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Dr Frank J. Sladen: The Osler Connection

Richmond W. Smith, Jr, MD*

The flowering of clinical medicine in North America took place during the first half of this century when the emerging biological sciences joined with humanitarian concern, which had been the most significant feature of medical practice until that time. At the beginning of this century when, far more than today, our medical schools and hospitals fostered the careers of a few uniquely endowed individuals whose wisdom, scholarship, and clinical skills were abiding inspiration for students and house officers alike. The Johns Hopkins University served during the early 1900s as the prototype for academic medicine. Of its renowned faculty, Welch, Kelly, Halsted, and Osler were figures whose lives and teachings left indelible marks on hundreds of young professionals. But no one physician has influenced the spirit and principles of American medicine more than Sir William Osler. One of those directly and profoundly influenced by Osler was Dr Frank J. Sladen, the first Chairman of the Department of Medicine of Henry Ford Hospital, whom we honor in our medical society today.†

For insights and information about Frank Sladen's connection with Osler, I have been privileged to have two principal sources. The more gratifying one was several personal exchanges with Mrs Sladen, whose keen memory and spirited sentiments remain undiminished. My appreciation for her help is extended by virtue of several books she gave me shortly after Dr Sladen's death. These volumes from his rich library included *Cushing's Life of Sir William Osler* and *Thayer's Osler and Other Papers*. During the course of his reading, Dr Sladen left his own mark on the pages—marginal notations, checkmarks, and underlined passages which are of great interest. From these books, I have sought to ferret out those Oslerian achievements and philosophies which particularly impressed Dr Sladen and possibly influenced his thinking and later actions.

Frank J. Sladen was born in West Point on the Hudson River. His father, Joseph Alton Sladen, was at that time an Aide-de-Camp at the military academy to General O.O. Howard of Indian War fame. Subsequent assignments took the family to Portland, Oregon, where Frank Sladen spent his precollege years and studied for some time at a military school. Despite his father's preference that he study law, Frank turned to medicine, probably making this decision during his years at Yale University. While there, he excelled as a scholar and graduated with Phi Beta Kappa honors. For relaxation, he played college baseball (which he continued in his

early years at the Henry Ford Hospital) and played the banjo. Immediately after graduation, he entered The Johns Hopkins Medical School.

In 1889, William Osler came to Johns Hopkins Medical School from the University of Pennsylvania to help establish the university hospital and the school of medicine, the first class of which matriculated in 1893. His mark on medicine in the United States and throughout the western world was already much acclaimed. By the time Frank Sladen began his medical studies, Osler was engaged in professional activities so numerous, far reaching, and significant as to make it unlikely that young medical students of Sladen's class were privileged to be in his company to the extent enjoyed by the upper class members of the preceding ten years. Osler was then at the height of his American career, though heavily burdened and quietly considering a retreat to a less demanding, more contemplative environment. In 1904, he accepted the invitation from Oxford University to become Regius Professor of Medicine. Thus, the Osler-Sladen overlap at this time were the years from September 1902 to May 1905 when the master physician left for England. Since Sladen graduated at the top of his class in 1906, we can reasonably assume that he had been a wide-eyed student member of the admiring entourages that accompanied Osler on his bedside rounds. On one rainy day, according to Mrs Sladen, he even had the distinction of carrying Osler's rubbers. Surely, he had heard Osler in the clinical amphitheater and was greatly impressed by the clinical skill, personal charm, and worldly wisdom of this remarkable physician. Later, Sladen told his wife that Osler could often diagnose disorders simply by looking at a patient.

Dr Sladen's scholastic achievements surely had much to do with his appointment, on graduation, to serve as a resident under Dr Lewellys Barker who succeeded Osler at Hopkins. In 1913, after seven years in this position, Dr Sladen ventured west to Detroit. During this period, including Sladen's final year as a student, Osler made

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†Ed note: This paper has been adapted from an address which Dr Smith presented at the Henry Ford Hospital Medical Association Meeting in October 1982. The second meeting of the Frank J. Sladen Medical Society was held at that time also. The third meeting of the Society is planned for October 11, 1985, in conjunction with the triennial HFH Medical Association Meeting.

six visits to the United States and to Baltimore in particular. The first of these, December 1905 through January 1906, occurred when Sladen was deep in clinical clerkships. According to Osler's biographer, "the students at the Hopkins were beyond words thrilled. They followed on his heels in the wards and amphitheater." No doubt Sladen was among them.

The most extensive and significant visit was Osler's last. This took place in the spring of 1913 when Sladen was finishing his seventh and last year as Resident Physician. In May, 1913, he was included in a photograph of Osler and Barker, taken in the Hopkins' garden (Figure). The photograph some of you may recognize, since it had nestled on a bookshelf of my K-2 office as a much appreciated gift from Mrs Sladen following my professional services for her husband during his protracted and last illness. In his notations in Cushing's biography of Osler, Sladen referred to the picture as one "of Osler, Barker, little me. . . . I was Resident Physician."

These Baltimore sojourns were the last Osler would make, for he lived out the six remaining years of his illustrious life in England without another visit to North America. Mrs Sladen recalls the trip she and her young

physician husband made to England a few years after Osler's return there and Dr Sladen's high hopes for a visit with him. However, Osler was unable to receive them because he was suffering from a seige of pneumonia, to which affliction he was so prone and eventually succumbed.

Such were the few direct Osler-Sladen connections. Sladen's early readings of the Cushing and Thayer volumes on Osler can be considered the indirect connection. These readings were apparently quite influential. In Cushing's biography, Sladen has marked for attention the coverage of Osler's many early publications. He encircled and underlined Osler's reference to Carlyle's statement that "our main business is not to see what lies dimly at a distance, but to do what lies clearly at hand." When Osler recalled his early years, he said that "as soon as I got interested in medicine, I had only a single idea and I do believe that if I have had any measure of success at all, it has been solely because of doing the day's work that was before me just as faithfully and honestly and energetically as was in my power." In the margin, Sladen wrote: "Mine too - FJS," and he underlined the quotation. Although he often



Figure
Dr Lewellys F. Barker, Sir William Osler, and Dr Frank J. Sladen at Johns
Hopkins Hospital, May 1913.

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expressed regret that he had not published more, it was an understandable consequence of the heavy administrative burdens during his middle years when scholarly efforts generally are most fruitful.

Cushing attached great significance to Osler's role in the evolution of social service departments as agencies of hospitals. Sladen apparently concurred, since he heavily checkmarked these areas of Cushing's biography. In 1898, Osler encouraged individual medical students to visit the homes of patients with tuberculosis. Two or three years later, Charles Emerson, director of Osler's clinical laboratory, organized a group of medical students, and with missionary zeal, they made such studies. Next to Cushing's extensive and revealing footnote to these events, Sladen has penciled, "I was chairman of the group—1905,06." That a social service department was not established at Henry Ford Hospital until the early 1950s may reflect the fact that this institution served a patient population that had greater economic advantages from the flourishing automotive industry in Detroit. Surely, Dr Sladen must have brought to Detroit a strong persuasion about the place of social services in a community-oriented hospital.

A Sladen-notated slip marks the page of photographs of Osler at the bedside, and in Thayer's collection of his mentor's addresses and papers, Sladen has boldly underlined Osler's oft-cited counsel about medical practice: "Observe, record, tabulate, communicate. Use your five senses. . . . Medicine is learned by the bedside and not in the classroom." Those of us who had the opportunity to observe Dr Sladen at the bedside will surely agree that his approach to patients was in the best Osler tradition.

Above all else, Osler is remembered and revered for his grace, wit, and intellect, and for his professional skill, humanitarianism, and literary achievements. Just before he moved to England, he delivered three valedictory addresses, which are still widely read. The first is one that even today stirs the emotions of physicians and other professionals. In Cushing's account of this whimsical but highly provocative and widely misinterpreted address, Sladen has penciled the pages with bold x-marks and underlines. The dissertation dealt with what is known as "The Fixed Period," a title drawn from the novel by Anthony Trollope. Cushing described the lecture as dealing with "the dangers of staying too long in one place," particularly referring to the university or academic setting. Osler artfully cited ideas about which he had strong convictions, in particular the comparative uselessness of those above age 60. Sladen, apparently seeking balm in another provocative paragraph, underlined the proposal that one might take refuge in the midst of young creative minds. Osler advanced the view that the teacher's life should be

study until 25, investigation until 40, and professional practice until retirement at 60 on a double pension. I can only conclude that this was one area in which Osler's views, although philosophically shared by Sladen, were by no means translated into working guidelines. Nor have they, regrettably, influenced the professional lifestyles of most contemporary physicians who deny themselves new challenges and pleasures. So many professionals wither on the vine of a diminishingly significant daily routine. Our substantially increased life span, it seems, has extended the physical more than the intellectual capacity to perform without stumbling too often.

Dr Sladen displayed great interest in Osler's second valedictory address, "The Student's Life." He emphatically marked and underlined Cushing's analysis that Osler was unconsciously revealing himself and the things he stood for, and that this address should be read and reread by every physician. To have known the man, as Sladen did, must have added immeasurably to the lyrical quality of Osler's address, urging the physician "to have in his house the library, the laboratory, and the nursery—books, balances and bairns." The richly endowed Sladen library here at the Hospital testifies to his devotion to this Oslerian precept.

Dr Sladen left many marks of his interest in those parts of the Osler volumes that related to clinical teaching. Bracketed in pencil is the account of Osler's interest in the recent establishment, for the first time in America, of full-time clinical faculties at Hopkins and the Brigham. One cannot help but conclude that the attention Dr Sladen gave to these persuasions of Osler was a measure of his own interest and early efforts, in keeping with Will Mayo's counsel to Henry Ford, to establish at this Hospital a group of clinically productive, educationally committed professionals as full-time departmental chairmen, divisional heads, and associates. I further surmise that his early adopted policy of having the resident physicians serve for an extended period was patterned after the Osler-Hopkins model, which from personal experience, he knew and understood so well.

Of Osler's many notable contributions, none had greater value for the public welfare than his efforts to bring order and reason to the management of tuberculosis. These efforts were made in the period just before Sladen's medical school and residency years, and the early establishment at Henry Ford Hospital of a tuberculosis unit may derive from Osler's influence. If colleagues such as Dr Janney Smith were, in fact, the innovators, Dr Sladen undoubtedly was a strong supporter of this unique arrangement for a general hospital of that era.

From these historical fragments, the limitations of what can be woven into the Osler-Sladen connection are obvious. My account perhaps suggests a more direct, ongoing, and intimate relationship than actually existed. Surely, in his later thinking and actions here at the Hospital, Dr Sladen was influenced by his exposure to others of the distinguished Hopkins faculty. As few would deny, the Detroit scene differed greatly from that of Baltimore and other cities of flourishing academic centers. Henry Ford had been given counsel as to what general form the Hospital should take, and from what we know from the records, he had his own strong opinions. If Dr Sladen and those who joined him, also of Hopkins origin, came with strong convictions and high aspirations, then they must have made compromises to meet local conditions.

As a consequence of his Osler-Baltimore heritage, Dr Sladen endorsed and promoted the concept of a closed-staff general hospital with full-time, salaried clinicians selected from the foremost academic centers. He recognized the importance of structuring the professional staff to accommodate specialty disciplines without weakening primary medical services. He never questioned that house officer training was essential for the ultimate success of what was then a novel approach to medical care, especially as he was familiar with the structure and content of residency programs from the experience of his own training at Hopkins. The early introduction of house officers to outpatient medicine and, through principle and practice, the promotion of studied, sensitive bedside teaching were extensions of his Hopkins past. Although Dr Sladen regretted that he did not publish more, he supported research and writing by his colleagues when these did not disrupt their primary mission of caring for patients. It was a realistic compromise for an institution struggling for recognition and success in a less than encouraging professional environment. Few physicians ever matched Osler as a bibliophile, but Dr Sladen never slackened in his devotion to books, and the library in his name, so richly endowed, is the most fitting of tributes.

To close, no better words can be found than those of the man we honor in these periodic meetings of the Sladen Society. They are taken from his 1925 Foreword to the *Collected Papers by the Henry Ford Hospital Staff*, which covers the decade from 1915. The initial pages are devoted to the history of medical research, perceptively and delightfully written, and revealing of his knowledge

and appreciation of medical history. But I have chosen to quote from later paragraphs, for these speak of Dr Sladen's aspirations for the Hospital as it was emerging from its early years:

Three deep veins were exposed in the foundation work of this hospital. The first was the desire to build a hospital—which means buildings, of course, but much more: a staff and balanced resources, and . . . a clientele which is benefited by these and imbued with confidence in these. . . . The second was research, medical research. . . . The third was medical teaching. The present-day handling of interns, second- and third-year men, has been in the form of a curriculum for several years. This has been inspiring, but new zest is added by the teaching of nurses, recently begun. . . .

The initial strength of the institution must perforce be gained by service to the patient. No amount of money could accomplish this—nothing, in fact, but the moments spent in contact with this or that doctor. Even then, in a large institution of this sort, it is on last analysis the individual patient in the presence of the individual doctor who determines the strength, the success of the whole. . . . The accumulated individual successes make for a successful group, and the compounded group success constitutes the strength of the institution.

And his concluding paragraphs read as follows:

Everyone is aware of the stimulation to better individual effort which ensues. Combined, the efforts, then, of the Hospital to benefit mankind are fulfilled in these contributions, major or minor, as much as in the efforts to restore health or prevent disease.

In whatever measure they represent observation, thinking, comparison, testing, concluding, they are the first harvest and a pride! May they accomplish Pasteur's desire to contribute "in some manner to the progress and welfare of humanity" in as much measure as they are colored with the imagination, ingenuity, application, and spirit of disinterested service of the authors.

Echoing the wise, humane precepts of Osler, these quoted insights into the heart of medicine form the basis of Dr Sladen's contribution to the Henry Ford Hospital we know today.

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