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THE MEDICAL SCHOOL “MASSACRE” OF 1913 President Vincent Revamps the University

Abstract
George Edgar Vincent was President of the University of Minnesota from 1911 to 1917. In these few years he did much to revamp the University, which many thought had become a complacent institution lacking in vitality. Of the numerous schools and departments that he overhauled or inaugurated, probably the most contentious struggle he encountered was in dealing with the Medical School. This paper looks at Vincent the man and his background in an attempt to clarify his goals and motivations in his dealings with this institution. It then goes on to examine some of his accomplishments in light of this background and in particular the result of his restructuring of the Medical School.
THE MEDICAL SCHOOL “MASSACRE” OF 1913

President Vincent
Revamps the University

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Presented to the Gown in Town Centennial celebration, October 14, 2014.

Abstract: George Edgar Vincent was President of the University of Minnesota from 1911 to 1917. In these few years he did much to revamp the University, which many thought had become a complacent institution lacking in vitality. Of the numerous schools and departments that he overhauled or inaugurated, probably the most contentious struggle he encountered was in dealing with the Medical School. This paper looks at Vincent the man and his background in an attempt to clarify his goals and motivations in his dealings with this institution. It then goes on to examine some of his accomplishments in light of this background and in particular the result of his restructuring of the Medical School.

On January 15th, 1913, a meeting of the full faculty of Minnesota’s Medical School was attended by the University’s President, George Edgar Vincent, and Regent William Mayo. At that meeting, as Vincent had requested that Dean Frank Wesbrook, all heads of departments and their entire faculties submitted a single letter of en masse resignation. This move was a pivotal point in Vincent’s plan for a systematic reorganization of the University of Minnesota.

This move by Vincent was variously called a “convulsion”, “a disaster”, and a “massacre.” We are now just over a century since that mass resignation of Minnesota’s medical faculty. Vincent’s ideas for restructuring the Medical School were not only controversial at the time, but have continued to evoke judgments even in our present generation. These vary from lustrous praise to caustic condemnation. For this reason the issue is still worth our reconsideration a century later.

For several months before that January meeting, Vincent had been meeting with Dean Wesbrook to discuss the process and goals a restructuring plan. The first goal was to shrink the size of the clinical faculty. In the Minnesota Medical School, Vincent had found a faculty that he considered bloated, top heavy, and overly preoccupied with private practice. There were nearly as many faculty as students. When the University had absorbed the other Twin Cities medical colleges, it took on many professors from the other faculties. This swelled the ranks, especially at the top tier.

Vincent noted that the students were taught in “so many different hospitals manned by so many different teachers” that they could not be provided “organized, coherent, unified instruction.” He said with so many part-time instructors, “It is hard to secure, on the one hand administrative efficiency, and on the other, to create a sense of responsibility in men so widely scattered.”

The second goal was to instill a greater level of professionalization into medical teaching. The clinical faculty were all practicing physicians of whom nearly all were unpaid. For them teaching was a
secondary activity, an avocation. A third goal was to foster a greater emphasis on research by both basic and clinical faculty, and a fourth, to spur greater integration of the Medical School with the rest of the University.

Finally, to eventually establish full-time, paid positions for the majority of the clinical faculty. Clearly, the full-time plan was a threat to the practitioner-teachers who feared the loss of teaching opportunity, University Hospital privileges, and the prestige of a faculty appointment. In 1913 no American medical school was yet on the full-time plan. However, a full-time salaried faculty would cost money, and at that moment Vincent did not yet have the funds.

The two men agreed on these goals but disagreed on the pace of the process. Wesbrook knew his faculty. He felt that gradual, incremental change would be better accepted. Vincent, on the other hand, saw no need to delay. In this, as in many things he did, he saw hesitation as an impediment to the progress. I have no doubt that he saw himself among the forefront of those leaders who were moving medical education forward, and he was impatient to get on with the job.

Vincent pointed out that the school had two new modern buildings: the Elliot Hospital for the physicians and the Institute of Anatomy for the basic science faculty. He saw it as an opportune time to make the faculty changes.

We will return to the Medical School and the outcome of Vincent’s reorganization later. But first we should address the primary query of this discussion: Who was George Edgar Vincent and what motivated him? To explore this question we will examine his background, his education, and his writings, and will identify some of those who influenced his views. From these sources, we may be able to trace backward from his actions to his goals, and thence, to his motivations and his philosophy of the purpose of the university. Only then, I believe, can we make a fair judgment of Vincent’s dealings at Minnesota.
George Vincent was born in Rockford, IL in 1864. His father was the Reverend John Vincent, a Methodist minister and author. George, an only child, was very close to his father and grew up under his father’s potent religious and philosophical influence.

The senior Vincent had a strong belief in adult education for those he called "belated students" to give them “the college outlook.” In expressing his egalitarian view of education he wrote,

"Education, once the peculiar privilege of the few must, in our best earthly estate, become the valued possession of the many."

In 1874, when George was age ten, John Vincent founded the original Chautauqua Institution, named after the lake in western New York State where it is located.
He saw adult education as a means of raising the general tone of society, and in turn, its service to the deity. Then, as now, those who wished to expand their base of erudition could come together for a week or two on the shores of Lake Chautauqua to be exposed to lectures by influential thinkers of the country, people such as William Jennings Bryan and Julia Ward Howe. From age ten George Vincent spent his summers at the Chautauqua soaking up this expansive supplement to his more formal education.

After high school he earned his bachelor’s degree from Yale in 1885 where he had studied rhetoric with Cyrus Northrop, who would soon become President at Minnesota. They became life-long friends. Seven years later, in 1892, the University of Chicago’s first president, William Harper, invited George Vincent to Chicago. Harper had been an official of the Chautauqua Institution before moving to Chicago, so he knew both Vincents well. At Chicago George joined the junior faculty to study the fledgling subject of sociology. In 1896 he was awarded his PhD and was co-author of the first American textbooks of sociology. He stayed on the faculty, eventually becoming Dean of Arts, Literature and Sciences. There he served until 1911 when he was recruited to the Presidency of the University of Minnesota.

Growing up in the post-Civil War period, Vincent became a product of the early Progressive Era. This nation was still a horse-and-buggy, frontier country with land rushes and Indian battles. What we can now view with a cool, retrospective eye, Vincent experienced as riveting current events. He witnessed the great surge in immigration, the shift of population from the country to the city, the expansion of the railroads and industry, the fierce conflicts between labor and the bosses, and the social upheavals caused by the crushing drought of 1887 and the great financial Panic of 1893. He watched also the dramatic changes in everyday life brought on by scientific and technological advances.

With this background, is it surprising that he developed a strong interest in education or that social justice was a central tenet of his philosophy?

As with many brilliant and talented leaders, Vincent was a complex man. To the casual observer he presented copious contradictions. We find in his writings conflicting themes of both elitism and egalitarianism, an apparent contradiction that he recognized in himself. Yet, he seemed to work easily from both perspectives. As an administrator, he was convinced of his own place among the elite leadership that must guide the institutions of society. Nonetheless, he usually went out of his way to
bring others along by persuasion and inclusion in the decision-making — even if, in his own mind, he had foreordained the outcome.

As a sociologist, he was preoccupied with the obligation of the leaders of education to society at large. Just before coming to Minnesota he asked,

The expert few are coming into their own. … How shall the knowledge, experience, skill of [these] few be put to the service of all? If need be, how shall this wisdom be made coercive? 21

In recognizing a new place in society for the expert, he was not alone. This was one of the cardinal features of the Progressive Era. That is, a movement away from the frontier mentality of individuality and self-reliance, to an acceptance of guidance by the expert with superior knowledge and/or capability.

In the early years of the twentieth century, a very small segment of society was college educated. Many in academia — especially in the older eastern schools — still retained the elitist attitude that Vincent repeatedly exhorted against. Although he believed that,

The public is controlled by its leaders. These leaders must be informed and intelligent. Colleges and universities have a responsibility to train these leaders.21

Yet elsewhere, when speaking of the place of the university in society, he took a clearly egalitarian stance.

The university gets its meaning from society and from the nation and therefore must be an expression of the common life. … The university would lose its power and its ideals if it ever became a place of privilege for the well-to-do and not a training school for all who have talents and capacities for which the state has need.22

Vincent expressed great faith in the advancement and value of science. Much of his writing reflects a Positivist philosophy. He quoted freely and often from Francis Bacon and from the father of modern Social Positivism, Auguste Comte.23 Spurred by the optimism of the Industrial Revolution, Social Positivism had become a dominant philosophical movement in all countries of the Western world.24 Its central tenet was that science provides the only valid knowledge, and that facts are the only possible objects of knowledge.

Vincent resolutely believed that the university, as a servant of society, had an obligation to the scientific search for these facts. He said in the ideal university, research

… is not an incidental by-product or merely a means of stimulating teachers. It is a definite and persistent aim … [and] a fundamental social obligation.25

The ideals which Bacon cherished three hundred years ago are our guides today: the area of man’s scientific interest is worldwide; the search for truth in itself a noble end.26

At Chicago Vincent had become well-acquainted with two men who were to help further shape his views of education and especially medical education. During the Progressive Era in the socio-political history of this country, medicine was playing its part in the broader movement of Progressive Education. The cardinal precept of Progressive Educational was that students should learn by doing. Sitting in lecture halls should be augmented with meaningful hands-on experience. In Europe, Germany was ahead of America in both promulgating this precept and in the professionalization of medical teaching. An influential proponent of these advances was the prominent anatomist, Franklin Paine Mall.

Mall had studied with the eminent German physiologist and teacher, Carl Ludwig.7 Later at Chicago, Mall championed the professionalization of academic medicine. Mall was almost wholly opposed to lecturing. He believed adamantly in hands-on experience, whether in the laboratory or at the
Mall was also a staunch supporter of full-time positions for clinical instructors. He accepted that clinical practice was essential, but said it should be centered on teaching and research, and not on earning a living.

Another who studied with Ludwig and shared Mall’s views, was the noted physiologist, Jacques Loeb. Reform-oriented educators like Mall and Loeb felt that only with hands-on experience, both at the laboratory bench and in the clinic, could budding physicians grasp newly emerging concepts and fully appreciate their worth. These men and like-minded educators also believed that the “laboratory thought process” of problem solving could be transferred to the bedside. Vincent had vigorous discussions with Mall and Loeb about the emerging changes in medical education, and he absorbed their convictions on the importance of research and the professionalization of the medical faculty.

After seventeen years in Chicago, Vincent was ready for new challenges. He looked for an opportunity to put his views on education and the role of the university to wider effect. But when he was initially contacted by Northrop about the Minnesota presidency, he demurred. Therefore, the Chairman of the Board of Regents, John Lind, went to Chicago to make a personal appeal to Vincent. Lind was convincing, and Vincent agreed to the appointment as the University’s third President.

In selecting Vincent, Lind later said that the Regents wanted a man “who is radical in ideals and strong and conservative in action, … [a man] who knows that the world has changed rapidly.” In Vincent they saw someone whom others variously portrayed as: "one of the most charming of men" … "helpful, kind, and witty beyond words"…with "no pride of opinion" … and "a shrewd judge of men" … who "has the energy of a 10,000 horse-power dynamo."

He was considered "unsurpassed as a [public] speaker." He read widely, and in making his point, he often quoted classic authors such as Plato and Bacon. He also frequently used wit and humor to great effect. At one contentious occasion he said,

Gentlemen, I’m sure you will agree with me that this argument has degenerated into a CAT fight, and I shall end it by putting it to a vote. All those in favor say MEOW.

Arriving at the University of Minnesota in April 1911, Vincent found a sleepy, complacent collection of departments and colleges that had only a loose, informal relation to each other. Most were still functioning in a 19th century mode. Perhaps most “proudly aloof” was the College of Medicine and
Surgery (later renamed the Medical School). All were held together by the personal glue of his old friend, who had by then been President for 27 years, the very amiable and avuncular Cyrus Northrop.

Vincent quickly set about — with the Regents’ blessing — to address simultaneously three major goals. The first was to strengthen all the departments, colleges, and campuses making them ready to face the challenges of the new century. He set about to address a modernization process of nearly the entire University.

Before Vincent arrived there was no formal University budget. Northrop had handled the finances in a very unstructured manner. Often there was a deficit at the end of the year. Vincent developed a formal university-wide budget and hired a comptroller to manage the financial side of the administration.

His approach to academic reorganization was to look first at the leadership. In his inaugural address he said, “Buildings are but the shell of the University. … Only great men and women can make a
University great.” If not satisfied with a current dean he did not hesitate to make changes. For example, when he saw a weakness in the Engineering School he brought its faculty together and asked for a vote of confidence in the present leadership. The vote was almost unanimously opposed. So the dean was replaced.

If a suitable candidate for dean was not already at the school, or if he saw a specific weakness in the breadth of the faculty, he was not shy about conducting “raids on other institutions to find the best available men for specialties that had been insufficiently represented.” One example of a gap in faculty breadth he noted was in the College of Education where there was not one professor who “specialized in high school instruction.” He soon corrected this. Vincent was very skillful and prescient in choosing those he recruited; among his recruits two, Guy Stanton Ford and Lotus Coffman, followed him as Presidents of the University.

An underlying motif of these reorganization efforts was to strengthen research. In December 1912 Vincent told a faculty group that what the University as a whole needed was “to relieve from routine duties those … faculty who were able to do research and pay them salaries that will make them feel they are appreciated.”

Our time does not permit examination of each of these schools in detail. For this I would refer you to James Gray’s 1951 centennial history of the University. Of course, not all the changes were met with enthusiasm. However, the overall reception was at least positive if not enthusiastic. In 1913, Cephas Allin of the Liberal Arts College wrote of Vincent, “[he] has done more in the past two years … to make [this university] an outstanding educational institution, than was accomplished in the previous twenty.”

His second goal was to integrate the various disparate colleges and campuses into a more interactive and cooperative whole. This he did in ways both informal and formal.

From their earliest days on campus Vincent and his wife, Louise, encouraged cultural and social events across interdepartmental boundaries, between faculty and students, and between the two Twin Cities campuses. In a way, the campuses became a reflection of his Chautauqua days with “an endless succession of plays, games, parties, fairs, dances and bouts of public speaking.” One offshoot of this effort was Vincent’s encouragement of the formation of intercollege dining clubs like our own ‘Gown in Town’ and The 39ers.”
Mrs. Vincent contributed to the effort. She converted the third floor of their home, the Pillsbury mansion, into a ballroom with a player piano and invited students to dances there. Occasionally this space was also used for basketball games or exercise classes for faculty ladies.

Vincent’s more formal University-wide innovations included the establishment of the Faculty Senate and an All-University Student Council. He also instituted a weekly noon Convocation with guest speakers from across the country, speakers such as William Howard Taft and the noted jurist, Louis Brandeis.¹⁶

Students and faculty often complained of the long time it took to travel between campuses on public streetcars. Vincent saw this as a waste of valuable time and negotiated a dedicated streetcar line between the campuses.

Vincent’s third major goal was to strengthen the University’s image, influence and service to the entire state. It was clear that some in the state legislature and many of the state’s general public — especially in the rural agricultural areas — viewed the University as an elitist institution and questioned its value to the state as a whole. Even if this view was not valid, his concept of the role of a state-supported university was clear: the University’s influence must be statewide and this influence must be earned by its service to citizens everywhere. He told one group, “If the University is true to its mission, it will place all of its resources and its trained experts at the service of the community.”

To this end he made several moves. In the spirit of the Chautauqua, he reached out to adult and part-time students by establishing the General Extension Division (the antecedent of our present College of Continuing Education.) This offered night classes, short courses, lyceum lectures across the state, and correspondence courses. Even inmates of the state prisons were encouraged to take these latter courses.

Another of his innovations was University Week. For this Vincent sent troops of faculty to venues throughout the state for a week’s sampling of the liberal arts — a sort of extension course in miniature. The schedule would perhaps be a play one night, a lecture the next, then a musical recital, followed on the next evening by open discussions. Vincent often spoke at these gatherings explaining what was happening at the University and emphasizing its contributions the state.
THIS THEN IS A CAMEO of Vincent the man and his accomplishments as President of our University. Of all his endeavors, probably the Medical School presented his greatest challenge and kindled the most protracted debates, debates that lingered long after he had departed Minnesota. So we must now return to where we started, his skirmish with the medical faculty.

Vincent was well aware that throughout the country medical education was undergoing dramatic changes. The old model of apprenticeships and proprietary schools with cursory value and little quality control were being replaced by medical schools associated with universities and subject to scrutiny by both legislatures and the general public. The pressures for this change were numerous.

A dominant theme underlying most of these pressures was the rise of “scientific medicine.” The recognition of the germ theory as an explanation of disease was especially influential. Advances in human physiology began to enhance understanding of both the basis for good health and the pathogenesis of disease. There were also technological innovations. X-ray, the electrocardiogram, and chemical tests of blood and urine were expanding the physician’s diagnostic scope.

Awareness of these changes gave the public a sense that medicine was finally coming into its own and was deserving of greater confidence. Undoubtedly, even greater progress was yet to come. And if this progress was to come, it would surely come from scientific research. There was a growing perception in academia that doing research was also critical to being a good teacher. For any practicing physician finding time and funding for research would be very difficult. Therefore, a university was the appropriate and logical venue for research.

Then there were also the problems that came from relying on part-time teachers. In one study it was estimated that as many as twenty-five percent of lectures were cancelled because of the demanding priority of patient care. Noted also was poor coordination between lecturers leading to repetitions on the one hand or omissions on the other. All this increased the pressure for the professionalization of academic medicine.

We have spoken of the calls for greater hands-on experience both in the laboratory and in the clinic. It was recognized that laboratories for research and for teaching students would be costly of both time and money.

It was logical that these factors, among others, indicated that medical schools should be an integral part of a university with its broader base of facilities and finances. However, simply associating with a university would not automatically lead to pedagogical improvement.

In 1910 this view was bolstered by the Flexner Report. Two years earlier, the American Medical Association was looking at medical education with a critical eye. Too many schools were proprietary with minimal entrance requirements. Usually, a small group of self-styled professors ran these schools as a part-time, for-profit enterprise dependent wholly on student fees. They offered little more than an endless litany of perfunctory lectures and no hospital time. Even many university schools were not much better. Therefore, the AMA asked the Carnegie Foundation to undertake a study of medical education in North America. The Foundation engaged the noted educator, Abraham Flexner, to visit all 155 medical schools in the US and Canada and to offer recommendations based on his findings. As his yardstick he used the Johns Hopkins School of Medicine, the premier school of the time. He considered Hopkins to be the one American school that came closest to providing an ideal modern medical education.
After visiting our Medical School, Flexner complemented Minnesota for amalgamating the other local medical colleges into a single state-sponsored school and for requiring a fifth year of internship training. He judged the buildings and basic science laboratories to be up-to-date and adequate to the needs of the school. He called the level of basic science instruction excellent.

However, Flexner was less sanguine about Minnesota’s clinical facilities. He was aware of the pending construction of the Elliot Hospital on campus to open in 1911. But he noted,

The school has hitherto relied on the municipal hospitals and unpaid clinical teachers. … These institutions are in fact not organized, equipped, or conducted with educational requirements in mind. … [The school] has indeed still to realize its plans for an adequate clinical establishment of modern character.²

He went on to recommend that the chiefs of medicine and surgery in the new hospital be on salaries of a level, “that command the interest and effort of active teachers.” Further, he wrote,

Henceforth, the success of the school will depend largely on the generosity of the state in developing the clinical teaching, and on the character of the hospital and dispensary which it organizes to that view.²

Flexner’s report was extensive, but his overall recommendations were concise.²

1. Reduce the number of medical schools from 155 to 31
2. Increase the prerequisites to enter medical training
3. Train physicians to practice in a scientific manner and engage the medical faculty in research
4. Give medical schools control of clinical instruction in hospitals
5. Strengthen state regulation of medical licensure

Many consider the Flexner Report to be the single most influential event in the reformation of American medical education. However, the document — while highly visible and widely read — was not the seminal impetus for reform. The forces for reform had been at work well before Flexner made his survey. His report was a product of those forces rather than their genesis. What the report did
accomplish was to crystallize the issues and raise awareness, both within the profession and, just as importantly, among the general public, of the need for faster and more far-reaching reform. In a sense, Flexner’s report was a part of the ‘muckraking journalism’ that marked the Progressive Era.

George Vincent wrote in the Journal of the American Medical Association of physicians as social servants.

There are professions and occupations that must be thought of as forms of social service rather than as personal careers.\(^{21}\)

[Thus] … physicians get their higher meaning from their value to the community.\(^{22}\)

In this view, Vincent was clearly in harmony with Flexner who wrote,

The physician is a social instrument … It matters not that the making of doctors has been to some extent left to private institutions, … the medical school is a public service corporation.\(^{2}\)

It was against this backdrop that Vincent set about to revamp Minnesota’s Medical School. He was not alone among university presidents in having this challenge. The noted medical historian, Kenneth Ludmerer, counts Vincent among,

… a generation of aggressive university presidents with extraordinary talents of executive leadership [who] had made it part of their mission to assume responsibility for their medical schools.\(^{4}\)

We may view Vincent as an archetype of this group of activist presidents who believed in the general reforms outlined by Flexner.

At that January 15\(^{th}\) meeting, when Vincent accepted the en masse faculty resignation, he told them; [This] reorganization is in no sense disciplinary or a reflection on this college. … We must lay increasing stress upon research work in clinical medicine, making this college a center for this work in the Northwest.\(^{16}\)

He then presented the plan for rehiring a faculty. A Reorganization Committee would be named by the Board of Regents consisting of three of the present faculty and three Minnesota graduates practicing outside of the Twin Cities. This committee would nominate heads of departments and these heads would join the committee in naming the new faculty. The Reorganization Committee expedited their work with the following results:
The total faculty was reduced by about 40 percent from 149 to 86. The basic-science group were all retained, so the reduction came from the clinical group of whom all were considered fully voluntary except for the heads of internal medicine and surgery. These two held part-time, salaried, administrative appointments. Full professorships were reduced from 45 to 12 percent. The student to faculty ratio was increased to a more reasonable 2.1 to 1.

These changes can be compared with Flexner’s yardstick, Johns Hopkins, where the student-faculty ratio was about 30 percent higher and the number of full-professors was 20 percent versus the 12 percent for Minnesota. Later Vincent would tell a meeting of the American Medical Association that the existing faculty showed so noble and commendable spirit … [and] put aside personal interests … to do the right thing for education, for the institution, and for the welfare of the state.

Of course, he knew that this was a gloss over a deep vein of antagonism to the plan. Some resentment came from demoted or dismissed faculty. For others, the hostility was due to loss of control of the school. The school had been taken over by the President and the Board of Regents to a degree that the volunteer faculty had never before witnessed. Under prior Deans and President Northrop, they had long basked in an autonomy that was now forever lost. This was not unique to Minnesota. Ludmerer has described a similar trend across the country. He writes:

As the academic profession gained strength, practitioners started to lose much of their traditional power, responsibility, and status. In their opposition … was all the fury, terror, animosity and outrage of a displaced group.

During the first decade of the century the medical faculty had not been able to convince the "affiliated hospitals to become true teaching institutions." In the summer of 1913, Vincent negotiated an agreement by which half of the patients at each of the two city hospitals would be available for teaching. But Vincent did not see this as ideal. Later he said, “As to the hospital, it is recognized that effective teaching can be secured only in an institution which is under the complete control of the medical school.”

Vincent knew this would require a full-time faculty. However, he lacked the resources for full-time clinical salaries. You could not expect the current generation of physicians to take a drastic reduction in their standard of living once they had begun to reap the rewards of their hard work.
Nonetheless, he felt he could at least open up some room at the top for a few who shared his image of medical pedagogy. As it turned out, he had to start at the very top with the position of the Medical School Dean.

In late 1912, trustees of the nascent University of British Columbia invited Dean Frank Wesbrook, to interview for a return to his native Canada and to become their first president. Shortly after the faculty resignations of January 1913, Wesbrook was offered the presidency in Vancouver. In February, he accepted the post.

Although Vincent and Wesbrook agreed on their long-term goals, Wesbrook preferred an evolution, not a revolution. There has long been a belief in some quarters that disagreement with Vincent prompted Wesbrook’s departure. Perhaps this may be true, but I cannot muster much sympathy for this opinion. In the closing months of 1912, the two men had worked together on the reorganization and were fundamentally in agreement on its goals. And clearly both the Regents and the President wanted Wesbrook to remain and succeed.

Vincent tried to keep Wesbrook at Minnesota, including an offer of an increase in salary. However, the move back to Canada promoted Wesbrook from Dean to University President. He gained much greater power and the opportunity to launch an impressive new university in his native country. It seems it was an easy choice for him to make. Finally, there was the question of his failing health due to severe hypertension. This may have played into a desire to return to Canada. The illness was to prompt his early retirement after just three years and to claim his life two years later at age fifty.

It is not likely that Wesbrook would have accomplished any more at Minnesota than did his successor, Dean Elias Potter Lyon. Vincent knew Lyon from their years together at Chicago where Lyon trained as a physiologist with Jacques Loeb. When invited to Minnesota, Lyon was the Dean of the St. Louis University Medical School. There he had already witnessed some of the tribulations of reorganization. From the start there was skepticism over his appointment, since he was not an MD.
Nonetheless, Lyon served for 23 years with the confidence of three Presidents and shepherded the Medical School to international prominence. He ensured that the school would be a source of medical specialists as well as practicing generalists. These accomplishments came largely through his faculty appointments and a shift to full-time positions.

Two years after the faculty restructuring, two department heads made offers to accept full-time appointments. First was Dr. James E. Moore, the head of surgery. He volunteered to test the concept of full-time teaching. He said, “The trend in medical education seems to be toward full-time clinical teacher, and this move will afford the university an opportunity to try out this principle without expense. … I shall expect no increase in salary.” Also in 1915, Pediatrics was split off from Internal Medicine as a separate department under Julius Parker Sedgwick. He asked to be given a full-time, salaried appointment as long as he could continue to make a few private consultations.
Over the next two decades Lyon built a remarkable faculty that was responsible for numerous major advances in medicine. This faculty became Lyon’s legacy. A few among the several were: E. T. Bell of Pathology, Maurice Visscher of Physiology, Cecil Watson of Internal Medicine, and Irvine McQuarrie of Pediatrics.

Maybe the most widely known was the surgeon Owen Wangensteen. Wangensteen saw his department as a locus both of outstanding patient care and of advances in surgical techniques. In addition, he viewed it as his responsibility to train, not only another generation of surgeons, but also the next generation of surgical academicians. To this end, working with Maurice Visscher, he required all of his surgical residents to earn a PhD in physiology. Many of their trainees went on to head departments of surgery at other universities. This same philosophy was shared by many other Minnesota department chairmen. Irvine McQuarrie of Pediatrics was another who was also responsible for training numerous future department heads.

In 1914 Vincent became a member of the General Education Board of the Rockefeller Foundation. With this introduction to the mission of the Foundation, which was well in accord with his own views, it is not surprising that in 1917 he agreed to become the Foundation’s President. He remained there until his retirement in 1929.

Upon leaving Minnesota, there was wide-ranging appreciation of his legacy at the University, and he received numerous accolades. Later President Guy Stanton Ford would write,

Vincent forged a loose-knit federation of disparate colleges into a self-conscious, cooperating, and purposeful institution of higher learning. … His administration was a second founding of the University. 16

At Vincent’s departure there were numerous letters from well-wishers both across the country and within the University. Former Dean Wesbrook wrote a very cordial letter that showed no hint of rancor or regret. It seemed that, although the old wounds of the 1913 “massacre” may not have entirely healed,
they were well on the mend. Among the local letters was one from Regent William Mayo with whom he had worked closely throughout his tenure as President. In his letter Mayo wrote:

You came to Minnesota, found a ladies’ seminary with some discordant adjuncts in the way of professional schools. You are leaving a real University and have admiration, respect and affection of all the people of the Northwest.  

GEORGE EDGAR VINCENT was a humanist and an idealist who was impatient for the promises of the Progressive Era. He was a talented administrator with an abundance of self-assurance. But he was also willing to work with the views of others and to accept the onus of his own actions. Ford said, “He was never the autocrat or the manipulator of men. He prepared the way and made it easy for men to follow.”

But it was not always easy. Vincent once summed up his tongue-in-cheek view of a university presidency as, “… a benevolent despotism tempered by assassination.”

I would like to close on a personal note. We are now over a century since Vincent began his reorganization of the Medical School. As a Student, Resident, Medical Fellow, and Faculty Member I have witnessed first-hand 57, over half, of those years. I have been taught by, been acquainted with, and worked alongside many of those who bore the legacy of Dean Lyon and, though them, the impact of Vincent’s aspirations for our Medical School. Notwithstanding Vincent’s intelligence and talents, perhaps we might still conclude that his initial conduct toward the Medical School was draconian. However, I believe that we must also conclude that his underlying philosophy of medical education, his motives, and his goals were wise and far-sighted. On balance, time has shown the value of Vincent’s vision for our Medical School and for this University.

And we must thank him for ‘The 39ers’ and ‘Gown in Town’ faculty dining clubs.

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