THE yellow fever epidemic which raged in Philadelphia periodically between 1793 and 1799 was one of the most terrifying crises in early American history. The epidemic touches the lives of virtually all Philadelphians: in 1793 alone, a full half of the population fled the city, and over 5000 people (about one-tenth of the population) died of the fever in Philadelphia. For years afterward, histories of the period resonated with the terror of that trauma; the medical history of the epidemic has been written and rewritten over the years. But far less attention has been paid to the general cultural significance of this crisis in the political capital of America. This was a test—and a severe one—for a developing American culture whose creators were extremely self-conscious about its relationship to American moral health and political virtue. Moreover, this was a drama played out in the city which seemed in the 1790s to have the fairest prospect of emerging as the capital of a new national culture and politics alike—the London or Paris of the new nation. An examination of the various responses to this traumatic event can thus reveal a great deal about Americans’ attitudes toward their culture in the post-Revolutionary period, as well as the cultural legacy and significance of this unparalleled crisis in the capital.

By any standard, the physicians of Philadelphia were among the proudest and most accomplished contributors to American culture in the decade and a half after the Revolution. Always active in the pursuit of natural history both for its link to materia medica and for its lessons
about the environment, Philadelphia physicians had played an instrumental role in the formation of the American Philosophical Society in 1768, and continued to contribute heavily to its meetings and publications after the Revolution. The prominence of Philadelphia physicians in this most respected branch of American culture increased following the formation in 1787 of the most important medical society of the day, the College of Physicians of Philadelphia, which was dedicated to "investigating the diseases which are peculiar to our Country" and "observing the effects of different seasons, climates, and situations upon the Human body...." For similar reasons, the first American professorships, lectures, and texts in natural history came from medical schools, of which Philadelphia's College, founded in 1769, was the most distinguished. Without doubt, the efforts of Philadelphia's physicians to form a lively, but unified intellectual community helped make their city the emerging center of American culture by the 1790s.²

Considerable optimism marked Philadelphia medicine a decade after the Revolution. Benjamin Rush, one of the city's foremost physicians and medical educators, spoke for many when he expressed his high hopes that the present American generation would "complete the fabric of medicine," by judiciously combining "observations and reflections." As Rush explained in 1789 to graduating medical students in Philadelphia, the observations were to be made not only in sickrooms, but also in "the untrodden fields and forests of the United States," where lay untold "indigenous medicines": "Who knows but it may be reserved for America to furnish the world, from her productions, with cures for some of these diseases which now elude the power of medicine?" Now was the time, Rush added, to comb the Alleghenies, the Monongahela, and the Potomac for the "invaluable medicine virtues" of American nature, for a valuable start had been made. Rush found "human misery of every kind... evidently on the decline" in the decade since "the convulsions of the late American Revolution" threw open "all the doors and windows of the temple of nature." He concluded grandly:

We live, gentlemen, in a revolutionary age. Our science has caught the spirit of the times, and more improvements have been made in all its branches, within the last twenty years, than had been made in a century before. From these events, so auspicious to medicine, may we not cherish a hope, that our globe is about to undergo those happy changes, which shall render it a more safe and agreeable abode to man, and thereby prepare it to receive the blessing of universal health and longevity...³
The widespread nature of this sense of hope and pride in the progress of American medicine among Philadelphia physicians was confirmed, more prosaically, by Rush's colleague in the College of Physicians of Philadelphia, William Currie. Currie's *Historical Account of the Climates and Diseases of the United States of America* of 1792 drew, like the American Philosophical Society itself, from "a correspondence with several physicians of talents and experience residing in the several states,” in order to describe and prescribe for diseases unique to America, "where the climate, soil, and modes of living of the inhabitants, and of course their constitutions, and the semieology of diseases, even of the same genus, are in many respects different [from those of Europe]..." By such a study, Currie chiefly hoped to "contribute in some measure to improve the treatment of epidemics," by demonstrating to Americans south of Maryland that "Intermitting, Remitting or Bilious Fevers, and Fluxes, are scarcely even known" in the northern states. The key difference between health and disease, Currie theorized, was not only physical climate, but also the moral distinction between "habits of temperance" and "luxury and fashion":

The farmer while he tames the stubborn soil and forces it to reward his labours, insensibly acquires vigour of body and resolution of mind, and at the same time respires a salubrious air; but manufacturers and mechanics, confined to sedentary occupations, or condemned to vegetate in cellars and closer apartments, breathe infection, and their minds become contracted as well as their lives abridged.4

Despite his belief in the healthfulness of yeoman virtues and his disapprobation of city life, however, Currie could not help loving Philadelphia. The bulk of the book depicts this "metropolis of the United States" as "elevated and delightful," washed by the "fresh and pure" waters of the Delaware and Schuylkill, and favored with dry, clean, and well-ventilated streets; Currie's reluctant mention of the summer heat, the "narrowness of the streets," and the "few nuisances... still suffered to remain...", such as slaughter-houses, tan-yards, and grave-yards,” is relegated to footnotes. Like Rush, Currie found Philadelphia the home of "simplicity, industry, and republicanism," where "learning, manufactures, and human improvements of every kind thrive and flourish"—the ideal spot for the seat of national government. Since 1783, Currie proudly related, even the poorest districts of Philadelphia had witnessed a decline in mortality rates, due partly to that "charitable and very useful" voluntary organization, the Physicians of the Dis-
pensary, partly to civic improvements such as "the arching of the Dock, and the cultivation of the Lots around the City," and partly to "the improved state of Physic" itself. All of which, buttressed by mortality figures presented to the American Philosophical Society, allowed Currie to conclude "that the probabilities or chances of enjoying health, and prolonging life, is much greater in the City of Philadelphia, and some other parts of the United States, than in any other districts of the World, containing a proportionable number of inhabitants." Largely due to its thriving moral and cultural state, in 1792 Philadelphia received from its chief physicians a glowing physical description and a clean bill of health.

The irony of the situation must have been apparent to the College of Physicians of Philadelphia as they assembled upon the call of the Mayor in August 1793: the healthiest city in the healthiest nation in the world was suffering its first epidemic of yellow fever in 30 years, and those doctors who had so recently given the city a clean bill of health were being called upon to save it from total disaster. While the honor of being the first voluntary medical society to be appealed to by an American government could not have escaped the notice of the eminent Philadelphia physicians, neither could they have been insensible of the challenge that this appeal presented to their proud and accomplished intellectual community. To a large extent, that challenge went unmet. The meeting ended with Rush and Currie in disagreement over the classification of the disease; a noncommittal report was issued. Enlightened Philadelphia medicine felt virtually impotent in the face of this disease which killed so quickly and so horribly.

Terror, fed by immediate newspaper reports and the Physicians' recommendations to avoid the sick, spread through the city. The well-developed, active Philadelphia press became preoccupied with the fever and remained so for the remainder of the disease-ridden decade: the Philadelphia Monthly Magazine and the Philadelphia Weekly Magazine detailed the events of the epidemic in 1797; William Cobbett launched a barrage on Philadelphia's administration and physicians from his Philadelphia Porcupine's Gazette and then from his Rush Light, based in relatively safe New York; and the more scholarly early volumes of the Medical Repository, co-edited by the New York physicians Samuel L. Mitchell and Edward Miller and the Philadelphian Elihu H. Smith (until his death of yellow fever in 1798), contained more than 90 papers on pestilence. The irrepressible "Poet of the Revolution," Philip Freneau, kept his Philadelphia National Gazette alive until the end of October 1793, and contributed to the uproar one of his
least memorable verses: “Nature’s poisons here collected,/ Water, earth, and air infected —/ O, what pity,/ Such a City,/ Was in such a place erected!”

Rapidly-written books competed for public attention from the fall of 1793, led by William Currie’s Description of the Malignant, Infectious Fever of September, a handbook of symptoms and mild, traditional treatments in simple language for immediate public use. Mathew Carey’s Short Account of the Malignant Fever, which went through three editions in two weeks of November 1793, was both more sensational and more scholarly than Currie’s medical handbook. Carey, the consummate publicist, balanced a suspenseful narration of “the destroying scourge,” which “crept in among us, and nipped in the bud the fairest blossoms that imagination could form,” with a dedication to the American Philosophical Society and an appendix of “Meteorological Observations” by David Rittenhouse. Most poignant to Philadelphia residents, Carey’s appendix also provided ever-growing lists of the dead. As one Philadelphia woman recorded the mood of the city in 1793, “it was a time of such anxiety and distress as was never before known in America.”

To those who observed the course of events in Philadelphia from a philosophical point of view, the threat both to that city and to America seemed dire. Not only was Philadelphia medicine, the crown of American culture, apparently impotent, but the belief in a benevolent, healthful American environment, so carefully nourished over the last decade, seemed to be crumbling as well. Even those who did not find, with Samuel Stanhope Smith of the College of New Jersey, signals of racial degeneracy in yellow fever itself, could not deny the obvious flow in American healthfulness. Most serious of all, the link between physical and moral well-being, established by such diverse philosophers as Smith, Benjamin Rush, the Abbé Raynal, and the Comte de Buffon, implied the presence of an immediate threat to American moral and political purity. Americans, ever watchful for a downward turn in their historical path, found more than a slight hint of moral decay in 1793, as the capital city itself was struck and debilitated.

Mathew Carey’s Short Account of the Malignant Fever expressed the uneasy feeling of many Americans that Philadelphia must have deserved its punishment: “Extravagance, in various shapes, was gradually eradicating the plain and wholesome habits of the city. And although it were presumption to attempt to scan the decrees of heaven, yet few, I believe, will pretend to deny, that something was wanting to humble the pride of a city, which was running on in full career, to the goal of prodigality and
dissipation.” Benjamin Rush, long convinced of the intimate link between moral and physical states, could only agree “in deriving our physical calamities from moral causes”; he attributed the divine visitation to the “bitter and unchristian spirit” dividing Philadelphia’s citizens.¹⁰

Still more certain of the righteousness of the divine judgment were Philadelphia’s clergy. The German Lutheran minister to the city, Reverend Justus Henry Christian Helmuth, began his Short Account of the Yellow Fever in Philadelphia, for the Reflecting Christian with a lamentation “for Philadelphia in these days of mourning”: “There are few cities upon which the Lord had poured forth richer blessings, than on this; and there are but few indeed, that have been plunged by his just judgment into a deeper abyss of distress, than our now weeping Philadelphia.” Too “striking” to be a coincidence, Helmuth notes, is the fact that the Circus, “which a few weeks before resounded with the noisy acclamations and clappings of levity,” was designated the first pest-house, “where the very first sick were brought, in a most deplorable situation, who on account of poverty, and want of friends, could find shelter no where else!” Philadelphia’s “merry, sinful summer,” during which the Circus flourished, the Sabbath was broken, a new theater was built and actors engaged, and “drunkenness, lewdness, fraud, pride, avarice, uncharitableness, quarrelling,” and blasphemy supplanted moral virtue, was now ended in “a most mournful autumn.” And who could doubt the justice of the punishment? For the merriness and cultural vitality of the city were directly linked to the sinfulness: “Philadelphia far exceeded most of the cities of North-America, in luxury and dissipation among all classes of people.” Remarkable agreement in the diagnosis of Philadelphia’s moral disease was reached between the city’s ministers, physicians, and press.¹¹

Observers outside of Philadelphia, long accustomed to watching that center of American politics and government, generalized the divine warning to the nation as a whole. The Honourable Samuel Stearns, J.U.D., prefaced his poetic Account of the Terrible Effects of the Pestilential Infection in the City of Philadelphia, published in Providence in 1793, with the serious warning, “But when GOD’s Judgments are abroad in the Earth, let the Inhabitants thereof learn Righteousness.” He prayed for Philadelphia, Providence, and the nation: “AL-MIGHTY GOD, wilt thou they people spare?/ Deliver them from this contagious snare!/This mortal Plague at thy command began,/ And thou thereby hast humbled sinful man!” New York, the mayor of the city wrote to the besieged mayor of Philadelphia in October of 1793, was
CRISIS IN THE CAPITAL

“deeply impressed with the awful judgment of the Almighty on the American Nation, in permitting a pestilential disease to lay waste and disorganize that once populous, well regulated and flourishing sister city, the east of Empire, by destroying the lives of many valuable patriots and citizens and by driving many other of its numerous and very opulent and useful inhabitants into exile. . . .” As a precaution, New York’s clergy set aside September 20, 1793, as a day of fasting, humiliation, and prayer for the preservation of their own fair city and the nation.12

Those Americans who feared that social and moral decay were at the root of Philadelphia’s troubles, certainly had no difficulty in detecting that decay after the epidemic struck. From the first days of the epidemic, business, education, medicine, charity, fellowship, filial duty, and civil government broke down in the City of Brotherly Love, as fear and disease claimed merchants, teachers, ministers, physicians, constables, city and state officials, and even the Overseers and Guardians of the Poor. Nearly 20,000 people fled Philadelphia in 1793 alone, closing half of the houses in the city. In September of that year, President Washington and Secretary of State Jefferson left the beleaguered city bereft of national government, too; the remaining inhabitants of the city felt still more defenseless against the thefts, murders, desertions, rioting, “venereal appetite,” and other forms of social disorder fostered by the epidemic. Perhaps more eloquently than a polished report could hope to do, Carey’s hurried Account paints the picture of a city suffering “a total dissolution of the bonds of society in the nearest and dearest connections”:

Who, without horror, can reflect on a husband deserting his wife, united to him perhaps for twenty years, in the last agony—a wife unfeelingly abandoning her husband on his death bed—parents forsaking their only children—children ungratefully flying from their parents, and resigning them to chance, often without an enquiry after their health or safety—masters hurrying off their faithful servants to Bushhill [Hospital/Pesthouse], even on suspicion of the fever, and that at a time, when, like Tartarus, it was open to every visitant, but never returned any—servants abandoning tender and humane masters, who only wanted a little care to restore them to health and usefulness—who, I say, can even now think of these things without horror? Yet such were daily exhibited in every quarter of our city.13

As the disease, fear of contagion, and thus quarantines and cruelty seemed to radiate outward from the capital city over the course of the
decade, Americans discovered physical as well as symbolic bases for their fears of America's physical, moral, and political impurity. The American malaise of the 1790s was not merely caused by political factionalism, nor was it psychosomatic.14

Ironically, it was the ardently patriotic Benjamin Rush who brought Philadelphia's crisis of self-consciousness to a head. Rush, called to some of the first cases of yellow fever in August 1793, became convinced that "noxious effluvia" from local "putrefactions" were causing the disease by infecting the solids of the aether, and thus poisoning the atmosphere. As the existence of the mosquito *Aedes aegypti* was still unknown to medical theory, which explained the incidence of many diseases by reference to noxious atmospheric miasmas well into the nineteenth century, Rush's diagnosis was not at all revolutionary. It was unusual in Philadelphia medical circles, however, to depart from a theory of direct, personal contagion; numerous American studies detailed the importation of fevers from Africa or the West Indies. Most important, the implications of Rush's interpretation for American climate and health seemed to reopen old wounds, however defensively Rush himself might argue that the American climate alone could not produce the dangerous "putrid vegetable exhalation."15

Thus a controversy was born that would rage longer than the fever itself, between those doctors who located the cause of the fever within Philadelphia, and those—including William Currie—who believed it imported from the Indies. Some Federalist politicians and local residents resolutely favored the latter interpretation, and urged greater enforcement of quarantines, especially against the radical refugees from French Haiti who had recently poured into Philadelphia. Rush and his followers, more resolute still, urged Philadelphia to face the awful truth and begin a program of sanitary reform. The College of Physicians, initially unable to decide, broke apart under the strain of disease and dissension. Part of the chaos of the original days and weeks of the fever was due to heated arguments between Philadelphia's dedicated physicians, most of whom loved their city enough to stay and risk their own lives to save it.16

The chaos was heightened for some and resolved for others as Rush found his cure for the fever. His heroic purgings and bleedings, based upon the belief that the abdominal viscera must be emptied of blood—even four-fifths of the body's total supply—to allow a mild sweat and recovery, were hailed by some doctors and patients as salvation, and scorned by others as "a murderous dose" or "a dose for a horse." Currie likened Rush to Dr. Sangrado, who "published a book, in which he
advised copious bleeding and immeasurable quantities of warm water for the cure of Dropsy, and when he discovered his mistake, ... observed to Gil Blas with a solemn air, 'though I know I am wrong yet it is better that all Valadolid should die than for me to change my opinion.'"

Undaunted by the opposition and infused with a renewed faith that "to every natural evil the Author of Nature has kindly prepared an antidote," Rush continued to try his cure on the many helpless victims of the disease, and to develop his great "principle in medicine" during the recurring bouts of fever in the nineties. His "American system" went beyond those of contemporary British physicians in reducing first all fevers and then all diseases to one fever, and all cures to the reduction of the "morbid excitement" (of arteries) so evident in fever. Rush hoped that his American system would make medicine comprehensible even to the simple American yeoman, and thus keep America's culture as republican as its government."

Rush saw nothing but unenlightened self-interest in other physicians' resistance to his system. He was infuriated, Rush wrote his wife in September 1793, by the caution and criticism of Currie, Benjamin Smith Barton, Adam Kuhn, and other Philadelphia physicians: "Hundreds have been sacrificed by this mistake. We have but one, we cannot have but one fever in town. The contagion of the yellow fever like Aaron's rod swallows up the seeds of all other diseases. We might as well talk of two suns or two moons shining upon our globe as of two different kinds of fever now in our city." Frustration, frantic hours surrounded by the dying, pride, and the heat of battle all strengthened Rush's conviction. In 1796 he lectured medical students, "I have formerly said that there was but one fever in the world. Be not startled, gentlemen; follow me and I will say there is but one disease in the world." Rush fought "superstition" and false temerity in the streets, the press, the medical societies, and even the courts, as he sued William Cobbett for his impolitic observation that the good doctor had made "one of those great discoveries which are made from time to time for the depopulation of the earth.""

Rush emerged at least partially triumphant. His wide correspondence with physicians across the nation persuaded Rush that, despite continued opposition in Philadelphia, the theory of domestic origins of yellow fever prevailed in America by 1796. Moreover, although the College of Physicians still resisted, by the time the fever subsided in the late 1790s, Rush's "American system of medicine" had found disciples in all parts of the country. By 1812, about 3000 American physicians had actually studied Rush's principles under the master in Philadelphia.
Not until the 1820s was his system largely discredited, and Rush himself declared a victim of the yellow fever epidemic of Philadelphia.  

Meanwhile, on the physical battle lines, the victory in 1793 finally went to Philadelphia’s citizens and their voluntary associations, whose virtue withstood the severest tests. From the initial appeal to the College of Physicians in August to the final recovery of the city in December, the collapsing government relied heavily upon the initiative of its citizens. There was really no choice after the municipal government broke down, the State Assembly fled, and the valiant Washington himself deserted the city. On the very day of the President’s departure, a small group of “benevolent citizens” volunteered their services to the Mayor; they in turn issued a call for a citizens’ committee to aid the Guardians, the volunteers at Bush Hill Hospital, and the black nurses of the African Society, all of whom were “almost overcome with the fatigue they undergo.” This committee of two dozen undertook the governing of the capital city, committing themselves “to transact the whole of the business relative to mitigating the sufferings of those that are or may be afflicted.” William Currie was among the volunteers, and so was the man who would soon make a name for himself by describing the awful scenes he witnessed: Mathew Carey began to organize poor relief for the Committee in early October. Largely because of the efforts of two members of the Committee, Stephen Girard and Peter Helm, actually to clean and care for the sick at Bush Hill—and to contributions of money, linen, produce, fowl, and sheep from voluntary organizations and citizens of Pennsylvania, Maryland, Delaware, New Jersey, New York, Massachusetts, and Virginia—Philadelphia began to regain control of itself. Through the virtue of its citizens as much as the knowledge of its physicians, it seemed to many observers, Philadelphia conquered the yellow fever.

Even those eager to draw moral lessons from the epidemic were recovering their optimism by 1799. All could read their favorite lessons for America there, and discover the fever to have been beneficial, if not heaven-sent, after all. Among the most vocal of those waiting to extract meaning from the crisis stood Benjamin Rush. Still flushed from battle with the disease and his foes, Rush did not seek to deny the intensity of the trauma. Rather, he contended that controversy and disease, however painful at the time, had been indispensable to the further development of American culture and virtue. Rush informed a new class of medical students at the University of Pennsylvania in 1799 that “Conversation strengthens the intellectual faculties,” and pain helps “in generating new ideas, or exciting old ones in a rapid succession.” Had not Rush
himself completed his American system of medicine in the throes of
disease and despair? And had not the first American journal of medicine
sprung up, according to its editors, in response to "the distressing
events" which had "quickened the zeal and observation" of physicians
and "excited the eager apprehensions of all"? Aided by the able
"publications of our countrymen," Rush concluded in 1801, his late
"discovery" would eradicate "error" forever, and would lead to "the
same extinction of pestilence, which commerce has produced of famine
in Europe." Already, Rush could see the beneficial effects of the
American system: "The gout, dropsies, haemorrhages, pulmonary
consumption, are now cured, when they are treated as symptoms of
general fever. Cancers are easily prevented. . . ."21

Indeed, due to "the triumphs of medicine within the last thirty years,"
by 1799 Rush could once again trace for his students a clear pattern of
American progress in culture, as in politics, since the Revolution: "From
a strict attention to the state of mind in this country, before the year
1774, and at the present time, I am satisfied, the ratio of intellect is as
twenty are to one, and of knowledge, as an hundred are to one, in these
states, compared with what they were before the American revolution."
The fever, Rush averred, far from destroying American culture, had
stimulated it and exhibited its strength and vitality as never before.
Moreover, even a cultural advance as seemingly inimical to American
interests as Rush's discovery of an American disease, proved in the end,
Rush felt sure, to be a boon to both American health and virtue. Allowed
a certain independence, American culture could do more than merely
preserve American virtue; it actually could raise that virtue to still
greater heights.22

If Rush was unwilling to relinquish "the great variety and constant
succession of new impressions, which occur in large cities, from
business, news, company, theatres, shews, controversies and casualties,"
others were convinced that the danger from these stimuli to vice was
precisely the moral lesson to be learned from the epidemic. Ebenezer
Hazard, an old friend and classmate of Rush, who rejected the doctor's
heroic cure in 1793, reached this conclusion at the same time: the lesson
of 1793, given to America just in time, clearly was to reject the "fashions
of the Old World in building great cities." Thomas Jefferson and others
who had fled the city with relief eagerly concurred in extracting this
positive lesson from the devastating loss of life and property. From this
perspective, the tremendous loss had effectively protected American
morals, health, and liberty from unrestricted urban growth.23

This fundamental disagreement over the lesson to be drawn from the
tragedy is especially revealing, as it epitomizes the ambiguous attitudes toward their culture that Americans displayed throughout the crisis. Again and again in the midst of the epidemic, observes inside and outside Philadelphia pointed to the moral and physical dangers of luxury, urban growth, and a thriving, “merry” culture. Even as they turned to their distinguished physicians and the Philadelphia intellectual community for aid in the disaster, most Americans seemed to doubt the wisdom of such a reliance on their developing culture. In general, they seemed more comfortable in prayer, flight from the city, or voluntary citizen activity.

Yet, in determining the cultural legacy of this crisis in the capital, one cannot entirely reject Benjamin Rush’s claims for cultural growth either. Within America’s intellectual communities, the crisis was regarded as a clarion call to further development. Moreover, not even the gloomiest critics of Philadelphia’s cultural “dissipation” doubted the importance of the moral and cultural state of society to physical health. Certainly the epidemic provided a new stimulus to American study of medicine and natural history, most evident in the establishment of the New York Medical Repository, the numerous articles on pestilence reviewed in that first American journal of medicine, and especially the “first attempt” at “a history of epidemic and pestilential distempers,” Noah Webster’s monumental (and misnamed) Brief History of Epidemic and Pestilential Diseases of 1799. Webster’s success in eliciting a considerable response to a circular request for information from physicians in Massachusetts, Connecticut, New York, Virginia, and South Carolina, illustrates the continuing and perhaps increasing vitality of the tradition of voluntary association for cultural advancement throughout this period of great stress and frantic activity.24

Webster’s study reveals another crucial aspect of the epidemic’s cultural significance as well. This gargantuan effort by the New England “Schoolmaster to America” was dedicated to resolving the controversy among Philadelphia physicians over the “origin and propagation of this disease” by seeking information and medical opinions “from all parts of the United States, where the yellow fever, or other malignant fevers had prevailed, during the preceding years.” Compared with William Currie’s proud dicta about moral and physical health issued from Philadelphia to the rest of the nation in 1792, Webster’s urgent request for aid for Philadelphia represents a significant shift in America’s cultural configuration. So, too, does Benjamin Rush’s increasing reliance after 1793 upon the support of a network of physicians around the nation, rather than a compact, unified intellectual
CRISIS IN THE CAPITAL

community within Philadelphia. Indeed, Rush himself delivered a shattering blow to the structural unity of Philadelphia’s intellectual community by resigning in pique from the College of Physicians to form a rival Academy of Medicine. Philadelphia’s unified intellectual community, supreme confidence, and developing cultural primacy were all destroyed during the crisis of the 1790s.25

Thus the rest of the nation’s gain in cultural vitality and maturity in the 1790s was Philadelphia’s loss. Moreover, it was a loss that was never to be recovered, as Philadelphia soon lost its political and commercial primacy as well. The nation might have gained an American disease and an American system of medicine in this perilous decade, but it had lost its potential single center of national politics and culture. That loss, at least in part, was the cultural cost of the crisis in the capital.

NOTES

1. The author is indebted for her general conception of the significance of crisis in cultural history to various discussions with Carl E. Schorske at Princeton University in the late 1970s, and to Thomas S. Kuhn, *The Structure of Scientific Revolutions* (Chicago, 1970). While the author does not find an exact fit between Kuhn’s model for pure science and this medical crisis, she is convinced of the general importance of Kuhn’s suggestions regarding scientific crises and the responses of intellectual communities.


The author does not mean to imply, by calling the Philadelphia intellectual community “unified,” that there was constant consensus among its members. Rather, vigorous disagreements over issues ranging from Pennsylvania politics to nosology, served to enliven and enrich the Philadelphia intellectual community—which nonetheless remained essentially unified within its formal and informal intellectual institutions.


6. The last previous yellow fever epidemic in Philadelphia was in 1762, when Rush was an apprentice. For a delightful narrative of the 1793 epidemic in Philadelphia, see J.H. Powell, *Bring Out Your Dead* (Philadelphia, 1949). Powell describes the meeting of the College of Physicians and the initial days of the epidemic in great detail, 21–55.

7. A thorough survey of journals is provided in Frank L. Mott, *A History of American Magazines, 1741–1850* (Cambridge, Massachusetts, 1939), 149, 150, 216. Freneau’s “Pestilence” is reproduced as the frontispiece to Powell’s book.


9. Samuel Stanhope Smith, *An Essay on the Causes of the Variety of Complexion and Figure in the Human Species* (Philadelphia, 1787), describes yellow fever as the mediating agent in turning white skin dark; see pages 12–13. The feverish debate over American degeneracy was especially difficult for defenders of America to win, as they shared the fundamental assumption of their critics about the importance of environment to moral and intellectual character. For a clear statement of this belief, see Benjamin Rush, *Inquiry into the Influence of Physical Causes upon the Moral Faculty* (Philadelphia, 1786).


14. Carey, *Short Account*, chronicles the strict quarantines imposed against fleeing


16. For Rush's persistence over the years in locating the origin of yellow fever locally, see Rush, *Observations upon the Origin of the Malignant Bilious, or Yellow Fever in Philadelphia* (Philadelphia, 1799), and Rush, *An Inquiry into the Various Sources of the Usual Forms of Summer and Autumnal Disease of the United States, and the means of Presenting them.* To which are added, facts intended to prove the Yellow Fever not to be Contagious (Philadelphia, 1805). The contagionist debate flourished beyond Philadelphia as well, of course, but not with the urgency and venom it had in the capital. William Currie, careful and even-handed in his initial judgments, insisted that the proximate cause of the fever “can only be determined by a collection and faithful statement of facts, and must be left for future investigation.” He earned Rush's enmity by this caution, by his general Cullenian orthodoxy of classification, by his conviction that the fever “is produced by specific contagion, and may be communicated from those labouring under the disease, to persons in the most perfect state of health,” and by his denial “that the air in the streets can be contaminated by the contagion so as to communicate the disease through that medium.” See William Currie, *A Description of the Malignant, Infectious Fever*, 6–8. Currie abandoned his caution as the volatile Rush repeated his arguments in *An Account of the Bilious Remitting Fever* (Philadelphia, 1794); Currie responded with *An Impartial Review, of that part of Dr. Rush's late Publication, entitled “An Account . . . which treats of the Origin of the Disease” in which his Opinion is Shewn to be Erroneous; The Importation of the Disease Established; and the Wholesomeness of the City Vindicated* (Philadelphia, 1794).

Martin S. Pernick, “Politics, Parties, and Pestilence: Epidemic Yellow Fever in Philadelphia and the Rise of the First Party System,” *William and Mary Quarterly*, 3rd series, 29, 1972, page 568, documents Federalists' desire to use the importation theory to exclude radical French refugees. Pernick points to interesting political applications of the medical controversy in general, but seems to attribute too much importance to divisions along party lines—particularly among mainly non-partisan physicians.

Local residents’ unshakable belief in the contagionists' importation theory is documented by Carey, *Short Account*, 18–19; and acknowledged by Rush in his *Enquiry*, 12. Carey adopted the more popular position in his *Observations on Dr. Rush's Enquiry* (Philadelphia, 1793), published just three days after the *Enquiry*. There was, of course, an element of truth in both absolute stances.

17. Historians of medicine have debated for years over the merits of Rush's cure. Although the heroic cure has traditionally been considered lethal, recent evaluations argue that it was not necessarily lethal, and that variations within the pattern of the disease itself may have led to Rush's misinterpretation of his results. See Chris Holmes, "Benjamin Rush and the Yellow Fever," *Bulletin of the History of Medicine*, XL, 3, 1966, 246–263; and Carl Binger, *Revolutionary Doctor, Benjamin Rush*, 1746–1813 (New York, 1966), 216–217.

Currie's opposition to heroic cures of any kind was expressed from the start: “For nothing is more pernicious, or even fatal, than that any part or function should be forced to make exertions incompatible with its strength; and there is the more danger of ill-timed remedies in the present fever, as with the state of weakness there is conjoined a state of
excessive irritability for the first two or three days.” See Currie, Description, 22–23;
Impartial Review, 10. Currie and Rush were partially reconciled in 1794, as Currie
admitted the necessity of trying an “innovative” cure—if he still denied the origination of
yellow fever anywhere but “within the tropics”; see William Currie, A Treatise on the
Synochus Icteroides, or Yellow Fever (Philadelphia, 1794), 41–44, 66.

For Rush’s initial development of his “American system of medicine” in the midst of
despair over medical helplessness, defensiveness, and frustration with Cullen’s nosology,
see Rush, Letters, II, 637–746; Benjamin Rush, Travels through Life, ed. George W.
Corner (Princeton, 1948), 87–105; Powell, Dead, 76–89, 135; and Benjamin Rush, “A
Narrative of the State of the Body and Mind of the Author, during the Prevalence of the
Fever,” appended to “An Account of the Bilious Yellow Fever, as it appeared in
Philadelphia in 1793,” in Medical Inquiries and Observations (Philadelphia, 1805,
enlarged second edition), 4 vols., III, 330–353. The third volume of the Medical Inquiries
is particularly valuable for an understanding of the theoretical developments of the 1790s;

Rush’s final system is presented concisely in Richard H. Shryock, Medicine and Society
in America, 69–71, and his Medicine in America: Historical Essays (Baltimore, 1966),
236–8. Rush uses the term “American system of medicine” for his system in Benjamin
Rush, “An Inquiry into the Comparative State of Medicine, in Philadelphia, between the
Years 1760 and 1766, and the Year 1805,” in Medical Inquiries, IV, 389. The quotation is
from Rush, Inquiry into the Sources, 61.

18. The fiercest battle was between Rush and William Cobbett: the quotation is from
William Cobbett, The Rush Light (New York, February 28, 1800), 49; for further details,
see A Report of an Action for a Libel, brought by Benjamin Rush, against William Cobbett,
in the Supreme Court of Pennsylvania (Philadelphia, 1800).

Rush’s hardening stance in the face of opposition appears in his lectures: “On the
Causes of Death, in Diseases that are not Incurable” (1799), Six Introductory Lectures
(Philadelphia, 1801), 65–88, blames unnecessary death not on yellow fever, but on the
“ignorance” of physicians (66); “Upon the Causes which have Retarded the Progress of
Medicine, and the Means of Promoting its certainty and greater usefulness” (1801), in
ibid., 143–168, continues to insist upon the exclusively local cause of fever (162) and to
reject nosology completely (152–6).

Quotations are from Rush, Letters, II, 683; and Benjamin Rush, Lectures on the
Practice of Physic, II, No. 1, cited in Shryock, Medicine in America, 237.

19. Nathan G. Goodman, Benjamin Rush, Physician and Citizen, 1746–1813 (Philadelp-
Philadelphia, 1682–1763 (Chapel Hill, 1948), Chapter 4.) Also contributing to Philadelphia’s recovery in 1793, of course, was the first frost.


22. Rush, “Influence of Physical Causes,” in Six Lectures, 111. The parallel development of medicine and politics, both subject to increasing discord and violent strains of consensus in the 1790s, is not delineated explicitly by Rush.


24. Medical Repository, III, 279ff; Noah Webster, A Brief History of Epidemic and Pestilential Diseases (Hartford, 1799), 2 vols. Webster published the responses to his circular letter in A Collection of Papers on the Subject of Bilious Fevers, prevalent in the United States for a few years past (New York, 1796).

25. Webster, Brief History, I, v-vii.