

WARING
HISTORICAL
LIBRARY

Waring Library Society Newsletter

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THE WARING
HISTORICAL LIBRARY





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Detail shot of the facade of the Waring Historical Library.

President's Corner

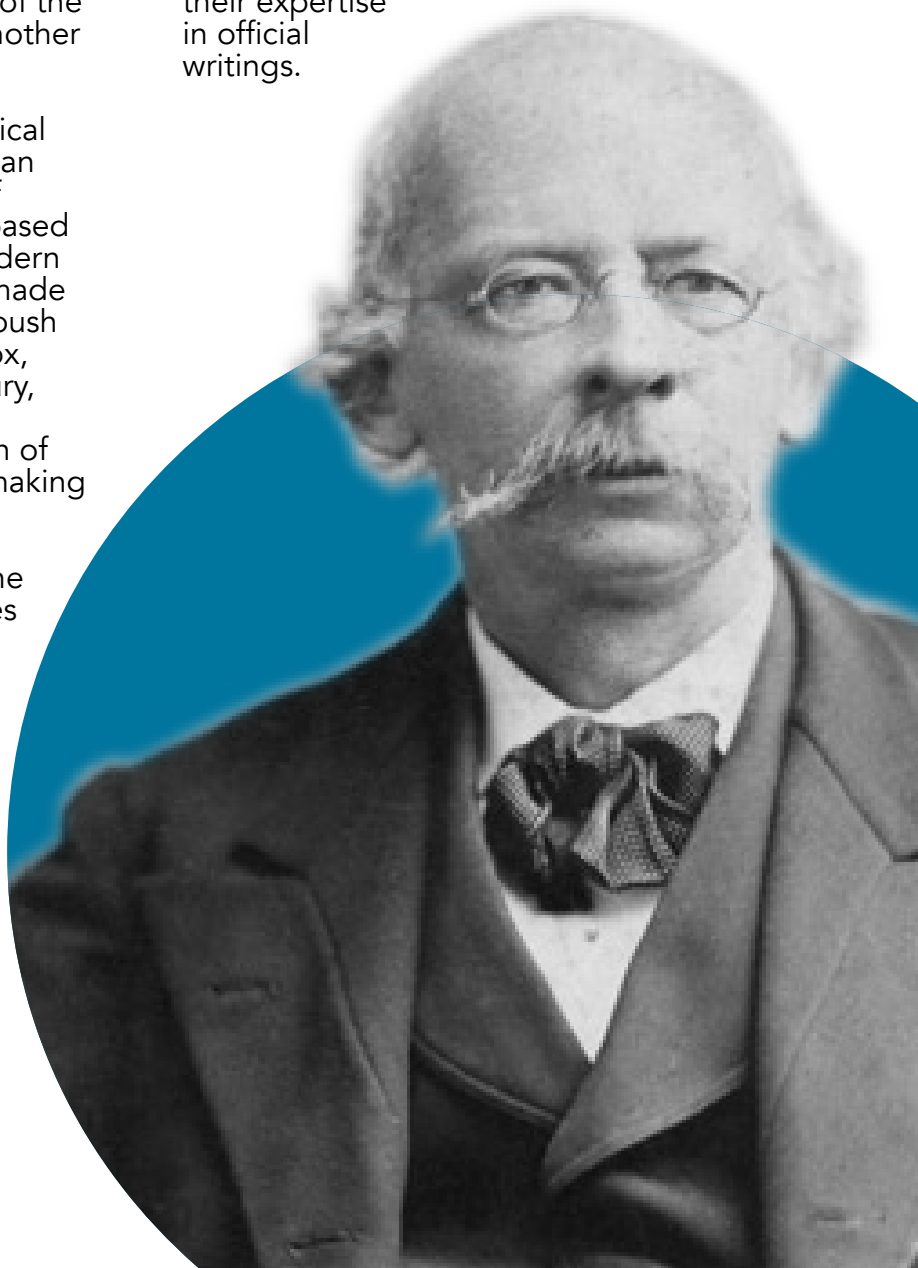
By Dr. Jacob Steere-Williams, WLS President

Francis Peyre Porcher (1825-1895) is a name widely recognizable to the Charleston community. While thousands of students and health professionals stroll by the Porcher Medicinal Garden each year, few know much about his history. Graduating with first honors from the Medical College of the State of South Carolina in 1847, Dr. Porcher served as professor of clinical medicine and chair of materia medica for nearly twenty years, from 1874 to 1891. Porcher is perhaps best known for his 1863 *Resources of the Southern Fields and Forests*, a world-class, encyclopedic text on the therapeutic value of Southern trees, plants, and shrubs that was commissioned by the surgeon general of the Confederacy, Dr. Samuel Preston Moore, another Medical College graduate.

Celebrating Porcher's achievements in medical botany seems at first glance appropriate in an age when there was little standardization of therapeutic remedies, a tradition of place-based medicine, and only the beginnings of a modern notion of a pharmacy supplied with ready-made treatments. And no doubt Porcher helped push forward the professional identity of orthodox, white, male doctors in the nineteenth century, who saw the Linnaean-based taxonomical understanding of nature and the application of natural remedies as one pathway towards making medicine "scientific."

Yet, Porcher's story has another history, one in line with our theme 'different perspectives on medicine' for our first WLS newsletter of 2023. Porcher's interests in medical botany was cultivated, furthered, and reinforced through the tacit, everyday knowledge of herbs he learned from enslaved Africans. Porcher grew up in St. John's Berkeley Parish on his grandfather's plantation, and both father and grandfather were botanically-interested doctors and slave owners. As an adult Porcher himself was a slave-owner and in favor of Southern succession. Porcher's life in this respect mirrored at least two generations of Southern doctors in the late 18th and early 19th centuries, who's professional lives

spanned teaching at medical schools like MUSC and everyday practice on plantations interacting with enslaved Africans. As historians like Sharla Fett and Londa Schiebinger have brilliantly shown, there was a thriving, complex trans-Atlantic network of knowledge exchange amongst enslaved Africans, indigenous Americans, and white European and American doctors about the usefulness of plants. Often, white doctors like Porcher relied on indigenous Americans and enslaved Africans for their knowledge about medically-useful plants, but silenced or even denigrated their expertise in official writings.



White establishment doctors like Porcher sought to cultivate a professional aura of respectability and civility, and a cache of scientific allure to bolster their knowledge claims and enhance their practice. Porcher, for example, distinguished his “scientific” knowledge of medicinal plants from the “charlatans and herb doctors” of the Lowcountry who “know only by memory the name of the plant and the disease which it is said to suit.”

The mission of medical history at the core of the Waring Library Society and the Waring Historical Library, should be the complete and the complicated study of medicine’s past— an aim I might add that has tremendous value

for current medical practice today. Rethinking Porcher’s history is not an attempt to erase his accomplishments or devalue his work in medical botany, but we have an ethical and moral responsibility to telling inclusive, historically-accurate stories. Too often in the kind of medical history that gets paraded in medical schools and amongst the general public we focus on the scientific progress of a select group of largely white male doctors in the past. But stories of achievement are often built on stories of silence, and in telling a more complete history of ‘different voices’ in medicine we can better see who’s stories and voices we continue to ignore or silence today. This is the true value of studying history.

Curator’s Comments: Historical Timeline Continued

By Dr. Brian Fors

1826 – 1861 Early Development and Growth of the College

By 1826, the Medical College had built its main facility on the corner of Queen Street and Franklin, where the college remained until a new building opened in 1914 in a different part of the city. The City of Charleston provided funds for the construction, and it housed lecture rooms, lab space, and a space in the back for anatomy lessons.

The original “medical district” of the city developed around the Medical College within less than twenty years. The Marine Hospital building— on Franklin and on the same city block—was built in 1833, the City Hospital sat a short distance away, and in 1850, the first Roper Hospital was built next to the Medical College, establishing a connection between the two institutions that lasted for over one hundred years.

The small number of faculty members, all appointed by a board made up of senior Medical Society members, provided coursework in six subject areas— anatomy, chemistry, physiology, materia medica, surgery, and theory and practice of medicine. Students paid for tickets for each lecture in the series, which they repeated during a second year. By 1850, students paid fifteen dollars a ticket. They could provide evidence of having completed part of the series at another

respectable medical school, but the second series had to be completed in residence in Charleston. Lecture sessions ran from November to the first Saturday in March, avoiding the period in which heat and illness often overtook the city’s population. The students paid additional expenses as needed, including paying five dollars to observe surgical cases at the nearby Roper Hospital or at the Marine Hospital.

In order to graduate, students had to be at least twenty-one years of age, of good moral character, complete three additional years of study with “some respectable practitioner,” and perform a series of dissections as well as write a thesis covering some medical or surgical subject before taking exams.

Professors were practitioners in the community with their own private practices. For example, J. Julian Chisolm—a professor of surgery starting in the late 1850s—was also a co-owner of a plantation hospital, providing medical treatment for some of the area enslaved population. Others had practices in the city and met regularly as part of the Medical Society.

The faculty as medical practitioners also did what they could to provide public health services essential to keeping the city functioning as an economic entity. Since much of the economic



Image of the Medical College's building on Queen Street from 1860.

activity related to the labor of the enslaved population and the slave trade, this also explains some of the "selling points" of the new institution. The Medical Society noted, in particular, that

"No place in the United States offers as great opportunities for acquisition of anatomical knowledge, subjects being obtained from among coloured (sic) population in sufficient number for every purpose, and proper dissection carried on without offending any individual in the community. Those impediments which exist in so many other places, to the prosecution of this study, are not here thrown in the path of the Student. In addition, the southern students can nowhere else receive correct instruction on the disease of his own climate, or the peculiar morbid affections of the coloured (sic) population."

The availability of Black bodies for dissection and for surgical demonstrations and clinical practice continued to be noted by the college in

its annual bulletins that described the curriculum as well as listed the names of graduates, faculty, and board members.

During its first decade of operation, the Medical College attracted students from across the region, but early on tension rose between the faculty and the College Board -- ironically, fellow Medical Society members -- which controlled faculty appointments. In 1832, the faculty of the Medical College opposed the practice of the Medical Society essentially choosing faculty through the board and they petitioned the state for the authority to create a new school separate from the Medical College of South Carolina, and the state agreed. They called the new school the Medical College of the State of South Carolina, and they moved to a building a few blocks away on the corner of New and Broad Streets.

The schism created considerable animosity between the faculty and the board members in the Medical Society, even though faculty

members also belonged to the Society. The Medical Society and board was forced to fill the faculty ranks with physicians from outside the state, and with the resignation of most of its faculty and the difficulty in finding replacements over the next few years, the College board eventually had to concede. The faculty returned to the building on Queen Street in 1838 and with the schism at an end, the college became known as the Medical College of the State of South Carolina.

Even though the student numbers either increased or stayed steady over the years, and the faculty was recognized as competent by the graduates, the college faced financial woes that would not be resolved until well into the twentieth century. In 1856-1857, the Medical College ranked fifth among the medical colleges of the country in terms of enrollment and number of graduates, bestowing credentials on ninety-two students in that year. Yet, this still did not provide enough students to cover expenses and leave funds to make improvements.

On occasion the state paid the college's debts, when necessary, even while continuing to refuse annual financial support. For example, the state provided assistance periodically in the 1830s and 1840s, and in 1854, the legislature appropriated \$20,000 to be used to add an additional floor to the building and make other necessary structural improvements. In 1860, the state again approved funds to make general improvements to the building and to the museum.

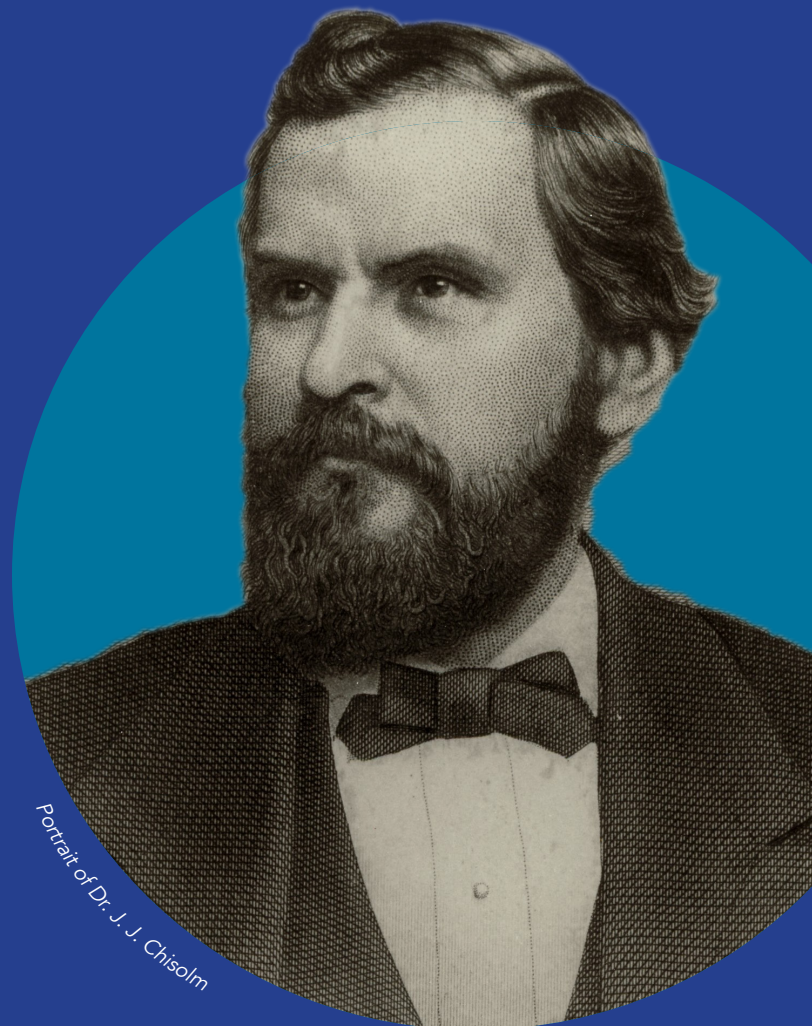
By the time of the first shots of the Civil War in the spring of 1861, a medical district in Charleston had been well established, with the City Hospital, the Marine Hospital, and the new Roper Hospital available for clinical experience for students. While the College did not receive annual operating funds, it did receive periodic allocations from the state government, and enrollment remained healthy. The Medical College had become recognized for its work in educating southern white male physicians.

1861 – 1865 The Great Struggle: The Medical College During the Civil War

In April 1861, soon after classes ended in the 1860-1861 academic year, fighting began in Charleston harbor, marking the beginning of the American Civil War. The senior class that year numbered ninety-four, and graduates and students entered the Confederate Army, some in the medical corps but many more in the general

army. Six of the nine faculty members entered the medical corps and served in the Confederate forces for the duration of the war.

Due to the anticipation of professors leaving and the unlikelihood of obtaining enough students, the College closed. As with most in the country at the time, the faculty and board expected the war to be short-lived and that they would reopen again soon. For the next four years, however, the building was used as a hospital and then was occupied by United States Federal troops near the end of the conflict. Although the equipment and furniture had been damaged and there had been moderate damage to the building from artillery shells, the College building remained intact and ready to be reopened and to welcome students once again when the war came to an end in 1865.



Portrait of Dr. J. J. Chisolm



The Waring Historical Library Spring Event Calendar

Black History Month Lecture

Healing, Mobility, & Fugitive Logic: Revisiting Harriet Tubman as Both a Healer & Intellectual

Featuring Dr. Deirdre Cooper Owens

Feb. 6 | 6 PM EST | Virtual + In Person

February Student History Club Noon Lecture

Freedom House: The Birth of the Modern Paramedic

Featuring Kevin Hazzard and John Moon

Feb. 22 | 12 PM EST | Virtual

March Student History Club Noon Lecture

Seeing is Believing: 19th c. American Gynecology and the introduction of the pelvic exam

Featuring Dr. Wendy Kline

March 1 | 12 PM EST | Virtual

Joseph I. Waring Lecture

The Doctors Blackwell

Featuring Janice P. Nimura

March 7 | 6 PM EST | Virtual + In Person

April Student History Club Noon Lecture

“One Vacant Chair”: How Childhood Death Became “Unnatural”

Featuring Dr. Perri Klass

April 19 | 12 PM EST | Virtual

For more info
and registration:



Brilliant Stucco whitewash

Take half a bushel of nice unstaked lime stake it with boiling water covering it during the process, to keep in the steam, strain the liquid through a

Handwritten recipe by Isabella Sarah Peyre Porcher for "Brilliant White Stucco."

Revisiting Isabella Sarah Peyre Porcher's Plantation Prescription Book

By Dr. Gabriella Angeloni

With its worn blue—now faded to gray—boards and its “spidery cursive,” Isabella Sarah Peyre Porcher’s 1834 receipt book, highlighted in Tom Corwin’s recent *Post & Courier* article, is both remarkable and mundane as a medical compendium in which she collected various treatments. Isabella, then a thirty-one year old widow and mother to seven children, not only oversaw the health of her own family, but also that of the enslaved men, women, and children on her Berkeley County plantation, Sarrazin. Her journal is striking for a variety of reasons, including the window it provides into nineteenth-century medical treatment and female slave-ownership in the antebellum period.

Porcher’s book is a rare survivor in the Waring’s collection. This rarity can be attributed to several factors. Because prescription books were referred to so often, many were lost to wear and tear. Others may not have been saved by subsequent generations as folk medicine was replaced with modern prescriptions. As is the case with Southern material culture in general, much was likely lost during the Civil War. Moreover, many institutions have only recently—at least in the past forty or fifty years, particularly as women’s history emerged as a field of study—sought to preserve women’s documents, including such handwritten medical reference works. But even so, there are likely others yet undiscovered and uncatalogued in archival collections across the South. For example, Alice Delancey Izard’s 1775-1776 prescription

notebook, which contains treatments for maladies ranging from cough, fever, and worms to a specific regimen for the family’s enslaved coachman Philip, is buried—uncalendared—in the Manigault Family Papers at the South Caroliniana Library in Columbia.

While Isabella Sarah Peyre Porcher recorded prescriptions treated those, including the enslaved, who lived on Sarazin Plantation in the 1830s, her recipe book also throws into sharp relief her role as an enslaver. Even in the nineteenth century, it was believed that white Southern women only supported slavery because they, on the one hand, had essentially been indoctrinated since birth and, on the other, were shielded from its horrors by their fathers and husbands. However, this simply was not the case. Southern women, like Isabella Porcher, not only witnessed slavery’s brutality firsthand, but took part in and profited from it. That Porcher’s book dates to 1834, the year following the death of her husband, Dr. William Porcher, indicates she had fully stepped into the role of slaveowner as head of household. As such, she had complete control over the lives of the men, women, and children she enslaved. Although Isabella very well may have learned to treat rheumatism, various coughs, dysentery, and other ailments out of charity and the sociocultural expectation that women be conscientious caregivers, it was ultimately in her financial interest to do so. Simply put: a healthy slave was a productive slave.

Perhaps nothing highlights this reality quite like the instructions for a “Brilliant Stucco Whitewash.” Under Isabella’s direction, the process itself—from mixing the lime with boiling water, salt, ground rice, Spanish whiting, and glue for “a few days” to its final application—would have been completed by those she enslaved. That very lime wash was then applied to the kitchen, dairy outbuildings, as well as the slave cabins. Whitewash was a common architectural practice across the south in the eighteenth and nineteenth centuries, not only for its crisp, clean appearance but also for the health benefits it was believed to provide. In fact, it was common practice throughout the Lowcountry, as evidenced in extant outbuildings and slave dwellings throughout Charleston. One South Carolina planter who had his

cabins whitewashed annually noted that the treatment contributed “not only to their [the slave cabins] good appearance, but to the health of their inmates.” “Cleanliness,” he continued, “is indispensable to health,” and the whitewash “makes the slave prolific.” He—and, undoubtedly, other South Carolina planters like him, including Isabella—attributed enslaved men and women’s fertility, and any subsequent financial benefit, to those whitewashed domestic spaces. Situating Isabella’s prescription book in this context thus provides a fuller picture of female slave-ownership as well as the conditions under which those whom she enslaved lived.

Archives Updates

Records Return to Campus

With the completion of the renovation of the main Library, some of the records removed from the Archives and stored at the Records Center at Arco Lane returned to campus. The Archives space has been split into two locations, one on the first floor, housing records and the office of University Archivist Brooke Fox, and the other space on the third floor, housing records, a dark room for digitization projects, and the office space for Digital Archivist Tabitha Samuel. The two spaces together equate to about 1/3 of the previous space available for records, even with the installation of moveable shelving, resulting in the long-term storage of most records and artifacts at the Records Center.

Pharmacy Project Nears Completion

Brooke Fox has been focused on processing the College of Pharmacy Museum collection in order to care for the collection, provide some intellectual control over the items, and prepare for the College of Pharmacy move out of the building on Calhoun street. The project has required extensive work in identifying items, describing them, boxing them in archival storage containers, and overseeing the process of disposing hazardous material in the collection.

Restoration Reminder

With assistance from the Waring Library Society, the fundraising campaign for the Waring Historical Library’s restoration continues. Although it is one of the oldest buildings on campus, the Waring has not received any apparent structural attention since the university acquired it in the 1960s. Given its historical significance and the value of its collections, we are increasingly concerned about the building’s declining condition. Our vision is to create an environment for the reliable preservation of our history, while also setting the stage for an expanded use of the Waring Historical Library in the future.

The Medical University invites all those with an interest in the preservation of medical history to partner with us, as we embark on this important endeavor. Significant contributions in support of this restoration will be recognized on a special donor wall to be displayed within the library. We also are offering a limited number of **naming opportunities** within the facility.

For more information about giving opportunities and our efforts to restore the Waring Historical Library, please visit [Support the MUSC Waring Library](#) or contact Linda Cox at 843-792-4282, cox1@musc.edu or **Support the Fund here** to give directly.