Historical perspectives of the American Association for Thoracic Surgery: Edward J. O'Brien (1887-1959)

John Alexander wrote on behalf of his friend, Edward J. (Pat) O'Brien, *I have known Dr. O'Brien and carefully followed his work in thoracic surgery for more than ten years. Personally, he is a rather astonishingly outspoken person, fighting fiercely for principles he believes right. In these fights, he has created some enmities and won much admiration. Although I have often disagreed with his opinions and his methods of promulgating them, I am one of his great admirers. His enthusiastic efforts to popularize collapse therapy in pulmonary tuberculosis have been highly successful and, in Detroit, have probably been chiefly responsible for that city's present anti-tuberculosis campaign which is probably the most intense and intelligent that has ever been carried out anywhere. As a thoracic surgeon, Dr. O'Brien is outstandingly able and competent and he has written and spoken much that is of real value.*

O'Brien admittedly has so little tact that he creates a good many antagonisms and enmities, some of which are due to his rather pugnacious personality and some of which are due to his uncompromising fight for the surgical principles in which he believes. He has devoted the last ten years or more of his life wholeheartedly to his work in thoracic surgery, and taken as a whole, this work has had a far-reaching valuable influence in the fight against tuberculosis both in this country and abroad. Although I realize there may be any number of the Association who will object to his election, I feel that his devotion to his work and his very considerable attainments deserve the reward of membership.

That letter accomplished its goal, and just 11 years later, in 1949, O'Brien became president of the American Association for Thoracic Surgery.

O'Brien was born in 1887 in Hatley, Wisconsin, and graduated from the Detroit College of Medicine, now Wayne State University (WSU) School of Medicine. He did his internship and surgical residency at Harper Hospital (now Harper University Hospital). During World War I, O'Brien served as surgeon with the Harper Hospital unit, Base Hospital 17, in France.

In 1922, O'Brien became Chief of Surgery at Herman Kiefer Hospital, the city of Detroit's hospital for contagious diseases. At that time, Harper Hospital was one of the busier, if not the busiest, hospital in the country from the standpoint of surgical procedures performed. In 1928, a division of thoracic surgery was formed there. O'Brien served as its chief from then until 1952.

A most interesting event occurred in 1932, when he was in a car accident and broke his back. He was put in a plaster body cast and could only move his hands and arms. O'Brien insisted on performing chest operations on 4 women when a suitable substitute surgeon from Montreal, Canada, Dr Norman Bethune (a colleague of Edward Archibald), was not able to come in time. How did O'Brien possibly manage these operations? He had himself placed face down in the body cast on a table raised above the operating table. Then his patients were wheeled in, and he

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conducted each operation in less than an hour. The next day he refused interviews by reporters, saying it was just work that needed to be done. Bethune, who would later become one of Canada's most famous and controversial citizens, did arrive shortly after and spent about 6 months in Detroit until O'Brien recovered.

Thoracic surgeons began training at Herman Kiefer in the 1930s. Dr Clifford D. Benson trained under O'Brien there from 1933 through 1934 and became prominent as the Chief of Surgery at the Children's Hospital of Michigan and well known for his textbook, *Pediatric surgery*. James C. Stringer, another fellow, said,

Dr. Pat O'Brien was a stickler for fast surgical time. He was an effective teacher too, but he had a reputation among surgeons for being a champion thoracoplasty speedster. 'Accuracy first,' he would bellow as he incised, clipped, clamped and sewed, 'but be fast.' Pat had an intense loyalty—God help anyone who criticized any of his team (a privilege he reserved for himself and used well). But he had a broad Celtic sense of humor.

The Herman Kiefer thoracic surgery residency (now at WSU) was accredited in the 1940s.

Besides positions at Harper and Herman Kiefer, O'Brien was appointed in 1928 to the Tuberculosis Commission of the State of Michigan and served as its president for many years. In 1934, he became a clinical professor of surgery at WSU. By this time, he was gaining national prominence and publishing many articles on large series of patients with excellent results. In his own state of Michigan, he was also appointed Chief of Surgery of Saginaw County Tuberculosis Hospital, the American Legion Hospital in Battle Creek, the state tuberculosis hospitals in Gaylord and Kalamazoo, and the Mayberry Sanatorium near Detroit. He also served

as the president of the American Academy of Tuberculosis Physicians.

Eventually, O'Brien acquired partners who, with O'Brien, frequently attended John Alexander's pulmonary conference at the University of Michigan. The University of Michigan was 35 miles from Herman Kiefer but was centrally located to the other hospitals they staffed. During lively discussions, they kept Alexander's residents on their toes. When the Board of Thoracic Surgery (later called the American Board of Thoracic Surgery) was organized during the years 1947 through 1949, one colleague, William M. Tuttle, became the first secretary-treasurer and served in that capacity for many years. From its inception, the office of the board was at Herman Kiefer. Louise Sper, previously O'Brien's secretary, was administrative assistant to Tuttle for work on the board. The office remained there until the 1970s.

O'Brien remained active at Harper and Herman Kiefer until the year of his death, 1959. Tuttle had been associated with him for more than 25 years and became his successor. Excerpts follow from the *Journal of Thoracic and Cardiovascular Surgery* "In memoriam" Tuttle wrote for O'Brien:

He was Irish and a good politician and he used it to the advancement of care for tuberculosis' sick. Almost single-handedly, he built institutions for the care of this disease. He labored tirelessly until, at an early date, Michigan had the most adequate hospital treatment and control system in the field. He was a man of strong opinions. He could be kind. He could be most unkind. He was a restless soul. He did the right thing as he saw it. He was a stormy petrel on a wind-swept sea, but when the evening came, there was peace at last.

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