



Persecuted Pioneer Physician

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✿ IN THE EARLY 1800s MEDICAL STUDENTS RECEIVED excellent training in Paris, London, and Edinburgh. In wards and dissecting rooms they gained practical experience and profited spiritually from the example of great physician-teachers.

However, America was still an unsettled backwoods frontier in medical education as well as being an infant among the nations of the world. Most doctors served apprenticeships in the approved tradition of working their way up from stableboy to surgeon, and the medical schools in the South and West were pitifully short in facilities.

Since medicine was not ranked very highly among professions, it is little wonder that the remark was often made: "The boy who goes into medicine is too lazy for the farm or shop, too stupid for the bar, and too immoral for the pulpit." Thus began the persecution of individuals who chose the profession of physician. In spite of all the handicaps, America produced some outstanding figures in the medical world.

Today, the bronzed replica of one of those figures stands in the rotunda of the state capitol building at Frankfort, Kentucky. Across the rotunda is another life-size statue of the orator, politician, and statesman, the famous Henry Clay. The story of Clay's rise to fame is known by nearly everyone, but some, even within the medical profession, have forgotten the other man whose statue stands within the same building.

It is not uncommon to see small boys stare at his figure towering above their heads. Such boys may read and soon forget the name EPHRAIM MCDOWELL because they were not told of this man's accomplishments as the first physician to perform abdominal surgery with repeated success.

The history-making operation which he performed in 1809 was documented some years

later, but the life story of the man who performed that surgery involves hardship, disappointment, scorn, rejection, and persecution. Most of McDowell's fame came after his death, and indeed his hardships began when his family first moved from Virginia to Kentucky, when he was only thirteen years old. He was the ninth of eleven children, and, when his family migrated over the Blue Ridge Mountains and the Appalachian Range, through Cumberland Gap, Kentucky was still inhabited by wild renegade Indians who roamed the "prairie land" in search of game.

Judge Samuel McDowell took his family to Fort Harrod (Harrodsburg), Kentucky but shortly afterward moved ten miles away to Danville. Very little is known of Ephraim's early childhood education but some authors have speculated that he went to the "Classical Seminary" of Messrs. Worley and James which moved between Bardstown and Georgetown. Certainly frontier life was vigorous and demanding since men hunted, planted, and plowed for a living. Young Ephraim preferred shooting and riding more than study. Somehow, he acquired an acquaintance with good literature, which he later came to appreciate with a sure taste and devotion. He knew good writing, but his own composition has been described as "rough and obscure always." This was much like his love for music in which he rejoiced (although his own violin playing was a penance to his devoted family).

McDowell did not settle down to serious work until he was almost grown. In 1790, the opportunity for a doctor in the rapidly growing territory of Kentucky caused young Ephraim to return to Virginia where he became an apprentice of Dr. Alexander Humphrey. Nothing authentic is known about this time in his life since there is no record available. Speculation has been presented that he wasted two years with Humphrey and became bored with his work. Realizing that he had little time for his pupil, Humphrey advised

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Ephraim's father to send him abroad for some medical training to "make up for lost time." Since Humphrey had attended the University of Edinburgh, he naturally recommended that McDowell go there. So, in 1793, Ephraim went to the University of Edinburgh where he attended two sessions.

One can imagine what this backwoods youth from the wilds of America must have felt when faced with the polished, refined circle of students in Edinburgh. Fancy the joy of these arrogant aristocrats in harassing the young Kentuckian about his clothes, lack of social graces, and his image as a pioneer in this atmosphere of academic heroes. Interestingly enough, Ephraim was always remarkable in strength and agility, and while at Edinburgh was pronounced the swiftest foot racer of the entire University. He was one of the most kindhearted and amiable men, overflowing with cheerfulness and good humor. Totally devoid of all austerity, a tinge of which is generally characteristic of the scholar and professional man, he never appeared to assume that there was any difference between the plane of his vocation and that of the humblest, unsettled artisan. Because of this trait of unassuming manner, he was not generally appreciated for his true worth.

While in Edinburgh, Ephraim wrote his father in regard to his financial difficulties. The stigma arising from the cost for a medical education is indeed not a new one. His father exhorted him in a return letter, to be diligent in his studies, guard against the loss of his small amount of money, and return with books and a quantity of medicine, if possible, to set up a decent shop. Again, one sees that fatherly advice has a long history and these words were perhaps unheeded. For apparently, Ephraim did not pass up the opportunity for "seeing so much of the old and well-cultivated country."

The library records are said to show that during his training at Edinburg, McDowell borrowed Hopson's *Chemistry*, Hoffman's *Practice of Medicine*, Hamilton's *Female Complaints*, and Cullen's *Practice of Physic*. John Bell, the brilliant anatomist and surgeon was one of his teachers. Most authors propose that Bell's influence on McDowell was monumental, but only one refer-

ence to John Bell is found and that is in a letter to a medical student, Robert Thompson.

In 1795, at the age of twenty-four, McDowell returned to Danville, without having completed an M.D. degree. The degree of Doctor of Medicine was a rare prize in America at that time, and men practiced without it. Ephraim McDowell was not only a pioneer in surgery, but his patients were pioneers like himself. One thinks of his life on the border of Western civilization in a little town of between three and four hundred inhabitants, far removed from the opportunity of consultation with anyone whose opinions might be of value to him in such cases and nearly a thousand miles from the nearest hospital or college dissecting room at which he might have an opportunity of studying and practicing on a body that had perished of the disease before performing upon the living a new and untried operation of such a fearful magnitude. We learn that he pondered over and contemplated all the difficulties of the operation. Then, with a full sense of the dangers likely to confront him in the attempt, without ether or chloroform, assisted by probably only one fully skilled physician or assistant, with one or two medical students, he attempted and successfully performed the *first ovariectomy*. It seems appropriate to compare him with the first mariners who went to sea with boldness and a stout heart.

He was unlike some others, as far away as possible from proclaiming and exploiting his achievements. Evidently, his discipline and training enabled him to regard each task as merely a part of his work day. Professional modesty was as much to be desired as professional curiosity. It seems from all available information that he was truly a man who could forget himself to remember only his duty to his patients and the profession; one with no thought of the dramatic possibilities of his story. For here was a man whose ego never got in his way. He seemed content that his personal contributions should become relatively obscure and happy to give what he could to mankind.

During his lifetime, McDowell was scorned by many, bitterly criticized by scores of his contemporaries, discredited for his feats of surgery, called a "murderer of defenseless women," de-

nounced as a bold surgeon but a poor fever doctor, and rejected for having undertaken "an unjustified experiment" for which he was belittled by his European counterparts who desired the honors and recognition for themselves. A rumor which has been passed down through the years holds that some irate citizens were uncharitable enough to suggest that his proposal to operate was preposterous and, should his patient die as a result of the surgery, it would be murder and the doctor would be lynched.

This rumor can be met with the fact that no reliable printed statement has ever been made concerning a primary source to suggest or give credence or justification to the story. Notwithstanding the truth or falsity of the rumor, he most likely would have gone to the stake rather than not perform the operation that promised the sole hope for his distressed patient. This was the greatest drama of his life and apparently he knew it not.

Even though McDowell was a physician of strong convictions, he had enemies among some of the best professional men, not because of any unprofessional act, but because of the jealousy that is apt to sprout in the hearts of frail humanity. Many things annoyed him and again rumor has it that the Negroes in Danville were afraid of him and would seldom venture out after dark unless he was out of town. They believed that he was possessed by some supernatural powers and thought he would cut them up. Supposedly, this was instilled in them by their masters who disliked him.

Perhaps the greatest indignation within McDowell was aroused when his enemies assailed his private character. He was a brave man of such decision as to be the master of his possessions and will. The extent of the unfairness meted out to him, the injustices done him, and the prejudices of his most intimate professional friends are well documented. Even plagiarism of original work existed in these times, as can be seen by the attempt of one Mr. Lizars to incorporate the printed report of McDowell's work into a paper bearing his own name. An entire series of criticisms and comments relative to Dr. McDowell, his operation and times, reflects the bitter sarcasm expressed by the men of his day.

The most outstanding of failures on the part of this man was that of not reporting his operation sooner. He seems to have been very careless of either an immediate present or posthumous fame. Evidently Dr. McDowell drew up the report of his cases at the repeated solicitation of his nephew, Dr. James McDowell, who, up to the time of his premature death, had been a partner of his uncle. Indeed, McDowell was more fond of the scalpel than of the pen, belonging to that class of mankind who have a natural antipathy to writing. He is said to have kept *no* notes of his cases, and, with the exception of the communications, three in number, which were formally published, only one other is known, and that was a card published in 1826, when an effort was made to wrest his honors from him. This card he addressed to the medical faculty and class at Lexington, Kentucky (Transylvania Medical School) defending his veracity and claiming to have been the first to perform and establish the feasibility of the removal of diseased ovaries.

Many excuses can be made for his lack of publication. The conditions of the country, the time in which he lived, and his great aversion to writing, palliate the seeming neglect of what appears to have been his duty. He was so negligent as to corresponding that, when absent from his house, he seldom sent a letter to his immediate family unless emergency demanded it. From the fact that he never reported his minor operations, they are lost to his credit.

A prominent Brooklyn surgeon said that he knew from a reliable source that McDowell was the first to perform the caesarean section in this country successfully, the operation having been done in New York City. No report of the case was ever made.

In his general surgical work he was remarkably successful, and it is thought that he was the first to venture upon a partial excision of the inferior maxillary bone. McDowell made no public accounts of these operations, and someone else claimed the fame. At the time when the account of the first successful ovariectomy was published, only two medical journals were in existence in the United States. Strange as it may seem, McDowell received a rejection from one of them, and it was only after he had submitted the article a second

time that the other journal published it in 1817. Little do we realize how dangerously close this scientific achievement came to being stamped "rejected" and returned to its author.

McDowell was known as an accomplished anatomist and every winter he used, in conjunction with his office practice, two or three students who dissected in the upper story of an old abandoned building which had been the county jail. A number of his anatomical preparations, the work of his own hand, were deposited in his office in the course of time. That he rehearsed the steps of his operations, briefed his students on procedures, and exhibited a high degree of dexterity upon taking the knife in hand seems unchallenged. *The fundamental procedures of surgical technique which he established are still in effect today.*

He was convinced that surgery was not an art but a science. It was insisted on by him that a surgeon should know his anatomy in detail, study his case with care, accept his responsibility with seriousness, and exercise careful judgment. McDowell's manner of expression was extraordinarily brief in the eyes of Eastern surgeons, and particularly those of Edinburgh and the continent. This is only too obvious, for in his second article published in 1819 in which he clearly delineated his beliefs about surgical procedures, he said, "I think my description of the mode of operation, and of the anatomy of the parts concerned, clear enough, to enable any good anatomist, possessing

the judgment requisite for a surgeon, to operate with safety. I hope no operator of any other description may ever attempt it.

McDowell's sarcasm is not without some humor. Particularly, he refers to the necessity for a surgeon's performing the operation only when absolutely necessary, in as much as his experiments have been performed and further experimentation in the same direction is not a factor. His reference to the necessity for a surgeon's excelling in his anatomical knowledge and for his possessing good judgment was in order to point out that the mechanical surgeon, the operator for profit alone, and the individual who has not carefully thought out the diagnosis and approach in each case, should never learn the details of abdominal surgery. This reveals without a doubt that McDowell used the scientific approach, forthright viewpoint, and the moral quality of the individual as a guide for responsibility in performing abdominal surgery.

A deeply religious man, he performed operations on Sunday because of a belief that prayers helped him in his service. Strangely enough, Dr. Ephraim McDowell received his M.D. degree from the University of Maryland in 1825 at the age of fifty-four. The circumstances surrounding this honor are unknown.

Ironical as it may seem, he died in 1830, apparently suffering with appendicitis, an abdominal problem which can today be easily corrected by abdominal surgery.



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