Historical Perspectives of The American Association for Thoracic Surgery: George P. Muller, MD, ScD (1877-1947)

Thomas Jefferson University Archives & Special Collections, Philadelphia.

George P. Muller, the 16th president of The American Association for Thoracic Surgery, was born in Philadelphia on June 25, 1877. He attended the public schools there and obtained a BA degree (which was possible at that time) from Central High School in 1895. He then entered the University of Pennsylvania Medical School and graduated in 1899. His internship was at Lankenau Hospital under the mentoring of Dr John P. Deaver. In 1902 he returned to Penn where he began his surgical training as a junior assistant to Dr Charles H. Frazier, the chairman of the department. At the same time, he was named an instructor in the department of anatomy. Dr Muller remained in the Penn system and advanced rapidly through the academic ranks there. After serving with distinction in the armed forces in World War I, he was made a clinical professor of surgery and, in 1918, was named chair of surgery at the Graduate School of Medicine of the University of Pennsylvania. He held that position until 1931, at which time he returned to Lankenau Hospital as a senior surgeon. In 1932 he became the 16th president of the AATS.

In 1936, at the age of 59, Dr Muller came to Jefferson Medical College where he was named the co-chairman of the Surgery Department along with Dr Thomas A. Shallow. (In 1841 the board of trustees of Thomas Jefferson had approved the concept of dividing the chair of surgery into two parts: the Principles of Surgery and the Practice of Surgery. However, this was not initiated until 1882 on the retirement of Dr Samuel D. Gross. The chair was not unified until 1956). In 1939 Dr Muller was named the first Grace Revere Osler Professor of Surgery at Jefferson. This endowed professorship came from a bequest from Lady Osler, whose first husband was Samuel W. Gross until his death. Although she subsequently married Sir William Osler, she never forgot Jefferson and left £5000 to the college in his memory. The annual stipend for this professorship at that time was \$2400.

Dr Muller had a productive career both as an academician and as a clinical thoracic surgeon. On the academic side, he was a long time member of the Department of Anatomy at Penn, where his knowledge and clinical acumen culminated in his selection to edit the revision of Davis' "Applied Anatomy" (1934), a book that became a widely used student text throughout the country. In addition to serving as president of the AATS (1933) and the American College of Surgeons (1939-1940), he held presidencies of the Philadelphia Academy of Surgery and the College of Physicians of Philadelphia and was an active member of the American Surgical Society and the Society of Clinical Surgery. He was a prolific writer with many articles in journals and chapters in surgical textbooks. He served on the editorial board of the Annals of Surgery. In 1937 Dr Muller was a member of the founder's group that met in Chicago to organize the American Board of Surgery and to describe the certifying examination for qualified candidates.

Clinically, Dr Muller was an active thoracic surgeon and through his work was considered to be one of the great pioneers in the development of the specialty of

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thoracic surgery. In 1912 he contributed an important article on endotracheal anesthesia and respiratory physiology.¹ During World War I, he was active in establishing policies for the management of thoracic injuries and the treatment of empyema. He was one of the first to describe the removal of foreign bodies from the lung as reported in a case of bullet removal in 1918.²

Back in Philadelphia, after World War I, Dr Muller continued his clinical activities with contributions to the management of carcinoma of the esophagus and uncontrolled active tuberculosis. At Jefferson, in collaboration with Dr H. Bradshaw, the thoracic surgery service grew rapidly. Most patients were referred for the treatment of intrathoracic disease, of which lung abscess and bronchiectasis were a large part. Also in the late 1930s, there were an increasing number of resections for pulmonary neoplasms, and Dr Muller was one of the first in Philadelphia to

perform a pneumonectomy for this disease. He was instrumental in the introduction of the use of intravenous administration in the management of proper fluid balance and the newly discovered sulfonamides. In the operating room, he was a dynamic individual noted for his vast knowledge, outstanding judgment, and meticulous surgical technique.

Dr Muller ended his brilliant medical career at Jefferson when he retired for medical reasons in 1946. His death in 1947 was believed to be due to Alzheimer's disease.

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*The bibliography was abstracted from Thomas Jefferson University: Traditions and heritage, Wagner FB Jr, editor. Philadelphia: Lea and Febiger; 1989. p. 559-61, 583-4.