

Halsted R. Holman
and the Struggle for
the Soul of Medicine

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By

Matthew H. Liang and Edward R. Lew

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For our teachers, our families, and their lived experiences

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PREFACE

In a person's life, not all years are equal. Important world events passed Matthew Liang by as he was preoccupied by becoming a doctor, until he met Halsted Holman. Looking back at his time at Stanford in training, it loomed large and very much of what he was and what he became. Holman showed a world of ideas larger than ourselves, what a physician could be, and what healthcare should do.

At Holman's 90th birthday celebration and symposium at Stanford University, there was an outpouring of affection for him, a long list of people who wanted to speak. For many there that day, he had touched a part of their soul. Several attendees quipped it was like "returning to Camelot." During a break, they clamored to hear more from him.

In 2015, Holman gave us permission to write his story. Michael Holman had recorded his father for hours, between August 2007 and February 2008. Dr. Diana Dutton, his wife, summarized these and other material in an unpublished 30-page account which she generously shared and we included in our work.

For Edward Lew, like Liang, English is also a second language. At the age of three, Edward was found abandoned on the streets of Santa Cruz, Bolivia and placed in an orphanage—where he was given the name, Pachin. Six months later, he was adopted by an American couple, Liz Wright and Bob Lew. On arrival in Boston, Pachin was diagnosed with active tuberculosis. After year-long antibiotics, he was cured. It was speculated that his original parents might have died from the same infection. Pachin grew up in a Boston suburb, Lexington, where dinners included conversations in economics, moral philosophy, Italian renaissance art, ancient history and military history.

There is 52 years between him and Liang. However, within 15 minutes of being introduced to Pachin, Liang stopped asking questions and began "selling" him on solving problems in health care. After a year or so of discussing conferences, lectures, books and papers that piqued shared interests and deepened our understanding, Pachin agreed to be an author.

Liang is a plaidoyer and participant-observer of the same world and period as Holman. Neither authors are historians and we take responsibility for our focus, our omissions, and how we make sense of what happened and may in the future.

This story is Holman's efforts through the rise of twentieth century American biomedical medicine, medical education, healthcare delivery through turbulent times and slow-motion crises that still present. This account is through the life of a humane and arguably heroic figure, an academic physician who straddled its highest pinnacle and became one of its strongest and most eloquent critics, who led by example and action, not just through safe academic study or critiques from the side lines.

He changed the debate, the vocabulary, clarified the real goals of academic medical centers in an era when the funding, the people, the technology and the need made all things seem possible. For his students, the values he represented and practiced were gifts to us.

Holman did this as a member of an elite medical family, an insider, as a member of the establishment, an academic and not as cranky naysayer, disheveled, nor as an aggrieved marginalized outsider. He had tremendous personal warmth and particularly with people he had nothing to gain from; and seemed always above the fray. He hated pretense, the cult of the celebrity, the arrogance of the "excellence deception," and was a sponge for viewpoints and knowledge from the range of human thinking.

He was modest, eloquent, with a looming presence, athletic grace, a baritone orator's cadence in a button-down shirt. With sleeves rolled up for work or discussion, he carried a sheaf of annotated Xerox copies of what could be obscure scholarly journals and monographs that he might have come upon in the New York Review of Books. He discussed them with colleagues and us in questioning, explaining, improving social equity, and the humanitarian ideals of medicine.

Words mattered a great deal to him and getting it right was a way we learned about thinking deeply and communicating ideas. He recognized that technical jargon could be divisive and elitist to outsiders and get in the way of understanding. He would probe for the simplest way to explain a concept so that every participant would feel comfortable. There was no such thing as a final draft. He had a talent for translating what one was trying to say or do in a way that contextualized its importance, made it better, bigger, grander, and helped them find their voice. Writing left-handed, sparingly on a blackboard he made difficult things simple and simple things nuanced. His arguments were clear and connected emotionally; the audience was often spell-bound.

His integrity was simple, unshakeable, and "could not be bought, sold, or rented" as Eugene Braunwald once quipped on another topic (Matthew H. Liang, personal communication, 2021). This is Holman's journey and struggle for the soul of medicine, the quest to bring the fruits of scientific medicine, its morality, and humanity for all.

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Daltroy, John Marr, Arthur Kleinman, Ed Kass, Charlie Davidson, Roger Mark, Bob Master, Ben Siegal, Dick Bail, Walt Willett, Bob Meenan, Alex Langmuir, Charles Cudjoe, Bing Chang, Bob Hartley, Celeste Robb-Nicholson, Paul Fortin, Kathy Swan Ginsburg, Nizar Mohamed, Oliver Sangha, Sang-Cheol Bae, Deh-Ming Chang, Chris Fanta, David George, Chuck Ratzlaff, Ian Tsang, Mary Ni, Howard Koh, Lincoln Chen, Paul Farmer, Barbara Herbert, Jean Mcguire, Jennie Riley, George Hatch, Whitney Hatch, Jean and Chris Angell, Howard Hiatt, Don Berwick, Atul Gawande, and Tom Lansdale.

The Alan Mason Chesney Medical Archives of the Johns Hopkins Hospital Institutions provided the photo of Ann Purdy as a medical student at Hopkins.

Cover design by Stefanie Liang Chung.

Dr. Neal Roberts, a beloved teacher and history of medicine buff, started his career in the laboratory sciences and helped us make sense of the complex work done more than 60 years ago described in the section, Discovering the Auto-Immune Basis of Systemic Lupus Erythematosus.

CHAPTER 1

BACKGROUND

Born in 1925, Halsted Reid Holman was named after two famous surgeons at Johns Hopkins Hospital. He was raised by two prominent physicians, who had three sons, all of whom became physicians. Holman came of age at a time of enormous changes in society and in medicine.

The Flexner report of 1910 had exposed the deplorable quality of medical education, precipitated the closing of a majority of the 155 medical schools, leaving only 66 by 1935, and ushered in scientific medicine (Flexner, 1910).

World War I, “the war to end war” (1914–1918), and its aftermath laid the ground for the next great conflagration and the world-wide depression, 1939 to mid-1940s. Although the war was generally supported, the immense loss of life for what were ultimately regarded as futile reasons, caused a sea-change in attitudes to militarism and spawned anti-war and peace organizations world-wide. The Great Depression caused widespread suffering and made it possible for new leaders and ideologies promising relief to come to the fore.

The Second World War (1939–1945) embroiled more than 100 million people. In a state of “total war,” 112 or so countries invested their entire human, economic, industrial, and scientific resources into fighting for survival. Seventy million people perished in the deadliest conflict in human history. Eleven to seventeen million civilians were murdered from Nazism: six million Jews, two million ethnic Poles, and four million who were deemed “unworthy of life,” which included the disabled and mentally ill. Between 90,000 and 166,000 people in Hiroshima and 60,000–80,000 in Nagasaki perished in the atomic bombings of Japan (Hastings, 2011).

With such horror, World War II’s profound impact on every aspect of human affairs, then and for generations to come, is impossible to fully portray. No one alive during those years was unaffected. The enormity of the deaths and institutions led to a dramatic re-grouping and rebuilding, as if the whole world were being reset. One can surmise the survivors’ relief as the devastation finally ended and “can-do” resolve and good over evil triumphed. Those returning home were determined to make the most of the

opportunities presented to them and to get on with their lives, as society was committed to helping them.

World War II ended the worldwide economic depression, fueled biomedical and other research, brought women and African-Americans into the work force, assisted millions of military veterans' higher learning, started the military-industrial complex and the Veterans Administration Healthcare system. The peace movement's doctrines became a part of the mainstream political discussion.

The system for controlling wages and prices (a necessity to ramp up US production for its own survival and its depleted allies) capped wages and made health insurance benefits a bargaining chip for employee-starved industries. This move essentially linked health insurance to employment, resulting in millions of uninsured generations later.

Science-based medicine was in its ascendancy, and individuals in their 20s and 30s—many maturing more quickly with military experience—were trained in the new science. The Servicemen's Readjustment Act of 1944 (G.I. Bill) supported buying a home or starting a business with loans up to \$2000 a year, or up to \$1040 a year if they could not find a job, \$500 a year for college tuition, and \$75 a month for living expenses. In 1940, the average worker earned less than \$1000 a year and attended college with a cost of about \$450 at state institutions and \$980 a year at private universities (considered modest amounts now). The G.I. Bill put two million veterans through college and graduate school. By the late '40s, almost half of the male students were on the G.I. Bill.

From 1945 to 1959, secret Operation Paperclip brought over 1600 experts in aeronautics, rocketry, material science, medicine, biological and chemical weapons, electronics, and physics. They fled from Nazi Germany and other countries to the US to hasten the end of war.

As a percentage of the Gross National Product, total health care costs between 1950 and 1955 were about 4%. By 1960, when Holman became Stanford's first Chief of Medicine in its new location, the percentage had doubled and commenced its inexorable increase. During the same period, the National Institutes of Health fueled the growth of biomedical research and the training of clinician scientists in the laboratory techniques and mechanistic thinking in finding the cause and cure of human diseases. These developments allowed Holman to build a world-class biomedical research center with the best and brightest.

In 1960, by age 35, Holman had already hit over .500 as a baseball batting champ and All Star at the University of California Los Angeles; had been a leader in the International Union of Students in Denmark; had his passport recalled by the State Department; stripped of a Yale internship

before he even started because he refused to sign the loyalty oath; was harassed and followed by the Federal Bureau of Investigation; grilled before a Senate committee on subversive activities; spoke on the perils of nuclear arms to hundreds for the Scientists Committee for Radiation Information; and had already made a major medical discovery.

At Stanford, he was involved with building one of the world's leading academic institutions, but then questioned whether the fruits of research were really making a difference to people or reaching the needy. He saw that the technological capacity to do more and the growing demand of the public for it were on a collision course; that the increasing monetarization of healthcare and the growing medical-industrial complex were widening the gap between patients and their providers; between what we know and what we do as a society for healthcare; and that those with the most to gain and to lose in healthcare—i.e., the patients—were powerless.

He then reinvented himself in population systems health trying to solve real problems in organizational experiments. In contrast to the reductionism of laboratory-based research of his own education, he embraced complexity, tested ideas publicly, made action researchable and research action-oriented. He was convinced that progress could only come if one involved the creativity and commonsense of everyone.

In the '60s, John Kennedy, Malcolm X, Martin Luther King Jr., and Robert Kennedy became martyrs for different visions of America. Civil disobedience in support of civil rights and opposition to the Vietnam War spread from Selma, Montgomery, to Greensboro, Birmingham, Washington, DC and colleges in Ann Arbor, Berkeley, Cambridge, New York and other campuses throughout the country. As chief of medicine, Holman led and participated in teach-ins and public debates on the great social and moral issues of the day. His family spoke out in support of social justice and peace and resisted immoral, unethical action in their own way, and they often paid the price.

Over nearly a century, Halsted Holman witnessed and was a participant in the major events in medicine and efforts to sustain it: the growth of biomedical medicine and biomedical research and academic health centers, the birth of Medicare and Medicaid, the growth of the health insurance industry and the medical-industrial complex, failed efforts to develop a national system, efforts to stem the growing cost of healthcare, growing health inequality, erosion of the doctor-patient relationship, and attempts to reform them. After he retired, the historic Affordable Care Act under Barack Obama reduced the uninsured non-elderly Americans from 44 million in 2013 (the year before its major provisions went into effect) to less than 28

million at the end of 2016. With his surprise election, Trump was intent on eliminating all evidence of Obama's legacy.

CHAPTER 2

ROOTS OF A SOCIAL ACTIVIST IN MEDICINE

An apple never falls far from the tree
—English Proverb

As a second-generation immigrant, Holman had models of social conscience and commitment from his parents, both of whom were physicians and fierce believers in doing what was right even if doing so meant flaunting convention or taking untrodden paths. Both parents also experienced prejudice and racism. Their devotion to principled behavior and excellence left an indelible imprint.

His father, Emile Frederic Holman (1890–1977), was born in Moberly, Missouri and was the son of a Methodist minister. The family had fled Bismarck’s Germany before World War I and moved to southern California during his childhood. Emile entered Stanford in 1907 but dropped out in his sophomore year to learn shorthand and typing, so that he could support himself. Soon thereafter, he re-enrolled at Stanford and worked for the President, David Starr Jordan, and graduated Phi Beta Kappa. He toured the Balkans for three months as Jordan’s secretary while Jordan lectured about the perils of war.

In 1914, Emile went to Oxford University as a Rhodes Scholar but interrupted his own studies to volunteer as an ambulance driver in a French Army food relief program. The other Rhodes Scholars that year were Wilburt Davison, founder of Duke University Medical School, and Wilder Penfield, a neurosurgeon and founder of the Montreal Neurological Institute at McGill University. After the beginning of World War I, Emile became self-conscious of his German name and changed his last name from Hollmann to Holman and began omitting his middle name, Frederick, or spelling it Frederic when used.

Encouraged to go into medicine by Sir William Osler at Oxford, Emile entered Johns Hopkins Medical School, upon returning to the United States, and was the last Chief Resident at Hopkins under William Stuart Halsted. Halsted was best known for his emphasis on strict aseptic surgical technique, early championing of newly discovered anesthetics and radical

mastectomy for breast cancer. Throughout his life, Halsted used cocaine and morphine, but neither were illegal then. Emile did not believe that Halsted was addicted. Emile also worked with Mont Rogers Reid whose surgical handbook is still in use today. Halsted Reid Holman was named after these two physicians who had so impressed his father.

In 1923, Emile went to the Peter Bent Brigham Hospital in Boston, which had only opened ten years before, to work under Dr. Harvey Cushing. By then, Emile had been at Oxford, the Royal College of Surgeons in Edinburgh, the Rotunda Hospital in Dublin, and the National Hospital in London. After three months at the Brigham, his superior, Dr. Daniel Elkin, left because of a family illness, so Holman took over as Resident Physician now termed Chief Medical Resident. In those days, the Resident Physician served both medicine and surgery (Joel T. Katz, personal communication, 2021). A year later, Emile joined the faculty at Case Western Reserve and was then recruited to Stanford in 1926, at age 36, to chair the Department of Surgery—a position he held for 30 years.

Between 1926 and 1955, he was also a frequent Visiting Professor at the Peking Union Medical College (PUMC) in China. Built in 1906 with the largesse of John D. Rockefeller's China Medical Board and modeled after the Johns Hopkins Hospital, the PUMC was the first western style academic medical center.

Emile was particularly interested in politics and was a strong opponent of fascism. After the attack on Pearl Harbor, at age 51, he volunteered for the Navy by obtaining a special waiver for his age and took a three-year leave from Stanford. His first assignment was Mare Island, near San Francisco, to care for wounded troops. There he earned recognition for successfully removing a bullet from a soldier's heart. But he made himself unpopular with the other physicians because of his insistence that they be available all night to treat urgent cases. This led to his transfer to one of the Solomon Islands in the Pacific, where he established a facility that treated both injured Japanese and Americans and trained the staff in surgery and wound care in a tent, nicknamed "Island Medical School."

Emile was a visionary in surgery. He was convinced that the cardiac abnormality, patent ductus arteriosus, could be cured by closing the abnormal communication surgically but was dissuaded from performing the procedure by a colleague. In 1935, Dr. Robert Gross in Boston conducted the procedure in a seven-year-old and introduced a new era of heart surgery. In 1923, while Emile was Chief Resident at the Peter Bent Brigham Hospital, he conceived the idea of grafting skin from a mother to a severely burned child. His fundamental observations on rejection of tissue grafted onto another person lay dormant but was of such fundamental importance

to modern burn management that he was honored for his contribution at the International Congress of the Transplantation Society in 1972—nearly a half century after his original paper was published.

Halsted's mother, Ann Peril Purdy (1889–1978), was born in Waterloo, Canada of a farm family of Scotch-Irish descent.

I was reared in a community where good doctors were rare and public health had not penetrated. We lived under century-old French laws, which allowed women no legal rights to their own property, their children and, in practice, none to their own persons.

Epidemic diseases were common, and active tuberculosis, which had decimated my mother's family, was always with us, as it is still in many parts of the world today. Death and disease were our frequent visitors. Perhaps these things, and my deep compassion motivated me toward the study of medicine, and I day-dreamed of being a doctor with Jane Addams in Hull House in the Chicago slums.

My brother, age six, who had already imbibed the prevailing social atmosphere, shouted at me, "Bring my boots." When repeated demands brought him no boots, he continued, "Don't you know that girls are born to wait on boys?" The prevailing educational attitude was that women needed no education. The only young woman who had gone to college before me was the butt of ridicule.

I took my A.B. degree from McGill University though majoring in the premedical sciences. This was made possible by Dr. Robert Ruttan, then professor of chemistry and former dean of the School of Medicine. He maneuvered the premedical courses, previously given only to medical students, into the university courses open to all students. My training was excellent, with the exception of embryology, but my reception was extremely hostile. I was hissed in nearly every class until Dr. Ruttan told me to wait in the wings until he had entered the classroom and that he would never leave the room until I was safely out. The day before the embryology classes began, he called me to say that I could not be admitted because there he might not be able to protect me from bodily injury.

Having won top honors in science, I hopefully applied for admission to McGill Medical School, and was promptly refused. Scuttlebutt from Montreal Women's Club had it that the medical faculty had threatened mass resignations if a woman was admitted. . . .

I then applied to Johns Hopkins Medical School into which women had been bought on a 10% quota by a wealthy Baltimore woman for a half million dollars when the Medical School was hard up. There we were accepted but not welcomed. We were, however, very fairly treated except perhaps in the higher appointments. As I left one of my first classes, a young classmate approached me and said, "What are you, anyway? You are not a man, you are certainly not a woman. You are an unsexed thing studying medicine out of morbid curiosity."

One of the previous deans of Yale Medical School frequently said, “My wife is a doctor and she never did anything after I married her.” The wife of the dean, the mother of a large family, said to a medical friend, “I am allowed out every Thursday afternoon like the rest of the housemaids.”

One of the daughters of a dean of medicine at Hopkins told me that her father had offered each of his three daughters ten dollars for every class she flunked in high school—a novel way to settle the troublesome question of women in medicine.

Still in August 1968 no woman has been admitted to membership in the Northern Branch of the California Academy of Medicine, nor ever been permitted to attend a single meeting.

I was frequently told that I was usurping the place of a man who needed it, only to get married and drop out. Every dropout is an obstacle in the path of the women who follow, anyone of whom may be a Curie, a Sabin, a Pearce, a Baumgartner, or an Abbott, all of whom have made significant contributions to medicine. . . .

This is how I tried to fill the role of wife, homemaker, and mother. Our professor of medicine said in his farewell address to the men in my graduating class, “Your greatest danger shall be the woman you marry. You must needs [sic] forge ahead. She will remain where you found her.” To the woman in medicine I would paraphrase it thus, “Your greatest danger shall be the man you may marry. You must forge ahead. He may wish to keep you where he found you.” (Purdy, 1968)

Ann Purdy was the only person in her family to attend college, graduating from McGill in 1915 as one of the school’s first female graduates. At Johns Hopkins, she was one of its earliest female graduates. She met Emile there and they married in 1921. Not wanting to lose her identity to a man, she remained Dr. Ann Purdy. When Emile accepted the position at Case Western, they moved to Cleveland, where Halsted was born on January 17, 1925. Six months later, they moved to San Francisco, where Stanford Medical School’s clinical departments were located.

Ann was appointed Clinical Professor of Pediatrics at Stanford and saw largely pediatric cardiology patients, almost 30 years before the formal beginning of the specialty in the American Academy of Pediatrics. However, she became unhappy with the way she was treated by the male medical establishment, complaining to her family that some of her patients had been “stolen” by male colleagues for publication. She preferred to practice at the then Children’s Hospital in San Francisco, finding its focus on women and children more congenial.

Three years after their arrival in San Francisco, Ann gave birth to fraternal twins, David Holman and Shawn Purdy. Ann thought it only fair for the twins to have the names of both parents, but Shawn eventually changed his last name to Holman because of the confusion caused by his

having a different last name. Their first son before Halsted had died in infancy from failure to thrive; they never talked about it.

With three young children and a demanding schedule at Children's Hospital, Ann set up an office to see patients in their home at 722 Funston Avenue, San Francisco. Her sons got used to encountering patients covered in white sheets walking up and down the stairs in their front hall, as their mother assessed her patients' exercise tolerance and heart function. She described the home that she ran as wife, mother, and pediatric cardiologist which her sons experienced:

I wished to know if an old-fashioned home could be maintained by a busy professional woman. As an inexperienced housewife with inefficient maids, I would liken it to mountain roads, "Dangerous but passable," improving with each season. I found good nursemaids, young of mind, legs, and heart, sometimes among the needy college students. We kept a medical student in residence to cover our necessary nighttime absences. We moved to the flat, bicycle-riding land beside Golden Gate Park, rich in interest, play areas, and children. There was no neighborhood playground, so we equipped our backyard, and I invited all the children in.

I opened my office in my home (an old Baltimore custom), where I could see the teenagers gaming on the quiet street in front, and hear the younger ones in the back. If a child was slightly ill I telephoned him frequently. If he was more seriously ill, I commuted, so to speak, between patients.

Dinner was the high point of the day. I dressed and studied for the dinner table, where I reduced world happenings to the children's level in my best Churchill English, secure that the peer education of the street and the schoolyard would correct any stuffiness.

As the era of the freedom of the young approached, one of my sons announced that his father and I were to leave the house to him and his partying friends. I steadfastly refused to abdicate. The struggle was long and hard, and I came out scarred but with my head unbowed—renamed "Old Ironsides."

Then followed the era of the teen-age high allowances, private cars, remote motels without chaperones, alcohol-and temptation. This, to the best of my knowledge, we escaped. (Purdy, 1968)

Halsted remembers his parents' relationship as intellectually compatible but not very warm. Dinners were formal. Ann commonly wore long gowns and Emile wore suits, but the kids could be in dirty play-clothes. Medical phone calls often interrupted dinners; the dinner discussions would be about patients as the parents saw many patients together. They were both devoted to their work and, except for medical colleagues, didn't entertain at the house or have much of a social life outside. Emile enjoyed gatherings of medical colleagues and gaining recognition, but Ann was adamantly

opposed to any form of what she considered self-adulation. Halsted's disdain for celebrity may have come from her. Self-nicknamed "Vinegar Ann," she had a few women physician friends—there weren't many at that time—but did little for "fun" other than what Hal recalls as "stereotypical family vacations," such as going to Alaska.

Ann was politically active throughout her entire life. She modeled her way of collaborating with her young patients and their families for the children in her home office. Halsted remarked that neither she nor his father knew who Karl Marx was. But Emile was a militant progressive and anti-fascist and Ann was a passionate humanitarian. One need not look further for understanding his lifelong political activism, his penchant for interacting with patients, and his humanitarian thinking than his parents and particularly his strong-willed mother.

During World War II, Ann participated in efforts to aid Allies abroad and advocated for the improvement and expansion of America's school lunch program (Purdy, 1944). After the war, distressed that some doctors refused to see Japanese patients, she made a point of treating them. Later, during the 1960s, she got involved in local politics: writing many letters and delivering street-corner speeches to oppose the proposed super-highway through Golden Gate Park—a battle she and other activists ultimately won. She kept a large collection of the New York Times, intending to write a "history of the world" after she retired, but the project languished as her health declined.

Although Emile was against war and a fervent anti-fascist even before World War I, he did not share his wife's progressive politics. He was often in the minority in family political discussions, opposed by Ann and Halsted and frequently by David and Shawn as well. Emile liked to play the contrarian to see how people would respond without revealing much about his own position.

Looking back, Halsted recalls childhood as pretty ideal and is grateful that his parents allowed him so much freedom. This freedom, nurtured from such an early age, was a major source of his independence and self-assurance. Growing up, each boy had assigned chores. Their home was a local hangout for their friends. Halsted felt "absolutely free to do almost anything he wanted," including driving locally without a license or racing home-built coaster wagons down steep San Francisco hills. His parents were "hands off" and didn't ask about his mediocre grades, his friends or his girlfriends, and attended only one of his sporting events—his football team's victory for the city's championship played in Kezar Stadium.

Emile and Ann put no pressure on Halsted or his brothers to go into medicine. Growing up, he wanted to become an aeronautical engineer, so

his parents introduced him to the engineering faculty at Stanford. He pursued this interest after high school, working briefly in a small factory making parts for airplanes, a metal forging shop making sleeve bearings, and a shipbuilding factory as a layout assistant. Workers he met told him he was crazy to consider aeronautical engineering: “they’d have you designing cockpit covers, and that’s not something you’d want to do.” Nevertheless, all three sons became physicians: Halsted in rheumatology, David in cardiopulmonary medicine, and Shawn in general surgery.

Stanford (1942–1943) and UCLA (1943–1944)

In early 1944, the Allies started to have victories in the war against the Axis powers. Franklin D. Roosevelt’s State of the Union Address outlined the measures needed to bring the war to a successful conclusion and his vision for a post-war America:

It is our duty now to begin to lay the plans and determine the strategy for the winning of a lasting peace and the establishment of an American standard of living higher than ever before known. We cannot be content, no matter how high that general standard of living may be, if some fraction of our people—whether it be one-third or one-fifth or one-tenth—is ill-fed, ill-clothed, ill-housed, and insecure.

This Republic had its beginning, and grew to its present strength, under the protection of certain inalienable political rights—among them the right of free speech, free press, free worship, trial by jury, freedom from unreasonable searches and seizures. They were our rights to life and liberty.

As our Nation has grown in size and stature, however—as our industrial economy expanded—these political rights proved inadequate to assure us equality in the pursuit of happiness.

We have come to a clear realization of the fact that true individual freedom cannot exist without economic security and independence. “Necessitous men are not freemen.” People who are hungry and out of a job are the stuff of which dictatorships are made.

In our day these economic truths have become accepted as self-evident. We have accepted, so to speak, a second Bill of Rights under which a new basis of security and prosperity can be established for all—regardless of station, race, or creed. (Roosevelt, 1944)

Holman had no firm political views or career plans when he entered Stanford. Two courses during freshman year changed that: Biology inspired him to become a physician and a required History of Western Civilization course on Western thought introduced him to Karl Marx. Holman was drawn to Marx’s view that an economy should create the greatest wellbeing for the greatest number, and that an ideal socialist economy might even

bring an end to exploitation and poverty—noble goals, he thought, at the time, however unrealistic they seemed for the United States. He enjoyed his classes, his grades improved, and he played second-string halfback in freshman football.

While Holman was living the dream, the world was at war. The country was dominated by isolationist thinking while its leaders were quietly increasing the country's production capacity and manpower for the inevitable entry into war. The first peacetime draft, the Selective Training and Service Act, was passed in 1940. Turning 18 in 1943, Holman registered for the draft, like all the men his age, and volunteered for the Navy's V-12 program to accelerate medical training to ensure enough doctors for the duration of World War II. The military recruited students, especially premeds, into the armed services, accelerated their undergraduate education, and sent them directly to medical school. Although only a Stanford freshman, Holman applied to medical school and was accepted at Yale and Johns Hopkins. The Navy then sent him to the University of California Los Angeles (UCLA), which had a V-12 program, for his second and last year as an undergraduate.

At UCLA, Holman did well academically. He played football as a first-string half back on the varsity team for a year, until he separated his shoulder. His big breakthrough was in baseball. Dormitory mate Bobby Brown, a future physician, recruited Holman and another student to hit and shag balls with him. Encouraged by Brown, Holman joined the UCLA baseball team. By the end of the year, he was a batting champion with an astounding batting average of .506, played the outfield and first base, and named a UCLA All-Star. Scouts from the Chicago White Sox and San Francisco Seals minor league tried to entice him into professional baseball, but he declined.

Bobby Brown "The Golden Boy" went on to a fabled career in professional baseball. He played third base on four World Series championships with the New York Yankees and batted .439 while studying for his medical degree from Tulane. Afterwards, he practiced cardiology and later became President of the American Baseball League.

Yale Medical School (1944–1949)

After one year at UCLA, the Navy sent Holman to Yale to begin medical school. He continued varsity baseball his first year at Yale, but soon shifted to his medical training. He excelled in class, in his clinical rotations, and had high scores on the national board exams. After his second year, he received the J. H. Brown Fellowship in Biochemistry and took a year off to do basic research at Yale. He was elected to the national medical honor

society, Alpha Omega Alpha, the following year. At graduation, he was awarded the Parker Prize for the student considered most likely to succeed in the practice of medicine.

In the Yale library, he met Barbara Lucas studying public health. She was one of two daughters who earned doctoral degrees in an era when women rarely pursued advanced degrees. Raised in a family that revered learning and education, her father was a successful, self-made book publisher in Ohio. Skipping two grades and having read *Les Misérables* in French six to seven times, Barbara started Bryn Mawr College at age 16 and graduated in 1942 in philosophy (“Reading Descartes...or Spinoza... finding out new things, staying up late...Studying philosophy was the intellectual equivalent of a good orgasm.”). She wanted to be an architect or engineer but a male advisor said, “I think you’re suffering from gender confusion.” She also considered medicine but thought her chemistry grades were not good enough. In 1945 to 1946, she was an Army nurse caring for quadriplegic soldiers returning from World War II. She was deeply moved by observing how one’s state of mind and a positive attitude could affect the survival of soldiers with severe war injuries. She and Halsted married in 1955 after she got her Master’s in Nursing and a Ph.D. in Public Health from Yale with a one- and three-year old underfoot. Her doctoral thesis was on rooming-in, a new model in obstetrics (B. Holman, 1961).

Moving to California in 1960, her only option for continuing her work in public health was at the University of California, Berkeley. However, the commute with three children at home became impossible and she decided to stay at home. While raising a family, she worked on a study demonstrating how racial discrimination and work stress contributed to racial disparities in mortality (Howard and B. Holman, 1970) and stress-related diseases in transit drivers (D. Sharp et al., 1988; Krause et al., 1997; Ragland et al., 1997; 2002).

Barbara was an intellectual, reserved and very shy. Being a faculty wife having to attend official functions was not easy for her. Quietly generous, principled, and resolute in the face of adversity, she also had a mischievous humor that disarmed people. Her empathy for the marginalized was profound. Deeply believing that all people were equal and deserving of respect, she passionately supported the Civil Rights and the anti-Vietnam war movements. In the 1980s, when HIV was devastating the gay community and the community was being vilified, she ardently supported gay rights, her nephew, Charlie Barber, a gay rights activist, and educational programs for underprivileged youth. She raised three very different children and helped each find their voice through victories and setbacks. Her eldest son, Michael Holman wrote:

She and I had our differences, and I've come to recognize many more of what she (and Hal) brought all 3 of us up to believe as central to our humanity and beliefs, even as the 3 of us differ from each other. Alison and I have talked several times over the years about our mom's emphasis on humanity above all—no distinctions between people of different skin tones, sexuality, gender, class, education. ... I could go on. To say this is different from the dominant culture today, or of the 1980s, 1990s, 2000s and/or 2010s is [an] extreme understatement.

Association of Interns and Medical Students (1946–1949)

Like many students at the time, Holman was inspired by the democratic ideals emerging from World War II and found many kindred spirits at Yale. Having his curiosity piqued about Karl Marx in college, Holman attended evening discussion groups on Marxism led by a Yale Medical School faculty member. The group also discussed the philosophy of the Communist Party, and Holman joined it to express support for its ideals but was never active in the Party.

He and other medical students helped revive the Association of Interns and Medical Students (AIMS), an organization with progressive ideals that had been dormant during the war. They formed a chapter of AIMS at Yale and worked with chapters at other schools in the Eastern, the Midwest, and Howard University and Meharry Medical College, two traditional African-American institutions. AIMS had three main goals: (1) decent salaries for medical interns and residents (Holman's pay as an intern in 1952 would be \$13/month plus room and board); (2) appropriate health care for medical students; and (3) an end to racism in medical training and care.

Each chapter set its own course in pursuing the organization's goals. The Yale chapter combated racism through a Yale–Meharry exchange program, so each could learn what life was like at the other school. AIMS also promoted similar exchanges at a few other predominantly white medical schools but could do nothing to directly influence admissions policies or other forms of discrimination. Holman was elected President of the national organization; other officers included an African-American medical student from Meharry and a woman from Women's Medical College in Pennsylvania.

AIMS was accused by the American Medical Association (AMA) of being a Communist organization. Holman resigned from the Communist Party a few months after joining it so as to not compromise his organization. The AMA's attacks continued after Holman graduated from Yale and in 1950, they formed an alternative organization: the American Medical Student Association (AMSA), to counter AIMS. The AMSA initially took

more conservative positions on most issues, as the AMA intended, but eventually evolved into a progressive organization which continues today.

In the East, future cardio-prevention pioneer, Jeremiah Stamler and future Nobelist Bernard Lown (see Chapter 3) were leaders in the AIMS. Stamler, the son of Russian Jewish immigrants, later set up the first Heart Disease Control Program in the country. He was also subpoenaed before the House Committee on Un-American Activities (HUAC). In response, he and colleague, Yolanda Hall, filed a suit against the committee arguing that it was unconstitutional. The suit was rejected but they appealed. Stamler refused to testify, walked out of the hearing, and was indicted for contempt of Congress. In 1973, the government dropped the indictment and Stamler dropped his suit. Many believe that the suit was an important factor in the HUAC's disbandment.

Truman's Attempt at Universal Healthcare

In 1945, just seven months into a presidency he inherited from Franklin D. Roosevelt, Harry Truman who left Spalding's Commercial College after a year, proposed "universal" national health insurance. In his remarks to Congress, he set forth five goals of the plan which are still relevant today.

The first addressed the number and disparity of physicians, nurses and other health professionals, especially in low-income and rural communities where there were "no adequate facilities for the practice of medicine" and "the earning capacity of the people in some communities makes it difficult if not impossible for doctors who practice there to make a living."

The second was to develop and bolster public health services to control the spread of infectious diseases and improve sanitary conditions across the nation and maternal and child health care.

The third was to increase the nation's investment in both medical research and medical education.

The fourth addressed the high cost of individual medical care. "The principal reason why people do not receive the care they need," Truman noted, "is that they cannot afford to pay for it on an individual basis at the time they need it. This is true not only for needy persons. It is also true for a large proportion of normally self-supporting persons."

And the fifth focused on the lost earnings resulting from illness. "Sickness," Truman explained, "not only brings doctor bills; it also cuts off income."

At first, things looked hopeful for the proposal as Democrats still controlled the House and the Senate and a number of prominent Americans supported it. However, almost as soon as the bill was announced, the

American Medical Association (AMA) capitalized on the nation's paranoia over the threat of Communism and attacked the bill as "socialized medicine" and Truman's administration "followers of the Moscow party line."

Health insurance continued to be a major part of his campaign platform in 1948. Even though he was re-elected, his political power was no match for the AMA's lobbying and advertising efforts and the bill quietly died again. Truman called the failure to pass a national health insurance program one of the most bitter and troubling disappointments of his presidency.

The United States would continue its fight over national healthcare during Lyndon B. Johnson's presidency. In 1965, Johnson signed the Medicare Act of 1965, which would provide healthcare to US citizens age 65 and older. Harry and Bess Truman were present at the signing, and President Johnson dubbed former President Truman "the real daddy of healthcare."

International Union of Students and Copenhagen (1949–1952)

After medical school, Holman was selected for a National Research Council Fellowship in Biochemistry at the Carlsberg Laboratories in Copenhagen, Denmark. Since he would be abroad, Holman agreed to represent AIMS in the International Union of Students (IUS) in Prague, Czechoslovakia. The IUS had grown out of World War II and had chapters in 62 countries "to defend the rights and interests of students, to promote improvement in their welfare and standard of education, and to prepare them for their tasks as democratic citizens" (IUS Constitution, 1946). The President of the IUS was Joza Grohman, a fierce resistance fighter and leader of the Czech underground. Holman was asked to be the IUS's American Vice President, and his responsibility was to help improve student health services, which were very meager in many countries. Holman traveled back and forth from Denmark to Prague and other countries on IUS work, giving him a close-up look at events unfolding in the provision of health services in many European countries and cultures. It would be an invaluable experience which would influence his later work in thinking about population healthcare.

CHAPTER 3

ASSENT AND DISSENT: MCCARTHYISM AND MEDICINE

I have here in my hand a list of 205—a list of names that were made known to the Secretary of State as being members of the Communist Party and who nevertheless are still working and shaping policy in the State Department.

—Senator Joseph McCarthy, 1950

We must not confuse dissent with disloyalty. We must remember always that accusation is not proof and that conviction depends upon evidence and due process of law. We will not walk in fear, one of another. We will not be driven by fear into an age of unreason, if we dig deep in our history and our doctrine, and remember that we are not descended from fearful men.

—Edward R. Murrow, 1954

Background

After World War II, the United States entered the Cold War to reduce Soviet power and influence. A series of setbacks to US interests played into the perception of a growing Soviet threat. In 1949, the Soviet Union detonated its first atomic bomb, China became communist under Mao Zedong, and the Nationalist government supported by the US fled to Taiwan. Korea had endured serial occupations by China, Japan, and Russia until the end of World War II. Planners had assumed that North and South Korea would be reunified after elections in the North and in the South, but in 1950, the communist North Korea invaded South Korea and the US declared a “police action” to prevent its intrusion. From 1950 to 1953, the United States and China fought to a standstill in Korea. In 1953, an armistice between the Koreas established a new border and a surrounding demilitarized zone.

With this backdrop, in 1950, Senator Joseph McCarthy charged that there were 205 communist spies in the State Department who were selling

out the United States: “When a great democracy is destroyed, it will not be because of enemies from without, but rather because of enemies from within.” For the next four years, prominent writers, actors, directors, government officials, and cultural and social leaders were called to testify before his committee about their knowledge and involvement in the communist conspiracy. In 1951, McCarthy even accused President Truman as a communist agent:

He is their captive. The President is not master in his own house. Those who are master there not only have a desire to protect the sappers and miners—they could not do otherwise. They themselves are not free. They belong to a larger conspiracy, the world-wide web of which has been spun from Moscow.

Federal, state, local governments, and private groups created blacklists of people and organizations suspected of being communists. Being on a blacklist, one could lose their job and have their life and reputation ruined. Only ten percent of the actors, writers, directors and producers on the Hollywood blacklist ever worked again.

McCarthyism and the anti-communist hysteria it created threatened Americans’ basic rights. Ordinary people wondered whether communists were in their midst or not. Some charged others of communism to defeat their competition. Others, fearing that someone would accuse them, charged other people first. Americans were frightened to speak their mind or to talk about their opinions for fear that they would be accused of being communists or sympathizers.

Although far-right radicals were the bedrock of McCarthyism, those who opposed internationalism, social welfare provisions of the New Deal, and efforts to reduce social inequalities also joined. Provision of public health services, such as vaccination, mental health care services and fluoridation, were deemed by some to be communist plots to poison or brainwash the American people.

The Director of the Federal Bureau of Investigation (FBI), J. Edgar Hoover, was a fervent anti-communist and designed President Truman’s background checks of employees by FBI agents. Thousands of government workers lost their jobs. From 1951 to 1955, the FBI distributed anonymous files alleging Communist affiliations of teachers, lawyers, and others. Many of the accused were fired and neither told what the accusations were nor who their accusers were. The FBI also burglarized, opened mail, performed illegal wiretaps, and conducted a covert “dirty tricks” program—the Counterintelligence Program (COINTELPRO)—to collect supposedly