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Summary: This paper explores the African American response to an interracial heart transplant in 1968 through a close reading of the black newspaper press. This methodological approach provides a window into African American perceptions of physiological difference between the races, or lack thereof, as it pertained to both personal identity and race politics. Coverage of the first interracial heart transplant, which occurred in apartheid South Africa, was multifaceted. Newspapers lauded the transplant as evidence of physiological race equality while simultaneously mobilising the language of differing ‘black’ and ‘white’ hearts to critique racist politics through the metaphor of a ‘change of heart’. While interracial transplant created the opportunity for such political commentary, its material reality—potential exploitation of black bodies for white gain—was increasingly a cause for concern, especially after a contentious heart transplant from a black to a white man in May 1968 in the American South.

Keywords: African American; heart transplantation; periodicals; biological determinism; language

‘The transplant was the first between different races, the second performed by Barnard, and the third in history.’¹ On New Year’s Day of 1968, 24-year-old Clive Haupt suffered a catastrophic stroke while relaxing with his wife and friends on the ‘colored’ section of the segregated beach in Cape Town, South Africa. Haupt was rushed to the nearby Groote Schuur hospital and placed on artificial ventilation, but his prognosis remained grim. With his mother’s consent, doctors moved Haupt to a specialized ward on the white side of the segregated hospital and prepared his body for cardiac donation. Early in the morning of 2 January, Haupt’s heart stopped. Minutes later, it began to beat again, this time in the chest of Philip Blaiberg—58 years old, affluent, white.

For many American, and especially African American reporters covering the Haupt transplant, the operation represented a moment when medical technology became symbolically capable of intervening in discriminatory policies beyond the medical sphere. ‘In an operating theater in Cape Town, doctors, patient, and donor have shown once again that we are all one people’, the African American periodical the Los Angeles Sentinel


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reported on 4 January 1968. ‘The specious rationalizations which permit color discrimina-
tion are a political fact, but a biological fraud.’

Others, however, were sceptical. As early as 6 January 1968, the Baltimore Afro-
American warned that doctors might start taking black organs prematurely and using
them to preserve white lives. These concerns seemed all but confirmed when the
Medical College of Virginia (MCV) attempted the first American interracial heart trans-
plant under suspicious circumstances several months later. In May, a black factory worker
named Bruce Tucker fell off of a concrete wall at the egg packing plant where he worked
and sustained a serious head injury. Less than 24 hours after his admission to the MCV
emergency department, Tucker’s heart had been removed and placed in the body of a
white man, Joseph Klett. Bruce Tucker’s family, which had not been informed of his hos-
pitalisation, let alone told about the plans to use him as a donor, opened a wrongful
death lawsuit against the hospital which dragged on for years before it was finally settled
by an all-white jury in favour of MCV. The interchangeability of body parts, which had
previously been seen as evidence for racial equality, increasingly took on sinister connota-
tions. ‘It was kind of a sick joke in Richmond that medical researchers were preparing
black people to be spare parts for whites’, the Afro-American reported.

The Haupt and Tucker operations were by no means the first interracial organ trans-
plants to occur, however, it was only with the transfer of a heart that the implications of
such transplants for racial politics arose so sharply in the public consciousness and media
coverage. Since the advent of corneal transplants in the early 1950s, interracial transplant
had, in fact, become relatively common. Even larger organs, such as kidneys, were rou-
tinely transferred from members of one racial group to another. Barnard himself had
performed a kidney transplant in December of 1967 from a white woman to a young
black boy, provoking little public comment (perhaps, in part, because the procedure was
overshadowed by Barnard’s recent heart transplant success). There was something
unique about the heart that brought questions of race, identity and physiology to the
fore, and engaged the public imagination. There was also something special about the
time and place. The American black experience of 1968 produced and was produced by
a climate of heightened articulation of race politics, in which places like Apartheid South
Africa and the American South came under scrutiny as epicentres of racial injustice. In
this environment, these two transplants, and the short window between them from
January to June of 1968, became an extraordinary moment for the intersection of race
politics, racial discourse, techno-medical innovation, and regulatory policy in America.

The response to these transplants provides an important snapshot of the relationship
between racial identity, the physiological body, and black participation in the body politic
in the 1968 United States. Scholarship at this intersection from anthropology, history and

4 For more on the history of interracial transplant prior to the 1968 heart transplants, see Susan Lederer, Flesh and Blood: Organ Transplantation and Blood
Transfusion in 20th Century America (Oxford: Oxford University Press, 2008). A review of prominent black periodicals from 1950 to 1968 (conducted by the au-
thor) reveals that organ transplantation was rarely covered in the black press prior to 1968, and when it was (usually as kidney or corneal transplants) it was
discussed with little mention of race, even when the donors and recipients were of different racial backgrounds.
5 Lederer, Flesh and Blood, 174.
bioethics often portrays biological determinism as solely a discourse of subjugation. That is, physiologically based concepts of racial difference (in this case, a ‘black’ heart that is fundamentally different from a ‘white’ heart) as always and only mobilised by institutions and individuals in power in order to marginalise minority communities and justify treating them differently—socially, politically and medically. However, such ideas of physiological determinism often met with a much more complex response in African American communities.\(^7\)

In this paper, I focus on the African American response to these two transplants via the black newspaper press.\(^8\) The most prominent black newspapers were published as dailies or weeklies, reporting on events as they occurred. This immediacy makes it possible to track the evolution of various black community responses to the transplants over time. The black press is also a fascinating liminal space because it served a dual public purpose, both representing the African American community to itself and to the outside world. Through the black press, I explore how transplant stories were written and distributed in the black public sphere.\(^9\)

This ‘circulatory history’ of heart transplant in the black press explores the interlocking politics and poetics by which heart transplant was narrated throughout 1968.\(^10\) In the first section I explore common tropes in organ donor and recipient narratives and show how these scripted forms often obscure deeper historical and political tensions. I move on to describe the circulation and readership of the black press in more detail. Building on these first two sections, I analyse how the black press portrayed the personal lives of Haupt and Blaiberg against the social and political backdrop of apartheid South Africa. Reporters highlighted the contrast between the wide gulf that separated Haupt and Blaiberg socially, and the interchangeability of their body parts. Some argued that the equality of body parts struck a blow against the apartheid system, while others worried that evidence of physiological equivalence could be used to exploit black bodies. Next, I transition to a closer analysis of the language reporters used to discuss the heart. I argue that in some ways the heart, despite medical insistence that it was nothing more than a


\(^8\)Several scholars have discussed heart transplant reporting in the mainstream press, most notably Ayesha Nathoo in *Hearts Exposed: Transplants and the Media in 1960s Britain* (Basingstoke: Palgrave Macmillan, 2009). Unfortunately the reaction of the mainstream press in America and South Africa to racial aspects of the transplant is largely beyond the scope of this paper.


\(^10\)One model for my work is Anne Pollock’s ‘Reading Friedan: Toward a Feminist Articulation of Heart Disease’, *Body & Society*, 2010, 16, 77–97. In this piece, Pollock investigates the language by which Friedan narrated her own experience of heart disease in the context of her other feminist writings.
machine, was portrayed as an exceptional, identity making organ. In this framework, the transfer of a heart could not be separated from the subjective experience of the heart’s previous owner. This opened up new avenues for both empathy and political discourse around race as a fixed category. Finally, I contrast the black press’ reporting on the Haupt–Blaiberg transplant with the coverage of the Tucker transplant. Although the Tucker transplant received comparatively little press coverage, the implications of the operation and ensuing law suit were far reaching and ultimately part of a turn against heart transplant in the United States. While the bulk of this article focuses on the Haupt–Blaiberg transplant, I include the Tucker transplant as the closing of a window, an appropriate bookend for the social, political and medical optimism that emerged in the black press in the wake of the first interracial transplant.

Organ Donor and Recipient Narratives and Identity

Questions of personal identity and race politics have, with several notable exceptions, fallen out of heart transplant historiography and present-day narratives of organ transplantation. Classic histories of early heart transplant, especially those written by or for medical professionals, often focus on the novel procedures and daring surgeons with little mention of the donors and patients involved.11 Recipient narratives also enjoy and have enjoyed wide circulation, from Blaiberg’s autobiography (published in 1968), to modern-day testimonials of organ recipients mobilised by advocacy organizations.12

Donor narratives, when they are publicised, often follow a particular pattern, focusing on the donation as the silver lining in the otherwise tragic and accidental death of the donor. However, as anthropologist Leslie Sharp argues, this comfortable script routinises the deaths of donors and ignores the material reality of their lives and circumstances. ‘Human organs are regularly subjected to elaborate metaphorical reworking that ultimately silences . . . unease,’ Sharp writes, ‘a process that quickly mystifies the economic realities of their origins.’13 My work builds on these and other anthropological observations on the language of organ transplantation.14 While Sharp and others examine the ‘metaphorical reworking’ perpetuated by the medical establishment and organ procurement agencies to make organ transplant more palatable, I am interested in the parallel, often opposing, process of metaphor-making and language play that took place in the

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11For example, Nadey Hakim and Vassilios Papalois, History of Organ and Cell Transplantation (London: Imperial College Press, 2003), Robert Richardson, Scalpel and the Heart (New York: Scribner, 1970) and Harris Shumacker, The Evolution of Cardiac Surgery (Bloomington: Indiana University Press, 1992) all include extensive discussion of Barnard and Blaiberg, but no mention of the racial aspects of early heart transplants.

12For instance, the Gift of Life Foundation, which is one of the largest such organisations (serving residents of Pennsylvania, Delaware and New Jersey) hosts a ‘Second Chance Blog’ where recipient families write about their experiences. Site accessed at <http://www.donors1.org/second-chance-blog/>, accessed 6 January 2015.


black popular press to make such transplants both comprehensible to a non-medical audience and political.

Exposing these hidden ‘economic realities’ of interracial heart transplant was central to the coverage of the operations in the black press. Why Haupt? And later, why Tucker? Perhaps, on the surface, it seems easy to dismiss the selection of these two particular men as accidents of historical chance. It was indeed an accident that Haupt happened to collapse when Blaiberg needed a heart, that he happened to be close by Groote Schuur hospital where the famed transplant surgeon Christiaan Barnard and his team were located, and that his blood happened to match Blaiberg’s ‘not perfectly, but satisfactorily’.15 Similarly, it was pure coincidence that Bruce Tucker’s accidental fall landed him in the MCV emergency room while Joseph Klett was upstairs waiting for a heart.

But, this accident narrative of donation obscures the real, material conditions and consequences of these operations.16 Someone had to wheel Haupt’s still breathing body across the line that separated the ‘colored’ from the ‘white’ side of Groote Schuur.17 Someone in the emergency room at MCV had to call the medical examiner, who had to call the surgeon. And, of course, the surgeons themselves had to cut. Beyond these hands-on interactions, the hospital infrastructure at MCV and Groote Schuur had to be ready to perform such a transplant and the cultural, political and scientific climate had to be right for this particular procedure—the transplant of hearts from black to white bodies, from relatively poor men to relatively wealthy men—and not the reverse.

When narrated in this manner, as they were in the black press, Tucker and Haupt’s stories are not anomalies. In fact, it is precisely such ‘chance’ moments that have the power to reveal the often invisible, sometimes unconscious processes through which the everyday is experienced. The stories of these two men are important in their own right as the actual life (and death) experiences of individuals in turbulent times. But they are also important for what they became—for the ways in which they circulated through the African American public sphere. In the tense atmosphere of 1968, these non-accidents of historical chance, realised by unprecedented technological means, were portrayed in the black press simultaneously as a threat and an opportunity, a moment in which the notion of race as a physiological, fixed and political category of difference could be dangerously exploited but also radically questioned.

The Black Press in 1968

Who would have read these donor and recipient narratives in the black press? What impression would they have left on its African American readers? In fact, to speak of a ‘black press’ is misleading—in 1968, there were black presses, a loose collection of dailies and weeklies that often had drastically different political affiliations, organisational structures and circulation patterns. While at the end of 1947 there were 169 documented black newspapers, the vast majority of these were both ephemeral and local, with a life


17For more on the history of segregated wards at Groote Schuur hospital, see Anne Digby et al., At the Heart of Healing: Groote Schuur Hospital: 1938–2008 (Auckland Park, South Africa: Jacana, 2008).
span of just a few years, a limited range of circulation, and very little of their print run preserved in libraries or archives. The statistics on black papers which circulated regionally or nationally are unfortunately thin—the federal circulation audit bureau only began including black presses in their surveys in the late 1940s, and even then only tracked a handful of publications. Circulation numbers that do exist are likely vast underestimates, as papers were often passed through communal spaces, reaching more than just one household.

Despite the difficulty of obtaining statistics on these papers, the aggregate category of the black press is a useful proxy for understanding how the transplant was received and read alongside contemporary political issues by African Americans on a daily basis. Through periodicals such as the moderate Chicago Defender, which reached upwards of 300,000 homes, the more radical, widely circulated, Baltimore Afro American, the relatively conservative Atlanta World, as well as the New York Amsterdam News, Philadelphia Tribune, Cleveland Call and Post and others, African Americans across the United States positioned themselves in relation to society and the politics of the age.

These black presses were not simply reflections of the opinions of their readership, nor did they singlehandedly produce categories of thought. Rather, the black press occupied an important middle ground between production and reflection. ‘The black press has not only expressed black dissatisfaction with American racism, but also helped create, maintain, and mold the black communities it has served’, writes Hayward Farrar in the introduction to his book on The Baltimore Afro American. ‘Through its coverage of black organizations, social functions, personalities, issues, events, and achievements, it has offered its readers a definition of black community.’ How, then, was interracial heart transplant received into this community in 1968? What narratives did the black press take up in order to integrate this new medical event into the social and political fabric of race in America?

The Interracial Heart in the Public Eye

CAPE TOWN, South Africa—The biggest funeral crowd in Cape Town history, a racially mixed throng of 6,000, paid an emotional tribute over the weekend to the mulatto factory worker who gave his heart so that a white dentist might live. The surging crowd...cheered and applauded as Dr. Christian Barnard arrived in 90-degree summertime heat at the funeral of 24-year-old Clive Haupt. Women, some weeping pushed forward to touch the pioneering surgeon....More than 2,000 persons gathered at the graveside and for a time hampered pallbearers from bringing the body for burial. ... The crowd was so dense it backed up traffic for a mile in

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18Henry Lewis Suggs, ed., The Black Press in the Middle West, 1865–1985 (Westport, CN: Greenwood Press, 1996), 44. By the 1960s, mainstream papers often devoted special columns to black readers, hiring black reporters, and more effectively distributing issues within predominantly black neighbourhoods. At the same time however, the civil rights movement brought with it an upswing of interest in black culture and a demand for institutions working to serve the needs of African Americans.

19Papers were ‘traditionally ... passed from family to family and read aloud in barber shops, pool halls, and informal civic and religious gatherings’. Henry L Suggs, The Black Press in the South (Westport, CN: Praeger, 1983), x.


21Ibid.
every direction and police finally brought in dogs. No one was hurt, but screams swept the crowd as people fled the dogs.22

Readers of the Chicago Defender, one of the most widely circulated black newspapers in the twentieth century, would have encountered this description of Clive Haupt’s funeral upon opening their papers on the morning 8 January 1968. African Americans in the South of the United States might have seen the same story a day earlier on the first page of the Atlanta Daily World Sunday edition or several days later on the cover of the Norfolk Journal and Guide.23

Coverage of Haupt’s funeral circulated rapidly through the American black press, the text of the article virtually unchanged under a variety of headlines ranging from the neutral: ‘Huge Interracial Crowd at Heart Donor’s Last Rites’ to the biting: ‘6,000 At Rites: Man Who Gave Heart Given “Colored” Funeral’. By 13 January, the Pittsburgh Courier, a prominent black newspaper distributed in the northeast, observed quite rightly that the story of the transplant had become ‘the drama of death in the living colors of black and white’.24

Following the 2 January procedure, many different kinds of circulatory systems—both obvious and obscure, physiological and metaphorical—were exposed to the public eye. The transplant brought up important questions not only about the mobility of organs between bodies, but also about the movement, or lack thereof, between race and class categories. Questions of identity became paramount: was the donor’s body an object—purely functional, a machine with interchangeable, useful parts—or did something of the subjective experience of the donor linger in the heart that continued to beat in another’s chest?25 Both of these interpretations of heart transplant involved implicit, and sometimes explicit, ideas about race and politics. Questions about the circulation of objects and subjects were themselves circulated and answered in a variety of ways in the African American public sphere. Columnists in the black press in America wondered if it was possible for the USA to glean lessons from a South African story which took place in a racial climate both similar and very distinct from their own.26

Starting with the story of Clive Haupt’s funeral, I explore these parallel, often intersecting, processes of circulation of organs and ideas, through bodies, newspapers and nations. In articles on the funeral, the glaring differences between Haupt and Blaiberg’s

25Anthropologists of organ transplant and brain death, most notably Margaret Lock and Leslie Sharp, deal with similar questions through different disciplinary lenses and applied to the present day. See especially Margaret Lock, Twice Dead and Leslie Sharp, Strange Harvest.
26The history of the Haupt–Blaiberg transplant and its reception in America connects to a larger history of Apartheid South Africa seen through American eyes. American politicians could not completely condemn South African racial policies without implicitly also condemning segregationist policies back home. This tension between international and domestic discourse regarding race separation became an opening through which many African American leaders and civil rights groups—from Martin Luther King to the Black Panther Party—critiqued racist policies and politics in America in the 1960s. For more on anti-apartheid politics and race in America, see David L. Hostetter, Movement Matters: American Antiapartheid Activism and the Rise of Multicultural Politics (New York: Routledge, 2006) and Francis N. Nesbitt, Race for Sanctions: African Americans Against Apartheid, 1946–1994 (Bloomington: Indiana University Press, 2004).
lives and circumstances were juxtaposed against the medically proven interchangeability of their hearts. This interchangeability, the heart as a mechanical pump with no bearing on identity, while touted by the transplant team as evidence of the apolitical nature of the operation, was portrayed in the black press as fundamentally political, the physiological evidence against biologically based justifications for racial discrimination.

**Haupt as a Popular Hero**

The fascination with the heart was a popular affair; it emerged in all walks of life. The *Chicago Daily Defender* published ‘man on the street’ interviews where reporters asked Chicago citizens to comment on their views of heart transplant (most were, perhaps surprisingly, optimistic). Clergy, too, weighed in on this new procedure. In June, the *New Journal and Guide* published a photograph and report on the first ever ‘Miss Transplant’, who was crowned during the Dixie Hospital Nurses Association annual gala after raising the most amount of money for the organisation. Advertisers also capitalised on the heart transplant mania sweeping the country. Old Taylor Kentucky Bourbon took out a full page ad in the *Call and Post* devoted to Daniel Hale Williams, a black surgeon credited with performing the first successful heart operation. Seventy five years before an African Negro gave his heart for the first successful human heart transplant, an American Negro performed the world’s first successful heart operation, the advertisement began. This advertisement is an example of the deliberate effort, made in many black periodicals, to connect Haupt to an existing pantheon of black medical heroes. It also exhibits a fascinating contradiction—while the Haupt–Blaiberg transplant was used to critique class exploitation within South Africa, it was simultaneously mobilised by capitalist forces within the USA, often in the very same periodicals.

Haupt’s life, and the circumstances of his family’s life, were exposed to public scrutiny following his chance selection as the donor. Newspapers displayed the ordinary, invisible life of a mixed race family in South Africa, and made it both visible and extraordinary. The *Chicago Defender* characterised the Haupt family as ‘bewildered by the sudden glare of publicity, yet proud that they and their community shared in the historic transplant’. This ‘glare of publicity’ brought to light many of the difficulties of non-whites in Apartheid South Africa. Articles appeared in both black papers and mainstream papers profiling the extreme poverty of Haupt’s mother and wife and their decrepit living conditions. The *Los Angeles Sentinel* summed up the thrust of the media coverage on the Haupts’ situation in an editorial on 25 January. ‘Being colored...has caused the mother and the widow to live under the most severe conditions all their lives. But their son and husband, in death, has brought world fame to them, and world attention to the inhumane apartheid conditions of the land in which they live.’

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29 *Norfolk Journal and Guide*, 1 June 1968.
30 *Cleveland Call and Post*, 14 Sept. 1968.
Articles on the funeral detailed the vastly different class experiences of Haupt, who worked a minimum wage job and lived in a low class slum, and Blaiberg, the affluent dentist. The heart which passed from one to the other stood in stark contrast against the barriers which prevented circulation between their markedly different social positions. In an article titled ‘Haupt-Blaiberg Operation Spanned Gulf: Dentist and Donor Worlds Apart’, published two days after Haupt’s funeral, the Chicago Defender reported that Blaiberg lived in a wealthy suburb of Cape Town. He enjoyed driving expensive cars and employed a colored maid. Haupt on the other hand, lived in one room of a dilapidated one storey house in a poor part of town reserved for coloureds. His mother made 75 cents a day cleaning houses and his wife worked a low wage factory job.

Various actors worried about this discrepancy between the income and lifestyle of the Haupts’ and the Blaibergs’ and what it might portend for the future of heart transplants: ‘I don’t see them trying to save any heart patients that are poor’, observed an anonymous letter writer in the New York Amsterdam News. ‘The poor don’t stand a chance because the rich in their greed and lust for life can take your heart.’ Black writers worried about the potential for abuse of heart transplant found a perhaps unlikely ally in the Soviet Union. ‘Just imagine a bandit corporation which deals with the murder of people only for the sake of selling their organs on the black market’, a Soviet correspondent wrote in The Washington Post. ‘Money could make doctors register death before it has happened. Money can make people sell their organs before their deaths ... [transplants] could be used by a “maniac racist” to eliminate “lower races”.’

These class differences took on even more importance when the financial details of the transplant were exposed a few weeks after the procedure. Upon learning that Blaiberg was slated to be the next heart recipient, NBC had approached him about gaining exclusive rights to his interviews and photos. He would be paid $9,000 for exclusive interview rights before the transplant, $25,000 for video of the transplant itself and another $16,000 for exclusive interview rights after the transplant, on the condition of his survival. Due to hospital regulations, NBC was unable to gain video access to the operation, but Blaiberg agreed to the other terms and came away from the deal with $25,000. While some commentators in the mainstream press were outraged at the blatant monetisation of the procedure, others applauded Blaiberg for his pragmatic participation in the deal. Haupt’s family received no financial compensation for his participation in the procedure. However, after multiple stories ran depicting the Haupts’

poor living conditions, condolences, fan mail and cheques from Americans began appearing in the mailboxes of both mother and wife.\footnote{Heart Transplant’s Mother Is All Heart’.
}

\textbf{New Medical Possibility as Social Critique}

While the Haupt transplant exposed class problems from the perspective of the Soviets and some letter writers, the overwhelming message in the black press was that it first and foremost demonstrated the fallacy—and highlighted the dangers—of racism in South Africa. ‘As this goes to press, the living heart of a dead colored man, whose very existence had been limited by the world’s most rigid laws of racial separation, is pounding in the chest of a man who has always lived with his head high... free, white’, the \textit{New Journal and Guide} commented.\footnote{The Interracial Heart’, \textit{Norfolk Journal and Guide}, 6 Jan. 1968.}

Another article quoted Haupt’s mother, Muriel: ‘at the hospital yesterday we were treated wonderfully... everyone was so kind to us. They treated me and Dot (Clive’s widow) just like whites.’\footnote{Smith, ‘Colored Man’s Heart Beats in South African’s Body’.}

The same article concluded that ‘Clive Haupt’s family may have been treated “just like whites” at Groote Schuur Hospital, but his heartbeat in a white man’s chest made no difference in the way South African law provides for him in death. He must be buried in a colored cemetery.’\footnote{Ibid.}

This juxtaposition between social status and medical possibility was not only idle speculation, but raised real concerns. In a perspective article for the \textit{Baltimore Afro-American}, columnist David Sloan provided a hypothetical conversation between two white South African legislators that explored the potential future for such ‘ironic’ transplants:

\begin{quote}
We might as well face it. Since we’ve allowed a colored man’s heart to be implanted in a white, we have by inference acknowledged that there is no difference between colored and white except skin coloration.

Yes, but since Barnard can perform this operation, we can’t afford to let any more good white people here die of heart failure... what with all the blacks and coloreds walking around with these ‘keen hearts’.\footnote{David Sloan, ‘Perspective: South African Stupidity’, \textit{Baltimore Afro-American}, 6 Jan. 1968. The phrase ‘keen hearts’ is a reference to an earlier comment by Barnard that Haupt’s heart was ‘particularly keen’.}
\end{quote}

As Sloan’s hypothetical shows, the possibility of putting a black heart in a white body raised very serious concerns for many African American commentators. ‘Once again, a Negro played an important role in world history when, in death, he gave up is heart this week so that a white man may live’, the \textit{Los Angeles Sentinel} commented.\footnote{Bingham, ‘Black and White Together’.}

The article suggests that the price for a black man’s participation in world history might be nothing less than his life. Muriel Haupt’s comment that she and Haupt’s wife were treated ‘just like whites’ in the hospital can also be read with such implications. Is the price for being treated ‘just like whites’ the heart of a son or husband? These worries about the black-to-white transplant resurfaced and gained momentum with the Tucker case several months later. The direction of the first interracial transplant—a heart from a dying black
man to preserve a white man’s life—caused commentators to worry that such interracial
transplants would never be possible in the reverse.47

However, other editorials commented on the permissibility of the interracial transplant, and its widespread popular acceptance, as a hopeful sign of positive political and social change. ‘The biggest wonder of it all is that the government of South Africa let such an occurrence get by them without imposing sanctions, or developing new rules that there’ll be no heart-mixing among the races’, The New York Amsterdam News remarked.48 In an editorial for the Chicago Defender, Neil Smith argued that the physiological possibility of transplanting a heart between the races could be a catalyst for individuals to re-evaluate
their own assumptions about race, and, in fact, was the most salient point to take away from the transplant.49

Both of these responses—fears about exploitation and hope for new interracial understanding—stemmed from a particularly mechanical vision of the heart that the transplant operation seemed to imply. Medicine had proved that the heart was an interchangeable organ, regardless of the race of the person it came from and the person to whom it was given. Barnard’s surgical team and the Blaiberg family attempted to convey neutrality when asked directly about race and politics.50 In his autobiography following the transplant, Blaiberg wrote, ‘with strict regard for the truth . . . I have to report that there are no black or golden hearts, or light or stony ones . . . they are just muscular pumps, some stronger than others.’51 One reporter for the Los Angeles Times even implied that this neutrality on questions of politics was the norm in medical spheres. ‘Since this interracial transplant was done in Cape Town, you might have thought it was some form of the surgeon’s resentment against apartheid’, he wrote.52 ‘But I don’t think that at all. Most scientists are not worried about social separation of the races. All they are worried about is saving lives.’53

However, this view of the ‘heart as machine’ was precisely what made the transplant political. Because Blaiberg, Barnard and others denied that there was any difference at all between black and white hearts, various African American periodicals argued that the procedure was an implicit condemnation of political distinctions that purported to be based on physiological difference between the races. The juxtaposition of race and class immobility versus the physiological mobility of a heart between socially and politically marked bodies in the black press opened both the space for optimism and fears of exploitation, making the transplant both popularly comprehensible and unavoidably political.

48Ibid.
49Smith, ‘Haupt-Blaiberg Operation Spanned Gulf’.
50Reflecting on his post-transplant interviews in his autobiography, Blaiberg commented: ‘Journalists and provocative letter-writers have tried to draw me out on my attitude towards politics, religion, and race problems. I have resolutely refused to discuss them.’ Philip Blaiberg, Looking at my Heart (New York: Stein and Day, 1968), 105.
51Another’s Heart Feels the Same—So Says Dr. Blaiberg, the Poets Notwithstanding’, Baltimore Sun, 25 Sept. 1968.
53Ibid.
Scientific and Political Metaphor in Heart Transplant Reporting

While an objective, mechanical vision of the heart was popularised and politicised following the Haupt–Blaiberg operation, another, more playful interpretation of the transplant simultaneously persisted. ‘As it worked out it [the transplant] was a kind of important practical joke on the principle of apartheid’, Paul Coates observed in a Los Angeles Times editorial.54 In February, the Cleveland Call and Post published a poem in a special column for ‘Editorial and Rhyme’ which ran, in part:

With kidney, lung, and liver transplant
Pray tell, why not a heart transplant?
A heart is a heart when one needs a heart—
Though screaming southern white women rant.
If George Wallace sported a Negro’s heart,
Just imagine what would happen in Dixie...
He would be duty-bound to drop the KKK.
And take a life membership with the NAACP!55

The poem, published under the byline ‘The Meditations of Methusaiah Brown, America’s Number One Exponent of Horsesence [sic]’ is clearly intended for laughs. But, this ‘practical joke’—the interracial heart as portrayed in the black press—was, in fact, quite serious. Such jokes reveal the contested ground of the body as an object of science versus as a subject in its own right, and in turn, the relationship of this scientised body to race politics.56

Following the Haupt operation, it seemed that medicine had demonstrated that hearts could literally wander, leaving one body for another. Or could they? If the heart could stand figuratively for the whole person, would a change of heart also change the person? Through such speculation, reporters in the black press explored the entangled space of science, state and politics. ‘Wouldn’t it be interesting if a byproduct of the scientific blunder into heart transplants turned out to be a discovery that proves what poets have been saying about hearts all along is literally true?’ wondered Mark Bricklin in the Baltimore Afro American.57 With the first interracial heart transplant, the metaphorical connotations of the heart took on special importance as a way of understanding the social signifi-

54Ibid.
56The importance of jokes to cultural history has been well established, both within the African American context and further afield. Robert Darnton’s classic The Great Cat Massacre and Other Episodes in French Cultural History (New York: Random House, 1985) which discusses early modern French culture through the lens of a joke that is only funny in the context of its time is perhaps the best known example of this scholarship. In the particular context of the black press, there is also an important connection between such joking poems, blackface minstrelsy (in which white actors portrayed highly stereotyped black characters) and black actors performing for both white and black audiences. This minstrel culture occupies a complex liminal space between subversiveness and subjugation that has been explored by many scholars of race studies. For more on this blackface minstrelsy see Robert C. Toll, Blacking Up: The Mistrel Show in Nineteenth Century America (New York: Oxford University Press, 1974) and William Mahar, Behind the Burnt Cork Mask: Minstrelsy and Antebellum American Popular Culture (Chicago: University of Illinois Press, 1999).
cance of the procedure. With the transplant, two visions of the heart—an objective, replaceable part in a machine or the centre of emotion, feeling, experience and identity—intersected. Through language play, the American black press explored these two paradigms and used the friction between them to advocate for racial justice in the United States.

These techniques took on particular political meaning in the context of their publication in the African American press. By the 1960s there was already a longstanding tradition of black periodicals using coded language and metaphor to accomplish political aims. In the early twentieth century in the South, it would not be uncommon for local black papers to encode the location of a meeting or event, reporting that it would occur in one place while actually meaning another (a symbol which would be obvious to the paper’s regular readers but not to outsiders). Similarly, in the 1950s, the Baltimore Afro American published regular lists of ‘Orchids’ and ‘Onions’—orchids being stores that were friendly, and onions being businesses that should be boycotted. In many cases, the activism of the black press was constructed via the use of such linguistic turns, metaphors and codes. In this light, it is possible to speculate that details like the Chicago Defender’s reference to the police dogs used on the crowds at Clive Haupt’s funeral could have been included as a political reference, calling up the image of police dogs used against civil rights demonstrators in the USA. The poems, light hearted editorials and heart-related jokes that ran in the black press following the transplant were not only humorous—it was through such metaphorical language that the African American community wrestled with the potential social significance of this new medical procedure.

How did the media reporting on the heart invite readers to think of it as an ‘exceptional’ organ, and the heart transplant as fundamentally different from other transplants of vital organs? And how did the new possibility of transplanting a heart across the race line change the language and metaphor by which racial inequalities were narrated, understood and critiqued? Taking apartheid logic to its limits, several journalists suggested that post-transplant, Blaiberg should be reclassified as ‘colored’. In imagining the ways in which Blaiberg’s race could be changed by the transplant, journalists deliberately racialised Haupt’s heart, in contrast to the medical concept of the heart as a neutral, raceless, mechanical pump from an invisible donor. Following the Haupt operation, it also became possible to recommend other kinds of heart transplants, metaphorical as well as literal, to change both the race and racial opinions of pro-Apartheid politicians in South Africa and segregationalists in the American South.

Reporting on the heart transplant distinguished it sharply from previous transplants of other organs. Only a week after the Haupt transplant, the Baltimore Afro-American

mused that ‘the transplanting of the human heart, evokes a greater response [than earlier skin, blood, corneal, kidney transplants], for the heart has come to be symbolic of all that is emotional and much that is sentiment in the human creature.’

An article from the same issue of the Afro-American asked, ‘if one has another’s heart, can things ever be the same for him? Can the transplant of a heart be philosophically in the same category as the substitution of the impersonal kidney, the lifeless plastic tube?’

This commentary, published in the same periodicals as and, in some cases even directly alongside, articles championing the mechanical vision of the heart as evidence for racial equality highlights the complexity of the black response to the interracial transplant. That these two radically different interpretations of the heart and its significance for personal identity could not only coexist, but could also be mobilised to advocate for the same principles of racial justice, shows that there was no direct relationship between biologically reductionist arguments (the existence of fundamentally different ‘black’ and ‘white’ hearts) and discriminatory race politics.

The exceptional quality of the heart as the seat of subjectivity took on special significance in the light of the interracial transplant. The claim, drawn from metaphor and idiom, that the donor’s identity could perhaps be transferred to the recipient along with his or her heart, had important implications for Blaiberg’s race post-transplant. ‘Since this white man now has a non-white man’s heart beating in his chest, will he be sent to the “coloreds” compound?’ the Philadelphia Tribune wondered in an editorial provocatively titled ‘Blessing of New Heart Brings Curse’.

The Philadelphia Tribune agreed: ‘People everywhere rejoiced. Everyone, that is, except the Chief Inspector of South Africa’s Race Classification Board’.

Although there is no evidence that Blaiberg’s post-transplant race was ever officially contested, the Philadelphia Tribune sketched out a hypothetical situation where the inspector tries to kick Blaiberg out of the hospital because he is now considered ‘colored’. ‘Don’t you know that Clive Haupt, the original owner of this man’s new heart, was a Cape colored?’ the inspector asks Dr Barnard in the Tribune story. ‘Cape colored?’ Barnard replies, ‘what’s that, a new automobile exterior?’ This hypothetical exchange pits the two views of the heart directly against one another, playing biological determinism against the neutral pump. On one hand, the race inspector sees the heart as fundamentally changing Blaiberg’s racial identity. Barnard challenges this logic, explicitly comparing the body to a machine (an automobile) and race to a trivial feature of that machine, simply the exterior that has nothing to do with its function. The story positions

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60 ‘Clergymen See Good in Heart Transplants’.  
61 Sloan, ‘Perspective: Heart Transplants Raise Questions’.  
63 Ibid.  
65 Ibid.
Dr Barnard as a symbol of modern medicine’s race blindness. ‘This is preposterous’, the Tribune imagines Barnard exclaiming as Blaiberg is dragged away. ‘This is an outrage!’

However, outrage or not, the idea of Blaiberg as being in some way black or ‘colored’ following the operation persisted and was even welcomed in many editorials. ‘Will coloreds and blacks of South Africa ever be able to see or hear of Philip Blaiberg without thinking or feeling a quiet, knowing kinship?’ the Baltimore Afro-American wondered.

The same article considered Blaiberg’s behaviour following the transplant, reporting that he was ‘acting in a manner in the best tradition of the soul brother who feels no pain ...

“Blaiberg is full of jokes. He is singing every morning and evening”.’

This enthusiastic embrace of heart related metaphors made possible a new kind of political discourse. Barnard’s transplant had made literal what was previously only metaphorical—the possibility of a ‘change of heart’. ‘Even the very tough Prime Minister Vorster admitted he was very glad to hear the [Blaiberg] operation succeeded’, the New York Amsterdam News reported. ‘Would it be too much to hope that the good doctor is sneaking a new heart into the South African government?’ The Baltimore Afro-American went even further, tying the heart transplant back to American racial politics. ‘Do we have to wait till a person [is] dying physically to do something about his heart?’ the newspaper wondered. ‘Take cats like Gov. Wallace. . . . They s’posedly have mean and evil hearts. Could them smart doctors cross such hearts and make them love instead of hate? That would be boss for Southern America as well as South Africa and every other place in the world.’

Heart Transplant as a Medical and Social Failure

As this paper has shown, the black press across America was quick to comment on the social implications of the Haupt transplant, with extensive coverage of his funeral, the juxtaposition of Haupt and Blaiberg’s lives, and an exploration of heart metaphors. However, when an interracial heart transplant occurred for the first time on American soil, the response was quite different.

The Tucker Transplant

On 24 May 1968, Bruce Tucker, a 54-year-old black labourer, fell off a concrete ledge at the egg packing plant where he worked and lost consciousness. He was rushed to the nearest emergency room at the Medical College of Virginia. Tucker was alone when he was admitted and, after a cursory attempt to contact family members, the medical team assumed that he had no friends or family to act as a surrogate. Tucker was declared legally dead and his body ‘unclaimed’. His body, maintained on mechanical ventilation, was turned over to the transplant team. Less than 24 hours after the fall, surgeons had removed Tucker’s heart and transplanted it into Joseph Klett’s body. This transplant, the sixteenth in the world, was also the first American interracial transplant and the first for
MCV.\textsuperscript{71} When Tucker’s brother William, whom the hospital had failed to find and contact, showed up two days later inquiring after Bruce, he discovered that his brother was not only dead, but that his heart had been taken as well. Klett, the recipient of the heart, had fared no better, dying less than a week after the operation.\textsuperscript{72}

As the details of the transplant emerged in the days and weeks following the operation, newspapers which had earlier run hopeful front page articles on the social progress portended by the Haupt–Blaiberg operation condemned what appeared to be a blatant act of exploitation of a poor black family by the white leadership of a southern hospital. The \textit{Baltimore Afro-American} ran an article under the headline ‘[Some] Say Heart was Snatched for Virginia Transplant’.\textsuperscript{73} By the middle of June, William Tucker’s outrage at the treatment of his brother had also made the mainstream papers. An article titled ‘Heart Taken, Not Given, Says Brother’ ran in major papers such as \textit{The Boston Globe}, \textit{Los Angeles Times} and the \textit{Washington Post}.\textsuperscript{74} ‘It was no donation’, William Tucker maintained.\textsuperscript{75} Perhaps surprisingly, the Tucker transplant was not as widely covered in the black press as the Haupt–Blaiberg procedure, however, the implications of this transplant were far reaching.

Bruce Tucker’s afterlife was not over with Klett’s death. The Tucker family brought a lawsuit against the surgeon and hospital leadership over a lack of transparency, consent and the premature declaration of death of Tucker. William Tucker retained Douglas Wilder, a famous civil rights lawyer, to fight the case.\textsuperscript{76} Although Wilder said that ‘he was concerned with the legality of the use of the organ’, the subtext of the trial was that doctors had not tried to contact Tucker’s family and had targeted him as a potential heart donor because of his race.\textsuperscript{77} The trial dragged on until 1972, when the all-white Virginian jury eventually found in favour of MCV.\textsuperscript{78} The lawsuit was unprecedented and heralded many of the challenges facing heart transplant in the latter months of 1968. ‘This planned suit will be the first of its kind’, the \textit{Philadelphia Tribune} noted, ‘its far reaching implications may slow down the rash of heart transplant operations while hospital legal staffs study the progress of the Tucker suit.’\textsuperscript{79} What were these far reaching implications raised by the Tucker transplant, and how did Americans, and African Americans in particular, react to them?

\textbf{A ‘Spare Parts Supermarket’}

The enthusiasm and wordplay that greeted the first heart transplants obscured some of the difficult legal, regulatory and ethical questions that such transplants inevitably raised. It was these questions which emerged full force in the racially charged circumstances of

\textsuperscript{72}‘First All-Black Transplant Aids Ailing Teacher’, \textit{Baltimore Afro-American}, 31 Aug. 1968.
\textsuperscript{73}Barry Barkan, ‘Say Heart was Snatched for Virginia Transplant’, \textit{Baltimore Afro-American}, 1 June 1968.
\textsuperscript{74}Stuart Auerbach, ‘Heart Taken, Not Given, Says Brother’, \textit{Boston Globe}, 14 June 1968.
\textsuperscript{75}\textit{Ibid}.
\textsuperscript{76}‘First All-Black Transplant Aids Ailing Teacher’.
\textsuperscript{77}‘Lawyer Probes Transplant Case’, \textit{Baltimore Afro-American}, 8 June 1968.
the Tucker–Klett transplant. First and foremost, there were concerns about consent. Who should be asked for permission to take an organ? What if hospitals overstepped their bounds and began simply taking organs without asking the family or friends of the deceased? Closely tied up with the question of consent was the concern that African Americans in particular would be vulnerable to exploitation. Commentators in various African American papers worried that the increasing obscurity of donors, cemented by bills proposing that donors be required to be anonymous, could make it easier for white hospital transplant committees and physicians to get away with stealing black organs. These concerns were rooted in an increasingly critical look at the role of the donor. How were donor hearts being obtained? What were the new standards of death, and were donors really dead when they gave up their hearts? Finally, as Klett’s demise, and the similar fate of other transplant recipients demonstrated, it was increasingly unclear if heart transplant was medically viable on an individual level or conceivable as a widespread cure for cardiac disease. To many, the risks to the recipients and the ethical problem of obtaining donors seemed to outweigh the nebulous benefits of the operation.

The particular location of the Tucker transplant—in Virginia, at a hospital with a notoriously bad relationship with the local black community—provided a concerning context for the transplant. A Virginia law against miscegenation had only just been repealed a year earlier, in 1967, after Mildred and Richard Loving, an interracial couple prosecuted by the state of Virginia had taken their case all the way to the US Supreme court. For many black readers, the ease with which a black to white interracial heart transplant had taken place might have seemed especially uncomfortable in light of this recent and highly contested decision.

In this context, it is unsurprising that a specific concern raised in the black press was the lack of consent on the part of Tucker’s family. In Clive Haupt’s case, not only his wife, but also his mother had been present at his bedside to give their consent, a central point in the media reports which framed Haupt’s donation as a selfless gift across the colour line. The fact that the hospital had failed to track down the Tucker family, let alone get their consent for the donation, was framed in the African American press as an underhanded attempt to steal a black heart for a white man. The mechanical interchangeability of body parts, which had previously been seen as evidence for racial equality, now took on sinister connotations. ‘Doctors Fear Negro Will Become “Spare Parts” Depot for Whites’, the Philadelphia Tribune reported.

81While the Tucker family lawyer and newspaper articles discussing the case were quick to identify Tucker’s family’s lack of consent as the greatest ethical failing of the transplant procedure, the bioethical issues at stake in Tucker’s use as a donor are much broader. As Allan Brant effectively argues about the Tuskegee syphilis study, the lack of informed consent on the part of the study participants, which was the focus of the initial federal apology, pales in comparison to the historical context in which the study took place—designed and implemented within a fundamentally racist medical system. I believe this argument for the importance of historical context applies equally in Tucker’s case. Allan M. Brandt, ‘Racism and Research: The Case of the Tuskegee Syphilis Study’, Hastings Center Report, 1978, 8, 21–9.
82For more on the gift metaphor, see Leslie Sharp, ‘Commodified Kin: Death, Mourning, and Competing Claims on the Bodies of Organ Donors in the United States’.
The fear of exploitation of black bodies for white gain was fed by the uni-directionality of interracial transplants. ‘Black doctors see an “ominous” specter in the increasing incidence of heart and other vital organ transplants’, the Philadelphia Tribune claimed. ‘The donors are tending to be Negros—the recipients white.’

Several African American papers went so far as to compare the transplants to Nazi experiments. Reporting on a group of black doctors who had come out against heart transplant, the Philadelphia Tribune speculated that, ‘although the black medical experts shied away from using the word “genocide,” the not too distant example of the Jews in Nazi Germany who were used in “medical experiments” … obviously was on their minds.’

**New Definitions of Death**

Instead of being a poignant reminder of physiological equality, interracial heart transplant now stood as a symbol of technology that aided the rich and white at the expense of the poor and other races. In part, this shift occurred as the focus of the press moved from the miraculous potential of heart transplant to the thorny question of how to obtain donor hearts. The concept of ‘brain death’, which was first formalised by a closed door Harvard ad hoc committee in August of 1968, left many uneasy. Officially determined by a constellation of criteria indicating irreversible neurological unresponsiveness, brain death seemed to be a nebulous and changing category, open to interpretation and thus also to abuse. ‘Even the finality of death has lost its simplicity’, a clergyman lamented. The new standards for declaring death and the high value placed on transplantable organs left many worried about bodies, particularly bodies of African Americans and members of other minority groups, becoming more valuable dead than alive because of the potential for transplant. ‘Can anyone ever again be sure that doctors will do all that can be done to save him—rather than regard him as a potential spare-parts supermarket for the propping up of someone else?’ a New York Times editorial questioned. By October of 1968, several black newspapers were portraying the twin innovations of heart transplant and brain death as a specifically racial threat. ‘At question is a new concept of judging when life has ceased and the threat which this poses to the wholesale use of organs

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84 ‘Doctors Fear Negro Will Become “Spare Parts” Depot for Whites’.

85 This accusation may have struck readers with particular force due to the publication of Henry Beecher’s research ethics exposé two years previously in which he compared certain American biomedical research enterprises to Nazi practices. Henry Beecher, ‘Ethics and Clinical Research’, The New England Journal of Medicine, 1966, 274, 1354–60.

86 ‘Doctors Fear Negro Will Become “Spare Parts” Depot for Whites’.


89 ‘Clergymen Ponder Moral-Medical Ethics’, Pittsburgh Courier, 1 June 1968.

90 Edwin Diamond, ‘Are We Ready to Leave Our Bodies to the Next Generation?’ NYT, 21 April 1968.
from black bodies to give extended life to white persons’, the Chicago Defender worried.91

Worries over new definitions of death and the ‘snatching’ of black organs for white bodies were fed by the secrecy which shrouded the Tucker transplant and other heart operations in the latter half of 1968. As the heart transplant was performed at an increasing number of academic institutions, individual operations became less and less newsworthy. At the same time as the media turned away from transplants, surgeons and hospitals became more discriminating in the information they released. ‘A veil of secrecy clamped over the [Tucker–Klett] operation by the MCV team and the state anatomical board’, the Baltimore Afro-American accused.92 Later that year, in a closed door session at a conference for chest physicians several prominent surgeons, Christaan Barnard included, pushed for maintaining the total anonymity of donors to avoid the media frenzy of the first transplants.93 The Philadelphia Tribune reported that the predominantly black National Medical Association ‘deplored the curtain of secrecy “surrounding this new medical advancement”’.94 Many editorials framed this push for greater confidentiality in heart transplant operations as a dangerous lack of transparency that could allow surgeons free rein to take hearts from socially disadvantaged groups. This secrecy was disappointing on an ideological level as well. Writing about interracial blood transfusions, the New York Times noted that ‘the technique . . . is now so routinised that beneficiaries of this technique rarely know the donors, and thus the opportunity to drive home the irrelevance of skin color is largely lost’.95

As 1968 wore on even the medical optimism of the first transplants faded. The rejection and failure of Joseph Klett’s new heart was typical of many other 1968 transplants. Of the 102 heart recipients in 1968, less than 25 per cent survived more than a year post-transplant.96 Even Philip Blaiberg, who was often touted as an example of heart transplant success, with photographs published in the international press of him swimming in the ocean and driving a car (activities that would have been impossible pre-transplant) was in far worse condition than the media coverage suggested. Following his death, it emerged that most of the photographs had been staged and Blaiberg in fact lived out his last days in agony.97 Despite the streamlined transplant procedure, it remained a very risky prospect, appropriate only for the very desperate. While heart disease was one of the most frequent causes of death in America, the donor supply was limited to a small subset of brain dead, but otherwise healthy patients. The discrepancy between supply and demand, and the unsuitability of heart transplant as a cure for all but the most serious cardiac problems made it a solution that could only ever be available to a select few.

92Barry Barkan, ‘Say Heart was Snatched for Virginia Transplant’, Baltimore Afro-American, 1 June 1968.
94‘Doctors Fear Negro Will Become “Spare Parts” Depot for Whites’.
96In History of Organ and Cell Transplantation (London: Imperial College Press, 2003), Nadey Hakim and Vassilios Papalois report that out of the first hundred transplants worldwide (spread out over 17 countries, all completed in 1968), the mean recipient survival was 29 days. One year survival was a strikingly low 22 per cent.
97Nathoo, Hearts Exposed, 163.
By the end of 1968, all that was left to commentators was to note the severe discrepancy between technological and social possibility. An article in the *Cleveland Call and Post* drew attention to the gap between the medical miracle of heart transplant and the disappointing failings of mankind’s social order:

> There is something unnatural about this same 20th century man, who everyday performs as part of a team solving problems in science, technology, medicine, and heart transplants, but can’t use this same team motivation to solve social problems. Is he becoming less of a man and more of a thing? Is it that the machine age man is really coming into his own? Void of emotions, ruthless, cruel, an empty shell not an image of any kind of God, but an image of nothingness?98

In this passage, the machine heart, man as machine, previously mobilised as an argument against racial difference and racial segregation has instead become a metaphor for disillusionment and disconnection. In the end, it seemed that technological change had outstripped social change to such a degree that, no matter how it was narrated, the gap between the two could not be closed.

**Conclusion**

The period from January of 1968, when Christiaan Barnard transplanted Clive Haupt’s heart into the body of Philip Blaiberg to the Tucker transplant in May of the same year provides a fascinating window into the social and political implications of medical procedure. The temporal context for these interracial transplants, in a year of turbulent racial politics and social movements, set the stage for intense discussion of race, politics and identity in the black press. Throughout 1968, the twin spectres of racism and capitalism, the two ideologies perhaps most at the forefront of American minds in the politically charged atmosphere of the year, loomed large over the transplant proceedings, causing at least one journalist to lament that ‘racial and financial aspects of the second Cape Town heart operation are clouding the medical achievement’.99 In this article, I have attempted to elucidate these ‘racial and financial aspects’, and how they impacted the ways in which interracial heart transplant was narrated in the black press and legislated in 1968.

In particular, this paper was concerned with the language through which African American periodicals explored the possibilities and consequences of interracial transplant. In transplanting the heart, medical science interceded on a physiological space that was already overloaded with symbolic connotations. In articles and editorials, these heart metaphors were read back onto the Haupt–Blaiberg operation alongside medical statements about the race-neutrality of hearts and, after May 1968, as a way to make sense of emerging information about the Tucker transplant.

The portrayal of interracial heart transplant in the black press reveals a multifaceted dialogue in 1968 black America about the physiological basis (or lack thereof) for racial difference and what it might mean for race politics. Essentialised physiological visions of racial identity were attacked by the black press in the wake of the transplant, but also

simultaneously mobilised in a critique of racist politics and politicians through the metaphor of ‘a change of heart’. This multitude of readings of the social and political meanings of interracial heart transplant emerged in a diverse set of African American papers published and distributed across the United States, and reflected complex and often contradictory opinions about racial identity, physiology and political action within American black communities.

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