

Sawbones 483: Dr. Scholl's

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Intro (Clint McElroy): Sawbones is a show about medical history, and nothing the hosts say should be taken as medical advice or opinion. It's for fun. Can't you just have fun for an hour, and not try to diagnose your mystery boil? We think you've earned it. Just sit back, relax, and enjoy a moment of distraction from that weird growth. You're worth it.

[theme music plays]

Justin: [voice cracks] Hello, everybody and— Wow, what about that Greg Brady action there? [deeper voice] Hello, everybody.

Sydnee: Isn't that Peter?

Justin: Welcome to— Was it Peter Brady? Yeah, you're right. Hello everybody, welcome to Sawbones, your home for the greatest in Brady Bunch trivia. No, this is a marital tour of misguided medicine.

Sydnee: [laughs]

Justin: I'm your co-host Justin McElroy.

Sydnee: I'm Sydnee McElroy. You really scared me because I would not be good at Brady Bunch trivia.

Justin: The movies are fun.

Sydnee: Yeah, no, I'm not slamming the show or the movies. I'm just saying I would not be very good at trivia because I've seen maybe a handful of episodes of the show.

Justin: The only, like, good Brady Bunch trivia that I could dig up is that right when King's Island opened, they did some episodes at King's Island. There's like a couple of episodes where they stay at the King's Island Resort across the way and they go ride the racer and stuff like that.

It was a genuine thrill to see. You know, it's very frequent, you know, everybody on TGIF had to go to Disney World. It was, like, an episode, like, everybody had to do their—

Sydnee: Was it Disney World or Disneyland though?

Justin: It was both, it was ABC. So it's, like, Disney owns ABC, so they're just trying to, like, gin up tourism for whatever park. But they went all the time.

Sydnee: I feel like a lot of people on TV went to Disneyland and I knew I was not going to go to Disneyland. Like as a kid, like, that's in California. I live in West Virginia. I am never going to Disneyland was my perspective. So that felt very, like, "Oh, that's a fantasy right there." But King's Island.

Justin: No, that's attainable.

Sydnee: We can get there.

Justin: R.L. Stein too.

Sydnee: Mm-hmm.

Justin: Did a novel about King's Island.

Sydnee: The Beast.

Justin: The Beast. All right—

Sydnee: Yeah, that's three short hours away.

Justin: Yeah. Disneyland? It's like a dream.

Sydnee: Yeah, we're never going there, but we can get to Cincinnati, no problem. Thank you. Double A Highway. I enjoy you. Download your podcast before you hit that highway.

Justin: Yes.

Sydnee: That's my advice to you. You will not get reception—

Justin: There's nowhere to be.

Sydnee: There is nowhere to— Listen, there's a McDonald's, bank, gas station...

Justin: Combo.

Sydnee: Combo and that's your last chance. So when you see it, stop.

Justin: Yeah, stop.

Sydnee: 'Cause that's your last chance.

Justin: Sydnee, last week, I inspired the nation when I researched the episode of Sawbones so you wouldn't have to.

Sydnee: Yeah.

Justin: And I found sort of the first glint of a story that I felt like was too expansive for the scope of what I was trying to do in that episode. So I asked you if you wouldn't mind poking into it a bit more and you were kind enough to do me that favor.

Sydnee: Yeah, Justin, you asked me about Dr. Scholl...

Justin: Mm-hmm.

Sydnee: ... and whether or not Dr. Scholl of... foot fame?

Justin: Doctor— Yeah, I mean, I don't know how else you'd put it. Yeah.

Sydnee: Dr. Scholl of foot fame.

Justin: The foot guy.

Sydnee: The foot guy.

Justin: The foot guy.

Sydnee: Is this— Was this a real doctor or was this a, I think you already kind of answered, like, is this a figurehead? Is this, like, a made up character? Cause there are plenty of brands who have made up characters, right?

Justin: Right.

Sydnee: Who aren't actual people, but they invented to sell their product. And then there are plenty of patent medicine salesman we've talked about over the years who, like, would have a doctor who worked with them but was, like, paid in whiskey and wasn't... [laughs] I mean, wasn't a doctor by our modern standards, perhaps. So, like, where does Dr. Scholl fall into that?

Justin: Yeah, I don't know. That's the question.

Sydnee: So we know it's a real guy.

Justin: It is a real person.

Sydnee: You established that last time.

Justin: Yes. Unlike, I should mention, Dr. Teal, still no answer on the Dr. Teal front.

Sydnee: No.

Justin: Still don't know if that's human being or not.

Sydnee: And I just wanna say, I got so many— I knew if I said, if anybody knows, let me know, I knew we'd get emails. We got lots of emails and I appreciate them. Thank you.

Justin: Did they have any insight to share or were they all full of crap, like I knew they were.

Sydnee: No, they weren't full of crap. They had lots of insight to share. And they were doing the same research I was, in a lot of cases. 'Cause I was also researching this 'cause I knew this would be our topic.

Justin: Oh, I meant about Dr. Teal. I was hoping someone would find out about Dr. Teal.

Sydnee: Oh! There was one, yeah, no, we did. Oh, man. You're putting me on the spot. We got one email about Dr. Teal.

Justin: I don't mean to—

Sydnee: Everybody else, I should say, everybody else was about Dr. Scholl.

Justin: Yes.

Sydnee: Like, was that real? No, we got one email from a listener who could also similarly not uncover the truth about Dr. Teal. We got lots of emails from people saying, like, [exasperated] "Yes, Justin." They didn't say it like that. That's how I— That's in my heart.

Justin: That's how you heard it?

Sydnee: That's how I read it. "Yes, Justin." Sometimes they call you honorary Dr. Justin.

Justin: And you don't love it.

Sydnee: And I— Listen, I don't know that I'm okay with that.

Justin: Yeah, I don't, that makes perfect sense.

Sydnee: I don't know that I'm okay with that. I'm just saying...

Justin: It makes perfect sense that you would not like that.

Sydnee: You're making 50% of this podcast very happy and 50% of this podcast...

Justin: Not as thrilled.

Sydnee: ... not as thrilled. So, I guess even split. William Mathias Scholl was indeed a doctor. That's what— It's a real human, real person, real doctor.

Justin: Yes, yes.

Sydnee: That is the summary of the emails we got. And I think that that's, like, a fair— Especially if, like, you do a quick Google, quick search if you read anything from the company. [laughs]

Justin: Yeah.

Sydnee: Um, and so I think what you're— The reason that there's some question or some nuance is, and I'm gonna get into this, there's a couple of issues. One, what was our standard for a doctor, you know, over a hundred years ago...

Justin: Right.

Sydnee: ... versus what our standard is for a doctor—

Justin: Right.

Sydnee: And when I say doctor, I guess at this point, we're talking about a doctor of medicine or a doctor of osteopathy, an MD or a DO, right?

Justin: Right.

Sydnee: Somebody who achieved a degree in whatever medical field they're pursuing. But I think the other thing is, like, the bias we have, some of which I would argue is fairly founded, against medical professionals who also become business professionals.

Justin: Yes.

Sydnee: Who also are hawking wares...

Justin: Yes.

Sydnee: ... right?

Justin: Right.

Sydnee: And I think that a lot of that modern criticism is well founded, right? Because when I see somebody telling you, "You need this certain thing for your gut health," and then they try to sell it to me at the end of the pitch, I'm much less likely to believe, even if they have some sort of letters after their name, some sort of degree attached to their name, I'm much less likely to believe them because they wanna sell it to me.

Justin: Right.

Sydnee: And I think that Dr. Scholl was one of the first to fall victim to that because I don't— I would say he was more a businessman than a doctor.

Justin: Okay.

Sydnee: Like, if you just look at the balance of what he achieved, I would say that—

Justin: More notable for his accomplishments as an entrepreneur.

Sydnee: Yes, I don't, I'm not saying he was a bad podiatrist, I'm saying that, like, he was a fine podiatrist, but he was a really outstanding marketer.

Justin: Yes, that's—

Sydnee: Is that fair to say?

Justin: Yes, absolutely.

Sydnee: Okay. So he was born in Indiana in 1882, okay? He was a laborer on his parents' farm. He had lots of brothers and sisters, lots of siblings, okay? This is important because I am assuming, I mean, I did not grow up on a farm in Indiana in 1882.

Justin: That we know of.

Sydnee: But I think there's probably a lot of work that you're doing in addition to, like, farming-type work, a lot of, like, self-sustaining family type.

Justin: Like, what do you mean?

Sydnee: Well...

Justin: Milking the cows and what have you?

Sydnee: Well, the farm stuff, but also just, like, what goes into raising a family, caring for one another, feeding one another, clothing one another, repairing one another's shoes—

Justin: Shoes perhaps? Some home cobbling.

Sydnee: He had a knack for working with leather, even as a child. Shoes; shoes and feet.

Justin: [laughs] From a young age...

Sydnee: Gosh... You have to be so careful when you say, like, somebody was really passionate about feet because, like, there are multiple ways to be passionate about feet.

Justin: We should— Let's just— You know what? Just to make it an easier episode to record We all agree feet are weird. Okay.

Sydnee: No, I don't think feet are— No, this is your thing. You have a hang up about feet. I don't have a—

Justin: I'm just saying, like, we don't have to always be, like—

Sydnee: I'm feet neutral.

Justin: We don't have to make people feel weird about liking feet.

Sydnee: No.

Justin: Some people like feet. Some people don't like feet.

Sydnee: I think there are lots of ways to 'like feet...'

Justin: Right.

Sydnee: ... and what I'm saying is—

Justin: We're only using the first version of liking.

Sydnee: Yeah, he was concerned with the problems that ail human feet and wanted to help alleviate them.

Justin: He was a—

Sydnee: That's a different kind of foot interest.

Justin: He had a compassionate heart for feet.

Sydnee: Yes.

Justin: He wasn't necessarily a foot enthusiast.

Sydnee: And there's nothing wrong with being a foot enthusiast.

Justin: Nor would there be! I'm just saying—

Sydnee: I'm just saying—

Justin: [crosstalk] ... said he loved— He went crazy for feet. We just want to say what we're talking about.

Sydnee: Right. But that's— If he had gone crazy for feet in a different way, that is fine too. I don't know why—

Justin: That's fine too.

Sydnee: I don't know why I would do an episode about that.

Justin: But you'd— I just want to say—

Sydnee: Like, that would not be a Sawbones.

Justin: I just want to say, I'm just trying to clarify every time we talk about just going gaga over those little tootsies, we're not talking about necessarily a sexual fetish.

Sydnee: No, no. He was like the official family cobbler. He fixed all the shoes. He was good with leather work. He went to... Woof. He went to Chicago in 1900 and started working at a shoe store, which makes sense. He was good with shoes. He was good with feet.

Justin: Yes.

Sydnee: He cared about it. And he was, you know, driven to correct foot problems because of this experience. Because I would imagine foot technology, footwear technology, I should say, not foot technology. We weren't engineering feet yet.

Justin: Yet!

Sydnee: But we were engineering encasings for feet. We're probably— It was probably not as advanced as it could have been, right? Like, it's 1900, we're not there yet.

There are a lot of materials we don't have yet. And so he became very interested in, "How can I alleviate people's feet problems?" And that is when

it is said that he enrolled in medical school in Loyola University. This is a subject of debate.

Justin: Yes, this is where the questions start to get—

Sydnee: Did he go to school here?

Justin: Everyone agreed that he loved feet. This was not up for debate. The question was, like, did he— This is where it starts to get a little hazier.

Sydnee: Right, did he enroll in med school? We think. I mean, we have no proof that he didn't. We just don't have the records to prove that he did.

Justin: Mm-hmm.

Sydnee: But we have no proof he didn't. And the records of the time are sketchy. And so, like, calling it into question, I mean, it already, like, a lot of other people would have made the same claim and we haven't called it into question. I will just say that, okay?

And I think underlying all this, it's funny, in all the articles I read to try to piece this out, they all made the same point. Everybody's kind of weirded out by feet. And especially if you're talking about— That's a broad generalization, this is a claim made in many of the articles.

I, again, am gonna just stand here and say, I've never been weirded out or grossed out by feet. I am fine with feet. I don't, like, they're not my favorite part of the human body, but they are not my least favorite part of the human body either. I'm just fine on them.

Justin: You understand this.

Sydnee: I don't mind to take care of foot problems. Like, if somebody says like, I got a gross thing on my foot I want you to look at, there is no part in me that is repulsed or grossed out. I'm just, like, "Yes, show me the weird thing. I don't mind."

Justin: Because you know the, like, screeds like this are normally reserved for people that are being very defensive about their positions. I feel like in a—

Sydnee: I think feet get a bad rap. I'm defensive of feet. I don't mind feet. I don't mind... I don't mind feet!

Justin: Okay, okay. I'm just saying we need to isolate your last speech as a ringtone that everyone can use.

Sydnee: There's a lot— [laughs] There's a lot of debate as to if this questioning we have as to Dr. Scholl's credentials are in part related to our, I would say, nuanced relationship with the human foot.

Justin: [laughs] Yes.

Sydnee: And the way we do not value it like we do other parts of the body, and so a doctor solely devoted to the foot would be, you know...

Justin: There's already some—

Sydnee: ... demeaned unfairly.

Justin: Yes.

Sydnee: That is the point.

Justin: That's fair, that's fair.

Sydnee: Okay. Which by the way, I will say, Scholl also had a grandfather who was a shoemaker. And I thought this was really interesting. His father served in the Union Army during the Civil War.

Justin: Oh, really?

Sydnee: And Union soldiers had shoes— This was a big new thing at the moment. They had shoes that were styled for each foot. They had a left and right shoe. That was new. That was a new development.

Justin: What?

Sydnee: It was not all throughout human history have we had shoes that are footed, that are foot specific.

Justin: You're kidding me.

Sydnee: Feeted. No, that was a big thing. And so...

Justin: Well, that makes sense, right? Because it's really... Just theorizing, but like, rubber is a big part of that, right? Which is a relatively new invention.

Sydnee: Because you've got to mold it.

Justin: Yeah.

Sydnee: And there's so many things that it'd be harder to mold.

Justin: Yeah. Huh. That's really nice.

Sydnee: It's interesting, but like, shoes...

Justin: I bet you'd probably wear it—

Sydnee: And I'm not saying that these are the only example, because I guarantee you, and I'm not a historian. I'm an amateur medical historian for comedy purposes and mainly a doctor.

But I would imagine there are other times and cultures in history where they have had footed shoes. I would imagine this isn't the first time, but the Union soldiers having them was a big distinction between them and the Confederacy who did not.

Justin: I wonder if they would become footed over time, right?

Sydnee: I'm sure there are other places where they had invented footed shoes before.

Justin: Yeah.

Sydnee: Before the Union army, but it was a big deal. The point is, like, he had this sort of, why was he so interested in feet? It was, like, a family thing.

Justin: It's a family thing. He loves his family's feet and then he loves other feet.

Sydnee: So he went to medical school and he was really interested in what at the time was called chiropody.

Justin: Oh.

Sydnee: This is the precursor to podiatry.

Justin: Is there a difference or is it just a difference in nomenclature?

Sydnee: Well, there is a difference.

Justin: Okay.

Sydnee: While largely a chiropodist would have been interested in the feet and would have done most of the stuff that we would think of as a modern podiatrist job. Chiropody technically is referencing the hands and the feet. So a chiropodist specialty would be hands and feet. Whereas a podiatrist, just feet.

Justin: Got it. Okay.

Sydnee: They don't do hands. So it's similar. And at the time, like, chiropody training was not as advanced, necessarily, as other fields of medicine. So again, going to a chiropody school already kind of put you at a disadvantage in terms of, like, respect from the medical community at large because the schools weren't as rigorous.

No medical schools were as rigorous as they are now, certainly, but this was an area that lagged even further behind. So if somebody said, like, "I am a credentialed chiropodist," they could have actually gone to a school and learned things or they could have paid for a certificate that said, "I am a chiropodist."

Justin: Okay, so you didn't really know that— It didn't tell you that much.

Sydnee: Right, and so there was more variability, which I think again is what cast this sort of, like, veil of uncertainty over Dr. Scholl, because, well, a lot of people say they're chiropodists.

Justin: But...

Sydnee: But are you real?

Justin: Are you the real deal?

Sydnee: Right. Um, so anyway...

Justin: Which is why that credentialing is so important and why it became more...

Sydnee: Why it is rigorous and why today, like—

Justin: It's really not until, if memory serves, like 19-aughts, right? That's, like, FDA is, like, 1906, somewhere around there?

Sydnee: We're really— We are, right now, we're in the 1900, like, the year 1900...

Justin: Right.

Sydnee: ... to 1904.

Justin: We're about to get a lot more serious about all this stuff.

Sydnee: We are about to get much more intense about medical marketing and credentialing and products and drugs and, like, all this stuff is about to be much more highly regulated and the era of being able to say, like, "Buyer beware, caveat emptor..."

Justin: [laughs]

Sydnee: That era is really starting to come to an end when it comes to medical products. I will say though, as a caveat of my own, we're still not there because there are lots of non FDA regulated supplements that make all kinds of claims that are not evidence-based or medically verifiable.

So the idea that we have completely moved past this and now we're in this era where a claim that you hear about medicine is 100% true. I think we all know, because if you listen to the show, you know, that is not true either. But we were further from it then.

So he's going to medical school in the evening. He's still working at the shoe store, Rupert's, in the day to, you know, kind of come up with, I mean, it's like inspiring him. He sees these problems, he goes to medical school, he's learning the information, he's coming up with a way to solve them. And—

Justin: He's walking the walk, if you will. He's not just talking and learning about feet. He's there on the front lines every day with his hands on feet.

Sydnee: And can I tell you, if I was, like, if you take a student like this today and give them to me as an assistant professor at a medical school, I am going to be very impressed by a young medical student who is both seeking medical, you know, like, pursuing their medical career, seeking medical knowledge and engaging in firsthand work with the thing he wants to pursue. Like, that would be very impressive to me. So anyway, from this he creates his first thing, the Foot-Eazer.

Justin: The Foot-Eazer?

Sydnee: Foot, dash, E-A-Z-E-R. Foot-Eazer, which are two pieces of metal that are separated by an adjustable spring.

Justin: Okay.

Sydnee: And it goes inside your shoe to provide arch support.

Justin: Where inside your shoe? Is it, like, small, just on the arch?

Sydnee: You just slide it in there.

Justin: Okay.

Sydnee: Yeah. Just like you would imagine an insole today, except again, we're kind of dealing with the materials we have available, right? Like I don't think it was that easy to make some sort of plastic cushion gel.

Justin: Memory foam... Yeah, right.

Sydnee: Yeah, insole, right? We didn't have all the right stuff. So, um, he tried it out on customers first. He had, like, a place to test these new things. A customer offered him ten thousand dollars immediately...

Justin: Wow!

Sydnee: ... to set up this business to sell this thing.

Justin: [laughs]

Sydnee: Not just for the thing.

Justin: I was going to say!

Sydnee: Now just for the insole!

Justin: "This is amazing! Sell it to me now. I'll pay any price!"

"Ten thousand dollars."

"Sold!"

Sydnee: But he realized, no he wasn't sold, because he realized that if it was worth \$10,000 to this guy...

Justin: Oh...

Sydnee: ... it's worth more. So instead he borrowed 700 bucks from his dad, and in 1904 he opened his own Scholl manufacturing company, where at this point he had finished medical school, but he would work to sell the devices that he...

To make and sell. He's making them. He's sitting in there. He has no heat, he's wrapped in blankets, he's in the Chicago cold. Imagine him like that, working to make these foot-easing devices that he can sell you to go in your shoes, all on his own. That's how he started out.

Justin: Okay.

Sydnee: If you're really into capitalism, [laughing] it's a very inspiring story. If you're really into your foot, your feet feel— Listen, I use, full disclosure, I use Dr. Scholl's inserts in my Chuck Taylors because...

Justin: Well, you have to.

Sydnee: I'm a 40-year-old woman who wears low-top Chuck Taylors most of the time, like, as in 98% of my time.

Justin: Yeah, they're just... They're barely shoes.

Sydnee: They're barely shoes. They're made of paper and I love them. I've worn them since high school. I'll never stop. I'll die in these Chucks, but I will put Dr. Scholl's gel insoles in them. Thank you.

Justin: I don't know if they help, but I know they feel good. I don't know.

Sydnee: I will tell you that.

Justin: Okay.

Sydnee: But first, we got to go to the billing department.

Justin: Let's go.

[theme music plays]

[ad break]

Griffin: From the twisted minds that brought you the Adventure Zone Balance and Amnesty and Graduation and Ethersea and Steeplechase and Outrespace and all the other ones. The McElroy brothers and dad are proud to reveal a bold vision for the future of actual play podcasting. It's, um, it's called the Adventure Zone Versus Dracula?

Justin: Yeah, we're gonna kill Dracula's ass.

Travis: Well, we're gonna attempt, we haven't recorded all of it yet. We will attempt to kill Dracula's ass.

Justin: The Adventure Zone Versus Dracula.

Griffin: Yes, a season I will be running using the D&D fifth edition rule set, and there's two episodes out for you to listen to right now. We hope you will join us. Same bat time, same bat channel.

Clint: And bats. I see what you did there.

Ellen: People say not to judge a fish by its ability to climb a tree.

Christian: Which is why here on Just the Zoo of Us, we judge them by so much more.

Ellen: We rate animals out of 10 in the categories of effectiveness, ingenuity, and aesthetics, taking into consideration each animal's true strengths. Like a pigeon's ability to tell a Monet from a Picasso, or a polar bear's ability to play basketball.

Christian: Guest experts like biologists, ecologists, and more join us to share their unique insight into the animal's world.

Ellen: Listen with friends and family of all ages on MaximumFun.org or wherever you get podcasts.

Justin: Sydnee, you've ruined so many things for me on this podcast, and I'm just wanting to know if you're gonna add Dr. Scholl's gel inserts to that list.

Sydnee: I think it's— I'm gonna— We're still at the point where he is just now mass producing these in order to make money off of them, and in theory has his medical degree, right? I think any product like this, and this is true for a lot of supplements too, where it was manufactured long before anybody would have, like, thought to do a study on it...

Justin: Mm-hmm.

Sydnee: ... it starts to get tough to tease out if it works or not, right?

Justin: Right.

Sydnee: Because once something becomes pervasive enough, whether or not it really works, it gets really hard to fight that. People believe in things.

Justin: Yeah.

Sydnee: And I think it's something that we still try to untangle on this show. Why do people believe in products or supplements or, you know, traditional remedies or things like that as strongly as they believe in, I don't know, some sort of faith of some sort.

Justin: Yeah, I don't know.

Sydnee: But I mean, you really bump up against people who have deeply held, like, family traditions of a certain thing works.

Justin: Right.

Sydnee: And I think, I mean, it might be a little hyperbolic to say that Dr. Scholl's fits into that, but tell people that those insoles don't work and they will call BS on you every day because they use them, lots of people use them, and they feel nice. They feel good.

Justin: They do.

Sydnee: My feet feel better when I use insoles than when I don't.

Justin: It's like walking on a squishy cloud.

Sydnee: My feet feel better and I will say that. Did I do a study to tell you that my feet feel better? No, I wore them and my feet felt better and I'm telling you my anecdotal evidence. And that cat is so far out of that bag. That bag is disintegrated and gone. There's no— Why are we putting cats in bags anyway?

Justin: What?

Sydnee: Why do we put cats in bags?

Justin: That's a great question.

Sydnee: So he wasn't satisfied with one product.

Justin: No, why would you be?

Sydnee: No, he's gonna make—

Justin: With a gifts like that?

Sydnee: Yeah, no, he's gonna make others. His motto, "Early to bed, early to rise, work like [censored] and advertise." Can I say that? I said H-E double hockey sticks.

Justin: You just did. Maybe, I bet Rachel bleeped it out.

Sydnee: "Work like heck and advertise."

Justin: Okay.

Sydnee: That's what he said. He would go store to store. He realized pretty quickly that the best people to sell his products were shoe stores, other shoe salesmen and women and people.

And so he'd like to get his products into shoe stores. So he went to shoe stores and he'd walk in and he'd pull a human foot skeleton, a human skeletal foot, a foot, a human foot skeleton out of his pocket and he'd show the salespeople how delicate the human foot is. You got 28 bones in there.

Justin: And they're all just like, look at them wrong... [crosstalk]

Sydnee: It's a delicate, beautiful machine, the human foot. It's not just, like, a platform that carries us and it needs proper support. And just like we support our machines, we need to support our feet.

Justin: Just like we support our government, we got to support our feet.

Sydnee: Well, I don't know about that.

Justin: [laughs]

Sydnee: Um... And he realized pretty quickly that he needed more salespeople. So he would recruit people. So, and first he started with family because his brother, Frank, would go on to create other products and become a big figure in the company, especially since Dr. Scholl would never marry, I should preface with that. He wouldn't have, like, a child necessarily...

Justin: An heir? [laughs]

Sydnee: ... an heir to pass the Dr. Scholl fortune on to.

Justin: "Now you are Dr. Scholl."

Sydnee: But his brother, and then multiple brothers, had children that they could then continue on in the Dr. Scholl family name, right? So he would do these, uh, so he would start this correspondence course for salespeople. And basically it's, like, "Have you ever wanted to know about the human foot? I bet you have. Have you ever wanted to know how to, like, everybody's, like, 'oh, my feet hurt.' And you could tell them things that would help them with their feet."

Justin: [laughs] I've always dreamed of that, Sydnee.

Sydnee: It's like a— It was, like, an amateur podiatrist school at first, because you weren't gonna be a podiatrist at the end, you were just gonna be an expert in foot problems and foot solutions as long as those foot solutions were products made by Dr. Scholl.

Justin: Right.

Sydnee: And then you would go sell people these products made by Dr. Scholl. So he very early, like, created this school where you could earn some certification in foot knowledge and then also sell products for foot ailments.

Justin: Yeah, like, a professional shoe enthusiast, a card-carrying shoe fan, foot fan. And he would go on from there. I mean, that's the other thing. He started with something that sounds very like, well, this is kind of craven.

Like this is just to sell your product. But he did, in fact, establish the Dr. William M. Scholl College of Podiatric Medicine. So he didn't just create, like, a correspondence course for salespeople who had some foot knowledge, right?

Justin: It was real, it was real...

Sydnee: He started a podiatry school.

Justin: A physical building or was it more of a correspondence?

Sydnee: No, he opened a school right down the street from his factory where you could come and study and learn how to be what was now starting to be called a podiatrist.

So we're at this, and again, I think this is what adds murkiness to these waters is we are at this sort of turning point in the field of podiatry, where it's moving from chiropractic to podiatry and where it's becoming more regulated. And Dr. Scholl is helping create that. And so if you're an innovator in a field, how would you be respected by your predecessors in that field who are still clinging to maybe outdated modes of... You know what I mean?

Justin: Yeah, yeah.

Sydnee: So, like, there's some rationale for, well, he was just a doctor who other doctors slammed because he was different. You know?

Justin: And he carried a foot skeleton.

Sydnee: He did carry the foot.

Justin: In his pocket.

Sydnee: Which, I mean I can see where that would...

Justin: Like all the time, you think?

Sydnee: I don't think all the time. But when he went to sales calls, it was a prop.

Justin: All the time. He always had it.

Sydnee: You know, like, on Shark Tank, they come out with all kinds of weird stuff.

Justin: Oh yeah, so that was his pro— Yeah, that makes sense.

Sydnee: It's the same idea.

Justin: Okay.

Sydnee: He went before the sharks and he was, like, "Sharks, I have a human foot in my pocket." And then he pulled it out.

Justin: "Who wants to pay me for it?"

Sydnee: [laughs] And Laurie Grenier gave him a golden ticket or what does she have? She's got a coin?

Justin: Yeah, uh... I don't know, I don't go in for Laurie's gimmicks. Sorry, go ahead.

Sydnee: Anyway, so because of all this marketing that he was doing and he opened this school and so he's training new people kind of in his tradition, there were a lot of people in the medical community, especially the podiatric community, who were, like, "This guy's not real. He is not real, this isn't right. It is beneath us to sell products at the same time that we diagnose and treat people."

Which I will say, like, early on, Dr. Scholl was still doing consultations for people. But as time went on, he moved further and further away from that and just marketed his products. Like, he did less practicing of medicine. He just used that expertise to market products.

One thing he bumped into pretty early, one problem, is that his Foot-Eazer had to be fitted for every foot individually. And if you were not trained at one of his, like, either his school or his correspondence course, you wouldn't know how to do that.

Justin: Oh.

Sydnee: And so they would get sent back a lot. And that's extra money, right? To resend them.

Justin: Right.

Sydnee: So he invented the Scholl's Archfitter, which was a product that he gave out for free on his own dime. He made this, and you can look up pictures of this machine that basically, like, shows exactly the curvature the arch, you know, like, you put your foot in and he would give these to shoe stores, like, "This is on me and then you know exactly how to foot people's fit— Fit people's feet for my product," to reduce the number getting sent back which I think was, again, a really clever marketing strategy.

And that was really, like, as he grew, and even as the medical community started condemning him at the 1923 meeting of the National Association of Chiropractors in New York City, there was a resolution passed that basically said you cannot manufacture and sell anything related to foot care if you are, basically, for an upstanding member of our association.

Justin: Mm-hmm.

Sydnee: And so specifically they were banning Scholl.

Justin: You can— Not only is Archfitter real, you can buy one on eBay for a hundred bucks if you want. Just go get one.

Sydnee: There you go. So even as his products were being banned and basically everybody else in the community was kind of standing up and saying, like, he is not the real deal, he just kept on going. He continued to create new products because beyond, like, arch supports and—

A lot of that, what he did just sort of responded to what materials were available at the time. What was easy to get and source, what new rubbers and plastics and things were being made over time. And then he went on to, like, other foot problems, like foot powders for, you know, sweaty feet or smelly feet, things like that.

Justin: There's a— There's a—

Sydnee:[crosstalk] ... and a lot of it had to do with, like, the popular shoes of the day. There were a lot of, as we move into times where women, specifically, you know, feminine presenting people were expected to wear very perhaps beautiful, but impractical shoes, which I don't know, has that

gone away? Not completely. But things like pads for corns on your feet would be very popular and discreet, and you could buy them secretly and continue to wear those lovely high heels...

Justin: So... Oh, that's your secret.

Sydnee: ... with the point it goes. But it's your secret. And you do, it's funny, because you can see sales of products like that wax and wane with shoe trends. But he was meeting all of those different needs for the feet, and people were buying it.

And he was a very clever marketer. He was one of the first to start selling shoes in a way, or products in a way where you could go in and pick things off the shelves, as opposed to asking someone from behind the counter to grab it for you. To have, like, multiple of an item on a shelf that you could pick up and carry to the counter. He was one of the first to come up with that model of a storefront.

Justin: You know, it's interesting that they're still doing, Scholl's is still doing stuff like this. I remember, I don't think it's there anymore, but I know for a long time, our Walmart had a kiosk that you could stand on it. Do you remember that? You stand on the thing and it makes a heat print of your foot.

Sydnee: Yeah.

Justin: And then it tells you like, here's where you're carrying the weight. Here's the exact number that you need. This is like your perfect insole.

Sydnee: It was that combination of, like, this sort of scientific academic approach to feet along with the marketing. Because on the marketing end, I mean, at the same time he wrote books, he started a whole medical journal, he started his own medical school, but he also had a national advertising campaign for the girl with the most perfect feet. So he did a Cinderella contest...

Justin: [laughs]

Sydnee: ... to advertise his products. Right?

Justin: It's not... It's not—

Sydnee: So, like, it was, well, it was the mixture of all of this together, which simultaneously got people excited to buy his product and had him condemned by the medical community at large. Right?

Justin: Right.

Sydnee: By the way, he ran the company and at times would still see patients for over 40 years. He created more than a thousand patented ointment sprays, cushions, pads, supports, shields, springs, all kinds of things to go in your shoes, as well as shoes, right? Dr. Scholls sells shoes.

Justin: Shoes themselves.

Sydnee: Like eventually the shoes, the orthopedic shoes would be sold. It was an empire. I mean, really, some of his marketing stuff was ahead of its time. Like with national campaigns and things, he was kind of the forerunner of a lot of modern marketing in that way. And so I think he's almost a more important fixture in that piece of history, like marketing advertising history, than he is in like, I don't know, foot history. [laughs]

Justin: [laughs]

Sydnee: Because at the end of the day, like, did these products work? We were kind of taking his word for it. Now, I will tell you that I looked for studies to see, has anybody tried to see, do these things work? Because the company's not gonna go back and do that, right? If everybody's buying their inserts, why would they go back and prove they work?

Justin: Right.

Sydnee: What's the point?

Justin: Right.

Sydnee: There have been small studies that have looked at small numbers of people wearing the insoles versus not, and, like, does it improve pain, gait, just, like, I don't know, general comfort in walking, wear and tear on your feet, the development of calluses or corns, things like that. And generally, yes, the inserts tend to work. These are small studies, and a lot of this is subjective, right? Rate your pain.

Justin: It's like... [sigh] It doesn't feel like there should be... I don't know, we're talking about the difference kind of between like therapy and comfort, right?

Sydnee: Mm-hmm.

Justin: Like, is this, I guess just alleviating. I mean, are they spinning comfort as therapy would be my question. Like... Is it just like, oh, that feels really nice and squishy. It's not really, like, treating the issue, but, like, it is providing, like, comfort, right? It just feels better. Like, which I guess is a, is that a medical treatment? If it like makes your feet feel better, is that medical or is that just a comfort issue?

Sydnee: The subjective relief of pain is definitely...

Justin: Yeah.

Sydnee: I mean, that's definitely a goal. Like if you look at any study of anything that we do, whether it's a pill or a procedure or a shot or an insert or a device. I mean, if it is to treat pain, part of the, you know, marker of was it successful is asking the patient, rate your pain before, rate your pain after. Is it better? I mean, it has to be, I mean, that's one of the problems with pain, right? Like it is inherently subjective.

Justin: Sometimes the dogs need a little, we don't, we— You know, sometimes we ignore the dogs. Maybe it's not— Maybe it's easier to just give the dogs a little love, cause nobody else is doing it. Dr. Scholls is there, he'll do it. He'll give the dogs some love.

Sydnee: But I will say at the end of the day, whether or not was he a doctor? I mean, he definitely graduated, like, there was proof later on that he did, he did go to a medical school.

There is a little discrepancy as to he graduated from the Chicago Medical School in 1922, and it looks like he was already operating as a podiatrist prior to that graduation date. And so then there's question as to like, "Well, did he finish or why was he already functioning?" Like, why was he claiming this title even before he technically should have received it?

You know what I'm saying? Like we get into some of that. And then if you read part of the criticism, it's because they didn't value those medical institutions at the time.

Justin: Yeah, right.

Sydnee: At the time, the schools he attended were thought of as, like, sea level at best in the grand scheme of things. And so...

Justin: Because they weren't taking it seriously, right?

Sydnee: And so, like, if that's the best you got, I mean, I'm— Listen, I'll put myself as a doctor up against anybody else. I know what I'm doing. And I didn't go to, you know, an Ivy League medical school. I didn't go to the medical school that's listed as the top of all medical schools.

Justin: Yes, that's true.

Sydnee: So I get a little defensive of Dr. Scholl in that regard.

Justin: Yeah.

Sydnee: He was a doctor. By modern standards, there are a lot of people who were doctors in the year 1900 who are not qualified today, right?

Justin: It was a very different time.

Sydnee: Did Hippocrates have a modern medical degree?

Justin: No.

Sydnee: What, is he considered the father of medicine, at least in the Greek tradition?

Justin: Well, that's because he had no one to give an oath to. I'm just saying, like...

Justin: [crosstalk] Boom! Now you can't be a doctor.

Sydnee: If you're an innovator, if you're revolutionary, and, like, also if your main concern might be selling foot products to people, are you gonna get a little shade thrown your way? Absolutely.

Justin: Because everybody's so hung up about it, everybody's so weird about it.

Sydnee: Dr. William Scholl was a real guy who really went to medical school and really made foot products for people that I anecdotally feel...

Justin: For whatever that's worth.

Sydnee: ... allow me to continue to wear Chuck Taylors well into my middle-aged years.

Justin: Well past the point— [laughs]

Sydnee: [laughing] Well past the point...

Justin: The physician recommended—

Sydnee: ... when an adult should be wearing Chuck Taylors.

Justin: [laughs]

Sydnee: Thank you, Dr. Scholl.

Justin: Thank you so much. And thank you for listening, my friends. We hope you have enjoyed yourself. We always enjoy this time with you. Our kids were in school exactly one day last week. because of the snow, so honestly, just having a little time to chat with my wife. I'm happy you all could be here, but it's nice to just get to not be with our kids.

Sydnee: I love our children, but I think they're even sick of us now.

Justin: I like everything in measure, you know? I can deal with just about everything in doses, small doses.

Sydnee: They're over us at this point. They're like, "We just wanna get away from you guys."

Justin: But thanks to the Taxpayers, for the use of their song, Medicines, as the intro and outro of our program, and thanks to you for listening. We appreciate you so much. That's gonna do it for us for this week. Until next time, my name is Justin McElroy.

Sydnee: I'm Sydnee McElroy.

Justin: And as always, don't drill a hole in your head.

[theme music plays]

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