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#### Recommended Citation

Yale University. School of Medicine, "Yale Medicine : Alumni Bulletin of the School of Medicine, 1968-1969" (1968). *Yale Medicine Alumni Newsletters, Bulletins, and Magazines*. 3.  
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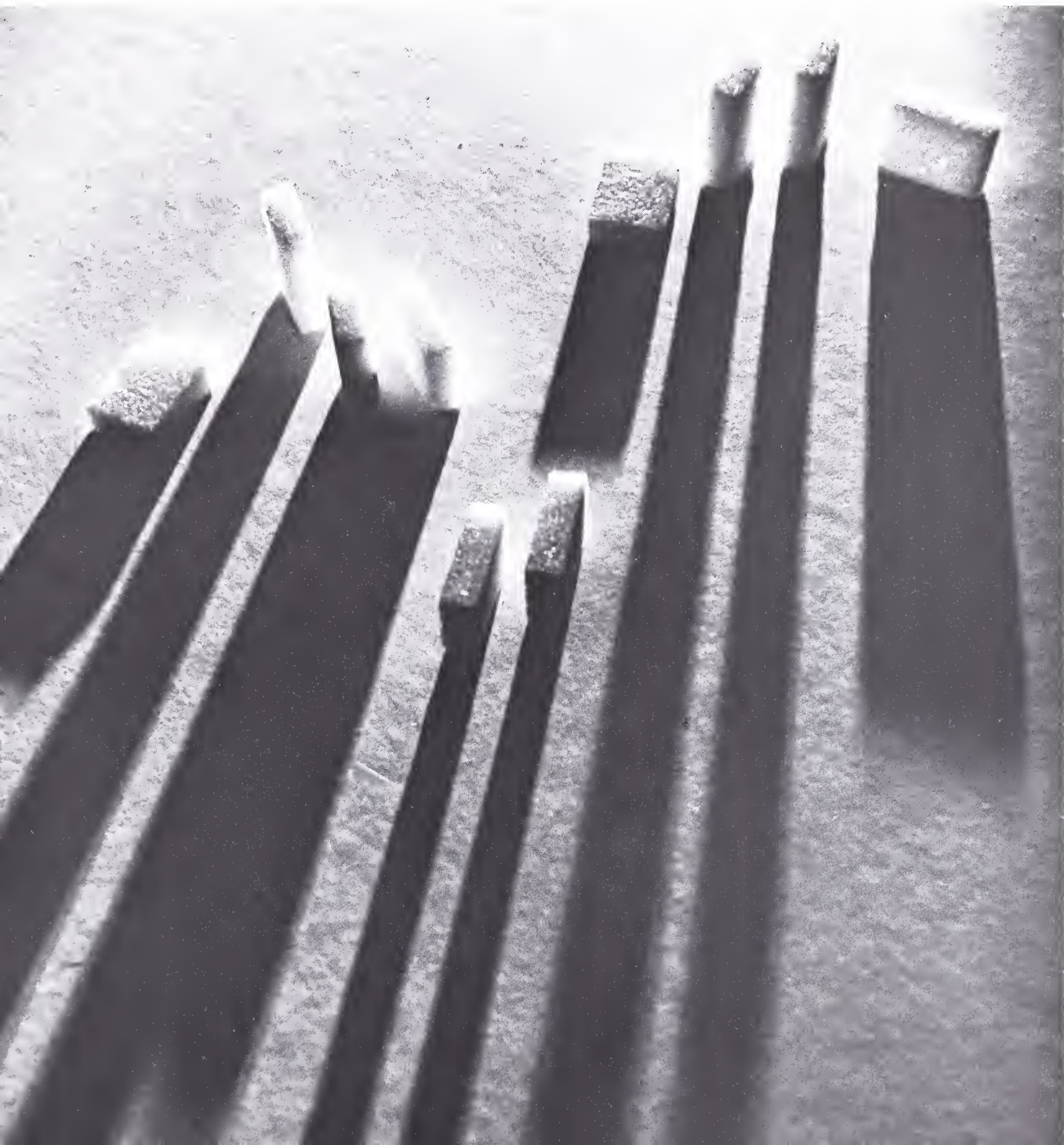




# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE/WINTER 1968

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*COVER: Hallucinogenic drugs cast long shadows in their medical and social implications. LSD sugar cubes, photographed by Robert Perron, introduce an article on research by members of the Department of Psychiatry, beginning on p. 2.*

# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / WINTER 1968 / VOL. 3 NO. 1

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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# Research into Hallucinogens

by Rita D. Berkson

Until a very few years ago, mind-distorting drugs were familiar in this country only to anthropologists who studied American Indian or Eastern cultures, or to literary critics interested in the lives of certain artists (Coleridge, for example, whose fantasy poem "Kubla Khan" was written during an opium trance). Americans have always utilized stimulants such as caffeine, tobacco, and alcohol, but rarely hallucinogens. As a result, there is only a small body of literature in this country dealing with the hallucinogenic drugs, and what has been written in Eastern countries has seldom been translated or made applicable to American society.

But the circumstances are changing. Psychedelic drugs, ranging from marijuana to LSD, are rapidly becoming more accessible and acceptable among high school and college students, hippies, and even middle-class professionals. Since 1960, when the infamous experiments of Timothy Leary and Richard Alpert at Harvard attracted national attention to the "mind-expanders," their use has increased dramatically. Correspondingly, psychologists and psychiatrists have stepped up study of the effects of psychedelic drugs, both medically in individuals and socially within student sub-groups.

Three hallucinogenic drugs are most widely used by students: marijuana, derived naturally from the hemp plant (although recent reports indicate the possibility that marijuana may someday be easily synthesized and available through the laboratory); mescaline, most commonly taken in the form of peyote buttons; and LSD, a relatively new synthetic drug and by far the most potent of the three. First synthesized in 1938 at the Sandoz Research Laboratories in Switzerland, LSD's psychedelic effects were discovered five years later by a researcher who accidentally consumed a minute amount and experienced a "not unpleasant inebriation," consisting of illusions and hallucinations.

The central experience under LSD is very similar to experiences reported about psychosis: a reaction to one's environment as if it were totally unfamiliar and overwhelmingly vivid ("disrupts habituation to sensory perceptions"); a sense of knowing and learning things as if for the first time ("loss of integration of present with past"); hallucinations and delusions ("confusional states, dreamlike revivals of past traumatic events or childhood memories"). In some cases, these psychotic-like symp-

toms remain for days or even months following the drug-taking.

Aldous Huxley, who in 1931 in *Brave New World* created soma, a drug much like LSD, experimented with mescaline in the early 1950s and wrote about it in *Doors of Perception*:

*Place and distance cease to be of much interest. The mind does its perceiving in terms of intensity of existence, profundity of significance, relationships within a pattern. I saw the books, but was not at all concerned with their positions in space.*

*A rose is a rose is a rose. But these chair legs were chair legs were St. Michael and all the Angels.*

*What the rest of us see only under the influence of mescaline, the artist is congenitally equipped to see all the time. His perception is not limited to what is biologically or socially useful.*

Experimentally, LSD has been used in therapy, most recently in the treatment of narcotic addicts at the U.S. Public Health Service Hospital at Lexington, Ky. Its most dramatic medical use has been in treatment of terminal cancer patients. The drug not only relieves pain more effectively than morphine, but it seems to change the mode of pain perception: "The pain is here, but I'm somewhere else—nothing really belongs to you, not even your pain."

LSD is also being used to explore brain function and the chemical bases for mental illnesses. And for the past ten years the Yale medical school has been a center for research about the function of the brain.

Daniel X. Freedman, until last year professor of psychiatry at Yale and currently chairman of the department of psychiatry at the University of Chicago, established a laboratory of psychopharmacology here in 1958, with the intent of bridging the gap between biochemistry and psychiatry. Dr. Freedman's strategy for research was to experiment with drugs, such as LSD, which induced behavioral as well as chemical changes as a way of understanding the connections between chemical and behavioral processes that occur naturally in psychiatric disorders. LSD, he proposed, should be used to provoke model psychoses in animals which, though not identical to naturally occurring disorders, could still offer a tangible grip upon processes and mechanisms related to psychotic behavior.

Dr. Freedman attempted to answer the question of how biochemical changes could produce a psychotic state, and for the years 1958-65 developed at Yale one of the few sustained bodies of research in that field in the country. He interested others in the pursuit of the mys-

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*This review of research by Yale psychiatrists is reprinted from the November 1967 issue of Yale Alumni Magazine, of which Mrs. Berkson is associate editor.*



Dr. George K. Aghajanian

teries of hallucinogenic drugs, including medical students and residents who are still working here. In his own lab, Dr. Freedman established the fact that LSD affects a particular chemical in the brain, known as serotonin, and that there was a direct relationship between the period of time that the drug remained in the blood and the brain and the behavioral effects it caused in animals.

For the past two years, research at the Connecticut Mental Health Center has concentrated on the effect of LSD on the brain, led by George K. Aghajanian and Michael H. Sheard, assistant professors of psychiatry and both students of Dr. Freedman. They are now studying the specific relationships between LSD and the chemical serotonin, whose precise function in the brain is still unknown.

It has long been recognized that LSD and serotonin are structurally similar, and that LSD, when injected into an animal, interacted with serotonin. The most recent finding of Drs. Aghajanian and Sheard is that a specific set of nerve cells in the brain release serotonin naturally, and the chemical then acts upon other nerve cells. They have also found that by stimulating those nerve cells to release more serotonin, the behavioral effects in rats are similar to the behavioral effects of injecting LSD. In other words, an overactivity of serotonin in the brain seems to result in a hyper-reaction to otherwise ordinary sensory stimuli, the condition found in both psychedelic states and in certain psychoses.

Complementary research is going on at the psychiatric wards of the Mental Health Center, where Malcolm B. Bowers, assistant professor of psychiatry, is studying the breakdown products of serotonin in the spinal fluid of psychotic patients. His initial findings indicate that psychotics have a serotonin metabolism different from that of normal people. The implications of both this and the LSD research are far-reaching for defining the biochemical correlates of certain psychiatric disturbances and perhaps for finding a chemical measure for the presence of psychosis in man.

One highly controversial field of basic LSD research is the drug's possible genetic effects. Some very limited preliminary studies have indicated that LSD may be responsible for an increased rate of chromosome breakage in people who have taken the drug, a situation that could result in anything from leukemia to genetic defects in the second generation. This month a massive, year-long study was undertaken at the Yale-New Haven Hospital under the direction of Herbert A. Lubs, a geneticist and assistant professor of medicine, and Francis H. Ruddle, assistant professor of biology. The study will determine





*Dr. Malcolm B. Bowers*

the chromosome pattern of every baby born at the hospital during the year. Among the things the doctors are looking for are the drugs, including LSD, taken during pregnancy and their effect on the babies' chromosome patterns.

In addition to exploring the chemical aspects of hallucinogenic drugs, doctors have become involved in the psychological and social implications of large numbers of people using such drugs. In 1962 the mental hygiene division of the Yale Department of University Health became aware of the fact that some of its patients were taking one or another hallucinogenic drug. Herbert D. Kleber, now a staff psychiatrist at the Connecticut Mental Health Center and an assistant professor of psychiatry, was completing his residency at Yale with a year at DUH in 1963-1964. Dr. Kleber undertook a study, of 17 undergraduates and four graduate students who had used hallucinogens, to uncover the pattern of drug use on campus and to trace its effects on students' lives.

In a report published in 1965, Dr. Kleber concluded "Although a number of the subjects had deep-seated psychopathology, others seemed quite typical of the 'average' college student at this school. Certainly the sample did not bear out the tendency of both the medical and lay press to label all nonmedical users of these drugs as being 'longhairs and beatniks.' Likewise, contrary to popular opinion, it did not appear that these agents were being used for 'kicks.' Many of the students . . . were looking for lasting beneficial effects that were beyond the momentary experience."

*Dr. Herbert D. Kleber*



Dr. Kleber evenly divided the 21 students in his study into three groups: unstable students, with emotional problems that interfered seriously with effective functioning, whose drug use was an attempt to solve these problems; stable students, relatively unconcerned about emotional difficulties whose initial drug use came from their curiosity about the perceptual effects and from the influence of friends; and intermediate students, with emotional problems which were not, however, interfering with functioning.

Twenty-four per cent of all the students under study were judged to have adverse effects, including anxiety reactions, persistent hallucinations, worsening psychiatric symptoms and psychological habituation. The adverse effects tended to be limited to the unstable group.

Forty-eight per cent of the students claimed the drug had improved their lives, in interpersonal relationships, increased self-understanding, increased aesthetic appreciation, and a better understanding of the world around them. Sixty-two per cent planned to continue drug use.

The first study of Yale drug experimenters probably provided an accurate indication of the motivations for drug-usage and also an accurate forecast of the attraction such drugs would continue to have for students. Two years later, because of "the current wave of unsupervised hallucinogenic drug use," Dr. Kleber isolated five of the students who had had adverse reactions from his original 21-student study—presumably all of them from the "unstable" group—and published case studies on them. He documented the frightening delu-

sional reactions that these particular students had, and also indicated the "serious identity conflicts" that all five had been suffering long before they came to drugs. In such cases the adverse reactions, he said "might be due more to the course of the pre-existing pathological state than to any new stress from the drug."

Very few of the studies done on the social and psychological implications of psychedelic drugs attempt to document the positive, pleasurable claims made on the drugs' behalf. Of those that have been made, most are inconclusive and point up the difficulties of either proving or disproving the subjective benefits which LSD allegedly brings.

Leonard S. Zegans, assistant professor of psychiatry, when he was a resident at the University of Michigan Medical School set out to substantiate the claim that hallucinogens free the imagination and enhance creativity. Nineteen graduate students were tested on standard psychological tests for creativity, fed a dose of LSD, and two hours later tested again. The tests involved word associations; mosaic tile designs that were judged for imaginative use of material; free association, in which capacity to examine internal perceptions as well as observe the external environment was tested; and ability to perceive figures hidden in a complicated line drawing.

The study concluded that LSD does not improve the creativity of *most* people, except those "who had best handled real-life stress situations, most thoroughly and productively assimilated personal experiences, and had the least need to suppress or deny instinctual material."



Dr. Leonard S. Zegans



In other words, LSD did not expand creativity except for those who appeared to be already creative and productive, who *did* test higher under the drug.

Elsewhere, another experiment, much less structured, was conducted in non-laboratory surroundings with creative artists, who reported subjectively that under LSD they *felt* more creative. Experts dismiss that experiment for its lack of scientific controls.

Another Yale study also focused on pathological reactions to psychedelic drugs, probing the unconscious motivations of three students, all of whom received intensive psychiatric care following a drug experience. Conducted in part by Dr. Bowers, the study involved clinical interviews, psychological tests, and the students' own accounts of their motives and experiences with the drugs "in an attempt to understand the fabric of unconscious motivation and personality structure" of drug-users.

The study found a common thread running through the personalities of the three students: a wish for fusion and merging with nature and other people. The psychiatrists described such wishes as "unsatisfied longings for interpersonal closeness"; "fusion fantasies"; and "strong, ungratified wishes for the closeness and intimacy of earlier developmental periods." They also saw a similarity between these feelings and those described by Kenneth Keniston as a profound sense of alienation among some college students. The distrust and lack of commitment that Keniston found in a sector of college students would be precisely the reasons for at least some of them to turn to psychedelic drugs, according to the Bowers study.

Over 1,000 technical articles in medical journals have been published since the discovery of LSD. Numerous journalistic and pseudo-scientific articles have appeared in the popular press since college students discovered LSD. The problem remains, however, that there is still very little hard information on any of the aspects of hallucinogenic drugs—biochemical, psychological, or sociological. During the 1950s, experimentation was haphazard and disconnected; during the middle '60s, experimentation has been limited by the legal restrictions on access to LSD and by the moral compunctions of some researchers against administering the drug to humans.

There is only one legal source of LSD in this country—a joint committee of the Food and Drug Administration and the National Institute of Mental Health. Requests for the drug for research projects are carefully screened, and some scientists have reported difficulties in obtaining any.

Part of the difficulty in doing research on hallucinogenic drugs lies in the problems of designing the experiments. Different people have enormously diverse reactions to the same drug, and even one person may have different reactions at different times. The settings for a drug experience may be decisive in determining the nature of the experience, whether it is pleasant or terrifying. Those experiments conducted in comfortable, music-filled surroundings have been questioned on their lack of scientific controls, but on the other hand, the sterile atmosphere of a laboratory may militate against anything positive happening to someone under the influence of a drug. Likewise, the mood and previous psychological state of a person may determine his drug experience, and medical studies of student drug usage tend to be overrepresented by the people who have sought psychiatric help.

A more basic difficulty, much harder to substantiate, is the attitude and even the language of the researchers involved in LSD experimentation. Many physicians maintain a somewhat proprietary air toward the administration of drugs and condemn the use of drugs for purposes other than medical ones. Doctors talk of drug "abuse," and by that they mean any use of drugs that is not medically supervised. When the word becomes part of the popular language used to talk about psychedelic experiences, however, it connotes everything from overdoses to giving drugs to children. In general, the language of psychiatry, which has necessarily developed to cope with deviancies and abnormal impulses, defines the motives for drug "abuse" mostly in terms of maladjustments and infantile longings. This is not to say that people who use drugs may not, in fact, be severely disturbed and in need of psychiatric help. It is only to say that if one drug-taker were not disturbed, and had a positive psychedelic experience, the psychiatrists would have little in the way of precise, scientific language to use to describe it.

Sociological research into psychedelic drugs thus far has produced a body of largely inconclusive studies. Future research, moreover, rather than grappling with questions of drug advantages, is likely to focus first on the dangers of psychedelic drugs, for that is where public concern lies, that is where the researchers have the most extensive language and training, and that is where federal money and supplies of LSD will probably go.

# Buriram: A Different View of Medicine

by Laura A. Smith

Sometimes parents in Thailand must knowingly let a child die because of the economic and physical difficulties involved in taking the child to a doctor.

It was to this part of the world, far from the sophisticated diseases and treatments of urban North America, that I traveled this past summer. My destination was Buriram Hospital, situated in the middle of the arid plateau of northeastern Thailand.

For a Thai, going to a hospital is not like going to the doctor or a clinic in the United States. It usually means an all-day trip by foot or the few truck-converted buses that bounce along the few roads—enough to make the strongest man feel ill. It means leaving the rice fields and giving up a day's pay (ten Baht or 50 cents). If the doctor wants to treat, it means losing more days, paying replacements and thereby losing an enormous proportion of a meager income. For a woman, it means leaving

seven or eight children as well as the fields. If a child is sick, it is worst of all, for by custom both parents must leave their work to go and live in the hospital with the child.

Also, before a Thai comes to a doctor, he must try home remedies, mainly dirt and leaves, but cow dung is supposedly very potent. It takes the doctor twice as long to clean out the cuts as to sew them up. Furthermore, if they are near a larger town, the people can buy anything—streptomycin, chloramphenicol, diuretics, and other medicines from the local drugstores without a prescription. The druggist will tell them what to get if they don't know. And finally there are the quacks who give the patients just what they all want—injections. Unfortunately these not uncommonly are followed by deep abscesses secondary to the unsterile needles.

Because of these conditions, even the most acute in-

*The author with some young Thai friends.*





*"I could do nothing to help the four-year-old boy who came to me with a retinoblastoma which was as large as the child's head . . ."*

*"For a Thai, going to a hospital is not like going to the doctor in the United States . . . It means leaving the rice fields and giving up a day's pay."*



fections are four or five days old by the time the doctor sees the patient. Some of my hardest moments came when parents would bring a child in with his eyes matted shut saying they had been that way for about five days. I wanted to scream at them: "Why didn't you bring him sooner?" But then, how could they know that five short days would cut my chances of saving the eye to practically zero.

I could do nothing to help the four-year-old boy who came to me with a retinoblastoma which was as large as the child's head and had completely destroyed half his face in its six months of growth. I actually did ask these parents why they had waited so long to bring the child to a doctor. The father looked at me as if he could

not understand my question and merely said: "He is the ninth child. I had no time to come."

It is exasperating when you find acute problems too late to correct something which would have been reversible, but far more amazing are the long-endured chronic problems. Most complaints have been present for two to ten years. A kidney stone can get amazingly large in ten years if one can really put up with the pain for that long, and the Thai do. A tumor is easy to diagnose for you can see it across the room. The patient has been watching it grow for some time before he shows it to the doctor. Most Thai don't know that tumors kill, and if the growths don't cause too much pain, they are just lived with.

When a patient eventually comes to Buriram Hospital, he can receive good care. But relatively few come. For Thailand, it is amazingly well-equipped, mostly thanks to its energetic director, Dr. Suchint Phalakornkule, who has acquired much American and Japanese aid, as well as substantial contributions from the townspeople.

The hospital has 100 beds, but usually has about 250 patients, some sleeping two or three in a bed, and some on the floor. The staff numbers six Thai doctors, all of whom speak English well, and I quite comfortably fell in as doctor number seven. In Thailand all doctors do

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*Miss Smith is a fourth-year medical student at Yale. As recipient of a Smith Kline & French Laboratories Foreign Fellowship, she spent eleven weeks in the summer of 1967 at Buriram Hospital, Buriram, in northeastern Thailand. Previous Yale recipients of SKF Foreign Fellowships were Ronald A. Dierwechter, '61, and Robert McRoberts, '66, both of whom worked at a mission hospital in Ganta, Liberia.*

*"About 6:30 a.m. we would load the blue Land Rover . . . We went bumping along in continual fear of being stuck in a mud hole."*



*"Two hours and 40 kilometers later, we would . . . begin to see the 100 to 300 patients who had already begun to accumulate."*



everything, and I too became a general practitioner in the broadest sense of the term.

My routine on several days of the week would be to join one other doctor in the outpatient department and together we would see about 150 patients. Our hours would be spent writing out prescriptions, sewing lacerations, doing pelvics, taking biopsies, checking term fetuses, doing circumcisions and a wide variety of other tasks.

Some of the nurses had English medical, and purely medical, vocabularies so that they could act as interpreters when histories were taken, and I soon acquired a Thai medical, and purely medical, vocabulary so that I could get routine histories. A physical examination in Thailand is seldom so subtle as to require words.

Other days of the week I would spend with one of the doctors stationed on one of the three wards: men's, women's and children's, and obstetrical. We began first thing in the morning seeing the 60 to 70 patients, finding out how many pre-operative cases had escaped during the night, writing routine hookworm clean-outs, and doing other indicated medical management.

Then I went to the operating room to become general surgeon, neurosurgeon, or urologist depending on the cases for the day. Two or three operations usually filled

out the morning and early afternoon. After that it was time for as many of the doctors as possible to get together and by majority vote decide what the day's X-rays showed.

We made a check of the wards to see what the outpatient department had sent in for the day, institute any further therapy, set a few fractures and somehow, I have yet to understand how, stop for a glass of iced coffee on the way home about 4:30 p.m.

In spite of the tremendous caseload, life was amazingly relaxed, in keeping with the Thai philosophy that all business must be mixed with pleasure. The nurses are well trained in providing practically continuous iced coffee, a necessity in the Thai heat. I was at first, as an American schooled in speed, efficiency, and the necessity to document every move, slightly frustrated by the leisurely pace. But by the end of three months I had painlessly slowed to their pace and found the thought of switching back into third gear rather gruesome.

The pace quickened markedly on Wednesday when part of the team took off for the smaller village public health clinics. About 6:30 a.m. we would load the blue Land Rover given to the hospital by the Japanese government with boxes of all the essential drugs and necessary examining equipment. Then one nurse and one



supply orderly, one other doctor and myself, plus the driver would start off down one of Buriram province's two main thoroughfares.

We went bumping along, covered with dust, and in continual fear of getting stuck in a mud hole. Two hours, and 40 kilometers (25 miles) later, we would arrive at the public health station, unload, set up shop and begin to see the 100 to 300 patients who had already begun to accumulate. The patients were the same as in the outpatient department. They had every kind of illness but there was one big difference: you couldn't send them down the hall for an X-ray or a white count or a stool exam.

Iron, vitamin B-1, Alcopar, mixture of alkali, tincture of belladonna, thiosulfadiozine, penicillin and chloramphenicol were the main stock in trade with iron and vitamins leading by a long shot. And there was always the plea, "Please try to come to the hospital where we can better help you," although we knew that few would ever be able to come.

In Thailand the routine shot for diphtheria, whooping cough and tetanus does not exist and I was soon exposed to the wicked triad. My first day the nurses brought in a small boy completely rigid with his mouth clamped shut. After three weeks of antitoxin and sedation the convulsions had decreased and he was beginning to show some improvement. Then, as so often happened, one night the parents decided that my tetanus patient was well enough and took him away--I don't know where. Whooping cough was common and I soon learned to recognize the whoop. The slow-moving Thai can match the speed seen in any American emergency room when the diphtheria patients arrive. Within 15 minutes they are rushed to the operating room, have tracheotomies performed, and are on their way to join the other children with their tracheotomies in the diphtheria room. They don't lose very many, but I'll stick with the DPT shots.

The next lesson to be learned after the terrible triad is the Thai fever work-up. The key question to the patient is usually "where do you live?" or, freely translated, "which mosquito bit you?" The diagnosis is between malaria, Thai hemorrhagic fever (a dengue-like virus), and typhoid fever. If no malaria parasites can be seen on repeated blood smears, it is a matter of giving the patient chloramphenicol and waiting it out for intestinal perforation, sudden unexplained death, or recovery.

Luckily, however, most patients are not this sick and the most common chief complaint is chronic abdominal pain. The first thing that must be ruled out is parasites,

for 80 per cent of the population have them. The most common are the hookworms whose victims can be easily picked out by their marked pallor, or their hemoglobin level of one, two, or three grams. Luckily the hookworms can be killed, but the patients with liver flukes are less fortunate; the flukes often lead to cirrhosis, hepatomas and a jaundiced death. The third large group, tapeworms, like the hookworms, can be cured; however, in most cases only to be replaced by a new crop.

If one can rule out parasites, the next best bet for abdominal pain is the kidney or bladder stone. These have usually been present for some time. The cure is surgical removal, and supra-pubic cystostomy for removal of bladder stones is the most frequent operation performed in Buriram Hospital. Unfortunately renal stones are often bilateral. Operation is also frequently complicated by the chronic blood loss from the involved kidney. Trying to get the patient's hemoglobin above four grams so that we could operate was often a chore. I found it quite frightening to do a nephrectomy on a patient with four grams of hemoglobin and only one or at most two units of blood available, but we didn't lose one operative patient.

Among the other patients I saw, general malnutrition and vitamin deficiencies were common. Beri-beri, heart disease and neuritis were the most prevalent, and it was amazing to see a bedridden, totally-crippled patient up and walking about after three weeks of vitamin pills.

Tuberculosis of every organ, leprosy, snake bite, dog bite, rabies, abnormal deliveries, water buffalo gore wounds and scalp lacerations from jute knives were among the many other medical problems I observed in Buriram.

But I never saw a patient with a stroke or lung cancer. The diseases of affluent civilization have not yet reached Thailand, and doctors there are kept busy enough without them.

## Music and Metabolism

This is the time of year when chiefs of clinical services must screen hundreds of internship applications. If Yale's chairman of medicine were a superstitious man—which he is not—he might do a little extra agonizing over every applicant whose name begins with B.

Dr. Bondy's immediate predecessor in the chairmanship was Dr. Beeson, who was preceded by Dr. Blake, who in turn was preceded by Dr. Blumer; and it was Dr. Blake who 26 years ago wrote to Philip Bondy, then a Harvard fourth-year medical student, saying, "The chances of a place for you here are so slim that I suggest you apply elsewhere for an internship." So young Dr. Bondy went instead to the Peter Bent Brigham Hospital to begin the career in which he was to become one of the nation's foremost medical scientists in the field of endocrine and metabolic diseases.

A native New Yorker, he was born December 15, 1917, and grew up in suburban New Rochelle where he attended public schools. When he was 12 years old, two events of importance to his future took place. First, he had his appendix out at Mt. Sinai Hospital in New York and was fascinated by the experience. He developed a strong attachment to his surgeon, Dr. Harold Neuhof, and decided that he too would become a doctor. The other significant development that year was his discovery of the cello.

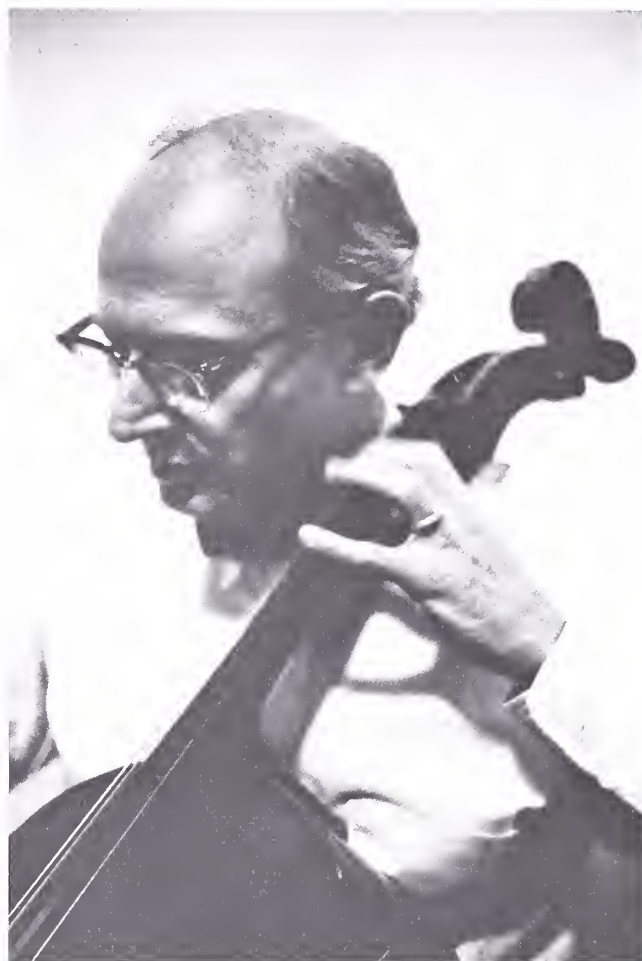
For Dr. Bondy, playing the cello is not simply a relaxing pastime. "It's participating in a creative act," he points out. "Most enjoyment of the arts is passive. You look at paintings, read books, see plays, and the experience washes over you. But in enjoying these artistic works you don't help to create them as you do when you play music, even though someone else has written it."

He is a capable amateur cellist and is self-disciplined about study and practice. Since he came to Yale 16 years ago he has played regularly in a medical school quartet and is currently the senior member in length of participation. Over the years this chamber music group has included medical students and fellows as well as faculty members. For a time two quartets existed simultaneously, each having its own players for first and second violins and viola, but sharing Dr. Bondy who was cellist for both.

The quartet plays mostly Mozart, Haydn, and Beethoven, but when he plays alone Dr. Bondy likes to do the Bach suites. There are six of them for solo cello and they are considered technically difficult—a challenge he enjoys. "Playing an instrument is something you can't just pick up and drop from time to time the way you might, say, painting. The mechanics of making music

Faculty Profile: Philip Kramer Bondy, M.D.

C.N.H. Long Professor of Medicine



are too difficult to retain without constant practice." Having started cello lessons at the age of 12, he continued them through high school and at college where he played in the Columbia University Orchestra and was also its manager. While at medical school he played for a brief time in the Boston Business and Professional Men's Orchestra, but took no further instruction after college until 1962. That year, during his sabbatical, he started taking lessons again. "It's one way to stay honest," he comments. "You can fool your friends, and even yourself sometimes, but you can't fool your teacher."

Dr. Bondy's father, a lawyer who is practicing today at the age of 81, took both his bachelor's and law degrees at Columbia University and it was logical that his son should choose the same school. There the younger Bondy displayed a variety of interests and talents in addition to music. He fenced in junior varsity matches, was editor-in-chief of his class yearbook, and was elected to Phi Beta Kappa. With his A.B. degree, awarded in 1938, he received the Edward Sutcliffe Brainard Prize.





*His decision to become a doctor was made when he was 12.*

When he started medical school his intention was to go into either surgery or family practice, but at Harvard he found himself increasingly drawn to internal medicine. Speaking at a meeting of the Boyleston Society, he attracted the attention of Dr. Fuller Albright, chief of endocrinology at the Massachusetts General Hospital, who further encouraged his interest.

His introduction to clinical work came unexpectedly after his second year when he spent the summer working with his old friend from the appendectomy, Dr. Neuhof at Mt. Sinai. "It wasn't exactly a job," Dr. Bondy recalls. "He gave me reading to do and I followed him on ward rounds. In the middle of the summer a flu epidemic hit, and half the house staff were flat on their backs. I was put into service as a substitute intern. Having no clinical experience, I was treating patients with all kinds of disorders and the result was pretty much of a shambles. I made a lot of mistakes but luckily there were no real catastrophes."

Apparently Mt. Sinai Hospital approved of his performance in the emergency because two years later he was offered an internship there. But the offer came after he had decided on the Peter Bent Brigham Hospital in Boston, to which he went in the spring of 1942.

The teachers who most influenced him toward a career in endocrinology, he notes in retrospect, were Dr. Albright, Dr. George Thorn under whom he interned at Brigham, and the late Dr. Frank L. Engel with whom he worked as a resident at Grady Memorial Hospital in Atlanta, Georgia. His move to Atlanta in 1943 was at the invitation of Dr. Eugene A. Stead whom he had known at Harvard and who had recently been appointed chairman of medicine at Emory University. The invitation was undoubtedly merited by Dr. Bondy's qualifications, but a further consideration was the need for residents who were not about to be drafted.

Dr. Stead had gone to Atlanta with ideas and programs that were perhaps too advanced for the county

medical society; at least this was one explanation for the fact that all his new appointees were drafted soon after they arrived. Dr. Bondy—with a lung scar resulting from tuberculosis and with one deaf ear—seemed like a completely safe bet. His draft board in Massachusetts had told him he had no chance of qualifying for military service. But the Atlanta draft board found him eligible, and after he had been at Grady three months he was inducted into the Army. During the next three years he served in the Medical Corps at base hospitals and Army general hospitals in the Southeast and was discharged with the rank of captain in 1946.

Returning to Atlanta, he was appointed an assistant resident in medicine at Emory and started laboratory work on adrenal physiology with Dr. Engel. His colleagues during that period were a brilliant and stimulating group. Dr. Stead had brought Dr. Paul B. Beeson from Harvard to be his second in command. Others on the staff, in addition to Dr. Engel, were Dr. John Hickam, now chairman of medicine at Indiana; Dr. Jack Myers, chairman of medicine at Pittsburgh, Dr. James Warren, chairman of medicine at Ohio State at Columbus; Dr. Abner Golden, chairman of pathology at Georgetown; and Dr. Ivan Bennett, a member of President Johnson's Science Advisory Committee and deputy director of the Office of Science and Technology, who is on leave from the chair of pathology at Johns Hopkins.

When Dr. Stead moved to Duke University in 1947, taking Dr. Engel with him, Dr. Beeson became chairman of medicine at Emory and asked Dr. Bondy to be his chief resident. The departure of Dr. Engel, with whom he had been investigating the mechanism of action of the adrenal steroids, left Dr. Bondy the senior endocrinologist at Emory.

*The chairman of medicine at Emory University and his chief resident in 1949.*



His original interest in the adrenal glands was basically scientific—what do they do and how do they do it? “The subject was fine for pure experimentation, but I wanted to do clinical research, and diseases of the adrenal are rare. So I began to study the question of whether the adrenal contributes to diabetes, since there’s always plenty of diabetes around.”

His main clinical experiments at Emory were on the mechanism by which the release of liver sugar is controlled. Using techniques developed by Drs. Warren and Stead for inserting a venous catheter directly into the liver, he studied the rate at which glucose is released from the liver in normal, diabetic, and acidotic subjects, and the effects of insulin on glucose metabolism by the liver. He also collaborated with Dr. Walter Sheldon, now professor of pathology at Johns Hopkins, on studies of liver glycogen in patients with diabetes.

In 1948, Dr. Bondy came to Yale as an Alexander Brown Coxe Fellow in Physiological Chemistry and worked under Dr. C. N. H. Long, who had already achieved international recognition for his work in endocrinology and metabolism. Eighteen years later Dr. Long was to see his former postgraduate student become the first incumbent of a chair established in his honor—the C.N.H. Long Professorship, which was endowed specifically for studies in endocrinology and metabolic diseases.

Between the Coxe Fellowship and the Long Professorship, however, were several notable advances in Dr. Bondy’s personal and professional life, the first being his marriage to Sarah (Sally) Ernst before he returned to Emory in 1949. In 1951 he was made assistant professor at Emory. The following year, when Dr. Beeson was appointed to succeed Dr. Blake as chairman of medicine at Yale, Dr. Bondy also moved to Yale. He became associate professor and head of the section of metabolism in 1955, was promoted to professor in 1961, and to chairman of the department in 1965 when Dr. Beeson resigned to accept the Nuffield Professorship of Clinical Medicine at Oxford University.

Dr. Bondy’s research over the years has resulted in important contributions in many areas of metabolism. He has studied the physiology of the adrenal gland, including the stimulus for production of steroids, the regulation of their secretions, and their metabolic fate. In many cases these studies required the development of new specific techniques for measuring the steroids accurately. He has also contributed much to understanding the endocrine function of the thyroid, pituitary, and pancreas, not only as individual glands but as an integrated system. The scope of his investigations has

ranged from study of submicroscopic particles to observations involving the whole organism.

These basic studies of the physiology of the endocrine system demonstrate the careful experimental approach that has characterized all his scientific investigation. The experimental laboratory data which are so essential to research are constantly challenged by his clinical observations in the associated pathological states, as in the case of Cushing’s Disease. Dr. Bondy was the first to suggest that hormones of natural origin may, under certain circumstances, cause clinical problems such as the fever that is often referred to as etiocholanolone fever. While at times he has focused his attention on experiments involving submicroscopic elements of the cell, he has never forgotten nor allowed his students to forget that the part belongs to the whole organism. As one of his associates in the Department of Medicine put it, “The correlation of laboratory research with the care of the patient, so rarely observed today, is the hallmark of Dr. Bondy’s investigation and teaching.”

In recognition of his distinguished research record, Dr. Bondy received a Research Career Award from the United States Public Health Service in 1962. He relinquished the award when he became department chairman. “Keeping up with laboratory work in biochemistry is a full-time job,” he explains. “I caught up a bit during my sabbatical year, but with teaching and clinical work as well as the administrative responsibilities of the department, I found I couldn’t do the necessary reading.

“It is important for a young M.D. to do research at the most fundamental level available when he starts, and to keep going for as long as possible. But few people can continue to be productive scientists in their late forties or fifties. There comes a time when the field moves beyond you. This is the reason people are willing to be administrators.”

In addition to his administrative duties, Dr. Bondy carries a full schedule of teaching and clinical activities. First thing every morning, except Sunday, he meets with the residents in medicine. On two days a week he makes ward rounds and on Saturday mornings he attends grand rounds where he often discusses the cases presented. He is a frequent participant in the clinical pathology conferences, which he attends twice a week, and he devotes nearly every weekday lunch hour to a conference or seminar.

In recent years Dr. Bondy has made particularly valuable contributions by combining his medical knowledge with editorial skill. As editor-in-chief of the *Journal of Clinical Investigation* for five years (1957 to 1962), he devoted about 40 per cent of his time to editing this

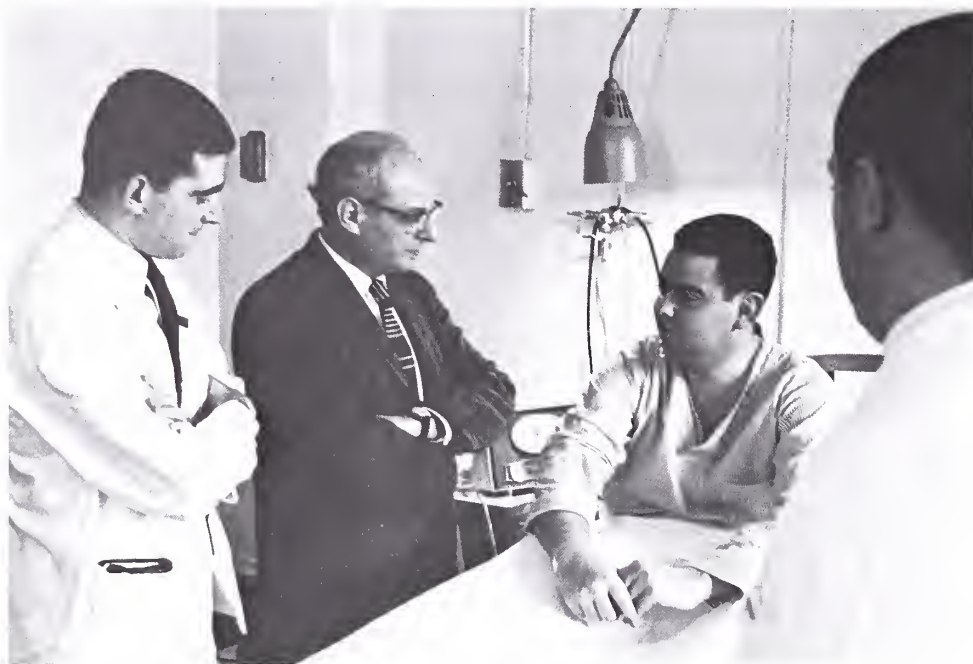


major publication which represents some 2000 pages annually of highly technical research. Two of his colleagues in the Department of Medicine, Dr. Franklin Epstein and Dr. Allan Goodyer, served as associate editors of the journal.

For the past 12 years Dr. Bondy has also edited the metabolism and endocrinology section of the annual *Yearbook of Medicine*. He was on the editorial board of *Connecticut Medicine* from 1959 to 1962, is at present on the editorial board of *Medicine*, and has been active on the publications committee of the Endocrine Society since 1960. His book credits include associate editor for

ciety and he is currently chairman of the Study Section, Program Projects, National Institute for Arthritis and Metabolic Diseases.

With so much professional involvement, it is remarkable that he finds time not only for the cello but for his number one outdoor pleasure—sailing. He has sailed since he was a youngster and is distinctly partial to small boats. At present he is the captain of a *Sailfish*, a boat that gives more sailing per minute, he claims, than any other. An additional advantage is that it is small and light enough to be carried around on the top of a car.



*Talking with a patient on ward rounds, Dr. Bondy is accompanied by Dr. Thomas Coniglione (left), intern, and Dr. Robert Buccino, senior assistant resident.*

endocrine and metabolic diseases in the most recent edition of Cecil and Loeb's "Textbook of Medicine," edited by Beeson and McDermott.

This winter he is completing a major writing and editing job, the sixth edition of Duncan's "Diseases of Metabolism" on which he is collaborating with Dr. Leon E. Rosenberg, assistant professor of medicine and pediatrics.

Dr. Bondy has served in the premedical counseling program of Yale's Morse College, of which he is a fellow. His affiliations on the national level include the American Society for Clinical Investigation, the American Federation for Clinical Research, the Society for Experimental Biology and Medicine, the Laurentian Hormone Conference, and the Association of American Physicians, to name only a few. Last year he completed a three-year term on the council of the Endocrine So-

For a number of summers Dr. Bondy and his wife have wandered by car around New England looking for interesting lakes on which to spend a day or two on the *Sailfish*. "In this way we have been able to avoid one of the main drawbacks of small boat sailing, the fact that usually you have to spend most of your sailing time in areas where you have sailed so often that they are boring." The Bondys have missed few major lakes in the northeast. They have been in squalls on Lake Champlain, crossed Winnepesaukee in a moderately heavy blow, and once got lost on a large lake in Maine when they took off from a motel whose name they had not taken time to discover.

"A couple of summers ago, on a very quiet morning, we chased a loon which was fishing over perhaps half a mile, getting close to it when it surfaced and then trying to outguess it when it dived." One of the best

things about the Sailfish, he points out, is that it can go anywhere. "It's perfectly safe to take into very shallow, unknown water. We have been out when there was too much wind for other boats, and we have ghosted along when you couldn't see a ripple on the water. It's the ideal boat for people who want variety, excitement and mobility. Of course, it isn't much good for cruising—but we leave that for others of our colleagues."

For less athletic recreation Dr. and Mrs. Bondy enjoy the theater and attend it regularly. They have three children—Jonathan, 16, Jessica, 15, and Steven, 12—and make their home in an attractive modern house they built

medical care in the most economical fashion for the most people. Unfortunately, the organized medical community has, for the most part, been dragged along in these developments instead of leading them. Too often they say to the people who are trying to improve matters, 'You're doing things all wrong, so we want nothing to do with your plans'. It is a tragedy that organized medicine has been so slow to accept the responsibilities that the nation is thrusting upon the physicians.

"In the past twenty years or so the physician's ability to cure people and protect them from disease has advanced remarkably. We can't help all people against all



three years ago in Woodbridge.

As a physician who is first a humanist, Dr. Bondy is committed to the concept that health is a human right. He was among the founders in 1964 of the local chapter of the Medical Committee for Human Rights, formed originally to provide medical support for the civil rights movement and now concerned with all social and economic aspects of health. He has been less active in the organization since he became department chairman but he strongly supports the committee's position that the medical community has a responsibility to participate in social change.

"Changes in the patterns of health care are taking place because the people demand it," he says, "but there is an unfulfilled need for advisors to help the government, the unions and other representatives of the people to work out new patterns which will provide the best

*(Left) His "good right arm" is Betsy Winters, administrative associate, who has been with the Department of Medicine since 1961.*

*(Right) While Jon and Jessica match wits on the chess board, their father sits in as an interested observer.*

diseases but we have the knowledge to do far better than we are doing now. I hope that Yale will help bring the benefits of modern medicine to the public by studying the methods of delivering medical care and advising those responsible on how best to achieve their purpose; and by training medical students and young physicians who will recognize the social revolution in medicine as a challenge rather than a threat."

# An Innovation in Public Health Lectures

Both faculty and students shudder to remember the days when public health lectures were given at 9 o'clock on Saturday mornings throughout the year in the Farnam Auditorium. Lecture schedules were changed in 1963 and again in 1964 and now all student lectures in the clinical years are given in the fall, at 12:45 p.m. on Mondays, Wednesdays, and Fridays. Instead of trying to cover material dealt with in textbooks the Department of Epidemiology and Public

Health has recently been using its lecture time to look at the expanding edges of its field, with particular emphasis on the impact on the practicing physician. The new series have been planned and arranged by Dr. Roy M. Acheson, professor of epidemiology and medicine.

Last year Dr. W.J.H. Butterfield, professor of internal medicine at Guy's Hospital in London, was at Yale as a visiting professor and gave a series of six lectures to a packed audience in the Fitkin Amphitheater on "The



*Dr. Edward M. Cahart, C.-E. A. Winslow Professor of Public Health and chairman, Department of Epidemiology and Public Health, Yale School of Medicine: "The Federal Government and Health: A Historical Review."*



*Dr. William L. Kissick, director of the Office of Program Planning and Evaluation, Office of the Surgeon General, United States Public Health Service: "The Federal Government and Evaluating Health Policy."*



*Dr. Sven M. Gundersen, clinical professor of medicine, Dartmouth Medical School: "Government Involvement in Medical Teaching, Research, and Delivery of Care as Viewed by an Internist."*



*Dr. E. Tremain Bradley, president of the Connecticut State Medical Society: "Organized Medicine and the Patient."*



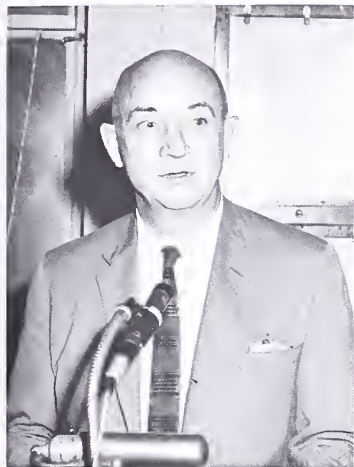
Impact of Epidemiology on the Physician and Clinical Investigator."

This year the overall topic was "The Federal Government and the Physician." The speakers, shown on these pages with their individual topics, included Federal policy-makers; physicians, both academic and in private practice; and a distinguished governor. Two were authorities on the subject from the Yale Department of Epidemiology and Public Health itself.

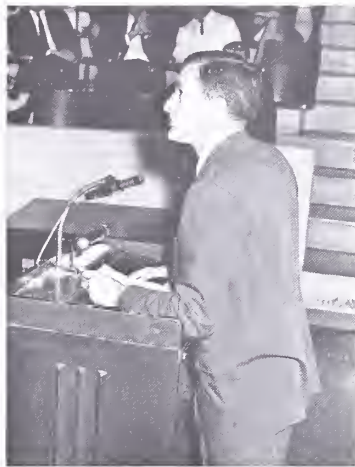
The lectures were limited to 30 to 35 minutes and

each was followed by general discussion, some of it Berkeley-lively! Again Fitkin was full, but mixed with the clinical students were a sprinkling from the first and second years, some graduate students, faculty, community physicians, hospital administrators, resident staff, and an occasional dean.

Excerpts from the talks will be published in the near future. Copies may be obtained by writing to Dr. Roy M. Acheson, Yale School of Medicine, 333 Cedar Street, New Haven, Connecticut 06510.



*Dr. Robert L. Berg, Albert D. Kaiser Professor of Preventive Medicine and Community Health, University of Rochester School of Medicine and Dentistry: "The 'Ivory Tower' and Its Surrounding Community."*



*The Hon. Jahn H. Chafee, Governor of Rhode Island: "A Governor's View of Washington and The Physician."*



*Karl D. Yordy, assistant director, Regional Medical Programs, National Institutes of Health: "Regional Medical Programs: New Relationships."*



*Dr. James H. Cavanaugh, director of Comprehensive Health Planning and Development, United States Public Health Service: "The Federal Government, the Hospital, and the Private Physician."*



*Dr. E. Richard Weinerman, professor of medicine and public health, Yale School of Medicine: "Looking Into the Future: Lessons to be Learned from Other Countries."*





*Yale medical students of the class of 1827 commissioned Nathaniel Jocelyn to paint this portrait of Dr. Ives.*

The custom for practicing medical men to give some measure of their time to university teaching is traditional in this part of the country. The tradition is a valuable one, for there is a unique inspiration—coming from his daily concern for the care of a large number of patients—that only the practicing physician can give to a medical student. This paper is offered as a brief and informal look into the life of one of Connecticut's earliest professor-practitioners.

Four men were appointed full professors to the Medical Institution of Yale College when it opened in the fall of 1813. They were Benjamin Silliman, Jonathan Knight, Nathan Smith—and Eneas Munson, a respected New Haven physician, who was then almost eighty years old. Munson's appointment as Professor of Materia Medica and Botany was intended for ornamentation

only, since he declined the active duties of the professorship. These duties were performed by an Adjunct Professor of Materia Medica and Botany, a young New Haven doctor who for the next twelve years steadfastly did all the work of the professorship yet shared its glory with the aged Munson. This young physician was Eli Ives.

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*Dr. Burget, Yale medical class of 1967, received the first John F. Fulton Memorial Award in the History of Medicine in May 1966 for this study of Eli Ives, presented before the Nathan Smith Club. The paper was published, with complete bibliographic references, in the July 1967 issue of Connecticut Medicine. Dr. Burget is now a surgical intern at Presbyterian Hospital in New York City.*

Eli Ives was born in 1778 into a family which was later to boast five generations of prominent New Haven physicians. His father was a doctor, a founder of the Connecticut Medical Society. After graduating from Yale College in 1799, Eli spent fifteen months as the Rector of Hopkins Grammar School in New Haven. During this period he began to study medicine both with his father and with his father's former teacher, Eneas Munson. He must have found Munson a stimulating teacher for in 1800 he shunned a glowing offer to become a tutor at Yale College and instead continued his medical education at what was then the most respected medical college in the country, the University of Pennsylvania. When, at the age of twenty-four, he returned to New Haven, he told his father that he wanted to set up a practice in some country town. His father's lucrative city practice was at its height and the older physician apparently saw certain disadvantages in small town medicine, so he urged Eli to go into business with him for at least three months, as an experiment, to see if the son could gain a foothold in New Haven. The experiment was evidently a success for "Young Dr. Ives," as he was then called, soon left his father to open his own office on the south side of Chapel Street across from Yale College. Here he acquired a practice which was so large that he found it necessary to keep three horses to keep up his business in the town and adjacent country; and that "in seasons of unusual sickness [he] hardly had time for the necessary sleep and meals," according to a biographical notice by Henry Bronson.

At this period the practice of medicine in New Haven was assuming for the first time a truly professional status. Educated medical men were uniting to better the standards of care and to protect themselves against the threat of charlatans, quacks and mountebanks. A colonial law of 1773 had prohibited the "practice of mountebanks in dealing out and administering physick and medicine of unknown composition indiscriminately to any persons whom they can by fair words induce to purchase and receive them"; yet un reputable doctors of all kinds still flourished, and were a constant threat to the educated physicians. In addition to this threat from the outside, there was considerable discord within the ranks of the regular doctors. Competition for patients was fierce. A physician called in consultation on a case would often use the situation unfairly to his advantage. Dr. Ives states, "It was not unusual at this period for such men as Drs. Elliot, Yale, Bird and Hurlburt when called upon to prescribe for a patient of another physician, on their first introduction, to sweep from the table into the fireplace all the medicines of his brother

practitioner, and then like Paracelsus, magnify his own powers as supernatural." It is not surprising, then, that thirteen reputable physicians of New Haven (including Eli Ives and his father) met in 1803 to form the New Haven Medical Association "to establish the practice of physic in this city on a respectable footing; to enable ourselves to live by the profession; to promote a good understanding and harmonious intercourse with each other, to avoid the disgraceful practice of undermining one another by doing business for a less compensation, and to exclude from our communion every person who shall obtrude himself among us without a regular introduction, and conforming to our established rules of practice." A table was attached to this list of resolutions establishing fixed fees for various medical services. In addition, arrangements were made for care of the Almshouse poor. There was no regular hospital in the city until the founding of the New Haven Hospital in 1826. The Almshouse, described as "a plain building of considerable size, standing in a very healthful situation," probably had a small sick ward and served as a hospital for the destitute. A member of the New Haven Medical Association could contract with selectmen to attend the town poor. The city compensated physicians at rates equal to two-thirds of their normal fees: "two shillings for a day visit; four shillings for a night visit: one shilling for a puke; one do. for a purge; one do. for bleeding." The New Haven Medical Association, by creating standards and rules of medical practice, unified educated physicians and set them apart from their less reputable fellows as a select group. It was in this newly established professional milieu that "Young Dr. Ives" worked to make his reputation as a practitioner.

As a physician Eli Ives rapidly gained the respect of his fellow doctors. After being in practice only four years he was elected a Fellow of the Connecticut Medical Society, became a member of its examining board and later—at the age of thirty-two—was elected secretary of the society. By the age of thirty-five his reputation was so solidly established that he was appointed associate professor at the new medical college of Yale. Henry Bronson, who was Professor of *Materia Medica* at Yale during the mid-Nineteenth Century, says of Ives' appointment: "It was then a great thing to be a professor. There were but four medical colleges in the country; these were in Philadelphia, New York, Boston and Hanover, New Hampshire; and the man who (on the ground of merit) was selected to give a course of public lectures, was considered high up on the professional ladder, if not at its topmost round."

Eli Ives was associated with the medical school for

forty-eight years during which time his interests ranged from botany and horticulture to the diseases of children. Throughout his lifetime he was an avid student of botany, and, indeed, knowledge of botany was an important adjunct to medical treatment in this period, since many remedies were made from plants cultured or collected locally. Ives knew the plants of Connecticut perhaps better than any man of his day and had, in fact, discovered several new species—including a species of *Asclepias* (milkweed) "found growing abundantly on the sandy plains east of Cedar Hill" and a species of *Gnaphalium* (balsamweed), "first observed by me, in the company of Mr. C. Whitlow, . . . by the margin of a brook, a few rods north of Mr. Whitney's gun manufactory." A perusal of Ives' students' notebooks—still preserved in the Yale Medical Historical Library—reveals that the doctor used his knowledge of botany to advantage in the treatment of disease. He recommended, among other things, slippery elm and sassafras for the treatment of thrush; arrowroot for erysipelas; juice of plantain leaves for the skin lesions of congenital syphilis and catnip tea and root of cattail flag for diarrhea. Most of these herbaceous remedies came from a botanical garden and hothouse which Ives kept on the grounds adjacent to the medical school. It was, in fact, remarked that the Professor "prescribed with a hoe from the resources of his wonderful botanical garden."

Though Ives was a careful botanist, yet he was also a busy clinician. In this latter role he was so talented that Professor Bronson says "his knowledge was almost intuitive." His students apparently valued his teaching for their lecture notes are copious and meticulously kept. The following passages from the notebook of a Yale medical student of 1840 show that Ives' remarks on many subjects were highly accurate. Considering thrush, he remarks on predisposing factors.

*It is most violent in feeble, debilitated children. Hence it may be inferred that it is a disease of debility. It frequently follows other diseases in adults of robust constitution which have been debilitated by previous disease.*

In his lecture on "Sore Ears" he comments quite accurately on otitis media.

*Under this head I shall speak of purulent discharge from the cavity of the ears . . . If this discharge is stopped suddenly fever is frequently the consequence with full pulse—tense bowels and fulness of the Fontanelles.*

Speaking of worms he states that "All strong purges should be avoided in the case of *Ascaris*. . . ." showing his awareness that strong irritants cause roundworms

to migrate. In a great many instances, however, his conclusions about disease focussed too narrowly on the alimentary canal as the seat of derangement. For instance, he recommends cathartics for the treatment of "Infantile Erysipelas. The Rose of the West Indies."

*Pay little attention to the eruptions but let it be directed to the evacuation of the bowels. I have letters from Physicians who have followed my prescriptions—not treating the disease as a local one, but with cathartics testifying to the success of this practice.*

There are some portions of his students' notes which suggest that Ives was a master of differential diagnosis. One imagines that he recounted the following case with some measure of pride.

*Case of a woman in W. Haven who was supposed to be in the last stage of consumption. On re-examining the seat and cause of the disease I discovered that she was cutting the 4 Dentes supientiae. After cutting the gums and giving some antispasmodics she recovered perfectly.*

His remarks on tongue-tie show good practical judgment.

*I have not seen a case where it was necessary to perform this operation. It is a very frequent notion among nurses that children are tongue-tied. Dr. Munson was called in one case to cut the frenum—he remonstrated, the nurse insisted—he then drew the back of his knife across the frenum with great success.*

Further evidence of Eli Ives' competence as a physician is found in his case reports. One of these appears in the first issue of the *Communications of the Medical Society of Connecticut* in 1810, a case of acute retroversion of the uterus in a pregnant woman occasioned by jumping from a horse.

September 23, 1808, Mrs. A—, a woman of 40 years of age, . . . in jumping from a horse felt something give way in the pelvis; at this time she supposed herself to be about three months advanced in pregnancy. The shock was followed with great weakness, sensation of bearing down, . . . dysuria, nausea and vomiting, and all the train of hysteric symptoms, arising from the stomach sympathizing with an irritated and inflamed uterus.

Fifteen days later Dr. Ives examined the patient and it is obvious from the passage that follows that he gave scrupulous attention to details of physical examination.

*Entering the vagina, the finger met a tumor twice the size of a hen's egg, between the vagina and rectum. . . . A finger of the other hand was passed into the rectum, by which it appeared that the rectum was entirely*



obstructed by the fundus of the uterus, beyond which the finger could not pass . . . The uterus at the same time was felt by the finger in the vagina, wedged firmly between the sacrum and pubis . . .

As is the case today, attempts at treatment often met with frustration.

The patient was laid upon her back, her hips raised . . . exertions were made to restore the uterus, until her physicians were satisfied that it could not be restored in this manner. The patient was placed on her knees and elbows and repeated trials made to restore the uterus, but with no better success. . . . an instrument [was constructed] made of a cylinder the size of a finger, and eight or ten inches in length, on the end of which a head was formed, by winding flax and covering it with soft leather, as large as could be passed into the rectum. With this instrument oiled and introduced into the rectum, the patient on her knees, the thorax lower than the pelvis, two fingers in the vagina and much force applied by the instrument and fingers, the uterus was raised above the brim of the pelvis. The patient was enjoined rest and a recumbent posture; and after the usual period of gestation was delivered of a healthy child.

There is no doubt that Eli Ives was a clever practitioner, yet he was probably best remembered as a teacher. For forty years he lectured at Yale on *Materia Medica*. Botany, *Diseases of Children* and "Theory and Practice." Reverend Dutton (in Ives' funeral oration) estimates that he taught nearly fifteen hundred students. Henry Bronson attended lectures at the Medical Institution in the 1820's. Years later he wrote a vivid description of the Professor as he appeared then.

Dr. Ives, then nearly fifty. . . . lectured on *Materia Medica*, *Botany* and *Diseases of Children*. He was tall and spare, of a weak organization, with a pleasant countenance and mild blue eyes, unceremonious and unpretending, familiar and agreeable in manners, and plain in dress. He had a high somewhat retreating forehead, which was heavily developed above and around the eyes, in the region of Gall's perceptive faculties. His appearance as he sat in his blue cloak with scarlet facing, reading his lecture from loose papers a little dingy with age, his voice rusty and feeble, his elocution hesitating and difficult, was not prepossessing. . . . At short intervals, unmindful of his notes, he would lean forward, rest his arms on the desk, and after a few preparatory hems, state a case, or relate an anecdote, in way of illustration of recreation. . . . His pleasantries were heralded by a certain twinkling of the eyes, and several extra hems which the mirth-loving of the class were

quick to interpret. He was not a good storyteller, but his stories were piquant and amusing, and all enjoyed them, including the narrator. . . .

Notwithstanding his short-comings, Dr. Ives had many valuable qualities as an instructor and gave an excellent practical course. . . . He had treasured up in his capacious memory an immense store of facts gathered during many years of discriminating practice and thoughtful study, which he poured forth in unstinted measure.

The notebooks of his students leave little question that the professor had a sense of humor. In his lecture entitled "Worms," he speaks of the treatment of tapeworm. For *Tenia solium* or *Cucurbitina* spirits of turpentine has been very successful; . . . A man of intemperate habits took a wine glass full of the spirits of turpentine. He said he never was so drunk in his life. A large tapeworm was evacuated.

Concerning the treatment of toothache by extraction, he remarks, "It is known that the sight of the instruments will frequently stop the pain." Elsewhere he tells of a woman who accidentally set herself on fire and in her terror "ran down below where two elderly women were sitting who seeing her with her hair all burnt off and her clothes flaming they concluded they were come for and were excessively frightened." And in his lecture on Flatulency he exclaims, "It is very mortifying to young ladies."

Pastor Dutton states that since the time when Ives had looked at his Yale College catalogue and been dismayed at how many of his early friends had died drunkards, the doctor had been a firm believer in temperance. Yet, in his lecture on alcohol he remarks to his students, "It was very early used as a remedy and sanctioned by divine authority. Take a little for thy stomach's sake."

Though Professor Ives' manner of teaching may have lacked polish, the substance of his lectures was considered good. The medical students of the Class of 1827, out of admiration for their teacher, commissioned a New Haven artist, Nathaniel Jocelyn, to paint the portrait which now hangs in the rotunda of the Yale Medical Library. One gathers from this painting that here was a wise, yet unpretentious man. It is known that he always wore a certain humility; his respect for Eneas Munson—"whose superior talents and continued friendship to me, I am happy on every occasion to acknowledge"—seemed limitless. He appears, in the final estimation, to be a man who had little interest in fame, but sought and found fulfillment in his everyday pursuits: the practice and the teaching of medicine.

# AIM Campaign



Yale's Alumni in Medicine (AIM) Campaign was launched early in December with the announcement that Dr. Leona Baumgartner (Ph.D. '32, M.D. '34) will be campaign general chairman. Dr. Baumgartner, one of Yale's most distinguished medical and public health graduates, is being joined by an equally distinguished and energetic group of campaign cabinet members.

Dr. George T. Pack ('22) of New York City and Dr. J. Roswell Gallagher ('30) of New Haven are campaign vice-chairmen. Others named to the campaign cabinet to date are Dr. George A. Carden, Jr. ('35), Dr. Benjamin Castleman ('31), Dr. William L. Kissick ('57), Dr. Charles W. Neuhardt ('37), Dr. Lawrence K. Pickett ('44), and Dean F. C. Redlich (ex officio).

The objective of the campaign is to raise 2.5 million dollars as a first step in a massive long-range capital development program. The main program is expected to cost more than 75 million dollars for construction of required medical school and teaching hospital facilities and for the implementation of new study and research programs. Of the 75 million-plus figure, 50.9 million dollars will be sought for capital facilities development over the next ten years. The remaining amount will be for endowment of professorships and scholarships.

In the newly-launched AIM campaign to raise the first 2.5 million dollars, support will be sought from all alumni in medicine for two specific areas: (1) construction of a new Medical Sciences Teaching Center and (2) funds to increase support for teachers and students by a significant margin.

*Planning for the AIM Campaign last fall, members of the campaign cabinet met with officers and members of the executive committee of the Association of Yale Alumni in Medicine. Participants included Dean Redlich and Dr. Baumgartner (below).*



Dean Redlich, setting forth the challenge which lies ahead for the school of medicine, said that the projected Medical Sciences Teaching Center will provide an urgently needed element in the implementation of the new medical curriculum. The center will be so designed as to permit the student and instructor to work closely together, with all the facilities and equipment a student requires immediately available at his own work station.





Sixteen teaching modules, each having sufficient area and equipment to serve 16 students, will be situated in the building. An interlaboratory will connect the modules. Space will be provided for electronic teaching aids to serve students individually and in groups and for conference and lecture rooms. Facilities will also be provided for study of the behavioral sciences and gross anatomy.

"Despite other urgent requirements, the top priority—one having the greatest impact on the immediate program of this school — will be the creation of this teaching laboratory," said Dean Redlich.

With regard to the need to create new faculty teaching positions, he noted: "To teach superior students, an adequate complement of superior faculty is needed. In the past Yale School of Medicine has been singularly fortunate in attracting outstanding teachers. Now, to insure that she will be able to keep those she has and add to their number, salary support must be strengthened." He also stressed that the need to provide sufficient scholarship and fellowship aid is of great importance.

As a traditional leader in the field of medical education, Yale recognizes that "no challenge can be ignored nor can undue emphasis be placed on particular areas to the detriment of others," according to the dean.

"The school's strength lies in a balanced approach in which the highest standards of research, teaching, and patient care are encouraged and properly rewarded within the framework of a full-time faculty," he said.



*(Top left) Dr. Leona Baumgartner, general chairman of the campaign*

*(Top right) Dr. J. Roswell Gallagher, vice-chairman*

*(Bottom) Dr. George T. Pack, vice-chairman*

"Through the Alumni in Medicine Campaign, we seek the sanction and support of the alumni in this crucial phase which will have a meaningful impetus for the school of medicine and its continuing development."



# In and About Sterling Hall



*Dr. Darling receives the plaque and citation of the Golden Orchid, highest award of the Japan Medical Association.*

## **Japan Medicine Honors Dr. Darling**

Dr. George B. Darling, professor of human ecology and director of the Atomic Bomb Casualty Commission in Hiroshima, received the highest award of the Japan Medical Association in November. The Golden Orchid Supreme Award, consisting of a gold plaque and honorarium, was presented to Dr. Darling for his "outstanding services to the promotion of cooperation in the field of medical science between the United States and Japan." He is the first American to be so honored.

A member of the Yale Faculty since 1946, Dr. Darling has been on leave of absence as director of the ABCC since 1957. The award citation presented by Dr. Taro Takemi, president of the Japan Medical Association, read in part:

"Ever since he arrived in Japan in 1957, Dr. Darling has carried out, in collaboration with Japanese medical scientists, extensive research on the effects of radiation from the atomic bomb. This is a most concrete ex-

pression of American-Japanese medical cooperation, which in turn would mean a major contribution to the welfare of mankind."

## **Faculty Members Honored**

Dr. Morton M. Kligerman, professor and chairman of the Department of Radiology, was honored by Columbia University on October 27 when he received the Commemorative Medallion, established on the occasion of the two hundredth anniversary of the founding of the College of Physicians and Surgeons. The award was presented to Dr. Kligerman "in recognition of his achievements which have contributed to the stature of the university." Dr. Kligerman, who is currently president of the Association of University Radiologists, became president-elect of the American Society of Therapeutic Radiologists at their annual meeting in Chicago in November.

Dr. Howard Levitin, associate professor of medicine and associate dean, was saluted by the board of

trustees of the Kidney Foundation of Connecticut in December for his service as chairman of the organization's Medical Advisory Board for the past two years. Under his leadership the scientific activities of the foundation have been expanded and diversified, and annual professional conferences have been instituted to acquaint medical personnel with the latest developments in the renal field. Dr. Levitin was presented with an inscribed desk set at the foundation's December board meeting.

## **Faculty Notes**

Dr. Gilbert H. Glaser, professor of neurology, recently visited the Department of Neurology of the University of Zagreb School of Medicine in Yugoslavia on a mission for the United States Public Health Service. The visit was in connection with the establishment of a research unit concerned with epilepsy. Dr. Glaser reports that the neurology department at Zagreb has an excellent, dedicated staff and fine facilities. While there he lectured on "Cerebral Ionic En-

vironment and Epilepsy."

Dr. Glaser has been appointed to the editorial board of the Archives of Neurology and to the board of directors of the Epilepsy Foundation of America. The latter is the first united national organization in the country concerned with the extensive problems of epilepsy in our population.

Dr. S. Evans Downing, associate professor of pathology, participated in the seventh Conference on Respiratory Physio-Pathology held in Nancy, France, under the sponsorship of the European Society for Clinical Respiratory Physiology in September, 1967. He spoke on "Autonomic Control of Cardiac Performance During Hypoxemia, Hypercapnia and Acidemia." This international symposium drew more than 400 people from some thirty-six countries.

Dr. Donald C. Riedel, associate professor of public health, is a member of the planning committee for the 1968 National Health Forum to be held March 15-17 in Los Angeles. The gathering, which is sponsored by the National Health Council, will bring together leaders in the health professions and related fields to assess standards and procedures for assuring quality in health care services and to consider proposals for strengthening these standards and procedures.

Two faculty members at the Child Study Center will carry the leadership of the Pre-Congress Conference on Training of the International Psycho-Analytical Association to be held in Rome in 1969. Dr. Albert J. Solnit, professor of pediatrics and psychiatry and director of the center, has been appointed chairman of the organizing committee for the conference. Dr. Seymour L. Lustman, professor of psychiatry, has been named conference secretary.

In connection with the Joint Commission on Mental Health of Children, Dr. Lustman has been appointed chairman of the commission's Task Force IV dealing with

research and manpower; Dr. Solnit is serving as a special consultant to the Children's Bureau; and Dr. Sally Provence, professor of pediatrics, is on the advisory group of the Research Division of the Children's Bureau.



Dr. Lytton

#### **New Chief of Section Named**

Dr. Bernard Lytton, associate professor of urology, has been named chief of the Section of Urology in the Department of Surgery. Dr. Lytton, a graduate of the University of London, has been a member of the Yale faculty since 1962 and was promoted to the rank of associate professor in July, 1967.

#### **Promotions to Associate Professor**

Recent promotions to the rank of associate professor to be effective July 1, 1968, include Peter R. Huttenlocher, M.D., pediatrics and neurology; Robert J. Levine, M.D., medicine and pharmacology; and Leon E. Rosenberg, M.D., pediatrics and medicine.

#### **Alpha Omega Alpha**

The following members of the class of 1968 were elected to Alpha Omega Alpha last October: Joseph F. Andrews, Jr., Stuart J. Brill, Rutledge W. Currie, Leonard E. Grauer, Peter Jokl, Daniel E. Keim, Marc E. Lippman, Stephen I. Marglin, Rodrigo E.

Martinez, and Richard M. Morehead, Jr.

Those who had been elected as third-year students in May, 1967, are M. Gilbert Grand, Frank E. Lucente (chapter president), Richard P. Mills, and Elizabeth M. Short.

#### **Visiting Professors**

Dr. Hermann Blaschko of Oxford, England, is currently at Yale as visiting professor of pharmacology. A fellow of the Royal Society and former chairman of the University Department of Pharmacology at Oxford, Dr. Blaschko is well known as an authority on amine metabolism.

Dr. Mikolaus Mani, professor of the history of medicine and science at the University of Wisconsin, has been visiting professor of the history of medicine from September, 1967, through January, 1968. Dr. Mani, who received his M.D. degree from the University of Basel, is a distinguished historian whose writings on various aspects of medicine range from antiquity to recent times but whose special interests focus on Renaissance developments.

Dr. Anna Freud will be at Yale in April as visiting lecturer in psychiatry and law at the Child Study Center and the Law School. A member of the Psycho-Analytic Society and Institute in Vienna until 1938 and subsequently a member of the Psycho-Analytic Society and Institute in London, Dr. Anna Freud has been director of the Hempstead Child Therapy House and Clinic since 1952.

During the first week in December, Dr. George L. Engel, professor of psychiatry and medicine at the University of Rochester, was the Paul B. Beeson Visiting Professor of Medicine. In addition to ward rounds and conferences, he gave a special lecture entitled "The Psychological Setting for Somatic Illness."

#### **Special Lectures**

The tenth Grover F. Powers Lecture was given in October by Dr. Richard W. Olmsted, chairman of the Depart-



ment of Pediatrics at the University of Oregon School of Medicine. He spoke on "The Pediatrician and the Hearing-Handicapped Child."

In November, the 1967 John Punnett Peters Memorial Lecture entitled "The Formation of Concentrated Urine" was given by Dr. Robert W. Berliner, director of research at the National Heart Institute, Bethesda, Maryland.

The Leon E. Sample Lecture is being given on Tuesday, February 6, by Dr. Francis D. Moore, Moseley Professor of Surgery at Harvard Medical School and head of the department at the Peter Bent Brigham Hospital in Boston.

#### **New Corporation to Aid in Neighborhood Development**

A new corporation has been formed to aid in development of the Hill neighborhood in coordination with the physical development of the Yale-New Haven Medical Center. The new organization, called the Medical Center Housing and Community Development Corporation, will plan and develop housing and community facilities related both to the needs of the medical center and the interests of the community as a whole. Edward S. Gruson, an urban planner from Boston, has been appointed president of the corporation.

Mr. Gruson earned recognition in the field of urban renewal and regional planning as a consultant to the Puerto Rican government from 1956 to 1959. A graduate of the University of Toronto, he holds a master's degree in city planning from Harvard and has done graduate study in biochemistry at the University of Toronto and the Medical Nobel Institute in Stockholm, Sweden. For the past two years he has been a consultant to the Tufts University School of Medicine Comprehensive Community Health Action Program at Columbia Point in Boston and Mound Bayou, Mississippi.

The Medical Center Housing and Community Development Corporation will strive to integrate its activi-

ties with those generated in the Hill neighborhood as well as with the work being undertaken in this area by public and private agencies.

#### **House Staff Stipends and Tuition — Both Increase**

Alumni and particularly former house staff will be pleased to learn that the stipends for interns and residents at Yale-New Haven Hospital were increased January 1, 1968, and there will be a further increase effective July 1. The January change raised interns from \$4000 to \$5000 per year; new stipends for residents range from \$5500 to \$8000 per year.

For the 1968-1969 house staff year beginning in July, interns will re-

ceive \$6000; assistant residents, first year — \$6600, second year — \$7200, third year — \$7800; fourth year residents, \$8400; and chief residents, \$9100.

The cost of a medical education, however, continues to rise along with the general inflationary spiral. The present \$1900 annual tuition at the Yale School of Medicine will increase to \$2150 as of September, 1968. This is equal to the tuition now charged at many other private medical schools and, incidentally, is less than the 1968 tuition at some schools. The total cost for attendance for four academic years at a privately supported medical school is estimated to be at least \$16,000.

*Dr. Wayne O. Southwick, professor of orthopedic surgery, participates in a ribbon-cutting ceremony opening a new bone study laboratory at the medical center. The unit is a gift from the Crippled Children's Aid Society of which Mrs. Charles W. Buehler (left) is president. The society was founded by a group of New Haven women in 1913 and has supported a variety of patient care services and research facilities in orthopedic problems. In addition to directing the program of teaching, research, and patient care in orthopedic surgery, Dr. Southwick is currently the master of Branford College, one of the Yale undergraduate residential colleges. He replaced Professor J. P. Trinkaus, who is on leave of absence this semester.*





## New Books

**THE CELL BIOLOGY OF HYDRA** by Dr. Thomas L. Lentz, assistant professor of anatomy. (Interscience; Wiley.) The fresh water hydra has held considerable interest for the investigation of biological phenomena since the pioneer studies on hydra were performed in 1744 by Abraham Trembley. This volume is primarily a research monograph containing the author's studies and observations. Cell fine structure and function are emphasized and the cell as the basic structural unit is interpreted in terms of both its subcellular components and its relationship to the biology of the organism as a whole.

The first chapter is a review containing basic information on hydra and material of historical interest. The second concerns the enzyme histochemistry of normal and regenerating hydra. A chapter is also included on the histochemical localization of neurohumors and related enzymes in the nervous system. The fine structure of each of the six basic cell types is presented. Chapters are included that contain physiological experiments based on the cytochemical and ultrastructural findings and concerned with the activities of the cell surfaces, the digestive process, control of nematocyst discharge, and the role of the nervous system during regeneration. The final chapter summarizes the observations and conclusions drawn from this work. The book is well illustrated, containing a large number of electron micrographs and detailed drawings. An extensive biography on hydra is provided.

**JARED ELIOT, MINISTER, DOCTOR, AND HIS CONNECTICUT.** by Dr. Herbert Thoms, professor emeritus of obstetrics and gynecology. (The Shoe String Press.) This is Dr. Thom's fifth book on 18th century Connecticut men and their times. Jared Eliot, a leader in divinity and medicine, was also recognized here and abroad as a scientific agriculturist. As a long time member

of the Yale Corporation, he was deeply involved in the affairs of Yale College. He was an intimate friend of Benjamin Franklin and shared his vision of a great America. Eliot's influence as a liberal in religion and education continued long after his death in 1763. The book includes 26 full page illustrations.

## Health Education Monographs

*Health Education Monographs*, the official publication of the Society of Public Health Educators, has appeared in an attractive new format under the editorship of Dr. Lowell S. Levin, associate professor of public health. Dr. Lorraine V. Klerman, assistant professor of public health, is associate editor of the revamped journal which has begun a new series under the heading "Review of Health Education Research and Studies Related to Health Education Practice (1961-1966)."

## Dr. Pepper Coordinates Plans for Comprehensive Health Program

Dr. Max P. Pepper, associate professor of psychiatry and public health, has been appointed director of planning for the Comprehensive Health Center Program in the Hill neighborhood. He will be responsible for coordinating the work of two existing programs, the Hill Child Health Project and the Connecticut Mental Health Center's Hill-West Haven community program, which he formerly directed. He will also develop plans for extending health services in the Hill neighborhood.

Dr. Pepper, who received his M.D. from the University of Pennsylvania and his M.P.H. from Yale, has had extensive experience in developing community based health programs. From 1963 to 1966 he was director of the Mental Health Planning Project for the State of Connecticut Department of Mental Health. As chief of the Hill-West Haven Unit of the Connecticut Mental Health Center

from 1965 to 1967, he helped to organize the Hill Health Council, an organization of Hill residents and health advisors who recommend the health care services needed.

## Workshop Considers Newborn Care Facilities

Ways to reduce the infant mortality rate in the United States by improving hospital newborn care facilities were discussed by a group of nationally known specialists who met at the medical school in December. The occasion was a workshop sponsored by the Perinatal Biology and Infant Mortality Branch of the National Institute of Child Health and Human Development, in cooperation with the perinatal research program of the Yale Department of Pediatrics.

Approximately 50 pediatricians, hospital architects, and equipment engineers attended the three-day meeting. Their purpose was to consider the design and instrumentation of newborn special care units in the light of recent research that indicates a need to re-evaluate traditional methods of caring for newborns.

Dr. Sydney Segal, associate professor of pediatrics at the University of British Columbia and chairman of the workshop, told the gathering that the NICHD chose to hold the meeting here because the Yale-New Haven Hospital has "the most advanced facilities" for perinatal care. The program included a tour of these facilities, located in the Eleanor Naylor Dana Perinatal Center. The unit is under the direction of Dr. Louis Gluck, associate professor of pediatrics, who participated in the workshop.

Speakers at the workshop included Dr. Eileen G. Hasselmeier, acting director of the Perinatal Biology and Infant Mortality Branch, NICHD; Dr. William A. Silverman, professor of pediatrics, Columbia University; and Dr. Jerold F. Lucey, professor of pediatrics, University of Vermont College of Medicine.

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### Roy L. Leak, M.D.

Dr. Roy Lathen Leak, clinical professor emeritus of psychiatry, died September 20, 1967, while vacationing in Bainbridge, New York. He was 92 years of age.

Born in Ontario, Canada, he came to the United States as a child and attended the Albany Medical College where he received his M.D. degree in 1898. His post-graduate training was at the St. Lawrence State Hospital in Ogdensburg, New York, and later at Matteawan State Hospital where he became acting superintendent. He was appointed manager of the St. Lawrence State Hospital in 1915 and then served as clinical director of the State Hospital in Columbia, South Carolina, for a year before coming to Connecticut in 1918. From then until his retirement in 1944 he was on the staff of the Connecticut State Hospital in Middletown and was its superintendent for 22 years beginning in 1922.

Dr. Leak was appointed to the Yale medical faculty in 1919 as a clinical assistant in psychiatry and was promoted to clinical professor of psy-

chiatry and mental hygiene in 1936. He was named emeritus professor in 1943.

Following his retirement, Dr. Leak resided in West Hartford. He is survived by his two daughters.

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### Everett S. Rademacher, M.D.

Dr. Everett Stanley Rademacher, associate clinical professor of psychiatry from 1947 to 1967, died on November 15 last. He was born in 1899 in New London, Connecticut, and received his medical degree from the State University of Iowa College of Medicine in 1923, a time when few medical students, indeed, opted for a career in psychiatry. For a year he remained at the Iowa State Psychopathic Hospital, one of only a handful of university-affiliated psychiatric institutions then extant in this country. He continued his training at the Institute for Juvenile Research in Chicago and then joined the Cleveland (Ohio) Child Guidance Clinic. In 1928 he returned to Connecticut to become director of the Bridgeport-Waterbury Child Guidance Clinic and also was appointed clinical instructor in psychiatry and

mental hygiene at the Yale School of Medicine. In 1933 he began private practice in New Haven and became the highly trusted consultant and faithful friend to his medical and surgical colleagues. He also served as consultant to many community agencies and to the Bristol Family Service for twenty-one years. Promoted to associate clinical professor in 1947, he also became the first psychiatric lecturer in the Yale Department of Public Health.

During World War II he served for four years with the Coast Guard as senior surgeon in the United States Public Health Service. Besides having authored a number of professional articles, Dr. Rademacher also was an avid poet; his *The Psychiatrist Sings—Sonnets on Psychiatry and Other Poems* was published in 1949 by Winthrop Press. He was married to Grace H. Corwin of Riverhead, Long Island, whom he followed in death by only six weeks. The New Haven medical community joins their three daughters in mourning the loss of an esteemed friend and colleague, as will the many patients whom he served long and well. — S. F.

## Alumni News

### 1922

GEORGE T. PACK, attending surgeon emeritus at Memorial Hospital for Cancer and Allied Diseases in New York City, was awarded the Gran Cruz Placa de Plata Order de Duarte, Sanchez y Mella by the government of the Dominican Republic this fall. In October he gave the annual Munroe Lecture before the College of Physicians and Surgeons of Saskatchewan and the Saskatchewan Division of the Canadian Medical Association; his subject was "The Pigmented Mole and the Malignant Melanoma." In November he addressed the Institute for Neoplastic Diseases in Peru and was given the Condecoracion of Commander of the Order of Hippolito Unaue, named for the first Peruvian physician to receive the doctor of medicine degree.



Dr. Francis

### 1925

THOMAS FRANCIS, Jr. Henry Sewall University Professor of Epidemiology at the University of Michigan,

was given the Outstanding Civilian Service Award while attending the annual meeting of the Commission on Influenza of the Armed Forces Epidemiological Board on November 14. This award was established by the Secretary of the Army to recognize outstanding performance of those who serve in an advisory capacity. The award recognizes more than twenty-five years of service by Dr. Francis as a member and director of the Commission on Influenza, as former member and president of the Armed Forces Epidemiological Board, and as a consultant to the Army on many disease problems from World War II to the present.

The citation reads in part; "Dr. Francis' belief that preventive medicine is the key to building and conserving vigorous military forces was



reflected in his many valuable and outstanding contributions for prevention of military manpower losses. His dedication, patriotism, and loyalty deserve the highest praise."

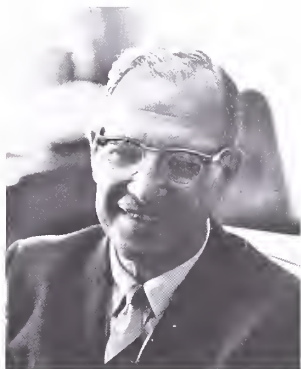
In addition to his service with the military forces, Dr. Francis has served on many research advisory boards for governmental and private agencies. He is a member of the American Philosophical Society, the American Academy of Arts and Sciences, and the National Academy of Sciences. He has been president of the American Society of Microbiologists, the American Association of Immunologists, the American Society for Clinical Investigation, and the American Epidemiological Society. In 1954 and 1955, he conducted the large field trial of poliomyelitis vaccine, which established the effectiveness of the Salk inactivated vaccine. His work in the field of respiratory diseases, especially influenza, has led to other awards and recognition.

#### 1930

"J. Roswell Gallagher Day," held in Boston on September 29, featured a scientific symposium, reception, and dinner honoring Dr. Gallagher, who recently retired from the Harvard medical faculty. He was the founder of the Adolescents' Unit at the Children's Hospital Medical Center and headed the unit for more than 15 years. At the symposium in his honor, papers were presented by several authorities in adolescent medicine. The guest speaker at the dinner was Dr. Dana L. Farnsworth, director of University Health Services at Harvard, whose topic was "Growing Young With Ros Gallagher." As of September 1, 1967, Dr. Gallagher became a clinical professor of pediatrics at Yale.

#### 1932

MYRON E. WEGMAN was one of three leaders in the health field to receive a 1967 Bronfman Prize from the American Public Health Association in October. "Educator, diplomat, clinician, and humanitarian" was the way the citation described the dean of the University of Michigan School of Public Health, who was formerly secretary-general of the Pan American Sanitary Bureau. The \$5000



Dr. Wegman

award and crystal cube was awarded for "creative work . . . in the betterment of community health." In a recent letter, Dr. Wegman noted: "In responding to the citation I had a chance, once more, of telling how much I owe to Grover Powers for whatever I have done."

#### 1937

MARGARET DANN retired from the faculty of Cornell University Medical College in June 1967. She is now living in Martinsville, Virginia.

#### 1938

JOHN PRUTTING is president of the Foundation for the Advancement of Medical Knowledge. He participated in a symposium on "Medical Progress and the Post-Mortem" presented by the Foundation at the New York Academy of Medicine in October.

#### 1940

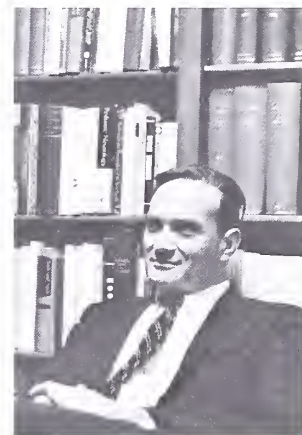
In a recent letter to JAMES SMITH, class agent, JACK BLAISDELL wrote: "Famie and I have recently moved to Laguna Beach, which is the Riviera of the West, but my practice is still principally in Santa Ana about 30 minutes away on the freeway. Our oldest boy, Christopher, who was born during our senior year at medical school, is now in his second year of law school having finally made up his mind what he wants to do with himself. Next in line is our daughter Jan who is now Mrs. John Henry Porter, III. She is not only a housewife but is teaching school near Providence, Rhode Island, having graduated in 1965 from Sarah Lawrence College. Our younger son Nicholas is cur-

rently attending graduate school at U.C.L.A. where he is majoring in ceramics and the history of art. I am sorry that I cannot report the appearance of any grandchildren but all three are married so Famie and I have high hopes."

PAUL D. MACLEAN is the author of an interesting article entitled "The Brain in Relation to Empathy and Medical Education" in the May 1967 issue of *The Journal of Nervous and Mental Disease*. This paper is based on a talk which he gave at the Yale School of Medicine Alumni Day program in June 1965.

#### 1943 (March)

In February 1968 ROCKO M. FASANELLA will participate in a symposium on cataract surgery at the Wills Hospital in Philadelphia. He will also serve as moderator of a discussion of complications in eye surgery in Trinidad and will be a guest speaker on ptosis surgery in Bogota, Colombia.



Dr. Rowland

#### 1948

LEWIS P. ROWLAND moved to Philadelphia this fall to assume his new post as chairman of the Department of Neurology at the University of Pennsylvania School of Medicine. He was previously professor of neurology at Columbia's College of Physicians and Surgeons. The new chairman has an impressive research record. His approach to neurological disease is biochemical and deals with genetic errors in the biochemistry of the nervous system. His current work is concerned primarily with diseases affecting the muscles.

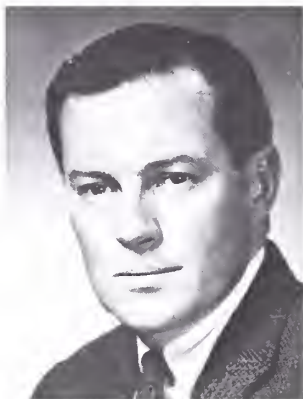


**1950**

SIDNEY S. LEE, associate dean for hospital programs at Harvard Medical School, has been appointed clinical professor of hospital and medical care administration at the Harvard School of Public Health.

**1951**

ROBERT N. HAMBURGER has been promoted to the rank of professor in the Department of Pediatrics at the University of California School of Medicine in San Diego.



Dr. Ferris

**1956**

THOMAS F. FERRIS has become associate professor of medicine and director of the Division of Renal Disease at the Ohio State University in Columbus. He had been a member of the Yale faculty since 1963 and had spent the 1966-67 academic year on leave of absence at Oxford University as a visiting investigator in the Regius department and doing clinical work in Dr. Paul Beeson's Nuffield Department of Medicine.

**1957**

CLIFFORD B. REIFLER has been promoted to assistant professor of psychiatry at the University of North Carolina School of Medicine. He is also associate university physician in charge of psychiatric services in the Student Health Service. Before joining the University of North Carolina medical faculty in 1963, he was a research psychiatrist in the Aerospace Medical Research Laboratory at Wright-Patterson Air Force Base in Ohio for two years.

**1959**

JOHN C. MARSH is now on the Yale faculty as assistant professor of medicine and pharmacology.

**1960**

THOMAS L. LINCOLN has joined the staff of the Rand Corporation in Santa Monica, California. He wrote recently to say, "I have changed coasts and formal affiliation, but I have not changed my focus of activity: studying the impact of modern biological science and technology on health management and medical decision making. Clearly I think that Rand offers some special advantages besides the salt air, the sun, and the sea—in particular, an eclectic and interdisciplinary attitude with rigorous cross-criticism." His special interests are urban affairs, civil rights, and patient care.

**1961**

RONALD DIERWECHTER, his wife, Jewell, and their children, Tatiana and Yonn, have returned to the Mission Methodiste in Il-Maten, Algeria, after a summer in the United States. In a recent newsletter from Il-Maten, Mrs. Dierwechter wrote: "On a hill far away stood a brand-new hospital, equipped and staffed, but no doctor... and so I am presently writing from that hill, having returned to that hospital, and having been greeted, received, cous-coused, and feted by that waiting staff." Anyone interested in borrowing a set of ten photographs of the hospital to acquaint people with this project should write to the Dierwechters at Mission Methodiste, Il-Maten (Setif), Algeria.

ROBERT M. LIVINGSTON reports that he has recently been certified by the American Board of Obstetrics and Gynecology.

JOHN V. WEIL returned to New Haven in July as a second year resident in internal medicine. The Weils have one daughter, Anne Hart, born in July 1966.

**1962**

ELIZABETH ULMAN KOENIG writes to announce the birth of their first child, a daughter named Katherine Lee, on November 23, 1967. The Koenigs plan to move to Bethesda, Maryland, in February 1968.

**1963**

DAVID F. CROSS is now a lieutenant on active duty with the Navy assigned to the Station Hospital at the U.S. Naval Station in Argentia, Newfoundland.

HAROLD P. KAPLAN returned to Yale-New Haven Hospital in July as a second year assistant resident. He was previously at the Aeromedical Research Laboratories at Wright-Patterson Air Force Base in Ohio.

**1964**

JOSEPH CURI and his wife have announced the birth of a daughter, Anne Josephine, on August 16, 1967.

**1965**

MOHANDAS M. KINI is currently an assistant resident in ophthalmology at the Massachusetts Eye and Ear Infirmary. After completing his internship at the Montreal General Hospital, he worked as a solo general practitioner for over a year in Bell Island, a community of 8,000 people in Newfoundland before returning to Boston to begin his residency training.

**1966**

JAMES E. BROWN completed his internship at Cleveland Metropolitan General Hospital and is now a first year assistant resident in internal medicine at Yale-New Haven Hospital.

ELI H. NEWBERGER and his wife have announced the birth of a daughter, Mary Helen, on October 2, 1967.

## HOUSE STAFF

**1935**

ROBERT A. PHILLIPS has received the 1967 Albert Lasker Clinical Research Award "in recognition of his enormous contribution to the understanding of the mechanism of death in cholera, and the development of a life-saving method of treating it." The citation notes: "Dr. Phillips' research and leadership are responsible for the reduction in cholera from a death rate of over 60% in formerly untreated cases, to a death rate of less than 1% in cases treated by his method... As a result of his field studies, conducted during the past ten years in the Far East, Dr. Phillips observed that the chief killing ele-



Dr. Phillips

is also a member of the American College of Allergists and the American Academy of Allergy, and a fellow of the American Association of Clinical Immunology and Allergy.

## PUBLIC HEALTH

### 1940

M. J. PLISHNER and ARTHUR B. ROBINS ('42) are co-directors of a Public Health Service emphysema detection and prevention project. The joint project is administered at the Queensboro Tuberculosis and Health Association by the executive director, M. J. Plishner, and at the Queens Hospital Center by Dr. Robins, who is director of Ambulatory Patient Services in the Pulmonary Medical Division of the Queens Hospital Center-Long Island Jewish Hospital Affiliation.

### 1946

PAULINE SAVAGE FLETCHER has moved from Arizona to Los Angeles, California, where she is employed as supervisor of nursing services, University of California College of Medicine at Irvine.

### 1948

HOWARD W. ENNES, JR. has been named a special consultant to the Community Health Action-Planning Program of the Health Insurance Council, New York City. He will serve in this new position on temporary assignment from the Equitable Life Assurance Society of the United States where he is assistant vice-president and director of community services and health education.

LUIS A. GALLARDO has been appointed as the under-secretary of health for the Ministry of Public Health of Bolivia. Prior to this appointment he was in charge of operations and planning in the Ministry. While holding this position he took some postgraduate work in health planning at the University of Santiago, Chile.

JOSEPH H. GERBER has retired from the U.S. Public Health Service and has moved to the island of Guam where he has accepted an appointment as health officer of Guam.

HIRAM SIBLEY is the executive director, hospital planning for metro-

politan Chicago. He has also been named secretary-treasurer, Association of Area Wide Health Planning Agency.

### 1949

JOHN P. LAMB, JR. has been appointed dean, College of Health, East Tennessee State University, Johnson City, Tennessee.

WILLIAM B. PARSONS has been named chief, Program Assistance Branch, Division Allied Health Manpower, U.S. Public Health Service in Washington, D.C.

### 1950

CHARLES H. OKEY is the director of Public Health Laboratories, Maine Department of Health and Welfare, with offices in Augusta.

### 1951

JOSEPH AXELROD, formerly with the Montefiore Hospital, New York City, has been named planning administrator for the Department of University Health at Yale.

ROBERT L. JOHNSON is the vice-president for student affairs, University of Kentucky in Lexington.

MARIANA B. MIJARO is a registered nurse on the staff of the Passaic General Hospital in New Jersey. Prior to this position, she was nurse-instructor in communicable diseases, Manila Health Department in the Philippines. In 1963 she came to the United States as an exchange nurse in Philadelphia, Pennsylvania, for one year and then transferred to New Jersey where she worked in obstetrics and pediatrics. She returned to the Philippines in 1964 and in 1966 returned to the United States.

### 1953

SHIRLEY L. HANDLER announces the birth of a son, Jonathan Isaac, on July 12, 1966.

### 1955

FRANCES R. OGASAWARA has been promoted to coordinator, Tuberculosis Program, National Tuberculosis Association, New York City. NGUYEN-VAN-THO writes that he was appointed Secretary of State for National Education in Viet Nam in November, 1966. He has found the experience "a very difficult and exhausting task, trying to hold down the Government position and at the same time to keep up my dental pro-

ment in cholera is the dehydration of the victim. He devised a method of replacing the body fluids, salts, and other chemical compounds, called electrolytes — which are necessary to various physiological processes essential to life, and which are lost by the victim in the course of the disease — so as to bring the body chemistry into balance. This life-saving therapy of rapidly replacing, intravenously, these lost body fluids and compounds is so simple that it can be successfully administered in the field, even under the most elementary conditions, and even by relatively unskilled personnel." Dr. Phillips has been director of the Pakistan-SEATO Cholera Research Laboratory, Dacca, East Pakistan, since he retired from the Navy Medical Corps in November 1965.

### 1950

DAVID W. MOLANDER lectured on "Newer Methods of Treatment of the Malignant Lymphomas and Leukemias" at the medical congress held in Santo Domingo, Dominican Republic, in October 1967. He was decorated with the Order of Cristobal Colon at a reception held in the National Palace. Dr. Molander is on the staff in internal medicine of the Pack Medical Group in New York City.

### 1963

CARL DUBOVY began private practice of allergy with the Community Medical Group in Boonton, New Jersey, this past July. In October he was elected to membership in the New Jersey State Chapter of the American Academy of Pediatrics. He

profession. It has been a hard year but truly I did enjoy my work, both professionally and politically, for it was quite a challenge."

**1958**

JOSEPHINE A. CIPOLLA is the nursing coordinator with the New York Telephone Company. Her office is in New York City.

**1965**

MONTE N. FRAIZER was promoted to professor of animal diseases at the University of Connecticut in October 1967.

**1966**

NANCY P. ALFRED is assistant to the dean at Mount Sinai School of Medicine in New York City. Miss Alfred is also assistant in the Department of Community Medicine.



*Dr. Nassif*

RAIF E. NASSIF has been named director of the School of Medicine, American University of Beirut in Lebanon. He will be dean of a school that has over 200 students from Asia, Africa, Europe, and the western hemisphere. This is one of the foremost medical schools in the Middle East. Dr. Nassif was on the American University of Beirut faculty from 1950 to 1953 as an instructor in bacteriology and laboratory sciences. He held a fellowship in clinical pathology at the University of Pennsylvania in 1954. Following his year of study in Philadelphia, he was appointed assistant chairman of the Department of Clinical Pathology and was promoted to chairman in 1957. Dr. Nassif is a Chevalier in the Lebanese Order of Cedars, an honor bestowed on him by the government of Lebanon for his work as chairman of the 1960-61 Middle East Medical Assemblies.

RUDOLPH V. SELLERS has been appointed instructor and health educator in the Tufts University Department of Preventive Medicine and is a staff member in the Tufts University Columbia Point Health Center in Dorchester, Massachusetts.

**1967**

CHARLES J. PETRILLO, JR. has accepted an appointment as a commissioned officer in the U.S. Public Health Service. A public health economist, he has been assigned to the Injury Control Program in the National Center for Urban and Industrial Health, Cincinnati, Ohio.

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*A limited number of copies of the C.-E.A. Winslow Lecture "Current Medical Care Problems" presented by Dr. Karl Evang on the occasion of the dedication of the Laboratory of Epidemiology and Public Health in April 1965 are available upon request. Distribution will be made as long as the supply lasts. Anyone wishing a copy of this lecture should send their request to:*

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The new Yale medical curriculum has been approved by the school's Board of Permanent Officers, and the first year will be implemented with the students entering in the fall of 1968. A discussion of this new curriculum will appear in the next issue of *Yale Medicine*.

YALE MEDICINE

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# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / SPRING 1968





COVER: The owl and the torch, symbols of wisdom and knowledge over the entrance to Sterling Hall of Medicine, are familiar to all alumni. Inscribed below are the words

ΛΑΜΠΑΔΙΑ ΕΧΟΝΤΕΣ ΔΙΑΔΩΣΟΥΣΙΝ ΑΛΛΗΛΟΙΣ

from Plato's Republic. The inscription may be translated "Those who carry torches will pass them on to others."

# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE/SPRING 1968/VOL. 3 NO. 2

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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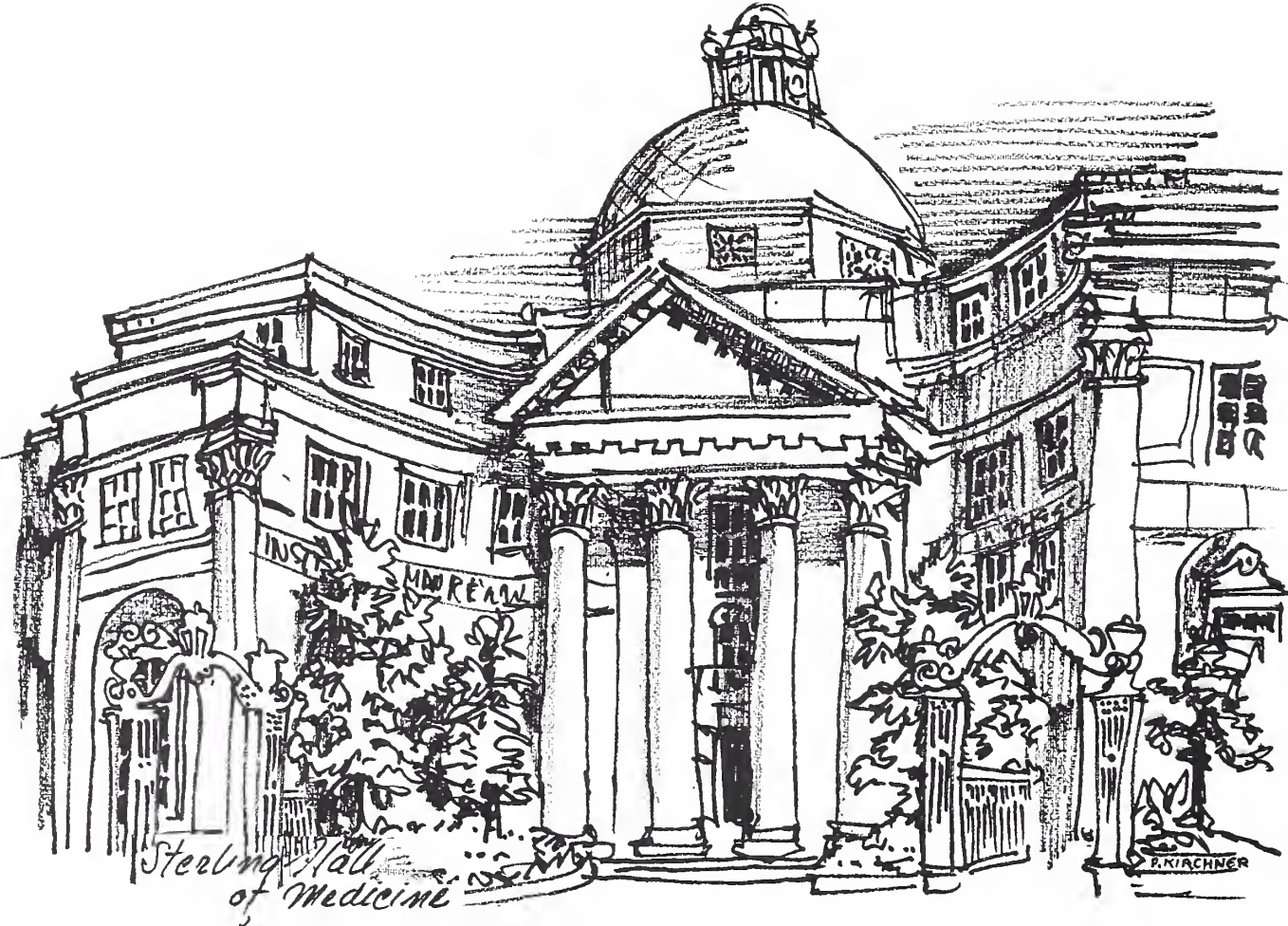
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The New Curriculum





The class of 1972, entering medical school at Yale this September, will be the first to take part in a new program of medical education that has been more than three years in the planning. The Committee to Re-evaluate the Goals of Medical Education and Their Implementation at Yale began a thorough study in 1965 under the chairmanship of Dr. Byron H. Waksman, professor of microbiology. Among the recommendations of the Committee was that a new office of Associate Dean for Curriculum be established. Dr. Howard Levitin, associate professor of medicine, was named to the new post in the autumn of 1966 and worked closely with the Curriculum Committee, chaired by Dr. Edward A. Adelberg, professor of microbiology and molecular biophysics, to develop the new curriculum that has now been approved by the Board of Permanent Officers. On the following pages *Yale Medicine* presents some questions regarding the new curriculum to the associate dean. The interview is followed by recommendations from the Report of the Curriculum Committee.

*Why was it felt by the Curriculum Committee, and indeed by the faculty in general, that a curriculum revision was appropriate at this time?*

Dr. Levitin: The present curriculum, which has been in effect at Yale for many years, exposes all of the students to a similar program, and does not allow individual planning. It was felt that a new curriculum could be designed which would meet the needs of contemporary medicine, and that this new program should be a truly flexible program. It should allow the student to study at his own pace, to explore in depth areas of his own interest, and to pursue an individualized program which will be a firm foundation for his ultimate career in medicine.

*What are the key features of the new curriculum?*

Dr. Levitin: I would characterize the key features as follows:

1. A modest reduction in the initial time devoted to the study of basic sciences.
2. The early introduction of the student to clinical medicine.
3. The opportunity to study advanced basic science following clinical clerkships.
4. A flexible program during the last one and a half years which allows the student to plan his own curriculum in consultation with his advisors.
5. A continuing outpatient clinic experience extending over a relatively long period.

*How do you accomplish the early introduction of the student to clinical medicine?*

Dr. Levitin: The new curriculum will require a student to spend six weeks of his first summer in a clinical setting. By a clinical setting we do not necessarily mean the traditional hospital experience as a clinical clerk, but rather a variety of clinical experiences available in contemporary medical practice. These will include apprenticeship to a private practitioner, affiliation with a group practice, work in a community health project, and any other clinical activity that will give the student a first-hand involvement with a doctor delivering good medical care to a patient. In order to prepare the student for this clinical experience during the first summer, we have arranged the courses of the first year to include those considered prerequisite to clinical studies; these courses include introduction to clinical medicine, laboratory medicine, and some pathology and pharmacology. He will, in addition, have had courses in personality development, psychopathology, and epidemiology and public health.

In the present program the student is frustrated by the two-year delay between his arrival in medical school and his initial involvement with the clinical situation. There is no doubt that this early clinical experience will have a marked impact on his studies of both basic science and clinical medicine during the remaining three years of his medical education.

*Would you comment on the advantage of returning to basic science studies following the clinical clerkships?*

Dr. Levitin: During the first two years of the current program the student fails to appreciate the important role that basic science ultimately will play in his understanding of clinical medicine. It is not until his third and fourth years in clinical medicine that the important relationship of basic science to contemporary medicine becomes apparent. Our present students and recent graduates who have been questioned about this have indicated they would have welcomed the opportunity to restudy basic science, approaching this body of material at a more advanced graduate level with the sophistication gained by previous clinical experience. During the last one and a half years of the new program the student will have the opportunity to select courses in advanced basic science, which he and his advisor feel are appropriate to his chosen career. These courses will follow required clinical clerkships and will be studied with a new perspective gained by clinical experience.



Could you elaborate on the flexible program during the last one and a half years?

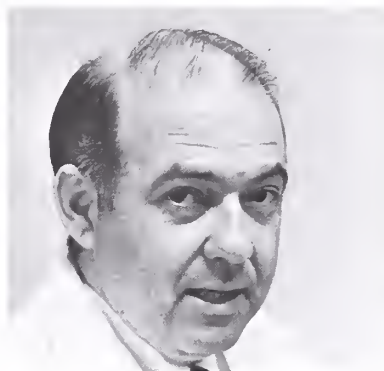
Dr. Levitin: This is perhaps the most exciting aspect of the new curriculum. Two important things have happened in medical education. First, the amount of information that justifiably can be included in the curriculum has increased enormously, and second, there are new career opportunities available in medicine which require training in new disciplines. The present curriculum limits the ability of the student to become adequately prepared for his chosen career. In this new program—which we call the “multiple-track system”—the student will be able to plan, during the final year and a half, a curriculum which is designed to meet his particular objectives.

I am talking about the increasing number of young physicians who are going into the health delivery services, the field of biomedical engineering, medical economics, space medicine, medical legislation, and medical jurisprudence. It would be impossible to cram the courses necessary to prepare an individual for a career in these fields into the already crowded four year curriculum. The flexible aspect of our program will allow the student to make a career commitment and plan a program which adequately prepares him, without jeopardizing the ability of other students, to pursue equally important careers in the field of their choice. Any attempt to distribute the total body of knowledge would only dilute the amount of material any one candidate could master and leave him inadequately prepared for his career.

It is important to emphasize that the goal of the multiple-track system is not to develop specialists at an earlier stage, if we define specialization as the acquisition of technical competence. It is our goal instead to expand his training with courses and clinical experience which will enhance his potential to make significant contributions to his chosen field of medicine.

Tell us more about a long term outpatient clinic experience.

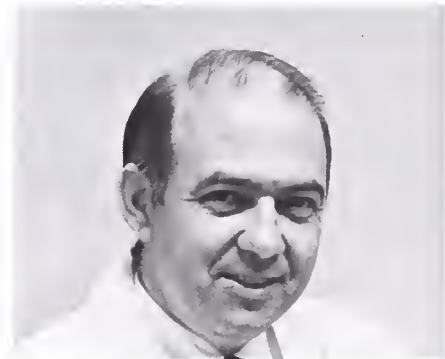
Dr. Levitin: Under the present program the student has an eleven or twelve week assignment in the outpatient clinic. During this time he becomes acquainted with a moderate number of patients but sees them over a relatively short period and does not have the opportunity to see the effects of long term treatment. Nor does he become involved in a significant doctor-patient relationship which can only be the product of long term care. Under the proposed program the student will acquire clinical experience working in an outpatient clinic



one half day once a week and will follow a small group of patients for up to a full academic year.

What has been the students' reaction to the proposed curriculum revision?

Dr. Levitin: Students have played an active role in the planning of the new curriculum. The Dean and the Curriculum Committee discussed the proposed curriculum at a meeting of the student body. Students have discussed various aspects of the proposed revision of the curriculum with members of the Curriculum Committee. A recent survey, developed and conducted by the Student Council indicated student preference for the now accepted curriculum.



*What is the faculty attitude?*

Dr. Levitin: The new proposal was unanimously approved by the Board of Permanent Officers. My own feeling is that the majority of the faculty are strongly behind the new curriculum and this will be a key factor in its ultimate success.

*Will written examinations or the establishment of class standings, long absent under the "Yale System", be required under the new curriculum?*

Dr. Levitin: I am strongly opposed, as are a large majority of the faculty, to the introduction of required graded examinations and class standings. We will continue to require satisfactory completion of Part I and Part II of the examination given by the National Board of Medical Examiners. Additional required examinations would be incompatible with the student's ability to study at his own pace in an individualized program.

There is a need, however, for an improved system of evaluating students' progress, which should be based on an increased amount of personal contact between the faculty and students.

## From the Curriculum Committee Report

The Committee unanimously recommends that (the new curriculum) be inaugurated for the class entering in September, 1968. The following statements are provided as amplification:

1. The first three academic semesters of eighteen weeks each are assigned to the teaching of basic sciences. (This includes the basic, behavioral, social, epidemiological, and pre-clinical sciences.) During the second semester of the first year significant portions of the courses Introduction to Clinical Medicine, Laboratory Medicine, Pathology, and Pharmacology will be completed. The remainder of these courses will be given in the third semester (beginning of the second year).

2. The total number of hours assigned to each basic science course will be that described in the report of the "Adelberg Committee" on April 12, 1967.

3. The inclusion of significant portions of the courses Introduction to Clinical Medicine, Laboratory Medicine, Pathology, and Pharmacology in the first year will prepare the student for clinical activity during the first summer. Each student will be required to have six weeks of clinical experience during one of the two six-week periods available during the first summer. This clinical experience should be designed to give the student first hand involvement in the delivery of health services.

4. A limited number of students will be selected for a regular six-week standard clinical clerkship during the first summer. This will permit the faculty to compare the work of such students with those who have had the full complement of basic science courses before entering on the wards, as an experiment in medical education.

5. The remaining six weeks of the first summer not used for clinical experience will be available to the student for employment and vacation.

6. During the fourth and fifth semesters the student will rotate through six six-week clinical clerkships. In order to complete his requirements of twelve weeks each of Medicine and Surgery, and six weeks each of Psychiatry, Pediatrics, and Obstetrics and Gynecology, the student will be obliged to complete one additional six-week clerkship. This may be accomplished during the second or third summer, each of which will have two six-week blocks of time available.

7. The sixth, seventh, and eighth semesters will be devoted to specialized programs, or "tracks". Each track should contain the following curricular activities:

a. A series of graduate-level science courses relevant to the student's goals. These courses should be concentrated in the sixth semester with a progressive decrease in the seventh and eighth semesters.

b. One or more courses which correlate clinical medicine and fundamental science.

c. Appropriate clinical experience, starting in the sixth, and progressively increasing throughout the seventh and eighth semesters.

d. Out-patient clinic experience (medicine and pediatrics), at least two half-days per week for one eighteen-week semester, or one half-day per week for two eighteen-week semesters.

(The above outline is subject to change at the request of a student after consultation with his advisor and the Dean's Office.)

8. The research thesis will continue to be a requirement for graduation. Time for thesis work will be available during the first, second and third summers, as well as during the three "track" semesters.

9. The student may elect to take Part I of the National Board Examination at the end of his second year or at the end of his third year. In either case, he may take it either in June or in September. He will continue to take Part II of the examination at the end of his eighth semester.

The Curriculum Committee further recommends the creation of three new committees: An ad hoc Committee for the Teaching of Fundamental Sciences, which will direct its attention to the course content and course



sequence in the first three semesters; an ad hoc Committee on Clinical Clerkships, which will direct its attention to the newly created clinical experience during the first summer and a review of the clinical clerkships during the fourth and fifth semesters; an ad hoc Committee on the Multiple Track Program, which will direct its attention to the multiple track system. This committee will deal with the advanced graduate-level courses in science given primarily during the sixth semester and also the correlative and clinical courses given during the seventh and eighth semester.

#### Concluding Remarks

The principal advantages of the plan outlined above are the following:

1. Adequate time is provided for the teaching of required fundamental science courses at the beginning of the curriculum.
2. The goal of earlier clinical experience has been achieved in that six weeks of clinical experience are provided for all students in their first summer, and regular clerkships start in the fourth semester.
3. Three full semesters are provided at the end of the curriculum for specialized programs. This will allow the student to plan, with his advisor, a major portion of his curriculum according to his own talents and interest.
4. The teaching of basic science is extended into the last two years, in a manner which will permit a maximum of coordination with clinical teaching.

5. The faculty has an unprecedented opportunity to conduct continuing experiments in medical education. Answers may now be obtained to such questions as: What is the effect of starting the regular clerkships in the first summer? How does the student respond to the basic science courses after he has had some clinical experience? The flexibility provided by the use of summers and by the track system should permit many opportunities for research in medical education.

In conclusion, the Committee wishes to reaffirm the following statement of the preceding committee:

*"One of the most significant aspects of the new curriculum is the creation of the office of Associate Dean for the Curriculum. For the first time, an administrative mechanism will exist for the year-to-year supervision of the curriculum by an officer of the school. The Board of Permanent Officers should take full advantage of this opportunity to carry on a continuing effort to improve and coordinate the various components of its curriculum."*

E. A. Adelberg (Chairman)

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J. W. Cole

J. E. Coleman

C. D. Cook

E. S. Crelin

N. J. Giarman

H. Levitin

T. Lidz

A. R. Martin

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D. Seligson

F. C. Redlich (ex officio)

## Yale and The ABCC

Spring 1968 finds Yale's Department of Internal Medicine marking a decade of dedicated involvement in the work of the Atomic Bomb Casualty Commission in Japan.

It is ten years since Yale first agreed to provide a chief of medicine for the ABCC staff. The agreement, an informal one made between Dr. Paul B. Beeson, then chairman of internal medicine at Yale, and Dr. R. Keith Lannan, who was director of the medical division of the National Academy of Sciences, has endured. Since 1958, five Yale physicians have served as chief of medicine with the ABCC in Hiroshima: Dr. J. William Hollingsworth, Dr. Stuart C. Finch, Dr. Lawrence R. Freedman, Dr. Kenneth G. Johnson and Dr. Benedict R. Harris, the present chief. These men have carefully selected teams of younger physicians, principally from Yale, who have also gone to Japan to work in the medical program.

But Yale doctors have also played a continuing role from the earliest studies of those killed and injured by the atomic bombings of Hiroshima and Nagasaki in August of 1945 until the present.

It was the late Dr. Ashley W. Oughterson, on leave from the Yale faculty during World War II and then serving as a surgical consultant to General MacArthur, who first realized the importance of a medical investigation in the bombed areas. He drew up plans for the investigation in late August, 1945, and by early October the first team of investigators arrived in Hiroshima.

Among them was Dr. Averill A. Liebow, who later published a detailed account of his experiences in Hiroshima. "Encounter with Disaster—a Medical Diary of Hiroshima, 1945" appeared in the spring 1966 issue of the *Yale Journal of Biology and Medicine*.

Of his first look at the bombed city on October 12, Dr. Liebow wrote: "Finally we saw the shocking and



Hiroshima: before the atomic blast, and in the fall of 1945.





breathtaking sight of Hiroshima below, devastated, cold—an ash... on the field were some horribly scarred children including a boy who told us in understandable English of his experience. . . . The roads are still littered with wreckage of every description. There are many burned out trucks and cars. Charred poles have collapsed and jumbled wires criss-cross the path. Most remarkable is the fact that through this scene of desolation street cars are running through the middle of the devastated and almost empty city . . .”

In the introduction to his diary, Dr. Liebow writes of the contributions made by Yale doctors:

“Men of the Yale Medical School were closely asso-



*Dr. Darling (center) has been director of the ABCC since 1957. Dr. Freedman (right) was succeeded by Dr. Jahnsan (left) as chief of medicine in 1964. Other Yale doctors who have served as chiefs of medicine are pictured on the opposite page.*

ciated with the studies at Hiroshima from the beginning and have remained so to the present time. Col. Oughterson himself was an associate professor of surgery on leave, and three others of the seven medical officers assigned to Hiroshima had been Yale medical students and two were on leave from the faculty.”

Dr. Liebow also notes that when the Joint Commission for the Investigation of the Effects of the Atomic Bomb in Japan became the Atomic Bomb Casualty Commission in 1948, one of the first pathologists assigned was Dr. William J. Wedemeyer, Yale medical class of 1946. Another medical alumnus, Dr. Thomas Francis, Jr., now professor of epidemiology at the University of Michigan, designed the closed population sampling study that is now the core of the operation at ABCC.

Since 1957, the program has been under the capable leadership of Dr. George B. Darling, professor of human ecology, who has been on leave of absence from Yale

serving as director of the ABCC. Dr. Darling’s contributions to the work of the organization were recognized last fall by the Japan Medical Association. The Association presented him with its highest award, the Golden Orchid Supreme Award, for his “outstanding services to the promotion of cooperation in the field of medical science between the United States and Japan.” He is the first American to receive the award.

### *The Work of the Commission*

While many first hand observations of the devastating effects of the atomic bomb on humans were made by Japanese scientists immediately after the bombs fell, and soon after by the Joint Commission teams, it took considerably longer to accumulate the detailed population studies which have been published but are not yet completed.

The first task was that of locating survivors in order to carry out these studies. Many of those who survived the atomic blasts moved out of the cities during the years immediately after 1945. Some were soldiers who returned to their homes. The ABCC first made local population surveys and conducted limited medical observations, but it was not until 1950 that the major portion of the survivors were located. At that time, the Japanese government included a question in the national census which asked every Japanese citizen whether or not he was in Hiroshima or Nagasaki at the time of the atomic bombings. This information was made available to ABCC and a master file of all known survivors was created. Since that time, this population information has been repeatedly reviewed and gradually improved upon. From this information, the populations for study are selected.

During the late 1940’s and early 1950’s a number of important medical observations were made. The most outstanding of these were the relatively high leukemia rate and the detection of radiation cataracts in the heavily exposed survivors.

The incidence of leukemia was first noted to rise in 1948, and reached a peak during the years 1952 and 1953, at which time there was a 30- to 50-fold increase in those persons exposed within 1800 meters of the explosion’s hypocenter. In general, the development of leukemia can be related to the intensity of exposure so that those located at more remote distances from the hypocenter appear to have little risk in this respect.

Although the leukemia rate has decreased since 1953 and the risk to any particular exposed person is considered small, according to an ABCC report, a some-



what higher rate persists in the exposed as compared to the nonexposed. At the present time the leukemia rate in the heavily exposed populations is about two or three times that of the non-exposed population.

Studies of the offspring of exposed parents have shown no detectable increase in malformations, still births, or leukemia. There is some evidence, however, that either maternal or paternal preconception radiation exposure may alter the normal male to female ratio of their progeny. Radiation exposure during fetal life has resulted in the birth of a few children with microcephaly, and some retardation of growth and development during childhood.

medical examination of about 20,000 exposed and non-exposed subjects in Hiroshima and Nagasaki. The informal agreement in which Yale began to provide the American personnel for the medical program, starting in 1958, has helped to maintain continuity of personnel vital to the success of this study.

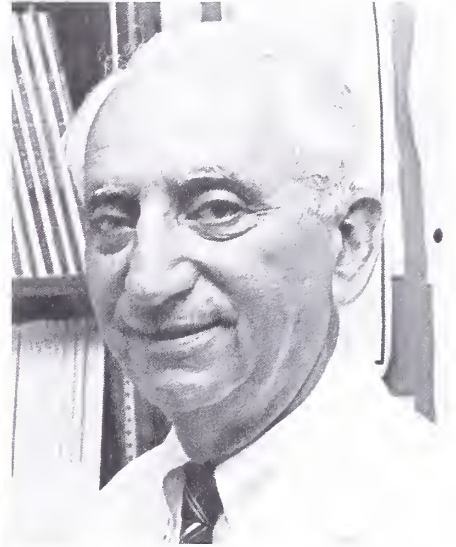
In its 10 years of operation, Dr. Finch reports, the Adult Health Study has been very successful. Perhaps the most encouraging aspect of a long range study of this kind is the fact that about 80 per cent of the available subjects regularly participate in the medical examination program. This unusually high level of cooperation has permitted ABCC physicians to document the



Dr. Hollingsworth



Dr. Finch



Dr. Harris

More recent studies at ABCC have shown a modest increase in thyroid cancer in the heavily exposed subjects. There also is a suggestion that the risk for other types of cancer may be slightly increased in the exposed. This subject now is under intensive study.

In a summary of the ABCC's work, a former chief of medicine, Dr. Stuart Finch, now professor of medicine at Yale, says that in the early and middle 1950's prior to Yale's involvement in the medical program, "some difficulty was encountered by the Academy in maintaining a constant flow of American personnel, and medical programs were maintained with difficulty because of lack of personnel continuity."

In 1957, the ABCC entered a new phase of its studies with the recommendation of a committee chaired by Dr. Thomas Francis, Jr., for the new long-range medical surveillance program which later became known as the Adult Health Study. The program involves periodic

development of a great variety of infectious, neoplastic and degenerative diseases in both the exposed and non-exposed populations. The studies have included many important negative findings and have helped to define a population with minimal exposure which was beyond the range of radiation injury. These observations have helped relieve the anxieties of many people in Hiroshima and Nagasaki.

The Department of Medicine at ABCC also maintains an active research program within the framework of the Adult Health Study. Practically all staff physicians are involved in some type of investigative work. Particular attention is directed to such subjects as aging, neoplasia, hematologic disease, cardiovascular disorders, genetic aberrations, and alterations in immune mechanisms. Many of these projects are carried on for several years, while others are of a short-term nature and may be completed in a matter of a few months.

Upon completion, each project is written up as an ABCC Technical Report, printed both in English and Japanese, and is distributed to individuals and institutions with an interest in the program. Many of the reports are also published in various scientific journals usually in Japan or the United States.

Among the research programs, virtually all of which are designed to determine the late effects of exposure to ionizing radiation, are the continuing observation of exposed subjects for the detection of leukemia and related disorders. Children who were in utero at the time of the atomic detonations also are carefully watched.

Among the most recent major research projects developed at the ABCC are cytogenetic studies which have uncovered significant numbers of chromosomal abnormalities in the lymphocytes of exposed persons. The ABCC also has recently initiated a cardiovascular disease study in which the characteristics and frequency of cardiovascular disease in the Japanese of Hiroshima, Hawaii, and California are compared.

#### *A Joint Endeavor*

A highly important aspect of the work of the ABCC and of its predecessor the Joint Commission has been its operation as a joint endeavor of both Japanese and American scientists. Japanese doctors have been deeply involved in the research work from the beginning of the studies in 1945. In 1948 the National Institute of Health of the Ministry of Health and Welfare in Japan initiated its joint participation in the ABCC, a participation which has continued to the present day.

The years 1962 and 1963 were of great importance for the strengthening of the United States-Japan partnership in the study of the late effects of the atomic bombs. Agreements were exchanged between ABCC and the Japanese Institute of Health on the joint conduct of all three major studies at ABCC: Life Span Study, Adult Health Study and Pathology Studies.

At the moment, there are about 800 employees at ABCC, most of them Japanese. The main headquarters are in Hiroshima, with a smaller unit in Nagasaki. General medical facilities of the organization in both cities are excellent. The large ABCC department of statistics maintains the latest electronic equipment for medical data processing.

Virtually all the Yale personnel who have been associated with the ABCC feel that the scientific rewards have been most valuable. Particularly valuable, writes Dr. Finch, has been the exposure to large scale epidemiologic medicine with rigid statistical controls.

And, he adds, "The personal rewards for undertaking one of these assignments are almost indescribable. One cannot help but be impressed with the beauty of Japan and the wonderful culture of its people. Out of initial chaos, scientific personnel have been drawn together from distant parts of the world. Lasting friendships have been established in the communities and with the staffs at Hiroshima and Nagasaki University Medical Schools. It is hoped that it will be possible to maintain these friendships for years to come."

Another former chief of medicine, Dr. Lawrence R. Freedman, now associate professor of medicine at Yale, defines Yale's role in the ABCC this way: "The bombings of Hiroshima and Nagasaki opened the doors to the era of nuclear power and threat of atomic destruction. The citizens of Japan who were killed are a monument to this event. The survivors, in large part, dedicate their thoughts and actions to work toward preventing any repetition of atomic destruction anywhere in the world. The Yale participants in the work of the ABCC are proud to join in this effort in the way they know best—the way of providing knowledge."

Editor's note: Dr. Robert Jay Lifton has recently joined the list of Yale faculty who have studied the aftereffects of the atomic bomb in Hiroshima. Dr. Lifton, who is Foundations' Fund for Research in Psychiatry Professor of Psychiatry at Yale, has just published a book entitled *Death in Life—Survivors of Hiroshima*, reviewed on page 25 of this issue of *Yale Medicine*.



## AIM Campaign

Medical alumni in the New York metropolitan area turned out more than one hundred strong for a dinner meeting on February 27 that marked what Dr. George A. Carden, Jr., called "the commencement of expanded medical alumni activities in connection with the new development plans at the Yale School of Medicine."

As New York area chairman of the Alumni in Medicine (AIM) campaign, Dr. Carden ('35) was master of ceremonies at the reception and dinner held at the Biltmore Hotel. Noting that "an exciting new chapter is beginning to unfold in the history of the school," Dr.

Carden invited the participation of all his fellow alumni in this critical demonstration of faith in the school.

Dr. Carden heads a committee of more than thirty Yale doctors who have accepted the challenge to seek capital gifts personally from all alumni in the metropolitan area. Similar committees are working in other parts of the country, with dinner or luncheon meetings bringing alumni together in Hartford, San Francisco, Detroit, Washington, D.C., and other locations.

The program and goals of the AIM campaign were outlined by Dr. Leona Baumgartner (Ph. D. '32, M.D. '34), general chairman of the campaign. Plans call for

*Dean Redlich told New York area alumni that Yale's new medical curriculum will place the school in the vanguard of the newest revolution in medicine.*





alumni contributions totaling at least 2.5 million dollars toward the over-all goal of 50.9 million dollars to be sought from private sources over the next ten years.

"We have two jobs to do," Dr. Baumgartner said. "First, to show that we ourselves believe in our school, and second, to help lead President Brewster, Dean Redlich, and others who are going to approach foundations and corporations to these and other individual sources of money."

Dr. Baumgartner referred to the "tremendous obligation I personally owe to the Yale medical school for the

wonderful years I have had as a doctor." She was stunned to discover, she said, the great difference between the amount she had paid to Yale for her medical education and the amount that education had actually cost Yale. "I paid back the loans I had received in medical school . . . and I had contributed to each appeal as it came along, but then I sat down and figured out that I hadn't even paid back half of what Yale had invested in me."

Dean Redlich, the main speaker of the evening, described Yale's plans to take the lead in the "third revo-



*Dr. Benjamin Castlemon (second from left), president of the Association of Yale Alumni in Medicine, with President Kingmon Brewster and Drs. Baumgartner and Corden.*



*Dr. Milton L. Dryfus, talking with Mr. Brewster, is an alumnus of 1912, the earliest class represented at the dinner meeting. Dr. Inglis F. Frost, '12, also attended.*

lution in medical education—the revolution of the consumer.” He cited as the earlier “revolutions” of this century: first, the development of university medical centers in response to the Flexner Report and, second, the strong emphasis on basic scientific research in the years following World War II. Defining the present trend, the dean said that for the first time “the patient, who is our consumer, has a strong voice, expressed directly and through his representatives . . . which tells us what kind of care should be given.”

Clinical practice at Yale, as at other medical schools,

needs improvement, Dean Redlich stated, adding that pressures for this improvement will come increasingly from funding agencies, foundations, and ultimately from the patient. “We must respond to these pressures,” he said. “But apart from this, I am convinced that in order to teach first-rate medicine, we must practice first-rate medicine.”

The major part of the dean’s talk was devoted to the new medical curriculum that will go into effect next fall. It is described in the article beginning on page 2 of this issue.



*Graduates representing more than fifty years of medicine at Yale enjoyed the festive atmosphere of the New York AIM dinner. Old acquaintances were renewed at the preprandial reception.*





## Ex Libris

Although the use of bookplates has declined in recent years, evidence that fine examples of the art are still being produced comes regularly from the Yale Medical Library. As new book funds are established, new plates are designed or existing ones are adapted to identify them.

Four plates recently received from the printer are shown here, with brief descriptions of their respective book funds. They are among more than 80 plates used by the library for its endowed book funds and other special gifts.

This spring some 200 medical bookplates have been on exhibit in the rotunda of the library. The majority of these are from the Lowenhaupt Collection deposited in this library 15 years ago by the late Warren Lowenhaupt, who was curator of bookplates in Yale's Sterling Memorial Library.

Examples in nine display cases show not only a variety of fine designs but also indicate the wide range of interests of English, European, and American physicians from the 17th century on. The tenth case is devoted to a selection of plates currently used in the library to identify some of its book funds.

A newly designed bookplate for the Herbert Thoms Book Fund shows Deane Keller's 1945 drawing of Dr. Thoms, now professor emeritus of obstetrics and gynecology. The fund was established in April, 1967, by gifts from the Associates of the Yale Medical Library, of which Dr. Thoms was chairman from the time of its founding in 1948 until last year. He is now honorary chairman as well as curator of Yale medical memorabilia in the library. The bookplate was designed by John O. C. McCrillis of the Yale University Press.

A bookplate for the Streeter Collection Fund, also designed by Mr. McCrillis, has central lettering printed in red, with surrounding black lettering in a red frame, all on a white background. The Streeter Collection Fund was established in April, 1965, by bequest of Alice Chase (Mrs. E. C.) Streeter for the maintenance of the Edward Clark Streeter Collection of Weights and Measures in the Yale Medical Library and for the purchase of books on weights and measures.

Dr. Streeter, an 1898 graduate of Yale College, gave his uniquely comprehensive collection of weights and measures, dating from ancient civilizations through the 19th century, prior to the dedication of the present library building in 1941.

## HERBERT THOMS BOOK FUND

YALE MEDICAL LIBRARY



purest ellixar and extraction

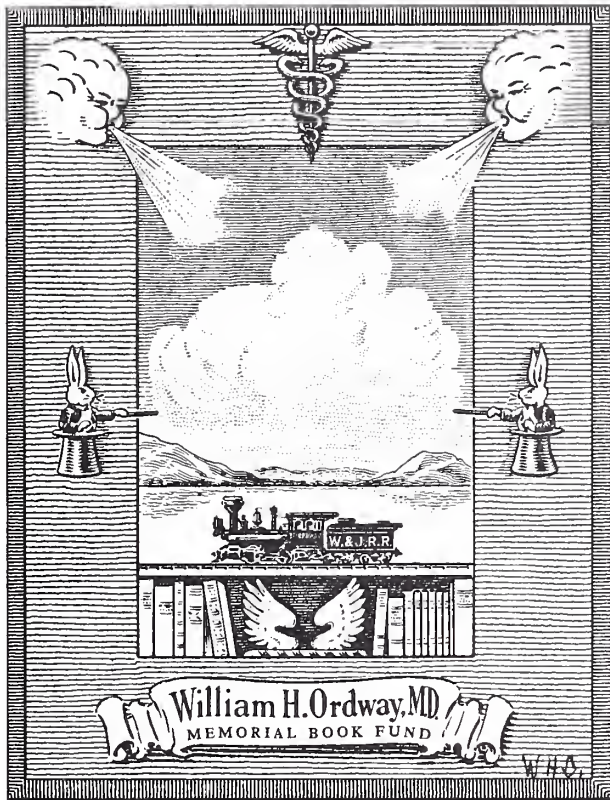
Books do preserve as in a vial the

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Fund

of that living intellect that bred them.

YALE MEDICAL LIBRARY





YALE MEDICAL LIBRARY

Gifts from Wesleyna S. (Mrs. William H.) Ordway of Somers, Connecticut, and Julia Sorg of Saratoga Springs, New York, have established the William H. Ordway (M.D. 1912) Memorial Book Fund. The bookplate for this fund is adapted from Dr. Ordway's personal bookplate, which he had completed just before his death in 1955. It illustrates his interest in weather, books, magic, and railroads. The engine was a real one on the Whitfield and Jefferson Railroad out of Vermont, called the "Dr. Ordway." His family crest is shown with the books. The mountains represent Mt. McGregor, New York, where Dr. Ordway was chief physician of the 350-bed Mt. McGregor Sanatorium for nearly 30 years. It was there that he took up magic in order to entertain his patients.



YALE MEDICAL LIBRARY

The George Blumer Book Fund, established in August, 1963, by gifts from friends and associates in memory of George Blumer, M.D. (M.A. Hon. 1907), received its bookplate in February, 1967, when Dr. Blumer's personal bookplate was adapted for the fund. Dr. Blumer was John Slade Ely Professor of the Theory and Practice of Medicine, 1906-1920; David P. Smith Clinical Professor of Medicine, 1920-1940; and clinical professor emeritus from 1940 until his death in 1963. He was dean of the School of Medicine from 1910 to 1920.



Hindu celebration for the god Shiva

During March, 1967, after having reviewed my application, Dr. Katherine Bains of the Children's Bureau Section of the Department of Health, Education and Welfare asked me if I was prepared to go to Dacca, East Pakistan. I was.

This trip had been in the day-dreaming stages for many years; the idea of going to the Indian subcontinent had fascinated me ever since the concept of Brahman-Atman came up in a history of religions class. What kind of people are these who believe in the wheel of Karma, fatalistically chained to inevitable reincarnation? Who are these brown-skinned, shrivelled-up, miserably impoverished human beings? Could I, as a doctor, do anything for these people; would my experience among them be as rewarding as it was for

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Mr. Beitman, at present a fourth-year medical student at Yale, received a Children's Bureau Fellowship to work at the Pakistan-SEATO Cholera Research Laboratory in Dacca, East Pakistan, during the summer of 1967.

Tom Dooley? And was there for me, as there was for Larry in Somerset Maugham's *The Razor's Edge*, something of great personal importance to be discovered?

After Dr. Bains' phone call I went to my wall map and touched the small distant dot of Dacca nestled in the center of the pink land mass labelled East Pakistan. For the first time I noticed how greatly separated the other half of the country was; West Pakistan was about two inches away (1000 miles) across the top of hostile India. It was not a healthy separation, although it was the inevitable result of the Moslem secession from the Hindus.

Dr. Bains had requested that I prepare an itinerary and when I presented it to her the next day it was completely acceptable. Her office proceeded to make all the necessary arrangements and I was left to conjecture about what was to come. Among the few important facts the library yielded was that East Pakistan has a population of about 55 million while West Pakistan has a population of almost 15 million. East Pakistan is primarily agricultural, located in the extremely fertile delta of the Ganges and Bramaputra rivers. West





*Two years of chronic malabsorption*

Pakistan is five times larger, a chiefly industrial area which is rough and very dry. West Pakistan also maintains most of the political power, a fact which was constantly reiterated by the government-controlled Dacca newspapers. The news media carried the statement that East Pakistan need no longer complain about the uneven distribution of government funds for economic development since this year the allocation to both wings was approximately the same. The disparity in population was not mentioned.

My plans called for an around-the-world-journey in 80 days with the assistance of fan-jets and taxis instead of Phoggian boat-trains and mad Indian elephants. I stopped in Hongkong for some incredible sights, a suit and a camera; Bangkok for a look at a sprawling, Westernizing metropolis (much U.S. money); and briefly in Calcutta for a stopover before the trip to Kathmandu, Nepal. By the time my Royal Nepalese airplane fluttered out of the sky onto the runway of Dacca International Airport, I was very tired of travelling and anxious to be in one place for more than just a few days.

Having had no idea what to expect of the living

conditions in Dacca I came prepared with a full bottle of One-A-Day Multiple Vitamins and an extra notch in my belt.

I had been assigned to the Pakistan-SEATO Cholera Research Laboratory (CRL) which is a showplace for the U.S. government's AID program in cooperation with SEATO; it is a well financed arena. Both a hospital and a research center, the laboratory is staffed by American doctors who have finished one year of residency in medicine and have joined the Public Health Service to fulfill their military obligation. The hospital section is run by five Pakistani residents for whom the Americans act as attendings. Since I was the first student to come to Dacca under the Children's Bureau program, nobody knew specifically what I was to do except that I would be involved in some kind of research. The problem was tabled and I followed one of the American residents back to his house where he suggested I stay. The accommodations were excellent—spacious rooms, air-conditioning, a KLH record player with plenty of records, a houseboy and a superb cook. I had expected mudhuts and starvation diets and



found myself extremely comfortable and well fed.

My life at the CRL began to take on some semblance of routine. Each day we travelled the two miles to the laboratory and each day we witnessed the never-ending drama of the poverty-stricken people of Dacca. Everywhere dark brown, fleshless, lethargic bodies wrapped in tattered cloth gathered in isolated islands to talk and bargain. Skinny pathetic cows wandered like gargantuan stray dogs over roads and fields seeking grass and a resting place. Men worked like horses pulling and pushing huge heavily laden wagons to earn their 60 cents a day. Small children, naked and alone, wandered quietly and aimlessly among the rocks and ruts along our way to work. The CRL, despite its restricted objectives and limited funds, is a first small step toward changing this centuries-old panorama.

During morning rounds at the hospital I got a closer look at the more unfortunate of these people.

The major problem treated at the hospital is dehydration which between October and February is most often caused by cholera. However, during the summer months when I was there, no patient had a verified case of cholera, although many came in with a typical cholera picture. One such patient was a 25-year-old man with a history of profuse liquid diarrhea and severe vomiting over a period of 24 hours. On admission he was unconscious, barely breathing, pulseless, and with no obtainable blood pressure. He had no skin turgor and his eyes were deeply sunken into the sockets. The nursing staff and the Pakistani resident immediately mobilized for action. An I.V. bottle was hung up, and I was presented with the syringe for the blood sample. As I gingerly palpated the patient's arm for a vein, the resident sponged off the right inguinal region and pointed toward the femoral. I gave him a questioning glance and then felt for the femoral artery. Was the femoral vein medial or lateral? Medial. The thick red billowed into the syringe. We left the needle in place and poured in three liters of an isotonic mixture of saline, bicarbonate and potassium and within an hour the patient was asking for food.

During the cholera season so many patients like him pour into the hospital requiring similar treatment that the major problem is procurement of a sufficient number of I.V. bottles to achieve this dramatic recovery. One day, in addition to the convalescent patients, forty new severely dehydrated patients arrived needing treatment in a hospital that had only 35 beds. In times of stress the hospital manages very well and, despite its many difficult problems, it is also succeeding in building excellent community relations.



*Protein-calorie malnutrition*

Still these relations are not yet ideal. One Friday a very sick 10-year-old boy was admitted with a history of mild diarrhea, vomiting and a fever of 105°. After one blood culture was drawn, his mother became furious. "You are taking my boy's blood to America. You are selling my boy's blood to the United States," she screamed in vehement Bengali. Although the residents tried to calm her, she swooped her boy into her arms and carried him home, away from the blood-stealing Americans. On Sunday the blood cultures grew out *Salmonella typhosa* and an ambulance was sent to pick the boy up. The mother was impressed with the urgency of the situation and allowed him to be readmitted. Only the magic of chloramphenicol and steroids saved him and this happened only as the result of the ironic dis-



*Old man of the village*

covery of typhoid in that single rage-inciting blood culture.

The CRL ran a field hospital in Matlab about 40 miles from Dacca where many excellent studies of the epidemiology of cholera were being conducted. Early one Saturday morning I hopped into a CRL-chauffered Morris Minor and headed out of Dacca over a narrow road which had been built upon a ridgeway of dirt going straight through fields of wavy green rice and rising waters. The countryside was a striking contrast to the frantic, excited closeness of Dacca. Cows wandered and rested in the road, goats scurried for safety and people with packs on their heads stepped aside as the Morris flew by. We crossed two small rivers by ferry where there were obvious signs that the rainy

season was approaching. Since people who ride in cars have money, there are always a few beggars on the ferries. One dirty-faced, middle-aged man fancied himself a window wiper and set to work with his dirty rag on the windows of his captive cars. As the ferry approached its destination, he tilted his head, veiled his eyes in mournful sadness, extended his up-turned palm and said "bakshish, bakshish," the refrain which echoes throughout the sub-continent.

Halfway through the summer I made the horrible discovery that the beggars of Dacca are organized. All the bedraggled little children crying "bakshish" are working for overseers who carefully regulate their activities. Many of them have been kidnapped and sometimes, to improve their appeal, their employers chop off a limb or perform some other maiming. But no matter what they receive, these unfortunate children keep none of it. And begging is one of Dacca's biggest businesses.

When the car reached the third river, I climbed into a small outboard powered by a good old U.S. Johnson Super Sea Horse 33 and we went skipping over the small wind-driven waves of the half-mile-wide river penetrating a land whose primitive agrarian culture had not changed in a millennium.

In this water-soaked country boats are the chief means of transportation and many of them dotted the river. There were small row boats propelled by small children; small covered sail boats on which families slept; and huge transport boats with monstrous sails and huge paddles laden with lumber or fruit or baskets for market. Running along each side of the river was a little path for the human haulers who pull the boats upstream much as mules did along the Erie Canal. The sky was bright blue, the sun very warm and the clouds puffed into the beautiful shapes which harbingers the monsoon season. The wavy green of the rice stretched to infinity on either side of me and the boat skipped gaily over the muddy gray river.

Matlab is a larger-than-ordinary cluster of shops, houses and boats and is the center of trading in the area. The hospital is very small and poorly equipped. It was run by a tired-looking, buck-toothed Pakistani who handled a wide spectrum of disease from hangnail to heart trouble day and night. Business was slow when I got there and since I had been looking longingly at the water, we went swimming together. After a while a crowd of villagers, mostly small boys, gathered to watch the white body in the strangely colored loin suit trying to shimmy up one of the bridge supports. (I was trying to imitate some of the kids I had seen climb earlier, but success came slowly.)





*"Bakshish, bakshish" — Four children and no husband*

At dusk they served me a wonderfully varied meal: hot curried fish, hot curried shrimp and hot curried egg with mountains of rice and much water. Later I wandered among the villagers squatting and gossiping along the river. Out of the darkness of the water there came some excited voices and into the lantern light stepped a man holding a large glistening silvery fish. Rapidly a crowd of screaming bidders collected around him. Earlier this man had been standing in his rice paddy and had felt the fish flapping next to him. He grabbed a stick, stunned the fish and then knifed it. This animal

was a particularly highly rated delicacy so the half hour debate finally ended with 15 shareholders, my share having been appropriated by the doctor.

The stillness of night on the river was broken only by soft jungle noises and the lap-lap of breeze-driven waves; western civilization seemed very distant. I slept well.

The next morning, while roaming around the village, I was accosted by a young man pleading in broken English: "Please, please, may I have words with you? I wish to tell you my soul." It was impossible to refuse.



We went to a village café where he charged tea and cigarettes and had some sweets. "Oh, what a poor man I am. I have nothing. I am nothing. And why? Please tell me why. I was born into this; there is nothing I can do about it; there is nothing at all. It isn't my fault, is it? If you tell me it is my fault, I will kill myself. It isn't my fault, is it?" An existential dilemma on the other side of the world.

After this brief trip I was inevitably drawn to compare these people with those of Vietnam. The terror and destruction caused by foreign bombs and invading armies would be little different for these people than for the victims of the current horror in rural Vietnam with its equally anachronistic civilization. It is difficult to imagine the world concept that exists in their minds—where would they think the foreign invaders lived and why would they come to their land? If our purpose in Asia is to acquaint these people with life as we know it and its considerable advantages, it will be many long slow decades until this goal is achieved, and in all of Asia it is vital in our introduction of ourselves that the Hindu rule of *ahimsa*—"do no harm"—be followed. If it is not, these many long slow decades will sprawl into centuries leaving more mistrust and violence in their wake.

I also made an unforgettable visit to the Dacca Medical College Hospital to see medicine as it is practiced for most of Dacca. The physical plant is a mammoth, dark, musty building which is both surrounded by and packed with sick Bengalis. My trip into its dark interior wound through catacomb-like mazes, past huge 60-bed wards, along overflowing hallways reeking with the fetid, dank odor of decaying wounds and deathly-ill children. In one of the medical wards I was introduced to a professor of medicine whose rapid-fire questions and answers were reminiscent of some of our better clinical instructors. He presented a man with cutaneous adenomas, depressions in his skull and diabetes insipidus who would have been the joy of our entire medical staff. But in this huge ward the fascination of Hand-Schüller-Christian disease must give way to the more motivating necessities. There were many rheumatic hearts, some with true grade VI/VI murmurs, a few teenage patent ductus patients whose hearts sounded like the center of an auto assembly plant, and much pneumonia and parasitic infestation. The variety of clinical cases is fantastic; the numbers are overwhelming. Yet despite the tremendous lack of adequately trained personnel and anything like the sufficient funds, progress and improvement are coming to this hospital.

At the CRL I had begun a research project which in-

involved taking rectal catheter specimens from actively purging patients in order to compare the electrolyte content of these stools with that of cholera stools. The study yielded some significant data; however, eight weeks was not enough time to construct a thorough piece of research.

Suddenly one day I was making arrangements to leave. Then I found myself waiting at the airport for the flight to Karachi and points west. It was over. But for me the experience in East Pakistan was extremely important. The world is no longer so big, foreign, and frightening, and I found much to be discovered outside the confines of our comfortable existence in the United States.

Although it would be easy to be lulled into an established role in this country, I hope to return someday to Asia to make changes instead of just observations.

The author



# Internship Appointments

Class of 1968

- Julius Horne Anderson, Jr., fellowship, Johnson Research Foundation, University of Pennsylvania, Philadelphia, Pennsylvania.
- Joseph Francis Andrews, Jr., medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- Laurence Eugene Badgley, rotating, Fitzsimons General Hospital, Denver, Colorado.
- Phillip Lane Barry, surgery, Strong Memorial Hospital, Rochester, New York.
- Daniel Ira Becker, medicine, Boston City Hospital, Boston, Massachusetts.
- Bernard David Beitman, rotating, Mount Zion Hospital, San Francisco, California.
- Stuart Jay Brill, pathology, Yale-New Haven Medical Center, New Haven, Connecticut.
- Wade Douglas Carden, rotating, Cincinnati General Hospital, Cincinnati, Ohio.
- William John Catalona, surgery, Yale-New Haven Medical Center, New Haven, Connecticut.
- Donald Ross Coustan, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- Rutledge Withers Currie, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- John James DeMarchi, rotating, Buffalo General Hospital, Buffalo, New York.
- Robert Guerard Dillard, pediatrics, City of Memphis Hospitals, Memphis, Tennessee.
- Edward Martin Druy, rotating, Hennepin County General Hospital, Minneapolis, Minnesota.
- Barbara Mayer Egbert, pathology, Yale-New Haven Medical Center, New Haven, Connecticut.
- Lamar Eric V. Ekbladh, rotating, Hartford Hospital, Hartford, Connecticut.
- Luther Lee Emerson, medicine, Rochester General Hospital, Rochester, New York.
- Alan George Finesilver, surgery, Beth Israel Hospital, Boston, Massachusetts.
- William Francis Flynn, surgery, Boston City Hospital, Boston, Massachusetts.
- Frank Albert Gerbode, pediatrics, Palo Alto-Stanford Hospital Center, Palo Alto, California.
- Richard Alan Getnick, medicine, University Hospitals of Cleveland, Cleveland, Ohio.
- Mark Gilbert Grand, medicine, Palo Alto-Stanford Hospital Center, Palo Alto, California.
- Leonard Edwin Grauer, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- Ralph Steven Greco, surgery, Yale-New Haven Medical Center, New Haven, Connecticut.
- Kevin Newell Hennessey, medicine, Johns Hopkins Hospital, Baltimore, Maryland.
- John Roy Hill, 2d, pediatrics, Vanderbilt University Hospital, Nashville, Tennessee.
- Harry Sherman Holcomb, 3d, rotating, University of Virginia Hospital, Charlottesville, Virginia.
- Thomas Randall Johnson, rotating, University of Oregon Medical School Hospitals, Portland, Oregon.
- Peter Jokl, surgery, Vanderbilt University Hospital, Nashville, Tennessee.
- Marian Grace Jordison, medicine, University of Kentucky Medical Center, Lexington, Kentucky.
- William Francis Keane, Jr., medicine, Cornell University Hospitals, New York, New York.
- Daniel Edward Keim, pediatrics, Children's Hospital Medical Center, Boston, Massachusetts.
- Peter Appleton Kirkpatrick, medicine, Edward J. Meyer Memorial Hospital, Buffalo, New York.
- Peter Andrew LaRiviere, rotating, U.S. Public Health Service, San Francisco, California.
- Jeffrey Stuart Lee, rotating, Children's Hospital Medical Center, San Francisco, California.
- Ellen Marks Lippman, pediatrics, Johns Hopkins Community Pediatric Program, Baltimore, Maryland.
- Marc Estes Lippman, medicine, Johns Hopkins Hospital, Baltimore, Maryland.
- Peter Allen Livingston, medicine, University of Pennsylvania Hospital, Philadelphia, Pennsylvania.
- Frank Edward Lucente, medicine, Barnes Hospital, St. Louis, Missouri.
- Donald Owen Lyman, medicine, Jackson Memorial Hospital, Miami, Florida.
- Stephen Irving Marglin, medicine, Palo Alto-Stanford Hospital Center, Palo Alto, California.
- Rodrigo Ernesto Martinez, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- John Allen McCutchan, medicine, Vanderbilt University Hospital, Nashville, Tennessee.
- Harmon Robert Michelson, medicine, Jackson Memorial Hospital, Miami, Florida.
- David Phillips Millett, surgery, Yale-New Haven Medical Center, New Haven, Connecticut.
- Richard Pence Mills, medicine, University of Oregon Medical School Hospitals, Portland, Oregon.
- Richard Manning Morehead, Jr., rotating, University of New Mexico Affiliated Hospitals, Albuquerque, New Mexico.
- James Bruce Morris, medicine, Buffalo General Hospital, Buffalo, New York.
- Peter Nicholas, Jr., medicine, Mount Sinai Hospital, New York, New York.
- John Anthony Ogden, surgery, Yale-New Haven Medical Center, New Haven, Connecticut.
- James William Ogilvie, surgery, University of California Hospital, San Francisco, California.
- Margot Debrah Piore Oneli, medicine, Veteran's Administration Hospital, George Washington Service, Washington, D.C.
- Henry Francis Panek, rotating, U.S. Naval Hospital, Pensacola, Florida.
- Francis Ferdinand Paul, rotating, U.S. Naval Hospital, Pensacola, Florida.
- William E. Perkins, pediatrics, University Hospitals of Cleveland, Cleveland, Ohio.
- Jackson Brittain Pickett, medicine, Grady Memorial Hospital, Atlanta, Georgia.
- Charles Truman Post, Jr., rotating, North Carolina Memorial Hospital, Chapel Hill, North Carolina.
- Ralph Jerome Rauch, rotating, Roosevelt Hospital, New York, New York.
- Joseph Leonard Renda, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- Marvin Joel Rosser, rotating, Presbyterian-University of Pennsylvania Medical Center, Philadelphia, Pennsylvania.
- Gordon Hiroshi Sasaki, rotating, University of Oregon Medical School Hospitals, Portland, Oregon.
- Alfred Quinn Scheuer, pediatrics, State University of New York, Upstate Medical Center, Syracuse, New York.
- Jacob Joseph Schlesinger, pathology, Yale-New Haven Medical Center, New Haven, Connecticut.
- George Francis Sheckleton, Jr., rotating, U.S. Public Health Service.
- Frederick Charles Sherman, surgery, University of Michigan Affiliated Hospitals, Ann Arbor, Michigan.
- Elizabeth Meehan Short, medicine, Yale-New Haven Medical Center, New Haven, Connecticut.
- Bruce Stuart Schoenberg, National Institutes of Health, Bethesda, Maryland.
- Howard William Siegel, pathology, Yale-New Haven Medical Center, New Haven, Connecticut.
- Jerrold Jay Silverstein, rotating, Montefiore Hospital, New York, New York.
- Laura Alice Smith, pediatrics, University of Michigan Affiliated Hospitals, Ann Arbor, Michigan.
- Marie Zoreslawa Snihurowycz, medicine, Vanderbilt University Hospital, Nashville, Tennessee.
- David Aaron Siskis, rotating, Jackson Memorial Hospital, Miami, Florida.
- Gerald Lehman Springer, medicine, District of Columbia General Hospital, Washington, D.C.
- Donald Harvey Stanford, rotating, Mount Zion Hospital, San Francisco, California.
- Lee Howells Strohl, rotating, Passavant Memorial Hospital, Chicago, Illinois.
- Charles Wesley Swearingen, Jr., Brain Research Institute, University of California, Los Angeles, California.
- Edmund Conrad Tortolani, surgery, Yale-New Haven Medical Center, New Haven, Connecticut.
- Martin Wand, medicine, Cleveland Metropolitan General Hospital, Cleveland, Ohio.
- James Lloyd Weiss, medicine, University of Michigan Affiliated Hospitals, Ann Arbor, Michigan.
- Harold Terry Wepsic, National Institutes of Health, Bethesda, Maryland.
- Per Henrik Wickstrom, rotating, Hennepin County General Hospital, Minneapolis, Minnesota.
- Robert Joseph Winer, rotating, Mount Zion Hospital, San Francisco, California.
- Creed William Wood, surgery, H. C. Moffitt — University of California Hospitals, San Francisco, California.

# Yale Alumni Seminar, 1968

Medical alumni and their spouses are invited to attend the Twelfth Annual Yale Alumni Seminar in June. The dates and topics are shown below. The registration fee is \$12.50 per person. Detailed information and registration forms may be obtained by writing to Box 1918, Yale Station, New Haven, Connecticut 06520.

## **The Dollar in the World**

Tuesday, June 11

Lectures

*Gold and the Wealth of Nations*

James Tobin, Sterling professor of economics

*An Agreed International Standard*

Robert Triffin, Frederick William Beinecke professor of economics

*Gold and the Dollar*

William McChesney Martin, chairman of the Federal Reserve Board

Discussion session with a panel composed of the lecturers and alumni panelists

## **The Satiric Itch**

Wednesday, June 12

Lectures

*The Strong Antipathy: Origins and Forms of Satire*

Alvin B. Kernan, associate provost of the University, professor of English

*Chaucer's 'Worthy Women': The Wife of Bath and Others*

Alice Miskimin, assistant professor of English

*Image-Makers and Breakers: Dryden, Marvell, and*

*Some Contemporaries*

George deF. Lord, professor of English

*Prisoners and Gentlemen*

Michael J. O'Loughlin, assistant professor of English

tration fee is \$12.50 per person. Detailed information and registration forms may be obtained by writing to Box 1918, Yale Station, New Haven, Connecticut 06520.

## **The Individual and Reproduction**

Thursday, June 13

Lectures

*Sex Education*

The Rev. Edward F. Dobihal Jr., lecturer in pastoral theology

*Current Approaches to Fertility and Infertility Control*

Dr. Nathan G. Kase, associate professor of obstetrics and gynecology

*Research and Fertility Control*

Dr. John McL. Morris, professor of gynecology

*Abortion*

Dr. Edward J. Quilligan, professor of obstetrics and gynecology

## **The Artist in America: the Search for an American Art**

Friday, June 14

Lectures

*Realism and the American Tradition*

Jules D. Prown, assistant professor of history of art

*American Architecture Rooted in American Soil*

George L. Hersey, assistant professor of history of art

*The Artist Today as American and World Citizen*

William Richard Lytle, associate professor of art

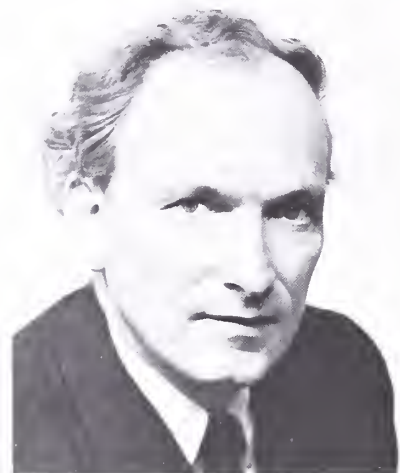
Studies in the special exhibition 'American Art from Alumni Collections'



# In and About Sterling Hall

## Dr. Murdoch Ritchie Appointed Chairman of Pharmacology

Dr. Murdoch Ritchie, an authority on the mechanism of nerve conduction, has been appointed Eugene Higgins Professor of Pharmacology and chairman of the department at Yale, effective July 1, 1968.



Dr. Ritchie

He succeeds Dr. Arnold D. Welch, who resigned in 1967 to become vice-president of E. R. Squibb & Sons and director of the Squibb Institute for Medical Research at New Brunswick, New Jersey.

Dr. Ritchie's major field of interest is the pharmacology and physiology of nerve conduction. Recently, he has carried out experiments to determine the active structure of local anesthetics. He is currently studying both the heat production and oxygen consumption of mammalian nerve fibers and how these factors are affected by various drugs. It is hoped this study will help to reveal fundamental changes in the nerve membrane involved in the conduction of messages via the nerves.

Dr. Ritchie was born in Aberdeen, Scotland. After being awarded his first bachelor's degree from Aberdeen University in 1944, he did post-graduate research in physics at the Telecommunications Research Establishment, Malvern, England.

He then became a research student

under Professor A. V. Hill in the biophysics department of University College, London. In 1949 he was appointed assistant professor in physiology at University College and the same year the Institute of Physics elected him an associate, the equivalent of a post-graduate degree in physics.

In 1951 he resigned his assistant professorship to join the scientific research staff of the British Medical Research Council. As a result of his research on the physiology of muscle, he was awarded the Ph.D. degree from University College in 1952.

Dr. Ritchie left the Medical Research Council in 1956 to become visiting assistant professor of pharmacology at the Albert Einstein College of Medicine in New York City. In 1958 he was promoted to associate professor and in 1963 to professor. As a result of his published work on the physiology of mammalian nerve fibers, the University of London in 1960 awarded him the degree of Doctor of Science.

During 1964-65 he was an Overseas Fellow of Churchill College, Cambridge, England. He is a member of the American Society for Pharmacology and Experimental Therapeutics, the American Physiological Society, the Biophysics Society, the British Physiological Society, the British Pharmacological Society and the British Biophysical Society.

## Student-Faculty-Hospital Committee Formed

A new committee bringing together members of the student body, faculty, and hospital administration has been formed with the promise and agreement that "no serious topics" will be barred from its discussions. The purpose of the new body, known as the Student-Faculty-Hospital Administration Coordination Committee, is to improve communication between the three groups. It meets weekly to discuss policy affecting students, the medical school and the hospital.

The committee members are the four medical class presidents, a representative of the students in Epidemiology and Public Health, and the president of the Student Council; Dr. Thomas Forbes and Dr. Howard Levitin, associate deans, and Louis Kaplan, assistant to Dean Redlich, representing the medical faculty; and William T. Newell, assistant director of the hospital, representing the hospital administration.

At one of its first meetings, the new committee dealt with questions from students asking the reasons for next year's tuition increase. Stanley Davis, associate comptroller of the University for medical affairs, told the committee that while the total budget for the medical school next year will approximate \$26,000,000 with income from all sources, there will still be a deficit approaching one and a half million dollars. The tuition increase will add \$100,000 to the \$800,000 now taken in from student tuition and will defray a portion of the deficit. Mr. Davis said that the increase in tuition is a Yale University policy decision and reflects the increase in tuition in all of the graduate schools. It was emphasized that loan and scholarship appropriations have increased out of proportion to the increase in tuition over the past several years.

## Faculty Notes

Dr. Vernon W. Lippard, assistant to the president for medical development, journeyed to the Far East this spring. At the invitation of the newly-formed Association of Philippine Medical Colleges, he spent five weeks in the Philippines where he visited each of the seven medical schools and met with their faculties. He also addressed the first meeting of the Association. En route to the Philippines he stopped in Japan and spent several days at the Atomic Bomb Casualty Commission in Hiroshima.

Dr. Morton M. Kligerman, professor and chairman of the Department of Radiology, visited the University

of Caracas, Venezuela, in February to participate in the dedication of a new department of radiotherapy at the University Hospital. His address at the dedication ceremony was delivered in Spanish. He also gave two clinical lectures on carcinoma of the rectum and carcinoma of the lung. During his visit Dr. Kligerman was made a corresponding member of the Venezuelan Radiological Society and an honorary member of the Cancer Society.

Dr. David Seligson, professor of medicine and pathology and chief of Clinical Laboratories, spoke on some approaches to automation in the clinical laboratory in a program on "Data Processing in Clinical Pathology" sponsored by the Lahey Clinic Foundation in Boston on January 25.

Dr. José M. R. Delgado, professor of physiology, delivered the annual Beaumont Lecture of the Wayne County Medical Society in Detroit, Michigan, on April 1. He spoke on "Reaching for the Mind in the Depths of the Brain". Since 1922 the Society has sponsored this event honoring William Beaumont (1785-1893), the Army surgeon who was a pioneer investigator of the physiology of digestion. The 1934 lecture was given by another Yale professor of physiology, Dr. John F. Fulton, who spoke on "Some Functions of the Cerebral Cortex".

#### **New Associate Professor**

Dr. Arne Sollberger was appointed associate professor of psychiatry effective January 1, 1968. He will work with the Connecticut Mental Health Center to develop a research project on biological rhythms and depressive illness.

After receiving his M.B. and M.D. degrees from the Karolinska Institute in Stockholm, he was a member of the faculty there until 1962. He then taught at the School of Tropical Medicine in Puerto Rico and at Western Reserve University. From 1965 until the time of his new appointment, he was chief of the Biometrics

Section at the Veterans Administration Eastern Research Support Center in West Haven, Connecticut, and a lecturer in biometry at Yale.

#### **New Books**

*DEATH IN LIFE: Survivors of Hiroshima* by Dr. Robert Jay Lifton, Foundations Fund for Research in Psychiatry Professor of Psychiatry. (Random House.) Robert Jay Lifton is the first person to undertake a wide-ranging study of those who survived the atomic bombing of Hiroshima. He interviewed people in Hiroshima who had experienced the bomb—community leaders, politicians, clergymen, administrators and directors of survivor and peace movement groups, medical personnel, scholars, writers, artists, foreigners resident in the city, and visitors to it. Quotations from these interviews, interwoven with the taut and coolly analytic narrative provide insight into survivors' struggles and problems: fear of physical aftereffects in themselves or their children, continuing "immersion in death" and death imagery, feelings of guilt over having survived while others died, the ability or lack of it to function as they had prior to the bomb. The extraordinary vividness of the memories of those he interviewed is a testament to the enormity of the event's effect on their personal lives and on the life of the city. Dr. Lifton's interpretation of the patterns that emerged from the interviews clearly delineates the universality of response. He also discusses the effects of the experience on intellectuals. Using examples from various art forms—literature, poetry, painting, films, music—Dr. Lifton shows how the A-bomb experience continues to haunt and elude those who seek to deal with it creatively. The analysis is extended to include comparisons of A-bomb and concentration-camp survival, and finally survival of any "end-of-the-world" experience whose impact can be viewed as the general psychology of the survivor

in our time. The author has spent almost seven years in the Far East, including the period from 1960 to 1962, during which he carried out a study of psychological patterns in Japanese youth as well as the research for this volume.

*SICKNESS AND SOCIETY* by Dr. Raymond S. Duff, associate professor of pediatrics and sociology, and August deB. Hollingshead, William Graham Sumner Professor of Sociology. (Harper & Row.) This volume is the result of a five-year study of the behavior of persons involved in the care of patients in an unnamed but easily identifiable medical center. Using data collected through extensive interviewing between 1960 and 1964, the authors describe the drama of sickness enacted by patients, their families, hospital administrators, nurses, community physicians, and the faculty and students of a medical school.

Dean F. C. Redlich has written a foreword to *Sickness and Society* in which he says, in part:

"This book focuses on the relationship between the care of hospitalized medical and surgical patients and the social environment of a university and community hospital. Do the patients receive optimal care? Does the social system hinder or enhance such care? Is the psychosocial environment sufficiently considered in rendering such care?"

"By studying the medical care of three 'social classes' of patients—those in ward, semiprivate, and private accommodations—through detailed interviews and observations, the authors provide answers to these questions. I do not agree with all their answers, and I do not agree with some of their implicit assumptions. It is impossible for me to accept the fact that medical teaching and research are not compatible with good medical care. I do not believe that an inherent antagonism exists among physicians, hospital administrators, and nurses or that hospitals are run for the benefit of physicians.



When the authors describe the awesome, complex, and often confused transactions among patients, families, and members of the health professions, the reader may draw an unnecessarily negative picture; yet the main message of the book is powerful, clear, and essentially correct: *the patient's care is far from what it could and should be!* Possibly one of the most alarming aspects of this report is the fact that the medical center under scrutiny has been ranked nationally among the best. It is safe to assume that the conditions described in this report prevail in other centers and that these problems are by no means the result of local inefficiency or lassitude."

### Ethereal Debauch

The author of the following letter is research associate in the history of science and medicine at Yale.

To the Editors of *Yale Medicine*:

In view of your timely, factual, and provocative report on research into hallucinogens in the Winter issue, you might find of interest an account of the experiments of an earlier group of Yale students with a powerful and then little-known chemical agent—ether.

The following quotation is taken from the introductory lecture of a professor in the Medical School on 14 September 1871—Benjamin Silliman, Jr. Professor of chemistry in Yale College as well, as his father had been before him, an editor of the distinguished *American Journal of Science and Arts*, a founder of the Yale Scientific School (Sheffield), also one of the incorporating members of the National Academy of Sciences. Silliman was a scientist with an international reputation. His report on laboratory experiments with samples of oil from a Pennsylvania site published in 1855 led to the drilling of the first well and the launching of the petroleum industry. He was thus well equipped to speak on "A Century of Chemistry and Medicine." *Another illustration of the same prin-*

*ciple in matters of observation is within the personal knowledge of the writer, who during the years 1835-40 [Silliman was Yale '37] had frequent occasion to observe the effects of a general and profuse exhibition of ether to hundreds of Academical Students for the purpose of a frolic. This kind of ethereal debauch was carried on for some time in the open fields about New Haven, and in the presence of hundreds of spectators—the wildest exhibitions of excitement being often manifested—but in no case was the anæsthesia, as such, observed, although the inhalation was often carried up to the point of insensibility. It is true none but a skilled professional man was prepared to recognize the phenomena of anæsthesia, even when it existed in the most unequivocal condition; and when the existence of this physical state was as yet practically unknown, how could it be discerned by a crowd of youthful unprofessional observers? If it is true that what we find is often better than what we seek, it is equally true that it may require more sagacity to see what is found than it does to direct a search for a definite object.*

Perhaps some other professor of chemistry a hundred years hence will be able to observe that what we found was better than what we sought.

Elizabeth H. Thomson  
29 March 1968

### British Phrenological Society Gift

A number of 19th century volumes, some 120 in all, from the Library of the British Phrenological Society, Inc., of Great Britain have been added to the Yale Medical Library's holdings on phrenology through the mediation of Dr. Edwin Clarke, University College, London, and Mr. Francis E. McGovern, Yale B.A. 1967. The Society, having gone out of existence, gave Yale those volumes from its library which are not already represented in the Yale collections.

### Alumni Honored

Two alumni of Yale School of Medicine were among the twenty-five individuals appointed Markle Scholars in Academic Medicine for 1968-73. These five-year scholarships of the John and Mary Markle Foundation, to aid young medical scientists planning careers in academic medicine, are considered a most distinguished honor.

The alumni are Dr. Jack Levin ('57), who is currently an assistant professor of medicine at the Johns Hopkins University School of Medicine, and Dr. John C. Parker ('61) an assistant professor of medicine at the University of North Carolina School of Medicine.

### Going to the A.M.A. Convention?

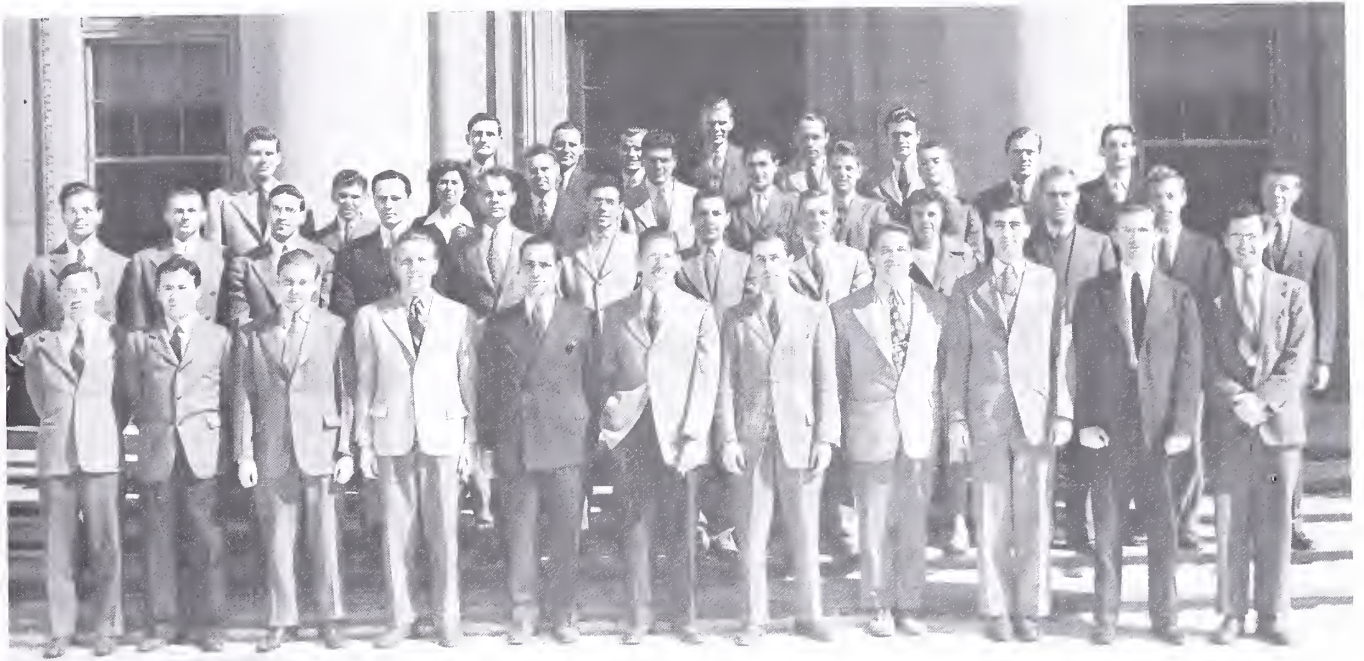
The Association of Yale Alumni in Medicine will sponsor a cocktail party at the A.M.A. Annual Convention in San Francisco in June. All alumni, faculty, and former house staff are invited and are welcome to bring their wives and friends.

The gathering will be held on Monday, June 17, at 6:00 p.m. at the Fairmont Hotel. No tickets are required as it will be a pay-as-you-drink party. If you plan to attend the 1968 A.M.A. Convention, meet your friends at the Yale Medical Alumni Cocktail Party.

Just as this issue was going to press, we received the sad news of the death of Dr. Grover F. Powers, our beloved professor emeritus of pediatrics.



# Alumni News



Two classes will hold 25-year reunions on June 8. Wartime acceleration in 1943 produced the March graduates (above) and the December graduates (below.)





**1924**

At a commemorative ceremony celebrating the two hundredth anniversary of the College of Physicians and Surgeons of Columbia University in November, 1967, D. ANTHONY D'ESOPPO was presented with the Silver Bicentennial Medallion for outstanding and distinguished contributions in the field of obstetrics and gynecology. Dr. D'Esopo, who joined the Department of Obstetrics and Gynecology at Columbia in 1925 remains one of the most respected and revered professors at the College of Physicians and Surgeons.

**1935**

AVERILL A. LIEBOW has joined the faculty of the University of California San Diego School of Medicine as chairman of the Department of Pathology. He made the move to California this spring. With the exception of military service in World War II, Dr. Liebow has been a member of the Yale faculty since 1937 and professor of pathology since 1951. He was appointed John Slade Ely Professor of Pathology at Yale in 1957.

**1938**

NELSON K. ORDWAY left Yale last September to join the faculty of the University of Oklahoma where he is professor of pediatrics and public health with appointments both in the Department of Pediatrics of the School of Medicine and in the new School of Health. He recently wrote as follows regarding his new position: "The University of Oklahoma has long had interest in education and service in Latin America and has organized a group of universities in this region into a consortium. The Department of Public Health in the School of Medicine has been active in India and Viet Nam. My job here will be to develop a program in international child health which will probably take the form initially of an affiliating relationship with the department of pediatrics of a school of medicine in Latin American which will serve as a basis for exchange at various levels and in both directions and open doors to other possibilities and opportunities. Eventually I would hope that such affiliations might be established both in Spanish

and Portuguese Latin America. Plans for the improvement of health education and services on various regional levels are advancing rapidly under the leadership of JOSE FELIX PATINO ('52), now Executive Director of the Pan American Federation of Associations of Medical Schools, and involvement in some aspect of these developing programs would appear to have great promise."

**1940**

FRANCIS X. SOMMER of Barbourville, Kentucky, was honored on February 18 by a Community Recognition Program sponsored by Barbourville Kiwanis Club, Knox County Chamber of Commerce, and Knoxville Improvement Corporation in recognition of the round-the-world flight by Dr. Sommer and Dr. John Rieger. In an address on that occasion, Mahlon A. Miller, president of Union College, stated: "One of the important reasons why we are here tonight is to say to Dr. Sommer, 'Cy, thanks for setting such a good example for us. You were not content just to learn how to fly. You were not satisfied until—quite literally—all the world could see you were an expert flyer. That is a good example for all of us, whatever our occupation or profession might be.'

"I have said to more than one person around town that the day I had my first flight with Dr. Sommer in Mike Dog, I decided then and there that if I ever needed surgery, I would not hesitate to place my life in his hands. If he is as knowledgeable and skillful in the operating room as he is in the cockpit of a plane, I would have no fears. From the standpoint of training and experience, I have every reason to believe he is an even better surgeon than he is a pilot, and that is saying a lot.

"Whatever you are going to be, be a good one! This is basic to high adventure. We can thank Dr. Sommer for the example he has given us."

The round-the-world flight in a single engine Beechcraft Bonanza aircraft was described in the fall 1967 issue of *Yale Medicine* under Alumni News, 1940.

**1941**

WILLIAM LEE, medical director of The Stanley Works in New Britain,



Dr. Lee

Connecticut, has been named "Physician of the Year" by the Governor's Committee on Employment of the Handicapped and is the recipient of President Johnson's Committee on Employment of the Handicapped Award which states: "Citation for meritorious service conferred upon Dr. William Lee in appreciation for exceptional contributions in furthering the employment of the handicapped." The award was presented at a dinner in his honor given by the New Britain - Plainville - Berlin Area Employ the Handicapped Committee on February 14.

The Area Committee and the Governor's Committee made note of his endless hours devoted to the establishment of the Constructive Workshop for the handicapped in New Britain, for his service as past president of the Mental Health Association of Central Connecticut, and as a past member of the professional advisory committee and board of directors of the Connecticut Association for Mental Health. Also for his activities in the Connecticut Heart Association and as chairman of the Cardiac in Industry Committee which became the Rehabilitation Committee while he was chairman.

Following his residency in surgery at Hartford Hospital, Dr. Lee was with the Lago Oil and Transport Company (Standard Oil) in Aruba, Netherlands Antilles, until he joined the Stanley Works in 1951 as assistant medical director. He was appointed medical director in 1954.

**1943 March**

ROGER W. DAVIS has been appointed assistant medical director, corporate services division, at Aetna Life and Casualty. Previously in private practice of orthopedics in the



Dr. Davis

Hartford area, Dr. Davis was a staff member at Hartford Hospital and Newington Children's Hospital. He is a member of the American Academy of Orthopedic Surgeons.

**1944**

LAWRENCE K. PICKETT has been appointed to a key volunteer position on the Yale Alumni Fund. He will serve as assistant chairman for graduate and professional schools. In this newly created post, he will be responsible for coordinating the annual alumni fund raising for all of Yale's graduate and professional schools except the Law School.

Dr. Pickett has been a Yale Alumni Fund agent for his college class for many years and has served as a regional worker for the Medical School Alumni Fund. He is also a member of the newly organized Alumni in Medicine (AIM) campaign cabinet and was president of the Association of Yale Alumni in Medicine from 1965 to 1967.

**1946**

TED A. LOOMIS is the author of a new book *Essentials of Toxicology* published by Lea & Febiger in January. Dr. Loomis is professor of pharmacology at the University of Washington School of Medicine in Seattle and state toxicologist.

DONALD P. SHEDD visited India, Pakistan, and Ceylon during the end of January and early February of this year. He was a member of a three-man U.S. Public Health Service team to survey ongoing and proposed oral cancer research projects in those countries. Dr. Shedd, who is chief of the Department of Head and Neck Surgery at the Roswell Park Memorial Institute in Buffalo, New York,

is a consultant to the Cancer Control Branch of the USPHS.

**1947**

ARTHUR H. CHAPMAN is the author of a new book on psychiatry. Designed for laymen, it is entitled *PUT OFFS AND COME ONS, Psychological Maneuvers and Strategies*. It will be published this spring by G. P. Putnam's Sons of New York. On November 15, 1967, IGOR TAMM was awarded the Alfred Benzon Prize in Copenhagen, Denmark, "in recognition of his outstanding research on the replication of viruses." This is the third year the honor has been given, and he is the first American recipient.

Following presentation of the prize by Professor J. Hess Thaysen of the University of Copenhagen, Dr. Tamm delivered the Alfred Benzon Lecture to an audience of chemists, microbiologists, pharmacologists, and other scientists and physicians. He discussed the replication and virus-cell interaction of certain selected viruses.

Following his internship and assistant residency in medicine at the Grace-New Haven Community Hospital in 1949, Dr. Tamm joined the faculty of The Rockefeller Institute for Medical Research, now The Rockefeller University. He was named professor and senior physician in 1964.

His early studies, begun at Yale, concerned the interaction of influenza viruses with receptor substances. In 1950 he discovered and characterized, with Dr. Frank L. Horsfall, Jr., a mucoprotein which was the first pure substrate for influenza virus



Dr. Tamm

neuraminidase. More recently, Dr. Tamm has been concerned with the biochemistry and virus-cell relationship of a number of animal viruses.

OLIVE E. PITKIN was appointed director of school health by the New York City Department of Health in November, 1967. She had served as assistant director of school health since October, 1966. The Bureau of School Health is staffed by five full-time and approximately 350 part-time physicians. It is responsible for the health supervision of almost 1,500,000 children in the city's public and parochial schools.



Dr. Pitkin

Dr. Pitkin, who is a diplomate of the American Board of Pediatrics and a member of the American Public Health Association, holds an appointment as clinical instructor in pediatrics at Cornell University Medical College and is an assistant pediatrician to the outpatient department at The New York Hospital. She lives in Manhattan with her husband, Dr. IGOR TAMM, and their three children.

**1952**

In a recent note to Associate Dean Forbes, MARVIN H. GOLDBERG wrote as follows: "We're now living in La Jolla with a lovely house by the sea. I'm still with the Permanente Med Group. We just opened an office and hospital in San Diego. Our chief of OB is MYRON NOBIL, Yale Med '47, and one of our surgeons is STUART BOWNE, Yale '60. We love San Diego. I am on the faculty of the new University of California San Diego Med School. BOB HAMBURGER ('51) is the asst. dean, A. LIEBOW ('35) will be chief of pathology. This certainly will be Yale territory."





Dr. Minners (right) with Dr. Gobezie

#### 1957

HOWARD A. MINNERS, who is special assistant to the director of the Office of International Research at the National Institutes of Health, completed a month's trip in East Africa early this year. During his visit in Addis Ababa, Ethiopia, he met Dr. Gebre Christos Gobezie, who had spent the year 1965-66 in New Haven and was postdoctoral fellow in medicine (gastroenterology) with Dr. Howard Spiro.

Dr. Minners sent the accompanying photograph and noted, "For nearly an hour, I discussed several aspects of medical practice in Ethiopia with Dr. Gobezie in his office which was located just around the corner from my hotel."

#### 1959

ASA BARNES, in a recent letter from Long Binh Post, Vietnam, writes: "Before coming to Vietnam in December I passed my board exams in anatomic and clinical pathology. At present I'm commander of a laboratory-unit which supports two evac hospitals and innumerable dispensaries and is the subdepot for blood distribution . . . As a consultant I helicopter around quite a bit. It is interesting and sometimes exciting. I am appalled by the war but proud of the medical care our wounded soldiers receive." He notes that he

will be unable to write his class newsletter this year but hopes to in 1969.

A note last fall in a Southern California newspaper the *Daily Pilot* reports "Doctor Discovers Lots of Knots for Study." It tells of an investigation of surfer's knots being conducted by MIKE McCABE at Huntington Beach, "where more knots than nuts at a peanut butter factory were in evidence last weekend." Dr. McCabe is a resident in radiology at Orange County Medical Center in Orange, California. He's also a surfer. DAVID SKINNER has been discharged from the Air Force and is now an assistant professor of surgery at the Johns Hopkins University School of Medicine. The Skinners' new address is 8307 Carrbridge Circle, Baltimore. During his two years in the Air Force, Dr. Skinner was stationed in San Antonio doing surgical research at the School of Aerospace Medicine, and surgery and teaching at Wilford Hall Air Force Hospital. In August and September of last year, he travelled to Europe visiting Amsterdam, Rome, Vienna, and Bristol, England, for lectures and meetings.

LEO H. VON EULER has been appointed program administrator for research training in pathology with the Research Training Grants Branch

of the National Institute of General Medical Sciences at the National Institutes of Health in Bethesda, Maryland. He previously was working in biochemistry at the National Institute of Arthritis and Metabolic Diseases, NIH.

MURIEL DU BROW WOLF is associate director of the outpatient department and associate cardiologist at Children's Hospital, Washington, D.C. She also has an appointment as an assistant professor of pediatrics at Georgetown University School of Medicine. Her husband, Dick, a lawyer, does the labor and civil rights law for NASA. The Wolfs have two daughters, Anne, two and a half, and Jennifer, a year and a half.

#### 1960

FESTUS ADEBONOJO is now a partner in the Permanente Medical Group in San Rafael, California. His wife, Mary, has received her M. A. degree in anthropology and folklore from the University of California in Berkeley. The Adebonojos have three sons.

STANLEY M. K. CHUNG was recently discharged from the Air Force and is now an instructor in orthopedic surgery at the University of Pennsylvania School of Medicine in Philadelphia. He had been stationed at Keesler Air Force Base Hospital and writes that there were two other Yale medical alumni there, JOSEPH DANMILLER ('57), and EDWARD LANG ('60).

#### 1961

J. RICHARD LUSBY, who is with the Group Health Cooperative in Seattle, Washington, is on the attending staff at Children's Orthopedic Hospital and is an assistant instructor in pediatrics at the University Hospital. His wife, Maryann, writes, "After about nine years of moving around we have found a lovely home of our own here on Mercer Island and are very happy to be settled." The Lusby's have three children, Bobby, Linda, and Michael.

#### 1962

DAVID E. SEIL has been appointed an assistant in psychiatry at the Harvard Medical School. He is associated with College Center in Boston.

**1965**

VICTOR J. BURNER is currently a resident in surgery at Mount Zion Hospital, San Francisco.

DAVID G. CAMPBELL, who is currently serving in the U.S. Navy, has recently been transferred from Pensacola and is now stationed at Quonset Point, Rhode Island.

**PUBLIC HEALTH**

**1956**

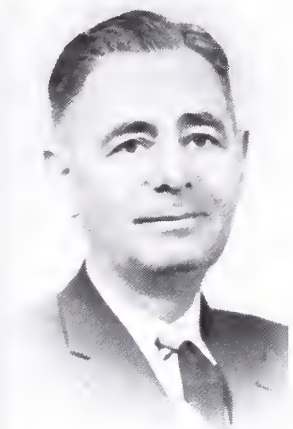
GEORGE R. WALKER has been appointed coordinator for comprehensive health planning in the Connecticut State Department of Health. In his new post, he will be responsible for the development of the state's comprehensive health services and will work closely with the Governor's Council on Comprehensive Health Planning. The project will be financed through federal funds which provide grants to study and coordinate all types of health services. Prior to this appointment, Dr. Walker practiced in Bangor, Maine, for eleven years.

Disease Control Section of the Connecticut State Department of Health, has served in many volunteer capacities with the Connecticut Division of the American Cancer Society and is a member of its executive committee. He is also an expert cancer consultant to the World Health Organization and a consultant to the International Agency of Research and Cancer. He is a lecturer in public health (chronic disease) in the Department of Epidemiology and Public Health at Yale and also a lecturer at the Johns Hopkins University School of Hygiene and Public Health.

**HOUSE STAFF**

**1961**

JOSEPH A. SISSON was appointed chairman of the Pathology Department at the Creighton University School of Medicine effective January 1, 1968, and also director of pathology at Creighton Memorial Saint Joseph's Hospital in Omaha, Nebraska. After completion of his internship in pathology at Yale-New Haven Medical Center in 1961, Dr. Sisson was a resident in pathology at the Albany Medical Center Hospital and then served on the faculty at Albany Medical College. Prior to his present appointment he was attending pathologist at the Veterans Administration Hospital in Albany. His major scientific interests are amino acid and lipid metabolism in pregnancy and the biochemical aspects of atherosclerosis and thrombosis.



*Dr. Eisenberg*

**1957**

The Bronze Medal Award, the highest honor of the Connecticut Division, American Cancer Society, was presented to HENRY EISENBERG on January 18. Given annually to a Connecticut resident for "outstanding service to the cause of fighting cancer," the award recognizes Dr. Eisenberg's "significant contribution in developing and utilizing data" of the pioneering Connecticut Tumor Registry which he has administered for the past fourteen years. Dr. Eisenberg, who is chief of the Chronic

**Picture Credits** Robert Perron: cover; Paul E. L. Kirchner, p. 2; A. Burton Street, p. 4; Kiyoshi Takasugi, M.D., p. 9; Yale University News Bureau, pp. 9, 24; Arthur Ebbert, Jr., M.D., p. 10; Morris Warman, pp. 11, 12, 13; Bernard Beitman, pp. 16, 17, 18, 19, 20; Rockefeller Institute, p. 29.





Medical Alumni Day  
Saturday, June 8, 1968

Registration — Medical Library, Sterling Hall of Medicine

- 9:00 - 11:00 Coffee Service for Alumni — Beaumont Room
- 9:30 - 12:00 Open House — Departments of Anatomy, Pediatrics, and Radiology
- 9:30 - 10:45 Surgical Conference — Fitkin Amphitheater  
Subject: *Trauma*
- 11:00 - 12:00 Medical-Pediatric Conference — Mary S. Harkness Memorial Auditorium  
Subject: *Chronic Renal Disease*
- 12:30 - 1:30 Buffet Luncheon for Alumni, Wives and Faculty — Edward S. Harkness Memorial Hall
- 2:00 - 4:00 Special Program for Alumni and Guests — Mary S. Harkness Memorial Auditorium  
Welcome and Introductory Remarks  
Dr. Benjamin Castleman ('31), President, Association of Yale Alumni in Medicine  
Dr. F. C. Redlich, Dean, Yale School of Medicine  
Dr. Leona Baumgartner ('34), General Chairman, Alumni in Medicine Campaign
- Drugs in Our Society*  
Dr. Paul Talalay ('48)  
Chairman, Department of Pharmacology and Experimental Therapeutics  
The Johns Hopkins University School of Medicine
- Social and Academic Responsibilities of Medical Schools*  
Dr. Donald W. Seldin ('43)  
Chairman, Department of Internal Medicine  
The University of Texas Southwestern Medical School
- Medical Education: Preparation for Tomorrow*  
Dr. Louis G. Welt ('38)  
Chairman, Department of Medicine  
The University of North Carolina School of Medicine
- 4:00 - 6:00 Social Hour for Alumni, Wives and Faculty — Edward S. Harkness Memorial Hall

All alumni of the School of Medicine, active faculty, and former house staff of the Grace-New Haven Community Hospital (Yale-New Haven Hospital) are members of the Association of Yale Alumni in Medicine and are invited to attend this June Alumni Day Program.

Individual class parties and dinners for the five-year reunion classes ('23, '28, '33, '38, '43 (Dec.), '43 (Mar.), '48, '53, '58, '63) will be held in the evening. Information will be available at the Alumni Registration Desk.

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# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / FALL 1968





COVER: Edward J. Quilligan, M.D., believes in the right of every child to be well born. An article by Dr. Quilligan, chairman of the Department of Obstetrics and Gynecology, begins on page 3. (Photographed by Robert Perron.)

# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / FALL 1968 / VOL. 3 NO. 3

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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*"... the population explosion with its potential for mass starvation and a land hunger by exploding notions which could make today's and even yesterday's conflagrations seem minor ..."*





I have chosen this somewhat Orwellian period for a variety of reasons. First, I believe the next sixteen years will be a very critical period for both obstetrics and the world in general. Equating obstetrics with solutions to world problems may seem the height of conceit for an obstetrician; however, one of the world's major problems is the population explosion with its potential for mass starvation and a land hunger by exploding nations which could make today's and even yesterday's conflagrations seem minor, indeed. While population problems are not solely the property of obstetrics, every thinking obstetrician must in good conscience strive for breakthroughs in this area on local, national, or international levels, either through patient care, education, or basic research. The recent decline in the number of births in this country would at first glance seem to portend an optimistic future for our own population problems; however, before we become too overjoyed at our prospects at home, perhaps we should examine the problem a bit more deeply.

If we look at those families from the poverty pockets who can least afford to support large families, the image becomes dismal. Some areas have birth rates as high as those of underdeveloped countries. This is the picture in one of the most prosperous countries in the world—a country in which communication by newspapers, magazines, radio and television should, and generally does, permit an intensive campaign for limitation of family size. We also, seemingly, have available to our public ample numbers of contraceptive methodologies.

Obviously, the efforts to limit the size of the family even in segments of this country, let alone the world generally, are not sufficient. Why? Two reasons seem paramount. The first has perhaps been neglected for too long: that is, the motivation for achieving a certain family size. Motivations, such as desire for a male heir and need to demonstrate virility, have been described but not extensively investigated. Some obstetricians as well as psychiatrists, psychologists, and sociologists must concern themselves immediately with motivational drives determining family size. The drives towards large family size must be determined, but more importantly and certainly more difficult, studies must be done to learn how to direct those drives to a smaller family size. This type of effort obviously must proceed

on a global plane since the motivation in India may be totally different than in Ohio.

I chose to place motivation ahead of contraceptive methodology, not necessarily to degrade the importance of methodology, but to indicate that no matter how effective the method may be, unless one lives in a totalitarian state motivation is the key to success.

The second reason for lack of success is that an ideal contraceptive is not available even though research has made great strides in the past few years. Perhaps a definition of the ideal contraceptive will permit delineation of the weaknesses of present-day methodology and give a goal toward which our 1984 obstetrician might strive. To be considered perfect a contraceptive must prevent conception 99 per cent of the time, yet be instantly reversible so the patient may become pregnant when she wishes. It must entail little or no effort on the patient's part, and have no side effects. This obviously is a large order and one which none of our contraceptives comes close to filling. The pill, while almost 99 per cent effective and, in most instances, readily reversible to permit pregnancy with its discontinuance, does require a certain amount of effort on the patient's part. Further, it does have side effects, some of which are serious, such as thromboembolic phenomena and possibly breast cancer, and some merely annoying, such as nausea, water retention, and breast fibrocystic disease.

The intrauterine devices are not as effective (97 per cent); have a high rejection rate (10-15 per cent); and have some annoying side effects, such as intermenstrual bleeding, as well as some serious side effects including infection which has been known to be fatal.

Some of the low dose progestins injected with silastic coverings may solve many of the problems previously mentioned. However, there remains a large amount of work for our 1984 obstetrician. He must develop a better understanding of such rudimentary phenomena as sperm capacitation; sperm migration through cervical mucus, uterus, and tube; sperm penetration of the zona pellucida and ovum membrane. Only through such understanding can really effective methods of contraception be developed.

Research in this area is currently being conducted in Yale's Department of Obstetrics and Gynecology by Dr. John McL. Morris and Dr. Robert H. Glass. Their studies involve investigations of sperm capacitation under differing conditions, fertilization, and anti-implantation compounds.

When one speaks of population limitation, one should note that with a single exception—Ireland, where the economic motivation is very high—all countries which

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*Dr. Quilligan is professor and chairman of the Department of Obstetrics and Gynecology. This article is based on a talk he gave at the University of Mississippi Medical Center in May, 1968.*

have been really successful in limiting their rate of population growth have liberalized their abortion laws. This is a very difficult subject because it has immense moral and psychological overtones. Needless to say, the abortion laws of 42 states in this country, which permit abortion only to save the life of the mother, are archaic and desperately in need of change. This type of law leads not only to multiple unwanted pregnancies, but to the flourishing illegal abortion business, with its tragic consequences of maternal death and sterility. There are those who believe that abortion on demand, such as is practiced in Hungary and Japan, is the only solution to both the problems of over-population and criminal abortion. However, I submit for your consideration that it would be foolish for us to adopt this practice before studying thoroughly the effects of such a radical change in those countries that are models. Studies of the mental, moral, and national implications of abortion on demand should be done now. But this is not to say that our antiquated laws should not be changed, and immediately. Actually, taking the law out of the penal code, as doctors have done, and following the model given by the American Law Institute in which abortion can be performed to save the life or health of the mother, for congenital defects, rape or incest, is entirely reasonable from a medical viewpoint. I do not think we should delude ourselves that such a law will markedly decrease criminal abortion because the Swedish experience tells us that it, alone, will not. However, in combination with good contraception and good education, it should have some impact.

#### *Neglect of Sex Education*

A specific type of education has been almost totally neglected in our society, particularly for the medical student and thus the doctor. I refer specifically to sex education. Research in sexuality is in the embryonic stage and our 1984 physician has a great opportunity to make contributions to knowledge. However, interest in research and teaching must be developed by making the medical student aware of sexual problems. Many communities are eager to develop programs of sex education for their school system, but the individual who should take the lead, the physician, has little or no knowledge himself. The youth of America are fed a continual diet of sensuality via television, movies, and magazines; yet practically none of these children knows anything about sexuality. Female desirability is equated with bust size and thigh exposure. With the accent on sensuality and no knowledge of sexuality, I fail to see why everyone is amazed that the rate of illegitimate

pregnancy is rising to astronomic heights. It is estimated that in Connecticut one out of six girls currently in her teens will be pregnant before she marries.

We might pause here for just a moment to examine illegitimate pregnancy more closely. What happens to the girl who is illegitimately pregnant in our society? If she is from a wealthy family, she can go to a home for unwed mothers, marry the father or, more likely, obtain an abortion. What of the less affluent individual? Dr. Philip Sarrel, a resident in our department at Yale a few years ago, took a look at 100 clinic teenagers who had become pregnant out of wedlock. These girls were examined over a five-year period and here are the dismal statistics. The 100 girls had 340 pregnancies. Only two or three finished school. Sixty were on relief. Thirty-six married and of those, 27 were later divorced.

#### *Salvaging Teen-age Mothers*

Once pregnancy has occurred, can anything be done to salvage a useful and productive member of society? Yes, it can, and Dr. Sarrel, a 1984 physician, did it. He mobilized the resources of the New Haven community to solve the problem. Through the cooperation of the school board, special classes were organized so these girls would not have to miss school. Through hospital and medical school cooperation a special clinic was begun, staffed by obstetricians, psychiatrists, pediatricians and social workers, to give the girls optimal physical and mental care during pregnancy. Group educational sessions were arranged with a social worker and a physician leader so that the girls could discuss their problems and be knowledgeable about the bodily changes that occur during pregnancy. The girls also received instruction in infant care from a pediatrician.

The results of these intensive efforts have been very gratifying. Of the first 150 girls enrolled in this program, almost all have remained in school and 12 have gone on to college or secretarial schools. Several girls in the program have married and the marriages appear to be quite stable. Parenthetically, the father also receives attention in this program. There have been only 12 repeat pregnancies, most of which were desired pregnancies. A calculation of the number of unwanted pregnancies that would have occurred under the conditions existing before the program was begun shows that there would have been between 80 and 100. It is clear from the Yale study that these girls can be salvaged!

In discussing contraception, abortion, and illegitimate pregnancy, we have covered superficially some of the major social problems our 1984 obstetrician must face.

They are, in a very real sense, problems of population imitation. However, to perpetuate the human race some children must be born, and the obstetrician must assure their mental and physical well-being. In other words, as my colleague Dr. Harry S. McGaughey used to say, "Every child has the right to be well born." That this is not the case has been emphasized by President Johnson. He points out correctly that our perinatal mortality is fourteenth in the world. This is explained by some on the grounds that we have a non-homogeneous population and that the low income groups cause a marked rise in the overall perinatal mortality. Although the low income families do indeed have a very high perinatal mortality, even our high income groups do not have a perinatal mortality that matches the best countries in the world (the Netherlands and Sweden).

Further than this, perinatal mortality is only a part of the picture and not the most important part either. The submerged portion of the iceberg, which can sink families or even societies, are those individuals who do not die at birth, but who through damage during pregnancy, labor, delivery or the neonatal period, are never able to achieve their full potential as productive citizens. We have absolutely no idea of the magnitude of this problem. Let me point out some perhaps obvious facts. We have several ways of looking at the intrauterine fetus, starting from early pregnancy. These include studies, such as those being undertaken at Yale by Dr. Nathan G. Kase, of chorionic gonadotrophin, estriol excretion, and other hormones produced by the fetus. In addition, fetal heart rate recording and fetal scalp sampling for fetal acid-base balance have been extensively studied to determine their efficiency in predicting the fetal outcome in terms of life or death. But there have been almost no studies of the infants who lived to see how they perform in the sixth grade. The one exception is the work of Dr. Edward H. Hon of Yale, a pioneer in fetal electrocardiographic studies, who is currently following a small group of children to test their performance on a neurologic and psychologic basis. Other investigators must follow with similar longitudinal studies.

#### *Need for More Basic Research*

Much work in fetal neurology at a more basic level also needs to be done. Hypoxia is known to cause brain damage. Such a simple question as how much for how long has not been studied very extensively. There are many other unanswered questions of a research nature for the 1984 obstetrician; in fact, one of the most exciting facets of the specialty of obstetrics is the myriad

of unanswered questions that need basic research.

In this age of revolutions by countries, ethnic and racial groups, and students, the physician is not exempt. He is facing a minor revolution by his patients. The placards our patients are carrying in this revolt say: *We want excellent medical care for all segments of our population. We want our medical care at a reasonable cost. We want to be educated about disease and therapy so that we will know when quality medical care is being received. And we want harmonized medical care.* This is a large order for the medical profession to fill, but the alternative to not filling it is complete government control of medicine; and then Big Brother will really be looking over our shoulder. The family physician of yesteryear was the embodiment of the humanistic approach to medicine. He gave to his patients compassion and understanding in abundance. This was the major therapy he had to offer. Unfortunately, too many physicians today forget that he cured many patients with such simple therapy. The cry of the physician today is "I don't have time," and this is quite true. The average physician today is a harassed, overworked individual who does not spend enough time with his family. There are, however, solutions to the problem. In the first place, a patient can identify well with more than one medical person. Two physicians in partnership can practice medicine from a medical and humanistic standpoint better than can two solo physicians. Thus, partnerships and groups can alleviate some of the problem. Yet, there is a further solution and that is the use of trained paramedical personnel. Many jobs the physician now does can be performed efficiently and humanely by paramedical personnel. In obstetrics, both normal prenatal care and normal labor and delivery fall into this category with one proviso: that is, that the paramedical personnel are supervised by a physician.

Recent experiences with the nurse-midwifery program here at Yale and at other centers demonstrate that members of this group can render excellent care to the normal patient during pregnancy, labor, and delivery. The nurse-midwife or her counterpart, the obstetric assistant, is going to play a very important role in 1984 medicine. If this is to be the case, then the medical student and obstetric resident must soon be trained to work cooperatively and efficiently with such personnel.

There are many challenges ahead for the 1984 obstetrician; however, from the caliber of student with whom I am associated at Yale, I believe those challenges will be met.



# Alumni Day 1968

The Medical Alumni Day on June 8 was once again favored by fine weather. Alumni from all parts of the country, medical graduates, public health graduates, and former house staff were present to renew friendships and to enjoy a full day of activities.

During the morning, Trauma was the subject of a Surgical Conference and Chronic Renal Disease was discussed at the Medical-Pediatric conference. In addition, the Departments of Anatomy, Pediatrics, and Radiology held open house with tours and special exhibits. The buffet luncheon at Edward S. Harkness Hall with umbrellas and tables on the terrace provided a pleasant setting for reunion of friends and former classmates; about 250 were present.

Presiding at the afternoon meeting of the Association of Yale Alumni in Medicine, Dr. Benjamin Castleman introduced Dean Redlich, who described developments at the school during his first year as dean, and Dr. Leona Baumgartner, who reported on the Alumni in Medicine (AIM) campaign. Following election of two



Returning alumni who took advantage of the open house tours of departments included Dr. Claude Bloch, '53 (above, left) who talked with Dr. Martin M. Kligerman, professor of radiology, about the linear accelerator and the van Essen headrest. Dr. James Haralambie, '35 (below, left) and

Dr. Leon E. Rosenberg, associate professor of pediatrics and medicine, discussed the amino acid analyzer used in Dr. Rosenberg's studies of genetic disease.



new members to the executive committee, Dr. Castleman expressed appreciation to Dr. Jonathan T. Lanman ('43) and Dr. Louis E. Silcox ('35) who completed two years of service.

The business meeting was followed by a special program of alumni speakers: Dr. Paul Talalay ('48), Dr. Donald W. Seldin (Dec. '43), and Dr. Louis G. Welt ('38). Their lively and provocative talks were the highlight of the day and stimulated a great deal of thought about the roles of the medical profession and medical education in our society.

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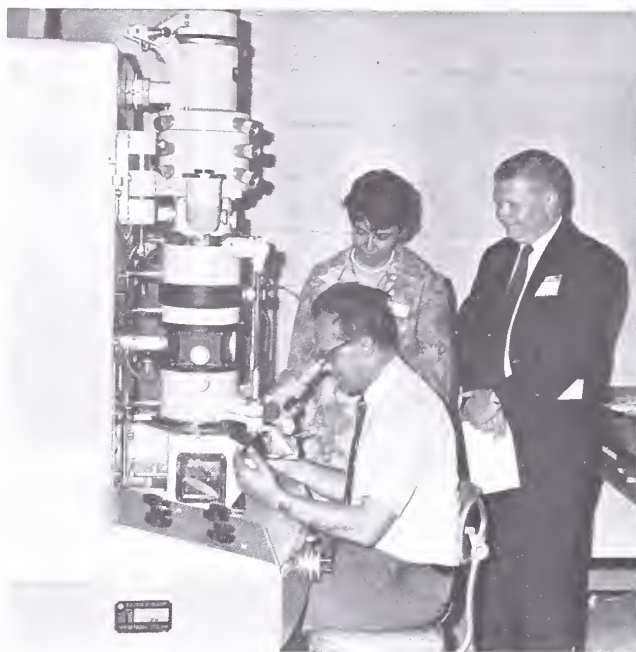
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*Dr. Christian Hodel, research associate, adjusts the electron microscope for Dr. Charles A. Hall, Jr., '58, and Mrs. Hall who toured demonstrations and exhibits in the Department of Anatomy. (Below) Dr. and Mrs. Frederick M. Lone visited the Historical Library of the medical school. Dr. Lone is a member of the Class of '53.*





William Beaumont





It would be hard to imagine a more unlikely alliance than that of the eminent Dr. William Beaumont and voyageur Alexis St. Martin. But once met, their paths were to cross and recross and the world of medicine would be the beneficiary. Beaumont is often referred to as "the father of gastric physiology"; St. Martin was his reluctant laboratory-patient whose open fistula was to divulge and confirm a mass of data on digestion and the gastric juices.

William Beaumont came from a family whose ancestors in Lebanon, Connecticut, had been thriving farmer-landowners of strong religious and political views. Born in 1785 and raised on the family property, he had no interest in farming. In his early years, he attended the town's common school, showing proficiency in English and Latin. At 21, he took leave of his family to travel northward without plan or destination but with provisions — a horse-drawn cutter, a barrel of cider and \$100 — plus a desire to see some part of the world and to have an effect for good in it.

In 1807 he arrived at Champlain, New York, a small mill town near the Canadian border, on the Great Chazy River. Beaumont settled here and applied to the village trustees to teach at the local school. For three years, his winters were spent educating the youth of Champlain; his summers, clerking in the village store; and every evening, reading in medical books borrowed from the library of Dr. Seth Pomeroy, a highly regarded practitioner in nearby Burlington, Vermont. Beaumont's introduction to medical learning crystallized his plans for the future. He would teach until he had sufficient funds to underwrite the two-year apprenticeship required to obtain a medical certificate. In 1810 he was accepted by Dr. Benjamin Chandler of St. Albans. Chandler, a gifted surgeon, not only undertook the instruction of young Beaumont but gave him room and lodging. He systematically drilled his own son as well as his boarder in such medical fundamentals as symptoms, diagnoses, the writing of prescriptions and the arts of cupping and bleeding. Beaumont repaid his teacher and host by sweeping the office, washing bottles, making up pills and assisting in operations. He also began the practice of keeping a detailed notebook

and medical journal, a procedure which he continued throughout much of his professional life. Entered in the journals were his personal observations, often-used prescriptions, notes on important diseases, and remarks on matters medical, either quoted by his teacher or selected from his reading.

*"Sept. 8th 1912 — Quit my Preceptor, Doc Benjn Chandler, St. Albans, Vt. under whose friendly inspection & instruction I happily pursued my medical studies for 2 years, to my own satisfaction & that of my Preceptor . . ."*

Having completed his apprenticeship, he was granted a license to practice by the Third Medical Society of the State of Vermont. The outbreak of the War of 1812 led him to enlist as a surgeon's mate. He was attached to the 16th Regiment of the infantry at Plattsburgh, then transferred in November with a division to Sackett's Harbor. His opportunities for practice occurred at once, for the conditions which the arriving army endured were miserable. Few had tents and, since the terrain was wet, cold and muddy, Beaumont had ample experience in the treatment of rheumatism, dysentery, typhus, pleurisy and pneumonia.

*"(My) treatment of the foregoing diseases I am warranted in adapting — from the happy issue & successful termination of more than two hundred cases out of which not one has died while under my care . . ."* W.B., Nov. 1812

He was plunged into surgery too when, at the Battle of York, the British exploded several hundred barrels of powder in the path of advancing Americans. Sixty were killed instantly and 300 wounded. Beaumont went into action at once, together with Dr. Daniel, the hospital Surgeon General, and operated without let-up for forty-eight hours.

*" . . . The wounds were of the worst kind — compound fractures of legs, thighs, & arms & fractures of skulls — on the night of the explosion, we were all night engaged in amputating & dressing the worst of them — the next day also and the day after I performed four amputations & 3 trepanings . . ."* W.B., April 1813

His next engagement, for which he and his fellow surgeon mates were cited on account of their "cool bravery" was at the Battle of Plattsburgh in service under General Alexander Macomb.

*" . . . During the investment of Plattsburgh by the enemy the surgeons were constantly passing from fort to fort or to blockhouses to dress the wounded, exposed to a cross-fire of round and grape shot while the greater part of the*

*Opposite: William Beaumont, surgeon in the U.S. Army, who has been remembered at the School of Medicine through the establishment of the Beaumont Medical Club and the Beaumont Room, came to New Haven only once: for the purpose of consulting Dr. Benjamin Silliman on the identification of certain chemicals found in gastric juices. This painting, a gift of the Beaumont Medical Club, was executed by Deane Keller from a daguerreotype.*

army was covered by fortifications . . . I feel myself bound to report with much respect, the conduct of all medical gentlemen attached to this army . . . and who for their particular services . . . merit the applause of their country . . .”/ Surg. James Mann to Surg. James Tilton

With the signing of the Treaty of Ghent, and the reduction of the standing army, Beaumont found that life on the base in peacetime held neither sufficient stimulation for his mind nor scope for his profession. He resigned to enter private practice, this time in Plattsburgh, where he had good friends, including a cousin, Dr. Samuel Beaumont, and where news of his army duty proficiency had preceded him. For a few years he shared jointly in a medical practice and in the operation of a small general store selling groceries, ammunition and medicines.

Meanwhile a colleague and former military surgeon, Dr. Joseph Lovell, was selected to become the first Surgeon General of the U.S. Army in Washington. Eager to reorganize the service and to surround himself with similarly capable men, he sought out Beaumont for a clerkship. The latter was tempted but turned down the offer of administrative work to continue in practice. On the other hand, Lovell’s reorganization of ratings made army medical service a good deal more attractive than previously and Beaumont made application for readmission and received orders to proceed to Fort Mackinac, once again under General Macomb. At his own request, an additional proviso permitted him to attend the non-military residents of the Island since he was the only doctor in the area.

“Secretary of war has no objection to your giving your professional services to the sick of Mackinac, provided it does not interfere with your official duties. They can not, however, be furnished from the public chest.”/ Surg. Gen’l. to W.B.

Mackinac Island, located in a commanding position on Lake Huron, had long been an important and colorful center for Indians, missionaries and fur traders. Here in the village settlement was the headquarters of the American Fur Company. Here, every June and July thronged Indians, French-Canadians; an assortment of fishermen, trappers and traders bringing their goods and wares down rivers and streams to be sold or traded and temporarily swelling the island population by thousands. The wild parties, brawls and fights resulting from their short-lived accumulated winter’s earnings added considerably to the calls made on Dr. Beaumont’s time. The Army surgeon continued to maintain his journal with

assiduous attention to detail, both medical and otherwise, and so we know that life on the post and in the village was very much to his liking, but for his wistful references to a handsome and talented young widow back in Plattsburgh, Mrs. Deborah Green Platt, to whom he had become deeply attached while in practice there.

“ . . . oh how long doth seem our separation — anxious indeed am I to know our final prospects — were our present happy anticipations to be destroyed & our hopeful heart-sustaining prospects cut off — oh how cheerless — difficult & desperate would be the future scenes of life . . .”/ W.B., 1820

In the autumn of 1821 Beaumont requested and received a brief furlough at which time he journeyed to Plattsburgh and shortly after returned to the island with Deborah as his bride.

The voyageurs and trappers had just arrived at Fort Mackinac the following year, June 6th of 1822 when, in the milling crowd gathered in the company store, a shot gun was accidentally discharged at close range and Alexis St. Martin, a young French-Canadian in the employ of the American Fur Company, collapsed to the floor with a gaping chest wound. Dr. Beaumont was summoned and examined the patient.

“ . . . found a portion of the lung as large as a Turkey’s egg, protruding through the external wound, lacerated and burnt; and immediately below this, another protrusion which, on further examination, proved to be a portion of the stomach lacerated through all its coats and pouring out the food he had taken for his breakfast through an orifice large enough to admit the fore finger . . .”/ W.B.

According to an eye witness of the shooting, after painstakingly removing some of the shot, fragments of clothing and cleansing and superficially dressing the wound, Beaumont departed, saying “The man can’t live 36 hours. I will come to see him bye and bye.” Beaumont’s own recollection, as recorded in his notebook, is a much more pessimistic one.

“ . . . I considered any attempt to save his life entirely useless. But as I had ever considered it a duty to use every means in my power to preserve life when called to administer relief, I proceeded to cleanse the wound . . . not believing it possible for him to survive twenty minutes . . .”/ W.B.

The relationship initiated by Beaumont’s life-giving care to young St. Martin was to transform the doctor from an able army surgeon and practitioner to the fore-

most physiologist of his day whose observations, according to some, were America's first contribution to medicine. An interdependency would develop between his reluctant patient and himself which was to be a source of frustration and aggravation to both.

For nearly a year Beaumont visited the fort's frame hospital to minister to his patient and to dress his wounds daily, noting down meticulously his own treatments and the consequent reactions in St. Martin's well-being, comfort and appearance. Then, officials of the county announced that they were neither able nor willing to give further support for Alexis' upkeep; that he would have to be returned to his place of origin. Knowing that the helpless youth could never survive the 1,500-mile trip by canoe to lower Canada, and touched by his miserable situation, Beaumont offered to take him into his own home. This could not have been an easy decision for his army salary of \$40.00 a month plus rations was already stretched to cover the support of his wife and year-old daughter, Sara.

*"... I took him into my own family . . . at a time when he was helpless, sick, and suffering under the debilitating effects of his wounds, naked and destitute of everything, but pain, a 'little breath of life' and a wounded body . . ."* W.B., 1823

There are sources who claim that from his second visit to St. Martin, Beaumont entertained the idea of experimentation on the boy by introducing food into the stomach via the fistula. Beaumont, whose journals are revealing and explicit, had this to say:

*"... To retain his food and drinks I kept a compress and tent lint, fitted to the shape and size of the perforation and confined there by adhesive straps. After trying all the means in my power for eight or ten months to close the orifice, by exciting adhesive inflammation in the lips of the wound, without the least appearance of success, I gave it up as impracticable in any other way than that of incising and bringing them together by sutures; an operation to which the patient would not submit."* W.B.

In the fall of the following year, the doctor sent his observations to his friend and superior, Joseph Lovell, for approval and possible publication, and "A Case of a Wounded Stomach" by Joseph Lovell appeared in an 1825 issue of *The Medical Recorder*. Misassignment of authorship was due, in all probability, to Lovell's updating of St. Martin's condition rather than to any literary piracy on the part of the Surgeon General. The final paragraphs indicated Beaumont's growing awareness of the rare opportunity available to him to make use of his

human laboratory for the advancement of mankind.

*"... This case affords an excellent opportunity for experimenting upon the gastric fluids and process of digestion. It would give no pain, nor cause the least uneasiness to extract a gill of fluid every two or three days, for it frequently flows out spontaneously in considerable quantities. Various kinds of digestible substance might be introduced into the stomach, and then easily examined during the whole process of digestion . . ."* W.B.

He had, as he noted in the body of the article, already established certain data about the functioning of gastric juice. Careful observer that he was, without any formal plan for experimentation, he had begun to question and to reject some of the erroneous but accepted concepts, replacing them with verified facts.

An exchange of correspondence with Lovell who offered him encouragement and assistance fortified his own feelings about the importance of his investigations but, simultaneously, triggered his sense of isolation from scientific circles and heightened his awareness of the inadequacy of his surroundings and equipment for carrying on experimentation. He therefore applied for, and eventually received a transfer to the hospital at Fort Niagara. The post being near Plattsburgh, Mrs. Beaumont and the children (now two in number) visited her family's home while the doctor embarked on the first of a series of digestive experiments involving St. Martin.

The patient was then well enough to perform odd jobs for his patron, including wood-cutting and other household chores, but with renewed health he had little taste for or understanding of his role as physiological guinea pig. A two-month furlough to Plattsburgh with the doctor brought Alexis close to the Canadian woods which he did know and understand and he bolted, leaving no word or trace.

Beaumont's despair and bitter disappointment over his loss was great, but having alerted the agents of the fur companies and their employees, his furlough over, the doctor was forced to return to duty at Fort Niagara. A second transfer carried him further west to Fort Howard at Green Bay, another trading center. Beaumont's chief concern at the post was in preventing the spread of smallpox, the possibility of an epidemic always threatening due to the nomadic lives of the Indians and traders of the area.

Two years elapsed before Beaumont's inquiries about his patient were to be answered: through an agent of the American Fur Company, Mr. William Morrison, the doctor was advised that Alexis, healthy but destitute, was living in Berthier, Lower Canada, with a wife and two



children; that if his wife could be engaged by the Beaumonts, he would gladly place himself at the doctor's disposal. Two more years were to elapse before patron and patient were reunited. Beaumont had been transferred to Fort Crawford at Prairie du Chien which necessitated a trip of several months down various waterways for the voyageur and his family and a financial advance on the part of the doctor.

*"... He now entered my service, and I commenced another series of experiments on the stomach and gastric fluids, and continued them interruptedly until March, 1831 . . ."* W.B.

In March, his wife pleading extreme homesickness, Alexis and his family departed for Canada — with permission — on his promise to return on request. It was Beaumont's plan to obtain a year's furlough and to travel with St. Martin to Europe to share with physiologists and chemists on the continent the data he had gathered and to gain further insights from their studies and observations. Permission for both furlough and trip were obtained through application to Lovell.

It was not Alexis who thwarted the doctor's plan this time, but the outbreak of the Black Hawk Indian War. Beaumont's leave was cancelled and he and his regiment were directed to Fort Dearborn in Michigan. Other troops were being brought from the East by boat. The hostile Indians were soon routed with little loss of life through combat. However, word of a single case of Asiatic cholera caused mass desertions among the soldiers who, in their flight, spread the disease throughout the Middle West, with loss of life from the epidemic far exceeding combat mortalities. Beaumont had occasion to treat many of the stricken and noted:

*"The Greater proportional numbers of deaths in the cholera epidemics are, in my opinion, caused more by fright and presentiment of death than from the fatal tendency of violence of the disease . . ."* W.B.

In the summer of 1832 the doctor was again granted a furlough to carry out his postponed plans, but for only six months. He set out immediately for Plattsburgh and, hopefully, to reconnoiter with Alexis. And the young man did not disappoint him. To ensure the boy's presence for a full year, however, Beaumont caused to have drawn up a most unusual legal document.

*"... the said Alexis shall . . . serve, abide and continue with the said William Beaumont, wherever he shall go or travel or reside in any part of the world and according to the utmost of his power, skill and knowledge, exercise*

*and employ himself in and do and perform such service and business matters and things . . . as the said William shall . . . or do, direct and appoint . . ."*

In return, the doctor was to provide his "servant" with food, clothing, lodging and \$150.00. The document (now in the library of Washington University Medical School in St. Louis) bears the signature of Beaumont and the X of St. Martin.

Many reasons are postulated for Dr. Beaumont's travelling to Washington, D.C. rather than to Europe (though his briefer furlough would seem to be explanation enough) and Washington seems to have been a most productive alternative. There were countless books and eminent minds for him to consult. And Lovell, as usual, rendered him every assistance including making Alexis a sergeant in the Army with a small stipend, clothing allowance and subsistence. This enlistment was a source of financial relief since Alexis was gradually becoming aware of his unique value to science and had continually increased his demands on his patron.

While conducting his third series of experiments, Beaumont was able to consult with Robley Dunglison, professor of physiology and chairman of the medical department at the University of Virginia, via an extensive correspondence and in person, when the professor visited Washington for the express purpose of meeting Beaumont and exchanging their respective speculations and observations on the chemical composition of the gastric fluids, and possible areas for further experimentation. Here were carried out the third series of observations and conclusions involving the solvent action of gastric juice, the importance of chewing action in spite of solvents and the relation of temperature to digestion.

A highly profitable six months elapsed. Once again Lovell offered assistance by assigning him to New York to examine recruits, a task which would leave him sufficient freedom to continue his experiments and to gather his conclusions into a form for publication. Before leaving Washington, he left Dunglison a vial of gastric fluid for his further analysis and the promise that he would continue to exchange pertinent findings.

Eager to gather all possible information on the chemical changes he had observed for inclusion in his book, Beaumont made a trip to New Haven where he was warmly received at the hands of Benjamin Silliman, then professor of chemistry and natural history. Silliman not only agreed to undertake an analysis of the fluid but also to enlist the interest and talents of Professor Jacob Berzelius of Stockholm in making similar tests.

*"... My motive for troubling you with this affair is that*

*I am anxious that a subject of such deep interest to mankind should be investigated by (pardon me for saying) the man of all others best qualified for the task . . ."/>Silliman to Berzelius, 1833.*

Concerning his progress in New York, however, Beaumont was less than content and wrote Lovell:

*" . . . My official duties are very light and would not interfere at all with my experiments, could I avoid the vexatious official intercourse to which I am perpetually exposed in this City. It is an unfavorable place for the pursuit of physiological inquiries and experiments."/* W.B., 1833

The Surgeon General, convinced of the value to mankind and to medicine of publishing Beaumont's work, once again transferred the doctor, this time to Plattsburgh where, though his title was recruiting officer, he would have time to compile his results and put them in form for publication. This he did with the assistance of his cousin, Samuel Beaumont, who was not only a practicing physician but also conversant with details of publishing. The post in Plattsburgh also made possible a reunion with his family.

Alexis, on learning of the death of one of his children, left for a brief trip to Canada once more. There was little doubt of his return since he was still subject to army discipline. And Beaumont would have little need for his services as he was deeply immersed in the collating of material and the minutiae attendant to publication.

During the summer the manuscript of *Observations and Experiments on the Gastric Juice and the Physiology of Digestion* was virtually completed, to be sold by subscription. Notices including the table of contents and a description of the book (bound in pasteboard, three engravings and price: \$3.00) were issued, but Beaumont delayed publication, ever hopeful that one of the two eminent chemists he had consulted would be able to isolate the solvent in gastric fluid which still escaped identification. He received lengthy and encouraging communications from Silliman, though the professor had been forced to delay experimentation owing to departmental demands and, indeed, provided disappointingly little new information, only confirming certain earlier statements about the presence of free hydrochloric acid when he did complete his analysis of the fluid. From Berzelius, there was no word. Beaumont continued from July until November with his fourth series of experiments with Alexis who had returned promptly.

Though no further information could be included in the book, Beaumont continued to be persistent in his

quest and, hoping to avoid future interruption, executed a new two-year contract with St. Martin at a greatly advanced figure. The two devoted a brief period to appearances before medical societies and departments in the Northwest and then Beaumont released his partner once again for another short furlough.

When the book was published, it received wide and complimentary notices but the sales were disappointing. The doctor repaired to Washington once more, this time to appeal to Congress for an appropriation to cover the ever-growing expenses incurred in the support of Alexis and in the advancement of science. In spite of expert testimony in his behalf on the part of both political and medical lobbyists, the bill, involving about \$4,000, was turned down by a vote of 129 to 56.

Disappointment piled on disappointment for, on Beaumont's return to Plattsburgh, Alexis had not returned or sent any word of his plans. Meanwhile, the harrassed doctor had received orders to proceed to Jefferson Barracks, Missouri.

Once at his post, he tried through every available channel to get Alexis to rejoin him. Letters passed between the two, with the Canadian citing illness, the frozen and impassable waterways, the fact that he had just cultivated his garden, among his many excuses for remaining in Berthier. Beaumont appealed again to Morrison of the fur company:

*" . . . I am desirous of ascertaining Alexis' situation and true disposition, and can only expect to succeed indirectly through your kindness and candor. Long, vexatious experience has too much impaired my confidence in him to rely upon his assertions and promises . . . I advanced him money, considerably more than was then due him . . . since which I have not seen or recd. anything from him but mere pretexts for his failure to return according to agreement . . ."/>"*

A transfer to the arsenal at St. Louis was the doctor's final and permanent assignment. Reunited with his family, Beaumont settled in the city of St. Louis. Part of his time was occupied by his duties as attendant physician to the officers and their families stationed at the arsenal. As before, Surgeon General Lovell agreed to his pursuing a practice within the city and its suburbs, the practice no doubt enhanced by the reception accorded his book and the word of his experiments on the still-absent Alexis.

*" . . . I have a very handsome, lucrative and respectable private practice . . . a reputation far above my deserts and a professional popularity more than commensurate*

with my best practical skill or abilities . . .”/ W.B., 1834

Letters from Alexis and other interested parties and stories of the man’s whereabouts continued to filter into the surgeon’s St. Louis office. There were reports that he was prepared to return to the doctor’s service if he could bring his wife and if the doctor would advance him some money. Other reports told of his addiction to drink (“an abandoned drunkard” wrote one) and of the family’s utter destitution. Friends warned Beaumont that St. Martin would squander any sums advanced him for travel, but the frustrated man never ceased in his efforts. As late as 1852 — six months before the doctor’s death — a final appeal went out to the wily Canadian.

“... Without reference to past efforts and disappointments . . . I now proffer to you in faith and sincerity, new, and I hope satisfactory, terms and conditions to ensure your prompt and faithful compliance with my most fervent desire to have you again with me . . . you know what I have done for you many years since . . . what efforts, anxieties, anticipations and disappointments I have suffered from your non-fulfilment of my expectations. Don’t disappoint me more . . .”/ W.B.

The two never met again.

Beaumont’s practice and his reputation in St. Louis continued to increase. In 1835 when St. Louis University decided to establish a medical school, the doctor was approached to take the chair in surgery. Still attached to the Army, he accepted only provisionally, pending departmental consent. Unfortunately for Beaumont, his friend Lovell died in 1836 and was replaced by Thomas Lawson. Lawson, who was, in other respects, a fine surgeon general, seems to have been piqued by the many privileges accorded Beaumont by Lovell and it was rumored he planned to send the doctor to Jefferson Barracks. Through the intercession of friends, in military and political circles, this move was delayed and then dropped, but Lawson did, in fact, order his removal to Fort Brooks in Florida. The doctor reflected on his many years of service, his advanced age and the very happy life he had established for his family and himself in St. Louis and tendered his resignation unless the order to Florida were rescinded. After 25 years of devoted association, he was both indignant and deeply hurt by the peremptory acceptance of his separation, as were others:

“... The policy of the department has driven the best surgeon out of the army without the slightest occasion. I am sorry to lose you from the same profession in which I serve for the double reason of personal friendship and professional pride . . . a better physician or better man is

not found in any country . . .”/ Major Ethan Allan Hitchcock to W.B., 1839

Beaumont was now free to accept the University’s offer, but the plans were slow in materializing and there is no record of his having actually lectured there, though a building opened in 1842 and there is evidence that he had planned to give a lecture course in digestion in 1851 using St. Martin as his laboratory exhibit.

Until his death, St. Louis was his home and practice was his life. And a lucrative practice it was, permitting Beaumont to buy a large tract of land in the country. In 1849 when a cholera epidemic broke out in St. Louis, he was on constant call, day and night, because of his previous experience with the dread disease and because of his reputation for serving humanity — rich and poor alike.

He was returning from a house call one cold winter night in March of 1856 when he slipped on some icy stairs, suffering a fall and a resulting infection which caused his death the following month. Because of his tenacity in the pursuit of a cause which interested him, Beaumont had his champions and his detractors. One memorial endorsement was made by physiologist Victor C. Vaughan: “Every physician who prescribes for digestive disorders and every patient who is benefitted by such prescription owes gratitude to the memory of William Beaumont for the benefit of mankind.” Beaumont virtually wrote his own epitaph in a sentence much-quoted from his book on observations when he said: “Truth like beauty when ‘unadorned is adorned the most’; and in prosecuting these experiments and inquiries, I believe I have been guided by its light.”

\* \* \*

Alexis St. Martin, the youth given up for dead in 1822, lived to age 83, sired 17 children and died in Canada in 1880 — 24 years after the death of the doctor. Many interested medical figures, including Sir William Osler, requested the opportunity of making an autopsy. Osler even made a sizable financial offer to the family through their parish priest in an effort to obtain the stomach which he planned to give to the Army Medical Museum in Washington but he, with the others, was turned down. St. Martin’s widow, to thwart the possibility of any interference, hid the body in the house for several days until it was quite decomposed and then ordered her husband’s grave dug eight feet deep as insurance against future disinterment.



# Physiologist and Obstetrician

Faculty Profile: *Edward James Quilligan, M.D.*,  
Professor of Obstetrics and Gynecology

Stillborn?"  
"Fraid so."

Green gowns bent over the draped table. Eyes moved in the bands of face between caps and masks. Gloved hands grasped the emerging head and shoulders.

"Let's get it out and suture the mother. No need to endanger her. She's a good sheep."

The lamb was being delivered by cesarean section, a necessary procedure in Dr. Quilligan's current research on fetal physiology during labor. These studies involve the correlation of fetal heart rate patterns with acid-base status and cerebral metabolism in the newborn.

Dr. Quilligan pulled the small animal's hindquarters through the incision in the maternal abdomen and rubbed the limp, wet form for a moment with his hands. "Too bad." He lifted it to a side table and was about to release it. "Wait a minute—it's alive! Pretty depressed, but not quite zero." Other hands reached toward the lamb, forcing suction tubes into the nose and mouth and rubbing the chest and limbs. Within minutes the newborn animal raised its head and emitted a healthy-sounding bleat.

A few days earlier, in a surgical procedure, the unborn lamb had been partly removed from the mother's uterus. Two small electrocardiogram electrodes had been implanted in the fetal axilla, catheters placed in the aorta and jugular vein, a flow probe put around the carotid artery, and an electroencephalogram electrode attached to the brain. The lamb was then replaced in the uterus to be delivered 72 hours later.

This animal's contribution to Dr. Quilligan's research program is to help elucidate the physiologic changes underlying alterations in fetal heart rate, fetal EEG, and the biochemistry of the fetus during labor. New methods for monitoring these activities in the human fetus have been under development at Yale by Dr. Edward H. Hon since the early 1950's and are now in clinical use at the Yale-New Haven Medical Center in maternity cases where fetal distress is anticipated.

It was in 1957 that Dr. Quilligan first visited Yale to consult with Dr. Hon on monitoring instrumentation, which he then applied in his studies at Western Reserve on gas metabolism in the human fetus. His present comprehensive research on fetal physiology during labor employs sheep only and is one of the most advanced and exciting programs in this field being conducted anywhere in the world.

Edward James Quilligan, who became chairman of Yale's Department of Obstetrics and Gynecology two years ago, was born in Cleveland, Ohio, June 18, 1925. Although there had been no doctors in his family, he



knew from the time he could talk that he wanted to become a physician. His father, a developer and salesman of baby formulas and later president of the Similac Company, was always connected with the medical profession through his interest in feeding babies.

Growing up in Columbus, the second of three boys, young Ted Quilligan found that science and mathematics came easily to him at school, but his interests were not particularly scientific. "I was mainly interested in athletics," he recalls. "I also played around with things like photography and woodworking. You name it and I probably did it. I'd say I was the kind of child who dabbled in lots of things and didn't perfect anything."

His enthusiasm for athletics, however, led him to master most of the popular sports, and his ability as a swimmer once served him especially well in a crisis: "It was at summer camp when I was about 14. One evening a group of us decided to go out to an island in the river which could be reached by a bridge a quarter



Above: An unborn lamb is partly removed from the mother's uterus and equipped for fetal monitoring.

Right: After electrodes and catheters are implanted in the fetal lamb, the animal is re-placed in the uterus.



of a mile upstream. We sat around telling ghost stories and we told them so well we scared ourselves. So instead of going back to camp the long way on foot, we decided to swim the river. About half way across one of the kids remembered that he didn't know how to swim and he started to drown. I decided I could get him to the shore, but it was a close call. He grabbed me around the neck and pulled me down twice before I finally got a hold on him and pulled him in."

#### *Schooling, Army, and a Blind Date*

His schooling included two years at a military academy. During the summers he worked as a copy boy for a newspaper, a camp counselor, and a laboratory attendant at Ohio State University in Columbus, which was to be his alma mater. In his senior year at Western Military Academy, he was accepted at Dartmouth College, his first choice for the pre-medical years. That spring, however, it became apparent that he would be drafted if he waited to start classes at Dartmouth in September.

The military school permitted him to graduate ahead of schedule so that he could enter Ohio State in the spring quarter of 1943. Under the wartime acceleration system, he was able to pass certain examinations and receive credit for courses without taking them. By mid-summer he had accumulated enough credits to apply for Ohio State University College of Medicine where he was accepted for entrance in the fall of 1944. But



having nearly achieved the threshold of his career—and the draft exemption that would go with it—he decided to defer the whole plan and join the Army.

He took basic training at Little Rock and was commissioned a second lieutenant in the Infantry at Fort Benning, Georgia. For the next two years he served with a quartermaster battalion in Germany and returned in 1946 to pick up where he had left off at Columbus. That December he married Betty Jean Cleaton, a student at Ohio State, whom he had met on a blind date that he almost failed to keep. It was just after he received his commission when he was home on leave before going to Germany.

“I went swimming,” he explains, “and met a friend at the pool who offered to fix me up with a blind date and we’d all go dancing. Since most of the girls I knew at college were away for the summer I said okay. Later my friend called me at home, told me my date’s name, and said I was to pick her up at eight at the Delta Gamma house. Then another friend called and wanted me to have a beer with him for old times’ sake, which of course I did.

“Well, we had two or three beers at a place called Larry’s and I completely forgot my date’s name. But I remembered where she lived. Time slipped by faster than I thought and I got to the Delta Gamma house an hour late. I knocked and a perfectly lovely girl opened the door. I thought this can’t possibly be my blind date, so I’ll just tell her my plight, and I said ‘I’m Ted Quilligan and there’s a girl here with whom I’m supposed to have a blind date, but I can’t for the life of me remember her name.’

“Then the lovely girl said, ‘I’m your blind date,’ and with that I just about crawled right out under the door. But she went out with me anyway, and that was the beginning of our life together.”

At medical school he found that his main interests at first were anatomy and physiology. “In addition to wanting to be a doctor, I had always said I wanted to be a surgeon, and that seemed to be my direction at the beginning. There was only one time when I wasn’t sure I wanted to be a physician and that was toward the end of my second year when we began to go into the hospital for the first time.

“I don’t know whether it was something in the hospital atmosphere, the odor, or my being tense at the thought of seeing patients—but I had tremendous nausea associated with the hospital. I thought I certainly can’t go through this for the rest of my life, and Betty and I talked seriously about my junking the whole business and going into engineering, which had always

been my second choice of a career. Fortunately, the nausea reaction wore off completely in four or five months and there was never any doubt again about my wanting to be in medicine.

In the summer between his second and third years of medical school, he took an externship in a private hospital where he was in charge of the emergency room. During his third and fourth years he served as a junior instructor in anatomy at the medical school and held down a night job as an extern in a children’s hospital. He received his M.D. degree in 1951 and began a rotating internship at Ohio State University Hospital.

### *Career Decisions*

“At that time I still hadn’t given up the idea of surgery,” he says, “but I had found obstetrics and gynecology one of my most enjoyable clerkships in medical school. Our rotating internship put us through those two specialties as well as internal medicine and pediatrics. I knew I didn’t want to be a pediatrician, but my first rotation, which was internal medicine, was so interesting that I thought I would be an internist. On my second rotation, obstetrics and gynecology, I decided that this was really my field after all. Then I went to surgery and thoroughly enjoyed that too. It was a dilemma, and I put in applications for residencies in all three.

“Dr. Charles Hendricks, who was then assistant professor of obstetrics and gynecology, sat down with me one day and asked me what I really wanted to do. He said that if I was sure I wanted obstetrics and gynecology they would offer me a residency. Then I realized that this would give me a combination of everything I wanted. I would have the opportunity to practice good medicine and good surgery within the framework of a specialty I particularly liked. So I accepted.”

Before he began his residency, Dr. Quilligan had not seriously considered a career in academic medicine. He and a close friend with whom he had gone through medical school and internship were planning to go into practice together. In consultation with each other, they agreed to give academic medicine a try—and it took with both. The close friend, Dr. Frederick Zuspan, is now chairman of the department of obstetrics and gynecology at the University of Chicago.

The teachers who influenced him most, Dr. Quilligan feels, were Dr. Allen Barnes, chairman of the department at Ohio State, and Dr. Hendricks, with whom he began his research at Columbus. In 1953, Dr. Barnes moved to the department chairmanship at Western Reserve University School of Medicine, and the following



year he invited Dr. Hendricks and a group of residents, including Drs. Quilligan and Zuspan, to join him.

Dr. Quilligan's initial research dealt with cardiac output in pregnancy. Those studies, conducted in collaboration with Dr. Hendricks, led to an investigation of cardiac output during labor and other aspects of the maternal hemodynamics involved in giving birth. For their contributions in this field, Drs. Hendricks and Quilligan received the Central Obstetrics and Gynecology Society Prize in 1954.

Collaborative research followed on intrauterine pressure, intervillous space pressure, and other aspects of maternal physiology, and at the completion of his residency in 1956, Dr. Quilligan branched out to begin exploring the physiology of the fetus. Appointed to the medical faculty at Western Reserve, he continued his studies there and at Cleveland Metropolitan General Hospital. In 1963 he attained the rank of professor and was named chairman and director of the department of obstetrics and gynecology at the hospital.

During his last year in Cleveland he began his present extensive program of research with fetal sheep, a program he further developed in California where he accepted a professorship at the University of Califor-

nia School of Medicine in Los Angeles in 1965. At the same time he was made chief of obstetrics and gynecology at Harbor General Hospital in Torrance.

In 1966 Yale was seeking a successor to Dr. C. Lee Buxton, chairman of the Department of Obstetrics and Gynecology. Dr. Buxton, who was then on leave of absence because of illness, had headed the department for twelve years and had won international acclaim for his work in advancing the cause of planned parenthood. He and his senior colleagues in the department, Drs. C. D. Davis and John McL. Morris, were unanimous in their recommendation of Dr. Quilligan for the post. For Dr. Quilligan, it was a return to the site of his early interest in fetal physiology and an opportunity to pursue his basic research in closer liaison with the pioneering applications being made by Dr. Hon in his fetal intensive care program.

#### *A Family Man*

Although he frequently works ten to twelve hours a day, Dr. Quilligan is very much a family man. He and his wife live in Woodbridge where their house is always a center of action, with five of their six children living at home. The eldest, Bruce, born during his

*Dr. Nathan G. Kose, associate professor of obstetrics and gynecology, discusses a patient's problem with his colleagues.*





Cyclists Chris, Teddy, and Linda Quilligan and their parents consider the hitchhiker in Linda's basket. He's the family poodle, John.

father's first year of medical school, is a junior now at Ohio Wesleyan University where he is majoring in economics. Jay, a senior in high school, is interested in falconry and has had a variety of hawks and owls living with the family, including a handsome Red-tailed

Hawk named Elmer who last year flew free around the neighborhood in Woodbridge and returned nightly to the Quilligan house where he had learned to knock on the door. Daughter Carol, at 15, is a talented flutist and enthusiastic skier.

Sports still figure importantly in Dr. Quilligan's life and he keeps a keen edge on his skills at tennis and golf. He loves to sail and for several summers the family vacationed at Glen Lake, Michigan, where he kept a 16-foot sailboat. This past summer the three younger Quilligans—Christopher, 13, Linda, 10, and Teddy, 9—accompanied their parents on a sailing and swimming holiday on Cape Cod. Betty Quilligan fully shares her husband's enjoyment of the outdoors: their vacations have included winter skiing at Aspen and in the Laurentians and water skiing in Florida. Some day they will travel abroad, he says, "when all the children are through college."

For the immediate future he sees an enormous job to be done in his field of medicine. In an article beginning on page 3 of this issue, he discusses some of the challenges the obstetrician-gynecologist must help to meet in the coming decades, challenges inherent in the population explosion and the sexual revolution. In planning

Dr. Quilligan meets every morning with department faculty members and residents for review and study of clinical cases.





the program of his department at Yale, he is deeply aware that patient care, research, and teaching must respond to these phenomena with new ideas and approaches.

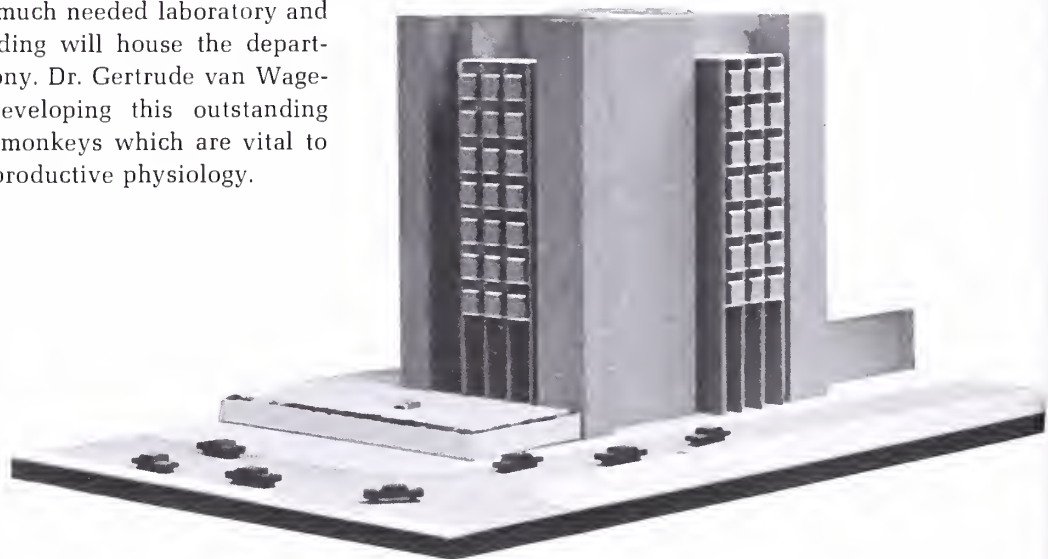
Last year the department established a special research section directed toward the study and control of human reproduction. Efforts in this area include the research in fertility and early reproductive physiology being conducted by Dr. Morris and studies in infertility and steroid metabolism by Dr. Buxton and Dr. Nathan G. Kase. Other research in the department supports the right of every child that is born to be *well* born. In addition to the investigations of Drs. Hon and Quilligan in fetal brain damage, important studies in erythroblastosis by Dr. Maclyn E. Wade, Dr. Davis, and Dr. Ernest I. Kohorn are in progress.

The one major problem of the department at present is logistic. The research and teaching programs have expanded to the limit of available facilities. "We desperately need more staff, but we have no place to put them," Dr. Quilligan says and glances longingly at an architect's sketch of the \$7 million tower that is to be constructed at the corner of Congress and Howard Avenues. The proposed building, to be called the Laboratory of Surgery, Obstetrics and Gynecology, was announced a year ago but funds for its construction are not yet available.

In addition to providing much needed laboratory and office space, the new building will house the department's famous primate colony. Dr. Gertrude van Wagenen is responsible for developing this outstanding colony of *Macacas rhesus* monkeys which are vital to the research program in reproductive physiology.

During his two years in New Haven, Dr. Quilligan has had a significant impact on medical education at Yale: he is acknowledged by his students to be an excellent teacher, and he has also served on the curriculum committee where he was one of the group that pushed for extensive revisions in the four-year program leading to the M.D. degree. The new curriculum, which takes effect with this fall's entering class, reflects many of the viewpoints that Dr. Quilligan brought to the committee's deliberations, including his belief in the importance of early clinical experience. It is apparent that the chairman of obstetrics and gynecology will continue to exert a valuable influence in the charting of new directions for Yale medicine in the years ahead.

*Architect's model of the proposed building for the departments of surgery and obstetrics and gynecology.*





# In and About Sterling Hall

## Dr. Gerhard Giebisch Named Chairman of Physiology



Dr. Giebisch

Dr. Gerhard Giebisch, an authority on kidney physiology, has been appointed professor and chairman of the Department of Physiology. He was formerly professor of physiology at Cornell University Medical College.

Dr. Giebisch was born in Vienna, Austria, and received his medical degree from the University of Vienna. He remained there after graduation to do research on renal tubular function by micropuncture and micro-analytical techniques.

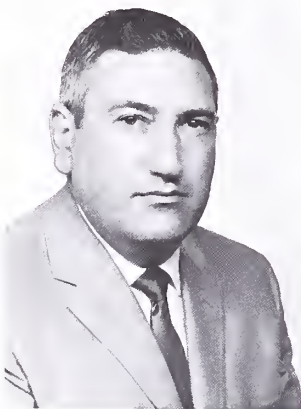
His research on renal regulation of electrolyte metabolism has received international recognition and he has made extensive contributions to knowledge of the electrical properties of the tubule and factors influencing electrolyte transport across biological membranes.

Dr. Giebisch interned at Milwaukee Hospital in 1952 and held a fellowship in physiology at Cornell Medical College in 1953 and 1954. He was appointed to the Cornell medical faculty in 1955.

An American citizen since 1962, Dr. Giebisch became a recipient that year of a Public Health Service Research Career Award. Since 1964 he has been a member of the physiology study section of the National Institutes of Health. He is also section editor for kidney and electrolyte metabolism of *The American Journal of Physiology* and *The Amer-*

*ican Journal of Applied Physiology*. He is a member of several professional societies including the American Physiological Society, the Biophysical Society, and the American Society of Nephrology.

## Dr. Ostfeld Appointed Chairman of Epidemiology and Public Health



Dr. Ostfeld

Dr. Adrian M. Ostfeld, former head of preventive medicine and community health at the University of Illinois College of Medicine, has been appointed chairman of the Department of Epidemiology and Public Health. He has also assumed the Anna M. R. Lauder professorship of epidemiology and public health.

Dr. Ostfeld has done considerable research on sociological and psychological factors in coronary heart disease and stroke. He is an advocate of university participation in community health programs and, in his former position in Chicago, took an active role in planning for the delivery of health care and other services in an impoverished neighborhood of that city.

A native of St. Louis, Dr. Ostfeld received a B.A. degree in 1947 and the M.D. degree cum laude in 1951, both from Washington University in St. Louis.

After serving his internship and residency at Barnes Hospital in St. Louis, Dr. Ostfeld was a Commonwealth Fellow in medicine at New York Hospital. His first academic appointment was in 1955 as instruc-

tor in medicine at Cornell Medical College. The following year he was appointed assistant professor of medicine at the University of Illinois and attending physician at the University's Research and Educational Hospitals.

He was promoted to associate professor of preventive medicine in 1960 and to professor in 1963. In 1966 he was named head of the department.

## Faculty Notes

Dr. Allan V. N. Goodyer, professor of medicine, was installed as president of the Connecticut Heart Association in July. He has been chief of the Cardiac Section of the Department of Medicine at Yale since 1956 and was president of the New Haven Heart Association from 1964 to 1966.

In recognition of his contribution in the field of angiology and for his monograph, *Removal of Cholesterol and Other Lipids from Experimental Animal and Human Atheromatous Arteries by Dilute Hydrogen Peroxide*, Dr. John T. Mallams, professor of clinical radiology, has received the Honor Achievement Award of the Angiology Research Foundation. Dr. Mallams, who came to Yale from the Baylor University Medical Center in Dallas as a visiting professor in July 1967, received his present appointment in January.

Dr. William W. L. Glenn, professor of surgery, has been named to a 15-member Committee on Ethics by the American Heart Association. The Committee, which will study the many ethical, moral, and legal problems which may arise as a result of heart transplantations and other areas of experimental surgery, includes leaders in the fields of medicine, law, religion, education and communications.

Dr. Clarence D. Davis, professor of obstetrics and gynecology, addressed a group of obstetricians and gynecologists from English medical centers at the University of London

in the spring. His subject was erythroblastosis fetalis.

Dr. Alfred S. Evans, professor of epidemiology, was elected secretary-treasurer of the American Epidemiological Society at its annual meeting in Washington this spring.

Dr. Sidney Blatt, associate professor of psychology, presented "An Evaluation of Some Methodological Issues in Research with Projective Techniques" at the Seventh International Congress of Projective Techniques held in London in August.

Dr. Blatt and former colleagues, Drs. Carl Zimet and Joel Allison, collaborated on *The Interpretation of Psychological Tests* (Harper & Row) published this spring. Their book discusses basic assumptions and principles of clinical psychological testing and demonstrates the process of test interpretation and reporting. There is an intensive discussion of test administration and rationales which precedes clinical examples of interpretation.

Dr. Seymour L. Lustman, professor of psychiatry, has been appointed to the editorial board of *Psychoanalytic Study of the Child*, initially published 23 years ago by Dr. Anna Freud, Heinz Hartmann, Ernst Kris and Ruth Eissler. Articles embrace issues of normal and pathological development in the treatment of the child towards his maximal development. The concerns of the editors are scientific with special emphasis on the relationship between general theory building and techniques in actual practice.

Dr. Roy Schafer, clinical professor of psychology, whose *Projective Testing and Psychoanalysis* (International Universities Press) appeared in 1967, has a new volume, *Aspects of Internalization*, published by the same press. Dr. Schafer is well known for his publication of the psychoanalytic interpretation of psychological test results and has contributed directly to the psychoanalytic literature on such topics as empathy, affects, the superego, and

the ego ideal. His newest work expresses his deepening interest in psychoanalytic ego psychology.

Dr. Albert J. Solnit, professor of pediatrics and psychiatry, was invited to Oslo, Sweden, this summer to lecture to practicing pediatricians and the staff of Barnepsykiatrisk Institutt. Dr. Solnit spoke on "Child Analysis and Pediatrics: Collaborative Interests."

#### Commencement 1968

At the 267th Yale commencement exercises in June, 81 candidates received the Doctor of Medicine degree and 41 received the degree of Master of Public Health.

The M.D. degree cum laude, conferred on students whose work shows unusual merit, was awarded to Joseph Francis Andrews, Jr., Daniel Ira Becker, Rutledge Withers

Currie, Mark Gilbert Grand, Frank Edward Lucente, Richard Pence Mills, Bruce Stuart Schoenberg, and Elizabeth Meehan Short.

The following prizes and awards were conferred on members of the graduating class:

The *Borden Undergraduate Research Award in Medicine* to a graduating student whose research has been determined by the School of Medicine to be the most meritorious performed by all similarly eligible persons, originality and thoroughness of research to be of primary consideration: Alan George Fine-silver.

The *Campbell Prize* for the highest rank in the examinations of the course: Daniel Ira Becker.

The *Miriam Kathleen Dasey Award* to that student who by strength of character, personal in-

*The graduation procession of the Yale School of Medicine moves through the Noah Porter Gateway from Cross Campus. Heading the procession is Cross Marshal Mark Grand. Immediately behind him are (left to right) Dean Redlich, Dr. Lippard, and Dean Forbes.*





tegrity, and academic achievement gives promise of fulfilling the ideal of the compassionate physician: Elizabeth Meehan Short.

The Keese Prize to the student who presents the best thesis: Alfred Quinn Scheuer.

The Parker Prize to the student who has shown the best qualifications for a successful practitioner: Mark Gilbert Grand.

The Perkins Scholarship Prize to the student making the best record in scholarship in the basic subjects of the medical and biological sciences: David Allyn Geer.

Other awards to graduates included:

The John F. Fulton Award—Bruce Stuart Schoenberg received the John F. Fulton Award in the History of Medicine for his essay, *J. J. Woodward and his Studies on the Minute Anatomy of Cancerous Tumors, 1873.*

The Fulton Award was established in memory of the late physiologist, medical historian and bibliophile, long a distinguished member of the faculty of the School of Medicine. The award is given annually to the student who submits the best manuscript of a talk presented at a meeting of the Nathan Smith Club during the academic year.

The Alfred A. Richman Essay Contest, sponsored by the American College of Chest Physicians for senior medical students throughout the world: Peter Jokl, 2nd prize.

Prizes to students other than those in the graduating class included:

The Ramsey Memorial Scholarship Prize to a student of unquestioned ability and character after completing his first year in clinical medicine: Timothy Pedley, Gary Farnham, and Robert Marier.

The M. C. Winternitz Prize in Pathology to the second-year student who, in the opinion of the Department of Pathology, has done outstanding work in the course: Anne McBride Curtis and Kenneth Alan Khoury.

**Professors Emeriti**

On June 30, Dr. William J. German, professor of neurosurgery, and Dr. Isidore S. Falk, professor of public health, were appointed to the rank of professor emeritus.

Dr. German who has been connected with the school for nearly 40 years, is widely known for his research and publications on brain tumors and surgery of the nervous system.

Dr. Falk was appointed professor of public health at Yale in 1961. He has made major contributions to the development of group health center organization, health insurance, and teaching and research in medical care.

**Symposium Honors Professor Falk**

“Medical Care: The Current Scene and Prospects for the Future” was the title of a two-day symposium held in May to honor Dr. Isidore S. Falk who retired as professor of public health. Sponsored by the Department of Epidemiology and Public Health, the event brought together leaders in the field of medical care from all parts of this country and Canada, many of whom have worked or studied with Professor Falk. Sessions dealt with health insurance, group health center organization, and teaching and research in medical care—three areas in which Professor Falk has made major contributions.

The main speakers were Dr. Eveline Burns, professor emeritus, Columbia University School of Social Work; James Brindle, President of the Health Insurance Plan of Greater New York; and Solomon J. Axelrod, Professor of Medical Care Organization at the University of Michigan. Participants included Dr. E. M. Cohart, Dr. E. R. Weinerman, John D. Thompson and Donald C. Riedel, all of the Yale Department of Epidemiology and Public Health.

**Dr. Buxton Honored**

Dr. C. Lee Buxton, professor of obstetrics and gynecology, received



Dr. Buxton (right) accepts the Ortho Medal from Dr. Richard J. Blandau, president of the American Fertility Society.

the Ortho Medal Award at the annual meeting of the American Fertility Society in San Francisco last March. The award, which was established in 1960 by the Ortho Research Foundation, is given each year to the individual who, in the opinion of the Fertility Society, has done outstanding service in laboratory or clinical investigation in the field of reproduction.

The award consists of a medal and a \$1,000 honorarium. Dr. Buxton, a past president of the Society, has received international acclaim for his role in the successful fight to revise the birth control laws in the State of Connecticut.

**The Francis Gilman Blake Award**

Dr. Daniel S. Rowe, assistant professor of pediatrics, received the 1968 Francis Gilman Blake Award, given annually to that faculty member of the School of Medicine designated by the senior class as the most outstanding teacher of the medical sciences. This annual award, sponsored by the Beta Zeta chapter of Nu Sigma Nu, honors a former dean and professor of medicine.

**Madeline Stanton Retires**

Madeline E. Stanton, librarian of historical collections at the Yale Medical Library, retired in June. During





An inscribed silver bowl was presented to Miss Stanton at a tea given in her honor in June.

her 35 years of devoted service, the nucleus of the library was formed, the medical library wing was built, and hundreds of students of medical history throughout the world have been assisted in their pursuits.

She has also had an important role in contributing to the history of medicine as assistant editor of the *Journal of the History of Medicine and Allied Sciences*; as co-author with Dr. John F. Fulton and Frederick G. Kilgour of *Yale Medical Library: The Formation and Growth of Its Historical Library*, and as a contributor to professional journals. Her most recent article, "Harvey Cushing, Book Collector" appeared in the *Journal of the American Medical Association* in April 1965.

Miss Stanton was one of those responsible for completing two of John Fulton's posthumous works, the second edition of his *Bibliography of Robert Boyle* and the second edition of his *Selected Readings in the History of Physiology*, as well as for the second edition of Harvey Cushing's *A Bio-Bibliography of Andreas Vesalius*.

Fortunately her association with Yale has not ended, for she will continue to be available as historical consultant to the library. The Madeline Earle Stanton Historical Book Fund, established by Associates of the Yale Medical Library and others, will enable scholars and friends to honor her.

### New Appointments

Dr. William Wilton Douglas, an authority in the field of autonomic physiology and neuropharmacology, has been appointed professor of pharmacology.

Dr. Douglas received his medical education at the University of Glasgow where he was awarded the Ch. B. degree in 1946 and the M.D. degree in 1949. His first academic appointment was instructor in physiology at Aberdeen University in Scotland. In 1950 he was appointed to the staff of the physiology and pharmacology division of the National Institute for Medical Research in London and in 1952 to the department of pharmacology of Columbia University, College of Physicians and Surgeons, as associate. In 1956 he received an appointment as associate professor of pharmacology at Albert Einstein College of Medicine and in 1958 he was promoted to professor of pharmacology.

Dr. Paul Greengard, who also comes to Yale from Albert Einstein College of Medicine, has been appointed professor of pharmacology. He is noted for his work on the peripheral nervous system and the biochemical basis of brain function.

His postgraduate study was in neurophysiology in the department of biophysics at Johns Hopkins University where he received the Ph. D. degree in 1953. He then spent five years in England studying brain metabolism at the University of London and enzyme chemistry at Molteno Institute, Cambridge University, and doing advanced work in biochemistry and pharmacology of the nervous system at the National Institute for Medical Research in London. From 1959 until this year he was associate professor of pharmacology at Albert Einstein.

Dr. Robert Victor Paul Hutter, a distinguished morphologist and diagnostician, has been appointed pro-

A portrait of Dr. Milton J. E. Senn, Sterling Professor of Pediatrics and Psychiatry, was unveiled in April as part of a ceremony dedicating the Milton J. E. Senn School and Clinic at High Meadows, a treatment center for emotionally disturbed children in Homden, Connecticut. Dr. Senn was instrumental in founding High Meadows in 1950 and was the first chairman of its board of trustees. Shown here with Dr. Senn is Dr. Anno Freud who spent a month at Yale last spring participating in a series of seminars jointly sponsored by the Law School and the Child Study Center. The creator of child psychoanalysis, Dr. Freud is director of the Hampstead Child Therapy Clinic in London.



essor of pathology. Noted for his work in cancer pathology, he has been associated for the past 12 years with Memorial Center for Cancer and Allied Diseases in New York and with Sloan-Kettering Institute since 1960.

Dr. Hutter received the M.D. degree from the State University of New York at Syracuse in 1954 and did postgraduate work in pathology at the Yale medical school for the following two years. In 1956 Dr. Hutter joined the Memorial Center for Cancer and Allied Diseases where he was chief resident in pathology in 1957-58. He was attending pathologist when he accepted his present appointment.

He has also been visiting pathologist at James Ewing Hospital in New York and consultant in pathology and cytopathology to the U.S. Public Health Service Hospital on Staten Island and the Mary Swift Tumor Clinic and Registry in Butte, Montana.

A leading pediatric hematologist, Dr. Howard Allen Pearson, has been appointed professor of pediatrics. His particular interest is in the genetic aspects of hemoglobinopathies which will involve his close association with the interdepartmental genetics section of pediatrics and medicine.

Dr. Pearson attended Dartmouth Medical School and received the degree of M.D. from the Harvard Medical School in 1954. From 1958 to 1962 he was assistant chief of the pediatrics service and assistant head of clinical hematology at the U.S. Naval Hospital, National Naval Medical Center, Bethesda. During that period he was also clinical instructor in pediatrics at Georgetown University Medical School. After a year as clinical assistant professor of pediatrics at Howard University School of Medicine, he joined the faculty of the University of Florida College of Medicine as assistant professor of pediatrics. In 1964 he was named associate professor and in

1966 he became a full professor. He has also served as a consultant for the Oak Ridge Institute of Nuclear Studies since 1963.

Dr. John Schulman, Jr., has been appointed associate professor of clinical medicine and is the new director of ambulatory services for the Department of Internal Medicine. He comes to New Haven from Boston where he was a member of the Harvard Medical School faculty and on the staffs of the Boston City and Beth Israel Hospitals. Dr. Schulman received his M.D. degree from the University of Pennsylvania in 1946 and was awarded the M.P.H. degree by Harvard this past spring.

### Promotions

The following members of the medical faculty have been promoted to the rank of professor:

Dr. Arend Bouhuys, professor of medicine and epidemiology, has been a member of the Yale faculty and a fellow of the John B. Pierce Foundation Laboratory since 1964 and is an authority in the field of pulmonary mechanics. A native of the Netherlands, he received his M.D. degree from the University of Utrecht in 1948 and his Ph.D. degree from the University of Amsterdam in 1956. After serving on the faculty at the University of Leiden, Dr. Bouhuys came to the United States in 1962. He was an assistant professor of physiology and medicine at Emory University in Atlanta before coming to Yale. In July 1968 he was appointed chief of the pulmonary section of the Department of Internal Medicine.

Dr. Edmund S. Crelin, professor of anatomy, received his Ph.D. degree from Yale in 1951 and has been a member of the Department of Anatomy since that time. He is known for his significant contributions to the knowledge of bone and cartilage development. He has been responsible for the introduction and successful development of a system of closed circuit television for the

teaching of anatomy at this school. Last year Dr. Crelin received the singular honor of being named the next editor of *Gray's Anatomy*.

Dr. Ira S. Goldenberg, professor of clinical surgery, has been a member of the Yale faculty since 1957 and has done considerable research in cancer therapy. He received his M.D. degree in 1951 from the University of Michigan and served both his internship and his residency at Yale-New Haven Hospital. He was appointed to the faculty as instructor in surgery in 1957. In 1958 he was made assistant professor and was promoted to associate professor in 1964.

Dr. Seymour R. Lipsky, professor of pharmacology and medicine, received his M.D. degree from the State University of New York College of Medicine in Brooklyn in 1949 and came to Yale in 1952 from the University of California. In 1955, after three years of additional post-

*Dr. Somuel Ritvo, clinical professor of psychiatry and a member of the staff of the Child Study Center, was installed as president of the American Psychoanalytical Association at the 55th annual meeting in Boston last spring. Dr. Ritvo is concurrently president of the Western New England Institute for Psychoanalysis, with headquarters in New Haven, and a charter member and past president of the Western New England Psychoanalytic Society.*





graduate work, he was appointed to the faculty in the Department of Internal Medicine. In 1966 he was made associate professor of pharmacology and medicine. Dr. Lipsky, who has gained international recognition for his work in mass spectrometry and gas chromatography, as well as for important contributions in the chemistry of lipids, is director of the Section of Physical Sciences at this school.

Dr. Alexander R. Martin, professor of physiology, is a neurophysiologist who came to Yale from the University of Utah. A Canadian by birth, he received his B.Sc. degree in 1951 and the M.Sc. degree in 1953, both from the University of Manitoba. He received the Ph.D. in 1955 from the University of London and subsequently returned to Canada for two years of postdoctoral research at the Montreal Neurological Institute. He was granted a leave of absence to study as a research fellow at Monash University in Australia in 1964. He joined the Yale faculty as an associate professor in 1966.

Dr. John T. Mallams, professor of clinical radiology, came to Yale in July 1967, as a visiting professor of radiology. He received his M.D. degree from Temple University in 1946. He served on the faculty at Baylor University College of Medicine from 1952 to 1954 and was director of irradiation therapy and of the Sammons Research Division of the Baylor Medical Center in Dallas from 1954 to 1967. He was appointed professor of radiology at the University of Texas Southwestern Medical School in Dallas in 1966. Dr. Mallams' laboratory research is concerned with the structure and function of blood vessels in tumors. He will also be in charge of the clinical investigative program in the Radiotherapy Section of the Department of Radiology.

Dr. Richard P. Spencer, professor of nuclear medicine, received his M.D. degree from the University of Southern California in 1954 and his

Ph.D. degree from Harvard in 1961. Prior to coming to Yale in 1963, he was chief of the Isotopes Division at the Veterans Administration Hospital in Buffalo, New York, and a member of the faculty at the University of Buffalo School of Medicine. His clinical investigations have led to the development of new techniques in diagnosis, including computer techniques which can make use of short-lived isotopes.

The following members of the faculty were promoted to the rank of associate professor, effective July 1: George K. Aghajanian, M.D., psychiatry; Vincent A.-T. Andriole, M.D., medicine; Boris M. Astrachan, M.D., psychiatry; William A. Creasey, D.Phil., pharmacology; Jack R. Henderson, Ph.D., epidemiology; Don C. Higgins, M.D., neurology; Frederick L. Holmes, Ph.D., history of science and medicine; David G. Johns, Ph.D., pharmacology and medicine; Mary Frances Keohane, M.D., clinical radiology; Herbert A. Lubs, M.D., medicine and pediatrics.

Also, F. Patrick McKeegney, M.D., psychiatry and medicine; Eric W. Mood, M.P.H., public health (environmental health); Nea Mae Norton, M.S.S., clinical psychiatry (social work); Rose J. Papac, M.D., medicine; Frank F. Richards, M.D., medicine; Albert Rothenberg, M.D., psychiatry; Daniel S. Rowe, M.D., clinical pediatrics; Robert L. Scheig, M.D., medicine; Michael H. Sheard, M.D., psychiatry; and Claudewell S. Thomas, M.D., psychiatry.

#### **New Books**

**PROBLEMS IN CHILD BEHAVIOR AND DEVELOPMENT** by Milton J. E. Senn, M.D., Sterling Professor of pediatrics and psychiatry and former director, Yale Child Study Center, and Albert J. Solnit, M.D., professor of pediatrics and psychiatry and director, Yale Child Study Center. (Lea & Febiger)

In their introduction to this book, the authors make clear their objectives. Aimed at the general practitioner and the pediatrician, this

compact volume is replete with practical information, together with case histories which serve to illuminate specific problems.

A goal of the book is to assist the pediatrician or general practitioner who has had little or no psychiatric training but who wishes to help his patient and his patient's family in coping with or preventing developmental problems and psychologic disorders. Another stated purpose is to demonstrate how and under what circumstances a doctor might make use of non-medical persons, such as social workers and psychologists, in the best interests of patients.

The authors move along chronologically in their discussion of the stages of life, starting with the parents' attitude concerning their incipient offspring, touching on healthy and pathologic signposts that may appear along the way, and continuing to the period of mid-adolescence. Simple developmental charts, spaced at intervals, note characteristic behavior and deviations from the norm in the case of both parent and child.

The final chapter deals with a group of special problems such as divorce, adoption, suicide, fatal and incurable illness and other traumatic emergency situations. Throughout, the authors' approach is marked by practicality, simplicity and flexibility.

**YOUNG RADICALS: NOTES ON COMMITTED YOUTH** by Kenneth Keniston, D. Phil., associate professor of psychology (Harcourt, Brace & World). On the basis of his highly sensitive and thoughtful first volume, *The Uncommitted*, published in 1965, Dr. Keniston was invited to interview and study in depth 14 leaders working out of the national office of Vietnam Summer, a countrywide campaign composed of young people opposed to the American involvement in Southeast Asia.

Most of those interviewed were in their mid-twenties and from relatively privileged backgrounds. These "young radicals" declined to take ad-



vantage of a variety of respectable careers open to them, preferring instead to work within a movement which provided a sense of social significance and moral and ethical satisfaction.

Through experiences derived from their door-to-door canvassing in slum areas, several basic assumptions evolved. The young people became convinced that many of the pronouncements and policies of the government were made as a result of manipulation by industrial and military interests. They concluded that people should be permitted to participate in the formulation of decisions which would affect their own destinies and that present inequitable institutions such as prejudice

and suffering must be eradicated by greatly expanded poverty programs and by such agencies as would do combat against the general lack of involvement and inertia of man towards his fellowman.

In joining the movement, the young people were sidestepping the middle class aspirations of their parents. Keniston writes: ". . . the wariness of these young radicals toward some of their elders seemed less a rebellious projection of hatred of their fathers than a reflection of a very real difference in outlook and style that separate the generations." **ANATOMY OF THE NEWBORN: AN ATLAS.** By Edmund S. Crelin, Ph.D., professor of anatomy (Lea & Febiger). This volume, *sui generis*

among atlases, contains more than 350 color illustrations relating to the anatomy of the newborn. Professor Crelin was responsible for each dissection and subsequent drawing and, as a consequence, the atlas has remarkable continuity in the size, structure and order of its illustrative material.

By virtue of its oversize pages and its makeup, *Anatomy of the Newborn* is well-suited to the laboratory needs of students and doctors as well as midwives and nurses specializing in the health care of the newborn infant.

**THE STORY OF MY LIFE** by J. Marion Sims, M.D., with a preface by C. Lee Buxton, M.D., professor of obstetrics and gynecology (Da Capo Press, 1968 edition).

Sims, a native of South Carolina, was a skillful surgeon of the 19th Century, responsible for the establishment of the first gynecologic hospital in the United States, Woman's Hospital in New York City, as well as a pioneer in the treatment of vesicovaginal fistulae and other medical and surgical problems common to women. He was equally renowned in this country and abroad for his innovative techniques and for making gynecology and obstetrics respected medical services.

Dr. Sims' autobiography was first published by D. Appleton & Co. in 1889.



Yole President Kingman Brewster, Jr., was the chief speaker at a ceremony for Deon Redlich of the Connecticut Mental Health Center. Colleagues honored Dr. Redlich as the Center's first director (from 1964 to 1967) with the presentation of a bronze bust by sculptor Lewis Iselin.

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#### **Grover Francis Powers, M.D.**

Dr. Grover Francis Powers, a loved and respected member of the faculty of the Yale School of Medicine for 31 years, died at his home in New Haven at the age of 80 on April 19.

He was born in Colfax, Indiana, in 1887, attended Purdue University as an undergraduate and received his M.D. at Johns Hopkins University in 1913. From the time of his graduation until he joined the Yale faculty in 1921 he served as a

member of the house staff and faculty at Johns Hopkins. The remainder of his career until retirement in 1952, except for one year as pediatrician-in-chief at the Henry Ford Hospital, was spent at Yale.

His career is well summarized in the citation read when he was awarded the Yale Medal in 1966 for outstanding service to the University. Referring to his distinguished service as chairman of the Department of Pediatrics for 25 years it said in part, "His stewardship elevated that department to a position of undisputed leadership in this country. Foreign governments, educational institutions, professional associations, and foundations have, through honorary degrees, citations and awards, acknowledged his fame as a physician and a scholar. It is, however, as a teacher and a clinician that he has made his most notable contributions to the medical profession, to this community, and to this university."

Among other honors were honorary degrees of Doctor of Science from Purdue University (1935), Indiana University (1949), the Borden Award of the American Academy of Pediatrics (1947), the John Howland Award of the American Pediatric Society (1953), and the award of the Joseph P. Kennedy Foundation (1963).

He was not a theoretical scientist but rather a clinical investigator. His research dealt primarily with such practical problems of children's health as rickets, infantile diarrhea and the feeding of infants. Nevertheless, he actively encouraged research of a more theoretical nature in the laboratories of his department that gained international recognition.

After his retirement, he devoted much of his time to the Southbury Training School, which he had been instrumental in establishing, and to encouraging research and improved care for mentally retarded children.

Impressive as these honors and achievements in the national scene may have been, Dr. Powers will be remembered by a generation of Yale alumni as the compassionate physician. A man who served on his house staff almost forty years ago said recently, "No one who worked with him failed to be impressed with his deep concern for the individual patient or forgot the lessons he taught by example. He seldom criticized a student or house officer directly but he could make one so ashamed of his negligence or lack of judgment that recollection of the experience lasted for a lifetime. A sick child was not a case on his service but a subject of his personal concern. His interns and residents spent many

long nights patiently watching infants with diphtheritic croup and children passing through the crises of lobar pneumonia, before the days of antibiotics, not because they were all naturally endowed with the same compassion but because they could expect a visit from the professor during the small hours of the morning. Above all, he was a good doctor."

V.W.L.

Dr. Powers





# Alumni News

## 1913

A card from RALPH E. TAYLOR expressed his regret at not being able to come to the June Alumni Day Program and at the fact that after 50 years of practice in internal medicine and surgery, he had retired.

## 1918

A letter from HOWARD P. SAWYER indicates that his grandson and namesake is enrolled in the entering class of Yale College for 1968.

## 1922

GEORGE T. PACK was the recipient of the 1968 Distinguished Service Award by the American Society of Abdominal Surgeons in recognition of his accomplishments as surgeon, researcher, and medical educator.

## 1923

WILLIAM COHEN, class secretary, writes: "Six members of the class attended our 45th reunion: FRANK G. AMATRUDA, WILLIAM COHEN, JOSEPH EPSTEIN, GEORGE H. GILDERSLEFVE, SAMUEL KARELITZ and JACOB MELLION. While this is a relatively small number, it is exactly one-third of the present survivors of our class. Jack Mellion is the only one of our returning group who is retired. Far from being a bored senior citizen, his many hobbies, particularly horticulture, keep him happily occupied.

"The speakers' program in the afternoon was most interesting and provocative. During the social hour which followed, we renewed acquaintances with many alumni from other classes.

"Our class dinner was a very informal affair in the charming home of our gracious hosts, Gertrude and Frank Amatruda. We were surprised and delighted to find that Dr. and Mrs. MAXWELL LEAR ('11) had been invited to join us. Max was an instructor in surgery during our senior year and his close ties with our class have earned for him our warm and affectionate regard. The evening passed quickly with stimulating discussions and reminiscences.

"To our classmates who did not attend our reunion, we send our sincere greetings and hope we will have an opportunity to meet in the future."

## 1928

EDWARD L. HOWES reports favorably on the 40th reunion of the class with 14 out of 39 members attending. Present at dinner at The Graduate Club were MAX ALPERT, BERNARD BRODY, JOHN BURKE, BERT COMEAU, DON DIAL, UNO HELGESSON, ED HOWES, SHELDON JACOBSON, REG JOHNSON, FRED KOJIS, ROBERT RUBENSTEIN, JOHN RUSSEL, ALVIN SCHAYE, LEW SCHEUER and guests, Professor and Mrs. Ira Hiscock. Dr. John R. Paul sent greetings and regrets.

MARY MICHAL and GEORGE WILSON who had planned to attend were unable to join the group at the last moment. Long distance record was set by Sheldon Jacobson of Vancouver, Washington. Lew Scheuer's son, Alfred, graduated from the Yale medical school in the same week. Dr. Howes, the class secretary wrote: "Letters from some who could not attend were read. DAN MULVIHILL is retiring as associate professor of clinical surgery at N.Y.U. and becomes assistant director of the American College of Surgeons.



Dr. Michal

HARRY OARD is with the Health Department of St. Petersburg, Florida. GISSLER, MICHALOVER and EGLI give permanent addresses in Florida suggesting retirement. REYNER writes from the Professional Building in Detroit. Ed Howes, your scribe, with his son, Dr. Ed Jr., have just finished their book on healing." MARY B. HARRIS MICHAL writes: "I am a staff physician at Broughton Hospital (the State Psychiatric Hospital) at Morganton, North Carolina."

Members of the Class of '28 and their wives at the 40th reunion





**1929**

LOUIS LICHTENSTEIN, in Japan as guest of the Japan Orthopedic Association, lectured at universities in Okayama, Kyoto, Tokyo, and Sendai in April.



*This portrait of Dr. J. Roswell Gallagher, '30, was unveiled in May at the Countway Library of Harvard. The pointing is the work of Dwight Shepler and was commissioned by friends and colleagues of Dr. Gallagher, founder and former chief of the Adolescent Unit of The Children's Hospital Medical Center in Boston. He is now clinical professor of pediatrics at Yale and was recently appointed president of the newly organized Society for Adolescent Medicine.*

**1932**

MYRON E. WEGMAN, dean of the University of Michigan's School of Public Health, was appointed to a 14-member steering committee for Project Head Start by Sargent Shriver, then director of the Office of Economic Opportunity.

**1933**

LEE E. FARR has departed from Houston to join the California State Health Department. His new address is State Department of Health, 2151 Berkeley Way, Berkeley, California 94704.

**1934**

Development of the Regional Medical Program for the tri-state area covering New Hampshire, Massachusetts, and Rhode Island will be under the supervision of LEONA BAUMGARTNER. Dr. Baumgartner received the honorary degree of Doctor of Science at the commencement

of the New York Medical College in June for her leadership in the fields of public health and preventive medicine.

GILBERT E. MOORE is currently medical director for the Hughes Aircraft Company in Culver City, California.

**1935**

ASHBEL C. WILLIAMS has been made a councilor of the Lahey Clinic Foundation Alumni Association. Councilors from all over the world, all former Lahey Clinic residents or fellows, will meet this fall in Boston to attend professional seminars dealing with the newest developments in medical care and treatment.

**1938**

The 20th reunion of the class of 1938 was held at The Graduate Club on June 8. Present were ROY N. BARNETT, ARTHUR S. REYNOLDS, CHARLES J. PETRILLO, LESTER J. WALLMAN, LOUIS G. WELT, AGNES V. BARTLETT and JOHN DILLON, plus a number of wives. Dr. Petrillo, dinner chairman, reported: "Dr. Bartlett, class secretary, conducted a very short meeting after the dinner and also presented a most interesting account together with excellent color slides of her recent trip to Japan. The class was saddened to hear of the death of two of our members since the previous reunion five years ago. Those who had died were ED ROSSETT and ART SULLIVAN. We also learned that HENRY L. CARIDEO's wife had died recently.

"It is planned to have informal reunions more frequently than the routine five-year meetings."

**1939**

JOHN P. FERGUSON reports that his son, John, who graduated from Yale College in 1965, is winding up his junior year in medicine at St. Louis University School of Medicine.

JOHN H. WENTWORTH, after 20 years of radiologic practice in New York and Long Island, has moved to California and is with the Kaiser-Permanente Medical Group.

**1942**

VINCENT J. COLLINS, director of clinical research in anesthesiology at the Hektoen Institute for Medical

Research in Chicago and director of anesthesiology at Cook County Hospital, was a chief panelist at a conference sponsored by the AMA Committee on Medicine and Religion. Dr. Collins presented his "score of dying" on a program entitled "The Limits of Medical Responsibility in the Prolongation of Life."

MAURICE TULIN has left private practice to become director of ambulatory services and attending physician at the North Shore Hospital in Manhasset, Long Island.

**1943 December**

HUNTER H. COMLY has been an associate professor in the department of child psychiatry at the University of Iowa Medical School since 1967.

**1943 March**

The class of March 1943 held its 25th reunion in June. Attending the dinner at The Graduate Club were HILLIARD SPITZ, LEONARD KEMLER, GERARD FOUNTAIN, ROCKO FASANELLA, JON LANMAN, HENRY MARKLEY, FRED WALDRON, JOHN WEBER, MORRIS WESSEL, RALPH ALLEY, LYCURGUS DAVEY, DOROTHEA PECK DWYER and BOB WYATT. Dr. Franz Goldman, formerly a member of the Department of Public Health at Yale, and now professor emeritus of medical care at the Harvard School of Public Health, discussed "Current Trends in the Financing of Medical Care in the United States." A lively discussion followed his presentation.

JOHN BROBECK, chairman of the physiology department at the University of Pennsylvania School of Medicine, wrote, sending his regrets and wishing he could have joined the group in New Haven. One of his four children was graduating from Wheaton College on that day.

ROCKO FASANELLA participated in a discussion on anterior segment surgery at the first South African International Ophthalmological Meeting in Johannesburg in September.

SOPHIE C. TRENT was a delegate to the Medical Women's International Association which met in Vienna in June, explaining her absence from the reunion. Dr. Trent, who practices internal medicine in Meriden, Connecticut, has had considerable ex-



Dr. Trent

perience in the area of tropical medicine, having served a residency at the School of Tropical Medicine in San Juan, as chief of the medical department at Municipal Hospital, Fajardo, Puerto Rico, and as author of several articles which have contributed to the field. In addition to her medical practice, she is the second woman in the history of Meriden to serve on the Board of Apportionment and Taxation, the only woman in a group of five recently named to the Board of Trustees of Brown University. Leisure time credits include a book of poetry, *Birds of Passage*, and several awards for her painting.

#### 1945

EDWARD M. DANIELS is now a training analyst and recently became president-elect of the Boston Psychoanalytic Society and Institute. SCOTT HEATH reports that he spent five months in the U.S.S.R. in 1967, visiting eye facilities under the terms of the exchange program between the U.S. Public Health Service and the Soviet Ministry of Health. He rounded off his travels with a vacation on Lake Baikal, traveling by trans-Siberian railroad to Irkutsk.

#### 1946

AARON T. BECK, now associate professor of psychiatry at the University of Pennsylvania and chief of section, Department of Psychiatry, at the Philadelphia General Hospital, is the author of *Depression: Clinical, Experimental, and Theoretical Aspects*. Published by Hoeber Medical Division of Harper & Row, the book presents a broad survey of the studies made on depression and includes an analysis of investigations concerning causes, symptoms, diagnosis, and treatment.

CHARLES S. JUDD, JR. was the recipient of the Robins Community Service Award at the 112th annual banquet of the Hawaii Medical Asso-

ciation. Dr. Judd, who is now living in Samoa, made a brief stop in Honolulu on his way to New Haven to attend his 25th reunion at Yale College. PHILLIPS ROTH writes: "I have been called to active duty in the reserve call up and am now psychiatrist at McChord Air Force Base, Tacoma, Washington."

R. BRUCE THAYER, JR. has been appointed medical director of Connecticut Medical Service. He has been in the general practice of medicine in Enfield, Connecticut, since 1949 and has served for three years as a member of the CMS board of trustees and for eight years as a member of its Medical Advisory Committee.

#### 1948

Cocktails and a steak dinner at the New Haven Medical Association building on Whitney Avenue provided the setting for the 20th reunion of the class of 1948. In attendance were: RUSS BARNETT, ART COLEMAN, JULIE FRIEDEN, PAUL GOLDSTEIN, PAUL KOEHLER, BOB LEMPKE, JOHN MORRISON, GABE SAVIANO with their wives and JOCK BISHOP without his. Faculty members present, together with their wives included: Drs. William U. Gardner, Harry S. M. Greene, and Gerald Klatskin as well as Dr. Abraham White, formerly at Yale, now on the faculty of the Albert Einstein College of Medicine. Dinner chairman Dr. Koehler distributed reunion booklets prepared from questionnaires completed by classmates. GRIFFITH B. HEROLD was elected chairman of the Plastic Surgery Research Council for 1968-69.

#### 1949

WILLIAM H. SEWELL writes: "I am very encouraged with my results of my triple pedicle operation for coronary disease."

#### 1952

JOSEPH GARLAND is practicing psychiatry full time in Toledo, Ohio, specializing in the treatment of adults and adolescents.

#### 1953

Information from ALLEN CHETRICK, dinner chairman: "The class of 1953 held its 15th reunion on June 8, 1968. Surgical and medical grand rounds in the morning reminded us

that the high caliber of these sessions remains unchanged.

"An appetizing buffet luncheon afforded an opportunity for lively conversation on current classmate activities. CLAUDE BLOCH and spouse were at this luncheon but a 'radiological emergency' in N.Y.C. curtailed his day in New Haven. The afternoon speakers dealt with a variety of cogent issues. These included the current Yale Medical School Alumni drive and the changing medical school curriculum at Yale with closer community ties and health delivery plans as well as a prognostication of the future community hospital in the U.S.A. and the drug problem in our country. One voice in the wilderness drew warm applause when he extolled the virtues of the rare medical school of the past—Yale included — which dedicated itself primarily to teaching and research. JOSE RAMIREZ-RIVERA remained through this session but his talents were subsequently needed in Baltimore. We are told BERT KUSSEROW was seen wandering around the premises also.

"A cocktail hour(s) at the Harkness Dormitory soon erased the sober cares of the day.

"The highlight of our reunion was a truly sumptuous dinner at the Tivoli. Those attending included: HAL BORNSTEIN, the JIM DUNNS, the IRV GOLDBERGS, the AL KEROACKs, the FRED LANES, the BOB MELNICKs, the BILL WILSONs, the JIM YOUNGs, and the AL CHETRICKs. Hopefully the 20th reunion will bring back more of our great class."

IRVING H. GOLDBERG has received an appointment as professor of medicine at the Harvard Medical School and chairman of the division of medical sciences of the faculty of arts and sciences of Harvard University. He joined the medical school and the staff of Beth Israel Hospital in 1964.

Prior to his association with Harvard, Dr. Goldberg was awarded the Ph.D. degree from The Rockefeller University in New York City and was appointed to the faculty of medicine at the University of Chicago. He is an authority on the molecular mechanism of agents affecting nucleic acid in protein synthesis.





Dr. Goldberg

**1954**

LT. COL. ROBERT J. T. JOY has received a new assignment as chief, Medical Research Branch, Medical Research and Development Command, Office of the Surgeon General of the Army. During the past year, Col. Joy received his wings as a flight surgeon and completed a staff college course at the Armed Forces Staff College in Norfolk, Virginia.

EVA HENRIKSEN MACLEAN has been promoted to associate professor of surgery (anesthesiology) at the University of Southern California. The MacLeans have two small girls, Elizabeth and Mary Ann.



Dr. Joy

**1956**

ROSALIE BURNS, assistant professor of neurology at the Woman's Medical College of Pennsylvania, has been elected to Delta Chapter of Alpha Omega Alpha, national medical honor society. Dr. Burns is married to Dr. Herbert Goldberg, a neuro-radiologist. The Goldbergs and their two children live at Park Towne Place, Philadelphia.

**1957**

HAROLD J. FALLON, JR. and JOSEPH S. PAGANO have been selected by the National Institutes of Health for Research Career Development Awards. Dr. Fallon joined the faculty of the University of North Carolina School of Medicine in 1963 and is associate professor of medicine and bacteriology. Dr. Pagano came to Chapel Hill in 1965 and is also associate professor of medicine and bacteriology.

**1959**

MALCOLM R. ING has recently opened an office in Hawaii for the practice of ophthalmology. His address is Ala Moana Building, 1441 Kapiolani Boulevard, Honolulu, Hawaii 96814.

**1961**

ALBERT A. BECHTOLDT, JR., who was an instructor in anesthesiology at the University of North Carolina School of Medicine before completing his military service, has now returned to that school. He served as an anesthesiologist with the U.S. Army Medical Corps in the two-year interim.

**1963**

WILLIAM T. FRIEDEWALD, dinner chairman, reported on the class's reunion: "The five year reunion of our class was amazingly pleasant. The luncheon and cocktail party at familiar Edw. S. Harkness Hall were enjoyable, and the private dinner at the Weather Vane Restaurant was a great success.

"In attendance were DUDLEY DANOFF, in a maroon XKE up from Columbia and a urology residency; ANDREW EDIN, from Minneapolis, the greatest distance traveled, soon to be a chief resident in medicine and then into practice; WILLIAM FRIEDEWALD, completing a medical residency at Yale and then to Stanford for a year of biostatistics before returning to N.I.H.; DAVE FULMER, up from his medical practice in Princeton, New Jersey; ALEXANDER GAUDIO, continuing his ophthalmology residency in Boston; GEORGE HOLSTEN, in the midst of a pathology residency at the West Haven V.A. Hospital; HAROLD KAPLAN, completing a medical residency at Yale and then to remain as

a G.I. fellow; CRAIG LLEWELLYN, completing a Master of Public Health in Boston while in the Service; JOHN MAHONEY, completing a psychiatry residency at Yale; SHELDON PINNELL, up from N.I.H. and about to begin a dermatology residency in Boston; JAY POMERANTZ and ROBERT SHAPIRO, both continuing a psychiatry residency in Boston; LEE TALNER, finishing a radiology residency at Yale, about to depart to England for a year; and JEROME WINER, continuing his psychiatry residency. All look forward to the tenth!"

**1964**

JOSEPH F. J. CURI and his wife, Susannah, have announced the birth of their second daughter on August 14. Dr. Curi is now chief of pediatrics at Vandenberg Air Force Base in California. He expects to begin a fellowship in adolescent medicine at the Children's Hospital Medical Center in Boston next year.

**1965**

PHYLLIS HURWITZ worked for two months last spring at the Rogoff Research Institute, Beilinson Hospital, Petah-Tikua, Israel, on a project concerning phospholipase and hemolysis. She has recently begun work at Mt. Sinai Hospital in New York City with the aid of a fellowship in hematology.

**1966**

From DAVID C. LAW: "I am continuing my residency training in medicine as a senior assistant resident on the Georgetown Service at D.C. General Hospital; the experience has been superb. I would be most happy to speak with any prospective intern candidate from Yale who comes to D.C. General."

ELI H. NEWBERGER, Peace Corps physician, writes from Upper Volta, Africa: "I represented the Peace Corps at the WHO/AID-sponsored conference on river blindness control in Tunis during the first week of July and expect to leave tomorrow for a regional West African meeting of the Health Ministers of the Entente Counsel States—Ivory Coast, Upper Volta, Togo, Dahomey, and Niger—where the technical and administrative means for combatting the principal endemic infectious ill-



nèsses will be discussed. I would gladly describe in detail the rich experience of practicing medicine in Ouagadougou, supporting the Volunteers' work in health and participating in the planning for onchocerciasis and tuberculosis control . . ."

**1967**  
GARY BURGET is presently a resident in the new Columbia University surgical program at Harlem Hospital. He reports that he is on call every other night and when on call, operates all night.

STEPHEN W. MILLER, formerly of Lancaster, Ohio, has been appointed to the commissioned corps of the U.S. Public Health Service. He has been assigned to the heart disease and stroke control program at the Applied Physiology Laboratory in Washington, D.C. He will be active in administering and evaluating various exercise stress testing methods and associated heart measurements to determine those best suited for mass screening procedures. Dr. Miller served his internship at the New England Medical Center in Boston, Massachusetts.

**PUBLIC HEALTH**

**1939**  
BEN D. KININGHAM is chairman of the promotion sub-committee of the Illinois Citizen's Committee. He is concentrating his efforts on getting out the vote on a billion dollar bond issue for air and water pollution control.

**1942**  
CLAIRE BURTON REINHARDT has been appointed an associate consultant in health occupations education, Connecticut State Department of Education. She was formerly public health program coordinator in the State Department of Health. Dr. Reinhardt will work with local, regional, and state groups to develop new programs and improve existing programs of health education. A focal point of her activities will be the development of health courses in community colleges and secondary schools.

**1946**  
NICHOLAS W. FENNEY was re-elected this spring as secretary of the interprofessional relations commit-

tee of the Connecticut State Medical Society-Connecticut Pharmaceutical Association.

**1947**  
JOANN STEINER LEWIS has moved from Hastings, Nebraska, to New Wilmington, Pennsylvania. Her husband, Dr. Philip A. Lewis, was recently appointed dean of the College of Westminster and professor of chemistry.

**1949**  
HILDA H. KROEGER has been appointed professor and head, Medical and Hospital Administration Division, Graduate School of Public Health, University of Pittsburgh, Pennsylvania.

**1952**  
RALPH T. PALMER is active in recruiting missionaries to serve overseas. The several cooperating mission boards have need for physicians, nurses, public health officers, and other medical personnel. He particularly cited the need for a radiologist for Central India when he wrote in May. His address is: United Christian Missionary Society, 222 S. Downey Avenue, Indianapolis, Indiana 46207.

**1953**  
HORACE A. BROWN of Simsbury, Connecticut, was named American Heart Association regional director for the New England area. Previously, he was a general consultant for the New England Heart Associations of the American Heart Association.

GRACE T. JANSEN switched from public health to curative medicine. She writes that she could not attend the Alumni Day program because she is currently a board-certified anesthesiologist in Anchorage, Alaska.

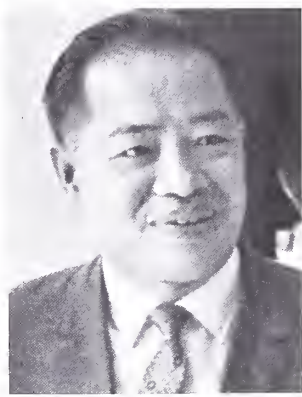
**1954**  
ELIZABETH CORNFIELD is the director of public health for the city of Bristol, Connecticut.

MILTON W. HAMILT, formerly of Evanston, Illinois, has been appointed executive vice-president of Lenox Hill Hospital in New York City.

ELISA H. W. WYNMALEN is on the staff of the Institute of Social Medicine, University of Leiden in the Netherlands.

**1955**  
NGUYEN VAN THO was appointed Minister of Culture, Education and Youth for the Republic of Vietnam. This is his third appointment to this post. In 1967 his wife was elected a member of the Senate of the Republic of Vietnam. In this connection, she made a good will tour of the United States this spring and was a guest of the Senate.

**1958**  
WILLIAM H. KEELER, formerly Commissioner of Health of Roanoke, Virginia, has been appointed regional health officer for the North-western Region of Illinois. His headquarters will be in Aurora.



Dr. Phong

NGUYEN TUAN PHONG happened to be in Washington on business in early June and was granted permission to attend reunion proceedings here. After getting his M.P.H. in New Haven, he received his M.D. degree in Vietnam and is now the head of training for health personnel in South Vietnam.

**1960**  
KATHARINE A. KEPPEL is a member of the faculty of the School of Nursing at the University of San Francisco. Miss Keppel instructs in the field of public health nursing.

**1961**  
Major GORDON R. BEEM is now assigned to the Air Force Surgeon General's Office as a staff plans officer. His wife and family, after 2 1/2 years in northern Maine, are enjoying life in the District of Columbia.

**1965**  
YONG C. KIM has been appointed research associate for the Canadian

Association for Retarded Children. He has moved from Regina, Saskatchewan to Ontario. In his new post, Mr. Kim will be responsible for the evaluation of national programs for mentally retarded children and will serve as consultant to various research programs dealing with mentally retarded children.

TAKEO NAKAJIMA has been assigned to the Japanese Embassy in the United States as the Atomic Energy Attaché and represents the Japanese Atomic Energy Commission. He and his wife will be living in Washington, D.C. for the next four years.

**1967**  
DENNIS MAGID of Burlingame, California, presented his thesis at the Third Joint Meeting of Commissioned Officers Association and the Clinical Society of the Public Health Service, held in San Francisco this spring.

#### HOUSE STAFF

**1924**  
SAMUEL A. ANDERSON, JR. sent along a brief synopsis of his activities since leaving Yale. It included a period at Boston Children's Hospital, 18 months at St. Louis Children's Hospital, and three months as chief resident in pediatrics at Philadelphia Children's Hospital. The succeeding years were devoted to the practice of pediatrics and a little teaching at the University of Vermont College of Medicine. He is now in retirement in Richmond, Virginia, and spends winters in Captiva, Florida.

**1928**  
FREDERICK T. SCHNATZ is a clinical professor of medicine at the State University of New York in Buffalo. On his retirement, which is mandatory in 1½ years, he plans to go into private practice.

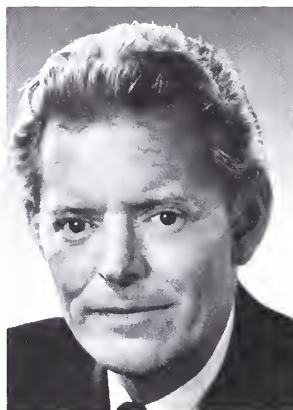
**1942**  
ARTHUR L. CHANDLER is now psychiatric director of the Psychiatric Research Institute of Beverly Hills, California.

**1943**  
EARL J. SIMBURG has been elected secretary to the San Francisco Psychoanalytic Society and Institute and also to the council of the North-

ern California Psychiatric Society. He has likewise received an appointment to the Mental Health Committee of the California Medical Association. His address is 86 Tamalpais Road, Berkeley, California 94708.

**1945**  
CHARLES M. PLOTZ is professor of medicine and director of continuing education at the State University of New York, Downstate Medical Center in Brooklyn.

**1946**  
JOHN P. MCGOVERN of Houston, Texas, was installed as president of the American College of Allergists at their spring meeting in Denver.



Dr. McGovern

**1949**  
ARNOLD S. RELMAN, who has been professor of medicine at Boston University School of Medicine, has assumed the post of chairman at the University of Pennsylvania School of Medicine. He is known for his extensive work on the mechanisms which regulate acid-base balance in body fluids.

**1954**  
DAVID HUBBELL of St. Petersburg, is president of the American Cancer Society, Florida Division.

RUTH KERR JAKOBY writes that, in addition to her private practice in neurosurgery in the Maryland suburbs adjacent to Washington, she has an appointment as assistant clinical professor of neurosurgery at George Washington University.

**1956**  
RICHARD T. CUSHING, who was a member of the house staff from 1953-1956, has since received an

M.S. degree in internal medicine from the University of Michigan and was certified last year in the field of pediatric allergy. His address is 4959 Excelsior Boulevard, Minneapolis, Minnesota.

**1959**  
AMILCAR VIANNA, his wife and their three children cheerfully extend an invitation to Yale friends to visit with them in Rio de Janeiro, Brazil, where he is an assistant professor of dentistry at the Dental School.

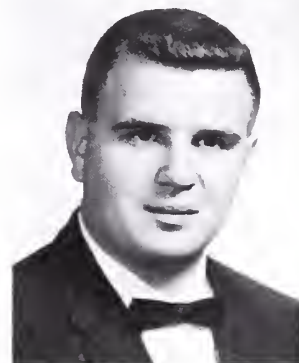
**1961**  
PRESTON H. BRADSHAW has been in the private practice of urology for the past year. His address in 929 North Brook Drive, Raleigh, North Carolina.

**1962**  
M. MICHAEL EISENBERG is now professor of surgery at the University of Minnesota and chief of surgery at Mt. Sinai Hospital in Minneapolis.

**1963**  
JULIAN H. CAPPS has recently moved to Chapel Hill and is assistant professor of radiology at the University of North Carolina School of Medicine.

**1964**  
DONALD GRAYSON, who interned at Yale-New Haven Hospital in 1963-64, is presently lieutenant commander attached to the Philadelphia Naval Hospital as staff psychiatrist.

JOHN W. KREIDER has been promoted to assistant professor of pathology at The Milton S. Hershey Medical Center of the Pennsylvania State University.



Dr. Kreider

ROBERT H. PETER, after two years in the Navy as lieutenant commander at the Cardiac Catheter Laboratory of the Portsmouth Naval Hospital in Virginia, is now an associate in medicine at Duke University Medical Center in the division of cardiology.

**1966**

ANTHONY MINNEFOR has left the United States Air Force to begin a fellowship in infectious diseases at the Department of Pediatrics at Johns Hopkins.

GORDON K. PHILLIPS is practicing with the Great Falls Clinic in Great Falls, Montana.

**1967**

LEONARD GOLD has an appointment as clinical anesthesiologist at Atlantic City Hospital in New Jersey.

JEAN-E. MORIN was appointed lecturer in surgery, McGill University and assistant surgeon at the Royal Victoria Hospital a few months ago.

**Picture Credits** Robert Perron: cover, pp. 2, 15, 16, 18, 19; Prescott Clement: pp. 6, 7, 33; Yale University Art Gallery: p. 8; A. Burton Street: p. 20; Charles Alburtus, Yale News Bureau: pp. 21, 22, 24, 27; Ann M. Martens: p. 24 upper; Ned Thomas: p. 24 lower; Jay Storm: p. 25; New Haven Register: p. 28; Dan Bernstein: p. 30





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# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / WINTER 1969



COVER

*The Hill, an inner-city neighborhood adjacent to the Yale-New Haven Medical Center, is the home of approximately 25,000 people, most of whom are poor. The relationship of the School of Medicine to the community is discussed in several articles in this issue.*

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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"... a new definition of faculty is needed."



*The Hill Health Education Council, organized by students in the School of Public Health, sponsors weekly meetings at which the lecturers and panelists are community leaders and residents, landlords, politicians, municipal employees, and others, in addition to Yale faculty members. The purpose of the council is to bring to public health students the viewpoint of the consumer of health services.*



# The Community-University Interface

by Adrian M. Ostfeld, M.D.

In this article I am a spokesman only for myself. And I claim no originality. What is set down here I have learned from black leaders, students, faculty members, and ghetto dwellers.

There are great pressures on universities for change — especially change in professional education. These pressures originate in the black ghettos and in the white children of affluence.

For some, a part of the American dream has always been that any white man is better than any black man. The consequences of this implicit but powerful belief led first to slavery, then to the existence of a black peasant class trapped in rural poverty and more recently in urban isolation. Ghetto living and poverty have done many things to the black man. The evil things need no repetition here. But the circumstances of their lives have also had effects that uniquely equip black people to understand and heal the social, educational, and moral illnesses of our country. For example, it is impossible to hide misfortune or mischief in the ghetto. One becomes ruthlessly honest. Frozen out of an adequate education and kept away from science and technology, one comes to emphasize human values, righteous conduct, and concern with the quality of life. There develops an insistence on human needs rather than the needs of institutions or disciplines, and a determination that science must serve the humane needs of society rather than any master who can pay for its services.

The life experience of the new generation of white students has been the opposite of American blacks. Their material needs have been generously met and their post-Sputnik education has been vastly improved over that of their parents. They have learned a great deal about the very science and technology that has been kept from the Negro. And yet many of today's students have come to share with the black man his beliefs that human needs must transcend those of or-

ganizations and institutions and that science must serve the humane needs of society. It is of crucial importance that these two groups, the affluent, well-educated white student and the poor, educationally deprived Negro, are both saying the same thing about education and science — that both must serve the needs of people, both must improve the quality of life, and both must serve to heal the grievous social ills of our country.

I now become specific in this exposition. I believe that what the modern student and the black leadership are telling us is that they want the traditional professional curriculum replaced by a new, three-layered curriculum. Although the content of these three layers must be separated for purposes of discussion, it is not necessary that the second layer begin only after the first has been completed. Initially the students want a learning experience of as brief duration as possible that will provide them with the basic elements of the profession. This means methods, concepts, vocabulary, the development of relevant skills, and the facility to think critically. The second layer is characterized by the project-oriented approach. Here the student, singly or in groups, learns to identify and describe a problem and to prepare recommendations for its solution. In the first two layers, students and faculty maintain their traditional roles, and the techniques of instruction are the usual ones. Virtually every kind of professional education recognizes and provides these layers.

The contemporary student and black leadership, however, insist on a third layer. They want to take part in solving the problem they have described. The solution may require social action, exerting pressure in the public or private sector, or working with community organizations that are trying to change laws, institutions, or attitudes. In the third layer the student and faculty roles change. The students organize into groups, leave the classroom, and go where the problem is. The faculty now become resource persons whom the students seek out as they see fit. But a new definition of faculty is needed. The kind of teacher who can help the students to solve problems in the community is usually not the kind who can help student learning in the first two layers. Those who can help the student in solving community problems may be tenants, welfare recipients, police, leaders of racial and ethnic organizations, or political figures. These are the new faculty because they have the knowledge the student needs in the third layer.

If one believes, as I do, that black organizations and the new student are correct about contemporary education and society, one can advocate at least three efforts.



*Dr. Ostfeld is Anna M. R. Lauder Professor and chairman of the Department of Epidemiology and Public Health.*

First, we need more — many more — black students and black faculty, not to redress grievances, but because it is in the best interest of our universities to have them. Their life experience has given them an understanding of our country and its problems that uniquely enables them, first as students and later as faculty, to reshape the methods and goals of education and of our country. Second, we must move as quickly as possible to the concept of the three-layered curriculum. Models of this sort are already in action at Yale and elsewhere. In one model, a group of faculty members makes known to a community that it is interested in working on the community's problems at the latter's invitation. The community may be a hospital, a housing project, an organization, a city, or even a state, and it may be many other things as well. The community brings problems to the faculty members. The latter select those whose needs they are most qualified to help meet and whose investigation and solution will provide the best learning experience for their students. The students then go into the community and work with its representatives to identify and characterize problems utilizing their own basic education, their humanness, and faculty resources. They then propose solutions and work with the community and with their faculty members to implement the solutions. An additional but similar educational model has also developed. Students and faculty, interested in improving their educational experience and in community service, organize and make their purpose known to a community. The community invites the group to examine certain problems and propose solutions. The student-faculty group characterizes the community problem and then proposes solutions. They work with the community leaders to solve the problem. The solution may require new funds, social action, political confrontation, legislation, or education.

Third, we need a new kind of setting for education in the health professions. One of the glories of America is its agriculture. This is so because American higher education made available to the American farmer the methods of science and the minds of its faculty and students. I believe that professional schools have the same kind of obligations to the American student and deliverer of health services as the agricultural colleges do to the American farmer. But we have no setting in which to do the research, the teaching, and the consultative service required by such a relationship. The agricultural colleges had the model farm. The health professions require a new kind of institution, one that will supplement the teaching hospital. The new structure

is gradually being articulated at Yale. It will consist of several out-patient settings offering continuous, comprehensive care to well-defined groups of people. But health needs cannot be separated from social, economic and educational needs. Eventually, to meet the needs of people and of the health-professions colleges, settings will be required in which the health, social, economic and educational needs of people can all be served under the same roof. The health-professions schools in such settings will have opportunities for research, for teaching, and for service hardly dreamed of at present.

The model farms of the agricultural colleges did not raise crops for market. They utilized only enough space to act as consultants for their consumers and for their own research and teaching requirements. The equivalent is all that is necessary for health-professions schools.

I close with an expression of caution. From 1945 to 1965 it was widely believed in American society that the scientist working in his own laboratory, at his own pace, and on problems of his own choice would solve the health needs of American society. We know now that this is not so, and we are at the beginning of a period of pragmatism, relevance, and service. However, there will come a time in fifteen or twenty years when it will become apparent that service, community action, and laws are also unable to solve all of our health problems. More basic knowledge will be essential. The cry will then be "back to the laboratory." An institution that allows its laboratories to atrophy and its basic scientists to languish will be in sad shape indeed when the new cycle begins.



## Expanding Community Health Care

A primary challenge to medical schools in 1969 is to find and teach better ways of delivering health care. Yale, because of its unique position as an integral part of a great, urban university at the hub of regional health care services, has both a vast responsibility and an unlimited opportunity.

As the year begins, this medical school is involved in a number of innovative programs of community health care. In each case Yale is a participant with others in attempting to treat the problem of health care delivery in terms of its etiology rather than its symptoms. The school's particular role is to study and demonstrate for teaching purposes effective methods of delivering the best possible health services, rather than to assume responsibility for the continuing operation of these services.

The Hill Health Center, which begins operation this winter, is planned to provide comprehensive health care, including preventive services, to the 8,000 people under the age of 21 who live in the Hill neighborhood of New Haven. Supported by funds from the federal government and other sources, the center operates under the direction of the school's Department of Pediatrics, with guidance from a board of citizens that includes residents of the Hill and members of health professions. The center is entirely community-based, occupying a building in the neighborhood it serves and employing and training neighborhood residents in health care jobs. It is anticipated that direction of the program will eventually be transferred to a board representing the Hill residents.

A program of community mental health care in which the Department of Psychiatry is engaged has been in operation for the past two and a half years. The Hill-West Haven Division of the Connecticut Mental Health Center provides comprehensive mental health care to the residents of the Hill and the community of West Haven. Established services include outpatient, day hospital, and emergency inpatient treatment facilities, as well as the prevention of mental illness through planned programs, identification of mental illness in its early stages, and rehabilitation of the mentally ill. The division's services in the Hill are being coordinated with those of the Hill Health Center in order to provide residents with systematic and sustained health care.

Two other programs in the formative stages are designed to provide prepaid comprehensive health services through group practice to specific populations of New Haven. A Yale University health plan will serve not only students but will also be offered, on a voluntary basis, to University faculty members and employees and their families, as well as to the dependents of students and



*The first class of community health workers trained at the Hill Health Center graduated in December. The Reverend Daniel Collins, a member of the Hill Health Council, presented certificates to the six new health workers.*



*Staff members of the Hill-West Haven Division of the Connecticut Mental Health Center meet with the chief of the division's field station in the Hill, Dr. Carl Mindell, assistant professor of psychiatry.*

*The Baldwin-King Schaals Project, aimed at improving inner-city education, is directed by Dr. James P. Comer, assistant professor of psychiatry in the Yale Child Study Center. Here, he and the mother of a pupil talk with a teacher at the Baldwin Schaal.*



graduate students — a potential total membership of approximately 30,000. A similar plan, initiated by the Greater New Haven Central Labor Council, will be made available to members of labor unions and other groups, and their families. Professional and technical studies for the design of this plan have been conducted by the Department of Epidemiology and Public Health. Although not operated by the medical school, both of these group plans will provide settings for continuing studies of the delivery of health care and for the training of health personnel.

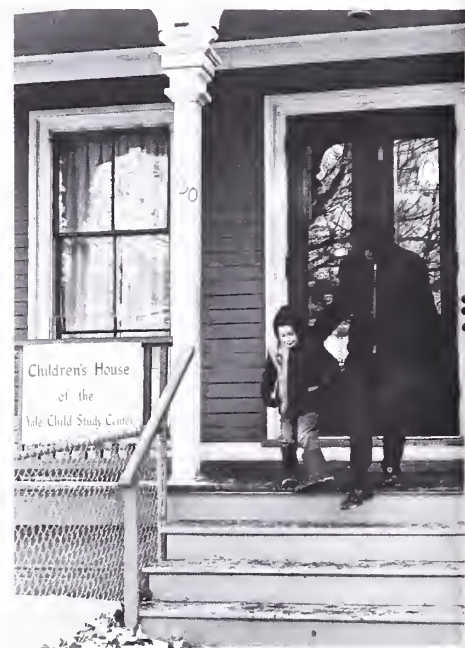
The application of advanced knowledge in the field of child development is combined with meaningful community service in the programs of the Yale Child Study Center.

The Baldwin-King Schools Project, being conducted in cooperation with the New Haven school system under a Ford Foundation grant, is designed to bring the knowledge of individual and group dynamics to bear on the problems of inner city education. Its primary objective is the achievement of quality education through improving

communication and cooperation among parents, teachers, and children and by providing the support of master teachers, curriculum specialists, school social workers, and psychologists for classroom teachers.

The Child Welfare Demonstration Research Program, which is partly supported by federal funds, seeks to find ways of protecting underprivileged children from the damaging effects of their environments. The program is presently based in a day care facility named Children's House on Davenport Avenue. When additional space becomes available, the program will be expanded to include children without families for whom complete care will be provided.

Through these programs and others — all in the early stages of development — the School of Medicine is attempting to resolve, with the people of New Haven, the most critical issue facing medicine today: how to place the fruits of medical research at the service of *all* the people. The task is enormous, but a beginning has been made.



*Above left: At Children's House, staff members confer about experiences with the children. Dr. Solly Provenca, professor of pediatrics and head of the Child Development Unit of the Child Study Center, directs the program. Above: one youngster of Children's House looks forward eagerly to accompanying staff member John H. Atkins on business errands each day.*



# To Bridge The Generation Gap

by Lawrence Horowitz, '69

For the past few years the Yale School of Medicine has found itself a victim of the dread generation gap. Attendance at lectures decreased as the number of electron micrographs increased, and many students turned off the biochemical pathways and charted their own academic course through the first two years. The faculty, sensing that something was very wrong, made an attempt to bridge the gap with the new curriculum, which incorporated ways of meeting certain student objections to the old one, but did not have active student participation at all levels of its development. In this era of "Student Power," that was a potentially serious mistake. But happily the curriculum was sufficiently flexible and apparently open to enough individual interpretations to be viewed by many of us as a first step in what could become an important faculty-student attempt to bridge the generation gap jointly. It is toward furthering that dialogue that the rest of this article is aimed.

## I

"The health of the people is a public concern; ill health is a major cause of suffering, economic loss and dependency; good health is essential to the security and progress of the nation. . . .

"I have been concerned by the evidence . . . of serious inequalities of resources, medical facilities and services in different sections and among different economic groups. These inequalities create handicaps for the parts of our country and the groups of the people which most sorely need the benefits of modern medical science."

Franklin D. Roosevelt  
Message to Congress  
January 23, 1939

It is nearly thirty years since F.D.R. included the right to good medical care in his Economic Bill of Rights. And yet in 1968 farm workers in Riverhead, Long Island, were receiving little if any medical care; pediatricians in New London, Connecticut, had to be pushed to screen lead levels in ghetto children (they were apparently ignorant of the fact that the State of Connecticut performs the lab work free); and in New Haven, on several occasions during the summer, neighborhood groups prepared to storm the Emergency Room at the Yale-New Haven Hospital to protest the treatment there.

The founders of the Yale Student Health Project felt that not enough attention was being given to community medicine at this medical center and that, in fact, the science of developing health care delivery systems, and study of the responsibility of a medical center to the community it serves and the responsibility of the medi-

cal profession to the society it serves, were being totally neglected in the training of physicians at Yale. Nor was this feeling unique to Yale students; the areas of neglect were shared by every major medical center in the country.

In 1965, thirteen students from various schools of law, medicine, and dentistry decided to broaden their own individual experience by spending a summer working on the health problems of migrant workers in the San Joaquin Valley in California. As a result of that summer's experience, ninety students of medicine, nursing, dentistry, dental hygiene, and social work from forty institutions in eleven states served the next summer in various capacities in poverty areas across the State of California, and the first Student Health Project had come into being. Each student consulted with a preceptor who was involved in some way with health concerns and disadvantaged populations. The program was sponsored through a demonstration grant from the Office of Economic Opportunity, which hailed this maiden effort as a great success. In its evaluation, OEO cited four distinctive aspects of the program:

1. The project was student-conceived.
2. The project demonstrated the effectiveness of the multi-discipline approach to health problems.
3. The large degree of autonomy given the students paid off in the unique resourcefulness and creativity they brought to bear in solving problems often considered hopeless by traditional agencies.
4. Two important lessons were learned through the use of community workers and indigenous community organization. The first was that only when members of the community participated at all levels of the program's development was an effective community health program achieved. Whenever "benevolent benefactors" attempted to do what was right for the community without asking for community partic-



Mr. Horowitz is director of the Yale Student Health Project. An alumnus of Union College, he worked in the California Student Health Project in the summer of 1967.



ipation, the result was a dismal failure. The second lesson was that students were uniquely effective as agents of the people, being able to bridge the incredibly great distance that had previously existed between the medical establishment and the communities it was trying to serve. For the first time professionals and community leaders were talking and working together.

The next year, 1967, saw 250 health science students participate in health projects in Chicago, California, and New York. Last summer projects were organized in eight states, and over 500 health science students were exposed to an area of medicine not listed in their school curriculums.

## II

The Student Health Project at Yale is now nine months old. In those months it has received praise from high government officials, many Yale professors, many local community residents in the three areas of project involvement, and even from some local officials. In those months it has been damned and threatened by high government officials, some Yale business office personnel, several local community residents, and by many local officials. It has been accused of sponsoring a "drunken sexual orgy" at its mid-summer convocation and been congratulated on "the responsible organiza-

tion" of the mid-summer convocation. It has been accused of "ruining the name of the medical school by its irresponsible activities" and been called "the single most important thing that has happened to medical education at Yale in the last ten years." It has been exciting and frustrating for those who have participated in it, and it has done some good and some harm. The specifics of its accomplishments and failures will be detailed by the special evaluation committee, headed by Dr. Raymond Duff of the Yale faculty. It is one of the first, if not the first, student health project to submit to rigorous, impartial evaluation. No matter what the final accounting of the project may be, it is fair to say that many important things were learned.

The first and most obvious thing, and one of the hardest to learn, was that the methods of approach used in one area are simply not applicable to another. The project was based in New Haven, New London, and Riverhead, Long Island. The sophistication of the local organizations in New Haven meant that the students were to function more in a service than an organizing role. In New Haven they were to perform whatever services were requested by the groups with which they were placed, and the wisdom of the task was not in the students' realm of concern. The paradox was that since the students were not trained or legally able to act as physicians, many ended up doing things that took no account of their educational goals. Yet it

*Workers in the three summer programs of the Student Health Project gathered for a midsummer convocation to review and assess their operations. Dr. Raymond S. Duff, associate professor of pediatrics, is chairman of the committee assigned to make a thorough evaluation of the project.*

*Tackling problems of funding, Mrs. Brendo Jones, the president of "Operation Child Care," meets with consultants, including Nancy Koehne, one of three graduate students at the Yale School of Nursing who assisted the mothers in organizing and establishing the child care program.*





*Migrant farm workers, on whose behalf students worked at Riverhead, Long Island, lived in quarters provided by growers.*

was through doing basic tasks that they learned what the basic needs of the communities were. Health is very low on the ghetto resident's list of priorities. Housing, food, a camp for the children in the summer, painted walls — these were high. Getting to a doctor was a critical problem in the Fair Haven section, and a small number of students acted as chauffeurs — a blow to their egos perhaps, but an incredibly valuable service to the community. Other students in New Haven did have more “medical” tasks to do. Several took all the histories for the Hill Child Health Center. Three graduate students in nursing helped a group of mothers in the Hill organize themselves to work for the establishment of a day care center for their children. This project is still continuing and is called “Operation Child Care.”

On Long Island, things were very different. There were no effective community groups, and the students found themselves acting as community organizers. By

the end of the summer they had, with donations from a drug company, laid the foundations for a mobile clinic for the migrant workers. They conducted health education courses in North Bellport. They encountered three slums with housing as bad as any in the south: wooden shacks built in trenches below ground level so that after a storm the rain water drained down into the homes. These houses were obviously a very dangerous health hazard and the students began an intensive housing drive in the three areas, a drive that is being continued today by the community workers who labored with the students during the summer. Sixty health science students from across the country and fifty community workers from the areas involved took part in the project. All were paid the same wages.

New London presented a third type of community, one with fledgling indigenous community groups. The job of the students was to work with and for the groups, encouraging them to take the lead, yet playing



a more active role than the students in New Haven.

The second thing we learned, and this was the hardest to accept, was that the problems of the communities are so complex, their roots so deep, that barely a dent is made in the course of a ten-week project. Every student in the project felt the frustration of tackling a problem with all the energy he had and finding it resistant to solution. Many of the students had never had this experience before. They began to get a feel for the amount of energy that will be needed to overcome these problems, and many went through a period of despair during the summer and wondered aloud about a system that permits knots to be tied so tightly that many have felt it necessary to burn the rope rather than spend the tedious effort to untie it. Yet if the students were so exasperated after just ten weeks, how must it feel to live under such intractable conditions for years? When the students listened to members of the black community talk about the Yale-New Haven Hospital, they felt that the medical community could not possibly understand the depth of feeling against it.

What else could possibly account for seeming indifference at a time that called for emergency attention and programs? The students learned that one harsh word from an embattled house officer in the Emergency Room could do damage that took days to repair and was never really repaired. One of the questions many of the students struggled with was how to define the responsibilities a medical center has to the community it purports to serve. If the sole objective of the medical school is education, where is the comprehensive care of the ghetto citizen to come from? If that care is not the medical center's primary concern, whose primary concern will it be? Why is the development of an effective and comprehensive health care delivery system for an area that desperately needs it not as important and deserving of full and unqualified support as red cell transport research? Why does the medical school's primary objective of education not include expansion of the student's experience into the community, instead of that objective being used as an excuse for withdrawal from, or at least a "go slow" policy with regard to commitment to, the community? Why isn't the health condition of the ghetto considered as great a problem for the medical center and as deserving of concentrated effort as the search for the etiology of lupus erythematosus? In short, the students wondered who will devise a system to take care of the people, if not the medical center?

We also learned this summer that we could act as

intermediaries to bring together people from the medical center and people from the community. Somehow, feelings had developed in the community about key personnel in the medical center and reciprocal feelings and trepidations had developed in the medical center about community leaders without the two groups ever having met. The meetings brought no dramatic resolution of the feelings on either side, but they were the beginning of a continuing series of dialogues. In addition, Dean Redlich held a luncheon for many of the community workers in the project and, through their stories, was directly exposed to conditions in the three areas. The workers were impressed by his concern, and he by their insight, eloquence, and dedication to the communities.

The students also learned that they could bring about actual changes in the medical school by collective action. In the project grant of \$217,000 from OEO was an item of \$15,000 to pay for one year's living expenses for three black students. Dean Redlich knew of this in May and said that the school would recruit the three students for the fall of 1969. During the summer, the Yale Student Health Project acquired a list of possible candidates for admission in September, 1968. The information was passed on to the Dean who immediately reconvened a special committee charged with recruiting black and Puerto Rican students. The new objective was to take three students in September, 1968, and considerably more in the fall of 1969. The committee swung into action with the Student Health Project representative, John Blanton, taking an active role, and the commitment was met.

### III

Many people have argued that the concerns of the student health projects exceed the traditional boundaries of the field of medicine and that many of its activities belong under auspices other than those of a medical school. Yet perhaps the current rules of acceptability need changing. As they now stand, they provide for the treatment of lead poisoning, but permit the victim to return to the environment where the poisoning occurred; they include the treatment of pneumonia, but let the convalescent go back to an unheated apartment in the middle of winter; they include the treatment of a child with strep throat, but permit him to return home to sleep in the same bed with four siblings; they provide immunizations to children and permit them — at least in Riverhead, Long Island — to live in homes that are flooded whenever it rains. In short, the rules



cover all the events that take place within the walls of the medical center and neglect the fact that it is outside those walls that the people get sick.

It is not an easy thing to fulfill the three-fold objectives of a medical center: teaching, research, and service. The question that must be asked is which really has the top priority and which must suffer at the expense of the others. If teaching and research are top priority objectives, then service must be fitted around them. As the chairman of a clinical department in the medical school put it at a recent conference when describing how he views the trinity of the medical center, service is the olive in the martini. But the view is realistic only when, as in California, the university medical

center is not the sole provider of care for a community and there is another institution whose only reason for being is the care of patients who desperately need it. In New Haven there is no reasonable alternative to Yale-New Haven Hospital. Thus the luxury of viewing service as an adjunct to teaching and research cannot be afforded here. Too much is at stake.

The trinity must, at the very least, be composed of equal parts. Viewed in this light, the activities of the student health projects are more acceptably within the proper concerns of modern medicine. It is hoped that the experience of over 500 health science students in the summer of 1968 will help insure that a redefinition of the trinity will be forthcoming.

*Medical students working in the New Haven program included John W. Blanton, Jr., '70, who assisted with physical examinations for children attending day camp.*



## AIM Campaign

The Alumni in Medicine campaign is now under way in eighty communities and areas throughout the nation, it is reported by Dr. Leona Baumgartner ('34), general chairman. At press time, a total of \$700,000 had been raised from medical alumni, and the general chairman predicts that the first million dollars can be realized shortly through the continuing efforts of over 300 regional leaders and committee members now engaged in the capital fund-raising program.

To implement still further the work of the Alumni in Medicine campaign in the months ahead, Dr. Baumgartner recently announced the expansion of the national campaign cabinet. The key group of Yale doctors, which she heads, includes: Dr. J. Roswell Gallagher ('30) and Dr. George T. Pack ('22) vice-chairmen; also Dr. A. John Anlyan ('45), Dr. George A. Carden, Jr. ('35), Dr. Benjamin Castleman ('31), Dr. Vincent J. Collins ('42), Dr. Lycurgus M. Davey ('43), Dr. DeWitt Dominick ('34), Dr. Robert C. Horn, Jr. ('37), Dr. William L. Kissick ('57). Also Dr. Stephen F. Nagyfy ('36), Dr. Charles W. Neuhardt ('37), Dr. Nelson Newmark ('31), Dr. John B. Ogilvie ('34), Dr. Lawrence K. Pickett ('44), Dr. Myron A. Sallick ('24), Dr. Abraham J. Schechter ('31), Dr. Donald W. Seldin ('43), Dr. Louis E. Silcox ('35), Dr. Paul Talalay ('48), Dr. N. William Wawro ('38), Dr. Louis G. Welt ('38), Dr. Ashbel C. Williams ('35).

### Three Areas Near \$100,000

The Hartford, Connecticut, area committee, with co-chairmen Dr. Edward Nichols ('38) and Dr. Wawro, had recorded almost \$100,000 in gifts by the end of the year. The Boston and Springfield, Massachusetts, committees have registered over \$90,000 through efforts headed by Drs. Baumgartner, Castleman, Newmark, and J. Edward Flynn ('30). The New York metropolitan area has produced a total of \$99,000 through the efforts of Dr. Carden and his committee.

### Gift Levels High

Medical alumni are taking advantage of pledge and deferred giving provisions in making generous commitments to the School of Medicine through the Alumni in Medicine campaign. Alumni are being encouraged to consider tax advantages in extending their pledges over a three to five-year term. Many have elected to utilize life income plans, trust agreements, bequests, and other forms of commitments.

The table at the right indicates the range and number of gifts received to date.



Dr. Arthur Ebbert, Jr., associate deon, addressing the AIM campaign dinner in New Haven in October, brought a message from Deon Redlich in which he said: "We propose to have a balanced school, not a school of human biology. We propose to give our students a proper grounding in the biological as well as the behavioral and social sciences that are essential for modern health care. Even the most practical clinician should benefit from the scholarly spirit of the university setting; the most sheltered basic scientist must not be oblivious to major practical health needs. We want to address ourselves more emphatically to some of the practical problems of health care delivery. In building a new and outstanding program we will take advantage of the ideological, geographical, and organizational closeness of Yale University to its medical school. Few other medical schools enjoy this advantage to a comparable degree." Dr. Redlich and Dr. Baumgartner, both scheduled to speak at the dinner, were unable to attend because of acute viral infections.

*Regional Campaign Activities*

One of the most recent major campaign developments is in New Haven, where Dr. Davey has a team of sixty committee members who currently are approaching 365 medical alumni in the area for their pledges. This phase of the program was launched by a two-day seminar held at the university in October. Chairman Davey's committee members have accounted for over \$60,000 as a result of concentrated effort on year-end gift considerations.

Dr. Welt has been working on campaign organization in North Carolina, following a preliminary well-attended meeting of medical alumni held in Chapel Hill in mid-December. Dr. Talalay is serving as chairman for Maryland AIM activities, particularly in the Baltimore area. Drs. Horn, Conrad Lam ('32), and Richmond Smith, Jr. ('42) are accelerating solicitation of medical alumni in Michigan. Drs. Max Miller ('35) of Cleveland; Henry Hartman ('35) of Toledo; Goffredo Accetta ('51) of Cincinnati; Robert Rowe ('40) of Akron; and Edward Call, Jr. ('59) of the Dayton area, are providing leadership for the Ohio program.

Drs. Gilbert Eisner ('56), James Patrick ('56), and Herbert Winston ('57) have assumed responsibility for follow-up on Washington, D. C. medical alumni now that the former Washington chairman, Dr. Kissick, is located in Philadelphia. Dr. T. S. Danowski ('40) is providing leadership for the Pittsburgh AIM program, ably assisted by Drs. William Kiesewetter ('49hs), Hilda Kroeger ('49mph), and Charles Wood ('30).

*Planning AIM campaign action for the coming months are Dr. J. Raswell Gallogher, '30, vice-chairman of the campaign; Dr. Lycurgus M. Davey '43, head of the New Haven area team; and Robert L. Hart, assistant director for medical affairs in the Office of University Development.*



*West Coast Emphasis*

Newly revitalized California committees in Los Angeles, San Francisco, Santa Barbara, Bakersfield, and San Diego accelerated their activities at the end of the year. The broad geographical expanse, and the lack of concentration of Yale medical alumni, make formal organization difficult. Nevertheless, leaders and committees are completing solicitations with admirable results. Oregon and Washington committees have now been organized and will be engaged in full campaign activity early in 1969.

*Other Areas*

Reports of campaign action continue to come into New Haven from thirteen committees in Connecticut, six regional groups in upstate New York, seven committees in Massachusetts, and four groups in New Jersey. In addition, chairmen in Maine, New Hampshire, Vermont, and Rhode Island report ongoing interest and results. Dr. Ashbel Williams is providing leadership for Florida AIM activities, particularly in the northern portion of the state.

General chairman Leona Baumgartner, in a recent statement to the national campaign cabinet, emphasized the importance of the Alumni in Medicine campaign success and the chain reaction this can have on stimulating future massive support for the School of Medicine and Medical Center from foundations, corporations, and individuals. She pointed out in addition, that all medical alumni, by their own personal involvement, provide partial repayment for "our own debt to the School and what it did for us. Our success in the campaign can assure the future development of the School and its training of present and future students."

*Partial List of Gifts Received to Date*

Range of gifts	No. of gifts	Amount
\$50,000 and over	2	\$100,000
20,000 plus	6	142,021
15,000 plus	5	77,000
10,000 plus	5	50,000
7,500 plus	3	23,170
6,000 plus	3	18,000
5,000 plus	10	50,700
3,000 plus	15	48,385
2,500 plus	3	7,763
2,000 plus	9	18,770
1,500 plus	31	47,100
1,200 plus	9	11,047
1,000 plus	48	48,130



## Anatomist and Cancer Biologist

Faculty Profile: *William Ullman Gardner, Ph.D.*  
Ebenezer K. Hunt Professor of Anatomy

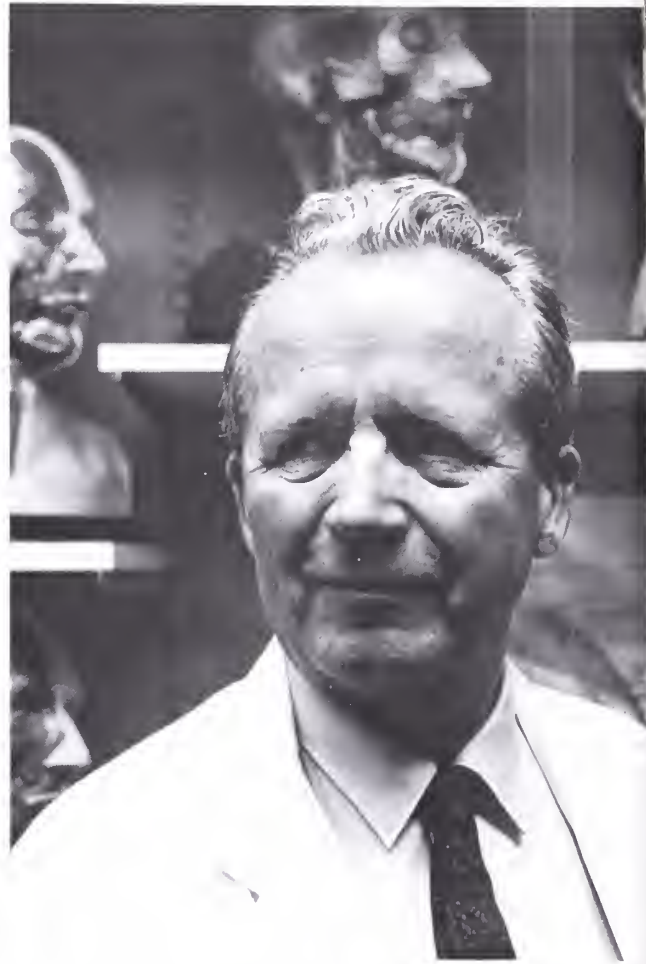
In the broad field of cancer research, one of the most promising avenues of investigation for more than thirty years has been the role of hormones in the stimulation of abnormal cell growth. Dr. William U. Gardner was one of the first scientists to advance the theory that hormonal imbalance is probably involved in many types of cancer, and his experiments over the years have borne out this hypothesis.

Dr. Gardner came to Yale in 1933 from the University of Missouri where his doctoral research had been concerned with the lactogenic hormone from the pituitary gland. Continuing his laboratory studies in New Haven on hormonal control of mammary glands, he became interested in the prevalence of breast cancer in certain types of mice. With Dr. Leonell C. Strong, who had recently come to Yale from the Roscoe B. Jackson Memorial Laboratory at Bar Harbor, Maine, he studied lesions in mammary tissue that preceded the formation of cancer and the effects of hormone injections on the incidence of mammary cancer.

Drs. George M. Smith and Edgar Allen also collaborated in these early experiments. The investigators found that with a combination of suitable genetic factors and suitable hormones they could produce not only mammary tumors but also tumors of the pituitary gland, adrenal cortex, lymphoid tissue, uterine cervix, testicular interstitial cells, and ovaries of laboratory animals.

The baffling part of these studies was that no clear pattern emerged showing the relationship between the type and amount of the hormone and the development of the cancer. The same hormone that caused abnormal cell growth in one kind of tissue was found to bring about remission of abnormal growth in the cells of another kind of tissue, and hormones that induced tumors of a particular organ in one strain of mice did not induce them in another strain.

The key to these mysteries, Dr. Gardner feels, may lie in the genetic information carried by the cells themselves. His studies in recent years have been directed toward finding out how genetic differences work in regulating the potentialities of tissues and organs for neoplastic response. The mice he uses in these studies include a number of inbred strains, some of which were developed by Dr. Strong at the Jackson Laboratory and presented to Dr. Gardner when Dr. Strong left Yale in 1953 to go to Roswell Park Memorial Hospital in Buffalo. One strain started by Dr. Gardner some twenty-five years ago is now in its sixty-sixth generation of brother-sister inbreeding. The colony has varied in number between 10,000 and about 3,000, where it stands at present. Once housed in the "Mouse House" behind



the medical school power plant, the mice now occupy a large room in the Animal Care Division's modern new quarters on the ground floor of the Sterling Hall B wing. Immediately adjacent to the mouse quarters is the laboratory where Dr. Gardner and his associates conduct their research.

"These mice are so inbred that one could transplant any tissue one wanted — endocrine glands, lungs, even heart, if it were technically possible," Dr. Gardner says. Genetically identical animals are essential to the research not only because they permit tissue grafts without rejection, but because only by crossing strains whose specific susceptibilities to tumor inducement are known can patterns of inheritance be studied.

Through his studies, Dr. Gardner has demonstrated that mice of the inbred A strain will develop tumors of the testicular interstitial cells following prolonged treatment with the female hormone, estrogen. Mice of the inbred C<sub>57</sub> strain that receive the same treatment, however, will develop pituitary tumors but not testicular

tumors. When the A and C strains are hybridized and the offspring injected with estrogen over a prolonged period, they develop both types of tumors.

"We know that the genetic difference is in the end organ itself," Dr. Gardner says. "When we transplant the target tissues from a susceptible strain and a non-susceptible strain into the same animal—a hybrid offspring of the two strains—the tissue from the susceptible strain will develop tumors under estrogen treatment, but the tissue from the nonsusceptible strain will not."

These laboratory experiments are beginning to reveal clues to possible patterns and mechanisms involved in cancer, the second largest cause of death in the United States. Indispensable research continues on the treatment and cure of cancer patients through surgery, radiation, and drugs, but it is through basic studies like Dr. Gardner's that man will some day acquire the knowledge needed to prevent abnormal cell growth.

Apart from his reputation for outstanding scientific contributions, Dr. Gardner has achieved international recognition for his leadership in the organization and administration of cancer research programs. In 1947, as president of the American Association for Cancer Research, he helped organize the Fourth International Cancer Research Congress in St. Louis, Missouri. At that meeting, a world-wide effort was launched to conquer cancer through research, and Dr. Gardner began his long association with the international coordinating

group, the *Union Internationale Contre Le Cancer* (UICC). From 1949 to 1952 he was vice-president of the UICC. Since 1960 he has been a member of the organization's executive committee and chairman of the committee on fellowships which, in 1961, initiated the Eleanor Roosevelt International Cancer Research Fellowships. As the UICC's efforts have expanded, additional fellowships and visiting specialist programs have been added, and in 1966 Dr. Gardner was named chairman of the newly formed Commission on Fellowships and Personnel Exchange. He is also currently president-elect of the UICC and will begin his four-year term as president in 1970. In still another world project, he has been a member since 1966 of the committee on fellowships of the International Agency for Research on Cancer with headquarters at Lyon, France.

In this country, Dr. Gardner has taken an active part in nearly every major organization, public and private, devoted to fighting cancer. For several years immediately after World War II, when the programs of the National Institutes of Health were expanding rapidly, he was on the Board of Scientific Advisors to the National Cancer Institute. He served as chairman of the Board of Scientific Consultants from 1963 to 1965 and has been a special consultant to the institute since 1961. Last June he completed a six-year term on the American Cancer Society's Committee for the Development of Scientific Personnel. During the last two years he was chairman of this committee, which oversees the



Twenty-two years ago this June the anatomy faculty sat, and stood, for a department portrait. In the front row were Drs. Ruth Schrader, L. S. Stane, H. Saxan Burr, William U. Gardner, Charles W. Hooker, and Fern W. Smith. Standing behind them were Drs. Min Shin Li, Robert G. Grenell, Ralph G. Meoder, Thomas R. Farbes, Corroll A. Pfeiffer, Thomas F. Daugherty, Isaac Welt, and L. C. Strang.



nation's largest private fellowship program in cancer research. Currently he is on the Society's committee to evaluate the fellowship program.

Among his many other affiliations, Dr. Gardner takes an especially strong interest in two small, private funds which have their headquarters at Yale, the Anna Fuller Fund and the Jane Coffin Childs Memorial Fund for Medical Research. He has been a scientific advisor to both since 1953. Each of the funds supports specific projects in cancer research as well as fellowships to provide further training for promising young investigators. Although the amounts of support they furnish are modest, the Fuller and Childs funds have been described as "catalytic agents" for large cancer research organizations such as the American Cancer Society. Dr. Gardner points out that, as small foundations not limited by extensive regulations and complex operating machinery, the funds can move quickly and efficiently to support advantageous research possibilities anywhere in the world.

Dr. Gardner's interest in biological science dates from his childhood on a farm at Kimbrae in southwestern Minnesota, where he was born November 11, 1907, the first of four children. Except for one summer on his grandfather's ranch in Colorado, he spent his time as a youngster breeding and raising livestock and plowing and planting grain fields, and it seemed probable that, like his father, he would become a farmer. He learned to drive an eight-horse team with a three-bottom gang plow and sometimes helped blast out rocks to clear new fields for planting. When he was eleven years old an accidental dynamite detonator explosion cost him the thumb and index finger of his left hand.

*In laboratory experiments with mice, Dr. Gardner studies the role of hormonal imbalance in cancerous cell growth.*



The accident did not lessen his interest in farming, however, and in 1926 he entered South Dakota State College to study agriculture. Working his way through school, he first did odd jobs that ranged from waiting on tables and stoking furnaces to milking cows. But these jobs paid only thirty-five cents an hour and he found himself working ten hours a day to make ends meet. During his final year he got a job as a teaching assistant in dairy management and became so affluent, because his wages had risen to \$1.50 an hour, that he was able to buy a car.

It was at this period that he began to develop a strong interest in theoretical science. "I was amazed to realize how little I knew about a great many things, including animal physiology," he now says. "I finished college in 1930 and those were pretty bad days on the farm. I really wanted to keep on learning, so I applied for graduate school."

He chose Missouri mainly for its program in physiology under C. W. Turner. But as it turned out, Dr. Edgar Allen, the professor of anatomy and dean of the University of Missouri School of Medicine, also became one of his most influential mentors. Dr. Gardner earned his M.A. degree in 1931 and the following year received a Gregory Fellowship to complete his doctoral work. He was awarded the Ph.D. degree in 1933.

In his doctoral thesis Dr. Gardner described a rabbit unit of the pituitary lactogenic hormone as a biological standard, and this unit is still used by some researchers for standardization of biologic lactogenic activity. Subsequently, Oscar Riddle of the Carnegie Institute found that the same hormone would produce crop-milk in pigeons, and the pigeon unit has now generally superseded Dr. Gardner's rabbit unit as the biological standard.

From Missouri, Dr. Gardner planned to go to the University of Wisconsin in order to work with the endocrinologist Frederick L. Hisaw. Just about the time his application for a fellowship at Wisconsin was approved, Milton C. Winternitz, dean of the Yale School of Medicine, came to Missouri to visit Dr. Allen. Immediately after the Yale dean's visit, Dr. Allen called Dr. Gardner to his office and said, "I'm going to Yale to chair a new department of anatomy and I'd like you to come too." Dr. Gardner recalls that the idea came as something of a shock to him. "I thought to myself, Yale? That's where Albie Booth is. Then I realized I also knew of the researches of some of the people in science there — Professors Ross Harrison, L. B. Mendel, and J. F. Fulton. But I still couldn't think what state Yale was in. I guess I was truly provincial." Actually,





As a teacher, he works high with students. During his chairmanship, the department introduced the use of closed-circuit television for demonstrating anatomy dissections. Note screen in the background.

Past, present, and future presidents of the Union Internationale Contre Le Cancer at a meeting of UICC executive committee in Lugano, Switzerland, last May. They are the immediate past president, Sir Alexander Haddow, director of the Chester Beatty Cancer Institute in London; the current president, Dr. N. N. Blokhin, director of the Academy of Medical Science in Moscow; and Dr. Gardner, president-elect, who will assume the top office in 1970.



he was probably more cosmopolitan in outlook than many young postgraduate scientists in eastern universities, a quality that was to become evident later in his versatile career as investigator, teacher, academic administrator, and leader in national and international efforts to advance the cause of cancer research.

The Department of Anatomy of which Dr. Allen was named chairman in 1933 replaced a section of the Biology Department that had previously been responsible for teaching anatomy to Yale medical students. Dr. Gardner came to the new department as a National Research Council Fellow and two years later, in 1935, joined the regular faculty. He moved through successive promotions and was an associate professor when, in 1943, he was appointed professor and chairman of the department following the death of Dr. Allen. Last year, after nearly a quarter of a century of administration, he relinquished the chairmanship to devote his full time to research and teaching.

During his early years at Yale, Dr. Gardner taught embryology and later microscopic anatomy. But he is a gross anatomist, he says, as a result of the Second World War. "Between people in the department going into military service and the competition among medical schools for teaching personnel, there was a time when I was the only person carried over from year to year who was available to teach gross anatomy. Each fall I would have one or two new teachers in the course. So we started using the prosection method of instruction in order to teach the teachers at the same time as the students."

The prosection method involved a preliminary dissection which the instructor used for demonstration purposes before the students began their own dissections. As a teaching technique, it proved so successful that it was continued even after the medical school returned to normal. Beginning in 1965, the prosection demonstration was transmitted to closed-circuit television from a studio in the department to screens in the student laboratories, and more recently the demonstrations have been put on videotape so that they can be used many times over. (See the Winter, 1966, issue of *Yale Medicine* for an article, "Anatomy Demonstrations Telecast.")

As a teacher, Dr. Gardner commands wide admiration and respect. "He's one of the best," a fourth-year student said recently. "When our class took gross anatomy we had table conferences, sort of on-the-spot oral quizzes, and some people were scared of Dr. Gardner because his questions are really hard and make you think. He's firm, but he's always very gentle and never

hurts or makes fun of anyone." In addition to lecturing and laboratory teaching, Dr. Gardner supervises research by medical students preparing dissertations on problems related to abnormal cell growth.

His professional productivity is such that Dr. Gardner might be expected to enjoy relatively passive recreation, but that is not the case. Although he still has the enthusiasm for football that made Albie Booth his first association with Yale, and he loves to paint — "Grandma Moses style," he calls it — he is more likely to be found at home on a Saturday sawing up a fallen tree for firewood, building a flagstone terrace, or working in the garden with his attractive, vivacious wife, Katherine.

Mrs. Gardner, a native of Columbia, Missouri, met

*At their home in Orange, Dr. and Mrs. Gardner have created a beautiful garden and woodland setting. Two stone footbridges spanning their brook were built by Dr. Gardner.*



her husband when he was in graduate school, and they were married in 1934. For the past nineteen years they have made their home in Orange where they bought a house under construction and planned the completed design themselves. The first autumn they lived there, Dr. Gardner did a painting of the garden and woods behind the house — a blaze of brilliant yellow, red, and orange chrysanthemums against the fall foliage. His wife has an expert touch with flowers, both the cultivated varieties that grow in beds and borders on the beautifully landscaped lawn and the wildflowers and ferns in the woodland that is part of the Gardner property.

In these woods a meandering brook is crossed by two stone footbridges that Dr. Gardner designed and built himself. His skill at masonry is evident also in a large, handsomely proportioned fireplace and patio where the family — which includes Mrs. Gardner's father, E. V. Homsley — enjoy cookouts and barbecue meals in warm weather. Cooking is one of Dr. Gardner's many other talents, and he is noted for gourmet renderings of dishes as diverse as shrimp creole and turkey with stuffing.

Like her husband, Katherine Gardner has a strong artistic flair. Their gracious home is full of warm, bright colors and fascinating art objects collected on their foreign travels or sent to them by friends in all parts of the world. Many of the paintings on the walls are his — landscapes showing farms, fields, woods, and streams — but one that hangs in Dr. Gardner's den was done by his wife. A surrealistic scene of figures in a sort of prayer-dance ritual, it expresses great vibrancy and joy.

Dr. and Mrs. Gardner have travelled widely. His responsibilities in various international programs for cancer research take him abroad several times a year and together they have visited most parts of the world. Last spring they were in Geneva, Lausanne, and Locarno, Switzerland, for meetings of the UICC and in Milan, Italy, where Dr. Gardner took part in programs opening a new cancer hospital. In October he spent several days in Lyon, France, at the headquarters of the International Agency for Research on Cancer. UICC meetings will take him back to Switzerland at the end of January and again in May, and in June he will participate in a special congress at the Cancer Institute in Perugia, Italy.

Fortunately, both the Gardners thoroughly enjoy travel and all the opportunities it brings. But, as Dr. Gardner says, it's always good to get home — and home for him means life in Orange and in the laboratories and classrooms of Yale.





*This portrait of Peter Parker and the two paintings on pages 20 and 21 were executed by Lom-Qua, uncle of a grateful medical student. Parker's likeness, which hangs in the medical school's Beaumont Room, was his gift to the University.*

China for all practical purposes was closed to the West until she was defeated by the British in the war of 1839-1842. The treaty that concluded the so-called Opium War opened five Chinese ports to trade and established the rights of foreign residents. The Middle Kingdom was to remain open to western influence for the next century. Missionaries and educators followed in the steps of diplomats and traders. Some years before the explosive entry of China into the western sphere of influence, however, an American physician and minister had already opened a hospital in Canton. There, he enjoyed the respect if not the complete confidence of the Chinese at a time when westerners were regarded as "foreign devils." Skilled in medicine and surgery, the Rev. Peter Parker, M.D., had "opened the gates of China at the point of a lancet when European cannon could not heave a single bar."

Peter Parker was born to farm parents of modest means in Framingham, Massachusetts, on June 18, 1804. All the children in the family were raised under the strong religious influences of their devout parents. Early in life Peter was to ask himself, "What shall I do to be saved?" While still a student at Amherst College, he reflected at the time of his 24th birthday, "I am willing to toil and to suffer pain and weariness of the flesh, if I may but become qualified for extensive usefulness." It must have been at about this time that he contemplated a missionary life. On the advice of ministerial friends, in his senior year he transferred to Yale College where he might better prepare for such a life. That year in New Haven proved rewarding in terms of scholastic achievements and extra-curricular religious activities. In a letter to his mother in 1833, Parker wrote, "I am at times almost ready to sink under the responsibilities



that my contemplated course of life involves. How great, how numerous the qualifications indispensable to a missionary in China." It was with a deep sense of responsibility that he had enrolled in the divinity and medical schools for postgraduate training.

There is no mention in his personal record of any prior interest in medicine, but his work with the poor of New Haven during the cholera epidemic that swept the eastern United States in 1832-1833 must have convinced him of the advantage of a medical education. China was chosen as the site for his missionary work because of her millions of "heathens" who stood to benefit from healing of the soul as well as of the body.

Parker's medical education appears, for the most part, to have been limited to lectures, for there is no mention of his working in the hospital or performing any operations. It is a reflection of his skill and courage that he was later to perform difficult operations under primitive conditions. In March, 1834, Peter Parker was awarded the M.D. degree from Yale; two months later he was ordained a minister of the Presbyterian Church. On June 1, the American Board of Commissioners for Foreign Missions appointed him a missionary to China with the following mandate: "The medical and surgical knowledge you have acquired, you will employ, as you have the opportunity, in relieving the bodily afflictions of the people. You will also be ready, as you can, to aid in giving to them our arts and sciences. But these, you will never forget, are to receive your attention only as they can be made handmaids to the Gospel. The character of a physician, or of a man of science — respectable as they are, or useful as they may be in evangelizing China — you will never suffer to supersede or interfere with your character of a teacher of religion."

When the Rev. Peter Parker, M.D., arrived in Canton in October, 1834, he was among a handful of westerners who were barely tolerated. They were restricted to factory areas facing the river and were forbidden to learn Chinese. Perhaps for the latter reason, Dr. Parker soon went to Singapore where conditions were more hospitable to his learning the language. He returned to Canton in the spring of 1835, partially for reasons of health, but mostly because he was eager to put into practice some of the developments he had witnessed in Singapore. He reported: "Encouraged by the success of a dispensary at Singapore for the Chinese, where, from the 1st of January, 1835, to the following August, more than 1,000 were received, it was resolved on my return to Canton, to open a similar institution here."

The opening of Dr. Parker's Ophthalmic Hospital in Canton inaugurated a new approach in mission work.

Heretofore, the introduction of western medicine had been sporadic and dependent on the generosity of a few well-meaning surgeons who sailed with the trading vessels of the East India Company. It was one of them, Dr. Alexander Pierson, who introduced vaccination into China in 1805. In 1820 and again in 1827, dispensaries were opened in Macao and operated for several years. But these were not missionary endeavors. The significance of the founding of a mission hospital was noted by S. Wells Williams, a contemporary Asian expert (and later, professor of Chinese at Yale): "The arrival of Dr. Peter Parker from New York, in 1834, had added to the force an enthusiastic missionary of exceptional vigor and ability, who by his medical training was able

*Paintings are pre- and post-operative clinical studies of a patient suffering from a bone cyst, the result of a twice-braken humerus. The patient made a good recovery and, said Parker, was "the first Chinese*



to introduce a new factor that has performed a service of the highest importance between foreigners and Chinese, by removing their mutual misunderstandings. This was the establishment at Canton of a dispensary and hospital for the free treatment of natives."

It was felt that an ophthalmic hospital could best further the goals of the mission inasmuch as "[D]iseases of the eye were selected as those the most common in China, and being a class in which the native practitioners are most impotent, the cures, it was supposed, would be as much appreciated as any other."

The three-story converted factory by the waterfront soon began to receive patients with all types of illness, so many that some were turned away for lack of accom-

*who has ever voluntarily submitted to the amputation of a limb." In addition to the medical detail in his illustrations, Lam-Qua often included delicate Cantonese landscapes as background for Parker's tumor patients.*



modation. The accomplishments of the hospital became known throughout the provinces, attracting patients from all strata of society. It was improper, at that time, for a woman to enter foreigners' buildings; however, a member of the gentle sex, if required to be a house patient, was cared for by relatives who served as attendants. Though the hospital did not have government sanction, officials gave it tacit approval by seeking its services. Except for a short period when he was assisted by a Chinese physician educated at the Anglo-Chinese College in Malacca, Dr. Parker took care of all patients. In the first year, over 2,000 patients were treated and countless operations performed. As anticipated, it was in the realm of ophthalmic surgery that Dr. Parker won his greatest acclaim. The treatment for cataracts was couching, a procedure in which the opaque lens was displaced downward, out of the line of vision by a lancet. One elderly beneficiary remarked, "I have lived till my beard has become long and hoary, but never before have I seen or heard of one who does such things as are done in this hospital." Dr. Parker was quick to credit his success to the blessings of the Lord. In winning the confidence of the people, he was convinced that the medical mission succeeded in winning an entrance for the gospel.

In addition to patient care, Dr. Parker found time to pursue Chinese studies and to do translations, skills that served him well later in diplomatic functions. He devoted much effort to education too, foreseeing the time when the hospital would be entirely staffed by local people. He took under his tutelage bright young students who were to become famous in their own right.

Among the promising young men was Kwan Ato who, according to the December 1937 quarterly report from the Ophthalmic Hospital, was proficient in English and dexterous in surgery. His uncle, Lam-Qua, had studied under the talented English artist, George Chinnery. Gratified by Parker's many services to his people and to his nephew, Lam-Qua painted nearly two hundred pictures of the hospital's tumor patients, limning their symptoms in minute detail. Said Lam-Qua, when offered remuneration for his work, "As there is no charge for 'cutting,' I can make none for painting."

The paintings had more than just medical and artistic meaning to Parker for he made extensive use of them on his lecture tours in the United States and Europe for the dual purposes of arousing interest in and raising funds for his hospitals in Canton. Many of the paintings are now housed at the Yale School of Medicine and at Gordon's Museum of Guy's Hospital in London.



The success of the Ophthalmic Hospital would not have been possible without the financial support and encouragement of local British and American merchants from the beginning. With their further support, the foundation of the hospital was strengthened by the establishment of the Medical Missionary Society in China in February, 1838. This was the first medical missionary society in the world from which all others were to take inspiration and impetus. An endowment was established for the provision of facilities to encourage medical mission work. Even as such plans were being made, however, relations between Britain and China were being strained to the breaking-point. Grievances between the two countries had been accumulating and, with the outbreak of hostilities, foreigners were expelled from Canton and the hospital was closed. In the summer of 1840, Dr. Parker left for the United States and for a much needed rest.

His eighteen months in the United States were spent in arousing interest and support for medical missions. Already an acknowledged expert of Chinese affairs, Dr. Parker was invited to preach to the House and Senate and met and discussed Sino-American relationships with Secretary of State-designate Daniel Webster. He also had the good fortune to meet Harriet Webster, the Secretary's niece, whom he married in March, 1841. Shortly thereafter, he undertook an extensive lecture tour in Europe "in prosecution of the objects of the Society." These tours aroused great interest among professional and lay groups who contributed over \$6,000 to his cause. Arrangements were made for the education of Chinese students in England and America and for the recruitment of physicians for service in China.

When Mrs. Parker returned with her husband to Canton in November, 1842, she was the first Caucasian woman to establish residence there. The hospital was now relocated in a larger and more modern setting. Other mission doctors arrived and, with the help of Chinese assistants, patient care was expanded. Over 3,000 patients were seen in the next year. Just when the hospital was again functioning on a secure basis, Dr. Parker was presented with a new challenge. In 1844 President Tyler sent Caleb Cushing as Minister Plenipotentiary to China to negotiate treaties between the United States and China. One of Cushing's first official acts was to enlist Dr. Parker's services as Chinese Secretary and interpreter to the Legation. Assured by Cushing's successor, Commodore James Biddle, that his duties as a missionary doctor would not be compromised, Parker accepted the post which included an annual stipend of \$1,500. The Prudential Committee of

the American Board of Commissioners for Foreign Missions granted approval. However, as 1845 drew to a close, Dr. Parker received a painful rebuke from the Board which decreed that, inasmuch as he was already receiving a government salary and his work lay almost entirely in the field of medicine, he should look elsewhere for support. This incident aroused his righteous indignation and protest, but he was ignored; it was not until 1871, when he received an appointment as corporate member of the Board of Commissioners that he received vindication.

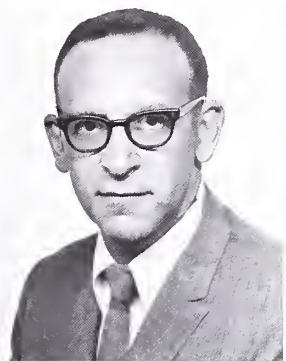
Unshaken in his conviction, Peter Parker continued to serve for another ten years, as physician, missionary, and diplomat. During this period, he witnessed the expansion of efforts that he had initiated. Debilitated by his arduous term of service, Dr. Parker left China in May, 1855, only to return immediately as Commissioner to China at the request of President Franklin Pierce. In later years, when honors were showered upon him, he must have taken especial satisfaction that "To tens of thousands of Chinese I have been permitted to preach the gospel of salvation, and to 52,000 afflicted with physical ills of our common humanity, directly or indirectly, I have been permitted to administer with a degree of success that demands praise to Him who is the giver of health and life."

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*Dr. Wand, Yale medical class of 1964, interned in surgery at St. Luke's Hospital in New York. From 1965 to 1967 he served in the Navy Medical Corps; last year he studied at the Harvard School of Public Health, where he received the M.P.H. degree. Next fall he will serve his residency at the Massachusetts Eye and Ear Hospital in Boston. Currently he is serving as staff psychiatrist at Agnew's Hospital in San Jose, California. He writes, "It is no mere coincidence that I chose to write about Peter Parker and the Canton Ophthalmic Hospital. As a future ophthalmologist and alumnus of the college and the medical school of Yale, I share common ground with him. Tying us closer is the fact that I was the second recipient of the fellowship that bears his name which took me, as a sophomore medical student, to the Institute of Tropical Medicine in Mexico City in the summer of 1962. The Peter Parker Fellowship was established in 1961 by the Student Council of the Yale School of Medicine in honor of this pioneer medical missionary. Lastly, as a native of Shanghai, China, I take a natural interest in affairs of that country."*



# In and About Sterling Hall



Dr. Barnett

## Dr. Barnett Named Chairman of Anatomy

Dr. Russell J. Barnett, an authority in the field of electron microscopy and cytochemistry, has been named chairman of the Department of Anatomy.

Dr. Barnett, a native of Boston, Massachusetts, was graduated from the University of Indiana in 1943 and received his M.D. degree from Yale in 1948. On graduation from medical school he became a research fellow in anatomy at Harvard and then joined the faculty as an instructor. He was promoted to associate in 1952 and to assistant professor in 1954. He returned to Yale as an associate professor in 1959 and was made a professor in 1962.

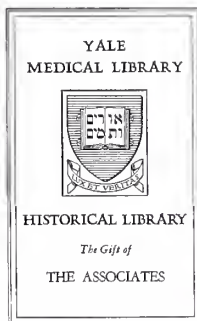
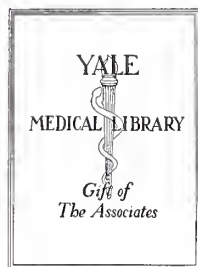
He is currently chairman of the Executive Council of the International Society of Histochemistry and Cytochemistry, and a member of several professional organizations including the American Association of Electron Microscopists, the American Association of Anatomists and the American Cell Biology Society. He has contributed extensively to professional journals and is, himself, an editor of the *Journal of Histochemistry and Cytochemistry*, *Annales d'Histochemie*, and the *Journal of Ultrastructure Research*.

## Library Associates Seek Members

Over the entrance of a Theban library, flourishing in the first century, were inscribed the words, "Medicine for the Soul." Today, 2,000 years

later, no twentieth century substitute has supplanted the library as an essential institution. To students, professors, doctors, and the casual browser, this is axiomatic. But there is a group, with representatives from all of these users, which is dedicated to insuring the continued growth and excellence of our library — the Associates of the Yale Medical Library.

The Associates were organized in September of 1948, after members of the Yale Medical Library Committee had circularized a number of people who had previously shown interest in the Historical Library. The roster, including honorary and life members, today totals nearly 400 names. Members are not necessarily physicians; many are persons interested in medical history or in aiding the library in the continuance of some of its lesser known services in behalf of the public. Such services include inter-library loans, loans to doctors throughout the state and the country, and assistance to health delivery programs at hospitals other than Yale-New Haven. The Yale Medical Library has long felt a responsibility to serve members of the profession and other interested persons throughout the state, including medical personnel attached to community hospitals unable to maintain full libraries.



Because of the generosity of the Associates, the Medical Library has been able to acquire both historical and current books and to establish several endowed book funds honoring revered doctors, professors, and others who have had warm associations with the School of Medicine.

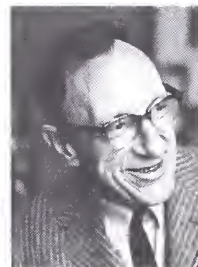
As a requisite of membership, Associates are granted borrowing privileges. They receive bulletins at regular intervals, detailing acquisitions and notices of interest. And finally, Associates have the satisfaction of knowing that through their efforts they have made possible a variety of purchases and projects which could not otherwise have been undertaken.

Inquiries regarding membership may be sent to the Librarian's office.

## Associate Deans Appointed



Mr. O'Connor



Mr. Thompson

John F. O'Connor, assistant dean for administration and lecturer in hospital administration and psychiatry, has been made associate dean for administration, and John D. Thompson, professor of public health (hospital administration) and nursing administration, has been made associate dean for planning. Both received their M.P.H. degrees from Yale.

Mr. O'Connor, who joined the Yale faculty in 1964, has had considerable experience in the administration of health organizations. A former special assistant to the Connecticut Commissioner of Mental Health, he was the first administrator of the Connecticut Mental Health Center from 1964 to 1967, at which time he was named assistant dean of the medical school.

Professor Thompson has been closely associated with problems of hospital planning and administration, both nationally and locally for nearly twenty years. Formerly assistant director of Montefiore Hospital in New York, he joined the Yale faculty in 1956 and directed a research project

on hospital function and design that was the first of its kind in this country.

### Emeritus Professor Receives Pediatric Award

Edith B. Jackson, M.D., clinical professor emerita of pediatrics and psychiatry (Child Study Center) and presently visiting professor of pediatrics and psychiatry at the University of Colorado School of Medicine in Denver, was the recipient of the American Academy of Pediatrics' 1968 C. Anderson Aldrich Award in Child Development. The award, which was presented at the Academy's annual meeting in Chicago in the fall, honored Dr. Jackson's many outstanding contributions to the study of mother-child relationships and her achievements in the treatment and prevention of emotional



*Dr. Jackson makes the rounds of her "rooming-in" unit at Colorado General Hospital. She introduced and directed a similar facility in the late '40s when she was a staff member of Grace-New Haven hospital.*

disturbances in children. Dr. Jackson, who first came to the Yale medical school in 1923, helped establish and then directed the rooming-in project at Grace New Haven Community Hospital until 1953. She was also instrumental in the development of the child psychiatric unit of the Department of Pediatrics. Another innovative development was the intern home-visit plan for mothers of new infants. Under this program, pediatricians were able to see early parent-child problems and relationships in the home situation.

In addition to her latest award, Dr. Jackson was the first recipient of the Agnes McGavin Award of the American Psychiatric Association, honoring her achievements toward the prevention of emotional disorders in children.

### Faculty Notes

Dr. Edward M. Cohart, C.-E. A. Winslow Professor of Public Health, was the recipient of the C.-E. A. Winslow Medal in October. The medal, highest award of the Connecticut Public Health Association, honors the first chairman of the Department of Public Health at Yale. It is inscribed with the words, "For the betterment of the health of all peoples."

Dr. Joyce D. Gryboski, assistant professor of pediatrics, has been made a full member of the American Gastroenterological Association. Dr. Gryboski is one of four active pediatricians and one of three women to have membership in the organization.

Dr. José M. R. Delgado, professor of physiology, gave the Salmon Lectures at the New York Academy of Medicine in early December. His topic was "Electronic Pacing of Behavior." The lectureship is among the highest honors bestowed by the psychiatric community. In the same week Dr. Delgado also received the Myrtle Wreath Award from the women's Zionist organization, Hadassah. The award is given annually for outstanding achievement.

Dr. Morton M. Kligerman, professor and chairman of the Department of Radiology, was named president of the American Society of Therapeutic Radiologists, at their recent meeting in Chicago.

Dr. John A. Kirchner, professor and chief of the Section of Otolaryngology, has been appointed editor of the *Year Book of Ear, Nose and Throat*. He was also elected recently to the board of editors of *Annals of Otolaryngology, Rhinology, and Laryngology*. In October Dr. Kirchner received an Award of Merit at the annual convention of the American Academy



*Dr. Kirchner*

of Ophthalmology and Otolaryngology held in Chicago.

Dr. Arend Bouhuys, professor of medicine and epidemiology, has been appointed to serve on the Environmental Sciences Training Committee of the Division of Environmental Health Science of the U.S. Public Health Service. A European sojourn in the fall included attendance at the International Symposium on Body Plethysmography in Nijmegen, the Netherlands, where he presented a paper on techniques of measuring airway resistance and lung volumes with a body plethysmograph. From the Netherlands, Dr. Bouhuys proceeded to Alicante, Spain, to present material on respiratory function at the Second International Symposium on Respiratory Disease in Textile Workers. He presented field studies gathered over the previous year on byssinosis among hemp workers in that area in Spain. Dr. Eugenia Zuskin, a member of his staff at the Pierce Laboratory and a research associate in medicine, also reported on byssinosis and the incidence of this disease among U.S. cotton textile workers.

Dr. David Weinman, II, professor of microbiology, devoted the past summer to the investigation of trypanosomiasis of primates at the University of Indonesia. In collaboration with colleagues at the university, he did field work in Java and southern Sumatra, following up findings made the previous year on the occurrence



of trypanosomiasis among primates and the possible relation to infections in humans. Results of the investigation were reported at the Eighth International Congress on Tropical Medicine and Malaria held in Teheran in September.

Dr. Byron H. Waksman, professor and chairman of the Department of Microbiology, was the principal speaker at the second meeting of the new Société Française d'Immunologie held at the Institut Pasteur in Paris this fall. Dr. Waksman delivered his lecture on "Current Problems in the Field of Delayed Hypersensitivity" in French.



Dr. Waksman

Dr. Carl F. von Essen, associate professor of radiology, recently returned from an extended foreign tour during which he spent two months in Vellore, India, at the Christian Medical College Hospital, working on the study that is jointly sponsored by that institution, Yale, and the National Institutes of Health. This project involves clinical trials of chemotherapeutic agents and radiation on the large number of buccal mucosa cancers seen in that part of the world. Dr. von Essen also visited radiation therapy departments in hospitals in London, Manchester, Uppsala, Stockholm, Lund, Copenhagen, Hong Kong, and Tokyo. At the Karolinska Institutet in Stockholm he gave a lecture on "Epidemiological Studies in Oral Cancer."

Dr. Albert J. Solnit, director of the Child Study Center and professor of

pediatrics and psychiatry, participated in the twentieth anniversary program of the New Orleans Psychoanalytic Institute and in a joint meeting of the Western New England Psychoanalytic Society and the Boston Psychoanalytic Society in October. At both meetings, Dr. Solnit spoke on "A Psychoanalytic View of Youth Unrest." In November, he spoke at the Fifteenth Annual Institute of Child Psychiatry in a joint meeting of the Reiss-Davis Child Study Center and the Southern California State Chapter of the American Academy of Pediatrics. His address was entitled "The Troubled Child — A Pediatric Perspective."

Dr. Stephen E. Malawista, assistant professor of medicine, was a featured speaker at a meeting of the American Rheumatism Association in Atlanta, Georgia, in December. His address was entitled, "Colchicine, Vinblastine and Griseofulvin Are Bound to Cytoplasmic Protein, Not to Granules, in Leukocytes."

Dr. Theodore Lidz, professor and chairman of the Department of Psychiatry, gave the Frieda Fromm-Reichmann Memorial Lecture on November 15. His subject was "The Influence of Family Studies on the Treatment of Schizophrenic Patients."

Dr. Ira V. Hiscock, Anna M. R. Lauder Professor Emeritus of Public Health, delivered a paper before the World Health Section of the American Public Health Association meetings in Detroit in November. His message dealt with the translation of ideas into programs and the staffing and extension of health agencies toward more universal delivery of health services. During the same meetings, Dr. Hiscock addressed the International and Civil Affairs Health Society on "Health Problems and Opportunities in Vietnam." In addition, he has been appointed consultant to the Bernice P. Bishop Museum in Honolulu, Hawaii, and a member of the Connecticut Task Force on Clean Air and Clean Water.



Dr. Cook

Dr. Charles D. Cook, professor and chairman of the Department of Pediatrics, participated in the International Congress of Pediatrics which met in Mexico City at the end of November. In addition, Dr. Cook was re-elected secretary-treasurer of the American Pediatric Society and will continue serving as the representative of the American Pediatric Society to the Joint Council of National Pediatric Societies.

Dr. Harold O. Conn, associate professor of medicine, is on sabbatical leave and is visiting professor of medicine for the academic year at Washington University School of Medicine in St. Louis. Dr. Conn was recently elected to the Council of the American Association for the Study of the Liver.

Dr. C. Lee Buxton, professor of obstetrics and gynecology, visited the Maternal and Child Health Section of the World Health Organization in Geneva, Switzerland, in the fall as a special consultant in medical education. His five-week assignment was to assist in the development of a curriculum for the teaching of reproductive physiology in medical schools of emerging countries. An authority in the fields of fertility and family planning, Dr. Buxton has been responsible for the introduction of several important innovations in medical education.

Dr. Lawrence R. Freedman, associate professor of medicine, attended the Fourth Asian-Pacific Cardiology





Cantending captains, Drs. Jerome Beloff and Joel Alpert, shake hands amicably before their match in front of Polmer Stadium. Each directs a Family Health Care program, the former at Yale, the latter at Harvard.



Yale members, who were ardent though defeated were (rear row) Mike Cynaman, Robert Marier, John Blanton, Dr. E. Richard Weinermon, Geoffrey Kane, David Barry, and Dr. Beloff and (front row) Mrs. Beloff, Not Giglio (nutritionist), Garcia Barry, Roberta DiNoto (public health nurse), and Beth Johnston (health aide).

Congress in Tel-Aviv and Jerusalem, at which time he presented a paper on "The Epidemiology of Urinary Infections in Hiroshima, Japan, and their relation to Blood Pressure Levels and Chronic Pyelonephritis." He also spoke at Tel-Hashomer Hospital in Tel-Aviv and Hadassah Hospital in Jerusalem.

Dr. Joseph R. Bertino, associate professor of pharmacology and medicine, has been made chairman of the Pharmacology and Therapeutics B Study Section of the National Institutes of Health for this academic year.

Dr. Kenneth Keniston was a representative at the International Conference on Rebellion in the University at Villa Serbelloni, Bellagio, Italy. The conference, which was held at the end of November, was sponsored by the Rockefeller Foundation.

Dr. Donald C. Riedel, associate professor of public health, has been appointed a member of a National Advisory Committee to the Council of Teaching Hospitals-Association of American Medical Colleges Information Center. The Council is studying the possibility of establishing a teaching hospital information center as well as the development of

a means for disseminating the constantly changing body of information to those involved in the administration of teaching hospitals.

### Sporting News

On the same Saturday when many a sports fan was travelling from New Haven to Cambridge to view what has come to be known as "The Game," another stirring intercollegiate touch football scrimmage met in the same general locale some two hours earlier with the team of the Yale Family Health Care Program matched against the staff and students of an analogous comprehensive care program at Harvard. In a confrontation marked by informality, minimal rules, and some rather unorthodox switching of players from one team to the other, the Harvard squad finally eked out a 6-0 decision. Several disgruntled Yalies were understood to have spread the rumor that the Harvard team had devoted time to practicing football over the preceding few weeks while the Elis busily practiced comprehensive medicine. The Cantabs of Comprehensive Care insisted, however, that they played well and had earned their laurels honestly.

Following the game, a picnic lunch

was held on the field outside the stadium for all participants and their guests. Talk turned to a comparison of medical care programs and experiences in Boston vis à vis New Haven.

Organizers of this first annual encounter were Dr. Jerome Beloff, director of the Family Health Care Program at Yale and assistant professor of public health and pediatrics, and Dr. Joel Alpert, director of the comparable program in Boston and also on the pediatric staff at Harvard. Both programs are demonstrating, teaching, and conducting research in the use of health teams of medical and allied medical personnel for the delivery of comprehensive health care to family units. Proof of the practical value of these programs is the fact that burgeoning neighborhood health centers across the country are applying many of the techniques, first developed in the programs, to the care of thousands of patients and their families.

### Dr. Deming Establishes Visiting Professorship

Dr. Clyde L. Deming, clinical professor emeritus of urology, has established a visiting professorship in urology at Yale. The first incumbent

was Dr. J. Hartwell Harrison, Elliott Carr Cutler Professor of Surgery at Harvard and chief of the section of urology at Peter Bent Brigham Hospital, who spoke on October 28 on "Surgery of the Adrenals."

Dr. Deming, a resident of Hamden, Connecticut, received his M.D. degree from Yale in 1915. After completing residency requirements in surgery and urology at Yale and Johns Hopkins, he returned to Yale as a member of the faculty. He was made an assistant professor of surgery in 1921, associate clinical professor in 1924, and professor of urology in 1929. He was named clinical professor of urology in 1932 and received emeritus status in 1954.

#### **Journal Honors Dr. Long**

*The Yale Journal of Biology and Medicine* has dedicated its second issue of the academic year, 1968-69, to Dr. C. N. H. Long, Sterling Professor of Physiology. Guest editor of the dedication number is Dr. Philip K. Bondy, C. N. H. Long Professor of Medicine and chairman of the Department of Internal Medicine.

The first feature in the issue is an appreciation of Dr. Long by Dr. Bondy, characterizing the former's many years of dedicated leadership at Yale as chairman of the division of biological sciences of the university, as dean of the medical school, as a triple threat department head (physiological chemistry, physiology and pharmacology), and as a man.

The contents also includes a complete bibliography of Dr. Long's publications, together with seven articles written by former associates and students, detailing research initiated or stimulated by Dr. Long's interest in the fields of physiology, endocrinology, and chemistry.

#### **Taylor Award to Dr. Casals**

Dr. Jordi Casals, professor of epidemiology, received the Richard M. Taylor Award of the American Committee for Arthropod-borne Viruses at the meeting of the American So-

ciety of Tropical Medicine and Hygiene, held in Atlanta, Georgia, at the end of October.

The award, which was established in 1967 by Abbott Laboratories, is presented for outstanding contributions in the field of arthropod-borne viruses. Dr. Richard M. Taylor, the first recipient of the award, was for many years on the staff of the International Health Division of the Rockefeller Foundation. On retirement, he was instrumental in establishing a research unit at Yale and a similar activity at the University of California at Berkeley.

Dr. Casals, a native of Spain and a graduate of the Medical School of the University of Barcelona, came to the United States in 1936 as a visiting investigator at the Rockefeller Institute. Except for two years in the Department of Pathology at the Cornell Medical College, he served with the Rockefeller Institute until 1952 when he became a staff member of the Rockefeller Foundation Virus Laboratories. He was appointed to the Yale faculty when the laboratories moved to New Haven.

A prolific author in the field of virological serology, Dr. Casals has done extensive research on tick-borne viruses and other ungrouped arborviruses.

#### **Rogowski Memorial Lecture Inaugurated**

Dr. F. Houston Merritt, dean of the College of Physicians and Surgeons of Columbia University and professor of neurology, delivered the first Bernard A. Rogowski Memorial Lecture on October 29. The subject was "The Treatment of Parkinsonism with L-DOPA."

The Rogowski Memorial lectureship has been endowed by friends and colleagues of the late Dr. Bernard A. Rogowski, who at the time of his death in 1967 was associate clinical professor emeritus of neurology. A graduate of Yale College in 1920 and of the Yale School of Medicine in 1924, he had practiced

neurology and psychiatry in New York since 1928.

#### **Two Join School of Nursing In Expanded Program**

Eileen G. Hasselmeyer, noted authority in the field of perinatal and pediatric nursing, has been appointed Annie W. Goodrich Professor of Nursing, and Audrey McCluskey, formerly of the Cornell School of Nursing, has joined the faculty of the Yale School of Nursing as associate professor in charge of a new program in public health nursing.

Public health nursing is the third specialty program to be developed in recent years at the school, the other two being psychiatric nursing, and maternal and newborn health care.

Professor Hasselmeyer is on leave from her post as acting director of the Perinatal Biology and Infant Mortality Branch of the National Institute of Child Health and Human Development (NICHD) and holds the rank of Nurse Director in the United States Public Health Service Commissioned Nurse Corps. She has been associated with the Children's Medical Service of Bellevue Medical Center and with the Division of Nursing Resources of the USPHS. Throughout her career, Miss Hasselmeyer has been concerned with pediatric metabolism and nutrition and the behavior and well-being of premature infants. During her stay in New Haven, in addition to lecturing, she will work with personnel at the newly opened fetal intensive care unit in the Yale-New Haven Medical Center and will continue research into the scientific foundations of perinatal nursing.

Miss McCluskey has specialized in nursing education and nursing service. In addition to teaching at the Cornell-New York Hospital School of Nursing, she was also director of the hospital's maternity and gynecologic service. She has been associated with the National League for Nursing and the Visiting Nurse Service of New York, and was assistant



director of the Visiting Nurse Association of New Haven when she assumed her present post. She is co-author of a widely used textbook, *Medical-Surgical Nursing*, which has been translated into several foreign languages and is a principal educational resource for nurses in many countries.

### A New Look to Genetics

The Departments of Medicine and Pediatrics have combined forces to organize a Division of Genetics embracing all ages from the fetus to old age. This section, which is under the direction of Dr. Leon E. Rosenberg, associate professor of pediatrics and medicine, includes pediatricians and internists whose interests comprise the detection of abnormal chromosomal patterns, screening for inherited defects, and the biochemical and physiological investigation of the nature of these defects.

A number of important research projects are now under way, including evaluation of the chromosome pattern of all babies born in the Yale-New Haven Hospital during the past year, a project being undertaken by Drs. Herbert A. Lubs and Francis H. Ruddle; investigation of the nature of the transport defects in renal glycosuria and in the amino acid ureas; a study in the isolated cells of tissue culture from patients of the nature of the biochemical defect in diseases involving the intermediary metabolism of amino acids and purines. In addition, the group staffs a clinic for patients with genetic diseases and offers counselling.

Both in its spread of interest and in the range of age of the patients it serves, this group is virtually unique in American academic medical institutions.

### Grover Powers Day Planned

An all-day program at the School of Medicine on Wednesday, March 26, will honor the memory of the late Dr. Grover F. Powers, professor emeritus of pediatrics, who died last April. All alumni and faculty mem-

bers and many colleagues and friends of Dr. Powers are being invited to attend the event which will include presentation of the Grover F. Powers Lecture by Dr. Charles U. Lowe (Yale M.D. '45) of the National Institutes of Health. Other speakers will include Dr. Harry S. Gordon, dean of the Albert Einstein College of Medicine, and Dr. Myron E. Wegman (Yale M.D. '32), dean of the School of Public Health at the University of Michigan.

comparatively short length—57 pages—would indicate. Dr. Lidz has described his purpose as being “to provide medical students with guide for learning about the person who will be their patients,” and add that he hopes the book “may be of value to persons who are simply interested in the proper study of mankind.”

In a time of medical specialization when the need for interdisciplinary and cross-cultural exchanges is as

*Dr. David E. Rogers, Dean of the Johns Hopkins University School of Medicine, spoke on staphylococcal diseases in the Fitkin Amphitheater in December when he came to the medical school as Poul B. Beeson Visiting Professor of Medicine. House staff, students, and medical faculty also had the opportunity to meet informally with Dr. Rogers. The Beeson Professorship, honoring the former chairman of the Department of Medicine, was established to enable distinguished physicians to spend several days at the Yale-New Haven Medical Center.*



### Mental Health Center Dedication Talks Available

“The University and Community Mental Health” is a published collection of the papers delivered at the dedication of the Connecticut Mental Health Center on September 30 and October 1, 1966. A limited supply of copies is available free on a first-come first-served basis. Requests should be addressed to Mrs. Ruth Backes, Office of Public Relations, Connecticut Mental Health Center, 34 Park Street, New Haven, Connecticut 06508.

### New Books

THE PERSON: HIS DEVELOPMENT THROUGHOUT THE LIFE CYCLE by Dr. Theodore Lidz, professor and chairman of the Department of Psychiatry (Basic Books). The scope of this volume is far greater than its

great as at any previous period, this examination “of the nature of human nature” will also serve as a valuable resource for students of clinical and social psychology, for nurses, social workers, attorneys, and other counselors.

*The Person* treats man in the total context of his biological and cultural inheritance — as individual, member of a family, and member of society — and it describes his development from infancy to old age. Dr. Lidz draws on the insights of dynamic psychiatry and psychoanalysis, the cognitive theories of Jean Piaget, and the evidence of the biological and behavioral sciences, yet Dr. George Krupp, writing in the November *Saturday Review*, describes the results as being for the most part “free of professional jargon and narrow, doctrinaire thinking.”



Professor Lidz, he continues, "never permits theory to take precedence over existence; he is keenly aware of the vast range of patterns of human behavior, reflecting as they do individual adaptations to physical, biological and cultural circumstances... Abhorring reductionism, Professor Lidz stresses the crucial importance of early life experiences in shaping the individual's unique destiny but places equal stress on the importance of later experiences... [He] takes a consistently calm, reassuring and judicial approach to human development."

**THE FIRSTBORN: EXPERIENCES OF EIGHT AMERICAN FAMILIES** by Dr. Milton J. E. Senn, Sterling Professor of Pediatrics and Psychiatry, and Claire Hartford, former associate in research at the Child Study Center (Harvard University Press). In this engrossing book on family dynamics, Dr. Senn and Mrs. Hartford have examined with great care the major forces that are in operation in the emergence of family reciprocal values. The effect of the introduction of a firstborn on the family is scrutinized in all its variables — child and father, child and mother, and mother and father in relation to their neonate.

This study, undertaken with financial assistance from the Commonwealth Fund and with technical assistance from the Child Study Center staff, sets out its general area of discussion in the initial chapters and presents summaries and conclusions in the final ones. The main body of the volume is a comparative study of the lives of eight New Haven families, a lengthy chapter being devoted to each. Material includes their environments — the financial, social, and cultural influences — from a period predating the birth of the child to the time when the offspring reaches the age of two. The family patterns and ideals are kaleidoscopic in nature — the same elements changing, merging, and emerging to deal with circumstances and devel-

oping abilities. The book presents a lucid and interesting view of maturation on several levels. It is well worth picking up and very difficult to put down.

**THE DOCTOR AND THE ATHLETE** by Isao Hirata, Jr., M.D., clinical associate in surgery and surgeon in chief at the Department of University Health (J. P. Lippincott Company). Twelve years of experience as team physician for intercollegiate athletics at Yale has given Dr. Hirata ample opportunity to consider the problem of disabilities incurred in contact sports, their treatment and their prevention.

The first half of the book deals with broad guidelines on conditioning, diet, and equipment plus general medical principles which distinguish the problems facing the physician on the field from those of the clinical physician. Starting with the basic premise that "no athlete can be permitted to risk permanent aggravation of existing disability whatever the circumstances," Dr. Hirata discusses the quick judgments that must be made at the time of injury in the face of exerted outside pressures. The remaining half of the book covers specific injuries and treatment.

Several carefully worked orthopedic drawings which illustrate particular material in the text have been executed by the author.

With the increasing interest in physical fitness and team sports both in secondary schools and in colleges, much of the information outlined in this book might be read with great benefit by doctors, coaches, and team members.

**PRIMITIVE NERVOUS SYSTEMS** by Thomas L. Lentz, assistant professor of anatomy (Yale University Press). Dr. Lentz offers a careful investigation into evolutionary biology with particular reference to the origin and nature of the primitive nerve cell and the primitive nervous system. In response to recent findings in neurophysiology and electrophysiology, the author has examined the

structure and functional characteristics of nerve cells and systems of the lowest order of invertebrates in an effort to clarify basic mechanisms. The result is a new hypothesis to explain how the primitive nerve cell arose, the nature of the primitive nervous system, and its subsequent evolution. The text is enhanced by over twenty drawings showing details of cell structure and by an extensive list of references for further study.

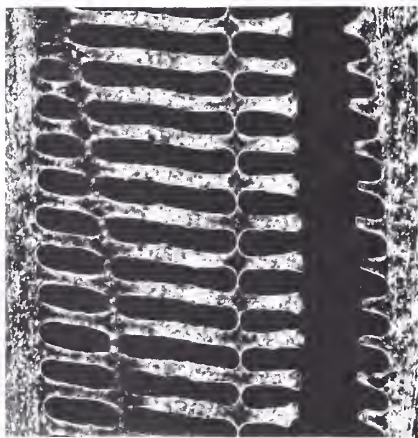
**REVOLUTIONARY IMMORTALITY: MAO TSE-TUNG AND THE CHINESE CULTURAL REVOLUTION** by Robert Jay Lifton, professor of psychiatry (Random House). The vision of the revolutionary and the means he uses to attain that vision are as complex and difficult to assess as the human mind and the course of human history. One approach is that of the psychohistorian, whose discipline permits him to study the relationship between individual psychology and historical change. Robert Jay Lifton, in an analysis of Mao Tse-tung and the Chinese revolution, has undertaken such an approach with results that have been hailed as brilliant.

Eliot Fremont-Smith, writing in the *New York Times* of October 30, 1968, describes Professor Lifton's latest work (he has also written *Death in Life: Survivors of Hiroshima*, 1968, and *Thought Reform and the Psychology of Totalism: A Study of "Brainwashing" in China*, 1963) as "one of the year's most important." It is, he says, "an essential study of Communist China; more than that, it is an original, intellectually exciting, gracefully written and wholly accessible essay on an aspect of human individual and mass psychology as it operates in contemporary revolutionary circumstances around the world."

Equally enthusiastic, John K. Fairbank, Director of the East Asian Research Center at Harvard, calls the book "a brilliant study, without peer in the copious China literature. Whether it results from Lifton's be-

ing so well trained or from his being merely a genius (probably both), it puts much-studied events in a new framework of psychological interpretation."

In discussing the contribution of psycho-history Dr. Fairbank asks, "Does it require a psychiatrist to tell us that Mao the dictator has gone off the deep end and his people are becoming fed up with him? On the whole, I think the answer is yes. We do need the insights of professional psychology to develop and sophisticate our everyday common-sense impression. The picture revealed by the psycho-historian is not unfamiliar to us in outline, but it is much sharper in focus, more specific and more reliable."



This is an electron micrograph of a biological interference filter that causes a colored reflectance originating deep in butterfly eyes. The micrograph, which was the cover picture on the November 15, 1968, issue of *Science*, is from the research of Dr. William H. Miller, associate professor of physiology, and Dr. Gary D. Bernard, assistant professor of ophthalmology and engineering. The issue included an article entitled "The Optics of Insect Eyes" contributed by Drs. Miller and Bernard, along with J. L. Allen, a group leader at Lincoln Laboratory, Massachusetts Institute of Technology.

### Stanley Huntington Davis, Jr.

The Yale medical community mourns the loss of a beloved friend and a key member of the administrative staff. Stanley H. Davis, Jr., associate comptroller for medical affairs, died on December 11th at the age of 48. He had guided the fiscal course of the School of Medicine for eighteen



Mr. Davis

years, serving with steadfast loyalty under Deans Long, Lippard, and Redlich.

Mr. Davis was born in Everett, Massachusetts. He attended the Boston Latin School and graduated from Boston College in 1943. During World War II, he served with the Air Force. He received his M.A. degree from Columbia University in 1946.

Prior to joining the staff of the Yale Treasurer's Office in 1947, he was associated with the Office of Naval Research in New York City. In 1950 Mr. Davis was appointed business manager of the Yale School of Medicine, and in 1965, was promoted to the newly created position of associate comptroller for medical affairs.

In spite of the difficult and demanding tasks which Stan faced daily, he was always ready and willing to assist members of the faculty and administrative staff with problems large and small. He continuously searched for ways to stretch the financial resources of the school. He cared, and because he cared, he contributed immeasurably to the growth and stability of Yale's program of medical education and research.

Although Stan worked tirelessly and seemed to thrive on complicated budgets and complex financial problems, he enjoyed life. He was active in community and civic affairs and was a member and past-president of the Civitan Club and a trustee of the Connecticut Division, American Cancer Society. He played tennis, squash,

and was an enthusiastic sailor, but first and foremost, he was devoted to his family. He is survived by his wife, Pauline Elliott, a son, Gregg, and a sister.

In his memory, the Stanley H. Davis Fund for Leukemia Research has been established at the School of Medicine.

### Henry Eisenberg, M.D.

Dr. Henry Eisenberg, lecturer in public health at Yale and chief of the Chronic Disease Control Section of the Connecticut State Department of Health, died on November 2 at the age of 63.

Dr. Eisenberg, who was born in Germany in 1905, came to the United States in 1934, having done both undergraduate and graduate work at Frederick Wilhelm University in Berlin. He received the B.S. degree in 1925 and the M.D. degree in 1930.

Before coming to Connecticut he was attached to the chest division, Montefiore Hospital, and was Chief of the Cardiovascular Disease Section at Beekman Hospital, both in New York City.

During World War II and the years following, he was associated with the U.S. Public Health Service in research, clinical, and administrative capacities. He took his M.P.H. degree at Yale in 1957.

He is survived by his wife, the former Esther Steinberg, and a daughter.

### Nicholas J. Giarman, Ph.D.

Professor Nicholas J. Giarman, a much beloved member of the Department of Pharmacology, died on October 10, 1968. At the time of his death Professor Giarman was on sabbatical leave from Yale with a joint appointment in the Departments of Psychiatry and Pharmacology at Stanford University in California.

Born in Albany, New York, he was graduated *cum laude* from New York State College in Albany in 1941 and received his Ph.D. in 1948 from the Yale Graduate School.





Dr. Giarman

Before coming to New Haven, Professor Giarman was assistant biochemist at the Sterling-Winthrop Research Institute for several years. After completing his graduate work, he joined the staff of E.I. duPont de Nemours Company as chief pharmacologist.

He left the duPont Company in 1949 to return to Yale as an assistant professor of pharmacology. He became an associate professor in 1955 and was appointed to the rank of professor in 1960.

During the academic year of 1954-1955, Professor Giarman served as an exchange lecturer at the University of Edinburgh in Scotland.

He was internationally renowned for his work on neurotransmitters and the effects of psychotropic drugs on the brain and had participated in many international symposia. He had

contributed extensively to scientific journals and texts and was the editor of *Biochemical Pharmacology*.

At a recent meeting of the Board of Permanent Officers of the medical school, its members passed a memorial resolution which reads in part: "RESOLVED THAT the members of the Board of Permanent Officers are deeply shocked by the untimely death of our esteemed colleague Nicholas J. Giarman. Many of us will remember him as an outstanding teacher, others of us will remember him as an accomplished scientist, but all of us will miss him . . . Many of the junior as well as the senior members are better teachers today because of (his) vast knowledge of pharmacology and because of the gentle and understanding way in which he taught them to teach . . . He brought international credit to himself and the university by his scientific accomplishments in neuro- and psychopharmacology. The impact of the investigations of . . . his graduate students and the postdoctorate fellows who came from all parts of the world to study with him is profound and internationally recognized . . . His loss will be particularly felt by those of us who knew him for the human being that he was. He was not only keenly intelligent but also a man full of compassion and understanding. He was gentle yet firm in matters that involved integrity and justice.

Nick Giarman was a man — a really great man — and the tragedy of his loss will be felt by the members of the Board of Permanent Officers and by others for years to come."

Professor Giarman is survived by his parents and his wife, the former L. Muriel Schlegel of New Haven, and two sons, Scott Nicholas and Richard Keith.

#### **William S. Perham, M.D.**

Dr. William Sidney Perham, associate clinical professor of orthopedic surgery and chief of orthopedic surgery for the Department of University Health, died on August 1, 1968, at the age of 62. He was also chief of orthopedic surgery at St. Raphael's Hospital.

Dr. Perham was born in Augusta, Maine, in 1905. A graduate of the University of Michigan, he received his M.D. degree in 1932 from that institution. He served both his internship and residency at the University Hospital in Ann Arbor and was also an instructor on the medical faculty.

He joined the faculty of the Yale School of Medicine in 1937. During World War II, he held the rank of captain in the U.S. Army and served with the 39th General Hospital in the Marianas and New Zealand.

He is survived by his wife, the former Helen Gross, two sons, and two daughters.

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## MEDICAL ALUMNI DAY

SAVE THE DATE

Saturday, May 24, 1969



# Ob/Gyn Alumni Gather

It was with no pain at all that the Department of Obstetrics and Gynecology gave birth — and life — to a new kind of alumni reunion. Former members of the house staff, local practitioners and members of the faculty and their wives convened for a whirlwind two-day program of activities, both professional and social.

Invitees came from Winston-Salem and Seattle, from Ontario and Glendale and cities in between to view new facilities, discuss new findings, and see old friends.

First on the morning agenda of Friday, October 18, was a tour of the hospital facilities, including the newborn special care unit, the fetal intensive care unit and the department seminar room with its closed circuit television equipment for viewing operative techniques.

A break for a buffet luncheon in the Laboratory of Clinical Investigation was followed by an afternoon of

scientific sessions led by Drs. Edward Quilligan, John Morris, and Nathan Kase from the Yale faculty and by Drs. Raymond Vande Wiele, Walter Herrmann and Philip Sarrell, invited guest speakers. Wives, meanwhile, were expeditiously transported across campus by bus to Yale's art gallery and rare book library in a planned tour.

Participants and wives met once again for cocktails and dinner at the New Haven Country Club at a gala party for eighty-seven.

Saturday morning sessions were led by Drs. C. Lee Buxton and Clarence Davis and capped by a luncheon at the home of Dr. and Mrs. Buxton in Hamden. There, the reunion was officially concluded though many of its members went on to attend the Yale-Columbia game.

Prognosis for a repeat in the near future: highly likely.



East and West meet as former Ob/Gyn house staff members convened. Dr. Stanley Zerne, '59, of Glendole talks with Dr. Gilles Hurteou, '61, of Ontario and Dr. Ernest Kohorn, '66, of New Haven.



Enjoying the buffet luncheon on the roof garden at the Laboratory of Clinical Investigation: (Above left) Dr. George Couch, '59, Watertown, New York; Dr. Richard Banfield, Jr., '57, Stamford, Connecticut; Mrs. Couch; and Mrs. Robert Miller, Pomus, New Jersey, whose husband's house staff class is '58. (Below) Dr. John Mutterperl, '63, Danvers, Massachusetts; Dr. Stewart Stringfellow, '62, Guilford, Connecticut; and Dr. Ferenc Husvet, '64, Winsted, Connecticut. Visible behind them is Helen Kelly, nursing supervisor for labor and delivery, who is well known to many generations of Ob/Gyn house staff at the Yale-New Haven Hospital.

# Alumni News

**1892**

We reproduce in full a letter recently received from J. HENRY SPEAR and addressed to Dean Redlich: "Thank you and every one in your office for the 'Yale Medicines' which I received this morning. It is very kind and thoughtful of you. I shall derive much pleasure in reading them. I understand that I am the only living member of the Class of 1892, Yale Medical School. I am in my 98th year, shall be 98 next August. My best wishes for the coming holiday season." Dr. Spear is at the Fanny Crosby Home, 1088 Fairfield Avenue, Bridgeport, Connecticut 06605.

**1922**

CHESTER E. HURWITZ, in the practice of ophthalmology, has moved his office to 3701 Clarks Lane, Baltimore, Maryland 21215.

**1925**

THOMAS FRANCIS, JR. delivered the Ludwig Aschoff Memorial Lecture at a meeting of the Freiburg Medical Society in Freiburg, Germany, this summer. The subject of his lecture was "Factors Affecting Immunity to Viral Respiratory Diseases." In conjunction with his lecture, Dr. Francis was awarded an honorary degree of Doctor of Medicine by the faculty of medicine of Freiburg. The award cited his contributions in the field of respiratory disease with particular mention of his investigation of influenza. Dr. Francis is on the faculty of the School of Public Health at the University of Michigan.

**1930**

J. ROSWELL GALLAGHER, clinical professor of pediatrics at Yale, was recently appointed to the National Advisory Committee on Dyslexia and Related Reading Disorders by Secretary of Health, Education, and Welfare Wilbur J. Cohen. As former chief of the adolescents' unit of the Children's Hospital Medical Center of Boston, Dr. Gallagher has long been concerned with the medical and psychological disorders related to learning skills.

**1931**

YALE DAVID KOSKOFF, chief of the Department of Neurosurgery at

Montefiore Hospital in Pittsburgh, has co-authored a book with Richard Goldhurst entitled *The Dark Side of the House*, published by Dial Press. The authors dramatically chronicle the case history of Millard Wright, a long-time burglar who became a patient of Dr. Koskoff's when the surgeon agreed to perform a frontal lobotomy on him in an effort to substitute "anatomical loss for a behavioral gain." It is effective in detailing both doctor and patient's confrontation with the press, the law, medical colleagues, and society as well as the growing interdependence between doctor and patient-criminal from their pre-operative relationship to Wright's ultimate post-operative suicide.

**1938**

N. WILLIAM WAWRO received the highest award of the Connecticut Division, American Cancer Society, at their annual meeting this fall. He was presented with a bronze medal and an accompanying citation for his many contributions to cancer control. Dr. Wawro is currently senior surgeon at Hartford Hospital and consultant to a number of other Connecticut hospitals including the Newington Veterans Hospital, the Litchfield County Hospital, the Norwalk Hospital, the Institute of Living and St. Francis Hospital in Hartford.

He is a member and former president of the New England Cancer Society and of the Connecticut Division, American Cancer Society, and a medical delegate to the Society's House of Delegates. In addition, he is vice-president of the New England



Dr. Wawro

Surgical Society and a member of several professional organizations including the Connecticut Society of American Board Surgeons, the Hartford Medical Society, the Hartford County Medical Society and the Society of Head and Neck Surgeons.

**1941**

SOPHIA CHAMBERLIN ALWAY and her husband, Dr. Robert H. Alway, of Portola Valley, California, hosted a gathering of Bay Area Yale alumni at their home in November. JOSEPH P. CARSON, JR., was among those present to hear Robert L. Hart of the Medical School Development Office discuss the Alumni In Medicine Campaign.

**1942**

CHARLES F. SCHOLHAMER has a son by the same name in the present first-year medical class at Yale. According to Dr. Scholhamer, when the class was asked at the beginning of the year to present their microscopes to be checked over, Charles, Jr., brought in the scope his dad had used in medical school thirty years ago. And it turned out that one of young Charles' classmates, Ruth Lasell, had a microscope that had been to Yale at about the same time with her father, SIDNEY LASELL ('41).

**1943**

ROBERT F. BRADLEY has joined the faculty of the Harvard Medical School as assistant clinical professor of medicine. Dr. Bradley is also a staff physician at the New England Deaconess Hospital and the Joslin Clinic, and is currently secretary of the Association of Yale Alumni in Medicine. His home address is 19 Falmouth Road, Wellesley Hills, Massachusetts 02181.

Distance being no deterrent for him, the month of September found ROCKO FASANELLA participating at a meeting in Johannesburg. At the first South African International Ophthalmological Meeting, he joined in a session on anterior segment surgery. In October Dr. Fasanella spoke at the Los Angeles Society of Ophthalmology, and presented two courses at the American Academy of Ophthalmology and Otolaryngology in Chicago. November yielded an address before the annual meeting



of the Nova Scotia Society of Ophthalmology and Otolaryngology in Halifax.

#### 1943 March

LYCURGUS MICHAEL DAVEY has been promoted to associate clinical professor of neurological surgery on the faculty of the Yale School of Medicine.

#### 1944

ROBERT E. COOKE is editor of *The Biologic Basis of Pediatric Practice*, a compendium of information in the field of pediatrics. It is published by the Blakiston Division of McGraw-Hill and includes contributions from more than 140 specialists in the broad area of child health and disease. Emphasis is placed on the interactive aspects of behavior and health as well as on the existing differences between adults and infants. Dr. Cooke is chairman of the Department of Pediatrics at Johns Hopkins University School of Medicine.

#### 1949

WILLIAM G. ANLYAN has been elected chairman of the council of deans of the Association of American Medical Colleges. The council deals with developments affecting the top level of administration in medical schools. Dr. Anlyan, a professor of surgery, was named dean of the medical school at Duke University in 1964.

GORDON D. JENSEN is head of the Regional Primate Center at the University of Washington. His picture recently appeared in a national medical journal together with other interested doctors, admiring some rare offspring under their care—newborn orangutan twins.

#### 1953

REX B. CONN, JR. has been named to head the newly reorganized department of laboratory medicine at the Johns Hopkins Hospital. He has also received an appointment as professor of laboratory medicine in a recently created division of the Department of Pathology.

In connection with his new appointment, Dr. Conn will be in charge of the hospital's clinical laboratories with a staff of more than 200 persons. He also has plans for the



Dr. Conn

formation of a school of medical technology and a residency training program in clinical pathology.

Before he joined the Johns Hopkins medical school, Dr. Conn had been professor of pathology and director of clinical laboratories at the West Virginia University Medical Center for several years.

#### 1956

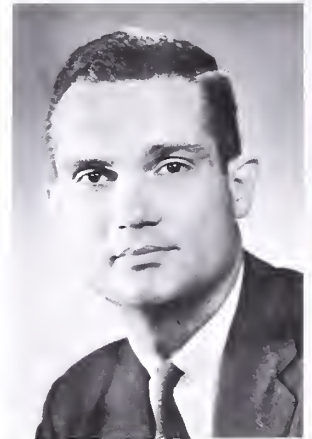
WILLIAM H. HINDLE, presently on the obstetrics-gynecology staff of the Straub Clinic in Honolulu, reports that he was initiated into the American College of Surgeons, meeting in Atlantic City, New Jersey, during which proceedings he talked with classmate GEORGE GREEN of New York City and LOUIS DEL GUERCIO, ('53), of Larchmont, New York. Another member of the class of '53 was represented more remotely in a live ciné clinic from Johns Hopkins during which VINCENT GOTT, associate professor, did open heart surgery. Dr. Gott, incidentally, performed the first heart transplant at Johns Hopkins.



Dr. North

A. FREDERICK NORTH, JR. has been appointed to the newly created post of associate director for ambulatory patient services at Children's Hospital in Washington, D.C. In addition he will serve as senior attending pediatrician there and as associate professor of pediatrics at George Washington University School of Medicine. Until recently Dr. North had been associated with the Office of Economic Opportunity as senior pediatrician.

DONALD R. SPERLING has recently been appointed vice-chairman of the Department of Pediatrics at the University of California, Irvine College of Medicine. He is also an assistant professor. Dr. Sperling has been on the faculty at U.C.I. since 1965 and is a specialist in pediatric cardiology. He served his internship at Johns Hopkins and his residency and graduate study at Children's Hospital of Los Angeles.



Dr. Kissick

#### 1957

WILLIAM L. KISSICK has been appointed professor and chairman of the Department of Community Medicine at the University of Pennsylvania, a new department which will be concerned with the sociological and economic aspects of the delivery of medical care. In this capacity, Dr. Kissick will be responsible for teaching and research in the area of community health needs and in this multi-discipline field, he will lecture in both the Wharton School of Finance and the School of Medicine.

Dr. Kissick holds four Yale degrees. In addition to his B.A. and M.D., he earned an M.P.H. in admin-



istration and a D.P.H. in epidemiology and served his internship at the Yale-New Haven Medical Center. After a residency in social medicine at Montefiore Hospital in New York City, he joined the President's Commission on Heart Disease, Cancer and Stroke, forerunner of the Regional Medical Programs, in Washington, D.C. His assignments in Washington also involved him in the planning and development of comprehensive health planning legislation, OEO funding for neighborhood health centers and health manpower resources. In 1967 he was appointed executive director of the President's National Advisory Commission on Health Facilities.

**1961**



*Dr. Arndt*

**KENNETH A. ARNDT** has been appointed to associate in dermatology at Harvard Medical School. He also serves as an associate in dermatology at Beth Israel Hospital. Dr. Arndt lives at 26 Van Roosen Road, Newton Centre, Massachusetts 02159.

**JOHN E. FENN** has opened an office in New Haven in association with Donald B. Alderman for the practice of vascular surgery. Their office address is 100 York Street.

**1962**

**OLIVER T. DANN** has opened an office for the practice of psychiatry at 58 Trumbull Street in New Haven.

**1963**

**JAMES G. WEPSIC** has been appointed research fellow in surgery at Harvard and is associated with the Massachusetts General Hospital. Dr. Wepsic lives at 10 Bickford Avenue, Roxbury.



*Dr. Grossman, wearing a curta, infarmal Indian garb, inspects Buddhist sculpture at Ajanta Caves, Maharashtra, India.*

**1965**

**WILLIAM GROSSMAN** is serving his residency at Peter Bent Brigham Hospital in Boston and will be a fellow in cardiology there next year. He reports that he and his wife, Melanie, have returned from a two-year hitch in New Delhi where he served as a Peace Corps physician. While in India, their daughter Jennifer, now two years old, was born. With the passage of time she seems to be forgetting her Hindi.

**1967**

**RALPH G. MAURER** completed his internship at the Vancouver General Hospital last June and is now serving a residency in psychiatry at the Stanford University Medical Center in Palo Alto, California.

**JOSEPH F. WALTER**, a lieutenant in the Naval Reserve, writes: "I am currently on active duty with the U.S. Navy as a destroyer squadron medical officer. The job is rather relaxing after the hectic days of internship. A squadron 'MO' has charge of medical matters for a group of about six destroyers and presently I'm aboard the USS Horne deployed in the western Pacific, usually in the Gulf of Tonkin. The travel is certainly the Navy's distinct advantage. So far we've been to Hawaii, Guam, the Philippines, Japan, Taiwan, Hong Kong, Singapore, Australia and Pago Pago. We're home-ported in San Diego and hope to return some time in late December after a six months' cruise."

## Public Health

**1927**

**LOUIS DE ANGELIS** was the recipient of the 1968 Columbus Award. Given annually, this award for outstanding citizenship was presented at the Harvest Ball, sponsored by the Eastern Connecticut Chapter, Boys' Town of Italy and the Italian-American Civic Association of New London. The citation specifically noted Dr. De Angelis's interest in scouting and athletics and his work as school physician for the City of New London, Connecticut.

**1935**

**FRANKLIN M. FOOTE** has been appointed to the Board of Directors of the National Conference on Social Welfare. He is Commissioner of Health of the State of Connecticut and president of the Connecticut Academy of Preventive Medicine.

**1936**

**M. ALLEN POND** retired from the U.S. Public Health Service in October as Assistant Surgeon General for Special Projects. He is now a professor at the University of Pittsburgh School of Public Health and will offer a graduate seminar in the politics of health in January.

**1947**

**EDNA MILLER FINBERG**, having served as writer and dental consultant for four years, has become dental director of the L. W. Frohlich Co., Inc., in New York.

**1950**

**IDA M. BUCHER** and husband, **BILL BUCHER** (M.D. '50), have five children. Sharon is a junior at Smith; Katrina, a freshman at Whitman; Bill, a junior at Loyola Prep; and Patrick and Melina are in grade school. Bill continues at Los Angeles Childrens Hospital (University of Southern California Pediatric Department) and Ida is a consultant to the California Head Start program.

**1958**

**PHILIP B. HALLEN** has been appointed to the Planning Committee of the 1970 White House Conference on Children and Youth. He is cur-

rently president of the Falk Memorial Fund in Pittsburgh, Pennsylvania.

**1959**

KENNETH J. WILLIAMS has been appointed director of medical affairs for the Catholic Hospital Association, St. Louis, Missouri, as of February, 1969. At that time he will be in charge of hospital-medical staff relations for the association's 900 health care facilities.

**1964**

LINDA A. GEORGE had an article published in the June issue of *Social Science and Medicine*. Her husband, ROBERT C. GEORGE (M.D. '66), is a surgeon with the U.S. Air Force at Griffith Air Force Base, Rome, New York. A daughter, Allison Carr, was born to the Georges on June 5.

**1964**

CARTER L. MARSHALL will be an associate professor of community medicine at the new Mt. Sinai School of Medicine in New York City in July, 1969. He is currently an assistant professor in the Department of Preventive Medicine, University of

Kansas Medical Center in Kansas City.

**1966**

MARIA BIRCH HINCKS, training associate for Planned Parenthood of New York City, is developing training programs and in-service education for the personnel of all publicly funded family planning clinics and educational programs under a Ford Foundation grant to Planned Parenthood. She has been concentrating on the training of non-professional community workers, but is initiating some nurses' training programs.

**1967**

PATRICIA D. MAIL is back in the role of fulltime student, having been granted a full scholarship in pursuit of the Ph.D. degree by the Department of Anthropology of the University of Arizona. Her major areas of emphasis are physical and cultural anthropology, all with an eye to future work with the USPHS, Division of Indian Health. The course of study is expected to cover the next three years. Last year she took time off from school to try her hand at

teaching health education in a private, coeducational school in Tucson. The experience was exciting and rewarding, and more than proved the old maxim that "the teacher learns from the students."

BETH MURPHY received her M.S. degree in 1968 from the Harvard School of Public Health (Demography and Human Ecology).

**HOUSE STAFF**

**1946**

LYNN L. JOHNSEN has moved her office to 524 Beaumont Road, Fayetteville, North Carolina 28304

**1967**

A card from RICHARD LILLARD, who served in radiology, reports: "Hello from the S.S. HOPE. We are in Rotation 4 (of 5) here in Ceylon. We each serve two months. The ship is anchored in Colombo Harbor. Part of us stay aboard and part of us participate in rounds at the numerous hospitals ashore. Best regards to house officers at Yale and to the staff."

**The Nominating Committee Seeks Your Suggestions**

At the Association of Yale Alumni in Medicine annual business meeting to be held on Medical Alumni Day, Saturday, May 24, 1969, the nominating committee will present a slate of officers and four representatives to serve on the executive committee for two-year terms. One of the four executive committee members to be elected will represent former house staff and one will represent public health alumni.

The nominating committee would welcome your suggestions, which may be submitted by letter or on the form below.

To: The Nominating Committee  
Association of Yale Alumni in Medicine  
Room L-200 SHM  
333 Cedar Street  
New Haven, Connecticut 06510

I would like to submit the following names for your consideration:

Signed \_\_\_\_\_

Class or House Staff years \_\_\_\_\_

### **Panel Discussion: The Medical Center and Social Change**

Dean Redlich will moderate a panel discussion on “The Medical Center in an Era of Social Change” at the Yale Law School auditorium on February 22 at 2:15 p.m. The event is part of the University’s Alumni Day program to which alumni of the graduate and professional schools are invited.

**Picture Credits** Kate Swift: cover, pp. 2, 3, 5, 6 (above), 7, 8 (right), 14, 16, 17 (above), 18, 28; Yale University News Bureau: pp. 6 (below), 23, 24 (right), 25, 31, 33, 34, 35; Mark S. Kierstead: p. 8 (left); Joel Katz/Yale Alumni Magazine: p. 9; Yale University Art Gallery: p. 19; Yale Medical Library: pp. 20, 21; University of Colorado Medical Center: p. 24; William H. Miller, M.D., and Gary D. Bernard, M.D.: p. 30; The Edward Malley Company: p. 30; Robert Child: p. 32; George Washington University: p. 34; Edward A. Hubbard: p. 34; Melanie Grossman: p. 35; Robert Perron: p. 11; A. Burton Street: pp. 12, 13.



YALE MEDICINE

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This year the Alumni Executive Committee has decided to have Alumni Day in May rather than in June when many people have other commitments.

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Plan now to attend  
Medical Alumni Day Saturday, May 24, 1969

# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / SPRING 1969

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COVER: An "electron tree" is a permanent record of the discharge pattern formed by high energy electrons in certain kinds of dielectric solids. A. G. Agostinelli, radiological physicist in the Department of Radiology, created this tree by irradiating a block of lucite with the 6 MeV linear accelerator.



# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / SPRING 1969 / VOL. 4 NO. 2

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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## A Decade of Radiology at Yale

Radiology, the youngest department of the Yale School of Medicine, has begun its second decade exhibiting all the vigorous growth and abounding energy of a robust ten-year-old. Its healthy condition is attributable in large part to the dedication and drive of Dr. Morton M. Kligerman, the dynamic and volatile professor of radiology who has chaired the department since its founding. (Dr. Kligerman is the subject of the Faculty Profile, beginning on page 14.)

Until ten years ago there was no university department of radiology at Yale. Radiological services at the Grace-New Haven Hospital were performed by staff radiologists whose academic appointments were in the Department of Surgery. These radiologists were deeply involved in day-to-day consultation with faculty members in the clinical services and with their students and house officers, but practically no research was undertaken. From the viewpoint of the country's radiologic community, Yale was the most backward of any major medical school and was severely criticized.

In 1958, a study by an ad hoc committee appointed by President A. Whitney Griswold on the recommendation of Dean Vernon W. Lippard revealed the need for an academic Department of Radiology. For Dr. Kligerman, who was brought from Columbia University's College of Physicians and Surgeons to organize and head the new department, it was a splendid opportunity to achieve the goals he visualized for such an academic unit. These goals were and are today: first, to give excellent patient care (there is no place in the department, the chairman states, for clinicians who are not interested in patients); second, to provide expert teaching in all aspects of radiology; and third, to make the very best research contributions in the field of radiology.

The growth of the department can be seen in many ways. During the first decade the faculty has increased from ten members to forty-two. The diagnostic section now examines annually two and one half times the number of patients that it did before the department was established. The number of patients cared for in the radio-

*Morning report from 8:00 to 8:30 when members of the radiotherapy house staff meet with Dr. Kligerman to discuss newly admitted patients and problem cases.*



therapy section has tripled, and the section of nuclear medicine has increased its activities five fold. However, an academic department cannot be distinguished for superior service alone. Many good non-university hospitals provide excellent service daily. The distinguishing mark of a university faculty is its effectiveness in teaching and research.

Before 1958, although the radiology service at the Grace-New Haven Hospital was not a university department, it carried a fine tradition in teaching. With the founding of the department, the basic teaching program was continued and strengthened, and instruction in large classrooms was replaced by small seminar and clerkship groups. In this regard the diagnostic section has been particularly successful, offering programs of such interest that almost every medical student takes at least one elective in radiology during his medical course.

During the past ten years, the department has prepared faculty members for numerous medical schools as well as radiologists who are now serving in hospitals and in private and group practices throughout the country. Among those who trained in the department or came to it directly from residency for their initial professional service are Dr. James H. Scatliff, chairman of radiology at the University of North Carolina School of Medicine; Dr. Gerald Scanlon, head of diagnostic radiology at Marquette University School of Medicine; Dr. Samuel Hellman, director of Harvard Medical School's Joint Center for Radiation Therapy; Dr. Carl F. von Essen, who has been appointed professor of radiotherapy at the University of California School of Medicine at San Diego; and Dr. Stanley E. Order, who will head the radiotherapy program at Brown University.

The most significant change which departmental status achieved for radiology at Yale was to permit the development of a major research effort. In October of 1958, the new department had less than 500 feet of research space and a budget of less than \$5,000 per year for research. The department now has research support totaling more than \$1 million a year and its research laboratories occupy some 18,000 square feet of space. Dr. Kligerman is quick to point out that quantities of money and space are not valid measures of success in research. Rather, success is measured by the development of well conceived questions and well planned experiments to produce answers of significance for medical science.

The radiology chairman recognizes that each individual selects his area of special interest because of his own particular make-up. The failure of radiologists in the past to contribute significantly in the research area has denied medical science, and ultimately the public,

certain kinds of information: answers to questions that only the radiologist thinks of and only the radiologist solves in his unique way. Throughout this country and abroad, research efforts of high quality in radiology departments have been sparse and have failed to utilize sufficiently modern techniques of biology to explore fundamental questions. The goal at Yale was to create a radiology department without such limitations.

Through the good offices of the late Dr. Milton Winternitz, as well as the efforts of Dr. Levin Waters, an initial grant for establishing a radiobiology unit was obtained from the Jane Coffin Childs Memorial Fund for Medical Research, and Dr. Paul Howard-Flanders of Hammer-smith Hospital, London, was invited to head the new section. In addition, a program-project grant for a radiotherapy research center was obtained from the National Cancer Institute. This has permitted the development of a program in laboratory research and has also made possible the establishment of a clinical investigative research unit in radiotherapy. Because of space limitations in the hospital, beds for this unit are not yet located in one area; patients are placed either in the Winchester Building or in the general clinical research center on the fifth floor of the Hunter Building.

A training program in cancer research and radiotherapy was also instituted through a grant from the National Cancer Institute. This four-year program enables post-doctoral fellows to receive not only full training in clinical investigation but also a minimum of one year in a research laboratory. For the latter training, the radiobiology laboratories serve the needs of most fellows; but the program, which Dr. Kligerman directs, is designed to utilize any other academic unit of the university that is equipped to supervise the research effort of a trainee. For example, Dr. Byron Waksman, professor and chairman of the Department of Microbiology, has supervised a trainee who is interested in the important field of immunologic aspects of cancer.

Subsequently, a similar research training program was obtained in diagnostic radiology. And with the addition of Dr. Richard P. Spencer in 1963 to head the section of nuclear medicine, not only did the clinical service flourish but a program was developed in the study of membrane transport, immunology, and the building of models to describe biological actions.

One significant measure of Yale's standing in radiologic research is represented by the Memorial Award of the Association of University Radiologists. This distinguished award, which has been given annually for the past nine years to the resident or fellow in radiology who has submitted the best research paper, has been won



three times by members of the department at Yale. The 1969 award, presented this May at the association's meeting in San Francisco, went to Dr. Richard O. Danford, a second-year fellow in the diagnostic radiology research training program.

#### *Five Sections of the Department*

The Department of Radiology is made up of five sections; they include diagnostic radiology, nuclear medicine, radiation physics, radiation therapy, and radiobiology.

The Section of Diagnostic Radiology is headed by Dr. Solomon S. Schwartz, professor of radiology, who joined the faculty this April. One of his first priorities is to establish an experimental residency training program that will be varied in time with residents' needs, rather than conforming to specialty board structural requirements.



*Dr. Spencer does a bone scan on a patient in the Section of Nuclear Medicine. Activity detected by the radioisotope scanner is recorded on magnetic tape.*

*In the Section of Diagnostic Radiology, Dr. Schwartz meets regularly with residents to review films and case histories.*



It is felt that such a plan will help to alleviate the nationwide shortage of radiologists, and to fully utilize the talent of each trainee in his area of special interest. In addition, an experimental training program leading to a baccalaureate degree in allied health fields is under consideration for both diagnostic and therapeutic radiology, so that technologists in the future will be able to perform many functions now considered the sacred prerogatives of physicians. Further, a critical reappraisal of fundamental diagnostic concepts is under way to determine whether the radiologist "reads the film or the clinical history."

With the help of Dr. Robert Shapiro, clinical professor of radiology, and Dr. Ralph Littwin, assistant clinical professor of radiology, the diagnostic section has undertaken a program to prepare videotapes for use in conjunction with the laboratory teaching program of the Department of Anatomy. Radiology faculty members be-

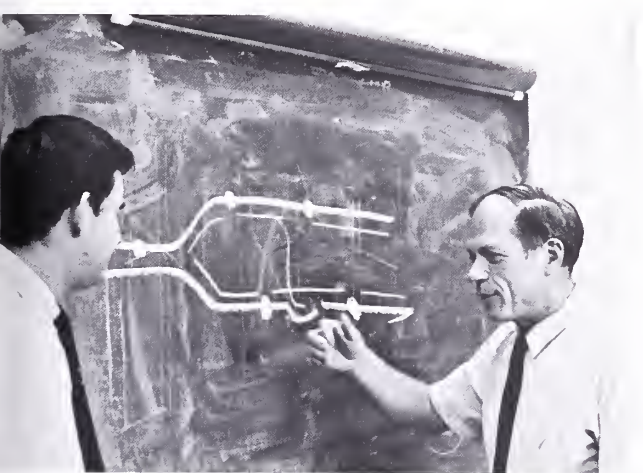
lieve that functional anatomy can thus be taught in a manner that will demonstrate the gross anatomy in its living relationships, but will do so in a much shorter time than is required by classical dissection methods. The material prepared by the Department of Radiology will be interdigitated with material in the current program in anatomy. By reducing the time required to transmit the total volume of information to the students, the method will help solve the difficult problem of compressing the teaching of the basic sciences without sacrificing the amount or quality of the information.

Plans call for the installation of much new equipment in the diagnostic section as funds become available, and this will result in improved patient care. However, during the past year extensive new facilities have been opened in the Dana Clinic building, greatly increasing the efficiency of diagnostic services, especially for emergency and out-patient radiography. Six new radiologic rooms immediately adjacent to the hospital's emergency room are equipped for neuroradiology and vascular radiology. Rapid processing equipment in these rooms enables film to be developed in 90 seconds. A patient's films can be checked immediately and additional views can be taken if needed while he is still in the x-ray room. The neuroradiologic suite contains a giant Mimer unit from Sweden in which an adult patient can be completely somersaulted in order to distribute gas within the ventricular system of the brain for purposes of visualizing brain anatomy. The unit represents but one example of the generous support that has been received from the Fannie E. Rippel Foundation toward the acquisition of excellent equipment.

The Section of Nuclear Medicine has as its principal purpose the diagnostic use of radioactive materials. Directed by Dr. Spencer, who is professor of nuclear medicine, the section reflects the academic orientation of the rest of the department and its faculty members devote half time to clinical responsibilities and half time to research.

Radioactive isotope uptake studies are provided for both inpatients and outpatients, as are scanning procedures of the brain, spleen, placenta, bone, liver, lung, kidney, thyroid, and other organs. To help reduce hospital admissions, the section gives "same day service," with procedures in nearly all cases being performed and reported on the patient's chart the same day they are ordered.

Research in this section has centered on the elucidation of metabolism, growth, and the immune response by means of radiotracers. Two analogue computers are being used not only in the processing of clinical data but in



*Dr. Howard-Flanders, right, diagrams molecular structure for DNA as he talks with Dr. W. Dean Rupp, assistant professor of radiobiology. The two men have collaborated on studies of DNA replication and recombination after ultraviolet irradiation.*

constructing and testing models of biological systems for the research studies.

The Radiobiology Section was established in the belief that a research program is necessary for the balanced development of a department responsible for teaching clinical radiotherapy. Faculty members in this section are engaged full-time in research but also contribute to teaching on the biological effects of irradiation, molecular genetics, and related topics. The section is headed by Dr. Howard-Flanders, professor of radiobiology and molecular biophysics, who is noted for his research elucidating the biochemical mechanisms for the repair of chromosomal DNA.

Underlying the use of x-rays and chemotherapy drugs in the treatment of malignant disease are such complex subjects as the processes of cellular differentiation, the regulation of cell division, the nature of malignancy and carcinogenesis, radiation and drug action on cells, and many other problems. One of the main areas of investigation in the section involves the cellular mechanisms for recovery from radiation damage. As both normal and malignant cells are known to recover from radiation damage, it appears that a favorable balance in these recovery processes may be important to the eradication of tumor cells without the destruction of surrounding normal tissue. An insight into the recovery mechanisms has been obtained through the investigation of radiation damage due to ultraviolet light, x-rays, and alkylating agents in bacteria.

Other subjects of research include the mechanisms of genetic regulation, transcription, and recombination in bacteria and bacterial viruses; the nature of the binding forces that hold cells together in organized tissues; and drugs that sensitize anoxic tissue culture cells to the effects of x-irradiation and might, therefore, be useful for sensitizing human solid tumors which are frequently anoxic.

The Radiation Therapy Section is headed by Dr. Kligerman, whose main research interest is the study and treatment of cancer through radiation in combination with chemicals. This section occupies the Hunter Radiation Therapy Center, which was completed and opened soon after the Department of Radiology was established in 1958. The center is named in memory of Mr. and Mrs. Edward S. Hunter, parents of Robert E. Hunter of Santa Barbara, California, a Yale alumnus who made a generous gift toward construction of the building. High voltage radiation equipment located in the underground level of the center includes a two-million electron volt Van de Graaff generator, a six-million electron volt linear accelerator installed in 1963, and three units of lesser voltage

used in treating relatively superficial cancers. It should be pointed out that seventy per cent of all patients with cancer seen at the Yale-New Haven Medical Center are treated in the Hunter Radiation Therapy Center.

Clinical investigation in radiation therapy includes studies on the use of pre-operative radiation in the treatment of lung, rectal, and bladder cancers, and on the sequential use of cancer chemotherapeutic agents and radiotherapy. A noteworthy achievement is the development of a highly sophisticated technique for treating the pituitary gland and other small volumes of tissue. The method is dependent on a linear accelerator which was altered by the manufacturer on the recommendation of — and in consultation with — members of the Yale radiotherapy staff, and permits the accurate treatment of portals whose cross-section diameters are as small as 0.6 cm. It is of interest that the penumbra, or fuzzy margin of radiation, around the treatment fields of the “better” cobalt therapy units is equal in size to the small treatment portals which can only be produced by this highly accurate machine at Yale.

Dr. Kligerman is optimistic about the future of radiology at Yale as it begins its second decade, and his optimism seems well justified by the department's continuing achievements in patient care and its extraordinary strides toward the goal of academic excellence.



## Nursing Education at Yale: A Progress Report

The dramatic advances in fetal intensive care achieved at Yale in recent years were the subject of a special postgraduate conference last fall for obstetricians from across the country. This spring a similar three-day conference (May 26-28) was presented for nurses. Called "A Symposium on the Scientific Foundations of Fetal Intensive Care Nursing," and supported in part by the United States Children's Bureau, it was a collaborative undertaking of the Maternal and Newborn Health Nursing Program of the Yale School of Nursing and the Department of Obstetrics and Gynecology of the Yale School of Medicine.

Close cooperation in maternity care between the two schools is not new. In the 1940's doctors and nurses at Yale worked together to develop a program of instruction for prospective parents and of support for mothers during labor and the postpartum period. Originally called "prepared childbirth," it demonstrated that nurses with specialized knowledge of obstetrics could improve hospital maternity care and contribute to the education of student doctors and nurses. Obvious as it seems now, it was a novel idea at the time, at least to physicians.

Today, with the rapid increase in knowledge about fetal physiology and the development of new techniques for assessing the health of the unborn child, it is essential that obstetricians continue their training with postgraduate sessions such as the one Yale offered last October. The quick follow-up, after the session for

physicians, of a similar session for nurses — and the recognition this implies of the unique contribution made by nurses in fetal intensive care — may be straws in the winds of change, and they are being welcomed with cautious optimism on the first floor, north wing, of Brady Memorial Laboratory, location of the Yale School of Nursing.

Change is long overdue in the cart-before-the-horse process that has characterized the education of nurses since the beginning of their profession a hundred years ago. During this entire period, the curriculum in schools of nursing has generally lagged behind changes in nursing practice. These changes grew, in part, out of scientific advances, but they also came about as a result of the continuous transfer from medicine to nursing that has been taking place almost from the beginning of modern nursing. Nursing has included more and more of what was formerly regarded as the prerogative of the physician. The transfer of responsibility for performing technical procedures took place on the job, usually in the hospital. Sometimes it went almost unnoticed; at other times it followed lengthy public controversy. But in nearly every case, the skills necessary to take responsibility for a new procedure were first taught on the job, and nursing schools incorporated theory and skills in the new area into their curriculums some time after the procedure had become accepted nursing practice.

The Yale School of Nursing is trying to reverse this

*Dean Arnstein, left, talks with Donno Diers, director of the School of Nursing research program, about studies in progress on ways nurses can improve patient care.*



process. On its founding in 1923, it established a new pattern by basing student instruction and experience on an educational plan rather than an apprenticeship system. Eleven years later, it accorded full professional status to nursing by making the bachelor's degree a requirement for admission to the school. Postgraduate programs in nursing, originally offered through the Yale Graduate School, have been under the aegis of the School of Nursing since 1958, at which time the school's basic program of professional preparation for nursing was discontinued. Today, students enrolled in the school are graduate nurses majoring either in psychiatric or maternity nursing, and majors are now being added in public health and pediatric nursing. The two-year program of study leads to the degree of Master of Science in Nursing.

Margaret G. Arnstein, former chief of the Division of Nursing of the United States Public Health Service, succeeded Florence S. Wald as dean of the Yale School of Nursing in 1967. Dean Wald had laid the foundation for the current expansion of the curriculum, and Dean Arnstein is continuing to chart a course for the school that anticipates the new responsibilities nurses will assume in the foreseeable future. These responsibilities stem from the fact that while medicine becomes increasingly specialized, patients continue to need general, "whole patient" care and continuity of care. To help meet these needs, Dean Arnstein is calling for "expanded roles" for nurses.

Such roles now exist only in a few institutions, but where they have been given the opportunity, nurses with the necessary preparation have justified the change in responsibility. Leaders in nursing and a growing number of physicians see expanded roles for nurses as essential in the health services of the future.

Clinical nurse specialists, for example, are being prepared in Yale's psychiatric nursing program, which is under the chairmanship of Rhetaugh G. Dumas, associate professor of psychiatric nursing. Conducted in close cooperation with both the Connecticut Mental Health Center and the Yale Psychiatric Institute, the program is highly regarded by members of Yale's Department of Psychiatry, and graduates are functioning fully and developing new roles in these two patient care facilities.

Since 1958, Yale has been graduating nurses equipped to take responsibility for the care of normal maternity patients throughout the entire maternity cycle, including delivery. At present, Vera R. Keane, lecturer in maternal and newborn health nursing, is acting chairman of this program, which enables students to qualify for the Cer-

*The program in maternal and newborn health nursing leads to the Certificate of Nurse Midwifery. Here, Sharon L. Schindler, instructor in this program, shows newborn infant to the mother in the delivery room.*





tificate of Nurse Midwifery. Beginning in 1967, as a result of the efforts of Elizabeth S. Sharp who was then chairman, students have been able to experience what continuity of care means for the patient and for the nurse. This was possible because, for the first time, practice in the labor and delivery phases of maternal care was available to Yale School of Nursing students at the Yale-New Haven Hospital. Prior to 1967, it was necessary for students to go to hospitals in other cities for this part of their curriculum.

Although widespread and effective use is made of nurse midwives in many European countries — where, perhaps not incidentally, maternal and infant mortality rates are lower than those in the United States — nurse midwifery in this country has been largely limited to isolated rural areas. Certain large urban clinics have recently begun to utilize nurse midwives, and they have also functioned on an experimental basis in a small community hospital in the West.

This spring a group of obstetricians in New Haven has invited a member of the Yale nursing faculty to serve on a part-time basis as a nurse midwife to their patients. As far as is known, this is the first instance in the United States of a nurse midwife joining physicians working in private practice. At the same time, a pre-paid group practice organization, the Community Health Care Center Plan, Inc., now being formed in New Haven, is including a nurse midwife in its plan. The Yale School of Nursing will work closely with both these groups to study the acceptance of the nurse midwife by people in a variety of situations.

The new Yale programs for advanced preparation in public health nursing and pediatric nursing, like the two present specialty programs, will emphasize clinical practice and research. This is in keeping with the overall objective of the school: to prepare expert nurse practitioners who are also equipped to analyze nursing practices and their effects on patients with the ultimate aim of testing new nursing methods to improve practice.

The program in public health nursing will include theory and practice in assisting individuals and families to deal with their health problems, as well as in defining the health problems of a community and in assisting the community to overcome them. The various community projects with which the university is affiliated will give an excellent opportunity to evaluate the effectiveness of the methods used. Audrey M. McCluskey, recently appointed associate professor of public health nursing, is the chairman of this program to which the first students will be admitted this fall.

*Graduate student Danna LeBlanc wears her public health nurse's uniform when making a home visit to a patient in her care for maternal and newborn health nursing.*





The curriculum will include study of individual and group motivation, and of the leadership that results in constructive action. Identification of leadership in a community is crucial to public health work, and the public health nurse is in an excellent position to locate grass roots leaders or potential leaders.

Another area of study will be the new roles of nurses in the ambulatory services of hospitals and in group medical practices. These have been tried out recently in several parts of the country, and some have been reported in the literature; but almost nothing has been reported of the curriculum needed to prepare such practitioners. The Yale School of Nursing will be able to give its students practice in expanded roles both in the Yale-New Haven Hospital ambulatory services and in the Community Health Care Center Plan now being established in New Haven. The faculty and students, together with the staffs of these services, will study the knowledge and skills nurses need in order to function in the new and expanded roles, and the curriculum will be adjusted and modified as needed.

The recent proliferation of knowledge about human development and early growth is reflected in the establishment of the pediatric nursing program, to which the first students will be admitted in the fall of 1970. This new program will be developed by Katherine Buckley Nuckolls, who has been appointed associate professor of nursing. In the past, maternal and child care have been so closely linked that many nursing schools combine them in the same program of study. But it is increasingly difficult to teach all the nurse must know in the continuum from the mother's pregnancy through the child's adolescence. Care of the fetus and the newborn, for example, are just two of the areas in which the application of research findings is burgeoning. In this connection, the school is currently privileged to have, as Annie W. Goodrich Visiting Professor of Nursing, Eileen G. Hasselmeyer, who was responsible for initiating the recent symposium on fetal intensive care nursing. Dr. Hasselmeyer, who is director of the Perinatal Biology and Infant Mortality Branch of the National Institute of Child Health and Human Development, is doing research at Yale on the scientific foundations of perinatal nursing.

In addition to the work being done in fetology, other Yale assets that will enhance the program in pediatric nursing include the outstanding work in child psychiatry being done by the Child Study Center and the advances in newborn special care being achieved by the Department of Pediatrics. The chairman and several members of the pediatrics faculty are already working

*The psychiatric nursing program prepares clinical nurse specialists in mental health. Here, Marvel Davis, a graduate student in this program, works with a psychiatric patient.*



closely with the nursing faculty to strengthen the new-born component of the present maternal and newborn health nursing program.

Dean Arnstein points out that the pediatric program would be especially suitable for joint education of students in the medical and nursing disciplines. If the physician is to accept an expanded role for the nurse, he must understand it. There is no better way to grasp a fellow worker's abilities and limitations than to struggle together as fellow students.

The school is also studying the use of the clinical nurse specialist on the inpatient unit, a role that is being utilized more widely around the country than are those in the ambulatory services, but is still in the early stages of development. In order to develop it further and define the relationships of the clinical nurse specialist to other individuals and groups concerned with inpatient care, the United States Public Health Service is supporting the study being undertaken at Yale with Jean Barrett, assistant dean and professor of nursing, as the chief investigator.

The establishment of the new programs still leaves one serious gap in the curriculum—medical-surgical nursing—and Yale is now seeking funds to initiate such a program. Specialists in this field can have the greatest impact on nursing service in hospitals since the largest number of patients come under the medical and surgical classifications. The school, with the extensive resources of Yale University and the Yale-New Haven Medical Center, is in an advantageous position to make a contribution through research and the application of research findings.

The nursing school's research program, directed by Donna Diers, assistant professor of nursing, places first priority on developing studies to determine how nurses can improve patient care. Studies are underway, for example, to find how one can break through hospital organizational patterns to reach the patient; to learn more about reduction of patient stress; and to determine how the many nurses who take care of a patient during his hospital stay can aid him in feeling that he is a real individual and not a case history. Application of findings from this type of research is essential if patient care is to improve.

Alumnae of the Yale School of Nursing are located in all parts of the United States and on every continent except Antarctica. Of the nine professional schools of Yale University, the nursing school ranks third, surpassed only by medicine and law, in the percentage of its graduates who participate in the Yale Alumni Fund drives. The nursing school's alumnae association, of

which Mary K. Hirata of the class of 1949 is currently the president, keeps in touch with most of the school's 1,800 living alumnae. This figure includes, of course, both those who took their basic preparation for nursing here and graduate nurses who have completed master's programs in nursing.

The Yale Corporation's decision in 1956 to drop the basic program reflected its view at that time that, for various reasons, the university could contribute most effectively to nursing by concentrating its efforts on a graduate program. The opening of Yale College to women this fall suggests that it might be well to re-evaluate that decision in the light of students' needs as well as nursing's needs. When young men and women graduating from Yale College may enter the other professional schools of the university to prepare for careers in medicine, law, the ministry, and other fields, why should the School of Nursing not offer a program to prepare them as nurses?

## Trauma Symposium

Over 150 persons concerned directly or peripherally with emergency treatment of trauma in automobile accidents attended an all-day symposium in the Mary S. Harkness Auditorium at the School of Medicine on March 5. Jointly sponsored by the Section of Orthopedic Surgery and the Department of Pathology, the conference included distinguished guest speakers and a wide spectrum of conferees.

Guests were welcomed in an opening speech by Senator Jay W. Jackson of the 5th District in Connecticut, who is currently sponsoring a bill in the Legislature which would supplant the present coroner system of post mortem investigation with a State Medical Examiner.

Speakers on the panel included Dr. Alan R. Moritz, professor of pathology, and Dr. John H. Davis, professor of surgery, from Case-Western Reserve University School of Medicine in Cleveland; Col. John P. Stapp, chief scientist for the National Highway Safety Bureau in Washington, D.C.; and Dr. Paul W. Gikas, associate professor of pathology at the University of Michigan and deputy medical examiner for the City of Ann Arbor.

Right: Senator Jay Jackson, left, of Hartford, Connecticut, was introduced by Dr. Michael Koshgorion, associate professor of pathology.



Below: Dr. Robert H. Kennedy, director of the field program in trauma of the American College of Surgeons, and Dr. Charles Burbank, New England regional chairman for the American College of Surgeons' Committee on Trauma, were two of the distinguished guests. Dr. Kristops Keggi, assistant professor of orthopedic surgery, is chairman of the Connecticut Committee on Trauma.





Representing the Yale faculty were Dr. Michael Kashgarian, associate professor of pathology; Dr. Kristaps J. Keggi, assistant professor of orthopedic surgery and chairman, Connecticut Committee on Trauma of the American College of Surgeons; Louis G. Audette, television producer for the medical school; Arnold Nadler, research associate in the Department of Surgery; and Samuel B. Webb, Jr., instructor in public health. The Yale members reported on various aspects of the Yale Trauma Study, an analysis of trauma patients and their treatment in New Haven, which has been in operation for about two years and is funded by a grant from the Travelers Research Center, Inc. As an adjunct of the study, an index of injury severity has been evolved. It consists of a simple scoring system which would indicate a patient's condition and would result in better communication and emergency care. The system, it was reported, would also be useful in statistical and epidemiological work in relation to trauma planning and analysis.

Other considerations of the speakers included the high incidence of unnecessary automobile accident fatalities. They underlined possible steps that could be taken on the part of the driver, other occupants of the car, and automobile manufacturers to lower the death rate on the highway.

The final presentation included a panel of the participating speakers who answered questions from the floor. This panel was chaired by John D. Thompson, professor of public health.

In addition to physicians, surgeons, pathologists, and public health officers, there was a considerable contingent of non-medical personnel represented in the audience, including state and city police, firemen, and ambulance attendants.

*Right: Dr. Paul W. Gikas, right, associate professor of pathology at the University of Michigan and a visiting speaker, contemplates a question posed by panel moderator John D. Thompson, professor of public health at Yale.*

*Below: Drs. Alan Maritz, John H. Davis, and Jack Cale enter Mary S. Harkness Auditorium. The two guest speakers, on the medical faculty of Case-Western Reserve University, held an informal reunion with Dr. Cale, formerly of that faculty and now chairman of Yale's Department of Surgery.*



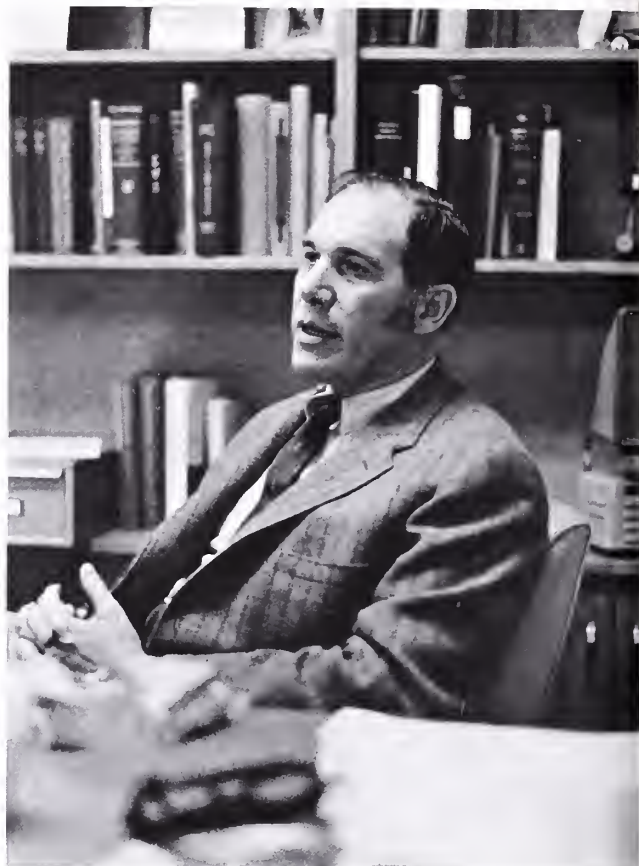
## Doctor of Diverse Distinctions

Faculty Profile: Morton M. Kligerman, M.D.  
Professor of Radiology

At the age of six Morton Kligerman knew that he was going to be a doctor. His mother thought that the family physician in Philadelphia, Dr. Neff, was the greatest man in the world. "She had the usual Jewish mama's attitude about doctors," said Dr. Kligerman, "and respected him more than anyone she knew—outside of her own family, of course. And she was right. Dr. Neff deserved to be respected for the way he practiced, for the way he handled my family. I was impressed by him as a person though I was a young boy then."

"I know kids have a thousand notions about what they'll be when they grow up but, from the time I was very small, I always felt I'd be a doctor. And as I grew older, I was always most interested in the sciences and did best in them. Of all the sciences, I preferred biology. That is, until I took physics, when I had a most unusual physics teacher. He taught high school physics during the day and college physics at night."

Mr. Young, teacher of physics at Northeast High School in Philadelphia, believed in stretching the capacities of his best students—and Klig was one—by holding a dialogue with them for the last ten minutes of each class hour, exposing the rest of the students to the thought processes involved in the solution of complex scientific principles, as handled by two or three of their peers.



"Physics was very exciting to me," he continued. "With relatively little information—principles expressed as formulae—one could solve many problems. It was better than using a lot of *sitzfleisch* and learning a lot of detail. In fact, I thought for a time of becoming a physicist."

On graduating from high school, Morton Kligerman received a scholarship to Amherst but, because his family was poor—his father was a farmer-turned-grocer in Philadelphia—he was unable to accept it. "In those days scholarships were only for tuition and I figured that with all the traveling, it would be too expensive." So he lived at home and enrolled at Temple University.

In the summer, after a brief and unsuccessful period selling magazine subscriptions, Klig got a job through the father of a friend making false teeth. "And they were good ones," he hastens to add. He attended college for three years, receiving his B.S. degree in medical science in 1938, after his first year in medical school. He remained at Temple for his medical work for the same reason he had gone there initially—



Morton Kligerman and brother Albert in a studio portrait circa 1922.



because he could live at home. Like many students in the '30s, Klig held a job under the National Youth Act which paid him about \$50 a month. His function was to sit at the front desk of Temple University Hospital and to run the hospital's elevator from 7 at night to 7 in the morning every fifth night. At exam time, he and classmate Sam Garfield were hired by other student-elevators. "We two divided up the jobs when others copped out to study. Sam was the brightest boy in the class." Dr. Garfield is now chief of staff and attending gynecologist at Frankford Hospital in Philadelphia.

It was while he was still an undergraduate that he first met Dr. W. Edward Chamberlain, professor of radiology at Temple. The encounter occurred when the professor addressed the Hammond Premedical Society, a group of honor students of which Klig was a member. Chamberlain's subject concerned the relevancy of physics to medicine. His thesis was that physics taught one to think, to reason, and to solve problems, all processes most useful to a medical doctor. The fortuitous marriage of biology and physics — Klig's strongest subjects and the ones which interested him most — tipped the scales forever in favor of medicine.

By coincidence it was also Dr. Chamberlain who guided the young doctor to his present professional area. As he neared the end of an 18-month rotating internship at Temple University Hospital, it became incumbent on Klig to choose a specialty, and he had just about settled on internal medicine, in the footsteps of his former family physician. Dr. Chamberlain propelled Klig into another branch of medicine, a decision which he has never regretted, by offering him a residency with him. "Only it was the oddest presentation. He invited me to his office and told me all the reasons why I probably wouldn't like radiology." It boiled down to less patient contact. Dr. Chamberlain had himself had experience on which to base his counseling. For the older man had been in practice in Stanford before he came east. Chamberlain's medical experience, coupled with a strong foundation in electrical engineering, made him the likely choice to teach radiology when the Stanford medical school purchased its first x-ray machine. "His negative approach notwithstanding, I have never been eased into a decision with more finesse."

Klig was a GP at heart and he discovered that radiology at Temple offered the same broad spectrum of cases, the same high concentration of perplexing problems, as internal medicine. "Besides the usual fare to which the internist was exposed, I could be involved in orthopedics, otolaryngology, and any one of a number of other areas."

At first Klig's close friends regretted his selection of diagnostic radiology, fearing that the choice would remove him entirely from patient contact. For some people, mention of this branch of medicine conjures up an image of a doctor in a laboratory or dark room in isolation, making endless pronouncements about the endless x-ray films under observation. But in Chamberlain's department the diagnostic radiologist's role was very largely as consultant to the physicians. Furthermore, on two days each week, Klig was a regular member of the cardiac clinic and looked after the patients in the same manner as the residents in medicine. This clinic was scheduled in the evening for the convenience of the working patient.

When Klig left Temple to join the faculty at Columbia University's College of Physicians and Surgeons, he found a very distinguished department but the diagnostic section was quite different from Temple's. "I felt more like a film reader than a physician. This is often the pattern in diagnostic radiology and it taught me a lesson I use in my department today. I try very hard, with as much influence as I can muster, to steer would-be department members and trainees away, no matter what their skills, if they are intent on diagnostic radiology as a way of avoiding responsibility for the patient. That's a strikeout with me. There are very positive and good reasons for going into diagnostic radiology."

Meanwhile, at Columbia, the chief of the Radiology Department was having difficulty in finding someone to assist in the therapy section. One day he turned to Klig and said, "Take over the vacant position for six months for me." Klig protested that he would be an imposter; it would be especially unfair to the residents. "Look," said the chief, "I know you don't know anything about therapy but you know more than anyone else I can get, and in two years, I'll wager, you'll know a good deal more." So, with some misgivings, Klig agreed to take over for six months with the promise of consultative assistance from some doctors over him who were experienced therapists.

"In three days," says Yale's radiology chairman and present head of the radiation therapy section, "I knew I'd never go back to diagnosis." After three months, he was running a teaching section and had the situation well in hand.

### *The War Years*

By virtue of his military service, Klig had been exposed to a diverse variety of medical experience in the





Lieutenant Kligerman served on a hospital ship in World War II. Background is Manila Bay.

field of radiology. In 1944, at the end of his residency at Temple, he joined the Army Medical Corps. His first post was at Camp Buttner Station Hospital in Durham, North Carolina, where he was assistant chief. All the films were piled up on a desk at which he sat, dictating his findings directly to a secretary. Behind him sat his chief who would be leafing through a stack of the current medical journals. While Klig interpreted the x-rays and indicated what, in his estimation, was the nature of each patient's problem, there was a steady background refrain of turning pages. Occasionally, a voice from behind him would break in on Klig's commentary: "What do you think of that fourth lumbar vertebra?" According to the assistant chief, the chief was infallible and the experience unsurpassed. Daily, Klig would diagnose over a hundred cases and then the chief would bring him up to date on the important points of all the papers and journals he had ingested during Klig's examination of the films. This went on for nearly a year and seems to have been a highly successful arrangement for both parties.

As time passed, Klig, who had always loved sailing and the sea, welcomed assignment to a hospital ship. "I was a bachelor and, as long as I had to be in the Army, I thought I might as well see the whole thing." Before his tour of duty was over, he had not only sailed but also navigated 58,000 miles — three times across the Atlantic and twice across the Pacific. His connection with radiology at this period was tenuous. He would go through the ship's wards with the field unit on board, looking for patients to examine.

Now Klig the teacher emerged, a role which was to recur at various times in his life. This time the subject was navigation and his approach was most ingenious. He made a sextant out of a wooden cheese box and a nurse's pocket mirror. Equipped with that, Dutton's book on navigation, and his HO 211 (a publication of

the Hydrographic Office which gives bearings for calculating one's position), he first learned all about navigation for himself and then taught all he had learned to a group of junior third mates who were desirous of taking the examination for promotion.

When the end of the war came in 1946, Dr. Kligerman was retained in the Army as one of the eleven men in the country who had taken the boards in radiology. He was first stationed at the New York Port of Embarkation as chief radiologist, and later moved to Valley Forge General Hospital. He received his discharge in 1947, and returned to Temple as an instructor. The following year he moved to New York City where, during the next decade, he advanced from instructor to associate professor of radiology at Columbia.

Both of these institutions have taken note of Dr. Kligerman's former affiliation by honoring his achievements. In 1964 Temple University awarded him their Distinguished Alumnus Award. In 1967 he received the Commemorative Silver Medallion of Columbia University, established on the occasion of the 200th anniversary of the founding of the College of Physicians and Surgeons.

Klig came to Yale at the invitation of the late President A. Whitney Griswold in 1958, the year that a Department of Radiology was first established. "The thing that attracted me to Yale more than anything else was my understanding that they had a preference for people who, besides being good doctors, also did original work. And when I came I established the fact that I would devote a certain amount of time to original research. And I have. Less than I'd like but more than I had a chance to anywhere else."

Dr. Kligerman feels no dichotomy exists between teaching and research. He even triangulates the subject by stating that there is no intrinsic battle between service to patients, teaching, and research. "They all go together. To think otherwise is like saying that a job interferes with one's marriage. A happy marriage and a happy job go hand in hand."

### *Of Bread and Ships*

Once divested of his white coat and out of his office, Klig displays a completely new set of facets.

Though he plays no instrument, Klig has long had a deep appreciation of music. When he first went to college he received two seats to attend the Philadelphia Symphony for a year and renewed them annually until he left for the Army. When he became an intern, he brought nothing with him to the hospital but a large

pile of classical recordings which he played whenever the occasion permitted. Four of his fellow house officers, who were inclined to scoff at his choice of leisure relaxation, were pressured to listen because Klig knew that with some exposure to music, they too would find this pleasurable and relaxing and because Klig the teacher was surfacing again. Every night for three quarters of an hour, the teacher played the selections and lectured to the four who did, in fact, dwindle to two, but two newly-dedicated music lovers.

He is also a small-boat sailor. Even before his Army experience, he had done some sailing. And today, when he gets a chance to get away with his family, he fishes and sails and swims and has taught his two youngsters some proficiency in each. His wife, Barbara, prefers to sit in the sun on the beach. "Watching Klig relax," says she, "is the most exhausting thing in the world."

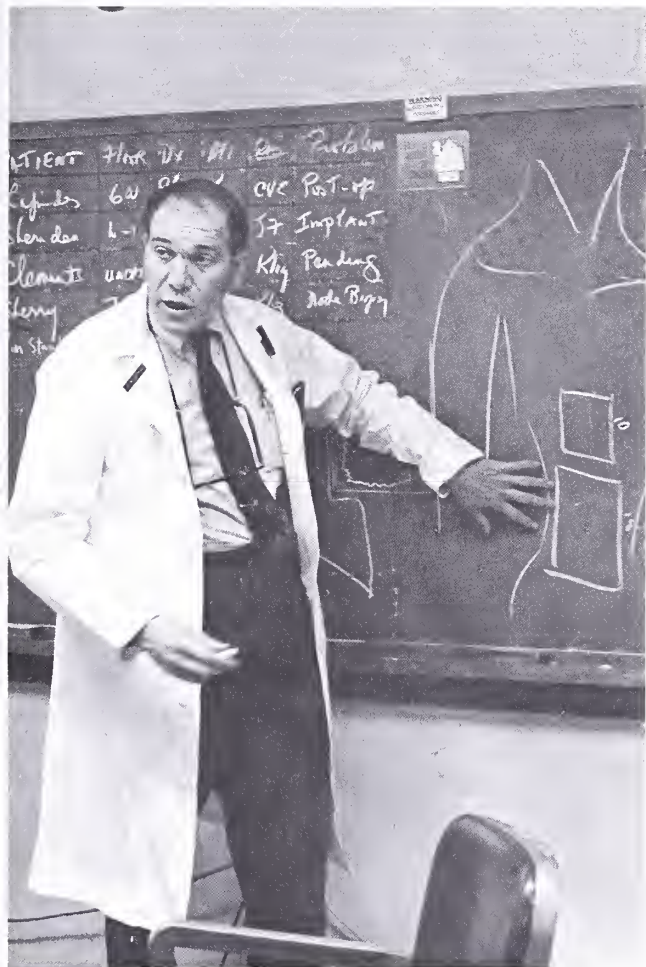
Perhaps his most unusual hobby is his prowess at cooking and his predilection, in this plastic-wrapped age, for making bread. The same dynamism that characterizes Klig's relaxed moments makes one know that he husbands his time in a disciplined fashion: a large segment of his day for work; a portion of time for sleep; and time for companionship with wife and family or friends. With abundant energy, this doctor rises in the morning between 5:30 and 6:00, quite frequently starting his day by baking several loaves of bread, samples of which will appear on his wife's breakfast tray an hour or so later. "This period, early in the morning, is my favorite time of day. No one's crabby; no one has resigned; the children are lively and fresh."

Before most of the world is stirring Klig has served a small breakfast to his wife in their bedroom, has had a chance to visit with her quietly, and has talked or roughhoused with their children who pile into his room around 7:15.

Barbara has a married son, Roger, offspring of a previous marriage, who is a student at the Paier School of Art in Hamden and lives with his wife in a New Haven apartment. Klig too has a child of a previous marriage. His older daughter, Hilary, is a senior at Purdue and was married last year. Her husband, a classmate, has just been accepted for graduate work at MIT next year and Klig is obviously proud of and devoted to the young couple.

His face lights up in the same proud fashion when he speaks of the two children of his present marriage.

*Dr. Kligerman is a dynamic lecturer who firmly believes in giving equal weight to the triad of patient care, research, and teaching.*





There is a boy, Tom, who is 12, and Valli, who was 10 on December 26th. Klig likes to remember the day she was born, for she shares a birthday with him. Ten years ago on that date Barbara presented him with a handsome old ship's clock. A little later in the day, she went off to the hospital and at 7:00 that evening Valli made an appearance. Barbara's first words to her husband at visiting hours were, "If I had known this was going to happen today, you never would have gotten that clock."

In addition to homebaked bread, Klig prides himself on his New England clam chowder, a repertoire of baked fish dishes, and his home-brewed beer. Besides his prowess as chef and gastronome, he has become deeply interested in and knowledgeable about modern

art. Since his marriage to Barbara, whose paintings decorate both their home and his office, he has given some time to the study of abstract expressionism and its exponents. He was on friendly terms with the late William Baziotis and is acquainted with Rothko, De-Kooning, and Gottlieb. A very large canvas by Gottlieb dominates the Kligerman livingroom. His interest has also been ignited by modern sculpture and he is at least partially responsible for Herbert Ferber's recent gift of one of his bronze pieces to Morse College, the residential college of which both Klig and Ferber are fellows.

Whether it is radiology, navigation, cooking, or music and art, Morton Kligerman believes in mastering the subject totally. Halfway measures are simply not sufficient.

*Valli and Tam were suddenly aware of the camera as they concluded their card game in the Kligerman living room, to the amusement of their parents, Barbara and Klig.*





# Internship Appointments

Class of 1969

- Andrew T. Allan, medicine, Jackson Memorial Hospital, Miami, Florida.  
Brian D. Altman, rotating, Hartford Hospital, Hartford, Connecticut.  
Charles S. Angell, medicine, Johns Hopkins, Baltimore, Maryland.  
David G. Ansel, surgery, Johns Hopkins, Baltimore, Maryland.  
David W. Barry, medicine, Yale-New Haven Medical Center.  
Robert E. Belliveau, pathology, Yale-Haven Medical Center.  
David A. Berkowitz, rotating, Mount Auburn Hospital, Cambridge, Massachusetts.  
Donald H. Buchholz, pathology, Yale-New Haven Medical Center.  
William E. Bollengier, surgery, North Carolina Memorial Hospital, Chapel Hill, North Carolina.  
Bruce W. Burleigh, surgery, University of Oklahoma VA Hospital, Oklahoma City, Oklahoma.  
William F. Bynum, medicine, Georgetown University Hospital, District of Columbia.  
Seth D. Charney, rotating, Mount Zion Hospital, San Francisco, California.  
Joseph P. Cleary, surgery, Georgetown D. C. General Hospital, District of Columbia.  
Nelson R. Cooke, rotating, Highland General Hospital, Oakland, California.  
Leo M. Cooney, Jr., medicine, Boston University 5th & 6th Medical Service, Boston, Massachusetts.  
Richard J. Daly, Pediatrics, University of Michigan Hospitals, Ann Arbor, Michigan.  
Michael W. Dennis, surgery, George Washington D.C. General Hospital, District of Columbia.  
Charles A. Dinarello, pediatrics, Massachusetts General Hospital, Boston, Massachusetts.  
Douglass T. Domoto, pathology, Yale-New Haven Medical Center.  
Daniel M. Eichenbaum, medicine, Yale-New Haven Medical Center.  
Ralph J. Falkenstein, rotating, Greenwich Hospital, Greenwich, Connecticut.  
Gary S. Farnham, medicine, H. C. Moffitt-University of California Hospitals, San Francisco, California.  
Lesley N. Fishelman, rotating, State University Hospital, Upstate Medical Center, Syracuse, New York.  
Stephen P. Fishelman, rotating, State University Hospital, Upstate Medical Center, Syracuse, New York.  
Steven A. Frankel, rotating, Mount Zion Hospital, San Francisco, California.  
William H. Frazier, surgery, Yale-New Haven Medical Center.  
Royal J. Gay, medicine, Albany Hospital, Albany, New York.  
David A. Geer, surgery, Palo Alto-Stanford Hospital Center, Palo Alto, California.  
Sander G. Genser, rotating, University Division of Philadelphia General Hospital, Philadelphia, Pennsylvania.  
Robert O. Gordon, surgery, Palo Alto-Stanford Hospital Center, Palo Alto, California.  
Steven M. Herzberg, medicine, St. Luke's Hospital, New York City.  
John F. Hiatt, medicine, Philadelphia General Hospital, Philadelphia, Pennsylvania.  
Larry C. Horowitz, medicine, Stanford University Hospital, Palo Alto, California.  
Thomas C. Howard, surgery, Yale-New Haven Medical Center.  
Lee M. Jampol, medicine, Yale-New Haven Medical Center.  
Richard G. Jost, medicine, Cleveland Metropolitan Hospital, Cleveland, Ohio.  
Steven M. Kalavsky, pediatrics, Children's Hospital, Pittsburgh, Pennsylvania.  
Joel M. Kaufman, surgery, Colorado Medical Center, Denver, Colorado.  
Paul H. Kelker, pediatrics, Colorado Medical Center, Denver, Colorado.  
John J. Kelly, Jr., medicine, Yale-New Haven Medical Center.  
Rozella S. Knox, medicine, Philadelphia General Hospital, Philadelphia, Pennsylvania.  
Steve Krant, surgery, Presbyterian St. Luke's, Chicago, Illinois.  
Lynn G. Lagerquist, Jr., medicine, University Hospital, Madison, Wisconsin.  
Michael Liebowitz, rotating, Harlem Hospital, New York City.  
Elliot M. Livstone, medicine, Presbyterian-University of Pittsburgh Hospital, Pittsburgh, Pennsylvania.  
C. E. Long, III, surgery, Parkland Memorial Hospital, Dallas, Texas.  
Robert L. Marier, medicine, Massachusetts General Hospital, Boston, Massachusetts.  
Paul A. Markey, surgery, Massachusetts General Hospital, Boston, Massachusetts.  
Arnold F. Mazur, rotating, University of Utah Hospitals, Salt Lake City, Utah.  
John J. Meehan, medicine, Yale-New Haven Medical Center.  
Lloyd F. Mercer, surgery, Jackson Memorial Hospital, Miami, Florida.  
Ellen B. Milstone, pediatrics, Yale-New Haven Medical Center.  
Thomas F. Minehan, surgery, Yale-New Haven Medical Center.  
Bruce K. Nagle, pediatrics, University of Michigan Hospitals, Ann Arbor, Michigan.  
Lionel M. Nelson, medicine, San Diego County-University Hospital, San Diego, California.  
Nancy Olmsted, pediatrics, Children's Hospital, San Francisco, California.  
Eric Otobro, rotating, Los Angeles County General Hospital, USC Medical Center, Los Angeles, California.  
Timothy A. Pedley, surgery, Stanford University Hospital, Palo Alto, California.  
Richard P. Pollis, surgery, The New York Hospital, New York, New York.  
Deborah A. Putnam, rotating, Queens Hospital, Hawaii.  
Nelson B. Record, Jr., medicine, Cleveland Metropolitan Hospital, Cleveland, Ohio.  
Joseph M. Rochford, medicine, VA-Georgetown Hospital, District of Columbia.  
Dennis J. Rudzinski, medicine, Jackson Memorial Hospital, Miami, Florida.  
David J. Sahn, pediatrics, Yale-New Haven Medical Center.  
Lutz H. Schlicke, surgery, University of Utah Hospitals, Salt Lake City, Utah.  
Adrian M. Schnall, medicine, Cleveland Metropolitan Hospital, Cleveland, Ohio.  
David J. Schulak, rotating, King County Hospital, Seattle, Washington.  
Andrew Schwartz, rotating, Yale-New Haven Medical Center.  
Jerrold Jay Silverstein, rotating, Maimonides Hospital, New York City.  
Gerald J. Smallberg, medicine, University of Michigan Hospitals, Ann Arbor, Michigan.  
Anna S. Solis, pathology fellowship, San Diego County-University Hospital, San Diego, California.  
Charles W. Swearingen, rotating, Roosevelt Hospital, New York City.  
Michael S. Toren, medicine, San Diego County-University Hospital, San Diego, California.  
David L. Upton, medicine, VA-Georgetown Hospital, District of Columbia.  
Robert J. Walat, pathology, Yale-New Haven Medical Center.  
Stephen R. Webb, pediatrics, Yale-New Haven Medical Center.  
Steven C. White, medicine, Program IV-George Washington Hospital, District of Columbia.

## Grover F. Powers Day



*It was a full house at Fitkin Amphitheatre when guests, faculty, and students convened to honor the late Grover F. Powers.*

"Pediatrics at Yale will long be considered his creation and the measure of his life's work." So spoke the late Dr. Daniel Darrow some years ago about his colleague and friend, Grover F. Powers. On March 26, nearly 300 former students, house staff and their wives, came to the medical school from all parts of the country, in confirming testimony to the success of "his life's work," and to participate in a day of activities honoring the late Dr. Powers.

Grover F. Powers Day began with coffee and reminiscences in the Beaumont Room. Pediatric grand rounds were followed by speakers who represented areas closest to Dr. Powers' own sphere of interest and accomplishment. Dr. Harry H. Gordon, dean of the Albert Einstein College of Medicine, began the proceedings with a poignant tribute to the late pediatrician. An illustrated presentation on intrauterine growth retardation was given by Dr. Frederick C. Battaglia of the University of Colorado Medical Center. The newly appointed professor of epi-

demiology and public health at Yale, Dr. George Rosen, discussed youth in revolt, past and present. Dr. Leon E. Rosenberg, associate professor of medicine and pediatrics, presented evidence of inherited disorders demonstrating vitamin deficiency, and Dr. Charles U. Lowe, scientific director of the National Institute of Child Health and Human Development, delivered the Eleventh Annual Grover F. Powers Lecture in a talk entitled, "Child Health and Public Policy, U.S.A."

At that time, formal announcement was made of the initiation of a search for funds to endow a Grover F. Powers Professorship, which will provide an opportunity for grateful colleagues, patients, and friends to commemorate his work and maintain his tradition in the Department of Pediatrics at Yale.

Additional demonstrations of Dr. Powers' influence and diagnostic abilities came to light during the cocktail and dinner hour with Dr. Myron E. Wegman ('32), Dean of the School of Public Health at the University of Mich-





Left: Dr. Iro V. Hiscock, Anno M. R. Lauder Professor Emeritus of Public Health, exchanges a few words with Dr. Charles D. Cook, chairman of the Department of Pediatrics, at Fitkin Amphitheatre.



Right: Dr. Charles U. Lowe ('45) delivered the 11th annual Grover F. Powers Lecture in the Mary S. Horkness Memorial Auditorium.



Above: Dr. Harry Gordon (hs '32) chats with Deon Redlich and Dr. Russell B. Scobie ('29) during the cocktail hour.



Right: Four disciples of Grover Powers convene in the faculty lounge: Drs. Robert A. Kromer ('55) of West Hartford, Connecticut; Poul Goldstein ('49) of New Haven; Richard Olmsted (hs '49) of Portland, Oregon, and Richard H. Gronger of New Haven.

igan, presiding. In addition to his own anecdotal delivery, Dr. Wegman recognized members from among the dining guests who spoke informally, giving life and flavor to the memory of their dedicated teacher and friend. Those who chose to share a nostalgic moment or bear testimony to diagnostic prowess or devoted attention spanned the generations of Powers' colleagues and students and included Dr. Edward T. Wakeman ('22); Dr. Richard Olmsted (hs '49); Dr. Ralph A. Ross (hs '35); Dr. Milton Senn, Sterling Professor of Pediatrics; Dr. Ruth Whittemore, clinical professor of pediatrics; and Dr. Leona Baumgartner ('34), bearing messages of regret and good wishes from Drs. Martha Eliot (hs '23) and Ethel Dunham (hs '20).

Another member of Powers' house staff who was unable to be present, Dr. John A. V. Davies, (hs '26) of Boston, distilled the prevailing atmosphere of the evening, when he wrote in his letter of regret: "... he touched all he met with his spirit."

Below left: Dr. Doris L. Wethers ('52) of New York City and Dr. Raymond S. Duff ('52), associate professor of pediatrics, during the social hour. Below right: Dr. Ruth Whittemore, clinical professor of pediatrics, shores reminiscences with friends of the late Grover F. Powers at the dinner in the Edward S. Horkness Memorial Hall. Toastmaster Myron E. Wegman ('32) is at right.





## In and About Sterling Hall



Dr. Horstmann

### **Dr. Horstmann Appointed John Rodman Paul Professor**

Dr. Dorothy M. Horstmann became the first woman ever to hold an endowed chair at Yale University this spring when she was named John Rodman Paul Professor of Epidemiology. The new professorship, established under the bequest of the late Susan Dwight Bliss, honors Dr. Paul, professor emeritus, who retired in 1961 after 33 years on the Yale medical faculty. A leading authority in the field of epidemiology and preventive medicine, he is currently writing a book on the history of poliomyelitis.

Dr. Horstmann, a member of the Yale medical faculty since 1942, is noted for her research on the prevention of poliomyelitis. She worked closely with Dr. Paul for many years in the Yale Poliomyelitis Unit. Her research contributions include an important breakthrough in the battle against polio when, in 1952, she discovered the presence of polio virus in the bloodstream in early stages of the disease. This finding, also made independently by Dr. David Bodian at Johns Hopkins, confirmed the fact that the virus could be intercepted by vaccine-stimulated antibodies in the bloodstream.

Since 1962, Dr. Horstmann has been investigating rubella and the rubella syndrome in infants. Last year she and Dr. Robert W. McCollum, professor of epidemiology, conducted extensive field trials of

the rubella vaccine HPV-77 in Danbury, Connecticut, which showed the vaccine to be more than 90 per cent effective.

### **Markle Scholar Named Associate Dean**

Dr. James P. Comer, assistant professor of psychiatry, has been appointed a Markle Scholar in Academic Medicine for 1969-74. In addition, Dr. Comer has been named an associate dean in the School of Medicine.

The Markle scholarship, given by the John and Mary R. Markle Foundation of New York, is one of the



Dr. Comer

country's most distinguished awards made to promising young scientists in medicine. It provides for a \$30,000 grant to be applied to the scholar's career development over a five-year period. Dr. Comer will continue to conduct research in his field of interest, social psychiatry with particular attention to race relations and education, after assuming his new post as associate dean. In the latter capacity he will work closely with Dr. Howard Levitin, associate dean, on matters concerning student affairs and curriculum.

A native of East Chicago, Indiana, Dr. Comer was graduated from Indiana University in 1956 and received his M.D. degree from Howard University College of Medicine in 1960. He also holds an M.P.H. degree awarded him in 1964 by the University of Michigan.

He served his residency in psychiatry at Yale from 1964 to 1967. Following a one-year assignment with the Center for the Study of Child and Family Mental Health of the National Institute of Mental Health, he returned to New Haven in 1968 to join the Yale faculty in the Child Study Center.

Dr. Comer is currently co-director of a program designed to bring the knowledge of individual and group dynamics to bear on the problems of inner city education. Known as the Baldwin-King Schools Project, it is part of a six-year program being conducted jointly by the Yale Child Study Center and the New Haven Board of Education with support from the Ford Foundation.

Dr. Comer is the author of several major articles on the psychiatric aspects of race relations, including "The Social Power of the Negro", *Scientific American*, April, 1967 and "Individual Development and Black Rebellion: Some Parallels", *Midway*, University of Chicago, Summer, 1968.

### **Dr. Yesner Named Associate Dean For VA Hospital Affairs**

Dr. Raymond Yesner, associate professor of pathology, has been appointed associate dean for Veteran Administration Hospital affairs at the medical school. At the same time, Dr. Yesner was named chief of staff at the West Haven Veterans Administration Hospital.

In the newly created associate deanship, Dr. Yesner will be responsible for the VA hospital's program of medical education and research, and will be the liaison between that hospital and the medical school.

Dr. Yesner has had a distinguished career in the field of pathology with particular reference to cancer research. He has done extensive laboratory research on patterns and characteristics of tissue structure and their changes in response to chemotherapy.

A native of Columbia, Georgia,



Dr. Yesner

Dr. Yesner received his B.A. degree from Harvard College in 1935 where he majored in chemistry. In 1941 he received the M.D. degree from Tufts University School of Medicine. He served both his internship and his residency at Beth Israel Hospital in Boston from 1941 to 1944.

During World War II Dr. Yesner was a captain in the Marine Corps and chief of laboratory service at several medical installations. In 1947, he joined the VA hospital in Newington, Connecticut, as chief of laboratory service where he remained until 1953. With the establishment of the West Haven VA hospital in 1953, he was appointed chief of laboratory service at that institution.

In 1949 he was appointed assistant clinical professor of pathology at the Yale Medical School. In 1952 he was promoted to associate clinical professor and in 1964 he became associate professor of pathology.

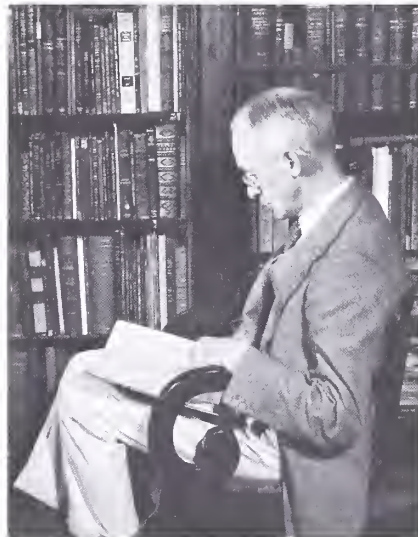
#### **National Book Award Won by Dr. Lifton**

Dr. Robert J. Lifton, professor of psychiatry, was awarded the 1968 National Book Award in science for his volume *Death in Life*, a psychological study of the survivors of Hiroshima. The book was cited by the judges as having made "vivid to us in literary form the social and ethical consequences of a single act of war." The judges were Dr. Jacob Bronowski of the Salk Institute for

Biological Studies; Dr. Theodosius Dobzhansky, professor of genetics at the Rockefeller University; and Walter Sullivan, science editor of the *New York Times*.

In his acceptance speech at the awards ceremony in New York in March, Dr. Lifton said that he would contribute half of the \$1000 prize to a special fund for the survivors of Hiroshima. The other half would be equally divided between two American groups — the Council for a Livable World, and Physicians for Social Responsibility — groups which, he said, "refuse to allow us to deceive ourselves about nuclear and biological weapons, and insist that we pursue science to promote life, and medicine to promote healing."

Dr. Lifton holds the Foundations Fund for Research in Psychiatry Professorship.



A seldom reproduced photograph of Dr. Cushing, taken in his library at 305 Walnut Street, Brookline, Massachusetts, in 1931.

#### **The Centennial of Harvey Cushing's Birth**

It is entirely fitting that a collection of letters, books, and photographs marking the highlights in the life of Harvey Cushing should be exhibited in the Cushing Rotunda in observance of the centennial of his birth.

Cushing, who was born on April 8, 1869, traced his medical heritage back four generations to include a great grandfather, David Cushing, who was a physician in Massachusetts and a grandfather Erastus and father, Henry, who were doctors in Cleveland. He received the B.A. degree from Yale in 1891 and the M.D. degree from Harvard in 1895. After an internship at Massachusetts General Hospital, he went to Johns Hopkins as a resident at the invitation of Dr. William Halsted. In 1912 he joined the medical faculty at Harvard as professor of surgery and surgeon-in-chief at Peter Bent Brigham Hospital. At his retirement, President Angell prevailed on him to return to New Haven and he remained here until his death in 1939.

He is perhaps less well known for his preoccupation with baseball and his skill at drawing. And he is certainly less well remembered than he should be for the fact that, through the terms of the bequest of his books and papers — together with those of the late Arnold Klebs and John Fulton — the Yale Medical Library exists within the confines of the medical school building and contains, among its holdings, a unique collection of historico-medical material.

An ardent bibliophile, he was also a prolific author, dating back to 1912, when he published his first full-length book, and the first anywhere on the subject of modern endocrinology, *The Pituitary Body and its Disorders*.

As their contribution to the centennial celebration, a committee from the American Association of Neurological Surgeons (formerly The Harvey Cushing Society) has issued a collection of his most significant papers in one volume, *Harvey Cushing: Selected Papers on Neurosurgery*. Copiously illustrated with photographs and drawings, including some of Cushing's own anatomical sketches, the book



has been edited by Donald D. Matson and William J. German, professor emeritus of neurosurgery, and members of a committee from the society.

### **Students Sought from Minority Groups**

A special committee established by Dean Redlich to recruit minority group members for the health professions has been at work for nearly a year. The Committee for the Recruitment of American Black and Spanish-speaking Students is composed of members of New Haven's black and Spanish-speaking communities and members of the Yale medical faculty, administrative staff, and student body. The committee's work is supported by a grant from the Josiah Macy, Jr. Foundation.

The aims of the committee are to increase applications for minority group members both to the School of Medicine and the School of Public Health. Committee members have been visiting colleges and universities to talk with students and counselors about Yale's programs and to encourage applications. Particular attention is being given to colleges in Connecticut and in the greater Boston and New York areas, but teams from the committee have also traveled to the South to visit colleges that are primarily black.

Alumni who are interested in helping the committee's effort may obtain copies of recruitment folders by writing to Mr. Courtland S. Wilson, Committee for Recruitment, Yale School of Medicine, 333 Cedar Street, New Haven, Conn. 06510.

### **Honors and Awards to Faculty Members**

Dr. Gerald L. Klerman, associate professor of psychiatry and director of the Connecticut Mental Health Center, has received the Lester N. Hofheimer Prize for Research at the annual meeting of the American Psychiatric Association in Miami, Florida, on May 2. Dr. Klerman shared

the award with Dr. Jonathan O. Cole of Boston, and Dr. Solomon C. Goldberg of Chevy Chase, Maryland.

The prize is given annually for the outstanding research accomplishment in psychiatry and mental health and was presented to the three collaborating investigators this year for their research demonstrating the effectiveness of the use of phenothiazine in relieving symptoms of schizophrenic patients and in encouraging long-range control of the psychoses. The award was established in memory of Lt. Lester N. Hofheimer, who was killed in World War II.

Dr. Thomas R. Forbes, associate dean and professor of anatomy, has been elected a Fellow of the Royal Society of Medicine in London.

Dr. Howard M. Spiro, professor of medicine, has been elected to honorary membership in the Connecticut Society of American Board Internists. In extending this honor, the Society noted that in future years such honorary membership may be offered to other distinguished men in the State. Dr. Spiro is the first to be so named.



*Dr. Slaughter*

Dr. Diana Slaughter, assistant professor of psychology and a member of the staff of the Yale Child Study Center, has received the Distinguished Research Award of Pi Lambda Theta, a national educational honor society. The award, which was established this year to recognize outstanding research by women, was given in recognition of Dr. Slaught-

er's doctoral dissertation, "Maternal Antecedents of the Academic Achievement Behaviors of Negro Head Start Children."

Dr. Sofia Simmonds, associate professor of biochemistry, was awarded the American Chemical Society's Garvan Medal in April at the national meeting of the society in Minneapolis. Dr. Simmonds' research has been concerned with the metabolism of microorganisms, protein synthesis, and the clarification of gene functions in mutant strains. The Garvan Medal was established in 1936 to recognize outstanding U.S. women chemists.



*Dr. Simmonds*

Dr. John A. Kirchner, professor of otolaryngology and chief of the section of otolaryngology, was named the 1969 recipient of the Newcomb award of the American Laryngological Association. The award is given annually to the member who has made the most outstanding contribution in the previous year to the literature on the larynx. In 1966, Dr. Kirchner was the recipient of the organization's Casselberry Prize, the nation's highest award for research on disorders of the larynx.

Dr. David A. Hilding, associate professor of otolaryngology, received the Harris P. Mosher Award of the Triological Society at the organization's annual meeting in March. The award recognizes Dr. Hilding's research on the development of the cochlea, or inner ear.



At the same time, Dr. Hilding was elected to membership in this national organization of otologists, rhinologists, and laryngologists.

Dr. M. David Egger, assistant professor of anatomy, has received a research scientist development award from the National Institute of Mental Health. The award, a five-year renewable grant, was made to Dr. Egger for his neurophysiological studies, with particular reference to spinal reflexes. He has also developed a light microscope for studying living cells near the surface of tissue which will have important implications in brain research.

Dr. Thomas L. Lentz, assistant professor of anatomy, is the recipient of a five-year career development award from the National Institute of Neurological Diseases and Blindness. The award to Dr. Lentz is to further his studies as a research scientist and to allow him the opportunity for in-depth investigation into the mechanisms by which nerves maintain the structural integrity of tissues, such as muscle, and control regeneration in some animals.

#### **Dr. Paul Honored**

Following is the text of a joint resolution adopted by the Connecticut General Assembly on April 2, 1969:

*Resolved by this Assembly:*

*WHEREAS, Dr. John R. Paul, Professor Emeritus of Epidemiology and Preventive Medicine and Lecturer in the History of Science in Medicine at Yale University will be celebrating his seventy-sixth birthday on April 18, 1969; and*

*WHEREAS, he has served as Director of the Regional Serum Bank, World Health Organization, consultant to the Secretary of War from 1941 through 1946, consultant to the United States Public Health Service and has served the United States government in the Middle East, Japan, Korea and the Soviet Union; and*

*WHEREAS, he has served on the Research Committees of the National Foundation for Infantile Paralysis and his pioneering work in the field of polio research is in part responsible for the eradication of this dread disease; and*

*WHEREAS, he has been the recipient of numerous awards and honors including the Medal of Freedom, USA and was named to the Georgia Hall of Fame of Infantile Paralysis.*

*NOW, THEREFORE, BE IT RESOLVED, that the members of this assembly unite in congratulating Dr. John R. Paul upon his seventy-sixth birthday and in commending him for his dedication and his many accomplishments during his long and illustrious medical career; and BE IT FURTHER RESOLVED, that the clerks of the house and senate cause a copy of this resolution to be sent to Dr. John R. Paul as a sincere expression of the high esteem in which he is held.*

In transmitting a copy of the resolution to Dean Redlich, Dr. Franklin M. Foote, Commissioner of Health, noted that the action by the legislature was very unusual. "During the past forty years," he wrote, "so far as we can remember, only one other physician has been commended in this way . . ."

#### **Students Exchange Ideas With Leaders**

Yale medical students have been having informal evening discussions this spring with prominent people in education, politics, and other fields. President Kingman Brewster, Jr., Rev. Malcolm Boyd, Eugene and Edna Rostow, and philosopher Paul Weiss have been among the notables who have come to dinner at Edward S. Harkness Memorial Hall and then joined students in the lounge for an exchange of ideas and attitudes on contemporary issues. The meetings were arranged by the school's Student Council and Student Health Project.

#### **Two Students Win International Fellowships**

Robert Stuart Stern and Daniel Wuensch, both of the class of 1970, have been awarded international fellowships for study abroad this summer. The fellowships have been made possible through grants from the Association of American Medical Colleges in conjunction with the U.S. Public Health Service. Both students will travel to Tel Aviv, Israel, to participate in research training projects at the Tel Aviv University-Tel Hashomer Government Hospital.

#### **Roberts Memorial Lecture**

Dr. Gerald Caplan, clinical professor of psychiatry at the Harvard Medical School, delivered the 13th Bertram H. Roberts Memorial Lecture at Yale on March 4. His subject was "Prospects for Community Psychiatry: Lessons from History." The lectures honor Dr. Roberts, a member of the Department of Psychiatry faculty who died in 1965.

#### **School Joins in Seminar On Medical Ethics**

Physicians, lawyers, and theologians exchanged views on medical experimentation, organ transplants, euthanasia, and other matters involving medical ethics in a four-day symposium at Yale in March. The occasion was the Divinity School's annual convocation of which, this year, both the School of Medicine and the Law School were also sponsors.

R. Paul Ramsey, professor of religion at Princeton University, delivered the Lyman Beecher Lectures during the convocation. Yale medical faculty who participated as speakers or panelists included Dean Redlich; Dr. Howard Levitin, associate dean and associate professor of medicine; Dr. Richard A. Selzer, clinical associate in surgery; and Dr. Jay Katz, professor of law and psychiatry.

A colorful parade through the Hill neighborhood of New Haven on April 12 highlighted the formal opening of the Hill Health Center on Columbus Avenue. The center is a community-based facility designed to provide comprehensive health care services to all residents under the age of 21. Dr. Alvin H. Novock, associate professor of clinical pediatrics, is project director. Speakers and guests on the platform for the dedication ceremony represented a broad spectrum of health interests in the community. The audience of some 300 included Mrs. James Rowland Angell; Rachel Robinson, director of nursing at the Connecticut Mental Health Center; President Kingmon Brewster, Jr., of Yale; and Dean Morgoret Arnstein of the Yale School of Nursing.



## New Book

*Rehabilitation and Medicine* (Volume 10 of Physical Medicine Library) edited by Dr. Sidney Licht, curator of the Physical Medicine Collection, Yale Medical Library (Elizabeth Licht, publisher). This is a comprehensive compendium on the subject of rehabilitation, the physical care and related therapies involved in the treatment of the physically disabled. In 24 chapters

by as many contributing authors, disabilities—their definition, description, treatment and possible responses to treatment—are dealt with. This is a book for physicians who are responsible for assisting patients to cope and live with their physical problems in as normal a fashion as possible. Among the Yale contributors are Dr. Louis B. Fierman, associate clinical professor of psychiatry, Dr. Herman L. Kamenetz, clinical associate in physical

medicine, Dr. F. Patrick McKegney, Jr., associate professor of psychiatry and medicine, and Dr. Licht. Dr. Harold M. Sterling, class of 1951, on the staff of The Rehabilitation Institute in Boston, Mass., also contributed a chapter.

## Faculty Notes

Dr. Theodore Lidz, chairman of the Department of Psychiatry, presented the first Samuel Novey Lecture in Psychological Medicine at the Johns



Hopkins School of Medicine on March 18. The subject of his address was "Disruptions of Life Patterns and Psychosomatic Disorders." In the following month, from April 7 through 11, Dr. Lidz was the Clarence P. Oberndorf Visiting Professor of Psychiatry at the Mount Sinai Medical School in New York.

The Department of Psychiatry was host to the meeting of the Northeastern Professors of Psychiatry, March 13-15. Dr. Lidz opened the meeting by presenting an address on "A New Proposal for the Education of Psychiatrists." Dr. Marshall Edelson, associate professor of psychiatry, also presented a paper entitled, "The Integration of the Behavioral Sciences and Clinical Experience in Teaching Medical Students."

Dr. Kenneth Keniston, associate professor of psychology, was a visiting lecturer at Southern Methodist University, Dallas, Texas, March 19-21, at which time he addressed both the Superior Studies Program and the student association. Both of his lectures dealt with the alienation of American youth. He also delivered the Walter VanDyke Bingham Memorial Lecture at the Carnegie-Mellon University in Pittsburgh on March 26; the topic was "Youth as a Stage of Life."

Dr. Samuel Ritvo, clinical professor of psychiatry and president of the American Psychoanalytic Association, chaired the afternoon meeting of the Third Pan-American Congress for Psychoanalysis, held at the Waldorf-Astoria Hotel. The subject of the meeting was "The First Psychoanalytic Hour."

Dr. Albert J. Solnit, professor of pediatrics and psychiatry and director of the Yale Child Study Center, took office as president-elect of the American Psychoanalytic Association in May. Dr. Solnit is presently serving his second year of office as president of the American Association for Child Psychoanalysis and of

the Western New England Psychoanalytic Society.

The American Association for Child Psychoanalysis held its fourth annual scientific meeting in New Haven, March 28-30. Dr. Solnit presided over the opening session and was a contributor at other sessions. The meeting, consisting of lectures and workshops, was in session for three days and had, as its overall topic, "Problems of Technique in Child Analysis in Relation to Developmental Stages." Dr. Ritvo also presided over an afternoon workshop session, one of three study groups formed to augment and exchange material based on the three morning addresses. His area of discussion concerned pre-latency. A highlight of the meeting was the presentation of "John, 17 Months," a film made in England by James and Joyce Robertson of the Tavistock Institute. The motion picture, which is not yet in public circulation, deals with the despair and personality changes in a youngster whose mother places him in a nursery for ten days while she goes to the hospital to have a second child.

Dr. Seymour Lustman, professor of psychiatry at the Child Study Center, was visiting professor of psychiatry at the University of Colorado in Denver in March, at which time he delivered the Aaron Brown Memorial Lecture at the College of Medicine. His topic was "A Prospective on the Study of Man." The following day he addressed the Denver Psychoanalytic Society, presenting a paper entitled "The Concept of Critical Period."

Dr. Martha Leonard, assistant professor of pediatrics at the Child Study Center, attended the annual meeting of the American Orthopsychiatric Association in New York. Dr. Leonard was chairman of a panel which dealt with "Fathers Outside the Home."

Dr. Melvin Lewis, associate professor of pediatrics and psychiatry at the Child Study Center, attend-

ing the same meeting, chaired a workshop discussing "The Adolescent on a Pediatric Ward."

Dr. Sally Provence, professor of pediatrics at the Child Study Center, attended a meeting of the regional supervisors of the OEO Parent and Child Centers in Washington, D.C. at the end of April. Dr. Provence addressed the group on the subject of "Developmental Needs of the Infant."

Dr. Adrian M. Ostfeld, Anna M. Lauder Professor of Epidemiology and Public Health and chairman of the Department of Epidemiology and Public Health, was recently named to the Training Grant Committee on Aging of the National Institute of Child Health and Human Development.

He has also been appointed to serve as a member of the Veterans Administration Cooperative Studies Evaluation Committee. This group, which is under the auspices of the Department of Medicine and Surgery of the VA, considers and evaluates effective treatment of stroke, and makes recommendations on the basis of its findings.

Dr. Arend Bouhuys, professor of medicine and epidemiology, attended the International Conference on Pneumoconiosis in Johannesburg, South Africa, and presented a paper to the conference entitled "Byssinosis and Textile Workers."

Dr. Jordi Casals, professor of epidemiology, was invited by the New York Society of Tropical Medicine to deliver the society's annual Theobald Smith Memorial Lecture. At the annual meeting, held in New York on May 14, Dr. Casals spoke on the subject, "Certain Aspects of the Immune Response of Vertebrates to Arbovirus Infections."

Dr. Jonathan H. Pincus, associate professor of medicine (neurology), attended a meeting in April of the American Academy of Neurology in Washington, D.C., where he presented a paper on the thiamine-



linked lesion in subacute necrotizing encephalomyelopathy. The research was conducted by Dr. Pincus and his co-workers, Dr. Jack R. Cooper, associate professor of pharmacology, and Dr. Yoshinori Itokawa, research associate in pharmacology.

The three doctors have demonstrated a lack of thiamine triphosphate in the brain in this important but rare disease, and the existence of a factor in blood, urine, and cerebrospinal fluid which inhibits the synthesis of thiamine triphosphate. They are attempting to isolate and characterize this factor toward devising treatment to counteract the inhibitor. Their findings represent a significant breakthrough in that they establish the biochemical basis of the illness.

Dr. Jack W. Cole, Ensign Professor of Surgery and chairman of the Department of Surgery, was one of the speakers at a conference held in Bethesda, Maryland, to investigate the possibilities of a national biomedical education communication network. Dr. Cole spoke on sharing resources. The two-day conference was sponsored by the Council of Academic Societies of the Association of American Medical Colleges and the National Library of Medicine.

Dr. Frederick H. Hehre, associate professor of anesthesiology, joined faculty members of the University of Cincinnati School of Medicine and other distinguished guest lecturers in a postgraduate course on problems of the fetus and newborn infant. These sessions for physicians, held in January, were offered through the school's continuation medical education department and were jointly sponsored by the Department of Obstetrics and Gynecology and the Division of Neonatology of the Department of Pediatrics.

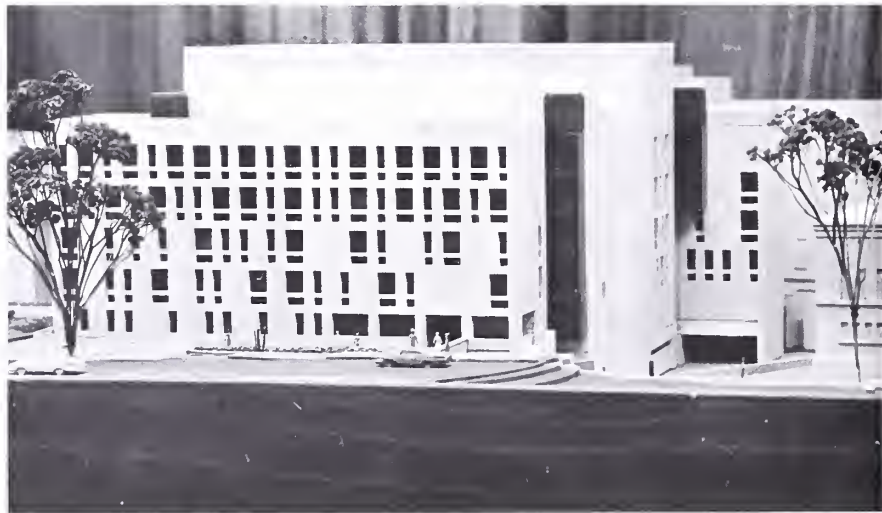
Dr. Massimo Calabresi, associate clinical professor of medicine, spent the month of January at the Graduate School of Public Health of the University of Perugia in Italy. He was a visiting professor and gave a

course in "Preventive Aspects of Chronic Diseases." He also attended the First International Congress on Death and Resuscitation and led a panel discussion at the University of Ferrara on "The Distribution of Medical Services."

### **Yale University Health Service**

Plans have been announced for reorganization of the University Health Service as a prepaid, comprehensive plan available to all students and, on a voluntary basis, to all faculty, staff, and dependents. The program will be the first of its kind to function directly within a university and offers an exceptional opportunity for constructive cooperation between the new service and the Yale-New Haven Medical Center. Patients will be hospitalized at the medical center and members of the staff will also be members of the medical faculty.

*Model of the proposed University Health Service building*



Construction of a new building to house the clinic and infirmary will be under way soon and is expected to be completed by September, 1970. In the meantime, a staff will be assembled. Inquiries regarding appointment to the staff are invited and, until a Director of Professional Services is selected, should be directed to Dr. Vernon W. Lippard at the School of Medicine.

### **Recent Appointments to the Faculty**

Dr. George Rosen, professor of health education at the School of Public Health and Administrative Medicine of Columbia University and a leading medical historian, will join the faculties of the Yale School of Medicine and the Yale Graduate School in a joint appointment effective July 1. Dr. Rosen will be professor of the history of medicine in the Department of the History of Science and Medicine and also professor of epidemiology and public health.

A native of New York, Dr. Rosen was graduated from City College in 1910. He received his M.D. degree from the University of Berlin, Germany, in 1935, and the Ph.D. and M.P.H. degrees from Columbia University in 1944 and 1947, respectively. In 1951 Dr. Rosen was named

professor of public health education at Columbia, a position he has held until the present time. He has, in addition, been a visiting lecturer on medical care at Harvard and a visiting professor of the history of medicine at Yale.

A prolific writer, he is the author of eight books and more than 160 articles on subjects of medical historical interest. From 1946 to 1952 Dr.

Rosen was editor of the *Journal of the History of Medicine*; he has been the editor of the *American Journal of Public Health* since 1957.

Dr. Solomon S. Schwartz, a noted authority on gastrointestinal radiology, has been named professor of radiology and chief of the Section of Diagnostic Radiology. Some of his plans for the section are described on page 4.

Dr. Schwartz, who received his B.A. degree from Boston College in 1943 and his M.D. degree from Tufts College in 1940, was most recently on the faculty of the New York University School of Medicine.

Dr. Thomas J. Krizek has been appointed associate professor in the Department of Surgery and chief of the Division of Plastic Surgery. A former member of the medical faculty of Johns Hopkins, Dr. Krizek is an authority in the field of reconstructive surgery and has done extensive research in aspects of surgical bacteriology, including the care and treatment of burns and skin transplants, and reconstructive surgery on the aging.

Additional faculty appointments and promotions, effective July 1, will be announced in the fall issue.

### **Anesthesiology Department Holds Two-Day Reunion**

Former residents of the Anesthesiology Section, together with members of the present staff, convened in New Haven on Friday, May 23rd, and Saturday, May 24th, for two days of interchange on new concepts relating to patient care.

Sixty-six visitors and their wives were ushered through newly available facilities including the pediatric and adult intensive care areas, the obstetrical suite, and the pain clinic, with explanatory material provided by Drs. Etsuro Motoyama, James I. Gilman, and Robert I. Schrier, assistant professors of anesthesiology. The group also heard from Dr. Frederick W. Hehre, associate professor of anesthesiology, and Dr. H. Arto Abrahamian, assis-

tant professor of anesthesiology. The tour was followed by a case presentation by Drs. Schrier and Stanley E. Maytszewski. An audience of over 100 met for cocktails and dinner at the Kline Biology Tower and to hear the guest speaker, Professor James P. Payne of the research department of anesthetics of the Royal College of Surgeons of England, describe the medico-legal aspects of medical practice in Britain today.

Saturday, while wives toured the University, a seminar, with brief commentary on this year's research work by staff members, was held in the Peters-Darrow Room. Anesthesiology's first reunion concluded with a luncheon for alumni and their wives at the Hamden home of Dr. Nicholas M. Greene, professor of anesthesiology, and Mrs. Greene, but the success of the debut presages a repetition of the performance in the future.



Dr. Greene

### **Harry S. N. Greene, M. D.**

On February 14, Yale lost one of the most distinguished members of its medical faculty and the chairman of its Department of Pathology, Dr. Harry Sylvestre Nutting Greene. He died after a lengthy illness which had its onset in July of 1968 while he was on vacation in Maine.

A native of Woonsocket, Rhode Island, Dr. Greene attended Brown University and received his M.D. degree from McGill University in 1930. After a year at the Pathological

Institute at McGill, he joined the staff of the Rockefeller Institute for Medical Research. His ten years with the Rockefeller Institute were extremely productive for it was there that he began his investigation of tissue transplantation and its application to cancer. In 1941 Dr. Greene came to Yale at the invitation of Dr. Milton C. Winternitz as associate professor of pathology and surgery. He was promoted to professor of pathology in 1943 and was appointed to the Anthony N. Brady Professorship of Pathology, succeeding Dr. Winternitz, in 1950.

As a memorial tribute to Dr. Greene, the School of Medicine Board of Permanent Officers passed the following resolution:

"Many of Harry S. N. Greene's colleagues will affectionately remember him as an imaginative, provocative, creative, and profound thinker, who loved to stimulate discussions often by assuming controversial or seemingly untenable positions. The impact of his multifaceted personality upon his senior and junior colleagues, the house staff, and medical students was profound and most influential in the history of the Yale Medical School. Up to the last months of his life Harry Greene preserved his youthfulness by rebelling against all possible dogmas and by fighting for what he believed to be just. To his equals and administrative superiors he was a fighting terror; but to his juniors he was a benign protector.

"Harry Greene was an ideal departmental chairman. He considered the Department of Pathology as a department of independent units or sections. His role as chairman, as he often stated, was to help his colleagues and to protect them from administrative burdens. He gave to the members of the department complete freedom and unrestricted authority, expecting only responsibility in return. He disliked servility, stuffiness, and flattery and firmly believed in the free expression of one's views. This, on occasion, re-



sulted in disagreements and heated discussions within the department. Yet the members of the department were closely united in purpose.

"From the introductory lecture in the pathology course, the student immediately realized that Harry Greene was not the usual type of professor. The students' inquisitive minds were continuously challenged, their imaginations were stimulated, and they were encouraged to question everything and everybody, not excluding the Professor, himself. His door was always open to the students and they came to him with personal or professional problems. Harry was the students' best friend, showing them kindness and an inexhaustible patience that would have surprised those who did not know him well. If a student got into academic difficulties he could count on Dr. Greene's support, and Harry always assumed the role of defender before the administration of the school.

"Through his investigations, utilizing transplantation techniques of normal, embryonic, and neoplastic tissues, Harry Greene achieved national and international recognition and renown. As a reflection of his basic personality, his investigative approaches, his working hypotheses, and his concepts were imaginative, creative and unorthodox. He had the great man's instinct for broad problems rather than details. To the many students and colleagues who studied with him, he shared in a most generous manner all the resources of his laboratories and allowed them all the freedom they desired in pursuing their research. He never interfered, controlled, or put any pressure on any of his close associates. If advice was wanted, it was always given most generously.

"His loss is profoundly felt, especially by those who knew him as a human being. Behind his famous down-to-earth appearance and his modest exterior, there was a sensitive, refined, and most compassionate man."

Dr. Greene is survived by his wife, Jean, and three daughters, Judy, Susan, and Melissa. At the request of his family, the Harry S. N. Greene Memorial Fund for Research and Scholarships in the Department of Pathology has been established at the School of Medicine.

#### **Max Caplan, M. D.**

Max Caplan, a clinical associate in medicine, died in Lisbon, Spain, on December 6, 1968.

Born in New Haven, Dr. Caplan graduated from Yale in 1929 and received his M.D. degree from the University of Louisville School of Medicine in 1933. He interned at the Louisville City Hospital and trained in internal medicine and gastroenterology at Montefiore and Mount Sinai Hospitals in New York City. Until the time of his death, Dr. Caplan practiced internal medicine and gastroenterology in Meriden, Connecticut. He was former chief of medicine at the Meriden Hospital, former chief of staff at the World War II Veterans Memorial Hospital in Meriden, and consultant in gastroenterology at the Rocky Hill Veterans Hospital and at the Bradley Memorial Hospital in Southington, Connecticut. He had served as a member of the part-time faculty of the Yale School of Medicine since 1950.

Dr. Caplan had for years been active in his county and state medical societies. He was a past president of the New Haven County Medical Association and at the time of his death was vice-president of the Connecticut State Medical Society and an AMA delegate from Connecticut.

He is survived by his wife, Evelyn, and his brother, Dr. Henry Caplan of Rocky Hill, Connecticut.

#### **Lewis Chandler Foster, M.D.**

Dr. Lewis Chandler Foster, clinical professor emeritus of surgery at the Yale School of Medicine and surgical consultant to the Department of University Health, died on February 9 at the age of 72.

Dr. Foster, who was born in St. Louis, completed his undergraduate work at the University of Kansas and was awarded his M.D. degree from the Harvard Medical School in 1923. He served an internship at Peter Bent Brigham Hospital in Boston and his residency at the Yale-New Haven Hospital. Dr. Foster was professor of surgery at the Yale Medical School until 1964 when he became emeritus.

He was a member of the American Medical Association, the American College of Surgeons, the New England Surgical Society, and was a former president of the Society of University Surgeons.

Dr. Foster is survived by three sons, three brothers, and three sisters.

#### **Wilder Tileston, M.D.**

Dr. Wilder Tileston, David P. Smith Clinical Professor Emeritus of Medicine, died at Carmel, California, on May 2, at the age of 94.

Dr. Tileston, a native of Concord, Massachusetts, was born on January 22, 1875. He received his B.A. and M.D. degrees from Harvard in 1895 and 1899 respectively, taking his post graduate work at Vienna and Graz in Austria.

After nine years of private practice in Boston, Dr. Tileston joined the faculty of the Yale medical school as assistant professor of medicine in 1909. He was promoted to professor of clinical medicine in 1919. In 1940 he was named David P. Smith Professor of Medicine and in 1943 he received emeritus status but continued as lecturer in medicine until 1946.

In addition to his teaching duties, Dr. Tileston was chief of staff at Grace Hospital from 1926 to 1929. He was consulting physician at Meriden and Griffin Hospitals and visiting physician at New Haven Hospital.

Dr. Tileston was a member of the American Society of Clinical Investigation, the Connecticut State Medical Society, and the Interurban Clinical Club.



# Alumni News

## 1903

A feature story about CHARLES FARR, age 93, recently appeared in the *Athol (Mass.) Daily News*. Dr. Farr, who is now living at the Mary Manning Walsh Home, 420 East 59th Street in New York, (where his wife, Helen, is also a resident) was on the staff of New York Hospital for sixty years, specializing in abdominal surgery. Though he retired three years ago, Dr. Farr is still a consultant to that hospital and to St. Mary's Hospital in Bayside, Queens. His son, Hollon (Yale College '39) is a surgeon attached to New York and Memorial Hospitals and his eldest brother Tute, no longer living, was a professor of German in Yale College.



Dr. Farr

## 1912

EDWARD H. KIRSCHBAUM and his wife of Santa Barbara, California, have recently established a most generous endowment, the Edward H. Kirschbaum Book Fund, for the purchase of books in the history of surgery, including both original sources and supporting works. Dr. Kirschbaum has long been a supporter of the library and was, from 1959 to 1963, a trustee of the Associates of the Yale Medical Library. Through his latest gift, he becomes a life member of the Associates.

## 1933

IRVING FRIEDMAN, assistant clinical professor of obstetrics and gynecology, was elected president of the medical staff officers of Yale-New Haven Hospital at their annual meeting in April.

## 1939

ARTHUR S. TUCKER writes that he

regrets missing his 30th reunion but, on that date in May, he will be in Warsaw at the meeting of the European Society of Pediatric Radiology where he will present a paper entitled "Tumors and Pseudo-tumors of the Bladder."

## 1940

THADDEUS S. DANOWSKI, professor of medicine and chief of the section of endocrinology and metabolism at the University of Pittsburgh School of Medicine, was the recipient of the 1968 Alfred Jurzykowski Foundation Award for Medicine. The award, which carried with it a medal and a stipend, honors persons who have influenced Polish life, art, and letters. Dr. Danowski is the author of a number of books on medical subjects. In addition to his teaching schedule at the medical school, he is senior staff physician at Presbyterian-University, Magee-Womans, Children's, and Shadyside Hospitals.



Dr. Danowski

PAUL D. MacLEAN delivered the Clarence Hincks Memorial Lectures at Queen's University, Kingston, Ontario, this year's host to the lectures. Dr. MacLean, who is chief of the Section of Limbic Integration and Behavior at the Laboratory of Neurophysiology of the National Institute of Mental Health in Bethesda, Maryland, spoke on the general topic of "The Brain and Behavior." In his series of three lectures, Dr. MacLean spoke on "Man's Reptilian and Limbic Inheritance"; "Man's Limbic Brain and the Psychoses"; and "New Trends in Man's Evolution."

## 1942

We have received news of the marriage of ROBERT ERNST CARROLL to the former Mrs. Jane Chase Clay. Dr. Carroll is attending orthopedic surgeon at Columbia Presbyterian Medical Center and associate professor of clinical orthopedic surgery at the College of Physicians and Surgeons. His first wife, Harriet, died some time ago.

CHARLES R. HARMS and his wife, Aileen, (Yale School of Nursing, 1940) visited their son-in-law Tom and his wife, Nancy, in Thailand. The Harms' managed to sandwich in stopovers in Hawaii, Japan, Calcutta, Cairo, Athens, and Rome. The Harms live at 363 Park Street, Upper Montclair, N.J. 07043.

## 1943

J. PHILIP LOGE was appointed to the post of director of the San Bernardino County General Hospital in

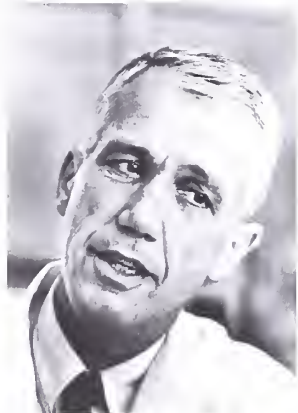


Dr. Norman Sears ('40), on right, studies the day's instructional itinerary with Dr. Richard Lillard (hs '67) in the pharmaceutical section of the S.S. HOPE. The HOPE has recently completed a ten-month medical teaching mission in Colombo, Ceylon.

October. The hospital and the UCLA School of Medicine are engaged in a joint program of medical education with particular emphasis on the training of the new family physician specialist.

**1944**

ROBERT E. COOKE was editor with Dr. Sidney Levin of *The Biologic Basis of Pediatric Practice* published in two volumes by McGraw-Hill Book Company in 1968. A recent review in the JAMA commented: "The appearance of this massive work after years of preparation represents a major publishing milestone in pediatrics. It is the stated intent of the editors to relate the basic science aspect of pediatrics to clinical practice, and the book is a natural outgrowth of the expanding productive basic research in pediatrics."



Dr. Cooke

Dr. Cooke, who is Given Foundation Professor of Pediatrics and director of the department at the Johns Hopkins University School of Medicine, is a member of the President's Committee on Mental Retardation and the National Advisory Child Health and Human Development Council of the National Institutes of Health. He has recently been appointed a medical consultant to the National Foundation-March of Dimes. Last year Dr. Cooke received the Joseph P. Kennedy, Jr., Foundation International Leadership Award for his outstanding contributions in the field of mental retardation.

**1946**

SANFURD G. BLUESTEIN was recently elected president of the Pas-saic Valley Health Facilities Planning



Dr. Bluestein

Council which has jurisdiction over three counties in New Jersey. Purpose of the council is to examine health facilities in the region and provide for the total community needs by coordinating hospital and health facilities. Dr. Bluestein is assistant professor of radiology at Mount Sinai Medical School in New York City, attending radiologist at the Barnett Hospital in Paterson and at the Chilton Hospital in Pompton Plains. He is also radiological consultant to the Paterson Board of Health and the American Cyanamid Corporation in Wayne.

**1947**

ROBERT SCHWARTZ has been named acting chairman of the Department of Pediatrics at Case-Western Reserve University School of Medicine. He will continue in the position of director of pediatrics at Cleveland Metropolitan General Hospital, professor of pediatrics at Case-Western Reserve and associate pediatrician at Babies and Childrens Hospital of University Hospital. He



Dr. Schwartz

had previously been associated with the Boston Children's Hospital and the Harvard Medical School.

**1949**

LAWRENCE E. SHULMAN, professor of rheumatology at the Johns Hopkins University School of Medicine, was one of several guest faculty members who participated in an International Symposium on Systemic Lupus Erythematosus held at the Mayo Clinic. The symposium honored Dr. Malcolm M. Hargraves, a member of the Mayo Clinic staff who is retiring this year and who described the LE cell twenty years ago.

**1950**

SIDNEY S. LEE, Associate Dean for Hospital Programs at the Harvard Medical School, has passed on portions of a letter from classmate LYAL ASAY in which the latter reports: "As you can see, I am still with the Permanente Medical Group, having been here more or less for 15 years. We have been active in a variety of community projects, as well as doing extensive exploration of the back country and back-packing in such areas as the Sierra Nevadas and Grand Canyon, Olympic National Park, and such areas. My children are growing up too. My oldest boy, Mike, is a sophomore at the local junior college; my oldest daughter, Patsy, is in Beloit College, Wisconsin, and the other three — Frank is in high school and the two girls, Dee-Dee and Faith, are in junior high. I still attend at the Los Angeles Childrens Hospital and Los Angeles County General Hospital. Next year we plan to spend a year in Peru, as a visiting professor under the auspices of the People to People Foundation . . ."

**1952**

Greetings from the University of California School of Medicine at San Diego were received from MARVIN GOLDBERG and his wife, Joyce. The Goldbergs write: "This has been a wonderful year of activity associated with the growth of our medical group and UCSD Med School. We now are, the proud owner of two horses. I have a pinto of my own and enjoy riding on the beach. We're getting an urge to return East this year and



hope to see you." The Goldbergs' address is: 9705 Blackgold Road, La Jolla, California 92037.

#### 1953

CLAUDE BLOCH was made a fellow of the American College of Radiology at their annual meeting in Chicago in February. Dr. Bloch is a member of the staff of Mount Sinai Hospital and Medical School in New York City.

REX B. CONN, JR., has issued a new edition of *Current Diagnosis*, a volume he co-edited with Dr. Howard F. Conn in 1966. *Current Diagnosis 2* includes new procedures and criteria in diagnosis for more than 300 diseases and, like the previous volume, is composed of contributions from eminent practitioners who are specialists in the areas they have described.

#### 1955

CLEMENT B. SLEDGE has been promoted to associate professor of orthopedic surgery at the Harvard Medical School. He is also assistant orthopedic surgeon at Massachusetts General Hospital.

#### 1959

A "Yale in Japan" alumni reunion occurred in Tokyo when CONSTANCE CONIGLIO AZZI and her husband, Victor (D. Eng Yale '61), travelled to the Orient for an International Congress on Rheology. The Azzis

met with Drs. Shinichi Sugawara and Akitsugu Ojima, all of whom were studying at Yale in 1961. Dr. Azzi is now on the faculty of the University of New Hampshire. Dr. Ojima is presently chairman of the Department of Pathology at Gifu University and Dr. Sugawara is a research scientist with Samkyo Industries in Tokyo.

SIDNEY COHEN and family write that they are fast becoming native Clevelandites and have found their dream house at 2456 Brian Drive, Beachwood, Ohio 44121.

GERALD FENICHEL was appointed professor and chairman of the Department of Neurology at Vanderbilt University School of Medicine, to take effect July 1. For the past five years, he has had an appointment

as associate professor of neurology at George Washington University School of Medicine and on the staff of the Children's Hospital of the District of Columbia as associate neurologist to the Research Foundation.

A Christmas note from the DAVID SKINNERS indicates that they are enjoying life at their new home, 8307 Carrbridge Circle, Towson, Maryland 21204. Dr. Skinner is writing, teaching, lecturing, practicing, and doing research on artificial heart devices, coronary heart disease, and gastroesophageal disorders at Johns Hopkins. His wife, Ellie, and three daughters sound equally happy and equally busy.

MURIEL DuBROW WOLF reports that she's still working as associate director of the outpatient department at Children's Hospital and as an associate cardiologist and that her husband, Dick, is still with NASA. The Wolfs plan to attend the class reunion in New Haven in May.

#### 1960

Through Class Agent THOMAS KUGELMAN, news of several classmates is available: ALAN W. AMES has opened his own office at 2311 N.W. Northrup Street, Portland, Oregon 97210, for the practice of cardiology and internal medicine. He holds an appointment as clinical instructor in medicine at the University of Oregon Medical School.

JAMES I. GILMAN was married to the former Patricia Crane of London, England, and New Haven, on March 2, 1968. After a trip to England to meet his in-laws, he and his wife have settled down at 10 Linden Point Road, Stony Creek, Connecticut.

EDWARD R. LANG writes from the USAF Hospital, Keesler Air Force Base, Biloxi, Mississippi, "I will complete my tour of duty with the USAF on July 5, 1969. During the past year I have served as chief of neurosurgery... The experience here at this 400-bed teaching hospital has been interesting and invaluable as a stepping stone to private practice. In July, my family (wife, two sons, and a daughter) and I will move to Fairfax, Virginia. On July 15th I'll begin private practice of neurological surgery with two other men in Falls Church, Virginia, just outside



Dr. Fenichel

Dr. Ojima, the Azzis and Dr. Sugawara in front of the Olympics building in Tokyo.





of Washington. I am a member of the Congress of Neurological Surgeons and the Fairfax County Medical Society."

#### 1961

A Christmas letter from the DIERWECHTERS at the Mission Methodist in Station D'il-Maten, Algeria, reports that on November 30, twin girls, Natasha and Miya, joined the family of RON, Jewell, Tatiana, and Yonn.

PHILIP FELIG, who will return to Yale as an assistant professor of medicine in July, has been appointed American College of Physicians and Teaching and Research Scholar for 1969 through 1972. He has also received the Research and Development Award of the American Diabetes Association "designed to assist exceptionally promising young investigators in their transition to the level of established investigators."

Dr. Felig was chief resident in medicine at Yale-New Haven Hospital in 1966-1967. During the past two years he has been a research fellow at the Elliott P. Joslin Research Laboratory in Boston, Massachusetts.

#### 1966

ELI NEWBERGER writes from Upper Volta on the west coast of Africa where he is stationed as a physician in the Peace Corps: "...Ougadougou is now appallingly hot and beginning to feel the wave of meningitis cases from neighboring Mali, where a full-scale epidemic is underway. Further, a measles epidemic, the CDC/AID vaccination efforts notwithstanding, is doing its share of cropping the enormous malnourished preschool population. The control of disease in this milieu seems to me to be an increasingly overwhelming problem; without water and adequate protein, in as inauspicious a climate as could be imagined, the high fertility/high mortality combination determines a feeling that nothing short of an enormous transfusion of aid could exalt the value of human life. As I reach the home stretch of my tour, I both dread and welcome the challenge of coming back..."

#### 1968

A note from DONALD H. STAN-

FORD indicates that he is enjoying San Francisco and a residency at Mount Zion Hospital. He is also pleased to have discovered a surgeon who shares his interest in medical history and who has regular meetings at his home for others who share this interest.

JOHN A. OGDEN, interne in the Yale Department of Surgery, has just won the Young Investigator's Award of the American College of Cardiology



Dr. Ogden

for his paper entitled "Congenital Variations of the Coronary Arteries." Dr. Ogden had been one of the five finalists and his paper was selected and read at the 18th annual scientific session held at the New York Hilton Hotel from February 26 - March 2. In addition to a medal, the award includes the publication of the winning manuscript in the *American Journal of Cardiology*.

### PUBLIC HEALTH

#### 1930

RUTH E. GROUT has retired as professor of health education at the School of Public Health of the University of Minnesota, and has moved to North Carolina.

#### 1938

RICHARD K.C. LEE, who is dean of the School of Public Health at the University of Hawaii, made the welcoming introduction for the 1969 Hiscock Lecture given by Representative Dorothy L. Devereaux of the State legislature. These lectures honor Dr. Ira V. Hiscock ('21 M.P.H.) for his contributions to public health in Hawaii. Dr. Hiscock is professor emeritus of public health at Yale.

#### 1947

CECIL G. SHEPS is now director of the Health Services Research Center at the University of North Carolina. Formerly, Dr. Sheps was the general director of the Beth Israel Medical Center in New York City. He was recently awarded a special certificate by the Association of University Programs in Hospital Administration in recognition of "... distinguished service to graduate education for hospital and health administration and as Director of the Graduate Program in hospital administration at the University of Pittsburgh."

#### 1950

CONSTANCE AUSTIN BEAN, in between duties as a housewife, is engaged in part-time work as a health educator for the Martha Eliot Family Health Center and for the Medical Foundation in Boston on projects concerned with education on childbirth.

NATHAN M. SIMON has been named director of psychiatry at the Jewish Hospital in St. Louis, Missouri.

#### 1951

PAUL S. ANDERSON, JR., has been appointed professor and chairman, Department of Biostatistics and Epidemiology at the University of Oklahoma Medical Center's School of Health in Oklahoma City.

ROBERT L. JOHNSON, formerly vice-president for undergraduate affairs at the University of Kentucky, has accepted an appointment as vice-chancellor for student affairs at the University of California at Berkeley.

ALVIN H. KANE is an epidemiologist with the Bureau of Preventable Diseases of the New York City Department of Health.

JAMES M. A. WEISS, professor and chairman of the Department of Psychiatry at the University of Missouri School of Medicine in Columbia, is currently on leave and is a visiting professor at Cambridge University, England. He was recently elected a fellow of the Royal Society of Health.

#### 1954

MILTON W. HAMILT is resigning his position as executive vice-presi-

dent of the Lenox Hill Hospital in New York to accept an appointment as professor of health administration at Temple University, effective July 1, 1969.

#### 1956

PAUL KAUFMAN, a lieutenant colonel in the U.S. Army, is the executive officer of Darnell Army Hospital at Fort Hood, Texas.

#### 1960

R. JOHN C. PEARSON and his family have returned to the United States after several years in England. Dr. Pearson was associated with the medical care research unit at the University of Manchester. He is currently on the faculty of the Department of Preventive Medicine at the Harvard Medical School.

#### 1961

EDWARD A. JANASZ has been appointed assistant administrator of St. Joseph's Hospital in Providence, Rhode Island. Prior to this appointment, he was associated with the Park City Hospital in Bridgeport, Connecticut.

#### 1964

EUGENE SCHOENFELD is a staff physician with the student health service at the University of California at Berkeley. Since March of 1967 he has been writing a column of medical advice for the *Berkeley Barb* under the name "Dr. Hip Pocrates." A collection of these columns — which include letters from readers and Dr. Schoenfeld's answers — has appeared in book form under the title "Dear Dr. Hip Pocrates: Advice Your Doctor Never Gave You," and has created nationwide interest. The "surgeon general of the sandal-and-speed set," as *Time* magazine calls Dr. Schoenfeld, directs his advice entirely toward the long-haired generation, whose questions range from the possibility of harmful effects of marijuana on pregnant women to the relationship between orgasms and sneezes. The doctor's answers are medically sound and delightfully humorous. He warns his hippie clientele against "street drugs" with their impurities, has little good to say about amphetamines, inveighs against fad diets and fasting, and harangues his readers to get VD

check-ups. Freedom demands responsibility, he says, so "Do your thing — but only if it does not harm yourself or others."

#### 1967

JAMES M. MALLOY was recently appointed an assistant administrator at the Waterbury Hospital. He will be concerned with administration in the areas of pharmacy, laboratories, radiology, and the psychiatric clinic. Previously Mr. Malloy had served as assistant to the director at Yale-New Haven Hospital. He is currently treasurer of the Yale Hospital Administration Alumni Association.



Mr. Malloy

#### 1968

JOSEPH L. DORSEY was recently appointed director of medical planning for the Harvard Community Health Plan, a new university-sponsored medical care program. Dr. Dorsey received his M.D. degree from the Harvard Medical School and completed his postgraduate training in internal medicine at the Peter Bent Brigham Hospital.



Dr. Dorsey

SHERWIN MELLINS has been named chief, Maternal and Child Health Section, Community Health Division of the Connecticut Department of Health in Hartford.

#### HOUSE STAFF

##### 1948

C. HENRY KEMPE is co-editor with Dr. Ray E. Helfer, of *The Battered Child* (University of Chicago Press). This book examines a syndrome of critical importance today. Studies range from early historical abuse of the helpless to current discussion of the problem from the points of view of therapist, social worker, pediatrician, and others who daily see child victims of adult abuse.

##### 1954

GOVERNOR WITT has been assigned by the American Academy of Pediatrics to serve as pediatric consultant to the Head Start Program in Orange County, Florida. Dr. Witt, who practices in West Palm Beach, is a Fellow of the Academy, and an associate clinical professor in the Department of Pediatrics and Endocrinology at the University of Miami School of Medicine. In addition, he is vice chairman of the Florida Crippled Children's Commission.

##### 1960

EDWARD S. FLEMING of Washington, D.C. has been selected to receive the Golden Plate Award of the American Academy of Achievement for his contributions in the field of psychiatry. Dr. Fleming is being cited for his efforts in broadening community awareness of the problems of psychiatric patients as well as for his work in perfecting the techniques of out-patient clinics. The Academy, whose headquarters is in Dallas, Texas, annually selects fifty leaders from all fields of endeavor and service as recipients of its award.

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# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / FALL 1969





COVER: A bright autumn morning on Cedar Street, as first-year students begin the long course toward the M.D. degree. The members of the class of 1973, with their colleges and home towns, are listed on page 19.

# YALE MEDICINE

ALUMNI BULLETIN OF THE SCHOOL OF MEDICINE / FALL 1969 / VOL. 4 NO. 3

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YALE MEDICINE is published three times a year — in the fall, winter, and spring — and is distributed to members of the Association of Yale Alumni in Medicine, students, and others interested in the School of Medicine. Communications may be addressed to The Editor, Room L200, 333 Cedar Street, New Haven, Connecticut. 06510.

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Samuel B. Webb, Jr., M.P.H. '63

# The Veterans Administration Hospital

When Dean Francis Blake accepted the Newington Veterans Administration Hospital as an affiliated hospital in 1946, it was only as a temporary liaison, since a new hospital was to be built in West Haven, about 35 miles closer to the medical school.

The new hospital, built on the site of the former William Wirt Winchester Hospital, consists of a 500-bed General Medical and Surgical Building and a 400-bed Tuberculosis Building. The older buildings linking the two new structures were refurbished and became the Administration Building. The whole complex, set in 43 acres, rose above a commanding hill, dominating West Haven "like a colossus."

In April, 1953, the West Haven Veterans Administration Hospital opened the doors of the Tuberculosis Building, and immediately began its association with Yale, guided by a Dean's Committee. The General Medical and Surgical Building opened in September, 1953. With changing times and disease patterns, these two major clinical buildings are referred to simply as Buildings #1 and #2.

The hospital is headed by David Anton, the fourth director in its 16-year history. The non-professional side of the hospital operates under the assistant hospital director, Calvin Chandler. Professional programs are the responsibility of the chief of staff, Dr. Raymond Yesner, who has been chief of the Laboratory Service at West Haven since the hospital's inception, and who is an associate professor of pathology at the medical school. As chief of staff, he has an advisory group, consisting of the various chiefs of services. He is supported by an associate chief of staff for administration, Paul Eule, and an associate chief of staff for research, Dr. Robert Green, professor of medicine. It is expected that another position, that of associate chief of staff for education, will be filled at some time in the future. Dr. Yesner is also an associate dean of the medical school, with the responsibility for Veterans Hospital affairs.

The Medical Service at the VA Hospital has a model relationship with the Department of Internal Medicine at Yale and plays a major role in its training programs. There are 68 medical beds for acutely ill patients plus a six-bed intensive care unit and a four-bed coronary care unit. Last year 1,709 patients were admitted to the acute medical service. Staffing is provided by eight full-time Yale faculty members and two part-time staff physicians. The chief of the Medical Service is Dr. Thomas T. Amatruda, Jr., associate professor of medicine.

*Guiding the operation of the West Haven Veterans Administration Hospital are David Anton (left), director, and Dr. Raymond Yesner, chief of staff, who is professor of pathology.*





Yale-New Haven Medical Center house staff members are assigned in rotation to the Medical Service during their internship and residency training. In addition, there are specialty training programs in metabolism and endocrinology, hematology and oncology, gastroenterology, dermatology, and cardiology which complement similar programs at the Yale-New Haven Hospital.

During the academic year, approximately half the third- and fourth-year medical students are assigned to West Haven for their clinical clerkships on the acute medical wards. Under the new curriculum, many second-year students will also receive their initial clinical experience there.

### *First Hemodialysis in State*

In December of 1966, the first successful hospital-based hemodialysis program in the entire State of Connecticut was started at the West Haven VA Hospital. In May of 1968, a modern nine-bed dialysis unit was opened for out-patient chronic hemodialysis; at present 16 patients are involved in the program. In the near future it is hoped that the hospital-based unit will be supplemented by a home dialysis program to aid in the management of some patients who currently travel as far as 85 miles twice a week for their dialysis.

In addition to the responsibilities of patient care and teaching, the full-time staff are actively engaged in clinical and laboratory research in the areas of infectious diseases, metabolism and endocrinology, renal disease, cardiovascular disease, liver disease, gastroenterology, oncology, and hematology.

The Surgical Service has a 179-bed capacity. Approximately 100 of these beds are for the various surgical specialties. Each of the specialty services is under the direction of the head of the specialty section at Yale.

The General Surgical Service has a new chief, Dr. Edward Storer, professor of surgery, and two full-time and three part-time surgeons who have faculty appointments.

The VA surgical program functions as an integral part of the Department of Surgery at Yale. There is complete integration of the intern and resident training programs, and an active student teaching program has been established. Staff members devote a major part of their time to the teaching of residents, interns, and medical students. The Surgical Service also has frequent consultation with university surgeons for both teaching and patient care, and surgeons from the medical school attend on the wards on a rotating schedule.

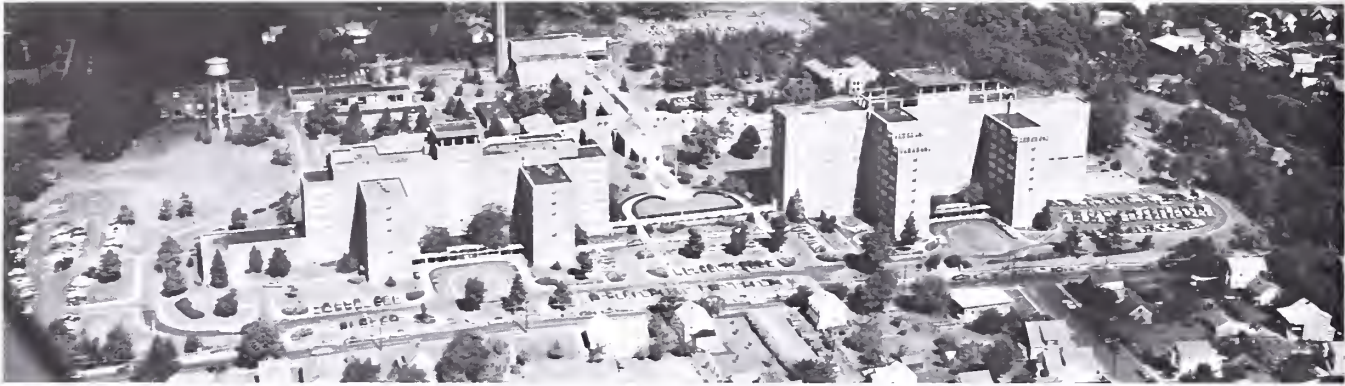
A new operating room recovery room and a ten-bed intensive care unit have recently been completed and are in operation. The intensive care unit, which has two isolation cubicles, is equipped with modern monitoring devices.

The Pathology Service is a centralized operation combining pathologic anatomy and clinical pathology in one department; thus the residency training program leads to combined Board certification. In addition to Dr. Yesner, there are four full-time pathologists and a research associate. Pathologic anatomy is very well equipped with double-headed teaching microscopes, cryostats, an excellent new electron microscope suite, histology and histochemistry laboratories, and closed circuit television for autopsies and the tumor clinics. The clinical pathology workload has been growing steadily at about 25 per cent per year and now stands at well over a million tests annually. This is handled by extensive automation, with 20 analyzer channels operating continuously in chemistry and a 7-channel analyzer in hematology. The bacteriology laboratories are among the finest in the country and receive many students for training. The tuberculosis bacteriology laboratory has contributed much original research and is scheduled to become a regional laboratory, along with two others in the country, to do definitive identification work on typical and atypical isolated organisms. Blood banking, serology, mycology, and parasitology laboratories complete the spectrum. Residents are also trained in the use of radioisotopes and selected residents may spend six months in the clinical chemistry laboratory at Yale-New Haven Hospital.

### *Community Mental Health Service*

The Psychiatry Service has been an integral component of the Yale department since 1953. Under Dr. Louis B. Fierman, associate professor of clinical psychiatry, it now consists of 123 beds, four acute treatment wards, a day hospital and mental hygiene clinic, and a staff of eight psychiatrists. It functions as a community mental health service and processes annually over 800 applicants for admission, of whom about half are referred to other community facilities. There are no locked or chronic wards.

The Psychiatry Service provides a first-year residency training program in cooperation with the Yale Department of Psychiatry. Second- and third-year residency training is also available. Since 1953 the Psychiatry Service has trained 193 residents and, in collaboration with the Veterans Administration Psychology Service, 119



*The two clinical buildings of the hospital, completed in 1953, flank the older structures which now house administrative offices and research facilities.*

psychology trainees. In addition, the Psychiatry Service is available to Yale medical students for clerkships and elective clinical courses. Training opportunities have also been offered to student nurses from the University of Connecticut and the University of Bridgeport, and ongoing professional training has been provided for social workers and nurses. Psychosomatic teaching has been conducted in collaboration with the Medical and Surgical Services.

The psychiatric research program has had a strong clinical orientation, in psychotherapy, schizophrenic language, the uses of humor, social structure of psychiatric populations, and patient government. Basic research in neurophysiology has also been conducted in collaboration with the Psychology Service on cerebral-sensory-evoked potentials.

The Psychology Service is divided into clinical, counseling, and research sections. The clinical section provides consultation and treatment and assists the Psychiatric Service in its treatment programs. The counseling section is primarily engaged in vocational guidance, rehabilitation counseling, personal adjustment counseling, and retirement counseling. It also utilizes community resources to help the discharged veteran make a successful vocational and social readjustment. The service is strongly research-oriented, four members spending a major portion of their time in research. The staff is involved in the supervision of graduate and medical students' theses and the residents' projects. Students from universities throughout the country come to this hospital for training in counseling and neurophysiological, social, and experimental psychology.

#### *Rehabilitation for Orthopedic Patients*

The Physical Medicine and Rehabilitation Service is under the direction of Dr. Frederick Dugdale. It is com-

prised of five therapy sections — physical therapy, occupational therapy, corrective therapy, educational therapy, and manual arts therapy — that contribute to overcoming physical, educational, and vocational handicaps.

In recognition of the frequent need of orthopedic patients for rehabilitation and the need for orthopedic surgeons to be better versed in the prescription of rehabilitation procedures, the service participates actively in the training program for residents. In addition, the surgical residents are invited to attend monthly prosthetic clinics, which provide an opportunity for the resident to correlate his knowledge of amputation surgery with the latest developments in prosthetics and the relationship of both to the patient's ability to walk again.

The Chest Disease Service, headed by Dr. Nicholas D'Esopo, associate clinical professor of medicine, includes a non-tuberculosis medical chest ward, a surgical chest ward, two tuberculosis wards, an emphysema unit, an active out-patient clinic, a pulmonary physiology laboratory, an immunology laboratory, and an inhalation therapy department. A one- or two-year training and research program, principally located at the VA Hospital but closely coordinated with Yale-New Haven, offers a balanced and flexible program in which a trainee or fellow can become an accomplished chest physician and pulmonary physiologist.

When the hospital opened, 400 tuberculosis beds were assigned. Due to the nation-wide decrease in tuberculosis, there are now only two tuberculosis wards, consisting of 96 beds, staffed by full-time staff physicians. The chief of the service is chairman of a cooperative chemotherapy trial involving 26 other VA hospitals, and the service has been continuously active in chemotherapy trials since 1953.

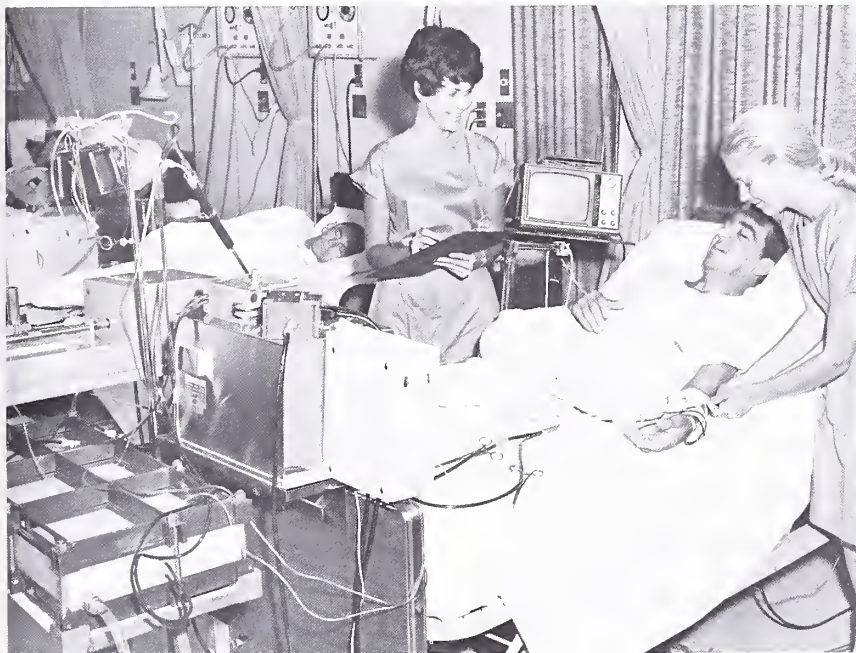
The Intermediate Service is under the direction of Dr. William Braisted. It occupies four wards with a total bed capacity of 168 and has a full-time staff of six phy-



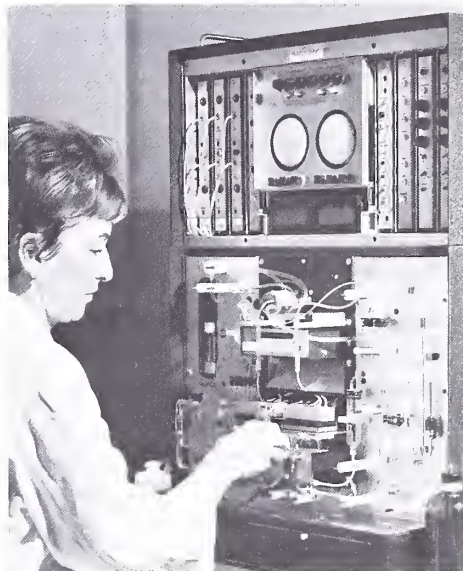
sicians. Patients with complicated, usually multisystem and progressive chronic disease, too chronic for acute wards and too sick for nursing homes, are given chronic hospital care, to provide maximum efficiency and pleasure in living within the limits of disability. The Service coordinates physical, corrective, occupational, speech, educational, vocational, psychological, and social therapies.

The chief of the Dental Service is Dr. John Weimer. He is assisted by an oral surgeon and two staff dentists in operating a general six-chair clinic and a tuberculosis two-chair clinic. Both are equipped with the most modern dental equipment from high speed units to the pano-

from Yale-New Haven Hospital rotate through the department at three-month intervals. In diagnostic radiology, the case load has doubled in the last seven years, to 30,000 examinations per year. More than 5 per cent of these are special studies. Four new diagnostic rooms, to be completed by August, 1970, will contain all of the most advanced and sophisticated equipment available. Complete right and left cardiac catheterizations, trans-septal catheterizations, and selective coronary angiography are now routinely done in our special diagnostic suite. In spite of the marked increase in both routine examinations and special procedures, our radiologists conduct 30 hours of teaching-work conferences weekly



A nine-bed hemodialysis unit serves veterans who come to the hospital twice a week as out-patients.



A seven-channel analyzer performs simultaneous counts for white and red blood cells, hemoglobin, and various indices required for hematology and produces information on a printed card in a fraction of a minute.

rex x-ray machine, supported by a complete dental laboratory. There is an approved rotating internship and a training program for dental assistants affiliated with the Eli Whitney Technical School.

Dr. Dorothea Bradford is chief of the Speech Pathology Service, which evaluates and treats language, speech, and voice disorders by acoustic amplification and speech reading. A training program is conducted in communicative disorders.

The Department of Radiology, under Dr. Mary F. Keohane, associate professor of clinical radiology, was completely reorganized five years ago. A full-time staff of five diagnostic radiologists and one radiotherapist is provided, on a contract basis, by Yale. Four residents

for the interns, residents, and medical students from all services. An active research program is maintained with project participation in both the Departments of Medicine and Surgery, as well as those areas of particular interest to the radiologist.

Among the exciting new developments in the Department of Radiology is the successful establishment of a School of Radiologic Technology presently training 18 students.

Recently the Eastern Blind Rehabilitation Center for the visually impaired veteran was established at West Haven, under the supervision of George M. Gillespie. This center provides basic adjustment to the losses associated with blindness for veterans from the east coast of





At the Eastern Blind Rehabilitation Center, visually impaired veterans receive individualized service in an 18-week rehabilitation program that includes instruction in communication skills.



A new surgical intensive care unit, equipped with modern monitoring devices, was recently completed.

the United States. Included in each patient's individualized 18-week program is medical care; training in orientation, mobility, manual skills, and communications; and social and vocational counseling. Upon leaving the center the veteran is guided toward academic and vocational training or returns to the position he held prior to the onset of his blindness.

#### *Eastern Research Support Center*

Another major regional activity is the Eastern Research Support Center under Dr. Alvan Feinstein, professor of medicine. This center provides assistance to Veterans Administration investigators throughout the east in such areas as experimental design, editing, and computer assistance.

The Neurology Service, headed by Dr. Lewis L. Levy, associate clinical professor, has recently been separated from the Medical Service. New Stroke and Epilepsy Centers will shortly be operative.

Under the direction of Arline E. Burns, the Nursing Service provides quality nursing care and services to patients, both on an in-patient and out-patient basis. There are 20 nursing units for the Medicine, Surgery, Intermediate, Pulmonary Disease, and Psychiatry Services. In addition to these, there are specialized units, such as those for coronary care, medical and surgical

intensive care, post-anesthesia, hemodialysis, day hospital (psychiatric service), mental hygiene clinic, operating room, and the Blind Rehabilitation Center. The Nursing Service personnel assigned to the Out-Patient Department provide nursing care and services to patients for pre-admission, in-patient clinics, post-hospital care, and the community home-nursing referral program. Throughout the academic year clinical experience is provided for nursing students from the University of Bridgeport and the University of Connecticut.

The research program at the West Haven VA Hospital commenced with the activation of the institution in 1953, when many of the staff and projects originally at the Newington VA Hospital moved to West Haven. Since then, the number of active research projects has increased by 45 per cent; the amount of research space available has more than tripled; and publications have increased sevenfold. Concurrent with these gains, there has been a significant increase in both VA research funds and non-VA grant funds. These assets, coupled with the proximity of the excellent academic, patient care, and research facilities at the Yale-New Haven Medical Center, have enabled this VA Hospital to attract not only established, independent investigators, but — equally important — young, eager, intellectually responsive researchers whose future scientific contributions will no doubt help mold the shape of patient care in the future.

# Alumni Day 1969



A dialogue between students and alumni on some controversial issues in medical education was presented in a panel discussion in the Mary S. Harkness Auditorium. Participants (from left) were fourth-year students Arnold Mazur, Graeme Fincke, and Garrett Wright; Dr. Darrell G. Voorhees, '39, moderator; and Dr. Ernest L. Sarason, '39, and Dr. Lawrence G. Crowley, '44.

**R**ubella vaccines, treatment of drug abusers, hazards of contraceptive methods, and the delivery of medical care were topics of round-table discussions which were an innovation at this year's Medical Alumni Day on May 24. Medical and public health graduates and former house staff from all parts of the country gathered with their wives (or husbands in some cases) for the day-long program which included a surgical conference on chronic renal failure, a demonstration of television in medical education, a buffet luncheon, and an afternoon meeting of the Association of Yale Alumni in Medicine.

Following a brief business meeting with election of officers, the afternoon session proceeded with talks by Dean Redlich, Dr. Leona Baumgartner ('34), and President Kingman Brewster, Jr., who at the close of his remarks presented a citation to Dr. Benjamin Castleman

('31), recognizing his devoted service to the university and the medical school in his role as president of the Association of Yale Alumni in Medicine from 1967 to 1969.

Another innovation at this year's Alumni Day was student participation in the program. A lively panel discussion — a student-alumni dialogue touching on a number of current controversial issues in medical education and practice — was skillfully moderated by Dr. Darrell G. Voorhees ('39). Other alumni participants were Dr. Lawrence G. Crowley ('44) and Dr. Ernest L. Sarason ('39). Student speakers from the senior class were Graeme Fincke, Arnold Mazur, and Garrett Wright.

The day's activities were concluded with the traditional social hour for alumni, faculty, and guests at Edward S. Harkness Hall.



Dr. E. Richard Weinerman, professor of medicine and public health, comments on a model of a health care delivery system at one of the round-table discussions in which returning alumni and their wives participated.



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*Catching up on one another's family news an Alumni Day were Dr. David M. Raskind, '24; Dr. George A. Carden, II, new president of the Association of Yale Alumni in Medicine; and Dr. Nathan E. Ross, '28, and Mrs. Ross.*



*Dean Redlich talks with Dr. Benjamin Castleman, '31, who was cited for his service as president of the medical alumni association from 1967 to 1969. Dr. Castleman holds the citation, which was presented by Yale President Kingman Brewster, Jr.*



# Advances in Otolaryngology



*Dr. David A. Hilding (right) and his group in the otology laboratory were the first to use the electron microscope to study defects of inner ear development. Here, he works with Joseph Croft, electron microscopist, who recently discovered virus-like particles in the nerve cells that supply the cochlea in otherwise normal guinea pigs. The finding enhances the study of virus latency, a phenomenon of significance to a wide variety of ailments ranging from cold sores to cancer.*

Yale's growing stature in otolaryngology was underscored last spring when two of the nation's highest awards for research in this field were presented to members of the medical school faculty.

The American Laryngological Association named Dr. John A. Kirchner, professor of otolaryngology, the 1969 recipient of the Newcomb Award, given for the most outstanding contribution during the previous year to the literature on the larynx. A few days later, the Triological Society presented its Harris P. Mosher Award to Dr. David A. Hilding, associate professor of otolaryngology, in recognition of his research on the development of the inner ear.

Dr. Kirchner is chief of the Section of Otolaryngology in the Department of Surgery. The research program of the section, he reports, comprises studies on the inner ear, the larynx, and the nasal airway.

## Otology

Dr. Hilding and his group were the first to use the electron microscope to study defects of inner ear development. Its increased magnification and resolution as compared to the conventional light microscope have revealed previously unsuspected abnormalities of circulation and innervation in hereditarily deaf strains of animals.

One of the difficult problems with which ear specialists must deal is deafness due to defective development of the inner ear. Yet the inner ear is so inaccessible that knowledge about the structural defects that characterize human congenital deafness is limited. There are several strains of animals, however, whose hereditary deafness closely mimics that of humans, and Dr. Hilding and his group have examined the process of auditory degeneration in Shaker mice and Hedlund mink.

In Shaker mice, they found that a bundle of nerve fibers fails to connect properly with receptor cells at a critical stage soon after birth. The receptor or hair cells within the coiled cochlea in the inner ear normally transform vibratory movements of the surrounding fluids into signals that are transmitted to the brain as nerve impulses. Proper innervation seems to be necessary for hair cells to develop normally. Another vital structure during development is a small special blood vessel that passes near the hair cells. Normally, it undergoes shrinkage during maturation. In Shaker mice it completely disappears at an early stage and this seems to contribute to the problem of hair cell degeneration.

Hedlund mink are bred commercially for their beautiful, almost pure white pelts. Like Shaker mice, they are

invariably deaf, but the problem is quite different from that of the deaf strain of mice. A special tissue produces the fluid of the compartment of the cochlea that holds the hair cells. The circulation to this tissue becomes impaired during development in Hedlund mink. This impairment is compounded by a relatively massive leak which regularly occurs through the partition between compartments at about the same stage.

The research thesis for which Dr. Hilding received the Harris P. Mosher Award is entitled "Development of the Hearing Organ." It is a detailed report of the events that occur as the inner ear develops in normal mammals and contains original electron microscopic observations on the origin of the fluid-producing tissue of the cochlea and on the relationship between nerve supply and maturation.

The hair cells of the cochlea are situated quite far from their blood supply, a factor that apparently helps prevent acoustic interference. Vital substances must be transported to these receptor cells over a significant distance, through several kinds of tissue. The distribution of enzymes concerned with metabolism and with transport has been studied in Dr. Hilding's laboratory with histochemical methods adapted to electron microscopy and biochemical analysis. Dr. Yoshiaki Nakai, formerly a research associate in otolaryngology on leave from Osaka University, spent nearly three years working on this problem with Dr. Hilding and a concept of a complicated system for hair cell supply emerged from their work.

In other research, a fourth-year medical student, Elliott Simon, has been using the micropuncture and microanalytical techniques developed for kidney study to investigate production of inner ear fluids. The hairs or receptor cells project into a special fluid called endolymph with an extraordinary electrolyte composition. It contains 20 times more potassium than sodium. Mr. Simon discovered that isolated tissue from the inner ear of frogs continues to produce endolymph at nearly 0° C. for several days. This has provided a convenient means for clarifying the process of endolymph production. With the electron microscope, he has shown changes in tissue structure corresponding to differences in fluid production rate.

In man, the commonest tumor that causes deafness is a benign growth arising from the nerve that supplies the inner ear. For many years there has been dispute about the cell type from which it comes. This has resulted in considerable confusion about its proper designation and it is generally known by its misnomer, "acoustic neuroma." Specimens from a large number of these tumors

have been collected. With electron microscopy, it has been possible to demonstrate that these tumors arise from the same kind of cell that forms the wrapping around nerve fibers, a finding that simplifies the problem of their nomenclature.

### Laryngology

The laryngology research program, conducted by Dr. Kirchner, includes research on cancer of the larynx and studies of physiological mechanisms of the vocal cords.

*Dr. John A. Kirchner (left) and Dr. Yasushi Murakami investigate neurophysiological mechanisms within the larynx of an experimental animal. Reflex effects are studied by dissecting the laryngeal nerves and recording electrical impulses in the afferent and efferent nerves. The effects of various types of trauma to the motor nerves are observed and changes recorded with a motion picture camera.*





In laryngeal cancer research, serial sections of larynx specimens removed for cancer are mounted in celloidin and then cut at 20 microns thickness for gross and microscopic examination. This method allows the investigator to identify the extent and physical behavior of cancer within the larynx and the surrounding structures. It also checks the accuracy of preoperative diagnostic tests and shows the effectiveness of certain anatomical boundaries in limiting the spread of cancer within the larynx. It reveals the tendency of certain cancers to invade the laryngeal framework so as to make partial resection for such tumors impractical. Dr. Kirchner recently reported a study of the invasion of cancer into the framework in one hundred specimens.

Such histological studies also reveal the effects of radiation. Dr. Kirchner notes that the information gained through this project should improve the ability to preserve the function of the larynx in treating cancer, whether the treatment is radiotherapy, chemotherapy, or partial resection of the organ.

The second project in laryngology concerns the neurophysiological mechanisms within the larynx as they relate to the various functions of phonation, deglutition, respiration, and circulation. Most of this experimental work is carried out in cats and dogs, and occasionally in rats. The various reflex effects are studied by dissecting out the laryngeal nerves into small filaments and recording electrical impulses in the afferent or efferent nerves. The effects of various types of trauma to the motor nerves of the larynx in the neck and in the region of the thyroid gland are observed electromyographically and by direct inspection of the vocal cords through the laryngoscope. Records of these changes are made with motion pictures.

Collaborating with Dr. Kirchner in these studies are Dr. Masafumi Suzuki and Dr. Yasushi Murakami, both research associates in otolaryngology, who are on leave from Keio Medical School in Tokyo. Some of the problems investigated by the laryngology group are as follows:

**Reflex cardiac effects** Bradycardia and disturbances in cardiac rhythm are sometimes observed in patients during intubation or bronchoscopy under anesthesia. The group's work in the experimental animal has identified a reflex pathway from the larynx which produces disturbances in cardiac rate and rhythm. Stretching the laryngeal lumen as with a tight endotracheal tube initiates this reflex. These findings have recently been published.

**Sensation** A diamond-shaped area inside the cricothyroid membrane below the vocal cords has been shown

to be supplied by the external branch of the superior laryngeal nerve, a trunk ordinarily regarded as being purely motor. Similarly, afferent nerve fibers have been identified within the current laryngeal nerve, mostly from mucous membrane below the vocal cords.

**Feedback mechanisms** The question of a self-regulatory system from receptors within the vocal cords and laryngeal structures themselves in monitoring vocal performance has interested investigators for several years. Investigations at Yale are adding support to the concept that a self-regulating monitoring system exists within

*Dr. James M. Ozenberger's research in nasal physiology and pathology includes evolution of cryosurgery in the treatment of chronic rhinitis. He originated the procedure shown here in which he uses a liquid Freon cryoprobe for removal of diseased nasal tissue.*





the muscles and joint capsules of the larynx and that these are independent of any monitoring effect on the voice furnished by the hearing mechanism.

*The role of the extrinsic laryngeal or strap muscles in respiration and phonation* These muscles are apparently accessory tensors and relaxers of the vocal cords and influence the shape of the glottis along with the intrinsic muscles of the larynx. Disorders of these muscles resulting from their injury or denervation at thyroidec-tomy are sometimes responsible for loss of vocal range, in spite of an intact motor nerve supply to the intrinsic laryngeal muscles.

*Laryngeal protective mechanisms* These are being studied in relation to partial laryngectomy and similar pro-cedures for cancer in certain parts of the larynx.

Dr. Kirchner reports that electromyographic record-ings are occasionally made in the larynx of the patient with vocal cord paralysis as a means of determining the degree and extent of nerve involvement.

#### *Nasal Airway Studies*

Research related to nasal physiology and nasal pathol-ogy is being conducted by Dr. James M. Ozenberger, assistant professor of otolaryngology, and Dr. Jerold J. Principato, an instructor and chief resident in otolaryn-gology. Studies are primarily clinical in nature, and even the investigation of normal phenomena is expected to provide a better understanding of disease states.

The normal "nasal cycle," an alternating increase in the resistance in the two sides of the nose, is being studied, and effects of drugs, inhaled gases, body posi-tion, and other variables have been recorded. The role of the nasal cycle in normal body function has never been fully established. Although most individuals never notice this alternating obstruction of one side of the nose, patients with nasal disease may become aware of it.

Nasal muscles are being studied both anatomically and functionally, the latter by electromyography. The activity of these muscles is more apparent in lower ani-mals but may be observed in humans with respiratory distress. Dysfunction of the muscles due to stretching or decreased stimulation may account for poor subjec-tive improvement in patients who have undergone nasal surgery.

Nasal resistance, that of each side and of both sides simultaneously, is being determined in normal and dis-eased noses. Sensitive electronic equipment has been designed to measure the resistance with minimal intro-duction of testing variables. Results of measurements to

date suggest that neither the patient nor his otolaryn-gologist can estimate objectively the degree of nasal obstruction. It is hoped that the resistance studies will help to eliminate as surgical candidates those patients who would experience little or no improvement.

Through measurements of nasal resistance, functional results of nasal surgery performed primarily for cos-metic reasons are being evaluated. The goal in such studies is improvement in, or at least preservation of, a patient's nasal function along with improvement in the appearance of the nose.

The relationship of nasal obstruction to disease in the lower respiratory tract is being investigated. Recently there has been increased interest in the relationship of the upper and lower airways. Nasal obstruction by ade-noids has been described as a cause for pulmonary dis-ease and, subsequently, heart disease in children. It is probable that upper airway disease produces changes in pulmonary function in individuals of any age. There have been reports of improvement in impaired pulmo-nary function in patients with deviated nasal septums following surgical correction of the nasal obstruction.

The use of cryosurgery in the treatment of chronic rhinitis, a very common nasal disorder, is being evalu-ated. Cryosurgery is not a new technique, but there is little information about its effectiveness in destroying diseased nasal tissue. A liquid Freon cryoprobe is cur-rently being used for removal of tissue in chronic rhin-itis. Although there is a very high rate of subjective improvement following this form of treatment, objective techniques of evaluation are being employed. These in-clude measurement of nasal resistance in the manner mentioned previously, biopsies to demonstrate the mi-croscopic changes in nasal tissue, and cytological exam-inations before and after treatment.

Other studies are concerned with the comparison of cytological examination of nasal secretions with the findings from biopsies. If valid information can be ob-tained from a nasal smear, a most innocuous procedure, biopsies may become unnecessary.

In view of the significant developments in these three areas of study, it is understandable that the Section of Otolaryngology at Yale is being watched with consid-erable interest by specialists in this field throughout the country.

# Capital Fund Campaign



One-third of Yale's medical alumni have pledged the first one million dollars to the Alumni in Medicine campaign fund.

Leona Baumgartner, M.D., general chairman, announced in October that a total of \$1,000,000 had been pledged to the School of Medicine for the improvement of teaching facilities and various special programs. Dr. Baumgartner viewed the progress to date and the gift average of \$1,300 as "an important reflection of really broad and generous support, and a significant awareness by these donors of what the Yale educational experience has meant to them during their careers as physicians." The gift total does not include any large foundation or individual gifts to the school in amounts over \$50,000.

"My greatest concern now is to reach those who have been asked, but have not yet responded," added Dr. Baumgartner. "The Campaign Cabinet and I are urging these alumni, numbering more than a thousand, to record their intentions and help us raise an additional \$600,000 in pledges by December 31, 1969 — as a crucial demonstration of their faith in the Yale School of Medicine. The successful conclusion of the campaign depends on the response of those who have not yet determined what their own meaningful participation will be."

The Office of University Development reports that encouraging conversations with several individual prospects are under way. These potential pledges should amount to an additional one million dollars, and will serve to outline dramatically both professional and alumni faith in the potential of Yale's medical school for providing excellent medical education and models of health delivery.

In her effort to generate wider participation, particularly among those doctors who have not yet committed themselves in any way to the campaign in support of the School of Medicine, Dr. Baumgartner said the following:

*"It is usually embarrassing to ask for money, but in this instance, I am not at all embarrassed. The least that any of us can do is to repay our honest debts to*

*Yale. I was stunned when I realized how much my training had cost the institution. I had to borrow money to go through medical school, and I felt very noble when I paid back the sum I had borrowed. But when I recalculated the cost of my education, I became aware how far short the repayment of my debt was. I resolved to wipe out my real indebtedness and made a large additional payment so I could feel honest about my relation to the school. Quite bluntly, I think those of us without large families can plan in some way, via wills, delayed payments, gifts of property or stocks, to do something to help. There is no question but that the school needs it desperately now. It is quite an exciting place."*

Many of those who have given have preferred to make special designations of their gifts. Pledges may be directed over a period of time toward: a) support of certain specialties, such as an endowed lectureship at \$25,000; b) scholarships, fellowships, or student loans, such as an endowed scholarship at \$50,000, or an endowed fellowship at \$75,000; c) the Grover F. Powers Professorship Fund; or d) a portion of the new medical sciences teaching center.

Some doctors have been able to influence grateful and affluent patients to make generous contributions. Dr. Baumgartner has been particularly concerned about contributions to the Powers Professorship Fund. She has been deeply disappointed by the response:

*"We are having a rough time getting a start on the Grover Powers Professorship. Gifts are so small. So many owe their careers and earning ability to him . . . I fear that people do not remember that they paid only about one-fourth of what it cost to educate them each medical school year, and many overlook the value of their residency years."*

Alumni attention is directed to the opportunity for making a pledge commitment through any one of a number of deferred giving arrangements: a) irrevocable trusts, with reservation of life income; b) bequests; c) endowment anticipation grants; and d) bequest anticipation grants. Gifts of appreciated securities, or the donative sale of securities, also bear thoughtful consideration.

*"Yale is having a tough time financially — so I do hope you can do more in the future. None of us could have done what we have without this school."*

Dr. Baumgartner's own testamentary plans include, in addition to her outright and generous three-year pledge, establishment of a trust with reservation of life income, the principal of which will ultimately go to the Medical School.



## Anatomist and Medical Historian

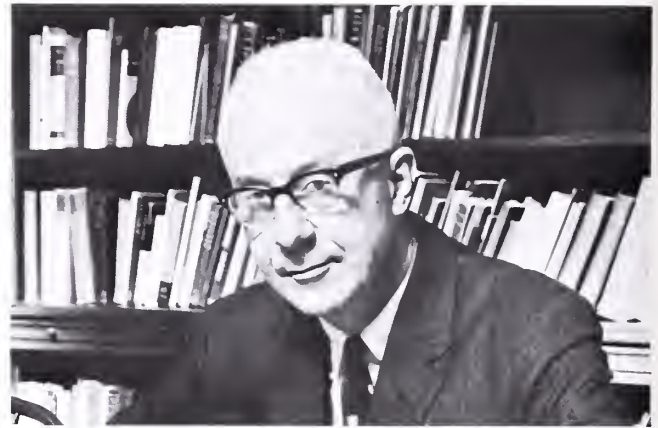
Faculty Profile: *Thomas R. Forbes, Ph.D.,  
Professor of Anatomy*

On relinquishing his responsibilities as associate dean in charge of student affairs and admissions, Tom Forbes did not return to research and teaching — he had never left. Dr. Forbes can be justifiably proud of the fact that, in spite of the time-consuming meetings, interviews, and correspondence required by his administrative post, he managed to carry a full teaching schedule and to continue his research in reproductive endocrinology and medical history. He even sandwiched in the publication of a book representing the latter area of interest and is now well into a second one. The published volume, *The Midwife and the Witch*, is a colorful and carefully documented examination of some of the once prevalent superstitions surrounding delivery and birth and some scientific explanations for them.

The second volume will be a study of a small parish in London just outside the city wall — St. Butolph's without Aldgate — which lays claim to no great names, no important buildings, and was the scene of no celebrated event. What sets St. Butolph's apart, according to Dr. Forbes, is the completeness of its vital statistics over the period from 1558 to 1625, a span which exactly coincides with the reigns of Elizabeth I and James I.

During that period such full daily records were kept by a succession of conscientious parish clerks that it is possible to recreate with accuracy many aspects of daily life in this small cosmos — the occupations of the population and some of the occupational hazards, the rate of stillbirths and neonatal mortality, the impact of four plague epidemics. When a death occurred in the parish, notations were made about the age of the deceased, his address, his occupation, the presumed cause of death, the date of the burial, and the charges — so much for digging the grave, so much for the black cloth, and so much for ringing the knell.

To track down information on these and similar research projects which have furnished material for several monographs of both medical and historical interest, the Forbes family has spent parts of a dozen summers and a sabbatical year in England. Dr. Forbes is a familiar figure at the Royal Society of Medicine Library, the British Museum Library, and the Wellcome Historical Library in London. Helen Forbes, his wife, has mastered brilliantly the art of housekeeping on two continents. Her outside interests, whether at home or abroad, center on matters musical and horticultural. When in London, the Forbes have stayed in Hampstead and, while Tom does research, Helen travels to horticultural shows and border gardens, seeking ideas she can adapt to her own neat garden in Connecticut,



where she is a member of the Garden Club of New Haven. At home, she also belongs to the Fortnightly and North End Clubs.

A European trip which Dr. Forbes recalls with particular pleasure occurred in the summer of 1950, when he and a handful of American professors were invited to visit several German medical schools under the auspices of the Unitarian Services Committee. Their purpose: to assist in bringing curricula in the clinical and preclinical sciences up to date. Their itinerary included a month in Marburg and a week in four other German cities — Frankfurt, Tübingen, Berlin, and Hamburg.

### *Early Years in Oak Park*

Thomas R. Forbes was born in New York City in 1911 and moved to Oak Park, a suburb of Chicago, with his parents while still a baby. The elder Forbes, now retired, was in the toy business and made Lincoln Logs. These sets of interlocking logs for making tiny cabins and other constructions were invented by John Lloyd Wright, son of the architect Frank Lloyd Wright.

As a boy in Oak Park, Tom Forbes considered being a chemist, a librarian, or a writer (Ernest Hemingway

*Tom Forbes circa 1915*





lived just a block away and, like the children in the Forbes household, attended Oak Park High School). Unlike many young boys with vocational aspirations, Dr. Forbes, professor of anatomy, medical historian, and author of more than 125 papers, chapters, and abstracts and two books, has come close to living his dreams.

Partly because he was younger than most graduates on leaving high school and partly because he needed the money for college, Dr. Forbes worked for a year as a factory hand in the Western Electric Company in Chicago before going on with his studies. A fringe benefit of the job was increased motivation to attain a higher level of education.

In 1929 he entered the University of Rochester, from which had graduated his grandfather and his father, and where he was followed by two brothers, two or three cousins, and one of his own two sons. In his senior year he became interested in an endocrine research project in the Anatomy Department, using alligators as subjects. The research was initiated because there had been little study of reproduction in reptiles. Alligators were selected because they were plentiful and, for a time at least, of a convenient size to keep in the laboratory. In 1933 he was graduated with a B.A. degree *cum laude* in biology and the firm conviction that he would like to remain at Rochester for an advanced degree in anatomy. The University administration seemed to feel the same way about it for they offered him a four-year fellowship in the School of Medicine and Dentistry.

The medical school at Rochester was relatively new, having opened in 1925, but it had a remarkable senior faculty, most of whom had come from Johns Hopkins. The Anatomy Department included Dr. George Washington Corner, chairman of the department, who was then doing the research that culminated in the discovery, with Dr. Willard Allen, of progesterone, and Dr. Robert Burns, then an associate professor and the faculty member directing Tom Forbes' work.

"I was engaged in studying the action of pituitary gonadotrophic hormones and of a crude form of female sex hormone, available at the time, on the reproductive tract. It had a very powerful effect, and gave me a lot of good material for a thesis. Then I became interested in the use of pellets of pure crystalline sex hormones. In the '40s it was not unusual to give pellets of sex hormones to patients, particularly to women patients who might require treatment over a long period of time. This was much simpler than repeated injections and office appointments. In addition the material injected

was absorbed into the bloodstream and metabolized so rapidly that sustained blood levels could not be achieved. I was particularly interested in the pellets which were merely placed under the skin; the best way to make them; their absorption rates; and why certain hormones were absorbed more rapidly than others. These pellets were used quite extensively until the early '50s when synthetic sex hormones which could be taken by mouth came on the market."

Dr. Forbes received his Ph.D. degree in anatomy in 1937 and that fall joined the faculty of the Johns Hopkins School of Medicine as an assistant in anatomy. Here too he worked with a distinguished chief who was an influential force in the emerging career of Tom Forbes. Dr. Lewis Weed, then chairman of the Anatomy Department and Director of the medical school, was later chairman of the Division of Medical Sciences of the National Research Council during World War II. By 1938 Dr. Forbes had been promoted to instructor in anatomy, a position he held — with interruptions — until 1945. Meanwhile, a keen desire to devote his time to research in reproductive endocrinology and to get additional experience and training moved him to apply for a Guggenheim fellowship to study in the Anatomy Department at Yale, known to have one of the outstanding teams of reproductive endocrinologists in the country.

With the onset of the war, Dr. Weed pressed Dr. Forbes to join him at the National Research Council, at first on a part-time basis. One weekend in March of 1942 is etched on Dr. Forbes' memory. On Friday his younger son was born, and the following morning the excited father received a letter awarding him the coveted fellowship from the Guggenheim Foundation. When he returned to Washington the following Monday, he was asked to undertake a double assignment, working for the Division of Medical Sciences and for the Committee on Medical Research of the Office of Scientific Research and Development. When the Guggenheim committee agreed to postpone tenure of the fellowship for the duration, Dr. Forbes accepted the government assignments.

His Washington posts put him in charge of a growing file of information on government-sponsored civilian research related to military medicine. It was largely classified material and Dr. Forbes' job was to see that the documents were obtained, indexed, and made available to people with security clearance throughout the country. He compiled material, for example, on the treatment of burns and the use of pressure suits; he gathered data on problems of dehydration and insect control, tropi-

cal disease and aviation medicine — a whole catalogue of problems which concern a country at war.

"It was a most interesting job because of the topflight people who were called in as consultants, but it was terrible commuting. At that time I was living on the edge of town in Baltimore with my wife and two small sons and, door-to-door, it was a two-hour ride each way. The railroad cars were freezing in winter and blistering in summer but an extremely fine group of people commuted daily, including Dr. Weed, Dr. E. Cowles Andrus, Dr. Louis Flexner, Dr. Sanford Larkey, and Dr. Perrin Long, who had much to do with the trials of the sulfa drugs, first tested on a major scale at Pearl Harbor. There was also a large contingent that came down often from Yale — John Fulton, Hugh Long, Milton Winternitz, Levin Waters, George Smith, Francis Blake, Sam Harvey, and others."

It is ironic that Dr. Forbes left the Washington post to come to Yale because he felt he had had enough of administration. As the war was drawing to a close, Dr. George Smith, who had headed the Subcommittee on Armored Vehicles at the National Research Council and who was a member of Yale's Department of Anatomy, informed Dr. Forbes of an opening in the department as an instructor. Here was the opportunity for research that the Guggenheim fellowship was to have provided.

"Bill Gardner had become chairman of the department. Others interested in endocrinology were Carroll Pfeiffer, Tom Dougherty, and Charlie Hooker. Dr. Hooker had recently proposed a new bio-assay for the hormone, progesterone, using mice as subjects."

In the bio-assay that Drs. Hooker and Forbes eventually developed, the mice were ovariectomized and the material to be measured was injected into the cavity of a segment of the uterus. The hormone acted on the immediately adjacent connective tissue, thus avoiding any diluting effect. The minimal effective dose of progesterone in the Hooker-Forbes bio-assay, using the CHI mouse (a highly pedigreed inbred strain) is 0.0002 microgram. For a concrete conception of this figure, Dr. Forbes supplied the following equivalent: An ordinary six-cent Roosevelt postage stamp, uncanceled, weighs about 65 milligrams or 65,000 micrograms. The minimal effective dose of progesterone is equal to 1/325,000,000 of the weight of the postage stamp.

What began as a departmental association culminated in a happy collaboration and in the discovery of this highly useful biological measurement, known throughout the world and employed in measuring the activity of progesterone and related compounds, and in

Dr. Forbes lectured at the Anatomisches Institut in Marburg in 1950. In Germany he spoke in German in France in French.



following the changes in activity level in the body. Progesterone is a key hormone in the menstrual cycle, in pregnancy, and in the compounding of birth control pills.

#### *Decanal Considerations*

In 1946 Dr. Forbes was named assistant professor of anatomy, in 1951, associate professor and in 1962 he was promoted to professor. He was again faced with the problems of administration when, in 1948, he was offered the post of assistant dean of the School of Medicine and chairman of its Committee on Student Affairs which handled admissions. He accepted, and in 1960, became associate dean.

Student selection, always challenging, has become increasingly difficult in the last few years, according to the man who played an important role in the selection of the men and women who will make up the class of 1973. For not only has the number of applications increased: the quality of the students has risen. Of the 1,550 applications received last year, Dr. Forbes estimates that at least 300-400 were highly qualified. "The problem," he stated, "is how to assess what kind of doctors they would make ten or twenty years from now. It is easy to spot intelligent people with good academic records. But how can one assess potential skill as a physician, character and personality as a practitioner? It's paradoxical that we live in a world of laboratories and computers but have to select medical students by trying to read the future. Although they have widely varied interests, our students are fairly homogeneous in academic ability. We have little trouble



with poor students: the academic failure rate over twenty years has been less than 1 per cent."

Moving from a discussion of the general student body to its component parts, Dr. Forbes turned to the question of women applicants. "There's no doubt that girls make good medical students and good doctors," he said. "But experience from the national surveys shows that their professional mortality is considerably higher than that of the men. If only we could pick ahead of time those girls who will finish and practice. We think of outstanding women graduates of this medical school like Leona Baumgartner and Elizabeth Ramsey. It would have been a pity if they had not been admitted. We end up with a compromise position and something like ten per cent of the class being women, a figure, incidentally, closely resembling the national percentage of women applicants."

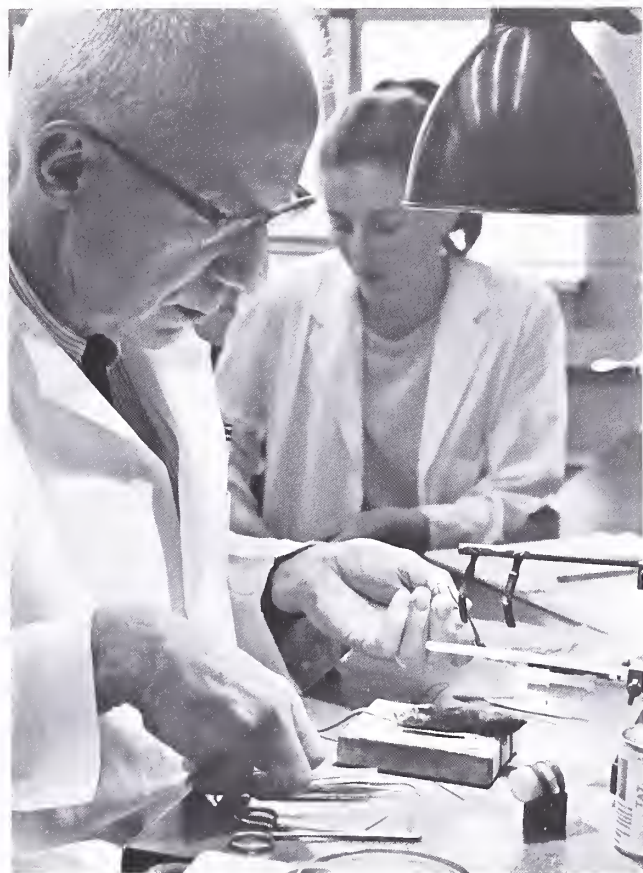
Another component under the general heading of admissions has been the recruitment of black students. "We have ten in this year's first year class — eight Americans and two Africans, nine men and one woman." To assist premedical students who may not have

strong preparation in prerequisites at the medical school, Yale College, in cooperation with Harvard and Columbia, has instituted the Intensive Summer Study Program.

In addition to pursuing his administrative duties, his writing, and his laboratory research, Dr. Forbes is a formidable contender as a teacher. He teaches a course in gross anatomy, an elective in endocrinology and another in the history of anatomy and medical terminology. His own interest in medical history dates back to his joining the Yale faculty. It was generated through the influence of the late Dr. John Fulton and has been sustained by the wealth of materials in the medical school's historical library.

#### *At Home in Hamden*

It was a fitting move when the Forbes family came to New Haven for Dr. Forbes is a direct descendant of Theophilus Eaton, the first governor of Connecticut, who is buried in the Grove Street Cemetery. And it was a fortunate thing for annual processions of students



*Left: The onotomist at work with his laboratory ossistant, Jone Cherry. Dr. Forbes is tying off the uterine segment of o mouse injected with progesterone.*

*Below: Duke Ellington on the Yole compus to receive on honorary degree in music of the graduation of 1967, exchanged notes with Deon Forbes os the commencement procession dispersed.*





that the anatomist was accompanied by Helen Forbes, who will be remembered by scores of graduates for her southern hospitality.

Born in Nashville, Tennessee, Mrs. Forbes attended Vanderbilt University and was graduated from Baylor University. Having both the talent and the desire to become a professional pianist, she won a scholarship to the Eastman School of Music of the University of Rochester where she earned a master's degree in music education. While at the University, she met and married Tom Forbes who was then in his first year of graduate school.

The other Thomas R. Forbes listed in the Yale Directory is Dr. Forbes' son who is in charge of bursary students in Yale College and an assistant director of financial aids. A second son, William, is married and lives in Williamsburg, Massachusetts. A registered x-ray technician, he is a technical marketing and service representative of a Boston firm.

When the Forbes family first came to New Haven, no adequate housing arrangements for medical students existed. Until Edward S. Harkness Hall was built in 1954-55 (as assistant dean of students, Dr. Forbes played an important role in the planning of this building), students customarily lived in one of three dingy apartment buildings on Howard Avenue and had little

opportunity for social contact with one another or with the faculty. Daily teas, instituted under Dean Winternitz, were held in the Sterling Lounge, now the faculty lunchroom. Besides inviting students to her home in Hamden, Mrs. Forbes gave a great deal of time to assisting at the teas which were attended in figures astronomical by students, faculty, nurses, technicians, and other staff. Each day at 4:00 hundreds of dainty sandwiches and cookies were washed down with hundreds of cups of very strong tea, some students depending on the afternoon collation to substitute for their evening meal. Funds for the teas were raised by the annual Aesculapian Frolic held in the medical school gymnasium, the area above Sterling Lounge which now houses part of the Department of Pharmacology. A former-student-now-colleague of Dr. Forbes' worked his way through the graduate school at least in part by providing his band for the dance and playing the trumpet in the combo. The young man with the horn is today Dr. Edmund S. Crelin, professor of anatomy.

It is clear that New Haven, and the medical school faculty and students have meant much in the lives of the Forbes family; the converse is also the case.

*Family gathering on the back porch: Tom and Helen Forbes with son Bill and his wife Betsy, Tom, Jr., and the family husky, Knikki.*



# The First-Year Class

These are the 82 men and 7 women who constitute the Yale medical class of 1973. They come from 21 states, the Commonwealth of Puerto Rico, and the Republic of Kenya. One holds an M.S. degree and two

have earned the Ph. D. degree. Eight members of the class are registered as candidates for the combined M.D./Ph. D. degree.

Paul Gordon Abrams (B.A. Yale University 1969), Great Neck, New York  
David Avram Adler (B.A. University of Rochester 1969), Briarcliff Manor, New York  
Peter Baily Anderson (B.A. Dartmouth College 1969), Lynnfield, Massachusetts  
John Crest Anes (B.S. Union College 1969), Adams, Massachusetts  
David Alan Bagbish (B.A. Adelphi University 1969), West Hartford, Connecticut  
David Nelson Bailey (B.S. Indiana University 1967), Fortville, Indiana  
Bennett Lloyd Blitzer (B.A. Colgate University 1969), Plainview, New York  
Clement Richard Boland (B.A. University of Notre Dame 1969), Endwell, New York  
Richard Philip Bozof (B.A. Dartmouth College 1969), Silver Spring, Maryland  
Michael Laird Bramley (B.S. Washington & Lee University 1969), Alexandria, Virginia  
John Ollis Brown, Jr. (B.A. Harvard University 1968), Miami, Florida  
Robert William Bucholz (B.A. Yale University 1969), Omaha, Nebraska  
James Norman Campbell (B.A. University of Michigan 1969), Royal Oak, Michigan  
Marvin Micah Chassin (B.A. Colgate University 1969), Kenmore, New York  
William Thomas Choctaw (B.S. Tennessee A & I University 1969), Nashville, Tennessee  
Francis Sessions Cole, III (B.A. Amherst College 1969), Providence, Rhode Island  
George Bernard Colson (B.A. Northeastern University 1968), Neptune, New Jersey  
Joseph Michael Connors (B.S. Trinity College 1969), North Eastham, Massachusetts  
David Louis Coulter (B.S. University of Notre Dame 1969), Deorborn, Michigan  
Paul David (B.A. Brandeis University 1969), Roslyn Heights, New York  
Carolyn Gissen Dedrick (B.S. Massachusetts Institute of Technology 1969), Tenafly, New Jersey  
Robert John DeLorenzo (B.S. Yale University 1969), Trenton, New Jersey  
Christopher Miller Doran (B.A. Cornell University 1969), Albany, New York  
Joseph Walter Eichenbaum (B.A. Yeshiva College 1969), Oceanside, New York  
Richard Jay Fingeroth (B.A. Tufts University 1969), Scorsdale, New York  
Glenn Sherman Forbes (B.S. University of Notre Dame 1969), Glenview, Illinois  
George Ivor Frank (B.A. Cornell University 1969), Wilton, New York  
Reginald Keith Franklin (B.S. Howard University 1969), Washington, D.C.  
Robert Edward Galloway (B.S. Loyola University 1965), Chicago, Illinois  
Lee Goldman (B.A. Yale University 1969), Collingswood, New Jersey  
Gary Victor Gordon (B.A. Brown University 1969), Worcester, Massachusetts  
Gary Thomas Grimes (B.S. Howard University 1968), Hyattsville, Maryland  
Neal Handel (B.A. Columbia University 1969), Van Nuys, California  
Jorge Luis Hernandez (B.A. Boston University 1969), Santurce, Puerto Rico  
Howard Steven Honig (B.A. University of Rochester 1969), Corden City, New York  
Wanda Devora Huff (B.A. Cornell University 1969), Detroit, Michigan  
Robert Charles Jimerson (B.A. Yale University 1969), Sinking Spring, Pennsylvania  
David Charles Johnson (B.S. Yale University 1969), Wilmington, Delaware  
Andrew Gabor Kadar (B.S. University of California at Los Angeles 1969), Los Angeles, California  
John Munn Kirkwood (B.A. Oberlin College 1969), Rowayton, Connecticut  
Michael Stuart Kramer (B.A. University of Chicago 1969), Miami, Florida  
Christine Ann Kull (B.S. Fordham University 1969), Brooklyn, New York  
George Lister, Jr. (B.A. Brown University 1969), Miami, Florida  
Harold Raymond Mancusi-Ungaro, Jr. (B.A. Yale University 1969), Upper Montclair, New Jersey  
Douglas Ernest Mattox (B.S. Dartmouth College 1969), Terre Haute, Indiana  
William McBride (B.A. Lincoln University 1969), Brooklyn, New York  
Mark Gerald Fielding McCormick (B.A. Yale University 1969), East Aurora, New York  
John Anders McDowell (B.A. Amherst College 1969), West Chester, Pennsylvania

John Francis McQuade, III (B.S. Yale University 1969), Towson, Maryland  
Marvin Elliott Miller (B.S. Trinity College 1969), Philadelphia, Pennsylvania  
Mika Omieri Mitoko (B.S. Brooklyn College of Pharmacy 1969), Karachonyo, Kenya  
Daniel Aaron Moros (B.A. Columbia University 1969), Long Island City, New York  
Jerry Nagler (B.A. Columbia University 1969), Rego Park, New York  
John Frederick Neil (B.A. Yale University 1969), Springfield, Illinois  
James Anthony Neviackas (B.A. Boston University 1969), Greenlawn, New York  
Claes Mats Nilsson (B.A. Yale University 1969), Shrewsbury, Massachusetts  
Lynne Miriam Oakland (B.A. Swarthmore College 1969), Montgomery, New York  
Howard Ozer, Jr. (B.S. Yale University 1969), Fairfax, Virginia  
Victor Lemuel Pappoe (B.A. Yale University 1969), Mystic, Connecticut  
David Edward Peach (B.A. Yale University 1969), West Redding, Connecticut  
David Pickar (B.A. Rutgers University 1969), North Brunswick, New Jersey  
Robert Joseph Polackwich (B.A. Yale University 1969), Saco, Maine  
John William Popp, Jr. (B.A. Vanderbilt University 1969), Elmhurst, Illinois  
Helene Linda Posner (B.A. Brooklyn College 1969), Brooklyn, New York  
Robert Hugh Posteraro (B.S. Fordham College 1969), Larchmont, New York  
Charles Felder Reynolds, III (B.A. University of Virginia 1969), Richmond, Virginia  
James Stephen Robertson (B.S. Trinity College 1969), Iron Mountain, Michigan  
Thomas James Romano (B.S. University of Notre Dame 1969), Valley Stream, New York  
Harry Solomon Romanowitz (B.A. Brooklyn College 1969), Brooklyn, New York  
Jerrold Frank Rosenbaum (B.A. Yale University 1969), West Hartford, Connecticut  
John Keller Rugge, Jr. (B.A. Williams College 1966, Harvard Divinity School 1966-1969), Somerville, Massachusetts  
Donald Allen Schon (B.S. University of Michigan 1969), Huntington Woods, Michigan  
John Paul Sherck (B.A. Miami University, Ohio, 1969), Rock Hill, Missouri  
George Daniel Shoup (B.S. Spring Hill College 1962, Ph.D. University of Colorado Medical Center 1966), Woodstock, Maryland  
Joseph Frank Simeone (B.A. Dartmouth College 1967, M.S. Massachusetts Institute of Technology 1969), Rochester, New York  
Robert Alan Sirota (B.S. Long Island University 1969), Massapequo, New York  
Michael Edward Solin (B.S. Massachusetts Institute of Technology 1969), Springfield, Massachusetts  
Carole Ann Stashwick (B.A. Albertus Magnus College 1966), Killingworth, Connecticut  
John Russell Stratton (B.A. Case Western Reserve University 1968), Salem, Ohio  
Charles Frederick Stroebel, III (B.A. University of Minnesota 1958, Ph.D. University of Minnesota 1961), Wethersfield, Connecticut  
James Francis Sullivan (B.S. Manhattan College 1969), Brooklyn, New York  
Thomas Francis Sweeney (B.A. Holy Cross College 1969), New Haven, Connecticut  
Marjorie Ellen Tripp (B.A. Stanford University 1968), Moraga, California  
Robert Joseph Ursano (B.S. University of Notre Dame 1969), Alexandria, Virginia  
Bruce Thomas Volpe (B.A. Yale University 1969), Yonkers, New York  
Marc Alan Weinberg (B.A. Hofstra University 1969), Dix Hills, New York  
Christopher Stanton Werner (B.A. Dickinson College 1969), Washington, D.C.  
Richard Sai Kin Young (B.A. Stanford University 1969), Honolulu, Hawaii  
Randall Mark Zusman (B.S. University of Michigan 1969), Southfield, Michigan



# New York Cocktail Party

An enjoyable sidelight of the eventful American Medical Association annual convention in July was a cocktail party at the Yale Club of New York City where more than one hundred alumni in medicine and their guests gathered to renew friendships.



Above: Representing the earliest class in attendance at the party were Dr. and Mrs. Joseph E. J. Horris of Albuquerque, New Mexico. Dr. Horris is a member of the medical class of 1912.



Left: Nutmeggers abroad: Dr. William Wowro, '38, of Hartford, and his daughter Jill (left) with Dr. E. Erwin Trocy, '29, and Mrs. Trocy of Middletown, Connecticut.

Below: Dr. Nicholas Spinelli and Dr. Lawrence Pickett, both '44, converse with two '45ers, Dr. Richard W. Breck and Dr. James D. Gordon.



Dr. George Jones, '41 (left) talks with Dr. Borboro Lipton, '51, and unidentified guest.







Above: Serious discussion: Dr. Ralph F. Sikes, '35 (and '41 M.P.H.), Dr. Ferdinand G. Kojis, '28, and Dr. Robert I. Rubinstein, '28

Left: Dr. Jahn F. Hynes, '30, with Dr. L. Allen Erskine, '42hs



Above: Dr. Robert E. Kaufman, '33, and Mrs. Kaufman with Dr. William A. Pettinger, '64hs, and Mrs. Pettinger.



Above: Twenty-year reunion: Dr. Daniel W. Elliott of Pittsburgh and Dr. George R. Anderson of San Antonio had not seen each other since they received their M.D. degrees together at Yale in 1949.

Below: Dr. Frank J. Grady, '65, and Nichole Sweeder with Dr. Frank C. Bell, '66, and Antoinette Verner.

Below: Dr. Thamas S. Harvey talks with Dr. William Lee. Both are members of the Class of '41.



## A Report from the Dean



The following comments regarding highlights of the academic year 1968-1969 were condensed from Dean Redlich's report at the year-end faculty meeting in June.

Our tenured faculty has increased by 33 members since July 1, 1968, to a present total of 119 professors and associate professors. These figures represent the addition of 39 new members and the loss of six, the latter including two deaths: Dr. Nicholas Giarman and Dr. Harry Greene; two retirements: Dr. Donald Barron and Dr. Hugh Long; and two resignations: Dr. Carl von Essen, who has joined the faculty of the University of California at San Diego, and Dr. Roger McDonald, who will be going to the National Institute of Mental Health. The total faculty now numbers 1,213 members, of whom 634 are full-time and 579 are part-time.

A great gain was the strengthening and consolidation of the basic science departments, with the appointments of four outstanding chairmen: Dr. Russell Barr-

nett in Anatomy, Dr. Gerhard Giebisch in Physiology, Dr. Murdoch Ritchie in Pharmacology, and, most recently, Dr. Frederic Richards in the new university-wide Department of Molecular Biophysics and Biochemistry which will link the medical school more closely with science on the north campus. Together, these departments give us a very solid scientific base.

The setting up of a new unit of behavioral sciences under Dr. Kenneth Keniston is an important step and should contribute substantially to research and teaching in these areas. The new section of clinical genetics attached to both Medicine and Pediatrics and headed by Dr. Leon Rosenberg is another major advance.

A number of areas have been effectively strengthened through new appointments: Dr. Graeme Hammond in cardiothoracic surgery, Dr. Thomas Krizek in plastic surgery, Dr. Solomon Schwartz in diagnostic radiology, and Dr. Robert Hutter in anatomical pathology. The development of a section of medical computer sciences under the direction of Dr. Shannon Brunjes is an especially exciting move.

Two changes have taken place in the chairmanships of clinical departments. In Psychiatry, Dr. Theodore Lidz decided to return to his research activities under the Research Career Award he holds from the National Institute of Mental Health, and we have been fortunate to attract Dr. Morton Reiser to succeed him. In Epidemiology and Public Health, Dr. Robert McCollum has taken over the chairmanship from Dr. Adrian Ostfeld who will resume research in the field in which he is outstanding, chronic disease epidemiology.

Financially, we have a great many problems but on the whole we are in relatively good shape. We have lost about \$1 million (out of some \$15 million) this year in federal support, most of it from research grants but some of it from training grants, which is more serious. One major new federal grant, however, made through the State of Connecticut, was the \$2.5 million for work in drug dependency by our faculty in the Connecticut Mental Health Center. Although the government's building program is at a virtual standstill, we have received \$1.4 million for the proposed Laboratory of Surgery, Obstetrics and Gynecology.

Confidence in our programs and plans is also represented in some \$3 million received from private sources. This includes grants from the John A. Hartford Foundation, for research in clinical genetics and the etiology of glaucoma; the Ford Foundation, for investigations by the Child Study Center of educational programs in the inner city; the Carnegie Foundation, for studies in the behavioral sciences; and the Kresge Foundation, which



has given a major grant toward the building of the Laboratory for Surgery, Obstetrics and Gynecology.

An important trend this year has been the increased emphasis on good clinical practice. I feel that our clinical faculty has made a greater effort than ever before to provide good care. It is a little early to evaluate the effect of the incentive system on the volume of practice by full-time faculty members, but it seems to be providing increased motivation.

Much of our attention has centered on the large community programs with which we are now involved: the University Health Plan, the Community Health Care Center Plan, and the Hill Health Center. As a school, we need these facilities in order to study the best ways of providing health services; we also need them in order to train physicians. And we intend to provide the best services we possibly can with the funds granted to us for these enterprises. In this connection, both the Connecticut Mental Health Center and the Yale Child Study Center are engaged in several projects where important scientific efforts are combined with the provision of first-rate services to the community.

Guidelines for a modest international program with particular involvement in the Caribbean area, Colombia, and East Africa have been approved by the Board of Permanent Officers.

We are also actively involved in the Regional Medical Program which was funded this year with its first operating grant of \$1.3 million. I have confidence that Dr. Henry Clark, working with the two participating medical schools, Yale and the University of Connecticut, will be able to implement this program in a meaningful way.

There has been a trend this year toward greater emphasis on good teaching, partly reflected in the new ranks we have created to recognize exceptional teacher-clinicians. This year we have carefully considered the opinions of students in evaluating the teaching abilities of faculty members up for promotion. We have been behind the rest of the university in this regard, and it is time we caught up. The role of student opinion in the evaluation of teaching will have to be further expanded and will undoubtedly have much impact on the system.

We have had a sound, relatively open relationship between faculty and students this year, and we owe a great deal to those who carry responsibility in this sector, especially to Dr. Thomas Forbes who is relinquishing his post as associate dean of student affairs. For many years he has been the faculty member who helped and guided students in every respect and maintained

close relationships with them. He is going back to his research and teaching in the Department of Anatomy, to be succeeded by Dr. Howard Levitin, who will be aided by a new associate dean, Dr. James Comer.

There is no question that students are changing in their attitudes and values. We must be sensitive to these changes and keep in close touch with student points of view. To determine just what we as faculty should provide and what students should avail themselves of will require a great deal of dialogue. I am much less concerned about the problem of student power than about the problem of student brains; after all, to help students use their brains effectively is a primary function of the faculty. Although I greatly value the new humanitarianism and social interests of our students, I am worried about what seems to me to be an anti-scientific bias in some of them. I have heard some students express anti-scientific views to which I and many others of the senior faculty cannot subscribe. Part of my concern here is that this same trend is visible in the wider community and in the legislatures. It is a distinctly anti-intellectual current against which we in the universities will have to defend ourselves. I think we are in danger of losing something very precious, a commitment to investigation that is essential to the proper performance of our task and of fundamental importance to society. I believe this feeling is shared by the President and Provost of Yale; the basis for my belief is the closer relationship that has developed in the past year between the School of Medicine and the rest of the University.

In general, I believe this has been a good year. In spite of the threat of federal cutbacks in funds by a government which spends much on warfare and little on welfare and health, I feel optimistic about the future of our school.



# In and About Sterling Hall

## Commencement 1969

At Yale's 268th commencement in June, 77 candidates received the Doctor of Medicine degree and 46 received the degree of Master of Public Health. Candidates in the School of Nursing who received the degree of Master of Science in Nursing numbered 41.

The M.D. degree *cum laude*, conferred on students whose work shows unusual merit, was awarded to Charles S. Angell, Daniel M. Eichbaum, Gary S. Farnham, David A. Geer, Lee M. Jampol, Robert L. Marrier, Timothy A. Pedley, David J. Sahn, Adrian M. Schnall, and Michael S. Toren.

The following prizes and awards were conferred on members of the graduating class:

*The Borden Undergraduate Research Award* in Medicine to a graduating student whose research has been determined by the School of Medicine to be the most meritorious performed by all similarly eligible persons, originality and thoroughness of research to be of primary consideration: Charles A. Dinarello.

*The Campbell Prize* for the highest rank in the examinations of the course: David A. Geer.

*The Miriam Kathleen Dasey Award* to that student who by strength of character, personal integrity, and academic achievement gives promise of fulfilling the ideal of the compassionate physician: Charles S. Angell.

*The Keese Prize* to the student who presents the best thesis: David A. Berkowitz.

*The Parker Prize* to the student who has shown the best qualifications for a successful practitioner: Timothy A. Pedley.

Prizes to students other than those in the graduating class included:

*The Perkins Scholarship Prize* to the student making the best record in scholarship in the basic subjects of the medical and biological sciences: Robert D. Gilbert.

*The Ramsey Memorial Scholarship Prize* to a student of unquestioned

ability and character after completing his first year in clinical medicine: Michael D. Danzig and Anne Weissman.

*The M. C. Winternitz Prize in Pathology* to the second-year student who, in the opinion of the Department of Pathology, has done outstanding work in the course: Robert Park.



Dr. Reiser

## Dr. Morton Reiser Heads Department of Psychiatry

Dr. Morton F. Reiser, a psychiatrist noted for his work in psychosomatic medicine, has been appointed chairman of the Department of Psychiatry and director of the Connecticut Mental Health Center.

As chairman of the Department of Psychiatry, Dr. Reiser succeeds Dr. Theodore Lidz, who has headed the department since 1967. In assuming the directorship of the Connecticut Mental Health Center, Dr. Reiser succeeds Dr. Gerald L. Klerman, associate professor of psychiatry, who has headed the State facility for the past two years.

Dr. Reiser is widely recognized for his research contributions in psychosomatic and psychophysiological disorders as well as for his research on the psychological aspects of hypertension, heart disease, and cardiovascular disorders.

A native of Cincinnati, Ohio, Dr. Reiser graduated from the University of Cincinnati in 1940 and from the university's medical school in 1943. He interned at Kings County Hospi-

tal in New York and served his residency at Cincinnati General Hospital. From 1947 to 1950 he was a psychiatry teaching fellow under the Commonwealth Fund Psychosomatic Program at that hospital. In 1950 he was appointed assistant professor of psychiatry and internal medicine at the University of Cincinnati College of Medicine.

After two years of military service at the Walter Reed Army Medical Center in the division of neuropsychiatry, he was appointed associate professor and director of research in the Department of Psychiatry at Albert Einstein College of Medicine. He was made a full professor in 1958 and was named chief of psychiatry at Montefiore Hospital in 1965.

He has held posts on the faculties of other institutions including the State University of New York Downstate Medical Center and the New York Psychoanalytic Institute, where he completed his own psychoanalytic training in 1960.

A former president of the American Psychosomatic Society, he is also a fellow of the American Psychiatric Association, a member of the Committee on Training for Research of the American Psychoanalytic Association, the American Federation for Clinical Research, and the American Society for Clinical Investigation.

## Dr. Kase Named Chairman of Obstetrics and Gynecology

Dr. Nathan G. Kase, an authority on human fertility, has been named professor and chairman of the Department of Obstetrics and Gynecology. He succeeds Dr. Edward J. Quilligan, department chairman since 1966, who has joined the faculty of the University of Southern California.

Dr. Kase, who is noted for his research in gynecologic endocrinology and in steroid metabolism in women, has made important contributions to the understanding and treatment of infertility and related problems.

He is also highly regarded for his



Dr. Kase

exceptional teaching ability and was the recipient in 1967 of the Francis Gilman Blake Award for excellence in teaching. In 1968 he was elected to Alpha Omega Alpha as a faculty member.

A native of New York City, Dr. Kase received his B.A. degree in 1951 and his M.D. degree in 1955, both from Columbia University. He served his internship and residency at Mt. Sinai Hospital in New York and was chief resident in obstetrics and gynecology there in 1961-62.

He joined the Yale faculty as an instructor in the Department of Obstetrics and Gynecology in 1962, and was promoted to assistant professor in 1963 and to associate professor in 1966. Since 1964 Dr. Kase has been in charge of the Gynecologic Endocrine Clinic of the Yale-New Haven Hospital where he has been concerned with the study and treatment of hormonal imbalance in women.

Dr. Kase is a member of the American Fertility Society, the Society for Gynecologic Investigation, the Endocrine Society, and Sigma Xi.

### **New Department of Molecular Biophysics and Biochemistry Established**

A new department has been established to link graduate studies in biochemistry and biophysics with the teaching in these areas for medical students. The Department of Molecular Biophysics and Biochemistry represents a merger of the former Department of Molecular Biophysics,



Dr. Richards

which was located in Yale's science complex on the north campus, and the former Department of Biochemistry, which was located in the School of Medicine.

Dr. Frederic M. Richards, Henry Ford II Professor of Molecular Biophysics, is the chairman of the new department which will have quarters and facilities on both campuses. The faculty will instruct undergraduates in the departmental major, and candidates for the M.S. and Ph.D. degrees in the sciences concerned, as well as medical students.

A major aim of the department is to encourage interaction between advanced research in the biological sciences and the development of clinical techniques in medicine. Dr. Richards has pointed out that the real impact of molecular biology on medicine is only beginning to be felt. "At the present level of sophistication, the application of theory and technique to clinical problems is equivalent to the dissection of a watch with a sledge hammer," he said.

"The passage of information from theoretical chemistry and physics right through the various aspects of biochemistry and biophysics to clinical problems should be made as continuous and effective as possible. For the guidance and constant correction of these efforts, the return flow of biological and medical observations to the chemists and physicists is essential. It is to such communication and interaction that the new department hopes to contribute and from

which it hopes to benefit," Dr. Richards said.

Dr. Richards is an authority on the chemistry of enzymes and is particularly noted for his research on ribonuclease. A graduate of Massachusetts Institute of Technology, he received the Ph.D. degree from Harvard in 1952. He subsequently held fellowships at Harvard and at the Carlsberg Laboratory in Copenhagen, Denmark, before being appointed assistant professor of biochemistry at Yale in 1954. He was promoted to associated professor in 1959 and to professor in 1962.

He was chairman of the Department of Molecular Biophysics for four years beginning in 1963 and was named Henry Ford Professor in 1967. He held a Guggenheim Foundation Fellowship in 1967-68 and during that year was a visiting fellow at All Souls College, Oxford.

### **Dr. Lewis Thomas Appointed Chairman of Pathology**

Dr. Lewis Thomas, former dean of the New York University School of Medicine, has been named professor and chairman of the Department of Pathology. He succeeds Dr. Harry S. N. Greene, Anthony N. Brady Professor of Pathology, who died last February.

Formerly a professor and chairman of academic departments of medicine and pathology, as well as a research professor of pediatrics, Dr. Thomas is noted for his research on infectious disease. He has conducted extensive studies on mechanisms of tissue injury due to infectious agents and microbial toxins, the property of cortisone to lower resistance to infection, and the pathogenesis of mycoplasma diseases.

He received his B.S. degree from Princeton University in 1933 and the M.D. degree *cum laude* from Harvard in 1937. He interned at Boston City Hospital and served a residency in neurology at the Neurological Institute in New York.

After military service, Dr. Thomas





Dr. Thomas

joined the faculty of the Johns Hopkins University School of Medicine, serving at the same time as director of the Bacteriological Laboratory of the Harriet Lane Home for Invalid Children of the Johns Hopkins Hospital. In 1948 he was appointed associate professor of medicine and director of the Division of Infectious Disease at the Tulane University School of Medicine and was promoted to professor in 1950. From 1950 to 1954 he held the American Legion Heart Research Professorship in Pediatrics and Internal Medicine at the University of Minnesota Medical School.

Dr. Thomas first joined the faculty of New York University in 1954 as professor and chairman of the Department of Pathology. In 1958 he was named chairman of the Department of Medicine. From 1966 until this fall he was dean of the university's medical school.

He is a member of the President's Science Advisory Committee and the New York City Board of Health. He has been a consultant to numerous government and private organizations, including the Sloan-Kettering Institute for Cancer Research.

**Dr. McCollum is New Chairman of Epidemiology and Public Health**

Dr. Robert W. McCollum, professor of epidemiology and an authority on viral diseases, has been named chairman of the Department of Epidemiology and Public Health. He succeeds Dr. Adrian M. Ostfeld, who has re-

turned to his research in chronic disease epidemiology.

A member of the Yale faculty since 1954, Dr. McCollum is noted for his work in the field of hepatitis, its epidemiology and virology, as well as for his studies of poliomyelitis, infectious mononucleosis, mumps, and rubella. Most recently he has worked on rubella vaccine studies and in 1968 directed the first large-scale field trials in the United States of HPV-77, which earlier this year became the first rubella vaccine licensed by the federal government.



Dr. McCollum

Dr. McCollum graduated from Baylor University and received the M.D. degree in 1948 from Johns Hopkins. He interned at Presbyterian Hospital in New York and Vanderbilt University Hospital and was an assistant resident in medicine at Yale-New Haven Hospital in 1950-51. From 1952 to 1954 he served in the Army Medical Corps with the 406th Medical General Laboratory in Tokyo and was a member of the Hemorrhagic Fever Field Team in Korea.

Named to the Yale faculty as assistant professor of preventive medicine in 1954, he was promoted to associate professor of epidemiology in 1960 and to professor in 1965. He was a consultant to the Second World Health Organization Expert Committee on Hepatitis in 1962-63. He has been a member of the Commission on Viral Infections of the Armed Forces Epidemiological

Board since 1958, and a consultant to the Surgeon General of the U.S. Army since 1961.

Dr. McCollum, who holds a diploma in public health from the London School of Hygiene and Tropical Medicine, worked with Dr. John R. Paul in the Yale Poliomyelitis Study Unit where he collaborated with Dr. Dorothy Horstmann in the 1950's in demonstrating the presence of poliovirus in the circulating blood. The finding contributed significantly to the later development of a polio vaccine.



Dr. Silver

**Recent Appointments**

Dr. George Albert Silver, former Deputy Assistant Secretary of Health, has been named professor of public health at the Yale School of Medicine. An authority on problems of urban health, Dr. Silver served as assistant to John W. Gardner, Secretary of Health, Education, and Welfare, from 1966 to 1968. When Dr. Gardner resigned in 1968 to head the Urban Coalition, Dr. Silver joined his new staff as executive associate, responsible for program planning in health matters.

Dr. Silver received his B.A. degree from the University of Pennsylvania in 1934, and his M.D. degree from Jefferson Medical College in 1938. In 1948 he was awarded the M.P.H. from Johns Hopkins University.

He has been on the faculties of a number of major universities including Columbia, Johns Hopkins, Al-



bert Einstein College of Medicine and the University of Michigan as a key figure in the fields of public health administration and preventive and environmental medicine.

Dr. Venkatram N. Iyer of the Department of Biology at Carleton University in Ottawa has been appointed visiting professor of radiobiology in the Department of Radiology for the period July to December 1969. Dr. Iyer is an authority in the field of genetic recombination mechanisms and the regulation of episomal replication and segregation.

Other recent appointments to the medical faculty include Dr. James B. L. Gee, associate professor of medicine, and Dr. Charles N. Gillis, associate professor of anesthesiology (pharmacology). Dr. Gee, who received his M.D. from Guy's Hospital Medical School in London in 1953, has been on the faculty of the University of Pittsburgh School of Medicine since 1965 and chief of the Pulmonary Service at their Veterans Administration Hospital. Experienced as a physiologist and chest physician, he will be in charge of the clinical laboratories, clinics, and consultation services concerned with pulmonary disease at the Yale-New Haven Medical Center.

Dr. Gillis, who holds a Ph.D. degree in pharmacology from Glasgow University, Scotland, was a member of the Yale Department of Pharmacology from 1961 to 1968 when he left to become head of the Section of Cardiovascular and Autonomic Pharmacology at the Squibb Institute for Medical Research in New Brunswick, New Jersey. He returns to Yale to participate in a program of advanced research and research training in the pharmacology of anesthesia, particularly as it relates to the sympathetic nervous system.

Recent administrative staff appointments include Barry J. Solomon as an assistant to the dean and Peter Stangl as assistant librarian in the Yale Medical Library. Mr. Solomon, a lecturer in public health, was for-

merly administrator of the Hill Health Center. In his new post, he is undertaking a review and evaluation of systems and procedures relating to clinical practice by members of the full-time faculty. Mr. Stangl, who has been a library research associate at Yale since 1967, is the first person to hold the title of assistant librarian at the medical library since the death of Henrietta T. Perkins in 1962.



*Hiscock Professor and Professor Hiscock*

#### **Dr. White Appointed Ira Vaughan Hiscock Professor**

Dr. Colin White, an authority in the fields of biometry and statistical epidemiology, has been named the first incumbent of the Ira Vaughan Hiscock Professorship of Public Health, established under the bequest of the late Susan Dwight Bliss. Dr. Hiscock, Anna M. R. Lauder Professor Emeritus of Public Health, is one of the country's foremost specialists in public health administration. Although he retired as chairman of the Department of Public Health in 1960, he has remained active, nationally and internationally, as a consultant.

Dr. White, a member of the epidemiology and public health faculty for the past 16 years, is noted for his research contributions in statistical methodology, including nonparamet-

ric methods of statistical analysis, design of epidemiological investigations, and vital statistics.

He is recognized as an outstanding teacher and has served as technical advisor to the National Institutes of Health and to the Surgeon General on matters concerned with research training. He was a member of the NIH Advisory Committee on Epidemiology and Biometry from 1960 to 1966.

A native of Australia, Dr. White received his undergraduate and medical degrees from the University of Sydney and served as a medical officer with the Commonwealth Department of Health from 1943 to 1946. Before coming to Yale in 1953, he lectured in physiology at the University of Birmingham in England and the University of Pennsylvania. He has headed the Section of Biometry in the Department of Epidemiology and Public Health since 1962.

#### **Faculty Honors and Awards**

Two members of the Yale medical faculty received honorary degrees in June. They are Dr. Fredrick C. Redlich, dean of the medical school, and Dr. Edmund S. Crelin, professor of anatomy.

Dean Redlich was awarded an honorary doctor of science degree from

Wittenberg University in Springfield, Ohio. The citation stated: "Educated in your native Austria . . . except for your year at Wittenberg . . . you have nonetheless devoted most of your adult life to the advancement of medical science, especially psychiatry, in your adopted country, exerting outstanding leadership through your teaching and administration at Yale, direction of the Connecticut Mental Health Center, service with the medical corps, and authorship of scientific works."

Professor Crelin received an honorary doctor of science degree from his alma mater, Central College, in Pella, Iowa. The citation read in part: ". . . We honor in you the talented master teacher, the midwife whose vision and patience help to give shape and life to blind fumbling forces."

Dr. Alvan R. Feinstein, professor of medicine and epidemiology, received the 1969 Francis Gilman Blake Award, given annually to the member of the Yale medical faculty designated by the fourth-year class as their most outstanding teacher of the medical sciences. The award honors a former dean and professor of medicine and is sponsored by the Nu Sigma Society.

Dr. Thomas F. Emery, associate professor of biochemistry, was one of two recipients of the Gibbs Society Teaching Award, an award given each year by the society to the best science teacher at the assistant or associate professor level. Generally, only one award is made, but this year Dr. Richard Goldsby, assistant professor of biology, was likewise honored for excellence in teaching.

Dr. Franklin H. Epstein, professor of medicine, was elected vice-president of the American Society of Clinical Investigation at the annual meeting in Atlantic City, New Jersey, in June.

Dr. Gerald Klatskin, David Paige Smith Professor of Medicine, was given an award by the American Medical Writers Association for a meritorious paper published in a bio-

medical journal. The award-winning paper, "Recurrent Hepatitis Attributable to Halothane Sensitization in an Anesthetist," was written in collaboration with Dr. Daniel V. Kimberg, of Beth Israel Hospital in Boston, Massachusetts. The award was presented at the annual meeting of the organization at the Statler Hilton Hotel in Philadelphia on September 19.

#### **Dr. R.J.C. Pearson is Associate Dean for Regional Activities**

Dr. R. John C. Pearson has been appointed associate dean for regional activities and director of the new Office of Regional Activities at the Yale School of Medicine. This office, which was established by an agreement with the Connecticut Regional Medical Program, will be responsible for coordinating the regional activities of the medical center as well as providing a liaison with the CRMP and other organizations and agencies concerned with regional medical activities.

Concurrently, Dr. Pearson has been appointed an assistant professor of public health in the health care section and will devote a portion of his time to teaching and research.

Dr. Pearson received his B.A. degree in 1951, the Ch.B. in 1954 and the M.B. and M.A. degrees in 1955, all from Cambridge University in England. In 1960 he was awarded the M.P.H. degree from Yale University. In that year, he was named field director for Dr. John R. Paul's Middletown oral polio vaccine program. Dr. Pearson has had wide experience in various aspects of community medicine with special reference to diseases — their incidence, prevalence, and control. In addition to directing studies on aspects of medical care, he has published material on comparative studies of community medical problems in this country and in several European countries.

Before his present appointment, Dr. Pearson was an assistant professor of community medicine at Brown

University in Providence, Rhode Island.

#### **Conference on School of Medicine-Community Hospital Relationships**

Ways to achieve more effective working relationships between the community hospitals in southern Connecticut and the Yale School of Medicine was the subject of a special invitational conference held at the medical school on September 9. Speakers included Dean Redlich; Associate Dean Arthur Ebbert, Jr., chairman of the Yale-New Haven Medical Center Committee on Regional activities; John D. Thompson, associate dean for planning and professor of public health; Frank T. Healy, Jr., Waterbury attorney and president of the Connecticut Hospital Association; Herbert A. Anderson, executive vice president of the Connecticut Hospital Association; and Henry T. Clark, Jr., program coordinator of the Connecticut Regional Medical Program.

Representatives of 18 community hospitals attended this half-day meeting which was arranged by the medical center's Committee on Regional Activities. Participants included administrators of the community hospitals as well as representatives of the medical staffs, nursing staffs, and boards of trustees.

Proceedings of this conference will be published. Copies may be obtained without charge by writing to: Director of Regional Activities, Yale University School of Medicine, 333 Cedar Street, New Haven, Connecticut 06510.

#### **Symposium on Malnutrition and Human Deficits**

The Department of Pediatrics was host to a symposium on malnutrition and human deficits on September 29. The conference, which was held at the Child Study Center, also included participants from the Departments of Epidemiology and Public Health, Sociology, Psychology, and Psychiatry at Yale, as well as



individuals from Harvard, Massachusetts Institute of Technology, and interested federal agencies. The meeting was concerned with the Harvard-Yale research enterprises in North Africa and was convened to exchange information derived from ongoing studies. Although malnutrition is considered a major variable associated with human defects, other major variables, such as infection and child-rearing practices, were not excluded.

The symposium was coordinated by Dr. H. J. Boutourline-Young, assistant professor of pediatrics at Yale, who is director of the Yale-Harvard Center in Florence, Italy, and of the Harvard-Yale Urban Studies in Tunis and consultant to the Rural Studies in Tunis. Funding agencies for the three studies have been the National Center of Health Statistics of the Department of Health, Education, and Welfare; the Grant Foundation of New York; and the Agency for International Development.

### Professors Emeriti

Two distinguished physiologists, Dr. Donald Barron and Dr. C. N. Hugh Long, were named professors emeriti on June 30.

Dr. Barron, a member of the medical faculty for 29 years, is an authority on the physiological aspects of the fetal-maternal relationships. He is noted for his studies of the effects of high altitudes on the oxygen supply of fetal sheep and llamas, and was the first investigator to make accurate quantitative measurements of the transfer of nutrients and gases across the placenta. This September he became the first incumbent of the first endowed chair at the University of Florida in Gainesville, the J. Wayne Reitz Professorship of Reproductive Biology and Medicine.

Dr. Long, a former dean of the medical school as well as a former chairman of the physiology and pharmacology departments, is inter-

nationally known for his work in metabolism and endocrinology. He was among the first to demonstrate the role of the adrenal cortex in carbohydrate metabolism and protein metabolism, as well as the use of adrenal cortical hormones as therapeutic agents. He is now a fellow of the scientific staff of the John N. Pierce Foundation Laboratory, where he is teaching in the graduate program on environmental physiology.

### Promotions

The following members of the medical faculty have been promoted to the rank of professor:

Dr. Joseph R. Bertino, professor of medicine and pharmacology, received his M.D. degree from the State University of New York College of Medicine in Brooklyn in 1954 and has been a member of the Yale faculty since 1961. He is known for his research on folic acid metabolism and in the field of cancer chemotherapy. In 1966 he was named head of the Oncology and Chemotherapy Section of the Departments of Pharmacology and Medicine.

Dr. Peter F. Curran, professor of physiology, received his Ph.D. degree from Harvard in 1958. Following two years as a research fellow at the University of Copenhagen, he joined the Harvard faculty and was an assistant professor of biophysics prior to his appointment as an associate professor of physiology at Yale in 1967. Dr. Curran has studied basic physiological mechanisms concerned with transport in epithelial structures and is currently investigating transport of materials across the intestinal mucosa.

Dr. Alvan R. Feinstein, professor of medicine and epidemiology, a graduate of the University of Chicago School of Medicine in 1952, was an intern and assistant resident at the New Haven Hospital and then served at the Rockefeller Institute in New York City. In 1956 he was appointed to the staff of Irvington

House and was its medical director from 1957 to 1962, when he returned to New Haven as chief of clinical pharmacology at the Veterans Administration Hospital and a member of the Yale faculty. He has recently been named chief of the Veterans Administration Eastern Research Support Center, which is located at the West Haven Veterans Administration Hospital. Dr. Feinstein, widely known for his book entitled *Clinical Judgment*, is a leading exponent of the application of mathematical logic to problems of diagnosis and prognosis.

Dr. Adolf P. Gagge, professor of epidemiology, an internationally renowned environmental physiologist who has made significant contributions in the field of thermal effects on man, is a member of the John B. Pierce Foundation. Having received his Ph.D. from Yale in 1933, Dr. Gagge joined the staff of the Pierce Foundation and was a research associate in biophysics at Yale. In 1941 he became chief of the Biophysics Branch of the Aero-Medical Laboratory at Wright Field. After the war he continued his scientific research in the U.S. Air Force. He returned to Yale in 1963 as an associate professor of physiology and in 1968 was named associate professor of epidemiology.

Dr. Kenneth Keniston, professor of psychology in the Department of Psychiatry, is a graduate of Harvard College and received his Ph.D. from Oxford University in 1956. He joined the Yale faculty in 1962 as an assistant professor. He is nationally and internationally known for his understanding of today's college students and is the author of two books on this generation: *The Uncommitted: Alienated Youth in American Society* and *Young Radicals: Notes on Committed Youth*.

Dr. William H. Miller, professor of surgery (ophthalmology) and physiology, received his M.D. degree from Johns Hopkins University in 1954. Following internship at Baltimore City Hospital, he was on the



staff at the Rockefeller Institute until coming to Yale as an associate professor of physiology (ophthalmology) in 1964. His investigative work in visual physiology is currently concerned with the interaction of light with eye structures that have characteristic dimensions in the order of the wave lengths of light. He has made major contributions in the fields of anatomy, insect dioptrics, and electrophysiology.

Dr. Patrick J. Mulrow, professor of medicine, received his M.D. degree from Cornell University in 1951 and was a house officer at The New York Hospital. After serving as a research fellow at Cornell Medical College and at Stanford University School of Medicine, he joined the Yale faculty in 1957 as an instructor in medicine. Dr. Mulrow is an authority on the control of aldosterones and the renin angiotensin system in control of blood pressure. He is in charge of the Endocrine Section of the Department of Medicine and has also served as director of the Clinical Research Center.

Dr. Marvin L. Sears, professor of ophthalmology, has been chief of the Section of Ophthalmology at Yale since 1961. He is a graduate of Columbia University College of Physicians and Surgeons, and following an internship at Bellevue Hospital in New York City, he received his residency training at the Wilmer Institute of the Johns Hopkins Hospital. In addition to his reputation as a clinician and surgeon, Dr. Sears is nationally known for his basic investigative work in the field of glaucoma.

Dr. Norman S. Talner, professor of pediatrics, received his M.D. degree from the University of Michigan in 1949. After internship and residency at Kings County Hospital in Brooklyn, he returned to the University of Michigan and was an assistant professor of pediatrics when he moved to Yale in 1960. He has served as director of the Pediatric Cardiopulmonary Laboratory

since that time. His investigative contributions, which have included both clinical and animal studies, have led to improvements in the diagnosis and care of pediatric cardiac patients.

The following members of the faculty were promoted to the rank of associate professor, effective July 1: Malcolm B. Bowers, M.D., psychiatry; Alexander G. M. Campbell, M.D., Ch.B., pediatrics; Hyman M. Chernoff, M.D., clinical medicine; Louis B. Fierman, M.D., clinical psychiatry; Walter J. Gehring, Ph.D., anatomy; Lewis E. Gibson, M.D., pediatrics; Robert H. Glass, M.D., obstetrics and gynecology; Richard H. Granger, M.D., clinical pediatrics; Richard A. Greenberg, Ph.D., public health (biometry); Joyce D. Gryboski, M.D., clinical pediatrics; Martin Harrow, Ph.D., psychology in psychiatry; Rufus O. Howard, M.D., ophthalmology; Edith Hsiung, Ph.D., laboratory medicine; Albert M. Jonas, D.V.M., laboratory animal science; Sidney N. Klaus, M.D., dermatology; Edward B. Klein, Ph.D., psychology in psychiatry; Ernest J. Kohorn, M.B., B.Ch., obstetrics and gynecology; Thomas L. Lentz, M.D., anatomy; Martha F. Leonard, M.D., clinical pediatrics; Stephen E. Malawista, M.D., medicine; John B. McKee, M.D., clinical psychiatry; Yale Nemerson, M.D., medicine; Jonathan H. Pincus, M.D., neurology; Milton H. Sangree, Jr., M.D., clinical medicine; Donald P. Schilder, M.D., medicine; Hyman K. Schonfeld, Dr.P.H., public health (medical care); Robert I. Schrier, M.D., clinical anesthesiology; Martin S. Schwartz, Ph.D., clinical psychiatry (social work); Gordon M. Shepard, M.D., physiology; Horace C. Stansel, M.D., surgery; Jan A. J. Stolwijk, Ph.D., epidemiology (environmental physiology); Alexander W. C. von Graevenitz, M.D., laboratory medicine and microbiology; Maclyn E. Wade, M.D., obstetrics and gynecology; Grace Wyshak, Ph.D., public health (biometry).

## Faculty Notes

Dr. Gilbert H. Glaser, professor of neurology, has been elected first vice president of the American Academy of Neurology. He has also been named to the board of directors of the Epilepsy Foundation of America.

In early October Dr. Glaser was a visiting lecturer at the University of Minnesota School of Medicine where he spoke on neurologic manifestations of adrenal and pituitary disease and neurologic aspects of renal disease. At the International Congress on Electroencephalography and Clinical Neurophysiology in San Diego, September 13-19, he organized and chaired the conference presentation on the electroencephalogram in metabolic, endocrine and toxic disorders. Last May, as visiting professor of neurology at the University of North Carolina, he lectured on cerebral ionic environment and epilepsy.

Dr. Byron H. Waksman, professor of microbiology, was in South America in June and July to deliver a series of lectures on cellular immunology in connection with the opening of a new research center at the Faculdade de Ciências Médicas da Universidade de Guanabara, a major medical school in Rio de Janeiro. Dr. Waksman also lectured in Recife, Brazil, and in Buenos Aires and Mendoza in Argentina.

Dr. Norman Cameron, professor emeritus of psychiatry, received the Frieda Fromm-Reichman Award for Research in Schizophrenia of the American Academy of Psychoanalysis in the spring. The award honors Dr. Cameron's many basic contributions to that field of research over the past thirty years.

Several members of the Yale medical faculty attended the Fourth International Congress of Nephrology held in Stockholm, Sweden, in June. Dr. Michael Weiner, research fellow in medicine, reported on some experimental kidney research being done by Drs. John Hayslett and Franklin Epstein of the Department of Internal Medicine and Dr. Michael

Kashgarian of the Department of Pathology. Other members of the renal group who delivered papers on their research included Drs. Epstein, Ernesto Hendler, George Torretti, and Edward Weinstein.

Additional material was presented by Dr. Hayslett, covering research by Drs. Epstein and Kashgarian, at a special symposium in Prague, Czechoslovakia.

Dr. Roy M. Acheson, professor of epidemiology, has returned after a sabbatical year as a senior travelling fellow at the London School of Hygiene and Tropical Medicine under the auspices of the Commonwealth Fund. In addition to his tour of duty in London, he was invited to lecture at the First Roumanian National Conference on Epidemiology in Bucharest as a guest of the Roumanian Academy of Science. His lecture concerned predictions of blood pressure, given certain data including age, physique, and blood glucose. At University Hospital, Copenhagen, where he was the guest of the Danish Society for Social Medicine, he spoke on screening populations in chronic disease. In June he lectured at University Hospital, Caracas, at the invitation of the Venezuelan Association of Medical Schools; his subject was "Some Epidemiological Contributions to Contemporary Clinical Thought."

### New Books

**DUNCAN'S DISEASES OF METABOLISM** (in two volumes, available separately). Edited by Philip K. Bondy, C.N.H. Long Professor of Medicine and chairman, Department of Internal Medicine, in association with Leon E. Rosenberg, associate professor of medicine and pediatrics (W. B. Saunders Company). The editor and his collaborators have incorporated in this new sixth edition of the classic text a framework for the organized study of metabolic processes and the diagnosis and treatment of metabolic disorders.

Volume I, *Genetics and Metabo-*

*lism*, includes chapters on genetic structure and function and the interaction and conversion of the organism's genetic composition in body functioning. There is also detailed material on disorders and the abnormalities and diseases of metabolic and genetic origin. Volume II, *Endocrinology and Nutrition*, deals with the influence of hormones and diet on the metabolic processes with a detailed discussion of each of the endocrine glands.

Other contributors from the Yale medical faculty include Drs. Thomas T. Amatruda, Jr., George Brawerman, Joseph E. Coleman, Nathan G. Kase, William Konigsberg, Robert J. Levine, Howard Levitin, Patrick J. Mulrow, Robert L. Scheig, and Sherman M. Weissman.

**SOCIAL MEDICINE IN EASTERN EUROPE** by E. Richard Weinerman, professor of medicine and public health, with the assistance of Shirley B. Weinerman (Harvard University Press). The subtitle, *The Organization of Health Services and the Education of Medical Personnel in Czechoslovakia, Hungary and Poland*, defines the geographical limits of this well-organized and concise study. The authors' investigation was under the auspices of the World Health Organization and financed by the Commonwealth Fund, Yale University, and the Yale-New Haven Hospital. In addition to gathering data on the organization of health services and on the education of medical personnel, they have endeavored to assess the impact of these two factors on medical practices, as well as the relationship of research and teaching in social medicine on the social factors affecting health.

The book is divided into four sections: 1) general observations which include something of the authors' methodology and brief commentary on some of the socio-economic aspects of these three socialist countries; 2) facts and figures on the three countries studied; 3) personal com-

mentary and conclusions with the authors' own evaluation of the progress and direction of medical health care resources, research facilities, and medical education; and 4) an appendix listing persons and facilities visited in each country.

For the last thirty years, constant change has marked the environmental and health-related activities in the three countries. Destruction of health facilities, loss of professional personnel, and population shifts were among the products of World War II and German or Russian occupation. Rapid post-war urbanization, the authors point out, has both added to and ameliorated problems of health care facilities and services.

Tables of comparative expenditures, organization, health resources, and other data, sprinkled throughout the book, serve to graphically summarize material in the text.



Dr. Buxton

### Charles Lee Buxton, M.D.

Dr. Charles Lee Buxton, professor of obstetrics and gynecology, died on July 7 at the age of 64. He had been ill for several months, having suffered a series of heart attacks.

Dr. Buxton was born in Superior, Wisconsin, but spent most of his early years in St. Paul, Minnesota. He attended the Lawrenceville School and received the B.S. degree at Princeton in 1927. Columbia University awarded him the M.D. degree in 1932 and the Med. Sc.D. degree in



1940. During the five years after graduation from medical school he was an intern at the Mary Imogene Bassett Hospital in Cooperstown, New York, a research fellow in endocrinology at the Harvard Medical School, and resident in obstetrics and gynecology at the Columbia-Presbyterian Medical Center. On completion of his training, he joined the faculty of the College of Physicians and Surgeons, Columbia University, and rose through the ranks to professor in 1951.

During World War II, Dr. Buxton served in the Medical Corps of the U.S. Navy and retired with the rank of commander.

In 1954 he succeeded Dr. Herbert Thoms as professor and chairman of the Department of Obstetrics and Gynecology at Yale and was responsible for its remarkable growth over

the next twelve years. After his retirement from the chairmanship, he remained active as a teacher and investigator until his death.

To the general public, Dr. Buxton was best known for his courageous and successful fight against Connecticut's birth control laws. One of the nation's leading crusaders in behalf of planned parenthood, he was the key figure in the legal battle that ended in the decision of the United States Supreme Court to abolish the State's antiquated statutes prohibiting dissemination of birth control information.

In the medical world, he was recognized as an authority on infertility. In addition to numerous articles in professional journals, he collaborated on two volumes: *Diagnosis and Therapy of Gynecological and Endocrine Disorders* (1949) with E. T. Engle and

*Human Infertility* (1958) with A. L. Southam, and also published *Psychophysical Methods for Relief of Childbirth Pain* (1962).

He was a fellow of the American College of Obstetrics and Gynecology, the American Association of Obstetrics and Gynecology, the American Fertility Society, and president, in 1959, of the American Society for the Study of Sterility. He received the award of the Albert and Mary Lasker Foundation in 1965 and the Ortho Medal of the American Society for the Study of Fertility in 1968.

Lee Buxton will be remembered with affection by his colleagues, by patients from all over the world who sought his advice on problems of sterility, and by a generation of students and house officers to whom he was devoted.

## Alumni News

### 1929

Class secretary RUSSELL SCOBIE sent the following report on the class reunion: "From the 40th observation tower, May 24 was a total success. Present with wives were ROBERT FRISCH, GEORGE GOLDMAN, VERNON LIPPARD, PAUL McALENNEY, WILLIAM ROTH, ROBERT TENNANT, FELIX TOMAINO, ERWIN TRACY, JULIUS WINTER, HERMAN YANNET and RUSSELL SCOBIE. Also attending but without wives were: FRANK D'ANDREA, CHARLES EPSTEIN, and WILLIAM ROTH.

"For those who attended the morning seminars at 10:30, the next twelve hours were completely filled and the *pièce de resistance* was our private dinner party for 23 at the Graduate Club. At least five others had planned to come but didn't make it. The consensus was that it was a most informal, relaxing, and enjoyable evening. The entire cast of actors that matriculated in September 1925 were accounted for and there

is no doubt that the more who show up, the better the day.

"The above mentioned hope that 1974 may be good to us so that we can recharge our Yale batteries. After all, Roth and Epstein made it for the first time since graduation. Also HAROLD HARRIS (ex-'29) joined us at lunch."

### 1939

STUART S. STEVENSON, class secretary, reported on the class's 30th reunion: "Present were: COPPERSMITH, DRUCKEMILLER, ERNST, FORMAN, GREENFIELD, KENIGSBURG, MURPHY, SARASON, STEVENSON, VOORHEES, and WALKER, plus ten beautiful wives, plus young Bill Druckemiller who is in his first year at the medical school. Bill proved to be more than adequate in his handling of Yale songs and thus was judged fit to be adopted by our class.

"After spending the day enjoying the scientific program and especially the Alumni-Student dialogue in the afternoon, we joined with our other

friends in a delightful cocktail session. Then we moved on to the Woodbridge Country Club where Jos Forman had arranged an elegant dinner for us.

"The attendance was small but the memories and the fellowship were warm and full. We all hope that we can have a better turnout when our 35th reunion rolls around."

### 1944

The class of 1944 held its 25th reunion in May. A very full report of the weekend, excerpted here, came from EDITH JURKA, class secretary: "As far as I am concerned, this was the nicest reunion we have had . . . It was most fascinating and heartwarming to see people again, some for the first time in 25 years . . . For the class dinner on Saturday evening we had our own large room at the Stratford Motor Inn, with six large tables in an Elizabethan atmosphere. There was much table-hopping, and we did not break up until after midnight . . ." Present were: ED and Shirley CONWAY, GEORGE and Cavy





Dr. Jurka



Dr. Rush

CORCORAN, FRANK and Betty COUNTRYMAN, LARRY and Madeleine CROWLEY, JOHN and Florence DOHERTY, BOB and Jane FRELICK, CAROL and Jolene GOLDENTHAL, CHARLES and Jane HALL, EDITH JURKA, JERRY and Shirley KAYE, TEX MacKENZIE PICOU, ELIE and Harriet MARSH, KATHERINE HAWLEY and Willard MARTIN, JOE and Mildred MAS-SARO, PAUL and Ann MOLUMPHY, RUSS and Lillian MONROE, LARRY and Polly PICKETT, LARRY and Catherine ROTH, JOE and Connie SPELMAN and NICK SPINELLI.

**1945**

RICHARD M. PETERS, professor of surgery and bioengineering, and head of the division of cardiovascular and thoracic surgery at the University of California, San Diego, School of Medicine, has written a book, *The Mechanical Basis of Respiration: An Approach to Respiratory Pathophysiology*. Published in September by Little, Brown and Company, the volume is concerned with respiratory function and malfunction. Dr. Peters covers many aspects of respiratory physiology as well as respiratory disorders which can respond to mechanical manipulation.

**1948**

JOHN B. MORRISON and JULIUS LANDWIRTH ('64hs) have opened an office at 291 Lambert Road, Orange, Connecticut, for the practice of pediatrics and adolescent medicine. BENJAMIN F. RUSH has been named professor and chairman of the Department of Surgery at the

New Jersey College of Medicine and Dentistry in Jersey City. Dr. Rush was a research assistant in surgical physiology at Sloan-Kettering Institute on graduation from Yale, and later served on the faculty of the Johns Hopkins School of Medicine. Before accepting his present post, he was professor of surgery at the University of Kentucky College of Medicine at Lexington.

**1949**

WILLIAM G. ANLYAN has been named to the new post of vice president for health affairs at Duke University in Durham, North Carolina. A professor of surgery, Dr. Anlyan will be responsible for the affairs of the medical center, including Duke Hospital, the schools of medicine and nursing, and allied health professions. He will also be in charge of cooperative undertakings with five area hospitals — Watts, Lincoln, and the Veterans Administration Hospital at Durham; Highland Hospital at Asheville; and the Sea Level General and Children's Hospital at Sea Level, North Carolina.



Dr. Anlyan

**1954**

JOHN A. GARIEPY reported on the fifteenth reunion of his class, in the absence of JOHN K. ROSE, class secretary, who was in Cambridge, England. Returning members, who met for dinner at the Park Plaza Hotel, included: ARTHUR CROVATTO, FRANK L. GRUSKAY, WALKER R. HEAP, JR., HERBERT S. HURWITZ, ROBERT F. HUSTEAD, LOWELL E. OLSEN, ANTHONY V. PICCIRILLO, RICHARD D. PULLEN and their wives. "On the following afternoon," reports Dr. Gariepy, "the Husteads, Pullens, Heaps, Piccirillos, and Gruskays arrived at my house with children for a picnic. Bob Husted arrived from Kansas which gave him the long distance record, followed by Walker Heap who came from Watertown, New York."



Dr. Nolan

**1955**

JAMES P. NOLAN has been promoted to professor of medicine at the State University of New York in Buffalo. He has also been appointed chief of medicine at the Buffalo General Hospital. Dr. Nolan will continue to serve on the staffs of the Edward J. Meyer Memorial and Veterans Administration Hospitals and will continue his research in liver disease. The Nolans and their four children reside at 204 Burbank Drive, Snyder, New York.

**1956**

ROSALIE BURNS received the Christian R. and Mary F. Lindback Award for distinguished teaching at the commencement exercises of the Woman's Medical College of Pennsylvania in June. She is assistant professor of neurology and head of the



Dr. Burns

neurology section at that institution. JAMES RICHARD PATRICK has been appointed chairman of the Department of Pathology at the Medical College of Ohio and has also been named professor of pediatrics. Most recently, he had been chief of pathology and director of laboratories at Children's Hospital in Washington, D.C. and assistant professor of pathology at Georgetown University.

**1958**

ANDREW MCGOWAN, JR. was named Chief of Urological Service at St. Vincent's Hospital in New York. After leaving medical school, he served an internship at the University of Virginia Hospital in Charlottesville and a residency in general surgery at St. Vincent's Hospital, followed by three years of urology at King's County Hospital, Downstate Medical Center in Brooklyn. From 1963 to 1965 he was in military service as assistant chief of urological services at Andrews Air Force Base Hospital in Washington, D.C. Dr. McGowan returned to the urological



Dr. McGowan

service at St. Vincent's Hospital in 1964 and in 1966 was also named clinical instructor in urology at the State University of New York Downstate Medical Center.

**1959**

ASA BARNES, JR., class secretary, reported on the class reunion: "The ten-year reunion of the Class of '59 began with coffee and crumpets in the Beaumont Room. Conversational clusters formed rapidly and subjects discussed ranged from current research to the most recent baby count. The latter was being increased that very day by Mrs. MARTIN COLODZIN and Mrs. DAVID SKINNER. Marty managed to alternate between the labor room and reunion activities but Baltimore was a bit far for Dave.

"The surgeons departed for their Grand Rounds and others for a shopping tour of J. Press and the Co-op while the talk over the coffee cups continued until almost noon. At the lunch buffet in Harkness '59ers pushed together a string of tables that stretched the width of the room . . . There was reluctance to adjourn even temporarily but most attended the session in the new auditorium to hear comments by Dean Redlich and President Brewster.

"The culmination of the reunion was perhaps the cocktail hour followed by dinner at the Rotisserie Normande . . . PARRY and Rae LARSEN from Miami were acknowledged distance champs for the evening. NICK PASSARELLI had arranged a superb repast . . . After brandy, the party, almost intact, moved to the Villa Passarelli and there continued far into the night. As the hour grew distinctly late, there was a palpable reluctance to disperse. But when the inevitable moment came, most of us left thinking that ten years is not such a long time after all." In attendance in addition to those mentioned above were: CAROL and RICHARD AMICK, EDWIN CLAYTON, ROBERT FISHER, ROBERT GONYEA, GERALD GORDON, LEONARD INKER, WILLIAM JABLONSKI, KRISTAPS KEGGI, RAYMOND MARK, JOHN MARSH, PETER MOLLOY, JOHN POGLINCO, SAN-

FORD SOLOMON, LISA STEINER, and MURIEL DuBROW Wolf.



Dr. Bass

**1962**

NORMAN H. BASS was one of 25 medical scientists to be appointed a Markle Scholar in Academic Medicine for the period 1969-1974. Dr. Bass, who is an assistant professor at the University of Virginia School of Medicine in Charlottesville, will be aided by the scholarship in continuing his research and teaching in neurology.

**1964**

To celebrate their fifth year out, the class of '64 met at Mory's for dinner with seventeen alumni and many of their wives in attendance. Present were: the JOSEPH CURIs, the PETER GROSSES, the REMO FABRIs, the STANLEY ROSENBERGs, the SIGRID TISHLERS, the DONALD SKINNERS, and Drs. LAWRENCE HORWITZ, WILLIAM MATCHETT, GENE HIGASHI, JOHN BARCHILON, MICHAEL FLYNN, RICHARD LINBURG, ROBERT LYONS, LEWIS LANDSBERG, MILLARD AMDUR, ANTHONY FERRANTE, and ROBERT SHELTON. Gaiety and nostalgia flowed in equal parts until 3 a.m. The reunion was pronounced by all present to be a success.

**1965**

We have received an announcement of the marriage of PHYLLIS J. HURWITZ to Ilan J. Duvdevani on August 17th in Binghamton, New York. Dr. Duvdevani served her internship



at Bronx Lebanon Hospital Center and her residency in internal medicine at the Manhattan Veterans Administration Hospital. She is currently a fellow in hematology at Mt. Sinai Hospital in New York. Her husband, a chemical engineer, did his undergraduate work at Technion in Haifa, Israel, and received his master's and Ph.D. degrees in chemical engineering from Stevens Institute of Technology in Hoboken, New Jersey.

**PUBLIC HEALTH**

**1921**  
**IRA VAUGHAN HISCOCK** was honored this June by the dedication of a new building in his name. The Connecticut State Welfare Department held a ceremony at the opening of Hiscock Hall, its new facility for the care of disadvantaged children, in appreciation of Dr. Hiscock's long-standing devotion to public health causes.

**1941**  
**HELEN MARTIKAINEN** was one of four women to receive honorary degrees at the 91st commencement of Smith College, Northampton, Massachusetts, in June. Miss Martikainen has been chief of health education of the World Health Organization in Geneva, Switzerland, since 1949. Her post has necessitated visiting countries throughout the world to assist in activities involving health education. She has received a number of other awards including an honorary doctorate of science from Bates College in Lewiston, Maine. After Miss Martikainen received her M.P.H. from Yale, she joined the U.S. De-

partment of Health, Education, and Welfare as health education consultant for seven years. Her citation as Doctor of Science reads: "One of the critical areas in our race between catastrophe and control over the world we live in is public health, and the task of public health is supremely educational as you have shown for twenty years as Chief of Health Education with the World Health Organization. To bring health knowledge to the people of eighty countries from western North Carolina to the Pacific has been your mission. To succeed, your tact had to match your wisdom, your humility inform your diligence, and your integrity shine through your compassion. Smith College is founded in the belief that all education is for the good of man and has taught that a healthy body and a healthy mind are inseparable. Since your life has been dedicated to prove this last point it is high time we joined forces."

**1945**  
**ANN WILSON Haynes** has returned from New Delhi, where she was associated with the Ford Foundation, and is now living at 169 Ardmore, Berkeley, California 94707.

**1955**  
**NGUYEN VAN THO**, Minister of Culture, Education and Youth of the Republic of South Viet Nam, spent two days in New Haven during his tour of the United States as a member of the Viet Nam Council on Foreign Relations. Purpose of the Council is to promote and develop international understanding and knowledge about the Republic of Viet

Nam. While in New Haven, Dr. Van Tho was the guest of Dr. Ira V. Hiscock.

**1957**  
**SYLVIA ROSS Talbot** has been appointed Minister of Health in Guyana. Dr. Talbot, who is married to the Reverend Fred Talbot, was born in St. Croix and holds both American and Guyanese citizenship. She attended the Inter-American University of Puerto Rico where she majored in biology. At the time she received her M.S. in Public Health from Yale, her husband graduated from the Yale Divinity School. Subsequently she obtained the Ph.D. degree from Columbia University. When she first went to Guyana in 1961, she taught biology at Bishops High School. From 1962 until 1966 when she left to work on her doctorate, she was Health Education Officer at the Ministry of Health.



Dr. Talbot

Her aim for those who have anything to do with the health of the people is to hold discussions centering on problems of health as the various people see them and as to how they think the problems can be solved. She feels strongly about Caribbean unity that "There needs to be more regional cooperation in the fields of training, medical facilities and the exchange of ideas . . . To say that I have an enormous task ahead is to make an understatement for everyone considers the Ministry of Health the most difficult . . . Nevertheless, I am full of ideas and I am certain that with God's help I



Miss Martikainen



Dr. Van Tho and his wife



can effect improvements and cause a dynamic and creative health service to emerge in this nation." People have begun to create little jokes and quips about the two ministers. Says a friend, "Sylvia is the Minister of the here. Fred is the Minister of the hereafter."

#### 1958

J. PHILIP KEEVE has joined the United States Agency for International Development in the Philippines. He has left his post at the University of Pittsburgh School of Medicine to take charge of a major program activity of the Health Division involving problems relating to population, family planning, training and research. He will also assume overall responsibility for the administration of the health programs of USAID/Philippines. His address is: c/o USAID, Philippines, APO San Francisco 96528.

#### 1959

HENRY M. PARRISH has been appointed associate dean and professor of community medicine at the University of South Dakota at Vermillion, South Dakota. Dr. Parrish was formerly professor of community health and medical practice at the University of Missouri, Columbia, Missouri.

MAX P. PEPPER, formerly on the faculty of the Yale School of Medicine, has joined the faculty of St. Louis University School of Medicine in St. Louis, Missouri, as pro-

fessor and chairman, Department of Community Medicine.

#### 1961

EDWARD A. JANASZ, who was most recently at the Park City Hospital in Bridgeport, Connecticut, has been named assistant administrator at St. Joseph's Hospital, Providence, Rhode Island.

#### 1964

ESTELLE SIKER Bernstein has been appointed director, Community Health Division of the Connecticut Department of Health in Hartford. Before coming to Yale for her M.P.H., she had received her M.D. degree at Woman's Medical College of Pennsylvania in 1953.

#### 1967

SHERWIN MELLINS has been appointed chief, Maternal and Child Health Section, Community Health Division for the Connecticut Department of Health in Hartford. Dr. Mellins, who was awarded his M.D. degree from New York University School of Medicine in 1959, lives at 46 Mountain View Drive in West Hartford.

DENNIS J. MAGID has been appointed assistant director of the Hebrew Rehabilitation Center for Aged in Boston, a geriatric teaching unit for Boston University School of Social Work and for the Harvard Medical School.

## HOUSE STAFF

#### 1964

RAYMOND K. BOPP has joined the Windham Surgical Group, 150 Mansfield Avenue, Willimantic, Connecticut, in the practice of general, thoracic, and cardiovascular surgery.

#### 1967

RICHARD DANFORD, a postdoctoral fellow in the Department of Radiology, received the Memorial Award of the Association of University Radiologists in San Francisco at their annual meeting. This award is given each year for outstanding original research in radiology. Dr. Danford's paper was entitled "The Effects of Glucagon on Renal Hemodynamics and Renal Arteriography."

DAVID R. INGRAM, assistant resident in pediatrics at Yale-New Haven Hospital, was the recipient of the House Staff Award of the Nu Sigma Society, an honorary student organization of the Yale medical school. The award was established last year and will be given annually to that member of the house staff deemed by students in the clinical phase of the curriculum to be their outstanding teacher.

#### 1968

FRED M. ROSENBLOOM entered practice of internal medicine in Miami Beach, Florida, this fall, having served one year on the Yale faculty as assistant professor of medicine and pediatrics.

Yale Medical School Alumni Fund

Annual Report / September 1969



This year, for the first time, the Medical School Alumni Fund Annual Report is appearing in *Yale Medicine*. No separate report of the fund will be published.



# Yale Medical School Alumni Fund Annual Report / September 1969

## **Fund Officers for the 1968-1969 Annual Giving Campaign**

Daniel F. Harvey, '33, Chairman  
Richard W. Breck '45, Vice Chairman for Regions  
Franklin M. Foote '33, '35 Dr.P.H., Vice Chairman for  
Public Health  
William Druckemiller '39, Parents Chairman  
J. Roswell Gallagher '30, Bequest Chairman

## **Former Medical School Alumni Fund Chairmen**

Charles A. Breck '30 1952-1959 (Deceased)  
Russell B. Scobie '29 1959-1963  
Conrad R. Lam '32 1963-1966

## **Campaign Results July 1, 1968 – June 30, 1969**

Total amount received	\$76,852
Alumni	\$66,067
Parents	\$ 8,219
AMA-ERF	\$ 2,566
Number of contributors	1,987
Alumni	1,918
Parents	50
AMA-ERF	19
Per cent of participation	68.5%



The response of the Alumni in contributing to the Medical School Alumni Fund during the past campaign is most gratifying and remarkable. In Annual Giving the total increased by \$9,131 over last year. We did lose some few contributors but the average gift increased to \$38.41.

The largest amount was raised by the Class of 1929, (Paul F. McAlenney, M.D., Class Agent.) The classes of 1901-04 attained the highest percentage of participation, 100 percent.

In the regional category, New Haven, 1903-1919 (Charles W. Gaylord, M.D., Regional Chairman), New Haven, 1930-1939 (Paul H. Laviertes, M.D.), and New Jersey 1958-1968 (Joseph J. Cillo, M.D.) achieved 100 percent. Parents have contributed the remarkable sum of \$8,219 (William Druckemiller, M.D., Chairman).

I wish to thank personally all the Class Agents and Dr. Richard W. Breck, Vice Chairman of Regions, and his team of Regional Chairmen for their splendid efforts and cooperation.

Again I wish to express my appreciation of the guidance given us by Associate Dean Arthur Ebbert, Jr., and our Fund Director Richard G. Jordan. I am most grateful to them.

Above all, my thanks to the contributors who responded so generously to our requests for gifts in 1968-1969. We look forward to the support of all the Alumni in 1969-1970 as we strive to respond to the needs of the School with increased gifts from more Alumni.

Daniel F. Harvey '33  
Chairman 1968-69

Each one of us who has had a chance to acknowledge his debt to Yale has welcomed an opportunity to express that gratitude. In my own case, the opportunity to help increase the participation and size of the Annual Giving is particularly welcome. My contact with the educational world has driven home for me the importance to any educational institution of the very rare "fund without strings" which the dean and faculty can count on to make the vital difference between adequacy and excellence. I approach the task with humility, and hope that all of you will help me in making the Alumni Fund constitute a significant factor in the success of Yale.

Myron E. Wegman '32  
Chairman 1969-70

**Results of 1968-1969 Campaign July 1, 1968—June 30, 1969**

Year	No. of Alumni	Contributors including AMA-ERF	Per Cent of Part.	Total by Class	Endowment Parents and Misc.	AMA-ERF Gifts	Grand Total
1968-69	2,801	1,937	68.5%	\$60,394	\$13,892	\$2,566	\$76,852

**Annual Results Since Inception of Medical School Fund**

1967-68	2,744	1,972	70.0%	\$55,453	\$9,702	\$2,932	\$68,087
1966-67	2,666	1,822	68.3%	\$50,946	\$2,576	\$2,378	\$55,900
1965-66	2,618	1,770	67.6%	\$47,947	\$9,602	\$3,524	\$61,073
1964-65	2,566	1,709	66.6%	\$45,762	\$ 245	\$4,066	\$50,073
1963-64	2,544	1,635	64.3%	\$43,175	\$ 6	\$3,500	\$46,681
1962-63	2,481	1,614	65.0%	\$45,968	\$ 73	\$4,273	\$50,314
1961-62	2,422	1,527	63.0%	\$35,475	\$ 4	\$3,804	\$39,283
1960-61	2,347	1,503	64.0%	\$35,386	\$ 35	\$2,510	\$37,932
1959-60	2,310	1,298	56.2%	\$29,707	...	\$3,086	\$32,793
1958-59	2,270	1,220	53.7%	\$26,576	\$ 103	\$3,384	\$30,064
1957-58	2,214	1,175	52.9%	\$24,515	\$ 175	\$2,476	\$27,166
1956-57	2,086	1,031	49.0%	\$21,859	\$ 52	\$2,069	\$23,980
1955-56	2,046	886	43.0%	\$19,995	\$ 325	\$2,605	\$22,925
1954-55	2,123	711	33.0%	\$16,562	.....	\$4,901	\$21,463
1953-54	2,061	598	29.0%	\$15,274	.....	.....	\$15,274
1952-53	2,007	426	21.0%	\$11,798	.....	.....	\$11,798
1951-52	1,950	402	21.0%	\$ 9,876	.....	.....	\$ 9,876

**Leading Classes**

Class	Agent	Amount	Class	Agent	Per Cent of Participation
1929	Paul McAlenney	\$6,294	1901-1904	Charles E. Farr	100%
1946	Julian A. Sachs	\$2,285	1954	John K. Rose	83%
1956	John H. Gardner III	\$2,231	1947	Ellis J. Van Slyck	82%
1953	Vincent Lynn Gott	\$2,205	1957	Howard Alyn Minners	80%
1944	Nicholas P. R. Spinelli	\$2,135	1944	Nicholas P. R. Spinelli	79%
1936	Hannibal Hamlin	\$2,070	1959	Lincoln T. Potter	77%
1932	Myron E. Wegman	\$2,035			

**Leading Regions**

Region	Chairman	Per Cent of Participation
New Haven 1903-1919	Charles W. Gaylord '15	100%
New Haven 1930-1939	Paul H. Laviertes '30	100%
New Jersey 1958-1968	Joseph J. Cillo '58	100%
Hartford 1953-1968	William B. Lehmann '63	90 %
New Haven 1940-1949	Charles B. Cheney '41	90 %
New York City 1964-1965	Frank J. Grady '65	90 %

Region	Chairman	No. in Region	Amount
New York City 1927-1933	Henry Fineberg '27	25	\$6,866
Southern California	Paul L. Saffo '33	102	\$3,121
N. & S. Carolina, Georgia	Mark McD. Lindsey '45	61	\$2,150
Northern California	Henry B. Bruyn '43	83	\$2,086
Philadelphia	Elihu Friedman '42	53	\$1,840

Region	Chairman	Increase in Participation		
		1968-69	1967-68	1966-67
New Haven 1903-1919	Charles W. Gaylord '15	100%	+36 pts.	64%
Kansas & Oklahoma	Robert F. Husted '54	80%	+24 pts.	56%
Texas	O. Roger Hollan '45	83%	+19 pts.	64%
Colorado	Berkeley L. Rich '63	46%	+17 pts.	29%
Washington State	John H. Hodge '55	83%	+16 pts.	67%



## Comparison by Classes

Class	Class Agent	Per Cent of Participation		No. in Class	Dir. to Yale	Contributors thru AMA	Total	Total Amount to Yale
		68-69	67-68					
1891-1904	Charles E. Farr	100%	43%	2	2	—	2	\$ 335
1905-06	Charles C. Murphy	43%	44%	7	3	—	3	150
1907-08	Anthony J. Mendillo	36%	33%	11	4	—	4	375
1909-10	F. Elmer Johnson	40%	36%	10	4	—	4	130
1911-14	Maxwell Lear	38%	46%	26	10	—	10	175
1915-19	Clyde Leroy Deming	56%	52%	18	10	—	10	240
1920	David Waskowitz	38%	38%	8	3	—	3	125
1921	Barnett Greenhouse	56%	70%	9	5	—	5	70
1922	Edward T. Wakeman	53%	56%	17	9	—	9	325
1923	George H. Gildersleeve	50%	57%	18	9	—	9	520
1924	Leo F. McAndrews	71%	66%	24	17	—	17	865
1925	Alice A. S. Whittier	62%	63%	34	21	—	21	749
1926	Maxwell Bogin	56%	62%	34	18	1	19	530
1927	M. Dawson Tyson	63%	62%	35	22	—	22	1,316
1928	Thomas J. Danaher	46%	48%	41	19	—	19	1,822
1929	Paul F. McAlenney	74%	74%	43	31	1	32	6,293
1930	J. Edward Flynn	59%	60%	39	23	—	23	882
1931	Michael D'Amico	60%	57%	37	22	—	22	1,040
1932	Myron E. Wegman	66%	70%	38	23	2	25	2,035
1933	Lee E. Farr	69%	74%	35	24	—	24	1,360
1934	Frederick Beck	58%	65%	33	18	1	19	782
1935	James Q. Haralambie	65%	66%	40	26	—	26	1,469
1936	Hannibal Hamlin	63%	60%	46	28	1	29	2,070
1937	Lorande M. Woodruff	49%	60%	47	20	3	23	737
1938	Nelson K. Ordway	71%	81%	31	22	—	22	1,430
1939	Robert G. Ernest	61%	63%	46	28	—	28	1,231
1940	James J. Smith	66%	62%	41	26	1	27	1,110
1941	Horace T. Gardner	62%	55%	47	28	1	29	2,235
1942	Donald D. Dieter	74%	69%	42	30	—	31	1,410
1943 (Mar.)	Gerard Fountain	70%	66%	40	28	—	28	910
1943 (Dec.)	S. Brownlee	55%	67%	49	23	4	27	898
1944	Nicholas P. Spinelli	79%	72%	48	36	2	38	2,134
1945	Richard W. Breck	71%	80%	59	42	—	42	1,875
1946	Julian A. Sachs	70%	76%	57	40	—	40	2,285
1947	Ellis J. VanSlyck	82%	85%	61	50	—	50	1,705
1948	David E. Morton	70%	66%	56	35	4	39	1,213
1949	Paul Goldstein	69%	70%	52	36	—	36	1,503
1950	Archie J. Golden	75%	80%	44	33	—	33	1,670
1951	Goffredo S. Accetta	70%	66%	60	38	4	42	1,570
1952	Harvey L. Young	70%	80%	59	41	—	41	1,915
1953	Vincent Lynn Gott	75%	76%	64	47	1	48	2,205
1954	John K. Rose	83%	84%	60	50	—	50	1,809
1955	Robert A. Kramer	74%	79%	77	56	1	57	1,900
1956	John H. Gardner	73%	76%	73	53	—	53	2,231
1957	Howard Alyn Minners	80%	76%	80	63	1	64	1,952
1958	Charles A. Hall	75%	78%	73	53	2	55	1,411
1959	Lincoln T. Potter	77%	70%	78	58	2	60	1,327
1960	Thomas P. Kugelman	63%	61%	75	47	—	47	852
1961	Jon D. Dorman	62%	63%	73	45	—	45	695
1962	Richard N. Collins	56%	67%	81	45	—	45	585
1963	Alan E. Shapiro	64%	65%	77	49	—	49	609
1964	David Porter Johnson	73%	78%	74	54	—	54	584
1965	David G. Campbell	70%	73%	81	57	—	57	534
1966	Richard J. Howard	59%	66%	76	45	—	45	294
1967	James M. Dowaliby	72%	61%	71	51	—	51	423
1968	Frank E. Lucente	52%	—	82	43	—	43	328
Public Health	Franklin M. Foote (759)	21%	—	161	161	1	162	2,021
<b>Totals</b>		68.5%	70%	2,801	1,884	34	1,918	\$68,258
<b>Miscellaneous</b>						19	19	375
<b>Parents</b>					50	—	50	8,219
<b>Grand Totals</b>					1,934	53	1,987	\$76,852

## Regional Report

68-69	67-68	Region	Chairman	No. in Region	No. of Contr.	Amount
100%	64%	New Haven 1903-1919	Charles W. Gaylord '15	9	9	\$ 455
100%	100%	New Haven 1930-1939	Paul H. Lavietes '30	21	21	635
100%	NA	New Jersey 1958-1968	Joseph J. Cillo '58	27	27	357
90%	76%	Hartford 1953-1968	William B. Lehman '63	20	18	669
90%	93%	New Haven 1940-1949	Charles B. Cheney '41	31	28	965
90%	93%	New York City 1964-1965	Frank J. Grady '65	10	9	105
89%	100%	Michigan	Edward A. Krull, '52	35	31	1,048
87%	NA	Illinois-Indiana	Frederick J. Fiederlein '54	46	40	1,542
84%	NA	Lower New York State 1950-1956	William V. Lewit '56	31	26	945
83%	NA	New Haven 1965-1966	Margretta Ann Reed Seashore '65	18	15	122
83%	64%	Texas	O. Roger Hollan '45	30	25	578
83%	67%	Washington State	John H. Hodge '55	40	33	1,058
82%	91%	New York City 1903-1926	D. Anthony D'Esopo '24	17	14	495
80%	88%	Hartford 1928-1936	Thomas C. Carey '28	15	12	935
80%	79%	New Haven 1956-1959	Robert H. Glass '57	30	24	523
80%	56%	Kansas & Oklahoma	Robert F. Husted '54	15	12	460
79%	NA	Boston 1945-1959	Jerome O. Klein '56	28	22	805
79%	82%	Philadelphia	Elihu Friedmann '42	53	42	1,840
78%	70%	Southern California	Paul L. Saffo '33	102	80	3,121
78%	77%	New Haven 1920-1929	Clement F. Batelli '28	23	18	525
78%	NA	Washington (D.C.) 1924-1957	Gilbert M. Eisner '56	27	21	566
78%	92%	New Mexico, Nevada, & Utah	Norman F. Moon '56	27	21	703
77%	NA	Washington (D.C.) 1963-1968	Haskins K. Kashima '58	34	26	312
77%	NA	Iowa & Wisconsin	Phillip Couchman '49	26	20	520
77%	NA	New Jersey 1942-1957	Sanfurd G. Bluestein '46	26	20	903
77%	88%	New York 1953-1957	Seth Abramson '53	17	13	416
77%	NA	Lower New York State 1933-1949	Leo Kellerman '42	22	17	1,145
77%	78%	Pittsburgh	John Beauregard '39	17	13	515
76%	81%	New York 1944-1952	Edith M. Jurka '44	21	16	725
75%	76%	Eastern Connecticut	Charles Chace '52	47	35	990
75%	71%	New Haven 1963-1964	William Matchett '64	24	18	192
75%	NA	Lower New York State 1957-1958	Salvatore Falbo '57	28	21	452
74%	64%	Bridgeport & Norwalk, Conn.	Max Alpert '28	23	17	772
73%	NA	Washington, (D.C.) 1958-1962	Raymond W. Turner '58	22	16	265
73%	70%	South Central	Myron J. Adams '33	75	55	1,494
72%	67%	Northern California	Henry B. Bruyn '43	83	60	2,086
72%	64%	New York 1927-1933	Henry Fineberg '27	25	18	6,866
72%	NA	New York 1966-1968	Richard S. Bockman '67	18	13	108
70%	71%	New Haven 1950-1955	Andrew S. Wong '51	27	19	425
70%	NA	New Haven 1967-1968	Peter N. Herbert '67	33	23	153
70%	NA	Boston 1919-1944	Malvin F. White '39	27	19	910
70%	NA	Boston 1965-1968	James J. Dineen '67	20	14	97
69%	72%	North & South Carolina & Georgia	Mark McD. Lindsey '45	61	42	2,150
68%	NA	Minnesota	Jonathan S. Bishop '49	41	28	800
68%	74%	Virginia & West Virginia	Joseph F. Kell, Jr., '43	38	26	764
67%	57%	Hartford 1937-1942	Theodore W. Steege '38	21	14	825
67%	72%	Delaware & Maryland	William J. Vandervort '53	76	51	1,157
67%	64%	Florida	Thomas O. Gentsch '53	54	36	1,739
67%	NA	Boston 1960-1964	Charles W. Carl '63	27	18	300
67%	72%	New Hampshire & Vermont	Edmund L. Piper '49	33	22	995
65%	76%	Fairfield County, Connecticut	John B. Ogilvie '34	31	20	1,285
65%	91%	Hartford 1943-1952	Carol Goldenthal '44	23	15	475
65%	82%	New Haven 1960-1962	Frederick P. Anderson '62	17	11	295
65%	73%	Northwest Connecticut	Henry N. Blansfield '47	46	30	855
65%	78%	New York 1934-1943	John Prutting '38	20	13	695
65%	75%	New York 1961-1963	Frank R. Hartman '62	17	11	178
64%	NA	Lower New York State 1906-1936	Ferdinand G. Kojis '28	28	18	1,040
64%	73%	Oregon	William R. Sweetman '43	11	7	105
63%	57%	Arizona	John F. Carroll '56	27	17	553
63%	57%	Ohio	Robert Youngen '57	48	30	879
62%	70%	Northeast Mass. & Boston Suburbs	Morgan Sargent '37	39	24	534
62%	62%	Rhode Island	Richard R. Dyer '45	26	16	363
61%	62%	Western Massachusetts	Frederick A. Post '36	38	23	960

68-69	67-68	Region	Chairman	No. in Region	No. of Contr.	Amount
61%	70%	Upper New York State	Nicholas Stahl '43	82	50	1,735
58%	67%	New York 1958-1960	Theodore W. Lieberman '58	12	7	315
56%	NA	San Francisco	Henry B. Bruyn '43	82	46	871
55%	NA	Montana, Nebraska, Idaho, N. & S. Dakota, Wyoming	D. Franklin Johnson '55	11	6	235
53%	73%	Southern Mass. & Cape Cod	Wallace M. Kemp, Jr. '50	17	9	320
52%	NA	New Jersey 1900-1941	Herbert W. Diefendorf, '41	27	14	495
50%	44%	Hartford 1906-1927	Charles I. Solomon '25	14	7	280
46%	29%	Colorado	Berkeley L. Rich '63	24	11	116
41%	56%	Maine	Francis A. Spellman '43	27	11	625
72%	72%	Vice Chairman for Regions	Richard W. Breck '45	2,287	1,635	\$59,742

### Contributors/July 1, 1968 — June 30, 1969

Medical Alumni by Classes  
 Public Health Alumni by Classes  
 Parents

\* Contributed prior to death

† Contributed through AMA-ERF only

‡ Contributed to Yale Medical School Alumni Fund and through AMA-ERF also.

#### Medical Alumni

##### 1903

John H. Bailey  
 Charles E. Farr

##### 1905

James J. Costanzo

##### 1906

Herbert L. Kennedy  
 Charles C. Murphy

##### 1907

‡ Anthony J. Mendillo

##### 1908

Abraham Bernstein  
 John F. O'Brien  
 Michael A. Parlato

##### 1909

\* George W. King

##### 1910

George Goldman  
 F. Elmer Johnson  
 Thomas H. Russell

##### 1911

Lewis S. Booth  
 Genesis F. Carelli  
 Maxwell Lear

##### 1912

Daniel T. Banks  
 Milton L. Dryfus  
 Harry Fried  
 Joseph E. J. Harris  
 Edward H. Kirschbaum  
 William H. J. O'Brien  
 Walter Clark Tilden

##### 1913

Ralph E. Taylor

##### 1915

Harry L. Berman  
 Clyde Leroy Deming  
 Charles W. Gaylord

##### 1916

Lloyd L. Maurer  
 Louis H. Nahum  
 Raymond M. Schulte

##### 1917

Nathaniel C. Robey

##### 1919

Louis E. Blanchard  
 Michael M. Devenis  
 Willys M. Monroe

##### 1920

Oscar Brenner  
 Lillian L. Nye  
 David Waskowitz

##### 1921

Ella W. Calhoun  
 Joseph T. Eagan  
 Barnett Greenhouse  
 Arthur S. Griswold  
 Julian B. Herrmann

##### 1922

Maurice Grozin  
 Benedict R. Harris  
 Jesse S. Harris  
 Chester E. Hurwitz  
 Helen P. Langer  
 Perley J. Mundie  
 Maurice F. O'Connell  
 Henry B. Rollins  
 Edward T. Wakeman

##### 1923

Frank G. Amatruda  
 William Cohen  
 Robert K. Cutter  
 George H. Gildersleeve  
 Joseph A. Johnston  
 Jacob Mellion  
 Julius A. Olean  
 Saul Schapiro  
 Hyman W. Weinstein

##### 1924

Edward Pratt Allen  
 John J. Batchelor  
 D. Anthony D'Esopo  
 Stuart O. Foster  
 Edward M. Gould  
 Joseph A. Groark  
 Max Horn  
 Edward Phillips Levine  
 Leo F. McAndrews  
 John McK. Mitchell  
 David M. Raskind  
 Myron A. Sallick  
 Eli Y. Shorr  
 Morris Slater  
 Jacques D. Soifer  
 Harold T. Vogel  
 Francis B. Woodford

##### 1925

Spafford Ackerly  
 Jean H. Celentano  
 Dorence S. Cowles  
 Edward A. Cramton  
 Waldo F. Desmond  
 Henry W. Ferris  
 Thomas Francis, Jr.  
 Anna J. Gosline  
 William E. Hall  
 Ives Hendrick  
 Joseph Petrelli  
 Thomas R. Preston  
 Samuel Reback  
 Theodore Robie  
 Charles I. Solomon  
 Welles A. Standish  
 Morton J. Tandler  
 Alice A. S. Whittier  
 Gonsalvo C. Williams, Jr.  
 E. Christopher Wood  
 ‡ Howard A. Wood

##### 1926

Stanton T. Allison  
 Louise Baker  
 Maxwell Bogin  
 Abe S. Brown  
 † Thomas Cottiero  
 Sidney I. Cottlinkin  
 Leonard A. Hallock  
 ‡ Joseph L. Hetzel  
 Morris Hinenburg  
 Ben Klotz  
 John Bart Lauricella  
 Edward J. McCabe  
 Milton Malev  
 Joseph T. Matteis  
 Alexander E. Rosenberg  
 Richard M. Starr  
 Edward J. Thalheimer  
 Leonard Paul Wershub  
 C. Eugene Woodruff

##### 1927

Louis J. Baronberg  
 Wallace R. Bostwick  
 Henry Caplan  
 George L. Daniels  
 Leo Elson  
 Henry Irwin Fineberg  
 Harold A. Flynn  
 Meyer Friedenson  
 Donald F. Gibson  
 Herman H. Goldstein  
 Edward E. Harkavy  
 Albert Jablonsky  
 Nathan Levy  
 William G. Meredith  
 Frank Mongillo  
 Daniel G. Morton  
 William A. Petruzzi  
 Arthur E. T. Rogers  
 Frank A. Seibert



M. Dawson Tyson  
 James S. VanLeuvan  
 George H. Zinn  
**1928**  
 Max Alpert  
 Clement F. Batelli  
 Bernard S. Brody  
 John Burke  
 Thomas C. Carey  
 Charles S. Culotta  
 Edwin B. Egli  
 Edward L. Howes  
 Sheldon A. Jacobson  
 Ferdinand G. Kojis  
 R. Harold Lockhart  
 Mary B. H. Michal  
 Daniel A. Mulvihill  
 Harry C. Oard  
 Clarence E. Reyner  
 Nathan E. Ross  
 Robert I. Rubenstein  
 Lewis A. Scheuer  
 George C. Wilson  
**1929**  
 James Rae Arneill, Jr.  
 †John M. Bailey  
 John W. Cass, Jr.  
 Morris A. Cohn  
 Frank H. D'Andrea  
 Charles J. Epstein  
 Caldwell B. Esselstyn  
 Robert A. Frisch  
 Olive Gates  
 George S. Goldman  
 Alexander O. Haff  
 John A. Hangen  
 Harold J. Harris  
 George P. Jackson, Jr.  
 Victor H. Kugel  
 Joseph Lander  
 Louis Lichtenstein  
 Vernon W. Lippard  
 Paul F. McAlenney  
 Jacob Nodelman  
 Tony Liebman Rakieten  
 Clarence L. Robbins  
 William F. Roth, Jr.  
 Russell B. Scobie  
 Benjamin Spock  
 Robert Tennant  
 Felix F. Tomaino  
 ‡F. Erwin Tracy  
 Newell R. Washburn  
 Julius G. Weiner  
 Amano Fumiko Yamaguchi  
 Herman Yannet  
**1930**  
 Samuel Alpert  
 Ignacio Bird-Acosta  
 Courtney Craig Bishop  
 Caspar G. Burn  
 Frank H. Couch  
 Robert D. M. Cunningham  
 Knox H. Finley  
 J. Edward Flynn  
 J. Roswell Gallagher  
 Leonard Greenburg  
 James C. Hart  
 Irving L. Josephs  
 David Kalkstein  
 Israel E. Kirsh  
 Edmund L. Kitzmeyer  
 Morris Y. Krosnick  
 Paul H. Lavietes  
 Jack Lehner  
 Moses D. Lischner  
 Milton T. McDonald  
 Howard Millstein  
 Harold A. Rosenburg  
 ‡Paul Watson  
 Mrs. Frederick G. Wilson  
**1931**  
 Dana L. Blanchard  
 Henry H. Briggs  
 Joseph F. Burke  
 Earl R. Carlson  
 Benjamin Castleman  
 Michael D'Amico  
 Richard L. Frank  
 Helen R. Gilmore  
 Theodore F. Hahn  
 Paul A. Harper  
 Harold E. Harrison  
 Morris F. Heller  
 Thomas C. Jaleski  
 Yale David Koskoff  
 A. Phillip La France  
 Rhoda M. Mickey  
 Nelson Newmark  
 Sheldon Payne  
 Morris L. Rakieten  
 Abraham J. Schechter  
 Max Taffel  
 A. Allison Wills, Jr.  
**1932**  
 Louis K. Alpert  
 Sherman J. Beers  
 Leonard F. Ciner  
 Henry Brill  
 Frank D. Carroll  
 Clement C. Clarke  
 Clarence H. Cole  
 Hester B. Curtis  
 Gideon K. deForest  
 Joseph P. Donnelly  
 Thomas E. Farthing  
 Lewis F. Foster  
 Edward W. Holland  
 Storer Plumer Humphreys  
 Conrad R. Lam  
 †John C. Leonard *in memoriam*  
 Mario L. Palmieri  
 Arthur J. Present  
 Elizabeth M. Ramsey  
 Rudolph E. Vandever  
 Myron E. Wegman  
 Roland T. Wehger  
 †Carl H. Wies  
 Frank B. Wisner  
 Edward H. Wray, Jr.  
 Edmund A. Zybulewski  
**1933**  
 Myron J. Adams  
 Donald G. Barton  
 Fred W. Buse  
 Caroline A. Chandler  
 Lee E. Farr  
 Robert L. Feldmann  
 William F. Flynn  
 Franklin M. Foote  
 Irving Friedman  
 Jack Greenberg  
 ‡Daniel F. Harvey  
 George K. Hirst  
 Robert E. Kaufman  
 Joseph Mignone  
 Raymond E. Miller  
 Ashley Pond, III  
 Paul L. Saffo  
 Edwin B. Seelye  
 Lester Q. Stewart  
 Sydney W. Stringer  
 Frederick A. Wies  
 John J. Wolfe  
 Francis M. Woods  
**1934**  
 Leona Baumgartner  
 Frederick Beck  
 James F. Blades  
 Joseph Budnitz  
 ‡DeWitt Dominick  
 Sylvia A. Ficke  
 †Francis P. Guida  
 Thomas V. Hynes  
 Derrick A. January  
 Kalmen A. Klinghoffer  
 Knowles B. Lawrence  
 Frank L. Marting  
 Theodore P. Merrick  
 Herbert C. Miller  
 John B. Ogilvie  
 ‡Lucien M. Pascucci  
 Harry Sherman  
 William R. Willard  
 George Zalkan  
**1935**  
 Walter E. Barney  
 George A. Carden, Jr.  
 Edward V. Carvey  
 Maurice A. de Harme  
 Bernard S. Dignam  
 Edward F. Falsey  
 Sawnie R. Gaston  
 H. Hoffman Groskloss  
 Lena Halpern  
 James Quintin Haralambie  
 Henry L. Hartman  
 W. Howard Horner  
 ‡Mildred H. January  
 Samuel D. Kushlan  
 ‡James B. Lounsbury  
 Max Miller  
 Norman P. Rindge  
 Milton Rose  
 Viva Schatia  
 Ralph F. Sikes  
 Louis E. Silcox  
 Jack C. Sleath  
 Walter A. L. Thompson  
 Paul H. Twaddle  
 Samuel Zelman  
**1936**  
 William S. Baum  
 Daniel Bergsma  
 George Henderson Brown  
 Lester W. Burket  
 John J. Clancy  
 Nicholas D. D'Esopo  
 ‡Albert W. Diddle  
 Harold Genvert  
 Margaret C. L. Gildea  
 Milton S. Godfried  
 ‡George D. Gross  
 George A. Hahn  
 Hannibal Hamlin  
 Louise G. Hutchins  
 Frank F. Kanthak  
 E. Robbins Kimball  
 Philip M. LeCompte  
 Donald F. Marshall  
 Stephen F. Nagyfy  
 Frederick A. Post  
 Jerome Ritter  
 Hugh Allan Smith  
 Margaret Sommers  
 Robert H. Stevens  
 Morris Tager  
 Mary M. Troll  
 †Edgar W. Warren  
 Samuel Yochelson  
**1937**  
 †Edmund R. Blower  
 Lewis H. Bronson, Jr.  
 †Clair B. Crampton  
 Allan B. Crunden, Jr.  
 Margaret Dann  
 Guido A. DeBlasio  
 †David A. Dolowitz  
 D. Crosby Greene  
 Bernhard H. Hartman  
 ‡Benjamin F. Hoopes  
 Robert C. Horn, Jr.  
 Wilbur D. Johnston  
 Alfred E. King  
 Dunham Kirkham  
 Julia Mehlman  
 James P. Morrill  
 Charles W. Neuhardt  
 Alan A. Rosen  
 Morgan Sargent  
 Edward J. Shaw  
 Albert D. Spicer  
 Levin Lyttleton Waters  
 ‡William M. Wiepert  
 Lucille R. Wiepert  
**1938**  
 Roy N. Barnett  
 Joseph A. Bliss  
 Henry L. Carideo  
 Roberta Crutcher  
 John A. Dillon  
 S. Charles Kasdon  
 Benjamin E. Lyons  
 John J. McGillicuddy  
 Edward Nichols  
 Nelson K. Ordway  
 Charles Petrillo  
 Edward W. Pinkham, Jr.  
 John Prutting  
 James Radcliffe, Jr.  
 Arthur S. Reynolds  
 George E. Roberge  
 Norman Ruud  
 Theodore W. Steege  
 Lester J. Wallman  
 N. William Wawro  
 Louis G. Welt  
 Richard V. Worthington  
**1939**  
 John F. Beauregard  
 Stephen W. Collins, Jr.  
 Harold H. Coppersmith  
 Norman L. Cressy  
 Albert W. Dautrich  
 William H. Druckemiller  
 Joseph B. Forman  
 S. Jerome Greenfield  
 John James Head

- Nathaniel Kenigsberg  
 Arthur E. Laidlaw  
 Margaret A. Lennox  
 ‡Ward J. McFarland  
 James Peter Murphy  
 Russell Nahigian  
 Russell C. Norton  
 Douglas S. Riggs  
 Roger N. Ryley  
 Ernest L. Sarason  
 Bradford Simmons  
 Rebecca Z. Solomon  
 Stuart S. Stevenson  
 John D. Tobin  
 Arthur S. Tucker  
 Darrell G. Voorhees  
 ‡Douglass W. Walker  
 John H. Wentworth  
 Malvin F. White  
**1940**  
 Theodore E. Allen  
 Joseph V. Baldwin  
 Jack S. Blaisdell  
 Philip Brezina  
 Crawford J. Campbell  
 Thaddeus S. Danowski  
 Wynant Dean  
 Robert M. Dunlap  
 James F. Ferguson, Jr.  
 John C. Haley  
 Henry D. Humphrey  
 H. Stuart Irons, Jr.  
 Donald G. Johnson  
 Paul D. MacLean  
 Edward Martin  
 †K. Alvin A. Merendino  
 William R. Oakes  
 Maurice Ross  
 Lee S. Sannella  
 Beatrix Goldzieher Smith  
 Edward R. Smith  
 James J. P. Smith  
 Joseph E. Sokal  
 Francis X. Sommer  
 J. Champneys Taylor  
 Patricia E. Wanning  
 John B. Wells  
 Helen H. Woods  
**1941**  
 Sophia C. Alway  
 Robert H. Areson  
 †Paul H. Barbour  
 W. Randal Bell  
 Marvin Blum  
 Joseph P. Carson, Jr.  
 ‡Charles B. Cheney  
 Herbert W. Diefendorf  
 Robert F. Dine  
 John E. Fenton  
 Lloyd D. Flint  
 John Franklin  
 Horace T. Gardner  
 Robert L. Gilbert  
 Frederick P. Gilke  
 George James  
 Sidney L. Lasell  
 William Lee  
 Bjorn Lih  
 John R. McDermott  
 Willys M. Monroe  
 Malcolm C. Murfitt  
 Edward B. O'Connell
- ‡Robert W. Ollayos  
 Gioacchino S. Parrella  
 David V. Pecora  
 ‡Leslie Simmonds  
 Janet H. VanOrden  
 Irving Waltman  
**1942**  
 William E. Bloomer  
 ‡James M. Bunce  
 Walter J. Burdette  
 Donald S. Childs, Jr.  
 Ludmil A. Chotkowski  
 Vincent J. Collins  
 David G. Decker  
 Eugene M. de Hostos  
 Hendrik DeKruif  
 Donald D. Dieter  
 Davitt Felder  
 Elihu Friedmann  
 Allan V. N. Goodyer  
 William Harrison, Jr.  
 Leo Kellerman  
 John R. Lincoln  
 †Robert A. Mino  
 ‡Patrick S. Mullins  
 Dean Nichols  
 Michael A. Puzak  
 Samuel Ritvo  
 Joseph Seronde, Jr.  
 Richmond W. Smith, Jr.  
 Carter Stilson  
 Jackson H. Stuckey  
 Edgar B. Taft  
 Maurice Tulin  
 Philip Viscidi  
 Arthur A. Ward, Jr.  
 Irving Norman Wolfson  
 Raymond J. Zagraniski  
**1943 March**  
 Ralph D. Alley  
 ‡Lycurgus M. Davey  
 Charles V. E. Dowling  
 Jessamine R. Goerner  
 Gerard Fountain  
 R. Leonard Kemler  
 Joseph P. Kriss  
 Jonathan T. Lanman  
 J. Philip Loge  
 Henry E. Markley  
 Waiter J. Nero  
 Dorothea R. Peck  
 Edward F. Rabe  
 Earl J. Rhoades  
 ‡Henry A. Riedel  
 Bernard R. Rowen  
 Marcus E. Sanford  
 Edward Hersey Soule  
 Nicholas M. Stahl  
 Robert Lee Taylor  
 John J. Weber  
 Morris A. Wessel  
 ‡Robert H. Wyatt  
**1943 December**  
 Richard N. Abbott  
 ‡John R. Almklov  
 Ray C. Bitterlich  
 David G. Borden  
 †James L. Bradley  
 Robert F. Bradley  
 S. Brownlee Brinkley  
 Henry Bruyn, Jr.  
 Thomas L. Bucky
- Philip B. Chase  
 Hunter H. Comly  
 †Norman I. Condit  
 Thomas D. Cook  
 Ronald W. Cooke  
 Jean P. Davis  
 Robert H. Furman  
 †John P. Haberlin  
 ‡Victor C. Hackney  
 Joseph F. Kell, Jr.  
 Sawyer E. Medbury  
 ‡Hoyt B. Miles, Jr.  
 Ira A. Rashkoff  
 Ellen F. Regan  
 B. Allen Richardson  
 Benjamin R. Robinson, Jr.  
 Donald W. Seldin  
 William R. Sweetman  
 Jane C. Symonds  
 Wesley C. Watson  
 †Stanley J. Weigel  
 Ross Lionel Wilson  
 James T. Wolstenholme  
**1944**  
 Carl E. Andrews  
 Edward J. Conway  
 George B. Corcoran  
 ‡Frank W. Countryman  
 Charles H. Crothers  
 Lawrence G. Crowley  
 John H. Doherty  
 Donal L. Dunphy  
 †Robert W. Frelick  
 Carol Goldenthal  
 Charles A. Hall  
 Howard B. Hamilton  
 Robert I. Hinkley  
 †Donald H. Holden  
 W. Raymond James  
 Ward S. Jenkins  
 Edith M. Jurka  
 Jerome J. Kaye  
 Frederick F. Krauskopf  
 Ellen P. MacKenzie  
 Elias J. Marsh  
 Katherine Hawley Martin  
 Nora Harnden Mason  
 ‡A. Reese Matteson  
 Paul E. Molumphy  
 Russell R. Monroe  
 ‡Lawrence K. Pickett  
 Laurence G. Roth  
 Haynes W. Sheppard  
 Sarah P. Sherwood  
 Eugene Smith  
 Joseph W. Spelman  
 Nicholas P. R. Spinelli  
 Anthony J. Stone  
 Priscilla Dienes Taft  
 Anthony Varjabedian  
 Calvin W. Woodruff  
 Reuben Zucker  
**1945**  
 ‡George Howard Allison  
 A. John Anlyan  
 Albert S. Atwood  
 Richard W. Breck  
 Carleton J. Brown  
 Louise H. Burr  
 Alice Shepard Cary  
 Sanford F. Cockerell  
 Jay B. Cohn
- Thomas P. Cotter  
 Edward M. Daniels  
 Richard R. Dyer  
 ‡Robert S. Easton  
 John R. Fenger  
 Sidney S. Feuerstein  
 John Hine Flynn  
 Alice Dershimer Friedman  
 Raymond A. Gagliardi  
 Philip S. Good  
 ‡Gove Hambidge, Jr.  
 Herbert S. Harned, Jr.  
 Isao Hirata, Jr.  
 Paul W. Hoffert  
 O. Roger Hollan  
 ‡John R. Howick  
 Hans R. Huessy  
 William L. Jenney  
 John H. Killough  
 Michael Lau  
 William E. Laupus  
 ‡Raymond E. Lesser  
 Mark McD. Lindsey  
 Charles E. McLean  
 ‡James R. Mason  
 Samuel C. May  
 Lawrence J. Morin  
 George W. Naumburg, Jr.  
 Fitzhugh C. Pannill  
 Raymond E. Parks  
 George R. Read  
 Elliot R. Reiner  
 Charles E. Sherwood  
 Leroy S. Wolfe  
**1946**  
 Margaret J. Albrink  
 ‡Joseph A. Arminio  
 William G. Banfield, Jr.  
 Franklin C. Behrle  
 Aaron T. Beck  
 Frederick C. Biehusen  
 Sanford G. Bluestein  
 Linus W. Cave  
 Thomas J. Coleman  
 Carl L. Cook, Jr.  
 James F. Cooney  
 George C. Cusick  
 Edward F. Edinger, Jr.  
 H. Lambert Filer, Jr.  
 Gregory E. Flynn  
 Martin E. Gordon  
 Kenneth L. Hardy  
 James N. Harten  
 Charles S. Judd, Jr.  
 ‡Harold King  
 Benjamin F. Kitchen, Jr.  
 James A. Kleeman  
 Richard H. Mann  
 Thomas J. Mathieu  
 Joe D. Morris  
 John H. Morton  
 John F. Neville, Jr.  
 Laura White Neville  
 Robert H. Owens  
 Vincent Pepe  
 Francis G. Reilly  
 David H. Riege  
 Phillips E. Roth  
 Julian A. Sachs  
 Gerald B. Shattuck  
 Richard G. Sisson  
 Robert R. Wagner

- William J. Wedemeyer, Jr.  
 Elihu S. Wing, Jr.  
 Gerald S. Yudkin  
**1947**  
 George R. Barnes, Jr.  
 Alexander H. Beaton  
 Henry N. Blansfield  
 Albert W. Bostrom  
 John E. Bowers  
 William Roy Breg, Jr.  
 Richard C. Britton  
 Rocco A. Calandrucchio  
 John L. Cannon  
 Betty P. Carlin  
 M. Richard Carlin  
 John C. Carpenter  
 Charles R. Cavanagh, Jr.  
 Arthur H. Chapman  
 Robert A. Chase  
 Amoz I. Chernoff  
 William F. Collins, Jr.  
 Robert P. Darrow  
 Archie L. Dean, Jr.  
 Jean Hay Dougherty  
 Owen W. Doyle  
 Franklin Harold Epstein  
 Edward Foord  
 Richard K. Friedlander  
 Frank H. Horton  
 Charles M. Karpinski  
 Robert J. Kerin  
 Don F. Kimmerling  
 Richard P. Levy  
 Brock Lynch  
 ‡William K. McClelland  
 Victor A. Machcinski  
 William F. Maniatis  
 Robert F. Newton  
 Myron K. Nobil  
 Lawrence C. Perry  
 Philip H. Philbin  
 Edgar B. Phillips, II  
 Olive E. Pitkin  
 ‡Irving Rudman  
 Robert Schwartz  
 ‡Alvin Somborg  
 Igor Tamm  
 William F. Thompson  
 Patricia B. Tudbury  
 Ellis J. VanSlyck  
 Laura B. Weed  
 M. Henry Williams, Jr.  
 Eugene P. Yoklavich  
 Sumner Root Ziegler  
**1948**  
 Russell J. Barnett  
 George F. Batten  
 Edith M. Beck  
 Lee Buckingham Brown  
 †Richard Steele Buker, Jr.  
 Arthur L. Coleman, Jr.  
 †Bradford S. Colwell  
 Ruth E. Cortell  
 G. Robert Downie  
 Mrs. Carl P. Duncan  
 Elizabeth F. Elsner  
 Boy Frame  
 Emil Frei, III  
 Julian Frieden  
 B. Herold Griffith  
 Sylvia P. Griffiths  
 Beatrix A. Hamburg
- Richard M. Hannah  
 W. Rayner Johnson  
 Paul B. Koehler  
 Robert C. Lawson  
 Robert E. Lempke  
 John P. Morris  
 John B. Morrison  
 David E. Morton  
 †James W. Needham  
 ‡Gerald R. Nowlis  
 Jessie E. Parkinson  
 †Richard C. Peterson  
 George P. Rostel  
 Lewis P. Rowland  
 Benjamin F. Rush  
 Anne Godley St. Goar  
 Gabriel A. Saviano  
 Jerome H. Shapiro  
 Howard B. Simon  
 Paul Talalay  
 Wallace W. Turner  
 Paul Woodbury Weld  
**1949**  
 William G. Anlyan  
 Alfred E. Bacon, Jr.  
 Henry W. Baird, III  
 Richard L. Barach  
 William D. Bevis  
 Jonathan S. Bishop  
 Mary Pucci Couchman  
 Phillip G. Couchman  
 Peter R. Cunningham  
 Rex P. Dannebaum  
 N. Joel Ehrenkranz  
 Daniel W. Elliott  
 Gunnar O. Eng  
 Albert A. Fisk  
 Frederick Forro, Jr.  
 Paul Goldstein  
 Eleanora C. Gordon  
 ‡Frederic W. Gray  
 Daniel K. Halvorsen  
 Boaz Harris  
 Jackson Harris  
 Benjamin A. Johnson  
 Frank D. Law  
 Orval I. McKay  
 Timothy F. Nolan, Jr.  
 Richard D. Otis  
 Julian I. Pichel  
 Edmund L. Piper  
 Charles L. Rennell, Jr.  
 Samuel M. Rice  
 Murray Z. Rosenberg  
 Daniel Rudman  
 Carl M. Russell  
 William H. Sewell, Jr.  
 Ruth Spielmeyer  
 Raymond D. Sudarsky  
 Mary P. Wine  
**1950**  
 Russell N. Anderson  
 Lyal D. Asay  
 Sylvia L. Axelrod  
 Arthur Cinader  
 Alexander D. Crossett, Jr.  
 Alvin Davis  
 Claude W. Delia  
 Kent Ellis  
 Thomas J. Ferraro, Jr.  
 Yvette F. Francis  
 David A. Frucht
- Carl A. Gagliardi  
 Archie J. Golden  
 Chesterfield G. Gunn, Jr.  
 Wallace M. Kemp, Jr.  
 Marilyn M. Kritchman  
 Sidney S. Lee  
 John B. LeRoy  
 Milton E. Lesser  
 Janus C. Lindner  
 Margaret S. Lyman  
 Harry L. McClelland  
 Robert T. McSherry  
 Jocelyn S. Malkin  
 Harold March  
 John H. Meyers  
 Marina P. Meyers  
 Orlando J. Miller  
 William T. Newton  
 Robert T. Sceery  
 Cynia B. Shimm  
 Jane B. Shumway  
 Martin E. Smith  
 John S. Strauss  
 Myra D. Tyler  
**1951**  
 Karel Bedrich Absolon  
 Goffredo S. Accetta  
 W. Robert Adams  
 Frank R. Allen  
 †S. David Ardell  
 ‡Eleanor Clay Bigley  
 Allan A. Brandt  
 John J. Egan  
 Lawrence R. Freedman  
 Sidney S. Furst  
 Ralph M. Gofstein  
 Lowell I. Goodman  
 John T. Groel  
 Robert N. Hamburger  
 ‡John V. Haxo  
 Carrol K. Iverson  
 Alfred D. Katz  
 William Kiekhofer  
 Robert D. King  
 Barbara Lipton  
 Robert W. Lusk  
 Robert C. Merrill  
 Francis L. Merritt  
 Walter S. Morgan  
 Karle Mottet  
 Albert R. Mowlen  
 Richard S. Munford  
 Ismail Nik Nevin  
 Charles A. Nugent, Jr.  
 José Felix Patino  
 Arthur A. Pava  
 ‡Majic S. Potsaid  
 Sidney Roston  
 †Robert G. Small  
 William F. Stephenson  
 Harold M. Sterling  
 †Bradley R. Straatsma  
 John L. Sullivan  
 William A. Taylor  
 †Herbert P. Ungricht  
 James Walker  
 Andrew S. Wong  
**1952**  
 John W. Arnold  
 Kenneth G. Bartels  
 Francis Feld Bloom  
 Max Bloom
- ‡Maurice L. Bogdonoff  
 Willard R. Centerwall  
 Siegfried A. Centerwall  
 ‡Charles W. Chace  
 Frank R. Coughlin, Jr.  
 Philip Gardner Deane  
 Richard N. DeNiord, Jr.  
 Raymond S. Duff  
 ‡James R. Durham  
 Richard D. Floyd  
 Marvin H. Goldberg  
 Arthur P. Husted  
 William W. Klatchko  
 David Kligler  
 Charles F. Lester  
 William R. Letsch  
 James Kent Luce  
 Wilbur P. McNulty, Jr.  
 Louis R. Mattie  
 Robert G. Petersdorf  
 Leon A. Phillips  
 John M. Roberts  
 Jack R. Royce  
 Leonard Rush  
 Elizabeth M. Rush  
 Mary Wheatland Schley  
 Donald H. Schultz  
 Robert B. Schultz  
 Jeanette Schulz  
 Virginia Lee Swanson  
 Maurice Van Lonkhuyzen  
 ‡John H. Wagner, Jr.  
 Robert I. Weed  
 Doris L. Wethers  
 John L. Wolff  
 Harvey L. Young  
 Seymour Zoger  
**1953**  
 Seth F. Abramson  
 Claude T. Anderson  
 Arthur D. Berman  
 Claude Bloch  
 Harold D. Bornstein  
 William R. Chaffee  
 Allen Chetrick  
 Rex B. Conn, Jr.  
 Louis R. M. Del Guercio  
 James P. Dunn  
 Jack Durell  
 James Milton Eglin, Jr.  
 Donnell D. Etzwiler  
 Thomas O. Gentsch  
 Vincent Lynn Gott  
 Robert Emanuel Hamlisch  
 A. Daniel Hauser  
 George L. Hoffman, Jr.  
 David Purdy Holman  
 Peter Biggs Hukill  
 Alvin Joseph Kerocack  
 Robert Francis Kiley, Jr.  
 Richard Robert Knowles  
 Frederick Martin Lane  
 Hildegard Mueller Leslie  
 Preston Lee Leslie  
 John D. Lord  
 Robert N. Melnick  
 Harvey Martin Peck  
 Warwick Potter, Jr.  
 Paul G. Quie  
 José Ramirez-Rivera  
 John Downing Rice, Jr.  
 Barbara Fay Rosenberg



Irwin Kay Rosenberg  
Virginia C. Saft  
Richard Andrew Sinnott, Jr  
John Frazier Snyder, III  
Mary Alma Soule  
‡ Lynn Cortland Stoker  
Albert Lawrence Stone  
Matthew Andrew Tandysh  
William Junior Vandervort  
† William A. Whalen, Jr.  
William August Wilson, Jr.  
James Frederic Young

**1954**

William D. Ashworth  
Frank P. Berg  
George W. Bostwick  
Richard J. Bouchard  
George N. Bowers  
Saul W. Brusilow  
Ralph K. Campbell  
John R. Cole  
William Cone  
Alan H. Covey  
Arthur C. Crovatto  
Donald D. Davis  
Michael De Nicola, Jr.  
‡ Frederick J. Fiederlein  
Walter J. Freeman, III  
John A. Gariepy  
Samuel T. J. Giammona  
Frank L. Gruskay  
Nicholas A. Halasz  
Robert P. Hatch  
Walker R. Heap, Jr.  
Leland E. Hilburg  
Samuel J. Hunter  
Herbert S. Hurwitz  
‡ Robert F. Hustead  
Robert J. T. Joy  
Robert P. Knight, Jr.  
Donald S. Kornfeld  
Lowell A. Kristensen  
Richard Lamb  
Frederick J. Lind, Jr.  
Eva Henriksen MacLean  
Harry C. Miller, Jr.  
Paul R. Neufeld  
James J. Nora  
Lowell E. Olson  
William J. Paule

‡ Anthony V. Piccirillo

Richard D. Pullen  
Jacques M. Quen  
Edwin R. Ranzenhofer  
Earl D. Rees  
David M. Robinson, Jr.  
John Keith Rose  
Elihu M. Schimmel  
Leonard M. Silverman  
William H. Soderstrom  
Robert L. Stein  
Martin B. Vita  
John W. Vosskuhler

**1955**

John B. Atwater  
John C. Bailar, III  
‡ George E. Becker, Jr.  
E. Edward Bittar  
Jerome Bobruff  
Douglas G. Boyden  
Irwin M. Braverman  
Edward Noel Brennan

Padraic Burns  
Leo R. Cardillo  
Nicholas A. Coassin  
Edward D. Coppola  
Milton Corn  
Pasquale James Costa  
John G. Daley  
Fred Wendell Doyle  
William S. Elliott  
Leroy Engel  
F. Robert Fekety, Jr.  
Edwin G. Fernand  
Richard B. Foster  
Mahlon V. R. Freeman  
James Conway Garlington  
Barbara Gibson  
Rudolph J. Goerke, III  
Paul Gonick  
Dicran Goulian, Jr.  
Ion Gressar  
Thomas T. Harkness  
John H. Hodge  
D. Franklin Johnson, Jr.

‡ Walter L. Johnson

Harry O. Kendall  
David R. Kessler  
Robert A. Kramer  
Edward A. Krull  
William E. Lattanzi  
Gilbert M. P. Leib  
Dorothy Baird Leib  
Roger Lester  
James Lum  
Joseph S. McGuire, Jr.  
Alexander Maitland, III  
David Joseph Nelligan

‡ Robert C. Nodine

Sherwin B. Nuland  
Gloria E. Onque  
Edward J. Ottenheimer  
John Chandler Pace, Jr.  
Robert H. Peters, Jr.

† Gregory Peterson, Jr.

Robert A. Reich  
‡ Paul J. Robinson, Jr.  
F. Brantley Scott  
Clement B. Sledge  
Philip W. Smith  
Alan A. Stone  
Alexander Zuckerbraun

**1956**

Alan E. Apfel  
Alvin D. Benjamin  
Peter Blos, Jr.  
Levon Z. Boyajian  
Arvid J. Bradley  
Thomas M. Brown  
John F. Carroll  
Joseph C. Cerny  
Edwin L. Child  
James C. Collias  
Louis A. Corvese  
Chandler Dawson  
Shirley E. Downing  
Mitchell Edson  
Gilbert M. Eisner  
Thomas F. Ferris  
John B. Fine  
John H. Gardner  
Sumner Gochberg  
Rosalie Burns Goldberg  
George E. Green

Alan R. Gurwitt  
Armen C. Haig  
John H. Hart  
‡ Robert L. Hill  
William H. Hindle  
Theodore E. Hoffman  
Charles L. Hopper  
George T. Kammerer  
Jerome O. Klein  
William V. Lewit  
Leo Lutwak  
Preston C. Manning  
Dwight F. Miller  
Elmer T. Mitchell  
Norman F. Moon  
William M. Narva  
Alexander F. North  
David H. Page  
Robert L. Powell  
Stewart E. Pursel  
John Y. Pyo  
Robert J. Rice  
Robert Lee Scheig  
James Scheuer  
Edward C. Senay  
Benjamin A. Shaver, Jr.  
Donald William Sherrick  
Daniel Silbert  
Donald R. Sperling  
Theodore K. L. Tseu  
Marion Babcock Warbasse  
Charles Zigun

**1957**

Joseph S. Amenta  
Vincent Andriole  
Louis V. Avioli  
Calvin Bigler  
Jack Norman Blechner  
Carl A. Brinkman  
† Richard I. Brever  
John P. Carey  
‡ Albert C. K. Chun-Hoon  
Louis Z. Cooper  
Harold Dick Cross  
Brian Crowley  
John D'Agostino, Jr.  
F. Joseph Dannemiller  
James R. Dorr  
Edward Louis Eyerman, Jr.  
Salvatore Falbo  
Harold J. Fallon  
Ronald Harrison Fishbein  
Robert E. Fishbein  
Anthony L. Fons, III  
Elizabeth Held Forsyth  
Gary A. Fry  
Robert H. Glass  
Anne LeConte Good  
Jack Peter Green  
Malcolm Hill  
Joshua A. Hoffs  
Gilbert F. Hogan  
Warren R. Johnson  
Richard Lee Kahler  
Robert Lincoln Kaiser  
Stanley E. Kilty  
William L. Kissick  
George C. Knovick  
Willard A. Krehl  
Jack Levin  
Bennett F. Markel  
Mark D. Marshall

David E. Martin, III  
Howard Alyn Minners  
Robert K. Modlin  
Hugh Lamson Moffett  
‡ George Albert Nelson, Jr.  
Herbert A. Newman  
Thomas Francis O'Brien, Jr.  
Robert D. Osborn  
Raymond E. Phillips  
Clifford B. Reifler  
Lathrop E. Roberts  
Melville P. Roberts  
Jesse G. Rubin  
Arnold A. Schoolman  
Stanley Simbonis  
Kenneth A. Simon  
Charles A. Slanetz, Jr.  
Gilbert B. Solitaire  
Robert W. Southworth  
Donald C. Stahl  
Romeo Vidone  
William J. Waskowitz  
Herbert Winston  
Robert E. Youngen  
James G. Zimmer

**1958**

George Aghajanian  
Don P. Amren  
John P. Arnot  
Alfred Benson  
John C. Bjorn  
A. Russell Brenneman  
Gerard N. Burrow  
Benjamin Bursten  
John A. Carlston  
Joseph J. Cillo  
Robert V. Diserens  
Robert J. Donohue  
Lawrence Dubin  
Donald A. Duncan  
Philip R. Fazzone  
Michael E. Fishman  
Raymond A. Gaito  
John C. Gallagher  
Marcia Kraft Goin  
William M. Gould  
James Greenwald  
Charles A. Hall, Jr.  
Stanley Harris  
Ernest L. Hartman  
George W. Hulme  
Michael Kashgarian  
Haskins K. Kashima  
Jay W. Kislak  
‡ Theodore W. Lieberman  
Myron Lotz  
Jack Wayne Love  
William S. McClanahan  
Andrew Joseph McGowan, Jr.  
F. Patrick McKegney, Jr.  
Roland Guy Martineau  
John A. Merritt, Jr.  
Richard Charles Miller  
Robert Neuwirth  
David W. O'Keefe  
Carol Fenton Phillips  
David M. Pugh  
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Asa Barnes, Jr.  
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William C. Butterfield  
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Robert S. Steinberg  
Richard B. Swett  
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Redford Williams  
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Edward M. Drury  
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Lamar Ekbladh  
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Louis DeAngelis  
**1929**  
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**1933**  
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**1934**  
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**1935**  
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**1936**  
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**1937**  
Lidie Venn Dyer  
Matthew H. Griswold  
**1938**  
Willard H. Boynton  
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**1939**  
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Edith M. Foster  
**1940**  
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Meyer J. Plishner  
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**1941**  
Eleanor Hassell Kerby  
Roslyn L. MacNish  
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Thomas L. Meador  
Alexander Witkow  
**1942**  
Leonard Parente  
**1943**  
Paul T. Bruyere  
Eric W. Mood  
Miriam Hahn Rohde  
Adele P. Schlosser  
Carolyn S. Silagy  
Jane Lyman White  
**1944**  
Jean Ferguson Heston  
Lily Berman Mostyn  
**1945**  
Mary B. Dale  
Claudia B. Galiber  
Naomi Barer Golden  
Lois M. Jund  
Naomi Helen Kalajan  
**1946**  
Dorothy Young Kirk  
R. Edward Vioni



**1947**

Edna Miller Finberg  
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 Leah Lehrer  
 Raymond W. Leonard  
 Josephine S. Lewis  
 Cecil G. Sheps  
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**1948**

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 Barbara L. Holman  
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**1950**

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**1951**

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 Joanna Adele Henry  
 Yolande F. Lyon  
 Naomi B. Markthaler

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 Harold Robert Bernshock  
 Abraham Cutcher  
 Graydon Dorsch  
 Grace T. N. Jansen  
 Laurence K. Rainsford  
 Constance B. Thomas

**1954**

Alvin Hamburg

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Lester M. Bornstein  
 Amy L. Cawley  
 Israel Gitlitz  
 Morris London  
 Mary McC. Mogan  
 Gerald Rosenblatt  
 Daniel E. Ross

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E. St. George Anderson  
 David D. Boyd  
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 Robert Woods MacCalmont, Jr.  
 Mary K. Ochiai  
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 Edward R. DeLouise  
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J. Philip Keeve  
 Thomas P. Weil

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 Rita Dingman  
 Folly Hofer  
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 R. Martosewoyo Soejono  
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**1960**

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 John J. Kwasnowski  
 Hannah G. Russell

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**1961**

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 C. du V. Florey  
 David Dollins  
 Sydney Luria  
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 Rosemary W. Stevens  
 Samuel B. Webb, Jr.

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Maria S. Baisier  
 Elizabeth C. Bellis  
 Barbara Weed Christine  
 Martin Hirsch  
 Neal L. Maslan  
 Caroline S. Profant  
 Estelle Siker  
 Arthur M. Silfen  
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**1965**

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 James F. Jekel  
 Peter J. Levin  
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 Joel Kavet  
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 Elizabeth Mueller  
 Elizabeth A. Murphy  
 Charles J. Petrillo, Jr.  
 Brigitte A. Prusoff  
 Bruce J. Steinhardt  
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3	4	5	6	7	8	9		
10	11	12	13	14	15	16		
17	18	19	20	21	22	<b>23</b>		
<sup>24</sup> <sub>31</sub>	25	26	27	28	29	30		

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