BY: JAMES B. ETHEREDGE

A century and more ago there was a breed of hardy, courageous doctors who braved the elements on horseback to deliver medical services to rural America. Compared to present-day medical science they were short on knowledge and skills but they were long on dedication and compassion. This article provides a glimpse of how one rural doctor in northwest Alabama served his patients for 29 years around the turn of the century at a place and time when there were no telephones, no hospital, drug stores, x-rays, laboratories, few diagnostic tools and a limited assortment of drugs.

The doctor was my grandfather, Dr. Benjamin Thomas ETHEREDGE.

The place was Lawrence County, Alabama - about 30 miles east of the Mississippi line and 30 miles south of the Tennessee line. The Tennessee river forms its northern boundary. The northern part of the county is valley - the southern part mountainous. In 1900 it had about 4,000 inhabitants living in towns and villages and about 16,000 scattered throughout its 768 square miles - a population density of 4 or 5 families per square mile.

My grandfather was born in 1859 near Wolf Springs - a little crossroads village in the mountainous part of the county. His father had been orphaned at an early age and was largely raised by his uncle, Dr. Byron Masterson.

My grandfather received his Doctor of Medicine degree in 1886 from the Memphis Hospital Medical College - the first and only one of my ancestors to receive a college degree. Eight years earlier Memphis had been hit by a catastrophic

yellow fever epidemic. Within 2 months of the 1878 summer, its population fell from 45,000 to 15,000 - 25,000 of whom left the city permanently. Of the 20,000 who stayed, 5,000 died including half of its doctors.

The medical course was a 2-year one - 6 months a year. The only educational requirement to enter medical college was completion of grammar school. In fact, attendance at a medical school was not a requirement to practice medicine - many entered practice after serving a year or two apprenticeship under another doctor. There was no state license requirement - anybody who wanted to practice medicine could do so.

Dr. ETHEREDGE returned to Wolf Springs and started his medical practice the same year - 1886. Patients came slowly. Families were scattered, there were few roads, incomes were low, doctors were expensive. Except in emergencies, families used home remedies and patent medicines to treat a sick member. Only when these remedies failed to produce improvement was a doctor summoned. When he visited a home, he not only ministered to the sick one but to all members of the family - husband, wife, children, grandparents - and sometimes to farm animals as well. This was truly a family practice.

Dorothy Gentry, in her book LIFE AND LEGEND OF LAWRENCE CO. discusses health problems and the country doctor in that era:

Sickness was one of the real dreads of the pioneers. Bummer complaint took the toll of babies in their second summer. Many mothers died following childbirth. Frequently an entire family would be stricken with a contagious disease: measles, scarlet fever, smallpox, typhoid fever or diphtheria. Tuberculosis was called lung

fever or consumption but those words were only whispered.

Doctors had little rest especially during epidemics. They filled their saddle bags with medicines - there were few drug stores - and rode horses. Later the horse and buggies came, but the roads were in such condition at times buggies would clog down. Babies were delivered in the home and necessary drugs were furnished by the physician.

Many doctors didn't keep charge books but they were paid in many ways - in love and friendships. Farmers sometimes paid off with watermelons, tomatoes, fresh vegetables, molasses, potatoes and anything that grew in that fertile valley.

Back in the days of the saddle-bag doctor many interesting incidents occurred and many stories have been told of the hardships of practicing medicine making calls on horseback. Many times they would go to sleep on their return home, depending on their trusted horse for a safe journey - often during the winter months they would return with frozen feet. Those were the days before flashlights, and even a lantern wouldn t stay lit.

The first car with carbide lights came to Moulton (the county seat) in 1910 but it was some time before the 4-

wheeled vehicles replaced the country doctor s horse. It was quite a chore to get the early cars to run and when they did get started, the roads were too bad to get very far.

In May 1897 - 11 years after he started practice, Dr. ETHEREDGE moved his home and practice about 8 miles north to Town Creek - a larger community and one that showed greater potential for growth. It was located on the main railroad line that ran from Chattanooga to Memphis and was only 3 miles or so from the Tennessee river. Town Creek has had 3 days of great excitement in its history - the first in the 1860s when northern and southern troops clashed nearby - the second in the 1930s when President Franklin D. Roosevelt came to inspect the construction progress of the Joe Wheeler dam nearby - and the third in the 1950s when the entire business section burned (and has never been rebuilt).

Dr. ETHEREDGE practiced in Town Creek for 18 years before his death in 1915.

In 1906, a man named DuBose wrote a book titled NOTABLE MEN OF ALABAMA in 2 volumes and included an article on Dr. ETHEREDGE in Vol. 2 p. 364. Here s an excerpt from that article:

At both places (Wolf Springs and Town Creek) he was one of the successful physicians of his locality. He has gone weeks at a time with only 4 hours of sleep out of each 24 and has almost lived in the saddle during the time.

During the smallpox epidemic of 1901 he was the only physician, nurse, or carrier of supplies. In November of that year he had 181 cases and not a single death was

recorded among them.

He is a member of the State Medical Association and of the Lawrence County Medical Society. In 1900 he was the Lawrence county delegate to the meeting of the State Medical Association at Montgomery.

I have become the possessor of the saddle bag which he purchased in 1890 according to a label pasted onto it. It s actually 2 bags connected by a leather strap which was placed across the horse s shoulder and in it he carried the drugs for his patients. When he dismounted and removed the bags, the 2 bags connect together and were carried as one. About 20 of its 1915 containers are still in it but only 7 labels are legible: heart, mercury and chalk, croton oil, belladonna leaves, methyl blue, blue mass, and quinine. While the contents of the remaining containers are not known, it is clear that he carried a fairly wide selection of drugs.

In addition, I have 2 of his ledgers - for 1912 and 1915. The entries on these pages provide a pretty good idea of the extent and nature of his practice. Here are entered the names of his clients, services rendered, drugs furnished and prices charged. The client was the person who was expected to pay the bill - not the patient. One client was a large landowner who paid for the medical care for 25 tenants who were probably sharecroppers.

The service rendered is, in most cases, stated in general terms - such as visit or surgery. His fee for a visit varied from \$1 to \$5. His letterhead shows that his office hours were 7 to 8 a.m. and 12 to 2 p.m. Most office visits were \$1 - home visits were \$2 to \$5 according to distance or time consumed and whether a day or night visit. There is no evidence that he charged affluent clients more than poor ones.

His charge for surgery ranged from \$1 to \$5 and was largely confined to suturing wounds, removing growths and setting broken bones. Dressings and bandages were charged at 50 cents to \$1. On Mar. 20, 1915, he performed surgery on a man who had shot himself in the hand. The charge for surgery was \$5 - then on each of the following 5 days there was a charge of \$1 for changing his dressing and bandages. Medicines were charged at 25 cents to \$1.

Childbirth was one medical service that was always spelled out - probably as a reminder that he had to send a birth report to the state capital - a legal requirement that dated from about 1905. However, the service was not entered in his ledger as childbirth - it was entered as accouchment - the French word for childbirth. Why, I don t know.

His standard charge for accouchment was \$10. Pre-natal and post-natal visits were rare. Use of midwives was common in the rural areas and in many cases the doctor called in for the actual birth.

One entry is of particular interest to me. On page 153 of his 1912 ledger the client listed is J. B. ETHEREDGE, my father. The medical service was accouchment rendered on April 13. The charge was the usual; \$10 and there s a notation BOY. That happens to be me - a very unexciting entry for such a momentous event. My birth received scant public attention which I have long attributed to the catastrophe that happened the day after (on Apr. 14) - the great ship TITANIC sank in the North Atlantic with a loss of 1,517 lives. The publicity of that tragedy pushed events of lesser importance from the newspapers.

After my grandfather s death in 1915, all unpaid accounts from prior years were transferred to the 1915 ledger. Included is an account for J. B. ETHEREDGE unpaid from 1912 - and there is no notation that it was ever paid. So I can claim

that I was born free. I don t expect to exit this world as cheaply as I entered it.

In defense of my father, I m quite sure that he never knew that there was an unpaid charge against him. He ran the drug store that his father had established around 1908 and it is likely that he was never sent a statement.

From his 1912 ledger, you can get an idea of his income. His gross receipts for 1912 were \$5,419 - about half of which (or \$2,700) was for medicines, bandages, etc. If we estimate his cost for these items at half his charges (\$1,350) we get an adjusted gross income of about \$4,000. From that, he had to pay for maintaining his office, for a telephone, for purchasing and maintaining his horses and buggies, medical society expenses, publications, etc. So it appears that his net income was in the neighborhood of \$3,000.

Most of his receipts were in the form of cash, checks and notes. But sprinkled throughout his ledgers are instances of payment in material items such as: corn \$10, cow \$10, berries \$1.75, quilt \$3, wood \$3, hay \$2 and \$10, lumber \$3.50 and \$6.67, and, in one case 40 acres of land for \$50 (the government sold some land in Lawrence County for as little as 12-1/2 cents per acre), At the end of 1912, \$2,335 of services rendered and medicines sold that year remained unpaid.

If \$3,000 net income for the year appears small, it should be noted that gold sold for \$20 per ounce in 1912 compared to approximately \$420 today. So a rough comparison with today s purchasing power might be a 21 multiple - that is, \$3,000 might be roughly equivalent to \$63,000 today with no income taxes. At any rate, DuBose inserted the following statement relating to his financial status:

He owns 3 large plantations, which receive part of his time and attention, and is one of the well-to-do men of Lawrence county.

At the time of his death in 1915, the saddle-bag doctor was already disappearing. The buggy was in general use, roads were being improved, the automobile was being mass produced. Within 2 decades, it became the dominant means of transportation and hospitals were more easily available. Home calls by doctors were declining.

Town Creek has changed too. Its population has increased from about 500 (1915) to 1,200 (1970). The cotton gin is still there but it has become automated. Cotton is now picked by machine, trucked to the gin, and cotton bales hauled away by truck. The railroad station is closed, the streets are paved, the 5-mile per hour speed limit (noted in 1926) has been increased. Cheap electricity generated by the Tennessee Valley Authority has electrified the town. Residents commute to their jobs in towns and cities 20 miles and more away. The lake backed up by the Joe Wheeler dam a hundred miles or so provides extensive recreation opportunities.

Town Creek no longer has a resident doctor but paved highways and high speed cars have made the general practitioner and medical specialists in nearby cities easily available. Treatment of serious illnesses and major surgery in hospitals have become commonplace.

The need for doctors on horseback - once so vital to the rural patient - has passed into history.

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