1930s

The 1930s was a period of relative stability within the department as the medical center and school solidified their positions within the community and the region. There were no dramatic changes in size, structure, or function within the department.

Cost of a loaf of bread: $0.05
President of the USA: Herbert Hoover
World series winner: St. Louis Cardinals
Cost of a gallon of gas: $0.17
1935: Yellow fever vaccine
1937: First blood bank (Fantus, Chicago)

Chair

The 1930s saw the continuation of Dr. Whipple’s leadership of the department. There were no significant changes in the organizational structure, nor in the overall size or scope of the department during this period. The small department was easily overseen by a single leader, with no formal administrative structure.

Faculty

The total number of faculty members never exceed four during this decade, though the numbers of associates and trainees continued to increase, as did the number of medical students (see figure 9). Drs. Whipple and Hawkins (see figure 10) continued as faculty members within the department, and Dr. Wright was added to the team. Dr. Walter S. Thomas appears
Figure 9. Pathology faculty (1939)

Figure 10. William B. Hawkins, one of the department’s first faculty members who remained on faculty until 1971
on the roster as a part-time member of the faculty, as does Dr. Istvan Gaspar. In 1931, Dr. Floyd S. Daft left his position at Yale and became an instructor with expertise in experimental pathology and biochemistry. His mentor, Dr. Cecil Drinker from the Harvard School of Public Health, opined that there were half a dozen very fine medical schools around the country (second, of course, to Harvard) and they included the newly built University of Rochester, convincing him to move here. He remained on the faculty in both pathology and biochemistry until 1937, at which point he moved to the National Institutes of Health (NIH), where he ultimately served as the director of the National Institute of Arthritis and Metabolic Diseases until his retirement in 1962. In 1932, Ralph Knutti joined the team as a junior member of the faculty following training at Vanderbilt University and the Rockefeller Institute for Medical Research. Of note, when Dr. Knutti came to Rochester, it was in the midst of the Great Depression and he revealed that his salary was $2,000 per year to serve as an instructor. He also received free room, board, and laundry services in the staff house adjacent to the medical center, wherein house staff and unmarried members of the faculty could live. In 1935, when he was promoted to assistant professor, he did not receive any increase in his $2,000 per year salary. (Dr. Hawkins, who was an associate professor, received a salary of $3,600 per year in 1939). Faculty members continued to concentrate on research endeavors, teaching medical students, and the performance of autopsies.

Space

The department remained stable in terms of its occupancy space within the medical center during this decade.

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1 From Meckler et al., *Oral Histories*, interview with Dr. Wyndham D. Miles, historian at the NIH, 1964.
Clinical

Autopsies continued to be the major clinical focus of departmental faculty. The autopsy rate remained at about 70 percent of all inpatient deaths and numbered around 700 per year. Responsibilities for surgical pathology continued to reside primarily within the Departments of Surgery and Obstetrics and Gynecology, with diagnoses only reviewed and confirmed by the members of the pathology faculty. The few rudimentary clinical laboratories that existed were under the purview of the Department of Medicine. Dr. Knutti served as the director of laboratories at both the Genesee and Park Avenue Hospitals during his time in the department. It is unclear as to exactly what his clinical responsibilities were in these hospitals during this period.

Research

Research remained the major focus of the department during this decade. Areas of concentration continued along the same lines as during the previous decade, revolving primarily around Dr. Whipple’s main interest in anemia. Other areas of research within the department included amino acid and body protein metabolism, shock, the renal thresholds for proteins, the development of experimental ascites, and work with radioisotopes. During this period and extending into the 1950s, all residents were required to take a full year out from their clinical training to develop a research program. Pathology was still considered to be one of the “basic science” departments within the school and not a clinical department.

Education

Medical student education was another major function of the department during this decade. As the medical school curriculum became more formalized and the school continued
to expand and developed a substantial reputation for excellence, the department faculty played a central role in the second-year education of these students. The course description changed little during this decade, greatly resembling that from the prior decade. Similarly, the hours of availability of faculty members for the students remained essentially unchanged. One notable medical student at URMC during this time was Dr. Lauren Ackerman. After graduating from the medical school in Rochester, he went to Boston to complete training in internal medicine before returning to spend a year with Dr. Whipple in pathology. Thereafter, he moved to Missouri and eventually became one of the major forces of the century in surgical pathology, serving as the director of surgical pathology at Washington University in St. Louis. (His textbook entitled *Ackerman’s Surgical Pathology* served as the gold standard in the field for several generations of pathologists). Another amongst the trainees during this period was Dr. Charles Yuile, who would soon be recruited back from Montreal to join the faculty.

While not formally listed anywhere as residents, Drs. Ackerman and Yuile spent additional time in the department studying pathology under the great master, Dr. Whipple, after their medical school graduation. Presumably, these positions were analogous to our current residency or fellowship positions. Throughout the 1930s, from one to three people were listed as assistants or instructors and several others as volunteer assistants within the department. It is likely that these titles were given to trainees.

The American Board of Pathology was formed in 1936. The first board examination was given in 1936, and prior to 1938 “anyone with special qualifications could be certified without an examination at the Board discretion” (minutes of the American Board of Pathology). The cost for taking the board examination was thirty-five dollars and also covered two reexaminations (if needed). Residency training in pathology now came under the jurisdiction and regulation of the Advisory Board of Medical Specialists. It is unclear what type of “residency” training was in place during this decade,
as training requirements were determined by individual hospitals. Certainly, trainees who had completed medical school were present within the department and served as apprentice-like trainees under the tutelage of the small faculty. The scope of training does not appear to have been regulated or standardized at this point. Requirements for board certification after 1938 included a period of study of not less than four calendar years (including an internship), graduate training for one year in various phases of clinical pathology, and two years of anatomic pathology. An additional year of pathology clinical practice was required before sitting for the board examination.

One of Dr. Whipple’s major contributions to the educational mission was the development of the year-out fellowship for medical students, similar to the one he demanded of departmental residents. These year-out fellowships enabled medical students to take a year away from their formal, structured four-year curriculum for in-depth study within any medical school department. A great number of them chose to do this year in the Department of Pathology. Dr. Whipple’s view of pathology was that of a basic science discipline, in which pathologists functioned as medical scientists with research and teaching as their foremost responsibilities.

New Developments/Achievements

In 1937, and largely due to Dr. Whipple’s groundbreaking research in anemia and his receiving the Nobel Prize in 1934, the Council on Medical Education and Hospitals of the American Medical Association ranked the department in the upper 10 percent of pathology departments within the country. Given the relative age of the department, a mere ten to fifteen years of age, this was truly a remarkable achievement.