Wiprud:   This is an interview with Dr. James Leake who has distinguished himself in Public Health Service. This interview was taped at the National Library of Medicine in Bethesda, Maryland on May 9, 1966. The interrogator is Theodore Wiprud, formerly Executive Director and Secretary of the Medical Society of DC, and now Special Assistant to the Executive Vice President of Medical Service of DC. From here on Dr. Wiprud will be designated as “Q”.

Q:   Now Dr. Leake, the first question I would like to ask you: What made you or prompted you to study medicine?

Leake:   I’d had it in mind before I went to college but felt that the rigors of four years of tuition and time after a college degree were too much, so I’d given it up and wanted to go on to engineering to take a shorter preparatory time. I finally decided I might as well go into medicine, which I did, entering the Harvard Medical School at the end of three years of college in 1903.

Q:   Why, there are no doctors in your family?

Leake:   None whatever.

Q:   So this was just something that you thought you’d like to do? So you entered Harvard College where you received your senior BA degree in three years?

Leake:   I entered in 1900.

Q:   Then you went to MIT? Were you there a short time?

Leake:   No, I investigated with Professor Swain who was the head of engineering at MIT. He spent quite a little time with me on account of my having paid particular attention to mathematics in college. He assured me I could get my degree as a mechanical engineer at MIT within two years and emphasized the financial rewards that such a career would give.

Q:   By the way, we didn’t mention the fact that President [Franklin Delano] Roosevelt was your classmate at Harvard.

Leake:   A classmate but not a friend. He was in a different group.

Q:   You graduated from Harvard Medical School in 1907?
Leake: Yes.

Q: Let me ask you this: How did it happen that you saw [William] Osler in person?

Leake: Oh, that was simply his Ingersoll lecture at Harvard.

Q: At Harvard?

Leake: The Ingersoll lecture, [for] a man named Ingersoll, no relation to Robert Ingersoll. Now, the lectures [are] to be given every year.

Q: Pardon me just a minute. Go ahead.

Leake: [Harvard] President [Charles William] Elliott had tried to get Dr. Welch to give such a lecture, and but finally came to Dr. Osler. Osler didn’t want to do it but Welch urged him to go ahead and do it. He gave the lecture and I heard it. Dr. Elliott wanted Osler to come to Harvard but he [Osler] accepted the Regius Professorship of Medicine at Oxford University in England very shortly after that. Even then, Elliott wanted him to come as a sort of a free lance professor at Harvard but Osler, of course, being of English blood, preferred to go to England. Elliott was not particularly pleased with Dr. Osler’s lecture, but the one thing he remembered and I remembered about it was that Osler, preparatory to his lecture, had asked the nurses at Johns Hopkins Hospital to record for him the final hours or moments of the different fatal cases, various conditions, in the hospital. They did so, and Osler retold those in his lectures summarizing that, in general, they were unconscious and had no visions of the future life so far as was ascertained by the nurses.

Q: You know, it’s a funny thing, the other evening, I opened up one of these volumes, *The Life of Sir William Osler*, by Harvey Cushing, and I turned to the pages on death. Of course, I had read that Osler had stated that most people suffered no great pain that they pass from our world into the unknown without too much difficulty.

Leake: Well, I’ll ask you one thing.

Q: Yes, you want to ask me now?

Leake: I want to ask you one thing. Whether in this recording the dictum of *nihi nisul bonum* should prevail? There is a lot of matter which you wouldn’t call dirt in the present connotation of that word, but that is perhaps a slightly unfavorable comment on the past. Do you want me to include all that?

Q: Well, absolutely, because this tape recording belongs, you know, to the National Library of Medicine and furthermore, you can put the time limit on when it can be
used. It can be made available to the people who come to the library ten years from now or twenty years from now.

Leake: Dr. Cushing tells in his book about Osler coming to Baltimore and the--as of course is true of nearly everywhere--the matter of town and gown and the practitioners there feeling that these newcomers might skim off the cream of professional practice and so forth. But in general, Dr. Osler collaborated rather well as far as we know it with the medical profession wherever he was. My father-in-law was said to have the largest general practice in Baltimore and he would call Dr. Osler in to consultation and so far as I know, thought well of him. His son, my brother-in-law, taught at Johns Hopkins Medical School and [was] very respected throughout the country and elsewhere in England, particularly as a cardiac specialist, and of course he has been in touch with Baltimore medicine for a long time. I hope I am not breaching a confidence when [I tell you that my brother-in-law] said that Osler’s reputation in Baltimore isn’t quite as high as it is generally throughout the world and his propensity for practical jokes was sometimes not always appreciated.

Q: Well…

Leake: One other thing I think I’ll speak of right off. We’ve just been talking with General Van Jones, a most eminent medical man.

Q: And you might add, a former dean of the Yale University.

Leake: Oh yes, and various other things; a very important physician and a very important influence and extremely able person. His uncle was [Surgeon] General [William C.] Gorgas of the army, and I think perhaps a great uncle was a General [Josiah] Gorgas who was chief of the Ordnance of the Confederate army. I’ve heard the present general of the U.S., Grant Jr., say that was a department that was much better attended to in the Confederate army than in the United States, the Federal army, during the Civil War. [unintelligible] Dr. [Milton J.] Rosenau’s *Preventive Medicine and Hygiene* was sort of the bible for public health people for perhaps a generation and his [unintelligible] textbook on bacteriology was the standard for quite a while. Then Dr. Ben Jones succeeded them as editor for several editions. He was a very eminent person and he has told me that Dr. Barker, who succeeded Dr. Osler in the Chair of Medicine at Johns Hopkins, was closely related to him by marriage so he knew him. Dr. Osler is a Canadian, who could be expected to favor Canadians. His first resident was from McGill but later he took several--I’ve remembered one or two of them from a friend who’s in Toronto--and Dr. Wallace Barker who, as I remember, came from that Toronto group and after graduation from Johns Hopkins went to Chicago as professor of anatomy. He was called back to succeed Dr. Osler when Dr. Osler became Regius Professor of Medicine at Oxford. There is no record that that decision on the part of the faculty of the Board of Trustees was suggested or dictated in any way by Dr. Osler, but I can’t help thinking that that might have had something to
do with it. Dr. [William S.] Thayer, who had been assistant professor and who
was brought down from Boston on account of Dr. Osler meeting Dr. Finney, who
was Dr. Halsted’s assistant, in surgery in the corridor of Johns Hopkins and
asking if there was some Harvard graduate that he could suggest to come down to
work with Dr. Osler. He suggested the name of his friend Dr. Thayer. Certainly
in England people generally looked on Dr. Thayer as intellectually, and in every
way, the real successor of Dr. Osler. My brother-in-law associated with Dr.
Thayer in the practice of medicine and also with Dr. Thayer’s assistants. My
sister-in-law was Dr. Thayer’s secretary.

Q:    What is your brother-in-law’s name?
Leake:   Dr. John T. King, Jr.

Q:   Well, let me ask you when was it that Osler lectured at Harvard and you saw him
personally?
Leake:   1905, as I remember.

Q:    Do you have any firm impression of his appearance?
Leake:   Oh no, no more than photographs would give.

Q:    And you remember that?
Leake:   And photographs and Sargent’s picture hanging in the Wallace Library in
Baltimore.

Q:    You remember his soup strainer, don’t you?
Leake:   I beg your pardon.

Q:   He wore what we call a soup strainer, a [moustache].
Leake:   Well, that wasn’t prominent. I don’t remember much about his appearance.

Q:    Well now, Cushing also had a biography written, by John Fulton, and in that
biography is stated that he came under the influence of [William S.] Halsted,
Osler and [William] Welch, which resulted [in making] “himself eminent as a
surgeon and leader in the reform of medical education.” What do they mean by
“the reform of medical education”?

Leake: Well, I don’t know about that. I’m going to speak very frankly.

Q:   Yes, go ahead.
Leake: It is customary to speak of the reform of medical education as stemming from Abraham Flexner.

Q: I think that is incorrect.

Leake: Medical education of course has been various in quality and method for a long time. Medical schools in the United States have been proprietary and of very questionable efficiency and it is surprising how many really good men have come from what we would call very inferior schools. The real start of reform in medical education can be envisioned partly in some of Oliver Wendell Holmes writings when President Elliott, a young professor of chemistry at Massachusetts Institute of Technology, was chosen to be president of Harvard and I suppose occupied that position longer than anyone else. He unquestionably was the head of the professional education in the United States generally looked to. The Harvard Medical School was in Boston. Practitioners were professors and they pretty much ran the school and the university.

When Elliott was elected president, he came to the first meeting of the faculty and they asked him why he was there and he said because he was the president of Harvard. And he proceeded to change the whole thing. Examinations were conducted in the way which university examinations were ordinarily conducted. the whole system of education was put on a university basis instead of this proprietary medical school basis, which had prevailed throughout the United States.

That was really the start and then perhaps the next…. Incidentally that’s very interesting that Dr. Osler enjoyed his Easter vacations at McGill when he was a young professor there, would spend them coming down to Harvard, and he felt that was the to some extent for him the fount of medical education for him to aim at. It was not by any means perfect, but he looked up to the work that was done there and got the Harvard Medical School to advertise in the Montreal Medical Journal and described incidentally an unsigned editorial as his.

Q: What do you mean advertised?

Leake: Do you want me to show it to you. I can …

Q: No, what I mean …

Leake: There are advertisements of that and I think of the hospital medical school and some others. He described particularly his visits there and how inspiring it was in his unsigned editorial in this journal.

Q: Was Harvard Medical School the ranking medical school in the country at that time?

Leake: Well, it would be at Elliott’s time, yes. Of course the country was not as well integrated. Things were more sectional. For quite awhile Michigan, Ann Arbor, ranked real high.

5
Q: I take it that it had a very superior faculty. You mentioned one man, Dr. Reginald Phipps, was the first man to diagnose or recognize appendicitis.

Leake: Well, more than that it is very interesting. When Dr. Osler was there [Harvard] in the [1870's, in this advertisement I think there were seven on the faculty. Remember that this was about 1874 or so, 75.

Q: But you weren’t there.

Leake: But seven of the men on the faculty were my teachers.

Q: Is that so?

Leake: In this advertisement. Hermann Hagedorn has written a very good life of General [Leonard] Wood [That Human Being, Leonard Wood]. That’s not quite comparable to Harvey Cushing’s of Sir William Osler but a very, very good two-volume biography. He lists the teachers of Leonard Wood at the Harvard Medical School and as I remember, all but one of them were my teachers also. (chuckling) It was a little bit static as far as…The turnover in the faculty was a concern.

Q: What about Richard Cabot, was he one of the faculty?

Leake: Oh yes, he was, I think, an assistant professor of medicine but an outstanding man. I said I’d be very frank. The University of Pennsylvania was of course the first medical school in the United States of America and the Pennsylvania Hospital was the oldest hospital. As Longfellow describes this in Evangeline, first he found her [unintelligible] water. And in that way, of course, for a long time Philadelphia was a larger city than New York, and the Declaration of Independence and the Constitution of the United States were both established in Philadelphia. So Philadelphia could have been well [unintelligible]. There was a tendency toward nepotism in that institution—and that is something that of course could be a disadvantage [at Harvard] and also a disadvantage to the Johns Hopkins Medical School in Baltimore. They felt their own graduates were a little bit better than anyone else in such institutions. Incidentally, that is very interesting because when Dr. [unintelligible]—at the University of Pennsylvania, I forget there were two chairs of medicine there also as well as at Harvard. One was senior and was an endowed chair and the other was simply professor of medicine. I forget who it was, perhaps [Alfred] Stille. I don’t remember who retired or died.

Q: What’s the name?

Leake: I can’t remember. I can take a very broad guess and probably incorrect and say “S t i l l e“ [spelled out], acute accent. And Dr. [William] Pepper, of the old Philadelphia families (most of them were), was appointed to this endowed chair which left the chair of medicine, which Pepper had occupied, vacant. And the trustees, perhaps after vote by the faculty, were about to appoint one of the regular family men who had come up through the university faculty to that vacant chair. There was a group of younger men in Philadelphia who acted [chuckle] as editors for a medical journal. I forget the name of it, whether it was the Medical Recorder or what, and
they felt that Philadelphia needed a stimulus, new blood. Cushing doesn’t describe that but as I figure it a great proportion of them were not University of Pennsylvania men but Jefferson Medical College, which in my day was the largest medical school in the country. Dr. [William] Holt was the professor of pediatrics there and it was customarily viewed as a place for training real practitioners of medicine.

These men were very congenial and convivial. They’d have meetings of a not-too-formal editorial board and so forth, and they’d talked it over and (I forget the names) they felt that the University of Pennsylvania should do something else. They’d known most of the published things and they’d known and seen his works and I think even then he was a corresponding contributor to this little Philadelphia journal that I was speaking about, so they knew of him in that way. One of them was young Dr. Dross. Dr. Samuel Dross the elder was a very eminent professor and I think both he and the son were on the faculty of Jefferson Medical College. One of the men was not a senior member but an important member of the faculty of the University of Pennsylvania Medical School. They prevailed on him to go to the faculty and urge that they don’t just take any [potting pike] incumbent to fill this vacant chair, but that they go farther afield and get someone such as Dr. Osler, young Dr. Osler up there in Montreal. Well, finally old Whitridge Williams and S. Ware Mitchell figured in it and they went up to see him [Osler]. I think someone, whether it was Ware Mitchell or not, in going to Montreal, perhaps didn’t contact Osler at all but just asked people that were his possible rivals and so forth and came to a very good opinion of him. And as a result, Osler was appointed professor of medicine to the University of Pennsylvania in 1885, from which place he came to Johns Hopkins when that was started. More or less after the plan of John Charles Billings who was the librarian in this library in 1889.

Q: Was that the zenith of his career, Osler’s career at Johns Hopkins?

Leake: I think one would say so, as far as medicine is concerned because the clinical facilities at Oxford were nothing compared to what they were at the Johns Hopkins Hospital.

Q: What about that painting you see of Blockley?

Leake: Blockley?

Q: Wasn’t that, am I confused in that?

Leake: I think perhaps there is a painting in at the University of Pennsylvania.

Q: In the RC building?

Leake: I don’t remember Dr. Osler being in that picture at all. But [John Singer] Sargent painted a very famous painting of the three professors that is hanging in the Welch Library but that story is away from scientific medicine.

Q: Well, let’s get back to your career. Now when you graduated from Harvard, did you intern?
Leake: At the Boston City Hospital.

Q: At the Boston City Hospital?

Leake: Under George C. Sears.

Q: And when did you become ill?

Leake: Well, I entered the hospital as intern in the early summer of 1907. The internship was for two years—a varied internship ending up as house physician in the first medical service. But on account of circumstances, men falling out ahead of me, I was promoted more rapidly. Within a year or less, yes less than a year, I did have this back trouble which was diagnosed finally by Dr. Bradford as tuberculosis of the spine.

Q: How long were you ill, doctor?

Leake: (Silence)

Q: You went to South Carolina [unintelligible]?

Leake: I would say, I would say that the whole thing occupied more, about a year probably, about a year.

Q: After that you came to Washington. Did that …

Leake: I came to Washington to attend the meeting. I was interested in tuberculosis of course.

Q: When did you join the Hygienic Laboratory?

Leake: Well, I don’t join the Hygienic Laboratory.

Q: Well…

Leake: I’m ordered to the Hygienic Laboratory.

Q: I’m sorry, you were ordered to the Hygienic Laboratory.

Leake: And I never asked for an assignment in the Service except once.

Q: You were sought instead?

Leake: Well, I was told.

Q: You were told? You were told what to do? Yes, go ahead.

Leake: There were three classes of orders, proceed to so and so and report to the commanding
officer. Proceed without delay…

Q: Well, so you were then…

Leake: … to so and so and report to the commanding officer. Proceed immediately to so and so and report to the commanding officer.

Q: You really had your orders then.

Leake: And one was, of course, then within 48 hours, one was within 24 hours and one was within 12 hours.

Q: What service were you in at that time?

Leake: It was called the Public Health and Marine Hospital Service. It had been for many years the Marine Hospital Service. In 1902, the same year in which the Hygienic Laboratory building was established in the Act which formed so large a part of my life, the Act to control the manufacture and then the safe commerce in toxins, interstate serums, anti-toxins and analogous products was passed. And in 1902, the name of the service was changed from the Marine Hospital Service to the Public Health and Marine Hospital Service over the objections of some of the older officers who felt that the Marine Hospitals were the main part of the service.

Q: When did you become the Public Health Service?

Leake: In 1912, just ten years after the name the Marine Hospital was dropped and that also raised quite a few objections of the older men.

Q: Do you remember the major disaster of 1912?

Leake: In 1912? Well…

Q: It had nothing to do with medicine, so …

Leake: That was the year when I started work on poliomyelitis.

Q: No, that wasn’t it. It was the sinking of the Titanic. Well any rate that had nothing to do with medicine.

Leake: Well the Johnstown flood [unintelligible]. That was when Victor Heiser lost his parents’ Desoto [Transcriber: a Desoto was an automobile].

Q: When did you make the acquaintance of George M. Colbert [?] and Dr. McCabe?

Leake: Oh, I wasn’t, I wasn’t very close with Dr. Colbert.
Q: What about D. C. McCabe?

Leake: Not very. That was in 1909 when I came up to attend those two meetings. The Association of American Physicians was Dr. Osler’s society that he was very much interested in and [had] at that time a very select membership. It occupied a premiership among the medical societies which I suppose is hardly occupied now. It met in Washington yearly, when Dr. Colbert being …he was a bachelor and quite a man. I guess you know about it.

Q: Yeah, what about Dr. Herbstis [?]

Leake: Dr. Herbstis and Dr. Carl Haber [?] are both grand-nephews.

Q: Nephews?

Leake: Grand-nephews.

Q: Dr. McAphee [?], by the way, you may be interested, is still alive.

Leake: Well, I’ve seen him in the Marcel Nursing Home. The nurses tell me he is very gentle and kind as always. [They] find him and walk down with him and they tell me that he has a habit after washing, he’ll try to slip out of the nursing home and get away but he [unintelligible].

Q: There was a little something funny about a magazine. I traveled with him as delegate to the MA [Medical Association] and I always cottoned to him, and not so long ago I told him he was the best parliamentarian I ever saw, or heard. And it used to be a game in the district medical society, you know, to try to foul up the chairman.

Leake: Did you all keep a copy of Robert’s rules of order in your [unintelligible]?

Q: Oh yes, you had to.

Leake: Good.

Q: Well, and McAphee said to me, “Oh, I don’t know that I was the best parliamentarian, but I knew where the rabbits were.” [Chuckles] Well, so much for that. We come then to your connection with the Hygienic Laboratory and that connection that you mentioned to Dr. Rosenau. I would like to climax this recording with what you consider your most important accomplishments in your life.

Leake: [unintelligible--Dr. Leake started to say something but Dr. Wiprud talked over him. This happened several times throughout the interview when Dr. Wiprud was trying to control the direction of the answers.]

Q: Tell us about the Hygienic Laboratory first.

Leake: I just don’t know. We were a small group then and for quite awhile. When you consider
the thousands that are over here in the next reservation….We were a group which had lunch around two ordinary medium length oak tables, were L-shaped. And Leonard Wilder, an Englishman, the artist for the laboratory, drew the pictures for our bulletins and so forth in styles and zoology things and so on, he would brew the tea for us. Dr. Rosenau was never head of the laboratory when I was there. He had left before I went and Dr. [John F.] Anderson, his assistant director, had become director. Incidentally, he was only a two-striper, that is a past assistant surgeon, the same rank as a captain in the army or a lieutenant in the navy. That was the head of the Hygienic Laboratory. Dr. [Joseph] Schereschewsky, Dr. Blumberger [?], Dr. Styles [?], Dr. Reed Hunt, Dr. Franklin [?], and Earl Phelps and many others, of course, in and out, were around the table and it was a very congenial atmosphere. Frost and Stimpson were two very, very able men.

Q: What were you talking about?

Leake: About Frost and Stimpson?

Q: No, what was the discussion at these things?

Leake: Oh well, various things. One thing happened before my time…but we know a good deal about Joseph Goldberger. We don’t hear so much about Schereschewsky, but he was a very able man. His father had been bishop in China and there’s an exhibit at the Washington Cathedral now which to some extent emphasizes his importance. He was the first man to translate the Bible into, Bishop Schereschewsky, into Chinese. He kept three amenuenses busy 24 hours around the clock and he worked tremendously. He had been a rabbi in Lithuania, came to Germany in the pogroms, and got hold of a copy of the New Testament translated into German with Hebrew characters, and became a Baptist. Then he emigrated to America and became a Presbyterian. And then the Emmanuel Movement started in Boston, a reversion from Unitarianism to the Protestant Episcopal Church and he became an Episcopalian, and was ordained a bishop by Mr. [W. R.] Huntington, who was the originator of that movement. He was Dr. Schereschewsky’s father. Dr. Schereschewsky was, as I say, a very able man and people relied on him for information and so forth. Dr. Rosenau came into this little lunchroom and said, “Sherry”--we always called him Sherry—“Sherry, what is the acid in pumpkins?” Sherry [would] answer, “Pumkinic acid.” [chuckle from Dr. Wiprud]. When Dr. Sherry was examined down at the board for entrance [to the Public Health Service] at the Butler Building, the candidates were called in for the board for questioning and so forth from time to time. This chap, the sanitor, this old fellow who was, as I say, was a Baptist minister, came in and he announced, “The Board would like to see Dr. Sherry Whisky.” So that was his name from then on.

Q: How do you spell that?

Leake: S c h e r e s c h e w s k y .

Q: I don’t know how they could get to him. I’d call him Sherry too!

Leake: [Laughter.] And they left that exhibit at the Washington Cathedral.
Q: Back to the Hygienic Laboratory. What did it become eventually?

Leake: Well, it became the National Institute of Health. Well, Senator [Joseph E.] Ransdell wanted to leave his name to posterity and so he introduced a bill establishing a new thing, the National Institute of Health. In those days to comply with Senator Ransdell’s ideas, we weren’t supposed to say that the name of the Hygienic Laboratory was changed to the National Institutes of Health, but that is what happened. It was added to, however—a Statistical Division and a Division of Industrial Hygiene that I had charge of before it was combined with the National Institute of Health, forming part of the Surgeon General’s Office.

Q: Well, now you mentioned two men that you must have known, Walter Reed and Dr. [Leonard] Wood.

Leake: No, I never knew of course Walter Reed, and I never knew Leonard Wood, and I never knew, of course, Billings. But they were very influential men, all three.

Q: Did you know Dr. Charles Sanity White [?] of Washington?

Leake: Oh yes.

Q: And he gave the anesthetic when Walter Reed was operated on.

Leake: By Dr. Gordon Slaughter.

Q: And he didn’t survive that, but….

Leake: No, and I think you remember I mentioned a very good friend called Major Nichols who sat on the lid, scientifically, for the Army. The way Colonel Russell—General Russell—did while he was in Washington. I think you remember Nichols was a very able man, and he also died of appendicitis when he was stationed in Panama. It was diagnosed too late.

Q: You were lucky, weren’t you, when you had an operation?

Leake: (Silence)

Q: In looking back, who do you consider the outstanding medical man that you have known in all your experience?

Leake: Of course, it is so in these days more than the profession; it is a little bit like saying of all the professional men, say the theologians, legal profession, and medical profession, which in all of these professions was a league of men because medicine is not just the practice of medicine these days. Most of the men that you could think of that I would mention as leading men that I really knew, oh, comparatively few of them became practitioners, because they went into, I mean in a general sense, they went into specialties of various sorts and so it would be very hard to …
Q: How hard, doctor? There were fewer of them and specialism was in its infancy.

Leake: Well, to comply as well as I can with that… I never knew Dr. Osler, though as I say, I saw him once. But, I think generally when he was here in America during his tenure, the last part of his tenure at any rate, at the Johns Hopkins University, he would be the leader of the American medical profession in America. His textbook, as I say, was the bible for a medical man. This was not surgery or any of the other specialties. I would think that Dr. Welch would have been looked on afterwards as the leader.

Q: Welch of John Hopkins?

Leake: Welch of John Hopkins, yes, and I felt for my part, that after Dr. Welch’s death after his retirement, that Dr. Ludwig Hoektoen of Chicago would have been looked on generally as a leader. No, of course, neither Welch nor Hoektoen had anything to do with medicine. Dr. Hoektoen was a patient of mine. But I mean, they didn’t practice medicine, neither Welch nor Hoektoen.

Q: You’re a research man and I think Hoektoen was.

Leake: Well, so was Welch, and both of them were educators also and people referred to them. Of course, the one thing about Dr. Hoektoen…Chicago was the headquarters of the American Medical Association, which I think in those days was looked up to more than it has been recently. Dr. Hoektoen was, you might say, the ultimate authority for the AMA group on any question that came up.

Q: Why, let’s come back to the one question I asked you which you haven’t answered yet, and that is: You’ve lived a long life, what accomplishments do you take the greatest satisfaction out of? You must have some, and what do you think about the future of medicine?

Leake: Ah, I don’t know about my...

Q: Well now you must have…

Leake: …what I have done or would last or have a lasting influence, which as I suppose is the important criterion.

Q: I wouldn’t say that question had any criterion at all. The one that gave you the greatest satisfaction. After all, all of us contributed a little. Some of us contributed more than others. In fact, there must be some.

Leake: Well, perhaps as I look back on it, because it has an influence you see, for example, most of the research work. I think some of the most important research work that has been done in America was at the Hygienic Laboratories spanning from that [1902] Act to control the manufacture and interstate commerce in viruses, toxins, serums, antitoxins and analogous products. And I would say, very possibly my connection with that and laying down procedures and so forth, which in general are followed now, but cannot be
followed in detail because my action in that was somewhat personal. I knew and would spend a week or two at each place going over in detail all of their procedures and personnel and so forth. And they, in general, were very co-operative and respected my criticisms and would comply. And the matter of licensing new establishments, some of the more important ones that are now in existence. Ah, the good ones were very, very, very co-operative and they tried to play fair and not let any competitor know what we had found, or what I had found, because it was a very personal thing. I did the whole thing, I did most of the testing myself. I had assistants later but…the procedure is very different now. The whole plan of the thing perhaps offhand, I’ve never thought of it before, but perhaps that’s the most satisfactory thing I’ve done.

Q: Is this the subject of the book you’re writing?

Leake: I’m not writing any book!

Q: Oh, I thought you were writing a book. Everybody else is.

Leake: I know they are. But I never intend to write my reminiscences. I think…

Q: I don’t mean reminiscences.

Leake: I don’t mean anything of that sort. I ought, when I get through with some of these things, I ought to revise a little brochure that went through I don’t know how many editions and revisions, and was one of the most used and popular things in the Public Health Service, which of course is not so useful now: Questions and Answers on the Smallpox and Vaccination. I ought to revise that but I haven’t any plans to just at present because these other plans are too pressing.

Q: I want to ask you a final question. What do you think about the future of medicine? I’m not speaking now of economics, I mean scientifically?

Leake: [Silence/Pause]. Well, I can’t help thinking scientifically, of course, [unintelligible] of knowledge. Knowledge is not just the same thing as wisdom, but it implies a good deal and I think in that in the broad scope of science the most important thing is still what Dick Cabot’s and my most admired preceptors instilled in me: the care of the patient.

Q: Well.

Leake: Scientifically, scientifically the care of the patient, and the patient as a whole - his past, his desires, his comfort, everything.

Q: And you think we’re falling short in that?

Leake: I think we’re falling short.

Q: What do you think about the ravages of cancer and heart disease? Do you think we are going to do much about that?
Leake: Everyone has to die. I expect to before long. I hope it will be fairly quick but I hope I’ll get some things straightened out before I die which I haven’t. And we used to call pneumonia the old man’s friend because it carried him off more or less painlessly, sometimes without even a temperature. And, of course, cancer is sometimes a very distressing thing, sometimes even heart disease. I don’t know that you probably knew Louis Green. John Minor was his physician. He’s told me about Louis, a very warm friend.

Q: Well, he was the ophthalmologist, wasn’t he?

Leake: Yes, that’s right. He was the first pupil of Dr. Wilmer who said, “Washington has not been outstanding as a medical center.” But that one subject, Washington, has been pretty much to the forefront [unintelligible] and it’s been on account of Dr. Wilmer. Louis Green was his first pupil and Louis Green’s brother-in-law Jack Birch was a [unintelligible].

Q: I know both the doctors.

Leake: Of course, outside the Mayo Clinic, I suppose in some ways the Lahey Clinic has been the most outstanding clinic in the United States. And Frank Lahey was, well, he was a sort of a resident when I was an intern at Boston City Hospital. And Boston has been outstanding in ophthalmology but Frank Lahey came down to Jack Kirk [?] to have his eyes tested.

Q: I meant the last question to be the last question, but I can’t help but say a word about Frank Lahey. Dr. Frank Lahey of Boston, whom I knew as one of the greatest speakers among the medical profession. He was a funny looking little man. He always wore a big hat that came down to his eyes, you know.

Leake: Not in my day, he was just a youngster.

Q: Yes, he was a youngster in your day, but I knew him as a mature man and much sought after. Wow, Dr. Leake, this has been a wonderful hour and I hope the recording is as good as we hoped it would be.

NOTE: 1. Dr. Leake was 85 years old when this tape was made in 1966.
2. Where the transcriber could not distinguish words there may be a word with a question mark.

Transcribed by Ms. Sharon C. Mathis, volunteer at the NIH Stetten Museum, August 2007.