

EXPERIENCING A RESEARCH TOPIC

E. A. Driggers



ABSTRACT Personal experience matters in approaching research questions. Though an experience might be painful (in this article, a case of urinary stones), with proper contextualization, the experience might guide the researcher to questions of general interest to scholarly communities. The researcher needs an open mind and patience when re-framing the experience from the personal to that of general academic interest.

There is nothing scarier than not knowing what is happening in your own body. When I was sitting on the examination table, the physician's response was, "Here is some Vicodin, this should keep you out of the emergency room," and then he simply left. Prior to arriving at the physician's office, I had had purple urine and pain in the right side of my body. I had no idea what was going on but knew there was a problem. The medical assistant placed an x-ray up on the light box and an illuminated picture showed the inside of my lower torso. I examined the image and thought everything looked normal. The urologist entered and instantly spotted the irregularity. He authoritatively pointed at the small white dot on the x-ray.

"Here it is, and I'm not surprised after you reported purple urine," he said.
"Here what is?" I asked, confused.

I had a urinary stone.

What was a urinary stone? Why were the fluids of my body important to its diagnosis? What was happening inside my body? Though the stone eventually passed right before the class I served as a teaching assistant, the questions remained. The experience, though painful, was the initial germ of my historical questions of urology and the fluids of the body.

One day in the library I caught sight of a book about the history of medicine in South Carolina. The book was a parochial history of medicine but it contained a wealth of biographical information. I was nosily interested but only allotted myself about two hours of reading throughout that week because it was not in my research area at the time (which was gender studies and frontier relationships in the eighteenth century). My time was rewarded, as I found an interesting figure in the form of Edward Darrell Smith, the first urologist in South Carolina.

I tracked down the sources about Smith mentioned in the book. After reading a memoir that Smith wrote towards the end of his life, I discovered that he had suffered from a urinary stone himself as well as treating them in others. His experience of suffering an unknown pain and an irritation of the fluids of the body were very similar to my experiences just weeks prior to reading his work. I wanted to share what I'd learned about Smith; I

E. A. DRIGGERS is an assistant professor at Tennessee Technological University and was the 2014-2015 Edlestein Dissertation Fellow at the Chemical Heritage Foundation in Philadelphia. He would like to thank Rachel W. Driggers, Larry Blanton, and Ann Johnson.

wanted to write my first scholarly article. But writing about Smith led me into the two most difficult challenges of my graduate career (so far).

This challenge was twofold: why does a practitioner of urology in rural South Carolina matter to other historians and how do I tell an interesting narrative with only a handful of sources? The simplest answer was to follow the sources. I followed up on the citations mentioned in Smith's memoir that was published in the *American Journal of Science & Arts* in 1821.¹ Other physicians, across the Atlantic, were interested in stones not only in the "urinary passages," but stones found in other places in the body (like the lungs, intestines, or salivary glands).² Stones of the body were problems to physicians at the turn of the nineteenth century, so they seemed like they offered a good story for me to tell.

The second difficult challenge for me came from my advisor. She suggested I look at the actual chemical nature of stones. I was quite challenged: how was I supposed to learn about turn of the nineteenth century chemistry. My background was not in science at all. I had majors in history and women's & gender studies. Though I was intimidated, I decided to start reading. I read a lot. My readings consisted of chemical textbooks and treatises designed to teach the neophyte of the nineteenth century, which made them perfect for my learning. I had time one summer to travel to the Chemical Heritage Foundation in Philadelphia and to read their collection of textbooks. I read articles about the chemistry of stones in the stacks and online. Another summer took me to the Wood Institute at the College of Physicians also in Philadelphia, where I was able to read additional primary source material regarding medico-chemical physicians. Small research grants were extremely useful to me while I was researching my topic. They allowed me to explore archives and lead me to a more thoughtful research plan.

Initially, I thought that my humanities background might not provide me with enough background to understand nineteenth century chemistry, but it was the perfect background. My humanities education provided an excellent foundation for me to engage with primary and secondary source literature and think beyond my own life experiences, while contextualizing that literature into the larger themes. This is precisely the type of exercise I needed to understand the history of ideas. Humans perform science, so the best scientist has knowledge of the humanities, and the best humanities student is someone who has a grasp of science. These things are never mutually exclusive.

I am currently completing a draft of my dissertation here in the Philadelphia area on Edward Darrell Smith and a community of early nineteenth century medico-chemists interested in analyzing stones in the body. One lesson I have taken away from my research in graduate school is that one can study anything, and find great use and satisfaction from it. Even as a scholar who attempts to be as objective as possible, though this often difficult, personal experience still matters.³ Though an experience might be painful, it might lead to research questions, and with proper contextualization, other people might find them entertaining or possibly useful.

¹Edward Darrell Smith, "On the Application of Medico-Chemistry to Calculous Affections: by the late Edward D. Smith, M. D. Professor of Chemistry and Mineralogy, in the South-Carolina College," *American Journal of Science* 3 (1821): 300-310.

²Alexander Marcet, *An Essay on The Chemical History and Medical Treatment of Calculous Disorders* (London: Longman, Hurst, Rees, Orme, and Brown, 1817).

³For more on the complexity of objectivity see Lorraine J. Daston and Peter Galison, *Objectivity* (New York: Zone Books, Distributed by MIT Press, 2007).