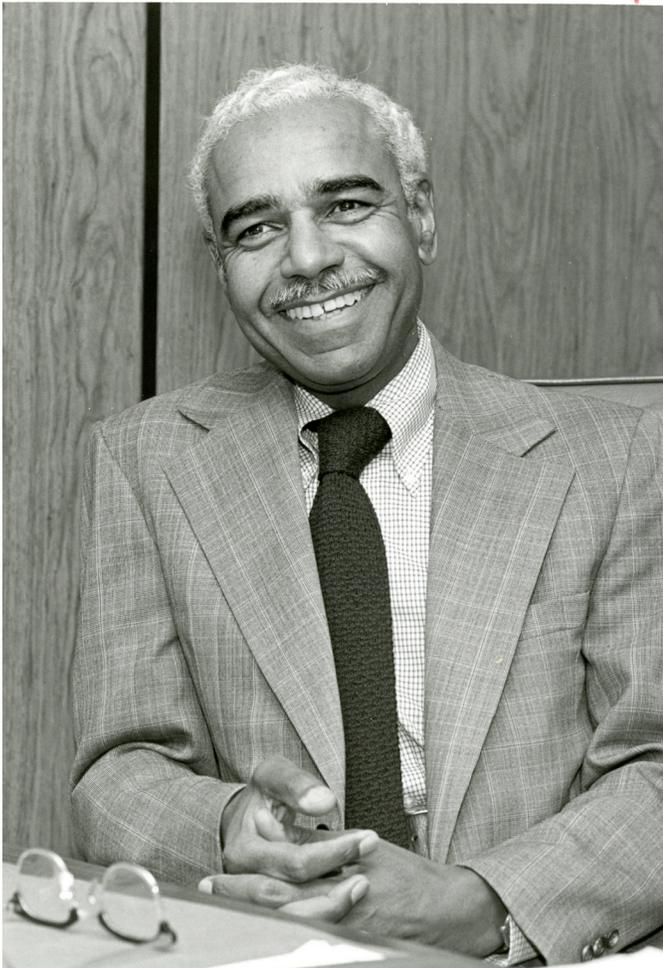




Mitchell W. Spellman



When Mitchell Spellman retired from Harvard in 2004, he could look back at a career of diverse accomplishments - professor of cardiac surgery and department head, founding dean of a post-graduate medical school dedicated to the service of an underserved population, a decanal position at HMS that saw him as a liaison to its affiliated hospitals, an ambassador to overseas medical institutions, and midwife to the establishment of interdisciplinary divisions at the School for education, training and research.

Mitchell Wright Spellman was born in Alexandria LA on Dec 1, 1919 to Frank J. Spellman MD, a general practitioner, and Altonette B. Spellman, a music teacher. Because of the poor quality of the local segregated schools, his parents enrolled him, at the age of 12, in the Gilbert Academy of New Orleans, a private college preparatory school. He graduated as its valedictorian in 1936. (Gilbert Academy was first established as an orphanage for black children whose parents had fought in the Civil War. Subsequently, with a bequest from W. L. Gilbert, it became an educational institution.) Afterwards, Mike, as he was called by friends and colleagues, attended Dillard University in New

Orleans, graduating magna cum laude, again as class valedictorian.

Mike Spellman earned his MD from Howard University College of Medicine in 1944 – ranking 2nd in his class. He began his clinical training in Surgery at the Cleveland Metropolitan Hospital and, subsequently, continued it at Freedman’s Hospital in D.C. (a teaching hospital affiliated with Howard University). He finished his training first as Chief Resident in Thoracic Surgery and then as Chief Surgical Resident at Freedman’s.

In 1947, during his residency, Mike married Billie R. Rhodes RN with whom he had and raised eight children. Sadly, she as well as two of their children and two grandchildren predeceased him. They were a close-knit family and, despite his many professional commitments, Mike spent as much time with them as

*In tribute to their dedicated efforts to science and medicine, deceased members of the Harvard Faculty of Medicine (those at the rank of full or emeritus professor) receive a review of their life and contributions with a complete reflection, a **Memorial Minute**.*

he could. Several of his offspring have continued the tradition of working in the fields of medicine.

Following residency, Mike spent three years with Walton Lillehei, the eminent cardiac surgeon at the University of Minnesota, earning a PhD in experimental surgery as a Commonwealth Fund Fellow. He returned to Howard in 1954 rising to the rank of Professor of Surgery and Director of the Surgical Services at D.C. General Hospital.

At Howard and Freedman's, Mike came under the tutelage of Charles R. Drew, Chief of Surgery at Freedman's and Chairman at Howard. Dr. Drew, an African-American, was a principal in establishing the blood-banking system that was used in treating wounded servicemen in WWII. Drew was vocal in fighting for desegregation of blood storage and administration, resigning from his position with the American Red Cross, the major agency for blood distribution, when it refused to do so. Drew also failed in a request to have the AMA desegregated. The organization required membership in county medical groups but some in the south were closed to physicians of color. Despite Dr. Drew's urging, the AMA leadership at the time was not inclined to make changes in that requirement nor to insist on the county groups' integration.

Mike must have absorbed two exemplar messages from his association with Charles Drew, viz. the sameness in the biology of all humans and the necessity of equality for African-American and other minority physicians in order to improve medical care for all. In 2001, Mike closed a conference on the impact of genomics and proteomics in medicine and health with a speech titled "The Human Genome: Cause to Remember our Humanity". He asked his audience to consider the meaning and dimensions of humanity not only in its biological dimensions but in its social and ethical ones as well. His "take-home message" was that "genomics will cause physicians and health professionals...to subsume, more than our predecessors, the ennobling responsibilities to affirm our common humanity and assure for everyone equity of access to all that is available to advance health and prevent disease".

Perhaps it was adherence to these principles that led him to take on his next assignment.

In the mid-1960s, punishing riots broke out in the Watts-Willowbrook section of South Los Angeles, an impoverished largely African-American community. Seeking to find the cause and recommend a possible remedy for the violence, then Governor Pat Brown appointed a commission to explore the matter and make recommendations. The Commission, chaired by John McCone a former director of the CIA, found that poor health status, low access to health care, few job opportunities, and weak public transportation were major contributors to community unrest. Their recommendations included the creation of a neighborhood medical facility that could deliver emergency care and recruit health-care professionals willing to serve the community. On the basis of these recommendations, the County of Los Angeles built a 400 bed community hospital while the state and a grant from Regional Medical Programs provided funds for a postgraduate medical school for the training of physicians and other health care workers. The hospital, which opened in 1972, would be named for Martin Luther King and the school for Charles R. Drew. Faculty at the School would have joint appointments both at Drew and either USC or UCLA.

It may have been a conviction articulated in an address given by Mike in 1966 that led him to answer the call to become the founding dean of the Drew Postgraduate Medical School. In this speech, resonating with the sentiment of the McCone Commission, he declared "the hospital is a basic component of the fabric of community and, together with other primary social units, church and school, pursues common

goals and transforms a house of the sick to a dynamic social agency". In 1968, he and his family moved to Los Angeles.

Mike brought a number of strengths to the position. He had clinical training and experience at academic medical centers whose clinical facilities, in part, served an indigent community; he had worked in a first-rate biomedical research institution; and he had a broad view of academic medicine and delivery of care from experience on a number of boards and committees such as those of the Institute of Medicine and the Kaiser Foundation Health Plan. In addition, and of no little importance, he was an African-American of impeccable credentials coming, in a leadership role, to help a population angered by discrimination and neglect.

An important component of a founding dean's task is the recruitment of a faculty. This goal, to recruit, on a merit and national basis, clinical department heads willing to join him in what was surely to be a risky enterprise, shortly came into conflict with another important component of Mike's mission; to ensure that members of the community have a strong voice in hospital policies. Unfortunately, the County of Los Angeles appointed local residents with little or no hospital administrative experience to the key management positions in the new institution. Mike's exceptional capacities as a statesman were required to resolve the resulting frictions that arose between the department chairs and the county-appointed administrators during the initial months of the academic medical center.

Presiding over the Drew Postgraduate Medical School, in the 70s, could not have been easy. There was a chronic shortage of funds, particularly for the hospital, while the medical school administration was housed entirely in converted trailers. Space and staffing for the hospital was inadequate. The community, lacking many trained health professionals, was disappointed not to obtain more jobs in the institution and errors in patient care in the early months damaged the hospital reputation. Despite these difficulties, Mike and the faculty he had recruited were able to provide fine training to resident physicians and other health professionals in a setting that gave them an understanding of community problems. In addition, the School was able to establish badly needed programs in primary care as well as maternal and child health. He also secured funding for biomedical and health sciences research relevant to the needs of underserved urban populations. .

Once these difficulties were surmounted, the Board of Directors determined that, in order to expand the School's mission of minority health education, Drew should seek a means to provide undergraduate medical education. By California law, state funding for higher education can be provided only through the University of California system. Mike worked with Sherman Mallinkoff, Dean of the UCLA Medical School, to develop a unique Drew-UCLA program with students selected by joint Drew-UCLA faculty committees. The students took their basic science training at UCLA and their clinical training at the Drew-King Medical Center graduating with a combined Drew-UCLA degree. The first class was admitted shortly after Mike was recruited to Boston.

When Daniel Tosteson became Dean of the Harvard Faculty of Medicine he created an administrative structure of five decanal positions: Administration and Finance, Academic Programs, Student Affairs, Development, and Medical Services. All but the last were traditional roles; Medical Services was an attempt to tame the peculiar structure of Harvard medicine. Each of its affiliated teaching hospitals was "a tub on its own bottom" with regard to finances and clinical appointments and each housed identical departments in the major clinical specialties. It was Mitchell Spellman's assignment as Dean for Medical Service to coordinate programs that reached across the affiliates as well to address external matters that

affected them all.

The assignment was fraught with complications. Although an agreement drawn up in 1948 had delineated the particular perquisites assigned to the School as opposed to its affiliated hospitals, thirty years had eroded the boundaries for some of these. One of Mike's early assignments was to find out where things stood and, taking this into consideration, strengthen the existing overarching programs while incubating new ones.

One of his accomplishments was to inaugurate "Divisions" – innovative interdisciplinary academic programs populated by faculty members drawn from the quad departments, the hospitals, and the broader University. Two of these were in disciplines greatly in need of attention but often neglected for lack of interest – primary care and aging. His quiet, non-confrontational manner and understanding of institutional relationships made it possible for him to work across departments and hospitals. He was also astute in choosing leadership – Bob Lawrence in Primary Care and Jack Rowe in Aging; both of whom became important figures in American medicine and public health. The Divisions grew in size and stature and his early guidance helped them in garnering support and avoiding bureaucratic minefields.

Mike also strengthened Harvard's ties to the VA medical system. He was helpful in coordinating the bond between the West Roxbury and Brockton VA hospitals to deliver mental health services and in recruiting two outstanding academic psychiatrists to head the programs. He was an advocate of VA affiliations with several Harvard residency training programs.

As Executive Vice-President of the Harvard Medical Center he was active in city-wide interhospital forums. He also promoted the School's continuing medical education curriculums, working closely with Stephen Goldfinger to expand the scope of the offerings. In conjunction with the Office of Government and Community Affairs at Harvard University, his office also oversaw and responded to pending legislation bearing on medical education, research and service as related to the interests of Harvard Medical School and its affiliated teaching hospitals. He was instrumental in founding and later served as the President of the Massachusetts Society for Medical Research - established to preserve access to the use of animals for research purposes. He fostered the School's efforts in international medical programs through sponsored exchanges between HMS institutions and overseas academic medical centers. These exchanges placed visiting students, residents, and fellows in research laboratories on the quad, in the hospitals, at the dental school, and at the school of public health. It also arranged for HMS faculty members to advise on research and clinical training at some of the same institutions and helped in faculty recruitment for several medical schools in the Middle East including UAE, Dubai, Oman, and Saudi Arabia. After his retirement from the Dean's office, Mike continued his work in placing overseas students and scholars in Harvard-based laboratories and clinics in his role as Dean Emeritus for International Projects.

Mike's personality and previous experience with difficult circumstances made him a perfect choice to deal with this range of interinstitutional issues. And, his international efforts maintained and, at times, enhanced the School's external reputation.

One of Mike's objectives in coming to Harvard was to help in creating a faculty development program that would enable minorities to obtain intensive research training as preparation for positions in academic medicine. Increasing the pool of well-trained minority physician-scientists would encourage blacks and others to seek placements on the faculties of medical schools. He felt that this was as

important as increasing the number of practitioners. He stipulated that “unless minorities and women have appropriate representation on the faculties of universities, we lose something in the process of translating to young persons the scope of opportunities and aspirations through which they can enrich their lives and serve humanity by advancing (medical) knowledge”.

When Joan Reede was tasked with designing a program for increasing the number of minority faculty at Harvard Medical School, Mike was one of the first people she sought out for advice and guidance about the gaps and what was needed for the program to be effective. She recalls what it meant to her to have someone of his stature – a role model - give of his time to help her endeavor in something that was important to her. His insights were critical in crafting a report that would gain approval from leaders in medicine and science from across the Harvard community. He cared deeply about advancing issues of diversity.

Mike was involved in a range of important activities outside of Harvard. He continued as a Director of the Kaiser Foundation Health Plan for many years; he was active on the HHS Ethics Advisory Board; a member of the AAMC Task Force on Graduate Medical Education; on the editorial board of *The Journal of Medicine and Philosophy*, to name just a few. His contributions to American medicine were recognized by honorary degrees from Georgetown and Dillard Universities as well as the University of Florida. He was an elected member of the Institute of Medicine (now the National Academy of Medicine).

The arc of Mitchell Spellman’s life reflected two central narratives in the second half of the twentieth century – the struggles of the civil rights movement and growth of the academic medical center. Educated at and establishing an academic career in an institution that served predominantly African-American students, he subsequently organized a major effort in bringing quality medical care to an underserved population in Los Angeles, and finished his professional life at Harvard as a gracious and effective ambassador for medical education.

Mike was always approachable – he was thoughtful and sympathetic. His personal integrity, generous spirit, calm demeanor, and sense of humor made it possible for him to deal effectively with most any situation. Conversation with him was often light-hearted but he had a serious mien when the occasion demanded. For all of us who knew him, he was a treasured colleague and has been sorely missed.

Respectfully submitted,
Robert Lawrence
Joan Reede
John Rowe
David Ulmer
James Adelstein, *Chair*