Medical Training - Learning the Healing Arts
Early Education for Physicians

In the 1700s and early 1800s, an aspiring physician in America took advantage of whatever formal education and training was available to him - local academies, institutes, colleges, and apprenticeships.

A man of means could travel within America or to Europe or England to study at an established medical school. Others entered apprenticeships with practicing physicians. A doctor's apprentice learned by reading popular medical texts of the day and observing the doctor at work. He gained “hand-on” skills and experience by assisting the doctor with diagnosing and treating cases. In time, the newly trained physician established his own practice, or continued to practice with his mentor.

Healers and Home Remedies

Trained physicians were scarce in the American colonies. Home health care was the only option available for many people. Some healers had little or no formal training. They learned traditional herbal remedies and treatments from other healers and family members.

Just as in other areas of colonial America, those who settled in the Carolina Piedmont relied heavily on domestic treatment of diseases and injuries. Ancient practices, dooryard remedies, kitchen cures, and superstition blended with current medical theory in the Backcountry. Treatments for common ailments were handed down as family heirlooms, and usually involved medicinal herbs and plants.

Housewives and plantation mistresses learned cures from older family members and acquired new knowledge by talking with neighbors and travelers, and reading newspapers, almanacs and domestic medical guides.

Settlers of Native American, African, English, Scotch-Irish, and German descent had different healing traditions, all of which were likely shared and mixed after several generations in America. Healers were constantly challenged to find new remedies as new infections and epidemics struck among Indians, settlers and slaves alike.

Medical Colleges

The first medical college in America was founded at the University of Pennsylvania in 1765. Others followed in New York and Maryland, making medical education more easily available to American students.

Medical College of the State of South Carolina, Charleston, SC 1906

Medical training for these early students consisted of 26 hours of class work a week for four months each year for two years. Apprenticing with a physician between terms was considered an important part of a young doctor’s training. By the 1820s demand increased for a southern school of medicine, and in 1824, the Medical College of South Carolina was established in Charleston. The school was successful, and had
129 students in 1827. Other southern medical colleges followed quickly. The University of Virginia opened one in 1832, followed by others in New Orleans, Louisiana in 1835 and Richmond, Virginia in 1838.

The Medical College of South Carolina was chartered by the state, was financed by its faculty, and was under the control of the Medical Society. The faculty came to resent limitations placed on them by the Medical Society, and in 1832 they resigned and established another school. Called the Medical College of the State of South Carolina, the new school opened its doors in Charleston with 105 students. The older school could not compete and closed in 1838.

States - Rights Medicine

The establishment of Southern medical training schools was one result of a growing train of thought among doctors sometimes called “States - Rights Medicine.”

Physicians felt that northern practitioners had no experience with or understanding of the particular illnesses of the South, and that a patient accustomed to the southern climate, whether Caucasian or African American, needed to be treated differently than a patient in the North.

For decades, southerners who wished to become doctors traveled to Pennsylvania, New York, or Europe for their training; now they felt that a school that would focus directly on southern distinctiveness was in order. A North Carolina physician who had trained at the University of Pennsylvania sent his son to the same school for medical training. He acknowledged regional distinctiveness in a letter to his son: “We know better, here, how to manage Carolina constitutions than the Physicians of Pennsylvania.” Just as America was beginning to recognize differences in many aspects of life and government in the South, it was becoming acknowledged publicly in the world of medicine.