

History of the Health Sciences

The Watermark

Volume XLV

Number 3 (Summer 2022)

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Submissions for the Watermark:

The Watermark encourages submissions of news and stories about events, collections, catalogues, people, awards, grants, publications, and anything else of professional interest to the members of LAMPHHS. Please submit your contributions in a timely way to Stephen Novak, as e-mail attachments. Visuals should be submitted as jpegs with a resolution of at least 300 dpi if possible. Copyright clearance for content and visuals are the responsibility of the author.

Cover Image: Osler Room, Osler Library of the History of Medicine, McGill Library, 2022. Courtesy of Mary K.K. Hague-Yearl. See page 28 for the story of its recovery.

WATERMARK

Newsletter of the Librarians, Archivists & Museum Professionals in the History of the Health Sciences

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EDITOR'S MESSAGE



The weather at the LAMPHHS annual meeting at Saratoga Springs may have been chilly and sometimes rainy but it could not dampen the warmth we felt at seeing so many of our colleagues face-to-face after three years of separation. For those who couldn't make it, I hope this issue's meeting minutes and the photos by the unofficial LAMPHHS photographer, Stephen Greenberg, convey something of the spirit of the gathering.

I'm happy to announce that Erin J. Torell of the McGoogan Health Sciences Library at the University of Nebraska Medical Center in Omaha has joined us as the new Book Review Editor. We're thrilled that Erin has consented to take on this position and look forward to working with her. If you're interested in reviewing books for *The Watermark* please contact her at <u>erin.torell@unmc.edu</u>

Thanks again to the contributors and the *Watermark* staff for making this issue a reality. Good reading,

Stephen E. Novak Editor, *The Watermark*

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FROM THE PRESIDENT



I think it will not be an exaggeration to say that we all are looking forward to turning the page on the COVID pandemic. However, these long difficult years brought in some extraordinary innovations in medical research, communications, and healthcare that society has been benefiting from as well as disruptions that continue to change the future of work and education. This year marked

the first time LAMPHHS held a hybrid conference and based on the feedback that was shared by in-person and remote attendees it was an overwhelming

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success, with many of you commenting on it proceeding seamlessly and being the best hybrid meeting you attended.

We are indebted to the past president Jennifer K. Nieves for her outstanding leadership during the past two trying and stressful years. She was always ready to step up to the challenges, to encourage, and to support her teams. We are grateful to the Program Committee: Dan Cavanaugh (Chair), Nancy Dupre Barnes, Brooke Fox, Brooke Guthrie, and the Local Arrangements Committee: Elise DeAndrea (chair), Cara Howe, Nicole Topich, Gabrielle Barr, Alison Lotto, Russell Johnson, and Micaela Sullivan-Fowler for doing an outstanding job planning and running this event, and for enabling both remote and onsite attendees to participate in discussions and have an equally engaging experience. Our membership was extremely appreciative for the hybrid option and expressed interest in it being the default going forward, allowing even those who are unable to travel due to various reasons to remain part of our nurturing and welcoming community. Your feedback will be leading our decisions as we start planning for the 2023 Ann Arbor meeting.

While all presentations were excellent, the session on hazardous materials was identified as one of the most helpful and became an impetus for convening a new ad hoc committee, chaired by Brooke Fox, which will be working on developing guidelines for archives and libraries to deal with hazardous materials in their collections. This will benefit both our membership and that of other auxiliary communities, in particular the Society of American Archivists' Science, Technology & Health Care Section (STHC).

The other initiative where LAMPHHS will be partnering with the STHC is led by Steering Committee member, Nicole Topich, and will focus on updating the HIPAA Resource Page (<u>http://iis-</u>

exhibits.library.ucla.edu/alhhs/hipaa_sthc_alhhs.html) and creating a general resource page with a bibliography and links for section members and the public. Both committees are looking for volunteers, please reach out to Nichole and Brooke if you are interested in participating.

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The recently established Education Committee which includes Anna Schuldt (chair), Judy Chelnick, and Stephen Greenberg is already at work identifying topics for workshops and other events based on the preferences that you shared. If you have any ideas or suggestions, please contact committee members.

The ongoing changes in how we run our annual meetings, and how our organization conducts business after officially receiving a 501(c)(3) organization status resulted in the need to review, update, and combine the Blue Book/Guidelines for the Annual Meeting and the Procedures Manual both of which were developed by LAPMHHS predecessor organization, ALHHS more than 10 years ago. I will be leading this project with the help of Keith Mages, LAMPHHS Vice-President, other Steering Committee members, and we will be consulting with many of you.

These are just some of the exciting initiatives that will be helpful for our job duties, assist in streamlining organizational processes, and empower us in our professional activities.

Are you looking to lend a hand? Like most professional organizations LAMPHHS depends on the talents of our members to ensure that the organization's work is successfully completed for the benefit of all of us. We are seeking volunteers for several committees: please email me if you are interested: polina.ilieva@ucsf.edu

Wishing everyone an enjoyable summer!

Polina E. Ilieva President

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LIBRARIANS, ARCHIVISTS, AND MUSEUM PROFESSIONALS IN THE HISTORY OF THE HEALTH SCIENCES 2022 HYBRID BUSINESS MEETING

APRIL 21, 2022, SARATOGA SPRINGS, NY, 12:30 P.M. EST

Welcome (Jennifer Nieves)

Jennifer welcomed everyone to the first hybrid LAMPHHS Business Meeting and reminded everyone about Zoom etiquette.

Adoption of Agenda (Jennifer Nieves)

Steve Novak motioned to adopt the agenda, seconded by Alan Hawk. Agenda adopted.

Adoption of 2021 Business Meeting minutes (Jamie Rees)

Minutes from the 2021 Business Meeting were distributed via email to the membership on April 17, 2022. No questions or comments were raised. Jamie Rees motioned to approve the minutes, seconded by Steve Greenberg and Arlene Shaner. Minutes adopted.

President's Report (Jennifer Nieves)

As I pass the torch to the next president, I want to take this opportunity to express how honored I am to have served as president of this dedicated group of librarians, archivists, and museum professionals. The last two years have seen much turmoil, disruption, and uncertainty in our everyday lives. But through it all the members of LAMPHHS have forged on to continue the sense of professional community that harks back to this organization's beginning.

The merger of ALHHS and MeMA has proven to be a wise and beneficial venture. It seems that we have become accustomed to the new acronym. And thanks to our expert webmaster, a search for L- A -M- P- H- H -S no longer results in a list of lighting stores in your area! Plans to develop programming that includes document, book, and artifact concerns are evolving, and each year we will see a more diverse offering.

Our first virtual meeting in 2020 was a very successful experiment and arranged by an adventurous group of volunteers. The 2021 virtual meeting followed suit, learning from

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the experiences of the 2020 LAC. This year's meeting, yet another experiment in providing a hybrid experience, is sure to be a success. As a virtual world becomes our reality, we may find that our future meetings will feature some sort of virtual option.

When beginning to plan for the 2022 meeting, I had a peculiar sense of disconnection from our meeting site, mainly because we have no members in the immediate area. Fortunately, after checking a few places within an hour of Saratoga Springs, Elise DeAndrea and Cara Howe from SUNY Upstate in Syracuse, stepped forward and revealed that they are both familiar with Saratoga Springs. Nicole Topich from Weill Cornell Medicine was recruited and voila...we had a Local Arrangements Committee! Elise, Cara and Nicole have effectively worked with venues holding to COVID-19 protocols, limits on the number of participants, and whether or not to require proof of vaccination! Who would have thought those would even be considerations?

Our program this year is the result of hard work by Dan Cavanaugh, Nancy Dupre Barnes, Brooke Fox, and Brooke Guthrie. They've included a wide range of topics that have something for everyone, from documenting illness to digital humanities and the history of the asylum, from Andreas Vesalius to creating a medical museum. I'm very happy to see that there will be a panel discussion on hazardous materials in our collections. This is a topic that is relevant to medical artifacts collections as well as book and archival collections. You just never know what is lurking in the next Hollinger box!

This year it was decided that the Technology Committee should serve as a subcommittee of the Program Committee, in order to effectively coordinate the transition between in-person presenters and those presenting via Zoom. Many thanks to Alison Lotto and Gabrielle Barr for working with the hotel techs to make this happen.

As shown by the nominations and submissions received by the Awards Committees, our membership is actively publishing and continuing to make a difference within their professions. Many thanks to Megan Keller Young, Emily Brown, Gino Pasi and Bob Vietrogoski for serving on the Recognition Committee; to Carrie Meyer, W. Bruce Fye, Erin Torell and Toby Appel for serving on the Publication Awards Committee.

Travel scholarships were not a popular feature this year perhaps due to the uncertainty of travel, however, Steve Greenberg and Adam Johnson gave it a good try. Many thanks to both for agreeing to serve on the Travel Scholarships Committee.

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In conclusion, I offer a hearty welcome to incoming President Polina Ilieva, Vice President Keith Mages, Secretary Carrie Meyer, and Members-at-Large Erin Torell and Rebecca Williams. And many thanks to Jamie Rees, our current Secretary, our rotating Members-at-Large, Judy Chelnick and Christine Ruggere for their service.

Stay healthy, safe, and continue doing what you all do so well!

Jennifer K. Nieves President, LAMPHHS

Discussion: No questions or comments raised.

Treasurer's Report (Tegan Kehoe)

We are in good shape financially. Our fiscal year is now the calendar year, so this report covers January through December 2021. The final paperwork confirming LAMPHHS's 501(c)3 nonprofit status arrived in 2022, but the date of incorporation was April 1, 2020.

Our total expenses in 2021 were \$4,699.38. Some of our expenses are somewhat different because of the pandemic, but not in a way that impacts the organization's financial health. Our biggest expense was the first portion of our web design contract, which was an expected expense. We also made \$500 donations to three pandemic relief funds for workers in the libraries, archives, and museums fields.

Our total income in 2021 was \$4,650. The organization's assets were transferred from the old ALHHS bank account to a LAMPHHS bank account in August. The assets totaled \$48,983.31 at the time of the transfer. We have not had a professional do an independent review of our accounts in some years, and I hope to prioritize finding a new person to do this in the coming year. In 2021 we nearly broke even with a net loss of \$45, and total assets as of December 31 were \$48,406.72.

So far, we are on track to have a good year financially in 2022. Because we purchased the awards for the two years that the conference was all-virtual, the 2022 awards expenses were significantly higher than normal, but we had not spent that money in the past two years. Our conference expenses have been reasonable as compared with other years with in-person conferences.

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501(c)3 status

All of the remaining paperwork with the IRS and with the State of Massachusetts to register us as a nonprofit in good standing was completed this fall and winter. We received the last piece of confirmation we needed from the state at the beginning of this month. As a review, the ALHHS had incorporated as a nonprofit in 2013, thanks largely to the efforts of Arlene Shaner. The committee of members and officers that managed the merger between ALHHS and MeMA had decided that we would incorporate as a new nonprofit that is legally the successor to ALHHS, rather than changing ALHHS's name. This is convenient since ALHHS's tax-exempt status was revoked last year due to a few years of missing paperwork, which would have been during the merger and early part of the pandemic.

The structure of our incorporation should make the legal aspect of officer transitions a bit easier than in prior years. I am currently the resident agent for LAMPHHS, meaning certain legal paperwork goes to my business address. This is called the registered agent in some states. However, the resident agent role is not necessarily part of the treasurer role—if, after my term ends in a few years, the next treasurer is not in Massachusetts, another member in Massachusetts can take on the role.

Discussion: No questions or comments raised.

Membership Report (Jamie Rees)

4/21/2022 as of noon Eastern time:

For 2022

Membership renewals for 2022 (October 1, 2021- April 20, 2022): 168 New Members who joined in 2022 (October 1, 2021-April 20, 2022): 17 Total members for 2022 through April 27, 2022: 185 (168 renewing, 17 new members)

For 2021

Membership renewals for 2021 (October 1, 2020- April 27, 2021): 153 New Members who joined in 2021 (October 1, 2020-April 27, 2021): 19 Total members for 2021 through April 27, 2021: 172 (153 renewing, 19 new members) 2020 members who have not yet renewed in 2021 as of April 30, 2021: 79

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For 2020

Membership renewals for 2020 (October 1, 2019-March 31, 2020): 175 ALHHS/MeMA Members whose 2019 dues payment was credited to 2020: 11 New Members who joined in 2020 (October 1, 2019-March 31, 2020): 19 Total members at end of ALHHS/MEMA fiscal year, 3/31/20: 205 2019 members who had not yet renewed in 2020 as of December 31, 2020: 26 Total 2020 members at end of LAMPHHS fiscal year, 12/31/20: 236 (191 renewing, 11 MeMA transfers, 35 new members, - 1 death)

For 2019:

Membership renewals for 2019 (October 1, 2018-March 31, 2019): 145 New Members who joined in 2019 (October 1, 2018-March 31, 2019): 26 Total members at end of fiscal year, 3/31/19: 171 Total members for 2019 through April 15: 191 (162 renewing, 29 new members) 2018 members who have not yet renewed in 2019 as of April 15th: 24 MeMA members transferred to ALHHS in June 2019: 28 MeMA members who were also 2019 ALHHS members: 11* *Members who had paid dues to both ALHHS and MeMA in 2019 had their 2nd dues payment credited for 2020 Total 2019 membership as of 12/31/2019 is: 230 (166 renewing, 28 MeMA transfers, 36 new members)

For 2018:

Membership renewals for 2018 (October 1, 2017-March 31, 2018): 144 New Members who joined in 2018 (June* 1, 2017-March 31, 2018): 17 Total members at end of fiscal year, 3/31/18: 161 Total members for 2018 through April 30: 170 2017 members who have not yet renewed in 2018 as of April 30th: 21 Total 2018 membership as of 12/31/2018 is: 192 (153 renewing, 39 new members) *New Members who joined after June 2017 were credited to 2018 membership

Overall, we've retained members well. The losses in 2020 were likely due to the COVID-19 pandemic and the resulting downturn in the economy. MeMA retention has been solid—exact numbers are tricky because of dual members.

Discussion: No questions or comments raised.

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Communications Committee Report

a. Committee and Listserv Report (Jamie Rees)

Members: Jamie Rees (Chair); Andy Yamazaki, Tara Wink, Anna Schuldt (Social Media); Stephen Novak (Watermark); Russell Johnson (Website).

Committee Charge

The purpose of the committee is to manage the publicity activities of the organization as a way to share information among current LAMPHHS members and the public.

The Committee is responsible for the following activities:

- Manage and assess the ongoing development of LAMPHHS's use of social media.
- Manage and assess LAMPHHS's existing and future publications, including Watermark, and publications that may result from conference sessions.
- Seek and implement new means of communicating with members and non-members as needed.
- Solicit feedback as needed on LAMPHHS communication and outreach initiatives.
- Oversee LAMPHHS's branding, including reviews as needed and any necessary refreshing.
- Ensure that content on the LAMPHHS website is accurate and current.
- Work with the LAMPHHS Treasurer on joint marketing initiatives and general communications with members.
- Advise Steering on matters related to communications.

The Committee consists of up to **7** members appointed by the LAMPHHS Secretary. The committee members should have experience with or an interest in outreach activities and should reflect the diversity of the LAMPHHS membership. Committee members shall serve two-year terms, and they may be reappointed for a second term.

Committee Activities

Since the creation of the committee in 2021, its activities have been limited. The communications plan that was approved is very ambitious, which has inhibited its

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implementation. The full plan needs to be pared down to better fit our organization. The listserv, *The Watermark*, and the website are well-established and are the primary methods for communication within the organization. The listserv continues to be the primary forum for discussion and promotion of member events. In the past year, we have received 5 outside research requests that were forwarded on to the membership. Our social media accounts have been used to promote the organization's own events and deadlines, but are underutilized as tools to promote the events, scholarship, and conversation of our members. Going forward, introducing these accounts as an additional resource for our members would make them more useful.

2 positions in the Communications Committee remain unfilled.

b. Website Administrator and Listserv Report (Russell Johnson)

Russell Johnson, LAMPHHS website administrator rjohnson@library.ucla.edu 4/12/2022

Since various kerfuffles led to our previous **alhhs.org** name being poached in 2019, we have operated the **LAMPHHS website** under the unaliased, "actual" URL on a hobblingalong server at UCLA: <u>http://iis-exhibits.library.ucla.edu/alhhs/index.html</u>

We load plenty of metadata tags into the HTML coding of our web pages, so a Google search of the term "LAMPHHS" (without quotes) favors links to our website.

Older, pre-LAMPHHS components of the website were not deleted. Some documents (such as lists of past officers and pages for annual meetings) are linked from the LAMPHHS pages. Others were not deleted, just hidden from public view and available for archiving. The original website continues to chug along and fulfill needs.

The LAMPHHS Website Task Force, chaired by Sarah Alger and Beth DeFrancis Sun, was formed in 2019 during the ALHHS/MeMA merger to secure a new domain name (lamphhs.org), select a host utility, hire a designer, and appoint members to a management group for LAMPHHS. As the current website administrator (until the new site is activated), I served on the LAMPHHS Communications Committee, chaired by Jamie Rees. Once the new website is activated on a commercial server, it will replace the one hosted by UCLA since 2001, and I will step down as website administrator.

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c. Social Media Report (Jamie Rees)

Overall, the number of people following LAMPHHS social media accounts has risen, while the number of posts and interactions are down. As of April 20, 2022, the LAMPHHS Facebook page has 426 "likes", and has 454 "follows." There are 101 members of the LAMPHHS Facebook group, a small increase over last year's 96. The Twitter account has 132 followers (up from 118) and we follow 21 health-related cultural organizations, professionals, and scholars.

The Social Media Committee met in June 2021 to discuss a potential list of observance days, but further discussions were stymied by difficulty in finding meeting times where all members could meet.

In summary, there is room for growth regarding posting and engagement on all social media platforms we maintain, but our audience numbers are slowly increasing and there is great potential here as a resource for the organization.

d. The Watermark Editor's Report (Steve Novak)

Publication: Four issues of *The Watermark* (v.44, n.3-v.45, n.2) have been published electronically. Issues have ranged from 29 to 41 pages with an average of 33 pages per issue.

Personnel: Stephen Novak, Editor; Jack Eckert, Associate Editor; Arlene Shaner, Associate Book Review Editor; Brooke Fox, Layout Editor. We sadly lost Pat Gallagher, our long-time Book Review Editor, late last year. Pat was essential in making sure books were acquired for members to review and then for riding herd on the members to make sure they got their reviews in on time. She is greatly missed.

We are happy to announce that Erin Torell, Rare Books Librarian at the McGoogan Health Sciences Library, University of Nebraska Medical Center, has volunteered to be our new Book Review Editor. We look forward to working with her.

Russell Johnson, as webmaster, has been responsible for the timely inclusion of each issue on the LAMPHHS website.

Lastly, though not "personnel," it is LAMPHHS members who make *The Watermark* possible though their timely submission of articles.

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Advertisers: The number of advertisers remains at four. The financial aspects of this will be found in the Treasurer's Report.

Respectfully submitted, Stephen E. Novak, Editor, The Watermark

Discussion: No questions or comments raised.

Website Task Force Report (Sarah Alger)

We have been working with design firm Visfire on designs for the main pages. Next steps are for them to submit one or two more; for us to look through each with a finetooth comb to submit our changes; for Visfire to train us how to build new pages within this WordPress site; and for us to begin uploading real content. Now is when the bulk of the work begins, thanks in large part to the decades of Watermark issues that will need to be uploaded.

Sarah Alger and Beth DeFrancis Sun have been co-chairs, and Lucy Ross has been helping informally. Beth has announced that she wishes to step down from being co-chair, so we are seeking a replacement.

Respectfully submitted, Sarah Alger and Beth DeFrancis Sun

Discussion: No questions or comments raised

Local Arrangements Committee Report (Elise DeAndrea, Cara Howe)

Committee Members: Elise DeAndrea, Chair (SUNY Upstate Medical University); Cara Howe (SUNY Upstate Medical University); Nicole Topich (Weill Cornell Medicine); Russell Johnson, Advisor (UCLA); Micaela Sullivan-Fowler, Advisor (University of Wisconsin)

Meeting Venue Site

-Saratoga Springs, NY following AAHM meeting site

-Main difficulty was planning a conference in-person and virtual during pandemic.

-Challenges:

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- Finding a large enough venue that would allow a group with COVID restrictions in a smaller sized city

-Venue that would allow food to be served

-Venue also had to have A/V capability to handle streaming for our virtual attendees

-Possible sites: Saratoga Springs Public Library and Skidmore College told us to check back in January as it was too far in advance for them to commit to booking with COVID concerns.

-Other venue spaces were too small and/or didn't have A/V. We asked AAHM to help find a room at the hotel, at that time there was no space available. They also looked into another venue downtown, but it was not available.

-In January, Public Library was using their meeting space, but it was quickly booked by library itself for programming on the 21st. Skidmore had decided not to book any events for the spring.

-Checked with Hall of Springs in Saratoga Spa State Park, they didn't have A/V equipment but referred us to their sister organization, Saratoga National (golf course). Agreed to be venue, but was expensive.

-Right before we made a deposit, Carly Spiewak contacted me stating meeting room became available at Saratoga Hilton for 50 people. We went with that instead as it was cheaper and more convenient.

Accommodations

-Rooms were reserved at the Saratoga Hilton Hotel by AAHM

-Rate was \$199/night, 7% sales tax, 6% occupancy tax

Wednesday Dinner

-Secured Longfellows Restaurant for Wednesday evening dinner, other venues were too small. Capacity limited to 60 people.

<u>Tours</u>

-4 tours originally agreed. (Saratoga Spa State Park, Saratoga Springs History Museum, NYS Military Museum, Skidmore College Archives). Skidmore Archives dropped out later.

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-Cost of tours generously covered by anonymous donor.

-Saratoga Springs History Museum and NYS History Museum tours planned for Wednesday 20th while Saratoga Spa State Park planned for Thursday the 21st after the annual meeting.

<u>Attendance</u>

- 34 In-Person registrants
- 57 Virtual registrants
- 33 dinner attendees

Registration Fees

Decision was made by larger LAMPHHS group that cost for both in-person and virtual attendees would be the same based on fact that setting up A/V takes a lot of time, effort, and coordination.

- Full Member: \$60.00
- Non-Member: \$75.00
- Student Member: \$45.00
- Student Non-Member: \$60.00
- Dinner: \$40.00

<u>Notes</u>

An update to guidelines and procedures for planning committees would be a big help for future committee members, as the current procedures are very out of date.

Big thank you to Cara Howe and Nicole Topich for being on the committee and assisting to plan everything, also thank you to Russell Johnson (and other LAMPHHS members) who always had helpful advice through the whole process.

Elise DeAndrea LAC 2022 Chair

Discussion: No questions or comments raised.

Program Committee Report (Dan Cavanaugh)

The 2022 Program Committee includes: Brooke Fox (Waring Historical Library, Medical University of South Carolina), Nancy Dupre Barnes (Independent Consultant), Brooke

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Guthrie (Duke University Libraries), and Dan Cavanaugh (Claude Moore Health Sciences Library, University of Virginia) as Chair.

The Committee held its first meeting in September and continued to meet monthly until the Annual Meeting in April. In our early meetings, we analyzed the results of a survey about the 2021 Meeting and came to the following conclusions:

- 1. There was interest in having a hybrid meeting with in-person and remote components.
- 2. We did not see any strong demands for a particular program theme or keynote speaker besides a request to not have a conference centered on the COVID-19 pandemic.

In the fall of 2021, we hoped to have a hybrid meeting, but we wanted to be ready for a fully remote one in case the pandemic prevented travel.

The Program Committee with the assistance of the Communications Committee solicited proposals for presentations via the LAMPHHS listserv in October 2021, December 2021, and January 2022. The calls for papers were also shared through the Watermark, the LAMPHHS Facebook page, and Twitter. We received 12 presentation proposals and we scheduled 11 for the meeting. One presenter withdrew their proposal in February 2022. 8 of the presentations featured projects that "fostered a renewed commitment to a career working with historical health sciences collections." 3 of the presentations were part of a special panel on handling hazardous materials.



Keynote speaker Dr. Jeanne Abrams. Photo: Stephen Greenberg

We were excited that Dr. Jeanne Abrams accepted our invitation to give the keynote address, "Revolutionary Medicine: The Founding Mothers and Fathers in Sickness and in Health." The Committee invited her because we thought the address would be a good fit for Saratoga Springs, New York—a location with significant connections to

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the history of the U.S. War of Independence.

Between January and April, representatives from the Program, Local Arrangements, and Technology committees met monthly to coordinate our work. Existing guides for planning the annual meeting were designed for an in-person event and did not suit the hybrid format very well. The additional coordination helped us keep up-to-date on each other's work and address challenges associated with the hybrid format.

Finally, the Program Committee sent out a survey on the LAMPHHS listserv to determine the membership's interest in a remote social event. The results of the survey convinced us not to hold this kind of event.

Discussion: No questions or comments raised.

Technological Arrangements Subcommittee (Alison Lotto)

Members: Alison Lotto, Gabrielle Barr

The work of the Technology Committee to manage this hybrid conference has been challenging and engaging. Our main priorities for the conference were maximizing the experience of both the in-person and virtual attendees and making sure that the conference ran as smoothly as possible. Through research into best practices for hybrid conferences, we were able to work with the AAHM planning team and hotel AV services to provide the technology needed for a hybrid environment. We used a meeting OWL, a large screen and two computers provided by the vendor to stream the meeting zoom for the in-person audience and record the in-person presenters for the zoom audience.

The tech during the conference was run by Alison Lotto and Dan Cavanaugh (Program Committee Chair) in person and by Gabby Barr and Brooke Guthrie (Program Committee) virtually. This coordination was fruitful and allowed for a fairly even division of labor. The conference was recorded for LAMPHHS members who could not attend, and we will work on the best way to make this available. Overall the tech went quite smoothly, with good feedback from in-person and virtual attendees during the conference. As an experiment in hybrid meetings, the Technology Committee is happy with how things turned out and will provide guidance for future hybrid meetings.

Discussion: No questions or comments raised.

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Nominating Committee (Lucy Waldrop)

The 2022 Nominating Committee was composed of Lucy B. Waldrop (Duke), chair; Emily R. Novak Gustainis (Harvard); and Dominic W. Hall (Harvard). We advertised the open positions through LAMPHHS' social media accounts, the listserv, and *The Watermark.*

The following slate was proposed:

- Keith Mages for Vice President
- Carrie Meyer for Secretary/Clerk
- Nicole Topich and Rebecca Williams for Officers-at-Large

The election held from February 14, 2022 to March 14, 2022, and the candidates ran unopposed. Ballots were sent out to 173 members. Of the 173 ballots, 95 votes were cast (55%). The ballot was created and managed by Emily Gustainis. Emails were sent to all of the candidates prior to the results being announced at the annual meeting. The new officers' terms will begin at the end of the 2022 LAMPHHS Annual Meeting. Congratulations!

Thank you to the committee members for their service and to Tegan Kehoe for answering membership questions throughout the election.

Discussion: No questions or comments raised.

Publications Awards Committee Report (Carrie Meyer)

The 2022 Publication Awards Committee includes: Erin Torell (McGoogan Health Sciences Library, University of Nebraska Medical Center), Toby A. Appel (Retired John R. Bumstead Librarian for Medical History Yale University), W. Bruce Fye (Emeritus Professor of Medicine & History of Medicine Mayo Clinic), and Carrie Meyer (McGoogan Health Sciences Library, University of Nebraska Medical Center) as Chair.

The three categories where nominations were solicited included monographs published by academic or trade publishers, articles published in journals, trade, or private periodicals of recognized standing, and online resources produced predominately by LAMPHHS members.

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While the criteria for submission and selection remains the same as previous years, the winners in 2022 and forward will receive the newly named LAMPHHS Patricia E. Gallagher Publication Award.

Four nominations were received for the 2022 cycle. By agreement of the committee: Paula Summerly is the 2022 Best Article recipient for the co-authored article "The life and Legacy of William Keiller (1861-1931), Anatomist, Artist and Curator" published in the Journal of Medical Biography, 2021, vol. 29(2).

Keith Mages, Nicole Milano, and Diane Delgado are the 2022 Best Online Resource recipients for "From Snake Oil to Social Media: Drug Advertising and Your Health" that is freely accessible online at <u>https://library.weill.cornell.edu/snakeoil</u>.

No nominations were received for the Best Monograph Award.

Respectfully submitted, Carrie J. Meyer, Chair 4/18/2022

Discussion: No questions or comments raised.

Recognition Awards Committee Report (Megan Keller Young)

The Recognitions Committee consisted of Emily Brown, Megan Keller Young (chair), Gino Pasi, and Robert Vietrogoski.

2022 Recognitions Committee process report

- Sent the call for nominations out to the LAMPHHS listserv, social media, and the fall issue of the Watermark. The call for the Merit Award was also sent to the SAA STHC, ALA, ACRL, and MEDLIB-L listservs.
- Send calls late October and early December, with the deadline mid to late January.
- Met virtually to discuss nominations and choose winners in early February.
- Follow-up with winners to see if they were attending or where to send their award.
- Follow-up with nominators to see if they would like to give brief 1-minute remarks at the awards ceremony.

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Notes:

We were asked if nominations for the Merit Award could come from a non-member. The way the procedure in the manual is currently written, non-members can nominate other non-members. Steering and Recognitions agreed the nomination should come from at least one LAMPHHS member.

Lisabeth M. Holloway Award

The two nominations the committee received were for Patricia Gallagher (nominated by Lisa Mix and Arlene Shaner) and Barbara Niss (nominated by her Mount Sinai colleagues Molly Seegers, Michala Biondi, Stefana Breitwieser, and Andrew Shultz). After consideration, the committee unanimously decided both nominees were deserving of the award.

Recognition of Merit Award

The committee received one nomination for Dr. Joseph Brain from the staff at the Center for the History of Medicine at Harvard's Countway Library. After consideration, the committee decided to award the Merit Award to Dr. Brain.

Discussion: No questions or comments raised.

LAMPHHS Travel Grant Committee Report (Steve Greenberg)

The committee received no qualified applications for this grant cycle. Consequently, no grants were awarded.

A single application was received, but the applicant was neither an early career professional, a student, nor a LAMPHHS member. The Committee recommends that the membership requirement be added to the website and not just noted in the application form.

I would like to take this opportunity to thank the "Committee," (Adam Johnson at Sindecuse Museum of Dentistry) for his work in this matter.

Respectfully submitted, Stephen Greenberg

Discussion: No questions or comments raised.

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Archives (Jodi Koste)

Unable to attend. The ALHHS/LAMPHHS Archives are safely stored in Virginia and accessible if any members need access. They were accessed several times this year for photos and information for memorials and awards this year. Discussion: No questions or comments raised.

Old and New Business

a. Incoming President (Jennifer Nieves, Polina Ilieva)

Jennifer Nieves welcomed Polina Ilieva as the new president of LAMPHHS, and passed on the ceremonial mask, hand sanitizer, Alka Selzer, lens cleaners, sunscreen, and homemade aluminum foil gavel.



Passing the Gavel: Outgoing President Jennifer K. Nieves passes ceremonial mask, hand sanitizer, Alka Selzer, lens cleaners, sunscreen, and homemade aluminum foil gavel to new LAMPHHS President Polina Ilieva. Photo by Stephen Greenberg.

Respectfully submitted,

Jamie Rees LAMPHHS Secretary Discussion: No questions or comments raised.

b. Next Year's Conference—Ann Arbor, Michigan

We need volunteers: Program Committee, Local Arrangements Committee.

c. Education Committee

Call for volunteers: chair and members of the new Education Committee.

Adjournment (Jennifer Nieves)

Jennifer motioned to adjourn, seconded by Steve Greenberg. The meeting is adjourned at 1:01 p.m. EST.



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PHOTOS FROM THE ANNUAL MEETING

Photographer: Steve Greenberg



Barbara Niss receives the 2022 Lisabeth Holloway Award from Carrie Meyer.



Judy Chelnick finally receives her 2020 Lisabeth Holloway Award.



Carrie Meyer (I.) presents 2022 Publications Award for Best Online Resource to Nicole Milano and Keith Mages.



Audience



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Hybrid Steering Committee

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MEMBER PROFILES



Name: Carrie Meyer, MA, MA

Member of LAMPHHS since: 2021

Hometown: Collierville, TN

Current Employer and Position: Assistant Professor/Head of Special Collections and Archives, McGoogan Health Sciences Library, University of Nebraska Medical Center

Current LAMPHHS Secretary (2022-2024)

Education: BA, Art History, Rhodes College, Memphis, TN; MA, Museum Studies, Baylor University, Waco, TX; MA, History, University of Nebraska at Omaha, Omaha, NE

Professional interests: Museum curation, material culture preservation (especially textiles), health humanities, historic preservation

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Other facts, interests, or hobbies: I live with my husband (Josh), two human kids (Owen and Everly), and three feline fur babies (Pepper, Skittles, and Casper). I love to read, cross-stitch, and build Lego kits. I volunteer each spring as a judge for National History Day and year-round with Operation Christmas Child.



Name: John Rees

Member of LAMPHHS since: 2002? It's been so long the memory fades!

Hometown: Richmond, VA

Current Employer and Position: National Library of Medicine, History of Medicine Division, Archivist and Digital Resources Manager

Education: MA, Southern Studies, University of Mississippi; MLIS, Archival Enterprise, University of Texas-Austin

Professional interests: I manage all the processing, description, and collection management activities in our unit, but also spend a good deal of time as the product owner for our new-ish ArchivesSpace, developing born digital collections policies and workflows, and working with our Digital Repository Team where I used to do a lot of systems architecture and data modeling work. I've since started dabbling in data science/natural language processing (I passed a class!) as applied to extracted text from born digital archives. I'm always interested in archival appraisal and making meaningful acquisition choices for the library.

Other facts, interests, or hobbies: Too many hobbies! We have teen and tween boys at home, so I'm always chasing them around for school, Scouts, swim team, golf, and basketball. I enjoy road and mountain biking, fishing and hunting, sailing, backpacking—any outdoor activity really. We love being close to both the beaches and mountains for vacationing here in the Mid-Atlantic, and travel frequently to Richmond and Chicago-land/Wisconsin to visit our families. I prefer JO#1 not Old Bay on my crabs, and grapefruit vs. orange crushes.

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NEWS FROM THE HISTORY OF MEDICINE DIVISION, NATIONAL LIBRARY OF MEDICINE

The NLM Reading Room remains closed to the public until further notice

Division staff continue to be available to support you in your research and can be reached via the <u>NLM Support Center</u> via the "Write to the Help Desk" blue button. Additionally, NLM online collection resources remain available, including <u>NLM Digital</u> <u>Collections</u> and <u>PubMed Central</u>, and NLM continues to provide interlibrary loan (ILL). For the latest NLM ILL service information please see this <u>website</u>. For the latest NLM Reading Room information check <u>here</u>.

New finding aids platform coming soon

The NLM History of Medicine Division is replacing its current finding aids discovery platform with a new platform using ArchivesSpace later this fall. We invite you to explore our Beta soft release in the meantime by visiting its temporary URL <u>https://archivesspace.nlm.nih.gov</u>. Please direct comments to John Rees at <u>reesj@nih.gov</u>.

NLM Welcomes Applications to its Michael E. DeBakey Fellowship in the History of Medicine for 2023

Complete details are <u>here</u>. Applications due by September 30, 2022. During this cycle, supported research can take place onsite at the NLM as well as remotely using NLM digital resources. This innovation marks a new and exciting chapter in the program, the overall development and impact of which is discussed in "<u>History with Heart—and</u> <u>Impact: The National Library of Medicine Michael E. DeBakey Fellowship in the History of Medicine</u>."

The NLM Web Collecting and Archiving Working Group continues to <u>identify and</u> <u>select web and social media content</u> documenting the Coronavirus disease (COVID-19) pandemic as part of NLM's <u>Global Health Events web archive</u> collection.

The collection now includes 14,500+ publicly available Seed URLs representing 4.19 terabytes of data, and 19,900+ URLs nominated to date. Nominations for content to include in NLM's Global Health Events collection remain welcome via <u>nlmwebcollecting@nlm.nih.gov</u>.

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Next NLM History Talk

Tune in for the next NLM History Talk, on Thursday, July 14, at 11am ET. Join us to welcome Samuel Thrope, PhD, Curator, Islam and Middle East Collection, National Library of Israel, Islamic Medical Manuscripts in the National Library of Israel Collections who will speak on <u>Islamic Medical Manuscripts in the National Library of Israel</u> <u>Collections</u>, offering a guided tour of these collections, focusing in particular on rare and unique manuscripts that can shed light on the NLM's own collection, which is among the best in the world. Look for an interview with Dr. Thorpe on Circulating Now, and watch previously NLM History Talks in the <u>NIH Videocast archive of past NIH History of Medicine programs</u>.

"The Promise of Pathways in Public Service"

<u>Recently published</u> in *Experience Magazine*, a publication of the Cooperative Education & Internship Association, this article describes the interagency value of the Office of Personnel Management's Pathways Program as the NLM History of Medicine Division team has achieved it through our work with and mentorship of Pathways interns of diverse backgrounds and academic interests. This cohort of aspiring young professionals has contributed measurably to connecting NLM collections and programs to diverse research constituencies of both the humanities and bio-medical sciences, and to the public overall. In so doing, their public service experiences have been valuable for their learning and employment, indeed in both their personal and professional lives.

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REPOSITORY NEWS

News from the Library and Center for the History of Medicine and Public Health, The New York Academy of Medicine



Virtual Visit: The War on Drugs

Virtual visits are short video introductions to the Library's collections. Our series continued on May 13 with "<u>The War</u> <u>on Drugs</u>," highlighting NYAM's 1944 report on marijuana amid the demonization of drug use in the 20th century, and tied to its Then and Now event on harm reduction the following week.

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Spring Library Events



On May 16, the Library presented the second of its new 175thanniversary series Then and Now, using history to help understand current concerns. Working with NYAM's Division of Community Program & Policy Solutions, we presented a panel discussion on "<u>Drug Policy And Harm Reduction</u> <u>Services</u>," featuring workers on the front lines of harm reduction, a noted health journalist, and chaired by historian Samuel K. Roberts of Columbia University. All of our events—

including April's Then and Now event on race and maternal mortality—are available through the Library's events and programs page.

From the Blog



During Pride Month the Library blog looked back at the <u>Academy's</u> <u>1964 report on homosexuality</u>—which our Committee on Public Health called an illness and which the Academy recently repudiated. We also reflect on <u>Controlling Substances: The</u> <u>Evolution of the American Moral and Medical Drug Policy Regime</u> and showcase <u>recent Library acquisitions in the history of</u> <u>medicine</u>.

Four Years After a Roof Fire, The Osler Library Returns Home

Four years ago, on Friday 13, 2018, the Osler Library had a roof fire. Google "McIntyre fire" and you'll see that it was a pretty big deal. In the immediate aftermath, it wasn't entirely evident what would happen. What was clear, even by the next morning, was that we were fortunate in facing a best-case scenario in a worst-case situation. Damage to the library was limited; our rarest items were untouched.

In the weeks that followed the fire, there were numerous meetings and discussions with insurance representatives wherein we explored the options available to us: keep the rare books in place and hope for continued partial access; close completely and put everything in storage during renovations; move some or all of the library contents to McGill's main McLennan Library while work was carried out.

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Black bins of books from the circulating collection waiting to be deodorized.

Ultimately, it was the final option that won the day. It seemed the best solution: our colleagues in Rare Books and Special Collections cleared two kilometers of shelving, mainly housing periodicals that had recently been moved in from another library. Thus, our rarest items—the ones untouched by the fire—were available for use by researchers within two months. Items that had been housed in spaces not covered by our dedicated HVAC system

and were potentially exposed to smoke were sent to a secure warehouse where they were inspected and treated as needed before being shipped to the main library. Our circulating collection went into a space that had been emptied in the basement and our archives, artifacts, and the remainder of our rare collections joined us as guests in the Rare Books division once they were confirmed as smoke free. In this way, we maintained accessibility to the collections while our space was inspected and restored.

Little could we have imagined that it would be four years before we would return and that there would be many moments when we thought we would not return at all.

There may have been a backdrop of uncertainty, but we dove into the resumption of our usual activities. We reassured participants in the annual Del Maestro Family William Osler Medical Student Essay Award that we would continue to support



Though undamaged by the fire, we had to clear out the Osler Room to inspect for damage behind the shelving and to ensure the safety of the collections while work was carried out in the surrounding areas.

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The books making their way back into the Osler Library.

outreach activities.

their research. We offered our research travel grants to those needing to travel to Montreal to consult our collections. We initiated a new competitive programme, supported by the Molina Foundation, to provide financial support to medical students pursuing a summer research project in the history of medicine. We negotiated with colleagues in other library units to find times in a full schedule during which exhibits slated to open in our space could go ahead. It was the pandemic rather than the fire that put a temporary hold on the annual search for the Michele Larose Osler Library artist-in-residence. In the year following the fire, we had four major exhibitions (including two to coincide with the Montreal meeting of the American Osler Society, for which we needed to rethink nearly all of our planned activities) and four minor ones, in addition to our usual teaching and

By all measures, the years we spent sharing space in McLennan were a success. If we are relieved to have shipped our books back to the McIntyre Medical Building, it is so we can plan for the future in a way that was impossible when we did not know what the future would look like. Notably, an entire McGill Medical School class has now gone through whose members never set foot in the Osler Library. Our collections may have been accessible to them, but that is not the same as visiting a space designed specifically to hold and showcase collections bequeathed quite explicitly for the benefit of the medical community and—even more explicitly— medical students. It is not the same as stumbling from a lecture into a library that exists within the same building (as opposed to down a not-inconsiderable hill). Moreover, the original vision of the library was as a dynamic one that would bring together all manner of material to support scholarship in the history of medicine: historical works, but also modern scholarship. Returning to a space where we again have circulating and rare works together represents a resumption of our status as a full-service library.

That our materials are back in McIntyre does not mean our work is done. We are closed this summer so that we can focus our attention on getting the library in order in a way

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that will make things easier going forward. Where previously there were five distinct shelving sections of nineteenth-century material, we are integrating the four that use the NLM call number system so that ultimately we'll have two divisions: Cutter and NLM, with room for growth in the latter. Similarly, we have taken this opportunity to move

The Wellcome Camera as it looked in December 2018.

our manuscripts into shelving that is better suited to their needs. Even beyond putting items on shelves, much of the work has been physical, like adding or shifting shelves to accommodate different uses of space.

There is so much we could say about the fire, about our experience over the past few years, about the move itself. Above all, we are relieved: relieved to be back in our space,

relieved to be able to plan for the future with a greater degree of certainty. Though closed, we have been hosting a limited number of researchers whose trips had been delayed by the pandemic or who otherwise have pressing reasons to visit at this time. On the days we have researchers, when we prop open our door, others wander in too: there have been impromptu tours of the Osler Room



The Wellcome Camera has been restored.

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and similar moments when we can share our treasures from within a space that was designed specifically to house them. These are tastes of what is to come: the enthusiasm, the sense of renewal, a confidence that we still can convey some sense of meaning to generations of students who peer inside to see what our space is about. We are so pleased to be able to announce: the Osler Library is back.



A full Osler Room signals our return.

M.K.K. Hague-Yearl

Head Librarian Osler Library of the History of Medicine McGill University

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Lesson: Always pay attention during the annual conference



Picric Acid, Before

Every year that I attend the annual LAMPHHS meeting, I learn something exciting and new. However, what I learned this year turned out to be especially important.

During the panel "Livin' on the Edge! Handling Hazardous Materials in Archival Environments," picric acid was mentioned among an assortment of other substances. I was well aware of ether and various poisons as hazards, but this one was new to me. During the break between sessions, I opened

our collections catalog and did a quick search. Sure enough, in September 2021 I accepted a saddle bag with a beautiful, unopened, and very full bottle of picric acid dating circa 1880. I called our Environmental Health & Safety office to notify them of the situation. They were concerned to learn that the bottle was 140 years old (the previous record was 60), and suggested I vacate my office until further notice. A specialist was brought in from Chicago to re-hydrate the contents so they could be disposed of safely. Many thanks to the presenters!



Picric Acid, After

Jamie Rees

Museum Curator & Assistant Library Clendening Library & Museum University of Kansas School of Medicine

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McGoogan Library Opens Online Exhibit Portal Exploring Nebraska's Medical History

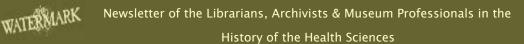
One year ago, on June 29, 2021, the University of Nebraska Medical Center's McGoogan Health Sciences Library opened the newly completed Wigton Heritage Center as a welcome center to the Omaha campus. Showcasing the history of UNMC as an institution and the health sciences professions across Nebraska, the Wigton Heritage Center serves as a catalyst for understanding, experiencing, and appreciating UNMC's heritage.

In honor of this one-year anniversary, the library is excited to announce the new <u>Wigton</u> <u>Heritage Center online exhibit portal</u>. This digital exploration of the exhibits currently on display throughout the three levels of the Wigton Heritage Center allows visitors to discover more stories, images, and artifacts from the library's special collections. These include recent oral histories and newly acquired materials related to the historical figures that are highlighted in the Wigton Heritage Center's inaugural displays.

The digital exploration provides additional historical context as well. There are full-length biographies of the individuals highlighted in the Wigton Heritage Center and expansions of narratives shortened due to constraints in the physical displays. This online experience also highlights connections between exhibits. For example, McGoogan Library's Special Collections team discovered stories about the WAY (Drs. Wigton, Aita, and Young) Clinic that unites the legacy of the Swift-Wigton family with the history of the Department of Psychiatry and the Nebraska Psychiatric Institute. The team also explored the connective narrative between early anatomist Edward Holyoke, MD, and his work with prolific medical illustrator Rose Reynolds, whose illustrations were a critical teaching and publication tool of the time.

Take a moment to explore and see what you discover about the history of UNMC and health sciences in the state of Nebraska.

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ANNOUNCEMENTS

CHFM Announces Recipient of Annual Sandra L. Panther History of Family Medicine Fellowship



The Center for the History of Family Medicine (CHFM) announced today the recipient of the 2022 Sandra L. Panther Fellowship in the History of Family Medicine. Catherine Smith, PhD has been awarded the CHFM's Twelfth Annual Fellowship in the History of Family Medicine for her project "The Doctors Riddle: Pioneers in Consumer Health Information."

Dr. Smith is a professor at the Information School at the University of Wisconsin-Madison. She is a consumer health

informatics researcher who investigates problems of health information provision to the general public.

This fellowship project "The Doctors Riddle: Pioneers in Consumer Health Information," is a biography of two women physicians, sisters Mary Adeline (1865-1951) and Julia Riddle (1868-1949). Adeline and Julia Riddle were very political physicians and very active in organizing other women physicians; in women's suffrage; and particularly in health education for the public.

The CHFM presently sponsors one \$3,000 Fellowship in the History of Family Medicine each year. Named the Sandra L. Panther Fellowship in the History of Family Medicine in honor of former AAFP Foundation executive director Sandra L. "Sandy" Panther, interested family physicians, residents, students, other health professionals, historians, scholars, educators, scientists and others are invited to apply for the 2023 Fellowship. For more information, please visit the Center's website at: http://www.aafpfoundation.org/chfmfellowship

W. Bruce Fye Medical History Research Travel Grant

The W. Bruce Fye Center for the History of Medicine is pleased to announce its annual W. Bruce Fye Medical History Research Travel Grant. The grant is available to physicians, historians, medical students, graduate students, faculty members, and independent scholars who wish to use archival and library resources at Mayo Clinic in

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Rochester, Minnesota. The grant (up to \$1,500 in one calendar year) may be used for transportation, lodging, food, and incidental expenses relating to the research project. It is available to residents of the United States and Canada who live more than 75 miles from Rochester.

The W. Bruce Fye Center for the History of Medicine houses archival collections that contain official records of the Clinic and its administrative offices, official and unofficial publications, departmental annual reports, committee minutes, photographic and moving images, sound recordings, personal papers, and memorabilia relating to the Mayo Clinic, its mission, programs, and people. To search the archival holdings, please visit the <u>online catalog (MAX)</u>.

The W. Bruce Fye History of Medicine Library is a specialized library housing important collections in the history of medicine and allied sciences. Several thousand volumes of rare medical classics (from 1479) and early journal literature (from 1665) comprise the core collection of primary literature on all aspects of medicine and allied fields. More recently published histories, biographies, facsimiles, and other support materials comprise the remainder of the collection of some 23,000 total volumes. Special strengths include anesthesiology, cardiology, dermatology, immunology, ophthalmology, and neurology. The library also has a large collection of Mayo physician bound reprints. To search the library catalog, please visit the library <u>website</u> (http://librarycatalog.mayo.edu/).

Applicants should send by e-mail as attachments the items listed below to Renee Ziemer:

- Abstract of your project (250 words) stating the general scope and purpose
- How historical resources at Mayo Clinic will further your research
- Abbreviated curriculum vitae (3 pages or less)
- One letter of reference that includes comments on your project

Timeline for 2023 grant:

Application deadline (all materials): November 1, 2022 Successful applicant(s) will be notified by December 31, 2022 Visit(s) to Rochester must be completed by December 15, 2023



Newsletter of the Librarians, Archivists & Museum Professionals in the History of the Health Sciences

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Contact information:

Renee Ziemer, coordinator W. Bruce Fye Center for the History of Medicine & Mayo Historical Suite Mayo Clinic 200 First Street SW Rochester, MN 55905

Telephone: (507) 284-2585 E-mail: <u>ziemer.renee@mayo.edu</u>

Archives of the US Navy Bureau of Medicine & Surgery's Historian's Office Closes for Move

This summer, the BUMED archives will be packed to be moved to a new home at Defense Health Headquarters outside Washington, DC. There is no schedule for reopening yet, but hopefully it will be in 2023. A preliminary Guide to Collections can be requested for those interested in military medicine. A small artifact collection is being transferred to the National Museum of Health and Medicine and will be available through them in the future. Queries can continue to be sent to archivist Michael Rhode at michael.g.rhode2.civ@mail.mil or historian Andre Sobocinski at andre.b.sobocinski.civ@mail.mil and we will continue to update our online presence at Flickr Commons - https://www.flickr.com/photos/navymedicine/ and Medical Heritage Library - https://archive.org/details/usnavybumedhistoryoffice

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BOOK REVIEWS

Don K. Nakayama, editor. *Black Surgeons and Surgery in America*. Chicago: American College of Surgeons, 2021. 319 pages. Download free from the ACS website or obtain a print copy for \$25.00. ISBN: 978-1-7369212-1-0

Black Surgeons and Surgery in America is an overview of the history of Blacks in American medicine, especially in surgery. The book covers three specific periods, which are: "Surgery under Slavery," "Surgery under Jim Crow," and "Surgeons Seeking Justice." Other sections cover "Surgery's Leaders" and "Scientists and Allies." The last section covers "Current Challenges."

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As a person who enjoys learning about history, I found this book to be fascinating and well written. I thought I knew much about medical history, having worked at a medical association for 24 years. Still, I have learned more about a field I only had a fleeting knowledge of by reading this book. I better understand James Marion Sims, how the Blalock-Taussig Shunt should be known as the Blalock-Thomas-Taussig Shunt, and Charles Drew and blood preservation.

In the section on "Surgery under Slavery," you read about many of the pioneer Black physicians, including John Durham, the first trained physician; James McCune Smith, the first medical school graduate; Samuel Ford McGill, the first Black graduate of a U.S. medical school, Rebecca Davis Lee Crumpler, the first woman graduate, and so many more. In the chapter on "Canada, Incubator of Black American Surgeons," you learn about surgeons born to Black Americans and surgeons who were free men who all moved to Canada to escape the racism in the United States. Many also moved to Canada to further their education as they were denied entry to the medical schools in the United States. The Buxton Missionary School in Buxton, Ontario, educated many future Black physicians who served during the American Civil War, and others who became missionary physicians. Some specific physicians profiled in the chapter are Anderson R. Abbott, Jerome R. Riley, John H. Rapier Jr., W. Henry Fitzbutler, Charles V. Roman, Alfred S. Shodd, and Wilson R. Abbott (Anderson's son), and John Douglas Graham Salmon.

Other chapters in this section profile physicians who were anti-slavery leaders, human rights activists, Black nationalists, and even the unsung heroines who were the experimental patients of Dr. J. Marion Sims' successful repair of vaginal fistulas. What is fascinating about this chapter is that Dr. Sims used these women to experiment on until he successfully repaired their vaginal fistulas. Instead of continuing to treat these women and many more, he left to make a name for himself. We can thank him for this necessary surgery, but not for how he treated women of color.

In the section on "Surgery under Jim Crow," several chapters provide insight into what Black physicians experienced during this period. This section covers Reconstruction in the South and how Blacks were treated in the North. There is a section on organized medicine, i.e., medical societies, and how many physicians were denied entry because they were Black. Black physicians established medical societies, such as the National Medical Society of Washington DC, the Medico-Chirurgical Society of Washington DC, and the National Association of Colored Physicians, Dentists, and Pharmacists (which became the National Medical Association in 1903.) The chapter concludes with a section

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on desegregation and integration. "Black Medical Education and Specialty Training" covers education before the Flexner Report and what happened to 15 Black medical schools after the report was published. It seems that Howard University and Meharry Medical College were the only two to survive. There is also a chapter on Black hospitals and the "separate but equal" mantra, which was anything but equal. The following chapters profile several specific physicians who helped advance medical education for future Black surgeons. You can learn about Daniel Hale Williams, Nathan F. Mossell, Matilda Arabella Evans, and several other interesting individuals.

In the section "Surgeons Seeking Justice," there are chapters on hospital integration finally ending "separate but equal." Other chapters cover civil rights legislation from 1964 to 1965, desegregation of medical schools in the South, and a discussion of surgeons and martyrs, including a profile of Louis T. Wright and the integration of American medicine. The most fascinating chapter in this section is about the assassination attempt on Martin Luther King Jr. in Harlem and how his surgery was delayed. The surgical team had to wait for the chief surgeon to arrive before saving the Reverend King's life.

The section on "Surgery's Leaders" contains profiles of several dominant Black surgeons. You can read about Charles Drew, LaSalle D. Leffall Jr., Claude Organ Jr., Asa G. Yancey, L.D. Britt, Wayne A.I. Frederick, W. Lynn Weaver, and Hughenna L. Gauntlett. Many of these surgeons were leaders in medicine and changed how people were treated for various ailments.

In the section on "Surgical Scientists," the majority of the profiles are of physicians such as John C. Norman, Samuel Kountz, Patricia Bath, and Andrea Hayes. However, the most fascinating profile in this section is about a man who wanted to be a physician but could not pursue that career because of his race and the Great Depression. Vivien Thomas became a laboratory technician to Dr. Alfred Blalock and developed an innovation that corrected the heart condition causing tetralogy of Fallot. At this time, the procedure was known by the names of the physicians who requested the research and first performed it on humans—The Blalock-Taussig Shunt. However, the very first surgery performed on a human had the hands-free assistance of Vivien Thomas. Thomas stood on a chair and coached over Dr. Blalock's shoulder as the surgery was being performed.

The following section, "Surgical Allies," covers the relationships between physicians of different ethnic backgrounds. And the last section, "Current Challenges," details affirmative action to the challenges of health disparities.

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I would recommend adding this publication to your collection, especially if you have a specific interest in the history of surgery. I found this book to be a very educational and good read, and I hope you enjoy reading it too.

Mary A. Hyde, MSLS AHIP Medical Librarian Ascension Health Florida Ministry

Janice P. Nimura. *The Doctors Blackwell: How Two Pioneering Sisters Brought Medicine to Women - And Women to Medicine*. New York: W. W. Norton & Company, 2021. 336 pages. \$27.95. ISBN: 978-0-393-63554-6

LAMPHHS members have undoubtedly answered questions about Firsts: "Who was the first person / woman / African American / etc. to graduate from our school / work at our institution / hold this position / etc.?" Such questions, staples of institutional histories and anniversaries, are even more relevant given the current emphasis on diversity, equity, and inclusion. Firsts can celebrate progress towards equality by recognizing those who broke down barriers (even if one's institution originally raised the barriers and only begrudgingly lowered them).

But First questions pose challenges. After identifying a First, sometimes an earlier one is discovered. ("Earliest known" is often a safer designation.) Sometimes a First cannot be identified when no one, including the First, explicitly noted their achievement. What seems important to us today may not have mattered so much in the past. Sometimes the stories of Firsts begin and end with their First-ness, making the rest of their lives and careers an afterthought if not a complete absence.

Invariably, there are also Almost Firsts, those who tried but could not overcome the obstacles in their way. And there are also those who follow the First, who overcame similar obstacles yet are overlooked because they were not the pathbreaking pioneer.

Dr. Elizabeth Blackwell (1821-1910) is an undeniable First: the first woman to earn a medical degree (not counting <u>Dr. James Barry</u>). Before reading Janice Nimura's superb *The Doctors Blackwell: How Two Pioneering Sisters Brought Medicine to Women - and Women to Medicine*, that was what I knew about Elizabeth Blackwell, plus the trivia question answer as to her medical school: Geneva Medical College, in upstate New York (only because Geneva College had a curious affiliation with the Rutgers Medical Faculty in New York City from 1827 to 1830). Yet Elizabeth and her younger sister Emily

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(1826-1910) led extraordinary lives that reflect all of mid-19th century professional medicine through their groundbreaking achievements.

First and foremost, Nimura situates Elizabeth and Emily within the context of the Blackwell family, a lively and literate clan of five sisters and four brothers who were each other's dearest companions, even if they "loved and annoyed each other in equal measure" (page 254). Their extensive family correspondence grounds Nimura's research, undertaken at several archives holding Blackwell papers. (At least three LAMPHHS members are thanked for their archival assistance.)

One way Nimura humanizes the Blackwells is to note striking paradoxes between their ideals and actions. Three examples:

- Samuel Blackwell, the clan's father, was a sugar refiner in England and America, yet was ardently anti-slavery within his slavery-driven industry. The Blackwell children engaged in anti-slavery activism beginning in the 1830s. Yet in her 30s, Elizabeth adopted a six-year-old girl who essentially lived as her *de facto* indentured servant for more than 50 years until Elizabeth's death in 1910.
- Elizabeth focused on women's health, including obstetrics and gynecology, and wrote a popular sex education manual for families, yet she herself seems to have never experienced physical intimacy. She preferred "the life of the mind to the functions of the body—which she found, quite frankly, disgusting" (page 3).
 Emily, trained in surgery by leading male surgeons, would prove a far better clinician.
- Elizabeth worked towards elevating women's health by establishing the New York Infirmary for Indigent Women and Children, and later, with Emily, advancing women's medical education by opening a Women's Medical College at the Infirmary. Yet both sisters were deeply skeptical and often dismissive of the broader women's rights movement of their era, even after two Blackwell brothers married notable suffragettes.

To tell more of the Blackwell sisters' story would be to spoil the almost novelistic pleasure of following the twists and turns of their lives, including gruesome medical issues, family tragedies, and no end of professional obstacles due to being women.

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A cast of 19th century medical luminaries appear throughout the Blackwells' story. Notable women include Florence Nightingale, Dorothea Dix, and Mary Putnam Jacobi, and notable men include Stephen Smith, James Young Simpson, and J. Marion Sims. Even Abraham Lincoln makes a memorable cameo.

The Doctors Blackwell also serves as a fine introduction (and often far more than mere summary) to 19th century medical education, medical practice and therapeutics, and medical institutions in America and also England and France. Nimura clearly explains the troubled status of the mid-19th century medical profession and its struggles for legitimacy given its limited scientific understanding and marketplace battles with the alternative practitioners of the era. Even the Blackwells were willing to try mesmerism and hydrotherapy.

Nimura's prose is a pleasure to read. She is aided by the Blackwells themselves; for example, on a trip to North Carolina, Elizabeth and her brother Sam hear the "goblin groans of myriad frogs," and Elizabeth considers the locals to be just "country boobies and boobyesses" (page 31). The book's readability should not undercut its scholarly seriousness. There are no footnotes within the text, but 31 pages of endnotes by page number in the back, along with a useful bibliography of works by Blackwell and works about the history of women in medicine.

The Doctors Blackwell is an essential book for all LAMPHHS member collections, a book easy to recommend to all those interested in medical history. The glowing reviews on <u>the author's website</u> are well-deserved, as is its recognition as a 2022 Pulitzer Prize Finalist in Biography. You will not forget this particular First and the sister who followed her, and Janice Nimura's presentation of their stories can shape the understanding of Firsts at our own institutions.

Bob Vietrogoski

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Dan Royles. *To Make the Wounded Whole: The African American Struggle Against HIV/AIDS.* Chapel Hill: The University of North Carolina Press, 2020. 319 pages, paper. \$29.95. ISBN: 978-1-4696-6133-9

To Make the Wounded Whole includes seven chapters, an introduction, a conclusion, thorough endnotes, a bibliography, and an index. The book provides well-researched case studies of forty years of efforts to raise awareness of HIV/AIDS, remove the stigma of the disease, create prevention methods, and improve the quality of life for those with HIV/AIDS in Black communities in America and globally. The chapters average thirty pages each and are mostly chronological (there is some overlap between the chapters). A list of organizations and projects highlighted in the book include Philadelphia Community Health Alternatives, the Philadelphia AIDS Task Force, BEBASHI, the National Association of Black and White Men Together, the National Task Force on AIDS Prevention, the Gay Men of Color Consortium, Blacks Educating Blacks about Sexual Health Issues, Gay Men of African Descent, ACT UP Philadelphia, SisterLove, and more.

Throughout the book, the reader finds historical debates on morality and whether to trust therapies and entities woven throughout vignettes. Stories told within of how the HIV/AIDS pandemic was handled by the government and the citizens, written before the COVID-19 pandemic, show a bit of a repeat of today's experiences. Uncertainty of how the disease spread and how to prevent the disease, mistrust of the government, perceptions of who catches and who spreads the disease, successful (and unsuccessful) medications, protests, media communications, political missteps, travel bans, and more are interspersed throughout this book and have all been items at play with the latest pandemic, as well.

The effect of HIV and AIDS on African American communities begins in the introduction with the Belle Glade crisis, a city in Florida that had the world's highest per capita spread of HIV/AIDS. Researchers believed the virus was spread there by insects (pp. 111-112). The first chapter details how communications on HIV and AIDS were managed in Philadelphia with attempts at work to prevent the spread of the virus. One example is the public outreach efforts that would be conducted differently for white gay men who lived and spent time in "gayborhoods" versus black gay men who tended to remain embedded in a racial community, rather than one specific to their sexual orientation. The second chapter continues an exposition on how public health outreach efforts were managed as educational efforts. One setback to this work happened in 1987, when a North Carolina

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senator worked against safer sex education dissemination efforts by working to pass the Helms Amendment. The amendment "prohibited the use of federal funds by the CDC to 'provide AIDS education, information, or prevention materials and activities that promote, encourage, and condone homosexual sexual activities or the intravenous use of illegal drugs'" (p. 63). This reviewer pondered how it may be seen as acceptable to air video depicting war but not media that is designed to be educational, especially that which could prevent the spread of a deadly disease. The book describes many efforts to engage action in government officials and the Black community in fighting HIV/AIDS.

There were many interesting pieces of history in this book. From the years 1987 to 2010, people with HIV or AIDS were banned from international travel to or from the United States (p. 62). This speaks of a potential lack of awareness of how this disease spreads and a slow reaction to change by our government. President George W. Bush's administration worked to end the travel ban (this work was completed during the Obama administration), and Bush "committed \$15 billion over five years to HIV treatment and prevention in sub-Saharan Africa" (p. 162), which is the largest amount of funds to support public health in America's history. "Even Bush's critics have praised the program [PEPFAR], considered to be the president's 'greatest legacy'" (p. 192).

"Health GAP...argued that the Clinton administration used its outsized influence to prevent other countries from producing or acquiring generic versions of patented medications, even when doing so was allowed under international intellectual property agreements (p. 183)", which they believed indicated support of pharmaceutical lobbyists over human lives. "ACT UP Philadelphia...compared the Clinton administration's efforts to roll back the Medicines Act to South Africa's brutal recent history of racial segregation (p. 184)." Strong advocacy efforts commenced supporting pharmaceutical trade, which led to pharmaceutical pricing and trade improvements during the Clinton and Bush administrations.

It surprised this reviewer to learn how much the CDC's definition of a disease can impact people's quality of life, as social services are directed toward those with defined conditions. Women affected by HIV/AIDS "could not access any of the social benefits or services available to people with the disease…they suffered disproportionately as a result of being excluded from the CDC definition [of HIV]" (p. 202). The endnotes go into detail on this circumstance by saying the CDC defined "AIDS based on the opportunistic infections most common by gay men, which… exclude[ed] women from official statistics of people with AIDS". Royles says it took 12 years for that definition to change (p. 236).

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The book details AIDS conspiracy theories prevalent among many Black Americans who lacked trust in federal public health initiatives. The disease itself had been posited to originate in Africa, leading to a perceived blame on Africans by scientists (p. 105). The context of conspiracy theories in Black communities led the author to detail the federal government's Tuskegee Study of Untreated Syphilis in the Negro Male, a 40-year program conducted by the U.S. Public Health Service where black men who were infected with syphilis remained untreated. Some believe that the men in the Tuskegee experiment were purposely infected; however, they already had syphilis when they joined the study. While they were not infected through that experiment, they were not treated with known effective therapeutics (pp. 106-107). However, this book cites that "patients who participated in a similar experiment in Guatemala were inoculated with syphilis, and by one of the very same doctors involved in the Alabama study (p. 107)." The book then describes how around the same time the details on the Tuskegee experiments were released, word got out about an FBI program that was designed to "covertly disrupt 'subversive groups'...[such as] Dr. Martin Luther King Jr. ... and the Black Panther Party..." The author goes on to say that, "the U.S. government was willing to go to great lengths to halt the struggle for Black freedom. Less than a decade [later]... AIDS was ravaging Black communities across the United States" and ponders the coincidence some may feel of all of these and further describes other rumors, legends, and historical stories associated with various controls against African Americans (pp. 107-109).

Later on, the book discusses a treatment for HIV: Kemron. There were misperceptions being spread that this drug was natural; however, it had been developed by cultivating human cells within hamsters to produce interferon (p.125). Additionally, a large-scale clinical trial of this drug was prepared by the National Institute of Allergy and Infectious Diseases and the NIH Office of AIDS Research despite twelve previous studies showing the lack of efficacy of this therapy against the symptoms of AIDS "in the interest of public safety" (p. 127). Other explored therapies with steps forward and missteps are found throughout this book.

It has been a little over forty years since AIDS/HIV was identified, not very long in the history of the world. However, this book is a slice of the history of this virus, particularly by illustrating the passion and determination of organizers who worked very hard to improve African Americans' lives. The many pages of end notes, bibliographical references, and the index are useful for researchers. Having this more detailed content at the end of the book was perfect for this reader, since it allows the author to maintain

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narrative momentum while letting those wanting to take a deeper dive into the story to do so at their leisure. The book has so much more detail and interesting historical facts than can be covered adequately in this review. *To Make the Wounded Whole* is a recommended read to anyone interested in the history of HIV and AIDS, especially its impact on Black Americans, as well as for those researchers focusing on the history of organizing and advocacy. This work would be a beneficial addition to a library's history of the health sciences collection.

Marlena Rose

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Ira Rutkow. *Empire of the Scalpel: The History of Surgery*. New York: Scribner, 2022. xiv, 401 pages. \$29.95. ISBN 978-1-5011-6374-6

No one reading this review should be entirely unfamiliar with the work of Ira Rutkow. He is a member of a rapidly vanishing breed: practicing physicians who write the history of medicine. Once upon a time, MDs made up the bulk of those writing in the field (a glance at AAHM membership statistics over the last thirty years is illuminating). For that matter, gender and race figures have shifted as well, though probably not nearly enough.

Furthermore, in his new book, *Empire of the Scalpel: The History of Surgery*, Dr. Rutkow announces that he has provided:

"[A] comprehensive and revelatory history, one that is educational and entertaining and showcases the development of the profession within the rich tapestry of human life in which it evolved. As a popular narration, it is intended for a wide audience, laypersons and physicians alike—since surgical terminology can act as a barrier to the uninformed, this book is as free of the surgeon's tongue as possible." [Rutkow, xiii].

To approach such a vast and technical subject in this traditional (not to say oldfashioned) manner is more than a little problematic. The unease of this reviewer was heightened when, in his introduction, Rutkow announces he will not be discussing non-Western medicine, and that he will also have little to say about women practitioners [Rutkow, xi-xii]. His dismissal rather hangs in time and space—it has little explanation or further documentation, and he clearly believes that none is needed.

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This is also a very personal history, filled with the kind of anecdotes from his own long career that might make for exciting reading for some, but which are less useful for the more serious student. He begins, for example, with a long section about his third night as a PGY-1, on call in what was then Boston City Hospital. A head-trauma patient is put under Rutkow's care and turns out to be in far worse condition than is initially apparent. Thanks to the advice of a veteran ER nurse, Rutkow makes the right call, and the patient is saved by a timely procedure; surgeons save a life that was very nearly lost. The odd part, though, is Rutkow's recollection, forty-seven years later, that he was more frightened than the patient's wife. This reviewer wonders at the metric for that.

Like many another historian of surgery, Rutkow writes mostly about the great practitioners, and that means he must deal with such controversial figures as William Halsted. It is now widely accepted that Halsted was a brilliant but deeply flawed individual. Rutkow's interest in Halsted was piqued when Rutkow transferred his studies to Johns Hopkins (another personal anecdote), but it would be impossible to ignore Halsted anyway in such a book as this. Rutkow is more sympathetic toward Halsted than some recent historians; he is remarkably non-judgmental in his analysis of Halsted's decades-long battle with drug addiction, or his eventual conversion into a less innovative, but coldly efficient and aloof "knife bearer" (Rutkow's term, repeatedly used). It may be worth noting that, in his chapter on Halsted, Rutkow manages to discuss J. Marion Sims, the innovative but thoroughly racist and misogynistic obstetrical and gynecological surgeon, and both Thomas Joiner White and Mary Amanda Jones (respectively pioneering Black and female ob-gyns) in the same sentence [Rutkow, 167]. The connection he sees is that Halsted, Sims, White, and Jones are all buried in the same cemetery in Brooklyn. There should be more to it.

Despite the book's title, Rutkow clearly prefers re-telling anecdotes to actually being "comprehensive." A further example is his apparent fascination with the circumstances surrounding the death of silent screen heartthrob Rudolph Valentino, who died after an appendectomy in 1926.

The Valentino case *is* illustrative of an odd moment in surgical history, when some of the pieces in the modern surgical tool-kit (anesthesia, sterile procedures, blood transfusion, some x-ray technology) were in place, but others (antibiotics, more advanced imaging technologies) were not. Valentino underwent an appendectomy, but the fact that he also had a perforated ulcer was not known until the procedure had begun. The infection was so widespread that it may well be possible that no purely

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surgical intervention could have saved him. But the post-operative care was, by modern standards, horrific. He was given liquid food by mouth on the second day after the surgery, and soft solid foods the next morning. The ulcer was not fully sealed, food and gastric juices leaked into the abdominal cavity, and he died of a combination of shock, pneumonia, and peritonitis. This is a grim and scary story, but Rutkow does not use it as a cautionary tale to be followed up with a "what we've learned" section. He moves on.

The bibliographic apparatus is a bit odd. The acknowledgments are to family, friends, and editors; no research institutions are mentioned. There are content footnotes throughout, but the endnote section is relatively thin. There is a bibliography of mostly secondary sources, and another list of "References," where "The major works that shaped my thinking are listed for each chapter." [Rutkow, 353].

In short, this book does not really deliver on the promise of its title. It is not a comprehensive, objective approach to its complex subject—a subject that in fact becomes more interesting and problematic each day, as scholars uncover and recover much that was lost or at least obscured in the narrowly traditional view of surgery's history. Rutkow is a brisk and engaging storyteller, but his overall demeanor belongs to a faintly mythological period when surgeons with impressive beards and mustaches sat in leather armchairs with their peers and discussed their recent cases over fine port and large cigars. We need more than that now.

Stephen J. Greenberg, MSLS, PhD, AHIP Retired

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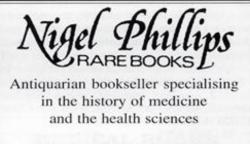
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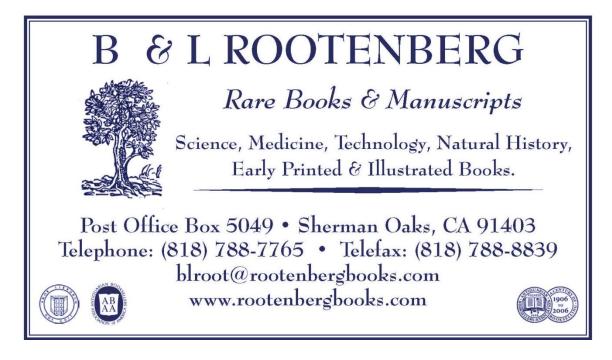


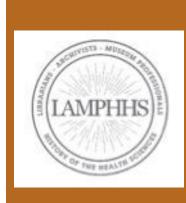
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