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Henry Dodson Garrett M.D.

Rebecca Garrett

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Dr. Garrett: Retired El Paso physician; frequent contributor to El Paso County Historical Society's publication, Password; born July 16, 1917, Burgstrom, Texas; 1941 graduate of University of Texas Medical School Branch at Galveston; interned at El Paso City-County Hospital; charter member, El Paso County Historical Society.

Rebecca Garrett: Founding officer, board member, and charter member of El Paso County Historical Society; born January, 1916, Santa Anna, Texas.

SUMMARY OF INTERVIEW:

Recollects origins of nickname, "Snuffy"; courting days; work at William Beaumont Army Hospital during WW II; acquisition of S.T. Turner home by El Paso County Medical Society; establishment of El Paso Medical Center; construction of Medical Plaza Building; competition for medical practitioners by area hospitals; working relationship between civilian physicians and military physicians; describes old El Paso City-County Hospital facility; comments on lack of animosity and hostility in early days of practice; treatment of tuberculosis at El Paso City-County Hospital; membership in Woman's Auxiliary of El Paso County Medical Society; community service programs; participation in polio and toy drives; care of polio patients in El Paso and Hot Springs, New Mexico; founding of El Paso County Historical Society and quarterly publication, Password.

Length of Interview: 1 hour, 15 min. Length of Transcript 56 pages
I am Barbara Dent (Q), and I am going to interview Dr. and Mrs. H. Dodson Garrett, Snuffy (A) and Becky (B), in their home at 2631 Altura.

Q  First of all, I would like to ask you how you got the nickname "Snuffy," Dr. Garrett.
A  Well, Levi Garrett Snuff was the biggest selling snuff in central Texas, and it was quite appropriate that I would be named for the snuff bottle manufacturer.

Q  And Mrs. Garrett, Rebecca is your first name, and Becky is automatically not Elizabeth, it's Rebecca.
B  Huh-uh, it's Rebecca.
Q  First of all, I'd like to ask you where you are from, Dr. Garrett, and when you were born?
A  I was born July the 16th, 1917, in a little town named Burgstrom. But I was raised, actually, and my father was a M.D. in country practice, and he moved to a town named Marlin in 1920. So, all the memories I have of my early life occurred in Marlin, because I was three years old when I moved there. Marlin is close to Waco.

Q  And what about you?
B  I was born in Santa Anna, which is in Coleman
County in central Texas, in January of 1916.

Q And how did you two meet?

B Well, Dodson was here before I was, but I came here during the war, and worked at William Beaumont in the officer’s pay section out there. I transferred from O’Howell, where I had been working. And he was in practice here. And we met here in El Paso.

Q You were in private practice here, or you --

A Yes, I did. Before I specialized in dermatology, I did what we used to call general practice, which is now called family practice. So, I did that for five years before I specialized in dermatology.

Becky had rented a room from a lady who was distantly related to me, so that I wasn’t dating an alien. I knew her by the town she grew up in, and by the people that she associated with. So, I didn’t have to check out her credentials too much.

Q How did you get from Coleman County to Ohio?

B I had a sister there during the war, and her husband had gone overseas from there. And my mother insisted that I go. She was quite a bit younger than I am. She had had a child, and she insisted that I go and be with her. She had a
very good job that she didn’t want to leave.

And I had no trouble finding a job during wartime. I went straight to an army depot there, and got into the fiscal department. And before too long -- I always like to tell this, because I think it is so funny. I never even had bookkeeping in high school. But, immediately, I was working on a six million dollar budget, and I was head of it. In fact, they told me to go ahead and make it bigger than last year. It was six million last year, but make it bigger, so I made it seven million that year. And it was great fun. And we got it, incidentally. You know, you had anything you asked for. This was an engineer spare parts depot. And I stayed there for a couple of years. And my sister, in the meantime, her husband came from overseas, and she left Ohio.

And I hated the climate, detested it. And, so, I thought, "Where would I like to go," and at first thought Arizona. I would move off to Arizona, and try to get away from that dank climate, where I hadn’t seen the sun shine for six weeks.

And then I went back by my home, and a friend of mine says, "Look, let’s go to El Paso
and stay with my sister. Her ex-husband's overseas. We can get a job in El Paso."

So, sure enough, we came to El Paso, and I had a job the next day. It was in William Beaumont in officer's pay. So, it was just as simple as that during the war. You could find a job anywhere.

A It was fairly easy to understand where the national deficit came from, when you hear Becky explain that. (Laughter).

Q Now, you interned here in El Paso, too?

A Yes. I graduated from U.T. medical school in Galveston in 1941. And I'm a lifetime asthmatic, and someone there in the medicine department suggested to me that I try a high, dry climate. So, I came in 1941 to old El Paso City/County Hospital. Took a year as intern, rotating internship, there.

And then had an opportunity to go into practice, here, with Dr. Laten, Green, Ed Reinheimer and Russel Holt. I was not a partner. We were not partners. We were just an association. Had a general practice during the war with them, because I was disqualified for medical service, because of asthma.

Q Now, after you met, you were telling me the story
of how you courted down at the Turner Home, putting in a library. Can you tell us something about that?

Well, I had taken this job as librarian for the County Medical Society, and Becky and I were holding hands, and looking at each other fondly. And, so, I found out she was -- I had known she was interested in books. And my job was to try to round up as many old books, before they were discarded by doctors who didn't have a place to keep them. And I was trying to get a library together for the Turner Home.

This was the first time that the County Medical Society had ever had a place in which to store books. The library, as such, of the County Medical Society had been kicked from pillar to post, and was almost destroyed by the fact that nobody wanted to keep it, and, in fact, they had gotten thrown out on the mountainside, down there behind Southwestern Hospital, because there was no place to keep it. And Becky and I spent a lot of our time going through like a couple of gophers, going through these old books down there up on the side of the mountain, picking up what we thought would be worth saving.

Then we got out, and then picked up
journals from doctors, who were willing to give journals (unintelligible) who toted a whole bunch of journals and books down there, and put them in the basement of the Turner Home, and, later, when we got shelves, took them upstairs.

Q And how did you set up the library? When did the Turner Home actually become part of of Medical Society?

A I would imagine 1946, wasn’t it?

B When we married, it was gone to the Medical Society, but I think it could have been 1945.

A Could have been. It’s either 1945 or 1946. I don’t remember exactly when.

B It was whenever Dr. S. T. Turner died. She gave the house to the Medical Society, at the time of his death, I think.

A Pretty soon thereafter we took possession and began to store things as the upstairs was worked on, and the first and second floors were made ready for occupancy of the Society. So, it was 1945 or 1946.

Q Was the library actually used? Did the townspeople, or the physicians use the library?

A This was a problem. Ostensibly, the way we’ve got it, it was a tax-free ride, because we had an open public library, there. And the
commissioner's tax people let us have a tax-free institution on the presumption that, because we were relying on the public to use it, it would be used.

Unfortunately, despite the fact that we advertised in the paper, and let it be known, and tried to get people to use it, this was not a time when people were conscious, so much, of medicine as they are now. That is, people like to read now about medicine, and delve into things. But, at that time, it was a mysterious thing, and people didn't spend much time in medical libraries. And, anyway, (it was) at the end of World War II, and people had other things on their mind.

Well, unfortunately, after about three years, the tax appraisal people came by and took a look at the records to see how many people had used it other than physicians. And very few had. And they didn't feel that it was justified that we would be given a tax-free status, since so few people used it. And, in 1949, the tax-free status was removed.

Q And the library was closed?
A Yes. Because the County Medical Society, at that time, did not feel that we could buy all the
journals, and carry forth on the thing. And, so, the library was not kept open to the public after that.

B Also, didn't the hospitals -- weren't they required to have libraries about that time?

A Yes. It all happened about the same time.

B And then they found out that, really, there was not a great use, or a great need for that library, there.

A Yes. That was an (unintelligible) requirement that the Joint Commission of Accreditation required. Each hospital had to establish its own library, and that it be adequate for use by its staff.

And if there was a lot of duplication, there would be no reason for us to have a library, since it wasn't public anymore. There wasn't any reason for the County Medical Society to spend the money maintaining a library, because each hospital had to have its own, anyway.

Q Well, you said that you were around when the Turner Home was converted, after Mrs. Turner gave the home to the Medical Society.

A Yes.

Q Can you describe the upstairs to us?

A Well, there were, as I remember, four bedrooms
upstairs, and a bath, I believe, between each side. Do you remember it that way?

B I would say there were five bedrooms.

A Well, okay. There was one back on the sleeping porch, back there.

B There was a little bedroom.

A But four major large bedrooms, and then the small ancillary thing. On the west side, they decided that they would just clear out all the partitions, take out the bathroom, and make that one large room on the west side in order to accommodate a meeting place. And that is where the seats were put in that charity bought. And after that had been cleared out -- and this took quite a while -- this was one reason that the thing was delayed, because this had to be cleared out. And then the seats put in there.

And then, of course, the other things that there done were just the removal of a few things in the downstairs, and not too much structural change. A partition change was made that I remember, on the first floor.

Q Is this when the Auxiliary took the sinks out and put the stove, new stove, in the museum?

B Yes. And took out the most fabulous icebox I have ever seen. It was in the butler’s pantry.
I presume the butler's pantry is still there, is it not?

Q  Uh-huh, yeah.

B  It covered the whole east wall of that butler's pantry. It was fabulous. And I do not know what they did with that. It would be a wonderful thing to have now.

Q  Was it an icebox, or was it a refrigerator?

B  It was an ice -- well, a refrigerator. It wasn't electric, if that's what you mean. No. It was an icebox. You had to put ice in a big section.

        And then, of course, it had that fabulous green porch across the back of it, where Dr. Turner, I had been told, had his vegetable salesroom. You knew about that.

Q  No, I didn't.

B  Has anybody told you about that?

Q  No. I knew that he sold them, but I didn't know where.

B  Well, he had -- of course, he had these farms, a farm down in the valley, and he raised everything. And he would bring them in maybe once or twice a week, and turn the whole screened-in porch into a vegetable market. And people couldn't wait for Dr. Turner's vegetables to come in. Isn't that something?
Q  Around this time the Medical Center started. What involvement did you play in the establishment of the Medical Center?

A  Well, I was one of the very young people who had to borrow money to build. The downtown traffic situation had gotten so bad that those of us who had offices downtown, and most of us did in those days, were being pressed, particularly by our infirm patients, to do something about parking and availability of space to get in and out of buildings, and so forth.

It was very difficult for people to come to the physician, because there were very few places to park. The people didn't like elevators, had to walk a long way. If you had a heart trouble, or had some disability, it was heck to get to where the doctor was.

And about this time, there was a round table of people that met down in the Hilton Hotel. And Pooley, who was the editor of the Herald Post, Herman Leebright, who was the C.E.O. of the cement company here, and Morris Fearman, a M.D. of some years practice here, ate together frequently.

And Leebright had just been to Albuquerque, and they had just built a one-story
medical center out away from town, away from downtown, where they could purchase adequate parking, all of it on the same level, and the buildings were separated so that people could drive and park right by the building where the physician they wanted to see was practicing.

And Leebright said to Spearman, "Why don't you get something like that started here?" And from that little germ, Spearman talked to Wilcox and a number of other people here.

And the first thing we knew, Dr. Lester Smith, my senior partner, was one of them with Curtis, Ollie Schaffer, who was an oral surgeon, became interested in this thing. And several of them began to implement this thing, and see if there was enough interest.

And after about a year of having some rather noisy meetings and shouting and division -- you were either part of this or against it pretty strongly, and physicians are despots when it comes to arguing. And then they did a lot of noise about it. But eventually, the idea became -- the value of it became apparent to people around town, particularly those downtown.

And so, the time came, after consultation with builders, and architects
and contractors, the time came for people to purchase stock. And about 70 people put up their money -- most of these were physicians, a few were dentists -- and put up their money.

And, so, a committee had chosen the best spot, and that was up at the Golden Hill, what was then called Golden Hill Terrace. It's still called Golden Hill Terrace. And it was just a bunch of rolling hills with a bunch of jack rabbits and pheasants up there, and it was all covered in cacti.

And we paid what seemed to be an immense amount of money for these big dirt movers and machines to come and smooth that off. And, first thing you know, in 1952, construction began. And in the spring of 1963, in May of 1963, the buildings were completed. Seven buildings were completed, and those of us who were the original stockholders moved in.

As time went by, the value of the thing was seen by others, and more buildings were constructed. And, eventually, we had about 100. From that beginning of about 70, we had about 100 physicians and tenants located up there.

Q Now, did y'all build -- it was the same
corporation, the same group of people, that built
Sierra, too; isn’t it?

A No. No, it is not. We built the -- after we had
run out of level -- run out of ground, we built a
military storage building over there, the Medical
Plaza Building, which is --

Q The first one?

A Yes. And then, after that had been built, a
group -- Eddie Egbert and several people who were
interested in this -- what’s the name of that?

B Hospital Miracle, or something.

Q NME.

A NME. National Medical Enterprises became
interested, and acquired the property where
Sierra now is, and put up a hospital. I don’t
remember exactly the year. That was in the
1960s.

B I think the interesting part of this is that Dr.
Cooper, the psychiatrist, saw the value of that
raw land, over there, that was filled with
cactus.

A Cooper wasn’t nutty at all, was he?

B He was thinking, let me tell you. Nobody else
ever thought it would be anything, but it was
just an old piece of desert mountain over there.
But he managed to get every bit of that. He
bought every bit of it, and it wasn’t easy. I think he had to make trips all over the country to finally put it all together.

A He had to join the Catholic church.

Q Did some of it belong to the Catholic church?

A Right. Some order of Sisters way away from here -- it wasn’t it even located here -- had this one little thing. He got everything except this one little patch, and he had to lean on a couple of good Catholic doctors to intercede for him, because I don’t think Cooper would have been taken into any church very easily (laughter). Anyway, he acquired all this land. And, of course, then, he had a great buy out.

Q Yes. He did.

A So, that came quite some years later. I can’t remember exactly how long it was after the Medical Center. We went in 1953, and I would say it was probably 15 years later, maybe, before Sierra was completed. I can’t remember.

Q Well, we moved here in 1966, and it was still a dream. I mean, it hadn’t been decided then. Tell me about the Auxiliary in the time that you were here, Becky.

B Well, of course, I went into the Auxiliary immediately. Dodson told me, "Now, there’s one
thing you're going to have to do, is join the Auxiliary." I've never been a joiner. So, I joined it. And, at that time, Virginia --

Q Virginia Thomson?

B Virginia Thompson was president. And, oh, I tell you, those older women were so nice to the ones of us who went in. I can't remember who went in about the same time, but I think Eunice Gibson, maybe, and maybe Gene Cregg, maybe a little bit later. But, oh, they made us feel so welcome. And I liked it immediately, because they were so nice to us. And there were no lines drawn in the Auxiliary between the young and the old. We were all just one big group of friends.

And we dressed up to go to Auxiliary. I mean, we put on our best clothes, we put on our hats and our gloves. And it was right after the war. And, of course, everybody was -- they were delighted to be able to put on their hose, and do things that they hadn't been able to do in so long.

And we met on Mondays. And it was all right with me to meet on Mondays, but some of women didn't like Mondays, or couldn't come on Mondays, because their maids didn't get back in time to take over the children. So, in a few
years, it was changed to Thursday, and still is Thursday, isn't it?

Q Yeah.

B Auxiliary was a happy time in those days. It was small. I wouldn't say that we ever had over 30 people at a meeting.

And everybody was having a good time, and everybody was entertaining. I will never forget how many parties people were having. They were coming back from the war, and getting together. And the Medical Society was a very close knit and friendly organization at that time.

Q Now, the Medical Society, you had to belong to the Medical Society in order to get hospital privileges; didn't you?

A Right. And in 1965, or thereabouts, the ACLU was able to destroy that little qualm. And, so, after 1965, hospitals did not feel constrained to require membership in the Society, or membership in the staff, and this caused a lot of us to feel that quality of staffs, and medical staffs, and to take control, and friendliness was sort of disappearing, because hospitals were not, sometimes, very good at medical policing, and not too interested in policing the activities of
physicians.

Whereas, prior to that, County Medical Society had an ethics committee, which would call a fellow up if he was reported by a patient, or another physician, who had done something that seemed to be unethical. We would follow up, and sit down and talk one-on-one, or three-on-one, and apprise him. Acquaint him with what was expected of him, and that we were watching him. And this took care of it. But, after that took place, we began to see a marked disintegration, and what a lot of us thought was tight ethical control. And that was, to us, to those of us that had been under the old system at the beginning, some deterioration in ethical standards.

I don’t mean to implicate all the hospitals too much, but, by this time, hospitals had begun to compete for medical practitioners on their staff. They were competing for patients. This is something that in the first 20 years that I practiced here, we didn’t ever see. It was unheard of that a hospital would go out and try to get people to bring patients there openly. I mean, there was probably always a feeling that, "Yes, we would like for you to bring your
patients here." But they didn't compete. Each and all of them were doing well. And then, all of a sudden, we got a lot of hospitals there, tremendous number of hospitals there. As far as the needs, we were overbedded. And that's when the trouble began, because the hospitals began to compete openly.

Q I was looking at some of the old city directories the other day, and this was in 1921. The Medical Practice Act passed, when, 1926?

A I don't remember.

Q And, of course, a lot of the doctors were still advertising in the paper. But in the city directory, there was only one physician advertising in the yellow pages. I thought that was interesting.

A Well, it's all gone back to that, you know.

Q That's right. Everything makes a circle. Well, the Auxiliary was basically social, then. Did y'all --

B Oh, no. We had quite a program of a community services, and we took it seriously. Gee, I can remember going down to City/County then, and helping out down there. And, of course, we always brought toys for Boy's Club, and dolls. You still bring dolls; don't you? And, no, we
had a lot of projects.

A Well, you worked on polio drives.

B Oh, yes.

Q Tell us about that. Tell me about the polio drives.

B Well, of course we had to go around to the various schools, or did go around to the various schools to help the doctors give the polio vaccine.

Q This was with the injection, the first polio injection?

A Yes.

B Uh-huh. Yeah.

A You have to educate people about that. This was a task, because people who, sort of, like smallpox vaccination must have been 100 years ago. People were leery of this sort of thing. And the ladies of the Auxiliary, had a lot of -- they helped us a lot by going to schools, and talking, and, with the school nurses, they educated the parents and the students. And it was a cooperative effort that was well-rewarded.

Q Then when they had the new vaccine, or the new --

B The sugar cubes.

Q The sugar cubes. Where did you have this drive?

A In the schools.
In the schools?
Yes. But, here again, the ladies of the Auxiliary helped out an awful lot on that. But they had already educated people so well, that it wasn't anywhere near as big a problem as the initial thing we had done.

Did they have a large epidemic of polio here before that?
Yes.
Uh-huh. Just terrified if you had children. Just absolutely terrified.

Did all the hospitals take polio victims, or was it mainly Hotel Dieu?
Yes. No, Southwestern took some. And, fortunately, New Mexico had this, at that time, had a care -- polio patients at Hot Springs. What they called Hot Springs then, is TRC, now. And they would take --

* Terry Cingley?

Terry Cingley Hospital. Right. And they would take patients on sort of a consignment from Texas.

So, there was an arrangement between Texas and New Mexico that long-term care patients with polio could be sent to Terry Cingley for physical
therapy. They had hot water, they had well-trained nurses, and they had physical equipment already in place there.

No one here had an extensive physiotherapy room or care facility. But certainly Hotel Dieu and Southwestern worked extensively with the polio patients.

Q Now, you say this was at Truth or Consequences. This was when it still had the name Hot Springs, before the radio station changed it?
A Yeah.
Q Is this hospital still there? Is the building still there?
A No. It is now being used as some sort of a -- not as a hospital, but it has something to do with the care -- I think it's convicts, or something. I mean, they --
B I started to say it was a women's.
A I believe that's right.
B I believe, yes, it's a women's facility.
A Yeah.
Q Now, that's not over at Radium Springs; is it?
B No.
A No.
B There's one there, too.
A Further up. This is at Terry Cingley Hospital at
Hot Springs.

B I'm not sure about that. I --
A Not sure about what?
B What Cingley is used for now.
A Oh, I'm not sure either. But until Ralph Edwards came along, it was called Hot Springs.
Q Becky, tell me about working at Beaumont during the war.
B Well, that was an exciting place to be.
Q Was it a general hospital?
B Yes. It was a general hospital. And, of course, they were beginning to -- the war was winding down. When I first started there, it wasn't, though. But then, the war in Europe was over, and we got all that bunch of people coming through. And then, of course, after the war in the Pacific was over, we really were flooded.

Some of our local doctors, ones who settled here, were out there. For instance, Schuessler was out there, and he was doing a tremendous amount of work with burn patients. And Maddox was out there.

Q Is that Truit Maddox?
B Uh-huh. Truit Maddox was out there. And I can remember that Schuessler was so well thought of by so many patients, because a lot of these boys
had to have a lot of reconstruction; their faces and bodies.

We were very busy. I ended up doing the work when they got out of the army. I had to do all of their papers. And, gee, I would work overtime. I -- there was no ever getting caught up. And, of course, the doctors had to have these patients' papers to go and get certain things, for instance, transportation. And, so, I worked day and night there for weeks on end. And it was pretty nice out there. I enjoyed it.

Q Did you live on the grounds?
B Oh, no.
Q You lived in town. That's right. You said you were living with a friend.
B Yes. I was living with a friend over here on Lobo Street, and would go out early every morning. And then some nights, I wouldn't get home until bedtime, having stayed and worked overtime. And it was pretty nice, except there was one ward there where they were mentally disturbed, and I was always a little bit concerned about that when I was working late at night.

But everybody had -- could roam around the grounds out there. They had free access.
And they had a nice PX, and a nice dining room where we all ate our meals. Well, there was just -- you have to admit that there was an excitement about wartime, that everybody was like that.

I think, in connection with this, it might be worth mentioning what a wonderful relationship the physicians of El Paso and the physicians of the army have had over the years that I've been here. And I think it's been that way all through time. The military went out of their way to make their facilities blend in function as much as possible with the local physicians.

And if there were emergency situations -- for instance, I remember when I was interning at the old City/County Hospital, we had a diphtheria epidemic. And our isolation facility at City/County Hospital was overrun. And William Beaumont very nicely took a whole bunch of the diphtheria patients. They also took some polio patients from civilian hospitals, and cared for them out there, because they had some room. And this is just one example of the nice cooperation they -- there has always been, and continues to be, a nice relationship. And it helps a lot, because sharing of medical information, as well as medical facilities, has always been a very
useful thing in El Paso.

Q Tell me about old City/County Hospital.

A Well, City/County Hospital, to me, was a great joy. When I went there, the local physicians, who went there for nothing, just to train people like me, and this was a basis of the way medical education was taught in all those years. And that was that the older physician came, and at no salary, helped the younger physician learn.

And we had excellent, excellent cooperation with the specialists in El Paso. They came as often as you asked them to, and that was pretty often, because we didn’t know anything, and we needed a lot of help out there.

The facility, of course, like all public facilities, never had enough money. And yet, the doctor, Dr. Butler, superintendent out there -- the shop ran really well.

The esprit de corps of the nurses was just absolutely incomparable. You couldn’t find anything better anywhere.

And the facilities for teaching couldn’t be beat anywhere. I mean, by that, I mean the number of diseases and problems that were in existence in this community were just absolutely
unbeatable. There was no way that you could find any place in the United States, probably, that had any more indigent people who had more wrong with them than we had here. And, of course, a lot of them leaking across from Mexico. Coming over here and having their babies, and having their surgery and having their examinations.

And, so, that it was a great place to get internship. There was not an approved residency out there, although some people liked it so well, that they would stay on for an extra year, even though they didn’t get credit, because there was so much clinical material.

B Tell her what you were paid.
A Well, we were paid $25 a month, which -- and board and room -- which was --
Q And had to do your own lab work, too.
A Right -- which was the highest paid internship in the state of Texas, at that time.
Q $25 a month. Where was the hospital located?
A On Alameda Street. As the Mexicans say, right close to Concordia.
Q Now, is it in the same place, and they did it the same way they’re doing the courthouse now?
A Yes. It’s in the same location as the R. E. Thomason Hospital.
Explain to me about the operating room suite, as far as open air, and air conditioning, and --

Well, there was no air conditioning. It was just a high ceiling, stucco room that was as hot as a depot stove. And when they turned the lights on, there were two major operating suites; one larger and used more than the other.

Where they on the top floor with windows all around?

Right. Well, there were very few windows in the surgery room. That was one of the problems about the ventilation. The windows were high, what little windows there were. It was mostly a little enclosed room with -- all the light was artificial. But it was plenty hot in there. I can tell you that.

Do you remember old John Seally?

Yes.

Do you remember the old operating room suites there?

Yes.

I moved there in 1953, and came from New Orleans, where we had the super-duper charity hospital. And all my life I had been told how wonderful Texas was. And I walked into old John Seally, and I thought, "Oh, open air surgery!"
Right. Of course, that's unbelievable, what they've done down there. And it's unbelievable what's occurred in El Paso. But I thought -- of course, this is just an old worn-out guy talking, a has-been -- but we had such a wonderful experience, medically, training, and then, later, working.

I worked as a physician helping, trying to help interns after that. And it was a wonderful organization, out there. And, in a sense, I kind of hated to see it go, because, all of a sudden, everybody demands a salary that goes out there, and nobody does work the way it was done before. I don't mean the work's not good, but it's just a different attitude completely.

Q You don't go out there anymore?

A No, I don't anymore. I was an associate professor for several years out there in dermatology. And I had to accept a salary, which I didn't like to do, but there was no way around it.

Q You've seen lots of changes in medical community, and in the community itself, here in El Paso. Becky, tell me about the Historical Society. You're very involved. Both of us are very involved in it. How did you get involved?
We're charter members. But, it's a funny thing about the Historical Society, it stayed a pretty closed shop for a long time. In fact, I think that we had probably been members 25 years before I was even asked -- or 20 years. Anyway, before I was even ever asked to do anything in the Historical Society. And that worries me about our present Historical Society, is that we may have riches out there we haven't tapped, because we are inclined to recycle the same people all the time. And they very definitely did that in the beginning. But that older bunch gradually died off that established it.

And I really do not have a long history in the Historical Society. I was on the board, and then it was about three years, and then I was off about four years, and then I went back on about five years. So, really, as I say, I can't tell you about the history of the workings of the Historical Society, because I was never on the board during those years, 30 years.

You should go -- of course, Louise Schuessler was the one who organized the thing. And I think those early years that she stayed in there. But, I tell you, it was a close knit little -- almost an elitist group.
because --

Q He didn't give them away.
B He didn't?
Q No. Rich took them down to his shop, and he has wrapped each one in stretch wrap.
B I know what he's done later, but I thought some people got in there, and got them before --
Q Well, I don't know. I went down there the other day, and I was -- I did not realize they were collectibles. I realized that they were old, and I wanted to collect -- or to go through all of them, and make copies of all the medical history that was in the Password. And, so, I told him that I had taken out 37 volumes, and that this was going to go to the Medical Museum. And he says, "That's $6.50 a piece." I said, "I'll make copies, and bring them back." So, they're all down at Gateway Printing, with the exception of three that I gave to The Fort Bliss Museum, because they had some really good articles.
B They're members. The Forth Bliss Museum.
Q No. They're not; are they?
B We have a -- part of Fort Bliss that belongs.
What part is that?
A Center Library.
B The Central Library.
Well, the people at U.T.E.P. cooperated so much; Hurtsag and Porter, and people like that, who formed the nucleus for the Historical Society so strongly in those years. And that has sort of slipped away for some reason or other. We don't have anywhere near the participation from U.T.E.P. that we had -- that was there originally. Carl Hurtsag and Porter.

Porter was wonderful. He was a wonderful Password editor.

And, of course, Carl Hurtsag --

Printed it.

Printed and read every word, and saw to it that the comma was right.

And let me tell you, that counted for a lot in the membership of the Society, because people who collected Hurtsag all over the country belonged to the Historical Society so they could get the Password that Carl Hurtsag designed and printed.

Yes. He put little curlicues in there. Got a little artwork done, and designed it.

Well, he was very careful. And those Hurtsag publications, Password, I cannot tell you when he quit doing. But they are still collectible by people who collect Hurtsag, and that was the reason I hated to see Bill Latham give them away,
Q Oh, the Center. But the museum, itself?
B No. That's true.
Q But I brought out the three copies of the Password, and gave them a membership slip with it, and said, "This is for you."
B Well, good.
Q Let's see. There was something else I wanted to ask you.

(tape is turned off)

B What about George Brunner? Why don't you interview him?
A You're on.
B Am I on?
Q Is he still alive? I didn't realize.
B Well, this is George Brunner, Jr., but he's a member of the Historical Society. Absolutely. You ought to get George Brunner.
Q We're discussing the doctors that were here in 1948, 1949, to see if any of the physicians -- or hear stories of some of the physicians, and see if any of the children are still around this area.
A I can tell you about my introduction to Dr. Barrett. I was helping Dr. Lee Wilcox in 1942. When I had first gone into practice here, I was helping Lee do some surgical procedure. And we
were standing around. We had scrubbed, and had our gowns on, and Lee said, "We're waiting for the late Dr. Barrett." And, of course, I never had met Dr. Barrett, but he generally was late when we was supposed to giving anesthesia. And he came at a speed of about, oh, about like a tortoise, moving along. And he said, "Yes. I'm a little late." But, anyway, he was such a sweet gentle man, that nobody really could get mad at him.

And I don't know what kind of training he had in anesthesiology, if any. He simply had been a general practitioner here for years, and then took up anesthesiology.

But he was a nice fellow, and his wife was a friend of ours. Frank was absolutely benign.

Q There's a Mrs. Blocker listed here. Is this any relation to Truman Blocker of Galveston?

A No. He was a son of a diplomat; wasn't he? Wasn't he in the State Department? But the father of Blocker, wasn't he the Consul General to Mexico? Blocker. I think that's right.

B I can't tell you about that. I don't know.

A He's long gone.

Q Now, when we first came here, Dr. and Mrs. Auh
were very much active in the community.

A Yes. Dr. Auh was an excellent internist. He used to spend a lot of time with interns. When I was an intern at El Paso City/County Hospital, he'd come and very patiently examine the patient with you, go over all the possibilities, talk just like they do in medical school.

Q And his wife was a nurse?
A Yes.
B You, of course, have got Eddie Egbert; haven't you?
Q No. I haven't talked to Eddie yet. His daddy was a doctor, too; wasn't he?
B And his sister.
Q Was also a doctor?
A No. Rosa May Baker.
B Rosa May Baker was the sister of Dr. Egbert, uh-huh. I mean, is the daughter of Dr. Egbert.
Q Uh-huh.
B She would be very good to get. Both of them grew up in El Paso, in the medical society.

(tape turned off)

B I forget the two Egbert children, because they're old enough, now, that they could remember a great deal.

A Orville, the father, was a very dignified,
distinguished physician here who did chest diseases, and leg diseases, and later went into allergy. When I started practicing here, he had given up taking care of tubercular, his primary thing, and had gone into allergy.

B Dodson didn’t -- wasn’t Bill Gaddis’ father a doctor, too?
A Yes.
B Has anyone gotten him?
A He’s a general practitioner.
B That would be a really nice source. And, incidentally, Bill Gaddis is not well at all. You should get him pretty soon.
A His father’s name was Leo.
Q And he is Bill?
A Yes.
Q Okay Mrs. Black; is this Gordon’s mother?
A No. That’s Mrs. Arthur Black. Her father -- her husband was a pediatrician.
B Is A. P. Black.
A Very well thought of here. Very careful, conscientious pediatrician.
Q Now, is Mrs. B-O-E-H-L-E-R still alive?
B Mary Boehler. No, Helen.
A Helen.
B Helen Bohler.
Q And her husband was a radiologist; wasn’t he?
A No, he was an obstetrician.
Q Obstetrician.
A He was.
B Helen Boehler would be a nice source. And, of course, Phillis Heart.
Q Let’s see. Dr. Cooper just recently died.
A No.
Q He didn’t?
B Huh-uh. Not Arlin Cooper.
Q Now, is he the one that did the Medical Center?
A Yes. One of them.
Q I mean, had all the --
A He held all the land, but that’s Arlin Cooper. He’s the psychiatrist. As far as I know, he’s not dead.
Q Oh, okay.
A I’m going to interview him for the Historical Society.
Q Good. Do it for us, too. Make a duplicate of the tape.

   How about -- tell me about the Cathgarts. I was reading their house or a house that they had lived in was one of the historical homes on the --
A No. They --
B: I really don't know.
Q: Are they still alive?
B: Oh, no. There are no Cathgarts. And, in fact, Melby's dead, too. She was their daughter. But their --
A: Cathgarts came soon after the turn of the century. It was a pretty long time --
B: But she does have a son who lives here, Melby does. Melby has a son who might be able to tell you something about the Cathgarts.
Q: And what was that from?
B: Who would it be? Would it be John Melby?
A: I believe that's right. John Melby.
B: It's in our (unintelligible), the members of the Historical Society. One of the boys died, but... Have you interviewed Gene Cregg?
Q: Branch's mother?
B: Yeah.
Q: No, I haven't.
A: We could do that.
B: Yeah. We'll be glad to do that.
Q: Okay. What about the Eches?
B: They had no children. They had no children, and they're both gone.
A: They're both deceased.
Q: And she was a nurse, too; wasn't she?
No. She wasn’t. Huh-uh. She wasn’t a nurse.

She never did practice nursing, that I know of. Andrew came from Tulane, out here; he and Lee. He and Lee Wilcox were good friends.

Now, Mrs. Wilcox is still alive; isn’t she?

Yes. Roberta.

Yes. Roberta would be a good one. And Margie Martin.

Yeah. I’ve talked to Margie.

Of course, Margie Martin grew up in El Paso.

Did she really?

Uh-huh.

I didn’t realize that.

God! You women last forever.

We’ve just got good genes.

And, of course, Alis and Harry. We’ll get them. We can do them really easy.

Now, both of them grew up here in El Paso.

Oh, they did. And --

Yeah. They’re a great source of information for El Paso.

Okay. Now, here is Dr. Outlaw, right here. Is he in that one, also? This was in 1948.

What do you have?

The mother was still alive, Becky Outlaw.

Mrs. Outlaw? Yes. I remember Mrs. Outlaw.
A She lived up there with the Carrolls.
Q Gene Carroll was --
B Mrs. Ed Carroll is her daughter.
Q C-A-R-R-O-L-L?
B I believe that's right. That will get it, anyway.
A D. W. Carroll.
Q And Barbara's daddy was who?
B Patty Rennich shouldn't be forgotten about.
Q Was she --
A Pediatrician.
Q Yeah. She was a pediatrician. Was she originally from El Paso?
B I believe so. I believe she's --
A No.
B I believe so. I believe she's originally -- or she lived some of her life in El Paso.
Q I could kick myself. Who is Perry Rogers? He was the orthopedist.
A Perry Rogers was an orthopedist who came here from Chicago.
Q And he was divorced. His first wife lived over on Stanton Street. And we bought their house -- I mean, her house. It was not their house. It
was her house after the --

B No. That was Dobb.

Q And when she died, she left the house to the Humane Society. And that's who we bought it from. And one closet was filled with pictures. And I called him and asked him if he wanted it, and he said, "No." We hadn't been here very long. And young, dumb -- we threw them. I don't know what ever became of them.

B I know. I've done things like that, too.

A He probably (unintelligible) some words you're not (unintelligible)

Q Yes, he did. And it was -- you know. And I should have called the Historical Society.

B They probably didn't have anything to do with El Paso, because they weren't long in El Paso.

Q Oh, really?

A No. I was -- before Becky came into my picture, Perry Rogers had come here as the only orthopedist. We didn't have anyone during World War II who was trained in orthopedics. In fact, I was setting fractures myself, as were all the other people, because we didn't have anybody. So, Perry came in about 1943. And they were an odd couple.

B What about the Schuster children?
Q  Now, we've gotten a lot of information, but I haven't taped any of them.

B  Well, they should be taped, now. Frank Sr.'s children -- that would be Frank, and the one that's named Harden.

A  Steve. Steve is the other.

Q  Ophthalmologist.

B  He's not Frank's. Well, I'm talking about Frank's children. Look up Harden, what her name is. Is it Dan Harden?

A  I believe that's right.

B  She is their daughter. And both of them would be very good.

A  Now, Daniel Harden --

B  And you have probably gotten the Spiers; haven't you?

Q  Sherry, yes. I've gotten Sherry.

A  And, when you were checking on the old hospitals, and we were discussing this, you realize that the father of these two Schusters that we just mentioned, that is the grandfather of Frank Jr., and Steve was the one who originally had the old Providence before --

Q  Oh. Talking about the Medical Center again, this was one little scandal. I think it's been in the newspaper. I mean, it's been in the paper not
too, too long ago. Tell me about the doctor that shot the lawyer.

**A** He had come here, unfortunately to Dr. Smith and myself, with a horrible skin disease. He had been practicing in New York, and he developed this generalized, horrible skin eruption, which didn't allow him to continue. He couldn't function as a physician, or anything else. And he was referred here, because, by this time, it had been learned that if these people came into this atmosphere, and didn't do anything for a while; got away from whatever they were in, that they got completely, or almost completely recovered. And he did.

He came, and didn't practice, and didn't do anything for several months, and was cured. I mean he was completely cleared. Dr. Smith and I felt that it was an emotional disease. Other people felt that it had something to do with sweat mechanism and perspiration, and so forth. But at any rate, he cleared up. And then he decided to stay here and practice. And that's when the trouble began.

**B** The lawyer lived right here, next door to us.

**Q** Oh, really?

**B** Yes. We were good friends. And it -- the
trouble all started when --

A Ted Andrews.

Ted was mixed up in it some way in getting a divorce from him, I presume.

A He represented her.

B He represented her. And she had pictures. And they weren't very nice pictures.

A Pornographic involving Idenof and the wife.

B Evidently, Idenof wanted them back, and didn't get them back. And he accused Ted of showing the pictures. And, I mean, it was just a feud that started. And he wouldn't pay for his wife's divorce. And it was just terrible.

(end of side two, tape one)

B Ted Anders and his wife, Lucille, had gone to San Francisco to a School Board Meeting. He was president of the State School Board. No. He was president of the State. That's what was taking him out there.

And, when they came back into the airport, Idenof, who was disguised as a taxi driver, had on a cap and a (unintelligible) of a taxi driver. He had a book under his arm that carried his revolver in it. And, anyway, he shot and killed Ted.
And they took him to Lubbock. And he feigned insanity beautifully, perfectly. He -- when they brought him to trial, he could not even answer questions. He couldn't talk. So, they just put him down as Rose Garden; didn't they?

A  Yes.

B  Down at the mental institution for the insane. And he managed to escape from down there. And he didn't serve very long until he had some way or other, managed to indoctrinate some of them into his innocence, and he was helped to escape from down there.

Anyway, he is now -- and I just heard this a few months ago -- that he is still alive and practicing medicine in New York State.

Q  I heard that the day he walked out of the courtroom, when he escaped, that there were quite a few lawyers that left town for the weekend until they found out where he was.

B  Well, of course, he was wealthy. There was no question of what he paid somebody off all the way down the line. And, well, it was very tragic. Very tragic.

A  I don't think anyone -- I don't think he had his gun out for anyone else except Ted Anders. And the reason was that Ted Anders had won the suit
involving over $100,000 in the settlement of that divorce. And, any time you extract $100,000 plus from any of us, we get upset. But Idenof got more upset than the average individual. So, I don’t think any other lawyers -- I’m sure they didn’t feel very good about it, but I don’t think any of them had anything to do much with the thing that caused him to dislike Ted Anders.

Steve Schuster’s first wife, Betty. The young Steve’s first wife, Betty, was working at one of the car rentals at the airport the day that this happened, and she said that that really caused some commotion.

Q I’ll bet.

A Yeah. It was -- well, it was just about dusk; wasn’t it?

A Yes.

B There wasn’t anyone else out there. (unintelligible) when it happened.

A As a matter of fact, we were having a staff meeting of the staff of El Paso City/County Hospital, and I had gone into the (unintelligible) down there. And when they wheeled Anders in, he was dead. That was when I found out.

Q Well, can you think of anything else that
B Well, I want to tell you that Mrs. B. F. Stevens, you know, Mrs. Frank Macnight is Mrs. B. F. Stevens' daughter. Now, Almy's got her. Of course, she grew up in El Paso. That was Mrs. Frank MacNight.

And have you interviewed Anne Turner, Anne Turner Wainwright?

Q Is that --

B That's Gene's sister.

Q Gene's sister (unintelligible). I just interviewed Gene.

B Well, get her. Put her down, because she would be -- Anne would certainly be able to help you.

Q Now, is Anne younger than --

B No. Anne's younger. And then the Garners' daughter.

A Margaret Garner.

B Margaret Garner. What is her name, now?

A It's an unusual name. I don't remember.

Q My cousin went to the University of Virginia Medical School, and he went with John Garner. And I told him I was coming out here. And then, John did his neurosurgery residency in Galveston when I was working there.

A He was a great physical specimen, just like his
father.

Q  Yeah, he was a big man. Where is he now?

B  Well, you know Gambrel was on the -- I don’t know whether you were on the board when Gambrel was on the board or not.

A  Hall Gambrel.

B  What’s his name?

A  Hall. H-A --

B  Hall Gambrel. He grew up. His father, Dr. Gambrel was an early doctor, here. So, Hall Gam. G-A-M. Gambrel.

A  He tells some interesting stories. I have talked to him some about from Manson. I think he heard it from his father. But he’s plenty sharp. He can --

Q  And what about Dr. Tappen? Now, his dad was old public health, here.


Q  But did he grow up here?

A  Oh, yeah. He was a nice -- he was a very --

B  Yes. He’d be great.

A  -- well-informed man, and very good at telling stories.

Q  Okay.

B  Well, that gives you quite a list; doesn’t it?

A  You know, Barbara, when I came into practice,
here, because there were less than 100 M.D.s, we all felt closer together. There's no way that several hundred physicians could ever have the feeling together that we have. Although, we were all competitors to a certain degree, there never was any real great problem associated with that, and I don't know that there are, now. But when you see all these adds in the yellow pages, and on television, you think, "My gosh." But that was a heck of a thing. We would have been so busy in the Ethics Committee, we wouldn't have gotten anything done if people had run adds in those days.

But it was a -- and Becky's already said it about the Auxiliary -- but it was a lot more fun. I hate to be a has-been and talk like this. But it's a lot more fun, socially and professionally, when you know everybody, and when you're friends with them. And even though there may be some deep animosities, there never was overt hostility, or anything of that kind, of that sort. And we didn't have a lot of bad-mouthing. And I'm afraid that perhaps some of that takes place, now. And it's --

B Well, you can't even know each other.
Q That's right.
A It's inescapable. And, of course, in these days, with litigious people keeping their ears to the ground to hear somebody say something nasty about the other physician, I'm afraid some of that is the cause for some of the suits we have.

Q Yeah. Well I can't think of anything else, right now, except let's divide up the list. (laughter)

A I'd just like to say what a pleasure it's been for me, after having been here 50 years, to have practiced here. And I think Becky can say the same thing about her association with the ladies. We've had a wonderful experience living here in the medical community.

B Really, it's been very different from what I hear of other towns this size.

Q Yes. Especially -- one thing that has really come up. When Tom was very active in the medical politics, in other towns, the D.O.s had nothing to do with the medical society, and vice versa. And here, it's blended in, and belong to the Society and the Auxiliary, and it's a nice relationship.

A Now, that has occurred during our years here, because there was a very sharp distinguishing line when we first came here. And that didn't
lower until there'd been some funerals.

B Well, that's when, also the deals improved their education, too; did they not?

A They did. And the hospitals began to develop a different attitude later on. So, it all made it a lot better.

Q Oh. There was one other thing. You said that you were sharing office space with Dr. Laten Green. Dr. Nixon, the first black physician that came here. Did Laten -- I know he was very instrumental in getting him hospital privileges, or breaking down the color barrier. Did Laten admit patients so that Dr. Nixon could see his patients in the hospital?

A Not to my knowledge. By that time, though -- by the time I was here, Nixon could admit his own, I mean, with no trouble. This all occurred -- I think what you're talking about (unintelligible) occurred in the 1930s, when Nixon sued the AMA, and won the judgment about black physicians. He was sort of a pioneer in getting rights established for black physicians.

Q And he never did join the Medical Society. According to his tape, he said that, you know, at the end, the victory wasn't as sweet as he thought. He had no need to get in.
No. He was not a member, to my knowledge. But he was a well-accepted, well-recognized physician, and he did tremendous good for people that he treated.

In fact, some of the unsung heroes in El Paso -- I became aware of these unsung heroes when I was down at City/County Hospital, because so many of the patients that could not afford to go to a private hospital, who had gone to these physicians, and had been treated for practically nothing, or probably nothing, were patients at the hospital when I was there. And these doctors would come and see them with no idea in mind that they'd ever get any money out of it. They just treated these people, were kind to them, and they had gotten them into the hospital, and they took care of them after they got out. It was just that kind of a relationship. Good people.

Dr. Harry Lee was one of those doctors. And I have, through the years, had many people tell me about Dr. Harry Lee, and how they had no money. But it made no difference to him. He would come and sit up most of the night with a sick child if necessary. I herd wonderful things about him. And he --

Well, there were many, many just like that. But
he was an outstanding example. People like Rodarty and this Dr. Brunner that Becky was speaking about. They took care of indigent people like -- well, just absolutely in the tradition of medicine in its best.

Barbara was saying that her dad went up to the -- in the mine --

Yes.

-- or baby sanitarium.

Yeah.

Yes.

But that must have been quite a ride up there in the old cars. It's quite a ride up there in the new cars.

I don't know how much you have gotten into this, but one of the interesting things that was taking place when I came to intern here, something I had not been aware of very much, had to do with the treatment of tuberculosis. Because so many people had come here for tuberculosis, and quite a number of people like Hendrix, and Laws, and Homan and people like that were doing work, we had a special building out there. And, of course, tuberculosis --

At City/County?

At City/County Hospital. And they got excellent
care. And the main thing they needed, they got. They got nursing care, and nutritional care. They could lie in bed, and be taken care of, and they got fed well. And practically all of them got well, except those who were just too far advanced. But that’s not to detract from what the physicians did. They gave them good treatment. But in those days, naturally, we didn’t have the antibiotics that are used in the TB. We didn’t have the kind of chest surgery that there is now. Well, they were just given Pneumothorax, and compressing the lung, letting it rest and these people were resting there.

One of the stories that I wrote in this write-up of City/County Hospital, I remember very vividly, and it probably occurred many times. But on the first floor, these patients would get so tired of Anglo food, and they would tell someone in the family to bring some tacos, and enchiladas, and bring some beans. And they would come and slip through the outside, and hand them through the window. And many of these patients had a tube down, when they were acutely ill, and, of course, the nurse didn’t know what had happened. The tube would stop up, and she’d have to pull all that out, and find that it was
stopped up with beans. (Laughter).

Q Now, you said you wrote an article about
City/County Hospital.

A Yeah.

Q Was it published in this one?

A Yes.

Q What year was that?

A Ten years ago?

B No. I don't believe it was that long.

A It was published --

B Sometime --

A First, it was published in the *Physician*, the *El Paso Physician*.

Q Who picked it up?

A Password got permission to put it in *Password*.

B No. I think --

Q Do you have a copy of that at the Home?

B No. I think it was the opposite way. I think
first it was in *Password*, and then Virginia
called for it to be put in the *Physicians' Magazine*. Uh-huh.

Q Now, if we both have a copy, because, you know,
looking at the indexes, some of them slipped through my hands.

B Well, there hasn't been one recently, and it probably is is since the last index.
Q Yeah. Well, the last issue of each *password*, the winter issue, has an index in it.

B Oh, that's right.

Q And so I've been looking for it. Well, I think this should conclude the interview. I've about talked both y'all's legs and arms off, so we will stop the interview for today.

    Thank you.