

MEDICAL PRACTICES AND HEALTH
IN THE CHOCTAW NATION, 1831-1885

By Virginia R. Allen*

*I know not how long I shall live; I want to see
the good work before I die . . . We wish to follow
the ways of the white people.*

—The Indian Advocate¹

Hoolatahooma, chief of the Six Towns division of the Choctaw tribe, expressed this desire a decade before their removal to Indian Territory. His plea for help, accompanied by the first printed laws of the Choctaw people, was sent to the "Society of good people, who send missionaries to the Choctaws."² Choctaw leaders had begun to realize that their only hope for survival in a land increasingly dominated by white people was to adopt and adapt their ways. This means ultimately to adopt white medicine also.

The white man introduced many woes to the American aborigines. Silently accompanying him as he advanced across the wilderness was an adversary which was as deadly to the Indian as the white man's gun. Living on an isolated, uncrowded continent for thousands of years, the Indian had no experience with diseases common to European immigrants and therefore had no natural immunity. The results were often devastating.

Disease and medical practice have been significant factors many times in shaping history. For the Mandan Indians, a smallpox epidemic became a catastrophe which destroyed them. Although medicine is a biological science, it is also a social science and its development is closely interwoven with social, cultural, and economic progress. Medical practices of the Choctaws in Indian Territory reflected the personal conflicts which arose as they attempted to adopt new ways while still emotionally bound to the old. Choctaw medicine became a unique blend of the traditional and the new, with the ratio of the two varying in proportion to educational and cultural development.

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¹ The *Indian Advocate* quoted by Grant Foreman in *The Five Civilized Tribes* (Norman: University of Oklahoma Press, 1934), p. 20.

² *Ibid.*

The Choctaw "Trail of Tears" from Mississippi to Indian Territory began in 1831, with the main removals continuing through 1834. The trip of 550 miles passed through unsettled country of dense forests, swamps, thick canebrakes, and swollen rivers. The suffering, caused by the mistakes and inefficiency of the War Department combined with one of the region's worst blizzards in history, was indescribable. Wagons were in short supply and many roads became impassable except by foot. Inadequate clothing and supplies caused great suffering and sickness. Choctaw Agent William S. Colquhoun at Vicksburg, Mississippi, reported that a party arrived there after marching nearly naked and barefooted through the sleet and snow for twenty-four hours.³ Colquhoun also stated that an error had thrown together three groups of Choctaws, a total of 2300, which were intended to travel separately. Transportation problems became critical as did the weather. Of the Indians' plight, Colquhoun said: "Their situation is distressing and must get worse, they are often very naked and few moccasins are seen amongst them."⁴

A party of 2,500 Choctaws traveling by steamboat were disembarked at Arkansas Post and kept in open camps throughout the worst of the blizzard. Many had to remain for weeks awaiting horses which were being driven overland from Louisiana. Respiratory diseases and other illnesses which resulted from exposure and shortage of food took a heavy toll of the emigrants.

Provisions and preparations for the continuing migration in 1832 were improved, but a cholera epidemic brought new tragedy to the Indians. The disease which had been gradually creeping westward from India since 1816 reached New Orleans in January, 1832.⁵ Along the rivers, steamboats left their dead at every landing. Fear of the cholera had a demoralizing effect and alarmed both the Indians and their agents. Cholera broke out on a boatload of Choctaws nearing Memphis, a transfer station on the Mississippi River, and sickness and death became constant companions. Many panic-stricken women and children refused to board another steamboat. They were ferried across the river and

³ William S. Colquhoun to Brigadier General George Gibson, December 10, 1831, Grant Foreman, ed., letters from the office of the Commissioner of Indian Affairs (typescript 7 vols.), Vol. I, p. 141, Indian Archives Division, Oklahoma Historical Society, Oklahoma City.

⁴ *Ibid.*

⁵ Madge E. Pickard and R. Carlyle Buley, *The Midwest Pioneer: His Ills, Cures and Doctors* (Crawfordsville, Indiana: R. E. Banta, 1945), pp. 24-25; Rodney Glisan, *Journal of Army Life* (San Francisco: A. L. Bancroft and Company, 1874), p. 24.

continued the journey by land. Incessant rains had made many roads through the swamp impassable, and some of the emigrants traveled thirty miles knee to waist deep in water. All of the emigrants experienced great suffering and illness due to exposure and cold.

Some of the Choctaws who were traveling under the supervision of the War Department were accompanied by physicians. on the steamboat *Reindeer* in November of 1832, Doctor John T. Fulton and a Doctor Rayburn, government agents, reported twelve deaths in three days in a party of 445 Choctaws. The doctors disagreed, however, as to whether or not all of the deaths were caused by cholera, for which they knew no effective treatment.⁶ Assistant Superintendent A. S. Langham reported: "This disease has caused so great and so general a panic that the consequences cannot be calculated — seventeen teamsters . . . have left. Three of the hired wagons and teams have gone."⁷

The Reverend Cyrus Byington, who was a missionary among the Choctaws before removal and who traveled with them, estimated that at the time of removal there were 40,000 Choctaws, of whom 6,000 died during migration.⁸ The losses incurred because of the appalling circumstances encountered during the removal permanently decreased the population of the tribe.⁹ The health of the Indians in their new home was affected for some time by the rigors of the trip.

The Choctaws under the guidance of concerned missionaries had made great progress culturally and educationally prior to their removal to Indian Territory. Their culture was a mixture of traditional Choctaw customs and newly adopted methods and beliefs. The less educated and older members of the tribe continued the old traditions and beliefs into the twentieth century and many others retained a mixture of the old and the new. The traditional Indian doctor, called *alikchi* in Choctaw, journeyed to the new home also. The term, "medicine man," has been used indiscriminately by the white man, usually with the connotation of a meaningless magician. The Choctaw "medicine man" by

⁶ A. S. Langham to Brigadier General George Gibson, October 31, 1831, Foreman, ed., *Commissioner of Indian Affairs*, Vol. III, p. 164.

⁷ *Ibid.*

⁸ Cyrus Byington quoted by H. B. Cushman in *History of Choctaw, Chickasaw, and Natchez Indians* (Greenville, Texas: Headlight Printing House, 1899), p. 42.

⁹ Angie Debo, *The Rise and Fall of the Choctaw Republic* (Norman: University of Oklahoma Press, 1934), p. 56.

contrast, was believed to possess an insight into the hidden laws of nature and a power over the elements, the fish of the waters, and the animals of the land; in a sense he was a spiritual leader. He could give bravery to the heart of a warrior, and skill and strength to his arms; he could rout the evil spirits of disease from the bodies of the sick.¹⁰ Though he may not have possessed supernatural powers, he was skillful at making his people believe that he did. The medicine man's practices, though primitive, were an attempt to control and interpret natural phenomena which he did not understand. Considered in this context, the medicine man was a step forward in Choctaw medical and intellectual progress.

The Choctaw *alikchi* employed the supernatural with herbal remedies and special treatments. Many of his practices were no more primitive than the ministrations of some of his contemporary white physicians. Middle nineteenth century medicine in America was less science than it was an art or craft. When faced with many infectious diseases, physicians were as helpless as the *alikchi*. They could set broken bones, extract bullets, sew up wounds, amputate limbs, and do limited surgery, but they were ineffective against the contagious diseases. They had learned through trial and error, just as the *alikchi* had, to administer a few drugs and herbs. For most illnesses, like the Choctaw doctor, they could treat only the symptoms, and in the end nature killed or cured the patient.

When the Choctaw *alikchi* was called in to treat a patient, he did not take his medicines with him. He would first see the patient, make a diagnosis, and then decide if he could help. If he decided in the affirmative, he went immediately to the woods to gather the proper roots or herbs for the patient. After the *alikchi* prepared the medicines, he stayed with the patient until he either recovered or died. If his diagnosis indicated that he could not help the sick Indian, he would tell the relatives and make no effort to treat the patient.¹¹

There was a tendency among the more primitive and less scrupulous *alikchi* to place the blame for a patient's death on another person. Frequently, the bereaved relatives killed the accused. They believed that the illness was caused by an evil

¹⁰ Cushman, *History of the Choctaw, Chickasaw, and Natchez Indians*, p. 172.

¹¹ Grant Foreman, ed., "Sampson Collin," *Indian-Pioneer Papers* (typescript, 112 vols.), Vol. II, pp. 177-178, Indian Archives Division, Oklahoma Historical Society.

spirit, and that it was important to drive away the spirit by killing the person whose body housed the spirit. Sometimes ceremonies were used to determine the offending witch and occasionally the *alikhchi* merely accused someone. Often dances and ceremonies were used to drive out evil spirits. If the patient recovered, the doctor took credit, but if he died the doctor said he was possessed of too many evil spirits. The validity of these beliefs had been questioned by the more progressive Choctaws before they came to Indian Territory, and they had passed laws granting a person accused of witchcraft the right of a trial. However, the verdict of the court sometimes concurred that the accused was a witch and should be executed.

The extraction of witchballs was a customary Choctaw medical practice. The theory, that disease was caused by something secretly thrown into the patient's body by a witch, resulted in attempts to remove the object. The witchball had to be extracted from the patient by some type of powerful suction; the mouth of the doctor made a convenient place to keep the ball until the proper time to "extract" it. Sometimes other more complicated methods were employed. One young Choctaw woman, paralyzed from the hips down, was taken by her husband to a woman practitioner. After conducting a special ceremony for four consecutive days, the doctor removed from an iron pot, which had been part of the ceremony, a red flannel string tied in many knots. The doctor explained that the string had been between the woman's hips and had kept her from walking. She instructed the woman to move from the neighborhood in which the couple lived to prevent being bewitched again. The young wife, believing herself to be cured, walked away.¹²

An object of great traditional importance and meaning in the Indian's life was the medicine bag. Constructed from skins of mammals, birds, or reptiles, it was ornamented and religiously sealed. Each warrior retreated into the woods for several days of fasting and meditation while gathering the contents of his bag. The bag was carried throughout the Indian's life for good luck, strength in battle, and the assurance that in death he would be watched over by his guardian spirit. The bag was always placed in the grave with him. A tribal medicine bag was also maintained, and its special medicines and treatments were passed on in secret. Its contents were considered sacred, and if they became known to

¹² *Ibid.*, p. 343.

anyone other than the head medicine man or tribal chief, they became powerless.

Some Choctaw *alikchi* were skillful with the use of herbs and other medical treatments and gradually adopted parts of the white man's medicine. They had a wide knowledge of the medicinal properties of leaves, bark, and roots of plants which were common on the prairies and in the woodlands. Mortars and pestles for pulverizing and mixing medicinal materials were made from gum-tree wood since it did not rot or split.¹³ Specific Choctaw remedies were:

1. *Boneset*: when made into a tea it was used to break chills.
2. *Burn weed*: hot tea made of the stalk and leaves caused sweats and was used to break chills.
3. *Blackroot*: the roots were made into a tea and given as a purgative.¹⁴
4. *Rusty water*: chains were allowed to stand a few days in water, the rusty water was then used as an iron tonic.¹⁵
5. *Broom weed*: tea made from the root was used for colds and considered to be a preventive of pneumonia if taken in time.
6. *Black root* and *ball willow*: for measles and smallpox.
7. *Blood weed*: for purifying the blood.
8. *Sugar, soot, and spider web*: applied to stop bleeding.¹⁶
9. *Jerusalem oak* or *wormseed*: made into a type of candy to give children for worms.
10. *Scurvy grass*: used as a cleanser for the teeth.
11. *Pink root*: when combined with just enough whiskey to preserve it, it was used as a system builder.
12. *Mayapple*: the fruit was given to children as a purgative; the root powdered, then boiled down with water and mixed with whiskey was said to "tear out" the cold.
13. *Wild cherry*: considered good for young girls; it was sometimes made into cherry wine and used to stop pain; in quantities it was supposed to purify the blood.
14. *Prickly ash*: a piece of the bark was held in a tooth cavity to stop the toothache, or powdered and made into a poultice.
15. *Modoc weed* or *yellow root*: the root was boiled in water and taken with whiskey for weak stomach, fainting, and upset nerves.

¹³ "Bafra Alice Dobbs," *ibid.*, Vol. XXII, p. 294.

¹⁴ "Susan G. Maxey," *ibid.*, Vol. VI, p. 460.

¹⁵ "Emeziah Bohanon," *ibid.*, Vol. I, p. 171.

¹⁶ "Sampson Collin," *ibid.*, Vol II, p. 308.

16. *Pottage pea*: its onion-like root was used for diarrhea.
17. *Goldenrod* and the *puccoon root*: were not used by the Choctaws, but sold to whites for medicinal purposes.¹⁷
18. *Persimmons*: when sun-dried and mixed with a light kind of bread, it was used to control diarrhea.
19. *Ground ivy*: when made into poultices, it was used for treating sores.
20. *Rattlesnake's master*: a root used in making a poultice to be applied to snakebite; the root was also chewed by the patient.¹⁸
21. *Sycamore bark*: when boiled in water and sweetened with sugar, it was given in tablespoon doses for coughs.
22. *Slippery elm*: when combined with new milk, it was used as a wash to soothe the pain of burns.¹⁹

Little Blue Hen, the wife of Ezekiel Roebuck, who came to Indian Territory in the first removal, had a remedy for skin cancer which was passed down through several generations. She made a salve from equal parts of honey, butter, and the juice of the green vines and leaves of the pole bean. The ingredients were steamed slowly together until the mixture formed a soft salve. Persons using the cancer cure were to refrain from the use of alcoholic beverages, fat meats, any oil, and the drinking of any liquids except water, buttermilk, or the liquid from boiled corn. A testimonial to its effectiveness was made as late as 1937.²⁰

The Choctaws believed that roots were purer in the fall of the year. A sufficient supply of roots, herbs, and barks were gathered for the winter at the proper state of maturity and were hung in the house.²¹

The Choctaw doctors practiced bloodletting, cupping, cold and warm baths, and cauterization. Bloodletting and cupping were common practices among nineteenth century white physi-

¹⁷ John R. Swanton, "Source Material for the Social and Ceremonial Life of the Choctaw Indians," *Bulletin 103* (Washington, D. C.: United States Government Printing Office, 1931), pp. 237-238, Bureau of American Ethnology, Smithsonian Institution.

¹⁸ Cushman, *History of the Choctaw, Chickasaw, and Natchez Indians*, pp. 118-119.

¹⁹ Cyrus Byington, *Diary* (typescript), July 22, 1862, p. 70, Indian Archives Division, Oklahoma Historical Society.

²⁰ "Josephine Uray Lattimore," *Indian-Pioneer Papers*, Vol. XXXIII, p. 57. Field worker Amelia Harris (W.P.A.) who reported this interview October 13, 1937 said: "I know of one person who was cured by this remedy of external cancer when her nose was half eaten off. I witnessed this cure."

²¹ *Ibid.*, Vol. VII, p. 551; Swanton, *op. cit.*, p. 237.

ans. "In many of the healing arts, . . ." one research authority believed, the Indian doctors "fell not so far below those of the white race as might be supposed . . ." ²² Rheumatism, neuralgia, and headaches were treated by cupping and bloodletting. A cow's horn was commonly used to make the vacuum necessary for the cupping process. A piece of glass was used to either scratch or puncture the patient's skin. The *alikchi* placed the wide end of the horn over the wound and by sucking the smaller end, he drew blood to relieve the patient of "poisons." ²³

Cauterizing was done, not by chemical agents, but by the use of fire applied to a lesion with a burning punk. For the treatment of some fevers, steam was used either in a common sweat house or by an individual sweat bath. For this special treatment, a pot of boiling water containing herbs was placed in a hole. Planks were placed across the hole for the patient to lie on, and a blanket was placed over him to trap the steam. Casts for broken limbs were made from a paste of clay which was applied around the break and wrapped in cloth, and then placed in wooden splints. To help prevent fever and swelling, the cast was kept damp with cold water. ²⁴ The steam of boiling cottonwood roots was used to treat sockets out of joint. After four days of this treatment, repeated four times each day, the joint was supposed to slip back into place. ²⁵ The *alikchi* knew how to use pillows to make patients more comfortable and to improve circulation in the limbs by elevation.

A Choctaw child was often born under the trees with little ceremony and later carried into the house by the mother. ²⁶ Indian midwives attended many births, but white physicians ordinarily were not called except when complications arose. ²⁷ Although the birth rate was high, the infant mortality rate was extremely high as well, and this partially explained the stationary population of the Choctaws. ²⁸

The Choctaws never recovered the loss of population which resulted from the disastrous migration and the hardships of settlement in their new territory. Not realizing the capriciousness

²² *Ibid.*, p. 234.

²³ *Ibid.*, p. 236; "Emeziah Bohanon," *Indian-Pioneer Papers*, Vol. I, p. 217; "Charles Augustus Berryhill," Vol. XV, p. 5.

²⁴ *Ibid.*; "Emeziah Bohanon," *ibid.*, Vol. I, p. 217.

²⁵ *Ibid.*, p. 218.

²⁶ Debo, *op. cit.*, p. 233.

²⁷ "Wm. C. Cook," *Indian-Pioneer Papers*, Vol. II, p. 233.

²⁸ Debo, *op. cit.*, p. 233.

of the rivers, they settled along their banks as they had in their southern homes. One of the worst floods in their history came down the Arkansas and Grand rivers in 1833. Not only did they suffer great material loss, but much sickness as well. Agent William Armstrong reported, "Not a family but more or less sick; the Choctaws dying to an alarming extent Near the agency there are 3,000 Indians and . . . 100 have died within five weeks."²⁹ Since the nearest physician was sixty miles away and charged a fee of seventy dollars to call, the Indian doctors were in great demand, but the high mortality rate illustrated their ineffectiveness. The Reverend Alfred Wright, a Presbyterian missionary, was greatly sought by Christian Indians for help during the 1833 epidemic of remittent fevers. He reported that within a radius of three miles of his home seventy deaths occurred in seventy families that year.³⁰ Many illnesses called remittent fevers and bilious fevers were probably typhoid.

A serious drought in 1838 ruined Choctaw crops and created a water shortage. In July streams began to dry up and by September many were entirely gone, leaving only scattered stagnant pools. There was a great deal of sickness, caused principally by the polluted water. Indian Agent William Armstrong reported that the Choctaws desired the attendance of a white physician.³¹ Discouraged by the ruined crops and illnesses, they sought the numbing effects of liquor, to the neglect of their crops, stock, and schools.

There had not been time to recover from these disastrous influences when the Chickasaws arrived in 1838. Adding to the Choctaws' misfortunes, they brought smallpox, one of the white man's most calamitous gifts to the Indians. Their lack of natural immunity and medical treatment, neglect of precautionary measures, and their exposed modes of living made it especially fatal. Its spread was facilitated by the refusal of relatives and friends to be separated from the smallpox victims. Before vaccination finally arrested its spread, it had claimed the lives of four to five hundred Choctaws.³²

²⁹ William Armstrong to Elbert Herring, September 20, 1833, quoted by Grant Foreman in *The Five Civilized Tribes*, p. 24.

³⁰ *Cherokee Phoenix*, May 17, 1834, quoted by Grant Foreman in *The Five Civilized Tribes*, p. 40.

³¹ William Armstrong to C. A. Harris, July 28, 1838, *Executive Documents*, 25th Congress, 3rd Session, Document I, Vol I (Washington, D. C.: United States Government Printing Office, 1839), p. 508.

³² *Ibid.*

To counteract the disrupting influence of alcohol, temperance societies were organized. The Reverend Cyrus Byington, a Presbyterian missionary at Eagletown, was a leader of the temperance society, and seven to eight hundred had signed a temperance pledge by August, 1842.³³ A continuing interest in temperance was evidenced by the number of temperance articles printed in the Nation's first two newspapers at Doaksville — the *Choctaw Telegraph* published in 1848-1849 and the *Choctaw Intelligencer*, published in 1850-1852.

The *Telegraph* and the *Intelligencer* also reflect an interest in science and medicine. Both newspapers were published in Doaksville by Choctaws and were of excellent quality. The ready print sections of these papers ran articles on science and medicine which contained the latest knowledge in those fields. Sample titles of articles in the *Telegraph* are: "The Lungs," "The Electricity of a Tear," "Organs of Voice," "The Solar System," and "Cause of Bad Teeth."³⁴

The papers ran notices of professional services such as this one which appeared in the *Telegraph* on May 3, 1849: "Doctor Walner having permanently located at Doaksville respectfully offers his services to the public generally. He will be found at his residence when not professionally engaged." Doctor J. M. Pirtle ran a similar advertisement in the *Intelligencer* on August 1, 1850. Drugs were also advertised from as far away as New Orleans by E. J. Coxe and Company, who had for sale such preparations as Coxe's Cholera Syrup and Pills, Coxe's Tonic Ague Syrup, Coxe's Nerve and Bone Liniment, and numerous other items. "A single trial is alone sufficient," claimed the Coxe firm.³⁵ Nearer home was Isiah W. Wells and Company of Pine Bluffs, Red River County, Texas, who had a "general assortment of drugs and medicines direct from Philadelphia, for sale, wholesale and retail."³⁶ At Doaksville, Berthelet and Jones, the "Post Office Store" had for sale "articles which should be kept in every family," including "Dr. Jayne's Expectorant, Vermifuge, Sanative Pills, and Ague Pills."³⁷

The papers also printed reports from the academies and

³³ John T. W. Lewis to William Armstrong, August 17, 1842, *Executive Documents*, 27th Congress, 3rd Session Document 2, Vol. I, p. 498.

³⁴ The *Telegraph* and the *Intelligencer* were printed both in English and Choctaw. —Newspaper Division, Oklahoma Historical Society.

³⁵ *Choctaw Intelligencer*, July 4, 1850.

³⁶ *Ibid.*, August 8, 1850.

³⁷ *Choctaw Telegraph*, May 17, 1849.

seminaries. The state of the health of the pupils and the epidemics experienced were included in these reports. The obituaries convey the sorrow which accompanied the deaths of the very young. During the decade of the forties, many promising young people in the Choctaw Nation were taken by pneumonia, whooping cough, measles, scarlet fever, cholera, and consumption (tuberculosis). Neither Indian doctors nor white physicians had effective drugs to combat these killers.

In spite of the tremendous difficulties, the Choctaws began to prosper. George W. Harkins living at Fort Towson, Indian Territory, in 1845 wrote Greenwood LeFlore who had remained in Mississippi: "The Choctaws are progressing and are certainly making great strides towards civilization. The Choctaw people if let alone by the United States government in the course of twenty years there will be found in this Nation as intelligent men and women as can be found."³⁸ But the Choctaw Nation was not destined to be left alone for the next twenty years. In the late 1840's Choctaws who had remained in Mississippi began to arrive. They were demoralized, disorderly, and brought with them whooping cough and cholera. In 1849, the Fort Coffee Academy and the New Hope Seminary were closed because of cholera.

In the autumn of 1852, epidemics again took their toll of the Choctaw young. At Fort Coffee Academy the boys had measles in their worst form and were only partially recovered when whooping cough, pneumonia, and the flux attacked. The Reverend John Harrell, superintendent of the academy reported: "The scene was truly appalling In vain did we resort to physicians and medical aid, all was unavailing"³⁹ Nearby New Hope Seminary was also infected and a number of deaths resulted. Measles struck again in 1858 and necessitated the closing of Armstrong Academy temporarily.

The tragedy of the Civil War invaded Indian Territory and the Choctaws allied with the Confederacy. Bogy Depot became a principal commissary depot for the Confederacy, and the Presbyterian Church of that village was utilized as a hospital for the wounded from the surrounding area, including those from the

³⁸ George W. Harkins, Fort Towson, Indian Territory, to Greenwood LeFlore in Mississippi, June 1845, quoted by Grant Foreman in *The Five Civilized Tribes*, p. 64.

³⁹ John Harrell, Superintendent of Fort Coffee Academy quoted by Grant Foreman in *The Five Civilized Tribes*, p. 80.

⁴⁰ Interview with Dr. Muriel H. Wright, November 13, 1969, Oklahoma Historical Society.

battle at Pea Ridge, Arkansas. Doctor Thomas J. Bond, the first Choctaw with accredited training as a medical doctor, became a surgeon in the Confederate army and cared for the wounded there.⁴⁰ The first hospitals in Indian Territory were those at the schools and the military hospitals. Doctor Bond maintained order and cleanliness both in the hospital and at Boggy Depot in spite of wartime confusion. With the influx of soldiers came another epidemic of smallpox. Doctor Bond remained at Boggy Depot for a time after the war, and later practiced medicine at Atoka.

After the Civil War, the Choctaws once again began to restore their damaged nation. Chief Allen Wright's inaugural address in 1866 expressed their dilemma: "This was the second time in our history that the bright future prospect for the Choctaws in the rapid march to civilization — progress of education and wide spread of religion among them have been impeded and paralyzed by direct and indirect acts of the Government of the United States."⁴¹

During the thirty years prior to the Civil War, there were a few white physicians in the Choctaw Nation, but no effort was made to check their credentials or license them. As a result, many quacks sought to take advantage of the Indians. The first reliable physicians came with the army or with the missionaries. The Reverend Alfred Wright was primarily a theologian, but learned medicine out of necessity. Doctor E. G. Meek was employed at the New Hope Seminary in 1845; Doctor R. S. Williams and the Reverend Doctor A. Biggs were at Fort Coffee Academy.⁴² Doctor Bond also became affiliated later with Choctaw education when he was appointed superintendent of the public schools of the Nation.⁴³

The Census of 1860 listed five white physicians living in the Choctaw Nation.⁴⁴ As time passed and the Indians saw the effectiveness of the white physicians they began to gain more confidence in them. The success of the physicians was often impeded by the Indian's frequent practice of submitting himself to the

⁴¹ Letters of Chiefs, Union Agency Files, quoted by Angie Debo, *op. cit.*, p. 39.

⁴² *Choctaw Telegraph*, October 25, 1849.

⁴³ Document Number 19879, Choctaw Schools, Indian Archives Division, Oklahoma Historical Society.

⁴⁴ Frances Wood, ed., *United States Census of 1860* (Arrow Printing Co., 1964), pp. 45-46. White physicians living in the Choctaw Nation were: Doctors G. W. West, William Stringfellow, James S. Davis, Thomas Fendall, and William Barnes.

ordeals of the medicine man while under the treatment of a physician. As the influence of the physicians increased, living and sanitation conditions improved.

In addition to the epidemic diseases, the Choctaws were afflicted with scrofula, a form of tuberculosis which enlarges the lymph glands.⁴⁵ "Sore eyes" — trachoma, a contagious inflammation of the eyelids — was very common. Frequent applications of cold water were used for relief.⁴⁶ Malaria (known as the ague), itch, diarrhea, dysentery and consumption were very common diseases in the Choctaw Nation. Chronic illness was probably responsible for the common belief of whites that Indians were inherently indolent.

One young Choctaw, William Hawkins (Harkins) became a part of a unique American phenomenon of the late nineteenth and early twentieth century, the "medicine show." During that time medical fadism was popular among white Americans and one of the most popular fads was Indian remedies. Pamphlets and articles were written about their value, and patent medicines proclaimed they were concocted from old Indian formulas. Hawkins (Harkins) decided to use his knowledge of Indian medicine to make money and joined a medicine show. Known as "Chief Spotted Wolf," he drove a carriage with six white horses in the parade and was dressed in a chief's costume with head dress and all of the trappings.⁴⁷

The most influential Choctaw physician was Doctor Eliphallet Nott Wright, son of Chief Allen Wright. He attended Albany Medical College and immediately after graduation in 1884 began an active, influential career. He was responsible for the passage of the first Choctaw legislation regulating the practice of medicine in the Choctaw Nation in October of 1884. The bill provided that the principal chief should appoint a board of physicians composed of three doctors, "to examine all persons, not citizens of this Nation, who have located or may locate hereafter, within the limits of said Nation for the purpose of practicing medicine."⁴⁸

⁴⁵ Henry C. Benson, *Life Among the Choctaw Indians and Sketches of the Southwest* (Cincinnati: L. Swormstedt and A. Poe, 1860), p. 51.

⁴⁶ Byington, *Diary*, p. 70. "Sore eyes" were mentioned by Byington numerous times in his diary and letters.

⁴⁷ "William Hawkins," *Indian-Pioneer Papers*, Vol. XXVIII, p. 291. (The name here should be spelled "Harkins." William Harkins was a member of a prominent Choctaw family of which George W. Harkins was a well-known leader. —Ed.)

⁴⁸ *General and Special Laws of the Choctaw Nation*, Bill Number 26, approved October 29, 1884, Indian Archives Division, Oklahoma Historical Society.

If the board found the applicant satisfactory, it would grant a certificate, the principal chief then authorized the judges of the county courts to grant a permit. The judge was prohibited from granting a permit without the authority of the principal chief. Any non-citizen attempting to practice without a permit would be considered an intruder in the Nation.⁴⁹

Doctor Wright and other practicing physicians in the Choctaw Nation were active in the Indian Territory Medical Association, founded in 1881. The association stated its objectives as being "the cultivation of fraternal relations, and the securing to ourselves and the public, the advantages of professional association in an organized capacity."⁵⁰

Medicine in the Choctaw Nation was composed of a wide diversity of practices, and remained so, well into the twentieth century. There existed side by side, the *alikchi* and the college-trained physician. Each to some extent influenced the other. The pragmatic Choctaws tended to blend the valuable of the old with the best of the new. Doctor Wright in his early practice used a traditional deer potato remedy for dysentery control because it was effective and his medical training had presented nothing better.⁵¹

Choctaw attempts to blend their culture with that of the white man's, using what was to them the best of both, is but another example of the subjection of a so-called "primitive civilization" by an "advanced civilization." The history of Choctaw medicine is perhaps only a small portion of the greater conflict between Choctaw and Caucasian. Considering the problems resulting from the white man's attempts to subject nature to his own desire, it might be well for him to look anew at what the Indian had to offer in the way of native medicines, medical practices and adaptations to his environment.

⁴⁹ *Ibid.*

⁵⁰ Minutes of the Indian Territory Medical Association, July 28, 1889, Library, School of Medicine, University of Oklahoma, Oklahoma City.

⁵¹ Interview with Dr. Muriel H. Wright, November 13, 1969, Oklahoma Historical Society.