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Joseph A. Johnston, MD: An Appreciation

Gordon Manson, MD*

EDITOR'S NOTE: Over the years many fine and distinguished physicians have helped make Henry Ford Hospital one of the leading medical institutions in Michigan and throughout the United States. With this issue we begin our tribute to those "pioneers" who have played an integral part in the history of Henry Ford Hospital.

At the first meeting of the Henry Ford Hospital Joseph A. Johnston Pediatric Society, October 11, 1985, Dr Gordon Manson honored the late Dr Johnston. The following is Dr Manson's personal presentation and tribute to his long-time friend and colleague, Johnny Johnston.

Joseph A. Johnston, MD, always known to his friends as Johnny, came to Henry Ford Hospital in 1927 as a disciple of the late Grover F. Powers who became Chairman. After a year, Powers realized that he did not like Detroit and returned to Yale where he spent the rest of his highly productive career. Johnny became Chairman in 1928, a post he held until 1966.

In 1929 the Depression hit, and for many years afterward socioeconomic conditions in Detroit were bleak. Johnny, a devout Roman Catholic, immediately involved himself in the good works of the St. Vincent de Paul Society (later incorporated into Catholic Social Services). This involved material and medical care to the victims of the Depression. Michigan Children's Aid Society and other social agencies became involved. About this time Johnny arranged for needy children and young people to be cared for in the Department of Pediatrics at Henry Ford Hospital. Agencies were to pay the hospital \$1.00 per child per day for care, whether it was for a well child check with immunization or an admission for major surgery. This constituted a tremendous contribution to the health of children and young people in the metropolitan area by Henry Ford Hospital which is known to very few. Michigan Affected and Afflicted Childrens' Acts also helped considerably. This arrangement ended about 1966 with the beginning of Federal programs for which we are all now paying.

Johnny's research efforts produced 52 publications and countless presentations before research societies and pediatric groups. His approach was simple. He performed nitrogen and calcium balance studies on hospitalized pediatric patients subjected to a number of variables. He defined for us the degree of positive nitrogen and calcium balance in children and adolescents compatible with health and normal growth (1).

In 1952, he published a book reporting on metabolic studies in childhood and adolescent tuberculosis and the relation of clinical course to nutritional state (2). These studies clearly demonstrated the role of protein intake affecting the favorable

outcome of the disease in an era before tuberculocidal drugs. To the writer, these studies seemed as important as Wallgren's studies (3) which showed the natural history of the disease in childhood, though both studies were soon eclipsed by the development of tuberculocidal drugs. Both Johnny's and Wallgren's studies could not be duplicated today for several reasons: the minimal incidence of childhood tuberculosis, effective tuberculocidal drugs, the great cost of studies, and the fact that the investigator would have several committees looking over his shoulder. In 1957, Johnny and Thad Joos published a 20-year follow-up on 200 juvenile diabetic patients (4). They looked carefully for the development of nephropathy and retinopathy. That good diabetic control was associated with a decreased incidence of these dreadful complications of this disease was clearly shown. In the intervening 30 years, other published studies have confirmed this principle.

Rheumatic fever was a lifelong interest of Johnny's, dating, I am sure, from the severe disease he saw in the Children's Hospital in Boston and at Yale New Haven Hospital, long before the development of sulfonamides. In 1955, he published a study of rheumatic fever patients comparing the outcome of the disease with prior nutritional status as reflected in the patients' plot on the Wetzel Grid. Statistical analysis by the late Ashley Weech clearly showed that prior good nutritional status improved the long-term prognosis for the rheumatic fever patient. Most of these patients antedated the steroid era. Johnny's further studies showed that steroid treatment of rheumatic fever patients produced negative calcium balance related to urinary loss (5). Later work demonstrated that additional intake of vitamin D and one and one-half quarts of dietary milk per day produced positive calcium balance in these patients. This work was published in 1965 (6).

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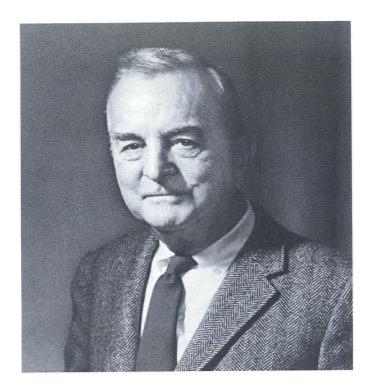
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Joseph A. Johnston, MD: 1897-1982.

While Johnny's contributions on tuberculosis, juvenile diabetes, and rheumatic fever seem to the writer the most important today, he was busy in many other areas. These included nitrogen and calcium requirements in children age 4 to 14 years (1); metabolism in pregnancy (7); hormones as related to nutrition (8,9); adolescent nutrition (10); and the effects of chronic infection (11). With the exception of a few small outside grants, his work was predominantly supported by Henry Ford Hospital.

Johnny's professional activities, in addition to investigation, were many. In 1933, he was President of the Detroit Pediatric Society. He was a founding father of the American Board of Pediatrics in 1933, later Vice President, and he long served as an Official Examiner for Oral Examinations. He was for years a member of the American Pediatric Society and was past President of the Society for Pediatric Research.

Though his professional achievements were considerable, he was more than that-he was a man of many facets. He took a gourmet's delight in fine food and drink and in the martini (3.3:1). He was an excellent painter of natural scenes, especially of his beloved Sable Island in Lower Saranac Lake. The writer had the pleasure years ago of going fly-fishing for bass off Sable Island with him and his son, Jerry. As a fly fisherman, Johnny was a symphony of motion. He connected and got his fish. He was a bibliophile of the first order and his home was filled with good books. Never did the writer visit his home without coming away with a couple of books he thought I should read. His taste was impeccable. His presentations at the Prismatic Club were always literary in nature and delightful.

Some years ago the New York Times published a letter to the Editor written in Latin, which I translated after a fashion. I handed it to Johnny who held it at arm's length—he never wore reading glasses-and he gave an instant and accurate sight translation.

And so I end my sketch of a great figure in American Pediatrics and my good friend . . . Johnny Johnston.

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