

A GLIMPSE OF OUR PAST

The Poor, the Black, and the Marginalized as the Source of Cadavers in United States Anatomical Education

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When the practice of hands-on anatomical dissection became popular in United States medical education in the late 18th and early 19th centuries, demand for cadavers exceeded the supply. Slave bodies and thefts by grave robbers met this demand. Members of the public were aware that graves were being robbed and countered with various protective measures. Since the deterrence of grave robbing took time and money, those elements of society who were least economically and socially advantaged were the most vulnerable. Enslaved and free African Americans, immigrants, and the poor were frequently the target of grave robbing. The politically powerful tolerated this behavior except when it affected their own burial sites. Slave owners sold the bodies of their deceased chattel to medical schools for anatomic dissection. Stories of the “night doctors” buying and stealing bodies became part of African American folklore traditions. The physical and documentary evidence demonstrates the disproportionate use of the bodies of the poor, the Black, and the marginalized in furthering the medical education of white elites. Clin. Anat. 20:489–495, 2007. © 2007 Wiley-Liss, Inc.

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INTRODUCTION

When schools for anatomical instruction were established in England, Scotland, and the American colonies in the 18th century, it became customary to use the bodies of criminals for dissections. Dissection for murderers was mandated in England in 1752 as an alternative to postmortem gibbeting. From the 16th century until the passage of the Anatomy Act by Parliament in 1832, the only cadavers legally available for dissection were those of executed murderers (Turner, 1932; Richardson, 1987; Persuad, 1997). As the number of English private schools of anatomy grew in the 18th and 19th centuries, the number of available cadavers remained roughly the same, creating a chronic shortage of anatomic material (Ball, 1928). Many people believed that there would be, eventually, a literal corporal rising from the grave. Dissection was perceived to be a desecration of the corpse which would impede resurrection and denied the survival of identity after death (Richardson, 1987). To be double-sentenced (i.e., to be hung and then dissected) was viewed as a sentence worse than execution alone. As the historian Richardson has written, “Dissection

represented a gross assault upon the integrity and identity of the body and upon the response of the soul, each of which—in other circumstances—would have been carefully fostered” (Richardson, 1987). Threatening someone with anatomical dissection served as a means for a ruling class to exert social control over the weak, the marginalized, and criminals.

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GRAVE ROBBING

The European practice of hands-on anatomical dissection became popular in United States medical education in the late 18th and first half of the 19th centuries. Felons condemned to death were an inadequate source and a new means of procurement was required (Ball, 1928; Shultz, 1992; Persuad, 1997). Dissection, however, was frowned upon in the new republic as immoral and irreligious and was impeded by state laws prohibiting it (Blake, 1955; Breden, 1975). There were suggestions that unclaimed bodies, those who committed suicide, those killed in duels, horse thieves, all those who died in prison, or individuals paid a lump sum during their lifetime would be an appropriate source of cadavers (Persuad, 1997). Grave robbers, also called "body snatchers," "sack-um-up men," or "night doctors" by the public and "resurrectionists" by anatomy professors, ultimately helped meet the demand. The sack-um-up men scouted cemeteries for fresh corpses and then robbed them at night (MacGregor, 1884; Baker, 1916; Allen, 1976).

If soil conditions were good and the grave shallow, the thief and his accomplices could exhumate the body in less than an hour. Typically, a hole was dug at the head of the grave, the coffin lid was pried off, and the body was lifted out. Clothing and other personal effects were usually removed from the body and tossed back into the coffin (New York Times, 1878; Persuad, 1997). The corpses were then taken by wagon for sale to the anatomy professors. For the most part, professors refused corpses that were too far decomposed. Ten days was the average limit between burial and theft. Most bodies were robbed between November and March when medical school was in session and the corpses were better preserved by the cold (Jenkins, 1913; Ball, 1928; Roach, 2003).

In England and Scotland, some resurrectionists resorted to even murder to augment the supply of cadavers (Guttmacher, 1935, 1955; Allen, 1976; Shultz 1992). The only clearly documented case of murder for the purpose of dissection in the United States occurred in 1886. Emily Brown, the daughter of an innkeeper on the Maryland shore, moved to Baltimore and was seen going about the streets under the influence of drugs and liquor. She began to reside in one of the "squalid alleys of the eastern part of the city." A porter from the dissecting room at the University of Maryland School of Medicine strangled Brown, took her body to the university, and was paid \$15.00 for it. The perpetrator was eventually identified, tried, convicted, and hung (Guttmacher, 1935, 1955).

When the English Parliament investigated the problem of grave robbing, some law makers came to the conclusion that "giving up for dissection a certain portion of the whole" of the population was the only way to foster medical education and "preserve the remainder from disturbance" (Bazelon, 2002). As often happens, however, that portion of the population that was given up for dissections was the disenfranchised: the poor, the imprisoned, and in the case of the United States, African Americans. By the late 19th century some states passed laws requiring officials at every alms house, prison, morgue, hospital, and public institution to provide corpses to medical schools if the corpses would otherwise be buried at public expense. The only exceptions were for bodies claimed by next of kin or those of travelers who died suddenly. We find the echoes of such laws in modern legislation which allows unclaimed corpses from

city morgues to be transferred to medical schools for anatomical dissection (Bazelon, 2002).

The American public was, of course, aware that graves were being robbed. In New York City, in the late 18th century, African American bodies were the primary source of anatomical material (Ladenheim, 1950). One New Yorker wrote that, besides executed criminals, "the only subjects procured for dissection are the productions of Africa ... and if those characters are the only subjects of dissection, surely no person can object" (Victor, 1940; Gallagher, 1967). When "the corpses of some respectable persons were removed," the doctors had clearly gone too far (Victor, 1940). In February 1788 it was reported that a white body had been stolen from the grave yard of New York's Trinity Church. Accusations were leveled at the anatomists of Columbia College. A mob sacked New York Hospital on April 13, 1788. Medical students were seized and roughed up and the mob took four students captive until the sheriff rescued them. The next day the mob returned, searching the city for physicians, medical students, and cadavers. Three to four hundred men marched down Broadway towards the city jail intent on capturing the medical students who have been placed there for safe keeping by the sheriff. Governor George Clinton, Supreme Court Justice John Jay, Baron von Steuben, and other prominent citizens urged the crowd to disperse (Victor, 1940; Blake, 1955; Breden, 1975; Roach, 2003). The mob, however, increased to about 5,000 and surged towards the jail. Governor Clinton ordered out the Militia. The crowd responded with a hail of bricks and stone. The Militia opened fire and charged with bayonets. Three rioters were killed, six were wounded, and three Militia men died. Clinton called up additional Militia from surrounding counties who marched through the streets the next day to quell the disturbance. In response to the riot, the New York State legislature passed an act "to prevent the odious practice of digging up and removing for the purpose of dissection, dead bodies interred at cemeteries or burial places." The law empowered judges to sentence dissection to those hanging for murder, arson, or burglary. Body snatching was outlawed (Blake, 1955).

In December 1882 a reporter from the *Philadelphia Press*, acting on a tip, caught grave robbers at work at the Lebanon Cemetery, the burial ground for Philadelphia's African Americans. Two white men, Frank McNamee and Henry Pillet, were sitting on the front seat of a wagon. An African American, Levi Chew, rode in the back on an oil cloth that covered a load of bodies. The robbers claimed that they were hauling bodies to Jefferson Medical College where they were paid for their services by Dr. William Forbes, Chief Anatomist.

A crowd of angry Philadelphia African Americans gathered at the city morgue and demanded protection of their grave sites from the city (Ball, 1928; Montgomery, 1966; Persuad, 1997). When the snow melted in the spring of 1883, the cemeteries looked as if "they had been subjected to an aerial bombardment" (Allen, 1976). The cemetery's black superintendent admitted that for many years he had let the three grave robbers steal as many corpses as they could for sale for anatomical dissection. Philadelphia's Mayor, Samuel George King, claimed that he didn't have sufficient police to guard the cemetery.

McNamee, Pillet, Levi Chew and his brother Robert were convicted of grave robbing. Dr. Forbes was arrested. At his

trial he denied the accusations by claiming that he had paid McNamee to haul bodies to the college but never asked where the corpses came from. Multiple witnesses testified to the doctor's exemplary character and he was acquitted. Philadelphia society seemed prepared to have the bodies of African Americans stolen and to bring the grave robbers to justice, but a faculty member at a reputable white medical school would not suffer punishment (Montgomery, 1966; Humphrey, 1973; Bazelon, 2002).

A variety of measures were employed by the public to protect graves (Turner, 1932). Iron cages, called mort-safes, were constructed over some new graves. The iron bars typically reached into the ground and attached to the coffin. Iron coffins were advertised extensively as being particularly safe against grave robbing. Some cemetery supervisors resorted to heavy stone vaults with iron doors to store corpses temporarily until they reached an advanced state of decay, making them safe from grave robbers. The most common, and least expensive, measure was a guard to watch over the grave for the first few nights after burial. Often family members took turns standing guard. Guards could, however, be bribed with money or whiskey. Since deterrence of grave robbing took time and money, the poor were disadvantaged and their graves were the most vulnerable (Blakely, 1997; Sappol, 2002).

The debate over grave robbing worked its way into popular literature. An American edition of Charles Dickens' *Tale of Two Cities* was published in *Harper's Weekly* in 1859. It contained a story of Jerry Cruncher, a grave robber by night and a messenger for a bank by day (Dickens, 2000). In Mark Twain's *Adventures of Tom Sawyer*, published in 1876, Sawyer and Huckleberry Finn sneak off to a graveyard at midnight to cure a wart by reciting an incantation over a dead cat. They witness a grave robbing of the body of "old Hoss Williams" by Injun Joe and Muff Potter on behalf of the "Sawbones," the "young Dr. Robinson." In a dispute over the price to be paid for the theft, Injun Joe kills the young doctor and frames Muff Potter—driving the plot of Twain's classic novel to its dramatic court room conclusion where Tom reveals that he witnessed the whole affair (Twain, 1959).

THE PASSAGE OF US ANATOMY LAWS

In response to public outrage at the theft of the bodies of whites and the plea of medical school faculties, US state legislatures in the 18th and 19th centuries passed anatomical acts permitting the use of unclaimed bodies for dissection. Anti-anatomy rioters attacked the medical department of the College of Philadelphia (now the University of Pennsylvania) in the second half of the 18th century and the Yale Medical Department in 1824 (Ball, 1928; Persuad, 1997). Several Yale medical students were nearly lynched. Following the riots, Connecticut authorized the delivery of unclaimed bodies of convicts dying at Newgate Prison to Yale while requiring the Professor of Anatomy to post a bond of \$1,000.00 that no other cadavers would be dissected. The medical school building at the University of Maryland in Baltimore, still in use today, was designed with maze-like corridors to thwart potential mobs trying to break into the anatomy laboratory. In 1796 the General Assembly of New Hampshire, reacting to a proposal that Dartmouth College would open a medical school, provided a fine not to exceed \$1,000.00, imprisonment not to exceed one year,

and public whipping not to exceed 39 blows, for grave robbing (Waite, 1945). The Indiana and Ohio anatomy laws of 1879 stemmed from the two episodes. One was the discovery of the body of United States Congressman John Scott Harrison, son of President William Henry Harrison, in the Ohio Medical College (Edwards, 1957). The second occurred when, in the same year, a "well-known citizen of Cleveland" was buried on Monday and his body turned up in a pickle tank at the Cleveland Homeopathic Medical College on Tuesday (New York Times, 1878; Humphrey, 1973). Americans, it seemed, did not strenuously object to the dissection of the poor, African Americans, or immigrants. The "prudent line" was "stealing only the bodies of the poor" asserted a late 19th century anatomist (Dwight, 1896). Dissection of prominent white citizens was another matter entirely and provoked a public response (Bernstein, 1990).

State laws were passed in the 19th century allowing medical schools to use the remains of the downtrodden of society—the unclaimed bodies of paupers, residents of almshouses, and those buried in potter's fields (Humphrey, 1973; Richardson, 1987). Mississippi and North Carolina exempted the bodies of Confederate soldiers and their wives. The North Carolina law also provided that the body of whites never be sent to an African American medical college (Allen, 1976). These African American Medical schools typically obtained unclaimed Black "potter's field bodies" (Moore, 2005).

Enactment of anatomy laws was only one part of the issue. Their enforcement was quite a different matter. Relatively few grave robbers, and only a hand full of surgeons and anatomists, were ever punished for their crimes. In England "government and Georgian high society turned a blind eye to the buoyant market in bodies; those in power knew that the Army and Navy were desperately short of skilled surgeons, they appreciated the need for anatomists to practice their art, and in any case the desecrated graves were rarely those of their relatives" (Weld, 1968). A detailed review of court records in Vermont shows only seven indictments and two convictions for grave robbing between 1820 and 1840 (Waite, 1945).

USING OF THE BODIES OF ENSLAVED AND EMANCIPATED AFRICAN AMERICANS

Southern medical schools frequently used slave bodies for anatomic dissection. An 1831 advertisement in the *Charleston Mercury* from the South Carolina Medical College touted the benefits of the school.

Some advantages of a peculiar character are connected with this institution, which it may be proper to point out. No place in the United States offers as great opportunities for the acquisition of anatomical knowledge. Subjects being obtained from the coloured population in sufficient numbers for every purpose, and proper dissection carried out without offending any individuals in the community (Weld, 1968)!

Another newspaper advertisement gave notice of the establishment of a special clinic in Charleston for the treatment of African Americans.

Surgery at the Medical College of South Carolina ... The faculty inform their professional brethren, and the public that they have established a surgery, at the old college, Queen Street, for

the treatment of Negro's, which will continue in operation during the session of the college, say from first November, to the 15th of March ensuing.

The object in opening the surgery, is to collect as many interesting cases, as possible, for the benefit of instruction of their pupils—at the same time they indulge the hope, that it may not only prove an accommodation, but also a matter of economy to the public. They would respectfully recall the attention of planters living in the vicinity of the city to the subject; particularly such as may have servants laboring under surgical diseases. Such persons of color may not be able to pay for medical advice, will be attended to gratis, at stated hours, as often as may be necessary.

The faculty will take this opportunity of soliciting the co-operation of such to their professional brethren as are favorable to their objects (Weld, 1968).

A particularly blunt advertisement from Dr. T. Stillman was directed at slave owners.

To planters and others—wanted 50 Negroes. Any person having sick Negroes, considered incurable by their respective physicians, and wishing to dispose of them, Dr. S. will pay cash for Negroes affected with scrofula, or King's evil, confirmed hypochondriasm, apoplexy, diseases of the liver, kidneys, spleen, stomach, and intestines, bladder and its appendages, diarrhea, dysentery, etc. The highest cash price will be paid on application as above (Weld, 1968).

The English travel writer, Harriet Martineau, succinctly summed up the reason why African Americans served as the primary source of cadavers in medical education. After an 1835 visit she observed that "in Baltimore the bodies of coloured people exclusively are taken for dissection because the whites do not like it, and the coloured people cannot resist" (Martineau, 1838).

THE BONES IN THE BASEMENT OF THE MEDICAL COLLEGE OF GEORGIA

Founded in 1822, the Medical College of Georgia (MCG) in Augusta moved to a Greek revivalist-style building in 1835 which served as MCG's only teaching facility until 1913 (URL: <http://www/mcg.edu/history/index.asp>). Because anatomical dissection was illegal in Georgia until 1887, it was carried out surreptitiously in the building (Blakely, 1997). By 1839 MCG was purchasing cadavers from New York City. They were shipped in casks of brine or whiskey by coastal steamer. From 1848 to 1852 several slaves were used as resurrectionists (Allen, 1976).

In 1852 a slave, Grandison Harris, was purchased by the Dean of MCG for \$700.00. Owned by all seven members of the faculty, his principal task was to procure cadavers. Harris was as a powerful man and appears to have frequently obtained bodies from the Cedar Grove Cemetery, a burial site reserved for Augusta's indigent Black community. He seems to have had ready access to liquor because corpses were preserved in large vats of whiskey until dissected. Harris was also granted rare privileges. He made frequent train trips to Charleston to visit his wife and son. In 1858 MCG purchased his family to save the expense of so many round trip train fares (Sharpe, 1997). Harris became a teaching assistant as his knowledge of anatomy and dissection improved. When the college purchased cadavers, he acted as an intermediary in transactions. Photographs of



Fig. 1. Gradison Harris, in the last row on the right, with the Medical College of Georgia class of 1880 (photograph courtesy of the Medical College of Georgia Archives).

the graduating classes frequently portray Harris standing with the students (Fig. 1).

After the Civil War and Emancipation, Harris moved to South Carolina where he was appointed a judge. When Reconstruction ended, he returned to MCG and became a full-time employee. Even after dissection was made legal in Georgia in 1887, the supply of cadavers appeared inadequate and the faculty of the MCG agreed to resume obtaining bodies "in the usual way." Harris retired in 1905 and was granted a pension. He died in 1911 (Allen, 1976; Sharpe, 1997). Harris made his way in a white-dominated world of medical education by aiding and abetting the theft of African American bodies.

In 1989 construction workers began renovating MCG's 1835 building. During work in the basement, human bones were discovered in the earth floor. Alarmed workers notified the county coroner's office which, in turn, called the State Crime Laboratory. After determining that the remains were not of recent origin, the State Crime Laboratory contacted Dr. Robert Blakely who wrote that, "at the time, I was teaching a course in forensic anthropology at Georgia State University in Atlanta, and sensing an opportunity to provide students with hands-on experience; I mobilized the class to carry out salvage archaeology in the basement" (Blakely,

1997). The subsequent excavation resulted in the removal of ~9,000 human bones and bone fragments. Most of the remains appeared to have been tossed on the earthen floor, covered with a layer of dirt, and then sprinkled with lime to reduce the smell. A number of the bones exhibited pathological conditions and many showed signs of post mortem amputation and dissection (Blakely, 1997). Some of the bones appeared to have been autopsied and a few had specimen numbers written on them in India ink.

Many of the MCG bones had ossifications, ankylosis, or osteophytosis indicative of chronic trauma, not surprising for a laboring class (Blakely, 1997; Harrington, 1997). Records for Savannah, a city close to Augusta, from 1843 to 1869 provide us with data on the causes of death among the black population (Lee and Lee, 1977). Drownings, gunshot wounds, and burns were frequent. The high rate of accidents are consistent with the high rate of bone trauma seen in the MCG excavations (Blakely, 1997; Harrington, 1997). Osteoporosis was also extremely common. Osteomyelitis, tuberculosis, and an occasional healed fracture were seen less frequently (Harrington, 1997). Bone mineral analysis indicated a diet of meat, cereal grains, green vegetables, and fish and shell fish—not surprising because of Augusta's proximity to the Savannah River and Atlantic Ocean (Steckel, 1986; Dillingham, 1997).

Also excavated were 2,000 ceramic jugs, scalpels, pipettes, syringes, test tubes, thermometers, some microscope slides wrapped in a 19th century newspaper, coins, buttons, fabric, belt buckles, leather shoes, remnants of a small furnace, some charcoal, and glass bottles used both for medicinal and domestic purposes. Some bottles contained residua of their original contents and one held whiskey preserving human fetal lung tissue. The archeologists also found ~300 animal bones including a cockspur from a fighting cock and bones from cows, pigs, rats, turtles, dogs, and cats. The archeologists also noted that "traces of peanut shells were scattered everywhere" (Blakely, 1997; Harrington, 1997).

Utilizing data from intact bones, criteria could be invoked from physical anthropology studies to determine the race, sex, and age category at the time of death. Approximately 80% of the skeletal material was from African Americans and 20% from European-Americans. Data on race from the census enumerations in Augusta from 1840 and 1880 showed that ~58% of the population was European-American and ~42% African American (Blakely, 1997; Harrington, 1997).

WHY WERE THE BODIES FOR GROSS ANATOMY DISPROPORTIONALLY FROM THE POOR, THE BLACK, AND THE MARGINALIZED?

Body snatching and purchasing was an opportunistic business. Low risk for the body snatcher or buyer meant obtaining the bodies of persons with few spokespersons to represent them and few rights to protect them (Blakely and Harrington, 1997). For example, the September 26, 1676 diary entry of Judge Samuel Sewall of Boston reads "Spent the day from nine in the M. with [six men] dissecting the middle-most of Indians executed the day before" (Ball, 1928). In 1840 a Texas court fined a Dr. Weideman for publicly defleshing two Native American bodies, obtained as a result of a settler/Native American War, for use as skeletons

(Shultz, 1992). A medical student from the University of Michigan stole the bodies of members of the James-Younger gang, killed in a bank robbery, and shipped them off to Ann Arbor in kegs labeled "fresh paint" (Holtz, 1967). Enterprising Winchester (Virginia) Medical College students gathered up bodies for dissection from John Brown's unsuccessful raid at Harper's Ferry in 1859 (Shultz, 1992). The more commonly used sources were hospitals, funeral homes, the docks, city streets, slave owners, and cemeteries set aside for people of color or the destitute (Kiple and Kiple, 1977; Kaufman and Savitt, 1979). Slave owners "donated" or sold the bodies of deceased slaves to medical schools (Savitt, 1977, 1978). The slave was viewed as property and the owner was at liberty to dispose this property without the consent of the family (Allen, 1971; Savitt, 1978, 1984; Bankole, 1998). Southern slave cadavers were also shipped up north in barrels of whiskey to supply northern medical schools (New York Times, 1878, 1879; Waite, 1945). African Americans played a particularly important role in anatomic education because of their social status as chattel (Whitten, 1977; Boney, 1984).

Anatomic dissection was illegal in Virginia until 1884. Most dissections were performed on Blacks, although the poor of both races were likely subjects. Virginia grave robbers disinterred bodies from pauper and African American cemeteries (Savitt, 1978; Kaufman and Savitt, 1979). Authorities usually ignored these illegal activities unless an irate white citizen filed a complaint. Cadavers were not always readily procurable in small towns such as Charlottesville, seat of the University of Virginia. As early as 1832 the medical department there was dealing in bodies with "certain low and bad men" in Richmond. These grave robbers exhumed bodies from the Poor House Cemetery, reserved for Blacks and indigent whites, and delivered them to the University's Richmond agent. The University continued procuring cadavers in Richmond and elsewhere at least until the Civil War (Savitt, 1978). Anatomy Professor John Stige Davis of the University of Virginia used former students and professional acquaintances as agents to hire resurrectionists for the University. Competition with MCV for bodies in Richmond was fierce. In 1851, however, Davis signed an agreement with the anatomy professor at MCV to share the supply of bodies (Savitt, 1978).

The receipt of bodies from a distance increased after railroads became common. Alabama's first medical school, the Grafenberg Medical Institute, obtained cadavers by grave robbing, from the occasional execution of a criminal, and by importation from Montgomery or New Orleans of bodies shipped in molasses barrels (Holley, 1958). After the Civil War many bodies of southern Blacks were used in northern medical colleges (Savitt, 1978). One Professor of Anatomy in New England reported that, in the 1880s and 1890s, he entered into an arrangement in which he received, twice each semester, a shipment of 12 bodies of southern African Americans. They came in barrels labeled turpentine and were shipped to a local hardware store that dealt in painting materials (Waite, 1945).

Even those in the service of their country were not exempt. After President Abraham Lincoln signed the Emancipation Proclamation in 1863, African American units were formed in the Union Army. The death rate from disease, malnutrition, and dehydration was high among these troops. Many African American soldiers became the subjects for autopsies by white military surgeons anxious to enlarge their skills and enhance their reputations (Hunt, 1869).

THE NIGHT DOCTORS

After the Civil War, and continuing into the 1930s, there was a pronounced migration of African Americans from the south to northern industrial centers. Northern employers sent labor agents throughout the south promising transportation to the north and describing higher wages and improved living conditions. This mass movement of African Americans from the rural south to the urban centers of the north seriously affected the southern economy. Southern whites made strenuous efforts to check the African American exodus by legislation, force, and the circulation of false rumors about the fate of African Americans in the north. Among the most effective rumors deliberately circulated by southern whites concerned the kidnapping and murdering of urban African Americans for anatomic dissection. The genesis of this belief, as is often the case, came from a kernel of truth: the well known practice of buying slave bodies and grave robbing for medical colleges.

The most commonly circulated rumor, which took hold in African American folklore, was of a "night doctor" patrolling African American neighborhoods searching for victims. Tales of the "night doctors" spread to the rural south and were supported by the claim that doctors faced a shortage of cadavers and, in order to get them for dissection, they would kidnap and murder people. It was not unheard of for southern whites to dress in white gowns or sheets and roam African American neighborhoods at night to spread fear and dissuade Freemen from moving to northern cities (Fry, 1975). The similarity in appearance of the "night doctors" and the white-robed Klu Klux Klan lead some individuals to refer to the "night doctors" as "Klu Klux doctors" (Fry, 1975; Sappol, 2002). In New Orleans the medical mythology among African Americans included stories about "needle men"—medical students at the Charity Hospital who were eager to procure cadavers for their studies. The so called "black bottle men" were said to give patients castor oil and magnesia in order to hasten death and provide corpses (Sharpe, 1997).

Professional grave robbers like Grandison Harris became well known bogeymen. The simple mention of their names "was usually sufficient to send adults and children scurrying home" (Fry, 1975). Among the most famous besides Harris, according to oral tradition, was an African American from Washington, DC, named Sam McKeever who was allegedly active around 1880–1910, William Cunningham of Cincinnati, and an unidentified African American preacher in Washington, DC, who allegedly stole the corpses of his own congregants (Edwards, 1954; Fry, 1975).

CONCLUSIONS

By the 19th century, it was generally recognized that a sound understanding of human anatomy was essential to medical practice. Because the demand for cadavers for dissection by whites in the US exceeded the legally available supply, an illegal market in body trafficking developed. Those elements in society least able to defend their grave sites, including enslaved and free African Americans, were often victims of these thefts (Clark, 2003).

In the early 21st century the American public has become increasingly sympathetic to the needs of medical and physical therapy schools for cadavers for anatomical education. This is, perhaps, because citizens can now read-

ily discern the benefits of modern medicine in their own lives. Voluntary donations provide the vast majority of cadavers of most US medical schools. From 2003 to 2006 the Duke University School of Medicine received 203 donated bodies, 97% were Caucasian and 3% African American or Biracial (personal communication, J. Bolignesi). When those in power clearly see that anatomic dissection is in their self-interest, they support it. When they don't, the bodies of others are "good enough."

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