When MINNESOTA WAS FLORIDA'S RIVAL

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IN MINNESOTA'S early days as a territory and a young state one of its vaunted attractions for visitors and settlers was the alleged health-restoring properties of its climate. Others have assembled and told this story in detail; we need only review it briefly here.

In young Minnesota's efforts to people its empty acres, it was faced with the widespread misconception that it was a land of "hyperborean" cold: a land of interminable winters during which the thermometers were not "long enough" to measure the degrees below zero, a land in which little could grow and only men of heroic endurance could live. To turn this obstacle to positive account, the territorial and state governments, railroad companies, colonization societies, and enterprising citizens, all took to pen, print, and paper to put across the idea that one of Minnesota's major assets was its possession of cold, dry, invigorating air full of the magic of something called ozone. At every opportunity Minnesotans chanted the theme with variations that their north country had no annual sickly season, no malaria to make life recurrently miserable, and above all no consumption except that which had come for healing in the state's pure wine-like air.

We have tended chiefly to be entertained by this form of pioneer boasting. Knowing, as the people of the mid-nineteenth century could not, the causes of malaria and tuberculosis, we have been amused by the
preposterous claims they made for their climate and have taken the whole phenomenon to be merely a naive expression of youthful exuberance, hardly to be accorded much significance. But I should like to suggest that it was more than an amusing aberration. Viewed in a wider national context and with more attention to its effects, it appears to have been less negligible in the development of the state than we have thought.

WE KNOW, of course, that the campaign was effective in luring health-seekers to Minnesota. We have industriously tallied the celebrities, or those to be celebrities, who came. Among them, for example, was Edward Eggleston, the Hoosier schoolmaster, whose coming coincided with the panic of 1857 so that he had to peddle soap to the housewives of the Minnesota Valley to earn his living. Henry David Thoreau made his longest and last journey in 1861 to Minnesota in a vain search for health, in the company of Horace Mann, Jr., son of the famous Massachusetts educator. Clara Barton, founder of the American Red Cross, was an undistinguished clerk in a Washington government office when in 1859 she brought her nephew, Irving Vassall, to Minnesota in the hope that its celebrated air would cure his sick lungs. Vassall recovered enough health to hold a government position in Washington during the Civil War but died of his disease in 1865. Edward Livingston Trudeau, the great pioneer in the scientific study of tuberculosis, sought healing first in Minnesota when he became a victim of the disease in 1873. His year there did him no good, and he spent the remainder of his life in an open-air camp in the Adirondacks.

The visits of people like these are interesting, but they should not obscure for us the thousands of little fame who also came, or the image of the state that brought them all. This image is suggested in comments made by two men who visited Minnesota in the late 1860s and reported the experience in their home-town newspapers when they returned. One of them, from Cincinnati, said he had been cured of consumption by a term of residence in Minnesota, and then added, "Minnesota all the year round is one vast hospital. All her cities and towns, and many of her farm houses, are crowded with those fleeing from the approach of the dread destroyer." The other, a journalist from Boston, wrote that he had been surprised to see so much activity in agriculture and industry because he had expected to find nothing but "cadaverous, lantern-jawed, thin-faced men" walking about in pursuit of health. "I have been accustomed to think of Minnesota," he commented, "as a state peopled with men and women in the last stages of consumption."

These statements reflect what was probably the principal image of Minnesota throughout much of America in the 1860s and 1870s. It is a reasonable supposition that during those decades most Americans thought of Minnesota chiefly as a haven from malaria or a sanatorium for consumptives.

MALARIA — under a variety of names in common parlance: ague, chills and fever, the shakes, fever'n'ager — was then the...
major plague of vast areas in the valleys and river-bottom lands of Ohio, Indiana, Kentucky, and Illinois. Even a casual reading of the social and medical history of those regions quickly reveals how prevalent malaria was and how general and intense was the desire to escape from it. A place without malaria was the promised land to residents of areas where every year from the first of August to the first of October work came virtually to a standstill while chills and fever took control, where more than half the community, if not in the midst of an attack, moved about with the sallow faces and heavy lassitude the disease left behind.6

It was the prevalence of malaria in the Wabash Valley of Indiana that started Dr. W. W. Mayo on his way to Minnesota. He fell victim to the malady and so loathed the periodic misery of it that he was wont to say, “Hell must be a place where people have malaria.” One day in 1854 during the course of a spell of chills he stomped out of the house, hitched his horse to the buggy, and drove away, calling out to his startled wife that he was going to drive west until he died or found a place free of malaria.4

On another day in that same year, 1854, James B. Wakefield, a young lawyer of New Delhi, Indiana, slowly convalescing from “malarial fever,” read in his newspaper a letter from Mankato in Minnesota Territory. On the maps Wakefield had used in school this country was marked “Desert Land,” and he had always thought of it as fit habitation only for wild animals and wilder Indians. But the newspaper described lakes alive with fish, forests full of game, and rich acres just waiting for the plow. And best of all, the letter said the malarial scourge that was sapping Wakefield’s strength was entirely unknown in Minnesota. One month later James Wakefield was on his way to Mankato, and he lived the rest of his life in the North Star State.

The experiences of these two men must be left to represent hundreds, perhaps thousands, of others. Minnesota’s reputation as a health resort began with its attraction for the victims of malaria. But it achieved its peak in that role through its appeal to consumptives.5

CONSUMPTION, or phthisis, as it was technically called then, or tuberculosis, as we call it today, was widely present, and, as we now know, wherever it was, it was spreading. It had become especially prevalent in a great semicircular sweep along the Atlantic Coast from Maine south to Virginia. Trying to explain this geographic incidence, doctors had concluded that the disease was caused by some climatic factor, probably the northeast winds blowing chill and moisture-laden inland from the Atlantic Ocean. Consequently one of Minnesota’s climatic assets was thought to be the fact that its prevailing winds are from the northwest and arrive without having crossed any large body of water. So common was the belief in the unhealthiness of northeast winds that it was sometimes said to be “no less than manslaughter” to put a member of the family or a guest into a northeast bedroom.6

If the cause of consumption was unfavorable climatic conditions, the indicated treatment, naturally, was to send the pa-


4 Helen Clapseattle, The Doctors Mayo, 32 (Minneapolis, 1941).

5 Account by Wakefield himself in Mankato, Its First Fifty Years, 158 (Mankato, 1903). See also the story of Dr. Moses R. Wickersham, p. 331–333. Biographies in this volume provide a goodly list of migrants from Ohio and Indiana for reasons of health. See also “Inquiries about Minnesota” in the Minnesota Pioneer, October 31, 1854.

6 Such medical theories and beliefs were reported and quoted in books and pamphlets issuing from both Minnesota and Florida, whether the authors were doctors or laymen. They appeared also in professional discussions like those reported in the Transactions of the American Medical Association and the Minnesota State Medical Society in the 1870s.
tient to a place with a more benign climate. If he could afford it, his doctor might recommend a sojourn in Italy, the south of France, or at one of the popular resorts in the West Indies. But in the 1840s, when it was recognized that a similar climate was accessible nearer at hand, doctors began sending their consumptive patients to Florida.

This practice steadily increased until the Civil War put a temporary end to it, as well as to much of the travel to Nassau and Cuba. Minnesota, though preoccupied with the Sioux Outbreak and the Civil War, remained accessible to travelers from the East. Whether for that reason or not, by the time Florida emerged sufficiently from the chaos of the early Reconstruction period to begin an active campaign for the renewed favor of invalids, Minnesota had become its foremost rival among consumptives and their doctors. The books, pamphlets, and letters that issued from the two states in their respective campaigns leave no doubt that each regarded the other as its chief rival for the position of America’s number one sanatorium for those afflicted with pulmonary disease. South Carolina, California, Colorado, and the Adirondacks were entering the contest, but from the late 1860s through the mid-1870s the real struggle was between Minnesota and Florida.

FOR EXAMPLE, in 1869 Ledyard Bill, a New York businessman, published a book entitled *A Winter in Florida... together with Hints to the Tourist, Invalid, and Sportsman*. In his preface, Bill explained that his winter’s sojourn in Florida came about because of the illness of a friend. After describing at length where he went and what he saw, Bill turned to a discussion of Florida’s climate and its effect on consumption. He contended that severe and sudden changes of weather damaged enfeebled constitutions and that escape to a more equable climate was vital for the invalid with pulmonary difficulties. Then he said, “A continuous, steady, cold, dry climate, or an even warm one, is the most to be desired for a majority of the suffering and afflicted of our race. Florida and Minnesota are the two points which most

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*The Western Hygeian Home for Invalids at St. Anthony, 1870*
nearly represent these conditions. They have been frequently contrasted, and, like every other subject, each has its special advocates." Although Bill said that he would leave it to the family physician to decide between the two resorts, he commented that since gentle exercise in the open air was needed and "Northern latitudes admit of exposure to the weather only during the summer season . . . herein lies the great advantage of a residence in Florida."'

Two years later Bill appeared to have changed his mind. His second book, published in 1871, bore the title Minnesota; Its Character and Climate. Likewise Sketches of Other Resorts Favorable to Invalids. The bulk of it he devoted to a discussion of the causes and cure of consumption and to the advantages of Minnesota in climatic treatment of the disease, but in a final chapter he reviewed briefly the claims of other resort spots, only to dismiss them all except Florida. Even so, his bias in favor of Minnesota is clear, perhaps only because it was his immediate topic.

One of the arguments used by Bill was the favorable position of the two states in the number of deaths from consumption reported in the census of 1860. The statistics as he gave them were: one in 254 deaths from the disease in Massachusetts, one in 473 in New York, one in 757 in Virginia, one in 1,139 in Minnesota, one in 1,247 in Florida. The figures were given in his earlier book on Florida, and in writing about Minnesota he repeated them—but he omitted the figure for Florida!'

HOW could two states so different in climate both be considered beneficial resorts for the consumptive? The argument among medical men, reported frequently and at length in the medical literature of the time, turned on the question of which was the more efficacious in the treatment of consumption, a warm or a cold climate. Many doctors thought the rigors of a Minnesota winter entirely too much for an ailing body to endure. Exercise in the fresh air was essential to a cure, they insisted, and how could the patient walk and play outdoors in frigid Minnesota? The other side countered that a warm climate like Florida's was enervating, sedative in its effects, whereas what the consumptive needed was a stimulating, tonic atmosphere, just the kind that Minnesota provided.10

These two views were set forth and argued in Minnesota's favor by Dr. Brewer Mattocks in a book entitled Minnesota as a Home for Invalids, published in 1871, largely in answer to two letters by doctors on behalf of Florida, one appearing in the Cincinnati Medical Repertory, the other in Lippincott's Magazine. Dr. Mattocks began his defense with an attack on warm climates and the South in general, but in later chapters he aimed his arguments specifically against Florida.

The piece in Lippincott's Magazine scarcely called for any defense of Florida's rival. Written by one Dr. J. P. Little, who had gone south for his health, it was certainly mild in its partisanship. Dr. Little admitted to a liking for the climate of Florida, but he could find little else good about it. He thought its scenery dull, its people lazy, its innkeepers sharks. "East Florida would seem to have been made late on Saturday night," he wrote. "A little sand remaining on the hands of the Maker was brushed off hastily, and thus Florida came into existence. As is the land, such are the inhabitants—pretty much the scrapings of creation." Even the climate had its limitations, said Dr. Little; it would not be beneficial to all invalids. "There are many feeble persons who suffer from a relaxed condition of the skin—who are always moist and easily thrown into profuse perspiration," he wrote. "For these a dry

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11 Bill, A Winter in Florida, 182; Minnesota, 88.
12 See especially the report of medical opinion among Minnesota doctors in the American Medical Association, Transactions, 1876, p. 381–417.
air is best. . . . The damp air of Florida will rather aggravate this condition: let them try the dry, bracing air of Minnesota."  

Another doctor, writing in the *Independent* at about the same time, was wholly hostile to the southern state. He had found its days too hot, its nights too cold, and both too damp. Florida's reply to this attack was written by Harriet Beecher Stowe, whose winter home at Mandarin on the lower St. John's River was one of the sights all visitors to eastern Florida were urged to see. Mrs. Stowe's answer to the doctor's letter, bearing a title that repeated his, "Florida for Invalids," is included in *Palmetto-Leaves*, a collection of her letters published in 1873. After chiding the doctor for expecting to find more in the southern state than it claimed to have, Mrs. Stowe explained that the effects of its climate depended on the nature of the individual. "If persons suffer constitutionally from cold; if they are bright and well only in hot weather; if the winter chills and benumbs them. till, in the spring, they are in the condition of a frost-bitten hot-house plant, — alive, to be sure, but with every leaf gone,—then these persons may be quite sure that they will be the better for a winter in Florida. . . But if, on the contrary," said Mrs. Stowe, "persons are debilitated and wretched during hot weather, and if cool weather braces them, and gives them vigor and life, then such evidently have no call to Florida, and should be booked for Minnesota."  

**IT IS amusing to compare the problems of the two states in their rivalry. Whereas Minnesota had principally to prove that her winters were not too cold, Florida's task was to demonstrate that her summers were not too hot, and one state was about as truthful in the process as the other. Florida had also to counter the charge that her acres of swampland were malaria-ridden. Her boosters dealt with this disadvantage by saying either that the ocean breezes blew the swampland poison away or that the malaria vanished with the frost. Both states had to wrestle with the counterevidence which appeared regularly in the obituary columns of their newspapers, and they both used the same argument — that those who died had simply waited too long to come. Both states told many stories of miraculous cures within their borders, but here the palm, it seems to me, must go to Minnesota.**

Most frequently repeated by the northern state was the fabulous testimony of the Reverend Horace Bushnell, an "able and celebrated divine" of Hartford, Connecticut. Not only had he himself been cured in Minnesota after visits to Cuba and California had failed to benefit him, but he had known a man who was so ill with consumption that he had spit up a piece of his lungs the size of a walnut and yet had become well and strong again in Minnesota's healthful air.  

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12 Excerpts from the doctor's letter were quoted by Mrs. Stowe in *Palmetto-Leaves*, 116-136 (Boston, 1873). The material quoted here appears on p. 123.  
13 The letter appears, among other places, in Bill, *Minnesota, 93-96*.  

**CHALYBEATE Springs, St. Anthony, 1870**
Almost equally useful was the experience of Henry A. Castle. As a stalwart young native of Quincy, Illinois, he won a captaincy in the Union army but lost his health in the process, so in 1866 he moved to Minnesota. Three years later he wrote a letter home, which was published in the Quincy Whig. "My faith in the almost unlimited powers of this climate, in lung diseases, has been only strengthened," said Castle. "I stand today stronger, heavier, and healthier than at any period of my life, while many of those ... who tearfully bade me farewell when I left Quincy, not expecting that I would return alive, have long since been followed to the tomb."

Doctors, too, were among the believers. At the 1870 meeting of the Minnesota State Medical Society a long discussion of the effects of the state's climate on consumption was tending toward skepticism when Dr. J. H. Murphy rose to testify. He said, in effect and in brief, "I am a living example of what our climate can do. I came to St. Paul twenty-two years ago, sick and emaciated, weighing 136 pounds. My doctors all said I had consumption. I have not had a sick day since, and today I weigh 226 pounds."

But what were the effects on Minnesota of its years as a national health resort? One immediate result, of course, was the prosperity of all sorts of business enterprises catering to the needs of invalids. Hotels and boardinghouses and "retreats for invalids" multiplied, patent medicine vendors flourished, baths and water cure establishments sprang up everywhere, and town after town discovered in someone's back yard medicinal springs that it promoted in an effort to become the "Saratoga of the West." But what of the long-range effects?

Dr. J. Arthur Myers, in his book entitled Invited and Conquered, contends that by inviting consumptives into the state so blithely and casually, early Minnesotans created a problem of tuberculosis control which it has taken decades and millions of dollars to conquer. But on the positive side, we may record the kind of people who were attracted to residence in Minnesota by its reputation as a health resort.

In Minnesota as a Home for Invalids Dr. Mattocks quoted a letter he had received from a Vermont man who was planning to visit Minnesota for his health. He asked whether he should bring his wife along and whether she would find a congenial society in St. Paul. She would, Dr. Mattocks replied, "because many families of wealth and high social position are compelled to live in our state because of health ... most of our large business and professional men in St. Paul sought our climate for reasons of health."

Of the same opinion was an invalid visitor to St. Paul who reported in a letter to the New York Herald that among the "thirty or forty" fellow sufferers whose acquaintance he had made during his stay was a young man who, just as he was "ready to step into a coveted partnership" in business in the East, developed symptoms of consumption. He had given up his bright prospects and moved to Minnesota, where he had already gone into business. "This, I have no doubt," said the writer, "is the experience of some of the wealthiest and foremost men in the state."

Statistical evidence of the truth of these statements is difficult to come by, but one can readily assemble an impressive list of individual examples to support them. I can mention here only a few of the scores that have come or been brought to my atten-
— doctors, lawyers, merchants, ministers, all men of education and attainments above the average who, moving to Minnesota for reasons of health, became leaders in their communities and in the state.

The James B. Wakefield who moved to Mankato from New Delhi, Indiana, became one of southern Minnesota’s major citizens and represented his district in both the state legislature and the national Congress. The Henry A. Castle who outlived the forebodings of his friends in Quincy, developed into an important merchant and manufacturer, was editor of the St. Paul Dispatch for nine years, and held a variety of city and state offices.

Joseph A. Wheelock, for thirty-one years a highly influential editor of the St. Paul Pioneer Press, was so ill when he journeyed to Minnesota as a young man that a doctor told him he would die on the way to the Red River Valley, where he planned to go in the hope that roughing it in the wilds would furnish the cure he sought.

Dr. W. W. Mayo, who fled from the malarial hell of the Wabash Valley in Indiana, lived to see his sons make Rochester, Minnesota, a world famous health resort of a different and more certain kind. Stephen Miller, one of Minnesota’s Civil War governors, had moved to the state six years before in search of health. Dr. John D. Ford gave up his successful medical practice in Connecticut because of ill health; as a resident of Winona, he served as father, midwife, doctor, and nurse to Minnesota’s system of state normal schools.

Dr. J. H. Murphy, the man who testified that he had gained ninety pounds in Minnesota, was St. Anthony’s first, and for many years its foremost, doctor. Later he moved to St. Paul, became a leader in the state medical society, and was at one time vice-president of the American Medical Association. Dr. Brewer Mattocks knew whereof he wrote on the subject of Minnesota as a home for invalids. A copy of his book in the University of Minnesota library is inscribed to Dr. Jacob H. Stewart: “With the kindest wishes of the author who ‘once upon a time’ followed your advice with respect to climate and was thus enabled to live long enough to write a book and present you a copy. If you do not think the book amounts to much, many think the life you saved does not amount to much, so we are even.”

Far from the least in this company of health-seekers was Dr. Alexander J. Stone. Although a colleague once said of him that “the less he knew about a subject the more brilliantly he could talk about it,” Stone was unquestionably a leader among Minnesota’s medical pioneers. He was the state’s first, and for a long time its foremost, specialist in gynecology. He established Minnesota’s first medical magazine, the Northwestern Medical and Surgical Journal, and was for a number of years the editor of its successor, the Northwestern Lancet. He also founded Minnesota’s first medical school, the St. Paul Medical College, and after its incorporation in the University of Minnesota medical school, he became a member of the university’s medical faculty. He was often an officer of the state medical society, and he shepherded through the state legislature many a piece of progressive medical legislation.

This roster of men of substance and ability who came to Minnesota for reasons of health could, I suspect, be extended almost indefinitely. In 1868 a visitor to Minnesota wrote, “Ask any man you meet in Minnesota what induced him to come here. One-half at least would tell you it was for the health of himself or some member of his family.” The proportion stated here may have been exaggerated, but I think its implications were not. If through the years Minnesota’s most important natural resource has been the unusual caliber of its citizenry, the period when Minnesota was Florida’s rival made a substantial contribution to that asset.

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Letter in the Cincinnati Commercial, reprinted in the Rochester Post, June 27, 1868.

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