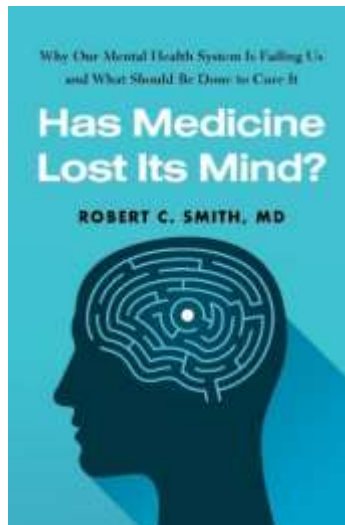


## **HAS MEDICINE LOST ITS MIND?**



### Newsletter 8: *Medical Racism* July 2024

Dear (name),

I have just submitted the final edits for ***HAS MEDICINE LOST ITS MIND?*** The final proofs arrive in a few weeks. We're getting there! Already getting lots of pre-publication exposure.

The book justifiably praises biomedicine for its resounding successes, culminating in doubling of life survival from 1900 to the present, from 40 years to 80 years. The lynchpin for this occurred in early- to mid-*nineteenth* century France, soon spreading to the US. Clinicians discovered that the abnormal organs and tissues observed at autopsy represented diseases and caused the patient's symptoms. While obvious to us today, this then new observation supplanted the two millennia belief that diseases and their symptoms stemmed from an imbalance of the four body humors (blood, phlegm, black bile, yellow bile); it also was the death knell for the ancient practice of bloodletting that aimed to put the humors back in balance. This scientific breakthrough derived from rigorous research methods that determined the correlations of literally thousands of individual autopsy findings with each patients' symptoms. No surprise, medical education taught the new medicine to all its students.

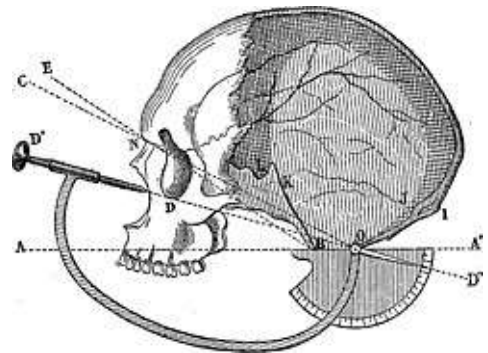
But, according to Christopher Willoughby in *Masters of Health—Racial Science and Slavery in the US Medical Schools* (University of North Carolina Press, 2022), there was an unplanned downside: the new scientific method was co-opted to foster medical racism to provide a veneer of scientific credibility.

Racist ideas in medicine and society had greatly accelerated in the preceding *eighteenth* century around this debate: whether African Americans were a separate species (polygenesis) or whether whites and Blacks were the same species (monogenesis). Both trains of thought, however, were based on supposed critical physical differences. For example, Blacks were believed to have smaller skulls and cranial capacity, leading some to conclude they were less intelligent; beyond skin color, other alleged physical differences, among many, were that African Americans had greater bone strength, coarser hair texture, and greater skin thickness.

But the physical changes were too fine for the average person to discern, rather, they required professional expertise to recognize them. Of course, it was the physicians who had this skill because racial bodily differences were a central part of the curriculums in the few medical schools (four) of the *eighteenth* century. Upon graduation, physicians were viewed by society as experts and promulgated the idea of so-called “medical racism” in practice and when called upon to adjudicate legal or public issues. The focus on the physical body features of Blacks was not only promoted in medical school education but also via museums where their skulls were prominently displayed.

The recognition of organs as diseased in the *nineteenth* century inadvertently fostered spread of medical racism. How? First, its success in identifying diseases spawned hundreds of new medical schools that taught the new medicine, thus also spreading medical racism far more widely because it remained central to curriculums. Second, the new disease understanding also entailed careful research and statistical investigation. Unhappily, those teaching medical racism believed such a scientific approach would better establish their racial claims. This led to similar more careful, statistically based research on Black-white differences.

You will likely have seen the pictured device, known as a goniometer, that medical racists developed to measure minute differences in various facial angles and cranial capacities of Blacks. In the social domain, they identified criminality as an African American feature without considering social factors such as poverty and enslavement. While the statistics applied to the new autopsy findings were valid, those of the medical racists were fundamentally flawed. But science only recognized that in the *twentieth* century. In the interim, despite the abolition of slavery and Darwin’s 1859 discovery of natural selection, this pseudoscientific approach further ensconced medical racism into medical education by teaching not only that Blacks were inferior but also that they were the only race suitable for human experimentation in medical schools and to serve as cadavers for teaching anatomy. The pseudoscientific origin of medical racism in the 1800s culminated in the now painfully familiar Tuskegee Syphilis Experiment in 1932.



Paul Tapinard: Anthropology, 1878  
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Medical education has, without doubt, had a powerful, positive societal impact. But we often overlook its very negative features and, in so doing, allow them to persist far too long. That’s the message of HAS MEDICINE LOST ITS MIND? – we must eradicate unscientific teaching; however dear the establishment holds it.

Take care and be well!

Bob  
Robert C. Smith