

Ada Hanvey

discusses

Dr. Evarts A. Graham

TABLE OF CONTENTS

Introduction	i
Transcript of Interview	1 - 29
Index	30 - 31

Introduction

Miss Ada Hanvey worked closely with Dr. Evarts A. Graham for thirty years as his executive secretary in the Department of Surgery, Washington University. She is responsible for the completeness and organization of Dr. Graham's papers which are deposited in the library of the Washington University School of Medicine. (A microfilmed set of these papers are also available in the Manuscripts Collection of the National Library of Medicine.) In this interview Miss Hanvey speaks informally of her association with Dr. Graham.

The interviewer regrets that his preoccupation with Dr. Graham preempted a more thorough exploration of the life and contributions of Miss Hanvey herself. The interview was held on June 18, 1971 in Miss Hanvey's home in St. Louis.

Peter D. Olch, M.D.
Deputy Chief
History of Medicine Division

The date is June 18, 1971. This is Dr. Olch, of the National Library of Medicine, visiting with Miss Ada Hanvey in St. Louis.

Dr. O.: Just to start with, Miss Hanvey, to get it on the record, could you tell me when you first came to Dr. Graham's office, the year and the circumstances?

Miss H.: It was June 1927, and I'd like to say that it was the 18th, but I'm not certain. It's almost a coincidence. Just by calendar, month and day, the year being 1971 and subtract 27 from that. That's how long ago it was. It looks like '44--forty-four years ago. He died in 1957 on March 4.

Dr. O.: Which really puts you in a very key position as far as anyone interested in Dr. Graham because you were there as a close associate and right hand, really, to Dr. Graham through some of the very important and formative years in the development of surgery.

Miss H.: Well, I was employed as a so-called administrative secretary. They didn't have administrative assistants; administrative secretary, that was the top flight academic secretary, and I ended with the same title. But, I was "Girl Friday," or whatever you want to call it. Actually, I was his private confidential executive secretary, if there is such a thing. And a pleasure it was.

Dr. O.: Could you just give me your impression---- I know, before

we went on tape you said that the first year working with Dr. Graham was a rather formal situation because he was a rather formal and somewhat formidable type before really getting to know him well, and you, because of your background, your English background, felt that things should be on a very formal basis.

Miss H.: I didn't know any better. I was just formal, period. And this embarrassed him, I'm sure, because I think he was formal instinctively and we met a deadlock here, I'm quite sure. It took me years to get over this. But there was nothing anybody could do about it. I didn't go to work with him as a novice. I'd had plenty of experience at the St. Louis Medical Society Library, as well as in the office of the St. Louis Medical Society where I was "chief cook and bottle washer" and did everything, but with it I had an overall experience. I was still just about twenty-one when I interviewed Dr. Graham on a Saturday afternoon. Do you want to know how I met him? I think that's rather interesting.

Dr. O.: Oh yes, fine.

Miss H.: I was to be introduced to him on Saturday afternoon in the Medical School, second floor, North Building where the Library now is, but at that time it was completely the Department of Surgery's territory.

Dr. O.: Dr. Brodman's office--the present librarian--I think her office is what used to be Dr. Graham's office; at least this is her impression.

Miss H.: Is she on the east side?

Dr. O.: Gracious, I can't think. It's across Scott Avenue, then there is what is the new part of the library, a hallway, then her office along this corridor.

Miss H.: Yes. Well I don't know, it's in the back of the building, not towards the Kingshighway side. But never mind.

Well, at any rate, I learned of a possible vacancy through my sister, who was the medical librarian at the St. Louis Medical Society, who knew Dr. [Isaac Y.] Olch, who in turn was to introduce me to Dr. Evarts Graham. This is now Saturday afternoon, and it was quiet in the Medical School and the first person I see at the top of the steps I ask if he could tell me where I would find Dr. Olch, and he said yes he would get him. So he disappeared at the end of a long corridor into one of the laboratories and came back with a person whom I hadn't seen before--this being Dr. Olch--who introduced himself to me and then turned to the man I previously talked with and said, "This is Dr. Graham." So this is how I met him. We had the interview and I don't think I made too good an impression, mostly because I was too young, so he said. I said, "Well, why don't you try me for two weeks and if you don't like me it's all right with me because I'm not sure I want to stay in medicine anyway." That was the beginning, and he wanted me to come almost the next Monday and I couldn't because I was working. This, however, worked itself out.

Dr. O.: Well, that's fascinating because from that beginning, of course, you went onto become part of the Graham legend--if one can use that expression. I'm sure all of the people who've gone through the residency program remember you and think quite highly of you and have marvelous stories about how they tried to get to see the professor, but first they had to get by Miss Hanvey.

Miss H.: Well, I'm afraid some of that's true. I used to pride myself on remembering names of the boys who went through the training and then went away to another hospital and would return to talk to Dr. Graham. I took great delight in saying, "Well, hello, good morning, Dr. so and so," and it would be the right name and they were just floored. But then came the war and things moved very fast. We were on the accelerated program--this was World War II. As I recall we had three years of medical school instead of four; there were no vacations as far as I can remember. The call to active duty of our Washington University unit hospital #21 decreased the regular staff by a hundred some odd nurses and seventy some odd physicians and surgeons. This depleted things so that it was just kind of a nightmare. People came and went so fast and sometimes in uniform--sometimes I never saw them in white clothes--that from then on I couldn't keep up this reputation of: I'll remember your name; don't try to tell me you're Dr. Jones when you're Dr. Smith. [Laughter] Oh, the other thing about the war was that Dr. Graham was Chairman of the National Committee on Surgery. There were postgraduate courses, government subsidized, but the work was all done in the Medical School and much of it landed on my desk

because Dr. Graham was Chairman of the National Committee on Surgery and, incidentally, was in Washington more than he was in St. Louis. That is when I earned the title of "the acting professor of surgery." That really was something. I would take notes on what your problem was then relay it to Dr. Graham. We thought nothing of picking up the telephone and calling the Surgeon General's office. This quality I was trying to tell you earlier that I have: I like to do it; I like to know how it works and to find out I'll do it myself. I actually typed some of the stencils of the proposals for contracts of the government; I suppose they should have all been done in Washington. But the climax came for me when the phone rang one day and it was Washington and it was the Surgeon General's office--I don't know who it was, Larkey-----

Dr. O.: Oh, Dr. Sanford Larkey?

Miss H.: I'm not certain. He was an historian.

Dr. O.: Yes, he was the librarian at the Welch Medical Library and also was a historian.

Miss H.: Yes. I had never met him, but I knew of him from my sister, the librarian. He asked me if I had the mimeographed stencils for contract number such and such, and that's the time I blew my lid, and I said, "Of course we've got them. We'd be delighted to send them to you, but before I do I want an answer to one question. Why are they done here?" I forget the answer. But you see, it took me a year to

wake up. Meanwhile, this beautiful service was going on plus the routine work. But this is a quality I have and still have. If there's something to be done I like to know how it should be done and I don't mind doing it, and then I am very happy to get rid of it after that.

Dr. O.: Well certainly Dr. Graham had his finger in many pies, as it were, terribly active in the strengthening and what-have-you of the medical school here, and I gather from my conversation with Dr. Bradley, really the most powerful force in the Executive Committee and one whose relationship with the Barnes Hospital was a good one. In other words, he was not the obstructionist that some people can be.

Miss H.: That was later. But of course, if you're going back to the early days of Dr. Graham, I understand that he came in uniform.

Dr. O.: That's right. He was fresh out of World War I.

Miss H.: World War I, and I think I'm right about this, he signed his own discharge papers. He was a major at an evacuation hospital. There was a time when old records of the evacuation hospital were in the old medical school office of Dr. Graham. I had a lot of things to clean out--it probably went to the medical school library or was given to the unit hospital.

Dr. O.: I might, while you mentioned that just while it occurs to me, I'm interested to know whether or not the material which was sent to the Medical School Library was weeded out or was this pretty much as it was in his files?

Miss H.: You mean that you've seen what we call the archives?

Dr. O.: This tremendous collection of papers, yes.

Miss H.: It's his files just as they were. Nobody was ever in those files but myself.

Dr. O.: And you didn't weed or destroy anything. Well, that's marvelous. I'm glad that you didn't because it is a gold mine for historians.

Miss H.: Yes. Well, I knew there was a lot of truck in there that really should be pitched, but number one, I couldn't do it. I didn't have the time if I emotionally could have. You see, I did this alone and of all these beautiful files, here was a man that never went to a file. Dr. Graham never used files.

Dr. O.: This was all your bailiwick?

Miss H.: I would say, "Well, you know there's thus and so." And he sometimes-----I could tell he could care less. And so then I would, when he wasn't there, get it out and put it on his desk and I never knew whether he read it or didn't read it. He started from scratch, sort of like: forget it now, I don't want to be influenced by all this other. And I could understand that. I'm not trying to say I wasn't appreciated because he did appreciate me, but a man who really used the files would have appreciated my methodology, let's say.

Dr. O.: Well I can tell you right now, and I've told you before, but

I must reiterate that that collection of papers is undoubtedly one of the most important collections of papers of any surgeon in this country for anyone interested in the development, not just of the American Board of Surgery, but the whole field of surgery because he was so actively involved and you had it so well organized that it's a gold mine.

Miss H.: Well, he was in everything. And it just happened that Ada Hanvey came along and was interested in history anyway. I'm sure I kept too much.

Dr. O.: You never keep too much, not for the historian at any rate.

Miss H.: Well, don't forget I had a staff of girls and the ordinary run of the mill person would think, well, you know. And I'm very sensitive about this sort of thing, but fortunately I worked alone with Dr. Graham. He was careful about that which I think kept our relationship solid. There were other secretaries that came along; we needed help. And I used to say, "Well, just get to the dictaphone, Dr. Graham, and I'll supervise the transcribing, but I cannot do all of this." And of course, the ideal way and the way I really enjoyed working with Dr. Graham was taking shorthand. I would sit there and it was quite relaxing; that's how it started. And then it got so that things would stack up in the outside office because I was sitting with him, quietly, not opening my mouth, reading the dictation back if he asked. Then--most people don't believe this, but it is true--this was written once. I took it down in shorthand--this would be a

manuscript, or it might be letters, whatever, letters or something else--and I would type up in final form from the shorthand dictation. It worked; there was no question. But when things got too hectic and I would get him to use another secretary or stenographer, whatever you want to call them, he would say to me, "How long is this going to go on?"

Dr. O.: You had him spoiled.

Miss H.: Sure. Also you lost something; I did. I lost some of the content of what was going on; I didn't have to be kept informed, but this grew and first thing you knew after about three months or more you didn't know what went out. Now, I never did care about the patient part and I did very little with him on that. It was the university and the hospital and the training that interested me. But I must say I don't miss it now that it's over. Of course, I went into thoracic surgery and I was tailor-made for that I guess.

Dr. O.: You were with the American Association for Thoracic Surgery for how long, from about 1957-----

Miss H.: In 1956 I went to Miami Beach where they had their annual meeting to look them over and they were to look me over. I went rather reluctantly because I was just getting going in the medical school public relations, although I'm sure it was the best thing for me health-wise because I would not have been able to do what I wanted to do with the medical public relations--it's too big a thing. The AATS almost

got that way because it was growing by leaps and bounds and since 1956 I actually ran the meeting. The first one was '57 in Chicago and with a change of officers each year!!

Dr. O.: Now, your title was-----

Miss H.: Again, Administrative Assistant. I could have had any title, but these boys or men were----- Here was a woman coming into their organization, they'd always run it themselves before, and there were some rather stormy times in the Council before they employed anyone. I knew my value, but I could never sell myself. This just worked out fine because I ran fourteen meetings and set up my retirement plans three years before I retired, told them, retold them, told them again, and they still didn't believe it and I said this is it. So that was the last, October 1, 1970, and now we're sitting here, June 1971. But I've seen a lot of thoracic history.

Dr. O.: Yes you have. You were the ideal person for it, too, because of your involvement with thoracic surgery with Dr. Graham.

Miss H.: Well, I was sort of tailor-made or trained.

Dr. O.: Well, along these lines, I gather that as time went on you really were in a sense a sounding board at times for Dr. Graham and, as an administrative assistant, a confidant. Can you share with me any thoughts you have or memories you have of what it was like at this period, first, when Dr. Graham took on the administration of the American College of Surgeons and expressed his concern with the direction

the College was going. This led, of course, to a series of communications with Franklin Martin and in discussions with Dr. Crile with whom I gather he was a very close friend and whose son, Barney, then came down and was on the house staff-----

Miss H.: Well, don't let me forget to tell you a very interesting bit about that.

Dr. O.: Okay. But if you can just through "cerebral freewheeling," as we say, give me any thoughts you have about this period, it would be of great value.

Miss H.: I can't place the period.

Dr. O.: Right. Well, this would be around 1934 when he was made vice-president without his prior knowledge. You know, when he was program chairman for the College here in St. Louis.

Miss H.: Yes. Well, he was very--he didn't go to one of the meetings, he was so angry at either the woman that was the right hand of Franklin Martin, who really ran the show-----

Dr. O.: Oh, Miss Grimm?

Miss H.: Yes, Miss Eleanor Grimm. Not anything of her doing because she happened to be the fall guy that had to make the phone call. And I can't give you the details of this, but it was one of the first insights I had of Dr. Graham either being a spoiled boy or being justly indignant

to be asked to do whatever this was. I can't tell you exactly, but it was about sitting on the platform-----

Dr. O.: This was probably part of the thing about being made vice-president--first vice-president--of the College without his prior knowledge. They said nothing to him, they didn't ask him would he be interested, would he be willing. He was just told: you have been elected.

Miss H.: That's it. And he refused and did not go down to the auditorium--it was the Kiel Auditorium at that time I guess, and sit on the platform-----

Dr. O.: Right, and he was the local program chairman.

Miss H.: I remember saying something to him, "Well, how can you do that?" I think the general thought was: well, I'm not used to being a first vice-president and in particular without being asked. Well, you see, there you get a little idea of the pride of the man as well as his vanity and he had it and carried it beautifully most of the time, but he was very, shall I say, a spoiled boy. I think he held a grudge a long time. There's a story about Bob Schlueter--Dr. Schlueter--south St. Louis German, one of the patriarchs of the medical society. This may have been before the American College incident. It was the AMA meeting in St. Louis. Dr. Schlueter appointed Dr. Graham to stand at the main entrance of the Jefferson Hotel or the auditorium where the meetings were being held to keep the traffic moving. Well of course,

Dr. Schlueter would do this, but not Dr. Graham. This he never forgave Dr. Schlueter for. I was interested in this because Dr. Schlueter had operated on my father, he was very interested in the library, he was very close to my sister. I think Schlueter passed the remark one day, "Well, that sister of yours let us down, she's gone to work for Graham at Washington U." I had left the Medical Society. I could have been of value to them there, but it worked out just great, but that shows you a little-----

Dr. O.: No. This really doesn't surprise me. I've heard intimations of this from others that he was a vain person, a very proud person.

Miss H.: Well don't forget his background. His father was a professor of surgery at Rush Medical College in Chicago. His mother was a real matriarchal type of person, and how could he turn out otherwise?

The thing I want to say about Crile. I don't know about their friendship. Dr. Crile was the big name at the time, and I think, I'm sure, I saw him once, so he may have come in the office. He had a son, George Crile, Jr. and I handled all the intern applications. From the minute you applied, I worked it out, I wrote to everybody and got it all together and it was presented, the finished thing to whoever was going to make the appointments, which, in the end, was Dr. Graham. So came this one, George Crile, Jr. and I scanned this, and I said to myself: I should ask Dr. Graham about this. So I did and I said, "Do you think this is the son of the Dr. Crile in Cleveland?" And Dr. Graham wasn't sure; he said, "Let's find out." So we sent a telegram--this I know

you'd find in the archives, this always amused me. The telegram was from Dr. Graham to George Crile: "Is George Crile, Jr. your son?" And the answer came back, a telegram from George Crile to Graham said: "Yes."

Dr. O.: That's all it said?

Miss H.: That's all, "Yes." You see, this "yes" was brought on by this question being so specific. He didn't say he was applying for entrance here or anything, it just said: Is he your son? And the answer was a gem--"Yes."

Well, getting back to this Crile thing. Dr. Graham used to talk at great length with Womack about many things, so much so that I used to say to Dr. Graham, "When you're not here and I have a crisis, I have something I've got to do something about, to whom should I go?" There were many people in the department. And he was reluctant. He liked to let it fall--he had a great knack for that--not giving a specific rule but: You make up your mind. Well, sometimes this was a little tough. I finally offered, "Well I find myself going to Dr. Womack. I feel he gives me a fair answer without prejudice." And he said, "That's all right." And, of course, I was quite young when all this happened. But Womack was the recipient of a great lot of off-the-cuff stuff from Dr. Graham, and I think he was very unhappy when Dr. Womack was not appointed his successor. Of course, Womack went to-----

Dr. O.: First to Iowa, wasn't it and then to North Carolina.

Miss H.: Iowa, where the boys said that they couldn't stand him because he told too many Civil War stories. (Laughter) And then he went to his home place--Chapel Hill. But everything Womack says has probably happened, and you won't find a record.

Dr. O.: Right. Well I plan to talk to him. I am going to see Warren Cole in just a couple of weeks in Asheville because I'm going on my summer vacation to North Carolina to High Hampton, Dr. Halsted's old summer place, now an inn and country club--so-called, and I have already written and plan to go down and tape a session with Dr. Cole. I've written Dr. Womack and I told him several years ago I wanted to talk to him, but it's a little difficult to get that far over from Western North Carolina so I'm going to make a special trip.

Miss H.: Well, give Dr. Cole my warm greeting, will you?

Dr. O.: Oh, I certainly will, he'll be delighted, I'm sure.

Miss H.: We went through a lot together.

Dr. O.: Oh, I'm sure you did. I know Dr. Graham was a proud man; had a moderate degree of vanity, but on top of this I have the feeling that he had an honest to God concern about mediocrity in surgery as exemplified that period in the American College of Surgeons. In other words, keeping an open and objective mind, I cannot bring myself to think that his taking on Franklin Martin, George Crile, and many others, and writing these twenty surgeons for their candid views on the College and then going to the Board of Regents and sitting down with them was just a

power play. In other words, trying to get in on the top level of the College. I think I would have to say on the basis purely of standing off with the perspective of the years and the papers I have read and his correspondence, that though there was an element of being a proud man and one who obviously enjoyed a fight, if he thought it was necessary, that he did in fact have great concern about making sure of the standards of surgery and so on.

Miss H.: Oh, I think it was basic to him. This man didn't have to make power plays, although if he did--and he did sometimes--he did it so smoothly. I used to say he would have been a good--whatever he was in--diplomat, a professor of English, whatever. He was thorough, he found out all there was to find out. For example, writing twenty surgeons; most people are too lazy to do this, or they think: So what's the use, some of these people are----- He'd write one of these twenty to make it complete even though he might feel: I'm not going to get anything out of it, though I think he basically had surgery, good surgery in mind. I suppose you've gone over all the, or will maybe, details of the Gilmore--Joseph Gilmore, is it Joseph?--operation, the first total pneumectomy, the removal for cancer.

Dr. O.: I'm familiar with the story in general. Again, what I have really gone into is just that material primarily related to the American College of Surgeons and the development of the American Board of Surgery.

Miss H.: Of course, I first heard of him--maybe I'll get this story off

now, this is my favorite story. I first heard of Dr. Graham when I was typing the minutes of the St. Louis Medical Society on the discovery of cholecystography. There was Graham, Cole, Copher and Moore, and it was 1924. And I was typing this, just prior to going to work with Graham in 1927. These four men received certificates of merit from the Medical Society for their work on cholecystography. In the minutes as I typed them, I ran across the word, tetraiodophenolphthalein, and I was intrigued, just intrigued. For some ridiculous reason, I memorized this word, the spelling complete. One of the first letters that I was taking in the first few sessions with Graham--shorthand this would be, remember I'm twenty-one and I think I'm awfully good--and he says whatever he says and says tetraiodophenolphthalein and he starts to spell it and I have it written out in longhand before he could get it out. He said--and I shall never forget this--"Well, where did you ever hear this word before?" I said, "Why, I heard it in the St. Louis Medical Society work I did." Of course, he was floored, and now I can see where he was. I said it was the longest word I had ever run into so I decided to memorize it. I don't know what it means, but I----- Well, this, you see, gave us a bond right away in spite of the smart aleck--I must have been pretty bold.

Dr. O.: Well, I think with his personality, he respected your standing up to him.

Miss H.: Oh, he could see right through me to the potential and he developed this to the fullest. And, of course, it was good for me and it was good for him.

Well, getting back, I'm deviating now from Graham the man and what he did. He certainly worked for medical education and of course, you will if you haven't already, dig into the Abraham Flexner files. That's the early beginning. He was supposed to have been at the time the youngest professor, full-time professor of surgery, but remember there weren't many. There weren't many. And he stepped into a hot bed of politics in St. Louis, and he went above this, not only in the hospital--it was in the Medical School, too. Your father has undoubtedly told you stories.

Dr. O.: Well, yes, right, and Frank Bradley, too, the difficulty he had with Sachs who felt he should be the next professor when Murphy stepped down. This happens so often in so many places really.

Miss H.: But here again, Graham had this beautiful quality of the man, the finished gentleman, the diplomat, and he (Graham) succeeded Dr. Fred Murphy. There was a Dr. Clopton who has been a great benefactor to the Department of Surgery. Dr. Graham could hold his own surgically, professionally, culturally, he could hold his own with the likes of the Malvern B. Cloptons. He did this better than he could relate to some of his patients. I remember the filling station attendant from Lamar, Missouri whose wife had cancer of the lung--I'll never forget that one. He just didn't understand the guy--the filling station attendant.

Dr. O.: In other words, he couldn't relate to this man who was the husband of the patient.

Miss H.: The husband. The girl was pregnant and she was going to have

to deliver this baby postpneumonectomy. It was there that Dr. [Brian] Blades was so apt--he happened to be on the chest service and he could talk the lingo of the guy from Lamar, Missouri. I just happened to know this one particular case because I didn't get into the clinical side, I wasn't interested in it and I didn't have time anyway.

Dr. Graham said to me, "I don't know what to charge him. You know, he could have a lot of money." And I said, "Yes, and he could have a little money." This went back and forth. And he said to me, "Would you talk to him?" I said, "Well, I don't know that I'm any better at this than you, but if you want." So the guy came up when Dr. Graham wasn't there--this was in the very lovely office we had, and the first thing he did was pick up a fish paperweight that I had on my calendar and he said, "Dr. Graham interested in fishing?" And I said, "No he isn't. He thinks it's the worst waste of time that ever happened." He said, "Well, I thought maybe he was, you had it around." And you know, he talked to me more about Dr. Graham than I got to talk to the man. I almost let my hair down and said, "Well what do you think a person like you should pay?" This ridiculous interview was over finally, and later in the day Dr. Graham kept at me about this and I said, "Well yes, he was up here but I just don't know anymore than you do." Well he said, "Brian Blades thinks he knows these people." I said, "Well, I think he probably does, but he can't afford a whole lot. Maybe he just talks big." This went on and Dr. Graham was so concerned he would just as soon have performed the operation for nothing. In fact, he'd rather, I'm sure, than overcharge. But anyway, he had a great big heart for the underdog, and

if you attacked the underdog you might as well quit because he would defend them. This I often knew. If you said something--if I were to say something derogatory about the animal keeper who was really playing on the job, Dr. Graham would start, "Well, he doesn't make a whole lot of money and what does he do, he has to buy bread and he has to do this and that." And I said, "Not only bread in this particular case, he has to keep an Italian mother, too." Well at this sort of thing he was totally impractical. Somebody, like myself or others, took care of these things for him. But when it came to the big things that went on in surgery, he was in there pitching on them all. He would give it all his thought. He would operate, but in his later days he didn't take on two or three at a time. He worked thoroughly.

Dr. O.: No. I would imagine as busy as he was with, in a sense, extra-university affairs--extracurricular things--he couldn't carry a terribly heavy operating schedule.

Miss H.: Oh, but he did in his time. Well, this was before the first total pneumonectomy, of course. When I went to work with him he was doing gallbladders. Galbladder surgery just almost disappeared with this work that was going on in chest, and the day that the first total pneumonectomy was done, he didn't say a word to me about it. He didn't talk about his cases to me. I didn't know until the next day when the resident-in-chief came in to see Dr. Graham and he said, "Miss Hanvey, wasn't that a great thing that happened here yesterday?" I said, "What?" And he told me about it.

Dr. O.: Who was the resident on that case?

Miss H.: Bell was the resident-in-chief of the surgery staff. He's dead. I can't think of his first name, but Bell, from Atlanta. Bill Adams, now Professor Emeritus at the University of Chicago, later with the American College of Surgeons, was the intern on the case.

No, you see, when I did speak to Dr. Graham about it he said, "Well he's not out of the woods yet." Of course, this was a terrific thing. I've always been so glad that first one lived.

Dr. O.: Yes.

Miss H.: Yes, the second died.

Dr. O.: Well, he certainly had the reputation, I gather around the Medical Center as he did in surgery, in general, of being quite a man of principle. I know Dr. Bradley made it quite clear to me and it certainly is his impression that Dr. Graham was probably the most forceful person on the Executive Committee as far as all the professors, the Professor of Medicine, and the other department heads. And I gather [he was] one of the people who worked quite diligently to try and get the many elements of the Barnes Medical Center--the Barnes Hospital, the various other hospitals involved, and the Medical School to work smoothly and to mesh together for the betterment of the medical center in general. I know there have been very difficult times in that relationship.

Miss H.: Oh, definitely and he used to have great battles with

Mr. Frank Rand, of the Rand Shoe Company, for whom one of these buildings is named and there was a period when they didn't speak.

Dr. O.: Yes, Bradley referred to this.

Miss H.: But did he also say that the irony of fate came that Mr. Rand had carcinoma of the lung and was operated on by Dr. Graham and he died. It wasn't one of those glorious things where one lived, after going through all these things. And of course, Dr. Graham dying of the disease himself, and I was the first person he spoke to after Dr. [William H.] Daughaday [Associate Professor of Medicine] left and told him he had cancer of the lung, and perhaps something there should be recorded.

Dr. O.: Yes, why don't you.

Miss H.: After Dr. Daughaday left there was a silence. The door was open and normally I went in and out, but this time I didn't go in for a few minutes. There was just silence. Finally, I said, "May I come in?" And Dr. Graham said, "I wish you would." I was the one that received this news first before he had time to think. I said, "Well, what does Dr. Daughaday have to say?" He said, "Well, it isn't good." And he turned and picked up the X-rays and held them up to the window pane. He said, "You see, it's in both lungs." I can still remember not knowing what to say. I don't know what I said. I do remember that he said, "Of course I have no future now." And then I couldn't leave him alone, so I said, "Is there anybody you'd like to talk to, maybe

Dr. Burford, Dr. Graham?" He said, "Yes, I would." So I called and got Dr. Burford and while I was doing this--while we were waiting for Dr. Burford to come which was not very long--I thought of a---- I had to say something, I had to break the tension, I just had to---- so I thought of a patient he had by the name of Vito D'Amico, a man from Pennsylvania, who used to come to St. Louis about every six months and he'd always call direct to the private office instead of going through the chest service. I knew that there had been a diagnosis of inoperable bronchiogenic carcinoma on Vito D'Amico and that he had only eighteen months to two years to live. Well, when his call would come I noticed it because it was so unusual, we just don't have calls in the place where I was from patients. So each time I would handle it individually instead of shoving it to chest service. I would say, "Vito D'Amico called, Dr. Graham, what do you want to do with him?" And he'd say, "Have him come to chest service, such and such." When this dreadful situation came and he was telling me he had inoperable bronchiogenic carcinoma, I turned around and I said, "You know something, you just might be a Vito D'Amico, who knows." And he laughed. And I used to say: I don't know anything about diagnoses but you surely must admit that you missed on the diagnosis of Vito D'Amico. And he always said he didn't. But whatever happened to Vito D'Amico I don't know.

Dr. Burford arrived and I closed the door and made my exit. But that was it. You see---I think he called me A. H. then---"You see, A. H., it's in both lungs." And of course, what do you say?

Dr. O.: There's not a great deal you can say, particularly to a man who obviously knows the story.

Miss H.: Yes, this was January, and he was gone in March.

I'm leading you away, I know, from the history of medicine. Dr. Graham's interest in gardening began when they lived at 10 Upper Ladue Road--10 or 12, whatever--before they built the home on the Missouri River, and it started with Mrs. Graham and he, I'm quite sure, together working with just ordinary pots and plants and things around the house. They had moved from a city house; the first one on Westminster, that they occupied after they came as a young couple, to St. Louis. They moved then to 10 Upper Ladue Road and the gardening began. And Dr. Graham used to bring in--I often thought in competition to me--bits, because I had a very small little garden and I can remember the first flowers I brought in and put a couple of pansies on my desk and Nathan Womack came in and admired them, and I said, "Oh yes, I bought these yesterday and planted them." And Nathan Womack turned to Dr. Graham and said, "You know, Ada Hanvey likes to pick flowers so well, she goes out and buys them one day and puts them in the ground and picks them the next morning!" This was true. But at any rate, somewhere in there was a challenge and I said, "Well, nobody else brings flowers around here and I just think a flower helps the day, that's all." It wasn't long before Dr. Graham began to bring in small bits and they were very much appreciated by the whole department of surgery and then when they moved to Jamestown Road overlooking the Missouri River, Mrs. Graham and he definitely went into gardening in a big way and he used to bring in whole limbs of apple blossoms and, well I did

marvelous things in the office with them. Sometimes we'd spread the flowers around to some of the other offices. I think it was a very consuming avocation for Dr. Graham-----

Dr. O.: Getting out working in the garden.

Miss H.: That's right. And on the adjoining property lived the Right Reverend William Scarlett, Retired Bishop of the Episcopal Diocese of Missouri. Bishop Scarlett did gardening of sorts, and this was one of the many things the two men talked about in their afternoon walks after Dr. Graham had retired.

I have one very charming slide I took. It's not complete, but it's Dr. Graham holding some lilac when I was out there one day and I said, "Would you mind cutting some lilac for me and please let me take a snap of you." The coloring was good, but unfortunately I didn't get the whole person in. But I caught the expression on his face looking at the lilacs which I thought was quite good.

Dr. O.: Well, he sure was a striking looking individual. The photograph one sees most frequently is of Dr. Graham standing in front of a bookcase. I think that's the one that he gave out to his residents or possibly it was at the time of his retirement. I know my father has an enlarged version of that signed by Dr. Graham.

Miss H.: Yes, this was the favorite photograph taken by Savage (a St. Louis photographer) in the office. This was taken in my office which was part of his suite, and this was a favorite photograph.

You've seen some of these photographs; have you seen most of them, did you go through the files?

Dr. O.: I haven't because many of the photographs are wrapped up. I know those that were still in frames are tied up and wrapped and labeled, and I haven't unpacked these things.

Miss H.: Don't, because, well, there's a list of what they are and he would not appear in them. But I meant his formal photographs. I think there's an envelope with a sample.

Dr. O.: There probably is.

Miss H.: And I know Mrs. Graham had some and I know she offered me some more and these were leftovers. And so when I cleared up the things at the office, I got rid of everything I possibly could or filed it or sent it to the library and kept a minimum here. I kept a sample of what I wanted personally, but they're all there. But this was the favorite and I got this taken, incidentally, by telling one of my photographer friends, who is quite an artist, "If you'd just come over and take this man's picture. He won't go to have it taken and you do a good job. You just don't know how many people might. . . ." You know, but he wasn't a pusher either and so he didn't do too much of this. But Justin Savage came and took, oh, all kinds of pictures in the office, and this was how this came about. He'd be right in style today with that tie, wouldn't he?

Dr. O.: Yes, he would; they're that wide again.

Miss H.: Well, I'm glad you have one of these books.

Dr. O.: Yes, I do. In fact I have a copy I think in my case. One of the things I know I would love to do is go through his comments in the Yearbook of Surgery. Some of these have been pulled out already when he retired as editor and put out in this little book of his favorite expressions.

Miss H.: "It Would Seem." These are not in existence anymore.

I'll tell you about this because this came into play at the American Association for Thoracic Surgery meeting. Do you know, the last meeting at which I officiated, 1970. At that meeting Dr. Leo Eloesser, the oldest living member of the Association, was made an honorary member. The only other member who had previously been made an honorary member of the Association from the United States was Dr. Evarts Graham. I think there was one from Canada. The bylaws were changed so that Dr. Graham could be made editor of the journal then about to be born. This, then, was the first time that they did change the bylaws, and Dr. Graham became an honorary member. Now then, we come up to 1970 and Dr. Leo Elaesser who is still (in 1973) living in Michoacan, Mexico, was asked to be the honored speaker--honored guest speaker. This was the second time that a member was made an honorary member of the AATS. And so I got into this because I know Dr. Elaesser, have admired him over the years, and he was down in Mexico and he knew I could do certain things and would I send him whatever. He also wrote to Mrs. Graham and to Dr. Burford and they gave what they could. Well, of course, this is

my problem. If I'd had nothing else to do I could have really helped him, but I couldn't do that. Running a meeting and so forth. So what I did was send him--and I photocopied the It Would Seem book which was put out by the Yearbook of Surgery, edited by Frances Wetherhold who then worked with Dr. Graham from Chicago to St. Louis on the abstract material, and she collected these editorial comments which were classics, they became classics and Dr. Elaesser used some of this in his talk. And there again, I have some slides, so this is all current. Dr. Eloesser is the oldest living member of the AATS. He's 85 or whatever now. You don't know him?

Dr. O.: No, I know the name certainly, but I never met the man.

Miss H.: Well, he stood up there, and Mrs. Graham came to the 1970 meeting--this was in Washington, D.C. and she was going on to Atlantic City, and a very nice thing that she did attend because she died April 4, 1971 of a heart attack at Barnes Hospital. She provided one picture of Dr. Graham as a very small boy; you may be interested in that, I do have a slide of that. Now, there's where Ev [Evarts Graham, Jr.] may have something.

Dr. O.: Well, certainly when the thing gets rolling, you know, if they do find a biographer, they'll want to have some early family material. It's nice to know that's probably where it's going to be.

Miss H.: You haven't seen the reprint or read the reprint of this? You

could in the Journal of Thoracic and Cardiovascular Surgery.*

Dr. O.: I'll have to get hold of that. This is the paper written by
Elaesser and it was on Dr. Graham?

Miss H.: No, no. Graham was one of several. I think I can put my
finger on it.

Dr. O.: Good, great.

[End of taped interview]

* Eloesser, L. "Milestones in chest surgery," J. Thorac. Cardiovasc.
Surg. 60:2, Aug. 1970, p. 157-165.

Index

- Adams, William, 21
- American Association for Thoracic Surgery, 9, 10
- American College of Surgeons, 10-12, 15
- Barnes Hospital, 21
- Blades, Brian, 19
- Bradley, Frank, 6, 18
- Burford, Tom, 23
- Cholecystography, 17
- Clopton, Malvern B., 18
- Cole, Warren H., 15
- Crile, George, 11, 13, 14
- Crile, George, Jr., 11, 13, 14
- Daughaday, William H., 22
- Eloesser, Leo, 27-29
- Gilmore, Joseph, 16
- Graham, Evarts, Jr., 28
- Graham, Helen T., 24, 28
- Grimm, Eleanor, 11
- Larkey, Sanford, 5
- Martin, Franklin H., 11
- Murphy, Fred, 18

National Research Council, Committee on Surgery, 4, 5

Olch, Isaac Y., 3

Rand, Frank, 22

Scarlett, Rev. William, 25

Schlueter, Robert, 12

Womack, Nathan, 14, 24