

PORTRAIT OF AN ESKIMO TRIBAL HEALTH DOCTOR*

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Before White men introduced their economy, medicine and morals, the Eskimo people had a cohesive, successful subsistence lifestyle. Their customs minimized the transfer of disease. They had methods to cure or alleviate most illnesses and injuries that did arise. Due to cultural misunderstandings, missionary influences stopped many of these traditional beneficial practices. Eskimo lifestyle became less nomadic and more villages were formed. New diseases and disease hazards were introduced against which only Western medicine proved effective. Eskimo people lost faith in their traditional cures. Many of these cures were forgotten due to disuse, repression, the lack of a written Eskimo language in which to record information and the failure of the earliest Western explorers and ethnographers to observe Eskimo medical practices except in relation to shamanism.

Contrary to the earliest accounts which described Eskimo curing practices in the context of shamanism and religion, in more recent years Westerners have acknowledged Eskimo anatomical knowledge and medical practices which are distinct from shamanistic practices (Marsh and Laughlin 1956; Lucier, VanStone, Keats 1971). Increasingly the Eskimo people themselves and social scientists are attempting to record Eskimo medical knowledge while those who have practiced Eskimo medicine are alive to share their information.

In Northwest Alaska the Mauneluk Cultural

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Heritage Program has published *Tinimum Mamirrutit* (1976) which records the knowledge of traditional Eskimo healing practices retained by Minnie Gray (Ambler), Bertha Sheldon (Shungnak), Arthur Douglas, Sr. (Ambler), Minnie Beaver (Kotzebue) and Lulu Geary (Buckland). Others who have been identified as having knowledge of traditional Eskimo medicine in Northwest Alaska include Louie Commack, Sr., Flora S. Cleaveland, Andrew Skin, Sr. and Della Keats. Della Keats has shared her knowledge of Eskimo practices and anatomical terms in the published literature (Lucier, VanStone, Keats 1971).

These valuable accounts of Eskimo healing practices describe what was done, but not how it was done. They are based upon recollections and verbal reporting, rather than direct observation. Descriptions of healing practices in the published literature tend to be general and vague, rather than specific and detailed. Based upon both observation and verbal reporting, this study attempts to provide a specific, detailed account of how one Eskimo medical practitioner treats her patients and her role as a health care provider in Northwest Alaska today. In addition to a description of her healing techniques and how they are applied to diagnosed health problems, this paper presents some broad comparisons between the Eskimo medical practitioner and Western medical doctors. The practitioner selected for this study is Della Keats, well-known in Northwest Alaska as the "Tribal Health Doctor."

At this time, most of the Native Health care providers in Alaska are working in the capacity of Community Health Aides. They have between 3 and 20 weeks of training in Western medical techniques, and they follow

standing orders to treat the routine and emergency problems that arise in their villages. Indian Health Service doctors are available for daily consultation by satellite telephone. Cases which Community Health Aides cannot handle are flown to the nearest Indian Public Health Service hospital.

Della Keats is an anomaly in this system. As "Tribal Health Doctor," she travels to Northwest Alaska villages practicing a unique combination of traditional Eskimo medicine, western medicine and curing techniques which she has developed in her 55 years of practice.

Research Methods

To assist in this study, Della Keats invited me to stay with her from August 20 to September 6, 1978. During these three weeks we had lengthy discussions about the work she does, the types of problems she sees, anecdotal experiences and her general approach to healing.

In addition to my observing Della in Kotzebue (population 3,000) we traveled to Unalakleet (population 300) and Shaktoolik (population 140) where she held patient clinics and made house calls. During this time I observed and recorded 31 patient visits, 19 of which were house calls in the three villages. She treated 28 of the 31 and referred the other 3 to the hospital.

Information presented in this study is limited by the small sample of patient interactions observed, the short duration of the study and the summer season in which it was conducted which is generally a "healthy" time of year, the language barrier and the narrow range of problems observed.

Having just finished my first year of medical school, I had a limited understanding of Western medical science which permitted me to see and accept what Della Keats did without the prejudice that comes with extensive medical training.

Personal History

Della Keats was born in April, 1907, in Noatak, Alaska and grew up as one of 7 children. At 14 years of age she began spending time with the village health leaders, doing errands for them and learning their skills. She read books left in the village by the Public Health Nurses, and tried to practice the first aid techniques she learned from them.

When she was 16 years old, Della was wed in an arranged marriage. Shortly after this she began working with the village midwives, learning to care for pregnant women and deliver babies. She worked as a midwife until the 1950's, at which time most babies born in the region were delivered in the Indian Health Service

hospital at Kotzebue.

Della has two sons and one daughter. When her oldest son was 9 and the youngest child was 2, Della assumed the responsibilities of both parents. She hunted, cooked, sewed, picked berries and trained her children. Della also raised 6 grandchildren and 5 nieces and nephews as her own children. During this time she continued to work with people in a healing capacity. In return for her help, people gave Della dried fish, smoked salmon strips, berries or something they had made. They expressed their appreciation, as they still do today, with big hugs, smiles and kisses, coffee and the ever-present berries.

In 1963 Della moved to Kotzebue, where she is living now, employed as a medical practitioner.

Role of the Tribal Health Doctor

Della is hired by Mauneluk (the Kotzebue area Native Health Corporation) as the "Tribal Health Doctor." She travels regularly to the 11 villages in the Kotzebe area: Ambler, Buckland, Deering, Kiana, Kivalina, Kobuk, Noatak, Norvik, Selawik, Shungnak and Pt. Hope. She also goes to more remote villages if an emergency or special request arises. In the villages she holds clinics as well as making house calls.

Her duties include training Rosalla Stone, another Eskimo woman to whom she has been teaching her skills for approximately one year. Rosalla will begin practicing tribal medicine by herself when Della feels she is ready. Della has also helped to train Community Health Aides.

In Kotzebue Della relaxes with her family and sees from 0 to 6 patients a day. She usually treats Kotzebue patients in her home; however, she also makes house calls.

The types of problems Della feels confident in treating include: abdominal aches and pains, injured joints, sprains, chronic back pain, chronic head pain, arthritis, muscle pains, constipation, diarrhea, some skin problems, dizziness and care of pregnant women. During the 3 week period Della treated the cases listed in Table 1.

Table 1

Distribution of cases by Type of Problem and Sex of Patient

Type of problem	Total No. of cases	No. of men	No. of women
Abdominal aches & pains (decr. appetite)	7	4	3
Chronic back pain	5	1	4
Dizziness, shortness of breath	4	2	2
Injured joints	5	3	2
Muscle pains	4	1	3

Skin problems	3	2	1
Sprained ankle	1	1	0
Diarrhea	1	0	1
Infertility	1	0	1
Arthritis, joint pain	1	1	0
Incontinence	1	0	1
High blood pressure	1	1	0
Total	34	16	18

The 28 patients treated account for 34 specific case problems.

Some problems Della diagnoses she refers to the IHS Hospital, including the following three situations which were observed:

Patient complained of pain in her right lower abdomen. She could not walk or sit down without hurting. Della examined her and found a lump. She referred the patient to the hospital for a checkup.

Patient complained of incontinence when she laughed, coughed or strained in any other way. Della applied an upward pressure to the uterus, pulled down the stomach and stretched it. She said the woman should have an operation for her prolapsed uterus as soon as possible and referred her to the hospital.

Patient had noticed a birthmark on his scalp growing larger. Della told him to have it checked by a medical doctor.

Della refers to the IHS doctors those patients which she diagnosed as having new or old ulcers, broken bones, cancer or high blood pressure. She also refers cases which she feels may require an operation or some other form of medical attention.

I did not observe any contention or competition between Della and the Indian Health Service medical doctors. They work together to provide the best health care possible for their patients. As Dr. VandenBurg of the Kotzebue Hospital said, "Della is separate, but equal."

Healing Techniques

The techniques Della used to treat patients are listed in Table 2 which gives the frequency and relative frequency with which she used the techniques in the 28 cases observed.

Table 2

Technique	Frequency of Treatments	
	No. of patients on which technique was used	% of patients on which technique was used
Manipulating stomach	10	35.7
Manipulating intestines	9	32.1
Manipulating joints	3	10.7
Manipulating uterus	3	10.7

Manipulating liver	2	7.1
Manipulating spleen	1	3.6
Manipulating aorta	1	3.6
Manipulating fetus	0	0
Applying steady pressure (joints, vertebrae)	3	10.7
Exercises	10	35.7
External medications	4	14.3
Internal medications	4	14.3
Bandaging	2	7.1
Bloodletting and draining	1	3.6
Enemas	0	0
Hot or cold applications	5	17.9

The technique Della employs most frequently is using her hands to manipulate organs and apply pressure. She only works on patients 3 hours or longer after their last meal (the approximate time it takes for the stomach to empty). Based upon the observations listed above and my discussions with Della, a description of her healing techniques follows.

To manipulate the stomach, or "pull it down and stretch it", Della has a person lie on his back with his knees bent to relax his abdomen. With the side of her hand, smallest (5th) finger down, Della feels under the patient's ribs for the uppermost border of his stomach, which has a firm texture and a round shape. After locating the border, she pushes it in and towards the pelvis, applying a slow and steady pressure. The stomach descends and relaxes slowly and very noticeably, bringing immediate relief to the patient.

Della manipulates the large intestines in several ways. One is to push her hands deep into the pelvis directly medial to the hip, pulling the intestines towards the ribs. She does this bilaterally to "free the intestines, which are stuck to the pelvis," causing back pain. Similarly, she frees the intestines from the diaphragm area in cases of neck pain.

"Hooking up the Liver" is another technique Della uses. To do this, she has the patient sit facing away from her. Della very carefully and gently pushes her right hand fingers under the lower border of the liver. She then twists her wrist so that her fingers move up in a hooking motion. While doing this, her left hand anchors the liver to keep it from slipping to the side. She does this when she finds an enlarged or "dry" liver. After the treatment she rubs the abdomen with camphor liniment.

Della can feel the position of the uterus by pressing deep into the pelvis when the patient is supine with her knees bent. I observed her "pull up the womb" of a woman who had been trying to conceive for a year. Della stated that the uterus was bent and too far down. By applying a deep, upward pressure, she changed its position. She manipulates the uterus of a

pregnant woman threatening to miscarry by pulling it up in a similar fashion. After moving the uterus up, she "moves the large intestine under it to keep it from sliding back down."

During the last trimester of pregnancy Della can ascertain the position of the fetus by feeling the woman's abdomen. If it is a breech or transverse presentation, Della uses her hands to turn the baby. Using one hand to push and the other to pull, she applies torque slowly and gently. She prefers to do this no later than the 7th month, for fear of injuring the baby. Della can feel if the umbilical cord is tangled around the baby's neck and by gentle manipulation, she removes it.

For subluxed joints or sprains, Della holds the joint and "exercises it," carefully moving it up, down and sideways, feeling how it was dislocated. Then she pulls the bone out of the socket, twists it in the appropriate direction and slips it back into place.

Bloodletting is one of the very traditional practices that Della uses. She punctures and drains infected wounds and cysts. She also punctures areas of the head or back to let out "bad blood" in cases of chronic head or back pain, respectively. It has been noted that some of the points she uses in these cases are also acupuncture points. For snow blindness she punctures the skin between the eyes.

Stinkweed, (*Artemisia tilesii*), "Sargigruaq" in Eskimo, is a common and oft-used herb in the Kotzebue area. It is picked in September and dried. Later it is used as a compress or taken internally for many ailments including aches and pains, infections, colds and athlete's foot.

Treatment of Problems

Abdominal complaints were the most common problems in the study sample. These probably included ulcers, indigestion, gas pains, reflux esophagitis and gastritis. Della's standard treatment for such disorders is described in the following case:

A middle-aged, slightly obese woman complained of abdominal pain right after eating. Della pushed gas from her cecum around to the rectum. She also stretched the woman's stomach. She then prescribed 1 egg and 2 Tbsp. milk to "keep the stomach soft."

In this case I could see and feel that the patient's stomach changed from a hard palpable mass to a more relaxed and flexible texture.

To treat chronic back pain Della first has the patient lie on his back with his knees bent. She checks to see if his intestines are "stuck to his pelvis." If they are, she frees them by

pulling them towards the rib cage. She then stretches the stomach. After this she has the patient lift up first one leg straight, then the other, and finally both together, while checking for back pain. Usually, the patient feels better at this point. If not, Della asks him to kneel with both feet together and his chin supported on a chair. This position keeps the back very straight so Della can feel if a subluxation is present. If she diagnoses a subluxation, she applies a firm, steady downward pressure on the vertebra until she feels it "click". She then applies hot towels and afterwards Absorbine Jr. Then Della instructs the patient to stand, raise his hands over his head and bend to touch his toes, both in front and on the sides. In all five cases observed, the patients felt better and were able to stand or bend more freely after this treatment.

For patients who complain of dizziness and shortness of breath, Della pulls down and stretches their stomachs. Della then pushes down the rest of the abdominal contents, maintaining that it gives the lungs more room. Della says that you can tell if someone is going to have a heart attack because the stomach feels hard and obstructs the aorta.

A very obese woman approximately 50 years old, with an enlarged heart from rheumatic fever was experiencing dizzy spells, shortness of breath and visual hallucinations. Della pushes her stomach down in the direction of her pelvis so it wouldn't "push her heart." She also "softened" her stomach by rubbing it. After the treatment, the patient could take visibly deeper breaths.

To test for high blood pressure, Della feels the abdominal aorta by pressing in lateral to the umbilicus. If it is pumping very hard or too rapidly, she diagnoses the patient as hypertensive. To treat this problem, she moves her hands down the aorta to the iliac arteries. In one case she said the right iliac was "touching the pelvis." She describes her procedure this way: "follow the blood vessel from the hip back to the aorta and when there's small lumps like tapioca pudding, you push on them and they always disappear. They clog it and it gives you high blood pressure." She massages the iliac artery, softening it. In the case where the right iliac was "touching the pelvis," Della told the patient to sleep on his left side for one week after her treatment.

To treat sprained or dislocated joints, Della

"exercises" the joint to feel how it moves. She then pulls out and slips the bone back into place.

A man couldn't hold anything between his thumb and forefinger because his thumb had been dislocated. Della followed the above procedure, and the thumb clicked into place. The patient felt better immediately and had full use of his thumb as he demonstrated by proudly pinching everyone.

A middle-aged man presented a badly sprained, swollen and bruised ankle. Once again, Della followed the above procedure. When she was finished with her manipulations, she applied cold packs to reduce swelling, and wrapped the ankle in an ace bandage.

Patients who complain of stiff necks are palpated. If Della diagnoses a muscle spasm, she leads them in the following exercise: look to the left, straight ahead, right, straight ahead, up, straight ahead and down for 10 counts each, then repeat the routine faster and faster. Suddenly the pain seems to lessen and their necks become supple again.

Twice a year Della holds arthritis clinics. She takes a group of people to the Serpentine Hot Springs on the Seward Peninsula and assigns them each an exercise program. She starts with range of motion exercises to loosen the main joints and then gives progressively more difficult tasks to the people until they are more limber. The exercise program and baths in the hot springs seem to be beneficial for the patients.

For constipation or sluggishness Della often prescribes a lukewarm enema. She treats diarrhea with $\frac{1}{4}$ tsp. black pepper hidden in piece of bread and swallowed with water.

One case was observed in which the patient had alopecia (a loss of hair). Della prescribed washing her hair with Ivory soap, putting castor oil on her scalp for one day and then washing it out.

The main tools Della uses for diagnosis of a problem are the patient's complaint, symptoms, history and her own examination of the patient which is done primarily by touching.

Comparison with Western Medical Practice

Most of the patients Della sees are Native people (29 out of 31 cases observed). Della interacts with them on a very personal level, always sensitive and quick with a joke or story to help the person relax. She talks with them

primarily in their native language, Inupiaq Eskimo. Western medical practitioners are trained to act in a different style with a more objective approach. In Western medicine the personal involvement is less casual as the separation between physician and patient is greater and there is less physical contact with the patient.

Della touches her patients. This is a very important factor, for it seems that many problems can be helped by the practitioner using his/her hands. Most Western doctors are trained to touch the patients only with diagnostic instruments or for diagnosis. In contrast to Della, they do not touch the patients with their hands as part of the treatment.

The combination of Della's concern, her conversation and the treatment she gives makes the clinic visit a rewarding experience for both the patient and the practitioner. The length of the visit was no longer than an average physician's visit (approximately 15 minutes per patient).

Although Della's actions may be difficult to understand in a Western medical context, there may be a correspondence between the two approaches to physiology and medicine. Della's treatment for joints and muscles is understandable in a Western physiological context, as is her technique for changing the position of the fetus through pressure with her hands. Della's method of diagnosing hypertension is a dying art in the medical profession, but older practitioners can still tell if high blood pressure is present by feeling the intensity and rapidity of the pulse.

Della often "stretches the stomach." In the Native culture, reflux esophagitis and gastritis are common problems. If the stomach is manipulated (stretched and relaxed) so it is no longer as contracted, there may be less reflux, and the patients' discomfort will lessen.

Della's treatment of back pain through manipulating the intestines may also have a physiological explanation. Sometimes paralytic ileus results from lower back surgery, suggesting that they are connected by a nerve pathway. Perhaps by manipulating the intestines Della is utilizing this pathway, thereby affecting the back. Another possibility is that the back pain Della treated in this way was the result of abdominal visceral pain reflected through the sympathetic pathways to the back. In this case, her manipulation of the viscera could have affected the primary problem, thus alleviating the back pain. The relationship between neck pains and abdominal treatments could be explained by possible phrenic nerve involvement, since Della breaks this kind of pain by touching the area of the diaphragm.

Summary

Della Keats is a 71 year old Eskimo Tribal Health Doctor employed by the Mauneluk Corporation to serve 11 villages in the Kotzebue area. Health care is also provided to the villages by Indian Health Service doctors and state itinerant Public Health Nurses. Della has a unique role which complements the Western medical practitioners. This study focused on the major types of problems Della treats: abdominal aches and pains, chronic back and head pain, dizziness with shortness of breath, injured joints, muscular pains, skin problems, arthritis and bowel disorders.

In treating these problems Della uses techniques derived from traditional Eskimo medical practices, Western medicine and her own experience. These techniques include: manipulating the stomach, intestines, joints, uterus, liver, spleen and aorta; the application of steady pressure; the ministration of external and internal medications; bandaging; bloodletting and draining; hot or cold application; and enemas. She often prescribes exercise to the patient.

The major difference between Della and Western medical practitioners is that most of her diagnoses and treatments involve touching the patient. Her style of healing is very personal and reflects her Eskimo culture.

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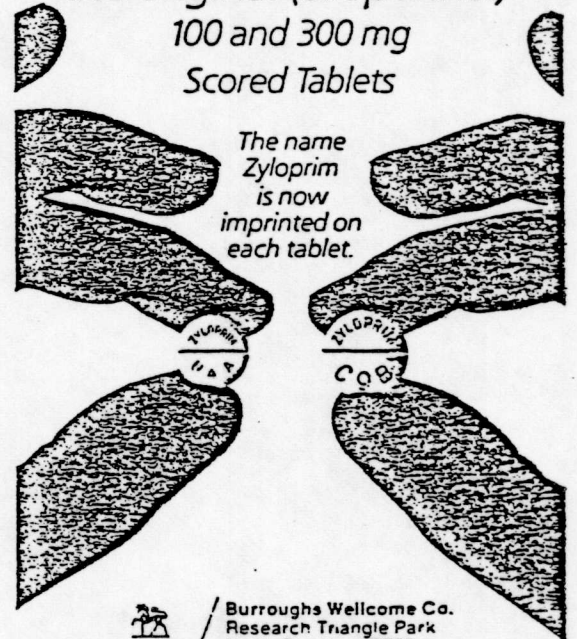
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