A Look Into the Tuskegee Study of Untreated Syphilis in the Negro Male in Macon County, Alabama

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Recommended Citation
Valentine, Austin, "A Look Into the Tuskegee Study of Untreated Syphilis in the Negro Male in Macon County, Alabama" (2019).
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https://digitalcommons.murraystate.edu/sscw/9
A Look Into the Tuskegee Study of Untreated Syphilis in the Negro Male in Macon County, Alabama

By
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Introduction

In the 1930’s there was growing concern over a disease known as syphilis. With 300,000 new cases each year, coupled with the disease’s ability to create blindness, arthritis, heart disease and instances of premature death, the search for a way to stop the epidemic quickly was expanding. With such numbers the United States Department of Health needed answers fast (DiIanni 1993).

At this time, the United States was in an economic crisis left by the Great Depression. As a result, the U.S. Department of Health needed to find cheap test subjects in an effort to combat syphilis and prevent its spread across the country. Since there were no set laws to inform patients they were being treated as research subjects, the U.S. Department of Health turned toward populations where the disease was most prevalent and the people the most impoverished (DiIanni 1993).

They turned toward the negro population in Macon County, Alabama where the disease was present in 35% of the population. This area was also very poor, with most residents being tenant farmers or share croppers for southern white landowners. Under these conditions, some doctors and researchers felt this area created an ideal laboratory for studying the disease (DiIanni 1993). This quest, by the United States Department of Health, gave birth to what will forever be known as the Tuskegee Study of Untreated Syphilis in the Negro Male.
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Syphilis the Disease

Syphilis is a very dangerous sexually transmitted disease that can cause serious health issues if not treated properly. To gain a better understanding of the disease and how it affects the human body one must first understand how the disease is actually spread. Syphilis can be contracted through direct contact with syphilis sores during vaginal, anal, or oral sex. The disease can also spread from an infected mother to her unborn child (Centers for Disease Control and Prevention 2019).

There are four main stages of the syphilis disease; primary, secondary, latent, and tertiary, each of which have different signs associated with that stage (Centers for Disease Control and Prevention 2019).

During the primary stages of the disease the body will exhibit painless sores, called chancres, that appear at the site of infection. The sores typically heal on their own after three to six weeks, but still have the ability to spread the disease. However, at this stage syphilis can be easily cured with medicine (WebMD 2019).

During the secondary stage of syphilis the body will produce red or reddish brown rashes on the palms of the hands and feet. The subject will have a fever, headache, sore throat, swollen lymph nodes along with patchy hair loss and numerous body aches. The symptoms

Secondary Rash From Syphilis (Centers for Disease Control and Prevention 2019)
will eventually subside, even if no treatment is given. However, the disease will only get worse if not treated by this stage. (WebMD 2019)

The Latent stage happens when the syphilis bacteria is still alive in the body, but you have no symptoms of infection. The body is not considered to be contagious during this stage, but the syphilis may begin to affect one’s brain and nerve functions, heart, bones, and other parts of the body. This particular phase can last, doing damage to the body, for years. One key component of this phase is that not everyone will experience this level of infection. Some people’s syphilis symptoms will proceed directly to the Tertiary or late stages of syphilis.

During the Tertiary stage of syphilis, which is also known as the late stage, the disease begins to affect the body’s organs. Not contagious at this point, the disease begins to create episodes of numbness, problems with blindness, involuntary or problems with muscle movements, and dementia (WebMD 2019). And in some instances the disease can cause episodes of pre-mature death (DiIanni 1993).

Unlike many years ago, there is a treatment for the syphilis disease with the utilization of the proper antibiotics. However, the treatment may not undo any damages previously done by the debilitating disease. Furthermore, having syphilis once and being treated does not protect you from potentially getting the disease again. After one has been successfully treated, they can again
re-contract the disease. The Centers for Disease Control and Prevention suggest that one follow up with one’s doctor, to make sure that any treatments have been successful. They also want to make sure the body is free from the syphilis disease (Centers for Disease Control and Prevention 2019).

Men tend to account for most cases of syphilis in the United States. According to a case study by the Centers for Disease Control and Prevention, there existed 2.1 cases per 100,000 people who carried the primary and secondary stages of the syphilis disease. These rates are unlike the rates of the early 1940’s which reached levels near or exceeding 100 persons per 100,000 of population for primary and secondary stages of syphilis (Centers for Disease Control and Prevention 2019).

However, from the 1950’s through today those numbers have been relatively low, producing number of less than 25 persons per 100,000 in population (Centers for Disease Control and Prevention 2019). Through a number of early controversial experimentations and tests, the United States Department of Health has made great strides in isolating the syphilis bacteria and creating a cure for this debilitating and once fatal disease. Thus, reducing the dangers of syphilis if found and treated early.
The Tuskegee Study

During the time following the Great Depression, the United States Department of Health needed to find cheap test subjects in an effort to combat syphilis, to prevent its spread across the country. Since there were no set laws to inform patients they were being treated as research subjects, the U.S. Department of Health turned toward populations where the disease was most prevalent and the people the most impoverished (DiIanni 1993).

The U.S. Department of Health turned to the rural negro population in Macon County, Alabama. In this area the disease was present in 35% of the county’s population. The area was also very poor, with most residents being tenant farmers or share croppers for southern white landowners. Government doctors and researchers felt this area created an ideal laboratory for studying the syphilis disease (DiIanni 1993).

This quest, by the United States Department of Health, gave birth to what will forever be known as the Tuskegee Study of Untreated Syphilis in the Negro Male. The doctors and researchers assigned to this project were part of the venereal disease section of the United States Department of Health Services or (PHS). Many of whom were very liberal when it came to performing experimentation with regard to race (Michigan State University n.d.).

The study, authorized by the U.S. Health Service and paid for with U.S. tax dollars, initially began in the fall of 1932, and consisted of withholding treatment from African American
males who; were poor, had little if no means to obtain treatment from other sources, and resided in Macon County, Alabama (DiIanni 1993). The program began by promising free medical care to 600 African American Males, 399 of whom had the disease and 201 who were known as the control group. Little did they know, that they were to never receive any medicines or medical treatments to combat nor cure the syphilis disease (Nix 2019).

To create an environment that would promote strong black enrollment, the U.S. Department of Health utilized the services of the Tuskegee University, who had been founded in 1881 by African American Booker T. Washington. The hospital facilities at Tuskegee University served as the U.S. Department of Health’s personal laboratory throughout the duration of the syphilis study (Nix 2019).

The U.S. Department of Health Services also posted fliers around Macon County that promised colored people a specialized treatment for syphilis, also known as bad blood. The fliers promised free blood tests, treatment by the County Health Department and Government doctors. They were also to be provided free transportation, free meals, free physicals, and free burial insurance. They conveyed to the public that “You may feel well and still have bad blood. Come and bring all your family (Brown 2017).”
The main goal of the United States Department of Health Service was to utilize these incoming African American subjects to determine the effects of the disease on the human body. The study was tasked with conducting: cataloging of the effects in latent and late stage patients, blood tests, spinal taps, X-rays, detailed physical examinations, and autopsies (DiIanni 1993).

These test subjects were only given placebos such as vitamins and aspirins by health workers who constantly monitored their progress. They wanted to track the disease’s progress as it changed stages in the human body. Therefore, there were no treatments given despite what the patients had been told. There was no effective care given as men died, became blind, went insane, or had other serious life threatening medical conditions resulting from syphilis (Nix 2019).

In 1933 the center conducted the first autopsy on a syphilis victim. Doctors discovered that the amount of internal injury to the human body was far more extensive than what had been documented through physical examinations and laboratory tests of both blood and spinal fluids (DiIanni 1993).
Thus, causing researchers to re-evaluate their methodology behind documenting the effects of the disease.

By 1936 the first findings were published in the Journal of American Medicine. The Tuskegee Experiment had deduced that out of 400 test subjects, 75% suffered from some complications during the stages of late syphilis, 50% exhibited signs of cardiovascular damage, and 33% showed neurological symptoms. They were also able to conclude that out of those aged 25 to 50 years, the overall life expectancy had been reduced by 20% (DiIanni 1993).

At this point in the study, the researchers simply watched and waited to see what happened next with the syphilis patients. With little breakthrough, many in the government and the public began to question the study from a standpoint of feasibility. However, any doubts were extinguished in 1937 when President Franklin D. Roosevelt visited Tuskegee University to put hope back into the public. He wanted to deliver a clear message that the United States Department of Health were making breakthroughs in science. His visit revitalized the community and put citizen’s faith back into the Tuskegee syphilis project (DiIanni 1993).

Eventually, in the 1940’s, there was a miracle drug called penicillin that was discovered. This miracle drug became the accepted treatment to combat syphilis in 1945 (Centers for Disease Control and Prevention 2019). However, the patients at Tuskegee were simply denied access to
this drug. Researchers did not want to disrupt the study nor introduce some additional variables into their experimentation (DiIanni 1993).

Despite having a drug to combat the debilitating disease, the testing continued for several decades. By the 1960’s the Centers for Disease Control and Prevention now headed the project at Tuskegee. Some people at the center began to question its utilization of only black participants in the study. But those inquiries were quickly extinguished by others (DiIanni 1993). The true nature of the experiment would not come to light for another twelve years.

On July 25th of 1972 the general public finally became fully aware of the governments medical experimentation that took place during the Tuskegee Syphilis Experiments. The Associated Press broke a news story entitled “U.S. Public Health Service Officials” that described the horrific affair in detail (Waxman 2017).

By the time the article hit newsstands, 7 of the men who were involved in the Tuskegee Syphilis Experiments died from syphilis, 150 had heart failure, and only 74 remained alive. Those who were still alive, according to government medical officials, were simply too old to receive any type of medical treatments (Waxman 2017). The article produced a strong backlash by the public who demanded answers for this atrocity that took place on American soil.

A panel of nine members from the fields of law, medicine, religion, labor, health administration, public affairs, and education had been assembled by the Assistant Secretary of
Health and Scientific Affairs. The panel was tasked with the claims made by the 1972 Associated Press article (Centers for Disease Control and Prevention 2019).

The panel determined that the men had freely agreed to be examined and treated. But there was no evidence that researchers had disclosed the true purpose of the syphilis study to the patients. In fact, the patients of the syphilis group had been misled about the program in its entirety. The men were never given adequate treatment for the disease, even when penicillin had become the drug of choice in the treatment for syphilis (Centers for Disease Control and Prevention 2019).

This panel also found that the test subjects were also never given the choice of quitting when proven treatments had become available. Therefore, the panel determined that the Tuskegee study was “ethically unjustified (Centers for Disease Control and Prevention 2019).” As a result, a class action lawsuit was filed against the government which resulted in a $10 million out-of-court-settlement. The government also agreed to provide a lifetime of medical benefits and burial services to all living participants (Centers for Disease Control and Prevention 2019).
The Role of the Shiloh Missionary Baptist Church

The Shiloh Missionary Baptist Church was organized in 1870 by the pastor Reverend Charlie Simpson. It is situated in Macon County, Alabama between the town of Notasulga and Tuskegee University. In a March 18th, 2019 interview conducted by Murray State University Students, Felicia Chandler, who is a descendant of a syphilis experimentee, explained the deep roots the church and nearby cemetery had with the Tuskegee study. Aside from being a place of worship, the church served as both a place of recruitment for participants as well as a meeting place for many of those who participated in the Tuskegee Study of Untreated Syphilis in the Negro Male (Chandler 2018).

During the experimental period, church members from the community would gather at Shiloh Missionary Baptist Church to be picked up for their free ride to nearby Tuskegee University. The members would all gather around a small tree that was conveniently named the syphilis tree. The tree served as a place where participants would gather and discuss the current affairs of the day along with the treatments, they thought they were receiving through the program (Chandler 2018).
As these individuals passed away, their bodies were taken to the nearby church cemetery for burial. Many of the participants from the Tuskegee study were from the small community and their bodies are laid to rest, with funds from the government provided burial insurance, in the Shiloh Baptist Church Cemetery, just down the road from their church (Chandler 2018).

Included in those burials was one Charlie W. Pollard, who was a syphilis study survivor. Mr. Pollard appeared in Fred Gray’s Law Office in Tuskegee, AL on July 27, 1972 as the one who initiated the class-action lawsuit against the government (Michigan State University n.d.). Charlie was born on April 13th of 1906 and died on April 29th of 2000, having won his case, met President Bill Clinton, and had the treatment of him along with others exposed to the world (Findagrave 2008). Mrs. Chandler noted that Mr. Pollard was a very kind man and a lifetime member of the Shiloh Missionary Baptist Church. His body is now buried in the Shiloh Baptist Church Cemetery (Chandler 2018).

Mrs. Chandler talked about the reaction that was felt by the community once the true purpose of the Tuskegee Study of Untreated Syphilis in the Negro Male had become public knowledge. A select few expressed that many had felt anger about their relatives not being asked if they would be willing participants nor being fully informed of the study’s scope. Where others were simply shocked and in disbelief that such an atrocity had taken place in the land of the free (Chandler 2018).

According to Chandler since all the participants of the program are deceased, it is up to one’s faith in God that the wrongs will be righted, and their ancestor’s souls can now find peace in the hereafter. For that all remains is time, which over a period will heal the descendant’s wounds created by the Tuskegee Experiment (Chandler 2018).
Conclusion

Based on research and the facts, the United States Department of Health Services took advantage of hundreds of unsuspecting, poor, and culturally disadvantaged individuals from the Macon County, Alabama area. These were individuals who placed their trust in the very government that had set their ancestors free mere generations earlier. Some of these individuals did not possess the means nor the ability to obtain private treatment but jumped at the opportunity to receive free medical assistance through the United States government.

Now that all the participants of the program are deceased, it is up to us as human beings to remember what those souls endured at the cost of scientific discovery. We must come together to understand the sacrifice and utilize time, education, and personal understanding to heal the wounds created by such a devastating atrocity at the hands of our country, the land of the free and the home of the brave.
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