

Reuben Peterson

Protagonist of Modern Obstetrics
and Gynecology

Ronald M. Cyr M.D.

November 2001

Chronology

- Born in Boston, June 29, 1862
- His father was a direct descendent of one of the Mayflower pilgrims. In 1862, was a paymaster for Civil War veterans.
- His mother was a teacher and ardent abolitionist.
- 1885 Bachelor of Arts, Magna cum Laude, Harvard University.

- 1889 M.D., Harvard University
- 1889-90 House Physician, Boston Lying-In Hospital
- 1890 Married Josephine Davis, from Boston. They had four children (Reuben Jr., Marion, Ward and Julia).
- 1890-1898 Practice in Grand Rapids, MI. Gynecologist at St. Mark's Hospital (now Butterworth).

1890

Appointment to St.
Mark's Hospital,
Grand Rapids, MI

One of my regrets is that I failed to be elected President of the local society in Grand Rapids. They jumped me and I fought back and was not elected. So many things I would change if I could do it over again. 1936

Grand Rapids, April 19, 1890.

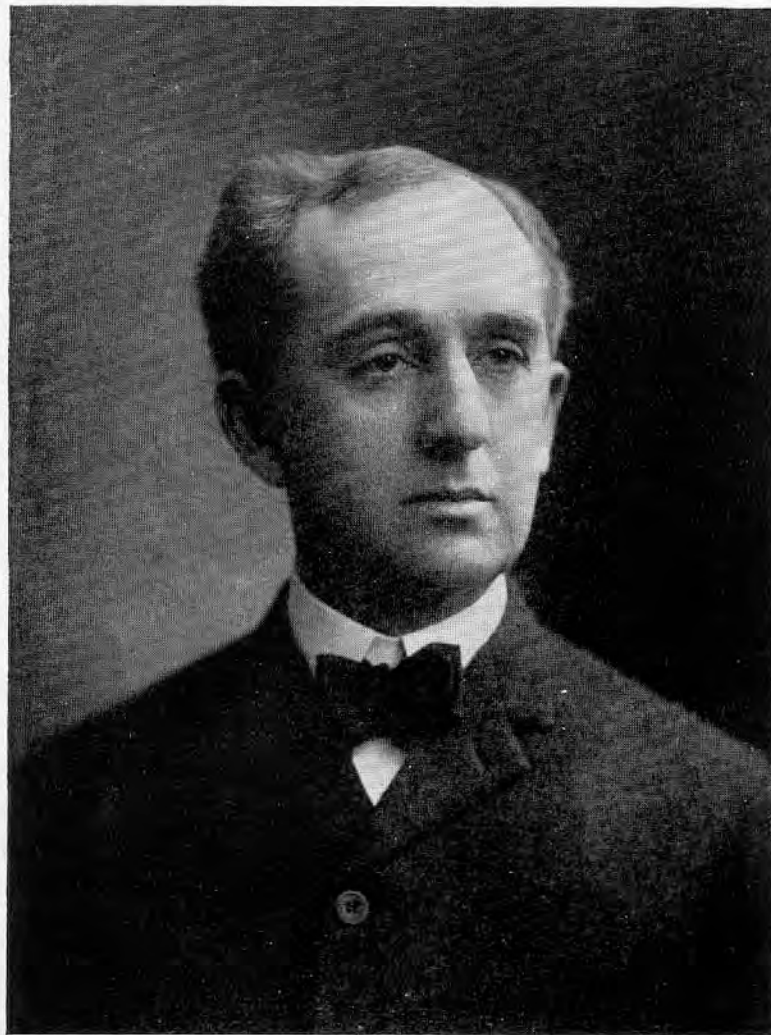
Dear Sir,

At a meeting of the Board of Trustees held April 11, 1890, you were elected Visiting Gynaecologist, Obstetrician, and Physician for the Diseases of Children to St. Mark's Hospital of the City of Grand Rapids for the period of one year beginning April 28, 1890.

Please signify, at your earliest convenience, your acceptance of the position.

Respectfully,

Chas. H. Peterson
Member of Trustees



Reuben Peterson

DAWN OF THE CENTURY

MARCH & TWO STEP

BY E.T. PAULL.

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SOLO. 5

IMP. 4

FOUR HANDS. 10

- 1898-1901 Professor of Gynecology at Postgraduate Medical School of Chicago
- 1900-1901 Assistant Professor of Obstetrics and Gynecology at Rush Medical School, Chicago
- 1901-1931 Professor and Head Ob/Gyn, U of Michigan, Bates Professor of Diseases of Women and Children
- Died November 25, 1942 at Duxbury, MA, after an illness of two months.

Tributes

- *Dr. Peterson was greatly respected by his associates for the brilliancy of his work, his masterful ability to organize, and for his clear-cut teaching clinics. He was deeply loved for his homely virtues.*
- *His lectures were always interesting, well delivered and well organized, and sprinkled with many of the anecdotes for which he was so famous.*

George A. Kamperman

● *Your students and associates will never forget you and what you have always stood for. You have always had their love and respect and the admiration of your colleagues.*

Shelby W. Wishart 1933

● *Your old staff here miss you and altho not a great deal is said about it, I know we all continually think back to what we think you would do or would have said...I continually realize...how fortunate I was to have even as much training under you as I did and I only hope I justify your last choice for your staff in time to come.*

Woodburn K. Lamb 1934

- *Former students are wont to recall the soundness of his teaching and his now thoroughly appreciated aids to the practice of medicine. "Remember," they comment, "old Pete taught us that! "*
- *Humor, that magic potion for mortal blues, he had in abundance.*
- *As a surgeon he had, in his day, few peers. A man of great physical stamina and emotional equanimity, he only rarely rapped his assistants' knuckles or felt the need to cuss loudly the homemade "cutgut."*

- *Kindly, generous, fair, and highly respected, he well deserved the almost reverently spoken appellation of "Chief."*
- *His training program in obstetrics and gynecology was in great demand and consistently one of the more popular services among house officers.*
- *His administrative skill was again apparent in the well organized, smooth functioning of his department.*

- *His almost uncanny clinical and surgical judgment was a common subject for conversation among his students and staff members.*
- *Perhaps, like most men, he had his faults. I knew him for 24 years, first as a student, then as one of his boys (trainees), and later as his assistant. Yet during this quarter century I was unable to discover significant shortcomings.*

Norman Fritz Miller

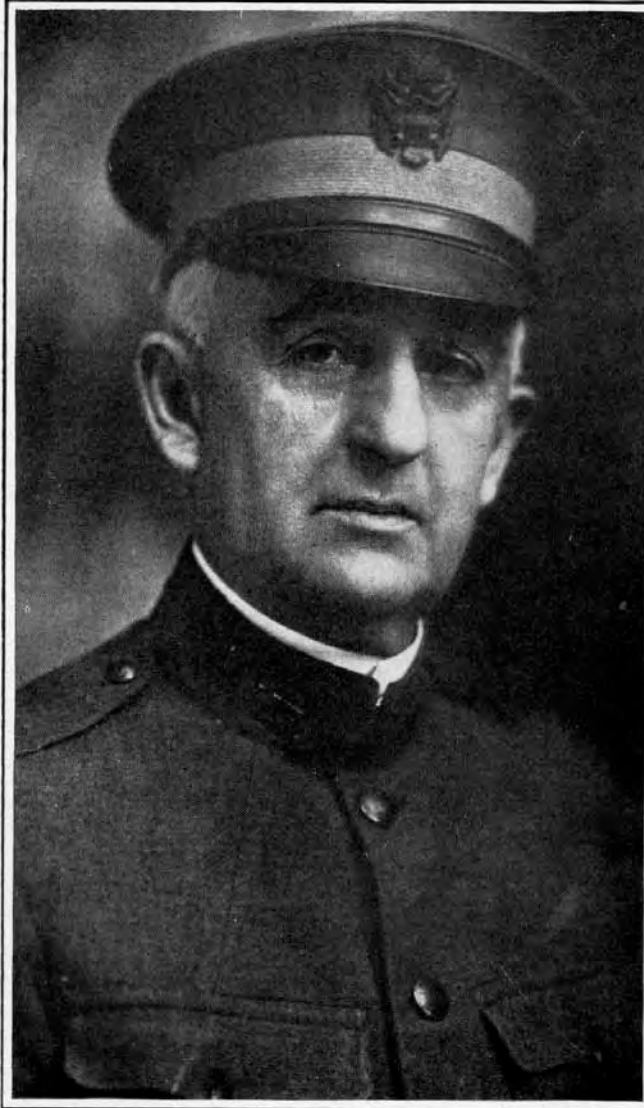
Responsibilities/Honors

- 1895 Acting superintendent, St. Mark's Hospital, Grand Rapids, MI.
- 1897 Fellow American Gynecological Society
- 1902 President Washtenaw County Medical Soc.
- 1902-03 Editor Year Book Ob/Gyn



Doctor Reuben Peterson

- 1902-33 Owner/director Peterson Hospital / Ann Arbor Private Hospital after 1917
- 1907 and 1919 Member A.M.A. House Delegates
- 1911 President American Gynecological Society
- 1911-1918 Medical Director University Hospital

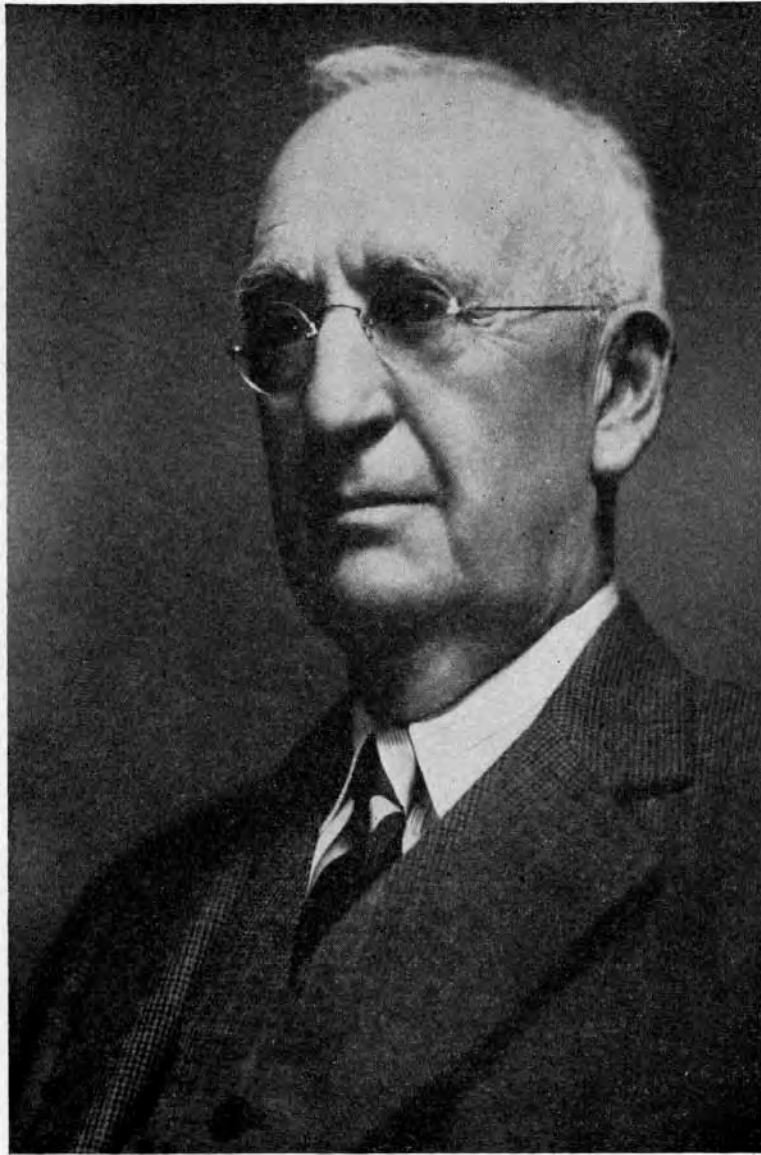


MAJOR REUBEN PETERSON

Past President 1915

Ann Arbor

- 1913 Founding Fellow American College Surgeons
- 1914 President Michigan State Medical Society
- 1917 Medical Advisor to the Governor of Michigan
- Member of Advisory Editorial Board of the American Journal of Obstetrics and Gynecology from its inception until his retirement in 1931



REUBEN PETERSON
1862—1942

Publications

- He made many contributions to literature. *The Index Medicus* and the *Cumulative Index* recorded 219.
- Early in his career he wrote about many different topics, mostly case reports.
- 1890 “Puerperal Eclampsia”
- 1893 “Tubal and Peritoneal Tuberculosis”

- 1895 “Abdominal Nephrectomy”
- 1895 “ The Need of more Medical Reference Libraries, and the Way in which they can be Established”
- 1895 “Suspension of the Retrodisplaced uterus by the Utero-Ovarian Ligaments—17 Cases”
- 1896 “Hysterectomy as an Accompaniment to Bilateral Removal of the Appendages”

- 1896 “The Prevention of Pelvic Disease”
- 1898 “ A Clinical and Pathological Study of Five Recent Cases of Hysterectomy for Fibromyomata”
- 1899 “ Peripheral Nerve Transplantation”
- 1899 “ Right Inguinal Hernia of the Vermiform Appendix”



Colonel Theodore Roosevelt at Camp Wickoff, Montauk, Long Island, in 1899. An unlikely looking war hero, when TR led the Rough Riders up the hills of Santiago, Cuba, under continuous fire, bullets nicked his elbow, punctured his boot, and eighty-nine of his men were struck down by Spanish fire—but TR appeared invincible. The Spanish garrison fell and Roosevelt returned home one of the most famous men in America.

By JOHN PHILIP SOUSA

PIANO 2 HANDS 50	2 MANDOLINS & GUITAR 70
PIANO & HORN 1 50	GUITAR SOLO 40
PIANO & HORN 1 50	GUITAR DUO 50
ORCHESTRA 1 75	BANJO SOLO 40
MILITARY BAND 50	BANJO DUO 50
SOLO 50	BANJO & PIANO 60
2 MANDOLINS 50	
MANDOLIN & PIANO 60	
MANDOLIN & GUITAR 50	
MANDOLIN PIANO & GUITAR 70	
2 MANDOLINS & PIANO 30	

PUBLISHED BY
THE JOHN CHURCH COMPANY
CINCINNATI NEW YORK CHICAGO LEIPZIG

- 1899 “ The Etiology of Non-Malignant Rectal Strictures in Women”
- 1900 “ Anastomosis of the Ureters with the Intestine”

Once at the University of Michigan, he continued to publish regularly.

- 1902 “ A Consideration of Ovarian Fibromata”
- 1902 “ The Use and Abuse of the Uterine Curette”

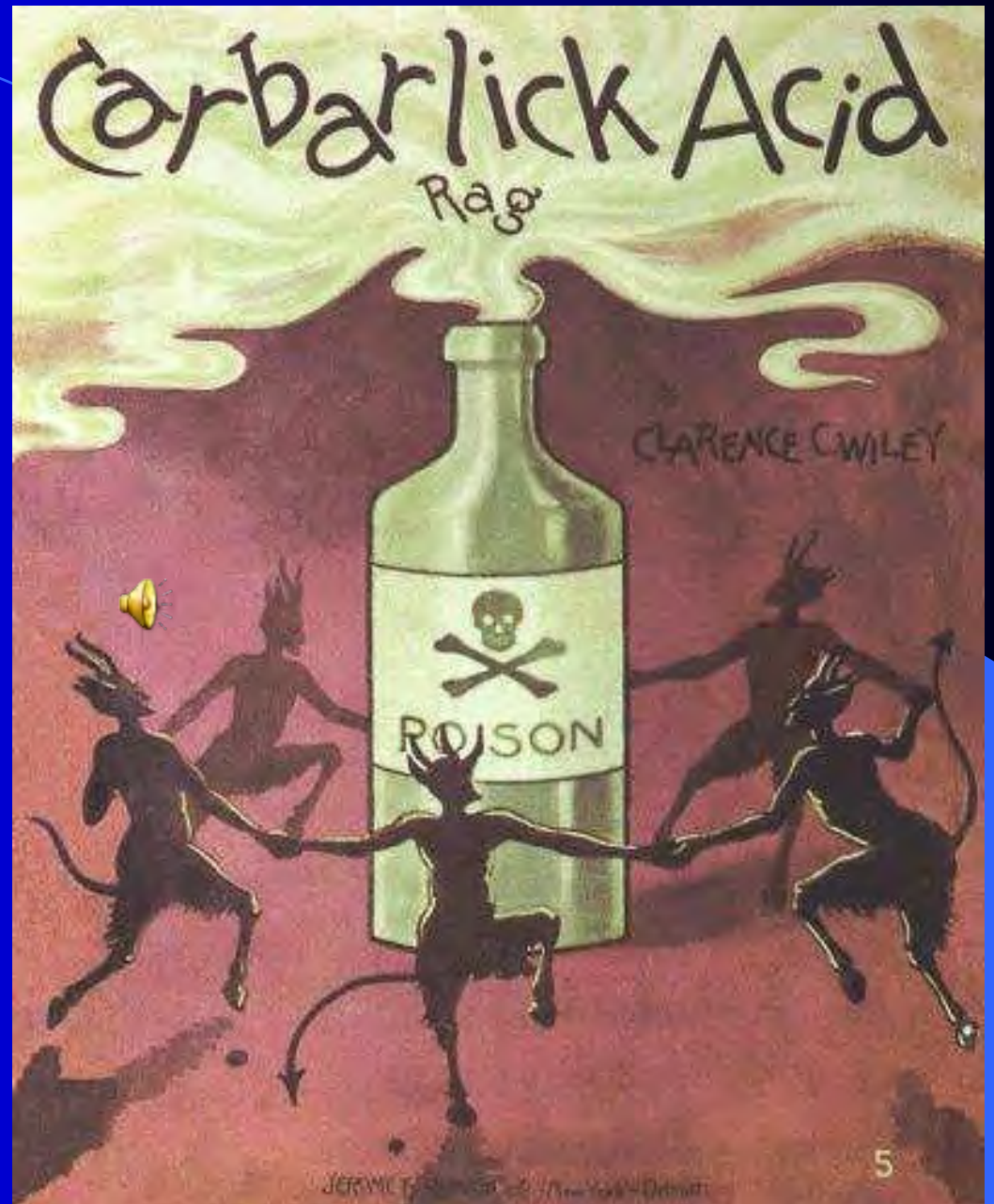
- 1903 “ The Surgical Treatment of Procidencia Uteri”
- 1904 “ The Relation of the Appendix to Pelvic Disease”
- 1907 (Ed) “The Practice of Obstetrics”
- 1912 “ Cesarean Section and its Alternatives in Suspect and Septic Cases”
- 1912 “ Primary and End-Results of 51 Radical Abdominal Operations for Cancer of the Uterus”

- 1912 “ The Relationship of the Medical School to the Hospital or Intern Year”
- 1913 “Emptying the Uterus as as Method of Treatment of puerperal Eclampsia”
- 1914 “How the Small Hospital may best serve the community”
- 1914 “ A Critical review of 500 published and unpublished cases of abdominal C/S for eclampsia”

- 1921 “Pneumoperitoneum and Roentgenology as Aids to more accurate Obstetric and Gynecologic Diagnoses”
- 1925 “A Consideration of twenty years’ progress in the teaching of Obstetrics and Gynecology “
- 1929 “A Manual for a Demonstration Course in Obstetrics”



The Cakewalk, an American dance, now all the rage.



Clinical Obstetrics

- In 1905, the UH on Catherine St. had only 5 OB beds. In 1905 and 1908, wooden buildings were moved to a site just West of the Medical Ward.
- One of them served as a maternity cottage for 18-20 waiting patients, the other for women in labor.
- In 1925, after the new UH opened, the 1910 E.N.T. hospital was converted into an 82-bed OBS facility. For the next 25 years, it would be the “old Maty”.

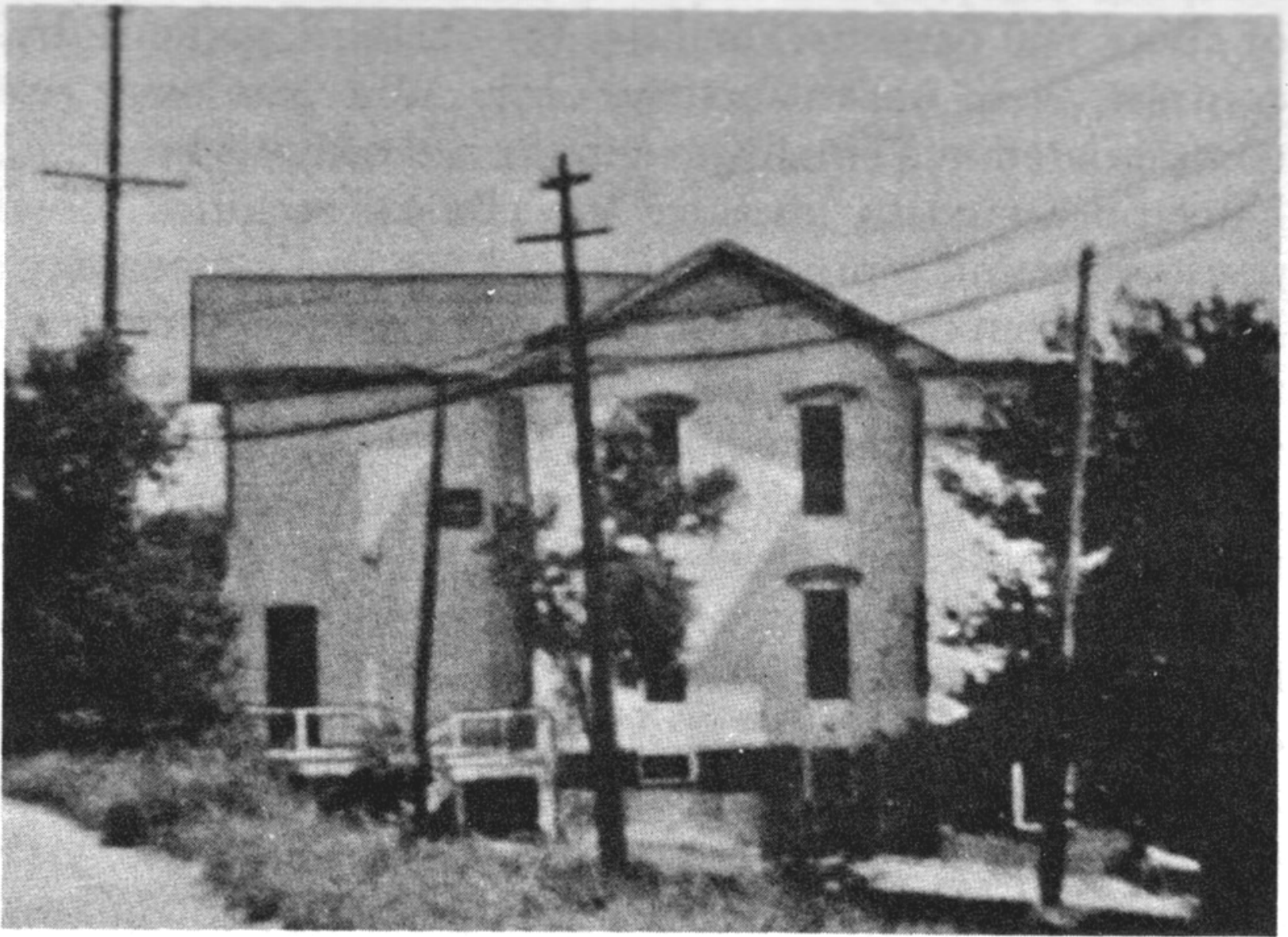


Figure 7.12. University of Michigan's Maternity Cottage, 1908-1925.

University Hospital 1910



MEDICAL WARD

PALMER WARD

EYE AND EAR WARD

SURGICAL WARD

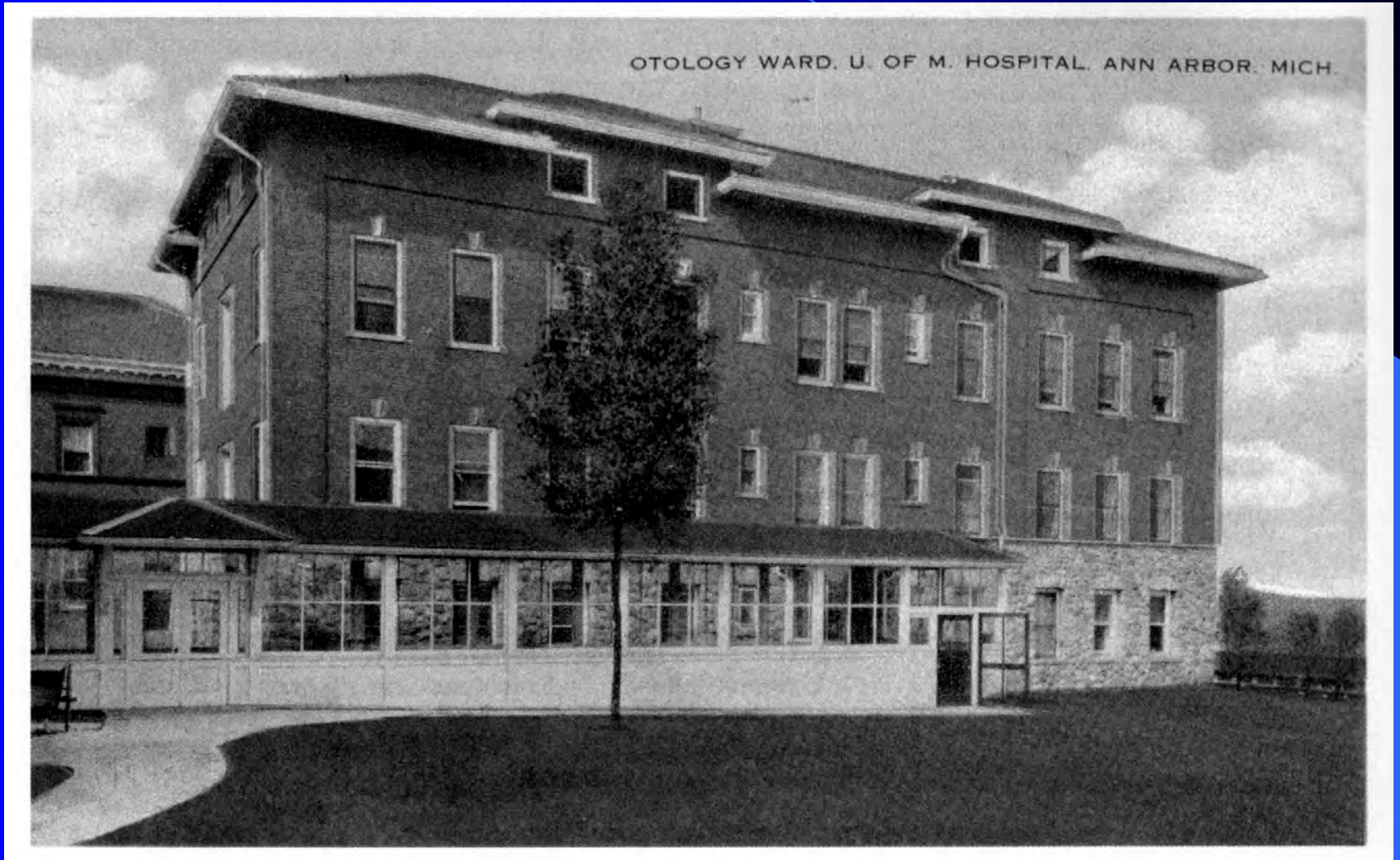
OFFICE

PSYCHOPATHIC WARD

UNIVERSITY OF MICHIGAN HOSPITAL

Fig. 2-6. Catherine Street Hospital, ca. 1910. (Courtesy of the Bentley Historical Library, University of Michigan, Medical School Records, Box 136, "Medical School Photographs, Laboratories.")

'Old Maty' 1925-1950



- 1902: 38 deliveries
- 1912: 104 deliveries
- 1933: 257 deliveries

- *Where sepsis is pronounced, no suprapubic operation should be considered except in the rather rare cases where marked pelvic deformity makes delivery from below impossible or highly dangerous to the mother even after craniotomy... (1911)*

- A few words on the technique of Classical C/S:

The simplest technique is the most desirable. I prefer a six-inch incision, three inches above, three inches below and to the left of the umbilicus. (1911)

- *The only right the obstetrician has to demand that the child be born through the natural passages is through his ability to show that by doing so a better mortality and morbidity for mother and child will result. (1912)*

- *The time will come when failure to see that the uterus is emptied quickly after the onset of the first convulsion will be considered an error in judgment. (1913)*

N.Y. Automobile Show 1900



Many visitors at the New York Automobile Show, in November 1900, had never been in a machine before. Free instruction was offered, and to illustrate the comfort and safety of the vehicles, families were encouraged to participate.

Teaching

- *More than once, during the last five years, have I heard the complaint from the student that he had not been afforded sufficient opportunities of perfecting himself in the bimanual examination of the female generative organs, or that he did not feel competent upon graduation to conduct a normal case of labor, since he had seen only two or three cases of confinement, and that most of his knowledge was theoretical. (1901)*

- *Fifty years ago...it was not considered necessary or the proper thing to thoroughly examine a woman's pelvis. (1901)*
- *No matter with what delicacy the examination of the female patient may be conducted, the natural modesty of the sex, causing them to shrink from such examinations, ever stands in the way of our supply of material. (1901)*

- *The larger amphitheater operating clinic is bound to disappear almost entirely from medical teaching... No matter how skillful the operator may be, he will fail to interest his audience if they cannot see what he is doing. (1901)*
- *Lantern-slide demonstrations should be employed whenever possible, because it is easier, in this age at least, to keep up the interest by appealing to the eye as well as to the ear. (1901)*

- *In 1901 at Michigan there was no clinical obstetric teaching... Six or seven women were delivered yearly, before sections of the class by the demonstrator of obstetrics, but no student had an opportunity to examine the pregnant woman, much less deliver her.*
- *Yet there was an excellent service of some twenty-five beds for instruction in surgical gynecology. (1925)*

- *This neglect of Obstetrics was owing to a number of causes. During the decade from 1890 to 1900, the energy of those interested in the generative tract of women was devoted to the treatment of the diseases of women by surgery.*
- *Chairs in medical schools were divided into obstetrics and diseases of women. The ambitious men, then, following the trend of the times, scorned obstetrics and left these chairs to be filled by the surgically timid or by those who were obliged to be satisfied with inferior positions in the medical faculties.*

- *From the teaching standpoint, it is essential that obstetrics and gynecology be considered together.*
- *In reality, it is one subject with two divisions, obstetrics, including the study of normal and abnormal human reproduction, and gynecology which has to do, in the greater part, with the results of poor obstetrics, or the failures of obstetrics, in over 60 per cent of the disabilities the gynecologist is called on to treat. (1901)*

- *Obstetrics after a period of twenty or more years of retirement is coming into its own.*
- *In fact, if we are to progress in the next century, obstetrics must become more and more preventive in character and this means a decline in surgical gynecology, which in the past has flourished on poor obstetrics.*
- *However, owing to anomalies of development, neoplasms and infections there will always be a field for gynecology, so there is no need for the surgically inclined to worry. (1925)*

- *In 1912, only 8 of the 42 schools surveyed by Williams had a combined Ob/Gyn Department.*
- *By 1923-24, this had increased to 50%...In only six was Gyn combined with Surgery.*
- *This shows that the pendulum is beginning to swing in the opposite direction and that the proper relationship between obstetrics and gynecology is well on its way to being realized in teaching institutions. (1925)*

- *The advantages to medical education of this movement will be far reaching in the next twenty-five years.*
- *The future obstetric teacher will no longer be a man midwife untrained in surgical methods, who waits for the birth of the child because he distrusts his own surgical skill.*
- *On the other hand, gynecologic surgery will become less erratic because guided by a thorough ground work and knowledge of obstetric science. (1925)*

- *The most difficult task confronting the medical teacher today is to compel the student to make use of his five senses as aids to diagnosis.*
- *He would much rather depend on the results of laboratory tests. What the older physician saw and drew conclusions from, the student today is blind to and asks details of blood counting and of a half dozen other tests...*
- *If we can make the students reason and think for themselves, and time for this would be forthcoming if only essentials were taught, they will graduate well qualified for general practice. (1925)*

- *And in the particular field under consideration, they will not start every woman in labor on a certain fixed day, or usher every baby into the world either feet first or through an abdominal incision. (1925)*



Maple Leaf Rag

COMPOSED BY
SCOTT JOPLIN.



Price 50¢

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JOHN STARK & SON.

FRANCIS & CO. THEODORE ALTON WARDLAW AND COMPANY PUBLISHERS
OF THE "MUSICAL JOURNAL", 27 N. 4TH ST. PHILADELPHIA

The image shows the title page of the sheet music for "Maple Leaf Rag" by Scott Joplin. The title is written in a large, ornate, gothic-style font. Below it, the composer's name "SCOTT JOPLIN." is printed in a bold, sans-serif font. The central illustration depicts a man and a woman in early 20th-century clothing. The man is on the left, wearing a hat and a long coat, holding a cane. The woman is on the right, wearing a long, light-colored dress with a fur collar and a hat. The price "Price 50¢" is written below the illustration. At the bottom, the publisher's information is listed: "SEWALL, MO. and Publisher BY JOHN STARK & SON." and "FRANCIS & CO. THEODORE ALTON WARDLAW AND COMPANY PUBLISHERS OF THE 'MUSICAL JOURNAL', 27 N. 4TH ST. PHILADELPHIA".

University Politics

Obstetric Beds

Detroit Controversy

Private Practice

Obstetric Beds

- *My contention is that through all these years a part of the battle for better obstetric teaching facilities should have been assumed by the authorities responsible for the training of medical students. (1925)*

- *Not that [the Obstetric teacher] would not have preferred hospital beds for his obstetric teaching, but because he would have been laughed to scorn had he demanded, as a right, the number of hospital beds for his department equal to those at the disposal of the two other major departments, medicine and surgery. (1925)*

- *My successor in the chair of obstetrics will not be obliged to argue with one high in university authority, as I did, over the statement that all expense for clinical obstetrics was foolishness and that one woman delivered before the class was enough to demonstrate the way a baby is born.*

(1925)

- *So far as Obstetrics was concerned I was treated rottenly in Michigan. What I got I fought for against great odds, for the department can never be self-supporting and every other department was fighting for what it could get.*

Letter to N.F. Miller 1934

Detroit Controversy

- In 1906 Detroit Medical College was in financial trouble, and wanted U of M to take over the school.
- Dean Victor Vaughan supported a plan to move the Clinical years to Detroit.
- He was opposed by Peterson, Dock (Medicine) and Darling (Surgery). The proposal was defeated, but soured relations between the Dean and Department Heads.

- In 1915, Dean Vaughan wished to create a compulsory Internship year based at the Detroit Receiving Hospital...On Peterson's motion, the Faculty rejected the plan.

- ... *I carried out the good fight for thirty years and at the end the students were sent to Detroit not only where they got no additional clinical material but witnessed some horrible obstetrics. That was my reward for thirty years' uphill work.*

Letter to N.F. Miller 1934

- *I am fond of [Udo] Wile in many ways but he certainly handed me and the Department a dirty stick when he forced me through the President, to take the students to the Women's hospital in Detroit. Are you still sending them in there? I would do away with that as soon as possible. It makes me mad every time I think of it.*

Letter to N.F. Miller, 1934

- *I am delighted to hear about your obstetrical clinic. You ought to be able to get clear of that Detroit incubus soon. Every time I think of what Wile saddled on me at one time I get just as mad as ever. I am not sorrowful his wings were clipped.*

Letter to N. F. Miller, 1935

- *He, Cronie, said that your students were no longer going into Detroit for their Obstetrics. I hope this is true. It was a crazy scheme anyway. I have never forgiven Wile for it and was glad he lost out for the deanship for the way he acted at that time. He would have been ruthless and very arbitrary.*

Letter to N.F. Miller, 1936

Private Practice

- Peterson was always in Private Practice and opposed to compulsory full-time clinical appointments.
- This was the source of friction with the heads of other departments and the deans, especially Hugh Cabot.
- In 1901, he rented a house at 1215 S. University and started “Peterson Hospital”. It had an O.R. and a 3-bed ward on the ground floor and another 4 beds upstairs.

- Over the years, he bought or leased more houses, until he had 40 beds—some of which he rented to other doctors.
- In 1917, it was named the Ann Arbor Private Hospital.
- He employed 15-20 nurses and established a nurses' training school at 614 S. Forest.



Fig. 18-2. Peterson Hospital nursing class. (Courtesy of Dr. Linda Strodtman.)

In 1925 he wrote:

- *I am not making a plea for the full-time clinical teacher. I am simply stating what every one with experience knows, that you cannot have a large private and consultation practice with all this entails and find time for the proper kind of medical teaching.*

- *For financial reasons it may be better for the medical school to oblige or allow the teacher to pay his own salary by his outside practice.*
- *However, if this plan be adopted do not blame him if he sees to it that this salary is adequate even if he has to sacrifice his departmental work to secure the money.*

- *Do not compel the clinical teacher to make the choice between the two, since it is human nature, in this day and age especially, not to neglect the financial side of one's profession unless recompense can be found in securing time for scientific work including thorough systematic teaching.*

- In 1926, Peterson finally decided to go full-time.
- His request for a \$2000 yearly stipend was contemptuously rejected by Dean Cabot, who suggested he was old enough to retire.
- *How is the new Dean [Furstenberg] getting along?...I think a lot of Octy...he is a gentleman, not a S.O.B. like Cabot.*

Letter to N. F. Miller, 1935

Leadership

- *The Chief must remember that only through him can [the assistants] advance in knowledge or reputation, since he alone has the assignment of their duties and the disposition of the material through the use of which their scientific reputations can be made.*
- *Selfishness and jealousy in the chief of the department are insurmountable barriers to progress. (1901)*

- *He must be broad-minded, a reader of men, and possessed of executive ability to be a success as the director of such an enterprise.*

Research

- *Research work should form part of the program of every department in a school such as ours.*
- *But it is only in especially favored places that this work can be carried on.*
- *The clinical material at the disposal of the department must be used not only for teaching purposes, but for the advancement of human knowledge.*

- *The manner in which this is done, or whether it will be done at all, will again depend largely upon the chief.*
- *He it is who not only must investigate, but must indicate and map out the lines which the investigation of his assistants must follow.*
- *A man, after all, is judged by the outside world mainly by the volume of original work which he turns out.*

- *The longer I watch this medical teaching game the more I am impressed with the necessity to write and write and then write if you want to get ahead. A man has to be up and coming these days and be an investigator.*

Letter to Woodburn K. Lamb, 1936

- *The number of endowments which are being made for research work shows that the laity are slowly but surely coming to see the importance of giving encouragement to this kind of labor.*
- *It means that the public is beginning to realize that the investigator must give his whole time to his subject, and must not be hampered with questions of the ways, and means of earning a living. (1901)*



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