MEN AND MILESTONES IN MEDICINE

100 YEARS OF MEDICAL EDUCATION IN OREGON

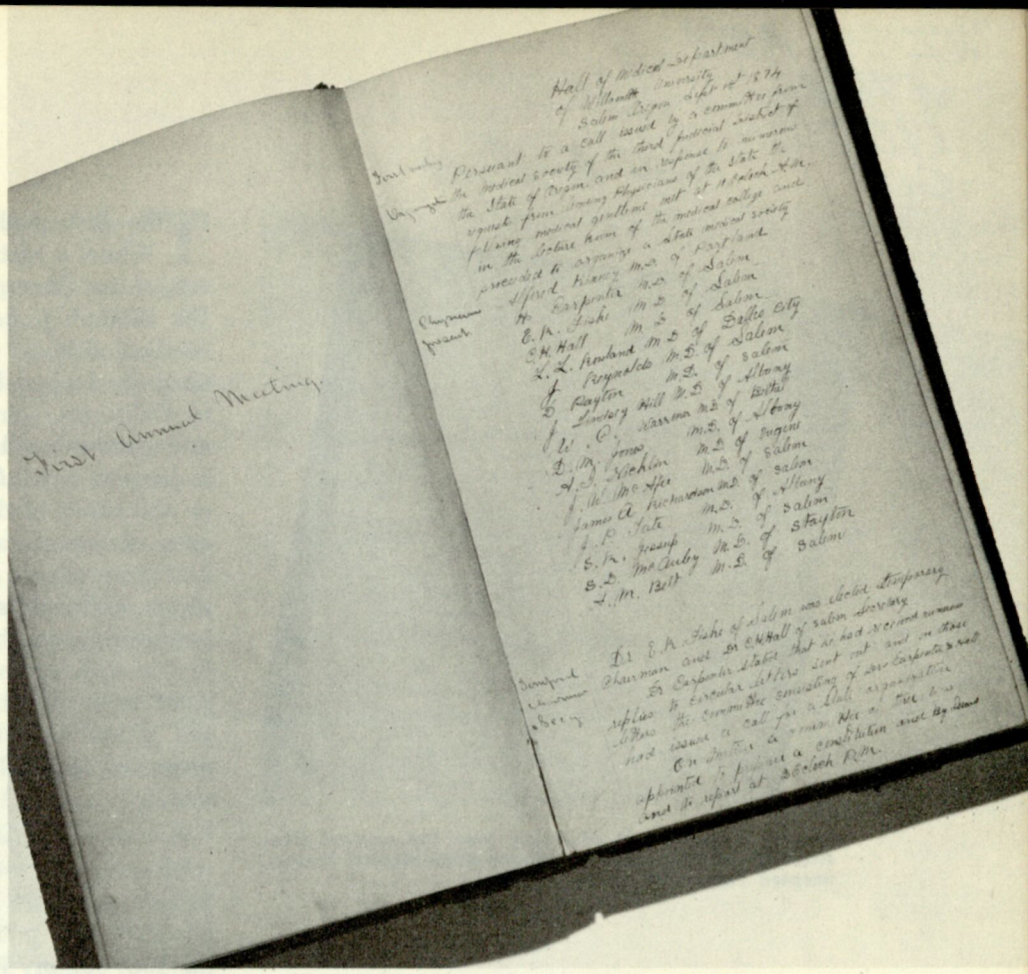
A centennial of medical education is an event worthy of observance anywhere—it is particularly so in Oregon. The first class in formal medical education was held on March 3, 1867, in the newly formed Medical Department of Willamette University in Salem. Only one other medical school in the West has a longer lineage; only thirty-three of the present medical schools in the United States were in existence prior to the one in Oregon.

In our present-day affluence of medical knowledge and medical care, it is difficult to comprehend the almost foolhardy courage that prompted a faculty of eight Salem physicians to start a medical school in a town of twelve hundred people. As the following pages of the history of medical education in Oregon are read we can take deep professional pride in the story.

And as we anticipate with eagerness the responsibilities of the future vistas of medical education, let us pause in this centennial year to pay tribute to those men and events—that compendium of pioneer spirit, personal ambition, professional dedication and constancy of purpose which planted the seed of medical education in a little western village a century ago—and to those who through the years have nurtured and matured it.

E. G. CHUINARD, M. D., Chairman,
Committee on Oregon Medical History
Oregon Medical Association

A Century Of Medical Education In Oregon



by thelma wilson

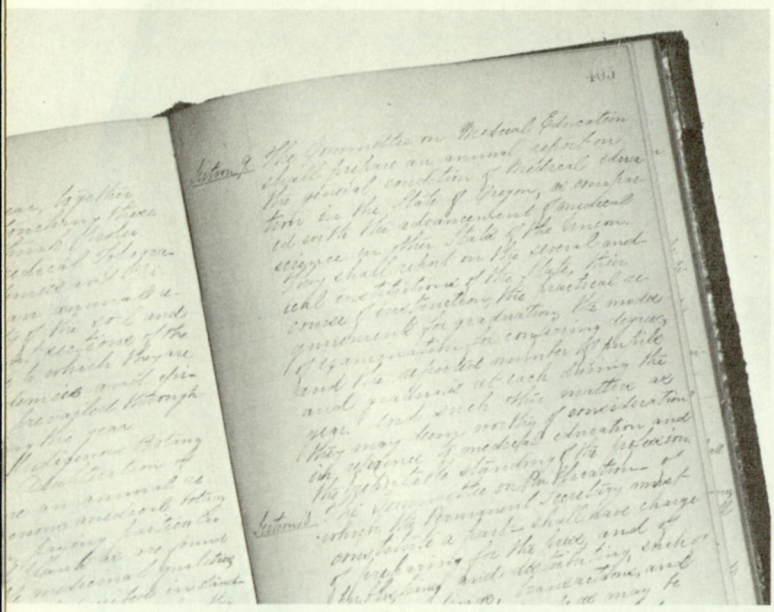
When you hear the term "medical educator," what comes to your mind—a professor lecturing to white-coated students—an anatomist demonstrating skeletal components? He is these things.

He is also the obstetrician at a young intern's elbow, guiding him during a difficult birth—the pathologist identifying a puzzling cell formation for a medical technologist—she is a nurse showing her nervous pupil how to move a burned child.

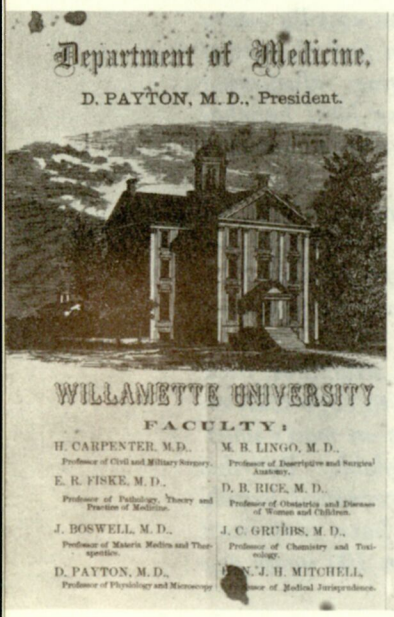
Walk in any hospital, even in the pre-dawn hours and you are apt to see a medical educator at work. He's the one in the rumpled business suit leaning against a wall as he explains to an equally weary resident why the patient needs this or that. You can find clumps of medical educators in cafeterias reviewing, evaluating, illustrating surgical techniques on paper napkins—or on the long hard benches of outpatient clinics teaching students by example, how to reassure a worried family.

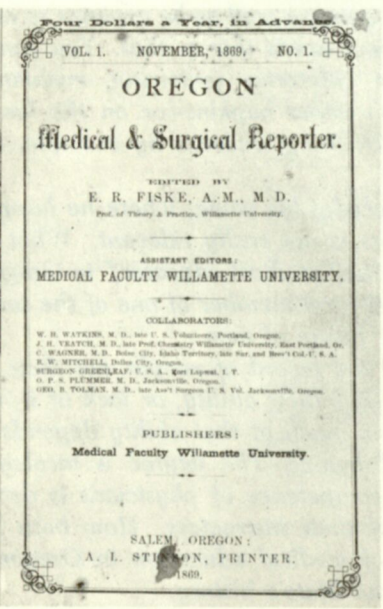
The title that precedes his name, where he happens to hang his hat during office hours is not really relevant. What he does is profoundly so. For the term "medical educator," in Oregon or any place, is no more than a label for a member of one of the several professions that are reshaping the future of man.

Basically, history is a record of people, not their structures, their wars, their machines—but their ability, or lack of it, to cope with an environment. And how much of that ability depends on man's physical and mental well being? The degree is incalculable. But this much is certain—the competence of physicians is determined largely by the competence of their instructors. How both have performed since the beginning of medical education in Oregon 100 years ago is a proud page in the State's history.



Section 9 on medical education from the original Constitution and Bylaws of the Oregon State Medical Society, adopted September 1, 1874.





The first medical educator was Dr. Elijah White, a Methodist medical missionary who settled in Champoeg in 1837. His pupil was Dr. William J. Bailey, a graduate of a London Medical School, whose weakness for anything alcoholic landed him in America. He migrated to California, joined a fur trapping expedition and survived a brutal attack by Rogue River Indians to arrive finally in Dr. White's log cabin on the banks of the Willamette River. Here he spent six months as an informal preceptee in the first postgraduate course offered in the State and these candlelight seminars took place on a typical person-to-person basis. After relearning his profession and regaining his self-esteem, Dr. Bailey went on to marry a "good Yankee wife," acquire the "nicest house in the territory" and become a respected and valuable member of the pioneer society.

But such incidents were rare in the frontier wilderness that was Oregon in the early 1800's. In fact, any kind of medical training, formal or informal, was poorly organized during most of the 19th century in America.

Even in medical schools considered the best in the country, requirements for a degree in medicine were unbelievably lax, by today's standards. The candidate served with a physician preceptor for two or three years and had two courses of lectures along with dissection of the human body. After demonstrations in chemistry and physiology and a few other related subjects he had met all requirements and received his degree.

No registration of credentials was required in Oregon until 1889, when the first licensing act was passed, so the educational background of these early physicians is largely unknown. And of course many men who practiced medicine during that period were self-styled "doctors" without even the most rudimentary knowledge of medicine.

Surgery was considered a last, and generally futile, resort and there is no evidence that ether was used in Oregon then, although it had been discovered some years before.

The first major influx of physicians occurred in the early 1840's when doctors, with and without diplomas, joined the long lines of wagon trains carrying gold seekers to the West. But they were preceded, in 1836, by medical missionary Dr. Marcus Whitman, the first Ameri-

can-trained physician to practice in the Northwest.

In the 12 years before he, his wife and twelve others were massacred by Cayuse Indians, Dr. Whitman's selfless devotion to his patients, Indian and white, placed him among the truly great men of this era.

Some of the immigrating doctors settled in the Willamette Valley and Southern Oregon, to become the founders of medical education in Oregon. Many established land claims and combined medical practice with farming. Others taught school or worked in other more or less professional areas and only a few limited their work to medicine.

Early records show only 115 physicians living west of the Cascade Mountains and at The Dalles in 1860-1863, with a few others among the gold miners in the John Day and Jacksonville regions and in Baker County, who remained in Oregon following the Civil War.

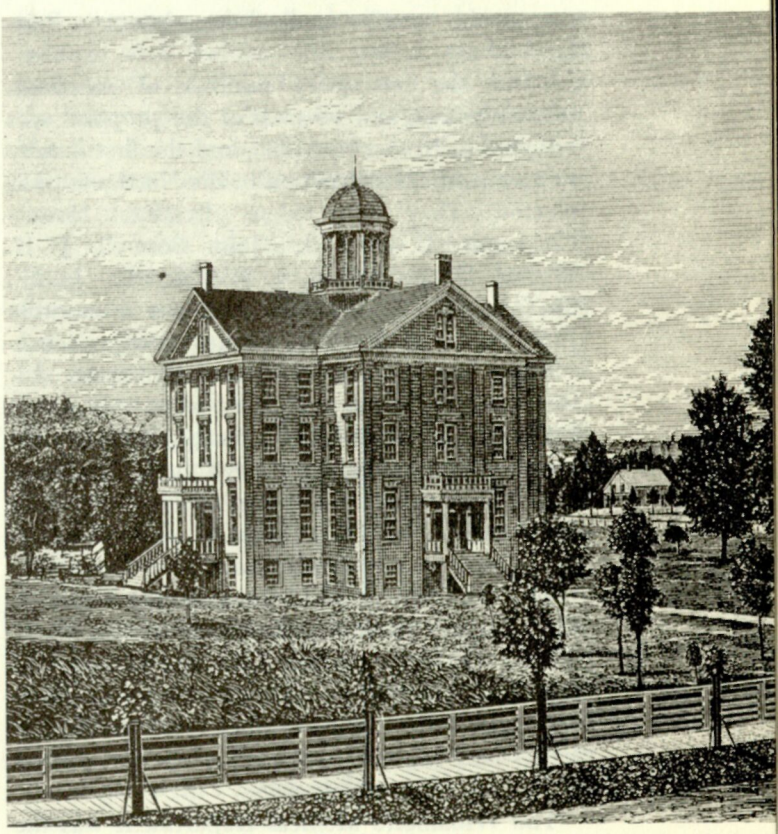
Even if the pioneers survived the cholera-ridden wagon trains to settle their land, the population was so scattered that epidemics were practically unknown until well into the 1860's.

But as the immigrants continued to pour over the mountains they brought scarlet fever, smallpox, measles, whooping cough, typhoid, other contagious diseases, and before long care of the insane became a public problem.

By 1865 a problem familiar today became painfully evident. There were not enough reasonably well-trained physicians to meet the needs of a rapidly increasing population. So Governor A. C. Gibbs and a group of physicians asked the Board of Trustees at Willamette University in Salem to establish a medical department in Portland, the largest town. In February, 1865, the Board established the "Oregon Medical College" and six men were appointed to the faculty. Temporary offices were set up at what is now 205 Washington Street, but the fledgling medical department never materialized. Not one student was given instruction.

Credit for the next step goes to Dr. J. H. Wythe, president of Willamette University who decided his school should try again in Salem. He was a physician as well as a clergyman, had practiced medicine in Pennsylvania and had been a member of the Medical Corps of the Northern Army during the War of Rebellion. At Dr. Wythe's suggestion, a committee of three was named by the Willamette Board of Trustees to

Willamette University, 1867 — home of Oregon's first medical school.



Good Samaritan Hospital, completed in 1875, faced SW Lovejoy between 22nd and 23rd streets. The University of Oregon Medical School's first location was in a pasture behind this building and was shared with three cows.

discuss the inactive medical department in Portland.

After the customary number of meetings, maneuverings, and whereas'es the proposal was adopted in November, 1866, and the first faculty to give medical instruction in the Northwest was elected. They were Salem physicians Horace Carpenter, E. R. Fiske, John Boswell, J. H. Wythe, D. E. Payton, J. W. McAfee, A. W. Sharples, W. C. Warriner and the Honorable J. S. Smith, professor of medical jurisprudence

Since one building comprised the entire university at that time and there were only about 7,000 people in Marion County, facilities for training physicians must have been less than lavish. Comparison with other medical schools in the country shows that the infant department at Salem was on a par with most of them.

The first course of lectures began March 3, 1867, and at commencement the same year W. A. Cusick, D. M. Jones and J. L. Martin received degrees in medicine. The second term which began the following November continued for 20 weeks and required attendance at two courses of lectures for graduation.

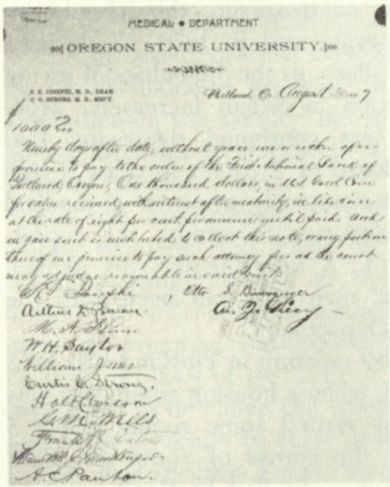
The Willamette Medical Department was the third of its kind west of the Mississippi and the first western medical school north of San Francisco. For the first time promising young men in the Northwest had an opportunity to study medicine. Before the Salem department opened, only wealthy families could send their sons to Eastern schools, provided the boys were hardy, and foolhardy enough to attempt the journey.

The press was kind to the new school. The Salem *Daily Record* of June 14, 1867, read "The medical department of the University went into operation early in the spring with 24 students, which is considered a very favorable commencement. To give opportunity for clinical instruction this their first season the faculty have offered to perform any needed surgical operations free of compensation when the parties are unable to render it."

The faculty's ambition to develop a "first class school" was in keeping with the missionary motives which founded Willamette in 1842, but their purpose was in no way as difficult as it would be today. Laboratories were practically unknown and elaborate clinics and dispensaries found in European medical centers were as foreign as the Sphinx. The requirements were sim-

University of Oregon Medical School's second building at NW 23rd and Lovejoy streets.

Original promissory note for $1,000 that launched the University of Oregon Medical School in 1887.


MEDICAL • DEPARTMENT

OREGON STATE UNIVERSITY

ple: some chairs and possibly a blackboard for the lecture room and any kind of enclosed space where a few cadavers could be dissected.

Although equipment was no particular problem, people soon were.

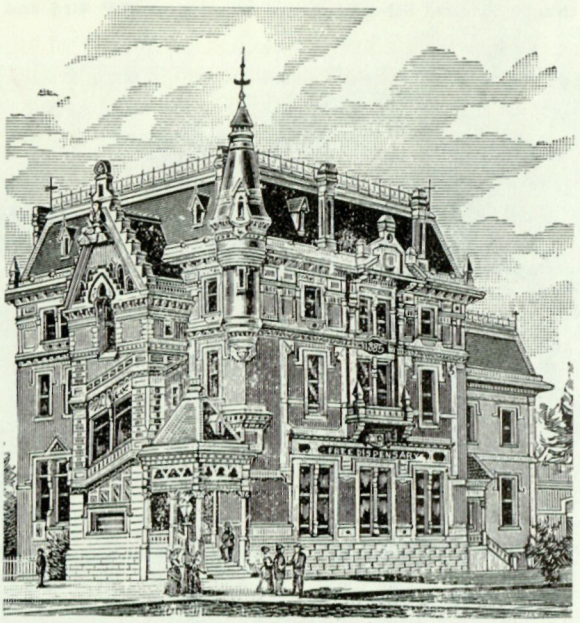
There is something in the nature of most physicians that makes them extremely independent creatures, inclined to shy away from controls. Because there was no firm administrative policy established between Willamette and the medical faculty, the physicians preferred to govern themselves without bothering to consult the Board of Trustees. And they did. The doctors also found many areas of disagreement within their own ranks.

As a result the Board, incensed at their recalcitrant "baby," presented a resolution in August of 1868 to discontinue the medical department. The proposal was tabled, but the first rift in the relationship had been formalized.

In all fairness, however, it should be pointed out that the majority of the medical faculty were poorly fitted by training to be instructors, but at the time Willamette officials had little choice but to take the few available men in the area, with or without diplomas. Dr. Wythe was probably the only one who had ever been on a medical staff before. He was a graduate of Philadelphia Medical College and was probably the best surgeon in the newly organized faculty, but he was appointed professor of physiology and hygiene while Dr. Carpenter became professor of surgery.

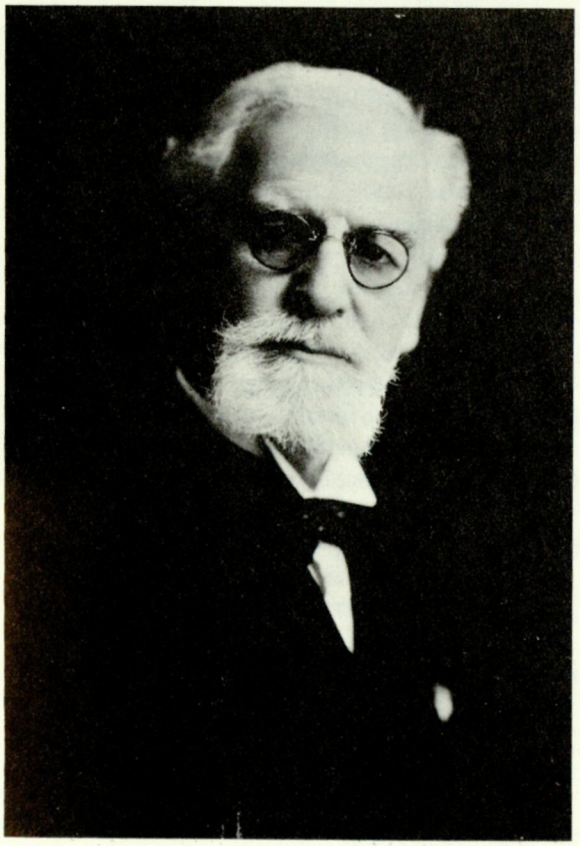
Now trouble was as certain as sunrise, and it came. The faculty was reorganized, but Dr. Carpenter was soon reinstated. President Wythe lost the battle, was "regularly tried, found guilty of charges preferred against him and expelled from the medical faculty by his own vote." Although the trustees disapproved the action and censored the physicians for their presumption, this was small comfort to Dr. Wythe. He left Salem to become pastor of the Taylor Street Methodist Church in Portland.

Dr. Carpenter, now dean, didn't appear to have much of a knack for administration for the faculty grumbled and growled, charged and counter-charged until he resigned in 1875. But Dr. Carpenter did manage to have the last word—literally. This rugged individualist kept the department's books and records. Much that would be of historical value was lost.



Willamette University College of Medicine at 15th and SW Couch streets, Portland—1885.

Dr. Simeon E. Josephi, first dean of the Medical School from 1887 to 1912.



In spite of the controversies, the school continued to operate and in 1876, 23 students were registered. Perhaps the difficulties of giving medical instruction in Salem increased. More than likely it was continued dissension that prompted the Board of Trustees to draw a sigh of relief and unanimously approve a medical faculty recommendation to remove the department to Portland. A new faculty was named, including several men who had been with the Salem Medical Department.

The first faculty meeting in Portland was held on June 18, 1878, when a housing committee was appointed. They rented some rooms above a livery stable on the corner of Southwest Park and Jefferson streets, the first Portland home of the Willamette University Medical Department. Faculty members at this first meeting were Drs. J. A. Richardson, A. Sharples, W. H. Watkins, R. G. Rex, W. H. Saylor, O. P. S. Plummer, dean; R. Glisan and L. L. Rowland. The first formal instruction took place the following December when the Portland population of 19,128 people certainly offered greater clinical facilities than Salem.

There was still another factor which influenced the move, the organization four years earlier of the Oregon State Medical Society on September 1, 1874. At their first meeting a committee on medical education was appointed to prepare an annual report on the general condition of medical education in Oregon compared with other states. Committee members Drs. F. A. Bailey, H. W. Ross and H. J. Boughton were asked also to report on the medical institutions in Oregon, instruction offered, requirements for graduation, methods of examination and the number of pupils and graduates at each commencement.

Formation of the Society gave physicians in the State a means to express their interest in medical education. In fact, at the Society's fifth annual meeting in 1878 the presidential address

by Dr. L. L. Rowland was titled "Medical Education," and a special committee was appointed to attempt an examination of the medical department of Willamette University.

Another incident that raised the specter of competition probably had some bearing on transferring the school to Portland. It was the organization in 1877 of the Oregon Medical College in Portland. This attempt, entirely independent of Willamette University, was stillborn in spite of local support.

But the end result was beneficial. After a series of conferences, the nine-member faculty of the proposed medical college was absorbed by the Willamette Medical Department, thus strengthening the faculty and at the same time eliminating the formation of a rival school in a thinly populated state.

But this arrangement had a few dissenters, among them our old friend Dr. Carpenter. In his presidential address to the State Medical Society in 1879 he recommended, "that this society do organize and establish under the incorporation laws of the State of Oregon a State institution to be called the Oregon Medical College with a faculty of eight professors. . . ."

This was the first known suggestion to place medical education under the jurisdiction of the state. However, Dr. Carpenter did not suggest control of the proposed Oregon Medical College by the State University which had opened its doors at Eugene in 1876. Rather he proposed having the State Medical Society assume responsibility without supervision by lay boards of control which he had found so onerous at Salem.

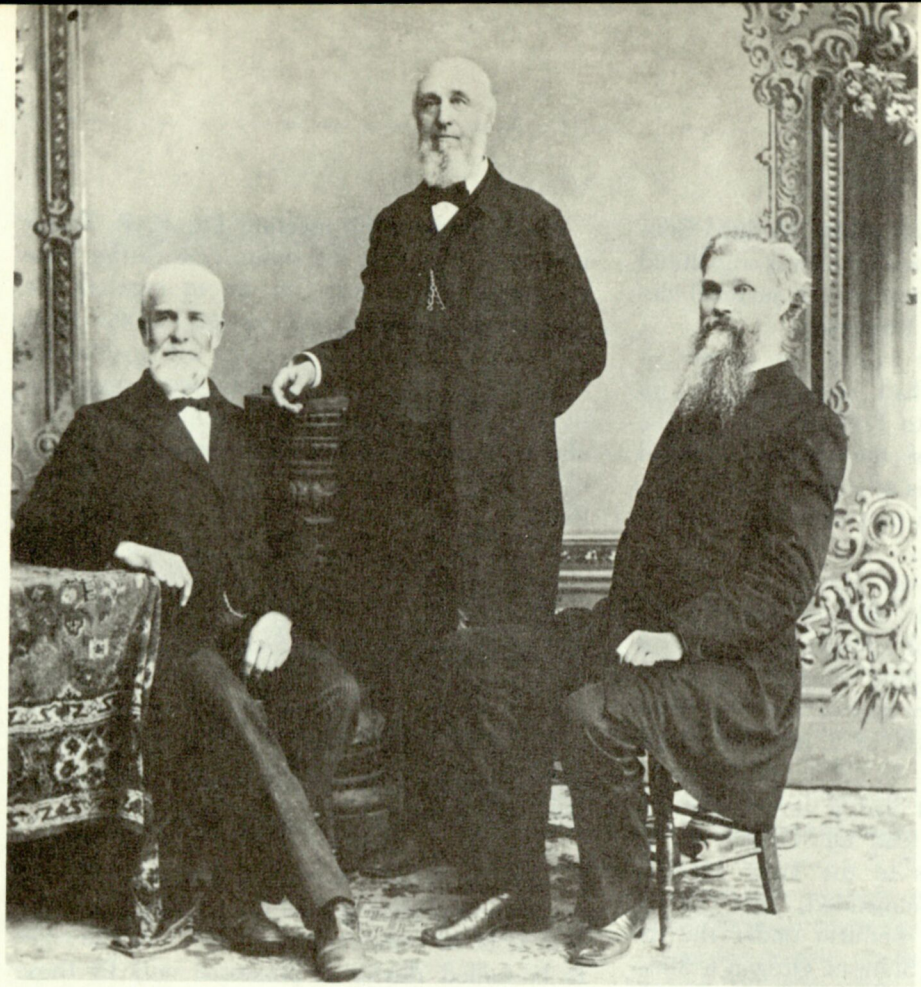
Two significant proposals were made at the Society's meeting in 1880: that a medical journal be published by the medical society and that the society prepare a proposal stressing the importance of "a high standard of graduation and that higher preliminary attainment be acquired of all applications for admission." The first recommendation bogged down in committee red tape but the last was adopted unanimously.

At the same 1880 meeting Dr. E. P. Fraser presented two bills for submission to the State Legislature. One was "an act to regulate the practice of medicine and surgery in the State of Oregon" and the second "an act to establish a state board of health." Both were approved by the Medical Society which five years later also approved a bill to "establish a state board of medical examiners and licensors and to define the duties and powers of such a board."

These incidents are characteristic of the society's recognition of the responsibility physicians hold to their communities and state. For the past 87 years their interest in medical education has been a powerful force in elevating the standards of the profession in the Northwest. Certainly their concern was justified as a glimpse at the standards of medical practice during that period will show.

A report in 1879 by a state medical society committee reads, "In this connection we take occasion to protest against the prostitution of the title M.D. so commonly practiced. . . . The right to be called 'doctor' is possessed only by those who have that degree legally conferred upon them. . . . The ignorant pretenders who brazenly put 'M.D.' to their names to spell 'sody,' 'sweat oil,' and 'blew mas' in their prescriptions, who cannot tell mumps from erysipelas . . . such pretenders we say do us but little injury for their ignorance is so apparent that the public is not long in perceiving it. . . ."

In 1879 a man who was to play a vital role in medical education in Oregon joined the Willamette Medical faculty as lecturer on diseases of the mind. He was Dr. Simeon E. Josephi, a graduate of Toland Medical School in San Francisco, who had located in east Portland and was connected with the insane asylum, headed by Dr. J. C. Hawthorne. In 1880 when Willamette was admitted to membership in the Association of American Medical Colleges Dr. Josephi was also given the chair of anatomy.



First State Board of Medical Examiners, 1889.

Inevitably the school outgrew its quarters above the livery stable and in 1885 a new structure was built at 14th and Couch Street in what was then the heart of the city. Behind its Victorian embellishments it contained a 150-seat auditorium, a dissecting room with 20 tables and a new refrigerator large enough to store 30 bodies for dissecting material. This building housed the school until the move back to Salem in 1895.

Progress in medical education was slow, as it was across the country, until Johns Hopkins University School of Medicine opened in 1893. This was the first school in America to require a Bachelor's degree for admission.

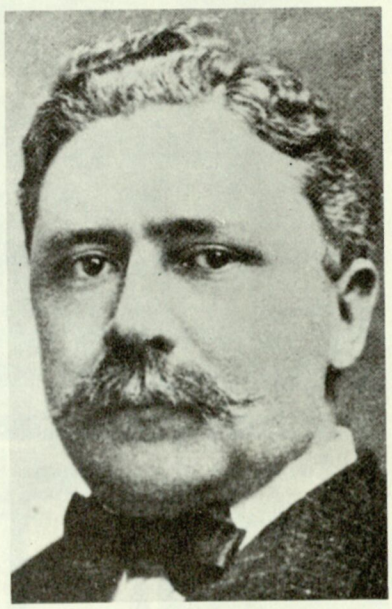
But in a brief 20 years Oregon's wilderness physicians had pushed and prodded, fought and labored, defied Indians, epidemics, and ignorance, to establish and support a medical school with standards comparable to many in the far older eastern cities.

In 1883 attendance requirements were moved up from two to three courses of lectures to qualify a student for medical examinations. At that time, first year students were required to study anatomy, physiology and chemistry and attend lectures in the other subjects. To the second year requirements the faculty added materia medica, therapeutics, theory and practice of medicine, surgery, obstetrics, diseases of women and children and all the special branches.

Clinics were held in all the "practical branches" and at the end of the second year final examinations were given in anatomy, physiology and chemistry, but attendance at lectures in these subjects was still required during the third year. The last year included surgery, theory and practice of medicine, materia medica and therapeutics, obstetrics and gynecology and special branches together with the clinics. This change marked the beginning of a graded curriculum such as was established at Northwestern University Medical School, then the Chicago Medical College, in 1878.

Probably the most important event of the following year was the election to the faculty of Dr. K. A. J. Mackenzie, as a lecturer in anatomy, who would become one of medicine's giants in Oregon.

Willamette University College of Medicine in Salem—1905.



Dr. Kenneth A. J. Mackenzie, second dean from 1912 to 1920.

During the next 12 years two events occurred which were to affect the progress of medical education in Oregon. One was moving the Willamette Medical Department back to Salem in 1895. The immediate cause, according to the Willamette Board of Trustees' minutes of October 7, 1895, was the "sudden withdrawal of all hospital facilities" in Portland. This apparently referred to the old Methodist Hospital at East 30th and Stark streets that was closed down after scathing attacks against it in the local papers.

Lacking other facilities, the medical faculty appealed to the Board of Trustees for aid. Appalled at wasting 17 years of effort, they bustled about to provide more or less temporary quarters, for the uprooted medical department, at Salem, where the school reopened and functioned until a new brick building was erected for medical instruction on the Willamette campus in 1905.

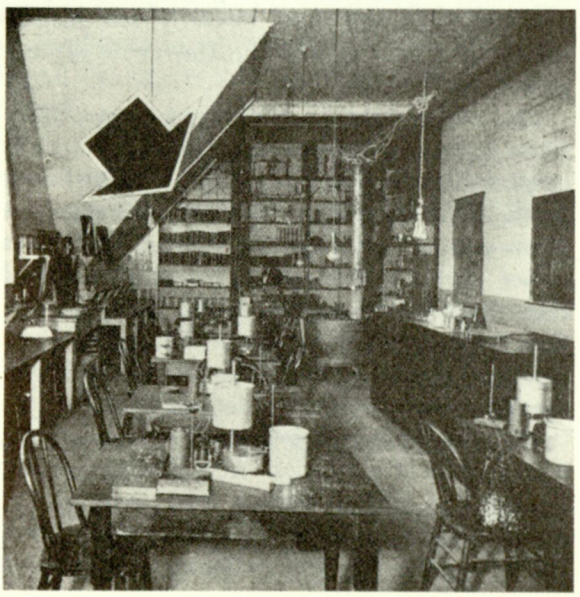
It was described in the Willamette University catalog of 1908 as "new and modern in every detail" but this statement apparently employed some literary license. The dissecting room was located in an unfinished top floor of the building in a bare area with exposed rafters and studding. Some tables for cadavers were provided, but there was no modern equipment for an anatomic laboratory. The medical department occupied this building until 1913 when it was discontinued by a merger with the University of Oregon Medical School.

The second and more significant event illustrates again the independence of spirit which is characteristic of physicians. Even a brief look at their history reveals incident after incident when doctors gambled their professional futures rather than sacrifice personal convictions. And there is no better example of this independence than in the events that split the Willamette Medical Department and led to the formation of the University of Oregon Medical School.

The trouble began over a new appointment to the chair of obstetrics. At a faculty meeting on April 8, 1887, a motion was made by Dr. A. D. Bevan, professor of anatomy, that "gave rise to a protracted and acrimonious discussion

First Multnomah County Hospital between First and Second and SW Hooker and Wood streets.

Part of the 1912 Medical School Library, located in the old physiology laboratory (23rd and Lovejoy streets).



during which much personal bitterness was manifested and an apparently irreparable breach created in the faculty." When the meeting was over the entire faculty had resigned and the recording secretary was instructed to strike out most of the minutes.

Even after tempers cooled four men remained adamant, and a month later a letter to Willamette's acting dean made their resignations official. The dissenters were Drs. K. A. J. Mackenzie, H. C. Wilson, George M. Welles, and S. E. Josephi. They were joined by several other local practitioners and together set about organizing a rival school.

One of the most active men in the project was Dr. C. C. Strong, a brother-in-law of Judge M. C. Deady who was then president of the Board of Regents of the State University. The judge's interest in the new venture may have had some influence on the Regents, who granted a charter in the name of the University of Oregon Medical School.

At a June meeting in 1887, four other physicians joined the first four rebels to be named professors in the original charter. They were Drs. A. C. Panton, Arthur D. Bevan, Otto Binswanger and Curtis C. Strong. The charter specified that "the course of study in said school of medicine preparatory to graduation therefrom shall embrace two years."

Dr. Josephi was elected dean and instruction began in the fall of 1887 in a former grocery store which was moved to a sliver of land on the Good Samaritan Hospital Grounds at what is now 23rd and Marshall streets. The building contained a lecture room on the ground floor and a dissecting room above. Cadavers were hauled up through a trap door in the floor with a block and tackle.

The venture was financed by a $1,000 loan from the First National Bank of Portland, on a joint note signed by the faculty members. When Marshall Street was extended in 1889, the little building was moved to 23rd and Lovejoy streets. Then it was moved again in 1893 to make room for the "sightly, compact and well-equipped medical college building" erected that year. Being close to both Good Samaritan and St. Vincent Hospitals, surgical and medical patients were available for observation under treatment and the new structure served the school well until 1919. Then it burned, as equipment was being moved to the present Medical Science building on Marquam Hill.

Early day surgery at St. Vincent's Hospital, 12th and Marshall streets.

The fire did have certain benefits. It provided a handy way to dispose of some horrible pink-striped lab coats Dr. William (Pop) Allen had bought. During the excitement a young lab assistant rushed heroically into the burning building, grabbed all the coats and threw them into the flames. Rumor persists that he was awarded a medal for valor.

The location of the fire also expedited a settlement for insurance payments. A still smouldering dissection room is enough to discourage the snoopiest of investigators. And it did. After one whiff they retreated to do their estimates at some distance.

The poor fellow who lived next door wasn't as lucky. Dr. Robert Benson tried to save his pathological specimens by throwing them out the window to students standing below. Between poor pitching and bad catching most of the collection landed in the neighbor's vegetable garden. He spent the next month picking tumor specimens out of his potato patch.

The first admission requirements were "satisfactory evidence of knowledge of the common English branches including reading, writing, spelling, grammar, geography, arithmetic and so forth." A minimum of three years was required for graduation.

Although some time had been given to teaching microscopy, histology and physiology, the first actual laboratory course in bacteriology was given in 1892 by Dr. A. E. Mackay, who proudly displayed the first tuberculosis bacillus seen under a microscope in the Pacific Northwest. By 1898, when the School adopted the requirements of the American Association of Medical Colleges, the course has been lengthened to four years and studies were being graded.

"Progress flourished anew" said the late Dr. Laurence Selling. "The School now had the use of Dr. Mackay's microscope, the only oil emersion lens in the Northwest. He not only treated students, but also physicians, to their first look at germs.

Oregonian 3/18/14

SITE FOR MEDICAL COLLEGE DONATED

O.-W. R. & N. Gives 20-Acre Tract Along Terwilliger Boulevard to State.

HOSPITALS MAY BE BUILT

Terms of Gift Brought About by Efforts of Dr. Mackenzie Make Possible Establishing of Scientific Center.

Twenty acres of commanding hillside property along the Terwilliger boulevard in South Portland, valued at about $100,000, have been given to the State of Oregon by the O.-W. R. & N. Company, as announced yesterday by J. D. Farrell, president of the company. The site is to be used as a campus for buildings to be erected for the medical department of the University of Oregon, but the terms of the deed of gift stipulate that the donated premises may be used for other public purposes, such as hospitals and for the furtherance of scientific research, investigation and teaching along more general lines.

The actual 20 acres that are to be used for the medical campus have not as yet been selected by the officers of the school, but they are to have their pick of over 100 acres contained in the tract owned by the railroad company. The entire tract lies in the foothills of South Portland, running south from Marquam's gulch to Lowell avenue and east from the region known as the Portland City Homestead up to the tract shown on the city maps as Portland Homesteads.

Dr. Mackenzie Credited.

To Dr. Kenneth A. J. Mackenzie, dean of the medical department of the university and chief surgeon for the railroad company, is largely due the credit for the successful promotion of the plans and ideas which culminated in the announcement of the gift to the state.

"The lecture room was located on the main floor and there were cuspidors scattered around through it, since so many of the boys chewed tobacco. The anatomy lab was located on the second floor where there was a side door which was the one most used. In the summer time it was as natural as breathing when coming out to look up to see if the water bag was coming down. In fact, during the summer session, the sidewalk was kept wet with this favorite pastime. The winter season didn't dampen the spirit much either."

But the days of lighthearted antics were running out, and soon, for too many graduates were being failed by the State Board of Medical Examiners. Both the School and faculty were under attack by the press and the situation became so acute that it was taken up by medical societies and local journals.

The *Medical Sentinel* commented "Either the medical colleges of Oregon ought to improve or disband or else there should be a change on the State Examining Board by the removal of one or more members."

At the 1908 examinations, five out of the eight graduates who appeared failed to receive a license to practice. Apparently much of the difficulty could be laid to the different standards held by members of the State Board. At a meeting of the Marion County Medical Society in 1908 Dr. W. Carleton Smith said, "The examination in May, 1907, in nervous and mental diseases was conducted by an examiner who had failed eleven applicants previously. The average of the four who failed was 52 per cent in this subject. When those same men repeated the examination in January, 1908, and were tested by another board member the average for the four was 86.5 per cent."

Apparently some officials, with the best of intentions, were attempting to meet the pace set by the American Association of Medical Colleges and the American Medical Association—a pace so fast that the faculty found it almost impossible to follow at that time. Smarting under criticism at home and from the AAMC they voted in November, 1907, to resign from the Association, rather than be ousted.

But the School's troubles were just beginning, for in 1910 it was the object of a bitter denunciation in the famous report of Abraham Flexner on Medical Education in the United States. For a time it appeared the institution would go under as many others had. In 1906 there were 161

medical schools in the country, but not more than 80 had any stature, according to the American Medical Association report by the Council on Medical Education and Hospitals.

Demands for equipment and salaries for full-time instructors in at least the laboratory subjects soon weeded out many of the weaker schools and before long only 135 remained. Of these, 29 were rated as Class B and 72 as Class A. The University of Oregon Medical Department rated an A.

The *Medical Sentinel* rejoiced: "It places the Oregon School in the same classification as the big medical schools in the East."

Lacking financial support, the affairs of the Portland school became more and more tangled because of insistent demands for higher standards. At this time the budget from the State's general fund was $1,000 annually. Money was needed for equipment, for full-time instructors, for all purposes, so the faculty appealed to the University Board of Regents. As a result the appropriation increased to $2,500 yearly and the Board president recommended increasing this amount to at least $10,000 annually, so the School could meet the requirements for continued recognition by the standard-setting authorities.

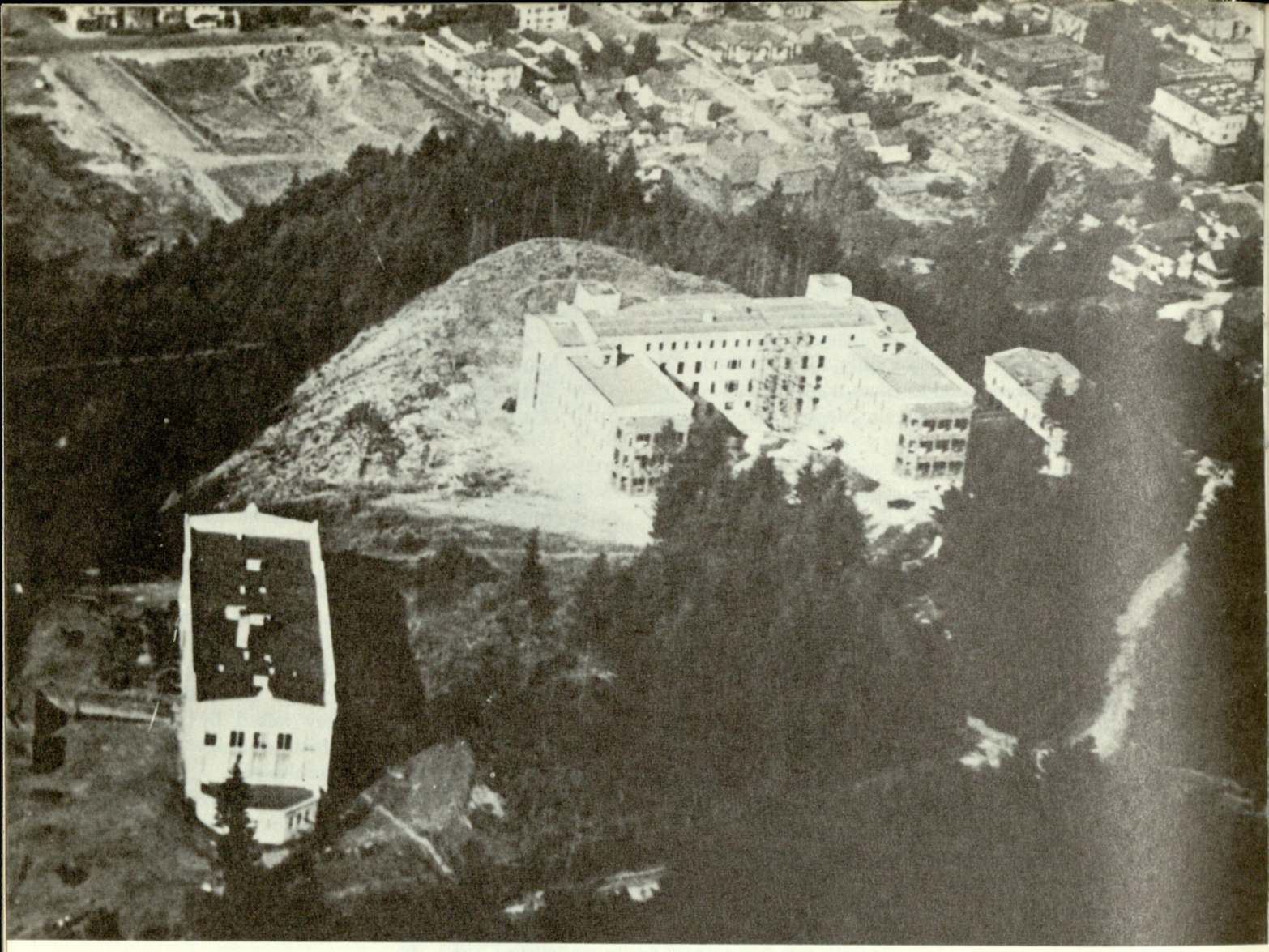
At its next session the legislature came to the rescue with an appropriation of $30,000 for the 1911-1912 biennium. Bolstered by the promise of more support, the faculty took another forward step, the appointment of Dr. David N. Roberg as the first full-time instructor at the School. He became professor of anatomy in 1910 and Dr. J. D. MacLaren was made professor of physiology the following year.

By 1913 six salaried instructors had been added to the staff including Drs. F. C. McLean and R. B. Dillehunt. Higher standards brought increased need for better hospital and dispensary facilities for the students and in 1909 preliminary arrangements were made to use the County Hospital for teaching purposes.

Before that, two attempts to maintain a dispensary in downtown Portland had been ineffectual, but the People's Institute at Fourth and Burnside Streets was more successful. In 1908 a clothes closet on the second floor of these rooms was the original dispensary. The janitor made a table and with money raised by the Mothers Club of the People's Institute a few instruments and supplies were purchased.

By 1910 the Institute was serving between 15 and 25 patients each day. Recognizing the advantage of an affiliation with the Institute, the medical faculty agreed to pay the dispensary attendant $25 a month, thus obtaining the first

Peoples Free Dispensary at Fourth and Jefferson streets, 1915.



A 1920 view of the first unit of the Medical School and Multnomah Hospital (under construction) on right.

workable outpatient facilities for the School. Gift funds from Jacob Kamm and members of the Arlington Club helped underwrite the dispensary, and by 1916 better quarters at Fourth and Jefferson streets were obtained.

After guiding the school through its first critical 25 years Dean Josephi resigned in 1912 to be succeeded by Dr. K. A. J. Mackenzie. The following year the Willamette Medical Department in Salem was consolidated with the Portland school.

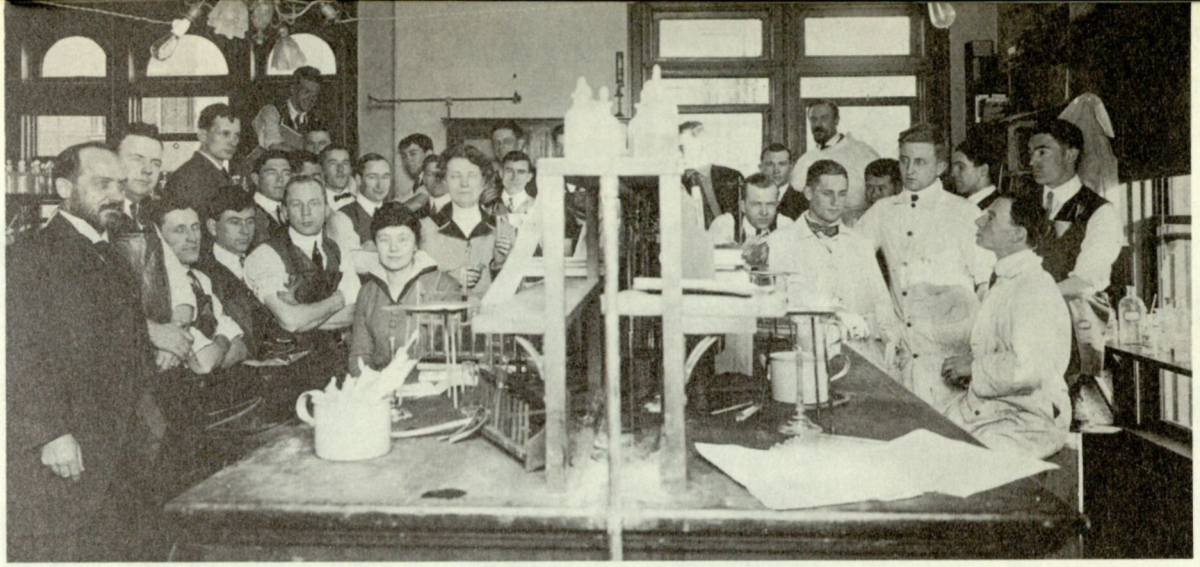
The Salem school had struggled valiantly for eight years, but the limited funds of a private university and meager clinical facilities of the small town made the merger inevitable.

In June of the same year another powerful ally of medical education was born. The University of Oregon Medical School Alumni Association was organized for graduates of both schools.

The School had survived a perilous childhood and adolescence, and in doing so had outgrown the frame building on 23rd and Lovejoy Streets. With each class pressure increased for larger labs, better equipment, and modern instruction.

No one was more aware of the need than Dean Mackenzie. Fortunately, he had been chief surgeon for the Oregon Railway and Navigation Company and knew members of the Board of Directors well. Some years before, the Company had bought twenty acres, sight unseen, for a roundhouse. A more unlikely site is hard to imagine: it was perched a mile and half above the city on an inaccessible hilltop.

But Dean Mackenzie saw the location through different eyes. He envisioned a medical center far above the city's noise and grime and he lived to see the beginning of his dream become a reality. He persuaded the railroad officials to donate the original 20 acres atop Marquam Hill for the School and from that day he worked unceasingly to develop "Mackenzie's Folly" as



Dr. Howard (Bunny) Haskins with his students in the UOMS Physnological Chemistry Laboratory

some called it. The gift of a new campus in 1914 was followed the next year by a legislative appropriation of $50,000 for a new building.

But there was a joker in the deck. The solons stipulated that $25,000 was to be raised privately. This was not easy. Many businessmen and practitioners considered the site impractical and did not hesitate to say so.

Finally the matter was threshed out and solved at a Chamber of Commerce dinner meeting. During the heated debate, Julius Meier had been moving quietly about talking to members. He waited for a lull, then stood up and calmly announced that the required amount had been guaranteed. The cornerstone of the first unit, the Medical Science building, was laid on May 1, 1918, and the three story building completed the following year.

The second unit, then called Mackenzie Hall, was erected in 1921 with legislative funds of $113,000 and a similar amount from the General Education Board of New York, a Rockefeller-endowed foundation. Although the new building was four stories high and had twice the capacity of the first unit, total enrollment had to be restricted to a maximum of 60 students.

In the meantime the need for a new County Hospital had become urgent. Knowing clinical facilities adjacent to the School would be valuable to the students, Dean Mackenzie offered the Multnomah County commissioners nine acres for a County Hospital and a nurses' dormitory. His offer was accepted and construction of Multnomah Hospital was well underway in 1920 when the Dean was fatally stricken with angina pectoris. But in eight years he had established the Medical School in a permanent and eminently desirable location and had joined the fundamental elements of patient care and teaching into a new era of medical education and research in Oregon.

During the School's formative years and those that were to follow, the honor roll of men who aided medical education in Oregon grows impossibly long to recount. Physicians like Harold Myers, Howard Haskins, William Allen, Frank Menne, Harry Sears, Ralph Fenton, Nobel Wiley Jones, T. Homer Coffin, Albert Mackay, John Dickson, Joseph (Bill) Bilderback, Eugene and Paul Rockey, Robert Yenney, Laurence Selling, Thomas Joyce, Frederick Kiehle, Lyle Kingery, J. Guy Strohm and many more like them were the backbone of the School. Had they not served there would be no University of Oregon Medical School today.

For the teaching of medicine is, possibly more than any other science, a living thing, translated in spirit and purpose from the practitioner to the student—and it would be hard to find one man on the School faculty who did not give up a great deal in order to teach.

High on this illustrious roster is the name of Richard B. Dillehunt, third dean of the Medical School and Chief Surgeon of the Shriners' Hospital for Crippled Children for 19 years. Although he had been assistant dean a major share of the time since 1912, his election took place only after an intensive battle between two factions of the faculty. The majority of the older clinical members considered the laboratory sciences as merely a necessary adjunct for training physicians. The younger clinical men and the laboratory staff believed equally strongly that medical education must be primarily a science. Dean Dillehunt was destined to walk a tightrope between the two factions until each recognized the importance of the other's role.

Dr. Richard B. Dillehunt, third dean from 1920 to 1943.

Dr. David W. E. Baird, present dean, 1943—.

"Dilly," as he was affectionately known, was a man of enthusiasm, ability, and persuasive charm that he could employ at will. And he used his attributes whether on Marquam Hill or in the halls of the Legislature to spearhead the School's rapid growth during the next 23 years.

In 1921, operation of the Portland Free Dispensary was reorganized, providing the Medical School with more reliable outpatient clinical facilities, but the dispensary was far from ideal.

In Dr. Warren Hunter's presidential address at the Portland Academy of Medicine's annual meeting in 1941 he said, "At that time the Southern Pacific's red electric trains ran out Fourth and rounded that particular corner with a clanking and screeching of wheels which made it difficult to hear well and certainly produced some adventitious pulmonary and cardiac sounds if one should chance to be using a stethoscope. . . . the place was small and always crowded. In the farthest and darkest corner a fluoroscope and x-ray machine were placed . . . a new entrance for those with venereal diseases was made on Fourth. Dermatologic patients were seen here and in these quarters a young man named Lyle Kingery gave the first formal lecture on dermatology.

"It was in the patients' waiting room that the first clinical pathologic conferences or as they were termed then, autopsy clinics, were started by Dr. Robert L. Benson. . . .

"Days, sometimes even an entire week would go by without an autopsy during the first year, when I doubled as a student assistant and a stenographer for the pathology department. Then in 1921 came the contractual relationship between the county commissioners and the Medical School whereby all coroner's autopsies were performed by the professors of pathology who were designated as corner's physicians."

Dr. Hunter went on to recall the quality of postgraduate clinical training at that time. He said, "In 1920 the Board of Medical Examiners of this State did not require evidence of candidates having contracted to serve a year's internship in an approved hospital. Furthermore only a few such internships were then available locally.

"Residencies as we now define them were unheard of. Scarcely any of the specialty boards were then in existence in the United States. A graduate could go directly into clinical practice after passing the state board examination, if he so desired, and some did so. Others took such internships as were available while others became assistants to older physicians. By 1923, the Board of Medical Examiners began to require evidence of an intention to serve a minimum of one year before a license was granted. Approved residencies in the modern sense, lagged by several years."

In 1924 the campus was enlarged by a gift of 88 acres of adjacent land from the Jackson family, publishers of the *Oregon Journal*. The tract provided room for future construction and 25 acres of it were deeded to the United States Government in 1926 as a site for a veterans hospital.

The School now entered a period of consistent

The 1924 campus bus hauled students and supplies from downtown Portland.

growth. In 1926 Doernbecher Memorial Hospital for Children was completed, providing 70 beds for sick and disabled youngsters committed to the Medical School by Oregon counties under the Children's Hospital Service Law. In memory of their father, S. S. Doernbecher, his children gave $200,000 for construction of the building and another $120,000 was donated by local citizens.

In 1931, $400,000 from the General Education Board of New York provided the Medical School with a modern Outpatient Clinic on the campus. In 1939 the University State Tuberculosis Hospital was completed with state and federal funds as well as gifts from the family of former Governor Julius L. Meier.

During the same year the Medical School Library and Auditorium were completed with a gift of $100,000 from Dr. John E. Weeks, a like amount from the Rockefeller Foundation and a grant of $163,500 from federal funds.

The handsome structure was the realization of a long-cherished dream for Medical Librarian, Miss Bertha Hallam. This "mighty mite" who arranged the School's first collection of books in an elevator shaft back in 1919 has prodded the Library's growth with an indomitable determination up to and even beyond her retirement in 1965.

The Library is now a major source of post-graduate education for physicians. Throughout the years books, periodicals, historical items, and gift funds, have arrived in a steady stream and to this day donations from the medical societies are given annually. In 1933 almost 2,000 volumes from the collection of Dr. Ernst A. Sommer, founder of the Sommer Memorial Lectures, was added to the collection which now exceeds 100,000 books.

But a history of the Library would be incomplete without acknowledging the important contributions made to it and to medical education by the periodicals and journals.

The first published in the Pacific Northwest was in 1866, the *Oregon Physio-Medical Journal,* edited by Dr. J. C. Shelton of Salem.

The *Oregon Medical and Surgical Reporter* was published in 1869-70 by the Willamette Medical School faculty. It was a solid effort by the better-trained and more progressive men to elevate standards of medical training and practice, but there were too few doctors in the Pacific Northwest to support a regular publication at that time.

Actually the *Proceedings of the Oregon State Medical Society* provided the most reliable substitute for a medical journal for many years. From the time the Society was formed in 1874 until 1893, when the *Medical Sentinel* began in Portland, the Medical Society's *Proceedings* or *Transactions,* as they were sometimes called, represented the only permanent printed record of medical activity in the state. The *Sentinel* reported the Society's actions until 1910 when *Northwest Medicine,* which had been published in Seattle since 1903, became the official organ of the Society. As medical practice splintered into various specialties, journals for the specific areas developed, but in the meantime *Northwest Medicine* had become the voice of nearly every medical society in the Pacific Northwest.

Miss Bertha Hallam, Medical School Librarian for 46 years, with friends from class of 1943.

Dr. Esther Pohl Lovejoy, one of 166 women graduates of the University of Oregon Medical School. Through Dr. Lovejoy's financial aid more than 75 students have been able to complete their medical educations.

Miss Elnora Thomson, R.N., pioneer leader in Public Health nursing and first director of the Univeristy of Oregon Department of Nursing Education from 1926 to 1943.

But more than books are required to provide a state with sound medical education, more than buildings, equipment, students, dedicated teachers. The intangible essential is what one philosopher has called "the physicians' divine unrest"—his stubborn quest for more and more knowledge—not for its own sake but to use as a better tool of his trade."

Say a physician is motivated by compassion and he will squirm with embarrassment, ostensibly because he has been schooled to consider such frankness in poor taste. Actually he flinches because the statement is true and therefore threatens his carefully-acquired reserve. Equanimity is a physician's armor—how else could he endure constant exposure to pain and death? But beneath his professional veneer lies the motivation that is part of the history of medicine and medical education. It is the catalyst which has fostered the growth of research as well as the resurgence of postgraduate education for physicians during the past 25 years.

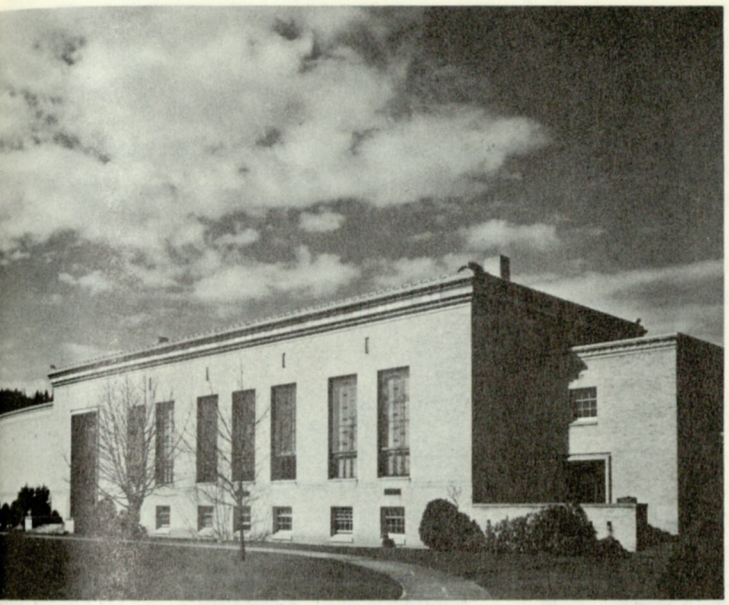
In 1941 Dean Dillehunt established a division of experimental medicine at the School headed by Dr. Edwin Osgood. This first formal step into the medical unknown opened a path which would one day take him to international eminence for his work in leukemia and chromosome research.

But by then the monstrous shadow of World War II had stretched across the civilized world bringing with it cataclysmic changes in the practice and teaching of medicine. Much of the present research had its beginnings in the knowledge gained in World War II field hospitals.

Pearl Harbor shattered many a plan, personal and professional. The faculty was stripped to a skeleton crew as man after man entered military service and those who remained shouldered brutal schedules to support the School's teaching and patient care programs.

Instruction was stepped up to a year-around basis to supply doctors for military service as well as a civilian population depleted of so many doctors by the War. As people by the thousands poured in to work in Oregon war industries, the demands upon physicians were so great that many of them became casualties of war from sheer overwork.

In 1943 a series of heart attacks forced Dean Dillehunt into semi-retirement and he remained dean emeritus until his death in 1953. An editorial in the *Oregon Journal* said of him, "No



The Medical School Library—completed in 1939.

Drs. William Allen, Albert Mackay and John Weeks, 1941.

man can win a greater tribute than to have his name indelibly engraved on the hearts of children who have found a capable and helping hand in their suffering. That Dr. Dillehunt did. It far outshines any words that can be written on paper or chiseled on stone."

The Dillehunt Memorial Lectures, which are held annually at the Shriners Hospital are supported by a bequest in Dr. Dillehunt's will.

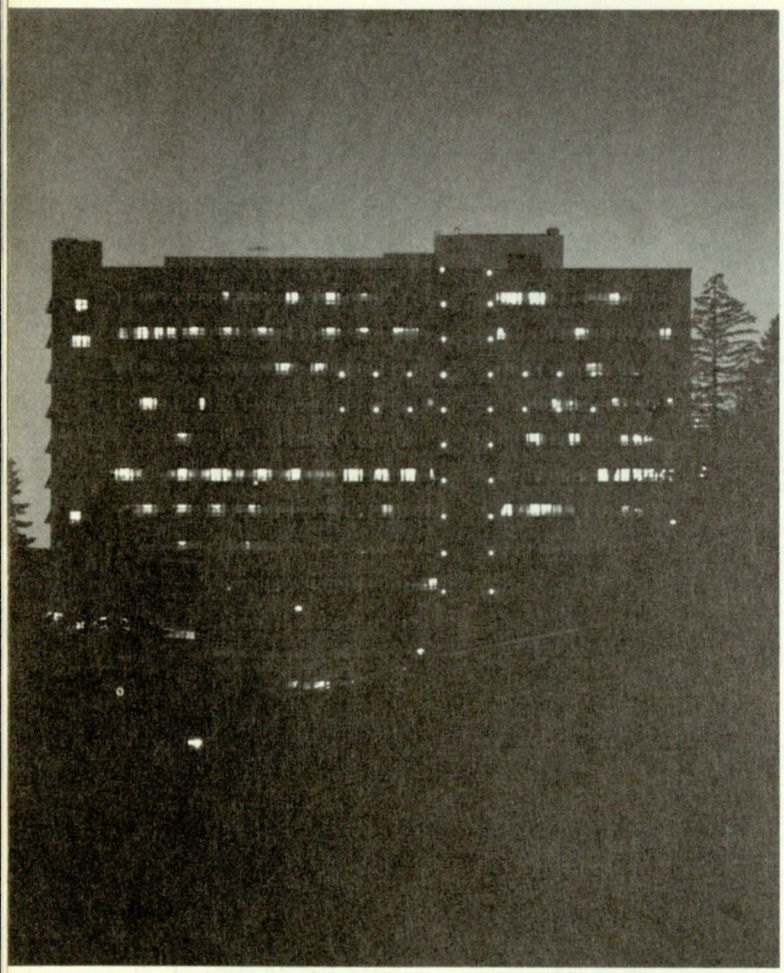
The fourth dean of the Medical School was uniquely qualified to fill the post. He knew every step of the way. From the day David W. E. Baird enrolled at Eugene in 1918 through his years as a student, intern, instructor, practicing physician, professor, director, each step was father to the next until all he had learned on the long road up became a Gibraltar of experience and knowledge which supports the Medical School to this day.

Dean Baird has a not-so-secret weapon he uses to measure every proposed reform, innovation, curricular development. The yardstick is "will it benefit the students?" If it will, the Dean is a man singularly hard to dissuade. But he remains unconvinced that change and progress are necessarily synonymous.

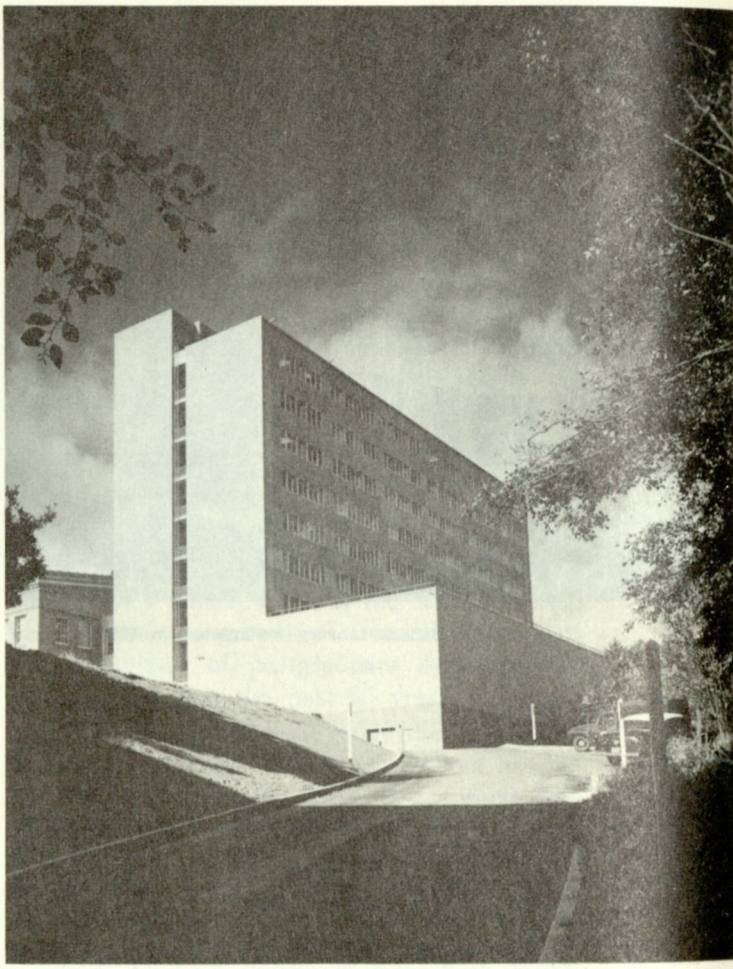
The war's end in 1946, brought new dimensions to medical education. So much remained unknown that must somehow be revealed. During the first 75 years, medical education in Oregon had followed an uphill, often meandering path. Now an explosion of knowledge took place and each burst illuminated another dark area to be explored.

The School, the state and county medical societies, various specialty groups—all began offering postgraduate courses, lecture series by visiting scientists. Volunteer faculty members who had long been the backbone of the School's instructional programs returned to teach in record numbers. In 1943 they numbered 102. Today over 600 men and women practitioners donate their time and skill to some phase of the School's instructional programs—quite an increase over the original faculty of seven men. The Sommer Memorial Lectures, now given in conjunction with the annual UOMS alumni meetings, are attended by 500 yearly.

Enthusiasm is as contagious as measles and each new advance, each new technique that



The 14-story Medical School Teaching Hospital, 1956.



The 9-story Research Building, 1962.

pushed back the crippling, the lethal diseases, kindled more understanding and public enthusiasm for medical education and research. The housewife listening to a radio account of an effective new antibiotic, the businessman reading a newspaper report of a surgical "first", the grandmother watching her grandchild run on a once-malformed leg, all of them, by the millions, became a powerful ground swell of support for medical progress. And inevitably, with this support came financial backing at every level of government, as well as from many private sources. State funds built the Crippled Children's Division on the UOMS campus in 1954 and state and federal funds completed the 14-story Medical School Hospital in 1956. It was here that Dr. Albert Starr performed the first successful implantation of an artificial heart valve in 1960. Since that time the prosthesis has been used to save over 30,000 lives throughout the world.

In 1962 the nine-story Research building was completed with $2.5 million from the Oregon State Legislature, the National Institutes of Health and the Medical Research Foundation of Oregon. This organization was formed in 1942 with $5,000 donated by physicians of the Portland Academy of Medicine, an important contributor to medical progress since 1907. The MRF, with current assets of more than $5 million, serves as a fund-raising and disbursing agent for donations to medical education, research and patient care programs.

Now scientists in basic research had a long overdue home of their own, but characteristically, the building was crowded before the move in had been completed. The Portland Hearing and Speech Center, an eight-story Women's Residence completed in 1965, current construction projects such as the expansion of the Medical School Library, a seven-story addition to the venerable Outpatient Clinic, a new parking

structure—these too, are symbols in concrete and steel of the growth of medical education in Oregon.

Postgraduate courses launched by the Kellogg Foundation back in the 1940's have continued to expand as practicing physicians from Astoria to Ontario respond to the need to keep abreast with an avalanche of new medical knowledge. Throughout the state the larger hospitals now offer postgraduate courses and lecturers for physicians.

Each year as 340 medical students, 36 interns, 159 residents, and more than 2,000 physicians continue their education, the Medical School campus swarms with young men and women students studying in related fields. The University of Oregon School of Nursing which began in 1910 with three students today has 311 in the baccalaureate and 32 in the masters degree programs. The University of Portland now has a basic degree nursing program and three hospitals, Good Samaritan and Emanuel in Portland, and Sacred Heart in Eugene, grant nursing school diplomas for their three-year programs.

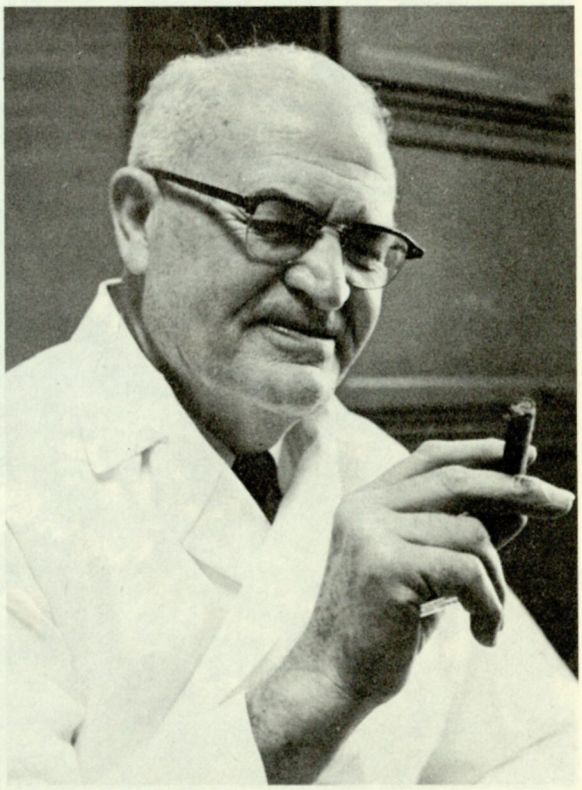
Medical technologists, cytotechnologists, radiologic technologists, dietetic interns, graduate students in audiology and speech pathology, the combined M.S.-M.D. programs, research assistants—all the multiple facets of medical education bring over 1,000 students to the UOMS campus each year.

In 1943 the full-time faculty numbered fourteen. This year it is well over 200. In the 1940's, annual research grants were less than $75,000. Today they exceed $5,500,000. The physical facilities of the Medical School are now valued in excess of $25 million. The atmosphere of academic freedom has attracted many of the nation's top educators and researchers. Teaching programs have been updated, expanded, integrated with laboratory and patient care programs to develop an overall curriculum that is recognized as one of the nation's finest.

Today medicine is a three-pronged weapon against disease and suffering. The research scientist—the teacher—the practicing physician are fused into a force whose impact has wiped out many of man's oldest enemies. And more will be defeated.

For the trailblazers—the men and milestones of a century of medical education in Oregon have opened the way to tomorrow's achievements in the art and science of medicine.

Dr. Laurence Selling, 1882-1964, gifted teacher, physician, medical pioneer.



Dr. Edward S. West, University of Oregon Medical School Admissions Committee chairman from 1930 to 1966.

First Medical School, 1867.

The University of Oregon Medical School today.

Thelma Wilson, author of "Men and Milestones in Medicine," is a member of the Public Affairs staff at the University of Oregon Medical School. A prominent writer, she has directed her talents to writing about medicine and medical education since she joined the medical school staff in 1961. Her articles have appeared in numerous publications, including Medical World News, The New Physician, Resident Physician, McCalls *and* Parents Magazine, *and her work has been quoted in the* Congressional Record. *Mrs. Wilson has written newspaper stories, television and radio shows. She is managing editor of the University of Oregon Medical School publication* Imprint.

The author wishes to acknowledge the valuable resource material in Dr. Olof Larsell's book The Doctor in Oregon, *as well as the dedication, patience and counsel of all those who helped compile the historical information in the story.*

The mural adorning the cover of this summary of medical education in Oregon is the work of John Sherrill Houser, a talented and versatile young Northwest artist. This original 6 by 13 foot painting will be displayed throughout Oregon during 1967.

In the 1961 competion among United States and Canadian painters Mr. Houser was awarded the Elizabeth T. Greenshields Fellowship, enabling him to study in Spain, Italy and Denmark for two years.

A number of his paintings have been reproduced in this country and abroad and his studies of the Lacandon Indians, descendants of the Mayans, have been purchased by the Southwest Museum in Los Angeles.

Mr. Houser is a graduate of Lewis and Clark College and did graduate work at University of California at Los Angeles. After completing his present task, a series of children's portraits, he has been asked to exhibit his works again in San Francisco.

Painting presented by E. R. Squibb and Sons Jan. 11, 1967, as part of the Collegia Medica Series. Artist Stan Galli is well known for his western timber scenes and oils of San Francisco.

IN RECOGNITION

The following firms are to be acknowledged for their generous support and interest in the Centennial Observance of medical education in Oregon. To each we extend our sincere appreciation:

Oregon Medical Association

University of Oregon Medical School

Marion-Polk County Medical Society

Oregon Historical Society

Oregon Medical Education Foundation

Oregon Medical Research Foundation

University of Oregon Medical School Alumni Association

Council on Medical Education, O. M. A.

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