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Washington University in St.Louis School of Medicine

Oral History Series

Washington University Medical Center Desegregation History Project

Lawrence I. Kahn, M.D.

Interviewed July 23, 1990 by James Carter and William M. Geideman

Bernard Becker Medical Library, Washington University in St. Louis PC054, OH105

Biography

Lawrence Kahn received a B.A. from the University of Alabama, and an M.D. from Louisiana State University. He completed his residency at St. Louis City Hospital No. 1, before working at the Veterans Administration Hospital in Tuscaloosa, Alabama for two years. Kahn was accepted into Washington University's postgraduate program in the Department of Pediatrics as a Fern Waldman Research Fellow, where he worked in the field of pediatric cardiology. Kahn established a private practice in St. Louis, but returned to Washington University full-time in 1979 to become the medical director of the Medical Care Group (MCG), an experimental prepaid group practice which paired university-affiliated physicians with patients from independent local practices. Please note that the interview transcript was edited by Dr. Kahn into an essay format and so there is some discrepancy between the audio recording and final transcript.

PJ White

Park Jerauld or PJ White was an extraordinary and important citizen of St. Louis. He was an agent of change whose good works came about through reliance on a keen wit, remarkable patience and an unshakable belief that people were better than they thought they were. Because, he was able to move his society forward without creating turmoil in the process. He did not go to war with a rifle or with a pen. He didn't go to war at all. Instead, using his marvelous sense of humor and a sharp intellect, he won people over with his humanity. Combined with that was an eternal optimism that something good would happen for his causes.

PJ was a highly regarded pediatrician and citizen of long standing in St. Louis when I first learned about him in 1945. I had come to the Washington University School of Medicine and the St. Louis Children's Hospital as a postgraduate student in pediatrics following Army service. As other interviewees will no doubt tell you, he was well known for always attending and contributing to pediatric Grand Rounds Friday mornings. It was unusual when he didn't rise toward the end of the conference with a few short words to say. They did not always relate to the case presented, but most often, there was a message in his remarks. Whatever he had to say always brought laughter.

Several years later, when I entered private practice, I shared space as an independent practitioner in Park's office located in what is now known as the Central West End. I saw him every day. He was popular with the prominent and influential social class, and his practice

included the children of many prominent St. Louis families. His practice also included at least as many children of not so prominent families, mainly Black. I can tell you he viewed his patients as one population in terms of their medical care and social acceptance. However, there were some considerations to which he was sensitive. When the cost of pediatric office visits in the city rose from \$3 to \$4, (a low figure when you think about office fees now), he increased his fees with others for those who could afford the \$4. But a significant group of patients continued to pay \$3 for a long time not knowing that was not the routine cost. Those people were Black, poor or both.

He managed his practice carefully and prudently and applied the same care and thrift in determining the medical needs of his patients. Income from practice was a necessary but secondary concern in Park's view of the goals of a physician in private practice. Although we never discussed it, I suspect he had the same need as all of us did to support his family from the practice of medicine, but medical economics ended there. His purpose in practicing medicine was to be the pediatrician for those families who selected him to care for their children. He felt no need to market his skills with unnecessary frills. Because of that, he was reluctant to spend money for what he considered amenities or to change his ways for the sake of fashion. Air conditioning had long since become standard for medical offices, before PJ agreed reluctantly to share in adding three window air-conditioners to relieve the heat of the St. Louis summers.

He kept his records in a unique way. He had 8x10 cards for recording his notes, and he had a special red stamp consisting of four bracket marks joined to form a sort of square. He would stamp the card at the lower right-hand side of his note and scribble in his code of hieroglyphics. They would remind him of what his services had been and how much to charge. I asked him about the stamp, and he told me that he had used it in college. He used it when he was secretary of the socialist club at Harvard when he kept those records. The president of the socialist club at the time was Walter Lipmann, who later became a widely read and very highly regarded national columnist. As the years went by, Lipmann became very conservative in his views. That was not so for PJ. His view of the world was different from most but held everyone's respect. I know someone here in town who is most conservative in his politics. He ran the local second presidential campaign of Richard Nixon; yet he adored PJ. He said he was the only true Fabian Socialist he ever knew—a truly philosophic socialist who believed in the ideas from a theoretical point of view.

As I noted, PJ ran his office, always watchful of the overhead. In those days we used glass syringes. They were somewhat expensive, and needles were not disposable; we used to resharpen them frequently. He would have rejected the idea of using a syringe once and throwing it away. Rather than supply himself with enough syringes and needles for the day and then sterilize them all at once, he had only two or three syringes and not many more needles. He used the same two or three repeatedly throughout the day, placing them in boiling water in an open pan until they were needed again. When he had to give a baby or child an injection, he would put on an absurd false beard and come in the room as a comic, gruff, old grouchy fellow, who would do the dirty work. It certainly wasn't the kind and gentle Dr. Park J. White giving the shot. As he knew they would, every child saw through that disguise in about two seconds, but they got the message.

Pediatricians than used their office only half the day. The other half would be spent making house calls and visiting hospitals mainly to see newborns. It was the world's most inefficient way to operate a practice. After his office hours, PJ would prepare for his tour of house calls. He began by carefully cleaning the windshield of his basic model Chevrolet (which he would rarely trade in), using a bottle of water and a cloth that he kept in the car. He was the antithesis of today's Mercedes driving medico.

PJ was particularly fond of Shakespeare. The only other literature that held equal rank in his mind was the Bible. There were parts of both that he reread constantly. I enjoy Shakespeare too, and we used to swap quotes challenging each other to identify the play, the act, the scene and the character. I have to confess he beat me almost every time.

The first department and the first hospital in this medical center to have Black patients admitted and then later desegregated was the department of pediatrics. As you know the department is housed in St. Louis Children's Hospital. Although PJ wasn't alone in that effort, he was a major force in encouraging the desegregation of patients and physicians within the medical community. Dr. David Goldring is someone you should interview about that. Let me digress long enough to tell you an apocryphal story about Dr. Goldring that may fit in here. When Dave was a resident at Children's in the early 1940s, the hospital had established Butler Ward, the designated area for Black patients. Not infrequently, it was filled to capacity. When Dr. Goldring was on one night, a Black sick infant was brought into the emergency room. The patient required inpatient care but the report was no beds were available beds on Butler Ward. Dr. Goldring ordered the patient be admitted to a ward where there was an available crib but where only white patients were to be admitted. The hospital administration called Dr. Goldring to task and complained to, Dr. Alexis F. Hartmann Sr., then professor and head of the department. Of course, Dr. Hartmann supported decision to the displeasure of the hospital's chief administrator. That sort of incident drove home the importance of desegregating Children's Hospital.

PJ's approach to changing unjust social mores was less dramatic but no less direct. Dr. Helen Nash must be the authority on how Park opened the door to staff appointment for Black physicians at St. Louis Children's Hospital. I understand it was the result of his patient but persistent pursuit of the issue with the hospital's officials.

I learned a good deal about PJ from Maria, his wife, when my wife and I visited her after Park died. PJ came from a wealthy family. His father had been a close business associate of John D. Rockefeller, Sr. His father didn't understand him very well and wasn't as attached to him as he was PJ's older brother. PJ was a frail child. He had a repaired hare lip that he later camouflaged with a moustache when he was old enough to grow one. He was quiet and introspective and aesthetic in his tastes. His older brother was a burly, athletic type of fellow who went off to Harvard for his college education. As Maria tells it, when the time came for PJ to go, his brother told him he would never survive at Harvard. As Maria put it, he said, "Kid, you'll never make it." But PJ went to Harvard anyway, did well, and when the time came to graduate, he was selected to give the class oration. He spoke on the subject of Harvard students who were socialists of whom he was one. His father was sitting in the audience ramrod stiff, feeling a mixture of pride and fury while his son discoursed on socialism. At any rate that's how Maria told it to us. I suspect the oration was not equal to the valedictorian's address, but it was obviously a notable honor. It was Dr. Bill Landau's idea that Harvard might have kept a copy of his oration, and we asked about it. Sure enough, we received a microfilm enlargement some weeks later. It is not a brilliant piece of writing but defends the loyalty of Harvard socialist students to their university. Some of his wit is there, but there is a hint of youthful sarcasm and slight anger that never would have appeared in his maturity.

PJ worked at Homer G. Phillips Hospital as the head of the service there for many years. Homer G. was the Black hospital of St. Louis, then and now a border city. It was then a completely segregated city. PJ insisted the Black physicians training there must pursue board certification in pediatrics. Many did. Dr. Neal Middelkamp replaced him as head of the service, and knows of his work there. I do know that he was there at least 25 years because there was a small plaque in his office that commemorated his service there for that length of time. There was a dinner for the occasion. PJ is reported to have said he hoped someday there would be no need for a Homer G. Phillips Hospital anymore.

One of your questions is why was Children's Hospital so far ahead of other hospitals on the matter of desegregation. As far as I know, it was largely the result of the professional attitude and leadership of the pediatricians there. Besides people such as Park White and David Goldring, a major reason was Dr. Hartmann, Sr. He had a strong belief in the rights of people. Perhaps as important as any other influence is the characteristics of pediatricians and their specialty. Pediatricians are different from the physicians of other specialties. Pediatricians tend to be accepting people; as a group they are more tolerant of change than most others. It is integral to their working with children. Children are very hard to put into categories or classes. They are a universal society of their own without distinctions or prejudice. Perhaps pediatricians in their association with children reflect some of their candor and straightforward, unadorned look at the world. Maybe that's why pediatricians tend to be more tolerant. Clearly, a hospital reflects the views of the physicians on their staff. In my day, which was after the time Black children began to be admitted to the hospital, no one was turned away. PJ's contribution to that change was maintaining their level of awareness, amiably urging them into action. Dr. Hartmann's driving interest was in the treatment and investigation of pediatric disease. He was not out there with his

red stamp changing the world according to socialist principles, but he was most supportive when the issue was presented.

You also wanted me to comment about Butler Ward. As I had mentioned it, Butler Ward was the inpatient area of Children's for Black patients. To my knowledge, Children's Hospital had always accepted Black children as outpatients, but they had not been admitted for inpatient care until Butler Ward was opened specifically for the care of Black children in 1923. In 1947, the year before I started here as a postgraduate student, the hospital became integrated. Although it continued to be called Butler Ward, I knew it only as the ward filled mainly with problems of acid-base metabolism and diarrhea. It was a typical pediatric ward and it was integrated. In response to your final question about Black nurses, I don't recall ever seeing a Black nurse at Children's when I arrived as a student and house officer, but I just don't remember.

Lawrence Kahn, M.D.

August 6, 1990