

NATIONAL HISTORIC LANDMARK NOMINATION

NPS Form 10-900

USDI/NPS NRHP Registration Form (Rev. 8-86)

OMB No. 1024-0018

LYDIA PINKHAM HOUSE

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United States Department of the Interior, National Park Service

National Register of Historic Places Registration Form

1. NAME OF PROPERTY

Historic Name: Lydia Pinkham House

Other Name/Site Number:

2. LOCATION

Street & Number: 285 Western Avenue

Not for publication:

City/Town: Lynn

Vicinity:

State: MA

County: Essex

Code: 009

Zip Code: 01904

3. CLASSIFICATION

Ownership of Property

Private: X

Public-Local: ___

Public-State: ___

Public-Federal: ___

Category of Property

Building(s): X

District: ___

Site: ___

Structure: ___

Object: ___

Number of Resources within Property

Contributing

1

1

Noncontributing

1 buildings

___ sites

___ structures

___ objects

1 Total

Number of Contributing Resources Previously Listed in the National Register: 2

Name of Related Multiple Property Listing:

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4. STATE/FEDERAL AGENCY CERTIFICATION

As the designated authority under the National Historic Preservation Act of 1966, as amended, I hereby certify that this ____ nomination ____ request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60. In my opinion, the property ____ meets ____ does not meet the National Register Criteria.

Signature of Certifying Official

Date

State or Federal Agency and Bureau

In my opinion, the property ____ meets ____ does not meet the National Register criteria.

Signature of Commenting or Other Official

Date

State or Federal Agency and Bureau

5. NATIONAL PARK SERVICE CERTIFICATION

I hereby certify that this property is:

- ____ Entered in the National Register
- ____ Determined eligible for the National Register
- ____ Determined not eligible for the National Register
- ____ Removed from the National Register
- ____ Other (explain): _____

Signature of Keeper

Date of Action

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6. FUNCTION OR USE

Historic: DOMESTIC

Sub: single dwelling

Current: DOMESTIC

Sub: single dwelling

7. DESCRIPTION

ARCHITECTURAL CLASSIFICATION: LATE VICTORIAN: Second Empire

MATERIALS:

Foundation: brick

Walls: wood (clapboard)

Roof: asphalt

Other:

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Describe Present and Historic Physical Appearance.**Lydia Pinkham House**

The Lydia E. Pinkham house stands on Western Avenue (State Route 107), a major thoroughfare in the City of Lynn that had been laid out as the Salem Turnpike in 1803. This section of Western Avenue is predominantly residential with houses on relatively narrow lots built close to the street. There are also buildings that reflect early commercial development, including a wooden factory built in 1886 and a brick commercial block erected in 1896 that were constructed by the Pinkham family after Lydia Pinkham's death. The Pinkham House is on a small lot of less than 4,000 square feet, a reduction from the original lot that included the first small laboratory building for the family enterprise (since demolished).

As originally developed after the Civil War, this section of Lynn predominantly consisted of scattered single-family homes south of the central business district. Charles O. Beede sold the house lot in November 1871 to Leander S. Berry, a salesman. Either Beede or Berry then constructed the house, which was completed by 1872. Beede acquired the property again in 1876 and rented it to Isaac and Lydia Pinkham after their bankruptcy. Although a small cottage, the exterior was designed in the Second Empire style, then very fashionable in Massachusetts. In Lynn the style was introduced in 1867 with the new city hall, followed by the homes of several wealthy businessmen. In 1877 when the Pinkham family first occupied the house, however, it was the only example of the Second Empire style in this neighborhood of traditional middle class homes. While the house was distinctive compared to its neighbors, the lack of interior finishes, such as ornamental plaster or fireplaces with mantels, supports the belief the house was built on speculation.¹

The house is two-stories high with a long two-story ell. The roof of the main block, which defines the architectural style, is a double pitch Mansard. Extending from the rear is a long wing, with a basement partially exposed above grade in the rear. Now a full two stories, the wing received its second story addition in 1922 with a pavilion roof covered in wood shingles. A rear porch at the intersection of the main block and the ell also has a second story sleeping porch that was added at the same time as the additional story to the ell.

The wood frame building has clapboard siding with beaded edges on the original section of the house and ell. The foundation is brick, and the Mansard roof has asphalt shingles. The windows are wood with one-over-one double hung for the first floor and two-over-two in the original dormers. There are two bay windows, one on the front (east) elevation and one on the south side. The Mansard roof dormer windows have scroll-shaped skirting and segmental arch roofs. On the main block of the house the windows have decorative trim, as does the cornice, with small paired brackets and dentils. Framing the main entrance on one side of the east elevation is a portico supported on round wood columns and standing on a platform and steps of brick construction. The wood door is framed by sidelights, and transom, as well as paneled pilasters. The columns supporting the portico are round rather than the original beveled posts, and probably date from the 1920s, as does the brick portico stoop that was originally wood. Also replaced with the portico changes was the wood front door, paneled with two glazed lights in the upper section, and the leaded sidelight glass on either side of the door.

A sleeping porch was added to the roof on the rear porch in 1922. The porch itself has columns and a railing in the Colonial Revival style, (there is no documentation available regarding its original appearance). On the south side of the main block of the house, adjacent to the bay window, is a chimney that was added in 1927. The chimney extends up through the Mansard roof and is flanked at both floors by small leaded glass windows. This alteration replaced a double hung sash on the first floor and a dormer window in the Mansard, although the

¹ The documentation on the house derives from the extensive research done by historian Arthur Krim who prepared the National Register nomination in 2012.

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decorative skirting has been retained, and the segmental arch dormer roof that is in the style of the other dormers. As the house originally did not have fireplaces, the only historic chimney shafts are in the ell, one near the rear of the main block and one at the west end.

The house appears to retain substantially the original floor plan with many interior finishes reflecting architectural tastes of the post-Civil War period. In plan the first floor consisted of the side entrance hall, the parlor, dining room, and a chamber. These rooms are substantially intact with original trim, windows, many of the paneled doors, and the hall staircase. The staircase features a large newel post and turned balusters supporting a railing that extends up to the large open room on the second floor. To the left of the hall is the parlor with its bay window on the front of the house. This room also has the large brick fireplace (replacing a window as noted above), that is a substantial addition made in 1927. Directly behind the parlor is the dining room, and behind the stair hall is a chamber that may have been used as a bedroom or sitting room. This chamber has doors from both the hall and the dining room, and one window with double-hung sash. In the dining room are the second bay window and a door to the ell with its modern kitchen. The kitchen dates from the mid-twentieth century, although there are original doors and trim to the storage room in the ell and the back stairs to the second floor. Access to the rear porch is also from the kitchen.

On the second floor the staircase opens with no railing into a large room that extends across the front half of the Mansard roof. At the head of the stairs is a built-in bench with scrolled arms that appears to date from the nineteenth century. With original baseboards and wood floors, this room appears to be substantially intact except for the brick fireplace and mantel added to the south wall. As a large room at the head of the stairs, this space may date to Lydia Pinkham's occupancy and partial use of the house for an office.²

A long narrow hallway extends from the center of this room leading to the other second story rooms in the Mansard, as well as the added second story over the ell. Within the original main block on the right (north) of the hall are a storage room and a bathroom. The later was presumably first converted into a bathroom in the 1920s, although no evidence of a water closet in another location exists. Adjacent to the bathroom is the back stairs leading to the kitchen. Across from these two rooms on the south side of the hall is a chamber with original finishes. This room also includes a door to the sleeping porch that replaced a dormer when that porch was added. As noted, at the end of the hall is a door leading to rooms in the added second story of the ell.

At grade level in the rear of the house is the basement of the ell, which may have been extended in the late nineteenth century for the Pinkham family as the rear section has wood shiplap siding rather than brick. The basement extends under the entire house, but the principal room is below the current kitchen and features wood floors, large wood storage cabinets, and a nineteenth century cast iron stove. This room may have been the original kitchen to the house. The current stove post-dates Lydia Pinkham's death, but in the wood floor are impressions marking the location of an earlier larger stove, possibly used for the early preparation of Pinkham's elixirs.

Shed

Directly behind the long ell to the house is a one story shed thought to have been constructed in circa 1890. Constructed of wood with vertical siding and a garage door, this building post-dates Lydia Pinkham's occupancy and is therefore non-contributing.

² Historian Arthur Krim notes that the changes in the 1920s were to convert the house for use as a combined residence and doctor's office. While the second floor may have been used as a waiting room, as noted in the National Register nomination, this suggests a late twentieth century interpretation of a doctor's waiting room with multiple patients, a late twentieth-century phenomena.

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Integrity

For a small cottage, the house's exterior was designed to be fairly stylish but there is no evidence that the interior had the elaborate finishes typically associated with the late nineteenth century. There were no fireplaces or, as far as it is known, cornice moldings or ceiling medallions. Built as a rental property, the house was evidently intended to be adaptable for different occupants. With the changes made in the 1920s, and the current furnishings throughout the house, it is difficult to fully document all of the changes. On the first floor the stair hall, rear chamber, parlor (except for the fireplace) and dining room are essentially original. On the second floor the large open room in the front of the Mansard may well be original (again, except for the fireplace), and the hall and second floor chamber are also substantially intact. The Colonial Revival style changes made in the 1920s are significant, particularly the large fireplaces, the kitchen, and the bathroom. It is believed that the essential physical features, however, reflect the period of Lydia Pinkham's occupancy.

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State Significance of Property, and Justify Criteria, Criteria Considerations, and Areas and Periods of Significance Noted Above.**Summary**

The Lydia Pinkham House, located in Lynn Massachusetts, is nationally significant under NHL Criterion 1 for its association with the Lydia Pinkham Medicine Company. Patented in 1866, Lydia Pinkham's Vegetable Compound was marketed and sold across the United States throughout the late nineteenth and early twentieth centuries. Within the culture of the medical marketplace which encouraged patients to seek "health in a bottle" through expenditures on over-the-counter drugs,³ Lydia Pinkham's Vegetable Compound became one of the most widely available and best known patent medicines of the Victorian era. The house is also significant under NHL Criterion 2 for its association with Lydia Pinkham, the creator and marketer of Lydia Pinkham's Vegetable Compound. While patent medicines were often sold under the name of their creator, Pinkham's compound was strongly associated with her both because her company's marketing broke new ground by using her image as a promotional tool and because she herself was believed to respond directly to her customers, reviewing and responding to personal and often highly intimate requests for advice from customers.

Throughout much of the nineteenth century, physicians struggled to assert their authority within a diffuse medical marketplace. Competing medical sects, combined with the failure to license or regulate the practice of medicine, meant that patients turned to a variety of practitioners and used a range of varied practices when they were ill. Within this complex and unregulated medical marketplace, the developers and marketers of patent medicine "not only sold drugs, but also distributed guides to health and invited the puzzled and the sick to write them for advice about their medical problems."⁴ Although these medicines often reflected and incorporated new advances in scientific understanding of illnesses, patent medicines, more often than not, were marketed as cure-alls for a variety of diseases, ensuring a wide market.

Patent medicines enabled patients, not doctors, to diagnose and treat their illness. By ceding control to the patient, these medicines allowed people not only to treat their own illnesses but also to avoid invasive tactics by physicians---or so purveyors of patent medicines claimed. In a culture which prided itself on female modesty, patent medicines provided women the opportunity to diagnose and treat themselves without recourse to a male practitioner. Adding to the allure of these medicines was their relative inexpensiveness; patent medicines were typically less expensive than a visit to a physician, and payment for these nostrums could also be spread out over time, allowing patients to make smaller and therefore more manageable investments in their health over a prolonged period of time.

It was here in this Second Empire style house located in Lynn Massachusetts that Lydia Pinkham, in conjunction with her three sons (Daniel, William, and Charles), created, produced, and marketed one of the most famous, if not *the* most famous, of all patent medicines. Although the production of Pinkham's herbal medicine predated by several years the family's move to this house, the Lydia Pinkham House was most strongly associated with the growth and success of the Lydia E. Pinkham Company; it was here that the company came to dominate the national market for herbal remedies for "female complaints."

The period of significance for this property spans the years between 1877 when the Pinkhams first moved here to 1886 when the company's success led to the construction of a new three-story wood frame factory just down the street from the Lydia Pinkham House. That same year Charles Pinkham, then the director of the Lydia E. Pinkham Company and the only surviving son of Lydia Pinkham, also moved his own family out of the

³ Nancy Tomes, "Medicine and Consumer Culture, 1900-1940," *Journal of American History* (September 2001): 531.

⁴ Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1982), 127.

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Pinkham House. Because Lydia had died in 1883, the removal of Charles, his family, and his father from the house signaled the end of the Pinkham's' use of this house as both their residence and the official headquarters for the Lydia E. Pinkham Company.

The period of significance post-dates Lydia Pinkham's death because even after her death, the marketing for the compound continued to rely heavily on her image and name. This aggressive exploitation meant that in the years immediately following her death, women continued to write *en masse* to Lydia Pinkham at 285 Western Avenue, Lynn, Massachusetts. Company stenographers continued to answer letters in Pinkham's name, thereby perpetuating the idea that she continued both to be alive and to take a special interest in women who used her nostrum.⁵

Contested Authority

Although "nineteenth-century Americans...continued to be fatalistic about disease, to view it in its extreme manifestations as God's will,"⁶ patients did actively seek treatment for a variety of diseases. In the decades surrounding the Civil War, health practices and attitudes toward disease underwent significant changes. These changes included a growing push toward professionalization of the medical field as well as shifts in how patients were treated. Even as these changes occurred, the practice of medicine remained overwhelmingly unlicensed throughout this period⁷ and no one group was seen as having a monopoly on medical expertise. Instead, Victorian Americans routinely consulted a range of practitioners and used a variety of remedies. The diversity of medications and available practitioners combined with limited to nonexistent licensing laws meant that, as one nineteenth-century American put it, "any one, male or female, learned or ignorant, an honest man, or a knave, can assume the name of physician and 'practice' upon any one to cure or to kill...without accountability."⁸

Before the Civil War, medical practitioners were loosely divided between those who were characterized as "regular" or mainstream practitioners and "irregular" or sectarian practitioners. While regular practitioners did not consistently attend medical schools or even possess medical degrees, these practitioners did endorse and follow the highly theoretical medical systems that had been developed by western European medical practitioners such as Herman Boerhaave, George Stahl, William Cullen, and others. Reflecting the theoretic underpinnings of these highly developed systems, regular practitioners often used "heroic" medical treatments--that is, treatments which included bloodletting and purges. Not surprisingly, highly invasive treatments of this type led to heavy criticism of regular medical practitioners.

During the first few decades of the nineteenth century, the often painful nature of these highly invasive treatments meant that growing numbers of patients turned to other sources, with many consulting druggists or pharmacists for advice and medical care. As a result, the boundaries between physicians and pharmacists often blurred during this period. Physicians, for example, not only prescribed drugs, they might also directly

⁵ Samuel Hopkins Adams, "The Great American Fraud," *Collier's Weekly*, February 17, 1906. Adams caustically referred to Lydia Pinkham as "the immortal Lydia Pinkham," noting "The great majority of the gulls who 'write to Mrs. Pinkham' suppose themselves to be addressing Lydia E. Pinkham, and their letters are not even answered by the present proprietor of the name, but by a corps of hurried clerks and typewriters." Nine years after Adams' piece first ran, the AMA highlighted this practice as one of the abuses perpetuated by the Lydia E. Pinkham Company in its series about pharmaceutical reform. "Propaganda for Reform: Lydia Pinkham's Vegetable Compound," *The Journal of the American Medical Association*, May 15, 1915, 1674-1675.

⁶ James H. Cassedy, *Medicine in America: A Short History* (Baltimore: Johns Hopkins University Press, 1991), 44.

⁷ Attempts to impose and enforce licensing had been done at the state level but by the second decade of the nineteenth century, attempts at licensing had effectively fallen by the wayside. Rosemary Stevens, *American Medicine and the Public Interest: A History of Specialization* (Berkeley: University of California Press, 1998), 23.

⁸ Lemuel Shattick quoted in James Harvey Young, *Pure Food: Securing the Federal Food and Drugs Act of 1906* (Princeton: Princeton University Press, 1989), 23.

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dispense these drugs for their patients. Similarly, pharmacists not only dispensed drugs, they also might directly provide medical advice and prescribe treatments for their clients. However, during the mid-nineteenth century, the emergence of both medical and pharmaceutical schools as well as medical and pharmaceutical professional societies began to increase and sharpen the divisions between medical practitioners and druggists or pharmacists.

While medical societies and other professional institutions promoted and protected regular medical practitioners and pharmacists, large numbers of Americans preferred to use sectarian practitioners. Regular practitioners were quick to condemn these sectarian practitioners as “quacks” but sectarian practitioners were a diverse and often difficult to define group. Many developed and/or followed complex medical systems of their own. Samuel Tomson, for example, was a self-taught practitioner who developed his own medical system after becoming frustrated with “regular” medicine. Advocates of Tomsonian medicine, who could be found across the United States, emphasized both the use of herbal remedies to expel toxins from the body as well as the democratic idea that “any commoner could practice medicine.” This idea that every man or woman could be his or her own physician had an especially strong appeal in democratically-minded America and it was an idea which would be picked up and expanded upon by many later practitioners and purveyors of patent medicines, including Lydia Pinkham.⁹ Although Tomson was self-taught, many other “irregular” practitioners were, at least by the standards of the day, well-educated.

Facing stiff competition from these irregular practitioners, mid-nineteenth-century regular practitioners began turning away from the heroic treatments which had been popular in the early decades of the century. This move was shaped, in part, by a growing questioning of traditional medical systems but also the demands of the medical marketplace played a significant role in this shift in medical practices and even medical theories. Not surprisingly, patients, who held the power of the purse, were often reluctant to follow treatments which they regarded as painful or unpleasant. Eager to attract and please these paying patients, growing numbers of physicians began to prescribe more acceptable “irregular” remedies such as opiates and herbal tonics during the mid-nineteenth century.

Drug Regimens, Drug Purity, and Patent Medicines

As part of this practice of offering patients differing types of treatments, mid-nineteenth century practitioners also now began to carry “on a more or less ongoing process of trial and error on...patients with respect to the various therapeutic modes or options of the day.”¹⁰ Some practitioners hedged their bets by offering their patients both orthodox and irregular remedies.¹¹ Opiates and alcohol-based tonics and restoratives, which had always been used in western medicine, became increasingly common.¹² These drugs were usually prescribed as palliatives but many patients and even some medical practitioners viewed these medications as having curative properties.

Although publication of the first *Pharmacopeia of the United States* in 1820 helped standardize how drugs were dispensed by creating a compendium of therapeutic products along with recipes for their preparation, concerns about the purity of available drugs persisted. Twenty-eight years later, these concerns came to a head with the Mexican American War; while the causes behind the high levels of troop mortality were varied, many

⁹ James C. Whorton, *Nature Cures: The History of Alternative Medicine in America* (Oxford: Oxford University Press, 2002), 37.

¹⁰ James H. Cassidy, *Medicine in America: A Short History*, 29.

¹¹ Peter Conrad and Valerie Leiter, “From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation,” in *Pharmaceuticals and Society: Critical Discourses and Debates*, Edited Simon J. Williams, Jonathan Gabe and Peter Davis (London: Wiley Blackwell, 2009), 14. Young, *Pure Food*, 23.

¹² Some practitioners who turned away from heroic treatments were as quick to reject drugs as they had been to reject heroic treatments. James C. Whorton, *Nature Cures: The History of Alternative Medicine in America*, 7.

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Americans believed that adulterated drugs had significantly contributed to these elevated levels of mortality. Convinced that adulteration often occurred *before* these drugs were imported into the United States, Congress passed the Drug Importation Act of 1848. Although limited to regulating imported drugs such as opium, this Act was the first federal law to require that drugs be checked for “quality, purity, and fitness for medical purposes.”¹³ Congratulating themselves for living in an era in which “the day of incantations and charms, of sympathetic and mesmeric cures, has passed,” the law’s supporters believed that the Act would regulate the drug trade and, indirectly, the medical and pharmaceutical professions.¹⁴ But while the law was enforced during its early years, the temptation to allow adulterated products into the United States proved too great. Within two years of its passage, enforcement was inconsistent and by 1860, the law had become meaningless.

Even when enforced, the law had done little to regulate and control the kinds of medicines available to most Americans. There was a long-standing tradition of home remedies and self-dosing. In addition, there was no regulation of drugs that were created and sold within the United States. Further complicating this was the diversity of medical systems and medical practitioners. Because few patients consistently followed one medical system to the exclusion of others and because the efficacy of drugs in the pre-antibiotic era was limited, most Americans were exposed to and used a dazzling array of different drugs and remedies to treat their illnesses. As a result, regulation of the nineteenth-century drug market was nearly impossible.

Although no one form of treatment was dominant, eighteenth- and nineteenth-century patients often used patent medicines. In the eighteenth century, these patent medicines were primarily imported from Britain “but after the Revolutionary War a home-grown industry began to develop.”¹⁵ While the term “patent medicine” was, and is, used to describe proprietary or trademarked drugs which patients used without a prescription, the term is misleading as many of these drugs were not patented. Patent medicines were, however, typically composed of ingredients which were not disclosed to the general public.

Lydia Pinkham and the Creation of the Lydia E. Pinkham Vegetable Compound¹⁶

Born Lydia Estes, Lydia E. Pinkham (1819-1883) was the daughter of one of Lynn’s more prominent citizens. The Estes family, who were Quakers, could trace their history back to the founding of Lynn and by the time, Lydia was born, the family was relatively prosperous. William Estes, Lydia Pinkham’s father, owned a large farm at the corner of Estes and Broad Streets, about 12 miles southeast of the Lydia Pinkham House.

As staunch abolitionists, the Estes hosted anti-slavery meetings in their home and counted abolitionists such as William Lloyd Garrison and Frederick Douglass among their friends. Pinkham was taught to share these views and in 1835, when she was sixteen, Pinkham, along with her mother and older sister, became a founding member of the Lynn Female Anti-Slavery Society. Eight years later, in 1843, Pinkham was elected secretary of the Freeman's Institute, an organization whose president was Frederick Douglass.

It was at the Freeman’s Institute that Lydia met Isaac Pinkham, a 29-year-old widower with a five-year-old daughter who had only recently arrived in Lynn. The two married in September 1843, setting up housekeeping on Estes Street in a house provided by Lydia’s father. Although Isaac Pinkham was a shoe manufacturer in a town in which this industry was widespread, he struggled---and failed---to establish himself financially. In the decades that followed this first failure, Isaac repeatedly changed occupations. The resulting financial instability

¹³ 9 U.S. Stat. 237 (June 26, 1848).

¹⁴ Thomas Owen Edwards quoted in James Harvey Young, *Pure Food: Securing the Federal Food and Drugs Act of 1906*, 12

¹⁵ John Parascandola, “Patent Medicines and the Public’s Health, Public Health Reports Vol. 114, no. 4 (Jul. - Aug., 1999), 320.

¹⁶ This section (“Lydia Pinkham and the Creation of the Lydia E. Pinkham Vegetable Compound”) draws from the National Register of Historic Places nomination.

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led the family, which included their four children (Charles Hacker Pinkham, born 1844; Daniel, born 1849; William, born 1852; and Aroline, born 1857), to move repeatedly.

In 1857, the Pinkham family moved into a Greek Revival-style house at 227 Great Road, Bedford, a rural town about 20 miles west of Lynn. There, Isaac took up farming and it was here that Lydia, at least according to her early biographers, began experimenting with an herbal formula for "female complaints." This herbal tonic would eventually become Lydia E. Pinkham's Vegetable Compound. While the ingredients for this remedy were never officially released, the tonic was probably a combination of pleurisy root, unicorn root, life root, fenugreek seed, and black cohosh. A significant amount of alcohol was added supposedly as a stabilizer and the tonic was then simmered over the stove before being bottled.

Stories abound about the source of the recipe. It is possible that the tonic was derived from folk remedies that Lydia learned as a child (between the seventeenth and nineteenth centuries, women typically passed medical "receipts" or recipes down to their daughters). But it is also possible that she based the recipe on one in John King's *American Dispensatory* (1852). Claims were also made that the formula for the tonic was given to Isaac Pinkham by George Clarkson Todd to partially satisfy a debt. Any and all of these stories may be true as they reflect the ways in which medical recipes and knowledge were shared among nineteenth-century Americans, especially women.¹⁷

In 1860, the Pinkhams returned to Lynn, where Isaac went into the kerosene business. They lived for a time in the Estes family house on Estes Street. Lydia's mother died in 1862, and with her death came the final division of the Estes family estate. That same year, Isaac sold the Bedford house and property he owned in downtown Lynn. By 1865, Isaac had moved his family to the village of Wyoma, on the outskirts of Lynn, northwest of the Lydia Pinkham House.

The 1865 Lynn directory lists Isaac and Charles Pinkham as living on Boston Street "near the south Peabody line." Charles's occupation was listed as engineer while Isaac had moved on to become a kerosene manufacturer. The house they lived in at that time may have been a two-family dwelling, but changes in street names have made it impossible to determine if the house is even extant. By 1871, the Pinkham's other two sons, Daniel and William, were also living with the family on Boston Street. Dan, Charles, and Isaac were now listed as traders (probably realtors), while William was described as a student. Lydia herself was not listed in the directory as women were only listed if they were widows and therefore heads of households. Because Isaac's investments in real estate during the Civil War and the real estate boom that followed proved so successful, by 1872 the family had moved from their first house on Boston Street to what many described as the finest house in Wyoma also located on Boston Street. While directories indicate the second house was at what was then 185 Boston Street in Wyoma, research to date has not located the site, and the area where it most likely stood is now primarily a commercial one.

The family's good fortune, however, was short-lived as the Panic of 1873 triggered a nationwide depression which lasted for six years. Isaac Pinkham now faced bankruptcy and was nearly arrested for nonpayment of his debts. Family lore held that, with the family's finances decimated, the Pinkham children urged their mother to begin selling her herbal remedy commercially. Pinkham had sold the medicine previously but she had not done so on a consistent basis. According to a story in the local paper, a group of women from Salem had arrived at the family house in Wyoma in 1875, asking for "a half dozen bottles of Mrs. Pinkham's medicine." Lydia's son

¹⁷ This tradition stretched back to early modern Britain. See for example, Harold J. Cook's discussion of medical knowledge among laypeople. Harold J. Cook, "Good Advice and Little Medicine: The Professional Authority of Early Modern English Physicians," *Journal of British Studies*, Vol. 33, no. 1 (Jan., 1994), 1-31.

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Dan believed that if women were willing to travel from neighboring Salem to obtain his mother's tonic medicine, a wider market for this compound might exist.

Commercial production of the compound began that year at the Pinkham family residence in Wyoma and the product was first sold from this residence. The Pinkham children worked with their mother to bottle, promote, and sell the herbal remedy (Isaac had become ill and appears to have played little to no role in the company). The Lydia E. Pinkham Company "was officially organized in 1876 [and] the Pinkhams, worried that Isaac's creditors might try to claim the profits of the business named Will Pinkham sole proprietor."¹⁸ Although most patent medicines were never patented, a label patent for "Lydia E. Pinkham's Vegetable Compound" was registered by Lydia E. Pinkham of Lynn, Massachusetts, with the U.S. Patent Office on February 9, 1876 (Label Patent 536; USPO Official Gazette 9: 1876). Despite these promising beginnings, the company struggled with the "Pinkhams count[ing] themselves lucky if they could sell a bottle a day."¹⁹

In 1876, William Pinkham had spent brief stints in New York and New Jersey attempting to sell the compound. Failing to establish a demand for the nostrum, Pinkham decided to spend the then-astronomical sum of \$60 on a one page ad in the *Boston Herald*. This decision, hotly contested within the family, led to a dramatic spike in sales. Following this success, the Pinkham Company became, as one scholar has put it, "a pioneer in DCTA [Direct to Consumer Advertising]" by pushing their product directly into consumers' hands.²⁰

Advertising

Drug purveyors had always marketed their products through advertising but while advertising and exaggerated claims about a drug's properties and success were the norm in both the eighteenth and nineteenth centuries, claims about a drug's efficacy "became florid and aggressive in the nineteenth century."²¹ This aggressive approach to advertising stemmed, in part, from the division between regular and irregular practitioners. Eager to differentiate themselves from those who advocated the use of patent medicines, purveyors of "ethical" drugs, that is drugs that were of a known composition, began to "to align themselves with the fledgling medical profession by adopting the AMA code of not advertising directly to the public."²² As a result, patent medicine companies, which had few qualms about making exaggerated claims, increasingly came to dominate the advertising business.

The pervasiveness of patent medicine advertising meant that writers seeking to enter the ad business needed to be able to write medical copy. As Charles Hopkins, "one of the premier ad writers of the nineteenth century," put it, "copywriting for medicines was the supreme text of a writer's ability because 'medicines were worthless merchandise until a demand was created.'"²³ The ubiquitous nature of medical advertisements also meant that most early ad men wrote medical copy at some point in their career, with the result that the practices and

¹⁸ Sarah Stage, *Female Complaints: Lydia Pinkham and the Business of Women's Medicine* (W.W. Norton and Company, 1979), 32. Will was the only family member not burdened by debt; Lydia, of course, was prevented from being named sole proprietor because of her status as Isaac's wife.

¹⁹ *Ibid.*, 33.

²⁰ Peter Conrad, Valerie Leiter, "From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation," in *Pharmaceuticals and Society, Critical Discourses and Debates*, 14.

²¹ Philip J. Hilts, *Protecting America's Health: The FDA, Business and One Hundred Years of Regulation* (New York: Knopf, 2003), 24.

²² Peter Conrad and Valerie Leiter, "From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation," in *Pharmaceuticals and Society, Critical Discourses and Debates*, 12.

²³ Philip J. Hilts, *Protecting America's Health: The FDA, Business, and One Hundred Years of Regulation*, 24.

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approaches associated with patent medicine advertising influenced and shaped the emergence of modern advertising overall.²⁴

Most advertisements for patent medicines appeared in newspapers, with “nostrum advertising [accounting]...for nearly one-third of all profits in the newspaper business.”²⁵ By the 1860s, newspapers, which had begun using inexpensive pulp paper as opposed to linen paper, had become cheaper than ever. As newspapers became cheaper, they also became more widely available, thereby ensuring that growing numbers of Americans saw the almost ubiquitous ads for a variety of patent medicines.²⁶ During the mid-nineteenth century, advertising was not simply more visible, it also “became more innovative.” Cheap paper allowed patent medicine companies to create advertising gimmicks such as trading cards, instruction booklets, calendars, story and joke books, and even promotional cookbooks. The introduction of bulk mailing rates in the 1840s simply added fuel to the fire, as drug purveyors now flooded the mail with cheap advertisements.²⁷ Along with these advertisements, many drug companies promoted their medications through “‘medicine shows [which] featured entertainment ranging from minstrel shows to wild west shows.’”²⁸

Drug purveyors so dominated the advertising pages that they created “the first fully national market...that used nationwide advertising.” Among these nationwide advertisers, the Lydia E. Pinkham Company became, without a doubt, one of the most aggressive. During the late nineteenth century, her ads became so ubiquitous that one college student quipped “Lydia Pinkham, though I go/To the lands of constant snow;/Though I bask ‘neath southern skies/Still I meet those staring eye/Through all lands your ‘ads’ do go.”²⁹

It was no surprise that Pinkham’s ads “through all lands” went. Between 1876 and 1882, “the company spent the greater part of its gross sales revenue on advertising, as much as 78% [of their revenue] in 1882; ultimately, the Pinkham Company would expend up to a million dollars on advertising in just a single year.”³⁰ Ads appeared in “every state and territory in the country as well as [in] various provinces in Canada and parts of South America.” The polyglot nature of late nineteenth-century America led to these ads being translated into “German, French, Spanish, Italian, Bohemian, Dutch, Swedish, Welsh, and Hebrew [Yiddish],” thereby ensuring that Pinkham’s Compound became familiar to even the newest of Americans. While the company focused primarily on newspaper advertising, they also used circulars and pamphlets which were sent out “sometimes at the rate of three tons a day, for distribution by druggists.”³¹

Pinkham’s advertising broke new ground on multiple levels. First, Pinkham’s “face was on labels, in newspaper ads, on fences in rural America, on trading cards and in drug store displays. Very few nostrums had such wide recognition.”³² While other patent medicines associated with women, such as Mrs. Winslow’s

²⁴ “Patent medicine manufacturers were the real pioneers of American advertising techniques.” John Parascandola, “Patent Medicines and the Public’s Health,” *Public Health Reports* 114, no. 4 (July-August 1999): 320. “Patent medicines in the United States played a pioneering role in marketing.” John Harvey Young, “Patent Medicines: An Early Example of Competitive Marketing,” *The Journal of Economic History*, 20, no. 4 (December 1960): 648.

²⁵ Peter Conrad, Valerie Leiter, “From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation,” in *Pharmaceuticals and Society, Critical Discourses and Debates*, 13.

²⁶ In 1847, 2,000 newspapers ran an estimated 11 million advertisements for patent medicines. Peter Conrad and Valerie Leiter, “From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation,” in *Pharmaceuticals and Society, Critical Discourses and Debates*, 13.

²⁷ Philip J. Hilts, *Protecting America’s Health: The FDA, Business, and One Hundred Years of Regulation* (Knopf, 2003), 24.

²⁸ John Parascandola, “Patent Medicines and the Public’s Health, *Public Health Reports* Vol. 114, No. 4 (Jul. - Aug., 1999), 320.

²⁹ *Monmouth College Newspaper Courier*, October 1, 1882.

³⁰ Stage, *Female Complaints*, 92; Philip J. Hilts, *Protecting America’s Health: The FDA, Business and One Hundred Years of Regulation*.

³¹ Sarah Stage, *Female Complaints*, 99.

³² Peter Conrad, Valerie Leiter, “From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation,”

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Syrup, did market their products through an association with a real person, none were as aggressive in doing so as the Lydia E. Pinkham Vegetable Compound. Although this was not necessarily the first time, a “respectable” woman was used to hawk medicine, it was the first time the connection between a respectable woman and a drug had been so clearly defined and consistently promoted.

Using a very real woman to sell a product was not the only unique approach taken by the Lydia E. Pinkham Company. “With the number of manufacturers increasing and competition for the consumer dollar growing, the...need to differentiate between the products of competing producers” led a growing number of manufacturers to create and repeatedly place “an image in the mind of the consumer [that was] associate[d] with the advertised item.”³³ The Lydia E. Pinkham Company was one of the earliest and most successful companies to promote their product through the use of one single and constantly repeated iconic image---an approach which has become extremely widespread and influential in modern advertising.

The image created by the company was carefully crafted to appeal to a wide audience. Originally, the family had considered claiming that Lydia herself was a doctor.³⁴ But recognizing that doctors were regarded by many as suspect, the family quickly jettisoned this approach, creating and exploiting, instead, an image of the Lydia E. Pinkham Company’s founder which was, if not necessarily at odds with her real persona, clearly molded to fit the demands of the marketplace. Pinkham’s “face, kindly yet abstracted, her gray hair drawn back into a braided bun, the solid respectability of black silk and white ruching,” intentionally underscored her image as a wise grandmother.³⁵ Even when the image used on the ad was not of Lydia herself, the image used referenced her status as a grandmother. For example, the trading cards which the company used to promote the compound routinely used images of her grandchildren, a not so subtle reminder of the fact that she was not only a grandmother but that generations of families raised on the compound were healthy and strong. Further enhancing this idea of Pinkham as a wise grandmother was the claim that she carefully read and responded to all inquiries from those who used her product, a claim that continued to be made even after her death.

Within the context of Victorian society which emphasized the ideas of female modesty, the inherently virtuous nature of women, and the importance of self-help, Pinkham’s image as a wise grandmother had a wide appeal. Best of all, “no advertising agent intent on creating the perfect grandmother could have done a better job;” Lydia Pinkham *was* the epitome of a wise grandmother.³⁶ Like Steve Jobs who marketed Apple products by exploiting his own image as a non-conformist, Pinkham enhanced an existing aspect of her own image to market her product in a manner designed to appeal to the broadest possible audience.

Effective as the Pinkham Company’s advertising was neither the Pinkham Company nor other patent medicine companies were content to rely simply on advertising to promote sales of their products. Drug companies also routinely employed drug salesmen to sell these goods directly to druggists and throughout the late nineteenth century, traveling drug salesmen crossed and crisscrossed the country hawking these drugs. William Osler, the foremost physician of his era and a prominent professor of medicine at Johns Hopkins University, regarded these salesmen as “a dangerous enemy to the mental virility of the general practitioner.”³⁷ While the reasons for Osler’s focus on the threat drug salesmen posed to medical practitioners were obviously self-serving, Osler was

in *Pharmaceuticals and Society, Critical Discourses and Debates*, 14.

³³ Margaret E. Hale, “The Nineteenth-Century American Trading Card,” *The Business History Review* 74, no. 4 (Winter 2000), 684.

³⁴ Sarah Stage, *Female Complaints*, 105.

³⁵ *Ibid.*, 105.

³⁵ *Ibid.*, 17.

³⁶ *Ibid.*, 17.

³⁷ Howard Brody, *Hooked: Ethics, the Medical Profession and the Pharmaceutical Industry* (Boulder: Rowman and Littlefield, 2007), 141.

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also motivated by a belief that drug salesman often promoted drugs which were not only ineffective but also potentially dangerous to their users. Osler's complaints notwithstanding, drug salesmen were extremely effective in promoting specific drugs and throughout the nineteenth century, the combination of advertising and aggressive promotion by drug salesmen first created and then fed a growing demand for patent medicines, many of which were promoted as cure-alls.³⁸ Among the most successful of these "cure-alls" was the Lydia E. Pinkham Vegetable Compound.

Lydia E. Pinkham and Women's Complaints

While some of the company's success was rooted in its huge advertising budget that allowed the company to simply saturate the market with its ads, Lydia Pinkham's claim to be able to treat women for gynecological complaints also played no small part in its success. Traditionally, female practitioners had had almost a monopoly on treating female patients. Often but not always called midwives, female healers in colonial America and early modern Europe treated a range of female disorders, both gynecological and obstetrical. In a culture in which female behavior was rigidly codified and female modesty was highly prized, the widespread use of female practitioners ensured that women could speak candidly about their ailments and that a physical examination of the patient could be conducted.³⁹ However, beginning in the mid-eighteenth century, a growing number of male practitioners began to claim an expertise in "female complaints" or what would today be called obstetrics and gynecology. Women did not turn *en masse* to male practitioners during the nineteenth century; instead, the eclipse of the female healer was a gradual one, with women continuing to consult female practitioners along with male practitioners throughout the nineteenth century.⁴⁰

Women turned to male practitioners for varied reasons. In the wake of the Enlightenment, male practitioners' often stated claim that they possessed an expertise grounded in science which female practitioners lacked had some appeal. Oddly, male practitioners' tendency to charge more than their female counterpart also helped cement their growing appeal; believing that higher fees meant better service, upper-class patients began to turn to male practitioners in growing numbers. Seeking the social cachet associated with these practitioners, many middle-class patients followed suit.⁴¹ As more and more women began to consult male practitioners, the contradictions between nineteenth-century views of female modesty and the growing emphasis on physical examinations by male practitioners became increasingly evident; as Lara Freidenfelds and other scholars have pointed out "at the same time that physicians urged women to look to [male] doctors for reproductive care, they praised them for their modest blushes during examinations and interpreted their discomfort not in terms of age-old traditions but in relation to the cultivated delicacy of Victorian sensibilities."⁴² Women were, in other words, encouraged to visit more expensive male physicians even as existing social mores underscored the belief that these visits entailed an assault on a woman's innate modesty.

³⁸ Barbara Hodgson, *In the Arms of Morpheus: The Tragic History of Laudanum, Morphine and Patent Medicines* (Vancouver: Greystone Books, 2001), 113.

³⁹ Not all doctors believed that a physical examination was necessary. Many eighteenth- and nineteenth-century practitioners diagnosed their patients by mail, a practice Lydia Pinkham herself used.

⁴⁰ Over the last forty years, multiple historians have written about this shift from female to male medical practitioners. These books range from early works such as Judith Leavitt, *Brought to Bed: Childbearing in America, 1750-1950* (Oxford: Oxford University Press, 1988) and Regina Morantz-Sanchez, *Sympathy and Science: Women Physicians in America* (Chapel Hill: University of North Carolina, Chapel Hill, 1985) to more recent books such as Carla Bittel, Mary Putnam Jacobi and *The Politics of Medicine in Nineteenth-Century America* (Chapel Hill: University of North Carolina, 2009) as well as exhibits such as "Changing the Face of Medicine" (National Library of Medicine, 2003).

⁴¹ This shift, however, was never a uniform one and many middle- and upper-class women continued to consult female practitioners, sometimes in conjunction with male practitioners.

⁴² Lara Freidenfelds, *The Modern Period: Menstruation in Twentieth-Century America* (Baltimore, Maryland: Johns Hopkins University, 2009), 22.

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Frustrated by a culture which made it difficult to speak candidly about their ailments, many women rejected the idea of visiting any medical practitioner, male or female, preferring instead to diagnose themselves. Following their self-diagnosis, women often turned to home remedies or patent medicines to treat their ailments. The Pinkham Company and other producers of patent medicines thus freed women from the need to undergo an invasive physical examination or, even more simply, to engage in a detailed and potentially immodest discussion of their physical ailments before they received treatment. The Pinkham Company further solidified its market share by exploiting women's fears of directly discussing their ailments; women who used the compound were encouraged to write confidential letters about their medical ailments to Lydia Pinkham herself. Supposedly only Pinkham herself read these letters and her responses were pitched as providing expert yet confidential advice designed to ensure that women *could* cure themselves without recourse to a doctor. The Pinkham Company's repeated emphasis on the intimate nature of this correspondence simply reinforced the idea that discussions about women's health should be kept private.

Although women's unspoken, or whispered, concerns regarding their health were varied, a significant percentage of these concerns were related to reproductive health. Within the context of Victorian society, patients, physicians, pharmacists and medical companies typically used coded language to discuss issues relating to reproductive health. Understanding of this coded language was widespread; even the most unsophisticated Victorian consumer knew, for example, that the Pinkham Company's claim that the tonic could restore menstrual "irregularities" was simply code for an abortifacient (restoring a woman's missing menses meant terminating a pregnancy). In an age in which contraception was poorly understood, difficult to obtain and unreliable, patent medicines which claimed to terminate unwanted pregnancies such as Pinkham's filled an important role. Yet even as, or perhaps because, growing numbers of women used these nostrums, late nineteenth-century reformers began to criticize newspapers and magazines "for printing 'pernicious advertisements' of gynecological nostrums, spurring the growth of a 'trade which without stretching a single existing law, may be called illegal and illicit, carried on in open daylight, in the full knowledge of [the] newspaper-reading public.'"⁴³ While "the Pinkham Company assumed an indignant tone when women wrote to complain that the medicine had not produced abortion, the indignation smacked of hypocrisy" given their advertising claims.⁴⁴

The Decline of Patent Medicines and the 1906 Food and Drug Act

The diverse uses and meanings of patent medicines meant that they came under criticism from many different groups. The American Medical Association which had grown significantly in power over the course of the late nineteenth century led the attack on these medications for reasons that were both public spirited and self-serving. The proprietary nature of patent medicines which led many of these companies to refuse to divulge their ingredients ran counter to the AMA's 1840 code of ethics which had argued that "physicians could not in good conscience prescribe or recommend a medicine whose contents were unknown and whose safety and effectiveness could not be subjected to the scrutiny of the scientific community." But the AMA also opposed patent medicines because they allowed patients to avoid seeing a physician and "[a]t a time when most American physicians were barely managing to survive financially, these lost revenues were a sore subject with the AMA's members."⁴⁵ Like doctors, the makers of "ethical" drugs had a vested interest in destroying the market for patent medicines and during the late nineteenth century, these two groups partnered to launch a campaign to rein in the excesses of the patent medicine market. But although "the outright absurdity of most patent medicines...[were] subject to sporadic attack by alert physicians and pharmacists, with the revitalized

⁴³ Andrea Tone, *Devices and Desires: A History of Contraception in America* (New York: Hill and Wang, 2001), 15.

⁴⁴ Sarah Stage, *Female Complaints*, 102.

⁴⁵ Brody, *Hooked*, 139-140.

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AMA increasing the tempo,” this combined campaign failed to arrest or, even more simply, control the market for patent medicines.⁴⁶

While some states had begun to develop “crude controls aimed at fraudulent or willful adulteration of drugs,” the American Pharmaceutical Association admitted that “to carry on such work systematically and continuously requires such expenditures as have never been granted to any state pharmacy board.”⁴⁷ In the absence of these controls, Harvey Wiley, the Chief Chemist in the U.S. Department of Agriculture and a strong advocate for pharmaceutical reform, began to call upon the federal government to regulate the sale of drugs. Following in the footsteps of the American Medical Association and the American Pharmaceutical Association, Wiley attacked the many different manufacturers of patent medicines on scientific grounds. But Wiley also took the radical step of reaching out to non-scientists and physicians to gain support for his campaign. Pulling together a diverse group of supporters, which included some of the nation’s most prominent muckraking reporters and upper-class club women, Wiley created a broadly-based coalition which focused not only on exposing the deficiencies of these medications but also on creating support for regulation of drugs among the general public. While upper-class women became a strong voice for reform, muckraking reporters led the charge, publishing a series of dramatic exposés which laid bare the dangers inherent in the unregulated manufacture of patent medicines.

The most significant of these exposés first appeared in *Colliers Weekly* in October of 1905.⁴⁸ Pointing out that “gullible Americans will spend this year some seventy-five millions of dollars in the purchase of patent medicines,” Samuel Hopkins Adams launched an eleven-part series on “patent medicine methods and the harm done to the public by this industry founded mainly on fraud and poison.”⁴⁹ Adams highlighted many different patent medicine makers throughout his eleven article series but the Lydia E. Pinkham Vegetable Compound was criticized by name in almost every article of this series. These repeated criticisms of the Pinkham Company and its vegetable tonic created the impression that the company’s many offenses were not only especially egregious but also highly representative of the broader problems within the patent medicine industry. Adams’ critique of the Pinkham Company began with a focus on the actual ingredients in the tonic. Drawing on chemical analyses of the Lydia E. Pinkham Vegetable Compound which had revealed that the drug had a very high alcohol content, Adams argued that the “respectable” women who used the compound differed little from “the town tippler...[in] the license-paying bar.”⁵⁰ By linking the compound with the seediest of activities, Adams stripped away the compound’s carefully crafted veneer of respectability, ensuring that women associated with the temperance movement saw the compound for what it was: a highly alcoholic tonic.

But Adams was not satisfied with simply exposing the compound’s true ingredients he also attacked the venerable image of Lydia Pinkham herself. According to Adams, one of the Pinkham Company’s greatest frauds lay in its claim that Lydia Pinkham personally responded to the many letters written to her. “The Pinkham method,” as Adams dubbed it, was widespread among many patent medicine companies, all of which claimed to have a specific expert or physicians who provided “personal advice” to customers regarding their ailments. But according to Adams the “main purpose of the Pinkham advertising has been to fool the feminine public into believing that their letters go to a woman---who died nearly twenty years ago of one of the diseases, it is said, her remedy claims to cure.”⁵¹ Adams admitted that in technical terms the Pinkham Company had not

⁴⁶ John Harvey Young, *Pure Food*, 197.

⁴⁷ Edward Kremers, Glenn Sonnedecker, George Udang, Ed., *Kremer’s and Udang’s History of Pharmacy* (1976), 220.

⁴⁸ In 1905, *Colliers* which featured the work of muckrakers such as Ida Tarbell and C. Connolly reached an audience of about 500,000.

⁴⁹ Samuel Hopkins Adams, *The Great American Fraud: Articles on the Nostrum Evil and Quackery* (The American Medical Association Press, 1912), 3. The article first appeared in *Colliers Weekly* on October 7, 1905.

⁵⁰ *Ibid.*, 22.

⁵¹ *Ibid.*, 59.

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engaged in fraud when it encouraged customers to write to “Mrs. Pinkham” as Lydia Pinkham’s daughter-in-law was said to be the recipient of the letters directed to Mrs. Pinkham. However, Adams dismissed the company’s claim that letters were read by Mrs. Pinkham as nothing more than smoke and mirrors: “the great majority of the gulls who ‘write to Mrs. Pinkham’ suppose themselves to be addressing Lydia E. Pinkham and their letters are not even answered by the proprietor of the name but by a corps of harried clerks and typewriters.”⁵²

Although Adams’ articles received an extraordinary amount of attention, *Colliers Weekly* was not the first magazine to take on the issue of patent medicines. In the 1890s, *The Ladies Home Journal* had broken new ground by refusing to take on ads for patent medicines. While the impetus for this refusal stemmed from the desire of the *Journal*’s editors to distance themselves from what they regarded as “the unpleasant flavor” of medical advertising, this approach opened the door to a broader questioning of patent medicines by the professional staff of the journal.⁵³ In 1903, the editor of *The Ladies Home Journal*, Edward Bok, directly took on the patent medicine industry with an editorial entitled “The Patent Medicine Curse.” Unfortunately, Bok had miscalculated as his information denouncing one patent medicine in particular was based on a chemical analysis that was twenty years old.⁵⁴ The company, which had altered their ingredients, successfully sued *The Ladies Home Journal* but the ensuing publicity about the case provoked a widespread discussion about the dangers and exaggerated claims of many patent medicine companies. In the wake of this lawsuit, Bok became increasingly convinced that the American public needed to be educated about the dangers of patent medicines and the *Journal* now took the lead in denouncing the patent medicine industry. Eager to avoid the mistake made in the 1903 articles, Bok required articles attacking patent medicines to undergo a rigorous review before being published. The extensive review simply helped to cement the accusations made by the *Journal*’s reporters. Like *Colliers*, the *Journal* specifically and aggressively singled out the Lydia E. Pinkham Vegetable Compound for its false advertising.⁵⁵ The extraordinarily well-researched and well-documented arguments of these new articles horrified the overwhelmingly female readers of the *Journal*, many of whom used the Lydia E. Pinkham Vegetable Compound.

In 1906, pressure from articles such as these, combined with the advocacy of concerned Americans, resulted in passage of the Food and Drug Act. However, the passage of the Food and Drug Act was not an easy or straightforward matter. The bill’s supporters were concerned not only about the purity of food and drugs but also about allegations of fraud relating to the sale of different nostrums. At first glance, the Act’s requirement that any statements made about a drug must be true might have appeared as a win for those who disliked the extravagant claims made by companies such as the Pinkham Company. However, the Act fell significantly short of expectations because the ability of scientists to prove---or disprove---a drug company’s claims was sharply limited.⁵⁶ Additionally, the Act did not explicitly require drug companies to provide a complete list of

⁵² Ibid., 69. Some thirty clerks were tasked with answering these letters; formulaic responses were used in the responses. Daniel J. Robinson, “Mail Order Doctors and Market Research, 1890-1930,” in Hartmut Berghoff, Philip Scranton, Uwe Spiekermann, Ed, *The Rise of Marketing and Market Research* (New York: Palgrave MacMillan), 80.

⁵³ In 1895, Cyrus Curtis, the publisher of the *Ladies Home Journal*, stated that the Journal would not accept advertisements from patent medicine companies “so that our advertising columns may contain no unpleasant flavor.” Cyrus Curtis quoted in Hans Krabbendam, *The Model Man: A Life of Edward William Bok* (Amsterdam: Rodopi Press, 2001), 100.

⁵⁴ As chemical analysis became increasingly sophisticated during the late nineteenth century, many patent medicine companies, including the Lydia E. Pinkham Company, shifted their ingredients in a clear attempt to avoid charges that these medications had high alcohol and/or narcotic contents.

⁵⁵ Mark Sullivan, who wrote several of the articles in *The Ladies Home Journal*, focused in particular on the Pinkham Company’s claims that “Mrs. Pinkham” answered each letter in person as had Samuel Hopkins Adams in his articles. Seeking to discredit these claims, The Ladies Home Journal published a photograph of Lydia Pinkham’s grave. See Mark Sullivan, “How the Game of Free Medical Advice is Worked,” *The Ladies Home Journal*, February 1906.

⁵⁶ As proven by court cases following the passage of the Food and Drug Act of 1906. Philip J. Hilts, *Protecting America’s Health: The FDA, Business, and One Hundred Years of Regulation*, 54.

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ingredients. Despite these limitations, the Act did break new ground by requiring that any information drug companies provided, if only on their own volition, be true. Moreover, the Act did require public disclosure of ingredients if a drug contained alcohol, opium, cocaine, morphine, chloroform, marijuana, acetanilide, chloral hydrate, and/or eucaine; the specific amounts of narcotics and/or alcohol used in a drug also needed to be disclosed. In anticipation of this requirement, many drug companies had already cut back on the percentage of narcotics or alcohol contained within their products. Additionally, although the abilities of the federal government to regulate the claims made by drug manufacturers were limited as a result of the Act, drug manufacturers preferred to play it safe and in the years following passage of the Act, drug advertising dropped dramatically.⁵⁷

On the surface, passage of the Act did little more than ensure that a significant number of Americans became aware that patent medicines often contained high levels of alcohol or narcotics. Consequently, the Food and Drug Act of 1906 did not spell the immediate death knell of patent medicines.⁵⁸ However, the Act did make a significant dent in the dominance of these products simply by raising awareness of the dangers inherent in many of these products. In the decades that followed, patent medicines and herbal tonics slowly declined in popularity.⁵⁹

Decline of the Lydia E. Pinkham Company

While passage of the 1906 Food and Drug Act was a significant factor in the decline of the Lydia E. Pinkham Vegetable Compound, the compound also fell victim to the shifting perceptions of medicine and medical practice which had led to the 1906 Act. Because the compound was very much a product of the Victorian era its success had been contingent on issues such as non-existent licensing of physicians, a belief that “cure-alls” could exist, and the conviction that female modesty could trump the need for physical examinations, all factors that were subject to change in the 20th century. However, once sales began declining in the late 1920s, they did so rapidly. By the 1930s, perceptions of chronic illnesses combined with a radically different understanding of the practice and theory of medicine had made the tonic obsolete. The Pinkham Company continued to exist, however, and the tonic was marketed and sold throughout the twentieth century, often finding an appeal among those who advocated the use of alternative medicines. In 1968, the Pinkham Company was sold and bottling of the tonic moved from Massachusetts to Puerto Rico.

Comparable Properties:

The Pinkhams’ peripatetic lifestyle meant that multiple properties are associated with Lydia Pinkham and her family. Many of these properties are no longer extant. Most of the few surviving properties possess neither a stronger association nor a higher level of integrity required for NHL designation. Along with the house on Western Avenue, potential candidates for consideration are the Pinkham Factory located in Lynn, Massachusetts and the house in Wyoma from which Pinkham first made and sold her tonic. While these properties do possess a significant degree of association with both Lydia E. Pinkham Company and Lydia Pinkham herself, the house at Western Avenue was the property which

⁵⁷ As evidence of this drop in advertising, seventeen pages of the 770 page 1897 Sears Roebuck catalogue were dedicated to drug advertisements; fewer than two pages of the 1,220 page 1908 catalogue promoted the sale of these drugs. Peter Conrad, Valerie Leiter, “From Lydia Pinkham to Queen Levitra: Direct-to-Consumer Advertising and Medicalisation,” in *Pharmaceuticals and Society, Critical Discourses and Debates*, 15.

⁵⁸ Sales of Lydia E. Pinkham Vegetable Compound actually peaked in the 1920s, some years after passage of the Food and Drug Act.

⁵⁹ Hans A Baer, *Biomedicine and Alternative Healing Systems: Issues of Class, Race and Gender* (Madison: University of Wisconsin Press, 2001), 146. Barbara Hodgson, *In the Arms of Morpheus: The Tragic History of Laudanum, Morphine and Patent Medicines*, 121.

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came to be most associated with the company. It was here that Pinkham originally manufactured her tonic on a large scale. More importantly, this was the address to which women wrote Pinkham throughout the company's heyday and this was Pinkham's home throughout the period when her company was most successful. While the factory ultimately did become the site of production for this national company, the Pinkham Company's advertising led most Americans to believe that Lydia Pinkham manufactured her tonic at home---not in a factory.

Conclusion

Throughout much of the nineteenth century, Americans relied heavily on patent medicines to treat their own illnesses as well as those of those of their family members. Within the complex and unregulated medical marketplace of the Victorian era, these medicines were seen as highly democratic as they offered patients the ability to control and treat their own illnesses. But the ubiquitous nature of these medicines also means that they played a highly significant role in American history overall---shaping American advertising practices, influencing how patients interacted with their physicians, and even spurring a broader effort for reform of drug manufacturing and the practice of medicine itself.

The Lydia E. Pinkham Vegetable Compound was one of the most widely recognized and used of these patent medicines. Its marketing campaign, in part because of its sheer size but also because of its innovative approach, played a large role in shaping and influencing American advertising overall. More so than other patent medicines, the Lydia E. Pinkham Vegetable Compound also exemplified the contradictions between the Victorian emphasis on female modesty and the growing push for patients to undergo physical examinations. Finally, as one of the most widely known and most ubiquitous of early twentieth-century patent medicines, the Pinkham Vegetable Compound served as an impetus for the push to reform the manufacture and sale of medications. The 1906 Food and Drug Act, which was passed in the wake of the criticisms of the Lydia E. Pinkham Vegetable Compound and other similar patent medicines, resulted in one of the most dramatic shifts in terms of patient expectations and treatment of illnesses during the nineteenth and twentieth centuries.

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Previous documentation on file (NPS):

- Preliminary Determination of Individual Listing (36 CFR 67) has been requested.
- Previously Listed in the National Register. NR #12000818; Listed September 25, 2012
- Previously Determined Eligible by the National Register.
- Designated a National Historic Landmark.
- Recorded by Historic American Buildings Survey: #
- Recorded by Historic American Engineering Record: #

Primary Location of Additional Data:

- State Historic Preservation Office
- Other State Agency
- Federal Agency
- Local Government
- University
- Other (Specify Repository):

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10. GEOGRAPHICAL DATA

Acreage of Property: Less than one acre

UTM References: **Zone Easting Northing**
 19 339651 4704440

Verbal Boundary Description:

The boundary of the nominated property, known as the Lydia Pinkham House at 285 Western Avenue in Lynn, follows the lot lines of the assessor's parcel number 085-253-032.

Boundary Justification:

The nominated property is the real estate parcel historically associated with the house as sub-divided after 1893 and which maintains integrity.

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11. FORM PREPARED BY

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Date: November 2013

Edited by: Patty Henry
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National Park Service
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Washington, DC 20005

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NATIONAL HISTORIC LANDMARKS PROGRAM
December 3, 2013

LYDIA PINKHAM HOUSE

United States Department of the Interior, National Park Service

Photos & Figures

National Register of Historic Places Registration Form



Lydia Pinkham House, southeast view
Photograph by Roger Reed, September 2012



Lydia Pinkham House, east elevation
Photograph by Roger Reed, September 2012

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Lydia Pinkham House, stair hall
Photograph by Roger Reed, September 2012

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Lydia Pinkham House, parlor with fireplace and added windows
Photograph by Arthur Krim, April 2012



Lydia Pinkham House, view from parlor to hall
Photograph by Roger Reed, September 2012

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Lydia Pinkham House, dining room bay
Photograph by Roger Reed, September 2012



Lydia Pinkham House, second floor front room
Photograph by Roger Reed, September 2012



Lydia Pinkham House, bench at head of stairs
Photograph by Roger Reed, September 2012



Lydia Pinkham House, second floor hall
Photograph by Roger Reed, September 2012

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Lydia Pinkham House, second floor chamber
Photograph by Roger Reed, September 2012



Lydia Pinkham House, basement kitchen
Photograph by Roger Reed, September 2012

LYDIA PINKHAM HOUSE

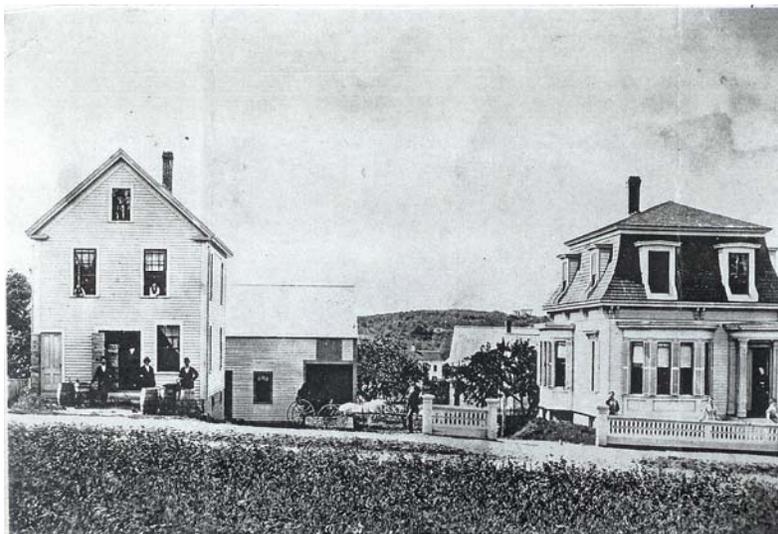
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Lydia Pinkham House, ca. 1873 view
Courtesy of Karen Malionek



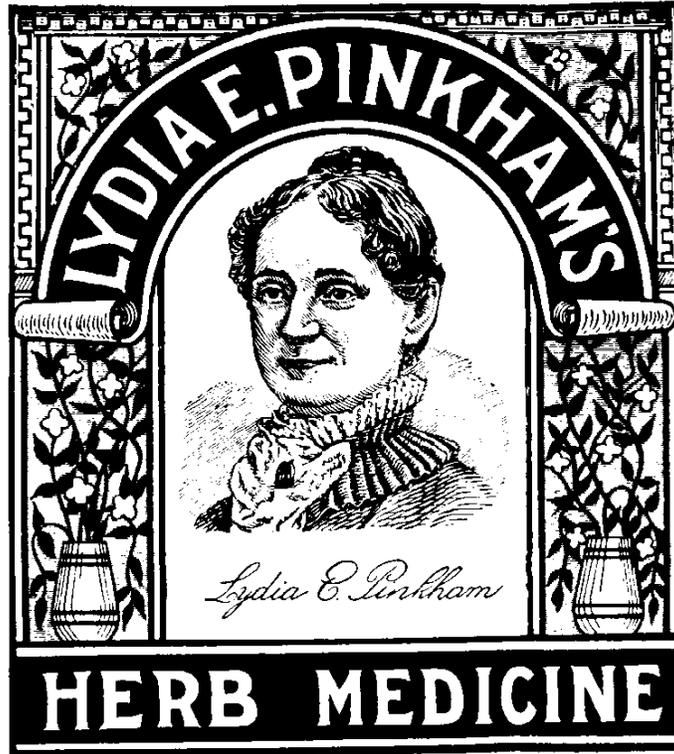
Lydia Pinkham Advertising Card, ca. 1879
Workshop (demolished) on left, house with Lydia in doorway on right.
Courtesy of Karen Malionek

LYDIA PINKHAM HOUSE

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Typical advertisement produced by the Lydia Pinkham Medicine Company.
Courtesy of the National Library of Medicine



Color advertisement for Lydia Pinkham's Vegetable Compound
Courtesy of the National Library of Medicine

LYDIA PINKHAM HOUSE

USGS Map

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LYDIA PINKHAM HOUSE
 285 Western Avenue, Lynn, Essex County, Massachusetts
 UTM: Zone 19 Easting 339651 Northing 4704440
 Lynn, Massachusetts, Quadrangle (1997)

