

Three Hundred Years of Family Health Care: Some Perspectives

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Many medical texts have been produced in the past to help the ordinary individual and his family care for themselves, without resorting to the services of a physician.

Five "home care" books were randomly selected for study from the many hundreds spanning a period of approximately 300 years, up to the early 20th century. It is likely that these books, which dealt with a whole range of problems including morality, religion, and lifestyle, had a significant impact on the attitudes of society, many of which persist to this day. The importance of environment and natural therapies stressed in these books has been reemphasized in recent years.

Throughout the centuries ordinary people have tried to look after themselves before resorting to a "professional healer."^{1,2} The usual sequence of consultation has been to seek help first within the family or home environment; if unsuccessful, to then proceed to obtain advice or treatment from a lay or nonprofessional source; and finally if the illness persisted, from a physician.³ In the 17th and 18th centuries there were relatively few physicians available to the general population and most of them practiced in three different settings: as itinerant practitioners traveling around the country, in urban centers where they served the growing middle class, and as personal attendants to wealthy

or aristocratic families.^{4*} Consequently the population had to rely for medical care either on themselves or on local lay healers who had a considerable knowledge of herbal remedies.

The 18th century was, in medical terms, perhaps the most renowned for the practice of quackery so that apart from the relative unavailability of physicians, a significant number were not to be trusted.⁴ These quacks and physicians included barbers, cataract couchers, strolling bone setters, executioners (who undertook surgery), lithotomists, touch curers, animal magnetists, and purveyors of magical potions. It is little wonder that the common folk tried to fend for themselves.⁵

The invention of the printing press in 1439 created an opportunity to transmit useful medical information to those people who were unable to afford or could not reach a physician. Both authors and publishers quickly saw the need for books of self-care, a situation that has continued right up to the present time. In the early days, self-care information took the form of small medi-

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*This coincided with the rise of popular education and science, characterized by the publication of many self-learning texts and public lectures. There was a general philosophy that popularization would counter "public gullibility" and increase general knowledge.¹⁰

cal texts or treatises, many of which contained as part of their title "Family Physician," indicating that the family was encouraged to play the healing role without outside help.

This article is based on the study of five randomly selected family health books published over a period spanning approximately 300 years. In order of year of publication, they are:

The Countryman's Physician, 1680, author and publisher unknown, printed in England

Domestic Medicine, or, The Family Physician, 1778, William Buchan, MD⁶

Domestic Medicine, or, The Poor Man's Friend, 1832, John C. Gunn, MD⁷

Howards Domestic Medicine, 1879, Horton Howard, MD⁸

Domestic Medical Practice, 1929, Domestic Medical Society, Chicago⁹

Why Family Health Care?

Each of the above books begins with an introduction indicating the rationale for its publication, namely, the provision of health information to be used by family members. In *The Countryman's Physician* (94 pages in all), the unknown author briefly states: "Where it is shewed by a most plain and easy manner, how those who live far from cities or market towns, and cannot have the advice of physicians may be able of themselves, by the help of this book, to cure most Diseases happening to the body of man."

William Buchan's book, originating in Scotland in the 18th century, sold many thousands of copies both in England and on the North American continent.* In his preliminary remarks he contended that: "Physicians generally trifle a long time with medicines before they come to know how to use them. Many peasants know better how to use some of the most important articles in the materia medica than physicians did a century ago!" Buchan was, of course, referring to herbal and mineral remedies which were part of the tradi-

tional household arts among the population:

Did physicians write their prescriptions in the common language of the country, and explain their intentions to the patient, as far as he can understand them, it would enable him to know when the medicine had the desired effect; and would inspire him with absolute confidence in the physician; and would make him dread and detest every man who pretended to cram a secret medicine down his throat.

John Gunn, a practitioner from Virginia, wrote his 450-page book in 1832, basing it on the practice of the most celebrated medical men of Europe and America. He described this written work as ". . . the regular practice of medicine, wholly divested of all professional or Doctor's terms, and is intended chiefly for the use of families, managers of farms and plantations, ships masters, manufacturers, etc. . . ." In America, 100,000 copies were sold over an 11-year period.

By 1879, *Dr. Howard's Domestic Medicine* had added a new dimension to family health care—when and how to select a family physician. However, he indicated that, at times, it was appropriate to specifically avoid physicians. "There is a large class of diseases, perhaps the majority of cases, where the patient will inevitably get well—unless he is doctored to death."

It must be remembered that cupping, leeches, and bloodletting were still current and popular therapeutic methods at that time.¹¹ Abuses in the practice of medicine were widespread, both by accredited and non-accredited physicians. Medicine was not a lucrative business at that time and many physicians were involved in other methods of earning income: land speculation, farming, buying and selling slaves, or selling drugs.¹² Dr. Howard, in giving advice for selecting a family physician, described many attributes and behaviors which are relevant to this day.

In selecting your physician then, —you should inquire, has he a good clear mind and judgement? has he had the opportunity to become familiar with the profession in all its practical branches? does he exhibit industry . . .

. . . choose an educated conscientious physician, one who both fears God and regards men—one who will make himself your friend, and know you in health as well as in sickness—who recognizes the trust you repose in him as sacred; and now mark us, having made your selection, stick to him; don't give him up on slight

*Most people could not afford their fees, and in many cases, lay healing was as effective or better than the deprivations of medical men.

Table 1. The Distribution of Subject in Family Medicine Books by Percentage

	Countryman's Physician 1680 %	Buchan 1778 %	Gunn 1832 %	Howard 1879 %	Domestic Practice 1929 %
Emotional Health	—	1	16	—	4
Food	—	1.8	1	7	2
Exercise, Hygiene, Air, Sleep	—	2.5	3	5	1
Religion	—	1.0	1.2	—	—
Intemperance	—	0.5	3	—	—
Occupations	—	2	—	—	—
Anatomy/Physiology	—	—	—	12	6
Disease	90	69.2	30	49	51.3
Women's Disease	6	—	14	—	6
Pediatrics	—	5	4	—	2
Infectious Disease	4	10	3	—	10
Symptoms	—	10	—	—	13
Accidents, Emergencies	—	—	4	—	5
Materia Medica	—	7	20	20	3
Compounds	—	—	—	7	1
Prescriptions	—	—	—	—	1.4
Home Remedies	—	—	—	—	4
Employment of MDs	—	—	1.8	—	—
Nursing	—	—	—	—	2
Total percent	100	100	100	100	100
Total pages	94	682	900	670	1430

or ordinary causes or whims; . . . be as careful as you will in making your selection; be sure that your physician deserves your fullest confidence; do as you would with your pilot at sea, give the control of the ship into his hands—for if you change your pilot in the midst of a storm, will you not most surely be drifted onto the rocks?

Dr. Howard ended his introduction, as he did with many other chapters in his book, with a little verse dedicated to patient behavior and iatrogenesis:

The surest road to health, say what you will
Is never to suppose we shall be ill.
Most of the ills we poor mortals know
From doctors and imagination flow.

Perspectives of Family Health Care

The current self-care books now sold widely in stores devote a significant proportion of their con-

tents to lifestyle, the explanation of disease processes, and the clarification of drugs and therapy. The early texts were no different, although the lifestyles naturally reflected the social and moral perspectives of those times. Table 1 summarizes the relative proportions of the contents of these books covering a wide range of subjects from religion to the early use of electricity. Advice on lifestyle covered emotional health, how to eat properly, how to dress in healthy clothes, instructions on exercise, and the need for religious thought. John Gunn wrote 134 pages "Of the Passions," stating that these affected the functioning of the body and that, "Distress of the mind is always a predisposing cause of disease." He dealt with Fear, Hope, Joy, Anger, Jealousy, Love (20 pages), Grief, and Intemperance (30 pages). He also identified a disease not found in our current textbooks: "There is a class of people in all societies who are seriously affected with a disease

called by physicians, 'cacoettes loquendi.' It is a disease that is generated between ignorance, petty malignity and restlessness of the tongue, which forbids the repose of society; in English, it is the disease of talking too much."

In discussing sleep Gunn remarked, "How persons can lie snoring, soaking and sweating in a large feather bed, for eight or nine hours at a time, which is usual with the wealthy people of our country, is to me perfectly astonishing." He lauded the tepid bath (used for 20-30 minutes at a time) as good therapy for skin problems, venereal sores, fevers, paralytics, poor growth, infertility, and body odour ("... and I must say here, that of all the possible putrid smells, that arising from the perspiration of the human body is the most dreadful.").

Gunn as well as the other authors (in the 19th century) lambasted the use of tight lacing of corsets stating that it produced poor breathing and palpitations, all of which could be heard when sitting next to a tightly laced lady. Other problems included compression of the liver and stomach, damage to the spine, and the development of soft tumors in the neck due to extrusion of the lung.

Dr. Howard had some cutting remarks about American eating habits, particularly in relation to "fast-eating" and "stuffing children."

The American people are notoriously fast but in nothing do they excell more than in fast eating. To see a family sit down at their table when there is an abundance of food, and each one commence, not only pitching into the food, but pitching the food into himself, regarding his teeth as only being in his way . . . and swallowing the whole in 15 minutes time . . . is most distressing.

In addition to criticizing their eating habits, Dr. Howard was able to give families the exact times of digestion of certain foods based on Beaumont's classic experiments on Alexis St. Martin's gastric fistula: boiled rice, 1 hour; boiled venison, 1 hour and 35 minutes; fried pork steak, 4 hours 30 minutes; and raw oysters, 2 hours and 55 minutes.

Another problem brought up in several of the books was the sleeping together of old and young members of the family. This was regarded as extremely dangerous since it was evident that there was a transference of vitality from the young children to the older persons, who had the pernicious habit of trying to regain their youth. This concept may have been a hidden way to prevent incest from occurring within families.

Sexuality was hardly discussed in the early books, except in relation to venereal disease. In *Domestic Medical Practice* (1929) there is the first mention of sexual passion:

Scientists agree that sexual intercourse should not be indulged in by strong and healthy persons more than twice a week, and by a more delicate person, once a week. Health and strength lie in the direction of its control and rightful use; while weakness, meanness and illness follow on its immodest way. To avoid desire, a man should live on a light diet; fish, oysters and eggs should be avoided. As long as children are conceived against the mother's will, there will be sickly and idiotic babies.

Desire was obviously not thought to occur in women in those days.

Materia Medica and Therapy

Drs. Gunn and Howard devoted nearly a quarter of their large books to materia medica. This emphasis was directly related to the wealth of botanical remedies still understood and prepared by skilled members of the general public. In addition to the established European pharmacopeia, the American public were fortunate to have available a large number of botanicals used by the Indians. Sassafras and sarsaparilla were used for venereal disease, scrofulous sores, and dyspepsia. Jamestown weed (jimson) was allegedly effective in insanity; tobacco was prescribed as an emetic and for worms and the dropsy. The cancer root found under beech trees was used for treating neoplasms by the Indians. Even *Domestic Medical Practice* published in 1929 lamented the advent of controlled prescriptions of highly active drugs and the loss of home remedies: "The general lack of knowledge of home remedies causes much unnecessary suffering, which could often be avoided by using the safe and reliable old-fashioned remedies of our forefathers."

This tome on family medicine contained a vast array of instructions on subjects ranging from beauty culture (how to erase wrinkles and double chins) to the handling of such emergencies as heat exhaustion, hanging, extraction of fish hooks, and how to remove persons from burning buildings. Therapeutics were still primitive but practical. The treatment for seizures included the following sequence of steps:

1. Mustard plaster on the legs to reduce congestion in the brain
2. Amyl nitrite inhalation
3. Covering head with a black silk bag
4. Arsenic by mouth

Retracted nipples were corrected in the following fashion: "Fill a beer bottle with boiling water and after emptying it and cooling the neck, apply the orifice over the nipple. The condensation will gently and firmly draw out the nipples."

Surgery

From the late 17th century onward, the public received instruction through these self-care books on minor surgical procedures, such as cupping, blistering, or bloodletting. Gunn, however, writing for the settlers and plantation owners of North America, felt the need to teach more elaborate surgical techniques. He wrote the following on the preparations for amputation:

When the physician is unavailable, the major difficulty is to know when this operation is to be performed. It may be necessary when a ball has carried away an arm, a tree has fallen and mashed a knee, or when bones and tendons have been crushed and splintered. To perform this operation requires nothing but firmness and common dexterity, for any man can perform it well.

Instruments:

- Large carving knife with a straight blade
- A penknife, a carpenter's tenon or miter saw
- A strap of leather or linen three inches wide, and 20 inches long
- 12 ligatures made of waxed threads
- A shoemaker's crooked awl
- A pair of slender pincers
- A piece of old linen spread with lard
- A sponge and warm water
- 60 drops of laudanum

You are now prepared fully to perform an amputation; which I will so plainly explain, that any man, even if he be an idiot or an absolute fool, can perform this operation.

Conclusion

Family or Domestic Medical books appear to have been very popular with the public, achieving

wide sales, over the past 200 years. Physicians tended to be consulted only as a last resort compared to the physician utilization patterns seen today in developed countries.

Although these texts contained a great deal of effective advice, and may have helped patients avoid the dangers of new treatments or unscrupulous practitioners, they also conveyed certain attitudes and prejudices to life, sex, and health which are still evident today. Is it possible that these family medicine books in an era without other means of main communication (apart from newspapers) have had a much greater and lasting impact than is realized in shaping the perspectives and health behavior of the public?

Family medicine was certainly encouraged by some members of the medical establishment, the books often being written by a group of eminent physicians and surgeons. Educated self-care was regarded as an essential aspect of the health care system. In 1840, James R. McConkie, MD, an honorary member of the Medical Society of Philadelphia, wrote of Dr. Gunn's book: "I have attentively reviewed Gunn's *Domestic Medicine*. It is the philosophy of medicine divested of its scholastic technicalities. No family possessing this work will, in ordinary cases, have occasion to give away much money to the physician."

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