SCHANCHE: Three, four, five...

But, uh, we sort of rambled over your early years, when we last had a long talk.

DR. DEBAKEY: Yeah.

SCHANCHE: You spoke of your father as a strict disciplinarian, but gave no examples nor,... You didn't elaborate on it.

DR. DEBAKEY: Well, he was a strict disciplinarian in the sense that he insisted that we behave. If we didn't, we were punished. And, he insisted that we develop certain routines. You know--cleanliness.

He was an extremely clean man who...

SCHANCHE: As you said, he changed clothes three or four times a day.

DR. DEBAKEY: Oh, yes, in the summertime. See, we didn't have air conditioning in those days. He was also very active and worked hard and he expected us to do the same thing, you know.

SCHANCHE: Well, how did he demonstrate this. For example, what incident in your...when you were four years old, five years old, six years old finally convinced you your father really meant it when he told you...to do something?
DR. DEBAKEY: Well, he'd punish me.

SCHANCHE: In what case? What happened?

DR. DEBAKEY: Well...

SCHANCHE: What's your first memory of being disciplined?

DR. DEBAKEY: Well, he'd asked.. let me see. I'll try to think, It's hard now to recall the earliest and best memory of it. It goes back a ways.

SCHANCHE: Well, a memory.

DR. DEBAKEY: But, on a lot of occasions, for example, he had asked me to do some cleaning up. For example, washing the windows in the house.

SCHANCHE: Yeah.

DR. DEBAKEY: And I had a book that I wanted to read. I have forgotten now the name of the book. But I used to go to the library and pick up two or three books and bring them home. This was, I guess, when I was about nine or ten years of age. And, I hadn't finished this book, and I was interested in reading it and so I thought I'll get to this a little later, you see. I was reading the book. He came back unexpected to get something from the house and the windows weren't washed. And he caught me still reading
DR. DEBAKEY: a book.

SCHANCHE: This was on a Saturday?

DR. DEBAKEY: Yeah, I forgotten whether it was on a Saturday or Sunday or maybe in the summer, at any rate, vacation—I wasn't at school. And, he really got pretty angry about it and made it very clear to me that when he told me to do something he meant that I had to do that. And so, he punished me physically. He...

SCHANCHE: How?

DR. DEBAKEY: Well, he took his strap out and hit me...

SCHANCHE: This being a belt, a razor strap, or...

DR. DEBAKEY: Oh, he had a strap that he used. It hung some place. I've forgotten now.

SCHANCHE: A "special strap." (laugh)

DR. DEBAKEY: Yeah. (laugh) Oh, yeah. Well, it just stung, you know. But, he didn't punish so severely that...I hurt. But, my pride was hurt. You know... And I cried and then he said, "Go wash your face now and go get to those windows and wash'em."

And that was all there was to it.

SCHANCHE: Now, when an incident like that happened, when it was over, was it over?
DR. DEBAKEY: Yes.

SCHANKE: There was no lingering... grouchiness or that sort of thing?

DR. DEBAKEY: No. No, no, no. None at all. He was quick to do that, and then he was quick to get over it.

SCHANKE: And what lesson did you carry through life as a result of this?

DR. DEBAKEY: Well, you see, this wasn't the first time it happened.

SCHANKE: Yeah.

DR. DEBAKEY: After all, I wasn't easily disciplined. You know--I so wanted to do the things I wanted to do and I would occasionally try to get away with it. And there were other repeated episodes of disciplining. And then too, I was the oldest child and so, as the other children were growing up they would sometimes misbehave. And he would, you know...

If he disciplined them, he would discipline me at the same time. I was the oldest child and I was supposed to set a standard and that sort of thing, you know. And put a blame on me for their... you know, I felt I was being blamed for their misbehavior. And my brother was just a couple of years younger than I was, you see, so by the time I was, say, ten, he was eight. And he was a... just as... sort of
DR. DEBAKEY: independent too. He didn't ... And if I told him, you know, that he shouldn't be doing that, why he didn't take to that very kindly. He wasn't about to be bossed by me. And then I would complain, you see, to my father about that. That, I did try to tell him and he would say, "Well, you didn't do it well enough." You know. I... "You failed. It doesn't make any difference what you said."

SCHANCHE: You took part of the blame for it.

DR. DEBAKEY: And I... But I was still sort of hard to discipline in many ways, because I so wanted to do the things I wanted to do and I resented, you know, a certain amount of the discipline. And I remember one time, when I was I guess, oh, 12, 13, 14--something like that--I've forgotten the exact nature of the episode, but I was so... I felt so put on by his discipline because I didn't feel it was fair. That I decided to just leave. I was going to run away. And, I did. I just left the house. I didn't have a thing with me. And left. And I started walking. And I walked out of town to the railroad tracks. And I started walking down the railroad track. Going east. I remember that. I was
DR. DEBAKEY: going to go east. I didn't know where I was going, really, (laugh) except that New Orleans was east and I'd been there.

SCHANCHE: You told me this story and you...

DR. DEBAKEY: And so, I got, I got... Dark had fallen and I think I told you the rest of this.

SCHANCHE: Yes, you did.

DR. DEBAKEY: I don't want to repeat it. But it was just an illustration of my resentment of being disciplined.

DR. DEBAKEY: But, as I got older, and finally as I went to college, you see, I was more and more independent.

SCHANCHE: Right.

DR. DEBAKEY: ...and on my own. Although I went to college at an early age.

SCHANCHE: Well, you seem to have retained a pretty independent spirit throughout. Discipline, therefore, didn't cow you or break you, but did it have a value to you in your life?

DR. DEBAKEY: Oh, yes. Very definitely.

SCHANCHE: In what way?

DR. DEBAKEY: Well, you see, I think that what it did was to make me realize, cause subconsciously, I wasn't conscious of it then, that
DR. DEBAKEY: I needed to discipline myself. He was disciplining me, but in a sense forcing me to do things he thought I should be doing. And...

SCHANChe: By making you acutely aware of your responsibilities, is that it?

DR. DEBAKEY: That's right. Exactly.

SCHANChe: Yeah.

DR. DEBAKEY: One of the things that I used to resent very much was, in his disciplining, which was of a tremendous value to me, was the... You see he taught me to keep books. He kept the books and he taught me to keep the books. And he made me help him keep the books.

SCHANChe: This would be a standard ledger kind of a book?

DR. DEBAKEY: Yes. Oh, yes. Absolutely. You see, he was in business and here I was, I guess fifteen years of age, and I was keeping books. You know. And mathematics came very easy for me and I used to like to work with figures. But he was extremely accurate about everything. You know, precise. And if I made a mistake in addition, he would really give me hell about it. Just no excuse for it. All I had to do was
DR. DEBAKEY: check it. If I could find the error in addition or subtraction, or anything like that, you could have done it too. You know. Therefore, he didn't check it.

SCHANHE: Would you describe him as a perfectionist?

DR. DEBAKEY: Oh, yes. Oh, yes. Very definitely. I mean... You know he... The thing I would resent was, for example, if the figures showed one cent off, you know, that was just as serious an error as if it had showed dollars off. From his standpoint, it was an error.

SCHANHE: The fact it was not the quality, but the fact of the error itself that was the serious thing.

DR. DEBAKEY: Exactly. The fact that I made an error, you know. That was a very serious thing with him. But he couldn't tolerate errors. For the very simple reason that he felt there wasn't any need for it. And if I checked it properly, precisely, and was concentrating on what I was doing at the time, then it wouldn't happen. Well, that, you know, that taught me without my realizing it at the time. And I became, myself, you know, insistent upon being accurate about everything. And if anybody found an error in what I did
beginning to... It'd hurt my pride.

**SCHANCHE:** Like careless mistakes.

**DR. DEBAKEY:** Yeah. And there's no question about the fact that this was of tremendous value in shaping my whole approach to things. And when I went to college, for example, I was put on my own. You know, my own responsibility. He opened the bank account for me and he said, "This is your money." You know. "You're going to have to keep your own books. You're going to have to write your own checks. You're going to have to take care of your expenses. And--you're not going to get any more money. This is it."

You see. So I had to be precise about it. I learned to be.

**SCHANCHE:** What do you suppose made your father a perfectionist? What...

**DR. DEBAKEY:** Well, I really don't know because I have a feeling, to a large extent, that this was in him. You know, a person has a drive and an ambition to do well, to be successful, is not satisfied with less than perfect. You see. He's unhappy about it unless he is perfect about it. So, the same was true, for example...

**SCHANCHE:** You mean that this high degree of self discipline would be
SCHANCHE: just as much a genetic factor as an environmental factor?

DR. DEBAKEY: I have a feeling that it is an important genetic factor. I really do. He...you know... Working in the garden, for example, he made us work in the garden. You know, the rows had to be absolutely perfect. I mean, if there was a deviation in the row, you see, why he'd raise hell about it. You know, there's no excuse for it. You can see it just like I can. You know. Take a string, you know. These sort of things.

SCHANCHE: Did you actually do that? Stretch a string to make sure the row was straight?

DR. DEBAKEY: Yes. Absolutely. Oh, sure, I had to.

SCHANCHE: You did?

DR. DEBAKEY: And, you know, I think it's in a person and I suppose it was in me to a large extent. All I had to do was be...to develop it, you see.

SCHANCHE: How did you cultivate these rows in the garden? With hand tools? Or with mule-drawn plow?

DR. DEBAKEY: No, no. It wasn't that big a garden. We had a vegetable garden and a flower garden.
SCHANCHE: Both vegetables and flowers.

DR. DEBAKEY: Both. Yeah. Uh-huh. Flower garden was around the
front and the side of the yard. The vegetable garden was
in the back of the yard. We had a big lot.

SCHANCHE: What did you grow in the vegetable garden?

DR. DEBAKEY: Oh, we grew everything. We grew corn. And you see, I
became so good... you know, really good in the gardening
that, in those days, there would be prizes given for gardening.
And, I won. I still have the watch that I won as a...

SCHANCHE: A watch?

DR. DEBAKEY: Yes.

SCHANCHE: How old were you when you won the watch?

DR. DEBAKEY: Oh, I must have been about 12 or 13.

SCHANCHE: What kind of watch?

DR. DEBAKEY: It was a ...

SCHANCHE: Pocket watch?

DR. DEBAKEY: Pocket watch. I still have it. Yeah.

SCHANCHE: You remember the name of it? The brand?

DR. DEBAKEY: I don't know whether it runs or not.

SCHANCHE: Was it an Ingersall?

DR. DEBAKEY: Elgin, I think.
SCHANKE: Elgin.

DR. DEBAKEY: Yeah.

SCHANKE: Gold?

DR. DEBAKEY: No, it was a silver one.

SCHANKE: Silver watch?

DR. DEBAKEY: Yes, silver.

SCHANKE: Was this considered a manly occupation among your peers at the time?

DR. DEBAKEY: Oh, yes.

SCHANKE: Did other boys do it?

DR. DEBAKEY: Other boys... Oh, see I was engaged in competition with other boys. See. Absolutely.

SCHANKE: Were girls involved also in gardening?

DR. DEBAKEY: No.

SCHANKE: It was strictly...

DR. DEBAKEY: Strictly boys.

SCHANKE: What is this? Sort of the off-shoot of a basically agricultural community?

DR. DEBAKEY: It was a tri-parish thing. It was... I've forgotten now who sponsored it. But I remember that we brought our
DR. DEBAKEY: things to the bank and displayed them in the bank when we...

For example; if we won first prize, we brought the things to the bank to show.

SCHANCHE: What did you bring in? Cabbages and corn? Or flowers?

DR. DEBAKEY: Yes. No, uh...

SCHANCHE: These were produce?

DR. DEBAKEY: These were produce. Yeah. Vegetable gardens. Vegetable gardens. We brought in, for example, ears of corn, or whatever we won the prize about.

SCHANCHE: What did you win the prize for?

DR. DEBAKEY: Well, I won the over-all prize for the way the garden was laid out. And, then I won the top prize for corn and tomatoes.

SCHANCHE: Brought your corn and tomatoes into the bank.

DR. DEBAKEY: Yeah, yeah. Huge tomatoes.

SCHANCHE: Judges came and looked at your garden first hand?

DR. DEBAKEY: Oh, they came and looked at the garden. Yeah, yeah.

SCHANCHE: Alright, on the one hand you have your father who is a perfectionist and a disciplinarian. On the other, your mother whom you spoke of as a very tolerant, compassionate woman, whose...who had much more give to her than your father.
DR. DEBAKEY: Very much so. Very much so. She was a very, very kind, compassionate person who was constantly teaching us gentleness and compassion to others. And... She exemplified this in the way she behaved with other people and what she did for them and she was constantly trying to get some poor people... You know in those days we didn't have welfare. And we had lots of Negroes around and many of them worked for us and sometimes they'd get sick or they needed help for one reason or another. She'd find out about it, you know. Sometimes they'd come to her and talk to her, because they knew she was easily touched. Well, she'd help them and... And then my father used to get a little... And say... He'd say some things to her. SCHANCHE: You told me he would say, "Why are you bothering with these no good..."

DR. DEBAKEY: "These ladies are no good people." You see.

SCHANCHE: She communicated this compassion to you by example.

So, what's an example? Is there a particular incident you can recall that your mother helping a Negro family, for example. What...?
DR. DEBAKEY: Yes, well, she... To illustrate, she would put together some of our... I remember one time she put some old clothes together. And there was a cap that I liked very much. It was kind of old and all worn, but I was attached to it. I wanted to wear it. It was my cap, you know.

SCHANCHE: It was a little cloth cap.

DR. DEBAKEY: Yeah, that's right, with a little bill. And I had... I liked it and had been wearing it for some years... Oh, several years, I guess. Maybe, I don't know how long it was, but it was getting worn.

SCHANCHE: Sort of your favorite cap?

DR. DEBAKEY: Yeah. And, she decided it was getting old and I ought to... It was going to be given away. And, she gave it to a Negro family. One Negro woman who had some children and she was obviously having a hard time. She'd put together a lot of old clothes for the children of this family, you see. And I came looking for my cap. It was missing and I asked her where it was and she said, "Well, I gave it to this Negro family." And I said, "Well, why did you
DR. DEBAKEY: give away my cap? That's my favorite cap and I liked it so much." And she said, "It was getting old."
And she said, "Besides, you have some other caps and some new ones." I said, "But, I don't like any of those. I liked the other one." She said, "Well, you must try and understand that these people are badly in need of help and they need some clothes and I gave this to them because they do need them. And you don't. Maybe you liked it, but you don't need it. You've got other clothes and you've got other caps and you don't need that one." And I still... You know, I couldn't understand this, you see. I still resented the fact that she gave my cap away. But she was trying to explain to me, and I can remember the incident of her trying to explain to me why she did it. There were many other episodes where she would do things like that and she'd do it on her own. She was...

SCHAN Che: Incidentally, was it a tweed cap? A plaid cap?
DR. DEBAKEY: I've forgotten whether it was tweed or plaid.
SCHAN Che: Wool or cotton?
DR. DEBAKEY: Oh, I think it was a cotton cap. Yeah.
SCHANCHE: Did you ever go with her on missions of mercy to poor families in a...

DR. DEBAKEY: Oh, yes. I used to... My earliest recollection was getting in the buggy. I couldn't have been more than five or six years of age. Getting in the buggy with my father and mother to got to the... And we used to do this sort of regularly. We... There was an orphanage just outside of the town. And, those days, you know, they were orphanages. Almost non-existent anymore. And, we'd get in the buggy and go out to this orphanage. I've forgotten the... I think it was on a Sunday, maybe Sunday afternoon. Something like that.

SCHANCHE: Do you recall the name of it?

DR. DEBAKEY: No, I don't. I don't remember the name of it.

SCHANCHE: Church orphanage?

DR. DEBAKEY: I think so. I think so. Maybe a Catholic orphanage. Anyway she'd have bundles of old clothes and she'd have some kind of things like cookies she'd made or things like that. She would take them out there and spend a few minutes out there with them and give them to a... I think it was Sisters, but I'm not sure, to distribute to the children. And then
DR. DEBAKEY: she would ask if there was anything else especially they needed or something like that. And this was a regular thing. You know... We'd do this regularly. And I can remember that. I say, it was even before the time we had an automobile.

SCHANCHE: What kind of buggy was it?

DR. DEBAKEY: It was a single seat buggy with one of those tops, you know.

SCHANCHE: Yeah, yeah. One horse.

DR. DEBAKEY: One horse. That's right. With a canopy over it, you know, with a seat that you could put on. And it was one horse.

SCHANCHE: Your mother wasn't Catholic, She was a Maronite Christian?

DR. DEBAKEY: Yeah.

SCHANCHE: Did she affiliate with a Protestant church in... What's your home?

DR. DEBAKEY: Well, you see, she was originally, when my father and mother got married and then moved to Lake Charles, they became Episcopalians. This was because, I think, the High Episcopal Church is very close to it.

SCHANCHE: Closer to it. Yeah.
And, so we were members of the Episcopalian Church.

So when I was born, I was brought up in the Episcopalian Church. And we went to church every Sunday. Every Sunday morning.

The whole family?

The whole family. Yeah, yeah. I went to Sunday school first. They'd take me to Sunday school and then, as the other children came along, they'd go to Sunday school.

And then, usually, they would come at eleven or something like that when the sermon was. I think it was... The sermon or something. And then we'd all go back together.

And, on Sunday it was a regular thing. But in addition to that, my father would always on Sunday read something from the Bible.

In the morning? When you gathered...

That's right.

Did you gather at breakfast?

Yeah. We gathered at breakfast and he'd have something... He'd read something from the Bible and we'd sort of... That was a kind of routine. And we'd have to sit there and listen to him read something from the Bible. He'd select
something from the Bible and he'd read it. He was not a profoundly religious man. It was very interesting, because he supported the church. We gave to the church. And he'd go regularly and he insisted that we go: to Sunday school and so on. But, he himself, I don't think, was a profoundly religious man.

SCHANKE: What...? Was it a necessary institution in his life, but not, not one that overwhelmed him?

DR. DEBAKEY: Yeah. Not at all. Not at all. But, my mother was. Not, in the sense that she carried her religion on her shirt sleeve, you know. I mean she was... She had religion in her, you know. And she used to... Tried time and again... You know... To... She'd always when she... when we needed explanation for this or something like this cap incident, she'd revert to Jesus Christ. You know. To explain to me that this was the Christian spirit. See. To help your fellow man. And be kind to him and so on.

SCHANKE: Would she tell a story to you when you were little too-- to illustrate for example your cap?

DR. DEBAKEY: Yes, she'd tell a story. Oh, yes. She'd bring that out.
DR. DEBAKEY: You see, to constantly remind us of this. And I think that this is one reason that all of us as we grew up had a kind of impression of Christian... of Christ and his teaching that isn't generally given. You know, in the sense of the way the church tries to teach you.

SCHANCHE: What was the impression you drew from your mother?

DR. DEBAKEY: Well, the impression we drew was that Christ was trying to teach the people God's word--to love each other and to be kind to each other: to help each other. And, we didn't understand why, you know, but philosophically, you see, this was really an expression of the Golden Rule. As you grow older you understand this better. Philosophically. But, we were brought up in the sense through her teaching of an image of Christ that isn't generally given, you know. I didn't get this in Sunday school. And I don't think most people really get it--the way she pictured Christ. He was a very, very kind, kind of person, you see. He was a compassionate man. He was concerned with your welfare. You know? He was trying to teach you to be concerned with your fellow man and to help him in any way you can.
SCHANCHE: In what other ways did she demonstrate this? The value you got from it obviously was of the highest, idealist kindness and compassion. Helpfulness.

DR. DEBAKEY: Well, she was also very liberal minded, you know. For example, my father was much more... And I suppose it was a part of his very strict way of life. He was...

You know, he had no patience with a person who... who'll say... would drink. You know, he thought that was just terrible. A waste. A waste. It was hurtful. It was bad for you. And, he had no patience with people who would smoke. You know, he thought they were lacking something in intelligence. You know what I mean. He was a little contemptuous of that.

SCHANCHE: These things weren't necessarily to him...The old hard-rock Baptist thought they were evil. and would send you to Hell.

DR. DEBAKEY: Oh, no, no, no.

SCHANCHE: They were just demonstrations of a lack of a personal discipline.

DR. DEBAKEY: Yeah, that's right. Mostly that. No, no, no. He didn't
DR. DEBAKEY: take that kind of attitude about it. And my mother sometimes when he'd get a little, let's say severe in his criticisms of somebody about this. She would remind him that that did not necessarily affect the person's goodness or the quality of the person at all. And if he wanted to smoke, he'd never hurt himself. If it doesn't hurt you, why do you care? You know. It shouldn't affect you.

SCHANCHE: That you should accept the weaknesses of other people and...

DR. DEBAKEY: Yeah, but you see, she didn't think of it as a weakness. He did.

SCHANCHE: Yeah, yeah.

DR. DEBAKEY: You see?

SCHANCHE: Well, alcohol she certainly would regard as a weakness, wouldn't she?

DR. DEBAKEY: Well, no. No. She thought, you know, there's nothing in th... She was used to saying this to him: "There's nothing in the Bible that says you mustn't drink." You know. Christ didn't say anything about that. If he wants
DR. DEBAKEY: to drink, as long as he doesn't hurt anyone else and if he
likes it, it's up to him.

SCHANKE: What about in the case of Mr. Conrad, the man who committed
suicide in the.. Episcopal...?

DR. DEBAKEY: Oh, yeah. Well, she was very kind about him. You know.
She was very compassionate. She liked him. He was a very
nice man, as many alcoholics are, you know.

SCHANKE: What was his first name?

DR. DEBAKEY: I can't think of his first name. I could find out, I guess.

SCHANKE: About how old was he?

DR. DEBAKEY: Oh, he must have been in his fifties, I would say. Late
forties or early fifties.

SCHANKE: Had he been the kind of itinerant pharmacist or had he been
in Lake Charles for a long time?

DR. DEBAKEY: No, he hadn't been in Lake Charles too long, if I remember
correctly. I'd have to go back... But, he had been a pharma-
cist all of his adult career, working at the pharmacy. But,
she was very kind to him.

SCHANKE: Had she tried to help him?

DR. DEBAKEY: Yes, well, in a... You know, she'd sometimes have make
something for him. Soup or something like that. She'd have
DR. DEBAKEY: me bring it to him. But, my father would get very...

You know... He... And I'm sure would have ultimately

fired him if it weren't for the fact that my mother was always

trying to point out to him, you know, that he needed to be

kind to this man and he needs help and after all when he

works, he can work and do well.

SCHANCHE: You said he was very kind to you and this is what attracted

you to him. What.. How was his kindness expressed?

DR. DEBAKEY: Well, he would, for example... I was curious about things

in the pharmacy. You know. I wanted to know what he was

doing when he filled the prescriptions. I was a very curious

person, you know, when I was growing up. I wanted to know

about everything. And learn everything, you know. And it

just aroused my curiosity. And so, he would take the

patience with me, you see, and I'd be there after I'd done

some of my chores and he was filling prescriptions.

SCHANCHE: Your chores were strictly menial and sort of cleaning up

and...

DR. DEBAKEY: Yeah, oh, yes. Delivering and that sort of thing.

SCHANCHE: Yeah.
DR. DEBAKEY: Well, he would tell me...tell me what the drugs were for--what they did. He'd show me how to do them. Then, after while, I'd ask him, "Let me do this." You know.

SCHANCHE: Do you remember a particular incident in which you were standing at his pharmacy table?

DR. DEBAKEY: Oh, yes. Yes. He was at me... He wa... We used to...

One of the prescriptions was for calamal powders, you see, the old prescription. And you put these in little pieces of paper, you see. Well, he'd show me how to smooth out the thing and then with the knife that they used, I've forgotten what that's called, but anyway, it's on a glass base. And you put the powder on and you mix it and then you square it and then you cut them, you see, in proper squares the number so that you get the right dose, for each packet. He showed me all of that, you see.

SCHANCHE: What was in calamal powder?

DR. DEBAKEY: Calamal powder was a form of--forgotten the exact ingredients now--but it was a combination of certain types of fairly common drugs that was used to treat certain types of fevers.
SCHANKE: I can ask...I can ask Elmer what went in it.

DR. DEBAKEY: ...in those days. Oh yes. Well, it's easy to find out.

Anyway, he taught me all of these things and he was always patient with me. You know, and trying and... And I was very constantly bothering him with questions, but he never got impatient with me. And...

SCHANKE: Was he the sort of man who would tell you stories?

DR. DEBAKEY: Well, to some extent, yes. Especially if I asked questions about certain things, he'd try to... He'd tell me about it. He was very, very easy with me. He was not a... He was a rather reserved man, but he liked me and so he and I became companions.

SCHANKE: Why? A congenial...?

DR. DEBAKEY: Yes...Yes. And I liked him, you know. Enjoyed him.

SCHANKE: Had you ever seen him drunk and been disappointed in him before he shot himself? Or...

DR. DEBAKEY: The interesting thing is...

SCHANKE: He'd do this drinking in private?

DR. DEBAKEY: No, no. He would drink in private, but he drank a lot.

And like alcoholics, he could drink a lot and hold it and...
DR. DEBAKEY: look alright. And then, maybe when he went to bed, he would drink some more. Maybe, I guess, you know, be soused. I don't know. I never saw him in that sort of condition til the time I left.

SCHANCHE: Yeah.

DR. DEBAKEY: But, my father used to talk about this, you see. And I'd hear him talk about it to my mother. And he was very critical of this.

SCHANCHE: So you saw one side of him and your father saw another.

DR. DEBAKEY: Yeah, yeah.

SCHANCHE: Did you have trouble matching these two...wondering? I mean this is the first indication of adulthood.

DR. DEBAKEY: Yes, you see, I could hear my mother talking defending him and my father talking criticizing. You see. And I liked him so I didn't accept my father's...you know. But it undoubtedly had some influence on us because none of us drank. You see. Oh, I say none of us drank. I mean occasionally at a party we might have a sip of wine, or something like that. I mean it's not that we're teetotalers or anything like that. It's just that, having grown up this way, you either develop an attitude towards it or not. And, you know,
DR. DEBAKEY: by the time we were adults, it was sort of too late for us to acquire any taste for liquor. And the consequence, it... None of us care about liquor. It's interesting because we... It's not that we feel anything's wrong with it. You know. It's... Maybe that's because of our mother's teaching in this regard. But...

SCHANCHE: As a surgeon you'd not be inclined to be a drinker, anyway.
DR. DEBAKEY: Yeah, of course.
SCHANCHE: You've got your profession to...
DR. DEBAKEY: Of course, you just can't work, you see. Of course, to do that I... You know, you have to be in good physical condition. There's no question about that—to be a good surgeon.
SCHANCHE: Well, back to Conrad. His death was a terrible experience for you and the first time you'd seen anyone dead and under really violent, traumatic conditions.
DR. DEBAKEY: Yes, I found the victim.
SCHANCHE: What has been the affect of this incident in your life on your life? And...
DR. DEBAKEY: Well, I don't.. It's hard to say, Don. I can't really be certain it has had any profound affect on my life. It was a
DR. DEBAKEY: terrible experience and it shook me badly at the time. I remember crying, you know. I went to the funeral and I cried at the funeral. I missed him tremendously and I felt so sad it hurt, you know.

SCHANCHE: Did it have... Did it have any influence in making you want to know more about motivations of people and troubles?

DR. DEBAKEY: No, because you see...

SCHANCHE: What could drive a man to that extreme?

DR. DEBAKEY: No, it came... you see... it came as a complete surprise to me. I didn't at that time realize that he may have been depressed. Because I never saw him depressed. With me, he was very genial. But, I... It's hard for me to say what kind of affect it may have had. It's doubtful that it had any profound affect on my life.

SCHANCHE: Yeah. It certainly taught you that people are more complex than they seem.

DR. DEBAKEY: Oh, yes. Very definitely. And, you see, it's indelibly imprinted in my mind. I can still visualize him lying on this bed with his arm out like that hanging over the bed and the pistol down below.
SCHANKE: Lying on the floor.

DR. DEBAKEY: And the pistol lying on the floor.

SCHANKE: What kind of a room was it? Was it just kind of a shabby-looking room? Or...

DR. DEBAKEY: Well, this was a room where he lived.

SCHANKE: In the back of the drugstore.

DR. DEBAKEY: It was his... in the back of the drugstore. Yes. He...

We'd fixed up this room. My parents had fixed up this room for him to live in. He had no other place to live.

SCHANKE: Could he cook in there and so forth?

DR. DEBAKEY: Yes. He had a little stove and he had a bathroom. It was kind of like a little apartment.

SCHANKE: Little apartment.

DR. DEBAKEY: Yeah. Yeah. He was quite comfortable there. And my mother would come sometimes and sort of clean up for him and get things tidied up. He was not a very tidy man.

SCHANKE: Did you have servants in your house?

DR. DEBAKEY: Yes. Yes, we had Negroes that... In fact, we had a Negro couple that lived in a little house in the back of the yard. They lived with us for years.

SCHANKE: Did they have children?
DR. DEBAKEY: No, they didn't have children, though they had relatives who had children and they'd come, you see. And the... I recall later when I went to New Orleans, by that time, oh say, ten years later, he'd gotten pretty old and they still lived there, but my father and mother took care of them and finally she died and then he lived alone there. And he was getting old and he developed heart disease. And my father took him to New Orleans for me to try to get him taken care of in New Orleans with a heart specialist, you see.

SCHANCHE: This is while you were in medical school? Or college?

DR. DEBAKEY: Yeah, yeah. While I was in medical school.

SCHANCHE: What were their names?

DR. DEBAKEY: Gee, you know I've forgotten their... I'd have to try and recall their names or find it someplace. But, I've forgotten their names now.

SCHANCHE: Did they have any influence on you as a young...

DR. DEBAKEY: Well, they were very kind to me. Yes. Oh, yes. I used to be with 'em sometimes in the garden and... But they... He worked mostly for my father doing other things, you see, and working in the garden. She worked for my mother and--
helping to wash and clean and sometimes cook. Although, Mother rather...

Your mother did most of the cooking?

She did most of the cooking herself. That was because my father was very finicky about cooking—about the food. And she... He didn't like it unless she cooked it.

What kinds of food did he like?

Oh, everything. You know. He...

Because he developed Louisiana tastes?

Oh, yes. Oh, yes. My mother cooked all kinds of Louisiana cooking, really. And he was very finicky about his food. And she had to do it just right. She knew how he liked things and she did it his way. She kind of liked to cook.

Did you have feelings as a child about racial injustice? When you...

No. Sure didn't. I was not aware of it at all. And it was only after I got into college and later in life that I became aware of the racial injustices. But, this is interesting. You could in the hospitals, you know. It seemed to me the Negroes didn't get, in the hospital, the same kind of attention
DR. DEBAKEY: that even the poor whites got. And that when... I never was aware of it before.

SCHANCHE: When were you first conscious of this in a hospital?

DR. DEBAKEY: Well...

SCHANCHE: As a med student?

DR. DEBAKEY: Yeah... Well, no, I don't think it was when I was a medical student, because I wasn't... At that time I was, you know, concerned with my studies and trying to learn, and that sort of thing. It was later after I became an intern and a resident and had to deal with patients.

SCHANCHE: Yeah.

DR. DEBAKEY: And be responsible for them. But, I... For example, the thing that distressed me more than anything else was that we had a tuberculosis ward. Well, the Negro tuberculosis ward was just dirty and inadequate and crowded and...

SCHANCHE: Was this at Charity Hospital?

DR. DEBAKEY: Charity Hospital. Whereas the white tuberculosis ward had a new building. And they were much better taken care of and this was even...

SCHANCHE: Even the poor white charity patients?
DR. DEBAKEY: Yeah, oh yes. Yeah. And, you know, it's a curious thing. You aren't aware of it because you grow up with this. And until later, you begin to realize that they're not even considered human beings. You see?

SCHANChE: Did you express this disillusionment at the time?

DR. DEBAKEY: Oh, yes. I used to say, you know, "This is terrible. This oughtn't to be used. Shouldn't... I mean, the... This is no way to take care of them," and so on.

SCHANChE: Well, did you... Is there an incident? Did you go to Dr. Ochsner, for example, and...

DR. DEBAKEY: No, Dr. Ochsner was not that kind of person, you see. Dr. Ochsner was a very humane man and he never was aware or concerned with racial injustices. I mean, he was a man who treated everybody the same way. And he would treat the Negroes on the service with the same kind of attention he treated the white people. And I used to admire this in him. And then he had nothing... He had no control over the hospital.

SCHANChE: Yeah.

DR. DEBAKEY: In fact, you know, later on they threw him out when he wouldn't go along with things. Because he complained about the way
DR. DEBAKEY: it was run. But, then you see, I left and so, after I had gotten my training there, I went to Europe. I wasn't aware of any racial matters. And the first really test of my concern about this occurred after I moved to Houston. Where in the hospital, Methodist Hospital, they made an issue of the fact that the patients could not be admitted--Negro patients-- couldn't be admitted to the hospital. And forced the issue by...

SCHANKE: Tell me how that came about. You've mentioned this to me several times.

DR. DEBAKEY: Yeah. Well, I had a patient who was sent to me. And I've forgotten what city he was from now. But, this goes back to about 1953 or '4, something like that. And, see, by that time, I had developed certain things in the treatment of certain forms of cardiovascular diseases. And they were innovative. Nobody had the experience I had. I had developed them. I had operated on th... Developed the operation first and then reported it. Doctors were beginning to be aware that I was doing these things, which you couldn't do before. So I had patients sent to me with some of these diseases. And this patient turned up to be a Negro. And I
DR. DEBAKEY: had already made the reservation for him to be admitted
to the hospital. And when he got there, they wouldn't admit
him. You see. So, I went to see the hospital administrator
and told him. I told him that, you know, this man needed
this kind of operation and he needed to be put in the hospital
for this purpose.

SCHANKE: Remember what the operation was?

DR. DEBAKEY: If I remember correctly, it was an aneurysm of the thoracic
aorta. So they said, "Well, we just can't admit him because
we'd have a terrible problem on our hands with the staff."
And, and. And I said, "What's the staff got to do with it?"
Well, they had taken the position that if they started with
any Negro patients then it ruins the hospital. I said, "How's
it ruin the hospital?" Well, this is the way they feel. And
I said, "Well, I think it's wrong. This is a Methodist hos-
pital. This is a Christian hospital. How can you say you're
a Christian and do this?" And I said, "I think this is a matter
for the Board of Trustees to understand that if they want to
take the position that they're going to discriminate against
different kinds of people who need help, then I think they
ought to understand they're not being Christians." And I
DR. DEBAKEY: said I don't think that that position is tolerable. I don't think they can do this. And I said, I'm going to bring it right to them."

"Oh, don't do that." You know. They said, "Don't do that. Don't make an issue of it. We'll make an exception. We'll make an exception and we'll let you come bring your patient in and see what we can do."

Well, they did. But then I had some more. You see. I was beginning to have more. And, so I went to one of the Trustees and told him about this, you see. I said, You know, I had occasion to talk to them personally. And I said, "I really think this policy has to be changed. I don't think you can continue to do this." It was long before the...

SCHANCHE: Each time you admitted a Negro patient you had to go through exception crisis...

DR. DEBAKEY: Yes, exactly. So, no, no... They finally, to quiet me, they finally agreed to let me admit them with my patients.

But then they were getting some grumbling from the staff. Pretty (?) grumblings. And so, fortunately, the administrator was on my side, really, basically.

SCHANCHE: He sort of agreed with you, but we couldn't fly against local
SCHANKE: custom, and so forth.

DR. DEBAKEY: Yeah. Yeah. That's right. Oh, yes. He agreed with me basically. He was... He felt the same way I did. He was having... One of his problems was how to deal with the staff that was criticizing us. So, I realized this and that's why I spoke confidentially to one of the Trustees. And I said, "You know, I really think this has to be changed. I don't think this..." See, they didn't... They had no policy of excluding Negroes. They hadn't made any policy. It was just the custom.

SCHANKE: Unspoken rule. A custom that developed.

DR. DEBAKEY: Yeah, yeah.

SCHANKE: Was this before or after the 1954 Supreme Court decision?

DR. DEBAKEY: No, this was before.

SCHANKE: Before.

DR. DEBAKEY: Yeah. Oh, yeah.

SCHANKE: So it would have been about 1953, '52, or something?

DR. DEBAKEY: That's right. '52, '53. Anyway, it was... It was before the... all of the say, the massive demonstrations and so...

SCHANKE: Segregation was still a very real and rigid institution.
DR. DEBAKEY: Definitely. No question. Oh, yes. Oh, yes. So, anyway I did talk to one or two of the Trustees and they sided with me. They said, "Yes, quite right. We're running a hospital and we're Methodists, so we should..." Course, we have this problem in the church, you know. But, it is... They have a problem. You know, there are Methodist Negro churches and then there's white churches.

SCHANKE: Yes, that's right.

DR. DEBAKEY: So, it was interesting to get the reaction when you spoke to people. And basically they agreed this was not a compassionate way to deal with human beings. You know.

SCHANKE: Individuals agreed, but all feared the custom itself.

DR. DEBAKEY: That's right. And they told me very frankly. They said, "Well, our greatest problem is going to be with our staff and some of our Trustees are... But, we are going to have to change the policy." Now..." And the interesting thing is that they did. And they did it before the imposition of the policy on civil rights. Fortunately.

SCHANKE: Well, how did the staff react when the policy was formally changed?
DR. DEBAKEY: I think they gave into it.
SCHANKE: More talk than action?
DR. DEBAKEY: Yeah, more talk than action. They gave into it. Then, too, there weren't that many. I'm sure that if they'd been, you know, all of the sudden swamped with Negro patients it would have been a problem. But, there weren't that many, largely because, you see, Negroes couldn't afford it.
SCHANKE: Couldn't afford the hospital.
DR. DEBAKEY: No. That's right. This is what excluded them. But, you see, the Negroes I was taking care of could afford it.
SCHANKE: These were all referred to you from out of town.
DR. DEBAKEY: Yes, yes. That's right.
SCHANKE: Not from Houston doctors.
DR. DEBAKEY: No.
SCHANKE: Back to your family, I was trying to get at some of the things that created you as you are now and what... How these values that were transplanted or that were imparted to you came about. What was your mother's family background?
DR. DEBAKEY: Well, I didn't... You see... I didn't... In this small town we were pretty isolated from the rest of the family and saw
very little of any other members of the family. So I really
didn't get to know them. I remember my grandmother be-
cause she lived with us. My mother's mother. Until I was,
I guess, eight, nine, ten years of age.

What was your mother's maiden name? Or your grand-
mother's name?

I think it's Zarhba. Z-A-R-H-B-A. Zarhba. And I remem-
ber my grandmother. My grandmother was a very sweet
person. I was kind of her favorite and... She'd do all kinds
of things for me. I remember well... But, she died when
I was, I guess, about ten. Eight, nine, or ten years of age.

Did she speak English with you?

Oh yes. Yes.

Or French with you or what? Was the household multi-
lingual? You know, as you grew up were the things that they
said...

No. It was predominately English.

Yeah.

Yeah. Mainly English. My father spoke French because
he had associates that he--business associates--that he
talked French with. But, and, of course, we picked up some
French words. You know, some French expressions. So
I think we could understand it, but it was predominately
English and our schooling, you see, was all predominately
DR. DEBAKEY: English.

SCHANChe: Yeah.

DR. DEBAKEY: So. And you see, Lake Charles is not a predominately French town. It's a predominately English town, even though it's in south Louisiana. Because it was first a lumber town and still is a big lumber town. Then later, oil and gas and sulfur. So, it was a prosperous town. Very busy. And very active and people did well there, even the Negroes did well.

SCHANChe: Was it your mother or your father who grew up in Oklahoma?

DR. DEBAKEY: My mother.

SCHANChe: Your mother.

DR. DEBAKEY: Yeah.

SCHANChe: How did your mother and father meet?

DR. DEBAKEY: Gee, I don't recall exactly how they met. I think through some friends, who knew both...who knew their parents.

SCHANChe: This being a small Lebanese community, so they met.

DR. DEBAKEY: Yeah, yeah. Through some friends.

SCHANChe: Was that in Oklahoma? Or in Louisiana?

DR. DEBAKEY: In Oklahoma.
SCHANHE: In Oklahoma.

DR. DEBAKEY: Yeah.

SCHANHE: When did they go to...

DR. DEBAKEY: Cause see, my father was in Louisiana before. He brought her back after he was married.

SCHANHE: When did he go to Lake Charles?

DR. DEBAKEY: Oh, in mine.. About eighteen.. I think 1890 or something like that.

SCHANHE: Was he still a boy then? Or was he a young man?

DR. DEBAKEY: Oh yes. Oh, no, no. He was a boy.

SCHANHE: And his parents had moved there? Or did he go on his own?

DR. DEBAKEY: No, he went on his own through, well, he went there through some business associates and, if I remember correctly, in either Ohio or New York, I'd have to check that, because he was at both places. And he was not going to go down there to settle. He was going down there on business for them. He must have been 17 or 18 years of age...something like that. And then, he liked it so much, that he went back and decided to go into business on his own.

SCHANHE: What was he doing at the time? Was he a salesman for someone?
DR. DEBAKEY: Yeah. He was a salesman. That's right.

SCHANCHE: In what kind of business? Do you recall?

DR. DEBAKEY: I think he was a salesman for some kind of dry goods business, originally.

SCHANCHE: His formal education was rather limited, wasn't it?

DR. DEBAKEY: Yeah. Oh, yes. He was pretty well... He taught him...

Well, he had, I think I told you this, he went to school until he was about fourteen or fifteen. So he had a good start, but he was a great reader. I mean, he used to read until late at night, you know. He taught himself so many things that in those days, you know, those early days many of the people did that. They learned and taught themselves different kinds of, sort of educational qualities that people get formally now.

SCHANCHE: How old was he when he immigrated?

DR. DEBAKEY: Very, very young. I've forgotten now.

SCHANCHE: He was brought by his parents...

DR. DEBAKEY: Very young...very young.

SCHANCHE: ...as a tiny child, not as a...

DR. DEBAKEY: Well, actually, he wasn't brought by his parents. He, if I remember correctly, immigrated when he was... immigrated with some either relatives or friends of his parents, originally.
DR. DEBAKEY: And he was very young. I'd have to go back and get some records on that to see. But, you see, it was around 1890 or something like that.

SCHANCHE: Wasn't that unusual for his parents in Lebanon...

DR. DEBAKEY: Very!

SCHANCHE: ..to send him off to America with some..

DR. DEBAKEY: Well, they didn't send him at all. He wanted to go.

SCHANCHE: Well, then he was old enough to have made the decision.

DR. DEBAKEY: Well, he must have been.. Well, no he was.. He must have been about seven, I guess, or eight. And actually, you see, they didn't send him to immigrate. You know. They... They didn't go with these people and he went back and came back. Then he decided to... You see, he stayed over here for a while and then he went back as a child and that's when he told them he wanted to immigrate. So, that would make him about ten or around...

SCHANCHE: A teenager or something?

DR. DEBAKEY: Yeah, no, he was.. yeah, about ten or eleven, I guess.

He came back and lived with some people over here, some
DR. DEBAKEY: relatives. I think in New York or Ohio or Iowa, or some place. That's sort of vague in my mind, now. I could find out about it.

SCHANKE: Then when he got to Lake Charles and decided to start businesses there, what did he do? He... Was his very first business a dry goods...?

DR. DEBAKEY: Well, he was still... No, no... He was working for some other people. I mean, he was working as a salesman for some other people. And, traveling in that neighborhood, you see. That's how he made so many good friends with the people in that area. And then he borrowed some money from the bank to develop his own business and continued to travel about and make... And made money and finally bought a place, you know.

SCHANKE: Well, this is a drugstore then?

DR. DEBAKEY: Yeah, yeah.

SCHANKE: And he was a self-taught pharmacist.

DR. DEBAKEY: Yeah, yeah. Well, actually he also had a dry goods store, too. Originally.

SCHANKE: Which came first? The dry goods store?

DR. DEBAKEY: I think, because he was working for the drygoods firm.
DR. DEBAKEY: It was a wholesale firm. But that was before, actually.
before I was born.

SCHANChe: Right.

DR. DEBAKEY: So I know very little about that.

SCHANChe: How big did his business become there? He owned more
than one drugstore and other things?

DR. DEBAKEY: Yeah and... Well, he... You see he got into other things.
For example, he owned a rice farm. He owned some farms
in the country. Land--that was prominently used for
farming purposes. He bought some real estate in town and
built some buildings around them. Well, he...

SCHANChe: He must have been a very astute business man.

DR. DEBAKEY: He was and he was a hard worker, you see. And he made
money and he saved it and invested it where ever and he was
relatively prosperous, you know. You know, in a small
town like that, for example, he had one of the first auto-
mobiles, one of the first electric generators for home before
that...

SCHANChe: You told me about that..

DR. DEBAKEY: He was very...
SCHANKE: What kind of an automobile was it? Do you remember? The first one.

DR. DEBAKEY: I don't remember the first one, but I remember we had one called the Cole Eight which we used when we took the trip to Europe.

SCHANKE: That's the one you took to Europe.

DR. DEBAKEY: Yeah. Yeah. I don't remember the name of the first one we had. May have been a Ford.

SCHANKE: Did he carry on with this process of self-education so that you were aware of it. I mean was...

DR. DEBAKEY: Oh, yes.

SCHANKE: ...it something he imparted to you: the importance of continually expanding your mind?

DR. DEBAKEY: Oh, yes. He was... He always put great emphasis upon that really.

SCHANKE: How did he do it?

DR. DEBAKEY: Well, by constantly pointing out the importance of it to us and the need to expand our minds and learning more and more about things...about..

SCHANKE: Did he recommend books to you or give you things to read?

SCHANKE: What?

DR. DEBAKEY: Well, we had the encyclopedias. He... When he was teaching me accounting, for example, he gave me some books to read about accounting. Things of that sort, you see. No, no. He was a great believer in the importance of education.

SCHANKE: But his self-education was aimed primarily at business matters rather than... 

DR. DEBAKEY: No, he would read about all kinds of things, you know. He was curious about the world. And he'd read any... He'd read very much. You know he got to know a great deal about what went on. I remember when radio was sort of coming in and... He suggested that I build a radio. And he... I was just a little boy. It was a crystal set. And I remember how, how much... how gratified I was that I'd built a radio that worked. You could listen and hear something.

SCHANKE: Were you intrigued by technical and mechanical things?

DR. DEBAKEY: Yes, very much so.

SCHANKE: When you were young?

DR. DEBAKEY: Very much so.

SCHANKE: What sorts of things?
DR. DEBAKEY: Well, for example, I was curious about the automobile. And so curious that sometimes I got into it. You know. And my father would discipline me about that. And finally he bought a car for me. It was a second hand Studebaker. I remember that.

SCHANChe: What year?

DR. DEBAKEY: Oh, this must have... I couldn't have been more than thirteen.

SCHANChe: So the Studebaker must have been a...

DR. DEBAKEY: Thirteen or fourteen. And, it was second hand. I remember that. And I used to work in the backyard with it. Take it down, clean it. You know. Take the parts out. Clean it and gasoline and oil it well. Put the parts back. And it... then work on it. Finally learned a lot about the way the motor operated. And I could fix it myself. I'd go down and buy certain parts and fix it. For example, if the brakes went out, I'd go buy some new brakes and put them in there.

SCHANChe: Did you develop a taste for this?

DR. DEBAKEY: Oh, yes. Very much so.

SCHANChe: ...For the drama of seeing something repairable and being worked on?

DR. DEBAKEY: Oh, yeah. It was fascinating. You know. It fascinated me. And I liked to work with my hands. I used to come in and my mother would see my hands and then I come in and begin working after school on my car. I'd have to go in and scrub
DR. DEBAKEY: them and use soap and an abrasive material they used to have and.. But..

SCHANKE: Did that have an influence on you as a direction towards surgery?

DR. DEBAKEY: I don't know, except that I wanted... I liked to use my hands. You know. I want.. I learned to draw. I loved to draw. And I used to be drawing all the time when I'd get a chance. And, when I was working...

SCHANKE: Drawing figures from life? Or..

DR. DEBAKEY: Yeah, yeah. And I'd draw precise things with a ruler and so on.

SCHANKE: Mechanical drawing.

DR. DEBAKEY: Mechanical drawings. And blueprints. I loved the.. you know. Things of that sort. I'd make.. I'd draw, for example, I'd.. I had a little kind of a shop, you know. My father had a shop full of tools of all kinds and...

SCHANKE: Where was this? In the basement?

DR. DEBAKEY: In the backyard.

SCHANKE: In the backyard.
DR. DEBAKEY: Yeah, we had a little out house that he'd built for us. And.. which we kept all kinds of tools and things of that sort, you see. And..we had to keep it clean too, you see. Everything in the right place. There was a drawing for the tools hung up there where everything was put.

SCHANKE: Meticulous then?

DR. DEBAKEY: Oh, yes.

SCHANKE: Everything had its place.

DR. DEBAKEY: Oh, yes. We had screws in.. I remember these were in jars, you know. Nails. They were all in jars. Different sizes. And finally...

SCHANKE: This was your father's orderliness that...

DR. DEBAKEY: Yes, oh yes. And we had to keep it that way. We could use them but we had to keep it--take care of them. You couldn't put a hammer back that was dirty. It had to be cleaned off and put back, and that sort of thing. And, I used to make little furniture pieces. And I would draw this out, you know, what I was going to do. I'd make a coffee table. Draw it out. And then etch out the design and... Things like that. And I liked to do that. My brother liked it too.

SCHANKE: Well, you grew up then with a strong feeling for order.

DR. DEBAKEY: Yes, very strong feeling for order and...
SCHANKE: You think this came largely from your father's training?

DR. DEBAKEY: Yeah. He disciplined us in this regard. No question about that. No, he'd raise hell if he came in looking for a tool and it wasn't in the right place. And he knew that we had taken it away. And he'd raise hell about it. We learned very well to put it back.

SCHANKE: Yeah, yeah.

DR. DEBAKEY: I...we learned the importance of this. Because when you wanted it the next time you knew where it was.

END SIDE ONE OF TAPE

Side Two: B (45 mins.)

SCHANKE: Yeah. Your father you mentioned was an early riser and that all of you got this from him. What was his... What time did he get up in the morning?

DR. DEBAKEY: Well, he... It varied. But he was up by four o'clock, anyway. You know. Then, you see, we had chores to do in the morning. That's one reason he got up early. He wanted to get all this done, before he got involved in his business and things. So, we had to get up early and do certain things.

SCHANKE: What would you do when you got up at four o'clock in the morning?
DR. DEBAKEY: Well, I didn't get up at four.

SCHANCHE: No?

DR. DEBAKEY: He might be up. He was up away ahead of us. And he...

Maybe he'd make some coffee. He might be reading or doing a few other things. By five or five-thirty we were up.

You see. Well, we all had to eat breakfast together, so my mother would cook breakfast.

SCHANCHE: When would breakfast be then? Six?

DR. DEBAKEY: Well, you see, we would leave for school about seven-fifteen, seven-thirty. We started to school. And in those days, we walked. You know. They didn't take us in the car and there wasn't any bus. So we had to walk to school. And even though school wasn't very far, it was still. You know, it takes ten or fifteen minutes to get there by walking, and then we had to check on our lessons before we left. You see.

So we had to eat breakfast.

SCHANCHE: So, you'd do your homework before leaving the house.

DR. DEBAKEY: Yes. And make sure everything...

SCHANCHE: Is that something your parents asked you to do?

DR. DEBAKEY: Oh, yes.

SCHANCHE: ...or something you did on your own?
DR. DEBAKEY: Oh, no, no, no. They made us do it. Later on, of course, it was the routine. We did it without them having to say.

SCHANCHE: So you would get up in the morning and you would do some chore. What would the chore be? Clean up your room?

DR. DEBAKEY: Clean up our room.

SCHANCHE: Make your bed?

DR. DEBAKEY: That's right. Make our bed. And get dressed and then we'd go down to the kitchen and we had different chores. One of the things I had to do was to grind the coffee and get it ready for making coffee. And then I'd help my mother in the kitchen, doing the cooking or something like that. She'd tell me what to do, then as there were were certain. Sometimes in the summertime we... It was daylight by five-thirty or six o'clock, so we occasionally had some chores in the garden to do. Or something like that. Or, bringing in. In the winter time we'd have to bring wood. We had a wooden stove and wooden fireplace.

SCHANCHE: These chores, generally, before breakfast?

DR. DEBAKEY: Yeah. Uh-huh. Then, we'd have breakfast and then we'd go to school. So there was enough to do in the morning that we had to get up early to do them.
Your father was always occupied.

Oh, yeah. He was up before we were.

And his day was a long day.

Yes, oh yes. Yeah.

Was he like you? He slept only a few hours a night?

Yeah, yeah.

What time did he go to bed? Midnight?

Uh, well, of course, it's hard for me to say in that period, because I was asleep. But, I know from later, you know, as I grew up and got older, that he'd often be up at eleven, twelve, sometimes one o'clock in the morning. And he obviously could get along on three or four hours sleep.

Did he ever sit you down and say, "Son, you can add six hours a day to your life if you don't sleep too much."?

No, no he never said anything like that. And he never... You know, he didn't consciously try. Because my mother, for example, wanted more sleep. And later in life, she didn't have to get up quite as early. But he always... He continued to do so. He was a very early riser and he was very active. He was a man who was very healthy. And, obviously, could get along very well with a very short amount of sleep. So, you see, this probably is a genetic thing.
SCHANČE: Yeah.

DR. DEBAKEY: It's hard to find any other way. But...

SCHANČE: When were you first conscious of the fact that you didn't need as much sleep as other people seemed to and that you could use your time?

DR. DEBAKEY: Well, I think, I think this came to me in college. And I think this came about in an interesting way because, you see, when I first went to college I was sort of "green" to the city. You know. I was wide-eyed and I wanted to see what was going on with everybody. And I stayed in a dormitory. You see. And the boys used to do a lot of bulling at night, you see. And I was fascinated with all the things they were talking about and so on. So, we'd be up until quite late. Or, we'd go out. They wanted to go on the town, you see. And, I wanted to go with them. I wanted to see what was going on.

SCHANČE: Were you kind of free at Tulane then? You didn't have to sign in before eleven o'clock at night?

DR. DEBAKEY: No, no.

SCHANČE: You could come and go as you pleased.

DR. DEBAKEY: Yeah, yeah, yeah.

SCHANČE: Only the boys though. The girls... Well, of course, Tulane was a boys' school.
DR. DEBAKEY: Tulane was a boys' school, you see. The girls' school was called Sophie Newcombe.

SCHANCHE: Yeah. Sophie Newcombe. And they wouldn't let the girls go out at night.

DR. DEBAKEY: No. So, I couldn't do much studying in the evenings.

SCHANCHE: Well, when you got to college, did you...

DR. DEBAKEY: ...so I had to do it in the mornings.

SCHANCHE: ...did you sort of start out to be a wild student? Because a wide-eyed boy in this fabled city of New Orleans?

DR. DEBAKEY: Well, only to a certain point, you know. I wanted to sort of taste the.. that life and I wanted.. I was curious, you know. I wanted to find out more about what was going on. So, I'd go down with the boys and... But I had enough self-discipline in me that I kept from getting soused and that sort of thing. I did try to drink and I'd smoke with the boys. It didn't take with me somehow or another.

SCHANCHE: This is a fairly brief period.

DR. DEBAKEY: Yeah, very short period.

SCHANCHE: What? Like a couple of months when you first got to Tulane?

DR. DEBAKEY: Yeah, that's right. After... By the time the first semester came around, I was jolted. First by the fact that my grades weren't as good as they were, and I'd been used to leading
DR. DEBAKEY: the class. I'd been used to making A's and 100's and that sort of thing. Here I was making B's and 80's, you know. Barely passing. And I was really jolted. Especially in math. I remember this very well, because the first test I took in math I did make the highest grade in the class, but my grade was 80. And I went to see the professor and he told me. I was so shocked by my grade. He said, "Well, you made the top grade. And, I'm sure you could do better." And I said, "Well, what should I do?" He said, "Well, you've got to study your math." He said, "It's always a big step for a boy coming from high school into college math." And, of course, in those days, it was, because in high school they weren't teaching calculus and things like that.

SCHANCKE: Yeah.

DR. DEBAKEY: So, it was a big step. Geometry and calculus and things like that weren't taught in high school in those days. Today they are. So, I was kind of jilted and realized I had to do more studying. And from that point on, I got down to serious studying and I haven't had any more trouble after that.

SCHANCKE: Was your father concerned on your first semester? Or did
SCHANCO: Or did he leave you to discover...

DR. DEBAKEY: You know the interesting thing about my father was, in that regard, in all my studies, I remember him, was he never really made a great point of our good grades and we sort of got the feeling that this was expected of us. And when I came home with a bad grade, usually in deportment. This was one place where I never made.. I wouldn't always make an A. This was because I was fidgety in class and I was bored.

SCHANCO: Do you think this was largely impatience and boredom?

DR. DEBAKEY: Yeah. Because I was.. You know.. I was.. I'd always done the studies and the teacher would repeat all this stuff, you know. And I knew all of that. And so I was bored and trying to amuse myself very often. And, in fact, when one of the grades that, I don't know whether this was the fifth or sixth grade or seventh grade, or something like that.. The same teacher taught both grades. You know, the lower grade and the upper grade. And I was sitting in the middle seat and she noticed after a while that I wasn't doing the studying which I should have been doing when she was teaching the higher grade. I was paying attention to what she was doing. You know. She called me in one afternoon. She said, "I.." And yet, I knew everything she was teaching and
DR. DEBAKEY: I was making straight A's in all the... that she was...

SCHANKE: You told me this story and she gave you the exam to skip a grade.

DR. DEBAKEY: So, I had a hard time with deportment. You know. I'd have to keep myself making an A. And he used to get after me about that. You see. And he wouldn't say anything about the good grades I was making.

SCHANKE: Were you determined when you got to Tulane to go on to medical school?

DR. DEBAKEY: Yes. No, I'd made up my mind I was going to medical school.

SCHANKE: When did you make that decision? When you were taking high school biology?

DR. DEBAKEY: Yeah. Yeah. Maybe earlier. I don't know. But, I'd already determined I wanted to be a doctor. And you see I set about right from the start taking the courses I needed to be a doctor--to get in--medical school.

SCHANKE: At that time, you actually registered as pre-med, didn't you? And in undergraduate work?

DR. DEBAKEY: Yes. But, I did more than that, you see. I went to see the dean of arts and science and I wanted to get my bachelor's degree. See you could at that time get into medical school without getting a bachelor's degree.

SCHANKE: Three years, right?
DR. DEBAKEY: Yeah. But I wanted to get my degree, because I was thinking in terms of possible graduate degrees, which I really subsequently did do--get a master's degree. So, I went to see the dean and asked him if I could take some course work additionally, especially in the summer and maybe even during the year that would qualify me to get a bachelor's of arts and science. And he said, "Yes. No reason why you can't do it, if you want to." Well, I did you see.

SCHANCKE: Were you led to this by someone who explained to you what the educational process was?

DR. DEBAKEY: No. No, I already knew this.

SCHANCKE: You discovered this on your own.

DR. DEBAKEY: Yeah. Oh, yeah. I already knew this.

SCHANCKE: There was no wise counselor back in Lake Charles urging you on as a boy?

DR. DEBAKEY: No, except that, being a good student, the teachers that I had were all good. I mean they.. They liked me. And they knew I was doing well. And leading the class. And so the principal of the high school, for example, when I got ready to go off wrote a beautiful letter for me and talked with me about it. And he told me, you know. He said, "I hope you..
OF COURSE BE A GOOD DOCTOR...BUT TRY TO GET A GOOD EDUCATION." AND HE SAID ONE WAY IS TO BE SURE YOU GET YOUR BACHELOR'S DEGREE. SO, I WAS THINKING MOSTLY IN TERMS OF THIS. YOU SEE, AND THE FACT THAT I WANTED TO GO ON WITH MY EDUCATION. I WAS INTERESTED IN GETTING AS GOOD AN EDUCATION AS I CAN AND MY PARENTS HAD STRESSED THIS ALL THE TIME AND I KNEW THAT PART OF IT IN THAT SENSE. SO, I DID. I WENT AHEAD AND GOT MY BACHELOR'S DEGREE WHEN I WAS A SOPHOMORE MEDICAL STUDENT.

YOU WENT ON TO MEDICAL SCHOOL AFTER YOUR THREE YEARS OF PRE-MED? 

TWO YEARS.

TWO YEARS OF PRE-MED?

Yeah, yeah. And I graduated with my college class.

Did this... This meant you had to take a double load in medicine.

Yeah. Sure, I did.

WASN'T THAT AWFULLY HARD?

Yeah. Well, I did it though. You know.

Did it ever discourage you?

No, no, not at all. And in addition to all of that, I did other things. Like, for example, playing in the band--
DR. DEBAKEY: in the university orchestra. You see, we had both the band--marching band--and an orchestra. And I played in both of them and practiced with them. And then I played in, on--you know--sports. And practiced, and so I had a full life in college.

SCHANCHE: You played basketball at Tulane.

DR. DEBAKEY: Yeah, I played basketball and I played handball.

SCHANCHE: Was that inter-collegiate basketball at that time? Or, intramural?

DR. DEBAKEY: Yes, it.. Intramural, not inter-collegiate, because, well, we had some inter-collegiate, but this was...

SCHANCHE: Basketball wasn't a big college sport at that time.

DR. DEBAKEY: No, not a big college sport at that time. That's right. And, also, I played baseball, as well. I was on the freshman baseball team, I remember. And then, I played handball.

SCHANCHE: Were these things you did as an undergraduate or.. By the time you got to medical school, you didn't have time for them did you?

DR. DEBAKEY: No. I quit then. I continued playing handball when I was in medical school, because I could do that on my own, whenever I wanted to. But I quit the other. I couldn't play.
DR. DEBAKEY: I continued to play in the band too, until I was, I think, a sophomore medical student or junior, I have forgotten which and then I quit.

SCHANCHE: Well, that was not as demanding in terms of your time--the band.

DR. DEBAKEY: No.

SCHANCHE: Did you travel with the Tulane football team?

DR. DEBAKEY: Yes, oh yes. And also, we put on concerts and we traveled and did that too. We had a wonderful orchestra.

SCHANCHE: Do you remember any notable incidents in..?

DR. DEBAKEY: Well, I remember one time we went to a girls' school in Mississippi and put on a concert for them and they had a great party and then we had a great evening with them. The girls' school were invited to come and give us... 

SCHANCHE: Did you have an active social life at that time, Mike? Were you dating a lot and seeing a lot of girls? Or were you pretty much...

DR. DEBAKEY: Oh, yes. Like all college boys. Sure. We'd go out on double dates. And then, you see, by the time I was a, I think, sophomore medical student, I hadn't owned an automobile.
DR. DEBAKEY: My father gave me a car because I didn't want to live in the dormitory anymore.

SCHANCHE: Yeah. You never had to work for any of your tuition.

DR. DEBAKEY: No. Yeah, well I worked. I made...

SCHANCHE: You worked, but you didn't really have too.

DR. DEBAKEY: No, I didn't have to, but I made it. I was a student instructor. And I made money.

SCHANCHE: That was in biology, right?

DR. DEBAKEY: That's right.

SCHANCHE: For undergraduate classes?

DR. DEBAKEY: Well, not only that, but I did some drawing for illustration purposes. I made money for that. Yeah. And...

SCHANCHE: Did you have any art training or was this self-taught?

DR. DEBAKEY: Uh, well, one of my high school teachers gave me a little training. She saw, you know, I was interested in doing it and she gave me a little training. And then, in college, I had some individual training--mostly in learning to do shading and line drawings.

SCHANCHE: This is just techniques?
DR. DEBAKEY: And stipling--which was to learn how to shade in stipling. But not any true formal art training. But I was good enough at it so that I could teach myself to do it.

SCHANCHE: You said you worked the... as night pharmacists when you were a medical student.

DR. DEBAKEY: In the hospital. That's right. Worked in the hospital as an emergency pharmacist at night, so I filled prescriptions.

SCHANCHE: Was this for a long period of time? For one year? Or...

DR. DEBAKEY: Two years.

SCHANCHE: Two years.

DR. DEBAKEY: Yeah.

SCHANCHE: When you were...

DR. DEBAKEY: Last two years of med school.

SCHANCHE: Last two years of med school? How did you find med school? The experience must have influenced your present ideas on medical education. Did it?

DR. DEBAKEY: Yes.

SCHANCHE: Your first influence, I suppose.

DR. DEBAKEY: Well, I was fascinated with some of the courses and the teachers and I was bored with others.

SCHANCHE: For example?
DR. DEBAKEY: Well, for example, in pathology I was bored to death by the teacher.

SCHANCHE: This was personality, more than subject, right?

DR. DEBAKEY: Well, his presentation, you see? And, you see, I was... I have a sufficiently retentive mind so I could read most anything I wanted. Learn the facts and then pass the test easily. And then, I had plenty of time left. And the lectures were really mostly boring.

SCHANCHE: Repetitions of what you had just read and learned.

DR. DEBAKEY: Oh, I had already... Yeah, I knew what they were saying. And very often I could even follow it from the standpoint of the lectures were taken right out of the book. See, there. So, uh...

SCHANCHE: You must have begun to acquire pedagogical techniques when you became a great professor afterwards.

DR. DEBAKEY: Oh, yes. You see, I felt that you had to stimulate the students to learn and that teaching was mostly a process of stimulating the students' learning process. It was... Learning was an active process, not a passive process. You didn't pour it into them.

SCHANCHE: Yeah. Did you sit in class with this boring pathology professor and think how this could be made more stimulating?
DR. DEBAKEY: Well, as time went on, yes, I got to feeling that there were a lot of questions that I would ask. You know. And that he ought to be talking about or answering questions that I could ask to explain certain things.

SCHANCHE: If he would only stop talking so that you could ask a question.

DR. DEBAKEY: Stop talking. Yeah, exactly. And, interesting enough, when I became an instructor in surgery, I set up courses like that. You see. Where the students could really ask the questions.

SCHANCHE: So that there would be interaction rather than a one way street.

DR. DEBAKEY: Stimulating, that's right. That's right. And that worked very well. I enjoyed that, you know. To me it was an interesting way of learning.

SCHANCHE: Yeah. We're going to get fairly specific in this book about your ideas concerning medical education. So, I think you should describe what medical education was at this time when you were a med student.

DR. DEBAKEY: Yeah, well, you see. It was largely pedagogical in the sense that it was a presentation of lectures by the professors who came before the class, read the lectures, sometimes would
DR. DEBAKEY: go to the blackboard and make a drawing of what they were talking about. In fact, it was so much that way that we had what the students had done before--of taking the lecture down. There were students who could take it down and type and had typed these and we could buy them before you started the course.

SCHANCHE: In effect, you didn't need the professor at all.

DR. DEBAKEY: No. No.

SCHANCHE: This was...classically a spartan education. It was indoctrination rather than stimulation.

DR. DEBAKEY: That's right. Now when we got into surgery, we had a different situation. Because, Dr. Ochsner was a great teacher and he liked to teach and he was... And he would teach from slides which was a kind of innovation for us. He made his own slides. He made his own lectures.

SCHANCHE: These were black and white transparencies.

DR. DEBAKEY: Black and white transparencies in which he had... He would outline the subject matter and then illustrate it with some photographs of different types of problems. And he...had...

Well, illustrate it, you see. So you could follow his lecture
DR. DEBAKEY: because it was well thought out. He had developed it. You know, the whole thing. This was not taken from a book.

It was his.

SCHANCHE: It was original.

DR. DEBAKEY: It was original. It was his teaching. You see. And he would explain why you had... You... He would, for example, when he talked about ulcers of the stomach, he would explain what the theories were on what caused ulcers and on that basis, why you treated the patient the way you did surgically and so on. You see. Then, he'd go into details of the complications with this and the pathology of it and the physiology of it. You see. He was the first teacher I had who tried to integrate what was known in the basic science area with what is known clinically. And I was fascinated with the way he did this.

SCHANCHE: Did he involve you as a student in it? Would he provoke you to respond to the things he was saying?

DR. DEBAKEY: Definitely. Because you see, he would quiz us and we had what we called... what he called "quiz sessions." And he would give us reading material: references in the library.
DR. DEBAKEY: We'd have to go to the library and get these references and read up on it. And then, we'd have these sessions and he'd quiz us and...

SCHANKE: Were these verbal quizzes in a classroom?

DR. DEBAKEY: Yes. Yes, small classes. There would be maybe 25 or 30 of us altogether in a class. And we were quizzed.

SCHANKE: Had you decided to become a surgeon before you took surgery under Ochsner?

DR. DEBAKEY: Yes, but no... By that time, you see, I had had enough clinical work to be fascinated by a lot of clinical things and then I had developed relations with certain other teachers who tried to persuade me to come into their specialty. You know.

SCHANKE: For example?

DR. DEBAKEY: Well, otolaryngology. They liked me and they wanted... The professor liked me and he made me help him in the hospital because I was living in the hospital. On cases. During the summer, for example, I worked with him a lot and he was very good to me—very good friend to me. And he tried to get me to go into otolaryngology.
SCHANCHE: You were living in the hospital?

DR. DEBAKEY: Yeah, I was living in the hospital then, as a senior medical student. I was living in the hospital. Yeah, sure. Something I helped. I did. I was an assistant, in addition, during the day. And, then when I go into med... In the internal medicine... The professor of medicine was very kind to me and some of his young instructors I got to know well. And they liked me. You know, I was a good student and I responded, and they knew I was interested. So they were very kind and good to me and I enjoyed this relationship with the students. But, Dr. Ochsner was very impressive to me. He had a great influence upon me. I'm sure of that.

SCHANCHE: What was your first experience with surgery?

DR. DEBAKEY: One of my first experiences with surgery was when I was still, I guess, a sophomore, maybe a junior, junior--sophomore, something like that. And,... Well, you see, actually, I had already had some experience in biology with surgery because I did a lot of dissection.

SCHANCHE: You did a lot of dissecting then.

DR. DEBAKEY: And prossecting--preparing specimens. So I knew anatomy
DR. DEBAKEY: very well, you see. In surg., I used surgical tools, so to speak, to do the dissection. And I did detailed dissection. I would dissect out of a cat all the muscles, for example. I would dissect out all the nerves, all the arteries. All the way down, you see. And lay it open and make it just like the book showed it so that they could see it. And so I was doing precise dissection, you see, before I got into medical school. And, in fact, I was... The professor of biology was... did his very best to keep me in biology. He wanted me to make a career of this.

SCHANCHE: Were you tempted to become a biologist?

DR. DEBAKEY: Well, I was in a way. Yes. It was interesting because I was fascinated with it. And, he was kind of a fascinating man---dedicated.

SCHANCHE: What was the source of your fascination? I mean did you have the vision at that time to see some great contribution you could make in biology.

DR. DEBAKEY: No, no. I really didn't. But I... For example, I was fascinated with some of the experiments we were performing, you know. Like stimulating the growth of little frogs, you know.
DR. DEBAKEY: Tadpoles. By putting in the water thyroid extract and forcing them to grow more rapidly. Things of that sort, you know. It was fascinating to watch the affect of this. And, other kinds of experiments that I sort of carried out under the direction of the professor. But, I still longed.. I still had this desire to be a doctor--a strong desire. And I wanted to be in medical school. Even after I was in medical school, I continued to be a part-time instructor for a while in...

SCHANCHE: In biology?

DR. DEBAKEY: Yeah.

SCHANCHE: After... Uh, what made you want to be a doctor, Mike?

You haven't...

DR. DEBAKEY: It's hard for me to say. I don't know really. It's hard to say, Don. I've thought about this. I've tried to think...

--- You see, it's twelve o'clock, almost twelve, and I have to leave here about one-fifteen or one-twenty, so...

SCHANCHE: If you want lunch, perhaps you'd better order some.

DR. DEBAKEY: That's what I was going to say.

SCHANCHE: The question about what influenced you to get into medicine. Did this perhaps come when you became fascinated with high school biology and were going off on your own and dissecting
SCHANKE: rabbits and so forth?

DR. DEBAKEY: Yeah, well to some extent I'm sure that it did. And, it's hard to assess all the factors, you see, that influenced you. I was, I'm sure, influenced by my relationships with the doctors in the community whom I got to know because of my father's drugstore and the fact that we served them. And I used to do... run errands for them. They got to be friends with my father and I'd see them and somehow, the work they did appealed to me.

SCHANKE: Who were these doctors?

DR. DEBAKEY: Well, one was a Dr. Watkins, who is our own family physician. And he was an old time... the old practitioner. Very fine man.

SCHANKE: Older man?

DR. DEBAKEY: Yes. He had a beard, I remember. And he was a very good man.

SCHANKE: Sort of the classic G.P. of the olden times?

DR. DEBAKEY: Yeah. That's right. Yeah. There was another one by the name of Holcombe, who was a surgeon, in addition. I mean a surgeon in those days would be a general practitioner. He did surgery. He had gone to the Mayo Clinic and, you know,
DR. DEBAKEY: traveled about in surgery. And he got in with a Dr. White, who was a general practitioner, too, who became a very good friend of my father's.

SCHANCHE: Were these men who befriended you?

DR. DEBAKEY: Yeah, they... You know, I knew them and got to know them well.

SCHANCHE: Would you ask them questions about medicine and were they patient in explaining the...?

DR. DEBAKEY: Oh, yes. I talked to them and they would talk to me. They were very considerate of me as a boy, you know.

SCHANCHE: Was there a specific--I'm always going to be asking you questions like this--

DR. DEBAKEY: Well, I remember one time I was sick and I was told that I had malaria. I had chills and fever. He'd come see me at my bedside at home. And, you know, I wanted to know what malaria was. And he would tell me a little bit about it. I was curious.

SCHANCHE: Did he get as specific as saying it was a parasitical disease and this is how they think you get it?

DR. DEBAKEY: Yeah. And you have... That's right. And quinine was specific. And I wanted to know how they found out about quinine.
DR. DEBAKEY: You know, things like that.

SCHANKE: He told you the story of how the ___?___ fallen tree in it was discovered?

DR. DEBAKEY: Yes. That's right. That's right. He had time to talk to me.

SCHANKE: Getting back to medical education, in your own observations from your own education, which I gather you found, well, too spartan, too much a case of indoctrination and not enough stimulation.

DR. DEBAKEY: That's right, exactly. Well, also, I think that there was a tendency to be... You know, to not push you. At least, I didn't think I was being pushed hard enough. You know, I very often would be bored with what I was doing and would be way ahead. I'd be reading ahead, you know. When I got the textbook on medicine, I wanted to go right through it. But, I think that another... I..I think the long summers were wasted time. You know.

SCHANKE: Because you took a three months summer vacation then, right?

DR. DEBAKEY: Uh-huh. But, I didn't take a vacation. I worked. You know,
DR. DEBAKEY: I did some things that seemed to me from the point of the total curriculum was a waste of time. Take a three months vacation.

SCHANCHE: What did you do? For example, your first summer in medical school?

DR. DEBAKEY: Well, you see, I had to take some courses in college and so I took the courses in the college and at the same time I was a student instructor in biology.

SCHANCHE: But you were doing that in the summer? You were taking undergraduate courses then while you were in med school?

DR. DEBAKEY: Uh-huh. So, in fact, I finished all the courses that I needed to take to graduate. And so by the time I was a junior medical student, when summer came along, I stayed in the hospital. And worked in the hospital. The whole summer.

SCHANCHE: Did other students? Or mostly just went home and had a holiday?

DR. DEBAKEY: Uh-huh.

SCHANCHE: Would you characterize medical education in the late 1920's as opposed to now? At Baylor, for example.

DR. DEBAKEY: Well, for one thing, there's more and more concentration of work. Then, there's an earlier introduction to clinical
DR. DEBAKEY: medicine. You see, we got no clinical medicine when I was a medical student until we were juniors. Today you're introduced to clinical medicine in your freshman year. And you get a lot of concentrated clinical medicine by the time you're a sophomore. Secondly, you... By the time you're a senior, you're actually able to do a great deal of elective work. You could choose courses you want to take.

SCHANKE: Now you are. Yeah.

DR. DEBAKEY: It's more... It's packed in more in a shorter period of time. And the nature of the work has changed a great deal, because you come to med schools today with a lot of the kinds of knowledge you were taught in medical school when I was a student. You see.

SCHANKE: Are these basic science subjects?

DR. DEBAKEY: Uh-huh.

SCHANKE: Chemistry, physics and so forth?

DR. DEBAKEY: Exactly.

SCHANKE: How much of your med school time was killed by taking courses that could just as easily have been given earlier--pre-med?

A year?
DR. DEBAKEY: Uh-huh. I think so. Of course, as time went on it made me more and more concerned with the desire to shorten the total curriculum. And we get the students into clinical medicine earlier in terms of their age. We learned to shorten the total training period. I felt that. You see, I was nearly thirty years of age before I was, sort of, self-sustaining as a surgeon. I felt that's too long. You know.

SCHANChe: Even that was a little early, wasn't it? Because you started younger than most.

DR. DEBAKEY: Yes, that's right.

SCHANChe: Yeah.

DR. DEBAKEY: That's right. And, I think that. You know. I was constantly advocating shorter periods, more concentrated, and getting the student to... an opportunity to move ahead faster so that. And I still think it can be done even better today. I mean there is still...

SCHANChe: Wasn't the vast explosion in knowledge in the last--Since you started, the whole world has expanded to...

DR. DEBAKEY: Oh, definitely. Tremendously.

SCHANChe: ...tremendously. Doesn't this soak up any free time you
SCHANCHE: might have found thirty years ago?

DR. DEBAKEY: No, because I think it's a matter of how you do the teaching and how you develop what we call core work in teaching, you see. And, secondly, you've got to keep in mind that students today come to college having in high school a great deal of scientific training. Basic science work. So that, they're being taught in high school--physics and chemistry and math that we were taught...

SCHANCHE: It was college level when I went to school.

DR. DEBAKEY: Absolutely.

SCHANCHE: My kids have had it in high school.

DR. DEBAKEY: Yeah, you're getting it in high school. You see, so...

SCHANCHE: So that you find them much better prepared?

DR. DEBAKEY: No question about it. And what I'm saying is that college... that a student who wants to go into medicine... He should be given certain types of courses and his freshman college work, which would prepare him easily in two years to properly coordinate him with medical school activities. Then, you'd have a student entering college directed towards medicine as his career. Now the argument against that is that many students haven't made up their mind when they're a freshman
DR. DEBAKEY: in college. And I say, well, you oughtn't to penalize the boy who has. You see. Just because certain students are late in maturing in terms of their career--don't penalize those that can mature or have matured. Secondly, I think that they would mature earlier if they were forced to.

SCHANCHE: You mean if they wanted to get into medicine they would have to make up their minds by the time they were freshmen.

DR. DEBAKEY: Yes. Yes. And direct themselves towards that.

SCHANCHE: This is converse of your penalization theories that you're penalizing a lot of people who really aren't ready to make that decision, aren't you?

DR. DEBAKEY: Yes...No, I don't think so. I think you would find that they would make the decision. They're sitting on the fence because they don't have to. They can sit on the fence. And, a lot of students will sit on the fence, as long as they don't have to make decisions about their future. But, I think by the time a boy is eighteen he ought to begin to think what he's going to do with his life. And secondly, I think this tends to give him a greater sense of responsibility about his life.

You see. Let him choose then. If he makes a mistake at
DR. DEBAKEY: the end of the first year, he hasn't lost a great deal. He can shift into something else. If he finds, well this isn't really suitable for him, what difference does it make. A year of education directed at something is not going to hurt him.

SCHANCHE: He could still be a poet, huh?

DR. DEBAKEY: Yeah. Sure.

SCHANCHE: What you've accomplished at Baylor is a three-year curriculum, but you've done that primarily by using the whole year and eliminating waste time, rather than vastly revising the curriculum, haven't you?

DR. DEBAKEY: We've compressed it. Quite right. No, well, we have revised the curriculum. Because each... You take the first year, which we call the core curriculum--has had to be compressed. So we've had to pull out of that stuff that otherwise could have.. would have been put in it to take up the time. You see.

SCHANCHE: Med schools like all other institutions add time fillers to justify their existence.

DR. DEBAKEY: This is typical of the professor. You know. He's interested in his work and he thinks it's important and so he wants to give more time to anatomy then it really needs. You know.
DR. DEBAKEY: So there can be.. There's a tendency to be a little more casual about it--more leisurely about it. Whereas, if he's forced to do it in a certain amount of time, then he's got to compress it and he's got to think about the teaching of it.

SCHANKE: When you speak of two year med schools, what are you even thinking of there?

DR. DEBAKEY: Well, the two year medical schools are...

SCHANKE: These are basically to take care of the large number who drop out between the second and third year?

DR. DEBAKEY: Yeah. Yeah, I don't.. I think that there are a certain proportion of med students or students, let's say, who are in medicine who may have difficulty with an accelerated curriculum. You see. I don't believe the great majority do.. And I think you just have to recognize that maybe 15 or 20 per cent of them will be pressured beyond their ability to tolerate that kind of pressure. But, you see we have a much larger number of applicants than we have positons for them. So that, I think it's unfortunate if a fellow has to drop out, you know, from his standpoint. But I think there are enough others to take his place. And I think from an overall standpoint that you have to accept some of the disadvantages to a certain
DR. DEBAKEY: proportion of students that this does. You see.

SCHANCHE: Well, any system does.

DR. DEBAKEY: Any system does. Sure.

SCHANCHE: But how would that work in specifics? You would have double the number of med schools. A large number of which would be two year schools, from which these students then advance to third year medicine in another medical college.

DR. DEBAKEY: Well, actually, I don't think it's quite that simple. I think that you have to integrate the course work. And therefore, what you do is in a sense make sure that the first year, which would be like to say.. like we have it.. four quarters for the whole year--covers all the basic training. And, this can be given under the direction of the medical school, whether it's given in the medical school or not. You see. So that. For example, I think we could do this at Rice University just as well. Give that kind of a course.

SCHANCHE: What specifically is this curriculum in the first year?

DR. DEBAKEY: Well, it's primarily concerned with chemistry, pharmacology, pathology, anatomy. Those are the basic science courses. And then they get a certain amount of introduction to clinical
DR. DEBAKEY: medicine, which involves physical diagnosis and correlation of some of the physical diagnostic things which the basic science might exhibit.

SCHANCHE: Well, what you're saying then that students could take this on a graduate level in any university. They don't have to be in a medical school.

DR. DEBAKEY: Yeah. That's right.

SCHANCHE: ...for this basic part of their curriculum.

DR. DEBAKEY: No, so long as it is done under the responsibility of the faculty in medical school. You see. So that you're sure the course work is similar. Comparable.

SCHANCHE: Well, do you envision this as something they would do as college undergraduates? In other words, eliminating the first year of medical school, in effect?

DR. DEBAKEY: No, you're not really eliminating it, you see, what you're doing, you're integrating it.

SCHANCHE: You're integrating it with something else but you're saving a year in there. Right?

DR. DEBAKEY: That's right. Exactly. Exactly. So you need the faculty to do it. But it can be done with a faculty that, let's say,
DR. DEBAKEY: the professor of anatomy could make sure that the faculty that does the.. this work, whether it's immediately in his classroom or in another university, is under his direction and his people.

SCHANKE: But it wouldn't have to be as convenient to Baylor as Rice, would it?

DR. DEBAKEY: Physically, no. No, no.

SCHANKE: You could go to Southwest Texas College, or whatever is down there and..

DR. DEBAKEY: Yes, that's right. That's right.

SCHANKE: So this then would be integrated with the students pre-medical education.

DR. DEBAKEY: Yes, exactly.

SCHANKE: So then he would come into medical school with, in effect, his first year finished.

DR. DEBAKEY: Yeah, yeah. Then you go on with the clinical the next two years would be clinical years. So, in a sense you see, what you've done is cut-off a couple of years, in terms of the current situation. Maybe more than that. Maybe three years. And..
SCHANCHE: I don't understand. How would you cut three years off?

DR. DEBAKEY: Well, you see. The way it is now, he has.. he gets..

The great majority of students in most schools now require a degree. That's four years of college. Then four years of medical school. That's a total of eight years before he gets an M.D. degree. And, I'm saying that with this first year integrated, let's say, with a sophomore year of college. That's two years. Then you go.. you take him through two years of clinical work. That's a total of four years.

SCHANCHE: I see. Then, he's abbreviating his undergraduate period.

DR. DEBAKEY: That's right. And then you give him one year of hospital--complete hospital work as virtually an intern or resident in a specialty. He's already started in his specialty by the time he's in his fifth year from high school.

SCHANCHE: Well, that's even more radical than I thought you were proposing.

DR. DEBAKEY: Yes.. no, no.

SCHANCHE: I think that sounds great. But what about a broad general education? In the humanities and so forth? He... Does he ever get time to...
DR. DEBAKEY: Well, I think that he's got to do this as he goes along. In other words, if you're going to get a broad education in humanities, you've got to continue it. You get it in your first year of college. You get it in high school. You now know how to deal with... I mean you've had a certain course in philosophy, let's say. You've had a course in English and literature. And, you just had your basic courses. Now, if you want to go on and learn more about this, you're going to have to get... to do what the humanities do: let you read. You know. You don't have to be in a laboratory to do humanities.

SCHANKE: You're assuming that the age is past when kids need to kill a whole first year of college in basically remedial courses, which is the way it's always been.

DR. DEBAKEY: Yeah. I thin... You know, after all, I... I did... To a large extent, this is based upon my own experience. And my feeling that there was a lot of wasted time. You know, you go... For example, in college I used to go to class certain hours in the morning. I'd have maybe one or two or three, depending upon the day, of hours in the morning.
DR. DEBAKEY: And then, sometimes, no classes in the afternoon or maybe one class. The rest of the time I was on my own. Many of the college students do that today.

SCHANCHE: And most of these courses were basically reading courses anyway.

DR. DEBAKEY: Yeah. You went to the library. You see. So, you could continue to do this.

SCHANCHE: Can an ordinary man...? I've always heard that the pressures of medical school are such that there's hardly time to think about anything else. Can..?

DR. DEBAKEY: Not in his first... That's right. Not in the year he's doing his core work. Absolutely. I agree with that.

SCHANCHE: But you think this could take place as a college sophomore level just as well as at the graduate level?

DR. DEBAKEY: Yeah. And should... Even after...even if he's in medical school he can continue to do a certain amount of humanities reading. He can do some literature--classic literature reading. He should certainly know something about the classics and literature. And he could continue to do this the rest of his life.

SCHANCHE: Well, this would involve a complete change in all the medical schools in the country?
DR. DEBAKEY: Uh-huh.

SCHANKE: Which would then become what two year clinical...two year...

DR. DEBAKEY: No, you see they're not really two years. They're three year, but they're integrating and that's why you've got to keep it integrated.

SCHANKE: Pick these kids up as college juniors then.

DR. DEBAKEY: That right. Well, no. I'd pick them up as college freshmen.

SCHANKE: College freshmen?

DR. DEBAKEY: Oh, yes. You pick them up as college freshmen. These are the students who are going to be...

SCHANKE: They're entering college basically under the medical faculty as soon as they come out of high school.

DR. DEBAKEY: Yeah, that's right. That's right. Exactly. And the college integrates the faculties' suggestions or requirements.

SCHANKE: Do you see any great problem in implementing this?

DR. DEBAKEY: Yes. Oh, yes.

SCHANKE: The problem is manpower, basically, isn't it?

DR. DEBAKEY: No. No. It's attitude.

SCHANKE: Alright, the biggest problem is attitude.
DR. DEBAKEY: Jurisdictional disputes and attitudes. You know. The faculties are very, very.

SCHANKE: This pricks an awful lot of academic balloons, doesn't it?

DR. DEBAKEY: Oh yes. And not only that, but you've got to keep in mind that the faculties, both in the medical school and in the colleges, are very, very possessive about their teaching and the way they do it. And almost reactionary because of their possessive attitudes. You know, in general, we think of universities as being sort of the seats of liberal thinking. Wherein, the truth is that they're not. They're not. They're very reactionary. They really aren't. They mouth liberal statements. You know. They talk about all of this, but when it comes to being...

SCHANKE: Until their ox is gored.

DR. DEBAKEY: When it comes down to being liberal in regard to thinking. When I say liberal I'm talking about being willing to consider a change in status quo in regard to their own teaching--what they should know the most about. Now,..

SCHANKE: Yeah, they're most conservative.

DR. DEBAKEY: Most conservative and reactionary. And this is true both of the medical school faculties and in the colleges and universities.
SCHANCHE: This is self-protective, isn't it? Basically? Or is it just lack of imagination?

DR. DEBAKEY: No, I don't think it's so self-protective. It may be to the extent that whatever constitutes the need to maintain status quo is self-protective. But, it's an unwillingness to be critical about what they're doing. Maybe this is because they tend to be self-satisfied with what they're doing. Some are a little smug about it. And...

SCHANCHE: They're very few educators who are smug anymore, after the experiences of the last five or six years. Do you see this changing now? This attitude?

DR. DEBAKEY: Well, I think the students' revolt has shaken them up. Yeah. I think they're willing to reconsider now a little bit more than they used to. But still, I went through the experience at Baylor in changing the curriculum and I'll tell you, if it weren't for the students and my encouragement of the students' criticisms of the curriculum, we would have had a hard time making any changes.

SCHANCHE: Have you made any effort to implement your idea for a really progressed medical education? For example, have you tried
SCHANCHE: to put Baylor and Rice together in a program that would...

DR. DEBAKEY: No, but we're trying to do this right now with Texas A&M. We're discussing this with Texas A&M. We're making some... We're having some planning done. Doing some planning and I've set up some committees within the faculty to do some planning.

SCHANCHE: Is it likely to bear any fruit in the next year or so?

DR. DEBAKEY: I don't know. I hope so. I hope so. The president of Texas A&M is a very thoughtful and, I'll say, liberal educator. And, fortunately, he's all for this and he's moving. He's pushing a little bit--his own faculty people. And he finds it the same way I did.

SCHANCHE: You would have... As the president of Baylor, you perceive no real academic problem in supervising of the education.

DR. DEBAKEY: No, I don't.

SCHANCHE: You would take these kids at Baylor about the time they finished their sophomore year at Texas A&M then, wouldn't you?

DR. DEBAKEY: Well, right now, we would almost have to, but I would look forward to trying to have it in such a way that the faculty...

SCHANCHE: To having the faculty do it.

DR. DEBAKEY: Yeah, exactly.
SCHANCHE: If this plan was adopted and widely used, it would almost instantly double the number of medical students, wouldn't it? Or would it?

DR. DEBAKEY: It would, not instantly, but it would in a very short time. Within say five to ten years it would add immensely to the number of doctors that would be in practice by the end of that time. Yes.

SCHANCHE: How about in point of student maturity. Are the students mature enough to handle advanced medical education?

DR. DEBAKEY: Yes, oh yes. Definitely. Far more student material to.. then we need.. with the students we have.

SCHANCHE: Are they mature enough? Because this would put them in internships and residencies at fairly early ages. In their early twenties.

DR. DEBAKEY: Yes, that's right.

SCHANCHE: Are they mature enough to handle it?

DR. DEBAKEY: Well, with proper supervision, yes. Oh, yes. I think so. See, I think students and people mature earlier today. You see. Particularly at that level of educational background. They're mature earlier.
SCHANCHE: Well, then, in total they could finish their internship-residency at... in a total of eight years. Right?

DR. DEBAKEY: Yeah, that's the point I'm trying to make. That within...

By the time... In other words, I would like to see the thing geared to the point that the average student at the age of twenty-five can be a specialist, or twenty-six. You see.

In other words, I'd cut three or four years off the total period of his educational experience to be a surgeon.

SCHANCHE: Would the little old ladies trust him? It takes a change in public attitudes, too, doesn't it? People like old doctors.

DR. DEBAKEY: No, I think people are changing in that regard, too. All they want to do is assured he's properly trained. You see. Qualified.

SCHANCHE: Is medical education equipped to handle this? Are there enough educators?

DR. DEBAKEY: No, not right now. You've got to put more money into medical education to do it. You've got to put more money in support of medical education. You see.

SCHANCHE: Well, how can you do this specifically, Mike? What if you were asked tomorrow to present a program to Senator Kennedy's committee?
DR. DEBAKEY: Well, you see, you're limited.

SCHANKE: What would you do? Run a pilot program some place?

DR. DEBAKEY: No. Yes, I would, but you'd have to get approval from the accrediting agencies to do this. You see, this isn't something you could do on your own, because you've got to have accreditation to have your students in the sense graduate from an accredited school to be recognized.

SCHANKE: But, presumably, though, you're seeking such approval for your experiment with Texas A&M.

DR. DEBAKEY: Well, we will when we get the plan on it, oh yes. Sure. We'll try to do that. But, we haven't reached that point yet. And we've got a hard row to plow before we do, because they're are lots of objections to it on the part of the, let's say, the establishment in education. You know. They're very conservative. Almost reactionary.

SCHANKE: Well, you have both the establishment in medical education and the establishment in education at large.


SCHANKE: Going against you.

DR. DEBAKEY: No question about it. You've got to recognize that so it's going to take time to overcome that attitude and to have a
DR. DEBAKEY: willingness to try it. Now, I'm convinced that you can do it, but you've got to get some support for doing it. You've got to get some money for it and you've got to get a willingness on the part of the accrediting agencies to let you try it.

SCHAN Che: Alright, this then is the ideal and it's obviously going to take a long time to break down the resistance and to get it planned and to get it into action, even if everything works as it should. What is your sort of fall-back position in the mean time? How can you improve medical education and shorten it and revise curricula?

DR. DEBAKEY: Well, we've done about all you can do at the moment with approval of the agencies. Because we've got it down to the three year category. About all you can do right now is to try to work with certain colleges to pick up students at the end of their second year who are top-notch students, well-qualified in science. And get them into medical school at that point.

SCHANChe: Can you do that now?

DR. DEBAKEY: Yeah, you can do that now because you see if they'll qualify they'll meet their requirements. They're certain basic
DR. DEBAKEY: hours of various types of material they've got to have to
meet that and they can do that themselves--taking certain
summer courses and things of that sort, you see. Or, addi-
tional courses during the year. They can take as many courses
as they can get through with. If they're awfully good stu-
dents, they can finish it in two years. And, the school then
is willing to accept them.

SCHANCHE: This is very rare though, isn't it? These are very special
cases.

DR. DEBAKEY: Well, at the moment, but it doesn't need to be. That's the
point I'm making. So at the moment a student could finish
all his requirements and get in a medical school, complete
his medical school work, get his M.D. degree at the end
of five years.

SCHANCHE: Well, this would reduce the number..this would reduce both
the years involved and vastly reduce the cost of medical
education.

DR. DEBAKEY: Absolutely.

SCHANCHE: Would it be..would it involve savings from a government
point of view?
DR. DEBAKEY: Yes, well after all, you know, no matter how you look at medical education and how you look at the cost of it—it costs now, as I've pointed out in the other thing, a minimum of $40,000 to educate a person to be a doctor. The medical school. You see, a minimum. Alright, somebody's paying for that. The student pays only a small portion of it. You know, even at the best medical school. He might pay—private school—let's say, he might pay $8000 in total tuition. You know. Who's paying for the $40,000. Somebody is.

SCHANCHE: That means it's coming from...

DR. DEBAKEY: That means it's coming from some source of the public. The public's paying for it. Whether it comes from a foundation that's receiving public money, you know, or however it comes—endowment, so on. Somebody else is paying for it. Well, the public is. You see. So that in a sense what you're doing is reducing the economic burden on society to educate a doctor.

SCHANCHE: That's fascinating. That's going to be a good part of this book, if you...

DR. DEBAKEY: Yeah. But you see, there are those who object to all of
DR. DEBAKEY:  this because they are concerned about the quality of the doctor's education. Well, this is a valued judgement, when you talk about quality.

END SIDE TWO OF TAPE