PHS CHRONICLES

PHS Chronicles presents short articles about significant happenings in the nearly 200-year history of the Public Health Service. The Office of the PHS Historian oversees preparation of the Chronicles. Contributions of less than 1,500 words are welcomed. Contact John Parascandola, PhD, PHS Historian, 17–31 Parklawn Bldg., 5600 Fishers Lane, Rockville, MD 20857, tel. 301-443-5363, FAX 301-443-0358 (E mail jparasca@oash.ssw.dhhs.gov).

The Public Health Service VD Clinic in Hot Springs, AR

The practice of bathing in hot or cold springs to cure diseases dates from prehistoric times, with the formal development of European spas occurring in the 18th and 19th centuries. Settlers from Europe brought knowledge of hot water therapy to colonial America, and settlers also heard about benefits of the hot waters from the Indians.

The U.S. Government first gained title to the hot springs in Arkansas on August 24, 1818, when the Quapaw Indians ceded the land to them. Fourteen years later, the hot springs and the four surrounding sections of land were declared a reservation for public use.

Early bath facilities. In the late 19th century, both the medical profession and the lay public considered the waters to have specific therapeutic properties. They were thought to cure venereal diseases (VD). At this time, large doses of mercury were taken along with the baths. What made the Hot Springs treatment distinctive was that physicians prescribed up to 10 times the normal amount of mercury for bathers with VD.

Famous for public use was the old "Ral" hole, which was considered to be a specific cure for syphilis. The word "ral" was considered to be a derivative or a contraction of the word neu-ral-gia which many visitors gave as a reason for coming to the city. The poor people bathed in this area.

In 1878, another popular bathing spot, the Mud Hole pool, was leased to Deputy U.S. Marshall James L. Barnes of Hot Springs. He constructed a bathhouse and bridge to it and improved the pool. He was required to bathe all who applied, and a list of all bathers was kept. In 1891, a new federally funded bathhouse was constructed at the Mud Hole site and named the "Government Free Bath House."

The first attempt to provide medical care for the indigent bather began in 1898 when a free dispensary was established on the second floor of the government bathhouse. Physician volunteers examined patients and prescribed for them free of charge.

Funding for a new bathhouse was requested from the Federal Government in 1902. Funding was approved only for remodeling and the addition of two wings to the original house, however. The remodeled Government Free Bath House opened in January 1904. Pool bathing was



Entrance to the Public Health Service Venereal Disease Clinic, 1921 building (Wenger Papers, University of Arkansas Medical Sciences Library, Historical Research Center)

abandoned for the first time, a radical departure from earlier procedures. The new bathhouse was equipped with individual porcelain tubs recessed into the floors, commodious cooling and dressing rooms, private lockers, cement floors, steam heat, good lighting, and ventilation. In the first year, 134,589 baths were given; by 1911 the number almost doubled when 220,435 bathed there. In April 1916, a free clinic to serve the poor was established on the second floor of the bathhouse.

The Public Health Service clinic. The examination of draft records for World War I inductees revealed astounding levels of venereal disease. In response, the Chamberlain-Kahn Act was passed by the Congress, and the Public Health Service (PHS) gained a new Division of Venereal Disease. Among its charges were cooperation with State departments of health to prevent and control VD within the States and cooperation among States to control and prevent interstate transmission of these diseases.

In accordance with these directives, planning began for a new free bathhouse and a new clinic at Hot Springs. Dr. Oliver Clarence Wenger was the PHS Commissioned Corps Officer and organizational genius behind the pioneering clinic. Stephen T. Mather, Director of the National Park Service, Surgeon General Hugh S. Cummings of PHS, and Dr. C.W. Garrison, Arkansas's State Health Officer, approved a plan advocated by Dr. Wenger to establish a combination bathhouse and clinic to serve as a model for the treatment of venereal disease. Assistant Secretary of the Interior Golden G. Hopkins attended the groundbreaking for the facility on January 31, 1920.



Method of administering arsphenamine at the clinic, ca 1925. Photo by W.M. Tyler (Wenger Papers, University of Arkansas Medical Sciences Library, Historical Research Center)



Personnel of the Public Health Service Venereal Disease Clinic, and Hot Springs consulting physicians, ca 1923. Dr. Oliver Clarence Wenger is in uniform, front row, fifth from left (Wenger Papers, University of Arkansas Medical Sciences Library, Historical Research Center)

The building, constructed in 1921, was a two-story structure of interlocking red mission tile and reinforced concrete in Roman Revival style. Its cost was nearly \$300,000. The lower floor of the building was the PHS Clinic and dispensary. The clinic opened in November 1921 and the bathhouse on the upper floor in March 1922. Some of the clinic's staff of 11 were employees of PHS and some were employees of the Interior Department. Three physicians, a bacteriologist, a laboratory technician, a registered nurse social worker, two secretary clerks, a bathhouse attendant, and two porters made up the complement of the new facility.

Therapy for venereal disease had changed greatly since the time mercury was given orally or applied to the skin. Arsenical organic compounds were used at the PHS Clinic in the 1920s, sulfa drugs in the 1930s, and penicillin in the late 1940s.

The arsenical compound, arsphenamine, and related drugs were administered at the clinic from the early 1920s to the 1940s. An efficient method for administering this treatment was developed by Dr. Wenger. Preparatory to receiving the treatment, the patient straddled a bench, rolled up a sleeve and placed an arm on the table. A nurse applied a tourniquet and washed the arm with alcohol. An assistant inserted the needle and adjusted the indicator on a gravity tube. A second nurse removed the needles and sterilized them. Wenger's new method enabled a staff of four to administer 98 doses of arsphenamine in 40 minutes. Under the old method, 12 staff members could handle only 20 patients per hour. The streamlining was important because the clinic's small staff could administer a large number of treatments.

Establishment of Camp Garraday. In 1933, the Federal Emergency Relief Administration authorized funding for the Arkansas Transient Bureau. On November 14, 1933, the bureau opened Camp Garraday at Hot Springs, the first transient camp to open in Arkansas. It was built specifically to house transients who came to Hot Springs for treatment of venereal disease at the PHS Clinic. Erected on a 33-acre tract of land adjacent to the Hot Springs National Park, the camp was composed of nine barracks or dormitories that accommodated 500 comfortably. The infirmary of approximately 60 beds, a clinic to treat patients' minor illnesses, a central combination kitchen and mess hall, a recreation hall, and a central administration building completed the facility. The expenditure for construction of the camp was slightly more than \$106,000.

The Hot Springs camp was unique because of the PHS clinic on the site. Under a cooperative agreement between PHS and the Transient Bureau, many indigent patients were treated for venereal disease. Statistics showed that persons from every State in the Union as well as Canada and the Canal Zone received baths there. Only 26 percent of the total bathers were from Arkansas, indicating that VD remained a national as well as a local and State problem.

The number of indigent people coming to Hot Springs seeking medical treatment continued to increase, peaking in 1935 when 14,946 applicants were examined in the clinic and 159,833 baths taken.

This trend began to reverse in 1936 when the applicants decreased from 14,946 to 8,490. Admissions had been restricted to people with early infectious cases and the Transient Bureau's relief program had been curtailed.

With the advent of penicillin in the early 1940s, treatment of venereal disease was advocated through Rapid Treatment Centers rather than through extended stays at the camp. By June 1944, there were 58 centers operational in 38 States and 3 Territories. With newer therapies and decreased length of stay for venereal disease patients, the need for domiciliary care ceased.

The peak business year for the bathhouse industry in Hot Springs was 1946. Subsequently, because of increased costs and decreased public demand, the bathhouses closed. The Government Free Bath House closed on April 10,1953, and in 1958 the bathhouse facility was converted to a physical medicine center that specialized in underwater therapy.

Camp Garraday, which had provided domiciliary care for patients for about a decade, was later renamed the PHS Medical Center and took on new missions. At one point, it concentrated on research and training; and for a few years, it housed a cancer research program. Today the camp property is within the boundaries of the Hot Springs National Park, and the administrative offices of the Hot Springs school district are located there.

—EDWINA WALLS, MLS, AHIP, Head, Historical Research Center, University of Arkansas for Medical Sciences Library, Little Rock.