JOAN ILACQUA: And we’re recording. This is Joan Ilacqua on February 10th, 2016, with Dr. Paul Russell at the Massachusetts General Hospital. Today we are doing an oral history interview about the Boston Medical Library for the Center for the History of Medicine. Dr. Russell, do I have your permission to record this interview?

PAUL RUSSELL: You do, indeed.

ILACQUA: Excellent. Thank you so much for having me here to do this today. So my first question for you is a background question, and if you could please just tell me about yourself, and actually your title would be excellent to have, as well.

RUSSELL: Well my title at the present time is John Homans Distinguished Professor of Surgery in the Harvard Medical School, and Senior Surgeon at the Massachusetts General Hospital. I came to the Massachusetts General Hospital as a surgical intern in 1948, and I’ve spent most of my time here since, but not all. I was in military service during the Korean War, from 1951-53, and I did some very interesting, for me, research work at University College
London, which is where I developed my interest in transplantation, surgery, and biology. So after I finished my surgical training here in 1956, I stayed on the staff for a couple of years, and started a research laboratory in transplantation biology, and a clinical practice in surgery. I was then attracted to go to Columbia in New York, and where I was then associate professor, and did more research work and more general surgery and teaching. And then I was invited to come back to the MGH in 1962, to be chairman of the Department of Surgery, which I did for about a decade, and then focused on my first love of biology of transplantation. So I’ve continued to do that, and the subject has developed hugely, and it’s a very interesting -- still interesting subject to me.

I gradually developed an interest in history, and it happened that as the MGH was approaching its 200th anniversary in 2011, I was asked to be chairman of the History Committee of the hospital. And during the course of those thoughts and deliberations, we decided that we really had to have a museum here at the MGH, and that was no small effort, because it’s so hard to find a place to put anything of that size at a hospital like this, and, of course, to find the support to do it. But we were able to
do both those things, and we now have a nice little
building here at the MGH on the history of this hospital,
and of medicine in general. But along with this I was
asked to be involved in the Countway Library by Dr. Jim
Adelstein, who was senior associate dean at the time. And
so I did that. I became chairman of the Harvard Medi--
well, we had a Harvard Medical Library Committee up until
the time I got involved, and then I was the first chairman
of the new Joint Library Committee.

So going back, as I was looking at the Countway, I was
aware of much of its history, a lot I don’t know. But I do
know that it was founded in 1875, and that Oliver Wendell
Holmes, Sr. was an important figure in doing this. And
it’s important to remember, I think, that medical practice
and physicians and surgeons at that time, and actually all
up -- almost to the time when I arrived here -- were
independent individuals. They didn’t have offices in
hospitals. They took care of their own practices. They
had their own rooms along Beacon Street, or other places
around Boston, and they came in as a mostly voluntary
effort to come into hospitals and take care of the sick
poor was how the original hospitals were configured. So
only later on did the hospitals become more academic and
more the center of physicians’ activity. And this was important to the BML, because it -- what it was was the coalescence of some senior figures in Boston medicine who had libraries, and who had common interests, and out of this developed an actual library, Boston Medical Library, [00:05:00] which also included the collections of several of these senior people.

When I first became aware of it, I think it was at 22 The Fenway, which was also the center of the Massachusetts Medical Society, so there was an affinity between the Boston Medical Library and the State Medical Association, which went way back. So what happened was that as this change that I tried to refer to here of the physicians becoming more hospital-based and more institutionalized, the need and the vitality of the BML changed a bit, and naturally so. And Dr. George Berry, who was dean of the Harvard Medical School at that time, and a very good friend of mine -- his picture is on the wall right there -- and Dr. Berry had a dream -- he told me -- about trying to build a library at the -- adjacent to the Harvard Medical School’s administration building. And there were a number of reasons for him wanting to do that. The Harvard Medical Library was on the second floor of what was then called
Building A -- now it’s the Gordon Building -- and it was completely out of space. It was centrally located. It was good in that respect. But it was running out of space. And the Boston Medical Library was a rich and ancient collection, and Berry wanted to get his hands on it, and had a dream that he could put those two together in a brand new building. And he worked very hard on it, and was able to get some funds from the comp-- the family. I think they got something like $3.5 million, which was thought to be quite a lot in those days. And the architect was a man called Hugh Stubbins, who was a Cambridge architect, a very talented and interesting man. And I remember George telling me at one point, “I got Hugh Stubbins.” I said, “Well, why did you get Hugh Stubbins?” Because he had never designed a library before. He thought he hadn’t made any mistakes. So, of course, it’s a very stately building, and, I think, quite an elegant building for its time. And later on, when problems of energy became prominent, and we realized that there was this big, open kind of atrium space in the middle of it that had to be heated and cooled and so on, the question of the design came up a little bit, but nobody has wanted to change that, because it is really such a fine structure.
I remember the dedication of the building. I was there. And it was a very -- it was a brilliant occasion. It took place out in the courtyard, which is now adjacent to the School of Public Health. And I remember Archibald MacLeish was one of the speakers, and he spoke very eloquently about the importance of libraries as the central feature of academic life, as they have always been. And that's a question that we have to continue to examine as time has gone on.

So the library was put together, the two different elements, the BML and the Harvard Medical Library, and it wasn’t without pain. The status of both of them was -- had to be clarified, and there was an important document which was drawn up, I think mostly by Howard Sprague on the part of the BML, maybe other people. I know John Byrne, who was this -- B-Y-R-N-E -- who was a surgeon at Boston University, was very much interested in the BML, and in the arrangement between Harvard and the BML. So there was a document that was completed, and was signed by Nathan Pusey, President of Harvard, and by the people on the Boston Medical Library board. And, of course, that board, like the BML, was an ancient and honorable group, and had included all kinds of prominent people in the past. And so
they had a history to protect, and to admire. So the library was put together, and the librarian -- I think it was Ralph Esterquest -- certainly was the librarian up to the time when I [00:10:00] got involved. And there was a Harvard Medical Library committee, which was quite separate from the Boston Medical Library board. And the two really didn’t work smoothly together. Budgetary considerations on both sides were more or less independently looked at, so that the full possibilities of amalgamation weren’t really realized very well. So later on, when I was asked to become interested in it from the Harvard point of view, it became quite clear that we should really redraw the relationship functionally, not legally, and that, I think, was done. What we did to -- was to recreate the Joint Library Committee between the two entities, and I believe I was the first chairman when that was done. And we wanted to see the budgets, not necessarily to dictate them, but to have a chance to see how they might coordinate, and to look at the whole institution, as it were, including its two parts. And that, I think, worked pretty well. We changed the arrangement: the Joint Library Committee previously had been shared by the librarian, and he was in charge of the agenda, and we thought at that time of change that it probably would be better to, of course have the librarians
present, but to have a chairman from either the BML or the Harvard side, and it was laid out that that would happen in two-year increments, one side for two years and another for the next two. And that’s how it’s been done since that time.

I might say another thing that impressed me was the interest -- there were some very interested members of the Harvard faculty. Harold Amos was one, and there were several others then that -- with whom I spoke, and they encouraged us to do just what I tried to describe. And so we went into it in that way. And before long it also seemed -- oh, I should mention that Judith Messerle was brought on as the librarian after Ralph. She was an experienced person from the Middle West, very nice person, and a traditional librarian. She wasn’t a computer person. So we worked well with her, and it became clear, partly from her and other sources, that the library had to be improved, physically, that we needed to refurbish a number of things, maybe move some functions around to different places. So we did that, and, as I was still chairman, I think, of the Joint Library Committee, and we felt we had to go out and raise some money to do this. And Dr. Oglesby Paul and Dr. Amalie Kass, who is a great medical historian,
and a lovely woman, were very important in the fundraising effort. I was also able to attract Mr. David Crockett, who is a retired fundraiser for the MGH, and a very knowledgeable person, to join us in the fundraising drive, which he did. And it wasn’t all that easy, in a sense, because Harvard is very jealous about its ability to raise money, and we didn’t want to cross purposes with Harvard in raising money specifically for the Countway Library. But we came to an agreement about that, and they were helpful. In fact, Harvard did supply a real portion of the money required to do the remodeling. And there were a number of decisions involved in what should happen with the remodeling which I can’t detail completely, because I’m not sure I knew about all of them. And one of them that I might mention is that the rare books and special collections, which is a marvelous asset of the Countway Library, and one of the major examples of this effort in the world, the -- we wanted to put that in one place, [00:15:00] and have as much of the collection as we could in one place, but the only way that could be done was if we had what’s called dense shelving, I guess, something like that, where the shelving -- the shelves for the collection can be moved, and mooched together so that you could put a lot in a small space. And the only way we could have heavy
shelves of that kind would be to put in the basement. So there was a good deal of reason for wanting to put the real books in the basement so it could all be together. But then the problem came up, well, what happens if we have a flood? And that had been a problem previously, not with us, but with other similar collections. And of course you can imagine that if a flood came in to these -- where these rare books were in the basement, it would be a disaster. So in the process of building special alarms and pumps and evacuation and all that were put in, to try to prevent anything serious like that happening. So the remodeling did take place, and I think it’s been a great improvement.

One thing that happened was the Aesculapian Club, which was the Harvard undergraduate medical society, has had a room in the Countway, and the remodeled Countway put that into the lower level, one of the lower levels. And I was able to get an old and close friend of mine, Dr. Harold Spear, to donate his collection of apothecary jars for that space. And he was a Harvard Medical graduate. And he and his wife’s father had gotten together a very valuable and beautiful collection of old apothecary jars, and they are now situated in cases in that space, and I think they embellish it very nicely. There’s a little plaque that
acknowledges Dr. Spear’s contribution. So I think that was a good advance for the library, to make these changes.

But of course, the obvious thing that’s happened in more recent years is that the function of libraries has changed so very much. It didn’t come as a surprise. It was perfectly clear to us early on that the acquisition of information would be peripheralized into -- not only medical information but in general -- to wherever people were. And as we know now, you can take your telephone out of your pocket and find out most everything pretty quickly. And we didn’t know, and I’m not sure anyone knows for sure, what role the librarians should fulfill in the transmission of information, whether they should be empowered in whole or in part to vet information for its quality. That’s a big problem, I think, in the internet source, because you don’t really know what to believe. And should there be some kind of review before information gets to a certain level, for our medical students, say, and for practitioners? I think that’s still being looked at. But, of course, following Judy, we got Zak Kohane and Alexa McCray to run the library. And Zak is a very talented computer person, a great visionary, and I think he was a very appropriate choice. And he’s been so effective that
he now has his own department in the Harvard Medical School, a new department of medical—biomedical information. And so the question of where the Countway goes as a source of information in this situation, I think, is to be considered very much right now, when I’m making this comment. And my own hope, I might mention, is that the library will continue to be an important source of information, and of teaching the young how to gain access to information, how to evaluate the efficacy of information, and I think the library will continue to have that function. It obviously also is set up, and functions, as a cultural center, so there are all kinds of meetings that are held there, and I think the rare books and special collections function of bringing in speakers and having events of various sorts is very appropriate, and to be encouraged, so that the library is changing now, and will probably continue to change.

The relationship between the Boston Medical Library and Harvard I think is good now, and it’s important that the BML be -- have a dignified and important role as time goes forward. I’m hoping that the BML will continue to get new members, and new interest in what they do, and that’s an important possibility. Its relationship to the Mass
Medical Society still exists, and for a while we had an outlet or a metastasis out in Waltham at the Mass Medical Society’s headquarters, to give those people access to the riches of the Countway Library. And that, I think, was a very good idea. I’m not sure it’s stood the test of time a little bit, because it’s been expensive. But relationship with the Mass Medical Society is another thing that can be and should be nurtured, and continued.

ILACQUA: Well, Dr. Russell, you answered every question I could’ve thought of on this topic. So now, before we end this interview, I’d like to ask if there are any other comments you have about the BML, if there’s anything else that you’d like to add to this?

RUSSELL: (pause) Well, the BML, of course, is very much involved with the selection of the new librarian. As we speak now, that’s under consideration. And I think it’s an important moment to think of the future. I’m glad that the BML is well represented in the selection committee for the new leader. I’ve argued myself that there should also be good representation of academic people from the Harvard Medical School, and I know that’s something that’s being taken into consideration. But I think the committee is well disposed to look at these matters, and I hope to come
up with the kind of leadership that the -- this wonderful institution requires.

ILACQUA: Wonderful. Well, I would like to thank you again so much for having me here, and for taking part in this interview about the history of the Boston Medical Library.

RUSSELL: Thank you. I wish you very well.

ILACQUA: Thank you.