

Louis W. Sullivan, MD: An Interview

George A. Dawson, MD

Keyword: Louis W. Sullivan, MD

J Natl Med Assoc. 2010;102:144-147

Author Affiliation: Afrikan American National Institute of Freedom and Science, Harlem, New York.

Corresponding Author: George A. Dawson, MD, Founder/Director, Afrikan American National Institute of Freedom and Science, PO Box 2442, Harlem, NY 10027 (gdawsonhar@gmail.com).

Louis Sullivan, MD, hematologist and founding dean and president emeritus of the Morehouse School of Medicine in Atlanta, Georgia, was born in Atlanta in 1933. As a child of 5 years of age, his family relocated from Atlanta to Blakely, Georgia, because of the depression-era economic woes besetting his family and most other Americans at the time. As he recalled this period, he noted that his father sold life insurance policies for Atlanta Life Insurance. Because business during this era precluded the selling of anything other than basic living necessities, his father had decided to move to Blakely, in southern Georgia, and open a funeral home that catered to the African Americans in the area. His mother taught in public school. However, because of his parents' local activism on behalf of the rural community's African American citizens, she could not work in the local school district and had to commute to another school 40 miles or so from their home in Blakely.

Ultimately, Dr Sullivan and his older brother returned to Atlanta to attend the better-equipped public school. He graduated from Atlanta's Booker T. Washington High School in 1950. Dr Sullivan then attended Morehouse College, where he majored in biology and minored in chemistry and mathematics. He graduated from Morehouse in 1954 with summa cum laude honors. He was accepted into Boston University School of Medicine and completed his medical studies with honors in 1958.

Following medical school, Dr Sullivan was accepted into an internal medicine residency at New York Hospital in New York City, where he was the first African American intern. While there from 1958 to 1960, he studied internal medicine, and his interest in hematology grew. He soon returned to Boston to complete his postgraduate studies at Harvard-affiliated hospitals where he also taught.



In 1975 he was asked to return to Atlanta to help with the founding of the medical school at his alma mater, Morehouse College.

Dr Sullivan served in the first Bush (George H.W.) administration as secretary of health and humans services from 1989 to 1993.

Currently, Dr. Sullivan serves as the chairman of the Sullivan Alliance for the Transformation of America's Health Care Workforce. The group was founded in 2005, and its mission is to increase the number of underrepresented minorities in our health care system so that it reflects the changing dynamics of the American population. He has been awarded more than 50 honorary degrees as a testament to his life's work.

Dr Sullivan is married to Ginger and has 3 adult children, one of whom, a son, is a diagnostic radiologist.

Dawson: Dr Sullivan, how has religion influenced your life and work?

Sullivan: As an Episcopalian, religion has affected me greatly, especially in conjunction with the lessons my parents inculcated in me, that a useful life is a good life and should lead to a life of service. That is, where what you do not only makes a difference for you but also makes a difference in the lives of others. My religion reinforced this concept.

Dawson: Dr Sullivan, at what age did you know you wanted to become a physician?

Sullivan: As you noted above, as a child, my father relocated to southern Georgia to start a funeral home and ambulette business. While there, we met a prominent African American physician named Dr Joseph Griffin of Bay Branch, Georgia, and he was the only physician catering predominantly to African Americans in that area of southern Georgia. He was very busy and successful. In fact, he built a 25-bed hospital and owned half of the downtown square of Bay Branch. As I recall, at some point I mentioned to my parents that I wanted to become a doctor. And so my dad would take me to Dr Griffin's office as often as he could while dropping off patients there. Seeing Dr Griffin in this environment made a tremendous impact on me. So I give thanks to my father for having helped plant the seed of my becoming a physician. Finally, I also had a keen interest in biology and science and in plants and animals, and this I feel laid the ground work for my becoming a physician too.

Dawson: Dr Sullivan, for your formal education your parents sent you and your brother back to Atlanta. Were there any people such as your teachers there who impacted you?

Sullivan: At Booker T. Washington High School we had wonderful teachers. I can recall 3 of them specifically. They were my eighth grade geometry teacher, Mr Martin, my ninth grade chemistry teacher, Mr Xavier Neal, and Mr Phillips, who taught English. These 3 individuals really made an impact upon me. They were all inspirational and taught us the importance of learning and not resting on our laurels. That is, that we should continue to work hard no matter how successful we became.

Dawson: For your undergraduate studies, you attended Morehouse College in Atlanta. Was there any 1 person or persons there that impacted you greatly?

Sullivan: At Morehouse, it was school policy that all students attend daily chapel service for credit. Most hated it and would miss it during the week. But on Fridays there was usually not an empty seat in the chapel. The reason was Dr Benjamin Mays, the president of Morehouse. When he talked, everyone paid attention. He was a very elegant man. He demanded high standards for all of us, and his talks were inspirational and legendary. He would talk about everything: civil rights, humanity, and standards of excellence, that would always inspire us. I recall one famous saying was, "Whatever you do in life, you should do it so well that no man living, dead, or yet to come, could do it better."

Then there was the chairman of the biology department, Dr James V. Birnie, PhD. He was an endocrinolo-

gist who came to Morehouse from SmithKline Laboratories in Pennsylvania.

Dr Birnie was truly inspirational and a great teacher also. Even though my class was only 57 students, 19 of us were premed. Of the 19 premed students, 18 went on to medical school from Morehouse as a result of his tutelage and that of others as well.

Dawson: Following your medical studies at Boston University School of Medicine, you interned in New York City at New York Hospital. Any noteworthy event(s) while there?

Sullivan: Yes, at New York Hospital I was the first-ever African American intern there from 1958 though 1960. It was there that I determined that hematology would be my area of specialization. As I recall, it was, in part, because I had never looked into a microscope until I attended Morehouse. From then on, I was always fascinated by the views the microscope presented of bacteria and cell structures. I felt hematology gave me an opportunity to use the microscope very often. Moreover, as a medical student, I found it extremely interesting how the various blood cells looked under the microscope. I also enjoyed learning about the various blood cell functions and the diseases associated with them such as multiple myeloma, leukemia, and the various anemic disorders, and the fact that they were developing drugs that could potentially cure or treat many patients successfully.

Finally, I felt hematology was one of the few specialties where you could actually quantify things such as blood cell counts, blood volume, and circulation itself.

Dawson: Dr Sullivan, can you recall any interesting case(s) that impacted you in your career to date?

Sullivan: Yes, I remember one particular teenager who presented with advanced acute lymphatic leukemia. Her bone marrow and lymph glands were extensively involved with cancer. Her lymph nodes were particularly large. We treated her with methotrexate, and the results seemed miraculous. Her marrow cleared and the lymph glands returned to their normal state. She lived for several years and led a virtually normal life. There are more cases, but this one really stuck out for me.

Dawson: Dr Sullivan, after you returned to Boston from New York, where you completed your hematology training, you ultimately took your specialty boards. Tell us about your board certification experience.

Sullivan: My experience during my certification process was not too traumatic. Because I've always done well on tests, the board examinations did not take a heavy toll on me. I first tested for internal medicine in 1964 and passed, and I took the first-ever hematology board examination

around 1970 and passed. Let me just say that being board certified does engender a measure of confidence in people's evaluation of your skills and level of knowledge and training. However, not being boarded does not indicate the opposite, for the most part. It seems that some people are just not good test takers but have a depth or fund of knowledge and skills that compares to others who are boarded. But to not take your boards these days will certainly limit your professional advancement.

Dawson: Dr Sullivan, could you please discuss your life's experience with the civil rights struggle of African Americans?

Sullivan: Yes. As a child I can recall instances where the struggles of African Americans were a reality to me and my family. While growing up in Blakely, as I noted before, as a teacher, my mother could not secure employment and had to commute because my father was involved in African American voter registration back then, and this caused obvious irritation to the local white politicians. I can recall one episode when the Klu Klux Klan threatened to march through the African American section of town, and my father instructed the local police chief that they, the African Americans, would be ready if it should happen and they would hold the chief responsible. It did not happen.

My father would have notables from Atlanta to come to Blakely to speak. Attorney John Wesley Dobbs from the Atlanta Voter Registration League was such a person and even the late US Supreme Court Justice Thurgood Marshall came when he was with the National Association for the Advancement of Colored People Legal Defense Fund. Finally, my father established an annual (Slavery) Emancipation Day Parade in Blakely.

As an adult, while I was in my final training period at Harvard, we organized and sent 17 buses from Boston to Martin Luther King's March on Washington, DC, in 1963. And I was reminded of this event during the recent inauguration of President Barack Obama, when my wife and I stood on the mall to watch his address to the nation and world and so that proved to me that things can change, and for the better.

Dawson: I noted earlier your current interest in promoting historically underrepresented minorities access to health professional schools of via the Sullivan Alliance. Tell of your earlier involvement before the alliance began.

Sullivan: Yes. Even though I was 1 of only 4 African American students at Boston University while in medical school, my experience there was excellent. Nevertheless, I saw the need to increase the number of African Americans in the health profession because our community has been, and still is, beset by largely preventable

and treatable conditions. So, as an attending physician there, a group of us (Edgar Smith, David French, and I) started a minority recruitment program for mostly northeast Ivy League schools, except for Yale University and the University of Connecticut, who could not or did not join us for various reasons. As it happened, the program was successful in that the number of African American students increased from 4 to 20 at my school alone. I was then asked to help create a new medical school at my alma mater in Atlanta in 1973. Obviously, I was thrilled to do this because this would be only the second school opened since Abraham Flexner's report of 1910, which closed all but 2 of the then existing African American medical schools. The 2 were Howard University College of Medicine in Washington, DC, and Meharry Medical College of Nashville Tennessee.¹

By this time, it became apparent to me that access was not the only matter to concern ourselves with. There was also the issue of poor unencouraging environments and the lack of financial resources. I can recall in my own youth in Blakely that there were always kids with ability, but because of their environment or financial circumstance they were relegated to their existing poor conditions.

Dawson: Then these episodes later laid the foundation for the Sullivan Alliance's work?

Sullivan: Yes. Correct. In 2003-2004, I was involved with a Kellogg Foundation project that wanted to determine the vagaries of diversity in health care. From this, we noted that in 1950, two percent of American physicians were African Americans. We subsequently discovered that in that time period the number had only increased to 4.6%. From this, we formed the alliance as a way of beginning a process of increasing the numbers farther. The alliance is located at the Center for Joint Political Studies in Washington, DC.

One solution of the 37 recommended was to reinstitute the scholarship programs of the past because American graduates were burdened with upwards of \$200 000 in loan repayments. With the rapid changes in health care financing combined with falling salaries, we felt this was too much and discouraged our best and brightest students. Moreover, as a result of both this financial disincentive and low student interest in the primary care arena, we were 'til now importing health professionals that unfairly deprived their home nations of the needed manpower and, at the same time, short-shrifted American students and their families. As an example, there are 22 000 annual residency slots in the United States; however, there are only 16 000 graduates from American medical schools. This 6000-doctor deficit is made up from the importation of foreign medical graduates.² Would not a less expensive solution to this dilemma be to curtail the foreign brain drain from countries that des-

perately need them to remain there after their education, and focus attention and resources on young Americans?

Another solution we enacted involved the development of multiple state-centered educational consortiums. The purpose of the consortiums is to allow students from the partnered institutions to apply and participate in summer research programs to familiarize them with the biological sciences. For example, in 2005 we partnered the 3 medical schools in Virginia with the states' 5 historically black colleges. And, from what I understand, Nebraska will join the Virginia alliance. We also formed an alliance in 2006 between medical schools in Florida and its historically black colleges. In Florida, there are at least 3 medical schools opening soon. New alliances are being formed or are in discussion in North Carolina (under the leadership of Peggy Valentine, the dean of nursing at Winston Salem State University), Maryland, and Colorado.

Finally, we must invest in our young people. Not to do so leads to social instability, which results in what we see today with the massive warehousing of many of our young people in the nation's prison system because they are caught up in the drug scene or lack the skills to function civilly.

Dawson: In this contentious era of health reform, do you think a public option as advocated by the progressives in this nation will solve the problem of the noninsured and underinsured?

Sullivan: Well, I very much in favor of the health cooperative concept as practiced by the Mayo Clinic, Group Health of Seattle, and Farmers Health Cooperative of Wisconsin, as examples. These cooperatives are all run excellently.

My greatest worry, on the other hand, is that if there is expanded coverage of Medicare and Medicaid to the uninsured and underinsured, physician disenchantment will grow. As we have witnessed declining reimbursements as a result of governmental interference via political influence that is now reflected in below market reimbursement by these government entities, their expanded roles would be devastating to our profession. Already, many physicians are opting out of the Medicare system because of declining reimbursements, for example.

Dawson: As a former secretary of the US Department of Health and Human Services (HHS) during the George H.W. Bush administration, what do you consider some of your greatest accomplishments?

Sullivan: Yes. I would say that the expansion of food labeling so that consumers would be more educated in terms of daily nutritional requirements and caloric content of food stuffs as one of my accomplishments. Before this, only the amount of a particular item was noted. We expanded the labeling by making it more user friendly and sensible. We also fought against and stopped the marketing and sale of a new mentholated cigarette targeting African Americans called "Uptown." We also started the first smoke-free zones at the HHS headquarters. We attempted to get all federal buildings to become smoke-free environments, but we lost this battle.

In terms of gender and diversity commitments, I was proud of the number of female appointees to department level positions, including the first female and Hispanic surgeon general, Antonio Novello, MD, of New York. We also created the Office of Minority Health at the National Institute of Health during my tenure in Washington, DC. We are now trying to elevate the center's status that of an institute.

Dawson: Dr Sullivan, do you have any advice for young physicians about to embark on their medical careers?

Sullivan: I would tell them to achieve the highest level of excellence possible—to always have high standards of integrity. And, finally, to remember that the health profession is a serving profession, and our responsibility is to serve the public and provide good service.

Dawson: Dr Sullivan, thank you for your time.

ACKNOWLEDGMENT

Thanks to Lillian Tellefsen, MS, RPA-C, for editorial assistance.

REFERENCES

1. Flexner A. Medical Education in the United States and Canada; A report to the Carnegie Foundation for the Advancement of Teaching. Bulletin number 4. New York, NY; 1910.
2. Sullivan LW. Sullivan: Shortfall of Professionals Must Be Solved. Roll Call. June 8, 2009. http://www.rollcall.com/features/Mission-Ahead_Health-Care/ma_healthcare/35537-1.html. Accessed September 16, 2009. ■