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Kudos JOCK MURRAY**

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**Greetings,
Fellow
Oslerians!**

**President John Noble, shown
here in his lair overlooking
Boston Harbor, at the time of
the 2008 Boston Meeting**

The *Oslerian*

A MESSAGE FROM THE PRESIDENT **EVOLVING PARADIGMS FOR MEDICAL PRACTICE**

In the Valedictory Address at the University of Pennsylvania on May 1, 1889, William Osler discussed the physician's role and response to clinical practice. "My tender mercy constrains me to consider but two of the elements which make or mar your lives - which may contribute to your success, or help you in days of failure.

3 "In the first place, in physicians or surgeons, no quality takes the rank with **imperturbability**....**imperturbability** means coolness and presence of mind in all circumstances....

4 "4 In the second place, there is a mental equivalent, to this bodily endowment, which is as important in our pilgrimage as **imperturbability**... summed up as the philosophy of life in the watchword, **Aequanimitas**. Calm equanimity is the desired attitude; how difficult to attain, yet how necessary, in success as in failure!"

5 At Johns Hopkins Hospital, he concluded an address in 1891 entitled "Doctor and Nurse:" thus: "And, finally, remember what we are - useful supernumeraries in the battle, simply stage accessories in the drama, playing minor, but essential, parts at the exits and entrances, or picking up, here and there, a strutter, who may have tripped on the stage."

6 Imperturbability, and **Aequanimitas** helped to assuage physicians at a time when their resources and interventions for altering the outcome of most diseases and other medical problems were lacking.

Fortunately, the advances of medical science over the past 100 years have led to remarkable discoveries, life saving interventions and new medications.

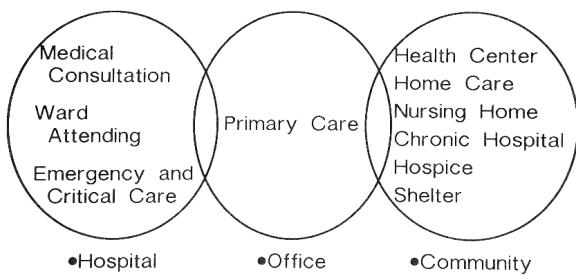
Medical School and Residency Training Programs have dramatically upgraded and changed medical curricula to accommodate new knowledge which has transformed medical practice and the outcomes of care. An example of this transformation can be found in the evolution of curricula training of Physicians who are Generalists, Family Physicians, General Internists or Pediatricians.

During the 1970's the territory of the general internist was depicted simply, as three interconnected ovals with Primary Care training, conducted in offices or clinics which were usually close by or contiguous with teaching hospitals. During that time there was a minimally defined Primary Care Curriculum which was taught in pre-clinic conferences once or twice a week. Throughout the rest of the week, the residents and students were assigned to caring for hospitalized patients. (Continued p. 2) ►

President's Message (continued)

The major focus of the curriculum was on the diagnosis and management of patients admitted to the hospital.

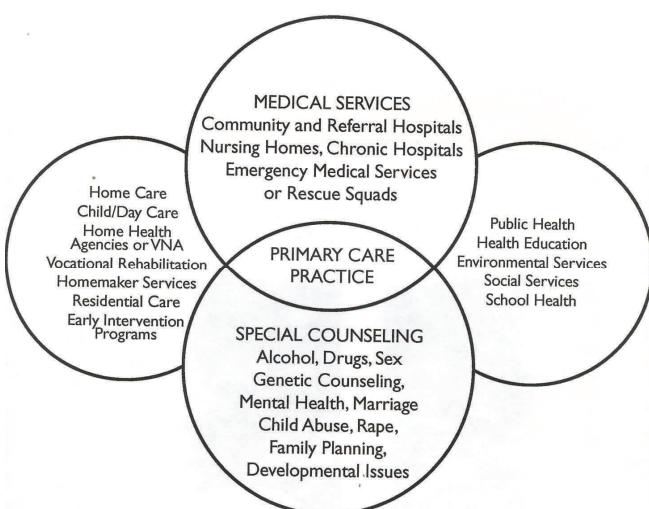
The Territory of the General Internist



The scope of Primary Care Curriculum was dramatically expanded in the early 1990's. The topics which were added to pre-clinic conferences and in Primary Care Block electives greatly expanded the exposure of the residents and medical students to a wide assortment of health and medical services, community agencies, health care programs and facilities. The fund of knowledge required by Physicians in the three Primary Care Training Programs (Family Medicine, Pediatrics and Internal Medicine) was extensive, and experienced faculty served as critically important role models and teachers.

Community based teaching opened up opportunities for recent graduates of the Primary Care Residencies to practice in Clinics, in Community Health Centers, Senior Citizen Centers and Home Care/House Call settings.

The Broader Territory of the Generalist Physician



This is truly a domain for Primary Care Physicians that harkens back to Osler's era and before. While the teacher of students and resident physicians has a vastly improved armamentarium for diagnosing and treating disease today, the delivery of healthcare services has become ever more complex.

Continuous Quality Improvement, Patient Safety, and Cost Containment loom as major health care challenges which will directly impact primary care services over the next decades. The framework for creating efficient and cost effective Regional Health Care Systems looms before us much as did the need in William Osler's time to identify the causes of disease and the to develop effective treatments. These regional management systems must have the potential to address problems with quality, cost and availability of care. They have the potential of adding new categories for papers to read before the AOS.

Framework for Creating a Regional Healthcare System



During my Presidential year I look forward to the opportunity to communicate with you and explore some of these issues and other more historical topics, including –

- "An Evening in My Library: Medical Milestones Over 500 Years"
- "A Day at Oxford with Paul Beeson MD"
- "The Measurement of Quality in Healthcare"

— John Noble MD, MACP

AOS Annual Meeting 2009 Cleveland, Ohio (Reflections from the Editor)

I've been a member of the AOS for the past six years and continue to be fascinated by the variety and scope of the papers. It brings to mind a saying educator George VanSantvoord: "The truly educated person is never bored because the truly educated person is infinitely curious." I find many AOS members are ***infinitely curious.*** It's a splendid attribute that I'm convinced staves off aging.

Cleveland in 2009 was no exception and I find it hard to decide which papers were best! I polled a few member friends and they felt the same: all thought it was a wonderful meeting.

Due to a flight delay I arrived as **FRANK NEELON'S** Readings Session was underway. Frank is a superb reader of poetry, and his suggestion for next year's reading session was unique and challenging: *Attendees should come ready to share a favorite poem, preferably recited from memory, especially one's own poetry.* It should make for a great **Readings** session in 2010.

MICHAEL BLISS described the Canadian discovery of Insulin. I had not appreciated that Banting and Best's extract failed on the first patient, whereas Collip's succeeded. **PAUL BERMAN** told of the Wood family of PHL and its relation to W.O. Poignantly, Sir William wrote Horatio Wood, Sr. during the last year of his life, "I would like to see India and Japan, particularly if you were along with me."

From a paper by **GEORGE S. BAUSE** we realized that advertising by the medical profession is far from a new practice. **CHRIS BOES** summarized Osler's approach to headache, and his mention of 14 remedies to prevent or treat migraine made me reconsider W.O.'s reputation for therapeutic nihilism! "Spend a night with Venus and a lifetime with mercury" was an aphorism from **GEORGE SARKA'S** paper about Osler's treatment of lues.

It was appropriate in Cleveland to have **WILLIAM S. HAUBRICH** tell the history of Medical Education in the Western Reserve; it became a nice supplement to Dittrick Museum. Likewise the good paper about the Cleveland Clinic Fire of 1928 by **LEONARD CALABRESE** and **JAMES YOUNG** was fitting for our venue. Many of us had been curious about that tragic event.

As a surgeon, I particularly enjoyed **DAVID K.C. COOPER'S** paper on the development of the heart-lung machine, for John Gibbon's first (unsuccessful) patient was one of my father's at Pennsylvania Hospital, a young woman who had a diagnosis of atrial myxoma (based on an angiogram done by infusing contrast

through both basilica veins). The swirling artifact produced on fluoroscopy resembled an atrial tumor, but when Gibbon got her on the pump and opened the atrium, it was empty.

I also enjoyed two other papers by AOS surgeons, first an excellent review of laparoscopic cholecystectomy in the U.S. by **BOB NESBIT**, and the review of WWI wound treatment by **DARRYL BIN-SCHADLER**. I was familiar with Dakin's solution, but not with the work of Sir Almroth Wright, who was obviously ahead of his time in that pre-antibiotic era. Many of us enjoyed being enlightened about the difference between the Caduceus and the Staff of Asklepios by **THOMAS W. FRANK**. I think that all of us were humbled once again by the quality and urbanity of the presentations by the **several medical students** attending this meeting. I was fascinated to learn from **AMIT SHARMA'S** paper about Weitlander's retractor, and embarrassed that I'd been mispronouncing it all these years! **JAMIE FRASER'S** talk filled us in about the evolution of plastic surgery in this country in an excellent recapitulation of that specialty. From **ALLISON BABELAY** we learned about the contributions of The Great Arabians – an oft-neglected but important era of medical history, and **ELLIOT TAPPER** reviewed the subject of ethics consultation and how it has evolved in this country.

Perhaps the most useful paper of the meeting was a report by **PAM MILLER** and **CHRIS LYONS**, given by him, about the William Osler Photo Collection website. Chris navigated the website (<http://digital.library.mcgill.ca/Osler/index.php>) in real time, sharing a splendid collection of photographs. It will be a valuable resource for all of us who write about Sir William. Osler's relationship to James Jackson, George Minot and James Thatcher was brought out by the papers of **MARIO MOLINA** and **JOHN NOBLE**, and **CHARLES AMBROSE** familiarized us with the work of botanist Constantine Samuel Rafinesque, who influenced Charles Darwin. The latter's dilemmas were the subject of **MICHAEL MORAN'S** paper. **RICHARD KAHN** and **ALLEN WEISSE** continued their tradition of delightful iconoclasm in their papers about Kahn's Museum and the Nobel Prize. We learned much about pellagra by the papers by **CHARLES BRYAN** and **H. MIKE JONES**, and other disease-focused papers were given by **JOHN RAY** and **ROBIN ROHRER**, who spoke about Graves disease and childhood cancer, respectively. Sir William's Veterinary side was evident in **IAN CAMERON'S** → (continued on pg 4)



Oslerian Progress Notes — (*Members in the News*)

(Please send submissions to the Editor for yourself or others.) Former AOS President **Jock Murray** has received the 2009 Dr. Lawrence McHenry Award for the history of neurology from the American Academy of Neurology. This prestigious award is named after the physician who was president elect of the AOS when he died in 1985. Jock's Award Lecture at the AAN was fittingly titled "Dr. Samuel Johnson's Stroke;" Johnson was born exactly 300 years ago.

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◀ (Cleveland, continued from p. 3) paper on diseases in cattle, and in GORDON FRIERSON'S about the pork war. MICHAEL FULLER mentioned the poem "Look to this Day!" taken from the Sanskrit, that many Oslerians also cherish.

PROFESSOR PATRICK A. MCKEE, in his 2009 MCGOVERN LECTURE, wondered whether medical schools were fostering the critical judgment and curiosity so necessary for the maintenance of scholarship, and lamented the lack of hands-on exploration of the unknown by medical students, when the focus is so pointedly on passing multiple choice exams.

Finally, we all enjoyed a social hour at the Tuesday evening reception at the Dittrick Medical History Center, circulating among their interesting displays. Then Wednesday evening, JOE LELLA'S PRESIDENTIAL ADDRESS at the banquet raised the bar for future AOS presidents, with his remarkable scholarship, impeccable delivery, and level of preparation. Moreover, he looked like Sir William himself. It made for a memorable night.

— Joe VanderVeer

Committees(2009-10):

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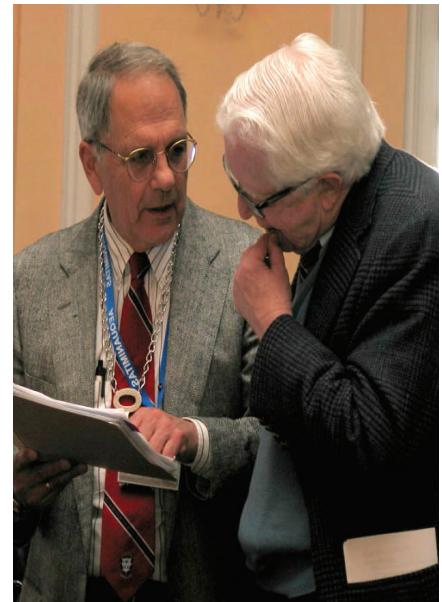
IN MEMORIAM – Arthur Gryfe, MD FRCPC

Arthur Gryfe, a member of the AOS Board of Governors, died on 23 January 2009 of cancer. He was born in Toronto in July 1935 and in infancy was found to have a patent ductus arteriosus, which was later repaired at age 19. He graduated from medical school in Toronto, became a pathologist and continued life-long as a lecturer in that discipline at his alma mater.

His medical interests were eclectic and wide-ranging: paleopathology in the Andes, poisonous mushrooms in ancient Rome, diphtheria in Ontario, medical aspects of Antarctic exploration, Canadian quarantine stations and natural history of Iceland, Kenya and Antarctica. He was a birder and accomplished nature photographer whose work appeared in four solo exhibitions and in the Grolier Society's *Nature's Children*.

Arthur joined the AOS in 1999 and gave a number of papers before the society, including one about the Toronto Medical History Club, of which he was secretary for 26 years. His last contribution was "Osler and Grace Visit Tracadie," published in the Osler Library Newsletter this past year.

He will be missed by his many AOS friends. He is survived by Doreen, his wife of over 50 years, his daughters Sharon and Carolyn, six grandchildren, his sister Rhoda and his brothers John and Cyril.



PHOTOS FROM CLEVELAND
(Clockwise from upper left corner)
 New President John Noble;
 Master of All Trades Charlie
 Bryan, who has faithfully served
 8 years; Past President Joe Lella
 (with Marvin Stone reading his
 notes); Readings Leader Francis
 Neelon; Oslerian Authors Rich
 Golden and Charles Ambrose;
 Chris Boes admires a display in
 the Dittrick Medical History
 Center; Sandra Moss and Allen
 Weisse confer at a meal.



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**Aequanimitas**

The Oslerian is published approximately four times a year by the American Osler Society, Inc., a non-profit organization. Members of the American Osler Society Society members are encouraged to send news items of interest, including their personal activities and accomplishments, accompanied by photographs or other illustrations. Your ideas for The Oslerian are of course most welcome! Direct all correspondence by e-mail to the Editor at: joebvv2@aol.com

We're on the Web!
check us out at:
www.americanosler.org

Call for Abstracts for 2010 Annual Meeting in Rochester, MN 26-29 April, 2010

Abstracts should be sent by e-mail to: timm.elizabeth@mayo.edu with a copy to mueller.pauls@mayo.edu and must be received by 15 November 2009. Abstracts submitted by e-mail will be acknowledged. The abstract should be no longer than one page. It should begin with the complete title, the names of all co-authors, and the corresponding author's mailing address, telephone number, FAX, and e-mail address. This should be followed by a two to three sentence biographical sketch indicating how the author would like to be introduced. (This will probably be your entire introduction. Don't be modest!). The text should provide sufficient information for the Program Committee to determine its merits and possible interest to the membership. The problem should be defined and the conclusions should be stated. Phrases such as "will be presented" should be avoided or kept to a minimum.

Three learning objectives should be given after the abstract. Each learning objective should begin with an active verb indicating what attendees should be able to *do* after the presentation (for example, "list," "explain," "discuss," "examine," "evaluate," "define," "contrast," or "outline"; avoid noncommittal verbs such as "know," "learn," and "appreciate"). The learning objectives are required for Continuing Medical Education credit.

A cover letter should state: Whether any of the authors have a potential conflict-of-interest such as direct financial involvement in the topic being discussed, and whether there will be any mention of off-label use of drugs or other products during the presentation.

Standard audiovisual equipment will consist of a laptop computer and LCD projector. Presenters should carefully weigh, and justify, requests for additional AV equipment since this will add substantially to the cost of the meeting.

Each presenter will have a 20-minute time slot, which will be strictly enforced. **Presenters should rehearse and time their papers to 15 minutes**, in order to permit brief discussions and to be fair to the other speakers. Our experience with this format has been overwhelmingly favorable.

Abstracts will be accepted by e-mail up until 15 November 2009. Send with objectives and cover letter to: timm.elizabeth@mayo.edu with a copy to: mueller.pauls@mayo.edu. Please make submissions in Microsoft WORD format. If you have any questions, feel free to contact us at 507-284-0155.

AOS Members — Please forward to the editor information worth sharing with one another for MEMBERS IN THE NEWS column. - JBV