What reasons did healers and patients have to believe that their treatments would work?

Healers: who treated disease? Could anyone do it? Did you need medical education, or religious training? What were the sources of their authority? Were practitioners regulated in any way?

Patients: what was it like to be sick? What was it like to receive treatment -- did you ingest something, wear something, chant something, etc.? Was the treatment pleasant or unpleasant? How would you know if it worked?

Behind all of this is the question of efficacy: do medical treatments work? If so, how? Traditionally, historians and physicians mocked past medical treatments -- after all, blood-letting seems like a misguided and dangerous thing to do. However, in the past thirty years historians have been interested in a different

question: since blood-letting persisted for thousands of years, and was used in many different cultures, it must have worked, right? How else would it have lasted so long? The same thing goes for purgatives (make you vomit), cathartics (give you diarrhea), leeches (analogous to blood-letting), mercury (causes salivation, vomiting, tooth loss), etc. As you read these articles, your job is not to chuckle at the silly ideas of past healers. Instead, your job is to try and understand why these treatments existed and why and how they were effective.

Josselyn, *New England's Rarities*: Josselyn (c. 1610 - c. 1690) was an English aristocrat (a minor one) and traveler. He may have had some medical training, but little is known about his biography. His brother, Henry, settled in Maine in 1634. John made two trips to visit him: 1638-1639 and 1663-1671. Interested in natural history, he learned everything he could about the plants, animals, and peoples of New England, eventually publishing two books based on his travels. This reading is a collection of excerpts from his first book. In addition to describing the animals, plants, and minerals of New England, the book describes how these things can be used therapeutically. Several things make this a tricky source to read. First, as was common in the seventeenth century, the letter "s" was often printed as "f", so "firft" = "first." Second, the vocabulary can be confusing. e.g. "cod" on p. 53 refers to the scrotum of the beaver, but "cod" on pp. 71-72 refers to the more familiar fish. As you read, look for and focus on the discussions of diseases and treatments. For instance, in the description of Boston (pp. 33-38), look for his ideas about weather and disease. When he describes a disease, try to get a sense of what he is talking about: some are familiar (e.g. consumption = tuberculosis; morbus gallicus (the French disease) = syphilis); some are not ("Plague of the back" (p. 35), "melted their Grease" (p. 72), etc.). When he describes a treatment, try to understand why he thought it would work. For instance, why does he have more faith in horns from moose than horns from deer? Do any of his ideas make any sense to you? Would you bite a living rattlesnake if you needed a lift? (coffee or Red Bull seem a little more appealing). Also, keep your eyes open for claims of efficacy (e.g. the love potion, p. 81). As odd as his writings may seem, Josselyn was thoroughly mainstream. Several of his discoveries (e.g. white hellebore, p. 83) became significant drugs in the 19th century.

Heckewelder, *An Account*: John Gottlieb Ernestus Heckewelder (1743-1823) was the son of a German (Moravian) missionary who worked in England in the 1740s. His family moved to Bethlehem, Pennsylvania, in 1754. Initially apprenticed to a cooper, he was inspired to become a missionary to the Indians. He worked on and off for over thirty years (full time from 1771 to 1786) as a missionary to Indian groups in Pennsylvania, Ohio, and Michigan. He also worked as a diplomat for the US, helping to negotiate some of the initial treaties with tribes. Late in his life he wrote a book describing the Indians he knew; this excerpt

includes the chapters on Indian disease and medicines. He starts with a review of the common diseases of Indians: what different theories of disease causation do you see? He then has a chapter on Indian remedies, and then two chapters on different types of Indian healers: physicians vs. jugglers. What distinction is he making, and why is it so important for him (remember, he's a Christian missionary). The last chapter discusses Indian superstition: why was it so hard for missionaries and other whites to convince Indians that their beliefs were mistaken?

Ulrich, *A Midwife's Tale*: Laurel Ulrich is a Professor of History at Harvard. *A Midwife's Tale* is her analysis of the diary of Martha Ballard (1735-1812), a woman who lived in Maine (which was then part of Massachusetts) and worked as a midwife, delivering over 800 babies. Ulrich uses the diary to recreate what life was like for woman living in the first decades of the United States. The first chapter provides an overview of this, introducing her world, and giving a sense of the impact of disease and mortality on Ballard's family. The second chapter, about August 1787, is a remarkable account of her career as a midwife, as revealed by a series of births amid an epidemic of scarlet fever. As Ulrich shows, several different types of practitioners co-existed in Hallowell, with Ballard and female practitioners either assisting the male physicians, or working independently, especially when treating women and children (e.g. see her discussion of the gender specificity of blood-letting, p. 56). Each of these people also had multiple roles in the community (e.g. physicians also active as politicians, merchants, land speculators, etc.). Why was there such a complicated mix of part-time practitioners? How would a patient choose Ballard or a physician? How did Ballard learn to be a midwife (p. 64)? How does she explain disease? What sorts of treatments does she use? Was she an effective healer?