

Foreword

This year, we are celebrating the two-hundred-year anniversary of the founding of the University of Michigan in 1817. The university has achieved countless achievements and milestones since its beginnings, one of those being the creation of the University of Michigan Medical School, today a top-ranked institution in the United States. Upon opening its doors in 1850, the Department of Medicine and Surgery became the university's first professional school. The first class of students paid five dollars per year for a two-year education. Since those early days, the University of Michigan Medical School has graduated almost fifteen thousand students and trained even more residents and fellows, and it is now recognized as one of America's great medical schools.

In this book, Dea Boster and Joel Howell recount the rich history of the medical school. This includes some of the major distinctions that reflect the leadership and innovation we have contributed to medical practice in the nation. Michigan was the first university to own and operate its own university hospital, which was created to serve the needs of the medical students and the university. We were also an early major medical school to admit women, graduating our first female physician, Amanda Sanford, in 1871. The next year, W. Henry Fitzbutler, the son of a slave, became the first recognized African American graduate of the program. And we were one of the few early schools to incorporate science and the idea of changing knowledge as core elements of education.

Boster and Howell cover such notable historical episodes, but they also delve into hard times and less flattering episodes, many of which led to changes that today define the school. Drawing on extensive archival research as well as on published primary and secondary sources, this is the first book to frame the history of the medical school in a broad social context. The

main focus of this book is on the core medical education of students at Michigan that has existed since its founding. Boster and Howell consider the question of why this major institution came into existence in the small, Midwestern town of Ann Arbor, and why it has stayed here. They examine the close relationships of the medical school with the university, the local community, and the broader society at large. As we look toward the future, this book reminds us that the school has always been changing and will continue to change in ways that none of us can predict. We draw inspiration from looking at the medical school's milestones and achievements despite past challenges.

As dean of the University of Michigan Medical School, I am extremely proud to be leading this educational institution into the future to better serve all of our students and trainees.

I hope you will enjoy learning about the path we took to get here.

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Introduction

Michigan's Medical School

In 2017 the University of Michigan celebrated its bicentennial. The celebration offered an opportunity to reflect on the history of the institution, to consider what has happened in the centuries since its founding, and to think about how history can help us contemplate what lies ahead. This book offers a brief history of one part of the university, the medical school. From its beginning as a department with one building and five faculty members, the medical school has become home to thousands of faculty members and dozens of buildings. But despite the huge difference in scale (and much else), some constants remain. Just as they did in 1850, entering medical students come to Ann Arbor hoping to become exceptional physicians. Since 1850 some consistent questions have confronted the school, such as which students to admit, what those students should study, where they should study, and what ought to be the relationship of the medical school with the larger university. But this history does not limit itself to the medical school or even to the university. When University of Michigan president Harlan Hatcher marked the university's sesquicentennial in 1967, he noted, "The student of social history soon discovers that social institutions both influence and are influenced by the society of which they are a part. . . . [C]ertainly this is true of the Medical School of the University of Michigan."¹ Fifty years later, Hatcher's words remind us of the importance of community connections in an institution's history. The university and its medical school have always had a deep and complex relationship with the town of Ann Arbor and the people of Michigan, one that has shaped the development of this remarkable institution and its educational mission since it was founded.

In writing this history, we have been aided by medical historian Kenneth Ludmerer's synthetic analysis of the history of medical education. He has shown that many medical schools founded in the nineteenth-century United States were proprietary and wholly didactic, but a number of changes—the rise of university systems, the influence of European laboratory and scientific practices, new state and federal regulatory structures, and the philanthropy of wealthy industrialists—began to transform medical education and practice by the onset of the twentieth century.² Much of this description applies to the University of Michigan. Many historians have written histories of specific medical schools, each with its own conceptual model of how to approach such a task.³ We have attempted to learn from these earlier works and to take an approach that reflects not only larger national trends but also the specific circumstances surrounding the experience at Michigan. We have tried to remain aware of the choices, disputes, and failures that informed medical decision making and the development of knowledge and practice in the hospital, laboratory, and classroom to understand how medicine and medical education changed within specific social and cultural contexts. Local communities in particular are vital for understanding health and illness, patient experiences and expectations for treatment and expertise, professional identities and reputations, political support for institutional advancement, and the growth of the medical field.⁴

The local community has played a particularly important role in the history of the University of Michigan Medical School, given its location in a small Midwestern town. Ann Arbor offered important, tangible support to the early school, and many of Michigan's medical faculty have had significant ties with the local community: as private practitioners who cared for Ann Arbor residents, as public health advocates (both locally and nationally), as politicians, and as entrepreneurs. The medical school has always been part of a state university, which introduces a set of dynamics somewhat different from those that existed for other, private schools. All of these relationships have affected the decisions made at Ann Arbor's medical school—regarding professional identities, student admissions, curricula, budgeting, hiring and firing, clinical instruction, and hospital facilities and renovations—and those decisions have not always followed what might seem like a “logical” progression. They have been influenced by a variety of specific political, social, and cultural factors, all of which are part of the historical fabric.

The University of Michigan Medical School provides fertile ground for such a contextual history. Reuben Peterson, an early-twentieth-century faculty

member in obstetrics and gynecology, as well as an amateur historian, remarked perceptively that the Michigan medical school, a new department of a new state university in a “new” part of the country, did not “flow on gently from year to year”; instead, it had to set precedents for administrative, pedagogical, and clinical policies in a young, Midwestern state.⁵ The precedents resulted from a specific historical context, and many had national significance: Michigan was one of the first major U.S. medical schools to adopt a four-year curriculum, was the first to own and operate its own university hospital, and became a pioneer for both laboratory instruction and clinical clerkships. It is often considered to be the first major university medical school in the United States to regularly admit women and one of the first to recognize the value of and support clinical research. Its instructors were among the earliest American medical professors to become full-time university faculty members.⁶ Sinclair Lewis’s *Arrowsmith*, one of the first American novels that focused on cultures of science, was inspired by alumnus Paul de Kruif’s experiences at the school and in Ann Arbor.⁷ While many graduates of the school have gone on to distinguished careers, the school has also experienced its share of public controversies, such as its association with the controversial Jack Kevorkian, who graduated from the program and completed two years of a pathology residency at Michigan.⁸

The school has a rich history of interdisciplinary collaborations with other branches of the university, as well as community outreach and education initiatives for both health-care providers and patients. It has relied on Michigan citizens to present themselves as research subjects or teaching patients. Historians and physicians have lauded Michigan’s notable achievements in education and research, as well as its “long tradition of service to all of the state’s residents.”⁹ In a 2000 article in the *Journal of the American Medical Association* commemorating the school’s sesquicentennial anniversary, faculty physician and medical historian Howard Markel described Michigan as “an example worthy of imitation” and highlighted the school’s transition from “frontier medical outpost” to a frontrunner of modern medical education and research. Horace Davenport, a Michigan faculty member and chair of the physiology department for many years, published the most comprehensive history of the medical school to date (in addition to his other books on medical school professor George Dock and specific departments within the school) and identified the institution as “not just any medical school.”¹⁰

Because the University of Michigan Medical School is a complex and long-lived institution, any attempt to write a history must necessarily be limited in scope. We have not attempted to balance our coverage of individual

departments. It would be impossible to devote equal weight to all the departments that have existed or currently exist, particularly since they have not all played steady roles in the changing medical school. Readers wishing to read more about a specific topic or department will find guidance in the “Note on Sources” section below.

In writing this history we emphasize the medical school’s position as a national forerunner of modern medical education (in both clinical instruction and academic medicine) but at the same time maintain a focus on the complex relationships between the school and its social and physical location. Ann Arbor, for many years, seemed an unlikely place to build a modern medical institution, and ongoing concerns about Michigan’s reputation as a leader of medical education played a significant role in the development of the school’s curriculum, physical plant, patient base, and student populations. Appreciating this connection allows us to ask more questions about the people who came to the school as faculty members, students, and patients: Where did they come from, and why did they come to Ann Arbor? What social interactions and controversies in Michigan have helped shape the policies, practices, and missions of the school? Rather than chronicling the school’s milestones from an exclusively academic or professional perspective, this book seeks to investigate the medical school’s position (both physical and social) within a larger community.¹¹

Michigan’s evolution from a small, rural medical school to a large, modern medical complex did not follow a straight, upward trajectory. The social, political, and cultural landscapes of Michigan both supported and challenged the school in significant ways. Conflicts with the state’s medical sectarian organizations (particularly homeopaths), concerns about the ability to train doctors in a small town rather than an urban center like Detroit, proximity (physical and administrative) to other departments within the university, and “selling” the germ theory of disease to Michigan’s practitioners and public were among the major issues that influenced the medical school’s growth and progress during its earliest decades. However, even after such conflicts had ebbed and Michigan had earned its national reputation as a top-ranking medical school, the institution still had to contend with a number of pressures: economic support for research and construction, changing politics and populations in the state of Michigan, and expectations of faculty, students, patients, and supporting communities. The conflict between private practice and academic interests, different opinions about premedical requirements and the medical curriculum, patient fees at the University Hospital, debates over affiliations with other hospitals, and

controversies over academic subject matter were all issues that arose numerous times over the past 150 years. We hope that this broad glimpse into the history of the University of Michigan Medical School will contribute to a deeper understanding of the social and cultural forces that have shaped, and continue to shape, medical education and the profession in Michigan and the United States.

Note on Terminology

In this book we discuss the development of the University of Michigan Medical School from its 1837 inception as the Department of Medicine and Surgery until the twenty-first century. We need to make our terminology clear. In the interests of clarity, and because our intended audience is not only professional historians but also medical school students, faculty, staff, alumni, and the general public, we have made a slight change in the terms used to describe the school. In 1837, the medical branch was officially designated the Department of Medicine and Surgery at the University of Michigan and was often referred to as the “Medical Department” well into the twentieth century. At the same time, it was occasionally referred to as the “medical school.” Moreover, some units, such as surgery, pediatrics, and obstetrics and gynecology, were also referred to as “departments” (as were departments no longer in existence, such as the Department of the Theory and Practice of Medicine). The variable usage of terminology attracted criticism from national organizations such as the Carnegie Foundation for the Advancement of Teaching. Thus, in 1915 the Board of Regents attempted to remedy what they termed “the ugly and troublesome inconsistency and confusion” associated with existing terminology and recommended that the school simply be called the “Medical School.”¹² We follow their lead. Rather than using a variety of terms to describe the administrative unit over the course of the book, for the sake of clarity, except when part of a direct quotation, we usually refer to the institution as “the medical school.”

Note on Sources

The collections of the University of Michigan’s Bentley Historical Library have been indispensable for this project. Not only does the library maintain official medical school and hospital administrative records, but it also houses

the papers of many individual professors, deans, and university regents. Faculty meeting minutes, correspondence, annual reports, promotional materials, speech drafts, and a variety of other types of evidence have provided useful glimpses from different perspectives of the medical school's development. The library's collection of books and journals—a collection initiated by the prescient nineteenth-century decision of Victor Vaughan to subscribe to every major medical journal—has also been extremely valuable. In addition, the medical school kept files on individual students and their organizations, including journals, correspondence with faculty members, and publications, which enabled us to analyze and give historical context to medical student experiences at Michigan from the mid-nineteenth century until the present. A number of digitized sources—Board of Regents proceedings and the university's *University of Michigan: An Encyclopedic Survey, Bicentennial Edition*—have also been very helpful. Visual sources (maps, photographs, and building plans) provide a useful record for changes in the physical growth of the school and University Hospital and developments in its spatial relation to the rest of the university and the town of Ann Arbor.

We also examined a variety of sources from outside the university, particularly articles and editorials published in local newspapers (most of which have been archived by the Ann Arbor District Library). Public opinion about the medical school and its faculty and general ideas about health and disease illuminate significant connections between the medical school and the “lay” community that are not always clear in the institutional archive. From the late nineteenth century to the early twenty-first, local newspaper reporting took a strong interest in the medical school's curriculum, particularly cadaver use in gross anatomy instruction, major events and traditions like graduations and Match Day ceremonies, leadership changes, and (of course) scandals.

We have benefited from several published departmental histories. In addition, the university has taken the initiative to update its entries for the *Encyclopedic Survey* as part of the university's 2017 bicentennial celebration. The Bentley Historical Library administers this Faculty History Project, and those digitized survey updates that departments have completed (currently unpublished but soon to be added to the *Survey's* website) have been useful for our research into the school's more recent history. We decided not to include oral histories of former or current medical school faculty members, mainly for pragmatic reasons. The school's faculty and staff have grown so large that it would be impractical to schedule and record a representative number of interviews, and interests of privacy would complicate our records

and citations.¹³ In that interest, we have also chosen to eliminate the names of students and patients of the University Hospital and its clinics, unless those names were included in published sources. We seek to use this primary evidence to illuminate significant historical trends and themes and, we hope, inspire future scholars to investigate elements of the medical school's fascinating story.