



# Henry Morgenthau Fox



Henry Fox was fortunate to be born in a great historic period. He was old enough, at ten, to have witnessed the start of the First World War, when his grandfather, Henry Morgenthau, was ambassador to Turkey. And he was just the right age to live through the halcyon years of psychoanalysis after the Second World War, when he was a leader in psychosomatic research and general hospital psychiatry. He was lucky enough to retire in 1972, as government support for research began to ebb, and he died in 1987, in time to be spared the ignominious decline in the teaching of dynamic psychiatry and the long-term medical psychotherapy he had worked so hard to establish at the Peter Bent Brigham Hospital.

Born in 1907, Fox's family belonged to the German-Jewish elite of New York City. His father, Mortimer Fox, was a successful architect, banker and painter, and his mother, Helen Morgenthau, was a woman of strong will and many intellectual interests, who published widely on horticulture and landscape gardening. Fox attended Choate Academy and graduated in 1928 from Harvard College, where he studied philosophy and the psychology of William James. He chose Johns Hopkins as his medical school, because of his interest in psychiatry and especially in the work of Adolf Meyer. As chief of psychiatry at Phipps Clinic, Meyer was a founding member of the American Psychoanalytic Association in 1911. By the 1920s, however, Meyer had lost his enthusiasm for Freudian theory and created his own theoretical system called "psychobiology." Fox was drawn to Meyer's system, which was based on a broad study of the patient's life history but encumbered by a complex and forbidding terminology. As chief resident at Phipps, Fox attempted to validate Meyerian theory, but he gradually became interested in the more dynamic theories of psychoanalysis, despite Meyer's attempts to dissuade him.

When the Second World War began, Fox joined the Hopkins unit and served in Australia and the

Philippines, becoming chief of psychiatry at the 118th General Hospital. In treating the unexpected numbers of psychiatric casualties, Fox soon rediscovered his interest in psychoanalysis, an enthusiasm he shared with other young physicians and visiting consultants who were eminent analysts. Freud's pre-analytic methods of "catharsis" were applied to acute combat-neuroses with great success, using intravenous barbiturates instead of hypnosis to recall traumatic experiences.

Returning to civilian life, Fox, like many other young veterans, began to seek psychoanalytic training. At this fortunate moment he was invited, by his old Hopkins friend Dr. George W. Thorn, to establish a new psychiatric unit at the Peter Bent Brigham Hospital (PBBH) in Boston. Fox also began his training analysis at the Boston Psychoanalytic Institute with Dr. John Murray, whom he had known as an Airforce consultant in the Pacific. This was also a time when analytic fees were \$10 an hour, paid for by the G.I. Bill. The year was 1946, when there was no psychiatry at the PBBH, except for the memory of the brilliant young John Romano, who ran a oneman psychiatry service in 1939-40, and Dr. Donald MacPherson who used medical ward-rounds to teach medical students psychiatry in 1920. In 1935 Professor Stanley Cobb at the Massachusetts General Hospital (MGH) had created the first psychiatry department in a general hospital, supported by a Rockefeller grant, and he had welcomed the successive European refugee analysts, beginning with Erik Erikson and Felix Deutsch.

As similar consultation-liaison units were established in other teaching hospitals, Fox began with two young psychiatrists, Dr. Marjorie Hayes and Dr. Jack Kneipp, an experienced psychiatric social worker, Miss Ethel Walsh, and an exceptional secretary, Miss Mary O'Connor, whose patience, tact and prodigious memory became legendary. The next two psychiatrists, Sanford Gifford and Samuel Bojar, occupied offices on the medical wards E and F Main, to promote contact with house-officers, and they attended Dr. Thorn's morning-report. Edmund Kudarauskas and Nicholas Rizzo followed, to be joined by others, very few of whom left the unit until many years later. Each seemed to find his own area of interest, Bojar in teaching the hospital staff and directing a clinical clerkship for 3rd year medical students. He also taught a twosemester course for Divinity School students and supervised their clinical work at the Brigham. Dr. Benjamin Murawski came in 1954, our first full-time clinical psychologist, and Dr. Arthur Valenstein shortly after, as a senior psychoanalytic consultant for research.

A core group of 6-8 long-term members of the unit met every Wednesday at noon, in Fox's office on A-ground, to discuss consultations on medical and surgical wards, the teaching of medical students and house-staff, and the ongoing research-project of that period. In his teaching and consultation-services, Fox emphasized close relationships with the hospital staff, and an abiding interest in the "normal personality." He saw the average general hospital patient as a healthy person, coping with the "normal" stresses of illness, hospitalization, diagnostic procedures and treatment. In observing these patients, psychoanalysis proved to be both a method of understanding normal behavior as well as treating neurotic symptoms.

One of Fox's first innovations was to abolish formal psychiatric diagnoses, in contrast to past and

present preoccupations with nosology. In place of a diagnosis in the medical chart, he advocated a clinical description and a concluding “impression,” summarizing the patient’s emotional issues in commonsense language and offering a practical plan for treatment by the referring physician. “Our idea was not to train non-psychiatrists to be analysts,” Fox recalled in 1973, “but somehow to share with them the kinds of insights...we had learned from analysis which they could use in their everyday work with patients.”

Unlike Cobb at MGH, who established an independent department of psychiatry, Fox’s unit was always a part of the Department of Medicine, directed by George Thorn. For its first 5 years, the psychiatric unit was supported by the Army Stress Committee, and later by the Ford Foundation and the Commonwealth Fund. Eventually most research support came from the National Institute of Mental Health (NIMH), in grants renewed year after year, with all the elaborate and time-consuming rituals of NIMH applications. Finally, in 1968 or ’69, the first shocking rejection of a research-grant heralded the end of an era, the fat post-war years of government support.

These decades of federal funding had maintained a continuous output of projects and publications that emerged from the special interests of the hospital milieu and its staff. Thorn’s discoveries in pituitary-adrenal physiology and Fox’s broad concept of stress, for example, led to some interesting studies of college racing-crews, demonstrating differences between time trials and races and between winning and losing crews. Emotional reactions to mitral surgery were studied in the first patients of Dwight Harkin to undergo valvuloplasties. A long-term collaboration with Somers Sturgis, Chief of Gynecology, on “normal” reactions to hysterectomy, begun by Doris Benaron and Benjamin Murawski in 1952, resulted in several publications and books. Fox’s own psychophysiological study of a patient with peptic ulcer, during three years of psychoanalytic treatment, demonstrated remarkable correlations between measures of adrenocortical and gastric activity and phases of the analysis.

Papers by associates in Fox’s unit reflected his stimulating influence on research, as well as the varied interests of his staff. A psychosocial study of both patients and staff on Thorn’s experimental Metabolic Ward, by Dr. Renee C. Fox as participant observer, resulted in an unusual book, *Experiment Perilous* (1959), on so-called “normal subjects” volunteering for endocrine studies. Roy Menninger, influenced by the British psychoanalyst, Michael Balint, organized a study-group of young internists, interested in the emotional problems of their patients, that endured for several decades. Other associates explored normal pregnancy, anorexia nervosa, sleep deprivation in healthy subjects, Wilson’s Disease (with I.H. Scheinberg) and renal patients undergoing dialysis. There were studies (with Bernard Lown) of myocardial infarction, cardioversion and admission to the ICU. Other long-term projects, on psychosomatic aspects of rheumatoid arthritis and on psychotic reactions to treatment with corticosteroids, were never published.

In the late 1950s, Fox and his associates were invited to study the first renal patients undergoing transplant surgery, as these procedures were developed by John Merrill, Joseph Murray and Hartwell

Harrison. Their patients included pairs of identical twins, in which the sick twin received a kidney from his healthy brother. Fox's interest in the unexpected personality- differences within monozygotic twin pairs led to an extensive investigation of twins psychology. Healthy male collegestudents were recruited as paid volunteers, and 24-hour urine-specimens were collected, to measure adrenocortical and gastric activity. Intensive individual interviews with a psychiatrist obtained data of some emotional depth, and psychological testing, including the Rorschach, yielded parameters suitable for comparative study. Interviews with parents of the twins by our psychiatric social worker, Ethel Walsh, focused on early childhood development. Measurements by a physical anthropologist, Albert Damon, classified all subjects' body-build, according to Sheldon's classification.

This psychophysiological study of 40-50 healthy male students, including single subjects, monozygotic and dizygotic twins, absorbed the research interests of the unit for many years. A series of papers found relationships between personality-types and patterns of adrenocortical secretion. Despite many interesting psychological findings, the psychoendocrine correlations fell short of Fox's hopes. Meanwhile other members of the unit were pursuing their own researches, Gifford and Murawski on longitudinal observations of newborn twins, Peter Reich on cardiac patients on Bernard Lown's special unit, and Robert Eisendrath on chronic dialysis patients. Quentin Regestein continued his studies of sleep-physiology and established the Brigham's first sleep-lab.

Changes in the research climate during the later years of the Vietnam War affected all research projects, with a progressive reduction in federal support. According to Dean Ebert's 1973 address, 1968 marked the year that the postwar expansion of NIH funds came to an end. Gradually traininggrants ebbed, which had supported an important part of the unit's teaching programs. These included Fox's collaboration with Erich Lindemann in the famous first-year course in "Normal Human Development," the second-year teaching of history-taking in Physical Diagnosis, and various 3rd and 4th year clinical clerkships. These teaching exercises were considered "service functions" of the psychiatric unit, along with the unit's indispensable inpatient consultation-service. These services were provided without cost to the hospital, because the individual psychiatrists were supported by their part-time research salaries and by private practice.

This system, in which research salaries supported clinical services, had operated smoothly as long as research funds maintained their postwar level. But when federal funds dwindled, new methods of supporting the psychiatric unit were called for. The response was a series of negotiations in 1969-70, with Fox, George Thorn and Jack Ewalt, Chief of Harvard Psychiatry at Massachusetts Mental Health Center. The outcome was a restructuring of the Brigham psychiatry unit, with a small fulltime staff supported by hospital service funds, and Fox's decision to retire as chief of the unit. The new full-time chief was Peter Reich, who had long been a member of the unit and collaborated in research. Other members continued on various types of support: Murawski as full-time chief of the Psychology unit, David Myerson as head of the State Alcohol Clinic, and others on part-time salaries in the Outpatient Clinic.

Fox became full professor of Psychiatry in 1970, rather late for a chief with his prolific scientific output, but he had always accepted modest part-time salaries to fit the unit's research budget. He retired as chief of the Unit in 1972, aged 65, but he continued to attend staff-meetings and teach residents for many years, during which he pioneered the use of videotaped interviews. He continued to see his private patients as usual, and he maintained an active role at the Boston Psychoanalytic Society/Institute, where he was a Training and Supervising Analyst, active on many committees and Chairman of the Education Committee.

These activities, as a practicing analyst and a teacher at the Boston Psychoanalytic Institute, reflect a characteristic feature of Fox's professional life. Like other "academic" analysts, Fox probably considered his research his "real" work, much as he was dedicated to his patients and his analytic teaching. He took it for granted that he was a researcher, an analyst and a clinical psychiatrist, all at the same time. He regarded these three activities as entirely "normal," seeing his first and last patients at 6 a.m. and 6 p.m. respectively, often followed by evening Institute meetings. On this schedule, his papers and grant-applications were written during evenings and weekends, a pattern Sigmund Freud had followed.

Fox's personal life seems to have been an unusually happy one. Returning from military service to his wife and his daughter, Helen, after 48 months in the Southwest Pacific, he reestablished close family relationships. A son, Benjamin, was born in 1948. The only tragedy was the death of his brilliant wife, Ruth Berrien Fox, a distinguished poet and author. Fox died quietly in his beautiful Wellesley house on December 23, 1987, at the age of 80. He will be remembered by generations of students as a great teacher, and by his colleagues and friends for his gentle, courtly manner and his great kindness and generosity. He was sociable, witty and enjoyed a cosmopolitan sense of the great world.

Respectfully submitted,

Sanford Gifford, *chairperson*

Samuel Bojar

Benjamin J. Murawski

Peter Reich

Arthur F. Valenstein