Sawbones 536: Thalassotherapy

Published April 15th, 2025 Listen here on Maximum Fun

Clint: 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 try not 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: Hello everybody, and welcome to Sawbones: a marital tour of misguided medicine. I'm your cohost, Justin McElroy.

Sydnee: And I'm Sydnee McElroy.

Justin: And Syd, what's happening this week? What are we doing? I feel like it's been such a chaotic few week on Sawbones, here, with all the travel, and then the Max Fun Drive, and then—everything's just been so wild at the McElroy house!

Sydnee: I've been—yeah, I've been really busy.

Justin: You've been getting your—

Sydnee: With my day job.

Justin: Yeah, your day job, and your—the new overnight shelter that you've been working on that you started talking about last week here in Huntington.

Sydnee: That's right, Justin.

Justin: We've got a lot cookin'.

Sydnee: I know. It's been really busy. And on top of that, our listeners were thoughtful enough to point something out that I missed on our last episode.

Justin: Yeah. And you promised me you weren't gonna be spicy about this.

Sydnee: I'm not spicy. You're all right! And I missed something, and I am fallible. I am merely human. We had a question on our last episode, Weird Medical Questions, about how when you're making pottery sometimes you score the surfaces and you use slip, and then the surfaces stick, and is there anything like that in medicine? And I had talked a little bit about some things that were similar, but I couldn't think of anything exactly like that.

And then many of you—I won't name all of you. There were many of you who reached out to talk about pleurodesis, which I think is a good example. And what that is—so, let's say that you have had multiple—either a pneumothorax or a pleural effusion.

What those are—a pneumothorax is when there is air between the lung and the lining, the outside of the lung, like the lining outside it. You don't want air to get trapped in that space because it'll start to push and collapse the lung, right?

Same thing. You don't want fluid to get trapped in that space, push and collapse the lung. It'll cause difficulties breathing, respiratory problems.

Justin: Okay.

Sydnee: Anyway, if you have multiple occasions where that happens over and over again, because we fix it and then it goes away, and if it goes away, great. But if it continues to recur over and over, we might want to try to make the lung stick to the lining of the lung.

Justin: Hm.

Sydnee: The lining out there. And not allow air or fluid to accumulate in that space anymore. And in order to do that you can do something called pleurodesis, where you go in there with a chest tube, into that space in

between, and you're actually going to put either, like, a medical talc—it's like a sterile medical powder—in there along the lining, along the outside of the lung and the inside of the chest cavity there. Or you can use a surgeon's rasp, like a file kind of thing.

Justin: Sure, yeah. A rasp.

Sydnee: And you make the surfaces rough, and you put the talc in there, then you stick 'em together!

Justin: There you go!

Sydnee: And you're intentionally trying to abrade these surfaces in such a way that they will [clicks tongue] stick together!

Justin: Perfect.

Sydnee: That's pleurodesis. And that is a great example of exactly what our listener asked in the question about pottery. So, thank you. Thank you, everybody who emailed about that. 'Cause it is—it is a really good example, and I think it's in interesting procedure, and it's a cool analogy to this thing you do in pottery. And it's a good reminder that as healthcare providers, we should be lifelong learners. We should never—

Justin: Oh, too true.

Sydnee: And lifelong remember-ers, because there's a lot out there. And I think sometimes if we've been exposed to something in medicine—like, when I read those emails I thought, "Oh yeah, I remember learning about pleurodesis."

Now, I'm not a surgeon, so it's not something I do regularly, but I kind of vaguely remember it. But it's okay to say, "Oh, gosh. I kind of remember that, but I'm gonna have to do some reading to refresh myself."

I'm not an encyclopedia. It's not all up there. So it's a good reminder to stay humble, admit when you don't remember or know something, and learn from your colleagues and listeners. Thank you all. **Justin:** And yet when *I* encourage you to stay humble, it sometimes irritates you. I just don't understand the difference. [wheeze-laughs]

Sydnee: Yeah.

Justin: [laughs quietly]

Sydnee: Maybe our listeners will have some input for you-

Justin: No! I don't—

Sydnee: —on what the difference is. Maybe they could—

Justin: No, that was a joke! No, that was a joke! Listeners.

Sydnee: —email Sawbones.

Justin: No, listeners, that was a joke.

Sydnee: At Maximumfun.org.

Justin: Email—

Sydnee: And tell you.

Justin: Email—[wheeze-laughs] Email joerogan@joeroganpodcast.

Sydnee: That wasn't a—no, that wasn't our email address. What's it? Is it sawbonesshow? What's our email address?

Justin: No, I'm not gonna tell you so you can—what, so you can—

Sydnee: Well, tell our listeners-

Justin: —tell people to blast me?!

Sydnee: No, I just got it wrong. What's our email address?

Justin: It is sawbones@maximumfun.org.

Sydnee: Thank you. Okay. That's what I said, and then I got—that's not what we're talking about.

Justin: No, that isn't. Well, it is, in that we have. I mean, we did.

Sydnee: Yeah. Well, we did that. That's done. Moving on.

Justin: We have talked about it, yeah.

Sydnee: I like transitions like that. "I did that thing. Now I'll do the next thing."

Justin: Yeah. We call that in the biz a segue. Real smooth.

Sydnee: So, you know how-

Justin: And I'm the king of 'em. Luckily you're here casting with the king of [through laughter] smooth transitions. I've got you. Hop on my back. I'll carry this whole show.

Sydnee: I'm... notoriously bad at that. So, you know how there was a time where if you were sick you'd go to your doctor, and your doctor would tell you to just go to the beach?

Justin: Yeah. Like in that Coolio video. [laughs] Like in the Coolio video for Fantastic Voyage.

Sydnee: Don't you miss those times?

Justin: I do. That used to be—that was—I mean, 'cause honestly, not bad advice, right?

Sydnee: There's been a resurgence of this conversation, specifically on TikTok, probably on other socials as well, about the concept—and it's mainly aimed at the idea of hysteria. And we've talked about hysteria extensively on

the show. Hysteria was sort of a made-up, catch-all diagnosis that was largely applied to women when they were behaving in ways that society wasn't thrilled about, or if they actually did have some sort of medical ailment that we just didn't understand well, or weren't paying enough attention to. These are problems that persist in medicine today.

But at the time, you could look at a woman and just say, "You're hysterical. That's the problem."

And there's this idea right now on social media that doctors would then say, "Go to the beach."

And they're saying—kind of the idea is, wouldn't it be great if we could all just be labeled hysterical and be sent to the beach right now?

Justin: Right.

Sydnee: And I get that, except, a couple problems. [laughs quietly] One, let's not push for that. They're pushing back against rights for everybody with a uterus enough as it is.

But two, this actually, um—we didn't use the beach cure, the sea cure for hysteria.

Justin: Oh yeah?

Sydnee: Just on a side note. No. No, we didn't. Lots of other things. Not that.

But we did have a time where you may have been prescribed the sea cure, the—taking the sea waters, or thalassotherapy, if you prefer.

Justin: Are we talking about ingesting the sea?

Sydnee: Well, Justin, that's part of it.

Justin: Oh!

Sydnee: Let's talk about when this started. This is way back. Richard Russell is who started this idea. Richard Russell, MD.

I feel like Richard Russell, by the way, is a really modern name. I know it's not. I know those are just names people have had for a long time. But the fact that, like, Dr. Richard Russell, MD, was practicing in Sussex back in the early 1700s and mid—you know what I mean?

Justin: I know what you're saying. Well, it's one of those that just never stopped being time—first of all, the alliteration I think feels very modern.

Sydnee: It does.

Justin: But also like—Richard Russell. Dr. Richard Russ—it does—

Sydnee: It does. He was born in 1687, but it feels like...

Justin: It's held up.

Sydnee: Right.

Justin: The name has held up.

Sydnee: Yes.

Justin: Gotta give it credit.

Sydnee: So he was the son of a surgeon, the son of a son of a...

Justin: [laughs quietly] Son of a son of a...

Sydnee: Son of a son of a surgeon. And he was bound for medicine himself, as many were back then. You kind of took on the family business.

Justin: He had all the sharp stuff already.

Sydnee: Just go into it. And I'll be honest. Trying to research—first of all, it's a really common name. There's a lot of Richard Russells, and a lot of Richard Russells who have been doctors, all throughout time.

Justin: Unbelievable.

Sydnee: So, even to the extent that I found multiple accounts where they were like, "Now, don't confuse this with this other Richard Russell surgeon who was born in a similar time and did other things. They're different ones."

I don't know a ton about what he did in his original medical practice. Like, he started his surgery—which at the time, a surgery would've been, like, the place where you go see the doctor. Like, "I opened a surgery."

Justin: Oh, you meant like a—yeah.

Sydnee: Like, this is my clinic.

Justin: Okay.

Sydnee: You could've called your surgery. And I believe that name does persist, even to this day. But we here in the US don't normally say, like, "Come visit my surgery. I opened my surgery."

Surgery is the thing you do to someone when you, you know, like, cut on 'em and stuff. That thing, right?

Justin: Yeah.

Sydnee: We don't say "a surgery."

Justin: You know, the only thing I would say is like, I think if you said "surgery" I would think, like, the area of a hospital where that happens.

Sydnee: Hm.

Justin: You know what I—I would think surg—like, "He'll be in surgery." You know what I mean? Like, using it in that sense.

Sydnee: Okay, "He'll be in surgery." Although I think of being in surgery as in the act of having surgery, but I understand what you're saying.

Justin: Like if I heard "He'll be in surgery," I would think of that as the surgery area where that kind of thing happens, I guess. Which is maybe more of an aspect of, like, how the hospital is structured rather than having an independent, like, place where someone's hung their shingle.

Sydnee: We here like to call it the surgical suite. He is in the surgical suite, or the operating room.

Justin: I like it when you guys call it the theater.

Sydnee: Oh! Yeah.

Justin: The operating theater.

Sydnee: Operating theater. You'll hear that dropped now and then from the surgeons trying to get fancy. I see you, surgeons. You're just trying to act fancy.

Justin: I think you can't call it an operating theater unless they have a circle above you from which Kramer could drop a Junior Mint into the open wound. Other than that, it's not a theater.

Sydnee: They have that on Grey's Anatomy, where they're looking through a window overlooking the OR. I don't—so I assume those must exist, so you can watch surgeries, like, for learning purposes still.

Justin: I mean, maybe. But it's also just like, that's a good thing to have on your TV show. You know what I mean?

Sydnee: Well...

Justin: It's kind of like the House hospital where all the doors are glass, so you can do every possible angle for everybody?

Sydnee: That's true. That's true. There's absolutely no HIPAA in that hospital. No, we don't have those in our surgical suite.

Anyway, I don't really know what he did in his medical practice in Lewes prior to Brighton, his visits to Brighton. That was really where his career took off, and everything we know about him. So I'm guessing he was just sort of like your average surgeon of the time. And history does not remember those years, because history didn't need to know about those years.

So anyway, he started visiting Brighton, and he started to become convinced that there was something medicinal about the sea. That these visits to the shore were not just "Oh, I feel so good because it's relaxing, and I'm not working, and it's pleasant, you know, aesthetically. It's pleasant."

It was more than that. And he began to visit frequently to study, to do experiments on the sea water, to understand the properties of the ocean, and what could it do to the human body, whether it's by bathing in it or ingesting it.

And eventually he would move his surgery there, so that he could fully engage himself with this, and kind of make that his niche. That became his niche in medicine.

So in 1750 he published a book called a Dissertation on the Use of Seawater in the Diseases of the Glands, particularly the scurvy, jaundice, king's evil, leprosy, and the glandular consumption.

It's a very long dissertation in which he enumerates all of the experiments he's done on seawater, all of the properties of seawater, all of the different diseases that can be cured by seawater, and how, and why. And then a number of case reports... his personal cases that demonstrate how useful seawater is medicinally.

So, this is gonna take off. But before we get into that, let's talk about what he found.

So, he breaks down the properties of seawater. I find this kind of fascinating. In the very beginning he's like, "Let's talk about the ocean."

And he's like, "It's all over the Earth, right? There's so much of it. That has to—" $\!\!\!\!\!\!\!$

Justin: "We don't actually know how much 'cause we're, like—we can't figure that out right now. But there's, like, a lot. We can all tell."

Sydnee: There's a lot. There's a lot of ocean. And all throughout it—I love medical writings from this time period, because all throughout it are these sort of assertions that, like, "Certainly our creator intended for this to be useful, because there's so much of it."

And that's just, like, in a medical dissertation. You wouldn't really find that today.

Justin: No.

Sydnee: I think that's a—I don't know. I just like that kind of writing. I don't know that it's useful scientifically. One may argue that it's absolutely not. But I think it makes for interesting reading.

So, he breaks down the properties of seawater, and there are four. Saltiness, bitterness, nitrocity, and oiliness.

Justin: Hmm. That's like at the Guinness Museum. Those are four components. [laughs quietly]

Sydnee: The—that's what I kept thinking. Like, this is how you make Guinness. Or when you read about, like, the balance of flavors in different kinds of cuisine.

Justin: Or in the humors, right? Where, like-

Sydnee: Or in the humors.

Justin: Yeah.

Sydnee: So the saltiness, what is the benefit of the salti—well, first of all he's like, "The saltiness you know about, right? Like, you can tell. You all know. I don't need to tell you that seawater's salty."

Like, that's in there. And he's like, "So obviously salt preserves stuff. So this is why it would be good in the human body, because you can salt meat. It preserves the meat. So putting salt in your body..."

Justin: Okay.

Sydnee: [laughs]

Justin: Yeah. Like, no, that doesn't make sense, because they—that is assuming that you are—do not understand the difference between something becoming preserved so it's safe to consume, and functioning well, right? Like, you don't keep the—you don't salt meat to keep it flippy and wet. You know what I mean? [unintelligible] [laughs] Ugh!

Sydnee: But that's his basis, why saltiness is helpful.

Justin: Okay.

Sydnee: The bitterness in seawater... which I don't think of s—now, okay. I don't drink seawater, but like, I've been in the ocean and I have gotten seawater in my mouth. I don't think of it as bitter.

Justin: You're bragging every episode, Syd. You gotta cut back.

Sydnee: Do you think seawater is bitter? Inherently bitter?

Justin: I mean, I feel like it's one of those things where, like, if you were to tamp down that salty note, I might be able to tell.

Sydnee: Maybe it is bitter.

Justin: But I feel like the salt is so powerful.

Sydnee: Maybe this is just in Brighton?

Justin: Maybe it's just there.

Sydnee: If you live in Brighton, could you tell me, is the seawater bitter there?

Justin: I mean, it's probably—I assume the mineral makeup actually does have a pretty big part of the flavor of water.

Sydnee: It does.

Justin: Water? [enunciating carefully] Water.

Sydnee: [laughs] It does. Depending on where you are, it is gonna taste different, right? We talked about this with, like, the Celtic salt. There's different mineral makeup in different parts of the ocean. So they—the bitterness he thinks comes from, like, sulfur, and coal, and bitumen. Like, those sorts of things getting into the water, you know? Which, that makes sense. And that this has a medical property in that it dissolves tumors.

Justin: Whoa!

Sydnee: Probably.

Justin: That's an escalation.

Sydnee: That's probably what we think is happening.

Justin: Okay.

Sydnee: This bitterness. The nitrocity is also related to the coal and sulfur and stuff, and it's also probably why seawater doesn't put out fires well. I don't know what that has to do with medicine, but he does kind of digress, this little, like, side note. Like, have you ever noticed that if you toss a bucket of seawater on a fire, it really won't go out? But if you toss a bucket of regular fresh water on a fire, it does. And I think seawater will put out a fire. So...

Justin: I don't actually—

Sydnee: This felt weird to me.

Justin: I've never tried that! But I was not alive in these times. I don't know how things were working back then. But I feel like it would still work.

Sydnee: And I don't think I can. 'Cause the next time we're at the beach, if I set a fire—you're not supposed to set fires on the beach. If I set a fire on the beach in order to attempt to put it out with seawater, I'm gonna get... asked to leave.

And then the oiliness. He does not say why the oiliness is helpful. He just talks about how, "Isn't the sea oily? Don't you think it's oily?" And then he references, like, ancient writings about how oily the sea is.

Justin: Hmm.

Sydnee: So I don't know. Again, oily sea. So he goes through a lot of diseases and the causes, and why either drinking or bathing in the seawater will help. And he's very clear on that. Drinking seawater is very much part of Richard Russell, MD's cure. He definitely is suggested that whether it is in a child, and then he'll recommend, like, a teaspoon a day, so a very—I would say a very innocent amount of seawater. I don't know the advantage, but if you give a ten-year-old a teaspoon of seawater, I don't... I mean, that's probably not gonna do anything, right? You're gonna swallow that much if you're playing out in the ocean, so whatever.

But he does go on to suggest as much as a pint a day of seawater, so.

Justin: That's a lot. Feels like a lot.

Sydnee: Feels like a lot of seawater. And then also bathing in seawater, specifically cold waters. That is pushed a lot. It's not just about getting in the ocean. It's about getting in a cold ocean.

Again, I don't know if this is a function of where he lives. Because I imagine the beaches he's visiting are often not super-hot. Like, they're not super warm water. You know? We here in West Virginia... [laughs quietly] we like to go down to the Carolina coasts.

Justin: Yeah. That's where it's—yeah. They got all the best crab legs down there. [wheeze-laughs] [crosstalk]

Sydnee: That water gets warmer. And then you go down to Florida, and the water's even warmer. And of course if you live in a tropical region, the water's pretty warm. I'm guessing the beaches at Brighton... are cold. So I don't know if the cold water was intentional, or just like, it's what we got.

Justin: I looked up, 'cause I was curious about it—apparently the oiliness, like the oily nature, might have been the high concentration of minerals in the water. Like, if you think about minerals being sold as oils that are, like, highly refined, that it's the sense of, like, those minerals in the water that give it, like, an oily or greasy feeling.

Sydnee: I gotcha.

Justin: Because of the high concentration of salts in there.

Sydnee: He doesn't specifically say, "So, see? That's why it's healthy." But he does assert that oiliness equates to healthy water.

Justin: That's why he would have that, maybe, that it feels oily, maybe.

Sydnee: That's interesting. If you find out that seawater doesn't put out fire, let me know.

Justin: Okay. Will do.

Sydnee: So, anyway, he goes on with all these diseases, and he starts out strong with consumption—tuberculosis. And I think the idea that seawater could cure tuberculosis—I mean, I don't think remember us even discussing that on our TB episode. But, here is his case for why.

So, first of all, why in—and this would be 1750 we're talking. Why does TB happen?

Justin: Why does TB happen?

Sydnee: Yeah. why—why—this is the crux of his argument. We have to understand—

Justin: Oh, why does he think TB happens?

Sydnee: Why does he think tuberculosis happens?

Justin: Not close enough to the sea?

Sydnee: It's your parents' fault.

Justin: Oh, okay. [laughs] I took a shot.

Sydnee: Yeah. So he very quickly asserts that we all kind of know, we all agree, that getting tuberculosis is probably the fault of either your parents, or if you were taken care of by a nurse—he talks a lot about "the nurse who cared for you."

The baby is kept too warm in the cradle. He thinks that's a problem in modern—as in, mid-1700s—society, is that babies are swaddled and kept warm and put in cradles with blankets, and that being kept warm too much is the root of a lot of diseases processes.

And then he said what compounds that is that we breastfeed them too long. And all of that acidic milk curdles in their very warm tummies.

Justin: Yeah!

Sydnee: And then they have a lot of green bowel movements.

Justin: This guy was on some stuff, huh? He was kind of on some next— he's doing a lot of, like—a lot of outside the box thinking with this dude!

Sydnee: Because of all those green bowel movements, your nurse is gonna give you opiates, which would've happened. white—um, syrup of white poppies I think is what he says in his treatise. But they're gonna give you some opium. And then that's not good, 'cause then you're gonna sleep too much. Which was a problem! This was a problem.

And this is basically causing a permanent damage to your humors. And so over time they're gonna clog your glands, and this was thought to be what develops into tuberculosis. Now, in some people the reason they're able to avoid it—'cause he basically said, like, everybody is screwing this up in kids. Everybody's getting this wrong.

Justin: This one trick... [laughs quietly]

Sydnee: [laughs quietly] For people who menstruate, they're gonna get rid of some of this damage through regular menstruation, okay?

Justin: Mm-hmm.

Sydnee: Balancing the humors, right? That was one way that they thought people who menstruate balance their humors is they got rid of blood, one of the humors. And then he references sort of sideways, like, "And men can get rid of some of their humors through... other means."

Justin: Wink.

Sydnee: "We'll let you figure that out."

Justin: [quietly] Fellas...

Sydnee: "Men." But not everybody is able to balance out their humors and undo the terrible damage that their parents and nursemaids inflicted upon them. And so they get tuberculosis.

Justin: Yep. And the only cure?

Sydnee: The sea. Justin, I'm gonna tell you how to cure tuberculosis with seawater, but first we gotta go to the billing department.

Justin: Let's go!

[theme music plays]

[ad break]

Justin: First things first, Sydnee. I'd like to tell you that seawater can be used to fight fires, but we very rarely do it, due to equipment damage, due to corrosion, and environmental damage, due to dumping a bunch of salt [wheezes] on the place. Like, 'cause there's still gonna be a bunch of salt after the water evaporates, and it sucks for all the stuff around.

Sydnee: That makes total sense, why we would not choose seawater. But I think it's good to know.

Justin: Still would, in a pinch.

Sydnee: In a pinch.

Justin: In a pinch! If you have an open flame and you're standing near the ocean, do not try to, like, sprint and find some Dasani.

Sydnee: [simultaneously] Fresh water.

Justin: Like, don't go runnin'. Just go ahead and try that old ocean water.

Sydnee: Isn't it wild that you can just—like, I mean, I know that water and fire still worked the same back in the 1600s as it works now. And so when you read an old-timey assertion like "seawater doesn't put out fire," it's like, what? What are we ta—it makes me think we're talking about two different things here.

Justin: Yeah, maybe.

Sydnee: Anyway, so the way that you—the way that Dr. Richard Russell, MD felt you could cure consumption is through drinking a lot of seawater.

Justin: Drinking a lot of seawater.

Sydnee: Yeah, drinking a lot. And I mean, when we talked about things like the king's evil, which was scrofula, which was another infection, a tuberculosis-like infection of the glands, we're just talking about tuberculosis in different... whether it's in the lungs or in the glands. There are various TBs.

And then other things that he treated. A lot of it was drinking massive amounts, for these really serious conditions, of seawater.

Justin: Ooh.

Sydnee: So, like, 25, 30 gallons of seawater before you're gonna flush out your glands. And he thought that kind of like there's a bunch of salt in there, it's going to almost, like, abrade the glands? Like, break stuff up in there, you know? Because it's salty.

Justin: Yeah.

Sydnee: And then all of that bad stuff will flush out of your system. And then you won't have tuberculosis of scrofula or whatever anymore. Right?

Justin: Yeah.

Sydnee: That was the thought process. He also thought it would do the same, like, if these are tumors. If you got lumps everywhere and we think they're tumors. And at this point we were using the term "tumor" to mean, like, a swelling, an enlargement, not necessarily whether it was cancerous or not. If you drink enough seawater it'll just sort of break this thing up, dissolve it, and flush it out of your system.

Justin: Yeah. God, it sounds very—it sounds dangerous. It sounds, like, unpleasant to me.

Sydnee: Well, and you can see why—as we're moving forward, first you drink the seawater, and once you start to heal, the swimming in the ocean.

Go to the beach. Stay at the beach for a while. Don't engage in your other activities. Just swim in the water and relax.

You can see why only half of this [laughs quietly] persisted with us through time.

Justin: Yeah. Get your base tan. Get a daiquiri.

Sydnee: So he goes through a lot of disease processes. I mean, it's a very—it's a complete... he's got everything in there, you know?

Justin: Had it all figured out. [laughs quietly]

Sydnee: He's got it all figured out. Dropsy, scurvy, tumors, *leprosy*. And you can either drink the seawater straight up, or you can, like, if you're already taking other tinctures and compounds, medicines, if you've already seen doctors who have told you, like, "Take this herb," or whatever, you can put that in the seawater and ingest it that way. So, like, as a way of—instead of using regular water as a solvent or alcohol as a solvent, which would've been common at the time. "I'm gonna give you a powder. Dissolve it in this thing and drink it." Use seawater as your solvent instead of these other things.

Justin: Yeah.

Sydnee: And then cap it all off with a plunge in the cold water.

Justin: Ugh.

Sydnee: And then you're gonna balance your humors. He does make some exceptions. I do think this gives it a little bit of like, scientific validity. I mean, he's not right. He's not right. But as a scientist, when I see someone saying, "Now, listen. It doesn't fix everything. Here are some things you absolutely shouldn't use seawater for."

It actually makes me a little more likely to read more! Like, "Oh, okay. I mean, he's not saying it's a cure-all."

Justin: Yeah. That's true.

Sydnee: He says that if your lungs are full of pus, and you're coughing up pus, you shouldn't drink seawater. You are not gonna be able to handle it. It's too—basically, this medicine is too strong for you if you are in this specific condition. He calls it phlegmon, which is a collection of pus, but I don't know... we're not really talking about why you're coughing up pus. The why is not important. The important thing is, this is where you have arrived. Please don't drink seawater. Instead, we're going to bleed you.

Justin: Yeah, right. I mean, you gotta be rational.

Sydnee: Yeah. And those were usually, like—those could be used in conjunction with the sea cure. You would also, you know, do some bloodletting, and give them purgatives, meaning, like, something to make you vomit or something to make you have diarrhea, or perhaps both. You know, why not have it coming out both ends?

Justin: Why not?

Sydnee: And then abstaining from alcohol. That was, like—there's a lot. As you read into—as the sea cure became popularized, first by Richard Russell, MD and then by other physicians, there were all kinds of other rules that they would put with it. Like, before you bathe, don't eat any—like, you must fast before you bathe, or you can only eat vegetables, or you can't eat—or you can't drink any sort of strong liquors. Although, there were others who would say "Absolutely you should drink wine as part of the sea cure. Wine only enhances [laughs quietly] your experience of the ocean."

Justin: [laughs]

Sydnee: Which many of you probably agree with. But anyway—so he put this out there. And it took off so quickly. People were very excited about the sea cure.

Justin: Well, you just can't get cheaper or more available than the sea. I mean, in terms of medicine, just go get some of the sea.

Sydnee: Well, and some of it made total sense. Like, he was like, "Sailors who get scurvy, we can stop that. Just drink a pint of seawater every day." And that feels so easy! They're right there. All this time we've been telling them not to drink the sea, and we should've been telling them to drink the sea.

Justin: The answer was right there this whole time!

Sydnee: You can also wash your eyes with it. You can also—by the way, there was one mention I found where you can mix salt from the sea—so, like, take seawater, evaporate it till you just have the salt, mix it with honey, and you can feed it to your cow to clear an intestinal blockage in your cow. So it's good for the whole family.

Justin: Yeah. It's good for everybody.

Sydnee: And this was interesting, because this was a time where, like, the idea of taking the waters—you know that con—we've talked about that show before. The concept of taking the waters meant, like, a spa, a natural bath. Like, you would go to Bath, perhaps. The natural springs from the earth, and bathe or drink or whatever those waters for a variety of medicinal purposes.

This was new, because the sea was not part of that. These were special waters. The ocean's just, like, everywhere.

Justin: It's like, anybody can get to that. It's much more accessible.

Sydnee: Well, it did! It made it a lot more accessible.

Justin: It's like the open source baths.

Sydnee: Well, and it led to physicians even starting to come up with, like, ways to make your own seawater at home. Because it's like, "Well, now, this does make the water cure available to a lot more people, 'cause anybody who lives near an ocean can have it. But also, what if you are trapped inland, and you are nowhere near a natural spring, and you're not near the ocean? Here are some ways you can make your own beach."

Justin: That's when you gotta—see, that's anti-capitalist, I think. I think that's when you gotta see a small business opportunity and say, "I will be the one bringing in truckloads of seawater for you. Come to my food stand."

Sydnee: And I'm certain there were. I have no doubt that there were whole—I mean, 'cause this was such a big—it took off so quickly. So many—especially, like, people with means, people who could easily travel, right?

Justin: [crosstalk] people with beans?

Sydnee: Means.

Justin: Thank you.

Sydnee: Because for a lot of people the idea that like, "I'm just gonna take off work for two weeks and head to the beach," which is kind of what they would—like, your doctor would write you a prescription for "Go to the ocean." Which, it's also hard—you can also see why people would believe it, because what benefit does the doctor get from telling you to go to the ocean?

Justin: Yeah. I mean, he's putting himself out of business.

Sydnee: Right.

Justin: Losing a—a patient there, who's gonna get cured with the ocean waters.

Sydnee: I think that if you tell people there's a natural cure out there that was always intended, people are more likely to believe it, because that feels like something. I think if the doctor doesn't really get any sort of financial benefit—it doesn't mean, like—if I'm saying "I need you to come back and see me every day for a week," even if that's legitimate, I feel like I get an eyebrow raise.

Justin: Yeah.

Sydnee: Like, "What do you want, doc? You just want to bill me?"

Well, I mean, obviously these doctors weren't trying to make bank. Except the few who were.

Justin: Yeah.

Sydnee: Because there were some who said, "Now, listen. The sea is really powerful. And if you..."

Justin: Take too much of it.

Sydnee: "If you do it wrong," right. "If you take too much of it, if you drink too much or if you just swim in it too much, you could actually go the other way and make yourself sicker. So there are tonics that you have to take before you bathe in the ocean to make sure you—you know, to—like, for your...countenance."

Justin: Gotta profit off of it somehow.

Sydnee: Yeah, "To make sure that you can handle it. And so, luckily, I sell the tonics that you need. [laughs quietly] So I am prescribing the sea cure, but before you go do the sea cure, here, please buy this tonic. Um, because you could die! You could die if you don't do this."

Justin: Hm.

Sydnee: Now, let me just say, Dr. Russell, Dr. Richard Russell did just fine for himself. He—[laughs quietly] he became so popular that he—like I said, he moved his practice to Brighton. He bought some land. He built what is now the Royal Albion Hotel.

Justin: Hmm!

Sydnee: And he had this huge—basically it was his house, but also he would have patients come stay there at his giant house and take the waters, take the ocean. You can have the sea cure right there. With the doctor on hand!

Justin: Wow!

Sydnee: To—to tend to you.

Justin: In a big, fancy house.

Sydnee: As needed, right? And it really led to what they began to call the seaside mania that developed, where everybody was flocking to the oceans to engage in the sea cure, to make themselves healthy if they were sick, or to maintain wellness. I mean, this is really—we're starting, as we—into the late 1700's, but really when we get into the 1800's, to get into this sort of—these sort of ideas of, like, wellness and, like, the ways to maintain health as opposed to "I'm sick. I need a cure." You know what I mean?

Justin: Mm-hmm.

Sydnee: Which is very—that sounds very commonplace today. There's tons of wellness stuff out there now. You're not sick, you just wanna be...

Justin: Right, right.

Sydnee: Well-er.

Justin: Yeah, you're—yeah. You're looking for that last extra 5%.

Sydnee: Yes. So he did very well for himself, and you can still—you can actually go visit—like, there's a plaque and it's like, "Hey. This is where the guy who created—Dr. Richard Russell, who created the idea of the sea cure, this is where he lived, and all his patients stayed there."

Justin: Huh.

Sydnee: But the industry did not die when he did. At a lot of these seaside towns—and by the way, they began to publish lists of like, "Here are all the different places where you can go get the sea cure." It was just all the different beaches. And the different, like, diseases that might be better.

Justin: [simultaneously] Ratings—oh, okay. [laughs]

Sydnee: Like, if you have this, had to Brighton. If you have this-

Justin: Mapped to the, uh, healing oceans.

Sydnee: Yeah. Like, the different beaches that would have different healing properties.

Justin: I knew we'd find some profit in here somewhere. Good job, everybody.

Sydnee: [laughs] I love the idea—like, if I think about beaches we've been to, like, what do you think is it? Like, between Myrtle Beach and Hilton Head, which one—[laughs quietly] what diseases—you know what? I could say—I could make a lot of jokes here that only people who go to these beaches would get.

Justin: Yeah.

Sydnee: Anyway, so...

Justin: They would be good, though.

Sydnee: [laughs] These seaside towns began to really grow as a result of this. Like, people—I mean, obviously everybody has liked the ocean for a long time. But with this whole new industry, like, "Oh! Not only is it fun, but it's also good for you." A lot of, like, spas and wellness centers and obviously doctors' offices and stuff popped up. And then, how can we facilitate these—especially fine ladies—bathing in a way that is also, um, demure, and modest, and appropriate for the times. And certainly the bathing costumes they would wear would have been such. But maybe they need a measure more.

So they began to create bathing machines. Which—you can look up pictures of these bathing machines...

Justin: [laughs quietly]

Sydnee: ... from the late 1700s. And they're, like, horse-drawn carts with, like, a little kind of, like... like those little changing huts that they had on beaches. You know what I mean talking about? Sort of attached to the back. And you would kind of pull it right up to the ocean.

Justin: I gotcha.

Sydnee: So you could, like, climb out of the back of it right into the ocean. Like, you're completely covered in the back of this thing, and then you climb out of the back of it and you're in the ocean. And you could even—there was one inventor who was a Quaker who invented, like, a curtain that would go around the outside, so that you could be completely encased in sort of like a shower curtain situation when you were in the ocean.

Justin: [laughs]

Sydnee: So that no one could, like, peep on you. And, like, you weren't naked. I'm not—like, this was not, like, a nude situation. You were fully—

Justin: Not a nude situation.

Sydnee: —maybe fully clothed, or in a bathing costume. You might have been fully clothed, depending on... well, who was recommending it, and where you were, and what your situation was. Um, but this way you could have some privacy. And you could also hire a dipper.

Justin: A what?

Sydnee: A dipper was a person who would get in with you and dunk you! [laughs quietly]

Justin: Oh, what? Why?! Why do you need that?

Sydnee: To make sure that you go all the way in! Maybe you're too buoyant! Maybe you keep floatin' back up. To make sure you dunk—to dunk you back down!

Justin: I'm a buoyant guy as guys go, and I've never had any problems getting my whole self under the water.

Sydnee: So you could hire a dipper. And there were fine ladies who would go to these experiences at the seaside where you would be taken out in a bathing machine, you would be tossed in—not tossed, you know. Um, gently... dropped into the ocean. [laughs quietly]

Justin: Gotcha, okay.

Sydnee: Into the very cold ocean, maybe fully clothed, depending on the situation. Dunked repeatedly. 'Cause part of it was the shock to the system. Like, "It's cold, I'm in the water, ahh," was part of it.

Justin: Yeah.

Sydnee: Dunked repeatedly, and then hoisted back out, wrapped in blankets. You get a foot massage, you get a cup of tea. And your humors are balanced, and we've fixed your scurvy, or your tuberculosis, or your dropsy, or whatever we have diagnosed you with.

That does not sound quite as pleasant. [laughs quietly]

Justin: No.

Sydnee: And you can imagine why over time some of these things, the bathing machines and the dippers and the cold plunge—although certainly cold plunge still exists today.

Justin: Yeah, that's still kickin' around.

Sydnee: But they idea that that was all necessary for everybody started to fade. Certainly drinking seawater—that fell out of fashion fairly quickly. People were drinking seawater for a short period of time. People were going to the beach for their health for... even today, I think we could say that idea persists today.

Justin: Yeah. Oh, yeah, yeah, yeah.

Sydnee: The idea that seawater is healthy for you—not to drink, but to be in.

Justin: Or sea air.

Sydnee: Sea air is healthy for you to be in. The idea that the beach, beyond the obvious "I like being at the beach" provides a special kind of mental healthy addition—you know what I mean? I think we still have that connotation with the sea, and this is where it started.

Um, where I think TikTok got it wrong is for hysteria, the rest cure would often be recommended. And this is, like, if you're thinking like Yellow Wallpaper situation. The rest cure was like, go lay in a room and don't get up for... weeks to months. That's way less pleasant, right?

Justin: Yeah. Yeah. There's no beach.

Sydnee: No. There's no beach. There's no beach. And eventually the sea cure just turned into, like, I think regular vacations. I will say there have been studies done to see, like, is the—is the beach healthy? People do look into that. And there definitely are some indications to get in saltwater, like seawater specifically, if you have, like, psoriasis or other skin conditions. Sometimes—and I'm not saying this is a cure-all, certainly. But sometimes it has benefited certain kinds of dermatological skin conditions. Right?

Justin: Sure.

Sydnee: So there are certain cases where your doctor probably would never prescribe "Go get in the ocean," but would say, "Hey. The ocean probably helped out your skin a little bit here." That sort of thing.

Um, and there was, I will say, a 2019 study that showed that people who live on coasts experience less stress than people who don't. I think there's probably a lot of confounders.

Justin: Confounders, there.

Sydnee: [laughs]

Justin: I was gonna say. Maybe people who can afford to live on coasts can afford to have proper medical care.

Sydnee: I'd say there's a lot of confounders. Um, I think that the beach is— I enjoy the beach. I think if it brings you joy, I think that's great. Please don't drink seawater. And please don't use seawater to cure your—I mentioned the skin conditions just for completeness. Please don't use the sea to cure your skin conditions. If you have some sort of issue with your skin, please visit a healthcare provider who can inform you about what it is and properly treat it for your safety and health.

Justin: Thank you so much, Sydnee. That's gonna do it for us this week on Sawbones. I wanted to mention, uh, we are going to be at the Harmony House Renaissance Fair on May 3rd.

Sydnee: Yes!

Justin: It's gonna be from ten to seven. We're gonna be doing a live Sawbones there. We're not sure of the exact time of that yet, so that's TBD. But make your plans to come on down. We're gonna—Travis and Griffin and Clint McEl—Mc-Elroy? McElroy? Am I saying that right? They're gonna be coming down, too. We're gonna do photos and signings. It's gonna be a fun time, so mark your calendars. Huntington, West Virginia, May 3rd.

You can get tickets right now, by the way. Bit.ly/harmonyhouserenfaire. [wheezes] That is bit.ly/harmonyhouserenfaire, and that's faire with an E.

Sydnee: I was gonna say—

Justin: It's fancy.

Sydnee: Okay. You did the appropriate faire. Yeah, and it's for a great cause. The proceeds go to Harmony House, which is the day shelter for people experiencing homelessness in Huntington, where I work. We help connect people with necessary things for day-to-day living. Food, shelter,

clothes, um, hygiene supplies and whatnot, and we also help people get housed!

Justin: Yeah.

Sydnee: And I provide medical care there.

Justin: Come on out and see us. That's gonna do it for this week. Oh! 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. That's gonna do it for us. 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]

[chord]

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