James Marion Sims, M.D., LL.D.

Jonathan Tavares, B.S.
*Thomas Jefferson University*

Charles J. Yeo, MD
*Thomas Jefferson University*

Pinckney J. Maxwell, IV, MD
*Thomas Jefferson University*

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Few physicians have been as celebrated and loathed as James Marion Sims, M.D., LL.D. Dr. Sims’ modest early life and education never could have predicted that he would one day be called the “Father of American Gynecology.”\(^1,2\) Lauded by contemporaries and early historians as “one of the most original and gifted of American surgeons,” he performed the first successful operation to correct vesicovaginal fistulas (a condition that prior to 1852 was known as the “stumbling-block of gynecology”).\(^1\) Today, the same work that earned Dr. Sims fame, fortune, and innumerable honors has been called into question, because of the unethical manner in which he developed his surgical innovation.\(^1,3\)

J. Marion Sims (Fig. 1) was born to John Sims and Mahala Mackey on January 25th, 1813 in Lancaster County, South Carolina.\(^3\) James was the first of eight children. By his own account, he was a mediocre student who “never was remarkable for anything... except good behavior.”\(^3\) His father wanted him to become a lawyer, whereas his mother believed that he should become a minister. Out of apathy for either profession, he chose a career in medicine.\(^4\)

Sims began his medical education in 1833 at Charleston Medical School (known as the Medical University of South Carolina today), where he studied for one year before relocating to Philadelphia in 1834 to attend Jefferson Medical College.\(^3\) In May, 1835, Dr. Sims graduated from Jefferson and returned to Lancaster to begin his own practice. Unfortunately, his first two patients, both infants, died under his supervision.\(^3,4\) Dr. Sims relocated to Mt. Meigs, Alabama, but constant bouts of malaria forced him to finally settle in Montgomery, Alabama in 1840, in search of a healthier climate.\(^3,4\) He quickly earned a reputation as a skillful general surgeon and was soon able to build a private eight-bed hospital in the rear of his home.\(^4\)

During this period, Dr. Sims made a living as a physician to slaves on local plantations and showed no particular interest in gynecology.\(^2,4\) In fact, the future “Father of American Gynecology” even wrote that “If there was anything I hated, it was investigating the organs of the female pelvis.”\(^4\) Everything changed in 1845 when he was summoned to care for a woman who had fallen off a horse and injured her pelvis.\(^3,4\) Through digital examination, Dr. Sims found that she had a retroverted uterus. He placed the patient in a lateral decubitus position, her knees touching her chest, the Sims position (Fig. 2), enabling him to return her uterus to its original position.\(^1,4\) He was so excited about this discovery that he immediately went to a hardware store to buy a pewter spoon, which he then proceeded to bend into the first version of a Sims speculum (Fig. 2).\(^3,4\) Later, upon examining a slave with a vesicovaginal fistula through the use of his eponymous position and speculum, Dr. Sims wrote, “I saw everything as no man had ever seen before... I
soon operated upon the fistula, closing it in about an hour’s time.”3, 4 Unfortunately, the operation failed.3, 4

What happened next would earn Dr. Sims his fame (and later infamy). Intent on curing vesico-vaginal fistulas, he acquired 11 female slaves with the condition, promising their masters to “lodge, board, and treat them.”2 Over the next 3 years, Dr. Sims repeatedly operated on these women, all in vain because their fistulas would always reopen.4 Three slaves in particular: Lucy, Anarcha, and Betsey, were operated on several times; Anarcha alone had over 30 surgeries.2 Surprisingly, even though ether was available as an anesthetic, Dr. Sims decided against its use because he did not consider the pain from his repair enough to justify its administration.2 In 1849, Sims decided to use silver sutures when closing his patients’ fistulas.2, 4 One reason why his previous fistula surgeries failed was related to his use of silk sutures, which became infected and allowed the fistula to recur.2, 4 The silver sutures, however, did not harbor pathogens like the organic sutures did.2, 4 Using this new tool, Dr. Sims performed the first successful vesico-vaginal operation on Anarcha. He successfully operated on Lucy and Betsey soon after.2, 4 His work was published in the American Journal of the Medical Sciences in 1852, launching his career as an internationally renowned surgeon.1–4

In 1853, soon after his seminal paper was published, Dr. Sims moved to New York City.2, 4 He then proceeded to establish the Woman’s Hospital [sic], the first hospital dedicated to gynecology in the United States.1–4 Dr. Sims became a very influential clinical and academic surgeon in New York City, but the
outbreak of the Civil War in 1861 put the Southern doctor in a difficult position. Dr. Sims decided to move to Europe, where he was well received, and where he enjoyed a lucrative career as a surgeon and consultant across the continent by demonstrating his famous operation in many of Europe’s best medical centers. Dr. Sims was even called upon to care for Empress Eugénie and other members of the French royal family. When the Franco-Prussian War began in 1870, Dr. Sims served as chief surgeon in the impartial Anglo-American Ambulance Corps. He was awarded medals and honors from both Germany and France for his service.

Dr. Sims returned to New York in 1872 to continue his work at the Woman’s Hospital. He was elected president of the American Medical Association in 1876, and in 1880 he was named president of the American Gynecological Society (a society he helped organize). Although his contributions to gynecology made the deepest impact, Dr. Sims also contributed to the field of general surgery as one of the first surgeons to perform a cholecystectomy in 1878. He published a groundbreaking paper on aseptic exploration of the peritoneal cavity in 1881, the same year he was made honorary president of the International Medical Congress in Geneva.

Dr. Sims died on November 13, 1883 while working on his autobiography; he was 71-years-old. In 1894, a life-sized statue of him was erected in Bryant Park in New York City by “European and American admirers.” Dr. Sims left behind a valuable list of contributions to alleviate human suffering: his eponymous speculum and position, silver sutures, other tools, and, of course, the surgical cure for vesicovaginal fistulas. However, one must take into consideration that such work was dependent upon the involuntary participation of other human beings. These slaves endured indescribable pain, not only as a result of their condition, but also due to the repeated operations performed upon them without anesthesia. Today James Marion Sims is regarded by modern historians and physicians as a controversial figure who, in search for a cure that would eventually help thousands of women, ignored one of the most basic pillars of medicine: “Primum, non nocere.”

REFERENCES