

The Bookshelf

And the Pursuit of Healthcare: Considering Challenges with Dr. Eugene Stead

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READERS WHOSE EXPOSURE to this Journal extends back ten years or more will be familiar with Eugene Anson Stead, Jr., who was its editor from 1983 to 1992. Many other North Carolina healthcare professionals know him from his tenure as the Professor of Medicine at Duke University from 1947 to 1967. Indeed, it is not difficult to argue, as Robert Bloomfield does in his book, that it was Stead's arrival in Durham that ignited Duke's rocket-like rise to the top echelon of American medical centers. My own exposure to Dr. Stead began 40 years ago, on a warm June morning in 1962, when I entered Duke Hospital for the first time to begin an internship in Stead's department; it has continued since in both formal and informal ways. Thus I write this review from a position of knowledge about and bias in favor of Dr. Stead.

Dr. Bloomfield tells us little about himself or why he wrote this book. As a result, the reader is plunged headlong into a series of anecdotal recollections, which the author has gleaned from interviews with Stead and a number of his colleagues (Willis Hurst, Henry McIntosh, Arthur Finn). The problem is a lack of temporal coherence. The author moves forward and backward in time, to the discomfiture of the reader. Of course, Stead's multifaceted life and his broad range of medical interests make discursiveness an easy path, but I think that the constant backing and filling makes the book problematical for anyone not already familiar to some degree with Stead's career and *modus operandi*.

Without question Bloomfield has set himself a noble task. Eugene Stead was one of the most remarkable medical personalities of the mid-20th century. I, like countless others, say without hesitation that Stead was absolutely one of a kind. I have said on more than one occasion that he was the last "Professor of Medicine" in America. Not in title, of course—we have a vast multitude of title-holders—but Professor in actuality. There were other Professors before him:

William Osler, Henry Christian, Robert Loeb, William Bean, Soma Weiss, James Means, but none after. Not too long ago, students and house officers came to an institution because they wanted to "work with" the Professor, an individual whose presence and shadow fell across every aspect of the institution. Eugene Stead was one of these, and that certainly is the reason why a constant stream of very able doctors made their way to Emory when Stead, at age 33, was appointed Chair of Medicine, and why even more made their way to Duke when he later went there. These student doctors were willing to live, as I did, in Duke Hospital five nights out of seven (at \$25 dollars a month) in order to work with Eugene Stead. There was a great deal to be learned from life in that mentoring environment, and it is a shame that it has passed—but passed it has. Nowadays, no one knows the name of a single professor of medicine except their own, temporary boss (try this out if you doubt me); no student ever thinks of devoting a year or two or three to work in the department of an individual professor. Students choose their residency locations because they offer nice climates or much reduced work schedules or boast a track record of getting house officers into coveted specialty training programs. Most of these students visualize their years of residency as a purgatorial rite to be endured so that they can move on to a "real" career. There is real loss here, and no one seems to think it can be regained. Maybe it can't (more's the pity), but I don't see anyone reflecting on what has changed in American medicine and why. Unfortunately, Dr. Bloomfield doesn't either, and that, I think, is a lost opportunity for this book.

The book has a number of minor infelicities. The punctuation is unusual, with commas following the British convention (placed outside quotation marks). Page structure is haphazard, so section titles are sometimes isolated at the bottom of a page rather than at the top of the subsequent page with the appropriate text. There are some misspellings or misquotations ("deaner" for diener; "advise" for advice; "Leslie Holleman" for Holman; "Ramano" for Romano; "magic word" for master word), but these do not represent major shortcomings. Overall, Dr. Brookfield is to be congratulated for at least setting out on the journey. Stead is a man worth contemplating.

—Francis A. Neelon, MD