Marian Ropes was born in Salem, Massachusetts on December 1, 1903. When she was asked by Dr. Alan Weisse who interviewed her for the book he was writing called *Conversations in Medicine*, whether Salem wasn’t the place where they burned witches, she replied in her characteristic way, “they hanged them actually”. Further along in the interview, she told Dr. Weisse that, “There was a very big fire in Salem in 1913 and many homes were destroyed. There were about twenty-five tents erected to care for the homeless infants rescued from the fire…and I helped the nurses care for them.” She was only ten years old at the time and the episode did not firm up her decision to go to medical school until considerably later. Following graduation in 1924 from Smith College where she majored in chemistry, she obtained a Master’s degree in chemistry at MIT. She then came to the Massachusetts General Hospital as a technician in the Biochemistry Laboratory where she studied lead poisoning, mainly under the supervision of Dr. Joseph Aub.

After a period of working in that laboratory, however, she decided that she wanted medicine more than chemistry and she applied to medical school. She would have liked to have gone to Harvard but women were not accepted at that time. She applied only to Johns Hopkins where she was promptly accepted into a class of 75 students with 12 women among them. Marian Ropes did well enough as a medical student that she thought she stood a chance to return to the Massachusetts General Hospital as an intern. Dr. James Howard Means, then Chairman of the Department of Medicine, knew her when she had worked as a technician in Dr. Aub’s laboratory. Dr. Means wanted to offer her a position as a medical intern but was told by others on the Medical Staff at the MGH, “he could not because no woman had ever served on the house staff before”. Nevertheless, he wanted to “get good women to apply” and convinced Dr. Ropes to consider a medical residency at the MGH following her internship at Johns Hopkins. In order
to accomplish this feat, Dr. Means managed to create a new position and because there previously
had been none, the “authorities at the medical school” could not prohibit him from filling it with a
woman. (At that time, apparently, Harvard Medical School must have had an official role in graduate
medical education.) Dr. Means told her that all she needed to do was apply and the position would be
hers. She did and in 1932 she became the first woman to be appointed as a Resident in Medicine at
the Massachusetts General Hospital! In 1934, she entered a clinical fellowship program combining
research and clinical work. Those were the days of the “Young Turks” at the MGH. Besides Joseph
Aub, there were Chester Jones, Fuller Albright and Walter Bauer. Although Marian Ropes ended up
working primarily with Bauer, she maintained a close professional relationship with the others. She was
particularly impressed with Albright whom she described as “an interesting person” and “very original”.
She said “Every morning he would come into the laboratory and say, ‘Well Ropsey I’ve got another idea
last night.’ He’d do that every day. He was the envy of us all.”

Marian Ropes spent over four decades as a physician, teacher and clinical investigator at Harvard
Medical School and the Massachusetts General Hospital. A major focus of her clinical investigation
was on the composition and function of synovial fluid and its alteration in disease. She published
several original papers that resulted from her studies that eventually culminated in a book entitled
Synovial Fluid: Changes in Joint Disease, sponsored by the Commonwealth Fund and published by the
Harvard University Press in 1953. This is still a standard reference that involved the analysis of over
1500 samples from patients with many different diseases. Later in her medical career she was most
interested in systemic lupus erythematosus (SLE). She was one of the few who had the courage not to
use glucocorticoids for therapy in all patients with SLE and she was able to make important observations
on the natural history of the disorder. She felt that the less these patients were stressed, the better they
did. She presented data suggesting that patients with SLE treated with glucocorticoids actually did worse
than those who were not treated; she was among the first to emphasize that all patients with SLE were
susceptible to infections and that infections rather than the disease itself contributed to their death. In
1976, she published a monograph describing her experiences in working with SLE patients under her
care. Although she officially retired in 1977, she continued to come to the hospital and communicate
with the fellows, students, residents and her colleagues.

Marian Ropes certainly had a productive career. She entered into what was then a man’s world because
she wanted to be a doctor, not because she had a “cause” as a woman and a physician. She felt that she
was successful professionally because she dealt with men on their terms. She described her experiences
as the only woman medical resident at the MGH as “not being bad except that Harvard fellows couldn’t
believe that (she) had taken all the courses that they had.” Every once in a while she stated that someone
would come up to her and say, “Did you study that?” None of us can guess at what her reaction might
have been to the fact that the classes that entered HMS since 1994 have over 50% women.

Marian Ropes was widely respected by everyone who came in contact with her. She was kind to her
patients and kind to the house staff, medical students and fellows whom she taught. There is no question
that Dr. Ropes was a pioneer in American medicine who played an important role in breaking the barriers blocking the opportunities for women at Harvard and at the Harvard Hospitals. She thought, however, that she was simply following her own path and never generalized from her accomplishments and even belittled them. She stated, “The only thing that women need in medicine are pockets in women’s clothes. Everybody laughs when I say that but it’s the only thing I wish they would have done that they haven’t. It’s a crime.” Abundant energy and enthusiasm characterized both her professional and social encounters. She was a popular lecturer even when her message, such as that advocating the conservative management of connective tissue disease and the dangers of glucocorticoid therapy, was not widely shared by her audience. Her colleagues admired her manner and the way she approached patients’ problems. She defended her positions without fear of recrimination and could hold her own with her peers even “the likes of Walter Bauer”.

She was recognized for her contributions to rheumatology by being the first woman to be elected to the Presidency of the American Rheumatism Associate, now the American College of Rheumatology. She was also honored by the award of an honorary Sc.D. from her alma mater, Smith College. She was one of the few women elected to membership in the American Society of Clinical Investigation and to Mastership of the American College of Physicians. She was the first woman appointed to Assistant Professor in clinical medicine in 1947. She had been promoted to Associate Clinical Professor of Medicine at Harvard Medical School in 1962 and became Emerita in 1970, but she stayed on as a member of the honorary staff at the Massachusetts General Hospital for several more years.

Dr. Ropes and her sister owned an old farmhouse in Maine that served as her base for hiking in the summer and skiing in the winter. She had always been an enthusiastic outdoorswoman and was a member of the Appalachian Mountain Club (AMC). In 1948, she met another member of the AMC, Andrew Fielding, a widower with two children. They married and for many years they set the site for the AMC’s August camp. The farm was also the venue for entertaining the postdoctoral fellows and staff of the MGH Arthritis Unit Lovett Laboratories. Many of these fellows who came from abroad had their first real experience of America in that setting. Dr. Ropes’ husband, Andrew Fielding, died several years before she did. Her stepson, James Fielding, stepdaughter, Linda Fielding Halporn, and five grandchildren, one a physician, survive her.

Respectfully submitted,

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