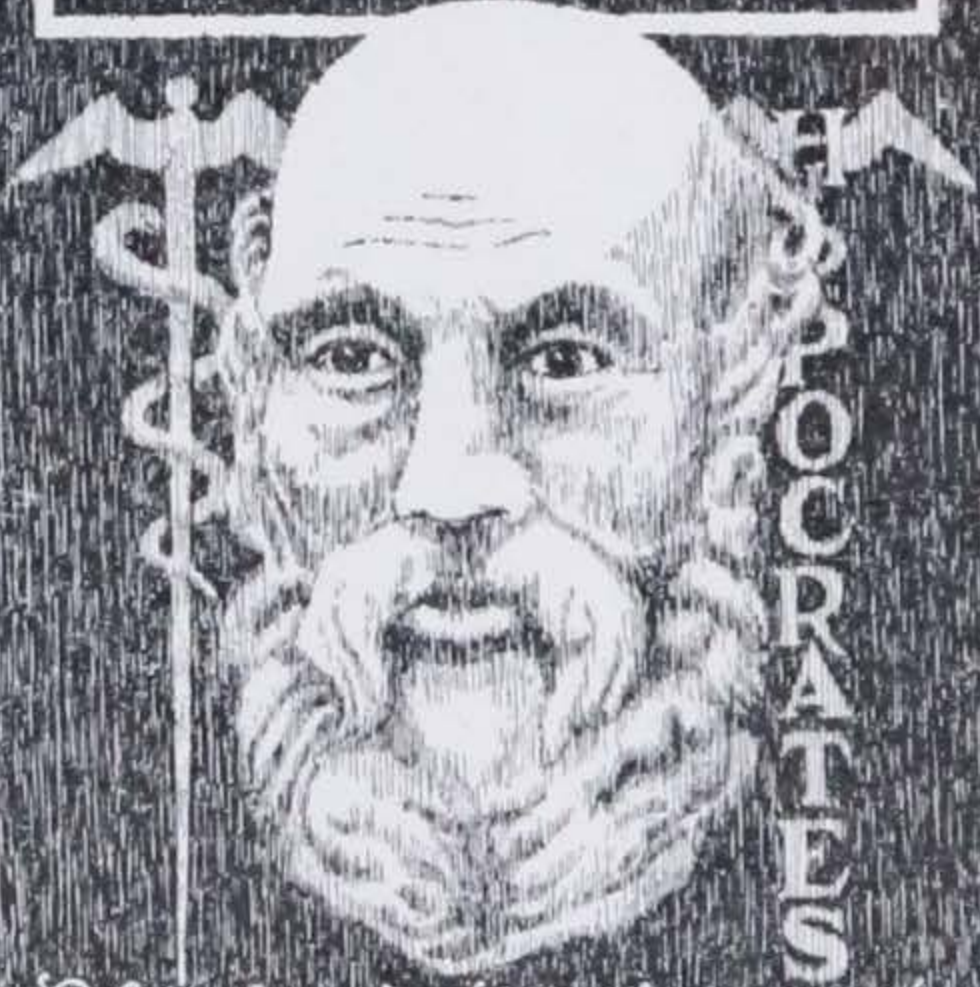




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With sincere regards

Walter D. Peering

Nov. 14 - 1958.

*A History of the
Department of Internal Medicine
State University of Iowa
1870-1958*

A HISTORY OF THE
Department of Internal Medicine

STATE UNIVERSITY OF IOWA
COLLEGE OF MEDICINE

1870 - 1958

By Walter L. Bierring, M.D. Iowa, 1892

With an Introduction by William B. Bean, M.D.



STATE UNIVERSITY OF IOWA

1958

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Introduction

The medical historian of today often is much frustrated by the absence of detailed material dealing with the everyday life of the past. We want to know more about the various elements of medical schools, details of medical education, the practical and philosophical applications of medical training to the practice of a hundred years ago, or for any other particular time or place we may choose. My interest in medical history gives me much pleasure. It is frustrated at times by lack of special information which I cannot find. As the head of a medical department, it occurred to me that it would be useful not only for ourselves and our contemporaries, but for those who come after us to have a clear view of the actual development, organization, and function of a department of internal medicine in a state supported university whose college of medicine has been in active and continuous being for almost ninety years. We are uniquely fortunate in having Dr. Walter Bierring, whose life began almost exactly on the birthday of the College of Medicine of the State University of Iowa. Not only did he study medicine as an undergraduate at Iowa, being graduated in the Class of 1892, but he was one of the distinguished professors in the College of Medicine. For a span of seven years he served as Professor and Head of this Department of Internal Medicine. At my instigation and with gentle prodding, he has written this history. Such historical chronicles inevitably turn out to be mostly biography. This particular story in the large sense is actual autobiography.

Several heads of this department have achieved national and international fame. Those less well known achieved distinction in

creating the environment in which the Department of Internal Medicine was able to grow in congenial relationship with other elements of the College of Medicine as they marched together in the accelerating pace of scientific medical learning and teaching. Each member and each head of the department in his way contributed to the advancement of medical education and practice. Some made notable contributions to research; others have been distinguished physicians and teachers; and all have combined such talents in varying degrees. The opportunity to utilize the first-hand knowledge and omnivorous recollections of Dr. Bierring led me to enlist his efforts on behalf of writing an historical essay about our department. Dr. Bierring's eulogistic tributes to the present members of the department make me a little fearful that his judgment has not kept up with his enormous and retentive memory. Looked on as a tribute to a department and a college of medicine rather than to an individual, they have been allowed to stand with only a little débridement and excision.

The history of medicine in the last hundred years has changed with increasing speed. But if one reads what historians a hundred years ago said even then, they boasted of the accelerated changes occurring in the practice, teaching, and the science of medicine. While the ever-proliferating emergence of new specialties continues at an unslackened pace, internal medicine has been fortunate in keeping within one family of disciplines numerous lusty siblings, who may cry out for independent status. But, to change the simile, a federation of member units, dividing responsibilities while keeping a cohesive relationship to the whole by the proper division of labor, skill, and responsibility, can function as a corporate unit impossible in a Balkanized array of separate elements. Premature separation from the family group with precocious independence tends to lead to a state of medical anarchy with some remote analogies to juvenile delinquency. The distant separation of internal medicine and surgery has been detrimental to each. In their close rapprochement, at least on the local scene, we are experiencing mutual advantage. The distant separation of all the separate surgical specialties has occurred to the considerable hurt of each specialty and to general surgery.

It is at least a pious hope that the fragmentation into ever narrower specialization will diminish rather than increase.

One function of a department of internal medicine is to provide the unifying, centrifugal force of gravitational attraction to hold the diverse parts of medicine together. It provides the theme and defines the scope of general practice. Along with general surgery, it is the center of the stage in clinical medicine. The story of this department of internal medicine, an eyewitness account by one of the major actors on the scene, gives us a narrative which reflects in microcosm the macrocosm of modern medicine. Dr. Bierring, a Nestor of American Medicine, emphasizes as a continuing theme with infinite variations that the function of a college of medicine is to make doctors in a university setting where their teachers can flourish as scholars in science who advance learning. An unsung song of praise is due the State Board of Regents, President Virgil Hancher, Dean Norman Nelson, and others whose devoted labors have made possible the modern chapters of this history.

WILLIAM B. BEAN

A HISTORY OF THE
Department of Internal Medicine
STATE UNIVERSITY OF IOWA
COLLEGE OF MEDICINE
1870-1958

In order to better chronicle the course of events that led to the formation of the State University of Iowa School of Medicine at Iowa City in 1870, it will be of interest to recall the essential facts in the story of medical education in Iowa during the preceding twenty years.

The first course of medical lectures was presented at the College of Physicians and Surgeons of the Upper Mississippi at Davenport during the fall and winter of 1849-50. This school was the successor to the Rock Island Medical College, and several members of the faculty continued with the Davenport school during its one year of existence. Two classes were graduated during the year — one of eight members in February, 1850, and another of seven members in June, 1850.

One of the members of the first class was John Forrest Dillon, who twenty years later had a prominent part in organizing the medical school at Iowa City. In later years he had this to say of the Davenport faculty — "The professors as a body were able men, some of them of great learning and even genius. Abler men than Professors Richards, who taught practice, Sanford, who taught surgery, and Armor, who taught physiology, would be difficult to find in the chairs of any contemporary medical institution."

During the summer of 1850, the school was moved to Keokuk as the result of a generous offer made by that city to provide suitable quarters for the school, as well as a hospital where clinical teaching could be carried out.

The first course of lectures at the Keokuk College of Physicians and Surgeons began on the first Monday in November, 1850, and thus began a period of almost sixty years during which medical education was actively carried on in the city of Keokuk.

In the winter of 1850-51 the Dean of the medical school, Dr. John F. Sanford, who was a member of the Iowa Senate, succeeded in getting the legislature to confirm the action of the Board of Trustees and thus to make the Keokuk College of Physicians and Surgeons officially the Medical Department of the State University of Iowa.

The Western Medico-Chirurgical Journal of February, 1851, reports that the major features of the bill as enacted for the above purpose were:

1. "That the College of Physicians and Surgeons located at Keokuk shall constitute a constituent part and a department of the Iowa State University, and with a full participation in the benefits and privileges pertaining to that Institution.
2. "That the medical board shall have power to pass such by-laws, make such regulations, and perfect such organization as may be necessary, and they shall have full power to confer the degree of Doctor of Medicine upon such individuals as they may deem worthy.
3. "That the diploma of the College of Physicians and Surgeons of the Iowa University shall be a license to practice medicine, surgery and obstetrics in Iowa."

The school continued to be recognized as a department of the State University until 1869, when plans had been completed for establishing a medical department of the University at Iowa City.

The medical school at Keokuk prospered under the leadership of Dr. J. C. Hughes, one of the prominent surgeons of his period. Even during the War of 1861-65, there was no interruption, and, except in 1862, rather large classes were graduated. The school continued as an independent institution for another forty years.

The medical department at the University in Iowa City was largely the outgrowth of the efforts of Dr. Washington F. Peck, a young physician of Davenport. There is an interesting story connected with its beginning. Judge John F. Dillon of Davenport, who was also a graduate in medicine from the first medical school in Davenport, twenty years before, was recovering from an attack of typhoid fever. With feelings of gratitude, he promised his attending physician, Dr. Peck, that he would give his support and assistance in organizing a medical school at Iowa City. Soon afterwards Dr. Peck and Judge Dillon interviewed the Honorable John P. Irish, editor of an Iowa City newspaper, a member of the Iowa Legislature, and also a member of the Board of Trustees of the University. As Mr. Irish was interested in having professional schools added to the University, he was very willing to sponsor the medical school before the Board of Trustees, particularly as it was being supported by such a prominent person as Judge Dillon.

After many trials, the efforts were successful — a faculty of capable teachers was selected and the first session of the medical department, State University of Iowa, opened on September 20, 1870. It consisted of a two-week preliminary course of lectures, followed by a regular medical course of sixteen weeks. The students enrolled in the first class numbered thirty-seven, of whom ten were women.

The first course of lectures and clinics was held in Old South Hall, the Faculty being composed of the following professors:

Dr. Washington F. Peck, Davenport, Surgery

Dr. Wm. S. Robertson, Muscatine, Theory and
Practice of Medicine

Dr. P. J. Farnsworth, Clinton, Materia Medica

Dr. Wm. D. Middleton, Davenport, Physiology and
Microscopical Anatomy

Dr. Elmer F. Clapp, Iowa City, Anatomy

Dr. John C. Shrader, Iowa City, Obstetrics and
Gynecology

Dr. Gustavus Hinrichs, Iowa City, Chemistry

Judge John F. Dillon, M.D., Davenport,
Medical Jurisprudence

At the first regular meeting of the Faculty, Dr. Peck was chosen as Dean. Dr. Peck is credited with being primarily responsible for the selection of the first Faculty. He apparently was mindful of the intimate relationship of the school with the University and sought those who would be on an intellectual and cultural level with their colleagues in other departments of the University, as well as being successful practitioners well versed in the medical knowledge of the day. It was a remarkable group, and the leadership that each later attained in Iowa medicine indicated that they were well chosen.

A few biographic data of each member may be of interest. All were comparatively young, the oldest being Judge John Forrest Dillon, who was forty-one years of age. A graduate in medicine in 1850 from the first medical school in Iowa, a charter member of the Iowa State Medical Society when it was organized in Burlington in 1850, at that time he was practicing medicine in Farmington. He contributed the leading article in the first medical journal published in Keokuk in September, 1850, entitled, "Rheumatic Carditis with Autopsical Examination." After a year of medical practice he decided to study law and a year later passed the bar examination without attending a law school. At the time of his appointment to the Chair of Medical Jurisprudence, he was a Federal Judge for the Mid-West District. Later he was chosen Chief Justice of the Iowa Supreme Court, and in 1880 he left the state to become Professor of Law at Columbia University, New York.

Dr. John Clinton Shrader of the Chair of Obstetrics and Diseases of Women and Children was forty years of age. He received his literary education at the Marietta Academy in Ohio. After coming to Iowa in 1855, he helped to organize Western College at Toledo, Iowa, and became one of the professors of this college. Before entering military service in 1861, he had practiced medicine several years under a preceptor. He entered the army as a Captain and because of his medical experience was transferred to the Medical Corps, being mustered out in 1864 as Surgeon Major. He entered the Keokuk College of Physicians and Surgeons in 1866, graduating the following year. In 1870 he also received the degree of Doctor of Medicine from Long Island College Hospital, Brooklyn, New York.

Dr. William Stephenson Robertson, the first Professor of Theory and Practice of Medicine, was thirty-nine years of age in 1870. He received his classical education at Knox College, Galesburg, Illinois. At twenty-one years, he began the study of medicine under his father, Dr. James M. Robertson, one of the leading pioneer physicians in eastern Iowa. He was graduated from Jefferson Medical College, Philadelphia, in March, 1856, and began the practice of medicine with his father. He served as Surgeon Major in the War of 1861-65 after which he returned to Columbus City. During the winter of 1868-69 he attended a course of lectures at Bellevue Hospital Medical College, New York. He then located in Muscatine.

Professor Gustavus Hinrichs of the Chair of Chemistry was a graduate of the University of Copenhagen, Denmark, and in 1870 was thirty-eight years of age. Previously he had taught foreign languages in the Iowa City High School and the University. Professor Hinrichs was internationally known for his leadership in the teaching of chemistry.

Dr. P. J. Farnsworth, Professor of Materia Medica, was thirty-seven years of age at the time of appointment. He was a graduate in liberal arts and medicine from the University of Vermont; following this he received the degree of Doctor of Medicine from the College of Physicians and Surgeons of Columbia University, New York. Dr. Farnsworth was regarded by his colleagues as the most scholarly member of the Faculty.

Dr. Elmer F. Clapp of the Chair of Anatomy was thirty-five years of age, and a graduate in medicine of the University of Michigan. He was a man of large stature, handsome appearance, and an eloquent speaker.

Dr. Washington F. Peck was only twenty-nine years of age when he became Professor of Surgery and the first Dean of the Medical Faculty. Because of the early death of his father, his general education was incomplete, but by independent study he was able to enter Bellevue Hospital Medical College at eighteen years of age in the fall of 1859. In his second year he won a competitive appointment as house surgeon in Bellevue Hospital and became the first undergraduate to hold such a position, and the first student to

combine lecture courses with hospital experience. After graduating from Bellevue Hospital Medical College in 1863 he joined the army as a contract surgeon, but resigned after eighteen months because of ill health following pneumonia. He located in Davenport in June, 1864, and soon became active in the Scott County Medical Society. As its secretary he distinctly influenced higher standards of medical practice. Dr. Peck was a forceful and interesting speaker, and by his inspiring leadership and organizing ability guided the young medical school during its first twenty years.

Dr. William Drummond Middleton of the Chair of Physiology and Microscopical Anatomy was the youngest member of the Faculty, being only twenty-six years old. He was a native of Aberdeen, Scotland, where he received his early education, winning a prize in classical literature. After coming to Davenport, he attended high school, and after graduating taught in the country schools of that area. He served in the infantry during the Civil War, following which he entered the office of Dr. W. F. Peck, his preceptor. He completed the medical courses at Bellevue Hospital Medical College in 1868. Dr. Middleton was an excellent speaker and had great personal charm.

It was this group of professors who, by their faithful, efficient, and conscientious endeavor carried the school during the early years of its existence. They received no salary, and the non-Iowa City residents had to pay their own expenses for travel. Yet, it was only the most severe conditions, over which they had no control, that prevented them from meeting their classes.

The Department History

1870-1958

During the period of eighty-eight years, various titles were applied to this Department. In the beginning, it was known as the "Chair of Theory and Practice of Medicine," to which a few years later was added "and Clinical Medicine."

In 1900, when all of the departments of the University became colleges, it became the "Department of Theory and Practice of Medicine and Clinical Medicine" until 1946 when the present title was adopted.

It seems fitting to record the historical development of this Department through the succeeding eighty-eight years, by relating the same to the periods of service of the eight professors in charge during these years,

William S. Robertson, M.D.	1870-1887
William D. Middleton, M.D.	1887-1891
Lawrence W. Littig, M.D.	1891-1903
Walter L. Bierring, M.D.	1903-1910
Campbell P. Howard, M.D.	1910-1924
Fred M. Smith, M.D.	1924-1946
Willis M. Fowler, M.D. (Acting)	1946-1948
William B. Bean, M.D.	1948-

The story of this Department, while largely centered around the men who taught, did research, and practiced in it, has endeavored also to present the trends and changes in medical education and practice as related to each period of service.

William Stephenson Robertson, M. D.

1870 - 1887



Born June 5, 1831, Georgetown, Pennsylvania. A.B. Knox College, Galesburg, Illinois, 1852; M.D. Jefferson Medical College, Philadelphia, 1856. Practiced at Columbus City, Iowa, 1856-1868; Surgeon Major, Union Army, 1861-63; graduate student Bellevue Hospital Medical College, New York, 1868-69; moved to Muscatine. Professor of Theory and Practice of Medicine, State University Medical Department, 1870-87; A.M. Iowa, 1876; President, Iowa State Medi-

cal Society, 1874; President, Iowa State Board of Health, 1880-87. American Medical Association; American Public Health Association; Muscatine County Medical Society; Iowa State Medical Society; State Senator, 1878-82. Died, glioma of the brain, January 20, 1887.

* * *

The first Professor of the Theory and Practice of Medicine, Dr. William S. Robertson, represented the best type of physician of his day, and probably was as well prepared for teaching in the new medical school as any physician in the state.

As a graduate of Knox College he had acquired a good literary education; before and after his graduation from Jefferson Medical College in March, 1856, he had been closely associated with his father, Dr. James M. Robertson, one of the leading pioneer physicians of eastern Iowa. After twelve years of experience in practice, he attended a postgraduate course at Bellevue Hospital Medical College, New York City, during the winter term 1868-69. One of his teachers was Dr. Austin Flint, professor of medicine and author of the well-known textbook, *Principles and Practice of Medicine*, and Dr. Robertson was greatly impressed by his ability as a teacher and diagnostician.

We are dependent on the statements of his successor in the Chair of Medicine, Dr. William D. Middleton, and some of his older students as to his methods of teaching and conduct as a clinician. It was stated that he was an impressive speaker, delivering his lectures entirely from a carefully prepared manuscript, often too rapidly for taking notes, but he frequently interspersed his formal talk with an anecdote or experience from his practice, which always appealed to the students. These lectures were delivered without change in two succeeding years. This repetition with frequent reviews, recitations, and occasional demonstration of patients, permitted the student to gain a good knowledge of the different disease conditions, by the end of the course, that served him well in the future practice of medicine.

It is recalled that in Dr. Robertson's day, the term "medicine" comprehended everything pertaining to the knowledge and cure of disease, while in a more restricted sense, the term was used in con-

tradistinction to surgery and obstetrics. Most physicians were of necessity, to a greater or lesser extent, surgeons and obstetricians, or in other words general practitioners.

The principles or theory and the practice of medicine were properly within the province of medical teaching. This designation also included everything that concerned the conduct of the physician and the treatment of patients. Again the province of medical teaching comprised general and special pathology, the former being synonymous with the theory or principles of medicine, and in like manner special pathology belonged to the practice of medicine.

In the words of Dr. Austin Flint, "These divisions are in accord with the distinction expressed by the terms — Science and Art. Thus the principles of medicine constitute medical science, the practice being the exercise of medical art."

Each course of lectures, in the beginning, included consideration of examples of general pathology as hypertrophy, atrophy, inflammation, exudates, transudates, edema, degeneration (amyloid) thrombosis and embolism, anemia, jaundice, fever, symptomatology, diagnosis, and prognosis. This was followed by a description of individual diseases and included clinical history, etiology, pathological changes, diagnosis, prognosis, prevention, and treatment.

In the absence of a known causative agent or specific therapy, diseases ran their natural course, often true to type, and the treatment therefore was mainly confined to symptomatic, palliative, and supportive measures.

A carefully completed clinical history with accurate description of symptoms and course of illness was essential to arrive at a correct diagnosis. This was often as successful as we are with the aid of the elaborate laboratory facilities of this later day.

The schedule of Dr. Robertson's lectures comprised one hour on Monday and Thursday forenoon, with a clinic of one and one-half hours in each afternoon. During the first three years, these were held in Old South Hall, as no hospital was available. In 1873 the University administration renovated the old stone building on North Linn Street, known as Mechanic's Academy, into a hospital of thirty-five beds. This had been the first building used for University teach-

ing in 1846. It was placed under the administration of the Sisters of Mercy of Davenport and was ready for the opening of the fall term.

This was the first teaching hospital of the medical school and offered an opportunity for advanced students to conduct clinical examinations at the bedside and to observe the treatment of patients in company with the attending physician.

In the following year's announcement, it was stated "that 400 to 500 cases of disease were exhibited to students during the last year."

Beginning with this year, 1874, Professor Robertson began to offer an annual prize for "the best thesis on some medical subject." It consisted of a case of instruments for performing an autopsy and was valued at \$25.00.

In the annual announcement for 1878-79, a three-year graded course was offered, which made some change in the arrangement of lectures. Under the Section "Practice of Medicine," appears the following: "The course combines didactic and clinical instruction. The various subjects will be illustrated, as much as may be, in the amphitheatre of the hospital from clinical patients, and the study of pathology facilitated by postmortem examinations or by wet or dry preparations from the museum. . . . Every case is fully utilized as a means of instruction, by a system of examinations in which advanced students are required to diagnosticate disease and suggest treatment before the class, subject to amendment by the clinical teacher."

It is interesting to note the following statement: "The cultivated senses so essential in the duties of the practicing physician are thus gradually developed, and their education carried on much more effectively, it is believed, than would be possible in the presence of a large and chaotic mass of clinical material with which the student did not come into direct contact."

An associate of Dr. Robertson referred to him as a clinician in these words — "He had remarkable ability as a diagnostician, and he quickly picked out the essential points in the history and physical examination."

Dr. Francis A. Long,* a graduate in 1881, described the clinics in medicine as "very good."

In the session of 1879-80, Dr. Robertson instituted a course in physical diagnosis, in which every facility was offered for the student to gain a practical knowledge of percussion and auscultation.

The new medical building was completed in time for the opening of the session in October, 1882. This was the first building constructed in Iowa for the teaching of medicine, and was designated as "the most complete medical college building in the west." It provided special facilities for the teaching of practical anatomy, two amphitheatres with 400 seats, two recitation rooms, separate laboratories for chemistry and physiology, and a large museum.

These facilities were of distinct advantage to the Professor of Medicine, because of the convenient lecture and recitation rooms, and the closer association with the chemical and physiological laboratories permitted further extension of courses of study.

The next year he asked his colleague, Dr. W. D. Middleton, Professor of Physiology, to present a series of lectures on diseases of the central nervous system and an occasional clinical conference in the hospital with demonstration of patients.

In 1880, as a member of the State Senate, Dr. Robertson was largely instrumental in the organization of the Iowa State Board of Health of which he was elected the first president. In the session of 1882-83, he added a course of lectures on Sanitary Science and Public Hygiene. As a bacterial origin of the infectious diseases became gradually accepted, Dr. Robertson changed his lectures accordingly. In this respect he was considerably in advance of the medical teachers of his period.

In 1886 additional facilities for clinical teaching were provided in the newly erected Mercy Hospital in the form of sixty ward beds for medical and surgical patients, as well as an amphitheatre for the conduct of clinics.

During the fall term 1886-87 his health appeared to fail, and he complained frequently of severe headaches. At his lecture just before the holidays he appeared to have difficulty in moving his left

**A Prairie Doctor of the Eighties*, Francis A. Long, M.D., Madison, Neb., 1937.

arm, and possibly sensed the serious nature of his condition, because this last lecture to the class seemed like a message of farewell. His death occurred on January 20, 1887, at the age of fifty-five years, as a result of a glioma of the right hemisphere of the brain.

In the light of this later day, it is clear that during his professorship he distinctly advanced the standards of medical education during the early years of the University Medical School, and left the impression of his leadership and fine character on the students and young physicians of his time.

His friend and colleague, Dr. Middleton, paid this tribute: "Wide study and experience, with acute powers of observation, had made him a wise and skillful physician, whose place among his people will be very hard to fill. Nature gave him a warm heart and a social, kindly nature, whose influence radiated in an unusually wide circle, and few men leave a larger number of friends. He was a clean man and an essentially just one; an earnest man whose work was always well and scrupulously done; a man who despised utterly all forms of sham and pretense; a warm friend and an honest opponent, as becomes a gentleman; and a man of immense innate force, which impelled always only in the direction of truth and decency, a man who has left his mark, and who will be widely missed."

William Drummond Middleton, M. D.

1887-1891



Born April 26, 1844, Aberdeen, Scotland. Came to Davenport in 1857; high school, 1860; Regular Iowa Infantry, 1861-65; M.D. Bellevue Hospital Medical College, New York, 1868. Practiced at Davenport, Iowa; Professor of Physiology and Microscopic Anatomy, State University of Iowa, 1870-87; A.M. Iowa, 1876; Professor of Theory and Practice of Medicine, 1887-91; President, Scott County Medical Society, 1880; President, Iowa State Medical Society, 1891;

Professor of Surgery, State University of Iowa, 1891-1902; Dean of Medical Faculty, 1896-1902; Chief Surgeon C.R.I. & P. Railway; Vice-President, American Medical Association, 1901. American Surgical Association; American Association of Railway Surgeons; Iowa Academy of Science (charter member). Died April 5, 1902, septicemia.

* * *

At the beginning of the second term in January, 1887, following the death of Dr. Robertson, Dr. Middleton was asked to assume the duties of the Chair of Theory and Practice of Medicine for the remainder of the academic year in addition to those of the Chair of Physiology and Microscopic Anatomy, both of which he carried on most faithfully.

At the March, 1887, meeting of the Board of Regents he was officially appointed Professor of Theory and Practice of Medicine and Clinical Medicine, and Dr. Richard W. Hill of Davenport was named as his successor in physiology and microscopic anatomy.

Dr. Middleton, a member of the first Faculty, came to his new post after an experience of seventeen years of teaching physiology and an increasing medical practice. He had also been closely associated with Dr. Robertson, his predecessor, serving frequently as his assistant, and for several years had delivered a series of lectures on diseases of the central nervous system. He was an excellent teacher, having a fine knowledge of English, a pleasing voice, and an attractive personality. While he prepared his lectures with great care, he spoke entirely without notes, often in an informal conversational tone, and frequently seated himself on the edge of the table, and thus held the complete attention of his audience. A frequent quotation from his favorite Shakespeare, an occasional reference to a classic in medical history or a good Scottish story — all of these won for him the regard and affection of every student. But it was his approach to the patient, his bedside manner, that signalled him as a true physician and formed an inspiring example to student and young physicians throughout the years.

Dr. Middleton was a profound student of the changing concepts of the etiology and diagnosis of disease incident to the development

of bacteriology, so that his clinical discussions were always expressive of the medical progress of his day. The course in percussion and auscultation instituted by his predecessor, Dr. Robertson, was changed to that of medical diagnosis so as to include general physical diagnosis, as well as certain laboratory examinations. Dr. Middleton was the first teacher to urge the use of the microscope in laboratory diagnosis.

In 1889 changes in the Faculty introduced several new teachers, who distinctly influenced the methods of instruction in the medical school. The first laboratory course in physiological chemistry was established by Professor E. W. Rockwood of the Department of Chemistry. As a former student of Professor Chittenden of Yale University and for several years a graduate student with Professor Hoppe-Seyler of Strassburg, the leading physiological chemist in Europe, he was able to bring the latest knowledge to the student in this new field. Dr. Middleton welcomed this innovation as he recognized the importance of physiological chemistry in medical investigation and diagnosis.

Another addition to the Faculty was Dr. Lawrence W. Littig, Professor of Anatomy. He had had the benefit of a number of years of graduate study in European medical centers, and therefore was very familiar with the methods of medical education and clinical training in the old world. In the teaching of anatomy, he introduced the demonstration method in which he made use of anatomical models and large numbers of prepared specimens, particularly of the brain and spinal cord, some of which were applicable in the teaching of clinical medicine.

Because of Dr. Middleton's reputation as a clinician, and wide acquaintance among physicians, an increasing number of patients were referred to the medical clinic for diagnosis and advice as to treatment. This offered special opportunity for his talents as a clinician and as a clinical teacher. While he gained high recognition as a medical teacher and clinician, it was destined by the turn of events that he was to become equally prominent in the field of surgery.

In June, 1891, Dr. Washington F. Peck resigned because of ill

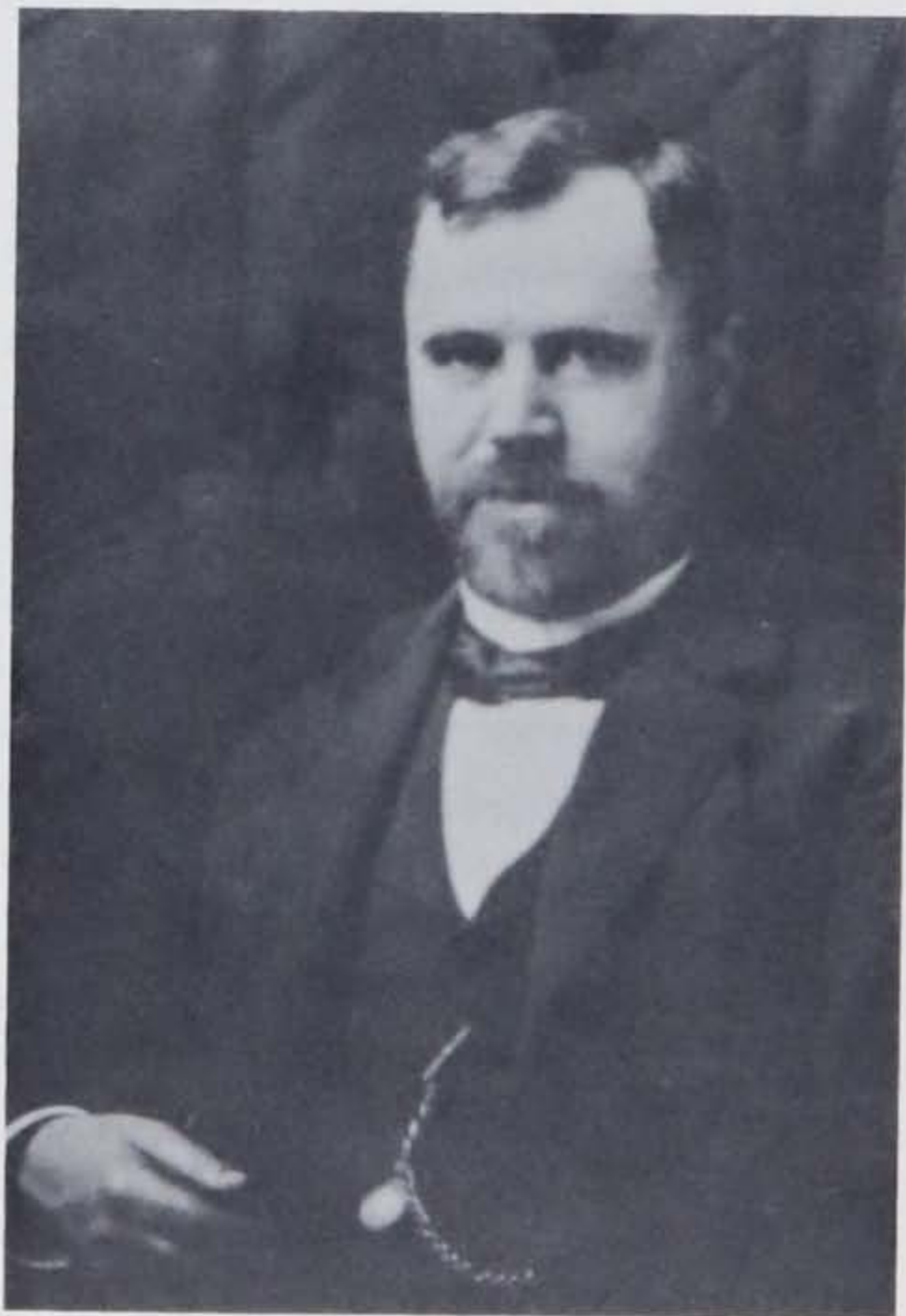
health as Professor of Surgery and Dean of the Medical Faculty, having served in both positions since the opening of the medical school in September, 1870. His death occurred December 12, 1891, from aortic heart disease at the age of fifty years. In considering a successor, the name of Dr. Middleton was most frequently mentioned because of his long association with Dr. Peck in his professional practice in Davenport and his eminence as a teacher and physician. Another candidate was Dr. Ludwig Hektoen, pathologist of Chicago. At the meeting of the Board of Regents in July, 1891, Dr. Middleton was elected Professor of Surgery, and Dr. Lawrence W. Littig was named to take his place as Professor of Theory and Practice of Medicine and Clinical Medicine.

It will be of interest to record briefly his further service in the State University of Iowa Medical School. He soon gained the high regard of students and colleagues in his new field of teaching and practice, as well as receiving national recognition for his leadership in surgery. In 1896 he became Dean of the Medical Faculty, and during his administration the first University Hospital was built, the course of study increased to four years, and medical education advanced in every field. When the disastrous fire destroyed the medical building in March, 1901, it was his wise counsel that directed the new building program which largely determined the next stage in the development of this medical school.

On April 5, 1902, at the age of fifty-seven years, he died after a few days illness of septicemia which resulted from an infection acquired during an operation for acute appendicitis. Thus was completed thirty-two years of devoted and distinguished service in the upbuilding of the State University of Iowa Medical School.

Lawrence W. Littig, M.D.

1891-1903



Born July 20, 1858, Davenport, Iowa. B.A., M.A. St. Vincent's College, Cape Girardeau, Missouri; M.D. Iowa, 1883; M.D. Univ. Pennsylvania, 1884. Resident Physician Blockley Hospital, Philadelphia, 1884-85, under Dr. William Osler; graduate student, Lon-

don, Paris, Berlin, Vienna, 1886-87-88-89-93; M.R.C.S. England. Professor of Anatomy, State University of Iowa, 1889-91; Professor of Theory and Practice of Medicine and Clinical Medicine, State University of Iowa, 1891-1903; Director, University Hospital, 1898-1903; resigned May, 1903. President, Johnson County Medical Society, 1910; President, Iowa State Medical Society, 1912; President, Western Surgical Association, 1916; Chairman, Hospital Section, American Medical Association, 1914. Died, July 17, 1918, accidental infection.

* * *

The third occupant of the Chair, Dr. Lawrence W. Littig was the first alumnus to join the Medical Faculty. He completed extensive postgraduate study in Philadelphia and European medical centers following his graduation in medicine in March, 1883. He had also received the degree Doctor of Medicine from the University of Pennsylvania in 1884. Among his classmates in Pennsylvania were Dr. George Dock, Dr. Howard F. Fussell, and several others destined for later leadership in American medicine. After successfully completing a rigid competitive examination, he was appointed resident physician at Old Blockley (now Philadelphia Hospital) an institution of 1,000 beds. It was in this hospital that Dr. William Osler held most of his clinical lectures and bedside conferences while serving as Professor of Medicine at the University of Pennsylvania from 1884 to 1889. The post-mortem records and rooms in which Dr. Osler worked are still preserved at the new Philadelphia Hospital.

After completing his service at Blockley Hospital July 1, 1885, he returned to his native city of Davenport and began the practice of medicine, receiving the appointment of County Physician. After a year of practice he felt the urge for further graduate study in the larger medical centers of London, Berlin, Vienna, and Paris, remaining for a period of two and one-half years. It was a time of veritable medical greats: Joseph Lister and Gowers in London; Koch and Virchow in Berlin; Billroth, Nothnagel, and Kraft-Ebbing in Vienna; Pasteur, Roux, and Charcot in Paris. While in London, he successfully completed the first examination of the Royal College

of Surgeons of England permitting the use of the letters M.R.C.S., England. While in Berlin, he took a special course in bacteriology at the Infectious Institute under the direction of Professor Robert Koch.

He returned to Davenport early in 1888 and resumed his practice. About six months later, he was advised of his appointment as Professor of Anatomy at the State University of Iowa beginning with the session 1889-90, so he again sailed for Europe to visit special institutes of anatomy to learn about the methods of teaching at these older medical centers. With this background of two years didactic experience, he entered with enthusiasm into the teaching of clinical medicine. He brought the spirit of the great masters of that day into the classroom and the hospital ward, emphasizing the importance of medical diagnosis, practical laboratory training, and the teaching of medicine at the bedside. He had introduced very definite changes in the teaching of anatomy, mainly by the demonstrative method in using prepared specimens collected in Europe, such as brain, spinal cord, including microscopic sections stained by the Weigert method, joints, special dissections, and anatomical models. In his discussions he gave due recognition to the painstaking systematic methods of the German and Austrian investigator, as well as the stimulating critical analytic attitude of the French school.

Dr. Littig introduced the stomach tube and the centrifuge as aids in clinical diagnosis, and he also brought the first oil immersion lens into Iowa. Students saw, for the first time, tubercle bacilli in sputum from a patient with pulmonary tuberculosis, stained by the Ziehl-Nielson method. Again, his special knowledge of anatomy, physiology, pathology, bacteriology, and clinical microscopy added greatly to the interest of his clinical discussions. His presentations of the organic diseases of the brain and spinal cord gave to focal diagnosis a special significance.

The effect of his stimulating spirit in advancing medical education was noted in other departments of the medical school. Dr. Littig was largely responsible for the establishment of a full-time professorship in physiological chemistry in 1892, and in pathology and bacteriology in 1893. Furthermore, he stimulated the desire on the

part of student and graduate for the broadening influence of medical travel, a wider range of reading, and a more comprehensive view of the study of medicine. A number of the later teachers in the University Medical School came under his stimulating influence to the subsequent benefit of the institution they were to serve.

During the vacation period in 1893, he returned to Paris to attend the clinics of Professors Charcot, Marie, and other medical leaders in that city, as well as to take the course in microbiology and bacteriology at the Pasteur Institute. As a result of the latter he definitely influenced Dr. Bierring of the Chair of Pathology and Bacteriology to enter for this course in 1894.

When Dr. Bierring returned from the Institute late in 1894, he prepared anti-diphtheritic serum from diphtheria toxin immunized horses, the first in the United States west of New York City. In this Dr. Littig was most helpful, as he was in inaugurating the first practical course in bacteriology in the spring of 1895.

When Dr. Middleton took over the Chair of Surgery in 1891, he asked Dr. Littig to be his clinical assistant, and the excellent system of antiseptic technique adopted in the surgical clinics was largely due to his efforts.

The first University Hospital with 120 beds was opened for patients in January, 1898; it was the first hospital in Iowa built and planned for clinical teaching, the attending staff being restricted to members of the Medical Faculty. The University Hospital Training School for Nurses was established at this time. These new facilities permitted better teaching of clinical medicine in the wards than ever before. All clinical conferences and recitations were now held in the University Hospital. The outpatient department also added greatly to the clinical facilities. Special clinical history forms were developed as well as proper individual patient records. The temperature charts now serving as a pattern for those in use today, were originally developed by Dr. Littig. He was the first Director of the University Hospital. The pin worn by graduates of the University Hospital Training School for Nurses originated with a committee comprising Drs. Littig, Rockwood, and Bierring.

Owing to a restricted budget, there was no provision for assistants

to the Chair of Medicine. Therefore Dr. Littig conducted all the clinics, lectures, and recitations required in the curriculum. With the session 1895-96, the course in medicine was increased to four years of twenty-six weeks each, which added to Dr. Littig's duties. The new curriculum comprised a course in physical diagnosis each week for the sophomore class; in the junior year, four lectures and one recitation, and for the senior class the same number of lectures in addition to two clinics each week.

During the session 1897-98, Dr. C. S. Chase, Professor of Materia Medica and Therapeutics, presented a course of lectures in applied therapeutics. At the same time Dr. Max E. White, Superintendent of the Hospital for Mental Diseases at Independence, gave a course of lectures on insanity to the senior class.

In 1901 Dr. A. J. Burge, of Iowa City, was added to the teaching staff and conducted the course of instruction in physical diagnosis for the junior class, and Dr. George E. Decker of Davenport presented a course of lectures with an occasional clinic in pediatrics before the senior class.

In 1901 a clinical laboratory was established in the University Hospital, and a course of instruction of two hours a week was conducted by Dr. Bierring, Professor of Pathology and Bacteriology.

On March 9, 1901, the medical building was completely destroyed by fire. The teaching in the basic medical sciences had to be conducted in temporary quarters for the next two years, and though done well this dislocation had a disturbing effect on the training in clinical medicine.

A year later, on April 7, 1902, occurred the untimely death of the beloved Dean Middleton (also Professor of Surgery). The selection of a successor led to certain unfortunate misunderstandings in the Faculty, and to what extent this condition affected the interests of Dr. Littig is not known. There was keen regret in all medical and educational circles when he resigned as Professor of Medicine in May, 1903. His former student, colleague, and devoted friend, Dr. Walter L. Bierring, was appointed his successor.

It is difficult to overestimate Dr. Littig's contribution to the University and the Medical School. Aside from the impression on the

student of his learning and high ethical principles, he brought into being a new era of medical training, especially in clinical medicine, far in advance of many older institutions of that period. Following his resignation, and after considerable thought, he decided to engage in private practice as a consultant in surgery, with special reference to surgical diagnosis. He soon gained recognition and prominence in this new field. He remained in Iowa City until 1910, when he moved to Davenport, but came back to Iowa City in 1916 where he practiced until his death at the University Hospital, July 17, 1918, three days less than sixty years of age. His final illness was due to an accidental infection of the face resulting in acute frontal sinusitis and basilar meningitis.

Even after giving up teaching, Dr. Littig was a continuous student. Every medical paper or address, always carefully prepared, taught a lesson. His address as President of the State Medical Society at the Burlington meeting in 1912 was published in the *Journal of the American Medical Association* because of its advanced thought on medical education, hospital standards, and medical practice. He regarded the hospital and the staff as an index of the professional standing of the medical men of the community. He held that the real function of the hospital was its teaching influence and the elevation of medical standards of practice. He took up the study of the Italian language at fifty years of age, so that he could read, write, and speak it quite fluently.

His was a nobility of character and greatness of intellect that we hardly grasped until he had passed from our midst.

It is fitting at this point to incorporate the original rules and regulations for the management of the University Hospital, since they give a clear view of the delegation of responsibilities, some of the ideas of the routine, and the stage of medical care and service at the time it was printed, in the year 1898 or 1899 — the exact date not being certain. Particularly interesting is the function of the residents, who at that time were true resident physicians and not what might perhaps more accurately be called externs. One also gets an interesting view of the relative costs of things.

THE STATE UNIVERSITY OF IOWA

IOWA CITY

RULES AND REGULATIONS FOR THE GOVERNMENT OF THE UNIVERSITY HOSPITAL

The entire organization and conduct of the hospital shall be in accordance with the rules and regulations established by the Board of Regents. In all disputed questions of administration and discipline the final appeal shall be to the Board of Regents.

The director, superintendent, and matron shall be appointed by the Board of Regents.

HOSPITAL STAFF

The Hospital Staff shall consist of the president of the University and heads of departments, and the first assistant in any clinical department may become a member upon the recommendation of the head of such department and election by the staff. The heads of the clinical departments shall constitute the council of the staff. The staff shall hold an annual meeting in March, at which time the officers of the staff, a president and secretary, shall be elected. The staff shall meet at such other times as the president of the University or president of the staff may deem advisable. The function of the hospital council shall be to aid the director in his work. They shall serve as executive council and shall meet at the hospital on call from the director or any member of the council.

Any complaint or criticism offered by a member of this staff must be made in writing to the director of the hospital.

No member of this staff or his assistant shall have authority to re-assign patients in the hospital to other quarters, except by the consent of the matron.

DIRECTOR

The director, with the concurrence of the hospital staff, shall have control of all the departments of the hospital. He shall keep the staff informed as to the condition and needs of the hospital, and shall promulgate and enforce all rules and regulations for the government of the hospital. The director shall have power to suspend, in cases of emergency, any officer of the hospital, or any

resident physician, reporting at once to the president of the University his action and the reason therefor. In cases of emergency or in all cases not herein provided for he shall have full power until the Board of Regents shall have taken action.

SUPERINTENDENT

The superintendent shall be a graduate of a recognized nurses' training school. She shall have charge of the nursing of patients under the direction of the physician or surgeon in charge. She shall have charge of the nurses and of their instruction. She shall have supervision of the nurses' home and it shall be her duty to maintain discipline in the same. She shall admit nurses to the training school; she shall recommend to the staff the dismissal of any nurse when she deems it advisable, and, on the concurrence of the staff, this nurse shall be dismissed. With the concurrence of the director she may discharge any patient for infringement of the hospital rules or improper conduct. She shall give to the matron written requisitions for the diet of patients; she shall also provide such special diet as may be directed by the physicians and surgeons in charge, the order for which shall be in writing. She shall be responsible for the order and discipline of the hospital and shall have power to enforce order and discipline.

She shall admit visitors to the hospital according to the hospital rules. She shall admit students to wards and rooms only when accompanied by an instructor or when having a permit from the head of a department, and then for such purpose only as is specified in such permit. She shall keep a complete list of medical and surgical supplies and instruments, except drugs and medicines, and shall be responsible for these supplies. She shall issue supplies and instruments upon order from the head of a department or his assistant. She shall make requisitions for hospital supplies; she shall report to the superintendent of grounds and buildings all necessary repairs.

On leaving the house she shall place a nurse in charge. She shall not leave the city without permission from the director; she shall give a written requisition to the matron for all liquors needed, giving the name of the patient requiring the same. The superintendent shall report the pay roll of the nurses once a month to the secretary.

She shall see that all nurses are registered in the registrar's office as soon as they are admitted. She shall have charge of the ward maids, the special janitor, the housekeeping of the hospital proper (namely, the wards, rooms, and corridors of the first and second floors, the operating department, lavatories, and diet kitchens), and the sanitary condition of the entire hospital. In cases where there is no rule applied the superintendent shall lay such cases before the director, whose action shall govern until a rule governing the same is established.

MATRON

The matron shall admit all patients and provide them with hospital accommodations; and she shall then notify the physician or the surgeon to whom the patient has been referred, of their being in the hospital, and if they have no letter of assignment, then the matron shall refer the patient to one of the resident physicians. She shall have charge of the housekeeping of the hospital, except as provided for under the duties of the superintendent, and of the finances under the general direction of the secretary of the Board of Regents. She shall keep a list of all furniture and other property except medical and surgical supplies belonging to the hospital, and make annual inventory of the same. She shall keep a press copy of her official correspondence, including notices to relatives and friends of deceased patients.

RESIDENT PHYSICIANS

The resident physicians shall, under the direction of the staff, have immediate control of the treatment of patients. In all other matters they shall be subordinate to the superintendent.

They shall be graduates of the College of Medicine of the State University of Iowa.

They shall reside in the hospital, and shall receive their board and washing free but shall not be allowed any other perquisites or fees. They shall not be absent from the hospital at night nor during the day except at such hours as may be authorized by the staff. Before leaving the hospital they shall invariably register their names and the hour of the day in a book to be provided and kept by the superintendent, and they shall again register upon their return.

They shall examine such patients as may be referred to them by the matron and report the result to the matron, who shall admit them after the rules of admission have been complied with. They shall then assign them to their respective departments and shall prescribe for them temporarily. In all important cases, or those of emergency, they shall, as soon as possible, notify the professor of the department to which the case belongs or his assistant.

They shall receive from the professors or their assistants all orders and directions and see that the same are faithfully carried out relative to the treatment of their respective patients. They shall also receive from them the recommendations for the discharge of patients, and shall sign the general record cards of such patients before they are discharged by the superintendent.

They shall not engage in any other business than that of the hospital, nor shall they engage in the private practice of their profession; neither shall they receive fees or gifts from inmates of the hospital.

In all cases their first duty shall be to clinical patients.

They shall take the history and keep a complete record of every case entering the hospital and transcribe or file such record in a neat and proper manner. They shall also see that all analyses of sputum, urine, etc., as required by the clinical professors, are made and properly reported to them. They shall, on a specially prepared card, make a daily report to the superintendent as to the condition of each patient.

The hospital pharmacy department shall use all the products possible of the pharmacy department of the University, and the same shall be stocked up and be under the general care of the dean of that department or some person suggested by him to the committees and superintendent.

They shall compound and make up all medicine which may be prescribed with exactness and promptitude and shall be responsible for the correct preparation of all prescriptions. They shall deliver no medicine or other articles unless the same be duly entered upon the prescription or order books, or ordered in writing.

They shall put up the medicines intended for each ward separately,

and shall annex to them labels containing the names of the patients for whom they are respectively prescribed, with written or printed directions for their use. They shall deliver them promptly to the nurses of each ward to be by them administered to the patients.

They shall perform such other duties as the staff may direct.

PATIENTS

All acute, curable, and non-contagious diseases are treated in the hospital. Sufferers from chronic or incurable complaints may be received and retained at discretion, but will not be permanently provided for. None are received in the wards who, from the nature of the ailment, would occasion discomfort to their neighbors. Patients with contagious diseases, diseases of an offensive nature, and insanity, are not admitted.

Patients will be admitted and discharged between the hours of 8:00 a.m. and 7:00 p.m. Emergency cases may be admitted at any time.

Relatives may stay with patients when it is deemed advisable by the head of a clinical department.

Patients must pay for board and attendance in advance; \$7.00 per week shall be the ward rate except for patients sent by county authorities, for whom the rate may be \$5.00.

The rate for rooms shall be from \$10.00 to \$20.00 per week.

Private patients in wards shall pay \$10.00 per week.

No patient shall be charged for less than two days.

Students in the University shall be charged $\frac{2}{3}$ of the regular rates. Clinical obstetrical cases shall be charged \$4.00 per week. An operating fee of \$5.00 shall be charged for each major operation; and each private patient shall pay a fee of \$5.00 when operated on in the operating room.

Patients may be assigned to the wards or to the small rooms as the gravity of their condition or the successful treatment of the case may demand, irrespective of their ability to pay. The above rates are for board, lodging, and nursing. There is no charge to clinical patients for medicines, but a charge may be made for special nursing when required. Private cases will be charged a moderate fee for medicines, surgical dressings, and special nursing

if required. Patients requiring an operation must make satisfactory arrangements by a deposit with the matron sufficient to pay the above expenses before the operation will be performed.

All patients who are able will be expected to go to the dining room for their meals unless otherwise ordered. Breakfast will be served at 7:30 a.m., dinner at 12:30 p.m., and tea at 5:30 p.m.

Patients will not leave their wards or rooms without permission from the nurse in charge. They are not allowed to talk to each other about their diseases. All gossiping, loud or profane talking, or any indecent behavior is strictly prohibited. Patients must not sit or lie upon the bed with their clothes on, or wear heavy boots or shoes while in the ward. No patient shall be allowed to have any book, pamphlet, newspaper, print or picture of an immoral or indecent character. Patients must not throw anything whatever on the ground below their windows.

The use of tobacco is not allowed in the building, except in rooms set apart for that purpose. All alcoholic liquors used by patients must be dispensed as medicine by order of the physician in charge.

Patients must be in their rooms or wards when the resident physicians make their visits, viz., between the hours of 8:00 and 10:00 a.m. and 6:00 and 8:00 p.m.

There is a regular diet for each day and special diet ordered by patients must be paid for extra, unless prescribed by the superintendent or attending physician, which will only be done in cases of necessity.

Patients must upon admission invariably have a bath unless the contrary is ordered by the resident physicians, and must have a bath at least once a week unless otherwise ordered.

The lights will be turned out at 9:00 p.m., and patients must retire at that hour.

A clergyman will be sent for at the request of the patient made known to the nurse in charge.

No nurse or servant of this institution is allowed to accept any gift or bequest from or in behalf of any patient except with the approbation of the hospital staff.

Private patients may be treated in the hospital by any regular practitioner, when properly vouched for by any member of the staff, but in all cases clinical work and clinical patients shall have precedence.

MEDICAL STUDENTS

All students shall enter the amphitheatre by the north door.

Medical students must remember that their relations with patients in hospital, dispensary, or clinic are strictly professional and that they must not under any circumstances disclose the nature of their illness or discuss them in public or private. The student cannot too early learn that he must not "talk about his patients." A violation of this rule may entail such discipline as the hospital staff see fit to inflict.

If any student be guilty of any improper conduct such as smoking, whistling, singing, or spitting upon the floors in the amphitheatre, halls or wards, stepping or lying upon the seats, or putting his feet on the backs of the seats in the amphitheatre, sitting, standing, or putting his feet on beds or tables in the wards, it shall be the duty of the superintendent to at once forbid him such improper conduct, and if not obeyed, or when guilty of similar violations of the rules, to exclude him for the day from the hospital and report the case to the hospital staff through the director, who may refuse the student further privileges in the hospital.

Medical students will be provided with hospital tickets and must show them at the hospital whenever it is required.

No employees whose duty does not call them into the wards shall enter them without the permission of the superintendent, nor shall they enter the departments where they have no regular duties except on special business. Female employees shall not visit the men's nor male employees the women's rooms.

No duplicate keys shall be made or retained in the possession of any employee except by order of the superintendent.

Persons not connected with the hospital either as patients or employees shall not be allowed to lodge or take meals in the hospital, or to occupy any part of the premises without express permission of the superintendent.

Walter Lawrence Bierring, M. D.

1903-1910



Born July 15, 1868, Davenport, Iowa. Davenport High School; M.D. Iowa, 1892; postgraduate study Heidelberg, Vienna, Paris, Berlin, Prague, London, 1892-93-94-96-1901. Professor of Pathology and Bacteriology, 1893-1903; Professor of Theory and Practice of Medicine, 1903-10; President, Johnson County Medical Society,

1903; President, Iowa State Medical Society, 1908; Chairman Section Pathology and Physiology, American Medical Association, 1907; Director University Hospital, 1908-10; Vice-Dean Medical Faculty, 1907-10; Professor of Medicine, Drake University, Des Moines, 1910-13. President, Iowa State Board of Public Health and Medical Examiners, 1913-21; Secretary, Editor, Federation State Medical Boards of the United States, 1915- ; National Board of Medical Examiners, 1916-46; Chairman, Section on Practice of Medicine, American Medical Association, 1919; Commission on Medical Education, 1925-32; Honorary Member Royal College of Physicians, Edinburgh, 1922; Regent American College of Physicians, 1930-39; President, American Medical Association, 1934-35; Chairman, American Board of Internal Medicine, 1936-39; Chairman, American Board of Preventive Medicine, 1948-57, Chairman Emeritus, 1957; Professor of Medicine Emeritus, State University of Iowa, 1946- ; State Commissioner of Health, 1933-53; Director Division of Gerontology, Heart and Chronic Diseases, 1953- ; Master American College of Physicians, 1954; Fellow Royal Sanitary Institute, 1954; President, Alpha Omega Alpha Society, 1924- ; Phi Beta Kappa; Honorary Member Aero. Medical Association, 1955; Distinguished Service Award, American Medical Association, 1956; Fellow New York Academy of Sciences; American Medical Writers Association.

* * *

The fourth Professor of Medicine, Dr. Walter L. Bierring, was also a medical alumnus, a graduate of the Class of 1892. He came to his new post after ten years of teaching in the field of pathology and bacteriology. He had had the benefit of a long period of graduate study in Heidelberg, Berlin, Prague, Vienna, Paris and London in preparation for his teaching in pathology and bacteriology, as well as in clinical medicine. He was a student at the Pasteur Institute in 1894 when Pasteur was still living, and came under the stimulating influence of Roux, Metchnikoff, Calmette, and Borrell, all great leaders in microbiology. By frequent visits at medical clinics in Cleveland (Dr. Chas. F. Hoover), Baltimore (Drs. William Osler and William S. Thayer), Boston (Dr. Henry A. Christian), and Chicago (Drs. Frank Billings, J. B. Herrick, and Robert B. Preble),

he had gained knowledge of the methods of teaching clinical medicine in these large American medical centers.

Ever since his entrance into medicine, Dr. Bierring had been under the stimulating influence, as student and associate, of Dr. Littig. It was natural therefore that his efforts would be dedicated toward maintaining the high standards and ideals of clinical medicine so ably instituted by his distinguished predecessor.

The newly appointed Professor of Surgery, Dr. William Jepson, was very co-operative in arranging, as far as possible, that patients referred for surgical treatment be first examined in the medical service for a medical diagnosis. This established a fine relationship between the two departments. It was a fortunate day also for the teaching of clinical medicine when Dr. Clarence Van Epps became associated with this Department.

After graduating in medicine from Iowa in 1897, Dr. Van Epps received a medical degree from the University of Pennsylvania in 1898, which was followed by a year as resident physician at Blockley Hospital and another year at Wills Eye Hospital, Philadelphia. After several years of medical practice in Clinton, Iowa, his interest in scientific medicine and desire to teach influenced him to return to his Alma Mater where he began a professional teaching career that continued for more than four decades. With his able assistance and the advice and counsel of Professor E. W. Rockwood of the Department of Physiological Chemistry, the clinical laboratory in the University Hospital was enlarged and more fully equipped. This provided facilities for examining gastric contents, excretions, sputum, exudates and transudates, urinary sediment, as well as blood chemistry and hematology. Courses in clinical microscopy were organized under the direction of Dr. Van Epps.

The term "internal medicine" was first introduced at this time in connection with an introductory course for the sophomore class, including such conditions as anemia, dyspnea, jaundice, and edema. There were occasional clinical demonstrations. Two courses in physical and medical diagnosis were developed, the first pertaining to inspection, percussion, and auscultation on the normal person, after which patients with various diseases were examined. The second

was a more advanced course of diagnostic methods including history taking, and the application of laboratory examination to different disease conditions. Demonstrations were made of special diagnostic procedures such as lumbar puncture, aspirations from serous cavities, and blood culture. The lectures, recitations, and clinics were arranged differently for the junior and senior classes, the latter being more advanced. Gradually ward rounds were organized, the senior class being divided into groups of six or eight members, who were taken to the wards, the examinations and discussions being conducted at the bedside of the patient under the supervision of Dr. Bierring and Dr. Van Epps. A special course of lectures, with clinical conferences on applied therapeutics was directed by Dr. Van Epps. Later a course of lectures and clinical demonstrations was added on diseases of the central nervous system by Drs. Bierring and Van Epps.

In 1905 a new wing was added to the University Hospital, providing facilities for a total of 200 beds, besides space for an extensive outpatient department, and for physical therapy. This permitted the organization of an outpatient or dispensary service in medicine, which was of distinct teaching advantage, particularly in physical diagnosis and the methods of general examination.

The lecture and clinical conference in pediatrics conducted by Dr. Charles F. Grant of Iowa City were of definite educational value, and had an important part in the outpatient service. It was gratifying to note the increasing interest of staff members and advanced students in research and investigation. Interesting studies on purine metabolism were published by Dr. Van Epps, alone and in cooperation with Professor Rockwood. Observations were further reported on special studies in pernicious anemia, leukemia, Hodgkins disease, chloroma, multiple myeloma, endocarditis, and diseases of the kidneys.

At the close of the junior year, one or two members of high scholastic standing were appointed Fellows in Medicine, being granted a small stipend of \$200 per year. During the following vacation period, and senior academic year, they carried on a special type of research which, if satisfactorily completed, made them eligible for the degree of Master of Science granted by the Graduate

College of the University. The Fellows also assisted in teaching. A significant contribution was that of Mr. Fred Moore, later a prominent specialist in pediatrics in Des Moines, on the "Clinical Importance of Pulse Pressure."

In 1908 Dr. H. E. Kirschner was added to the teaching staff as special lecturer in tuberculosis. Dr. Kirschner was the Director of the newly completed sanatorium for tuberculosis at Oakdale, eight miles north of Iowa City. Members of the senior class were taken in groups once every two weeks to the sanatorium for a clinical conference at which patients with different forms of tuberculosis were presented.

In 1909 Dr. John H. Peck, later Assistant Professor of Medicine, Drake University, Des Moines, became Clinical Instructor in medicine and was a distinct addition to the teaching staff. To institute and properly carry on this comprehensive plan of clinical instruction was at times difficult because of the limited teaching staff.

In 1905, Dr. Bierring was appointed Vice-Dean of the Medical Faculty and in 1908 Director of the University Hospital. These additional administrative duties further interfered with teaching. The limited salary allotted to clinical professors was \$900 per annum during the years 1870-1910, making it necessary to engage in private practice. This was confined to consultations. Nevertheless, when called out of the city for a distance of 75 miles or more, the transportation facilities often necessitated an absence from duties in the medical school of more than one day.

The first decade of this century was a critical period in medical education and for medical schools. Dr. Frank Billings, prominent internist of Chicago, and leader in American medicine, in his address as president of the American Medical Association in April, 1903, recommended that the head professors in the clinical branches of medicine serve on a full-time basis and that medical education in American medical schools be further reorganized on a university basis. A year later, 1904, the Council on Medical Education of the American Medical Association was established. After a number of surveys and inspections, aided by the Carnegie Foundation, within a comparatively short time the 150 medical schools, many of them

established on a commercial basis, were reduced to about half that number. This ushered in a new era in medical education that had its impact on the State University of Iowa College of Medicine, as well as on many other institutions.

For some ten years the departments of the fundamental medical sciences had operated on a full-time basis, and the time seemed opportune for the clinical departments to be in step with the trend of progress in medical education. A number of conferences were arranged by Dr. Bierring with Dr. Jepson, Professor of Surgery, regarding the removal of his residence from Sioux City to Iowa City, to establish a full-time university professional status in the Department of Surgery. This could not be arranged. If the two leading clinical departments could have met this new educational demand, it would have been distinctly in the line of progress. As Director of the University Hospital, Dr. Bierring became familiar with the problem of adequate clinical material for teaching purposes in a hospital located in a city the size of Iowa City. In each annual report he recommended that state legislation be enacted providing for the admission of indigent persons on a county quota basis, to the State University of Iowa Hospital for medical and surgical treatment. Such a measure became a law about seven years later.

In the late spring of 1910, Dr. Bierring was approached by the President of Drake University, Des Moines, with an invitation to join the staff of the medical school as Professor of Internal Medicine and Director of the medical clinic. It was stated that a liberal endowment had been secured for the support of the medical school. After careful consideration Dr. Bierring decided to accept the offer, and he resigned as Professor of Theory and Practice of Medicine effective June 30, 1910. Dr. John H. Peck also resigned as Instructor in Medicine, and accompanied Dr. Bierring to Des Moines, having been appointed Assistant Professor of Medicine at Drake University School of Medicine. Thus ended seventeen years of interesting experience in the teaching of pathology, bacteriology, and clinical medicine. It was a period of continued progress in medical education. The State Board of Education elected Dr. Campbell P. Howard of McGill University, Montreal, as Professor of Theory and Practice

of Medicine and Clinical Medicine, beginning with the session 1910-11.

As regards the subsequent professional career of Dr. Bierring, it is noted that after three years of very satisfactory teaching of internal medicine at Drake University School of Medicine, the Trustees of the University decided that the endowments were inadequate to maintain the medical school at the highest approved standards, and by agreement with the Medical Faculty discontinued the medical school as of July 1, 1913, and merged the same with the College of Medicine, State University of Iowa, Iowa City. This merger left the University College of Medicine as the one medical school in Iowa.

Dr. Bierring entered into a consultation practice in internal medicine in Des Moines, and became interested in a number of movements concerned with public health and the advancements of standards of medical education and practice. He was president of the Iowa State Board of Health and Medical Examiners from 1913 to 1921. He became a member of the National Board of Medical Examiners of the United States, serving until 1947. In 1915 he was named secretary-editor of the Federation of State Medical Boards of the United States, continuing to serve in that position ever since. He served on the Commission on Medical Education — President Lawrence Lowell, Harvard University, Chairman; and Dr. Willard C. Rappleye, Vice-President and Dean, Columbia University College of Physicians and Surgeons, Medical Director.

He was president of the American Medical Association in 1934-35; he had a part in the organization of two specialty boards — Internal Medicine, 1936, and Preventive Medicine in 1948, the latter with affiliated specialties of public health, aviation medicine, and occupational medicine. He was State Commissioner of Health from 1933 to 1953; at present he is serving as Director of Gerontology, Heart, and Chronic Diseases in the State Department of Health.

In 1946 he was named Professor of Medicine Emeritus at the State University of Iowa. In 1954 he was elected a Master of the American College of Physicians and Honorary Fellow of the Royal Sanitary Institute of Great Britain. In 1921, he was elected the first

alumnus member of Alpha Chapter, Alpha Omega Alpha Honor Medical Society, national director in 1923 and president in 1924. During the past nine years he has been consultant in Internal Medicine, Veterans Administration Hospital, Des Moines.

The following letter is appended as an indication of his early proposals for the policies and practices of the Department of Medicine.

STATE UNIVERSITY OF IOWA

COLLEGE OF MEDICINE

Walter L. Bierring, M.D.
Professor of Theory and Practice of
Medicine and Clinical Medicine

Iowa City, Iowa, Aug. 29, 1903

Dr. J. J. Brownson,
Dubuque, Iowa

My dear Doctor: —

You are probably aware that the Board of Regents of the University, at their meeting in June, placed the department of Theory and Practice of Medicine and Clinical Medicine in my charge, and in my earnest desire to successfully fulfill the requirements of this position, I hope that I will be favored with your co-operation and support.

The Medical Clinic will be held as usual on Thursday afternoons at 1:30 o'clock. In referring patients to this clinic, I would suggest that they come to the hospital, whenever possible, from one to two days preceding the clinic day in order that the different methods of clinical diagnosis can be properly carried out.

When cases are referred to the University Hospital for operation intended for the Surgical clinics on Monday and Tuesday, Gynecological on Tuesday, or Ophthalmological on Wednesday, it will be in particular accord with the wishes of the different professors concerned if the patients can enter the hospital from five to seven days preceding the operation.

While we depend principally upon clinical cases for the practical instruction of the Senior students, I trust you will understand that the best interests of the patients will always be of primal importance, and by courteous, kind treatment we hope to deserve their confidence and good will. Each patient that you may refer here, will

invariably be referred back to you, as attending physician, for further treatment as soon as he or she leaves the hospital, with such explanations as the result of our examination may suggest.

Hoping that the kind interest which you have hitherto manifested in the College of Medicine will be assured to us in the future, I remain

Cordially and fraternally yours,
(signed)
Walter L. Bierring

Campbell Palmer Howard, M. D.

1910-1924



Born April 2, 1877, Montreal, Canada. B.A. McGill University, 1898; M.D. McGill University, 1901. Assistant Resident Physician Johns Hopkins Hospital, Baltimore, 1902-06; graduate student London, Munich, Berlin, Paris, 1907-10; Assistant Physician Montreal General Hospital, 1907-10; Assistant Professor of Principles of Medicine, McGill University, 1908-10; Professor of Theory and

Practice of Medicine, State University of Iowa, 1910-24; Chief Physician, University Hospital, 1910-24; Major, Royal Canadian Medical Corps, 3rd Canadian General Hospital, World War I. Member of the American Society for Clinical Investigation; Association of American Physicians; Canadian Medical Association; Alpha Omega Alpha; Sigma Xi; Iowa Society of Clinical Medicine; Professor of Medicine, McGill University; Physician, Montreal General Hospital, 1924; President, Society for Clinical Investigation, 1926; President, Association of American Physicians, 1930; President, Montreal Medico-Chirurgical Society; Fellow, Royal College of Physicians and Surgeons of Canada; American Association of Pathology and Bacteriology. Died June 3, 1936, 59 years.

* * *

The fifth Professor of Theory and Practice of Medicine, Dr. Campbell Palmer Howard, was a young Canadian physician who came to Iowa with a distinctive professional background and sound scientific training. He was a graduate of the Faculty of Medicine, McGill University, Montreal, where his father, Dr. Robert Palmer Howard, had been Dean of the Faculty and Professor of Medicine, as well as the preceptor, teacher, faculty colleague, and devoted friend of Dr. William Osler, premier physician in English medicine of his time. Osler's major academic appointments were Professor of the Institutes of Medicine and Pathology, McGill University, Montreal, 1876-1884; Professor of Medicine, University of Pennsylvania 1884-1889; Professor of Medicine, Johns Hopkins University 1889-1905; and Regius Professor of Physic, University of Oxford, England, 1905-1919.

Campbell Howard was the godson of Dr. Osler, and throughout the latter's life was a favored protege of the great Chief. Upon entering the study of medicine at McGill University in September, 1897, he received the following letter from Dr. Osler. "God speed in your medical work . . . the hopes of all your father's dear friends are set on you . . . I know you will work steadily and surely, and I want to stand to you in the same relation that your father did to me. I can never repay what he did in the way of example and encouragement. Yours affectionately W.O."

After graduating from McGill University in 1901, he served one year of internship at Montreal General Hospital, and then entered the medical service of Dr. William Osler at Johns Hopkins Hospital, Baltimore, as assistant resident physician, remaining for four years. During the greater part of this period he was privileged to be under the tutelage of Dr. Osler, working first in bacteriology, then in the clinical laboratory, and later as instructor of junior students in the wards. In May, 1904, Dr. Osler wrote to Dr. Charles F. Martin, Professor of Medicine at McGill: "Campbell Howard is a great success and working like a Trojan"; and a year later in writing to Dr. L. F. Barker, successor to Dr. Osler as Professor of Medicine at Johns Hopkins University, appears this comment: "Howard is a jewel."

When Osler sailed for England in February, 1906, after a visit in Canada and the United States, he had Dr. Campbell Howard return with him on the SS "Campania" for a prolonged period of graduate study in European medical centers. After brief visits to London, Berlin, Vienna, and Paris, he entered the well-known medical clinic of Professor Friedrich Mueller at the University of Munich as a graduate student. By reason of an introduction from Dr. Osler he was accorded special privileges, and always spoke of the year spent in Munich as a most interesting and inspiring experience.

The medical center of the University of Munich had initiated a new plan of construction in that the laboratories of the basic medical sciences were closely connected with the clinical wards of the hospital. This pattern was followed by many American university medical schools during the following three decades, including the State University of Iowa. Following the loss of the medical buildings by fire in March, 1901, Dr. Bierring visited Munich and was greatly impressed with the construction plan at this University Medical Center, many of the details later being used at the University of Iowa.

While in Munich, Dr. Howard was advised of his appointment as Instructor in Medicine and Pathology at McGill University, and Assistant Physician to the Montreal General Hospital, which he accepted and returned to Montreal in September, 1907, to take over

the duties of this position. His new post afforded the opportunity to develop a course of instruction in clinical medicine, as well as the medical service in the outpatient department based on his experience at Johns Hopkins Hospital and that with Professor Friedrich Mueller in Munich.

Early in August, 1910, he received a communication from the President of the State University of Iowa, with the offer of Professor and Head of the Department of Theory and Practice of Medicine in the College of Medicine, as well as chief physician of the University Hospital, which after some consideration was accepted. Dr. Osler was visiting in Canada at this time, and in a letter to Dr. H. B. Jacobs, Baltimore, he makes this reference to the above — "Had a splendid trip; Revere (son) and Campbell Howard are in camp 40 miles north of Quebec. . . . Campbell H. has a splendid offer from the University of Iowa; I have urged him to accept, though the school is small and far away, but they give him carte-blanche, a good salary and two full-time assistants."

Dr. Howard came to Iowa City in September, 1910, and entered with enthusiasm into his new duties in the medical school, where he soon won the regard of students, faculty, colleagues, and members of the medical profession with whom he came in contact. Within a year he married Miss Ottilie Frances Wright of Ottawa, Canada. She was a niece of Dr. Osler and daughter of Dr. H. R. Wright of Ottawa. His beautiful bride was warmly welcomed into the social life of the University. Dr. Howard brought with him, as Assistant Professor of Medicine, Dr. Louis Baumann, M.D. of the College of Physicians and Surgeons, Columbia University, 1901, who was specially trained in physiological and clinical chemistry. He became Director of the Clinical Laboratory established in the new wing of the University Hospital. Dr. Clarence Van Epps remained with the Department as Assistant Professor of Clinical Medicine and Therapeutics. He also had two hours each week in neurology with the senior class. Dr. Charles S. Grant was continued as Instructor in pediatrics, and Dr. Max E. Witte as Lecturer in mental diseases. Dr. H. V. Scarborough, Director of the Tuberculosis Sana-

torium at Oakdale, arranged to teach groups of ten members of the senior class each Saturday.

Dr. Howard conducted the didactic lectures and recitations, two hours each week for the junior class, and the same time for the senior class, as well as four hours each week of amphitheatre clinics for the combined junior and senior class. He instituted a plan of teaching by using a well-known textbook of medicine, in his case naturally that of Dr. Osler, and assigning to the class a certain section, or number of pages, to read and memorize as far as possible, and then have recitations on the same. During the junior year, the first half of Osler's textbook was covered, and the last half of the book in the senior year. The advantage claimed for this method was that to learn medicine according to Osler meant good medical knowledge as to the cause, nature, diagnosis, and treatment of diseases. This plan also permitted the addition of collateral reading where indicated. It is interesting to note that this plan of teaching was so well received as to be continued, with certain modifications, in the Department for more than thirty years. There is a story told of a student with a retentive memory who recited as required almost verbatim from Osler. Another student sitting in one of the upper rows with the open book before him, remarked at the close of the recitation "a comma was omitted in the seventh line."

The preliminary course in internal medicine for the last semester of the junior year was continued, as well as ward classes and clinical clerkship for the senior students with courses of instruction in the wards for the junior class. Opportunity was offered for advanced work to students of high scholarship standing, particularly in clinical chemistry under Assistant Professor Baumann.

In 1914 Dr. Charles J. Rowan of Chicago was appointed Professor and Head of the Department of Surgery on a full-time basis. This greatly strengthened the relationship with the Department of Internal Medicine. The following year pediatrics was established as a separate department with Dr. A. H. Beifield of Chicago as Professor and Head.

Four years later psychiatry became a separate department with Dr. Samuel T. Orton as Professor and Director of the new Psycho-

pathic Hospital. In 1921 the Department of Obstetrics and Gynecology was established on a similar basis with Dr. Fred H. Falls of Chicago as Professor and Head.

In 1915 Dr. Frank J. Rohner became associated with the Department of Medicine, first as Instructor and then Assistant Professor, continuing for twelve years during which time he gained recognition as a fine teacher and competent clinician. The course in applied therapeutics conducted by Doctors Van Epps and Rohner, in which the professor of nutrition participated, became more popular with each succeeding year.

Dr. Howard impressed the student and colleagues by his immense capacity for work, his painstaking study of the individual patient and proper correlation of laboratory findings with those obtained by methodical physical examination, and above all by his unyielding professorial idealism. Students called him "King," which later became "Kink" but always in the spirit of affection and regard. Dr. Howard was able to attract promising young physicians to join his department, from Iowa, as well as graduates from Harvard, Pennsylvania, Michigan, Toronto, Chicago, and other institutions.

World War I disturbed medical education in Iowa as it did everywhere. Dr. Howard, true to his allegiance to the mother country, joined the Canadian Royal Army Medical Corps in March, 1915, as Major, and was assigned to the McGill Hospital Unit which later became the 3rd Canadian General Hospital, B.E.F., and arrived in France in June, 1915. He remained in service until early in 1917, when the United States entered the war, and returned to Iowa in order to permit other members of his staff to enter military service with the national army of the United States. Dr. Van Epps served as Major, Army Medical Corps, most of the time in France, and returned to Iowa City in July, 1919.

During Dr. Howard's absence in military service, two important legislative measures were enacted with reference to the admission of indigent patients to the University Hospital. At the legislative session in 1915 an Act was adopted that all crippled children under sixteen years of age be admitted on a county quota basis to the University Hospital for medical and surgical treatment. Two years later

this Act was amended to include all adult persons referred by county authorities to the University Hospital. These measures distinctly helped to increase the number of patients admitted to the medical service.

In August, 1917, came the sad news of the death of Lieutenant Revere Osler, only son of Sir William Osler and godfather of Dr. Howard's son, Dr. Palmer Howard, now Associate Professor of Medicine at the University of Oklahoma. He was badly wounded during severe artillery action in the Ypres salient. An excerpt from the diary of Harvey Cushing, in his *Life of Sir William Osler*, tells the tragic story: "We saw him buried in the early morning in a soggy Flanders field beside a little oak grove — an overcast, windy, autumnal day — the long rows of simple wooden crosses — the boy wrapped in an army blanket and covered by a weather-worn Union Jack, carried on the shoulders of four slipping stretcher bearers. A strange scene — the great-great-grandson of Paul Revere under a British flag, and awaiting him a group of some six or eight American Army Medical Officers, saddened with the thought of his father. Some green branches were thrown in the trench for him to lie on. The Padre recited the usual services — a bugler gave the "Last Post" — and we went about our duties. Plot 4, Row F."

Just a few years later, December 29, 1919, there came to a close the life of Sir William Osler at his home, 13 Norham Gardens in Oxford. Dr. Howard devoted an hour of his lecture period in tribute to the great Chief — "as one who had advanced the science of medicine, enriched literature and the humanities" — while he achieved many honours and many dignities, but the proudest of all was his unwritten title — The Young Man's Friend."

Dr. Howard encouraged young physicians in continued study and to engage in some form of medical research. The coming of Dr. Robert R. Gibson, A.B. Yale, 1902, Ph.D., 1906, into the medical faculty in 1919 greatly stimulated clinical investigation, particularly in the field of clinical chemistry. The same year Dr. Wesley E. Gatewood, B.A. Ohio State, 1911, M.A., 1913, M.D. Rush Medical College, 1915, who had just returned from military service in World War I, came from Chicago to be associated with the Department.

In 1922 Dr. Verne C. Graber, B.S. Iowa, 1918, M.D., 1920, and Dr. Clarence W. Baldrige, B.S. Iowa, 1920, M.D., 1921, were appointed to the teaching staff.

The following year Dr. Julian D. Boyd, M.D. Iowa, 1921, was appointed Assistant in the clinical laboratory. In 1926 he transferred to the Department of Pediatrics. Dr. John Clinton Shrader II, M.D. Iowa, 1922, and the grandson of the first Professor of Obstetrics, came in as hospital chemist, and Dr. Robert N. Larimer, M.D. Iowa, 1922*, came as Assistant in medicine. These appointments were distinct additions to the teaching staff and permitted a better co-ordination of the several educational courses.

After fourteen years, Dr. Howard had formed strong ties in Iowa, yet when the offer came in May, 1924, to become Professor of Medicine at McGill University Faculty of Medicine and physician to the Montreal General Hospital, he decided to accept. He resigned from his several positions in the University of Iowa as of July 1, 1924.

This announcement brought expressions of sincere regret from his many friends in the University and throughout the medical profession in Iowa, but all could understand the desire and thrill to return to the old home and take over the position of Professor of Medicine at McGill, his Alma Mater, and that of physician to the Montreal General Hospital, posts once held by his father, Dr. Robert Palmer Howard, and his former chief, Dr. William Osler. During his fourteen years of service as Professor of the Theory and Practice of Medicine, he made a large contribution to the advancement of Iowa medicine. It can be truly said that Dr. Campbell Howard brought the spirit of Osler to the State University of Iowa. A further accomplishment was the building of a solid and abiding tradition of high professional standards in the College of Medicine.

He was warmly welcomed by his Canadian colleagues and received continued recognition as a teacher and clinician. The students at McGill learned their medicine according to Osler as thoroughly as had the Iowa students before them.

Dr. Everett M. George, M.D. McGill, 1931, orthopedic surgeon,

*Consulting physician Internal Medicine, Sioux City, Iowa.

Des Moines, and editor of the *Journal of the Iowa State Medical Society*, refers to the teaching of Dr. Howard in the highest terms. Dr. Howard was elected president of the Montreal Medico-Chirurgical Society and became prominent in the affairs of the Canadian Medical Association. He continued his interest in medical societies in the United States, particularly in the Society for Clinical Investigation and the Association of American Physicians, in both of which he was honored with the presidency. During this period he contributed interesting articles to the Oxford and Nelson Loose Leaf Systems of Medicine on endocrinology and metabolism; to Forcheimer's *System of Therapeutics*; Osler and McCrae's *System of Medicine*, and current medical journals. He served on the McGill Senate as a representative of the Faculty of Medicine.

After he left, Dr. Howard made two visits to Iowa. In November, 1928, he attended the dedicatory exercises of the new University Hospital and Medical Center on the west side as the representative of McGill University, and again as guest speaker for the Iowa State Medical Society at the Des Moines session in May, 1931.

The many friends of Dr. Howard were grieved and distressed to learn of his untimely death on June 3, 1936, at the home of his former Iowa colleague, Dr. Charles J. Rowan in Santa Monica, California, as the result of thrombophlebitis and pulmonary embolism at 59 years of age. He had just completed a series of lectures at the University of Southern California Medical School in Los Angeles. His former Iowa faculty colleague, Dr. H. L. Beye, Professor of Surgery, accompanied the remains from Chicago to Montreal and represented the State University of Iowa at the final services.

It seems fitting to add this word of tribute and appreciation written by his associate, Dr. A. H. Gordon, *The Canadian Medical Association Journal*, Vol. 35, No. 1, July 1936: "Campbell Howard was a rock of a man, what he said, he said, and he meant it. What he was, he was, and there was no doubt about it. When a nickname sticks to a man, it's more than a nickname, it's a stamp of character, and when some student referred to Campbell Howard as "The Moose" he wrote his biography. He not only upheld but added to

the reputation of the Montreal General Hospital as a center for clinical teaching. He inspired his colleagues and his students with the ambition to do sound, thorough and honest work, and the effect of this inspiration has spread to a widening circle over the continent. As a student he was known as a football player, and in the later "nineties" the famous scrimmage trio of Ross, Howard and Grace brought much fame to McGill. But it is as a man and a friend that he will be remembered wherever rugged honesty and unswerving loyalty are held to be marks of a man. To no man could Kipling's lines on Lord Roberts be more fitly applied —

"Clean, simple, kindly, well beloved,
Flawless in faith and fame;
Whom neither ease nor honours moved
A hairsbreadth from his aim."

Fred M. Smith, M. D.

1924-1946



Born May 31, 1888, Yale, Illinois. State Normal School, Charleston, Illinois 1905-9; B.S. University of Chicago 1913; M.D. Rush Medical College 1914. Intern Presbyterian Hospital, Chicago, 1914-16; Assistant in Internal Medicine, Rush Medical College, 1916-18; Associate in Internal Medicine, 1918-20; Instructor of Internal Medicine, 1920-24; Assistant Professor, 1924; Professor and Head

of Department of Theory and Practice of Medicine; Physician-in-Chief, University Hospital, State University of Iowa, 1924-46; Lt. M.R.C., U.S.A., 1917-19. Cook County Medical Society; Chicago Society of Internal Medicine; Illinois State Medical Society; American Medical Association; American Society for Clinical Investigation; Association of American Physicians; American Physiological Society; American Society of Experimental Biology and Medicine; Fellow, American College of Physicians; American Board of Internal Medicine; Secretary and Chairman of the Section of Internal Medicine, American Medical Association, 1937-41; Chairman, Section of Medicine, Iowa State Medical Society, 1934; Editor, *American Heart Journal*, 1939-46; Author, *The Coronary Arteries*; American Encyclopedia of Medicine; "Diseases of Heart" — Musser Textbook; "Experimental Ligation of Coronary Arteries," 1918; Sigma Xi; Alpha Omega Alpha; Member Committee of the Medical Division of the National Research Council, 1942-45. Died February 23, 1946, of coronary occlusion.

* * *

The sixth occupant of the Chair of Medicine, Dr. Fred M. Smith, was also a young physician of sound training in scientific medicine with several years of experience in teaching in Rush Medical College and the University of Chicago.

Here he had come under the tutelage and inspiring direction of that master American clinician, Dr. James B. Herrick, with whom he was closely associated in clinical research, particularly the experimental obstruction of the coronary arteries and electrocardiographic studies. The classic experiments of Dr. Fred Smith published in 1918 furnished the first definite evidence that ligation of the left coronary artery in the dog produced myocardial lesions and a resulting negative T-wave in one or more leads of the electrocardiogram.

After coming to Iowa, his experimental and clinical researches on the therapeutic use of the xanthine series in the treatment of coronary artery disease were equally notable contributions to our knowledge of this disease.

Dr. Smith began his term of service with the session 1924-25,

and retained all the members of the teaching staff who had served with his predecessor. During the first three years he made practically no changes in the method of teaching. Dr. Smith, however, brought a freshness of approach to the study of internal medicine that was very stimulating. The staff in the Department of Theory and Practice of Medicine consisted of Professor Smith, Assistant Professors Rohner, Gatewood, and Gibson; Instructors Drs. Graber, Baldrige, Nelson, and Scarborough; Assistants Robert N. Larimer and Chester D. Awe. The plan of using a textbook in medicine, such as Osler's *Text*, with assignment of sections for recitation was continued, although collateral reading was encouraged. The course in therapeutics was conducted by Assistant Professor Rohner, in co-operation with Dr. Ruth Wheeler, Professor of Nutrition.

The clinical laboratory courses, ward classes, clinical clerkships, and amphitheatre clinics with service in the outpatient clinic were continued as before. The senior class in sections continued to attend lectures and clinical demonstrations in tuberculosis conducted by Dr. Scarborough at the Oakdale Tuberculosis Sanatorium. As far as his teaching duties would permit, Dr. Smith continued his research studies on the clinical aspects of coronary artery disease and its treatment. He strongly urged his associates in the department to become interested in some form of clinical research and to publish the results of the same. During 1925-26, a report on "Chronic Benzene Poisoning" by F. J. Rohner, C. W. Baldrige, and G. H. Hansmann was published in the *Archives of Pathology and Laboratory Medicine*, February, 1926, Vol. 1, pp. 221-26, and a few months later "Glandular Fever (Infectious Mononucleosis)" by C. W. Baldrige, F. J. Rohner, and G. H. Hansmann was published in the *Archives of Internal Medicine*, October, 1926, Vol. 38, pp. 413-48. This was followed by other publications of equally high merit.

A number of changes occurred in the teaching staff of the department in 1925. Dr. George I. Nelson*, M.D. Iowa 1923, who had served as clinical assistant and resident in medicine for the year

*Dr. Nelson was Professor Smith's first resident in medicine. 1925 Instructor in Medicine Ohio State University; 1936 Associate Professor; 1941 Clinical Professor of Medicine.

1924 to 1925, joined the Department of Internal Medicine, Ohio State University, as Instructor in Internal Medicine.

At the end of the year 1925-26, Dr. Robert N. Larimer resigned as Instructor in Clinical Microscopy and Physical Diagnosis to enter private practice in Sioux City.

During the year 1925-26, Dr. Julian D. Boyd, Instructor in Medicine, transferred to the Department of Pediatrics, where he rapidly gained recognition as a teacher and specialist in pediatrics.

Dr. George H. Miller, M.D. Pennsylvania, 1917, joined the teaching staff at the beginning of the 1926-27 session as Instructor in Medicine, having previously been a teacher for three years in the Department of Pharmacology. He conducted the teaching of the course in therapeutics with great success.

In the spring of 1927, Drs. W. E. Gatewood and C. W. Baldrige published an article on "Tissue Hypersensitiveness Following the Administration of Toxin-Antitoxin or the Phenomenon of Arthus" in the *Journal of the American Medical Association*, April 2, 1927, Vol. 85, pp. 1068-71.

The session of 1927-28 was quite eventful for the Department. Of considerable moment was the addition to the teaching staff of Dr. Horace M. Korns of Cleveland, Ohio, as Associate Professor. After graduating from Western Reserve University as Master of Science and Doctor of Medicine, Dr. Korns had an extended period of graduate study in European medical centers, after which he was appointed to the Faculty of Medicine of Western Reserve University as Assistant Professor of Medicine. As a student and member of the medical faculty at his Alma Mater, he came under the inspiring teaching of two great leaders in internal medicine, Dr. Charles F. Hoover and Dr. Roy W. Scott, who molded the method of instruction he perfected during his long period of service at our University. Dr. Korns soon gained the regard of students and colleagues as a fine teacher, particularly in the field of medical diagnosis.

The other event that developed during this session, which was more disturbing to the Department, was certain administrative changes in the College of Medicine. It is not within the province of this record to consider the reasons for such changes, except to

state that early in the session Dr. Charles J. Rowan, Professor and Head of the Department of Surgery, resigned. This was followed directly by the resignation of Dr. L. W. Dean as Dean of the College of Medicine and Professor of Ophthalmology and Otorhinolaryngology. These changes appeared to influence the resignations in the Department of Associate Professor F. J. Rohner, and Assistant Professor E. W. Gatewood and Instructor Verne C. Graber.

The loss of these able associates from his teaching staff was very disturbing to Dr. Smith as Head of the Department, and it was only with great personal effort and the fine assistance of Associate Professor Korns, Assistant Professor Baldrige, and Instructors Miller and Awe, that the courses of instruction were faithfully carried out.

Two young physicians were added to the instructional staff — Dr. Matthew J. Norton, M.D. Iowa, 1917, who remained only one year, and Dr. E. P. Scarlett, M.D. Toronto, 1924, who continued with the Department for three years, 1927-1930, as Instructor and Associate and then returned to Calgary, Alberta, Canada, where he has had a distinguished career as a specialist in internal medicine with the Calgary Associate Clinic.*

Early in 1928 Dr. Henry S. Houghton was chosen as Dean of the College of Medicine effective July 1, 1928. Dr. Houghton had spent most of his medical life in the Far East, having been Dean of the Peking Union Medical School and Director of the Hospital in Peking, China, for a quarter of a century. He impressed everyone with his learning, pleasing personality, and familiarity with the medicine of the Orient and particularly in the tropical diseases. It may well be said that the 1928-29 session ushered in a new era for the College of Medicine and the University in the completion of the new medical center on the west side. The first unit of the "new" College of Medicine, the Children's Hospital for Orthopedic Surgery and Pediatrics, the Psychopathic Hospital, and the Nurses' Hall had been completed previously. In 1928 was added the Medical Laboratories Building and the new University General Hospital with a

*Fellow Royal College of Physicians of Canada; American College of Physicians; Diplomate American Board of Internal Medicine; Awarded Coronation Medal 1937 and 1953; Member Board of Governors University of Alberta 1946-51, Chancellor of the University since 1951.

capacity of 750 beds. The University Hospital and Laboratory buildings on the east side, formerly used for teaching, were remodeled and devoted to other University purposes.

The completion of the west side medical campus was made possible through a gift from the General Education Board of the Rockefeller Foundation which was contingent upon the appropriation of an equal sum which was approved by the Fortieth General Assembly of the state of Iowa. Through these agencies a fund of \$4,500,000 was available, beginning in 1924. The University Hospital provided for 95 beds in medicine, in addition to the assignments of 61 beds for isolation; women's venereal, 34 beds, and men's venereal, 23 beds.

The dedicatory exercises on November 15, 16, 17, 1928, were very impressive, with many notable men in American medicine contributing to the program. Twenty-five university medical schools from the United States and Canada, the Peking Union Medical College, and nine national medical organizations were represented.

Addresses and clinical conferences were presented by Dr. Waller S. Leathers, Nashville; Dr. Dean Lewis, Baltimore; Dr. Alfred N. Richards, Philadelphia; Dr. Campbell P. Howard, Montreal; Dr. William J. Mayo, Rochester, Minn.; Dr. Frank C. Mann, Rochester, Minn.; Dr. Charles J. Rowan, Los Angeles; Dr. Herman L. Kretschmer, Chicago; Dr. James B. Herrick, Chicago; Dr. Ray Lyman Wilbur, Secretary of the Interior, Washington, D.C.; Dr. John Osborn Polak, Brooklyn, N.Y.; Dr. George H. Whipple, Rochester, N.Y.; and Dr. Joseph H. Brennemann, Chicago.

During this year, further new names appear on the teaching staff of the Department. It is interesting to note that Dr. Willis M. Fowler, M.D. Iowa, 1926, is listed as a member of the teaching staff for the first time, as Instructor in Medicine. Thus began a distinguished career in medical education and clinical medicine of more than a quarter century in the service of his Alma Mater.

Dr. Fern N. Cole, M.D. Iowa, 1926, joined the staff as Assistant, followed by two years as Associate and one year as Instructor, leaving the Department in 1932 to enter private practice. Dr. Lee Foshay, M.D. Pennsylvania, 1930, served as Assistant Professor of

Medicine for this one year and then accepted a position on the medical faculty of the University of Cincinnati.

At the beginning of the 1929-30 session, two new names appear on the teaching staff. Dr. Clifford W. Thomas, M.D. Iowa, 1927, was listed as Assistant in Medicine. He was promoted to Instructor the next year, after which he resigned to enter private practice at Mason City. Dr. Chester I. Miller, M.D. Iowa, 1926, began his teaching career this year at his Alma Mater. He remained with the Department as Instructor for five years, when he was transferred to the Student Health Service and joined the teaching staff of the Department of Preventive Medicine and Hygiene, later being appointed Professor in the Department of Preventive Medicine and Hygiene, and Associate Director, Student Department of Health.

During this year senior students, especially those with higher scholastic standing, were encouraged to take advantage of the facilities available, particularly in clinical chemistry under Professor Gibson, to take up some form of advanced study or research as well as other types of clinical investigation under the supervision of the Head of the Department.

In 1930 several changes are noted in the teaching staff. Dr. C. W. Baldrige was advanced to Associate Professor, nine years after his graduation from the College of Medicine. The name of Dr. William D. Paul, M.D. University of Cincinnati, 1929, appears for the first time as Instructor in Medicine. This was the beginning of a career in Iowa as a clinical teacher, particularly in physical and medical diagnosis. He introduced the gastroscope as a diagnostic aid, and later gained recognition in the field of physical therapy and rehabilitation. This same year Dr. Harry L. Landt, M.D. University of Cincinnati, 1927, joined the teaching staff, remaining three years as Assistant Resident, Resident, and Instructor in Medicine, after which he served one year in cardiology in Michael Reese Hospital, Chicago, when he returned to Cincinnati as cardiologist of the Jewish Hospital, and Instructor in Internal Medicine at the University of Cincinnati School of Medicine. This year Dr. C. W. Baldrige and Dr. C. D. Awe published their study of 150 cases of Lymphoma in the *Archives of Internal Medicine*, February, 1930,

Vol. 45, pp. 161-190, which attracted wide interest. At the close of the academic year Dr. Chester D. Awe, Instructor, retired from the Department to enter private practice in internal medicine in El Paso, Texas.

In 1931-32 further changes are noted in the staff and teaching methods of the Department. Associate Professor C. W. Baldrige had been granted a sabbatical year leave to pursue graduate study in physiology with Professor A. J. Carlsen at the University of Chicago, in preparation for the degree of Doctor of Philosophy. Dr. Herbert W. Rathe*, M.D. Iowa, 1925, was appointed as Instructor during the absence of Dr. Baldrige. During this year of service Dr. Rathe was encouraged by Professor Smith to work with Dr. Fowler and Dr. Paul on a number of problems, one of which was to determine the electrocardiographic changes in pericardial injury. During this year, Dr. Kate Daum, Ph.D. University of Chicago, 1925, was appointed Assistant Professor of Nutrition, beginning a career of distinction as an educator that continued to add prestige to the University in that special field of medical service and research.

A series of elective courses of eight hours each was instituted this year, during the second semester of the senior year. Two new courses were introduced, for groups of fifteen students each. One on cardiovascular diseases was in charge of Associate Professor Korns, and the other on diseases of the digestive system was under the direction of Professor Smith. Other groups of four students each were given a special course in the outpatient clinic in charge of Associate Professor George H. Miller and Instructor Dr. Fowler. These elective courses became very popular.

For a number of years, Dr. Smith had become interested in the functional disorders of the digestive tract. This was in addition to his continued interest in coronary heart disease. During the period of the economic depression, 1928-29, there were many patients who were afraid they were going to lose their homes or their money and thus were greatly worried. Therefore, the majority of patients presenting themselves with digestive trouble were of a functional nature, and only a small percentage had organic lesions.

*Consultant in Internal Medicine, The Rohlf Memorial Clinic, Waverly, Iowa.

At the close of the year 1932, Dr. George H. Miller, Associate Professor, terminated his teaching in the Department to assume the position of Professor of Medicine and Dean of the Medical Faculty of the American University at Beirut.

He returned to the United States in 1944 to become Director of Educational Activities, American College of Surgeons in Chicago, and since 1952 has been Assistant Director of the College.

While at the University Dr. G. H. Miller published alone or in conjunction with Professors F. M. Smith, O. H. Plant*, V. C. Graber, or W. M. Fowler, eighteen articles on the action of various drugs on the muscular activity of the alimentary canal; the coronary circulation, and the demonstration of a digitalis-like body in dropsical fluids of patients treated with digitalis.

With the beginning of the session 1932-33, Dr. Willis M. Fowler is listed as Assistant Professor and two notable additions are made to the teaching staff. Dr. James A. Greene, M.D. Harvard, 1925, was appointed Instructor in Medicine and during the following eleven years of service with the Department he became recognized as an excellent teacher and leader in internal medicine. In 1942, when he had attained the rank of Associate Professor, he entered military service, and at the close of World War II in 1946 he became Professor and Head of the Department of Internal Medicine at Baylor University College of Medicine, Houston, Texas.

The other new member of the staff was Dr. Elmer L. DeGowin, M.D. Michigan, 1928, who was to add further distinction to the Department and the University during the succeeding years. Another addition to the staff was that of Dr. Julia Cole, M.D. Colorado, 1930, who was appointed Instructor in Medicine, remaining until 1936 when she entered practice at Ames. In the announcement 1935-36, her name is listed as Dr. Julia Cole Weldon.

The course in therapeutics, formerly in charge of Associate Professor Miller, was conducted this year by Professor Smith, assisted by Assistant Professor Kate Daum.

In 1933, the only addition to the teaching staff was that of Dr. Hyman M. Hurevitz, M.D. Iowa, 1930, as Assistant and Instructor

*Professor of Pharmacology.

in Medicine, remaining three years with the Department. He gained wide recognition as a successful teacher. He entered private practice in Davenport.

Certain changes are noted in the courses of instruction — two elective courses were added, one in special diagnostic methods and the other in special therapeutic procedures, both of which became very popular. The courses in clinical medicine were extended to include more bedside teaching, and the amphitheatre clinics were conducted separately for the junior and senior classes. The ward classes were extended to four hours per week for both junior and senior students, each being required to spend one entire semester in the wards. While on this service, the student was required to prepare a detailed clinical history of each patient in his service, with physical and laboratory findings, and to follow the course of the patient's illness while in the hospital.

During the session 1934-35, there were no additions to the teaching staff, but a great loss was sustained by the Department, the College of Medicine, and the University in the tragic death of Associate Professor Dr. Clarence W. Baldrige on November 22, 1934, as the result of an automobile accident, while on his way to Fort Madison to give a lecture in connection with an extension course being given in that city. It is fitting to add this tribute and appreciation by his chief, Professor Fred M. Smith in the *Journal, Iowa State Medical Society*, December, 1934, p. 638:

CLARENCE WILLIAM BALDRIDGE, M.D.
1896-1934

AN APPRECIATION

"He was born in Strawberry Point, Iowa, September 4, 1896. After graduation from high school, he entered the State University of Iowa, receiving the degree Bachelor of Science in 1920, and Doctor of Medicine in 1921. Following his graduation he was selected as an Intern in the Department of Theory and Practice from 1921 to 1922, and subsequently promoted to Clinical Assistant in 1922; Lecturer in Clinical Microscopy, 1923; Lecturer in Medicine, 1924; Assistant Professor in Medicine, 1927; and Associate Professor, 1930.

Dr. Baldrige was a member of the Johnson County Medical Society, the Iowa State Medical Society, the American Medical Association, the Iowa Clinical Medical Society, the Central Clinical Research Club, the Central Society for Clinical Research, the Society for Experimental Biology and Medicine, and the American Society for Clinical Investigation.

His election to sectional and national medical societies, largely through the recognition of his investigations, came in rapid succession during the past few years.

During the year 1924 and 1925, Doctor Baldrige spent much of his time in the Department of Pathology. This not only extended his knowledge and intensified his interest in this field, but had a very significant influence on his subsequent development in internal medicine.

In 1931 he was granted a leave of absence for study in physiology with Professor Carlsen of the University of Chicago. His ability was appreciated by Professor Carlsen, who urged that he work toward the degree of Doctor of Philosophy in physiology. He had completed the requirements for this degree, which would have been conferred by the University of Chicago at the Christmas convocation.

Doctor Baldrige possessed the unusual qualifications of an excellent clinician, an inspiring teacher, and nationally recognized investigator. His publications pertaining particularly to the diseases of the blood and the field of metabolism were rapidly attracting widespread attention, and he was coming to be regarded as one of the outstanding younger men in American medicine. With his broad basic background, his analytic mind, his accomplishments to date, and his ability to drive toward a given objective, he was assured of a distinguished career in medicine."

* * *

Among the new names listed on the teaching staff for the session was that of Dr. Alta Edward Feller, M.D. Iowa, 1933, as Assistant in Medicine. He was promoted to Instructor the next year and remained with the Department until 1941, when he entered military service. At the close of World War II he became a member of the Medical Faculty of the University of Virginia, where he now holds the Chair of Microbiology. While at Iowa, his teaching was mostly in the outpatient clinic.

The other new member of the teaching staff was Dr. Raymond Gregory, M.A. Texas, 1923, Ph.D. Minnesota, 1927, M.D. Minnesota, 1929, who remained only one year when he became Assistant Professor of Medicine in Louisiana State University School of Medicine, 1936-38, after which he was appointed Professor of Medicine, University of Texas, at Galveston.

A therapeutic clinic was added this year, conducted by Professor Smith, Professor Steindler (orthopedics), Professor Kerr (radiology) and Professor Daum (nutrition).

In 1936, Dr. Stanley F. Hampton, M.D. Washington, 1934, was appointed Assistant in Medicine, being one of the teachers in physical diagnosis for one year.

Another addition to the staff was Dr. William Lloyd Randall, M.D. Iowa, 1934, who remained with the Department during two sessions, then entered private practice at Hampton, Iowa.

For the session 1937-38, two new members of the teaching staff are listed as follows: Dr. Robert L. Stephen, M.D. Washington, 1935, who was appointed Assistant in Medicine and the following year, Instructor, serving for two years until 1939.

Dr. Julian E. McFarland, M.D. Iowa, 1931, returned to the Department for one year as Instructor.

Dr. Leslie William Swanson, M.D. Iowa, 1936, joined the staff of the Department for the fall session in 1938 as Resident Assistant, being promoted to Instructor the next year and remaining until 1942, when he entered private practice at Mason City, Iowa.

It is noted that Dr. Clarence Van Epps, Professor of Neurology, was added to the teaching staff of the outpatient clinic.

Dr. John H. Peck of Des Moines, who had gained a national recognition as a specialist in tuberculosis, had been appointed as superintendent of the Sanatorium for Tuberculosis at Oakdale, and he was named a special lecturer in tuberculosis in the Department. A new plan of teaching tuberculosis was arranged by having the senior class divided into small groups. They remained in residence at the Sanatorium for a period of two weeks each, during which time, they were given an intensive course of clinical instruction in tuberculosis by Dr. Peck and members of his staff.

With the session 1939-40, certain changes were made in the clinical instruction. Amphitheatre clinics were again presented to the combined junior and senior classes and increased to three clinics each week. Clinical clerkships were arranged for the junior class, the duties being similar to those of a junior intern, and checked by the assistant resident and attending physician. In the outpatient clinic, each senior student was required to spend two weeks in this service, in which the clinical examination, diagnosis, and suggested treatment was supervised by the attending physician.

At the beginning of the session 1940-41, Dr. Lewis E. January, M.D. Colorado, 1937, appears on the instructional staff, and thus began a notable career in teaching at the State University of Iowa. He had served as junior intern at the Iowa University Hospital and three years as resident physician. Another addition to the teaching staff is that of Dr. Raleigh Henry Lage, M.D. Iowa, 1937, who served one year as Assistant and another as Instructor.

A new course in laboratory diagnosis for the sophomore class was introduced this year for the purpose of teaching the significance and technique of practical laboratory procedures as related to clinical diagnosis. It was directed by Associate Professor Fowler.

With the opening of the session 1941-42, World War II was entering its third year. Following the attack on Pearl Harbor December 7, 1941, the United States declared war on Japan and Germany and the resulting state of war had a very disturbing effect on the teaching and the student body throughout the entire College of Medicine. Title changes are noted in two members of the staff — Dr. William D. Paul is promoted to Assistant Professor and Dr. Elmer L. DeGowin to Research Assistant Professor. Two resident physicians were added to the teaching staff — Dr. George Lord Parkin, M.D. University of Cincinnati, 1940, who remained one year and Dr. Robert A. Towle, M.D. Wisconsin, 1939, who resigned during the year. In this year Assistant Professor Paul instituted his first course in physio-therapy. This was gradually extended and became very popular.

On July 1, 1942, the State University of Iowa College of Medicine, with seventy-seven other University Medical Schools in the United

States, started the accelerated plan of medical training of three continuous calendar years of twelve months each, followed by an abbreviated hospital internship of nine months. Under this plan the requirements for a medical degree and additional hospital internship were completed in forty-five months or fifteen months sooner than under the regular plan. The co-operation of the student in more intensive study with sacrifice of vacations, and the devotion of the faculty members who carried on the increased work under adverse conditions, is deserving of highest praise, and was a distinct contribution to the war effort.

Associate Professor James A. Greene, Doctors Feller, January, Lage, Hardin, and Swanson had entered military service by July 1, 1942, and were absent from the teaching staff after that date. Thus, from July 1, 1942, to July 1, 1945, Professor Smith with Associate Professors Kornes and Fowler and Assistant Professors DeGowin, Paul, and Daum carried the entire teaching load for the Department. It was a service in the war emergency comparable to that with the military forces.

On October 18, 1942, at 63 years of age, Dr. John H. Peck, Lecturer in Tuberculosis, died of coronary thrombosis at Oakdale Sanatorium, where he was superintendent. Thus closed a distinguished career in the field of tuberculosis. He had been a lecturer in tuberculosis in the Department since 1938, having formerly been in the practice of internal medicine and tuberculosis in Des Moines. He was a pleasing lecturer and stimulated the students' interest in the clinical study of tuberculosis. His biographic record is impressive: "A graduate in medicine from Iowa in 1909; Instructor in Medicine 1910-13; Charter member Iowa Tuberculosis Association 1915; President, 1918-34; President, Iowa State Medical Society, 1930; President, National Tuberculosis Association, 1932; President, American College of Chest Physicians, 1940; Fellow American College of Physicians; Diplomate American Board of Internal Medicine, 1937."

During the three years of the war period from 1943 to June 1945, there were no special changes in the teaching curriculum, and every

effort was made to maintain the highest possible standards under the accelerated plan of training.

During this period the following assisted in the teaching of laboratory and clinical medicine: Dr. Don W. Chapman, M.D. Iowa, 1939, for one year, 1943-44; Dr. Earl H. Antes, M.D. Iowa, 1941; Dr. William P. Logan, M.D. Nebraska, 1940; and Dr. William G. Rence, M.D. Rush, 1945, for the two years 1943-45.

Dr. William M. Spear, M.D. Queens University, 1933, the new superintendent of the Oakdale Sanatorium, became Lecturer on Tuberculosis and conducted the clinical conferences for groups of senior students as developed by his predecessor, Dr. John H. Peck.

Dr. Elmer L. DeGowin, Associate Professor, served on the National Research Council during the period of World War II and had an important part in the development of blood banks for distribution to the military forces, especially in determining the fundamental principles and procedure governing the same.

During the year Professor Horace M. Kornis resigned to become Consultant in Internal Medicine with Physicians Associates of Dubuque. There was general regret to have Doctor Kornis leave the Department after nearly twenty years of outstanding service as a teacher of clinical medicine.

On February 23, 1946, occurred the tragic death of Dr. Fred M. Smith, Professor of Medicine and Head of the Department of Internal Medicine, as the result of coronary thrombosis at the age of 57 years. It is fitting to record an appreciation as it appeared in the *Journal of the Iowa State Medical Society*, April 1946.

FRED M. SMITH, M.D.

1888-1946

AN APPRECIATION

"The many friends of Dr. Fred M. Smith were shocked and grieved to learn of his sudden death at his home in Iowa City on February 23, 1946, at the age of 57 years. It seems particularly tragic to have him taken from us at the height of a career of great usefulness and leadership in medical education and clinical research. Through his prominence in the field of cardiovascular diseases, he

extended the prestige of Iowa medicine and our University Medical School far beyond the borders of this, his adopted State.

Since 1938 he was editor-in-chief of the *American Heart Journal*, and contributed the chapters on heart disease in Musser's Textbook, and Cyclopedia of Medicine. He served as Chairman of the Section on Medicine in the Iowa State Medical Society in 1934, as well as Chairman of the Pneumonia Committee. He served three years as Secretary, and the following year, 1940-41 as Chairman of the Section on Practice of Medicine of the American Medical Association. During the period of World War II he served on the Committee on Medicine in the Division of Medical Sciences, National Research Council.

During his twenty-two years of service, the longest as Professor of Medicine, since the founding of the medical school in 1870, a large number of young physicians served on his staff who are now attaining leadership as teachers and clinicians in different parts of the United States and Canada. They all speak in warmest terms of his kindness, and his stimulating influence as a clinical teacher and his fine attitude towards his patients.

His first great chief, Dr. James B. Herrick of Chicago, who attended the final services at Iowa City, stated that he regarded Fred Smith as a son and felt his loss very keenly.

He was a member of Sigma Xi Honorary Scientific and Alpha Omega Alpha Honor Medical Societies, and held membership in the Iowa State Medical Society, American Medical Association, Association of American Physicians, American Society for Clinical Investigations, American Physiological Society, Society for Experimental Biology and Medicine, and the Chicago Society of Internal Medicine.

He represented the Section of Practice of Medicine as a member of the House of Delegates of the American Medical Association since 1940, and at the 1945 session was Chairman of the important reference Committee on Medical Education and Hospitals.

Dr. Smith succumbed to coronary artery disease, to the knowledge of which he had contributed so much.

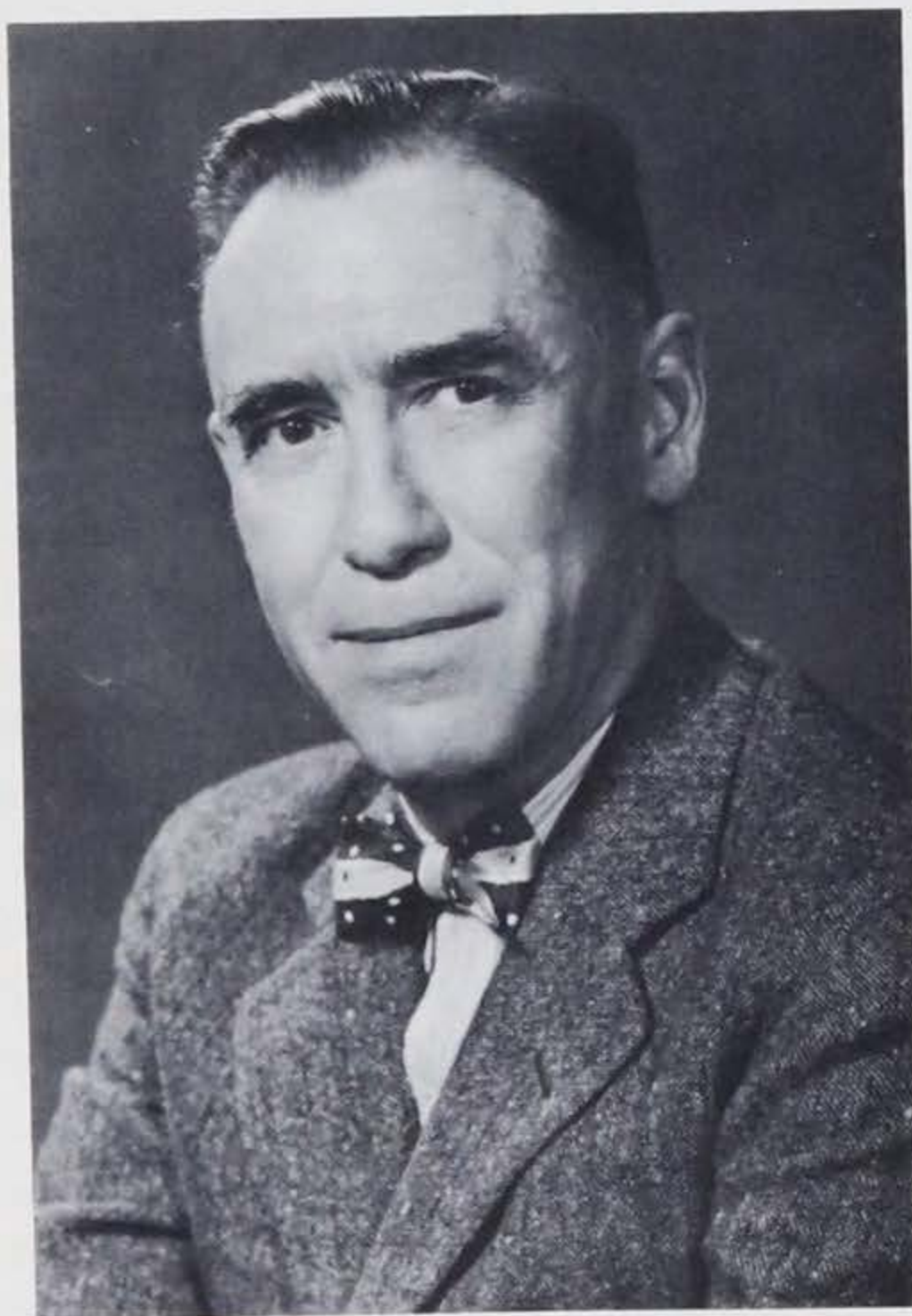
"We shall miss his genial fellowship and above all, his inspiring leadership in scientific medicine."

W. L. B.

On February 26, 1946, Dr. Willis Marion Fowler, Professor of Medicine was appointed Acting Head of the Department of Theory and Practice of Medicine, and Chief Physician to the University Hospital, Iowa City.

Willis Marion Fowler, M. D.

1946-1948



Born Walton, New York, August 11, 1900. High School Jefferson, Iowa; B.A. Grinnell College, 1922; M.D. Iowa, 1926. Internship, City Hospital, Cleveland, 1926-27; Senior Intern, Henry Ford Hospital, 1927-28; Resident in Medicine, University Hospital, Iowa City,

1928-29; Instructor in Medicine, State University of Iowa, 1929-32; Assistant Professor of Medicine, State University of Iowa, 1932-35; Associate Professor of Medicine, 1935-44; Professor of Medicine, State University of Iowa, 1944- ; Acting Head, Department of Theory and Practice of Medicine, State University of Iowa Hospitals; Chief Physician, University Hospital, February 26, 1946-48. Honor Societies: Sigma Xi, Alpha Omega Alpha. Professional: Johnson County Medical Society (past President); Iowa State Medical Society, Chairman Section of Medicine, 1946; American Medical Association; American Society for Clinical Investigation; Central Society of Clinical Research, President, 1945; Central Interurban Clinicians Club, Secretary, 1945; Central Clinical Research Club, President, 1944-46; Society for Experimental Biology and Medicine; Central Hematological Club, President, 1944; Iowa Clinical Medical Society, past Secretary; Fellow of the American College of Physicians, Governor for Iowa; American Board of Internal Medicine, 1937; American Association for the Advancement of Science; Fellow Intern; Society of Hematology; American Heart Association; Association of American Physicians; Joint Commission Creditation of Hospitals; Author, *Hematology*, Edit. 1945-49.

* * *

Dr. Willis M. Fowler, the seventh Professor of Medicine and Head of the Department, was the third alumnus of the College of Medicine for that post. The others were Lawrence W. Littig, M.D. Iowa, 1883, and Walter L. Bierring, M.D. Iowa, 1892. He came to his new responsibilities with the ripe experience of eighteen years as a member of the teaching staff, from Instructor to Professor, in every phase of undergraduate training in clinical medicine. Through his research studies in experimental myocardial infarction and publications of gastro-intestinal diseases as well as iron deficiency anemias, his acknowledged leadership in medical education had gained for him affiliation with the leading national medical and scientific societies. His textbook, *Hematology*, published in 1945 was accepted for authoritative reference by practitioners, clinicians, and medical educators. A revised edition appeared in 1949. The interesting chapter on Transfusion of Whole Blood and Blood Derivatives was

contributed by his colleague, Associate Professor of Medicine, Dr. Elmer L. DeGowin, who had gained pre-eminence in this field. Even though his staff was limited to Associate Professor Daum and Assistant Professors Drs. DeGowin, Paul, and Hardin, he resolved to carry on the courses of instruction for the remaining months of the academic year 1945-46, as planned by his lamented predecessor, Dr. Fred M. Smith, and this was faithfully accomplished by reason of devoted co-operation of his associates. It was fortunate that Assistant Professor Robert C. Hardin was able to resume his teaching duties after a distinguished army service — from Captain to Lieutenant Colonel — principally in the European Theatre of Operations. As senior consultant of the Blood Transfusion and Shock Diseases, he was responsible for the Blood Bank Service of the Allied armies. He was awarded the Legion of Merit Decoration.

In April, 1946, Dr. Walter L. Bierring of Des Moines, upon the recommendation of the Faculty of Medicine, was appointed Professor of Medicine Emeritus. On July 1, 1946, the accelerated courses carried on during the period of World War II were discontinued and the regular twelve months hospital internship was restored, and so the former academic curriculum of four years of nine months each was re-established with the opening of the session 1946-47.

An important addition to the teaching staff was the return from military service of Assistant Professor Lewis E. January. He had served with distinction in World War II as Chief of Medical Service at Station Hospital Army Air Base, Moses Lake, Washington, Army Air Base Hospital, McCook, Nebraska, and Regional Hospital Army Air Force, Ryote, Texas. He published an article on "Sub-acute Bacterial Endocarditis Treated with Penicillin" in the *Air Surgeon's Bulletin*, January, 1945. He received the Commendation Ribbon in 1945 and was discharged in April, 1946, as Lieutenant Colonel, U.S.A.

Professor Fowler continued as Director of the Clinical Laboratory, but the courses in physical diagnosis, clinical medicine, amphitheatre clinics, clinical clerkships, ward classes, and medical outpatient department were conducted by the entire staff. Dr. Spear continued the lectures and ward conferences in tuberculosis in the State Sana-

torium at Oakdale. Assistant Professor Paul conducted as before, the two-hour weekly courses in physical therapy. With the re-organization of the professional staff of the Veteran's Administration Hospital, Des Moines, a Dean's Committee was appointed comprising Dr. Evan M. MacEwan as Chairman, Dr. W. M. Fowler, and Dr. Stuart C. Cullen of Iowa City and Dr. Lester D. Powell and Dr. Walter L. Bierring of Des Moines. Dr. Daniel J. Glomset of Des Moines was appointed Acting Chief of Medical Services with the academic title of Assistant Clinical Professor of Internal Medicine in the College of Medicine. Drs. E. D. Warner, W. M. Fowler, Robert C. Hardin, and S. C. Cullen of Iowa City were appointed Consultant in Pathology, Medicine, and Surgery, respectively at the V.A. Hospital, Des Moines, with Dr. L. D. Powell and Dr. Joseph B. Priestley Consultants in Surgery, with Dr. Walter L. Bierring, Consultant in Medicine, from Des Moines. In 1952, Dr. Herman J. Smith, Des Moines, became Consultant in Internal Medicine. Several other members of the faculty of the College of Medicine also were appointed as Consultants and regular clinical conferences were arranged for the resident and staff members at the V.A. Hospital, Des Moines.

Before the opening of the session 1947-48 on September 2, 1947, occurred the tragic death of Dr. Evan M. MacEwan, the Dean of the College of Medicine since 1935, and formerly Professor and Head of the Department of Anatomy. An alumnus of the College of Medicine (M.D. Iowa, 1912), he received the degree Master of Science in 1915. He became Assistant in Anatomy in 1914, Instructor in 1915, and Professor in 1920. After his appointment as Dean, he gained leadership in the broader field of medical education, which was recognized by his election as President of the Association of American Medical Colleges in 1943. During his period of service as Dean, he distinctly influenced the highest standards of medical training and definitely harmonized the interests of the medical profession and the University Medical School. With the opening of the session 1947-48, the College of Medicine was able to resume the regular curriculum in all departments, with hospital internships and residencies established as before. In the Department of Internal

Medicine, Doctors DeGowin and Paul had been promoted from Assistant to Associate Professor, who with Associate Professor Daum and Assistant Professors Robert C. Hardin and Lewis E. January formed a teaching staff under Professor Fowler that permitted instituting courses of instruction not possible during the war period.

The courses in laboratory and physical diagnosis were conducted during the sophomore year and extended into the junior year with proper correlation with the more advanced courses in clinical medicine. By dividing the class into small groups, the student was brought in close contact with his instructor. The special courses in medical diagnosis and applied therapeutics, with the opportunity of bedside instruction and attendance at the outpatient clinic, developed in the student a greater sense of responsibility in physician-patient relationships. The clinical clerkships and service as junior interns were important steps in the training for medical practice. The weekly clinico-pathological conference had become an important factor in promoting a wider interest in medicine as a whole and closer relationship with the other clinical services. It was an academic year of general satisfaction to all concerned. This was largely due to Professor Fowler, whose prestige and recognized leadership in internal medicine had successfully carried the Department through the transition period and established all the courses of instruction on a pre-war basis.

There was a general regret when Professor Fowler asked to be relieved as Head of the Department as of July 1, 1948, because the responsibilities and administrative duties interfered too much with his interests in teaching and clinical research.

On July 1, 1948, the new Dean of the College of Medicine, Dr. Mayo H. Soley entered upon his duties. He came to the State University of Iowa from California, where he had served as Professor of Pharmacology and Medicine as well as Assistant Dean in the University of California School of Medicine. Dr. Soley was a graduate in medicine of Harvard Medical School in 1933, which was followed by two years as House Physician, Massachusetts General Hospital, when he was appointed Research Instructor in Physiology at the University of California School of Medicine, promoted a few

years later to Assistant Professor, and in 1942 Chairman of the Division of Pharmacology. In 1947, he was appointed Professor of Medicine and Assistant Dean of the Medical School. In addition to his appointment as Dean of the College of Medicine, he became Professor of Research Medicine in the Department of Internal Medicine.

After careful consideration of a number of leading university teachers of internal medicine, Dr. William Bennett Bean, of the University of Cincinnati, was selected and his appointment as Professor and Head of the Department of Internal Medicine was recommended by the Medical Faculty and officially approved by the President and State Board of Education effective July 1, 1948.

Dr. Willis M. Fowler continued with the Department as Professor of Internal Medicine.

William Bennett Bean, M. D.

1948-



Born November 8, 1909, Manila, P.I. B.A. University of Virginia 1932; M.D. University of Virginia, 1935. Instructor of Anatomy, University of Virginia, 1932-35; Intern, Medical Service, Johns Hopkins University Hospital, 1935-36; Teaching Fellow in Medicine, Thorndike Medical Laboratory, Harvard Medical School, 1936-37;

Resident in Medicine, Cincinnati General Hospital, 1937-38; Instructor in Medicine, University of Cincinnati, 1938-40; Assistant Professor of Medicine University of Cincinnati, 1940-47; Assistant Visiting Physician, Hillman Hospital, Birmingham, Alabama, 1940-42; Associate Professor of Medicine, University of Cincinnati, 1947-48; Attending Physician, Cincinnati General Hospital, 1946-48; Professor of Medicine and Head of Department of Internal Medicine, State University of Iowa, 1948- ; Physician-in-Chief, University Hospitals, 1948- . Diplomate: American Board of Internal Medicine, 1947; Nutrition, 1951; Alpha Omega Alpha, 1934; Sigma Xi, 1939; U.S. Army, Director Hot Room Research, Armored Medical Research Laboratory, 1942-43; Director of Nutrition Research, Pacific Theatre, 1945; Commander, 1945-46; Unit Citation; Commendation Ribbon, 1946; Captain, Medical Corps, U.S.A., 1942; Major, 1944; Lt. Col., 1946; Special Consultant, Surgeon-General Army, 1954. Associations: American Medical Association; American Society for Clinical Investigation; American College of Physicians; American Heart Association; Central Society for Clinical Research, President, 1950-51; American Society for Tropical Medicine; Central Interurban Association of American Physicians; American College of Chest Physicians; Clinical Club, (President, 1958-59) American Clinical and Climatological Association; Fellow, New York Academy of Science; World Medical Association; American Association for the Study of Liver Diseases; Society for Experimental Biology and Medicine; American Medical Writers Association; Ohio State Medical Society; Iowa State Medical Society; Iowa Heart Association (President, 1950); Iowa Tuberculosis and Health Association; Iowa Clinical Medical Society; Senior Consultant, Veterans Administration, 1947- ; Special Consultant to the Iowa Selective Service, 1949- . Iowa Chapter Archeology Institute of America, President, 1955-58; Society of Medical Consultants to the Armed Forces, 1954; American College of Sports Medicine, 1954; The Horse Shoe Club, 1954; Vice-President, American Association for the Advancement of Science, 1957, Chairman, Section on General Medicine; National Advisory Committee, Grand Rounds, Upjohn Company, 1957; Board of Regents, National Medical Library, 1957. Editorial Boards:

Nutrition Reviews, 1945-46; *Journal of Clinical Investigation*, 1947-52; *Journal of Laboratory and Clinical Medicine*, 1948-52; *Journal of Medical Education*, 1953- ; *Diseases of the Chest*, 1951- ; American Medical Association *Archives of Internal Medicine*, 1953; *Medicine*, 1953- ; *Monographs in Medicine*, 1952; *The Pharos*, 1955- . Advisory Editorial Board, *Resident Physician*, 1956- ; Book Review Editor, A.M.A. *Archives of Internal Medicine*, 1955- ; Editorial Board, *Perspectives in Biology and Medicine*, 1957- .

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Dr. William Bennett Bean was chosen as the eighth occupant of the Chair of Medicine since the founding of State University of Iowa Medical School in 1870. He assumed the duties of Professor and Head of the Department of Internal Medicine before the opening of the college session in July, 1948.

He came to his new post after eleven years of teaching experience in the Department of Internal Medicine at the University of Cincinnati College of Medicine, as Instructor and Assistant and Associate Professor. This period included three summers, 1940-42, as assistant visiting physician at The Hillman Hospital, Nutrition Clinic, and four years of service with the Medical Corps, U.S.A. in World War II. He was Director of Medical Research, Nutrition Research Team, Pacific Theatre, and later Commanding Officer, Armored Medical Research Laboratory, being discharged May 28, 1946, as Lieutenant Colonel, with Unit Citation and Commendation Ribbon. He had gained earlier teaching experience as student instructor in anatomy for three years, 1932-35, at the University of Virginia. Following a year's internship in medicine at Johns Hopkins University Hospital he served one year as teaching Fellow at the Thorndike Memorial Laboratory and Harvard Medical School.

Dr. William Bennett Bean lived his young and formative years in old Virginia, the land of his forebears, extending back to early colonial days. However, he was born in far away Manila, Philippine Islands, in 1909 where his father, Dr. Robert Bennett Bean was Director of the Anatomical Laboratory, University of the Philippines, from 1907 to 1910. The senior Dr. Bean was one of the leading anthropologists and teachers of anatomy of his time. He was a

graduate in medicine from Johns Hopkins University in 1904, where he came under the inspiring influence of Mall, Osler, Welch, and Halsted which left an enduring impression. One year after graduation in medicine, he was chosen Assistant Professor of Anatomy at the University of Michigan, Ann Arbor, remaining two years until his appointment at the University of the Philippines. Upon his return to the United States in 1910, he became Professor of Anatomy at Tulane University in New Orleans, coming to the University of Virginia in 1916 as Professor and Head of the Department of Anatomy, for a distinguished career as educator and scientist for more than a quarter century, until his death in 1944.

In later writings Dr. William Bennett Bean has acknowledged his debt to parents and early teachers for "the love of reading, a care for fine books, the potential beauties of language as a medium for ideas, the illumination of the classics . . . the spirit of Osler, as well as the disciplines of scholarship in a University setting, in which Jefferson's influence was pervasive in much more than just the grace and dignity of its beautiful buildings."

In entering upon his duties as Head of the Department of Internal Medicine, Dr. Bean was fortunate in his associates, Professor Willis M. Fowler, Research Professor Mayo H. Soley, Associate Professors Elmer E. DeGowin, William D. Paul, Kate Daum, and Assistant Professors Robert C. Hardin and Lewis E. January, all having had extensive teaching experience, with a broad knowledge of medicine as well as special training in certain fields.

It is interesting to note that Dr. Mayo H. Soley, Professor of Experimental Medicine, had come to the State University of Iowa a month before to become Dean of the College of Medicine, coming here from the University of California at San Francisco, where he had been Assistant Dean of the School of Medicine and Professor of Medicine and Pharmacology. Following his graduation from Harvard Medical School in 1933, and after serving two years as Resident Physician, Massachusetts General Hospital, he was appointed Instructor in Research Physiology at the University of California School of Medicine, San Francisco. A few years later he was appointed Assistant Professor, and in 1942 became Chairman

of the Department of Pharmacology. In 1947 he was appointed Assistant Professor of Medicine, and Professor one year later. For the year 1947-48 he was Assistant Dean of the Faculty of Medicine. He had gained a wide recognition for his research in endocrinology and diseases of the thyroid gland, particularly in the determination of protein bound iodine and the use of radioactive iodine in the diagnosis and treatment of goitre and other diseases of the thyroid. It was partly through his efforts that the thyroid clinic became established, which proved such a valuable aid in clinical teaching in that field.

In addition to his arduous duties as Dean of the College of Medicine he continued his research studies on radioactive iodine, protein bound iodine, and clinical differentiation of various types of non-toxic goitre, which were presented before leading medical associations and added greatly to the prestige of our University Medical School. Fate destined that this brilliant and inspiring career should come to a close within a short year, and it is fitting in this history to record a part of the tributes to his great soul, coming from a host of friends throughout the medical world.

× MAYO HAMILTON SOLEY, M.D.

1907-1949

AN APPRECIATION

"The many friends of Dr. Mayo H. Soley in Iowa and throughout the medical world were deeply grieved by his sudden death at Iowa City on June twenty-first. He had been with us but a short year, yet he won our highest regard and sincere admiration for his attractive personality, rare intellect, and clinical acumen. He came to Iowa from the University of California Medical School, where his clinical studies on the use of radioactive iodine in thyroid disease and other fields of pharmacology research had gained for him the widest recognition.

Dr. Soley was born in Malden, Mass., April 14, 1907. After receiving his Bachelor of Science degree at Bowdoin College in 1929, he entered the Harvard University Medical School and was granted the degree of Doctor of Medicine in 1933. Following graduation, he served as house officer in the medical service of Massachusetts

General Hospital, Boston, from 1933 to 1935. He then was attracted to the University of California Medical School, where he served successively as special graduate student in medicine, Research Assistant in Medicine, Instructor in Physiology, Instructor in Medicine and Pharmacology, and Assistant Professor of Medicine and Pharmacology. In 1942 he became Chairman of the Division of Pharmacology and Associate Professor of Medicine, serving until 1947, when he was elected Professor of Medicine. During this period he held clinical appointments as Assistant Physician and Consulting Pharmacologist to the University of California Hospital, the San Francisco Hospital, the Langley Porter Clinic, and the Letterman General Hospital, U.S. Army, San Francisco. From July 1, 1944 to June 30, 1948, he served as Assistant Dean of the University of California Medical School, in which capacity he showed superior administrative ability. This experience, with his other eminent qualities of leadership, brought him to the State University of Iowa as Dean of the Medical School and Professor of Research Medicine on July 1, 1948.

His extensive society affiliations are significant recognition of his professional attainments at the young age of 42 years. These included membership in the California Academy of Medicine, California Medical Association, California Heart Association, American Association for the Study of Goitre, American Federation of Clinical Research, American Heart Association, American Medical Association, American Society for Clinical Investigation, American Physiological Society, Association of American Physicians, American College of Physicians, Association for the Study of Internal Secretions, Central Interurban Clinical Club, Society for Experimental Biology and Medicine, and Western Society for Clinical Research. He was a member of Alpha Kappa Kappa and Beta Theta Phi fraternities and of the honor scientific society Sigma Xi. On May 5, 1949, at a special ceremony, the Alpha Chapter, State University of Iowa, conferred on Dean Soley the certificate of honorary membership in Alpha Omega Alpha Honor Medical Society.

He was associate editor of *California Medicine* from 1946 to 1948.

During the last year he became a member of the Johnson County and Iowa State Medical Societies, and the Iowa Heart Association. Dean Soley appeared frequently before county societies, as well as the Iowa State Medical Society and Iowa Tuberculosis Association

and everywhere left the impress of a sound investigator, inspiring teacher, and fine clinician.

He entered upon his administrative duties as dean with enthusiasm and in a short period had overcome great difficulties of organization and adjustment of the University Medical School to meet the needs of a changing order.

Dr. Soley's wife, the former Karolina B. Jump, is also a physician, being a 1930 graduate of the University of California Medical School. To her and their three children, Mayo Robert, 7; Charles Hamilton, 4; and Jane Elizabeth, 1½, we extend our deepest sympathy.

We will treasure the privilege of his fellowship, his inspiring personality, and his contribution to our medical school."

Walter L. Bierring

Here is another tribute expressed by Dr. Chauncey D. Leake, Vice-President, Medical Branch, University of Texas, and formerly Professor of Pharmacology and faculty colleague of Doctor Soley in the University of California, as follows:

"It was my privilege to recommend Dr. Soley as my successor when I left the Pharmacology Laboratory at the University of California Medical Center in 1942. He had come to the University of California from Harvard and the Massachusetts General Hospital in 1935 as Instructor in Medicine. He became Assistant Professor of Pharmacology in 1938, following his brilliant researches on anxiety states, iodine metabolism and hyperventilation.

Dr. Soley's outstanding character and his cheerful and inspiring leadership made him popular with students and staff. He became Assistant Dean and showed a remarkable ability in medical administration. It was this which was recognized by the University of Iowa College of Medicine. His was an enthusiastic leadership, and his loyalties were always with those with whom he worked. In every respect Mayo Soley illustrated the grace, skill and high character of the true gentleman. Respect for his memory can best be shown by increased devotion to the ideals for which he stood."

Dr. Bean wrote as follows:

"A Very Parfit Gentil Knight"

Mayo Soley came to us with the fervor of high ideals and hopes, that he might supply the College of Medicine in Iowa with the

leadership needed to attain excellence worthy of the people of the midcountry of our land. Bringing with him the commingled pride and reserve of a New England heritage to which was added the enthusiasm of the West Coast, he epitomized the traits which have given greatness and luster to the nation.

He had achieved distinction as a physician. He had done imaginative research of high originality as a student of the processes of disease. He had made his mark in the field of medical school administration.

Motivated by a profound feeling for the patient and the student, the warmth of his presence made him a sympathetic teacher. Because he was always a student he was a superb clinician. His leadership was recognized by membership in the significant medical societies, and service on national committees and editorial boards.

But this array of notable attainments is only the cold list of what a stranger might say in tribute. His warmth and color gave to them a meaning which kept him high in the affectionate regard of his fellows.

He was the cherished center of a devoted family. He was a thoughtful and devoted friend. There was about him the style and elegance of the sunny side of the hill on a spring day. His energy and enterprise found outlets in varied sports in which he went beyond proficiency, for he was satisfied with nothing short of perfection.

Into everything he put a prodigy of effort, carrying on his multitudinous tasks with verve and buoyancy. With high sense of duty, sound scholarship, keen intellect and ready wit he had at his command the mass of detail needed to direct a college of medicine. What he had achieved in the face of innumerable difficulties in one short year had won for him not only respect and admiration but the sympathetic support of his associates.

With such qualities and character he brings to mind the grace and skill, élan and many-sidedness of the Elizabethan gentleman. Beyond anyone's thought he was impatient of delay and drove himself relentlessly but without bitterness to reach his goal. With so much of the path traversed he was suddenly overwhelmed, a martyr to his own idealism.

"He was a very parfit gentil knight."

The vacancy in the office of the Dean of the College of Medicine was filled temporarily by the appointment of an Executive Committee with Dr. Willis M. Fowler as Chairman until July, 1953, when Dr. Norman B. Nelson, formerly Associate Dean and Professor of Preventive Medicine and Public Health, University of California School of Medicine, Los Angeles, became Dean of our medical school.

With Dr. Bean's experience in the teaching of medicine in four leading universities, Virginia, Johns Hopkins, Harvard, and Cincinnati, he had ample opportunity to observe the evolutionary trends in medical education, and he came to his new post full of courage and enthusiasm with the primary purpose to develop and to expand the technique of medical training and research so ably conducted by his immediate predecessor, Dr. Willis M. Fowler.

Following the custom established by Dr. Fowler, Dr. Bean prepared annual reports which presented a complete record of the activities of the Department in the course of the succeeding years. In these reports, the functions of the Department were considered under the general headings of teaching, research, service and administration.

It is noted that the teaching of internal medicine continued to be incorporated into each of the four years of the undergraduate curriculum, with certain changes in the training in physical diagnosis, bedside teaching, and marked expansion in the teaching of the several clinical subdivisions of internal medicine. Through the medium of symposia and joint conferences with other clinical departments, the teaching of internal medicine was further correlated with medicine as a whole, and at the same time the proper balance and cohesion within the department was maintained as well as preserving its proper relations with the College of Medicine, the University, and the medical profession.

The services in the subspecialty divisions, previously established, were expanded and several new services added, as the following:

HEMATOLOGY

A weekly conference in hematology under the direction of Drs. Fowler, Henry E. Hamilton, and Sheets, had served primarily as

a seminar for the teaching of interns, residents, and staff members, but it proves an excellent aid also in undergraduate teaching. Aside from considering the broad aspects of hematology, it offers opportunity for the special study of hemorrhagic diseases, the blood dyscrasias in neoplastic disorders, instruction in bone marrow aspiration technique, the interpretation of blood smears, evaluation of chemical agents in the leukemias and Hodgkin's disease, studies on the L.E. phenomenon and continuation of Dr. Fowler's long-term studies of iron metabolism and the iron deficiency anemias.

In these conferences distinct contributions have been made by Dr. Nomland in Dermatology; Drs. Kerr and Elkins in Radiology; Dr. Carter in Pathology; Dr. May in Pediatrics; and Dr. DeGowin gives each year a course in blood grouping and blood transfusion.

Blood survival studies by Dr. DeGowin and his associates, Drs. Hamilton and Sheets, by their basic investigations have brought an insight into the mechanisms of the anemias and factors influencing cell survival. They have perfected a method of biological tagging of transfused cells so that cells from abnormal persons can be followed in normal recipients, and people with a variety of diseases, particularly hemolytic diseases, can be studied for the survival of normal cells in their blood. These comprehensive studies in the different hemolytic anemias and the conclusive demonstration of a hemolytic component in pernicious anemia have received international recognition for their excellence for providing a better understanding of a difficult clinical problem.

The Hospital Blood Bank, established in 1939 under the direction of Dr. Elmer E. DeGowin has continued to be of great teaching benefit. Within recent years an average of 7,000 blood transfusions have been carried out annually at the University Hospitals. At the same time Dr. DeGowin has developed the Intravenous Fluid Laboratory, in which the production has been 7,000 bottles per month, or 84,000 per year.

DIABETIC SERVICE

This service is under the direction of Dr. Robert A. Hardin in connection with the Division of Nutrition and has provided consultation service to all the clinical departments in the University Hos-

pitals. Through this co-operation, a better concept has been gained of the relation of diabetes to coronary artery and peripheral vascular diseases, cataract, and neuropathic changes.

A group of one hundred juvenile diabetics who have had the disease for ten or more years, some as long as thirty years, are being studied with respect to degenerative disease changes.

Special research studies are being conducted in the use of fructose, the management of diabetics during extensive surgical procedures, and on Lente insulin, the newest of the intermediate-acting insulins, and the newer oral insulin preparations. The number of patients cared for in this service is constantly increasing.

THYROID CLINIC

This clinic during the past ten years has continued to examine patients with symptoms of thyroid disease for consultation and advice. The following clinicians participate in this service: Medicine — Dr. DeGowin, Chairman, Dr. Hamilton, and Dr. Hodges; Surgery — Dr. Mason and Dr. Buckwalter; Radiology — Dr. Elkins; Radiation Laboratory — Dr. Evans.

During its first five years 274 patients with different forms of thyroid disease have been examined and therapy was advised as follows: anti-thyroid drugs only 2; thyroidectomy 55; and radio-active iodine 128.

This clinic or conference affords a further example of eliminating departmental lines and bringing a number of disciplines to converge upon a single important problem.

THE HEART STATION

This station, formerly established, has been continued under the able direction of Dr. Lewis E. January, operating in close association with the cardiovascular and pulmonary function laboratories, as well as with the chest clinic and the outpatient service.

The Heart Station has been the recipient of several valuable contributions, such as a Cambridge Simplified Electrocardiograph, and a Smith-Stone Cathode Ray Electrocardiograph, used in thoracic surgery experimental hypothermia studies — both a gift of Dr. J. K. Aurtherland, M.D. Iowa, 1926, of Flint, Michigan, and a Cambridge Cardioscope which has been of great usefulness in demonstrating

to a large group of students, particularly sophomores, the physical aspects of sound as in heart murmurs and abnormal rhythms in physical examinations.

During the past year, 5,586 patients registered in this service; 3,499 electrocardiograms were taken. The program in ballistocardiography and vectorcardiography has been expanded in this service. The cardiacfluoroscopy is under the direction of Professor Eugene Van Epps of the Department of Radiology.

The Heart Section has proved of great value in the teaching program.

CARDIOVASCULAR LABORATORY

The establishment of this laboratory for diagnosis and research studies in cardiovascular diseases was one of the significant developments of this period. It had its beginning with the coming of Dr. James W. Culbertson in December, 1949, as Assistant Professor of Internal Medicine and Director of the new laboratory. An area had been set aside for this purpose in the east wing, third floor, of the University Hospital, and Dr. Culbertson with rare ingenuity and judgment was able in a rather limited area — even using a part of the hall space — to arrange very satisfactory rooms, and after the placement of necessary scientific apparatus and equipment provided very adequate and complete facilities for the purpose intended.

The general physiology section had been established previously in the Medical Laboratory Building, under the direction of Dr. Steven M. Horvath, Professor of Physiology, during which time a large number of animal experiments had been carried out and technicians had been trained, which was of distinct service to the clinical physiology section in the new laboratory.

Dr. Culbertson soon developed a competent staff, and in cooperation with Dr. Bean formed a diagnostic and advisory unit in cardiovascular diseases, comprising Dr. Fowler and Dr. January in Internal Medicine, Professor Eugene Van Epps in Radiology, and Professor Ehrenhaft in Surgery.

The function of this unit was to evaluate the various diagnostic procedures, and the eligibility of patients for surgical treatment, as well as the results of operative correction.

Cardiac catheterization and cardio-radiology were rapidly developed for the purpose of diagnosis. It was a time when operations for congenital heart lesions, as well as rheumatic heart diseases with resulting mitral stenosis, were being perfected.

A long backlog of such patients had been collected by the unit and in the following five years several hundred patients with these defects received surgical corrective treatment with a very low mortality and most gratifying results.

Aside from these important clinical investigations, basic studies have been perfected in renal physiology, the relation of the autonomic nervous system to vascular hypertension, as well as detailed studies of hemodynamics, cardiovascular physiology, gas and chemical analytic procedures, all of which brought about a better understanding of many of these problems.

As to the extent of its activities, it is noted that during 1955 the following procedures were carried out: 173 cardiac catheterizations; 69 measurements of hepatic blood flow; 176 measurements of hepatic clearance of bromosulfein; 120 differential renal function studies; 103 comprehensive pulmonary function measurements; 75 operating room experiments, as well as numerous measurements of blood oxyhemoglobin saturation, ballistocardiograms, etc.

The Cardiovascular laboratory has proved its great diagnostic value and has added distinction to the training of undergraduates, interns, and residents. It has been a real accomplishment for Dr. Culbertson and his staff. Dr. Culbertson joined the faculty of the College of Medicine of the University of Tennessee in the spring of 1958. Walter M. Kirkendall, M.D., Associate Professor, is now Director and the staff includes Paul M. Seebohm, M.D., Associate Professor; Assistant Professors George M. Bedell, M.D., Ernest O. Theilen, M.D., John W. Eckstein, M.D., John B. Wild, M.D., on leave of absence, William Connor, M.D., Fellow, and William Hamilton, M.D., Professor of Surgery (anesthesiology), and Steven M. Horvath, Ph.D., Professor of Physiology.

GASTROENTEROLOGY

The clinic and examination rooms in the Gastroenterology Division have been enlarged and the service reorganized. A new gas-

troscope, esophagoscope, peritoneoscope, and other facilities have been added. This service is now able to handle the constantly increasing load of endoscopic examinations requested by all the clinical departments of the University Hospitals.

The needle liver biopsy program is concentrated in the third year of the residency, supervised by Doctors Clifton and Thornton. The peritoneoscopy examinations have been utilized mostly in the study of cirrhosis of the liver. The following procedures were performed during the past year — sigmoidoscopy, 455; gastroscopy, 199; peritoneoscopy, 29; and esophagoscopy, 5, a total of 688 examinations.

ALLERGY

An Allergy Clinic has been developed since 1949 under the direction of Dr. Seebohm for the improvement of service, teaching, and research in this field. It has taken advantage of the extensive clinical material in the center of the pollen belt, the increasing incidence and importance of collagen diseases and sensitivity, as well as the revolutionary development in steroid and pituitary hormones.

Allergy has become an important part in undergraduate and residency training with investigative studies in the basic mechanism of sensitization, as well as in delayed hypersensitivity, pulmonary function, and hormonal management.

The Allergy Clinic has been of great service in certain problems of practice, as well as being of important service to the hospital and the community.

PSYCHOSOMATIC MEDICINE

Soon after coming to Iowa, Dr. Bean instituted a course in psychosomatic medicine, mainly confined to a series of demonstrations and clinical seminars given during the junior year. The purpose is to orient the student toward a psychosomatic or, preferably, a comprehensive approach to the patient particularly as to practical and clinical aspects of the sick person.

It is largely concerned with certain disorders that are known to be related to psychological stress, or in which a relationship between life stress and bodily disease can be reasonably postulated and may include the following: Disorders of metabolism, hyperthyroidism,

asthma, hay fever, headache, peptic ulcer, ulcerative colitis, backache, hypertension, urticaria, and dysmenorrhoea. Conditions in childhood may leave some persons more susceptible to such disorders.

The psychosomatic reaction has been defined as "a bodily disorder whose nature can be appreciated only when emotional disturbances are investigated in addition to physical changes."

It is a field in which the psychiatrist and internist can advantageously work together in the study and treatment of disease.

Dr. Bean was of the opinion that this could best be presented by a trained internist, and Dr. Bernard L. Lewis, Assistant Professor of Internal Medicine, was chosen to direct this program. Since his departure, activity in this area has continued under the direction of Dr. Stone.

This plan of presenting psychosomatic medicine in supplementing the formal psychiatric teachings has been useful in orienting the future practitioner in one of the most difficult and controversial areas of current medicine. "At the same time it has endeavored to avoid the development of a new or separate subspecialty, away from the broad general current of medicine."

METABOLISM UNIT

The Metabolism Unit and connecting wards under the direction of Dr. Robert Hodges and Dr. Bean in co-operation with Dr. Margaret Ohlson, Professor of Nutrition, have been extended to form a central metabolic unit available to all the clinical services.

This has been of special service in the study of chronic liver diseases, panthothenic acid deficiency, rheumatoid arthritis, Wilson's disease, hyper-insulinism, idiopathic steatorrhoea, parahypopituitarism, derangement of calcium metabolism and absorption following total gastrectomy, the effect of cortisone on the sprue syndrome as well as copper deficiency and amino acid metabolism in cirrhosis of the liver.

INFECTIOUS DISEASES

With the prolongation of life's expectancy and life's maturity, and attending greater frequency of chronic and long-term illness, there has been a corresponding increase in the incidence of pyogenic and viral infections as well as chronic brucellosis and tuberculosis.

To meet the demands of this new service, Dr. Bean, three years ago, established the section on Infectious Diseases with Dr. Ian Smith, Assistant Professor of Internal Medicine, as Director.

This has permitted closer clinical observations, better evaluation of antibiotic therapy, and specially directed research studies that are already yielding valuable results, particularly in the increasingly important field of staphylococcal infections.

PHYSICAL MEDICINE

This division has been developed under the direction of Dr. Paul and has made extensive studies on deep temperature and blood flow in the various devices available in this field. The recurring epidemics of poliomyelitis have provided a large amount of material for the application of the different methods of rehabilitation, as well as various measures to facilitate and speed convalescence.

This division has expanded into a rehabilitation unit no longer integral with the Department of Internal Medicine.

Courses of Instruction

The gradual extension of the previously described special clinical services has permitted a more close integration with the several courses of instruction developed by the Department.

UNDERGRADUATE TRAINING

During the first ten years of Dr. Bean's professorship, the undergraduate teaching has continued to be regarded as the main responsibility of the Department of Internal Medicine, and is incorporated into each of the four years of the curriculum.

While certain changes were made in the lecture schedule, he did not follow the "modern trend" to "do away with didactic lectures," as in his opinion certain subjects are more readily presented to the students in a large class group rather than being presented many times over to small groups. He felt that clinical medicine is taught most effectively in small groups at the bedside, supplemented by conferences and lectures to point out things not yet in textbooks and principles which differ from those in published courses. Quoting from one of Dr. Bean's recent reports — "We have reduced the number of hours for teaching internal medicine almost five-fold, while the junior and senior clinical clerkships have been expanded.

The second-year courses in clinical examination and in laboratory diagnosis introduce the student to clinical problems. The division of the class into small groups permits close attention and evaluation of the individual student, following his progress and detecting, and if possible, correcting shortcomings.

"Laboratory diagnosis, which has become increasingly important for the scientific practice of medicine, has been under constant revision.

"The important element of the junior and senior years is the clinical clerkship. At least three teaching rounds are held each week. In addition, the student attends the clinical conference, the clinico-pathologic conference, medical grand rounds and any special clinic when his patient is presented.

"The rounds are conducted as follows: The group meets in a small room off the ward, and the students present the case. The instructor then takes the students to the bedside, obtains his own history, examines the patient, and points out additional or interesting features to the group, which then retires away from the patient to discuss the problem.

"The content of the lectures and a review of the material to be presented is a recurring challenge and a stimulus for our departmental retrospection. Medical grand rounds are held once a week, attended by the junior and senior staff, interns, residents and during the school year by students.

"The medical-surgical conference has become a general medical school teaching conference, and is held once a week throughout the school year, participated in by all the clinical departments.

"During the past year this conference was alternated with the clinico-pathologic conference and in both these exercises members of the Department of Internal Medicine take an active part."

INTERN TRAINING

In the earlier years, beginning about 1887, a limited form of intern service was established by appointing one member of the senior class to serve in residency at Old Mercy Hospital, Iowa City, as assistant to the two principal clinical services of medicine and surgery for a

period of six months from September to the following March. The closer contact with patients gave it definite educational value.

This plan prevailed until the opening of the first University Hospital in 1898, when the one-year or twelve-months hospital internship was established to follow graduation from medical school. It soon became recognized as an essential part of the training for the practice of medicine.

The essential requirements for an approved hospital internship have been determined during the past forty years by two national accrediting agencies, the Council on Medical Education and Hospitals, American Medical Association, and the Association of American Medical Colleges.

The addition to the curriculum of clinical clerkships in the junior and senior years, while seeming to encroach upon the duties and functions of the internship, is now generally regarded as a valuable preparation for the greater degree of responsibility in the care of patients in the intern service following graduation.

The University Hospital has always been on the list of approved hospital internships. The number of interns instructed each year by the Department of Internal Medicine numbers 20. Since 1928 the Iowa Medical Practice Act has required one year of approved rotating internship before admission to medical licensure.

RESIDENCY TRAINING

The University Hospital is approved for the training of approximately 25 residents in internal medicine in preparation for qualification and certification as specialists in that field of practice. The course of training requires three years and the complement of residents in internal medicine is divided into three classes, first-, second-, and third-year residents who are assigned by rotation to the different subspecialty divisions; this permits a formal graded course of training during each of the three years.

In addition to the above groups a number of residents of the Veterans Administration are rotated through various services, particularly that of female patients. The same arrangement prevails with the Veterans Administration Hospital at Des Moines.

The results of certification by the American Board of Internal

Medicine of residents trained in this service has been very gratifying.

Third-year residents are granted a period of approximately two months during which they are relieved of other duties and enabled to begin, continue, or complete research projects of their own.

Third-year residents also are sent to one medical meeting of major importance, such as the American College of Physicians or the Central Society meetings.

POSTGRADUATE TEACHING

For many years the Department of Internal Medicine has taken an active part in the various postgraduate courses, lectures, seminars, and institutes planned by the College of Medicine. These have increased in number and extent to become one of the important teaching functions of the Department in the continued education of the practicing physician.

During the past year the Department arranged graduate institutes in thyroid diseases; hematology; diabetes; refresher course for general physicians; pulmonary diseases; diagnosis of heart disease; and allergy.

Very successful courses were held for the American College of Physicians in June, 1956, and June, 1958.

The Department has also participated in various symposia and postgraduate meetings at the University Hospital and throughout the state.

RESEARCH STUDIES

Research activities have continued to be a major endeavor of the Department, particularly during recent years, and members of the staff have been encouraged to pursue such research studies as far as their teaching duties permitted. There is no formal over-all plan, and the philosophy of the Department places emphasis on freedom of action of the individual as far as his research activities are concerned. As there is no state appropriation available, the various projects have been financed from the Consultation Practice Fund and various grants from foundations, pharmaceutical companies, special societies and federal agencies. The results of these studies have been published in leading medical journals, and the number is increasing each year. During the past ten years members of the Department

have published five books and nearly 400 scientific papers and more than 100 book reviews. More than a dozen scientific exhibits have been prepared.

The new Medical Research Center completed at a cost of \$1,500,000 was occupied in the fall of 1957 and dedicated in November, 1957. It was built in direct connection with the General University Hospital and the Medical Laboratory Building. This building has been planned in such a way that the research areas are as nearly contiguous with the offices, laboratories, and clinical services of the various departments as is possible, and thus form a single functional unit.

In this arrangement the research laboratories in internal medicine are placed on the third floor in direct connection with the clinical wards, offices, and assembly rooms of the Department on the third floor of the University Hospital. This suggests an ideal arrangement for effectively co-ordinating all the services of the department. Dr. Bean was named by Dean Nelson as the chairman of the committee for the planning of the new Medical Research Center.

The hospital administration is currently reconstructing the entire east wing of the third floor with new research laboratories, classrooms, offices, and examining rooms. This will bring to completion a program of modernization for the whole department. These new facilities will do much to insure the continued leadership of the State University of Iowa College of Medicine in medical education and research.

SOCIETY AFFILIATION

Members of the Department have received increasing recognition by admission to membership in the major medical and clinical research societies in the country.

They have been further recognized by election to official positions in these societies, including the responsibilities of editorship, and while an additional burden, these are very gratifying in the continued development of this Department.

The present staff of the Department of Internal Medicine hold membership in the following societies: American Academy of Allergy (1), American Academy of Political and Social Sciences (1),

American Association for the Advancement of Science (8), American Association of Blood Banks (1), American Association of the History of Medicine (1), American Association for the Study of Liver Diseases (3), American Clinical and Climatological Society (1), American College of Chest Physicians (3), American College of Sports Medicine (1), American Diabetes Association (1), American Federation of Clinical Research (5), American Medical Writers Association (1), American College of Physicians (10), American Society for Clinical Investigation (4), American Society for the Study of Arteriosclerosis (1), American Society of Tropical Medicine and Hygiene (2), American Trudeau Society (3), Association of American Medical Colleges (4), Association of American Physicians (3), Association of Military Surgeons of the United States (1), Central International Clinical Club (4), Central Clinical Research Club (6), Central Society for Clinical Research (10), History of Science Society (1), International Society of Hematology (2), Iowa Clinical Medical Society (14), Iowa Heart Association (16), Iowa Trudeau Society (1), Johnson County Medical Society (15), New York Academy of Sciences (3), Royal Society of Medicine (2), Society of American Bacteriologists (1), Society of Experimental Biology and Medicine (5), Society of Medical Consultants to Armed Forces (2), Society for Nuclear Medicine (2), World Medical Association (1), American Board of Internal Medicine (11), American Association of University Physicians (6), Sigma Xi (14), Alpha Omega Alpha (12).

On the last day of the year 1955 occurred the death of Professor Kate Daum, who through more than a quarter-century had brought the science of nutrition to its present high plane in the field of medical education and medical service.

It seems fitting to record here a tribute by Dr. Bean:

KATE DAUM, Ph.D.

1892-1955

IN APPRECIATION

The most important stimulus to the sound growth of the hospital-medical school complex is getting the right people and allowing them to develop. Individuals provide the essence in the corporate

processes of institutional life. Kate Daum's contributions to the science of nutrition and to the advancement of the University Medical Center in Iowa City reached a high level in her several roles in the hospital and College of Medicine.

The span covering her association with the State University of Iowa saw great strides, indeed revolutions, in our understanding certain aspects of nutrition to which Doctor Daum herself made fundamental contributions. She gave much time and effort to personal management of the intricate problems of feeding of the increasingly large staff required to run a large hospital, which has now become almost a small city. But the significance of her contributions is measured even more by her own research, which went far beyond applied dietetics. It probed into the deeper significance of nutrition. As a fruit of her own inquiring mind and her capacity to do research herself, she developed a flourishing school of nutrition. Its success is indicated by the large number of her former students now holding responsible and important positions in nutrition. The Borden Award was but a symbol of her many-sided talents and her achievements.

Only after Kate Daum's death are we able to see in full the enormous and various work she managed to do without complaint and without calling for praise or attention. We miss her stimulus in teaching on rounds and in conferences, and especially her critical analysis of the complex problems of nutritional tests and experiments. But most of all we miss her quiet, gentle ways and unassuming knowledge that her great accomplishments could well be left to speak for themselves. To those of us who knew her well, Kate — and the name Kate seems singularly appropriate in its simplicity — will be remembered for the charm of her kindness and goodness, as well as for her wisdom. We cherish the remembrance of her blend of humility and great capacity which seems to be increasingly rare in our fast-paced days of overwork, tensions, and frustrations.

W. B. Bean, M.D.

A Private Practice Service Plan

With the continued expansion of facilities for more complete diagnosis and treatment in all clinical departments, particularly in the several subdivisions of these clinical specialties, the University College of Medicine with its University Hospitals had become rec-

ognized as a medical consultation center. It became more frequent for practicing physicians to refer difficult and obscure disease conditions occurring in patients, not usually committed to the several clinics for teaching purposes.

To meet this need, a form of private consultation practice was established in 1947 and has gradually been enlarged with each succeeding year. During the year July 1, 1954, to June 30, 1955, a total of 5,165 patients were examined by members of the clinical staff of the Department of Internal Medicine. Of this number only 622 patients were hospitalized. The University Hospital with its 1,000 beds only provides rooms for 128 private patients and the Department of Internal Medicine has 26 of these.

The patient-physician relationships are maintained as in private consultation practice. The patient is referred by an outside physician and a complete record of the diagnosis with suggestions for treatment is submitted to the attending physician at the completion of the examination.

It is interesting to note that forty per cent of the patients are referred from outside the state. The fees collected are deposited in a Departmental Service Fund, from which the supplemental salary or commutation fraction of the clinical faculty is paid. Each faculty member receives his basic salary from the University (state appropriation) plus his supplemental salary from the Service Fund as a single payment, the income tax being withheld from this total.

The compensation of a full professor is his basic salary plus an equal amount from the Service Fund. An associate professor receives his basic salary plus seventy-five per cent, and assistant professors receive their basic salary plus fifty per cent from the Fund. The adjustments gradually were liberalized in accordance with increasing years of service.

In addition to the supplemental salary items, all expenses are paid from the Departmental Service Fund, including secretarial help, dues in professional societies (including American Medical Association), scientific journals, and all general expenses of the service.

At the present time all of the clinical departments, including Anesthesiology, Radiology, and Pathology participate in the plan.

The Departments of Bacteriology and Clinical Chemistry participate in a modest way in funds from fees from outside consultation or examination of specimens.

At the end of the fiscal year, funds not expended at the Service Fund level become Departmental Trust Funds. These funds are used to finance departmental research, travel, and special teaching needs.

At the beginning of each fiscal year, departmental chairmen meet and allocate from their departmental trust funds a voluntary contribution to the College of Medicine Trust Fund. The importance of this trust fund lies in the fact that it constitutes a recognition on the part of the clinical departments of the importance of the pre-clinical departments to the College. From the College of Medicine Trust Fund are established small department funds for all of the basic science departments. In addition, an amount is set up to pay professional dues and scientific journal subscriptions for all members of the basic science departments. Each year a member of the faculty is awarded a traveling fellowship from this fund.

The most important function of the College of Medicine Trust Fund, however, is to subsidize the starting of new research projects which have not progressed to a point where outside funds can be obtained. Grants up to \$3000 have been made. These grants are made, however, for one year only.

The plan is administered by a faculty-elected compensation committee which meets monthly to review expenditures made from the departmental trust funds and the College of Medicine Trust Fund. A faculty-elected compensation review committee reports every two years. This committee recommends on major policy matters to the Dean and University administration. The Dean, the President, and the State Board of Regents must approve major changes in the plan.

After eleven years of operation, this plan has been successful with respect to the faculty of the College, the administration, and the medical profession of the state. This plan of private consultation practice has been of particular advantage to the Department of Internal Medicine in supplementary salaries, in promotion of research studies, and retaining the younger members of the staff for a longer period than formerly. The experience gained in this private

consultation practice distinctly influenced certain methods of clinical teaching.

Until two years ago the facilities for office and examination rooms for this service were very inadequate and distinctly inconvenient for the patient as well as the examining physician.

In December, 1955, an entirely redesigned and renovated suite of offices for the Department of Internal Medicine was opened on the third floor of the tower of the General University Hospital.

The new suite provided for consultation and examining rooms for nine members of the senior staff. Adequate space for the remainder of the staff is being planned. The new quarters were planned to facilitate the several functions of consultation practice, teaching, research, and administration.

A simultaneous move brought all medical wards to the third floor. A quoting from Dr. Bean's report: "The arrangements for efficiency and convenience, for complete privacy for discussions with patients and examining them, for adequate intercommunication between professional staff members and with the staff of secretaries, technicians, and hostesses were designed for effective work without forgetting that pleasant surroundings enhance morale and effectiveness."

The purpose of describing in greater detail the courses of instruction and other activities of the Department was to indicate the remarkable expansion of its program during the last ten years. This further reflects the present comprehensive plan of undergraduate and graduate training in the broad field of internal medicine.

It is fitting at this time to accord to Dr. William B. Bean as Professor and Head of the Department, and the members of his staff, the highest acknowledgement for this accomplishment. Dr. Bean by his inspiring personality, rare scholarly attainments, and professional leadership, as an educator, clinician, consultant, and administrator, has distinctly added to the prestige of our University medical school.

A Closing Word

As this chronicle of the historical development of the Department of Internal Medicine in the State University of Iowa, College of Medicine, is brought to a close, I am deeply conscious of its several

limitations. However, it represents an earnest effort to record in historic sequence the Department's first eventful eighty-eight years. This has been largely possible through personal recollection and further search of available sources of information.

This was a period that witnessed the most remarkable evolutionary changes in American medical education, and it will always be a source of pride that this midwestern medical school located in a small university town was able to keep the pace with the changing concepts of the years, and attain its present place of leadership among the institutions of its kind.

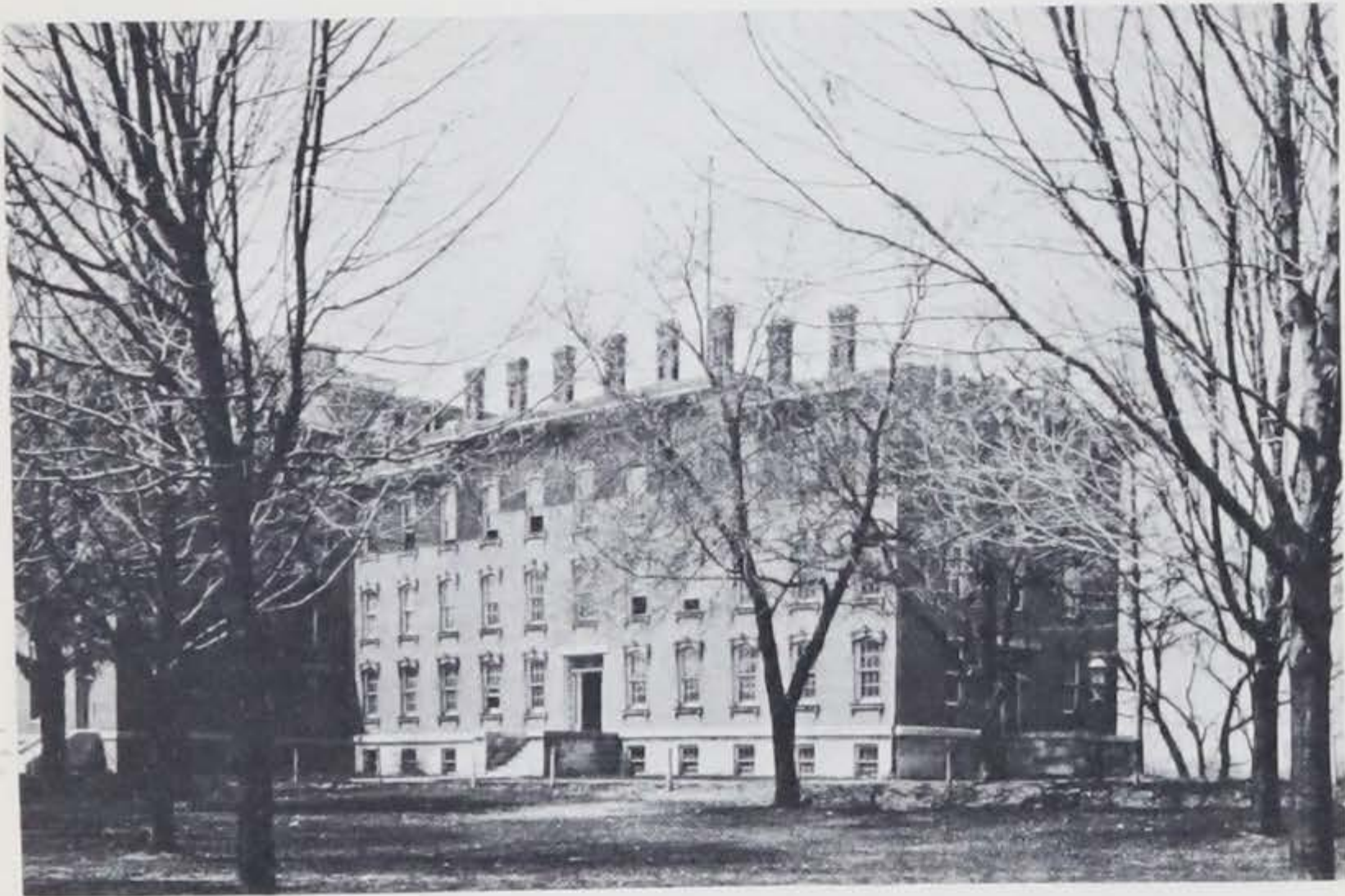
The College of Medicine has been fortunate in the physicians who guided it through the formative period and the years that followed; of them it may be said "They caught the gleam and followed it."

The plan for this history was first proposed by Dr. William B. Bean soon after coming to Iowa to assume the professorship of internal medicine, and throughout its preparation he has been a most helpful counselor. Sincere acknowledgement is extended to many colleagues for items of interest, and particularly to Dr. Norman B. Nelson, Dean, College of Medicine; Mrs. Gladys S. Bartholow, Medical Librarian of the University Libraries; Dr. Jeannette Dean Throckmorton, Librarian, State Medical Library, and lastly to my faithful and efficient secretary, Mary L. Wombacher.

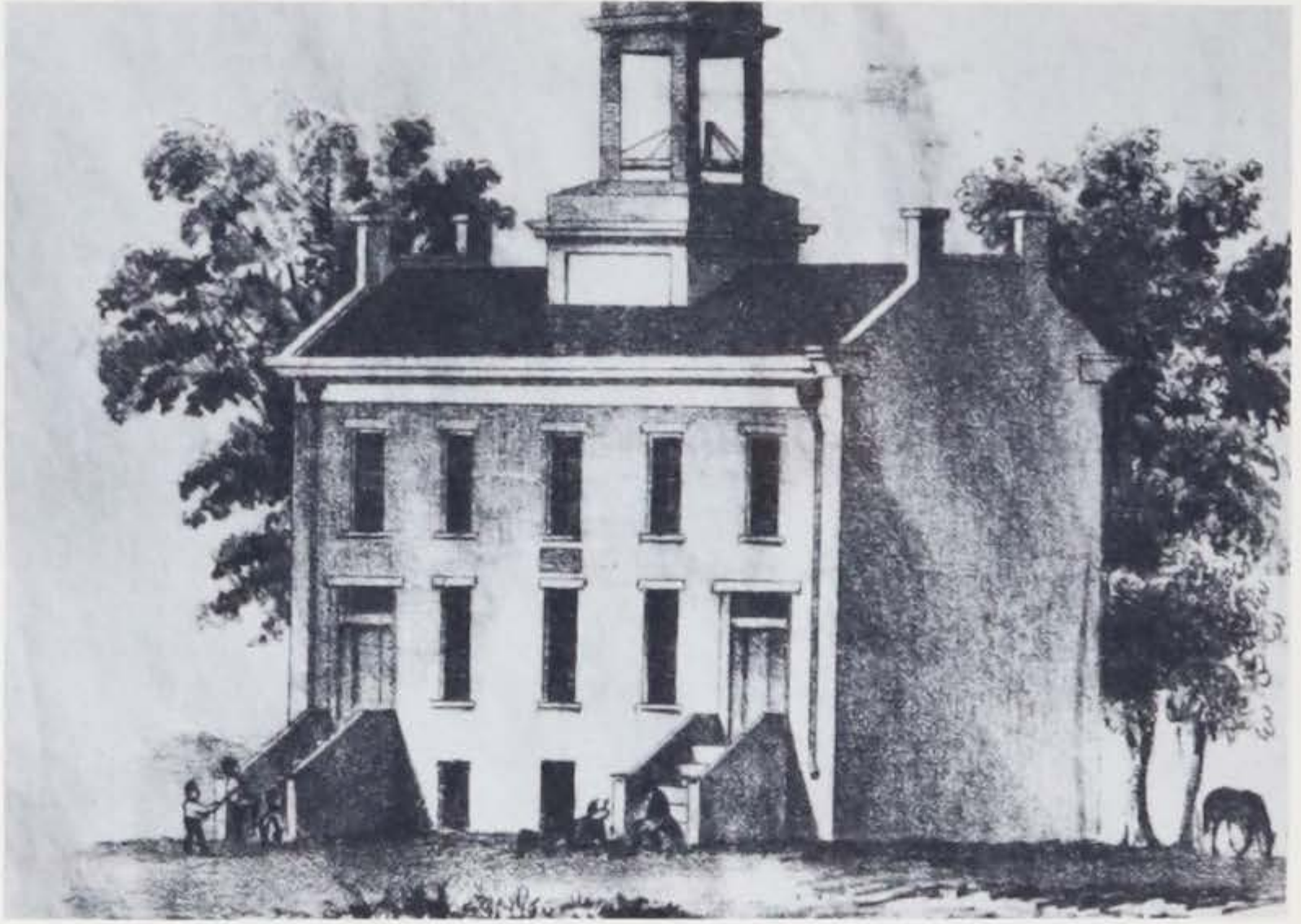
It is hoped that this chronicle will be of interest as a source of historic reference for this and future generations of students of medicine and likewise serve as an index of the remarkable development of the Department of Internal Medicine of the State University of Iowa during its first eighty-eight years.



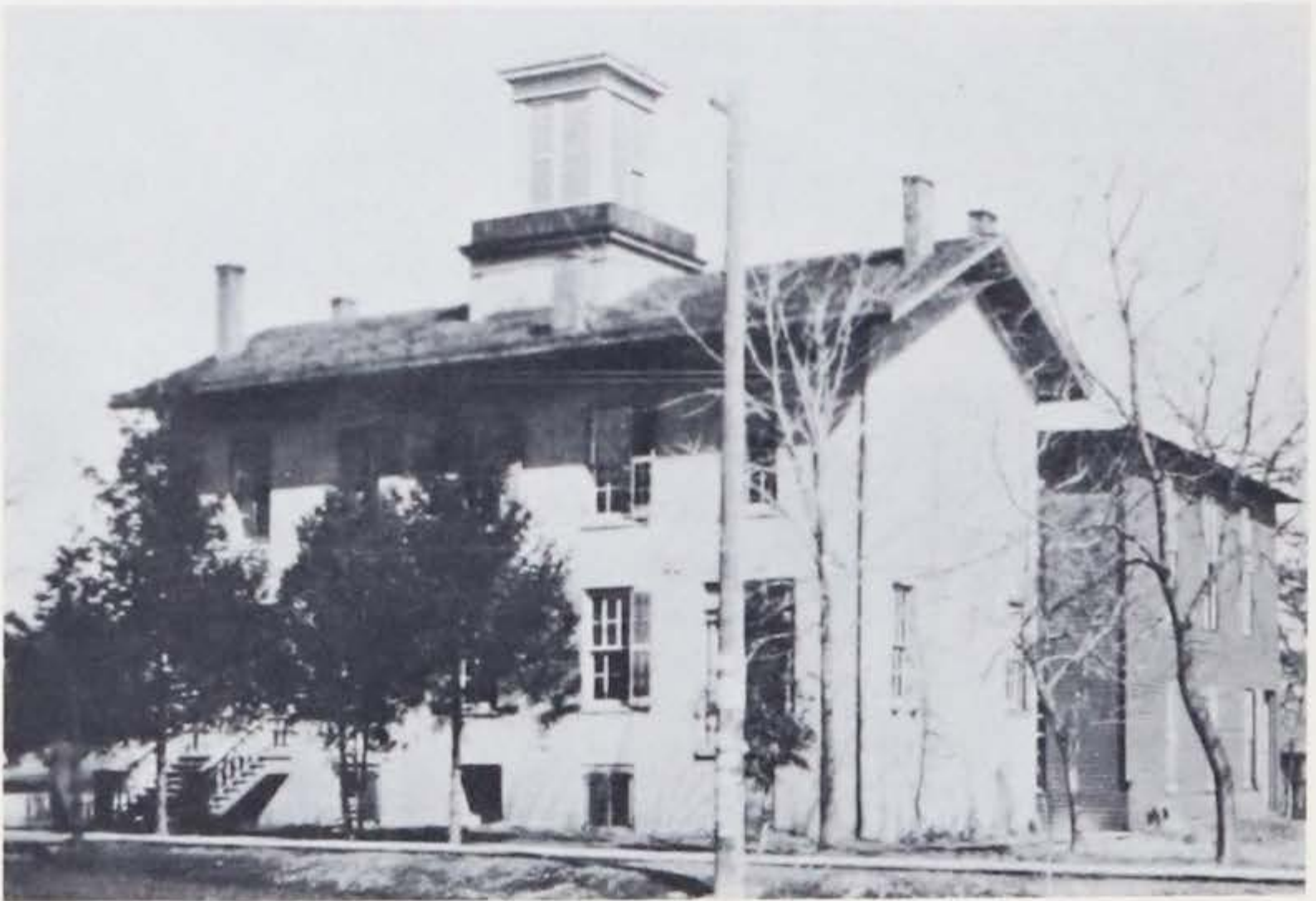
First medical faculty, State University of Iowa, College of Medicine, Iowa City, 1870-1871. Standing: Hinrichs, Shrader, Robertson, Middleton, Clapp. Seated: Farnsworth, Peck, Dillon.



Old South Hall. Medical Department from 1870-1883.



Sketch of the Mechanics Academy which became the first Mercy Hospital where clinical teaching was done from 1873-1886.



First Mercy Hospital showing addition in rear.



Medical Building with Medical Department, University of Iowa, 1883-1901.
This building was destroyed by fire in 1901.



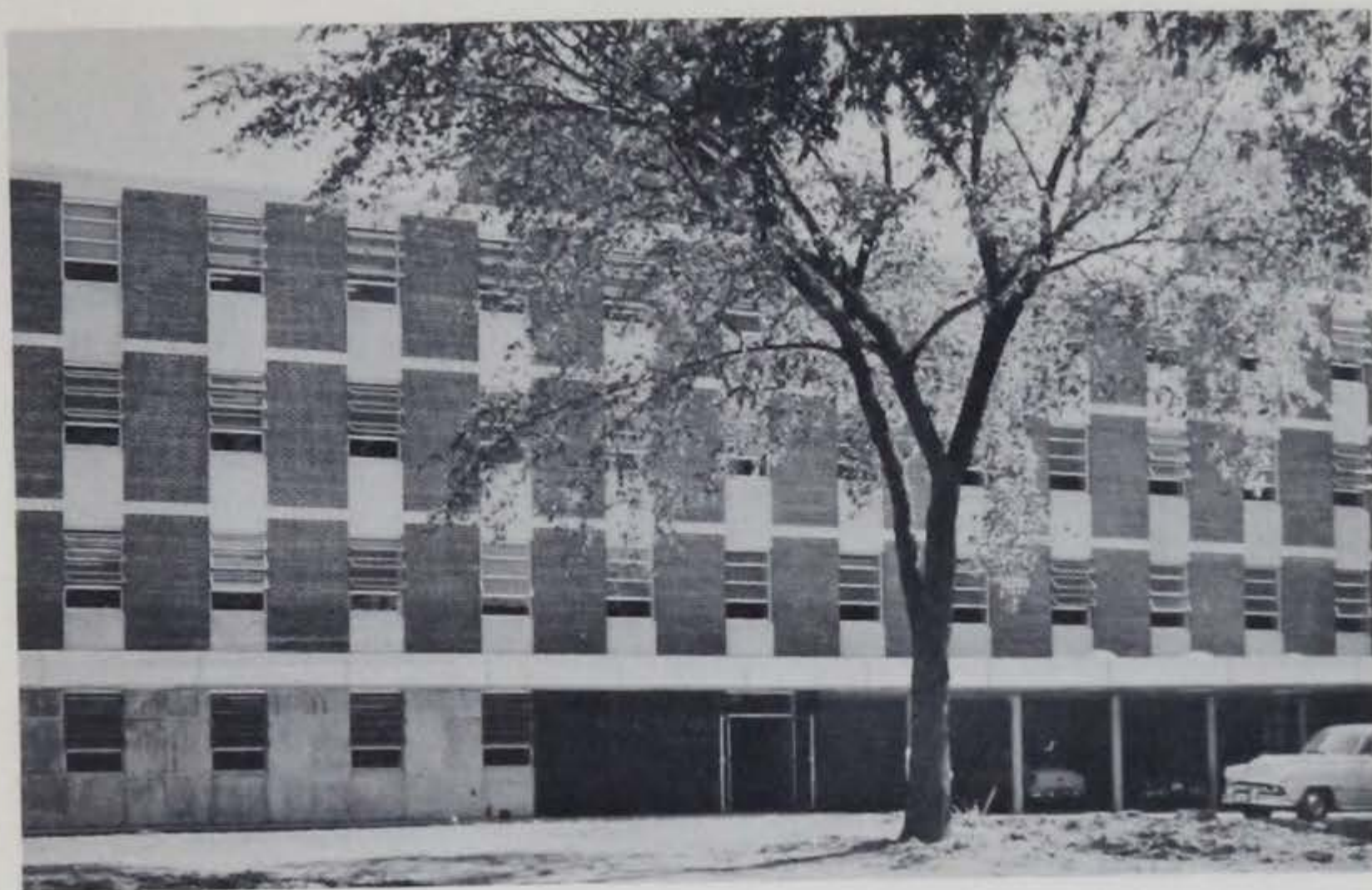
First University Hospital, 1898-1928.



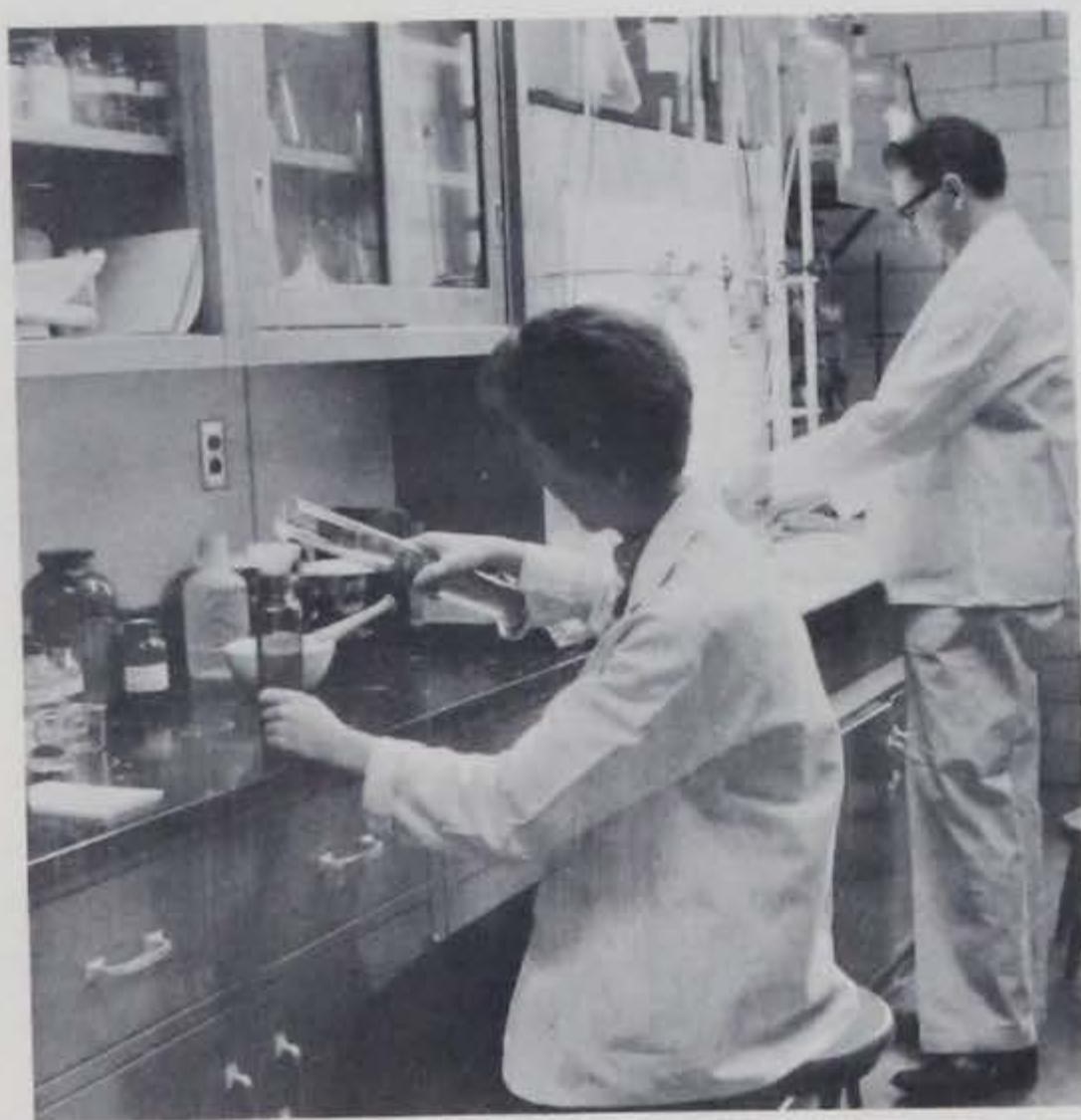
University Hospital as it appeared at the time of its completion and first occupancy in 1928.



Medical Laboratories Building as it looked at the time of its completion, 1927.



Research Wing occupied in 1957 connecting the University Hospitals and Medical Laboratories Building. Many of the Department of Medicine's Research Laboratories and the Metabolic Ward are on the third floor of this wing. Other laboratories are in the East Wing of the main hospital building.



One of the laboratories in the new Research Wing.

INTERNAL MEDICINE

1958-1959

Bean, William B.	Professor and Head
Bierring, Walter L.	Professor Emeritus
Fowler, Willis M.	Professor
DeGowin, Elmer L.	Professor
January, Lewis E.	Professor
Hardin, Robert C.	Professor and Assistant Dean, VA Affairs
Ohlson, Margaret	Professor, Nutrition
Hamilton, Henry E.	Associate Professor
Seebohm, Paul M.	Associate Professor
Sheets, Raymond F.	Associate Professor
Kirkendall, Walter M.	Associate Professor
Clifton, James A.	Associate Professor
Theilen, Ernest O.	Associate Professor
Eckhardt, Richard D.	Clinical Associate Professor
Hodges, Robert E.	Assistant Professor
Bedell, George N.	Assistant Professor
Thornton, George H. M.	Assistant Professor
Eckstein, John W.	Assistant Professor
Smith, Ian Maclean	Assistant Professor
Connor, William E.	Assistant Professor
Bleiler, Roberta	Assistant Professor, Nutrition
Armstrong, Mark L.	Clinical Assistant Professor
Buchman, Elwood	Clinical Assistant Professor
Funk, David C.	Clinical Assistant Professor
Peterson, Richard E.	Clinical Assistant Professor
Fisher, June M.	Associate
Horowitz, Isaac	Clinical Associate
Kaung, David T.	Clinical Associate
Barer, Adelaide	Research Associate
Wilson, William R.	Research Associate
Beasley, Oscar	Instructor
Smith, Jeanne Montgomery	Instructor
Smith, Richard T.	Clinical Instructor
Chang, Chen-shu	Research Fellow
Stone, Daniel Boxall	Research Fellow
Horsley, Arthur W.	Research Fellow

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