VERMONT History

The PROCEEDINGS of the
VERMONT HISTORICAL SOCIETY
Thomson was not a charlatan who pretended to cure for a price, but an earnest reformer with a vision.

Samuel Thomson's Botanic System:
Alternative Medicine in Early Nineteenth Century Vermont
By Joanna Smith Weinstock

The Thomsonian movement, a botanical alternative to early nineteenth century medicine, originated in New England with Samuel Thomson, who was born in Alstead, New Hampshire, in 1769, the son of a struggling farmer. His life coincided with the era of "heroic medicine" when doctors treated most ailments with drastic measures, such as extensive bloodletting and administration of poisonous mineral drugs. Thomson and his followers were concerned about the danger and futility of these harsh methods and hoped to break their hold over the regular "qualified" physicians. These doctors, in turn, labeled Thomson a "quack" and used propaganda, lawsuits, and protective legislation to oppose his botanical system. The conflicts between the Thomsonians and the regular doctors illuminate a dramatic period in the history of medicine and society in early Vermont. By the 1830s the Thomsonian movement had spread across the state and to other parts of the young nation.

The bloodletting or bleeding that Thomson protested was an ancient medical practice based on the theory that "bad blood" caused disease. In the eighteenth century William Cullen, a prestigious Scottish physician, developed a more scientific rationale for bloodletting in the treatment of certain diseases. His texts set the standard for the English-speaking world and were reprinted in America. Cullen's Practice of Physic appeared on a list of textbooks recommended to candidates for examination by the newly formed Vermont Medical Society in 1814. One of Cullen's students was Benjamin Rush, the influential Philadelphia physician and signer of the Declaration of Independence. Rush carried Cullen's moderate practice of bloodletting to an extreme. With his "Unity of Fevers" theory,
Rush taught that all illness had one underlying cause: "a morbid excitement induced by capillary tension"; and he believed that the single cure for every disease was bleeding. He was willing to remove up to four-fifths of the body's volume of blood, if necessary, to alleviate symptoms. Students flocked to study under Rush and some medical educators continued to teach bloodletting as a standard cure-all until after the Civil War, using more and more sophisticated tools, from the single-pointed lancet to cupping devices, leeches, and the "scarificator," a gadget with multiple blades that shot out at the flick of a lever. Most patients expected and even demanded bloodletting. A famous example was George Washington, who asked to be bled four times, despite Martha's objections, for the treatment of "quinsy," a severe throat inflammation. He died on December 14, 1799, within hours of contracting the illness, and his doctors agreed among themselves that they might have overdone the treatment. In addition to bleeding, regular physicians administered huge doses of calomel and other dangerous mineral drugs, such as antimony, arsenic, and sulfate of zinc. The chief ingredient of calomel was mercury, now known to be a deadly poison. It was taken internally to cause vomiting and purging, and applied externally as an ointment.

Thomson developed his medical practice as a reaction to these treatments and as a logical continuation of several other medical philosophies. In 1769, the year of Thomson's birth, a second Scottish physician published a book called Domestic Medicine. In his book, William Buchan stressed common sense and criticized the medical profession. He claimed that "no discovery can ever be of general utility while practice is kept in the hands of the few." The title of an 1816 Connecticut edition of Buchan's book, Everyman His Own Doctor, indicates its appeal to laymen. Thomson, too, developed a medical system that could be practiced by family members and other non-professionals. Unlike the vendors of most patent medicines, Thomson did not conceal his discoveries. He preached them, at first, to all who would listen and later published them in his New Guide to Health or Botanic Family Physician (1822), which he sold to purchasers of "family rights" to his patent. The availability, simplicity, and relative safety of Thomson's botanic system boosted its popularity with the common man.

People have always experimented with plants and employed folk remedies to treat or prevent illness. When Cotton Mather, the New England Puritan who became a member of the Royal Society of London, wrote in 1721 in his Christian Philosopher that God had placed remedies in each part of the world where they were appropriate, he promoted the belief that man should seek cures among native plants. This philosophy prompted the search for curative American flora and directed attention to remedies employed by Native Americans. Samuel Thomson spent his
This portrait of Samuel Thomson appeared in the 1835 edition of his New Guide to Health, or Botanic Family Physician. Courtesy of Dana Medical Library, University of Vermont

youth learning and experimenting with the same plants known to New England tribes. There were, in fact, several connections between Thomsonian medicine and indigenous medicine. Native Americans employed sweat lodges universally for hygiene and treatment of various maladies. Thomson discovered the benefits of “steaming” and placed his patients over steam baths to make them perspire. Thomsonian practitioners became
known, pejoratively, as “steamers.” The Penobscots in Maine smoked lobelia, or Indian tobacco, for relief of asthma, and colonial New Yorkers purchased it from the Iroquois as a remedy for syphilis. Thomson also experimented with *Lobelia inflata* and made it the essential ingredient of his botanical system. It was supposed to cause vomiting and perspiration, without the distressing side effects of the mineral drugs. Thomson learned much about the healing properties of plants from Mrs. Benton, a childhood neighbor in Alstead. Writing in *Vermont History*, Charles Morrissey has suggested that this woman was either an Indian herself, or was familiar with Indian remedies. Thomson, however, adamantly defended his own youthful discovery of the emetic effects of lobelia, writing “It would be folly for me to deny that [lobelia] may have been used by the natives of this country, but one thing I am certain of, that I never had any knowledge of their using it, nor ever received any information concerning it from them or from any one else.” Thomson relied heavily on native plants, but he also used imported botanical ingredients that showed superiority in their medicinal actions.

Thomson first practiced medicine on himself in Jericho, Vermont. This occurred in 1788 after his father, John Thomson, purchased land near the Onion (Winooski) River. Setting out from Alstead in October of that year John and nineteen-year-old Samuel began to clear their land and build a cabin. On December 2 Samuel cut his ankle to the bone with an ax. A local doctor, Matthew Cole, applied a concoction of boiled apple tree bark which, Thomson later remembered, “caused great pain and made it much worse, so that in eight days my strength was almost gone and my life was despaired of.” Thomson asked his father to find comfrey root and prepare a comfrey-turpentine plaster. (Comfrey, a member of the genus *Symphytum*, is a non-native plant known to the Romans and still used in the practice of homeopathy, which developed in Germany in the late eighteenth century.) His father located a root near the cellar hole of an abandoned pre-Revolutionary homestead and the curative comfrey plaster that he prepared enabled Thomson to travel by sled to Alstead, where he slowly recuperated. In an autobiographical *Narrative*, published in 1822, Thomson attributed his medical career to this Jericho incident: “The success that attended this experiment, and the natural turn of my mind to those things, I think was the principal cause of my continuing to practice the healing art to this time.”

In the spring of 1790 Thomson’s mother became ill and several doctors attended her. As her condition worsened, they diagnosed “galloping consumption,” which Thomson said “was a very appropriate name; for they are the riders, and their whip is mercury, opium, and vitriol, and they galloped her out of the world in about nine weeks.” After his wife’s death, John Thomson moved his younger children to Jericho, where they
planted apple orchards and built a sawmill. Today the property is part of the University of Vermont Research Forest. The neighboring property, where the Mill Brook flows into the Onion River, belonged to Martin Chittenden, who became a congressman and governor. Samuel Thomson received the deed to his father's New Hampshire farm, married Susan Allen, and started a family. His wife experienced many difficulties in childbearing, but eventually bore eight children, who suffered frequently from croup, measles, colic, and the "canker rash" (probably a variety of scarlet fever in which the throat is ulcerated). Thomson often called in doctors; but he soon concluded "from sad experience, that they made much more sickness than they cured." He realized that he was more successful than the doctors in treating his family with steam baths and herbs, and he began to formalize his theory of disease and its treatment. Thomson was uneducated and probably illiterate. In his discussions with the healers and doctors who visited his home he may have picked up parts of an ancient Greek theory that remained central to medical philosophy before the germ theory of disease was established in the mid-nineteenth century. Thomson accepted the idea that the "elements" earth and water formed the body, while air and fire caused life and motion; and he shared the position of the Hippocratic writers that an imbalance among these elements caused disease. He speculated that cold was the culprit because it "lessened the power of heat or fire . . ." "And I found," he wrote, "that all disorders which the human family were afflicted with, however various the symptoms and different the names by which they are called, arise directly from obstructed perspiration which is always caused by cold or want of heat." In this adaptation of the ancient theory, Thomson also anticipated the modern notion that fever is "nature's effort to throw off disease, and therefor ought to be treated as a friend, and not as an enemy as is the practice of physicians."

Thomson sought to raise the body temperature and promote the flow of perspiration with his steam baths and his botanical remedies. He began treatment with lobelia, his Preparation No. 1, which cleansed the stomach, raised the temperature, and induced perspiration. The ingredients in Preparation No. 2 were meant to hold the heat in the stomach. Thomson experimented with spicy plants such as ginger, horseradish, mustard, and peppermint, before discovering bottled pepper sauce on a trip to Newburyport, Massachusetts. He imported peppers from Demerara, Guyana, to prepare No. 2, but he hastened to assure his followers that they could substitute local ingredients where cayenne peppers were not available. Preparation No. 3 was supposed to "remove the canker from the stomach and bowels." Thomson wrote that bayberry, hemlock, witch hazel, raspberry, water lily, or marsh rosemary compounds would clear up this obstructive condition, the so-called "canker," and enable the
stomach to “hold the heat.” Over the years he added new ingredients and created new preparations to treat special conditions such as rheumatism, colic, and dysentery.

Neighbors and strangers learned of Thomson’s botanical system and came to him for treatment when they had given up hope of cure by their regular practitioners. In his Narrative Thomson described some of these patients. In 1805 a Mrs. Richardson, who had “lain in bed for ten years,” was brought 130 miles, in her bed, from Westford, Vermont. Thomson treated her at his own expense for three months, until she was able to ride back to Vermont. He also traveled to treat patients, such as a young woman in Woodstock “who was considered in decline.” Thomson grew so busy attending patients that he could no longer attend to his farm. He decided to give up farming and become a full-time healer, making use of “the gifts which I thought nature or the God of nature had planted in me.” He traveled throughout New England and up and down the northeastern coast promoting his botanic system. During a visit to his father in Jericho in the winter of 1807 he treated two young men. One was rigid with “cramp convulsions” and the other, the son of Captain Lyman, had a fever sore on his thigh of seven years’ duration. Thomson claimed to have cured both. His Narrative is full of successful case histories, which he used to justify his methods and bolster his defense against rising charges of quackery.

As Thomson gained renown, the regular physicians tried to discredit him. In 1809 they accused him of killing a patient, who was already near death after standard medical treatment. Thomson was charged with manslaughter by malpractice for dosing the man with an herbal “tea” containing the “deadly” lobelia. He was arrested and locked in a miserable cell in Newburyport for six weeks to await trial. At the trial one influential witness ate some of the plant in question to prove that it was not a poison, and a botanical expert identified it as the harmless marsh rosemary. The judge acquitted Thomson, who was somewhat disappointed that he had not had a chance to testify on his own behalf. He had hoped to turn the trial into an opportunity to prove the usefulness of his discoveries to the large courtroom assembly. The Massachusetts doctors also published tracts, such as The Medical and Agricultural Register, which combined recipes, planting tips, weather predictions, and “noxious vapor” theories of disease with warnings about the “dangers of employing quacks.” The publication advised bloodletting and the patronage of regular physicians. Some Vermont readers may have shared the sentiments of a subscriber from Maine who wrote, in August 1807, that it was “highly gratifying to every friend of humanity to find in circulation so useful a publication as your Register, which is eminently calculated to check the progress of
a great and growing evil in our country—the employment of empirics with their nostrums and quack remedies.”

In his *Narrative* Thomson described the hostility of the medical establishment in Jericho, where he claimed to have cured twenty-eight inhabitants of the “dysentery or camp distemper” in the fall of 1807. He said:

“The disorder was the most distressing of any that I ever witnessed. One man was speechless for six hours and was supposed to be dying; but on my giving him some medication to warm him, he seemed to revive like an insect that was warmed by the sun after having laid in a torpid state through the winter . . . I had but little medication with me and had to use such as I could find in this place. I found the cause of the disease to be coldness and canker; the digestive powers being lost, the stomach became clogged, so that it would not hold the heat. I made use of red pepper steeped in a tea of sumac leaves, sweetened, and sometimes the bark and berries, to raise the heat and clear off the canker, which had the desired effect. After taking this tea, those who were strong enough I placed over a steam, as long as they could bear it . . . In eight days I had completely subdued the disease. They all recovered, except two, who were dying when I first saw them.”

It is difficult to substantiate Thomson’s account of these cures. The Jericho *Index to Births and Deaths* lists two deaths on November 16 and 22, 1807, but does not corroborate Thomson’s statement that the selectmen, acting as a local board of health, called him to treat an epidemic in which twenty persons had already died. The minutes of the Jericho town meetings list the activities of town officers (John Thomson was a Pound Keeper and Auditor in 1807), but give no hint of an epidemic in that year or later when major epidemics of “spotted fever” and “peripneumony” swept the state. Perhaps Thomson exaggerated to counteract the hostility of the regulars. “The doctors,” he wrote, “were not very well pleased with my success, because I informed the people how to cure themselves, and they have had no need of their assistance in that disorder since. They circulated reports for twenty miles round, that *I* killed all *I* attended; but the people were all perfectly satisfied with my practice, and were willing to give me all credit for my skill, so their malice towards me was of no avail.”

The Vermont physicians had begun to organize themselves and had formed four local medical societies by 1812. Members did not have to be graduates of medical schools (there were no medical schools in the state until Castleton Medical Academy was established in 1818), but their medical practice had to be in the mainstream. Most had served apprenticeships with other physicians. The censors of the Third Medical Society of Vermont (which became the Chittenden County society) examined candidates for their knowledge of “the theory of anatomy, animal functions in their natural and diseased state and of the remedies
in general use, both simple and compound.”22 In 1813 the state legislature established the Vermont Medical Society. The main purpose of the society was to share books, instruments, and knowledge, and to distinguish the “qualified” physicians from the “unqualified” such as Thomson. Members discussed the need to suppress quackery and petitioned the legislature to pass an “Act Regulating the Practice of Physic and Surgery in Vermont.” This act, passed in 1820, stated that only members of the medical societies or those who had degrees were entitled to use the legal process to collect bills. The same act gave judges of the Supreme Court power to grant licenses to candidates who had passed examination by the medical societies.23 While Thomson and his agents could continue to operate without licenses, they could not depend upon support from the state to collect fees. It was difficult for any medical practitioner to make a living without such legal backing, as patients, or their survivors, were reluctant to pay for unsuccessful treatments.

Medical society organizers John Pomeroy and Joseph Gallup were eager to advance medical education in Vermont. Dr. Pomeroy advocated Rush’s “Unity of Fevers” theory, but believed that bleeding should be carried out in moderation.24 He taught privately in Burlington and worked actively to establish a medical school at the University of Vermont. Dr. Gallup taught at Castleton and the university, and later established a third medical college at Woodstock. In his Sketches of Epidemic Diseases in the State of Vermont (1815) he sought meteorological and geological explanations for the epidemics raging across the state and promoted the use of bloodletting. No matter what scientific theories the regular doctors espoused, they could not seem to relinquish the practice and teaching of “heroic medicine.” In 1809, for example, the trustees of the University of Vermont conferred the first bachelor of medicine degree on Truman Powell, who delivered his dissertation on “the use and action of mercury on the human system.”25 When the first full course of medical lectures finally began at the university in 1822, Nathan Smith, the most prominent educator of his day and organizer of medical schools at Dartmouth and Yale, arrived to teach the theory and practice of medicine. He encouraged bloodletting with the lancet and leeches.26 William Sweetser, Jr., a young Harvard medical graduate, joined the faculty in 1825, shortly after publishing a paper on the importance of bleeding in the treatment of croup in the New England Journal of Medicine and Surgery.27

Clearly, Thomson faced a powerful and organized opposition. He experimented with societies himself and published a circular outlining his botanical system in 1812.28 After further lawsuits, he reached the conclusion that one way to defend himself was to “go to Washington and obtain a patent for my discoveries and put myself and medicine under
the protection of the laws of my country, which would not only secure to me the exclusive right to my system and medicine, but would put me above the laws of any state.” In February 1813 Thomson went to the patent office in Washington, D.C. An obstructive official required him to describe how each preparation was to be used for specific diseases. Thomson enlisted the assistance of his father’s Jericho neighbor, Martin Chittenden, who was serving in the House of Representatives at that time. Chittenden readily consented to help him write out the necessary specifications. Dr. Samuel Latham Mitchill, the New York congressman, helped to overcome another obstacle by transcribing the botanical names demanded by the patent officer. Mitchill was probably recommended for the task because he taught natural history, and later botany and “materia medica” at the College of Physicians and Surgeons in New York City. Thanks to Representatives Chittenden and Mitchill, Thomson’s first patent was granted on March 3. On his way home from Washington, Thomson stopped in Philadelphia to share his “discoveries” with Drs. Benjamin Rush and Benjamin Barton. Dr. Rush was old and ill, but he received Thomson briefly and treated him with politeness. Dr. Barton, who, like Mitchill, was both a physician and botanist, said that he would try some of the preparations, but he died before Thomson ever heard from him again. Thomson was both eager to convince doctors of the value of his system and afraid that they would steal it. Thomson liked and trusted Dr. Barton, however, because he was sympathetic toward his botanical practice.

Thomson used the patent he acquired from the U.S. Patent Office in 1813 as a means of accrediting his practice of botanic medicine. From his New Guide to Health, or Botanic Family Physician. Courtesy of Dana Medical Library, University of Vermont

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Thomson’s patent also symbolized his commercial interests. Upon returning to New England he advertised in newspapers and handbills and began to sell the rights to his patent for twenty dollars per family. He laid up supplies of ingredients for his preparations and hired agents to maintain them and make them available to holders of the family rights. He dreamed of forming a network of local mutual assistance groups, his Friendly Botanic Societies, which he hoped would provide an institutional base for the growth of his system, enabling him to retire and live on the profits. Thomson’s ambitions were dashed by warehouse fires, dishonest agents, jealousies among Friendly Society members, theft, plagiarism, and further lawsuits. Some followers modified his teachings and worked independently. It was necessary for Thomson and his sons to travel constantly, going as far west as Ohio, where Thomson’s father had moved in 1817. Ohio became an important center of Thomsonianism, and the practice spread widely to western and southern states.

Thomson’s system fit well into Jacksonian America. In the 1820s and 1830s, the common man felt he had the common sense to govern himself, choose his own practitioner, learn medicine, or do anything he desired. In Vermont, citizens resented the 1820 medical practice act and issued a series of petitions to the General Assembly calling for its repeal. Thomson visited the state in 1833 and added his signature to one of the petitions. The eloquent language of a petition from Bennington County is reminiscent of the Declaration of Independence:

“We your petitioners... respectfully represent to your honorable body that in our opinion the law of this state regulating the practice of physic and surgery is oppressive and unjust, and as free citizens we claim the right to lay our aggrievences [sic] before your honorable body for relief... the free and independent right to select our family physician is one of the dearest privileges men can enjoy... yet our rights have been grossly invaded by the passage of a law which gives the regular doctor (so called) the supreme advantage over all other orders of men... justice to all is our motto...”

Other petitions referred to the great benefits received from the “new system of Botanic Medical Practice” and asked that all practitioners be put on an equal footing.

The Thomsonian movement was booming in Vermont during the decade of the 1830s. Conventions were held at Montpelier in 1836 and Peru in 1838. The botanic physicians gathered at Peru adopted a constitution and stated the requirements for membership in the Thomsonian Medical Society: any man of good moral character was eligible, provided he “become honorably possessed of the medical discoveries of Dr. Samuel Thomson, as secured to him by letters patent from the President of the United States” and “not practice bleeding, blistering, or give calomel, opium, nitre, antimony, cicuta, or any preparation of iron or copper or
Thomsonians advertised their wares vigorously in Vermont as this broadside from the Vermont Historical Society attests.
arsenic, or any other poisonous preparation.” By 1838 Thomson’s advocates and legislators who came to believe that the law protected only doctors and not patients repealed the Act of 1820. No other law regulating medical practice in Vermont was passed until 1876.

The names of botanic physicians began appearing alongside the other professionals listed in Walton’s *Vermont Register and Farmer’s Almanac*. Other signs of success were the printing of at least thirteen editions of Thomson’s *New Guide to Health, or Botanic Family Physician*, which had first been issued in Boston in 1822. Many of the later editions were published in Ohio, as the center of Thomsonianism shifted westward with the population. In Vermont, a late edition was published in Montpelier in 1851. Over sixty Thomsonian periodicals were published in states from Maine to Mississippi. Four of these periodicals were issued in Vermont. J. Wright edited the *Botanic Advocate and Journal of Health*, which began in Montpelier in 1836. *The Thomsonian Spy*, “devoted to the advancement of the Thomsonian practice of medicine,” was published monthly in Manchester and Bennington, starting in 1833, by Ezra Edson and Silas Willcox. *The Thomsonian Scout* appeared in Burlington in 1841 under the proprietorship of William S. Johnson of Milton and Pierce Standish of Huntington. In the *Thomsonian Scout* Lorin Tyler advertised an establishment in Essex where he kept “constantly on hand and for sale articles of Thomsonian medicine superior to any ever bought in this section of Vermont” and Jehiel Smith announced that his Thomsonian Infirmary and Insane Hospital in East Randolph featured “an experienced practitioner, good accommodations, pure medicine, and the safest and best means of regaining lost or impaired health, with kind nurses and obliging assistants.”

Jehiel Smith published his own *Thomsonian Beacon and Hygeist*, which contained testimonials to Thomsonian medicine and vigorous attacks on the regular physicians. Wesley Herwig has described the hostilities between the two groups in a *Vermont History* article: “A Patient Boiled Alive (or: Why Jehiel Smith, A Thomsonian Physician, Left East Randolph, Vermont, in a Hurry).” Dr. Smith was supposed to have fled to avoid facing criminal charges after the Orange County state’s attorney issued a grisly report on the death of a patient in July 1841. Five months later, however, the December issue of *The Thomsonian Scout* carried another advertisement for the East Randolph Infirmary and announced: “Dr. J. Smith is happy to inform the public that every effort of the M.D.’s to put out the light of Thomsonianism . . . the more bright and effulgent are its lucid beams . . . Dr. Smith does not regret, in the least, his late arrest and trial, excepting so far as the expense is concerned, for he has not the least doubt that . . . it will increase the patrons of the Thomsonian
NOTICE TO THE AFFLICTED.

Having suitably arranged his business with proper assistants, Dr. P. S. Standish will be ready to attend to all calls from the sick, at any distance from home, for this time until further notice is given. He deems it advisable to make this notice, from the fact that for a few months past he has been constantly solicited to attend patients at a great distance from town, and on account of an extreme pressure of business in his own immediate vicinity, he has been under the necessity of refusing nearly all; consequently some have lost their journey, and been otherwise disappointed. He trusts none this difficulty will be remedied, and offers his services to all who may feel disposed to employ him.

The sick people of Huntington may be assured of as prompt and judicious assistance as heretofore.

Thomsonian Medicine.—Thomsonian Medicine of all kinds, and the best qualities, always on hand to retail, neatly compounded and singly put up in bottles, vials, boxes, and packages, with printed directions for their use. All orders accompanied with the needful, will be attended to.

P. S. Practitioners who are in want of large quantities of medicine, are recommended as heretofore, to call on L. Tyler, of Natick.

P. STANDISH, Thomsonian Physician.

Huntington, July 1, 1842.

NOTICE.

All persons indebted to the subscriber are requested to make settlement without delay; and immediate payment on all accounts of one year or more standing. If necessity did not compel us to call upon our customers for pay, we should be happy to suspend the day of payment to the full extent wished for by our patrons, or even relinquish our dues forever without a cent.

Milton, June 10, 1842.

DR. J. SMITH,

THOMSONIAN INFIRMARY AND INSANE HOSPITAL,

EAST RANDOLPH, VERMONT.

Those who may wish to make trial of the new practice will find an experienced practitioner, good accommodations, pure medicine, the safest and best means of regaining lost or impaired health, with kind nurses and obliging assistants, by calling as above.

THOMSONIAN MEDICINE.

L. TYLER, keeps constantly on hand, and for sale, articles of Thomsonian Medicine superior to any ever brought into this section of Vermont, both in quality, and for purity. Also, Syringes of various kinds and sizes. Practitioners wishing for a package, who cannot call themselves, by forwarding their orders and money free of postage, will receive their just demands in haste.

Essex, Dec. 1, 1841

* The Thomsonian Scout is published on the 1st and 15th of every month, at Burlington, Vt. at 50 cents a year, or 7 copies for $1.

These advertisements from an 1842 Thomsonian Scout, published biweekly in Burlington, appeared at the height of botanic medicine’s popularity in Vermont and the nation. Courtesy of Joanna Weinstock

system in this vicinity a ‘hundred fold’.” When the regular doctors, led by a Dr. Burnham (possibly Zebulon Burnham who practiced in Williamstown), blamed the state’s attorney for mismanagement of the prosecution, Jehiel Smith suggested that Dr. Burnham should be appointed state’s attorney, chief judge and jury ... “and then the M.D.’s would extol King Calomel to the throne, and under his supremacy they would bleed, blister, poison, cup, and scarify his blind subjects, as much as they pleased, with none to molest or make afraid. But O, ye Gods, save us from such a fate.”
The 1830s were a low point in the history of the Vermont Medical Society, which languished between the fierce competition of the state’s proprietary medical schools for students and infighting over requirements for graduation. No meetings were held from 1830 to 1841. The regular doctors mocked the Thomsonians and parodied them in *The History of a Steam Doctor*, the story of a lazy young man who made his fortune parboiling gullible patients. This decade, however, was Thomson’s heyday. By 1839 he boasted of three million followers nationwide and the total sale of 100,000 family rights to his patent. The Thomsonians were successful in repealing protectionist laws in other states, and held national conventions. Then, popularity began to wane.

Samuel Thomson died in 1843 and the movement lost his personal leadership. Undoubtedly, Jehiel Smith’s trial and other lawsuits planted seeds of doubt about the safety of the system in the public mind. Thomson’s Ohio followers split and formed independent societies and professional schools that contradicted his original anti-academic philosophy. While some people were averse to Thomson’s Republican politics, other loyal followers continued to work on behalf of his system. In 1844 his son, John, arrived at the New York capitol building in Albany, pushing a wheelbarrow containing a petition with forty thousand signatures calling for repeal of that state’s medical practice law. It may be that the petitioners wanted reform more than they wanted to adopt Thomsonian methods. By the 1840s people had time to see that Thomsonianism was no more a cure-all than bleeding or calomel. Some of the regular doctors were adopting less heroic methods, while botanical physicians were reforming their own practices. In 1845 the *Rutland Herald* advertised a new periodical, *The Eastern Medical Reformer*. The character of the new paper was anti-calomel, but its editor, John B. Hibbard, called attention to his “reformed practice” without mentioning Thomson. By 1852, when the last renewed patent expired, Thomsonianism was moribund. In his 1866 presidential address to the revived Vermont Medical Society, Dr. William McCollom of Woodstock recalled:

“Scarcely fifty years ago a shrewd though ignorant man by the name of Samuel Thomson inaugurated a system of practice founded on the assumption that all diseases were due to a check in perspiration... The followers of Thomson firmly believed that it was destined to supercede all others. But what do we see of it at present? Only an occasional relic in some out of the way place, and the demand felt by a portion of the community for something outside of scientific medicine is supplied by the systems of Hydropathy and Homeopathy.”

In the opinion of many, Samuel Thomson was a lazy and ignorant farmer, a shrewd and avaricious businessman, ill-tempered, obstinate, and a medical quack. This reputation has obscured his courage and his
compassion for his patients. In an address delivered at the 1838 Thom­
sonian Botanic Convention in Peru, Vermont, Ezra Edson predicted “that
the name of Dr. Samuel Thomson will live in all future ages . . . that
the pen of the future historian and biographer will do justice to his
character, by placing him foremost in the catalogue of the benefactors
of the human race. Viewing him in relation in which he stands to the whole
community, it is as we might expect it would be—a medical reformer must
expect the mingled adulation and detraction of his fellow beings.”45 Was
he a quack? Thomson, himself, wrote that “the word quackery, when
used by the doctors against me, was a very important charm to prejudice
the people against my practice, but I would ask all the candid and re­
flecting part of the people the following questions, and I will leave them
to their consciences to give an answer, which is the greatest quack, the
one who relieves them from their sickness by the most simple and safe
means . . . or the one who, instead of curing the disease, increases it by
administering poisonous medicines . . . ?”46

Thomson was not a charlatan who pretended to cure for a price, but
an earnest reformer with a vision. Disturbed that most regular doctors
could not be persuaded to adopt his system, he shared it with the public.
His botanic system was accessible to all and provided a rallying point for
disillusioned patients who sought to improve their health, and at the same
time assert their right to make a choice. Thomson succeeded to a great
extent because he dared to attack the inertia of the establishment. The
Thomsonians were able to weaken the grip of the regular doctors, who
were attempting to establish an elite profession with closed societies, ex­
pensive schools, and protectionist laws. Thomson tried, to the best of
his ability, to treat and cure disease, but his system, like the systems of
the regular doctors of the day, relied on naive and simplistic theories.
In 1873, Samuel T. Brooks, vice president of the Vermont Medical Socie­
ty, wrote an article on the “Relation of the Medical Practice to Quackery.”
He stated: “No error is more universal than that almost all diseases are
curable, that for each there is, somewhere in nature, most probably in
the vegetable world, some sovereign remedy.”47 His criticism of botanic
medicine could apply to Rush’s “Unity of Fevers” theory or to the universal
“cures” of bloodletting and mineral medication practiced and taught by
the regular doctors. All were based on fallacy. In the early nineteenth
century the opposing sides had reached a state of equilibrium. They could
slander and accuse each other of quackery, but neither side could prove
its advantage. Finally, after the 1830s, improvements in pathology and
microscopy gave impetus to the notion that each disease was a particular
entity with recognizable symptoms. European researchers started to relate
individual illnesses to specific disease-causing agents. This modern “doc­
trine of specificity” spread to America, forcing both the regular and the
botanic doctors to practice more scientific medicine and to raise the requirements for education and licensure. Thomson's zeal had inspired a grassroots movement, but reformed practice and eclecticism, the alternate medical systems that replaced it, sought respectability in schools, diplomas, and boards of censors. A few of the botanic medical colleges survived into the early twentieth century. Thomsonianism also paved the way for European imports, such as hydropathy and homeopathy. Hydropathic "water cures" were popular at Vermont spas before the Civil War, while homeopathy is still practiced in the state.

Why do alternative medical systems continue to enjoy popularity 145 years after Thomson's death? Modern doctors cannot cure every problem, despite an armamentarium of medications and instruments. As they search and research cures, they sometimes employ dangerous drugs and risky procedures. The holistic health movement, like Thomsonianism, encourages freedom of choice and individual responsibility for health. Some patients choose to put their faith in the promise of scientific medicine, while others grow impatient or discouraged with what they view as the pretention and power of an elite profession. Some Americans turn, instead, to health food stores, where they purchased $500 million worth of herbal medicines in 1985, and to self-help literature, which suggests that simple herbal remedies are inherently superior to the commercially formulated drugs prescribed by doctors. Adele Dawson, Vermont's doyenne of herbal medicine, has included seventy herbs in her 1980 "materia medica," Health, Happiness and the Pursuit of Herbs. She selected these seventy because they "are completely safe" and "because they alleviate most of the common health problems that confront us." The legacy of Samuel Thomson survives.

NOTES

1 Vermont Medical Society, minutes of October 17, 1814 meeting, in Vol. 1, Large Bound Manuscripts, Wilbur Collection, University of Vermont.
10 Samuel Thomson, New Guide to Health or Botanic Family Physician . . . to which is prefixed A Narrative of the Life and Medical Discoveries of the Author (Boston: J. Q. Adams, 1835), p. 20.
11 Ibid., p. 21.
12 Ibid., p. 24.


Weston A. Cate, Jr., Research Fellowship

The Vermont Historical Society awards a fellowship each year to encourage research in Vermont history. The fellowship, named for Weston A. Cate, Jr., director of the Vermont Historical Society from 1975 to 1985, carries a stipend of $1,200.

The fellowship supports research for one calendar year in any aspect of Vermont history and is open to all individuals. The grantee is expected to complete research and writing on his or her topic within the period of the fellowship. A final product, normally an essay or research article, is expected at the conclusion of the fellowship period. An alternate product in a form that might be appropriate for exhibition or viewing could be acceptable. A winning essay or article will be seriously considered for publication in Vermont History, although the fellowship does not include a guarantee of publication.

The research project proposed by the applicant must be complete within itself. Because the Society's purpose is to encourage worthwhile, original research in Vermont history that might not otherwise be undertaken, segments of a larger study already in progress—even if they can stand alone—may be at a competitive disadvantage. Insofar as possible, the project should involve the use of the collections of the Vermont Historical Society's library and/or museum. In making the fellowship award, the selection committee will favor applications that address topics designed to fill research gaps in the state's history.

The deadline for filing an application is April 1, 1988. The winner of the fellowship will be announced May 1, 1988.

Address all inquiries and requests for application forms to the Weston A. Cate, Jr., Research Fellowship, Vermont Historical Society, 109 State Street, Montpelier, Vermont 05602.