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IMPATIENT AND PESTILENT: PUBLIC HEALTH AND THE REOPENING OF THE SLAVE TRADE IN EARLY NATIONAL CHARLESTON

BENJAMIN ALLEN CONCANNON SMITH*

ON A TUESDAY MORNING IN THE AUTUMN OF 1799, THE MEDICAL Society of South Carolina convened, and Dr. David Ramsay, president of the society, took the floor.¹ His remarks included a report on the recent health of the city of Charleston and the effects of yellow fever upon the region.² At this stage in his medical career, Ramsay concluded that yellow fever was not an imported or contagious disease, believing rather that it originated domestically.³ This was no surprise to the members in attendance because many either shared Ramsay's opinion or had prior knowledge of his position on the matter.⁴ As a group, the Medical Society often advised

* Benjamin Allen Concannon Smith recently received a Master's degree in history from the University of Georgia. The author wishes to thank Stephen Mihm, Peter C. Hoffer, and Allan Kulikoff for their many readings, wonderful comments, and insightful criticism of earlier drafts of this article. He also would like to acknowledge his wife, Sarah, for her tireless support and sharp editorial hand. A version of this article was presented as a paper at the North Carolina State University Graduate Student History Conference, Raleigh, February 22, 2013.

¹ David Ramsay, "Extracts from an Address Delivered before the Medical Society of South Carolina, on the 24th of September 1799," *Medical Repository* 4 (1801): 100. The Medical Society of South Carolina was founded in 1789 by a small group of physicians in Charleston. It was modeled after the Royal College of Physicians of London, with the purpose of promoting and improving the science of medicine and public welfare.

² Charleston was officially "Charles Town" from 1670 to 1783. For the sake of clarity, I will use the modern spelling throughout this article.

³ As this article will explicate, Ramsay's thinking on this matter was influenced by many factors. One was his mentor, Dr. Benjamin Rush of Philadelphia, who had reached the conclusion that yellow fever was not contagious or imported in 1793. This sparked a debate over both issues that transcended the period under discussion here and would not be resolved until the turn of the twentieth century, when Cuban researcher Dr. Carlos Finlay along with Drs. Walter Reed and James Carroll of the U.S. Army discovered that yellow fever was transmitted by the *Aedes aegypti* mosquito. Modern knowledge of the disease proves that doctors arguing the fever was not contagious were correct, but quarantine was an effective preventative measure due to the nature of how it spreads and the limitations of the mosquito vectors. For the modern scientific explanation of yellow fever, see Centers for Disease Control and Prevention, "Transmission of Yellow Fever Virus," <http://www.cdc.gov/yellowfever/transmission/index.html> (accessed May 7, 2013).

⁴ David Ramsay, *David Ramsay, 1749-1815: Selections from His Writings*, ed. Robert L. Brunhouse, Transactions of the American Philosophical Society, n.s., 55, pt. 4 (Philadelphia: American Philosophical Society, 1965), 152.

government officials on public health issues and influenced any changes made to public health laws. Under Ramsay's direction in the summer of 1800, the society advocated for relaxing quarantine measures for suspected cases of yellow fever. By August 1802, the Medical Society suggested that quarantine for yellow fever was altogether unnecessary.⁵

The Medical Society of South Carolina was the only professional medical body in the country so steadfastly anticontagionist in viewpoint that it encouraged state officials to employ *less restrictive* entry requirements for the port of Charleston. While several prominent physicians in other American port cities remained unconvinced of yellow fever's communicability, none considered relaxing quarantine laws. In fact, many other notable port cities such as Boston, Philadelphia, New York, and Savannah *enhanced* quarantine measures for suspected cases of yellow fever, actions entirely opposite to those put forth by David Ramsay and the Medical Society of South Carolina.⁶ Few historians have acknowledged that South Carolina was unique in this regard, and none have attempted to explain this phenomenon.⁷

In order to understand why South Carolina adopted public health policies rejected in other states, special attention must be paid to the spatial and temporal components of this particular story as it unfolded. The pressure from Ramsay and the Medical Society to relax yellow fever quarantine laws came during a contentious and ongoing national debate over the disease's communicability. Moreover, the resolutions were proposed concurrently with debates in the state legislature over the reopening of the African slave trade.⁸ Careful attention to these contextual factors illuminates the potential reasons why these men acted as they did, when they did. This article contends that the Medical Society of South Carolina imprudently put public

⁵ Joseph I. Waring, ed., *Excerpts from the Minutes of the Medical Society of South Carolina*, vol. 1 (Charleston, S.C.: Nelsons' Southern Printing & Pub., 1956), 29, 31.

⁶ John B. Blake, "Yellow Fever in Eighteenth-Century America," *Bulletin of the New York Academy of Medicine* 44 (June 1968): 673–686. Dr. Rush's views also help to illuminate the singularity of South Carolina's position. See Benjamin Rush, *Observations upon the Origin of the Malignant Biliious, or Yellow Fever in Philadelphia and upon the Means of Preventing It* (Philadelphia: Budd and Bartram, 1799), 1–28.

⁷ Peter McCandless's recent monograph perhaps comes closest to offering any explanation. Throughout his work, McCandless does well to show how quarantine measures were perceived as burdensome on planters and merchants. See McCandless, *Slavery, Disease, and Suffering in the Southern Lowcountry* (Cambridge: Cambridge University Press, 2011), 226. The term "anticontagionist" refers to those who believed yellow fever was not communicable via human contact. A debate over contagion ensued in the aftermath of the Philadelphia epidemic in 1793, dividing physicians into two camps, contagionist and anticontagionist.

⁸ Ramsay, *Selections from His Writings*, 19; Patrick S. Brady, "The Slave Trade and Sectionalism in South Carolina, 1787–1808," *Journal of Southern History* 38 (November 1972): 611.

health at risk to facilitate commerce and the reopening of the slave trade in 1803. Facing powerful economic incentives, these men—especially David Ramsay—were blinded to the potential public health risks wrought by their peculiar actions. Drawing such conclusions requires a detailed discussion of the history of quarantine in the state and the pervasiveness of pestilence in the South Carolina low country during the period of the early Republic.

South Carolina and yellow fever have an old and rich relationship. John Drayton, governor of South Carolina from 1800 to 1802, penned a history of the state during the last year of his term. Pestilence was a recurring topic throughout his work. He claimed that Charleston “at its first settlement . . . was said to be so unhealthy in the autumnal months” that “public offices were shut up, and people retired to the country.”⁹ A contemporary of Drayton, David Ramsay also authored a state history confirming that the earliest attack of yellow fever on the city was in the autumn of 1699. Yellow fever, he noted, continuously devastated the port and, once it took hold, “swept off a great part of the inhabitants, and some whole families.”¹⁰ The fever did not discriminate in its devastation. Among its casualties were upstanding citizens and public officials, including an Episcopal clergyman, the chief justice, the receiver-general, a provost marshal, and almost half of the Commons House of Assembly.¹¹

The 1699 outbreak was detrimental to commerce too. Historian John Duffy contends that because most of the public officials (many of whom were merchants and planters) were either “dead or dying” and the rest were “incapacitated from fear of the disorder,” the government could not calm the public and take measures to contain disorder.¹² Naturally, the large death toll and the flight of surviving inhabitants to the countryside interrupted commercial activity, leaving the city desolate and pestilent until warm weather subsided.

Governor Joseph Blake dismally reported “at least 160 persons” killed by the contagion.¹³ His official report made apparent the epidemic’s effect

⁹ John Drayton, *A View of South-Carolina, as Respects Her Natural and Civil Concerns* (Charleston, S.C.: Printed by W. P. Young, 1802), 24.

¹⁰ David Ramsay, *A Review of the Improvements, Progress and State of Medicine in the XVIIIth Century* (Charleston, S.C.: Printed by W. P. Young, 1801), 39.

¹¹ David Ramsay, *The History of South-Carolina, from Its First Settlement in 1670, to the Year 1808* (Charleston, S.C.: Published by David Longworth, for the author, 1809), 1: 46.

¹² John Duffy, “Yellow Fever in Colonial Charleston,” *South Carolina Historical and Genealogical Magazine* 52 (October 1951): 191.

¹³ Edward McCrady, *The History of South Carolina under the Proprietary Government, 1670–1719* (1897; repr., New York: Russell and Russell, 1969), 309; Joseph Blake quoted in Duffy, “Yellow Fever,” 190.

on commerce, claiming it led to "the decay of trade and the mutations of . . . public officers occasioned thereby." Furthermore, Blake seemed convinced that the disease arrived on ships from the West Indies, specifically Barbados.¹⁴ Yellow fever raged in South America and the Caribbean by the middle of the seventeenth century. Up to that point, however, exposure to the disease was unknown on the North American continent. Hence, when it surfaced, Blake and others fingered the tropics as the source.

The 1699 outbreak surely infuriated public officials, who had passed the colony's first quarantine law one year prior. The law established a post of health officer "empowered and required" to board all vessels entering Charleston, inspect the crew and passengers, and report on the health of the port of origin.¹⁵ Apparently, these precautions in 1698 did not prevent the importation of yellow fever the following year.¹⁶ Whatever the reason, the failure to inhibit yellow fever's infiltration sparked new discussions in the Commons House and led its members to enhance the existing quarantine law.

In 1707 the assembly approved construction of a new lazaretto on Sullivan's Island, near the mouth of the harbor, but yellow fever still managed to infect the city.¹⁷ As Dr. Edward Bancroft observed, the 1732 epidemic was so lethal that "there were from eight to twelve whites buried in a day, besides people of color." The death toll climbed until "the ringing of bells was forbidden, and little or no business conducted."¹⁸ Without the prohibition on bell ringing, the numerous fatalities would have produced constant clangor during the summer months of 1732, which public officials feared might drive the healthy mad with anxiety and the sick to their graves.

As South Carolina's economy capitalized on the profitability of rice, importation of an African labor force expanded in kind. It did not take long for public officials to draw the connection between disease and the importation of slaves. The assembly placed special regulations upon ships arriving in Charleston from the African coast. Another pest house was erected on Sullivan's Island in 1754, and unlike ships from other ports of origin, all slave ships from Africa were required to stop there. Upon arrival, the human cargo remained in the pest house for a minimum of ten days while the ships were cleansed. Only then could they pass to Fort Johnson

¹⁴ Blake quoted in Duffy, "Yellow Fever," 190.

¹⁵ McCrady, *History of South Carolina*, 513.

¹⁶ McCandless, *Slavery, Disease, and Suffering*, 228.

¹⁷ *Ibid.*, 229. A lazaretto was a pest house that functioned as a makeshift convalescent facility. Although similar to a hospital, it was not attended to as such. The pest house on Sullivan's Island was notorious for being overcrowded.

¹⁸ Edward Nathaniel Bancroft, *An Essay on the Disease Called Yellow Fever, with Observations Concerning Febrile Contagion, Thyphus Fever, Dysentery, and the Plague* (London: Printed for T. Cadell and W. Davies by G. Sidney, 1811), 353.

on James Island, where the hold was examined a final time, and “any slaves on board with smallpox or any other contagious diseases” were left behind to endure an extended quarantine.¹⁹

As relations between the colonies and the mother country soured in the years preceding the American Revolution, South Carolina planters and merchants grew exceedingly apprehensive about how this deteriorating relationship might impact trade.²⁰ The demand for slaves increased with the rising market price of rice overseas and the opening of western lands in 1763. This created an insatiable appetite for slave labor. Notable merchant-planter Henry Laurens understood the gravity of slave importation and its epidemiological consequences better than most of his contemporaries. When the inter-colonial discussion of non-importation agreements ensued, Laurens predicted that “there will probably be a superabundant Importation of Negroes.”²¹ He feared—and rightfully so—that hasty importers could place Charleston “in danger of contagious distempers,” which were “very dreadful” even in years when vast quantities of slaves were not being introduced to the city.²²

Yet it would be naïve to assume that Laurens was the only Charlestonian to draw such connections. Merchants engaged in the trafficking of slaves were indisputably aware of the deleterious effects of African diseases. Philip D. Curtin, a scholar of the slave trade, has shown that crew mortality from disease alone “varied between 150 and 250 per thousand per voyage.”²³ Curtin’s findings stress that dealing in slaves was a deadly endeavor, not only for the enslaved Africans but also for the white crews. Crew deaths hardly went unnoticed by the merchants who employed them.²⁴

¹⁹ Kenneth Morgan, “Slave Sales in Colonial Charleston,” *English Historical Review* 113 (September 1998): 912.

²⁰ Elizabeth Donnan, “The Slave Trade into South Carolina before the Revolution,” *American Historical Review* 33 (July 1928): 827.

²¹ Henry Laurens to James Laurens, March 11, 1773, quoted in *ibid.*

²² *Ibid.* For more on the role of disease in the American Revolution, see Elizabeth A. Fenn, *Pox Americana: The Great Smallpox Epidemic of 1775–82* (New York: Hill and Wang, 2001), and McCandless, *Slavery, Disease, and Suffering*, 84–105. Non-importation agreements were adopted by the colonies in the years leading up to the Revolution, whereby colonists refused to purchase English goods or any item upon which England imposed duties. This extended to importation of slaves. A recent and innovative interpretation of the impact and significance of non-importation can be found in T. H. Breen, *The Marketplace of Revolution: How Consumer Politics Shaped American Independence* (New York: Oxford University Press, 2004).

²³ Philip D. Curtin, “Epidemiology and the Slave Trade,” *Political Science Quarterly* 83 (June 1968): 204.

²⁴ Modern science validates merchant suspicions and affirms that yellow fever was imported from Africa. See Juliet E. Bryant, Edward C. Holmes, and Alan D.

Historian Peter McCandless argues that by the mid 1750s, South Carolinians believed that yellow fever was imported and Africa was the source.²⁵ An examination of the quarantine acts passed during this period supports this inference. The 1744 act required every ship from Africa to anchor for a ten-day cleansing at Sullivan's Island. This provision was again adopted in subsequent acts of 1759 and 1783.²⁶ In addition, as McCandless points out, selling slaves "without having obeyed this regulation was punishable by forfeiture of the slaves." These acts, by their design, betray contemporary Carolinians' "assumption that slave ships were the main source of malignant disease."²⁷

Violation of quarantine was a serious offense. A fine of five hundred pounds sterling was imposed on "any person or persons [who] shall go onboard, or alongside of, any vessel" that was performing quarantine. Also, offenders had to "remain onboard" and were subjected to quarantine until the vessel was cleared. The boat used to approach the ship was subject to confiscation as well, along with any personal property onboard. If the offender did not pay the fine or happened to be a slave, then corporal punishment was inflicted, "not extending to life or limb" but "no less than thirty nine stripes on the bare back, in some public place."²⁸

Private and public complaints about the restrictiveness of the quarantine measures suggest that the laws were dutifully enforced. In his private letters, Laurens revealed that he had approximately thirteen hundred slaves at quarantine in 1756 and warned a Caribbean acquaintance not to bother shipping anything to Charleston if any contagious disease was prevalent in nearby Caribbean ports.²⁹ Unhappy citizens dependent upon maritime commerce for their livelihood voiced consternation in the editorials of the local newspapers, albeit most often under pseudonyms. A 1793 letter to the *Columbian Herald* by "A Subscriber" complained that the recent quarantine imposed on ships from the Delaware River was unnecessarily protracted. In a begging tone, the subscriber pleaded that since "the disorder" from

T. Barrett, "Out of Africa: A Molecular Perspective on the Introduction of Yellow Fever Virus into the Americas," *PLoS Pathogens* 3 (2007): 668–673.

²⁵ McCandless, *Slavery, Disease, and Suffering*, 230–233.

²⁶ "An Act to Prevent the Spreading of Contagious Distempers in This State," in Thomas Cooper and David J. McCord, eds., *Statutes at Large of South Carolina* (Columbia, S.C.: Printed by A. S. Johnston, 1836–1841), 4: 616–617 (1784).

²⁷ McCandless, *Slavery, Disease, and Suffering*, 231.

²⁸ "An Act for Preventing . . . the Spreading of Malignant and Contagious Distempers in the Province," Cooper and McCord, *Statutes at Large*, 4: 82 (1759); "An Act to Prevent the Spreading of Contagious Distempers," *ibid.*, 616 (1784). The price for a prime field hand circa 1783 fell to between 250 and 350 pounds sterling.

²⁹ Henry Laurens to Smith & Clifton, July 17, 1755, in *The Papers of Henry Laurens*, vol. 1, Sept. 11, 1746–Oct. 31, 1755, ed. Philip M. Hamer (Columbia: Published

the Delaware region had disappeared “and health restored,” Charleston officials should “repeal those resolves that bind hard upon the honest merchant.”³⁰ Another astute critic posed a logical question about the quarantining of vessels from the West Indies, asking if “it is not often the case” that the shipments are “generally of a perishable nature.” Thus, simply by performing the standard quarantine, would they not “become putrid?”³¹

For each of these pro-merchant editorials, however, there was a concerned resident advocating for stricter regulations and fearing epidemic catastrophe with every ship that approached the wharfs. Survivors of previous yellow fever epidemics could vividly recall the horrendous effects and deadliness of the disease, and their fears ran deep. Private letters were filled with anxiety and distress during the autumnal months. Yet by the mid 1790s, the contagiousness of yellow fever was being questioned by some prominent physicians. Recognizing the physical pervasiveness of the disease as well as the widespread fear of yellow fever that blanketed the low country is pivotal to understanding the contagion debate.

Dr. John Lining, a physician in Charleston, authored the earliest full-fledged medical description of yellow fever as observed in South Carolina in a letter to his colleague Dr. Robert Whytt of Scotland.³² He described the “chillness and horror” with which the disease invaded its host, explaining that it could be contracted in two forms. The first meant a quick, painful, and horrid death; the second allowed the victim to live, though not without great suffering. Both forms had similar onset symptoms. First, patients complained of a headache and “pain in the loins and extremities.”³³ They became extremely thirsty by the third day, concurrent with the commencement of nausea and vomiting. Stools became “fetid” and “inclined to a black color,” while urine was “limpid,” “sometimes a brownish color,” and often bloody by the end of the third day.³⁴

If the symptoms did not clear up in the first three days, they tended to get worse, along with the prognosis. Undoubtedly, the most frightening symptom was the vomiting of blood, also known as “the black vomit,” which

for the South Carolina Historical Society by the University of South Carolina Press, 1968), 294–295; McCandless, *Slavery, Disease, and Suffering*, 233.

³⁰ “For the Columbian Herald, Etc.,” *Columbian Herald* (Charleston, S.C.), December 14, 1793.

³¹ An Old Citizen [pseud.], “Remarks, on the Present Mode and Regulations of the Quarantine Law, in the Harbor of Charleston,” *City Gazette and Daily Advertiser* (Charleston, S.C.), August 21, 1800.

³² See John Lining, *A Description of the American Yellow Fever, Which Prevailed at Charleston, in South Carolina, in the Year 1748* (Philadelphia: Printed for Thomas Dobson, 1799).

³³ *Ibid.*, 9–10.

³⁴ *Ibid.*, 14–15.

appeared in what Lining deemed the second stage of the fever's progression. Semi-digested food and blood created the black color that upon closer examination consisted of "small, flakey" particles like coffee grounds that adhered to "the mucus which lined the stomach."³⁵ According to Lining, this symptom was the mark of death for the patient.³⁶

The "yellowness" set in during this second stage, Lining stated. It usually became visible earliest "in the whites of the eyes," but soon, "that icteritious-like colour" was "diffused over the whole surface of the body." As the disease progressed, Lining continued, the skin generally acquired "a deeper saffron-like colour" that would "increase surprisingly quick" a little before death.³⁷ In the most severe cases observed by Lining in 1739 and 1745, hemorrhaging occurred from the nose, mouth, ears, and other body orifices.

Yellow fever plagued Charleston sporadically from the 1750s to the 1780s, though David Ramsay claimed "there was no epidemic attack of the disease" in that forty-year period. While historians have since documented at least two yellow fever epidemics in the city between 1750 and 1790, Charleston was spared any ravenous outbreaks like those of the 1730s and 1740s. This did not erase yellow fever from the memories of older Charlestonians, however. Burdened by its ever-looming threat and familiar with its destructive capability, many Charlestonians continued to bear witness to the fever, either through lived experiences or oral family history. When "a new era of the yellow fever commenced" in 1792, which raged in nearly every year for the remainder of the decade, any inhabitants whose fears had dissipated in the lull found their terror fully renewed.³⁸

Private letters and business correspondence written in Charleston during the summer and autumnal months of the 1790s are replete with concerns over yellow fever. Many of the surviving manuscripts contain at least one

³⁵ *Ibid.*, 18. Dr. Lining's diagnostic efforts and early descriptions of the disease are remarkable in their accuracy. Modern medical understanding of yellow fever and its symptoms are succinctly summarized by the World Health Organization (WHO). See WHO, "Yellow Fever," <http://www.who.int/mediacentre/factsheets/fs100/en/> (accessed December 15, 2012). According to the WHO, the incubation period is three to six days and the disease—much like Lining observed—has two phases. The "acute phase" lasts three to four days, after which 15 percent of modern victims move into a second "more toxic phase." At this point, they start to experience the symptoms so deftly described by Lining within twenty-four hours of the initial remission. The disease still proves fatal for one-half of all severely infected persons without treatment.

³⁶ Not all patients who died from the fever suffered "the black vomit."

³⁷ Lining, *Description of the American Yellow Fever*, 20.

³⁸ David Ramsay quoted in Bancroft, *Essay on the Disease Called Yellow Fever*, 355. This also was largely the case for Philadelphia. See Duffy, "Yellow Fever in Colonial Charleston," 196.

reference to personal well-being or the health of family members. Often, they discuss the patterns of sickness in the region. A close examination of these records not only illuminates yellow fever's immediate impact on commercial activity in Charleston but also reflects its effect on commerce at the port since 1732.

John Chesnut, a Charleston planter-landlord, wrote to a friend that he "was so much reduced" by fever that he could not travel.³⁹ During his lengthy sickness, Chesnut fell behind in business for the season and was tardy on payments to merchants Adam and William Tunno, through whom he imported most of his consumer durables. William Loughton Smith frequently discussed the health of the city in correspondence with friends. In 1797 he intimated to David Campbell that the summer had been unusually unhealthy, and even he had "a slight attack of fever."⁴⁰

Mary Williamson wrote to inform her friend, Mrs. Hutson of Cedar Grove Plantation, that "my Dear Mama is quite sick again." Williamson went on to voice her concern that her husband might also get sick, and if so, it would cause her to be "more cast down then [*sic*] usual." If he caught the fever, then she could "expect to be in the same situation," since she had to take care of both him and her mother. Thinking about the months left in the sickly season caused her "great anxiety and fear for all three of us." Williamson's fear was so profound that despite her present state of perfect health, she promised to visit Hutson "if I live 'till the cold season."⁴¹

The papers of the Ball family capture the anxiety experienced by Charleston families especially well. With a son off at Harvard College, John Ball and his wife wrote to New England regularly. Illness and distress over yellow fever pervade nearly every letter. Charleston was free of the fever in 1798, but Boston was not. As a concerned parent, John wrote to his son, also named John, in August that he and his wife grew alarmed "about the malignant fever said to be raging in Boston." They advised John Jr. to "avoid contagion by going somewhere in the country," assuring him that college was only a four-year commitment and "you are not bound by any tie to risk your life" to obtain a degree. John Ball Sr. informed his son that

³⁹ John Chesnut to [illegible], June 25, 1789, box 12/33, folder 35, John Chesnut Papers, 1741–1814, South Carolina Historical Society (SCHS), Charleston.

⁴⁰ William L. Smith to David Campbell, August 8, 1797, box 11/474, folder 1, William Loughton Smith Papers, 1774–1834, SCHS. There is a tone of surprise in the letter because often men of his stature would remove their families to summer residences outside of the urban center to avoid pestilential diseases in the autumnal season.

⁴¹ Mary D. Williamson to Mrs. Hutson, August 31, 1794, box 11/548, folder 21, Hutson Family Papers, 1773–1876, SCHS.

Charleston was "so far healthy, with no epidemic yet."⁴² Still, John Jr.'s mother feared that the coming months would not remain healthful. Writing to her son in her husband's absence in early September, she told him that his father was "in the country" and her "fears are all alive . . . of his getting the fever."⁴³ Although people had fallen ill and some had died by the early autumn of 1798, John Ball Sr. held that the deaths were attributable to "a kind of nervous fever" and there had been no "black vomit or symptoms of yellow fever."⁴⁴

Charleston was not so lucky in 1799. Acknowledging that John Jr.'s "anxiety must be great for the welfare of your relatives during this sickly season," John Ball Sr. felt compelled to write his son to alleviate concerns. While the family was in fine health, John Sr. told his son that indeed, the prevailing sickness was epidemic yellow fever, or "black vomit."⁴⁵ The most sobering line for John Jr. to digest must have been the news that a Mr. King had fallen ill to the fever. King was a family friend and "no stranger to the air of Charleston." This deserved noting by John Sr. because the disease tended to weigh heaviest on travelers and transients. It is likely that this was what prompted John Sr. to remain in the countryside for five weeks that summer, after having fallen ill there with a lesser distemper.⁴⁶

Ledger books and import records for plantations reveal that wealthy citizens tried to educate themselves on the diseases that most frequented the low country. On a list of imported goods for Charles Cotesworth Pinckney in 1803, almost half pertained to disease. Five of the items were books such as *Healde's Pharmacopeia* and *On Diseases*, by Dr. Williams of London. The footnotes drawn up by the merchant office suggest that Pinckney had ordered more titles, including Dr. Mosley's *On Diseases of Tropical Climates*, which was "out of print," and a forthcoming "new and improved edition" of *Edinburgh Practice of Physic*.⁴⁷ If a book could not be purchased but was considered essential, the late-eighteenth- and early-nineteenth-century practice of transcribing it shorthand was often employed. Such a time commitment underscored the desire for and valuation of such books and their contents. This is exactly what Charles Drayton did in 1806 with Wil-

⁴² John Ball Sr. to John Ball Jr., August 27, 1798, box 11/516, folder 10, Ball Family Papers, 1631–1895, SCHS.

⁴³ Jane Ball to John Ball Jr., September 4, 1798, *ibid.*

⁴⁴ John Ball Sr. to John Ball Jr., September 30, 1798, *ibid.*

⁴⁵ John Ball Sr. to John Ball Jr., October 29, 1799, box 11/516, folder 11B, *ibid.* The letter includes a list of family, friends, and acquaintances who had either died or become infected.

⁴⁶ John Ball Sr. to John Ball Jr., September 29, 1799, *ibid.*

⁴⁷ Charles C. Pinckney, "Bought of F&C Rivington," January 14, 1803, box 208/2, folder 1, Pinckney-Means Family Papers, 1701–1983, SCHS.

liam Cullen's *First Lines of the Practice of Physic*. The book was printed in two volumes and offered comprehensive descriptions of every conceivable disease and disorder, yet Drayton directed his efforts toward copying "the differences of fevers and the causes" and other sections most pertinent to low-country living.⁴⁸

Individuals were more outspoken about yellow fever and its impact on Charleston in private correspondence than in the South Carolina newspapers. It was unquestionably underreported, as papers refused to identify yellow fever in print until its presence was undeniable.⁴⁹ After the major yellow fever crisis in Philadelphia in 1793, however, the issue became difficult to ignore, especially given the outbreaks Charleston faced in the years immediately preceding and following Philadelphia's crisis.

The South Carolina newspapers may not have wished to print articles on domestic cases of yellow fever, but Philadelphia's crisis was fair game. The *Columbian Herald* of Charleston ran a piece on how disastrous the outbreak had been for Philadelphians in terms of both public health and commerce. The author of the column, a Charleston resident who was observing the situation in Philadelphia from New York, declared that "the terror had become universal," leading to a mass exodus. According to the article, a supposed "12 or 15,000 of the inhabitants of Philadelphia deserted the city." The writer took exception to the way other states reacted to the crisis. The trepidation created by the black vomit had "extinguished the feelings of humanity." The "unfortunate fugitives" who fled—many of them in fine health—were unwelcome by their neighbors and turned away from places of asylum.⁵⁰

Indeed, fear of contagion made obtaining asylum difficult for Philadelphians. New York passed resolves almost immediately after the panic broke out and sought strict quarantine measures "to prevent the introduction of the disorder among them."⁵¹ Cities in other states followed suit, and South Carolina was no exception. The resolves passed by the committee in Charleston stand out due to their wording. Instead of subjecting ships from Philadelphia to quarantine, as measures in other states had, Charleston

⁴⁸ See Charles Drayton's transcription in box 8, folder 18, Drayton Papers, 1701–2004, Special Collections, Addlestone Library, College of Charleston. See also William Cullen, *First Lines of the Practice of Physic*, 4 vols. (Dublin: Printed for Thomas Armitage, 1777–1784). This work was reprinted in 1790 and again in 1812. It is likely that Drayton was transcribing the 1790 reprint.

⁴⁹ McCandless, *Slavery, Disease, and Suffering*, 116–118. The newspapers did not want to incite panic among the citizenry or cause unnecessary harm to commerce by declaring the outbreak epidemic too early, especially if it turned out to be a false alarm.

⁵⁰ "New York, October 19," *Columbian Herald*, November 7, 1793.

⁵¹ *Ibid.*

forced quarantine on all "vessels coming from the river Delaware."⁵² The blanket regulation was designed to catch transshipments, whereby sloops would stop momentarily at a port with a cleared bill of health to evade quarantine upon arrival in Charleston.

The comprehensive quarantine solicited an angry letter in the *Columbian Herald* the following week. The writer asked how it could be justified as necessary to shut down "every port in the Delaware." Using Trenton, New Jersey, as an example, he heaped ridicule on the Charleston resolve. If Trenton had rigorous quarantine measures imposed on ships from Philadelphia and was "equally vigilant" in exercising them, then why force these ships to observe a second oppressive quarantine?⁵³

Because quarantine resolves relied on communication flow between ports, rumors could be damning to commercial activity. As one Charlestonian remarked, it was no doubt the "magnifying tongue of rumour," which had "painted in the most frightful colour" the horrors and contagiousness of the disorder in Philadelphia, that caused the desertion of the city.⁵⁴ Despite being largely conjecture, there is some truth to the columnist's remarks. Sometimes the slightest indication of the presence of yellow fever was enough to lead to sanctions, whether or not the information was reliable. An excerpt from a letter subsequently published in the *Charleston City Gazette and Daily Advertiser* speaks to the manner in which epidemiological intelligence was transmitted:

Mr. William Weaver, to Mr. Jacob Weaver, Dated Kingston, 3d of June, 1794, Communicated to the Governor by Mr. Robert Ralston:

"The yellow fever is raging very bad on board the shipping here. The fleet that arrived a few days ago have most all their crews down with it, and die very fast; and a great many gentlemen, who came passengers, have died.

I think it would be necessary to make every vessel ride quarantine, that comes from Kingston to Philadelphia."⁵⁵

Public health intelligence was not always published in the newspaper, but the message and the messenger who conveyed it were often enough to cause officials to issue proclamations of quarantine. Many proclamations of this kind were riddled with suggestive qualifying clauses such as "there

⁵² "Charleston, Dec. 7," *Columbian Herald*, December 7, 1793.

⁵³ "For the Columbian Herald, Etc.," *Columbian Herald*, December 14, 1793.

⁵⁴ "New York, October 19."

⁵⁵ "Extract of a Letter from Mr. William Weaver, to Mr. Jacob Weaver, Dated Kingston, 3d of June, 1794, Communicated to the Governor by Mr. Robert Ralston," *City Gazette and Daily Advertiser*, July 21, 1794. See also the June 28 and September 12, 1797, editions.

being reason to suppose" or "I have received such further information respecting the progress of an infectious disease."⁵⁶ It was not a foolproof procedure by any means. Nevertheless, the reality that the commercial fate of a city could and sometimes did hinge upon general observations of a single person (and their reputation) was a practice that American ports had grown accustomed to by the turn of the century. As it stood, there was no method for verifying claims made about the health of one port efficient enough to warrant preventative measures at another.

Charleston's commerce was stifled in the summer of 1796 for this precise reason. The port of Savannah had imposed quarantine on vessels from Charleston. The measure was created in response to what Charleston intendant (mayor) John Edwards called "erroneous intelligence." Immediately upon receiving word of the Savannah proclamation, the city council directed Edwards to request that the Medical Society of South Carolina "give their opinion on the real situation of the health of the city." The intent was clear: if the Medical Society gave Charleston a clean bill of health, then quarantines could not justifiably be imposed on ships leaving Charleston Harbor by "any of the sea-ports on the continent."⁵⁷

When Philadelphia was struck a second time by yellow fever in 1797, a similar panic swept through the region, and the drama repeated itself in the Charleston newspapers. Estimates varied from column to column, but many claimed that "half of its [Philadelphia's] inhabitants fled the city." The Philadelphia fever was rumored to have reached Providence, Rhode Island, where it "carried off several," but the *City Gazette and Daily Advertiser's* correspondent declared New York to be healthy. In a pitiful tone, his letter beseeched other parts of the country not to punish New Yorkers simply because of their city's proximity to Philadelphia. At the height of the epidemic, the rumors of black vomit and urban flight made it nearly impossible for New Yorkers to travel out of town. Boarding houses as far as "twenty miles and beyond" were full, and the cost of renting a room skyrocketed, pricing out the common traveler if a vacancy became available.⁵⁸

If there was a common thread concerning public health that ran through the reflections in newspapers all along the Atlantic coast and private correspondence during the 1790s, it was that yellow fever was repulsive and terrifying, and people were willing to take extreme precautions to prevent

⁵⁶ Ibid.

⁵⁷ "Charleston, 11th of August, 1796," *Columbian Herald*, August 12, 1796.

⁵⁸ "Extract of a Letter from New York, September 8," *City Gazette and Daily Advertiser*, September 21, 1797. See also Matthew Carey, *A Short Account of the Malignant Fever, Lately Prevalent in Philadelphia: With a Statement of the Proceedings That Took Place on the Subject in Different Parts of the United States* (Philadelphia: Printed by the author, 1793), 55.

contracting the disease. It might seem strange, then, that at the close of the decade, the Medical Society of South Carolina concluded that yellow fever was neither an imported disease nor contagious. Doubly strange was how the consensus was reached during the autumnal season of 1799, when yellow fever was epidemic in Charleston.

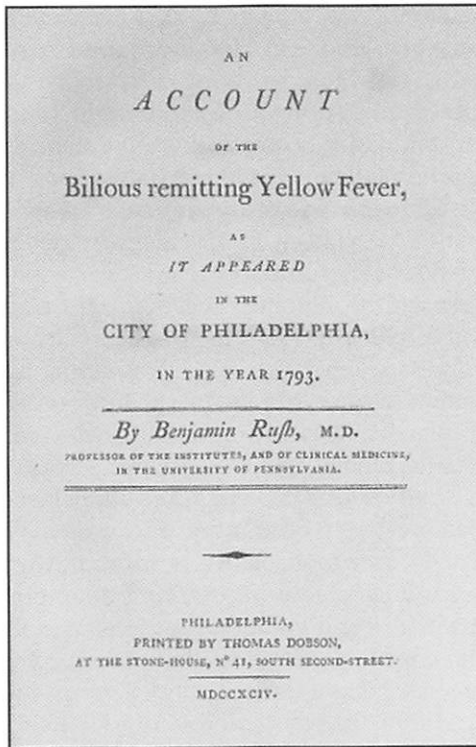
The debate over importation and transmissibility started in earnest in the months following the 1793 epidemiological crisis in Philadelphia. The nation's capital from 1790 to 1800, Philadelphia also was the epicenter for medical knowledge in the United States. In 1783, Dr. Benjamin Rush proposed establishing in Philadelphia a medical society similar to the Royal College of Physicians in London. Before long, Rush had the support of twenty-three other physicians, and the College of Physicians of Philadelphia held its first meeting in 1787. They accumulated medical books, established a library by 1788, and gradually became involved in public health issues facing the city.⁵⁹

Only six years after its founding, the college's resolve was put to the test. Tracing the yellow fever epidemic to its source became one of the primary goals of the College of Physicians. After careful observation and adherence to temporal and spatial sickness patterns, Rush was convinced he had found the origin of the fever: "a quantity of damaged coffee" left to rot on a wharf adjacent to the houses where the fever first appeared. The coffee was damp and sitting in the sun, where it "putrefied . . . to the great annoyance of the whole neighborhood." Since he was able to connect all of his sick patients to the "putrid exaltations" of the rotting coffee on the wharf, Rush concluded that yellow fever was not imported, and he was unconvinced as to its contagiousness.⁶⁰

Rush, a founding father and signer of the Declaration of Independence, had a formidable reputation and was arguably the young nation's most famous physician. Yet his argument for the domestic origin of the disease was not convincing to the either the citizens of the city or the College of Physicians, the latter of whom "adopted the traditional opinion" that yellow fever could only exist "by importation from the West Indies." According to Rush, the college went beyond disagreeing with his medical opinion and endeavored to ostracize him completely. Rush wrote that the efforts "to

⁵⁹ College of Physicians of Philadelphia, "Detailed History of the College of Physicians of Philadelphia," <http://www.collphyphil.org/Site/detailedhistory.html> (accessed May 7, 2013). The college was founded in 1787 and is considered the oldest professional medical organization in the country. Led by Dr. Benjamin Rush, twenty-four physicians formed the college "to advance the science of medicine and thereby lessen human misery."

⁶⁰ Benjamin Rush, *An Account of the Bilious Remitting Yellow Fever, as It Appeared in the City of Philadelphia, in the Year 1793* (Philadelphia: Printed by Thomas Dobson, 1794), 12, 24.



Title page of Dr. Benjamin Rush's *An Account of the Bilious Remitting Yellow Fever, as It Appeared in the City of Philadelphia, in the Year 1793 (1794)*. Rush's theory that yellow fever was neither imported nor contagious was rejected roundly and with such acrimony by his medical colleagues in Philadelphia that by the time this account was published, he had resigned from the College of Physicians of Philadelphia, which he helped to found in 1787. Rush's controversial opinions on yellow fever were given greater credence in South Carolina than anywhere else in the United States.

discredit the account I had given of this fever" were methodical, and some of his colleagues allegedly treated him with "ridicule and contempt."⁶¹

Rush's theories were slightly more convincing in South Carolina. By November 1793, Charleston residents entered the origination dispute via

⁶¹ Ibid, 15, 26. For an opposing viewpoint to Rush, see Carey, *Short Account of the Malignant Fever*, 55, 67, 70. Carey claimed the disorder was "unquestionably" imported from the West Indies.

the newspapers. The writer of a letter to the *Columbian Herald* complaining about quarantine regulations in Charleston used Rush as a pillar of his argument. The matter was "not yet reduced to any certainty" among the physicians, he pointed out, but if Dr. Rush thought yellow fever was not imported, then a reexamination of quarantine regulation might be prudent.⁶² That contention was immediately turned on its head by another subscriber, however, who felt "a quarantine of twenty days" was "rather too short, more especially as the physicians were strangely divided in their opinions" on the origin of the disease.⁶³

The debate continued throughout the remainder of the decade. Governor Charles Pinckney thought it relevant to speak directly about the dispute in his message to the state legislature in 1797. A strong proponent of rigid quarantine, Pinckney did not care whether yellow fever was the result of "too great a neglect of cleanliness in drains and streets" or "increased intercourse with the Mediterranean and West Indian islands." What mattered was preventing it at all costs. Thus, he asked the legislature to consider raising the fines for breaching quarantine and establishing a place for a new pest house. Lastly, he proposed giving more power to the executive branch, which would allow governors to enforce quarantine by martial law if necessary.⁶⁴ Pinckney's rigid position hardly settled the disagreement. Concerned citizens continued submitting letters to the press, perpetuating the dialogue. One such person, writing under the pseudonym "An Old Citizen," was more willing than the governor to take sides. Proclaiming that there could be "no doubt that the fevers . . . have been owing to importation," he believed they would only be eradicated through "great strictness to the quarantine."⁶⁵

By the turn of the century, Rush's position on the domestic origin of the disease had not changed. Actually, it was further entrenched. Despite having labored "six years to no purpose" in trying to persuade Philadelphians that yellow fever was not imported, Rush decided to "make one more effort" by publishing a pamphlet on the means of preventing the disease.⁶⁶ In the pamphlet, he continued to espouse that "putrid vegetable and animal exhalations" produced yellow fever. He also argued that the fever was

⁶² "New York, October 19."

⁶³ "For the *Columbian Herald*, Etc."

⁶⁴ "From Columbia: Legislature of South Carolina," *City Gazette and Daily Advertiser*, November 29, 1797.

⁶⁵ An Old Native [pseud.], "Messrs. Freneau and Paine," *ibid.*, April 27, 1799.

⁶⁶ Rush, *Observations upon the Origin*, 3. Since filthy, rotting organic matter was "highly concentrated" by the docks, it was not surprising to Rush that some thought the disease imported. *Ibid.*, 4.

not contagious.⁶⁷ Unfortunately for Rush, this pamphlet was rejected by the College of Physicians as readily as the first. Such was not the case with the Medical Society of South Carolina, though. When David Ramsay addressed the society in December 1799, he echoed Rush's sentiments. But how did Charleston arrive at this anomalous perspective on the issue?

By 1799, Charleston was a unique North American metropolis, epidemiologically speaking. There was an "emergence of a largely immune population" in Charleston, writes Peter McCandless, that reduced yellow fever victims to strangers.⁶⁸ Charleston was the only port that had suffered enough exposure to the disease to be able to obtain high levels of immunity. The situation was different in Philadelphia, which had a greater population of recent European immigrants and much less exposure to the fever, thus accounting for the sobering death rate experienced there.

That said, white Charlestonians' relative immunity alone is not enough to explain the solidarity of the Medical Society's anti-importation, anticontagionist viewpoint, especially considering the governor's recent hard-line contagionist stance. Relative immunity becomes a weaker foundation when private letters are revisited. The correspondence between John Ball and his son illustrates the uncertainty surrounding the contagiousness of yellow fever. John Ball Sr. still removed to the country in the sickly season to avoid the disease, as did many of the wealthy citizens who could afford to do so. Moreover, Ball's decision to remain in the country while yellow fever ravaged the city was not entirely of his own making. He claimed that it was what "the physicians advised."⁶⁹ He also reported to his son that a family friend, "no stranger to the air of Charleston," fell sick with the black vomit.⁷⁰ Even David Ramsay knew that immunity was "limited in some way," as his sister-in-law and longtime low-country resident Mary Pinckney died of the disease in 1794.⁷¹

Why would doctors who promoted the idea that yellow fever was not imported or contagious advise local whites to leave town when it surfaced? If strangers were the only ones in danger of contracting the disease, then why bother taking such precautions? One inference emerges from the records to this end: society at large was less than convinced that yellow fever was noncommunicable. In fact, people's actions, letters, and newspaper submissions indicate quite the opposite. And if the existing records complicate our

⁶⁷ Ibid, 14. Rush was careful to note "clothes impregnated with the effluvia" might "produce a similar disease," but that was as far as he was willing to go in the direction of contagion.

⁶⁸ McCandless, *Slavery, Disease, and Suffering*, 79.

⁶⁹ John Ball Sr. to John Ball Jr., September 24, 1799, box 11/516, folder 11B, Ball Family Papers, SCHS.

⁷⁰ John Ball Sr. to John Ball Jr., September 29, 1799, *ibid.*

⁷¹ McCandless, *Slavery, Disease, and Suffering*, 110.

understanding of the Medical Society's anti-importation, anticontagionist position, then the decision of the society to advocate for relaxation of quarantine regulations seems on the surface beyond comprehension. Temporal context, however, reveals a key component in explaining this choice.

As it happened, the Medical Society began pushing for relaxed quarantine enforcement for yellow fever the same year that the legislature was to vote on the reopening of the foreign slave trade.⁷² The timing is suspect for two reasons. First, according to David Ramsay, the Medical Society had uniformly felt yellow fever was not contagious "since the year 1792."⁷³ This is likely an exaggeration as it predates Rush's opinion, which Ramsay consulted in order to shape his own. Either way, if Ramsay can be taken at his word, then the society logically would have advocated for relaxation in the early 1790s, rather than waiting nearly ten years. Perhaps they worried about lessening quarantine regulations during a particularly sickly span of years, but that seems improbable because the outbreak in 1799 was the worst of the decade. Secondly, this precise moment was the first time that backcountry South Carolinians, who largely supported reopening the slave trade, felt they had the political influence to do so. Before 1801, the General Assembly did not even take roll call votes because there were so few legislators in support of the idea that it "provoked little controversy."⁷⁴ Disaggregating the reopening of the slave trade and its implications, then, clarifies the actions of Ramsay and the Medical Society.

When South Carolina closed its ports to the foreign slave trade in 1787 and the domestic trade in 1792 over fear of insurrection in the wake of the Saint Domingue slave revolt, Georgia readily picked up Charleston's slack. Between 1787 and 1799, Savannah imported over eighty cargoes of foreign slavers with holds of fifty or more slaves and countless additional sloops carrying fewer.⁷⁵ The volume increased dramatically throughout the decade as demand for slave labor intensified after the advent of Eli Whitney's gin, which made cotton farming more egalitarian, efficient, and lucrative.⁷⁶

With cotton prices on the rise and speculators moving into the backcountry to plant the staple, western South Carolina experienced precipitous

⁷² Ramsay, *Selections from His Writings*, 151; Brady, "Slave Trade," 611.

⁷³ Ramsay, *History of South-Carolina*, 1: 48.

⁷⁴ Brady, "Slave Trade," 608, 611–612.

⁷⁵ James A. McMillin, *The Final Victims: Foreign Slave Trade to North America, 1783–1810* (Columbia: University of South Carolina Press, 2004), 85.

⁷⁶ Cotton was considered more democratic because it could be grown on a smaller scale and still turn a profit, unlike rice which required much more start-up capital and usually a slave force of at least forty. See Philip D. Morgan, *Slave Counterpoint: Black Culture in the Eighteenth-Century Chesapeake and Lowcountry* (Chapel Hill: Published for the Omohundro Institute of Early American History and Culture, Williamsburg, Va., by the University of North Carolina Press, 1998).

increases in population as the nineteenth century approached.⁷⁷ Historians approximate that between 1790 and 1800, cotton exports in South Carolina skyrocketed from less than ten thousand bales annually to upwards of six million per year at the close of the decade. Despite the law prohibiting the foreign and domestic slave trade, many up-country settlers were able to acquire their labor force through clandestine dealings with Georgia. This was hardly ideal for the profit-seeking planters, but it was better than the situation after 1798, when Georgia halted foreign slave importations.⁷⁸

None of this was news to the prominent physicians who belonged to the Medical Society. Yet these doctors were primarily low-country men. Plateauing prices of low-country agricultural staples meant coastal planters would have gained more by keeping the slave supply low, exporting their excess labor, and selling at higher prices.⁷⁹ As some historians have argued, many low-country planters had an economic interest in the foreign slave trade staying closed in order to maintain the value of their assets, and the same held true for some members of the Medical Society.⁸⁰ Therefore, the economic realities of the low country appear at odds with David Ramsay and the Medical Society's decision to promote a policy change that would facilitate the trade if it were voted open. Certainly, some low-country planters and merchant middlemen stood to gain from reopening the trade. Sea island cotton, in particular, was fetching first-rate prices in the market, and coastal cotton saw spikes in production similar to those experienced in the backcountry. During the years in question here, from 1798 to 1801, production of sea island cotton rose from two million pounds to over eight million pounds annually.⁸¹

⁷⁷ The estimated white population of the up country grew from 112,000 in 1790 to 166,500 ten years later. During that same decade, the low-country population saw no change. Brady, "Slave Trade," 618. This, Brady contends, shows that the up country was being peopled with immigrants, not just sons of the low country who settled their families in the West.

⁷⁸ McMillin, *Final Victims*, 86.

⁷⁹ Jed Handelsman Shugerman, "The Louisiana Purchase and South Carolina's Reopening of the Slave Trade in 1803," *Journal of the Early Republic* 22 (Summer 2002): 266.

⁸⁰ For an articulate and thorough analysis on the demise of low-country staples and economic fragmentation in the Lower South, see Peter A. Coclanis, *The Shadow of a Dream: Economic Life and Death in the South Carolina Low Country, 1670–1920* (New York: Oxford University Press, 1989), 115–153. See also Ira Berlin, *Many Thousands Gone: The First Two Centuries of Slavery in North America* (Cambridge, Mass.: Belknap Press of Harvard University Press, 1998), 303–307.

⁸¹ Brady, "Slave Trade," 612. For an estimate of sea island cotton production, see Lewis Cecil Gray, *History of Agriculture in the Southern United States to 1860* (1933; repr., Gloucester, Mass.: Peter Smith, 1958), 679–733.

By 1802 Edgefield District residents could not contain their protest any longer. The restrictions on bringing slaves into the state, the grand jury complained, left "large tracts" of arable land "unsettled and uncultivated" because labor could not be procured. This state-imposed "insurmountable bar," according to Edgefield residents, needed to be lifted if South Carolina wished to encourage "men of property" to settle there.⁸² That same year, "one hundred and four inhabitants and freeholders" from Abbeville District joined Edgefield in petitioning for the repeal of the restrictions on bringing slaves into the state.⁸³ When the debate to reopen the trade commenced in the General Assembly, smuggling was a major part of the consideration to lift the ban. Smuggling came up during debates in Congress too, where Thomas Lowndes of South Carolina said that enforcement was exceedingly difficult given the "navigable rivers running into the heart of it [the state]." This circumstance, he argued, was being exploited by "our eastern brethren [northern merchants]," who had lined their pockets for years by smuggling slaves.⁸⁴ Why, then, his logic followed, should South Carolina not profit from the trade if it was incapable of policing smuggling?

State senator Robert Barnwell of Saint Helena Parish held deep reservations about the consequences of lifting the ban, asserting that it "would lead to ruinous speculations" reminiscent of the specie drain of the 1780s. Speaking on behalf of low-country interests, he also argued that slaves held by coastal planters "would not be worth half" of their present value following "the influx of these persons." While Senator William Smith of York District agreed with Barnwell on many points, he claimed he "would vote for the bill"—not because he liked the idea personally, but in the belief that preventing its passage would "be impossible." The demand for labor and the increase in smuggling created a momentum that in Smith's mind could not be reversed. Indeed, people expected the trade to be opened by vote months before the bill hit the floor of the assembly in December. Advertisements in the newspapers appeared from merchants marketing goods "calculated purposely for the African Trade" as early as October.⁸⁵ One observer's account is particularly revealing: "The news [of the vote

⁸² Presentment of the Edgefield District Grand Jury quoted in Brady, "Slave Trade," 611.

⁸³ "To the Honorable Speaker and the Members of the House of Representatives of the State of South Carolina," ca. 1802, Records of the General Assembly, no. 1567, South Carolina Department of Archives and History (SCDAH), Columbia.

⁸⁴ Thomas Lowndes quoted in Dwight F. Henderson, *Congress, Courts, and Criminals: The Development of Federal Criminal Law, 1801–1829* (Westport, Conn.: Greenwood Press, 1985), 162.

⁸⁵ Elizabeth Donnan, ed., *Documents Illustrative of the History of the Slave Trade to America*, vol. 4, *The Border Colonies and the Southern Colonies* (Washington, D.C.: Carnegie Institution of Washington, 1935), 502, 507.

in Columbia] had not been five hours in the city before two large British Guineamen, that had been laying off . . . the port for several days, expecting it, came up to town . . . A great change at once took place in everything. Vessels were fitted out in numbers for the coast of Africa, and as fast as they returned, their cargoes were bought up with avidit [*sic*].”⁸⁶

David Ramsay was among those who added to the momentum for reopening the slave trade, and he would have benefitted greatly had it been reopened sooner. Taking a closer look at Ramsay, contextual details lend greater clarity. Although opposed to slavery when he moved to South Carolina in 1774 to practice medicine (at the urging of his mentor, Benjamin Rush), Ramsay’s position on the “peculiar institution” slowly but surely underwent transformation. After election to the legislature and acceptance into the Charleston elite, Ramsay soon became isolated socially because of his views on slavery. By the 1780s, his antislavery background succumbed to his personal ambition, and he no longer voiced his opinion on such matters in the assembly.⁸⁷ His moral reservations further deteriorated when he entered his second marriage. His new wife, Martha Laurens, was the daughter of Henry Laurens, the largest slave owner and importer in the state, and her dowry included a number of slaves. Suddenly, Ramsay was a member of the slave-owning class.

After marrying into the southern slaveholding aristocracy, Ramsay started to live extravagantly. Before long, his developing affinity for adornment and luxury proved unsustainable. In the late 1780s, he began “accumulating obligations faster than he could meet them.” His debts amassed quickly in the 1790s, leading him to mortgage a few of his properties, and by 1797 his outstanding debt to his brother-in-law amounted to over ninety-seven thousand dollars. Ramsay was forced to take advantage of the Insolvent Debtors Act in 1798, which relieved much of his financial burden. However, he continued to struggle with personal finances until his death in 1815.⁸⁸ His publishing record—most of his major works were plagiarized—indicates that he attempted to write his way into solvency, probably to provide an inheritance for his children. Whatever the case, his destitution was surely a motivational factor in his decision making as the new century dawned.⁸⁹

⁸⁶ Ebenezer S. Thomas quoted in *ibid.*, 503.

⁸⁷ Arthur H. Shaffer, “Between Two Worlds: David Ramsay and the Politics of Slavery,” *Journal of Southern History* 50 (May 1984): 175, 187.

⁸⁸ Ramsay, *Selections from His Writings*, 26–28.

⁸⁹ Elmer Douglass Johnson, “David Ramsay: Historian or Plagiarist?” *South Carolina Historical Magazine* 57 (October 1956): 193; Ramsay, *Selections from His Writings*, 27. Ramsay copyrighted his works under his children’s names so creditors could not seize royalties.

Examining the nature of Ramsay's debt is particularly revealing. At the very least, one-third, or approximately thirty thousand dollars, of what he owed can be attributed to investments he made in the Santee Canal Company. The purpose of the Santee Canal Company, chartered in 1786 under the name "Company of the Inland Navigation," was to connect the Santee and Cooper Rivers. It was designed to link up-country farmers and their produce to Charleston and aid low-country plantations by supplying them with food grown elsewhere. Although this prospect was attractive to many low-country planters and the company was funded mostly with low-country capital, it took seven years to finally break ground. The significance of the canal project—at least in the eyes of the investors—grew substantially in the 1790s with the invention of the gin and short-staple cotton expansion in the backcountry.⁹⁰

David Ramsay was one of these canal speculators. He was late putting in his money, but when he did, he invested aggressively. In 1792, upon the death of Henry Laurens, Ramsay plunged every penny of his wife's twenty-five-thousand-dollar inheritance in the company. Perhaps in gratitude, he was put in charge of taking subscriptions for Santee Canal stock that autumn and elected president of the company in 1793. Initially, the projected cost of the canal was fifty-five thousand pounds, but it became evident early in the digging process that overruns were inevitable. When finally completed in 1800, the canal cost approximately four times the original estimation. The problems derived, through no fault of Ramsay's, from the location chosen to begin the project. Engineer John Christian Senf miscalculated the difficulty of carrying the canal over a ridge sixty feet above sea level, bringing construction to a crawl. By 1794 stockholders' confidence in the canal was diminishing, as evidenced by advertisements selling their shares at heavily discounted rates.⁹¹

Ramsay actively promoted schemes to generate interest, raise money, and lower expenses for the project. As a cost-saving measure, he petitioned the state senate to exempt "the slaves now working on the Santee Canal from performing and being made liable to perform any of the road duty in this State." If the state siphoned off part of the enslaved workforce from the canal, the company would be forced to hire poor white laborers at a slightly higher rate. To coax the senate into approving the exemption, Ramsay assured them that the slaves "were engaged in a Service extremely beneficial to the Country." He failed to mention that the exemption would be highly beneficial to him and his coterie of speculators. As president of both the Santee Canal Company and the senate body he was petitioning

⁹⁰ See F. A. Porcher, *The History of the Santee Canal* (Charleston: South Carolina Historical Society, 1903).

⁹¹ Porcher, 5, 8–9; Ramsay, *Selections from His Writings*, 136.

on behalf of the company, Ramsay did not seem the least bit bothered by the blatant conflict of interest.⁹²

In his efforts to generate revenue for the canal, Ramsay advertised the "Santee Canal Lottery" in the newspapers. "The Santee Canal," the advertisement started, "will be of eminent advantage to the planters, merchants, and mechanics, and to the inhabitants of both the upper and lower country." Attempting to lure Charlestonian participants, the company promised "reductions in the prices of fire wood, provisions" and other materials for building, even alleging that "house rent" might reasonably be expected to drop if residents of the city helped the company to finish the project by playing the lottery. With overland transportation tedious as well as costly, the Santee Canal Company told backcountry folk that they would "receive higher prices than they have ever hitherto done for the fruits of their industry."⁹³ Whether or not the lottery was a success is unclear. However, only a week after it ended, a second one was advertised. The promotional rhetoric for the second lottery was more grandiose than the first. The company vowed that land values across the state would "immediately rise" on "the day the first boat passes through the canal." South Carolina, the advertisement continued, would "then take its proper rank among the states which compose the union; and no longer be counted among those that are only of secondary importance."⁹⁴

Ramsay's most creative fundraiser occurred in the summer of 1795. Canal workers had uncovered the bones of a mastodon while digging near Biggin Swamp, though they had no idea what the creature was at first. Too shrewd to miss an opportunity, Ramsay capitalized on the exotic find by publishing the discovery of "the bones of some enormously large animal" in the newspaper. The bones and "other curiosities lately found underground" were placed on display at Ramsay's house for the exclusive viewing of stockholders.⁹⁵

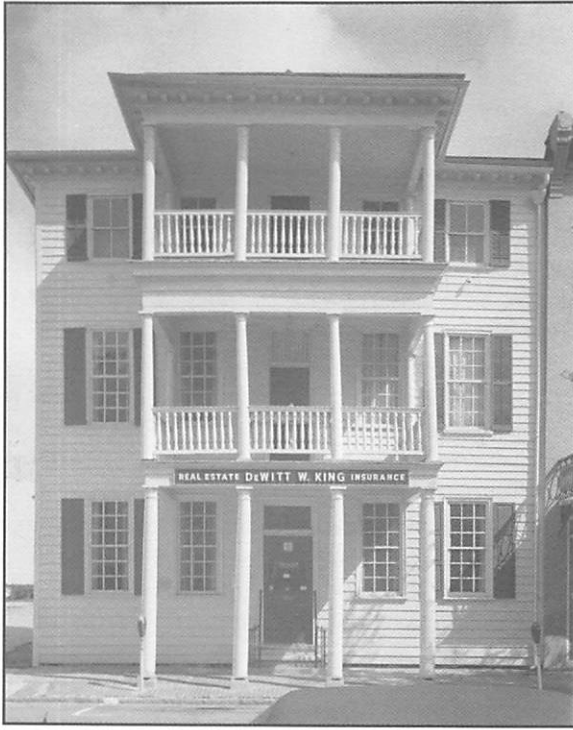
Ramsay even tried to drum up future business for the canal by inducing his northern farming friends to resettle in backcountry South Carolina, often stretching the truth to appeal to them. He assured John Eliot of Massachusetts that the backcountry was "as healthy as Massachusetts and land equally good may be bought here for a dollar" that would cost fifteen in New England. If the low cost of land was not attractive enough to encourage

⁹² "To the Honorable President and Members of the House and the Senate," December 12, 1793, Records of the General Assembly, no. 129, SCDH.

⁹³ "Santee Canal Lottery," *City Gazette and Daily Advertiser*, April 10, 1795.

⁹⁴ "Santee Canal Lottery, No. II," *ibid.*, May 25, 1795. At least six lotteries were conducted. See *City Gazette and Daily Advertiser*, August 5 and October 10, 1795, February 9 and May 4, 1796, for the other four.

⁹⁵ "Santee Canal Curiosities," *ibid.*, August 3, 1795.



Photograph of the Dr. David Ramsay House in Charleston, 1977. Ramsay purchased this fine Broad Street residence, which was constructed sometime prior to 1750, in 1784. In August 1795, work crews digging the Santee Canal unearthed the fossilized skeleton of a mastodon in Biggin Swamp. Ramsay, who was the president of the Santee Canal Company and one of its largest financial backers, had some of the giant bones put on display in his house and publicized the "Santee Canal curiosities" in the newspapers as a stunt to attract new investors in the struggling enterprise. Only company stockholders were invited to the showing. Courtesy of the Library of Congress.

southern migration, Ramsay intimated to Eliot that South Carolina had "a canal far advanced which will be of infinite service to our backcountry giving water carriage to many thousands of acres" that otherwise would have to wagon "three hundred miles over bad roads." The canal was anything but "far advanced" in the spring of 1795 when Ramsay crafted this letter. Stock prices were suffering, and the canal would not open for another five years.⁹⁶

⁹⁶ David Ramsay to John Eliot, March 11, 1795, in Ramsay, *Selections from His Writings*, 139. Setbacks occurred frequently because workers were constantly

A few months before the canal was finished, Ramsay wrote his Boston friend Jedidiah Morse to tell him the news. Excited at the prospect of its opening, Ramsay had no illusions about the canal's commercial failure and cost overages. He admitted to Morse that the price surpassed four hundred thousand pounds and that he "unfortunately became a large stockholder" early in the scheme, causing his actual investment to double in the eight years it took to construct the canal. Ramsay was hopeful that its completion and operation would "amply repay" the major investors, for the canal had been "a source of great derangement to all who are deeply engaged in it."⁹⁷

Unfortunately for Ramsay, the canal faced early challenges. The Santee Swamp's seasonal flooding rendered some of the locks useless. Again, the company had to petition the state for help. In December 1801, Ramsay and eight others sought permission from the house of representatives "to import African Slaves to work on the inland navigation project." The project, Ramsay and the company reminded the house, "is for the interest of every Commercial and agricultural Country like this State." They contended that with "phase one" complete, the company needed to build several roads and a ferry to make the canal more accessible and functional. Ramsay was forthright about the company's one hundred thousand pounds of debt and claimed this necessitated the petition for a cheaper workforce, which could only be acquired if they were granted a license to import "a competent number of Negro Slaves from Africa."⁹⁸

It is a bit ironic that the canal—which was intended to make cotton growing all the more lucrative—was being held back by the profitability of the staple around the turn of the century. In the Santee Canal Company's petition, a complaint was made about the wages of workmen "being very much enhanced." The cost of renting slaves shot up hand in hand with the rising market price of short-staple cotton. In 1793 the company paid around fifteen pounds per annum per head for male slaves. By 1800 the price had increased to twenty-five to thirty pounds per head.⁹⁹ The records do not show the fate of Ramsay's petition, but the document itself reveals how profoundly invested he and several other powerful low-country men such as Nathaniel Russell, Edward Rutledge, William Moultrie, and John F. Grimké were in the economic success of the backcountry through the Santee Canal Company. Although the details of the investments by the

battling malaria, delaying construction. See Porcher, *History of the Santee Canal*, 11.

⁹⁷ David Ramsay to Jedidiah Morse, July 20, 1799, in Ramsay, *Selections from His Writings*, 149.

⁹⁸ "To the Honorable Theodore Gaillard, Speaker, and Other Members of the House of Representatives of the State," December 7, 1801, Records of the General Assembly, no. 1095, SCDAH.

⁹⁹ *Ibid.*; Porcher, *History of the Santee Canal*, 6.

company's other directors are uncertain, we know that Ramsay put in a vast amount of capital and his pecuniary future probably teetered on the success or failure of the canal.

Yet another factor weighing down on Ramsay and potentially influencing his professional decisions was his inheritance of seven thousand acres in Georgia upon the death of his father-in-law. Furthermore, Ramsay's nephew John, who had studied to be a doctor at the University of Pennsylvania and returned to Charleston to serve as treasurer of the Medical Society in 1797, abandoned medicine immediately after the slave trade reopened in 1804 to become a cotton farmer. John too served on the board of directors of the Santee Canal Company.¹⁰⁰

Despite his insolvency, bad investments, backcountry connections, and brazen attempt to get special permission from the legislature to import slaves directly from Africa to work on the Santee Canal, there is no explicit proof that Ramsay's position on quarantine regulation was influenced by anything other than medical knowledge. Yet the circumstantial evidence that he and his family stood to gain considerably from the reopening of the slave trade—unburdened by quarantine—is overwhelming.

The 1790s cotton boom alone is insufficient to explain the sudden 1802 reversal of low-country votes needed in the assembly to reopen the slave trade. The Louisiana Purchase also played a role in triggering its reopening.¹⁰¹ The port of Charleston had already established a maritime commercial link to New Orleans by the mid 1790s, putting the city in a good economic position if the purchase was made because Charleston could supply the large number of slaves needed to work the land. South Carolina politicians, merchants, newspapers, and citizens followed the event as it unfolded. Shortly after the treaty was ratified and Louisiana became a U.S. territory, David Ramsay delivered an oration praising the acquisition and the territory for its agricultural potential. He claimed that "all the valuable native commodities" from cotton and coffee to sugar could "be advantageously cultivated" in different parts of Louisiana.¹⁰² The General Assembly of South

¹⁰⁰ Ramsay, *Selections from His Writings*, 26, 61. David Ramsay thought of his nephews as sons. During the Siege of Charleston in 1780, he wrote a letter to Benjamin Rush referencing a bill for three thousand dollars that he wished to see "distributed among my brother's sons" if he was "killed or taken prisoner." Ramsay to Rush, March 21, 1780, in *ibid.*, 65.

¹⁰¹ Shugerman, "Louisiana Purchase," 265. Shugerman's article is the first to argue this point. Although there is no direct evidence, the confluence of events and his thorough analysis of the sources is convincing.

¹⁰² See David Ramsay, *An Oration, on the Cession of Louisiana, to the United States, Delivered on the 12th May, 1804, in St. Michael's Church, Charleston, South-Carolina* (Charleston: Printed by W. P. Young, 1804).

Carolina passed a resolution celebrating the purchase, and less than two weeks later, it passed the motion to reopen the trade.¹⁰³

With the foreign slave trade reopened, South Carolina obtained a monopoly on supplying slaves to New Orleans. Georgia had banned its foreign trade in 1798, and section 10 of the Louisiana Ordinance of 1804 forbade the foreign trade.¹⁰⁴ The technicality of transshipment allowed slave ships that had originally embarked from Africa or the Caribbean to offload their slaves as domestic goods, so long as they anchored first in Charleston Harbor where duties were collected and inventories checked by customs. Transshipment did not take long.¹⁰⁵ The process and method of transshipment looked something like this: Ship A dropped anchor in Charleston Harbor close to Ship B, which had recently arrived from Africa or a Caribbean port. Ship A's captain and a few crew members boarded Ship B to inspect and separate slaves that they wished to purchase. They bought them at a price below market value and immediately loaded their selections onto Ship A, lifted anchor, and set sail for New Orleans.

Existing records indicate that thousands of African slaves underwent transshipment. The cargo lists show the number of slaves onboard each ship from Charleston that disembarked in New Orleans, and few if any were domestic exports born on U.S. soil.¹⁰⁶ On paper South Carolina imported forty thousand slaves between 1804 and 1808, but historians estimate that by 1810 just eleven thousand slaves in the state could not be attributed to natural increase. This means that only about one-quarter of the slaves imported to South Carolina were actually retained by South Carolinians, and most of these were brought immediately to the backcountry to engage in cotton cultivation.¹⁰⁷

If the Medical Society understood the process of transshipment—and they most assuredly did—then their resolution advocating for relaxed quarantine measures in the face of massive importation of human cargo seems less reckless since fewer slaves set foot on land.¹⁰⁸ Relaxation of

¹⁰³ Shugerman, "Louisiana Purchase," 277; Brady, "Slave Trade," 613.

¹⁰⁴ Shugerman, "Louisiana Purchase," 281. See also McMillin, *Final Victims*, 98. The ban initially included slaves recently imported to other states, but Congress lifted the prohibition on transshipments from South Carolina.

¹⁰⁵ A lucid breakdown of transshipment can be found in Gregory E. O'Malley, "Beyond the Middle Passage: Slave Migration from the Caribbean to North America, 1619–1807," *William and Mary Quarterly*, 3rd. ser., 66 (January 2009): 126.

¹⁰⁶ Jean-Pierre Leglaunec, "A Directory of Ships with Slave Cargoes, Louisiana, 1772–1808," *Louisiana History* 46 (Spring 2005): 225–230.

¹⁰⁷ Brady, "Slave Trade," 616.

¹⁰⁸ The port physicians were active members of the Medical Society and transshipment was a popular way of getting around quarantines imposed on ships coming from certain regions, as seen in the wake of the 1793 Philadelphia epidemic.

quarantine for yellow fever would have drastically shortened turn-around time for voyages looking to transship and expedited slave liquidation to the backcountry via the Charleston market. Moreover, yellow fever was very difficult to diagnose at port—much more so than measles and smallpox—and was often confused with other less severe fevers. The ongoing debate over the disease's contagiousness perhaps made it easier for the Medical Society to accept Ramsay's notion that it was noncommunicable and propose the quarantine change. On the other hand, it seems in hindsight that the debate could just as easily have undermined the Charleston physicians' sense of clarity and security, which in many cases relied on consensus.

Whatever the case, it is unlikely that Ramsay and the Medical Society of South Carolina maliciously advocated for reduced quarantine regulation for yellow fever under false pretenses, believing the disease to be contagious and claiming it was not. Rather, they advocated for relaxation without knowing for sure, amidst a national debate over yellow fever's contagion and importation which involved the foremost medical minds in the country and was far from settled when the society issued its controversial resolves.¹⁰⁹ Scientifically speaking, Ramsay and Rush were correct in their claims that yellow fever is not contagious. Yellow fever is an acute viral hemorrhagic disease communicated by the bite of an infectious female *Aedes aegypti* mosquito. The pattern of its spread through mosquito vectors easily mimicked human transmissibility, sustaining the centuries-long question of whether or not it was contagious. The irony here is impossible to ignore. The distance limitations on the mosquito vectors (approximately three hundred yards) actually support the practice of quarantine as an effective measure to curtail the spread of the disease, despite the fact that it is not contagious. Thus, physicians of the contagionist persuasion were

¹⁰⁹ For background on the national debate, see J. H. Powell, *Bring Out Your Dead: The Great Plague of Yellow Fever in Philadelphia in 1793* (Philadelphia: University of Pennsylvania Press, 1949); Mark A. Smith, "Andrew Brown's 'Earnest Endeavor': The *Federal Gazette's* Role in Philadelphia's Yellow Fever Epidemic of 1793," *Pennsylvania Magazine of History and Biography* 120 (October 1996): 321–342; J. Worth Estes and Billy G. Smith, eds., *A Melancholy Scene of Devastation: The Public Response to the 1793 Philadelphia Yellow Fever Epidemic* (Canton, Mass.: Published for the College of Physicians of Philadelphia and the Library Company of Philadelphia by Science History Publications, 1997); Linda S. Myrsiades, *Medical Culture in Revolutionary America: Feuds, Duels, and a Court-martial* (Madison, N.J.: Fairleigh Dickinson University Press, 2009); Simon Finger, *The Contagious City: The Politics of Public Health in Early Philadelphia* (Ithaca, N.Y.: Cornell University Press, 2012); Benjamin A. Smith, "Impatient and Pestilent: Epidemic Disease and the Reopening of the Slave Trade in Early Republic South Carolina" (Master's thesis, University of Georgia, 2013).

wrong in theory but correct in practice and vice versa for anticontagionist physicians like Ramsay.¹¹⁰

Historian Jed Shugerman argues convincingly that low-country South Carolinians were willing to sacrifice their own short-term economic gain in order to “lay the foundations for a stable, thriving slave system in the West” and “spread southern political power.”¹¹¹ Recreating an agricultural economy dependent on slave labor in Louisiana would increase slaveholding interests in Congress once the territory acquired statehood, bolstering southern congressional strength and leveling the industrial North’s slight voting advantage. This provocative thesis underscores South Carolina’s devotion to the “peculiar institution” and the rise of what William W. Freehling calls “aggressive slavery imperialism.”¹¹²

Historians have missed an opportunity to probe this notion and test its validity. Public health policy is a crucial component of any narrative dealing with maritime commerce in the eighteenth and nineteenth centuries and warrants further investigation. Scrupulous examination of its relation to commerce and the state could refine our understanding of economic and political discourse during the early national period as well as the rise of sectionalism. Promoting the expansion of slavery at the expense of public health—as the records suggest—is vastly different from economic sacrifice. The epidemiological risk, however inadvertent, is as important, if not more so, than the risk of temporary economic setback. Closer scrutiny could underscore the drastic measures the South Carolina assemblymen were willing to take, and the public was willing to accept, to protect the status quo, illuminating the state’s commitment to the institution of slavery in new and profound ways.

Although transshipment reduced the threat of epidemic in Charleston if slaves never actually stepped off of the ship, it hardly eliminated the public health hazard. It is plausible that Charleston’s elite were willing to see the value of their slaves decrease in order to safeguard the entire institution. Far more difficult to grasp is the readiness on part of these elites to risk increased infectivity. Their apparent willingness to do so is remarkable, for yellow fever did not discriminate based on class, as numerous members of the low-country aristocracy could attest. While wealthier residents of the low country were able to skirt the fever by coming and going from the

¹¹⁰ After the *Aedes aegypti* mosquito was found to be the culprit, effective eradication methods were quick to follow. For an erudite and succinct overview of early eradication regimes, see Alexandra H. Freeman, “The Mosquito of High Crimes: The Campaign against Yellow Fever during the American Construction of the Panama Canal, 1904–1905,” *Historia Medicinæ* 2 (August 2011): 1–9.

¹¹¹ Shugerman, “Louisiana Purchase,” 279.

¹¹² William Freehling quoted in *ibid.*, 266.

city according to the seasons, the threat loomed large, and it frequently became a horrifying reality during the protracted dog days of a Charleston summer.