African Americans in Medicine

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African-American people have been involved in health care in this country for more than three centuries. The earliest recorded contributor was Lucas Santomée, a physician, who in the 1660s arrived in North America from Holland, where he was trained. He settled in the area that is now the state of New York and practiced there with distinction and with the patronage of the white colonists. In 1721, 55 years before the signing of the Declaration of Independence, a slave in Massachusetts introduced the science of preventive medicine to the New World. During the smallpox epidemic of that year, Onesimus, the Boston slave, advised his master, a Puritan clergyman, to inject infected material from a smallpox victim into the body of a noninfected person to prevent the recipient from contracting the disease. The cleric followed instructions, inoculating several persons, and none of them developed symptoms of the disease. He later recorded his description of the procedure, giving full credit to Onesimus, who, the clergyman wrote, had learned the technique as a boy in Africa when he was inoculated.

In the years that followed, many African Americans—slaves, former slaves, and free men—became medical practitioners without the benefit of a formal education. Some, however, did serve as apprentices or assistants to conventionally trained physicians. One such individual was James Derham, an ex-slave, born in Philadelphia in approximately 1762, who acquired his medical skills, while a slave, from his owners, who included a physician in Philadelphia, a British army surgeon, and a New Orleans doctor, who eventually freed him. Derham became a well-known physician in the Gulf City and was recognized as a linguist, fluent in English, French, and Spanish.

Several other African-American medical practitioners who were not formally trained made significant contributions. David Ruggles (1810–1849), born of free parents in Connecticut, was a hydropathic physician, and constructed in Massachusetts the first building in the United States erected exclusively for the performance of hydrotherapy. Years before, as an agent of the Underground Railroad, Ruggles had helped Frederick Douglass escape to freedom, becoming his lifelong friend. James Still (1812–1872?), whose father was an ex-slave, developed a large and successful practice in New Jersey, where he was born. He advanced and promoted many forms of treatment, and believed that all diseases could be cured—an idea that he expressed in his published autobiography. William Wells Brown (1816–1884) was born in Kentucky of a slave mother and a white father, and was raised in Missouri. At the age of 18, he escaped to Ohio and became active in the freedom movement there and in Buffalo, New York. In addition to his work as an abolitionist, he practiced medicine in Boston and was America's first colored foreign war correspondent and published novelist.

In 1850, three African-American males were admitted to the Harvard University Medical School, only to be dismissed the next year for questionable reasons. One of the three was

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Martin R. Delany (1812–1885). Born free in West Virginia, he grew up in Pennsylvania and became an abolitionist and colleague of Frederick Douglass, with whom he co-edited an antislavery newspaper. Before entering Harvard, Delany had apprenticed to three physicians in Pittsburgh, and after his dismissal from the medical school, he retreated to that city, where he practiced and was honored for his work in the cholera epidemic of 1854. His nonmedical activities included service in the U. S. Army as an infantry major, the writing and publishing of a novel and other literary works, an exploratory journey to the Niger Valley in Africa, and a failed attempt to organize a free settlement there, composed of Negro emigrants.

James McCune Smith (1813–1865) was the first African American to become a formally trained physician. Born in New York City of well-to-do parents, he traveled to Scotland as a young man, and, in 1837, he received his medical degree from the University of Glasgow. After that, he returned to New York, where he established his practice. There, his role as an abolitionist became well-known, highlighted by his scholarly introduction to Frederick Douglass' 1855 revised autobiography, *My Bondage and My Freedom.* In 1847, David Peck (date of birth and death not ascertained) graduated from the Rush Medical College in Chicago and became the first black American to earn an MD degree from an American school. He migrated to the Central American country of Nicaragua and spent the rest of his life there. One other early, free African American who earned his medical degree in the United States was John Sweat Rock (1825–1866). He was born in New Jersey, and his doctorate was conferred by the American Medical College of Philadelphia in 1852; he practiced in Boston. Also a dentist and a lawyer, in 1865, he became the first of his race to be admitted to practice law before the U. S. Supreme Court, and like Ruggles, Brown, Delany, and Smith, he, too, was an abolitionist.

The first female African American to be awarded an MD degree was Rebecca Lee (1840–1881), a graduate of the New England Female Medical College, Class of 1864, just 15 years after the first woman in the United States had achieved that distinction. Lee practiced in Richmond, Virginia, for several years and then moved to Boston. One of her contributions was a book she wrote, counseling women on how to take care of themselves and their children. The second formally trained female African-American physician, Dr. Rebecca Cole (1846–1922), pursued her medical education at Woman's Medical College of Pennsylvania and received her degree in 1869. She provided professional services for more than 50 years in Philadelphia; Columbia, South Carolina; and Washington, DC. In 1870, Susan Maria Smith (1847–1918) became the third African-American woman to be awarded an MD degree. Her degree was conferred by the New York Medical College for Women, where she was valedictorian of her class. She practiced in Brooklyn for 24 years and then relocated to Xenia, Ohio, to become a faculty member and campus physician at Wilberforce University.

After the Civil War, the need for better health care for African Americans became obvious, as did the shortage of physicians to provide that service. Because most American medical colleges were not supporting those objectives, the obvious solution was the establishment of institutions to train African-American doctors. Between 1868 and 1907, a total of 14 such schools were organized, all but two in the South, and six in the State of Tennessee. The first was in Washington, DC, at Howard University, and was founded in 1868. In 1870, the second was announced at Lincoln University in Oxford, Pennsylvania; it closed 2 years later. The third was Straight University Medical Department, established in 1873 in New Orleans, Louisiana. Meharry Medical College evolved as the Medical Department of Central Tennessee College in Nashville, Tennessee, in 1876. The others were Leonard Medical College of Shaw University in Raleigh, North Carolina (1882); Louisville National Medical College in Louisville, Kentucky (1888); Flint Medical College in New Orleans, Louisiana

(1889); Hannibal Medical College in Memphis, Tennessee (1889); Knoxville College Medical Department in Knoxville, Tennessee (1895); Chattanooga National Medical College in Chattanooga, Tennessee (1899); State University Medical Department in Louisville, Kentucky (1899); Knoxville Medical College in Knoxville, Tennessee (1900); University of West Tennessee School of Medicine and Surgery in Jackson, Tennessee (1900), relocated to Memphis in 1907; and Medico-Chirurgical and Theological College of Christ's Institution in Baltimore, Maryland (1900). Of the fourteen, Leonard Medical College was the first to develop a 4-year, graded curriculum, and Howard was unique in that early in its existence it admitted women and whites.

In 1910, when Abraham Flexner's report on medical education in the United States was made public by the Carnegie Foundation, only seven of the minority medical schools were still functioning. Of those, the Howard University School of Medicine and Meharry Medical College were the two that Flexner thought worthy of survival, and by 1923, the other five schools were defunct. Surprisingly, no serious efforts were made to organize others until 1978, when a 2-year program in medicine was developed at Morehouse College in Atlanta, Georgia; 4 years later, it had advanced to become an autonomous 4-year medical college—the Morehouse School of Medicine. The Charles R. Drew University of Medicine and Science of Los Angeles, established in 1966, plays an important role in medical education, but does not, independently, grant MD degrees. Consequently, there are now only three predominantly African-American schools of medicine, and although several white medical schools outside of the South began admitting African Americans years ago, it was not until the early 1970s that large numbers of minorities began enrolling at those institutions. In 1949, more than 75% of African-American medical students were either at the Howard University School of Medicine or at Meharry Medical College; today, that number is less than 25%. And now, all three African-American medical schools admit students of other races.

The Medico-Chirurgical Society of the District of Columbia, which is still active, was founded in 1884; it was the first predominantly African-American, although racially mixed, local medical society in the country. Four years before, the Tennessee Colored Medical Association was established by James Monroe Jamison (MD, Meharry, 1877); however, little is known of that society or of other early ones in the South. The first national minority medical organization was the American Medical Association of Colored Physicians, Surgeons, Dentists, and Pharmacists, established in 1895 in Atlanta, Georgia, during the Cotton States and International Exposition. Its name was changed in 1903 to the National Medical Association, and by 1912 its membership numbered approximately 500, almost all of whom were physicians. Today, the Association represents several thousand medical doctors in the United States, Puerto Rico, and the U.S. Virgin Islands. Dr. Robert Fulton Boyd and Dr. Miles V. Lynk were two of the leading organizers of the Association, and Boyd was its first president (1895–1897). He received his degree from Meharry Medical College in 1882 and his DDS in 1887, was a faculty member at his alma mater, and operated a private hospital in Nashville. Lynk was a Meharry graduate of the Class of 1891 and was the founder of the University of West Tennessee College of Medicine and Surgery.

The first African-American medical journal was *The National Medical and Surgical Observer*. Originally published in December 1892, it was conceived and edited by Lynk and appeared monthly through January 1894. The second was *The Hospital Herald*, a local release, edited and promoted in Charleston, South Carolina, by Dr. Alonzo McClennan (MD, Howard, 1880), and circulated from December 1898 through May 1900. *The Journal of the National Medical Association* is the oldest periodical of any kind published continuously by African Americans. Introduced in 1909 as a quarterly, it was published bimonthly beginning in 1939,

and has appeared monthly since 1977. Dr. Charles Victor Roman (MD, Meharry, 1890), was the first editor (1909–1916). He was an early member of the National Medical Association, was its fifth president (1904), and served on the faculty at Meharry for many years after giving up his practice in Dallas in 1904. The second editor was Dr. John A. Kenney, Sr., the *Journal*'s voice from 1916 to 1948. A 1901 graduate of the Leonard Medical School of Shaw University in Raleigh, North Carolina, he was President of the National Medical Association in 1913, and for several years was personal physician to Booker T. Washington and college physician and Director of the John A. Andrew Hospital at Tuskegee Institute. His son, Dr. John A. Kenney, Jr. (MD, Howard, 1945), was President of the National Medical Association in 1962, and the two represent the only father and son who have headed the Association. Dr. U. G. Dailey succeeded Dr. Kenney as editor of the *Journal* in 1948; followed by Dr. W. Montague Cobb, 1949–1977, and Dr. Calvin Sampson (MD, Meharry, 1951), 1978–1997. A. Paul Kelly has been the editor since 1998.

Some departed African-American physicians who deserve special recognition include: Daniel Hale Williams (1856–1931, MD, Chicago Medical College, 1883), one of the first surgeons of any race to successfully operate on the human heart (1893), and the only African-American physician who was a founding member of the American College of Surgeons (1913); William Augustus Hinton (1883–1959, MD, Harvard, 1912), long-time Chief of the Department of Clinical Laboratories of the Boston City Dispensary and faculty member at Harvard, designer of the test for syphilis that bears his name, and author of the first medical textbook by an African American (1936); Ulysses Grant Dailey (1885–1961, MD, Northwestern, 1906), noted surgeon, founding member and member of the Board of Trustees of the International College of Surgeons, President of the National Medical Association (1916), and Editor of the *Journal of the National Medical Association* (1948–1949); William H. Barnes (1887–1945, MD, Pennsylvania, 1912), otolaryngologist, and first African American to be certified by a medical specialty board (1927); Louis T. Wright (1891–1952, MD, Harvard, 1915), prominent surgeon, medical writer, second African American to become a Fellow of the American College of Surgeons (1934), and first to be appointed Police Surgeon of New York City (1928) and President of the Board of New York's Harlem Hospital (1948); W. Montague Cobb (1904–1990, MD, Howard, 1929, and PhD, Case Western Reserve, 1932), anatomist, physical anthropologist, medical educator, medical historian, civil rights activist, President of the National Medical Association (1964), and for many years (1949–1977), Editor of the *Journal of the National Medical Association*; Charles R. Drew (1904–1950, MD, McGill, 1933, and MedDSc, Columbia, 1940), surgeon, medical educator, and researcher of technics to dry and store blood plasma, a process he helped to develop, that saved thousands of lives during World War II; and Matthew Walker (1906–1978, MD, Meharry, 1934), surgeon, medical educator, President of the National Medical Association (1954), and promoter of plans to bring better health care to disadvantaged African-American people in the South.

More recently, several African-American physicians have occupied positions of eminence in the federal government and at predominantly white medical institutions and organizations. Among them are: Samuel L. Kountz (MD, Arkansas, 1958), President of the Society of University Surgeons (1974–1975), and the first surgeon to perform a kidney transplant between humans who were not identical twins (1964); W. Lester Henry, Jr. (MD, Howard, 1941), Governor of the American Board of Internal Medicine (1971–1978), Regent of the American College of Physicians (1974–1980), and Master of the American College of Physicians (1987); LaSalle D. Leffall, Jr. (MD, Howard, 1952), President of the American Cancer Society (1979–1980), and President of the American College of Surgeons

(1995–1996); Charles H. Epps, Jr. (MD, Howard, 1955), Governor of the American College of Surgeons (1982–1988), and President of the American Orthopaedic Association (1985); Louis W. Sullivan (MD, Boston, 1958), Secretary of the U.S. Department of Health and Human Services (1989–1993); Levi Watkins, Jr., (MD, Vanderbilt, 1970), performed the first implantation of an automatic cardiac defribillator in a human being (1980) at the Johns Hopkins Hospital, and serves as Professor of Surgery and Associate Dean at Johns Hopkins Medical School (1991 to the present); Maurice C. Clifford, (MD, Meharry, 1947), President of the Medical College of Pennsylvania (1980–1986), and Commissioner of Health of the city of Philadelphia (1986–1992); Claude H. Organ, Jr., (MD, Creighton, 1952), Chairman of the American Board of Surgery (1984–1986), and Editor of the *Archives of Surgery* (1989 to the present); Benjamin S. Carson, (MD, Michigan, 1977), Director of the Department of Pediatric Neurosurgery, Johns Hopkins Medical School (1985 to the present), and the first surgeon to successfully separate Siamese twins joined at the back of the head (1987); Janice Green Douglas (MD, Meharry, 1968), first female Professor of Medicine (1984) and first female Director of the Division of Endocrinology and Hypertension (1986) at Case Western Reserve, and one of the leaders in the research of hypertension in the United States; Roselyn P. Epps (MD, Howard, 1955), President of the American Medical Women's Association (1990–1991); Edward S. Cooper (MD, Meharry, 1949), President of the American Heart Association (1992–1993); Audrey F. Manley (MD, Meharry, 1959), Assistant Surgeon General of the United States (1988–1989), Deputy Assistant Secretary of the U.S. Department of Health and Human Services (1989–1993), Deputy Surgeon General of the United States (1993–1995), and Acting Surgeon General of the United States (1995–1997); Mae C. Jemison (MD, Cornell, 1981), first African-American female to fly in orbit (1992); Jocelyn Elders (MD, Arkansas, 1960), Surgeon General of the United States (1993–1994); David Satcher (MD, PhD, Case Western Reserve, 1970), Director of Centers for Disease Control (1993–1998), and Surgeon General of the United States (1998 to the present); Lonnie R. Bristow (MD, New York U., 1957), President of the American Medical Association (1995–1996); Alexis Cannady (MD, Michigan, 1975), first African-American female neurosurgeon, Associate Professor of Neurosurgery at Wayne State University (1990), and Director of Neurosurgery at Children's Hospital of Michigan (1991 to the present); Keith L. Black (MD, Michigan, 1981), Professor of Neurosurgery at University of California at Los Angeles (1994 to the present), and Director of the Neurosurgery Institute at Cedars-Sinai Center of Los Angeles (1997 to the present); and Henry W. Foster, Jr. (MD, Arkansas, 1958), Senior Advisor to President Clinton on Teen Pregnancy Prevention and Youth Issues (1996 to the present).

In conclusion, at present, thousands of African Americans practice the healing art throughout the nation, hundreds teach or are engaged in research at universities or other medical centers, and several occupy administrative positions of note. Nevertheless, the need for many more in all three categories is urgent, for although 12% of the U.S. population is African American, only about 4% of American physicians are of that racial group. The goal of the Association of American Medical Colleges is to have 3000 African-American entering medical students by the year 2000; the number in 1995 was less than 1300. Moreover, in the new millennium, African Americans may face the problems of the increasing cost of medical education, the decreasing financial support of medical education by the federal government, and the possible decrease in the number of African-American specialists because of pressure on hospitals to reduce the number of specialists being trained. It is also possible that African Americans may be excluded from or may play only minor roles in the leadership and management of the newly organized health delivery system and HMOs.

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