

# “What Can We Do About Cancer? The Most Vital and Insistent Question in the Medical World” (1913), by Samuel Hopkins Adams

In 1913, journalist Samuel Hopkins Adams published “What Can We Do About Cancer? The Most Vital and Insistent Question in the Medical World,” hereafter “What Can We Do About Cancer,” in *Ladies’ Home Journal*. Cancer is a disease that is the result of abnormal cell division in different parts of the body, such as the breasts or the cervix. During that time, many women did not discuss or disclose early symptoms of reproductive cancers, such as breast lumps and abnormal vaginal discharge, out of shame or disgust. Thus, people often considered cancer to be a taboo topic. “What Can We Do About Cancer?” provides a representation of what people in the early 1900s thought to be the early warning signs of cancer in women. Although, as of 2021, researchers have made advancements that have increased the scientific understanding of cancer and how it develops, Adams’ article provided women in the US during the 1900s with recommendations on early methods of cancer detection.

Adams was a journalist and novelist in the early twentieth century, though he did not have any scientific background. Specifically, in 1905, prior to publishing “What Can We Do About Cancer,” Adams released a series of eleven articles in the US social reform magazine *Collier’s*. In those articles, he exposed that it was common for medical companies to make false, unsubstantiated claims about the efficacy and uses of their patented medications. According to historian of science James Cassedy, by publishing those articles, Adams gained the title of muckraker, or a journalist who attacks established institutions or leaders as corrupt. Cassedy explains that Adams’ work helped the US Congress pass the 1906 Pure Food and Drug Act, which provided a legal framework for food and medication safety and encouraged accurate ingredient labeling in the US.

Adams published “What Can We Do About Cancer,” in *Ladies’ Home Journal*, which was a US magazine designed specifically for women. The magazine released its first publication in 1883 and released quarterly installments and maintained an online presence until 2016. When Adams published “What Can We Do About Cancer” in 1913, people considered cancer to be a taboo topic to discuss with friends and family, as many people feared a cancer diagnosis, according to author Ellen Leopold. According to researchers Ann Bode and Zigang Dong, “What Can We Do About Cancer” was one of the first popular articles for women published about the warning signs for cancer, such as breast or ovarian cancers. At the time, public and scientific communities treated the information in “What Can We Do About Cancer” as accurate.

Adams organized the two-page spread, “What Can We Do About Cancer,” into ten sections with separate subheadings. Adams begins with an introduction, in which he outlines that he interviewed many US physicians who he considered to lack knowledge about cancer, leading to the article’s publication. On the first page, Adams wrote subsections, “Medicines are Useless; Delay in Operating is Deadly,” “Any Irritation Needs to be Investigated at Once,” and “‘Absolutely Hopeless Cases’ of Cancer of the Stomach are Saved,” in which he outlines the need for individual vigilance in cancer detection and how to treat it once the cancer is detected. The remaining six sections appear on the second page of the two-page spread. There, Adams included subsections, “Forms of Cancer Most Common in Women,” and “When It Affects the Intestines and Other Parts,” in which he discusses different types of cancer, primarily breast cancer, and provides recommendations for detection and treatment. Then, Adams writes about what others ought to know about cancer and recognizable symptoms, in “Three General Truths to Remember About Cancer.” In the next section, titled “Cer-

tain Symptoms are Easily Recognized," Adams also provides recommendations to physicians about when and how to detect, what he refers to as, signs of cancer. Lastly, also on the second page, Adams wrote subsections, "Stomach Cases Present the Most Baffling Problems," and "The Risk is Not in Surgery, but in Delayed Surgery," in which he discusses a patient's risk of death due to cancer.

In the introduction of the article, Adams begins by stating that cancer-related deaths increased during the early 1900s and few physicians understood how to prevent it. He states that prior to the article's publication in 1913, death by cancer was approximately the twelfth most common cause of death. Adams further states that in 1913, the rate had grown to place cancer as high as the third most common cause of death, deaths by tuberculosis and pneumonia preceding cancer. During the early 1900s, there was an epidemiological transition, meaning less people died from communicable, or infectious, diseases as public health and sanitation increased. However, that meant that more people died from non-communicable, or non-infectious, diseases like cancer. Adams states that there was a fundamental ignorance among physicians, leading to the growth in cancer death rates among US citizens. He mentions that when asked what caused cancer, physicians unanimously stated they did not know. However, Adams writes that the physicians gave Adams a list of recommendations about how to detect and treat cancer. He states that those interviews and recommendations demonstrated insufficient knowledge among the medical professionals. Adams writes that such ignorance led to the article's publication. He ends the introduction by stating that physicians advised Adams to educate the public so that they may save themselves.

In the next section, titled, "Medications are Useless; Delay in Operating is Deadly," Adams asserts that early recognition of cancer may lead to a significant reduction in patient mortality. He claims that it was common at the time for a person to believe it pointless to fight cancer when she learned of her diagnosis. However, Adams describes that mentality as foolish, and refers to education as the key to overcoming that mentality. He describes cancer as when one human cell goes out of its place and lodges among different cells, multiplying abnormally, and causing a tumor to form. As of 2021, the Centers for Disease Control and Prevention defines cancer similar to Adams, stating that cancer is the uncontrollable, abnormal division of cells in any one part of the body that can spread to other parts through the circulatory or lymphatic systems. Adams then states that cancer often forms when one portion of the body becomes constantly irritated. As of 2021, the American Cancer Society states that human exposure to carcinogens, or cancer-causing substances like tobacco or excessive sunlight as well as genetics, are among the most common causes of cancer.

Then, in "Any Irritation Needs to Be Investigated At Once," and "Absolutely Hopeless Cases' of Cancer of the Stomach are Saved," Adams discusses the importance of early detection of cancer and describes possible forms of treatment. Adams builds upon the previous section, which states that irritants can cause cancer on the outside of the body, suggesting internal and external irritants cause cancer on the inside of the body. Therefore, he states that to stop any irritants from further contributing to cancer, a person must undergo surgery to remove the cancer and the surrounding irritated tissue. Adams also informs the reader that many people with stomach cancer lead normal lives after having up to two-thirds of their stomachs removed to ensure complete removal of the cancer and irritated tissue. At the time, up to thirty percent of those with stomach cancer survived following diagnosis, according to Adams. However, he distinguishes that any statistics hospitals produce about the death rates of such cancers need to compensate for the large amount of people who receive treatment when it is already too late. He concludes those sections by reaffirming the need for early detection and treatment.

Following those sections, Adams discusses the prevalence of breast cancer as one of the most common types of cancer in women in the section titled, "Forms of Cancer Most Common in Women." Adams states that when a woman finds an initial cancerous breast lump and seeks early treatment, her likelihood of survival is over seventy-five percent. As of 2021, medical professionals recognize that as stage 1 of breast cancer, in which adequate treatment allows for ninety-nine percent likelihood of five-year survival. He states that regardless of the cause of the breast lump, a competent physician should surgically remove it, while the woman is under anesthesia. Further, during surgery, the doctor should microscopically examine the tumor tissue for signs of cancer. If the physician locates signs of cancer, then Adams recommends that the physician remove the whole

breast. If it is not cancerous, it is up to the physician whether to remove the breast. In that case, Adams states that if the physician believes that the tissue surrounding the non-cancerous tumor will eventually become cancerous, then she ought to remove it. Adams cites similar surgical recommendations for cancers of the uterus, intestines, and gallbladder in the following section, "When It Affects the Intestines and Other Parts."

Then, Adams writes about, what he states, are facts about cancer and recognizable symptoms in, "Three General Truths to Remember About Cancer." According to Adams, the first of those facts is that cancer usually develops from previous and continued irritation of the tissues. Those ideas are somewhat similar to later understandings of how cancer develops. Specifically, as of 2021, Stanford Health Care provides that the cause of cancer is quite ambiguous, but repetitive genetic, environmental, and lifestyle factors contribute to one's susceptibility to the disease. Secondly, if a physician removes the cause of that irritation in time, then the patient can avoid a cancer diagnosis. According to Stanford Health Care, there are environmental and lifestyle changes that may help avoid a cancer diagnosis, such as avoiding smoking, high-fat diets, and toxic chemicals. However, if a physician detects precancerous or localized cancer in a patient, then treatment is required to protect that person's health. And thirdly, surgical intervention and removal of the tissues is the only method that physicians should use for patients with cancer. As of 2021, physicians use surgery to treat cancer as well as chemotherapy and radiation, depending on the stage and type of cancer. Chemotherapy is a drug treatment that stops the uncontrollable division of cells, and radiation is a type of therapy that uses energy to kill those cells. Adams states that the public should learn about the symptoms of cancer to increase awareness and knowledge as well as mitigate deaths by cancer.

In the next section, titled "Certain Symptoms are Easily Recognized." Adams also provides recommendations to physicians. For example, he states that a physician should examine any bump on a woman's lip that does not quickly heal. He also asserts that physicians should investigate any breast lump that a woman finds and there is no danger associated with the necessary surgical procedure and use of anesthesia, even for older patients. Before discussing the early symptoms of uterine cancer, Adams introduces that his words should not offend the reader, and rather, his direct instruction is the way to save lives. Adams states that one of the only symptoms of early uterine cancer is irregular vaginal discharge. So, he suggests that physicians investigate any woman exhibiting such symptoms and use a microscope to examine her vaginal discharge. He finishes that section by implying that any woman who has passed menopause and still experiences vaginal discharge should assume that she has cancer. As of 2021, according to Harvard Women's Health Watch, vaginal dryness is common during and after menopause, and vaginal discharge may be a sign of infection or abnormality, including cancer.

In the final two sections, titled "Stomach Cases Present the Most Baffling Problem," and "The Risk is Not in Surgery, but in Delayed Surgery", Adams concludes his article by making some final recommendations for his readers. He states that more advanced signs of cancer in women include quick weight loss, loss of appetite, and general weakness. Adams recommends any woman experiencing those symptoms see her doctor immediately. As of 2021, according to Medical News Today, any person who experiences increased weight loss and fatigue or other worrisome symptoms should consult their doctor. Further, Adams tells his readers to be wary of persistent sores and irritation, whether internal or external. Adams then recommends that women should be vigilant without undue worry and demand a competent physician to evaluate their symptoms before pain develops. If the doctor suspects cancer, Adams suggests that women insist they either prove or disprove their suspicions. He advises that women should not prolong a surgical date due to fear or money, because that may increase their risk of a slow, painful death. Lastly, in terms of attitude, Adams recommends that women with cancer never feel hopeless and face cancer with bravery, courage, and prompt action.

Following Adams's publication of, "What Can We Do About Cancer," many cancer awareness groups began forming in the US as people's understandings of how cancer develops evolved. In 1936, the Women's Field Army campaign formed, recruiting women to educate others on the early detection signs and treatment of reproductive cancers. During that time, people understood more medically accurate details about cancer. For example, throughout the 1900s, scientists better understood the connection between that Human Papillomavirus, a sexually transmitted disease, and cervical cancer. During the 1980s, physician Harald zur Hausen discovered that two different strains of the

virus cause cervical cancer, opposing Adam's suggestion that irritated tissue causes cancer.

As of 2021, the American Cancer Society encourages women to receive annual Pap smears, a diagnostic tool that collects cervical cells from a female to detect cancer, for the purpose of prevention and early detection.

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