

OUTLINE FOR CDU PRESENTATION AT NMA CONVENTION
RUNNING TITLE:
EMERGENCE, EDUCATION, AND EVOLUTION OF THE BLACK DOCTOR

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- Throughout history, the African-American community has been underserved medically. We've had to build our resources through struggles and serve our own community.
- Historically black medical schools, such as Charles R. Drew University of Medicine, and groups, like the National Medical Association, are continuing in the leadership of those before them by training physicians who will serve the underserved.
- Today, I would like to take you on a journey of the emergence, education and evolution of the black doctor and their legacies today.

I. Ancient History:

- The emergence of the black doctor can be traced to ancient times.
- **Imhotep**, the first physician recognized in the world, was a black man from sub-Saharan Africa who served as physician to King Xoser the Great in Egypt during the Third Dynasty, more than 5,000 years ago (3,000-2,500 BCE).
- He was the first to describe the beating of the heart and blood flow, millennia before Sir William Harvey in England, and he is credited with writing the first medical textbook which later became called the Edwin Smith Papyrus, after its discovery in 1862.

II. Intermediate History:

- In America, as a result of the neglect and abuses suffered by blacks during slavery beginning in 1619, the **slave health deficit** developed, which is the origin of the healthcare disparities that blacks experience today.
- Origin of "slave doctors": There were several slaves who used their ingenuity and wits to develop a type of medical practice which was

patronized by whites and blacks. They mostly utilized treatments that they may have learned in Africa, although some learned from their masters who were doctors. One slave, **Onesimus**, owned by Cotton Mather of Boston, actually developed an inoculation against smallpox which was successfully used by Dr. Zabdiel Boylston in combating an epidemic in Boston in 1721. Onesimus' success with inoculation no doubt was the inspiration for development of vaccination against smallpox by Jenner, who was the one memorialized in history. **Primus** was a slave in New England who learned surgery from his master and took over his practice when he died, becoming extraordinarily successful. He pioneered in the treatment of rabies. **Papan**, a Virginia slave, was so proficient in developing cures of skin and venereal diseases, that he was freed by the Virginia Legislature. **Cesar**, a slave in South Carolina, had an extensive knowledge of roots and herbs which he used to cure various diseases, and the South Carolina Assembly purchased his freedom in 1792 and gave him a lifetime annuity of \$500 (quite a substantial amount in those days). **James Derham**, a slave who was apprenticed to 3 different physicians, purchased his own freedom, became a very skilled medical practitioner and was noted to be one of the leading doctors in New Orleans in the late 1700s. A very noteworthy slave who was not a doctor but whose very bones were dedicated to medical science was **Fortune**, who was owned by a doctor and bonesetter, Dr. Preserved Porter, near Waterbury, Conn. When Fortune died in 1798, his master flayed the soft tissue from the corpse and boiled the bones, leaving a naked skeleton that was used by Porter's descendants for more than 100 years to study human anatomy and to become doctors. Therefore, Fortune made a real but largely unrecognized contribution to medicine.

- **Dr. Lucas Santomee** is generally acknowledged to be the first black physician in the United States. He was of Dutch origin. He received his medical education in Holland and practiced in New York during the Colonial period. **Dr. James McCune Smith** was the first black graduate of a medical school (Glasgow, 1837). The first black graduate of an American medical school was **Dr. John David Peck** (Rush Medical School, 1847). The first black female doctor in the United States was **Dr. Rebecca Lee Crumpler**, who graduated from New England Medical College in 1863.
- It is during the Civil War that one sees the emergence of a significant number of black physicians in America. Several black doctors served in the Civil War as Union physicians and surgeons, 13 in all. Eight black doctors were commissioned in the Union Army, in the United Medical Corps, including: **Dr. John V. DeGrasse**; **Dr. Major R. Abbott**, a graduate of Toronto University Medical School; **Dr. Martin Robison**

Delaney, who attended Harvard Medical School as their first black student in 1850; he was boycotted and subjected to segregation, ultimately being expelled by Dean Oliver Wendell Holmes after 2 years and being forced to obtain his degree through preceptorship training, after which he entered the Union Army and rose to the rank of major during the Civil War; **Dr. Charles B. Purvis**; **Dr. William P. Powell, Jr.**, an Army surgeon; and **Dr. A.T. Augusta**, an Army doctor who later was Superintendent of Freedmen's Hospital in Washington, DC during the 1860s.

- Several other African American doctors emerged during this period, including: **Dr. Peter W. Ray**, who practiced in New York City; Dr. Thomas J. White, who graduated from Bowdoin in Maine along with Dr. DeGrasse; and **Dr. Edwin C. Howard**, a graduate of Harvard Medical School who co-founded Mercy-Douglas Hospital in Philadelphia.
- The Civil War was a fight for freedom and a chance for full participation in American society. Participating on the front lines pushed the boundaries of what was viewed as the role of blacks in a white America.
- Here you can see the earliest doctors and slave doctors in America.

III. Reconstruction Period, after Emancipation (1863):

- As we enter into the reconstruction period, seven black medical schools are opened and hundreds of African American doctors are trained and enter into medical practice. The seven schools established between 1868 and 1904 were: **Howard University Medical School**, established 1868; **Meharry Medical College**, 1876, Nashville, TN; **Leonard Medical School** (Shaw University), 1882-1914, Raleigh, NC; **New Orleans Medical College**, 1887-1911, New Orleans, LA; **Chattanooga National Medical College**, 1902-1908, Chattanooga, TN; **Knoxville College Medical Department**, 1895-1900, Knoxville, TN; **University of West Tennessee College of Physicians and Surgeons**, 1904-1923, Memphis, TN.

IV. Deconstruction Period (1910-1923):

- **The Flexner Report**, commissioned by the United States government in 1910, leads to the closing of all but two of the black medical schools; only Howard University College of Medicine (founded in 1868) and Meharry Medical School (founded in 1876) remained by 1923.

- Before the Flexner Report, over 1,000 black doctors had been trained. After the black medical school closings began, the numbers dropped off drastically and have never increased, leading to the fact that only 2-3% of the nation's doctors are black.

V. **Era of Black Medical Autonomy:** Because of restrictions on their medical education and **discrimination** against their ability to practice and to join local medical societies, black doctors founded the National Medical Association (NMA, 1895).

- A number of outstanding black doctors emerged during this time, including **Dr. Daniel Hale Williams**, who performed the first open-heart surgery on the living human heart at Provident Hospital in Chicago (1893); **Dr. Charles R. Drew**, who was head of the British blood plasma project for the Army and conceived the idea of the blood bank in 1941; his contemporary, **Dr. W. Montague Cobb**, Professor of Anatomy at Howard University College of Medicine and the major medical historian of blacks; **Dr. William Augustus Hinton**, the first black professor to teach at Harvard Medical School, who invented the Hinton test for syphilis as well as the Hinton-Davies test for syphilis in the blood and spinal fluid and was the first black physician to publish a textbook of medicine; and **Dr. John Beauregard Johnson**, Chairman of Medicine at Howard, who first called attention to the serious problem of hypertension in blacks.
- In later years, two additional traditionally black medical schools were founded: Morehouse School of Medicine (1975) and Charles R. Drew University of Medicine and Science (1966).
- Together, Howard, Meharry, Morehouse, and Drew have trained the majority of the black doctors in the United States up to the present time.
- Several medical experts who have contributed greatly to the excellence of American medicine have been educated in these four schools, and many exceptional black doctors have also been faculty members there.

VI. **The Current Medical Era: CDU**

- CDU is one of the most recent of the Historically Black Medical Colleges and Universities.
- The University is named in honor of Charles R. Drew, a brilliant African-American physician recognized for his research in blood

transfusion and preservation. We continue to honor his legacy.

- Following the Watts Riots, CDU was founded after a report by the McCone Commission (“Violence in the City: an End or a Beginning” – Governor Edmund G. Brown) cited poor health status and diminished access to quality education, healthcare, employment, and safety as key factors sparking the 1965 civil unrest in the local community.
- CDU is the only designated minority-serving health sciences University in a county with a population of more than 10 million residents, 70 percent of whom are from minority communities.
- We continue to serve South Los Angeles and beyond by working to eliminate health disparities and providing unique, quality training opportunities
- Beginning as a postgraduate medical school with the aim of increasing the expertise and capabilities of black doctors serving the minority community, in its short existence, CDU has led the way in developing community outreach and has expanded into a full-fledged medical university where a broad spectrum of healthcare professionals are trained not only in medicine but also in nursing, as physicians assistants, and in other allied health fields.
- We are committed to diversity in our student body, faculty and ultimately through patient care. By training diverse health care professionals, we are in fact improving access to care.
- A California Wellness Foundation report estimated that one-third of all minority physicians, practicing in Los Angeles County, are graduates of the CDU medical school and/or residency training programs.
- CDU has become a model for all medical institutions nationally in helping to eliminate healthcare disparities by increasing diversity in medicine and the quality of healthcare delivery. We continue to ensure the South LA community is serviced with culturally competent physicians and eliminating health disparities.
- More importantly, we, along with the HBCU’s, are carrying on a legacy of our African-American leaders before us with a strong commitment to address the health disparities that persist today.

VII. Health Care Reform

- Our future economy and health care system will rely heavily on individuals who have been historically underrepresented in higher education.
- While Blacks represent roughly 13 percent of the U.S. population, less than 3 percent of the nation's 1 million doctors and medical students are Black.
- A recent report revealed that the number of black male applicants proportionate to all medical school applicants decreased from 2.6 percent to 2.5 percent from 2002 to 2011, African-American females medical school applicants drop from 5.2 percent to 4.8 percentage, but the proportion of matriculates went from 4.5 percent to 3.8 percent.
- Additionally, with the Affordable Care Act adding as many as 30 million newly insured Americans to the system -- up to three million in California -- the need for health care providers who are culturally-competent is greater than ever.
- It is the institutions that have been training ethnically diverse physicians with a focus on primary care in medically underserved that fill a vital need in health care reform.
- We need to remember our history to address the challenges of today and use health care reform as our chance to eliminate long persisting healthcare disparities.