

The necrological appearances of southern typhoid fever in the Negro : with hints upon its prophylaxis [sic] and therapeutic management : together with observations upon the mental and physical peculiarities of the Ethiopian : founded upon observational analysis, and autopsy results in his normal and abnormal condition : exhibiting their probable relative influence in forming the character of the disease south, and the presumed establishment of its primary origin in the Negro, upon physiological and pathological grounds / by H.A. Ramsay.

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THE
NECROLOGICAL APPEARANCES
OF
SOUTHERN TYPHOID FEVER,
IN THE NEGRO:

WITH
HINTS UPON ITS PROPLYLAXIS AND THERAPEUTIC
MANAGEMENT:

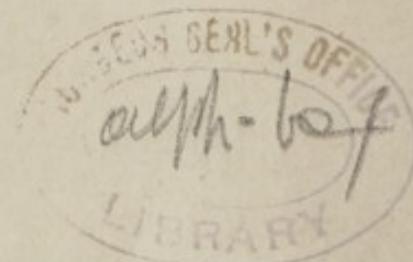
TOGETHER WITH

OBSERVATIONS UPON THE MENTAL AND PHYSICAL PECULIARITIES OF THE
ETHIOPIAN,—FOUNDED UPON OBSERVATIONAL ANALYSIS, AND AUTOPSAL
RESULTS IN HIS NORMAL AND ABNORMAL CONDITION, EXHIBITING
THEIR PROBABLE RELATIVE INFLUENCE IN FORMING THE CHA-
RACTER OF THE DISEASE SOUTH, AND THE PRESUMED ESTAB-
LISHMENT OF ITS PRIMARY ORIGIN IN THE NEGRO, UPON
PHYSIOLOGICAL AND PATHOLOGICAL GROUNDS.

BY H. A. RAMSAY, M. D.

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1852.

APPLIED MICROBIOLOGY

SOUTHERN METHODIST UNIVERSITY

IN THE NORTH

PHOTOGRAPH

TO THE COLLEGE OF THE SOUTH

1950

1950

APPLIED MICROBIOLOGY

1950

APPLIED MICROBIOLOGY

DEDICATION.

TO THE COUNTRY AND VILLAGE PRACTITIONERS

OF

GEORGIA,

We respectfully dedicate this Essay, with the proud satisfaction of knowing, that should they not entirely approve the tone of a portion of it, they will ratify its *truth*, and concur in its *premises*.

THE AUTHOR.

SOUTHERN TYPHOID FEVER, ETC.

“ Truth without Fear.”

THE portraiture of the character of the maladies incident to the South, upon physiological and pathological illustrations,—and their influence upon the animal economy, derived from the peculiarities of physiological structure, and local position, should be a matter of vital importance and paramount interest, to every intelligent mind in the Southern country. The elucidation of the prominent peculiarities common to the Negro race, and the demonstration of those general laws, and well established regulations, which should guide the planter or owner, and the physician, in his prophylactic and therapeutic management of the slave, cannot fail, we would fain believe, to elicit the profound attention of the whole South, when it is remembered, that the population of fifteen States of this Republic are nearly a moiety of this color, involving in a pecuniary aspect, about six hundred millions of dollars, if we estimate the value at three hundred dollars per head. The health and diseased condition, we imagine, of this amount of property are worth preserving, and portraying, in many respects, apart from its pecuniary bearing. Probably no class of men among us are so well adapted to the delineation of the points above suggested, and the illustration of those peculiarities which are known and recognized by all candid men belonging to the negro race, as the country and village practitioner of medicine. The Southern people are a rural class, to a considerable extent, and if there is any true happiness to be found in the world, it can certainly be had in the magnificent cottage of the Southern Planter,—retired in his forest home, surrounded by his estate, his barns replete with the abundance of his farm grounds, his flocks roaming upon his pasture lands, enjoying the full fruition of a bountiful harvest, while all around him seems satiated with comfort and plenty, and redolent with peace. As cities and towns in the South are few and far apart, the planter necessarily resides, in a large majority of cases, upon his plantation, surrounded by his family and slaves, varying in number according to the freaks of birth, fortune, or good luck; but generally, in the aggregate, tolerably large, and furnishing often more cases of *ordinary disease* and *obstetricy* in one year, for the inspection of the physician, than can be seen in a Southern or Northern hospital in treble that time. To this vast field the country and village practitioner

has exclusive access, while his limits in other respects, are not defined by city formalities, or conventional mandates. From what we have said, it will be seen, that while the Southern city practitioner may enjoy some advantages of comfort, etc., over his country brother, he is comparatively or wholly destitute of that extensive field for practical deduction, and medical investigation, stretched before the country physician. Indeed, with the highest regard for the genius and high toned sentiments of many of our city brethren, who will appreciate our position, we advance it, as an axiom, in Southern medicine, that the practitioner who has spent his life amid the environs of a Southern city, knows emphatically nothing of the *success, cases, or surrounding circumstances*, which come under the observation of his country brother; and this is equally true of a certain class of "*Village Doctors*," who do no business, but vegetate fungously by traducing others. With these facts staring every sensible man in the face, no man in the Southern profession can venture to promulgate his views and observations upon pathological and statistical evidence, particularly if these evidences uphold Southern institutions, but he is held up before some irresponsible Convention, composed of city practitioners chiefly, as unreliable in his cases, or his conclusions are denounced as crude, wild, and fantastic speculation; and, lamentable to tell,—such attacks are generally made by Southern meddlers, anxious for notoriety, and led on by *cliques and journalists* in the Southern Atlantic States, who have not shed their pin feathers in country practical medicine, and know less about legitimate journalism, and less of country practice.

We have indited these facts simply for the protection of Southern country writers, against the censorious assaults of men who wish to be the censors of Southern medicine from the positions they occupy, without having the first practical element for the character they assume, and less of that benevolence of feeling and purity of purpose which should exist among medical gentlemen. Will Southern journals never have the magnanimity to extend justice to their Southern brethren? Can we ever have a Southern medical literature, or a just exposition of Southern diseases, as long as our journals are prostituted to *cliques, colleges, the building up of some men, and the pulling down of others*? If the past be an exemplification of the future, we fear we shall never have a Southern medical literature, nor will the diseases of this clime ever be correctly represented, unless it be through the aid of Western and Northern journals. Southern journalists, in their efforts to run off the track Southern writers, and the Alumni of Southern schools, seem to be moved by an insatiable ambition of an immense magnitude, respecting neither truth or fairness,—“an ambition that could only germinate in the mind of an oppressor, and find nutriment only in the degradation of an entire profession.” The glory of the conquest they long for, covers the

shame they endure, "and the stain of the impious sacrifice of right," professional and private, is wrung from the editorial gown by dreams of domination over Southern medicine and opinion. To other sources, then, must the Southern physician look for the tribute of justice; yes, even to those whom the rancour of sectionalism has taught him, almost, to despise, but in whom his untrammelled judgment beholds virtuous integrity, and the strict award of justice and fair dealing.

The primary object of this paper is to delineate the autopsic appearances of Southern Typhoid Fever in the negro, with the additional demonstration of some of the peculiar points of propylaxis and medication, together with a few suggestions upon many of the prominent peculiarities of the black, as observed in this climate. We shall, therefore, proceed to our subject without a further prelude, trusting to the good sense of our readers to correct our errors, and to cast the mantle of charity over our enthusiasm, and any apparent speculations we may indulge in.

The cases we herewith present, occurred in a family in this county, where Typhoid fever has been prevailing in an epidemic tendency. Prior to the appearance of this affection, the family were proverbial for their healthfulness. In July last, the first case appeared in a malignant form; it convalesced after a long time, and then relapsed from an imprudent dietetic move, and died. Since, and during the pendency of the above relapse, one after another of the family have contracted the disease in all its malignancy, until every member of the black family have had it except two, and all of the whites save one, making an aggregate of twenty-one cases. The houses in both white and black cases, were small and crowded, the former were all in one room except two cases, the latter exclusively so; the cases being subjected to the morbid influences, which may have been generated from each other. After the blacks took it, the well members seemed to contract it with marked facility and velocity; much more so than the white family. This proclivity may have originated from their habitude, in living, dressing, lodging, &c. Be this as it may, two of the negroes died, one at the sixth day of attack, the other at the 21st, from a relapse, both cases were boys, one 10, aet., the other about 17, aet. The autopsic examinations were made in the presence of respectable medical men, the diseased preparations exhibiting the glands of Peyer and Brunner, also portions of the lungs, the heart, the mesenteric glands, &c., are in my office open for inspection. We invite all men interested in the subject, to call and see them; they show for themselves and form the foundation of some of our conclusions. The first case is interesting, as it exhibits the disease in its early stage; the second is also important for its bearing on the first, and its delineation of the advanced disease. We have devoted considerable time to the investigation of Typhoid Fever, and we hope if our opinions should not be entirely approved, our investigations

may at least receive justice, and throw some light upon a disease strangely fatal in the South, as we conceive from the want of proper investigation upon correct principles in pathology, upon which its rational management wholly depends.

CASE 1st.—This was a boy 10 years old, he died sixth day of attack. *Cadaver* emaciated, skin looked anserine. The *Rectum* was somewhat inflamed, no traces of disorganization observable, it contained consistant fœces, and living worms of the lumbricoid kind.

The *Colon* presented some traces of inflammation; some of the internal folds of the track were enlarged and corrugated, it was distended with gas of an offensive character, and contained living worms, as the rectum did. The *Cæcum*, presented about the same appearance of the *Colon*.

The *Ileum*, in its lower portion, was considerably contracted by an enlargement of the internal folds, and considerable engorgement of the elliptical plates called the glands of Peyer, as these plates are diffused in irregular manner from the *ilium* to the *duodenum*, they were found enlarged through the entire track as well as the glands of Brunner in their respective localities. The enlargement about the *Ileo Cæcal* valve was conspicuous. The *Stomach* presented an inflamed cast of its internal coat, and seemed to be somewhat thickened.

The *Lungs* looked bluish and pale, as if defectively aërated. They swam in water and appeared diminutive in size. The *Heart* was small, flabby and pale; the right ventricle had clotted blood in it, and apparently a fibrous deposit.

The *Liver* was very large, it appeared to be unusually so, otherwise it was natural and healthy.

The *Gall Bladder*, was distended with a greenish biliary matter, which had transmitted its color by perforation to the appendages in its vicinity.

The *Kidneys*, looked natural, but enlarged.

The *Spleen*, was enlarged.

The *Pancreas*, appeared in its natural condition.

The *Bladder*, offered nothing morbid, it contained some urine.

The *Mesenteric Glands*, were unduly enlarged, we clipped several out which were as large as a large hickory nut, and have them now in our office.

CASE 2d.—This was a boy of about 17 years of age, he died 21st day of attack from a relapse.

Cadaver emaciated, the body had vibices upon it.

Bowels Rectum, contained soft fœces, being minutely examined it exhibited some traces of ulceration.

The *Colon*, was distended with flatus, not so much as in the former case, owing to the fact, probably, that it contained some small perforations which discharged it in the cavity of the abdomen. Soft

fœces were found along its course, several small circular perforations; the internal coats of the bowel were soft, and in a state of disorganization at many points, presenting a dark bluish appearance, with an exceedingly offensive odor. The Cæcum offered some evident traces of ulceration.

The *Ileum*, the Glands of Peyer were enlarged, but soft, and in an ulcerated condition; this was so prominent from the bluish appearance of the intestines externally, that we called attention to it, before we opened the bowels; indeed, the enlargement and ulceration were so conspicuous you could detect them by rolling them between the points of your fingers; near the Ilio Cœcal valve, ulceration was complete,

The *Jejunum* and *Duodenum*, presented many points of ulceration, the Glands of Brunner were slimy and puriloid in appearance.

The *Stomach*, looked reticulated and darkish upon its interior, it contained an orange colored matter.

The *Lungs*, looked small and grayish, the right was firmly attached to the chest, and it was with great difficulty that we could disengage it. They swam in water.

The *Heart*, was small apparently and flabby, the pericardium contained some fluid.

The *Liver*, was unduly enlarged, but did not look morbid.

The *Gall Bladder*, was distended with its peculiar fluid, in a very thin state.

The *Spleen* was enlarged and looked bluish.

The *Pancreas*, looked healthy and natural.

The *Kidneys*, were enlarged but did not present any other undue deviation.

The *Bladder*, contained its accustomed fluid, and otherwise it was natural.

The *Mesentric Glands*, were extravagantly enlarged, some in clusters, others isolated, some suppurative, others not.

The above autopsy was made several hours after death, the blood of the subject ran free whenever the knife touched a vessel; it was dark and fluid as if he had been but recently dead.

October 8, 1852.

The conclusions we deduce from the above autopsies, and others, we have made and referred to in an article upon Southern Typhoid Fever, now rapidly passing through the medical press, to which this is intended as an addendum, are to the following purport: that the Typhoid Fever of the South, particularly as it appears in the Southern Negro, is a disease *sui generis*, that no other affection presents the same pathological phenomena; or is characterised by the same diversity of living symptoms. We farther are inclined to think, that the glands of Peyer and Brunner, are more

prominently enlarged in Southern Typhoid Fever than in its Northern form, and it may be said, subject however to further confirmatory elucidation, that those Glands are more prominently affected and enlarged, in the Southern negro, under any circumstances, than in the Northern subject. From a hasty glance at these autopses, which will be doubtless confirmed by other observers, it will be discovered that the Mesenteric Glands in both cases, were unusually enlarged. The specimens in our possession, also reveal the fact, and we doubt not but it is a prominent sign of the pathological condition of the affection in the South. The enlargement of the *Spleen* is proverbial with almost all observers, who have examined the disease in autopsy, and many go far to shed some light upon its living characteristics which it is not within the scope of this paper to discuss. The increased size of the *Liver*, observable in the cases, may furnish a nut for the "*Liver Doctors*" to crack, which indeed may be considered to have some real value in its relations to the disease; but more we imagine upon the physiological structure of the negro.

The size of the *Lungs*, may give an impetus to the doctrine, long since advanced, that the negro had smaller Lungs than the white man. The increased size of the *Kidneys* in both cases, and which we have seen in many of the post mortem cases we have had, induces us to rank it as a pathological fact usually seen in Typhoid Fever of the South. But to condense our opinions and place them plainly before the profession for farther confirmation or repudiation, we will concentrate our points in numerical order, without regard to any systematic arrangement.

1st,—The enlargement of the glands of Peyer and Brunner in Southern Typhoid Fever, particularly in the Negro race, is more prominent than in the Northern form of the disease.

2d,—The unnatural and excessive enlargement of the Mesenteric glands, may well be regarded as a common fact in Southern Typhoid diseases, in the black man.

3d,—The diminutive size of the *Lungs*, and the increased size of the *Liver*, will be found a common occurrence in Southern Typhoid Fever in the negro, and easily explicable upon physiological and pathological grounds.

4th,—The enlargement of the *Kidneys* will generally be found conclusive upon pathological conditions in like cases.

The above are our opinions in a brief compass upon Southern Typhoid affections, in which we may differ with some pathologists in the abstract; as to its deviations in this climate, we have not deemed it necessary to embody above any of those prominent necrological facts observed by others, with whom we may concur, seen in a single case, as our primary design is simply to portray the differential character of the Southern form of the malady.

The above palpable illustrations, in our conception, exist in the

affection in the South, particularly among our negroes. To confirm this opinion, we appeal to our morbid preparations, our autopsies and our observations, as well as the reports of others, who have made autopsies in colder climes, which differ from ours, not in the essential seat of the disease, but in the prominence and developement of the glandular affection. We do not wish to be understood; as saying that Typhoid Fever South, differs in its pathological location from the same disease North, but only in its developement, which we conceive is controlled by topographical meteorological, hygrometical, and other causes, inducing a modification of symptomatology, and a corresponding change of treatment. Whether this affection of the glands of Peyer and Brunner, is primary or secondary, we shall not enquire, suffice it, it is of no real practical importance and will scarcely ever be settled. These diseased conditions do exist in these glands; they are diagnostic of it in death; they appear in no other febrile affection South, we have ever examined, and we make autopsies more or less annually.

Having given an outline of the essential differential points in the Typhoid Fever of the Southern negro, we will merely remark, that they are our opinions, and may be fallacious. We ask for them farther investigation by other gentlemen. We claim for them a fair criticism from honorable sources, instigated by candor and truth. If we have erred in our premises, it is our fate as a human being, and we shall be happy to be rectified from a source capable of performing the task; but from the contemptible fault finder, presumptuous sciolist, and slang-whanger, we ask in kindness to be delivered. For such we care nothing; from such we expect to receive nothing but ignorant twattle. Let us now enquire, what therapeutic results are to be derived from our post mortem returns and opinions. They are plainly ostensible to our mind, and merit the calm attention of every slave holder in the South. From a casual review of the appearances exhibited in our record, the reader will see, the important plan in treating Typhoid Fever, is in keeping the bowels in a state of quietude. To purge is to kill, to bleed is death, as all practical physicians know. A laxative of the mildest and blandest character may be of service in the beginning of an attack, but prudence and caution should go hand in hand during its progress. No disease we have ever met, requires so much attention and so little medication to insure a successful termination. We shall not present any specific rules of therapeutic management, we have done it in another article; our object here is general suggestions of practical importance and applicable to all intellects. The care and attention of a skilful physician should be obtained as soon as the disease makes its ingress in a family; he should be a man fond of his profession, not a *humbug*, who *converts* a malignant affection into a hobby to benefit himself, and who transforms all of his cures of other simple diseases into the worst forms of Typhoid Fe-

ver, while his losses of Typhoid Fever are attributed to other ailments. We have heard of the bombastic tales of some medical men, that they have never lost a case of *Typhoid Fever*; the reason is obvious, they have never had any cases. Such boasts and such charlatanry, is too contemptible for a scientific man, and he who indulges in it, is upon a par with the most menial quack, and will sooner or later destroy himself. This is the fate of all men who attempt to deceive the people, and trespass upon their credulity. We would fain hope there are but few such in our country, but painful to record there are some. To such, Rush was a cypher, Hyppocrates a mere circumstance; if such a man cures a case, it is a mere accident; he has no knowledge of the true principles of medicine, no system, he succeeds by appealing to the credulity of people, and is unworthy as a safe practitioner because he is a humbug. These are wholesome truths, and it is time the good honest yeomanry of the country were advised of such tricks and charlatanisms. The portrait is not at all colored, but we pass on to a more genial question—the *Propylaxis of Typhoid Fever*. That much may be done by the way of prevention in this disease, we are well convinced from our observation and experience. The disease among our negroes, is evidently contagious, though considerable discrepancy exists in medical writings concerning it. The safe plan for the slave owner, is to regard it as contagious, and avoid its noxious influences. Do not be deceived by the cry of “no danger;” it is too late to halloo Wolf! Wolf! when the animal is among the fold, and the sheep are killed. The best plan is to keep your fires burning, and keep the Wolf at a proper distance; consequently, the planter loses nothing by having his negro houses all scoured and cleansed: the walls white washed: the beds sunned and scalded: the clothing washed, the houses ventilated, and a little fire to avoid moisture: have the Cabins swept under: make the negroes wash themselves often and change their garments; drink tar water: rise early and retire soon; have all the weeds, decaying matter and other offensive stuff carefully removed from about the yard, and have it sprinkled well with lime: last, but not least, keep the sick from the well, do not let the latter be about the first much: let no man deceive you by saying the disease is not contagious; get it among your negroes, and you will soon have ample and unmistakable proof of its contagion. These are our suggestions, if they will do no good, they are at least prudent and harmless, and no man should be deterred from adopting them. If you should perchance contract it, and your cases convalesce, by all means be careful in your dietetic regulations; more negroes die in the convalescence of Typhoid Fever than any man is apprised of; we regard it a critical period in the process of cure, and cannot too strongly urge upon our readers, the imperious necessity of caution and care at this juncture. We now approach an instructive part of our subject, which, in its manifold phases,

has convulsed this country from centre to circumference, and we fear is now only partially slumbering, to arise with increased vehemence. It is not our design to fan the flame of sectional feeling, or irritate the rancor of fanaticism; we would rather "pour oil upon the troubled waters" and bid the turbulent pool be calm. All of our views are conservative; they are the offspring of a calm and dispassionate judgment formed far away from any ebullition of political excitement, independent of any prejudiced feeling. The only object we have in prospect, is the correct elucidation of the diseases, and peculiarities physical and anatomical, of a race of people hitherto imperfectly understood, and but inferiorly investigated. In examining this subject, we shall treat it in its physical, intellectual and anatomical character, with the addition of such practical conclusions as we may deem appropriate.

When we look at the Southern Negro physically and intellectually, we find him emphatically dissimilar to his bipedal fellow of the white race. These lines of dissimilarity are plain and conspicuous to the most ordinary intellects in the South, and seldom appeal to the reasoning faculties to sustain them. In his physical conformation he is (the negro) palpably antipodal to the white man; his head is woolly and kinkey, lips thick and protuberant, nose flat and broad, his beard sparse and nap-like, his gait slower, and muscles softer—rendering him incapable of the same amount of labor, and equally incapacitated to the same endurance. He is a being inherently adapted to a warm climate; the nearer you approach the northern proximal of the Torrid Zone* the better he luxuriates, and the closer you carry him to the Frigid, the worse he fares; indeed, we may truly advertise, the Southern country as his natural home, where all of his peculiarities and habits of every character develop themselves in their purity and perfection. The winter season he cannot abide as the white, he covers his head as by instinct, at the risk of exposing his feet from the blast of the season; yea, while sleeping he will cover his head in health or disease, when his feet are unprotected. Every intelligent planter in the South is conversant with this fact. We remember calling the attention of several persons to the truth of this statement, in the case of last autopsy narrated, and in no instance did we find the head uncovered when we entered the Cabin, if the boy was reposing. With the negro, the lymphatic and bilious temperaments seem to predominate; he is not over sanguine, and the nervous temperament is poorly developed, hence he has strong digestive powers, slothful, dull, and cannot bear the same amount of physical endurance, or medical drasticity the white man can. While the negro is very subject to pulmonary congestions, intestinal affections, febrile diseases, &c., he will not bear purging, emesis, or any other

* We believe he does not do passing well within the tropics.

depletory means in an extravagant or heroic way. The same means used to cure the white man will often kill him ; indeed we might advance a step further and say, that the diseases of whites and negroes South, will not bear the heroic management prescribed for them in our Northern Medical text works ; this is a well established principle, known to every practical Physician South, and my own observation daily confirms the opinion and verifies the necessity for a Southern Medical Literature, with reference to this point.

The Northern man coming South, has many disadvantages to labor under, owing to his want of practical knowledge with regard to Southern diseases, and the influence of a Southern climate upon physical constitution. This is so obvious that a Southern planter would rather trust his sick negroes in the hands of an intelligent overseer or himself, than to an inexperienced Northern Physician. It is a very important item in the success of any medical man coming South, to understand well the diseases and physical peculiarities of the negro. With a correct knowledge of these points, a medical man may be generally engaged, without them he will soon destroy his reputation and lose his practice. Many of the diseases of the negro can be detected by their countenance, their ailments like their feelings or passions seem imprinted upon their faces. The diagnosis of many of their affections by external optical examination is not difficult, but it is almost folly often, to ask them any direct question ; you must be governed generally by a congeries of circumstances and their collateral influences. The negro is prone to dissemble and feign disease ; probably no race of human beings feign themselves ill so frequently, and are so incapable of concealing their duplicity. With this laconic synopsis of a few of the more common external physical peculiarities of the Ethiopian, we come to speak of him in an intellectual and social sense. In the scale of intellect, the negro is removed many degrees below the white ; which is an admitted fact by every liberal minded physiologist of the present era. There are exceptional cases to all facts and conditions in life, but we make it a position susceptible of practical demonstration, that the negro is incapable of receiving the intellectual and educational training which would qualify him for *self government*. Mentally he is the most complete dolt upon earth ; comparatively ranked in the grade of human knowledge, he has *no perception*, *no association* or *calculation* ; indeed all of the phases of mind characteristic of intelligence, are defective or wholly absent in the negro, to a considerable extent. The humane system of vassalage common to the South, appears to us better adapted to his wants than any other condition ; indeed, the Southern slave owner is the God appointed guardian for his negro, and a fortunate appointment it was for the curly headed son of Ham. Here in the South, all of his feelings and propensities have their full play, he is treated more as an equal than a servant, yet we find him dull,

slothful, lazy, and inactive ; he is almost destitute of the ordinary elements of common judgment in the common transactions of life ; he can scarcely count ten, and when he approaches the decimal, he is as apt to call it F or G, as anything else ; he has no thought of the future, and but little for the present ; he is easily cheated, will sell his last coat for a dram of whisky ; and dispose of his only shoe for a chew of "*Nicot*" and a part of it on a credit at that. He is apt to be theivish, will steal before your eyes and deny it with the most barefaced impertinence imaginable, but he cannot conceal his stolen chattels well, as he has no prudence or caution in his physical corporation. He is impulsive and vindictive when aroused, but he has no moral courage or firmness, in the commission of his acts,—hence, he is generally covert in his assaults and easily detected. He is indolent, fond of music, and will often walk miles at night to hear a favorite tune, and assist in a melodious song, which constitutes the summit of his industry and energy. In his passions he is libidinous, having frequently many wives, and totally regarding any moral obligation as an obsolete idea. In his parental discipline, he is rigid and severe to a fault. He cannot calculate, he fails in association, consequently he is a bad messenger for details ; he may remember names but that is the extent. In the woods hunting his favorite "*possum*," he is at home, never lost ; but it is difficult for him to find roads, turn-outs, etc. In religion he is a bigot, he thinks the rite of immersion or sprinkling a salvo immutable for all his transgressions ; his advances towards holiness are generally beset by *sights, dreams, spirits, hobgoblins, raw-heads and bloody bones*. In his religious experience for church admission, he narrates these imaginary visions as emanations from Deity, and symbolical of his regeneration. In disease, he is superstitious ; frequently considers himself "*tricked, charmed, or poisoned*" by some famous necromancer among his fellow servants ; and he can often tell the precise period when he passed over the diabolical charm and received the spell which diseased him. He has strange presentiments of futurity when in health, in the character of *voices, revelations, chirping of the birds, crowing of the cock, or the noise of the owl*. In his runaway frolics, he is apt to attribute them to an evil spirit caused by a witch or some other sinister device prepared for him, and this opinion will seem to haunt him like an incubus for months. Enter his cabin and you find him naturally, wonderfully filthy ; his bedding and clothing are thrown to and fro : his floor dirty, a plank loose upon it furnishing a deposit under the house for the surplus filth rather than put it out doors ; the cabin will be found, if he was the architect, windowless, a crack in the wall furnishes an ample supply of the ventilating agent ; and if the construction of it be logs, the cracks are generally chincked and daubed with mud, the fire place large and the pitch as low as possible. He likes a blazing fire, but

greatly prefers having his head to it, to other parts of his body, and is as apt to get burnt from his sleepy headedness as otherwise. In his diet he is not very capricious, devouring almost anything, the roughest food suits him best; he can digest with facility, and he eats rather voraciously. We incline to the opinion that education does but little for him; and observation accomplishes but little more; for the reason our free blacks enjoy these advantages combined to a degree, and they are notoriously known South as the most trifling, indolent, worthless class of colored people among us; although they have every opportunity to accumulate and live well, they are too lazy to avail themselves of it, and are emphatically below our slave negroes, in moral sentiment, integrity and principle. Anatomically the son of Africa is separated by an impassable gulph from the Caucasian race, except by the adoption of the principles of procreative agency upon the part of the two races. It is true, Prichard and Todd have expressed different sentiments from those advanced, but they are prejudiced in their opinions, and their premises are denied by Malphigi, J. F. Meckel, Seommering, Blumenbach, Virrey, Ebel, Albinus, Stubner, Cartright and a host of others. Some of the anatomical dissimilarities are palpable, requiring no argument in the South to maintain them. The darker color of the negro blood is proverbial to every white and black bleeder in the slave States, and no respectable authority in medicine in Georgia, will question it. It will be seen, too, that one of our autopsies exhibited considerable fluidity of the sanguiferous system many hours after death, which may yet, upon farther investigation, prove to be in the pathological anatomy of the negro, a fac simile of Typhoid Fever.

The brain, lungs and heart, of the negro are smaller in our conception than the same organs in the white man, while the *liver, kidney, and glands*, are larger, and in this opinion we are sustained almost wholly by every reputable physiologist and pathologist who have examined the subject. The muscles of the negro appear to be darker and larger, but they are not so rigid as in the white, nor has the negro the same energy and activity of the Anglo Saxon. The nervous system, with reference to sensation, is less developed than in the white, from the fact, that the lash is not very painful to him, being frequently inoperative in its influence, and the victim will often laugh and caricature to his associates the motions of the master in making the application, and how he would jump and contort himself to avoid it. There are many modes of punishment decidedly more painful and humiliating to the negro than the scourge. The senses of smell and audition are imperfect in the negro; indeed, his brain is less active in the mobile disorder of Typhoid Fever, than the white man, consequently we see less raving and delirium in that affection among the blacks.

Another evidence of the obtundity of the nervous system and

its partial development, is the fact that negroes are not, as a race, peculiarly susceptible to convulsive affections; the Southern negro enjoys a remarkable immunity from puerpural convulsions, which is well known to every "old granny" and practitioner conversant in obstetricy in the slave States, and this remark applies with much force to Southern white ladies. The membranes, tendons, and other portions of the negro are darker in hue than the white: while the negro abounds in mucosities of a character which sometimes impairs the diagnosis of an unskilled physician in his affections. The secretion of the cutaneous surface in the negro, is strong and peculiar, of a musky character, which no one forgets, who has had his olfactories once scented with it. If any man doubts this fact in the regions of fanaticism, let him come South, and we will give him a practical illustration which he will never again question, by lodging him a night with one of our "buck" negroes, in a comfortable room and soft bed. The testal parts of the negro are smaller we believe than the white; while the male appendage is longer. The vagina of the negro is larger and much easier relaxed than in the white; the pelvis more capacious, etc. The teeth of the negro are larger and longer than the white man, the incisors more pointed and better adapted to omnivorous and carnivorous uses, and he is more subject to dental caries; but he apparently suffers less pain from dental extraction, and has less courage for the operation. The osseous system of the negro is harder and whiter than the white man; and has an excess of phosphate of lime over it. This fact was known many centuries ago, Herodotus, we believe adverts to it.

We have now given in brief detail a few of the prominent characteristics in the comparative anatomy of the negro and the white man. Some of them we have seen and discovered to our own senses by necrological facts which are somewhat restricted, it is true, from our local position, but annually increasing. Others we have recorded upon the evidence of those who have preceded us, and some of them we have verified to our own satisfaction. The points we advert to, as the result of our own opinions, may be subject to farther controversy and investigation—from a misapplication of our judgment, but they stand correct, until more extensive observation shall put a different aspect upon them. The late distinguished Dr. Samuel G. Morton, of Philadelphia, in his *Crania Egyptiaca*, said "*the physical organic characters which distinguish the several races of men, are as old as the earliest records of our species.*" Morton was no idle enthusiast, he was an acute observer and a profound investigator, but with these views, in the city of Philadelphia, he was treated with manifest injustice, owing doubtless to the rabid spirit of fanaticism which pervades the age, from an ignorance of the plain revelations of comparative anatomy. In our own sunny South, the venerable and distinguished Dr. Samuel Cartright, has done more to unravel

this question than any man among us; his observations have been formed upon a mature experience of the third of a century, and confirmed by personal, autopsal facts, supported by a huge list of European authority, but, amid it, he has been denied justice by Southern men and Southern Journals,* and he can well exclaim of a few of his Southern brethren, as Cæsar did of Brutus, "*et tu Brute.*"

The path of medical science and philosophic investigation in the South, is a rough and uneven track, the few who dare to tread it, are beset by envious and presumptuous sycophants, who do not regard the means they employ to assassinate their brethren. We have but little organization in the Southern States, and less concert of action among physicians in developing our morbid condition, physical peculiarities and sanitary prospects. In our own State, we have a Society yeelped the State Medical Society, containing about one hundred and fifty members, from a professional population of about fifteen hundred. In it there are many clever, talented, and disinterested gentlemen,† but it is controlled by an influence, appropriating all of its favors to their own allies, by previous meditation and unprincipled cliqueism, while it distributes its insolent frowns with no sparing hand to all country and village practitioners, who despise its dictation, and spurn its allied embraces. Indeed such is the favoritism extended by the Society to a few juniors, without claim in Georgia, that, we have thought for a long time there was no necessity for a membership outside a certain locality. What we say we honestly believe to be true, from facts in our own possession. For village and country *physicians* to be aspiring in this section, disconnected with some *clique, college, family compact, or professional influence*, and assume to act and speak for themselves independent of such influence or their advice, is to secure the maledictions of the whole class, from Peter down to Pompey—from the saint to the most contemptible and menial tool in the cabal, and that without regard to truth, or principle. As an individual, we care nothing for these combinations, or demagogueical coalitions; their friendship we scorn, their enmity we defy, their malicious organ we contemn; but the rights and privileges of the country practitioner, we hold sacred and dear, and we intend to defend them from any intrusion by a

* The Oct. No. of the Med. Chirurgical Review, for 1852, makes a shameless review of Dr. Cartright, which ought to make the cheek of every Southerner burn with indignation. What will the Charleston Journal say to it?

† There are men in it, who would scorn a *coalition*; and spurn a *clique*; and we are happy to say, the cliqueism of the Society is restricted to a *few*, yet they control it from a species of "*Old Foggy*" wire-pulling, which is disgusting to fair men. Lamartine, said, that scientific and literary associations were the worst of despotisms, and we verily believe it in the main; although, we are in favor of a *Medical Organization*, formed upon *equal* and equitable principles, respecting the claims and rights of all.

crew of allied conspirators, whose only desire is the prostration of a class of medical men in this latitude and the South, who do seven eighths of the practice in the Southern States. We say then, the Medical Society of Georgia is not a fair representation, nor does it reflect the opinions of the village and country practitioners of the State.* This fact should be more generally known, and we accordingly advise Northern Medical gentlemen of it, who doubtless, have erroneous views about medical progression and opinion South, derived from concocted reports of Southern Medical Societies to promote individual ends. We daily pray for the extinction of this spirit of jealousy and malevolence in the Southern profession, but we fear, what we have hinted at of our own native State, is too true of other portions of the South. We claim then, if we ever attain to any proficiency in developing and illustrating the diseases peculiar to the South, it must be through the efforts of the village and country practitioner, for the obvious reason, they do a large majority of Southern practice, and we may justly add, they must be assisted by an independent press. But let us again enter the arena of the negro question, premising our inductions lead us to conclude, a human, composed of such incongruous and diverse materials as the Ethiopian, is not an available subject for the exercise of those privileges and principles of democratic freedom enjoyed in the South; he would run into the wildest excesses, and abuse all of his natural rights with an avidity unparalleled among civilized people; there would be no restraint to his passions, no bounds to his licentiousness and impudence. Look at his small brain, his deficient intellection, his small lungs and defective atmospherisation, his increased liver, his black blood and sluggish circulation, his obtunded nervous sensibility, his enlarged glandular system, all pointing to a physical character, animal in its inclinations and wanting in those attributes of intelligence which elevate the white man, and places him far above the brute.

We say look at him,—and tell us thou worshipper of fanaticism, if this animal of human structure, is prepared for the reception of the beneficence of universal liberty? We answer he is not,—he could not appreciate its blessings, nor would he reciprocate, by word or deed, the mistaken gratitude of his deliverer. He who rides upon the whirlwind and directeth the storm, in his creative design, made the negro for the purpose and position he now occupies. Here in the South, all experience exemplifies, the negro does not advance much if any in intellectuality, only when crossed with the white, which is of itself good evidence of his original mental dullness. Fate is inexorable and intended for our good, the position of the Southern slave is his fated sphere, his manifest destiny, and it will be his final resting place. It can never be modified, and could it, it would be at the expense of every moral obligation recognized

* Nor can it ever be, under present control and existing representation.

by religionists and proclaimed by the Saviour. The demented fanatic may preach his equality, but it is all an ignorant illusion, confronted by autopsy, and annihilated by the potency of truth. The friends of Colonization may renew their efforts and appeal to the sympathies of the slave owner, but all to no purpose; the negro is an inferior being, born to servitude—colonization will never screen him from its embraces, or learn him the simplest rule in arithmetic. The son of Ham can never be intellectualised upon a par with his Caucasian neighbor, in his pristine formation; it must be done upon a principle of amalgamation, which no sentimental man in this country, having any regard for his race, would be willing to see supervene. We are led to this settlement of opinion by a variety of natural and social reasons, among which we may mention in reiteration or otherwise, that the negro here is treated more in the character of a child than a slave, he has no care for the future, his food, raiment, &c., are prepared by the owner; in case of death, his children are all provided for, and his remains are decently placed beside those of his ancestors or associates in the family burial place. His intercourse with his owner is frank, open and familiar; he approaches him as a protector and leaves him in peace and content. The same divine ministrations are made to the negro that the owner enjoys; they attend the same church, and eat at the same sacramental table. They are tried by the same juries, before the same tribunals, and under the same restrictions. In sickness, the same physician administers to the negro, who doses the master; the physician who accouches the mistress, attends the negroes in her throes, particularly in those localities where a medical man enjoys the entire obstetrical practice, and we believe the practice is getting annually more general in the South, to engage the male obstetrician for all colors, and cases. This is an unvarnished picture of slave life in the South. We have but few bad masters among us, the all powerful lever, public opinion, deals harshly with such, and if it fails of reformation, the power of the law is invoked. We know these things are imperfectly understood in other latitudes; where misrepresentation is the argument of a faction they never enquire for facts. The bugbear tales of the lash, and perishing condition of our slaves, which have been stereotyped so long against us in other regions, are the worst of exaggerations, groundless in truth, and unworthy of the notice of considerate men. The negro of the South would not now accept of freedom in half the entire population, if proffered. There are hundreds and thousands of them, who would spill the last drop of blood they have in their veins, cowardly as they are, in defence of their cabins and owners. Merely as a conviction of this fact, we ask the fanatic to come and stand by the bed side of the dying slave owner, and behold the gray headed old African, with his sable cheeks furrowed by age, approach the dying couch of his lenient master, his eyes streaming with tears

of grief, at the separation of those ties which had bound them together for years. Follow him to the grave, as the sod falls upon the vault which is to entomb him for all earthly time, hear his cries, his groans and lamentations for his departed master, with a frequent invocation to Deity, to take him swiftly to his master's abode. Could anything be more convincing of the kind feeling, and spirit of contentment pervading southern slavery? and yet, we have only narrated, in plain language, an every day occurrence among us. Now with all this play of the feelings, this freedom of action, is it not plausible, yea, probable,—had the negro any mental capacity, it would develope itself in some feature or other?

We think so, yet, every ingenious mind in the South, knows that African intellectual progression is beautifully slow, and intensely dull, in this country; from present appearances predicated upon scientific researches, it will probably remain in statu quo, by irrevocable destiny. We believe the negro succeeds better in agriculture and medicine, than anything else; in law he is woefully deficient, while in divinity he would make old Noah smile, could he revisit the world and hear his sable grandson sermonize. In agriculture he must be under the guidance of a good manager, for his judgment is not good, and he will not work for himself. In medicine, he deals in *charms, roots, conjuration*, and his favorite "*yarbs*," with his own color he is a successful practitioner, and in his own case, no other remedy will frequently suffice. From all these self-evident truths, we must conclude, that the Ethiopian race in the South is not prepared by God for the reception of republican freedom, or the appreciation of its blessings as recognized among us, that servitude is his natural avocation, and the South the field of his glory.

We know that historic tradition tells us of Africa being the mother of Hannibal, Cyprian, Tertullian and Jugartha, the race that reared the pyramids, and who thundered at the gates of Athens and Rome in ancient wars, and made their classic halls resound with their eloquence; but the age of Jugarthan freedom lives only in the memory of the historian, and we of the nineteenth century, will never see a Hannibal or a Tertullian descended from any thick lip-ped son of Ham, or even a respectable wind-mill fighter, unless there is a speedy regenerative metamorphosis in the intellectual character of the present race of Noah's great grandchildren, descended from Ham. But what has all this to do, asks one, with Southern Typhoid Fever? We answer, look at our necrological appearances, then take a retrospect of the negro physically, intellectually and anatomically, you will probably find him consuming less oxygen, as his lungs would seem to indicate, you will find a larger *liver*, a smaller heart, a sluggish circulation, and a blunt nervous sensibility—all emblematical of their prostration and general debilitation incident to the disease, and these facts go far to incur the belief, if not substantiate the

position, that Typhoid Fever is peculiar to the negro, but transmissible, and has probably prevailed in the South from time immemorial, under other names, from a misapprehension of its pathology.

We have now done, our opinions are before the profession; we ask for them that calm and dispassionate judgment, we believe they merit. We push them on no man; like other men, our judgment may err, if so we are open to conviction and ask rectification. The course of our article is diffuse, the material composing it rendered it necessarily so; every man, however, can cull it to suit his taste, and satiate his appetite. From the independent city physician, the village and country practitioner, we expect ample justice and doubt not, we shall receive it. From the statesman who has the benefit and prosperity of his country at heart, in the correct delineation of the national peculiarities of a race, whose existence among us has caused vast confusion, and threatened destruction to our Union, we anticipate an unbiased judgment, which will go far to allay sectional ascerbity. From the malicious slang whanger, whose evidence is not good in a court of justice, we expect what all men get, *abuse* and *condemnation*. From the man of science, who wishes to see the ethnology of the negro correctly portrayed, we expect at least a smile of approbation for our feeble attempt, should he not approbate our premises. From our brethren of the North and West, who belong to the editorial corps, we ask a candid reflection upon our opinions, whether subsequent investigation shall confirm them or not. From northern men who have been reared on a free soil, and who know nothing of the negro race, from personal observation or comparative anatomy, and whose inclinations lead them adverse to the institution of slavery from a misguided judgment and the prejudices of education, we cannot reasonably ask for an approval of our sentiments; but from the *conservative men* of the North, we claim only what a freeman demands, and a patriot will extend—*fairness and a just basis, in the investigation of our opinions for criticism*. This bandying of epithets, and traduction of an institution unknown to our Northern brethren by personal observation, without regard to decency of expression, or justness of terms, we have long ago deprecated, and honestly believe it can be extinguished by a candid devotion to the true principles of comparative anatomy in the two races. It is something painfully remarkable, that there should be no chairs of comparative Anatomy in our most reputable schools in America, exhibiting the manifold differences of the two races in their anatomical structure, together with their ordinary and well known peculiarities. We trust the day is not far distant, when every school North, West and South, will establish such chairs, which in our opinion, will go far to roll back the tide of sectional feeling, establish certainty in practice and make us a better, and happier people. To the efforts of Cartright and Dow-

ler, the South are indebted for many important facts in national science, and may we not expect others in a field where the harvest is rich and the laborers few?

As for ourself, whatever we are, or may be, we owe it to the South, and by the blessing of God, we shall devote the remainder of our days to the effort of elevating her medical standard by the record of observational facts, and legitimate philosophy; retaining at the same time a patriotic regard for *truth* and *justice* towards every *section* and *all colors*. To conclude, our opinions are now crudely before the world; we shall not inquire the necessity for them, it is obvious, but we can truly say, if error marks our policy and reasoning it is not designed, and in the promulgation of our doctrines, we *have made the South our page, the negro our manuscript, and in our conception, God our author.*

THOMSON, COLUMBIA CO.. GA., OCTOBER, 1852.

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