"The Prophet is gone but his Mantle is upon us." These words, coming from the lips of an eminent eastern professor in 1832, held more meaning than was realized by the one who spoke them, for they introduced to America a system of pseudo-medical science which was to be a subject of controversy, ridicule, and speculation for more than half a century. The "Prophet" was John Kaspar Spurzheim; his "Mantle" was phrenology, the study of the conformation of the skull as indicative of mental faculties.

Franz Joseph Gall of Vienna was the first to make an extensive study of the physiology and constitution of the brain. Before 1802 he had produced his Nervous System, which had been highly esteemed and had passed through several editions, but in that year the government of Austria, urged on by the clergy, forbade the teaching of Gall's peculiar doctrine, as dangerous to religion. Not to be outdone, however, Gall made his way to France where some of the ablest professors accepted his teachings.

But it was Spurzheim and George Combe, two of Gall's most ardent disciples, who expanded the system and adopted for it the name of phrenology. Spurzheim continued to expound his theories in Paris until Georges Cuvier, the great French zoologist, showed that if the phrenologists were correct about the location and relative size of the thinking organs then mice, moles, sheep, and goats would be wiser than the most learned man. This ended Spurzheim's career in France. He then cast wistful eyes toward England, but that country, having received word of Cuvier's opinion, would have nothing to do with phrenology.

* Hugh M. Ayer is a graduate student in history at Indiana University, Bloomington, Indiana. This article is a chapter of his master's thesis at Indiana University, 1950, written under the direction of R. Carlyle Buley.
3 *Ibid.*, 289. There is some difference of opinion on this last point. It has been said that Gall and his early followers referred to the system as craniocopy, craniology, physiognomy, or zoonomy, and that it was Thomas Ignatius Forster who later named it phrenology.
4 Adams and Hutter, *Mad Forties*, 63.
In America, where the opinions of French scientists commanded less respect, and where they were even less known, Spurzheim found a more receptive audience. Arriving in the United States in August, 1832, he immediately launched into a series of lectures on phrenology which “attracted alike the fashionable and the learned, the gay and the grave, the aged and the young, the sceptic and the Christian.” So great was his popularity “that often he had to attend divine services five times on a single Sabbath in order to occupy all the pews in which he had been invited to sit.”

Scarcely three months after his arrival in America, Spurzheim’s promising career as the father of American phrenology was cut short by death, which has been attributed to the dry and highly electrically charged atmosphere of America and the high mental excitement of Americans. But the apt obituary, quoted above, indicated that Spurzheim had left his mark, and that more was to be heard of the new theories which had seized the imagination of his American friends.

Early nineteenth century America was ripe for the introduction of this new science. Although medical practitioners of the early 1800’s were no exception to the rule that every period of history finds men thinking themselves more advanced than were their predecessors, the fact remains that in medicine, as in politics, it was a period of controversy, uncertainty, and clashing ideas. Especially was this true of the western states, Ohio, Kentucky, Indiana, etc., where doctors were scarce and where the people so often, whether by choice or necessity, relied upon their own concoctions for the treatment of disease.

The few doctors who chose to practice in this region were so handicapped by the lack of education, supplies, and transportation facilities, that it is little wonder that many of the settlers preferred to use their own remedies, or to avail themselves of the services of the ever-present quacks.

The following account written by Dr. Robert Boal, is an apt description of what the average midwest doctor was up against. “The doctor had to be his own pharmacist. He made his own pills and tinctures, compounded all his medicines, and generally carried all he required, as, with saddle-bags across his horse, he wended his way from house to house, administer-

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*Combe, Notes on the United States,* I, 59-60.
ing to the sick and ailing, always welcome and often regarded as an angel of mercy, although his homely garb and rough appearance looked anything but angelic. His life was one of peril, toil and privation. The country was new and thinly settled, and his rides were long and solitary; his patients were scattered over a wide expanse of territory; his travel was mostly performed on horseback, and its extent and duration was measured by the endurance of himself and his horse. He struggled through... mud and swamps and swollen streams. He was often compelled to make long detours... His rest was often taken in the saddle... From necessity he was self-reliant and courageous. Every emergency... he was generally compelled to meet alone and unaided. ... His fees were small and his services were often paid for in promises, seldom in money, of which there was but little. The products of the country... was the general and most reliable circulating medium, and with this the doctor was usually paid."

There were few books to which the early midwest doctor could turn for guidance. Equipment was equally scarce. He usually had a stethoscope—after 1830—and sometimes he was fortunate enough to possess pewter bedpans, and a few other items; but more often he used whatever was available. Any shingle was good enough for a splint, while the physician's fingers served as measures of temperature and blood pressure. His drugs were typified by horseradish, skunk cabbage, sage, thorn apple, butternut, elder, throatwort, and slippery elm. There was also some mercury, quinine, and bismuth—and lots of calomel, which some physicians prescribed for almost everything.8 Bleeding was highly recommended and widely used, as was cupping or leeching, and enemas. Castor oil and opium were also popular.

The western physician was a public servant as well as a pill roller. He was expected to answer any type of call in any kind of weather at any time of day; it was far from unusual for him to act as a judge or as a minister. "George H. Weaver reported an account of a Yorkville, Illinois, physician who one day informed a colleague from Aurora that he had performed

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7 Quoted in Otto Juettner, *Daniel Drake and His Followers* (Cincinnati, 1909), 87-88.
8 Howard C. Dittrick, "The Equipment, Instruments and Drugs of Pioneer Physicians in Ohio," *Ohio State Archaeological and Historical Quarterly* (Columbus, 1887- ), XLVIII (1939), 200-3, 208.
an operation and tried a lawsuit that day. The Aurora practitioner replied that he had, in the same time, visited his patients, tried a lawsuit and preached a funeral service." With these extra duties thrown on the already seriously overloaded physician, the situation was almost unbearable. The results were many dissatisfied patients and a constant clamor for more and better doctors.

A major cause of the scarcity of doctors was the lack of medical education in the region. In 1833 there were only two medical colleges west of the Alleghenies—the Medical Department of Transylvania University, founded by Dr. Benjamin W. Dudley in 1817, and the Medical College of Ohio, founded by Dr. Daniel Drake in 1819. By 1835 the Medical College of Ohio had graduated 239 doctors, and it was during this period that the Medical Department of Transylvania was at its peak. But it is doubtful, with conditions as they were, that all of these graduates remained in the West. Many western doctors had been trained in the medical schools of the East, such as Harvard and the University of Pennsylvania, and a few had even studied in Europe. But prior to 1835, at least, a majority of the western doctors got their training by serving apprenticeships—usually three years—and had no medical degrees.

Thus, poorly trained and meagerly equipped, the pioneer doctor went forth to battle the elements and administer to the ailing. That he met with dissatisfaction and competition is hardly surprising. He was accused of disseminating poisonous medicine and of bleeding his patients too generously. Furthermore, he was criticized for bleeding the purses of his patients too severely, a criticism not altogether unfounded. That the regular doctors promised no certain cures, as did many of the irregulars, was also a cause for suspicion on the part of the

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12 A medical code written in Cincinnati in 1821 set up the following list of fees: for a visit, 50¢; visit and first consultation, $5; visit and extracting a tooth, $1; for rising in the night and visit, $2; for a case of midwifery, $10; for amputation of large limbs, $30; for amputation of fingers, toes, etc., $7; for vaccine innoculations, $2. Juettner, *Daniel Drake*, 96-97. Compared with modern standards these fees appear extremely small, but to the western pioneer, whose money was scarce and hard to come by, they probably seemed anything but trivial.
pioneer. In addition, and perhaps most important of all, the people were more familiar with the simple herb remedies. The American scientific mind, which eventually was to throw out most of these simple remedies, had not yet developed.

Faced with these conditions, and catering to these ideas, the western pioneer turned to the less reputable practitioners for relief. "The quack, the medical confidence-man, was very much in evidence in the early days. Human credulity and stupidity prepared a rich harvest for charlatans of all kinds." And by the middle of the nineteenth century no less than seventeen "varieties" of doctors, in addition to the regular members of the profession, were named as practicing: eclectic, botanic, homeopathic, uroscopian, old Thomsonian, hydropathic, electric, faith, spiritual, herbalist, electropathic, vitalpathic, botanico-medical, physio-medical, physio-electric, hygeo-therapeutic, and "traveling."

Efforts were made to curb the growth of quackery, but without success. Ohio was the leader in this movement. As early as 1811 its legislature passed a law which divided the state into five medical districts and named three censors in each "whose duties it was to issue licenses to those desiring to practice medicine." But this act, having proved to be inadequate, was repealed in 1812; and the Medical Society of the State of Ohio was set up as a legal body to examine candidates and issue licenses. This was followed in 1818 by an act which gave legal recognition to formal medical education. All of these efforts proved of little avail, however, and in 1833 the state legislature, "discouraged at the futile attempt to suppress quackery by law, gave up in despair and repealed all existing laws pertaining to the practice of physic and surgery," and until 1836—sixty-three years later—anyone who wished could practice medicine in Ohio. The situation was much the same in the other western states.

Medical practitioners of the early nineteenth century ranged from the ultra-conservative old-line members of the

14 Juettner, Daniel Drake, 92; Pickard and Buley, Midwest Pioneer, 169.
13 Juettner, Daniel Drake, 85.
profession, who believed that medical science had reached the ultimate and was no longer subject to improvement, to the pure and unadulterated quacks who depended upon the ignorance and superstitions of the pioneers to bring them business.

Though it is not the purpose of this work to discuss in detail any of the various branches of the medical profession as practiced in the West in the early nineteenth century, a brief outline of a few of the more representative ones is necessary in order for one to understand and appreciate the scope and nature of the career of the subject of this study. For studied apart from this setting, the ideas and teachings of Joseph Rodes Buchanan take on a grotesque and ridiculous appearance of which they are largely undeserving.

Although unorthodox methods in medicine are generally associated with the western pioneer, in reality many—perhaps most—of them did not originate in the West, or even in America. Europe and Asia were the birthplace of many of them, from whence they found their way to the eastern seaboard of the New World and from there eventually moved into the Mississippi and Ohio valleys. That the pioneers were not the only gullible persons in the world was fully demonstrated by the success which Gall and Spurzheim had in continental Europe, and by the overwhelming popularity which the latter enjoyed in the eastern part of this country. True, they met with opposition in both places, but this opposition came mainly from the conservative old-line practitioners; and this same group, though smaller in numbers, was equally opposed to the introduction of new methods into the West.

Homeopathy was one system of medicine which sprang from a European origin. Based on the theory that diseases may be cured by remedies which produce on a healthy person effects similar to the symptoms of the complaint of the patient, it was developed by Samuel Christian Friedrich Hahnemann in the latter part of the eighteenth century.

Born in Germany in 1755, Hahnemann began the study of medicine early in life and soon developed an aversion to the excessive use of bleeding and mercury in the profession. He advocated the improvement of sanitation and recommended the quarantining of contagious diseases; he also urged frequent bathing, pure air, and proper clothing, all of which were revolutionary ideas in those days. Using himself as a guinea pig, Hahnemann began experimenting with various types of drugs and eventually discovered the law of similars, i.e., that a drug
would cure a disease similar to the symptoms produced on a healthy person who took the drug; hence the name, homoeopathy, derived from the Greek words meaning "like" and "disease." In 1796, Hahnemann presented his findings to the world through his "Essay on a New Principle" in which he expounded the theory of the law of similars and also maintained that the dynamic effect of drugs is increased by giving them in very small doses, diluted even to a decillionth of the original strength.17

Homeopathy was first introduced into the United States by Hans Burch Gram in 1825. Ferdinand L. Wisely was probably the first American convert to the idea, but he was soon joined by others, and by 1836 the first homoeopaths were reported to be in Ohio. In this region homoeopathy enjoyed a tremendous growth, which may have been due in part to the current decline of Thomsonianism.18

By the late 1830's several homoeopaths were practicing in Kentucky, but Dr. Storm Rosa became the pioneer teacher of the system in the West, when he established the Chair of Homoeopathy at the Cincinnati Eclectic Institute in 1849. There he succeeded in converting some members of the faculty and several students, but fear of competition caused the eclectics to dismiss him and to abolish the chair within a few months. The year following Dr. Rosa's ill-fated experience with the eclectics, the Cleveland Homoeopathic Medical College was opened and remained the western center of homoeopathic training for many years.19

Despite the fact that the homoeopaths made many converts in the turbulent West, they were just one cult among

17Lucy S. Hetzog, "The Rise of Homoeopathy," ibid., XLIX (1940), 332-33, 334; Pickard and Buley, Midwest Pioneer, 200. In 1849, Joseph Rodes Buchanan wrote that neurology explained the philosophy and modus operandi of homoeopathy, by demonstrating the fine susceptibilities upon which homoeopathy acts, and by showing the relations of medicines to the various organs of the human constitution. "It goes beyond homoeopathy, proving not only that infinitesimal portions of medicine may be effective, but that medicines have their effect even without being received into the body," Buchanan's Journal of Man (5 vols., Cincinnati and Boston, 1849-1856), I, 286.
18Pickard and Buley, Midwest Pioneer, 208-9. See also Wilder, History of Medicine, 316ff.
many and were destined, in time, to the same fate which met the others. But homeopathy made its contribution to modern medical science, as did the other cults; for Hahnemann's ideas about sanitation, quarantining, fresh air, and the like, were eventually to be adopted, though it would be pretentious to assume that he was the only one to have had such ideas.

Thomsonianism was more nearly a native child of American minds and methods. Developed by Samuel Thomson of New Hampshire in the early 1800's, it swept the country in the 1830's and 1840's. Thomson's thesis was that heat is the basis of health and that to prevent death it is necessary only to prevent the departure of heat from the body. It followed then that poor health was the result of a deficiency of heat and that to restore health one must return the body heat to its natural extent.20

For treatments, Thomson relied mainly on various herb concoctions, which he called Composition No. 1, Composition No. 3, etc. Of the herbs, his favorite was the pokeweed, but he also employed steam baths, electric shock, and other equally novel treatments.21

In his native New England state, Thomson met with much opposition, particularly from the orthodox members of the medical profession. But, taking them all in stride, he eventually came out victorious when in 1813 and again in 1823, the New Hampshire legislature gave him special permission to operate. With this legal backing Thomson was able to spread his doctrine until by 1839 he claimed three million followers in the United States.22

As in the case of homeopathy, the stronghold of Thomsonianism in the West was in Ohio.23 In 1835, the Thomsons claimed that one-half the population of Ohio depended on their remedies. Alva Curtis, who has been called both an ardent advocate and an active opponent of Thomsonianism, became editor of the Thomsonian Recorder in 1835, and in 1836

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20 Pickard and Buley, Midwest Pioneer, 169-70.
21 Ibid., 171, 178.
22 Ibid., 172, 178.
23 Ohio seems to have been the hotbed of unorthodox medical cults. One writer said that this was because of its geographical position, fertile soil, etc., which attracted settlers from three different cultural areas—Virginia, Pennsylvania, and New England—resulting in political struggles, religious struggles, and struggles between regular medics and various “non-regular” medical cults. Frederick C. Waite, “Thomsonianism in Ohio,” Ohio State Archaeological and Historical Quarterly, XLIX, 322.
he succeeded in getting a charter for the Physio-Medical College which began operation at Cincinnati in 1839.24

But trouble was brewing for the cult as early as 1827 when Wooster Beach later of eclectic fame, who had been one of Thomson's early followers, split with Thomson over the question of establishing botanical medical schools to train men in the cult. Thomson opposed such a move and the result was that Beach established his own school in New York in 1827. The schism between Beach and Thomson became more pronounced in 1837, the same year in which the last patent issued to Thomson by the New Hampshire legislature in 1823 expired. These two events, together with the growing opposition of certain Ohio botanics to the Thomsonian system, began the final decline of Thomsonianism, and following the death of Thomson, in 1843, the cult went to pieces. Remnants of it found their way to various other groups, and a few even joined the regular school;25 but the force of the movement was broken, leaving the way open for the up and coming eclectic movement.

Another cult which came in for its share of popularity was hydropathy, perhaps better known simply as the "water cure." Based on the curative powers of water, it became, in the United States, a rival of homeopathy, but seems never to have attained the popularity in the West which homeopathy enjoyed.26

Hydropathy came into the world rather suddenly about 1829 when Vincent Priessnitz, an untutored, simple-minded peasant of Austrian Silesia, one day cut his leg badly while cutting wood. To stop the bleeding he dipped it in a nearby spring, and found that the wound healed in record time.27 Recognizing an opportunity to cash in on a chance discovery, Priessnitz developed and expanded the art of water curing until it eventually gained a wide following.

The methods of hydropathy were both numerous and unique. It employed the use of ice lumps, wet sheets, the water

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24 See conflicting views in ibid., 328, and Juettner, Daniel Drake, 110. The former referred to Curtis as one of the most prominent botanics in Ohio who opposed Thomsonianism. The evidence seems to favor Juettner's view.
25 Waite, "Thomsonianism in Ohio," Ohio State Archaeological and Historical Quarterly, XLIX, 324, 328-29; Pickard and Buley, Midwest Pioneer, 182.
26 Pickard and Buley, Midwest Pioneer, 219.
27 Adams and Hutter, Mad Forties, 25.
girdle, wet jackets, and all types of baths. The water jackets and water girdles were perhaps most commonly used and a good hydropathist knew that he was getting results whenever “eruptions, sores and boils appeared beneath the compresses” of his patients. Some followers of the system maintained that to swallow water was harmful; others advocated it. Dr. Joel Shew of New York used water orally for hiccups, toothache, skin eruptions, palpitation of the heart and fatigue, and recommended the swallowing of ice lumps for a bleeding stomach. But he cautioned against the possible reaction of such a powerful agent as water if mixed with food at mealtime.28

Priessnitz, the originator of the system, did not confine himself to the positive aspects of treatment but added some negative elements. He forbade his patients the use of liquor, tobacco, tea, and coffee, and advised them to eat only very plain foods and to take lots of exercise. His theory was that “it is always the weak and enervated who are the most sensual and debased.”29

“Water, according to the hydropathists, was the most formidable as well as the purest of all natural elements. . . . It was, indeed, next to man, the most favored of all His [God’s] creations.” It was the panacea for all ills, and it was relatively painless. These claims, advanced at a time when the practices of regular doctors were both painful and uncertain in their results, largely account for the amazing success of the system, both in Europe and in this country.30

In addition to the above-mentioned cults, all of which had at least some claim to respectability, there were many other practitioners and “medicine men” who can be classified as nothing but quacks and frauds. For example, about 1803 a man calling himself “Professor Yernest” appeared at Menessier’s Boarding House in Cincinnati and gave out the following

28 Ibid., 41, 35; Pickard and Buley, Midwest Pioneer, 220.
29 Ibid., 34. That the system was a financial success to those who practiced it is indicated by the following announcement which appeared in 1852: “Priessnitz, the noted leader of the system of Hydropathy, died in his residence at Graefenburg on the 28th of November. . . . He was only 52 years of age, and left a fortune supposed to amount to not less than $500,000.” Joseph R. Buchanan, “Familiar Table Talk,” Journal of Man, III (1852), 32. It is not specifically stated that Priessnitz derived this fortune from the practice of hydropathy, but it would seem to be a plausible explanation for a man who rose from the position of an “untutored, simple-minded peasant” to a position of wealth within a period of twenty-three years.
advertisement: "Doctor Yernest, a native of Sweden, the inventor of... Elixir... lived 254 years, his grandfather 130 years, his mother 107 years."

"Dr. Yernest, the eldest in descent of the male line of this venerable family, now in his eighty-fifth year, lives at Mr. Menessier, and has the Elixir of Longevity with him; a fifty-cent bottle of the same being sufficient quantity to insure the continuation of life of the most sickly for at least a century." Surprisingly enough, the "Professor" did a good business until an accident revealed that about fifty of his own eighty-five years were being faked.

Also in Cincinnati, a Negro built up a lucrative trade by having his patients dip their fingers in a glass of water, whereupon he would study and analyze the water and tell the patient what his trouble was. At about the same time, two phrenologists, temporarily turning their attention from brains to hearts, did a land office business with their "love powder" which the youths of the city bought by the pound in the hope that it would solve their love problems.

These few brief examples demonstrate the state of mind of the early nineteenth century American. It was a period of uncertainty and of experimentation; a period in which men accepted a new system wholeheartedly or rejected it with scorn. Ever in search of a means of alleviating the illness and suffering which inevitably accompanied the rigors and primitive conditions of pioneer life, they constituted a fertile field for the unscrupulous quack and for the often sincere but disillusioned followers of the various cults. One man's opinion was as good as that of another and the scientific mind of the layman had not sufficiently developed in most cases, to enable him to separate the obviously bad from the possible good. Many patronized the unorthodox practitioners and were satisfied; others dealt with the regular members of the profession and found them lacking. It was thus a natural thing for each to experiment for himself and to defend his own discoveries. If controversy and fraud resulted, they were only two necessary evils among many in the development of a new nation.

There were other developments in medicine in the United States during the first half of the preceding century which

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81 Quoted from the Cincinnati Times in Juettner, Daniel Drake, 92-93.
82 Ibid., 95. Such events do not seem so amusing when compared with some present-day frauds of similar proportions. It would appear that the gullibility of the general public has not decreased.
have been left until last in this discussion because they embraced theories and practices which are more directly related to the subject of this study. The three developments were the growth and expansion of phrenology, mesmerism, and eclecticism, the latter being a larger and more nearly orthodox system.

The science—if it may be called that—of phrenology, as first developed by Gall and Spurzheim, and as practiced for some thirty to forty years, was based on five principles: (1) The brain is the organ of the mind. (2) The mental powers of man can be analyzed into a definite number of independent faculties. (3) These faculties are innate, and each has its seat in a definite region of the surface of the brain. (4) The size of each such region is the measure of the degree to which the faculty seated in it forms a constituent element in the character of the individual. (5) The correspondence between the outer surface of the skull and the contour of the brain surface beneath is close enough to enable one to recognize the relative sizes of the organs by examining the surface of the head. In modern times phrenology has professed to be primarily a system of psychology, but its second and more popular claim, especially during the early years of its practice, was that it afforded a method whereby the disposition and character of the subject might be ascertained.

Gall was not the first to work out the idea of phrenology; philosophers had had similar ideas from a very early period. But Gall was the first to formulate the ideas into a definite system and to expand that system until it reached the proportions of a science. He eventually determined, at least to his own satisfaction, the functions of twenty-seven organs in the brain; but he made no attempt to determine their specific outlines or to determine absolutely the functions of the whole brain.a3

Spurzheim, Gall's most prominent successor in Europe, modified and expanded the Gallian system until it included thirty-five or thirty-seven organs in the brain. He also made an attempt to locate the various organs in a more specific manner by dividing the whole surface of the cranium with geometrical lines, in an effort accurately to point out the boundaries of each organ. In addition, whereas Gall had named the

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a3 Joseph R. Buchanan, *Outlines of Lectures on the Neurological System of Anthropology, as Discovered, Demonstrated and Taught in 1841 and 1842* (Cincinnati, 1854), 1.
organs in terms which described the action they controlled, Spurzheim tabbed them with philosophical terms, in an effort to explain the essential nature of each. For instance, Gall spoke of the organ of “attachment and friendship” but Spurzheim called it “adhesiveness.”

The work of Spurzheim superseded that of Gall in popular estimation; and the system of phrenology taught in Europe and in America, prior to 1842, was substantially that of the former. But, since Spurzheim originally got his ideas from the teachings of Gall, the latter has been called the founder of phrenology and Spurzheim its propagator. Gall was “the great architect who showed us where to build—who dug the foundation with his own hands, and commenced the walls.” Spurzheim continued the work on those walls, and, in 1832, brought them to America, where other workmen eagerly seized upon them, and where they eventually fell into the hands of an overly ambitious master craftsman who shaped them into something bearing little resemblance to the original foundation.

The death of Spurzheim on November 10, 1832, produced a “deep sensation” in Boston. “A public funeral was awarded to his remains, and a handsome monument was erected to his memory.” And, lest anyone be denied an opportunity to gain inspiration from the great phrenologist, a group of loyal Harvard professors removed his brain and put it on exhibition. After an extended and enthusiastically received tour of the eastern cities and schools, the pickled phrenological specimen was offered to Europe—for a price, of course—but there were no takers.

But if European enthusiasm for phrenology was dead in 1832, it was still in its infancy in America. Countless men and women flocked to its banner, embraced it, and propagated it. Horace Mann called it “the truest handmaiden of Christianity,” while no less a personage than Henry Ward Beecher, who had at first opposed the doctrine, became one of its most ardent defenders after one of the phrenologists found that Beecher’s “bumps of Power of Thought, Eloquence, Splendor

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84 Ibid., 1-2. Buchanan’s introductory chapter, “A Review of Gallian Phrenology,” is the basis of most of this discussion.
86 Combe, Notes on the United States, I, 60-61; Adams and Hutter, Mad Forties, 61. This story may or may not be true; the writer has been unable to verify it.
of Diction, and Benevolence" were extremely impressive in their proportions.87

It was through the influence of Beecher that the two brothers, O. S. and L. N. Fowler, who have been credited with convincing the nation of the scientific accuracy of phrenology, became addicted to the system. After hearing a debate in which Beecher made his most famous defense of phrenology, the Fowler boys decided to make a career of it. For publicity they examined the Siamese Twins, lately imported by P. T. Barnum. They then sought out Nicholas Biddle, whose phrenological fame had been established in 1806 when he had allowed a cast to be made of his head by none other than Francis Gall; they invaded the theater by charting the cranium of Junius Brutus Booth, and they sought to determine the ability of those who ran the nation by examining Representative Henry Wise of Virginia.

Eventually they became so popular that they were allowed to examine the head of President Andrew Jackson, and found it to be "the largest . . . and the most splendidly equipped they had ever encountered." Others who came to them included Henry Clay, John C. Calhoun, and Daniel Webster; and it so happened that the organs of the nation's great men coincided perfectly with what was known of their characters. Martin Van Buren, the Democratic presidential nominee in 1836, was found to be of a nature to avoid work, but the Fowlers wisely kept this fact a secret until after the election, thus, as nearly as possible, keeping phrenology on a nonpartisan basis.88

In addition to their barnstorming tactics, the Fowler brothers founded The American Phrenological Journal,89 which, together with their practical application of phrenology—professionally examining heads and giving charts—was a major factor in spreading the popularity of the system.

In 1838, American phrenologists received another shot in the arm when George Combe, Spurzheim's former pupil and his most ardent disciple in Europe, came to this country for a three-year stay. From October, 1838, through February, 1839, he gave a series of sixteen lectures in each of three eastern cities—Boston, New York, and Philadelphia. The average at-

87 Adams and Hutter, Mad Forties, 60; Pickard and Buley, Midwest Pioneer, 225.
88 Adams and Hutter, Mad Forties, 70-78.
89 Joseph R. Buchanan, "Familiar Table Talk," Buchanan's Journal of Man, I, 287.
tendance at these lectures, including regular subscribers, visitors, and those holding complimentary tickets, was 395, a fair indication of the popularity of phrenology in the United States at that time.

On October 24, 1838, Combe noted that: “There are great numbers of ‘practical phrenologists’ in the United States, and there are several now in Boston, men who examine heads and predicate characters for fees, and who are pretty extensively consulted. This practice, which in the eyes of the uninitiated, resembles palmistry, and fortune-telling, is said to have created a strong feeling of disgust against Phrenology itself, in the minds of men of science and education. This is unquestionably an evil; but on the other hand I have found here a phalanx of very superior persons, belonging, most of them, to the learned professions, who are excellent phrenologists.” At another time he recorded that in Boston lectures on phrenology were delivered by someone almost every evening and were “attended by audiences numbering from five to fifteen hundred persons of both sexes; but entertainment and excitement, as much as instruction, are the objects of these discourses. . . . The most distinguished divines, senators, physicians, lawyers, and merchants, appear before the people as lecturers. Among these, the Rev. Dr. W. E. Channing and Mr. John Quincy Adams, . . . may be found.”

There is strong evidence that phrenology had been introduced to the West prior to the time of Spurzheim’s appearance in the East. Dr. Charles Caldwell, a member of the expanding Medical Department of Transylvania University, was sent to Paris, about 1820, to buy books and equipment for the department; and it is said that he adopted the science while in Europe and brought it back with him. There seems to be no evidence to refute this statement, and it is known that in later years Dr. Caldwell was a staunch supporter of phrenology. At any rate, the doctrine became very popular in the West and flour-

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40 Combe, Notes on the United States, I, 359, 361, 368.
41 Ibid., I, 84.
42 Ibid., 81. Combe received many invitations to lecture in cities and towns other than those mentioned; but, despite the fact that the offer usually was for twenty-five dollars per lecture, he declined because the progress of phrenology had been “much impeded by its teachers giving only brief and unsatisfactory expositions of its doctrines.” Ibid.
43 Pickard and Buley, Midwest Pioneer, 223; Joseph R. Buchanan, Manual of Psychometry: The Dawn of a New Civilization (Boston, 1865), 82-83,
ished for more than twenty years. To get one's head examined became the thing to do, and the faith that people put in it, as well as the way they flocked to its practitioners, is suggestive of the present-day enthusiasm for psychiatry.

Mesmerism, popularly known as animal magnetism, employed the power of suggestion and stimulated the development of hypnosis, both of which play a part in modern medicine. Originating in Vienna about 1775, the science adopted the name of its founder, Anton Mesmer; and after going the rounds of Europe for several years it came to the United States in installments during the 1830's, where it gained wide popularity and soon was competing with phrenology for top honors.44

Charles Poyen, a Frenchman, became America's most ardent advocate of mesmerism about 1836. His literary ambitions had led him to write "A Philosophical and Historical Essay on Slavery," but when he presented the essay to an eastern publisher the latter viewed it with disfavor and suggested that Poyen's future fame might more definitely be established if he could stir up as much excitement in America over animal magnetism as Spurzheim had created over phrenology. Apparently Poyen was a venturesome soul for he took the jesting publisher at his word and began to look around for a suitable subject for demonstrations. He selected a Miss Gleason, a consumptive victim of a New England carpet factory, and took her on a tour of New England, where he demonstrated his powers by "magnetizing" Miss Gleason by a series of manipulations over her body with his hands.45

The tour was proving to be rather successful when suddenly Colonel William Lette Stone, a journalist, put a crimp in the campaign by discovering and publishing "The Report of Doctor Benjamin Franklin and the Other Commissioners Charged by the King of France with the Examination of the Animal Magnetism." This document, first recorded in 1779, revealed that Mesmer and his followers in Paris had not always conducted their experiments in a manner conducive to the improvement of the city's morals. They were said to have had sumptuous houses in Paris where men and women met together; and where the women, after having been "magnetized" almost to the point of insensibility, were carried off by

44 Pickard and Buley, Midwest Pioneer, 227.
45 Adams and Hutter, Mad Forties, 89-90, 91-93.
the men to elaborate bedrooms, appropriately called "Apart-
ments of the Crises."46

Dr. James Esdaile, who became addicted to mesmerism
and practiced the art while in India, said that the report of the
French Commission was justified because the evidence pre-
vented in favor of mesmerism was so badly handled as to hide
the simplicity of the science "under a load of complicated ma-
chinery and various kinds of mummer."47 But whether justi-
fied or not, the report caused a furor among the straight-laced
New Englanders and Poyen's venture suffered accordingly.

The chief claim of mesmerism to scientific fame was that
it offered possibilities, through its appeal to faith and imagi-
nation, of successfully treating disease, and, through its hyp-
notic powers, as a means of performing painless surgery. Dr.
Esdaile used it for the latter purpose on an Indian hog dealer
and reported that after about one hour of passing his hands
over the patient's face he was mesmerized and became insens-
ible to all pain. In this condition the man underwent surgery
on three different occasions and each time testified that he
felt no pain whatsoever.48

There were, however, limitations to what mesmerism
could do for medical science, for not everyone was responsive
to its influence. An extremely sensitive person might be made
insensible to pain within a few minutes, but in general it took
an hour or two of repeated efforts, and in some cases the
treatment completely failed. Dr. Esdaile believed that a person
of "a high organization, in whom the nervous and circulating
systems were equally active, with a determined will, a resolu-
tion to do the thing if possible, and a love of truth and hu-
manity"49 was most likely to reap the benefits of mesmerism.

But mesmerism gained more fame and reaped greater
profits from another group of practitioners who went about
the country demonstrating its unique possibilities merely as a
means of entertainment. There were many of these opportu-
nists in the 1830's and 1840's and they performed throughout
the country before large audiences, who were willing to pay

46 Ibid., 97-101.
47 James Esdaile, "Mesmerism in India," Buchanan's Journal of
Man, I, 264.
48 Ibid., 302ff.
49 Ibid., 256.
well for what they saw. The mesmerizers used various methods, but all of them depended upon the powers of hypnotism for gaining control of their subjects, usually volunteers from the audience; and they kept their patrons in suspense and awe with the strange and amusing things which the subjects would do at their command. A Mr. Keely, who operated in the midwestern states, passed out silver coins to his audience and had them gaze upon the coins for fifteen or twenty minutes, by which time several would be sufficiently somnolent to be easily controlled. Keely then would exhibit his power over his subjects by giving commands "which they are compelled to obey, and [by] making assertions which they are compelled to believe."  

Eclecticism, the most important native American medical cult, and the system which enjoyed the widest popularity and the longest life of all the irregular systems, had its birth during the 1820's. It was an outgrowth of "the active protest against the polypharmacy and heroic drug methods of a hundred years ago"; but it was sufficiently orthodox to gain the support of several members of the regular medical profession. Literally speaking, the term "eclectic" means the practice of exercising choice among a number of doctrines or systems. As applied by the eclectic school of medicine, it denoted the selecting and the use of the most successful methods of medical practice to be found, whether they came from the regular members of the profession or from one of the less reputable cults. Constantine Samuel Rafinesque defined eclectics as "those who subject and adopt in practice whatever is found beneficial, and who change their prescriptions according to emergencies, circumstances and acquired knowledge."

Dr. Wooster Beach, the founder of eclecticism, was born at Trumbull, Connecticut, in 1794. Early in life he began the study of medicine and theology and rapidly developed a strong
antipathy to the current medical practices. His soul "was filled with indignation at these instruments of cruelty and misery, administered under the specious pretext of removing disease." From an elderly man in New Jersey, who at first was reluctant to share his knowledge, Beach learned the rudiments of botanical medicine. He then took a medical degree in New York, in order to make his practice legal, and began practicing in New York about 1825.54

For a while Beach was a follower of the Thomsonian system of botanic medicine, but in 1827 he and Thomson split over the question of establishing schools for the training of botanic doctors, and as a result of this difference Beach established the "United States Infirmary" in New York that same year. In 1829 it became the "Reformed Medical Academy" and in 1830 was rechristened the "Reformed Medical College of the City of New York," which flourished until 1838.55

The botanic practices of the eclectics were in harmony with the pioneer mind, but some of the crude and bulky vegetable remedies employed by them were so repulsive to the patient that the popularity of the system was somewhat tempered until later experiments and discoveries resulted in the extractive process developed by William S. Merrell of Cincinnati in 1847. Then followed the development of a series of fluid medicines "made by dilutions of tinctures of vegetable substances and alcohol . . . with dilutions of simple syrups." With these developments eclecticism became so popular that Dr. John Forbes could say with assurances of support that the "Hygienic—the Eclectic—the Hippocratic—the Rational System of treating disease is the only one that can be justified and vindicated."56

Soon after 1829, Beach, Thomas V. Morrow of Fairview, Kentucky, and others formed the "Reformed Medical Society of the United States," which seems to have been the first of its type in the country. The object of this society was the study and practice of rational drug methods, and its members were all regular physicians. They principally opposed the abuse of the lancet and the indiscriminate employment of large doses of calomel.57

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54 Harvey W. Felter, History of the Eclectic Medical Institute, Cincinnati, Ohio, 1845-1902 (Cincinnati, 1902), 81-82.
55 Ibid., 6.
56 Ibid., 190; Wilder, History of Medicine, 336.
57 Juettner, Daniel Drake, 357. Morrow was born in the same house which four years later became the birthplace of Jefferson Davis.
At a meeting of this society at New York in 1830, it was resolved that it would be “expedient to establish an additional school in some town on the Ohio River . . . in order that the people of the West may avail themselves of the advantages resulting from a scientific knowledge of Botanic Medicine.” In addition to the motive mentioned in the resolution there was also the incentive that Beach’s New York school lacked the legal sanction of a legislative charter and was ever in danger of being forced to close.

Dr. John J. Steele was delegated to go into the Ohio region the following year to select a suitable site for the new school; but in the meantime Beach issued a circular which was sent to various points in the West and South “to elicit such information as would enable him to make a judicious selection in locating” the school. One of these circulars fell into the hands of Colonel James Kilbourne, who, under the auspices of the Scioto Land Company, had been the founder of Worthington, Ohio. Kilbourne saw a chance to revive Worthington College, which had seen more prosperous days, and upon his request the trustees of the college sent an invitation to Dr. Beach, offering him the use of their charter and building for his proposed medical school. Dr. Steele was then sent to Worthington to see that the location was suitable, and in December, 1830, instruction began in the “Reformed Medical College of Ohio,” better known as the “Medical Department of Worthington College.”

The new school opened under the presidency of Dr. Steele, but he was soon succeeded by Dr. Morrow, under whose leadership the enrollment advanced from seven or eight in 1831 to forty in 1836. The institution continued to prosper and by 1839 the curriculum included anatomy and physiology, chemistry and medical jurisprudence, theory and practice of medicine and midwifery, surgery and diseases of women and children, botany, materia medica, and pharmacology.

But in 1839 trouble began. The enrollment had begun to decline and the adoption of new regulations failed to improve the situation. In addition there was dissension among some of the faculty members, and the school was having financial troubles. When the state refused financial aid, as did the public when popular subscription was resorted to, it became

58 Felter, History of the Eclectic Institute, 7, 9.
59 Ibid., 9, 10.
60 Ibid., 11; Pickard and Buley, Midwest Pioneer, 192.
apparent that Worthington was too small to support such a school.

The final disruption of the institution came as a result of the graverobbing tactics of its students in their search for cadavers for the dissecting room. Late in 1839, after several bodies had been illegally removed from their final resting places, a mob of angry citizens gathered at the school and after a brief search found at least one body and the remains of others. “Their fury now knew no bounds; a pitched battle was fairly averted in Windsor Street, and Dr. Morrow and others defended the college with rifle in hand. It is said that battering-rams were erected for the demolition of the building.” But someone gave the key to the mob, and Dr. Morrow, now realizing that resistance was useless, agreed to leave town.

From Worthington, Dr. Morrow moved to Cincinnati where he established (1842-1843) the “Reformed Medical School of Cincinnati, Ohio,” the immediate predecessor of the Eclectic Medical Institute. By the end of 1844 the faculty was four or five strong and the curriculum was about the same as that of the former Worthington school. The program consisted of four to six lectures per day through a four-month session, for which the students paid fifty-five dollars, plus small fees for certain special services.

By 1845 the enrollment of this new school had grown to thirty and in that year eleven hundred citizens of Cincinnati petitioned the state legislature of Ohio to grant a charter to Morrow and his associates. As a result of this action, the legislature, on March 10, 1845, passed a bill incorporating the school under the name of the “Eclectic Medical Institute of Cincinnati.” The charter thus issued provided for: (1) a

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61 Grave robbers, popularly known as “resurrectionists,” were plentiful in those days, as it was about the only way students of anatomy had of acquiring cadavers. Joseph Nash McDowell, brother-in-law of Daniel Drake, once took the body of a young girl from its grave, and soon after heard rumors that friends of the girl were coming for the body. McDowell went to his laboratory that night to hide the body and when he was ready to leave found that the building was surrounded by men. He lay down on a table and covered himself with a sheet, whereupon the men entered the room and proceeded to examine all of the bodies. One fellow, when he came to McDowell, said, “Here is a fellow who died in his boots; I guess he is a fresh one.” Justtner, Daniel Drake, 394. Resurrectionists passed into history abruptly about 1880 because of legislation which followed the discovery of the body of John Scott Harrison, son of William Henry Harrison and father of Benjamin Harrison, in the Medical College of Ohio in 1878. Ibid., 398, 397.

62 Felter, History of the Eclectic Institute, 16-17.

63 Ibid., 19.
capital stock not to exceed twenty thousand dollars, divided into twenty-dollar shares; (2) a board of trustees of eleven to fifteen members, chosen yearly by the stockholders, each stockholder to have one vote for each five shares thereafter; and (3) authorized the school to issue the degree of Doctor of Medicine to students who met certain specified requirements.64

By the end of 1846 the school had met the ten thousand-dollar property requirement, which was also included in the charter, by moving into a newly erected building at the corner of Court and Plum streets. The school was now well launched and attracted large classes to its halls. Steps were taken to get for its students the privilege of attending the Commercial Hospital of the city, and in 1846 a clinic was established for purposes of practical instruction.

The newly created institution met bitter opposition from the regular doctors, one of them going so far as to say that medical science was not "susceptible of further improvement or reform." Felter has described the history of the Institute as the history of "the contest for freedom in medical thought and teaching," and as "the history of the Godmother of American medicine," and declared that "few institutions can boast of so many graduates in all States of the Union, and none can point with greater pride to her alumni."65

Thus, in 1840 the American medical profession was badly muddled. The regular members of the profession continued to practice crude and outmoded methods. While on the other hand numerous unorthodox groups, ranging from a few sincerely inspired reformers to many unscrupulous quacks, had crowded into the field. The methods of the new groups, though unique, were generally less effective than the orthodox practices, and many of them were positively harmful. There was, indeed, an earnest need for enlightened reform; the field was wide open for anyone who had the correct treatment for the malady and who had the aggressiveness to administer it.

64 Ibid., 20-22. The capital stock was later increased to sixty thousand dollars. Ibid., 24.
65 Ibid., 5; Pickard and Buley, Midwest Pioneer, 192.