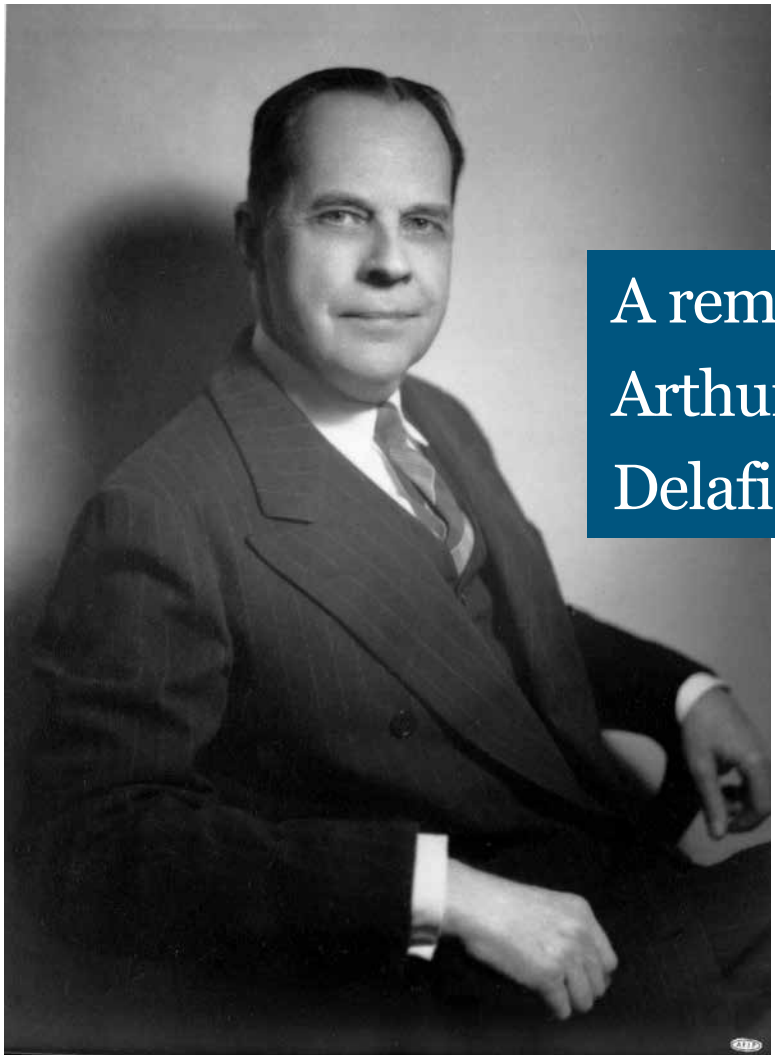


A remembrance of Arthur Purdy Stout and Delafield Hospital

Arthur Purdy Stout, MD. Wikicommons

Henry M. Bowers Jr., MD, FACP

Dr. Bowers (ΑΩΑ, Columbia University Vagelos College of Physicians and Surgeons,1961) is a retired pathologist and laboratory director, St. Mary's, GA.

My classmate, Howard Fox, and I both chose to do a three month elective in the Pathology laboratory of Francis Delafield Hospital during the summer of 1960. Little did we know how unique this elective would be. We were third-year medical students at Columbia College of Physicians and Surgeons. Howard was acquainted with Dr. Sproul, the laboratory director at Delafield, and she had encouraged the rotation but we did not know the other pathologists in the laboratory.

Delafield Hospital was a hybrid institution—a New York City municipal hospital affiliated with Columbia and operated jointly by the New York City Department of Hospitals and Columbia University. After a 10-year delay in construction, it opened in 1950 as the only city hospital in upper Manhattan. The building still stands and is located at 164th Street and Fort Washington Avenue. The hospital was named for Francis Delafield who graduated from the Columbia College of Physicians and Surgeons in 1863, became one of the early American pathologists and subsequently chaired the pathology department from 1875 to 1882. Delafield was the only municipal hospital dedicated to oncologic diagnosis, treatment, and research, a major component of the Columbia Institute of Cancer Reseach.

Most of the attending physicians at Delafield had joint appointments at Columbia Presbyterian Hospital. The Delafield attending staff included Drs. Cushman D. Haagensen, Grant Sanger, Elliott Osserman (ΑΩΑ, Columbia University Vagelos College of Physicians and Surgeons, 1946), Alfred Gellhorn (ΑΩΑ, Washington University School of Medicine in St. Louis, 1952), and Arthur Purdy Stout (ΑΩΑ, Columbia University Vagelos College of Physicians and Surgeons, 1911).

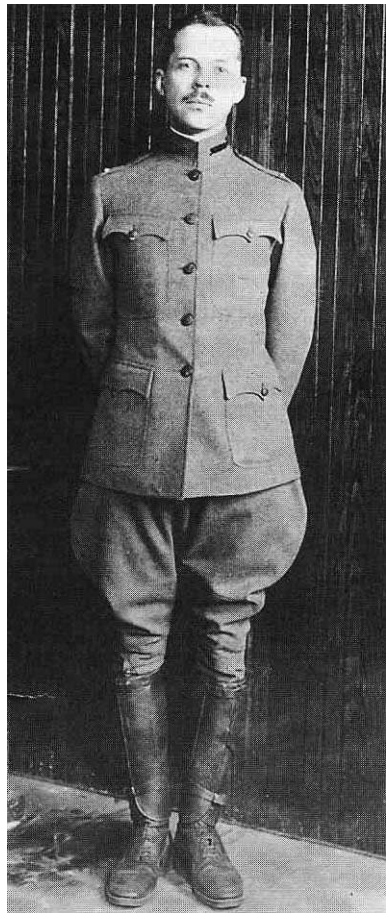
Stout had been surgical pathologist and professor of surgery at Columbia and when Delafield Hospital opened, he concurrently became professor of pathology and the director of pathology. Stout, like Francis Delafield, was a native New Yorker who attended Columbia College of Physicians and Surgeons and then lived and practiced in New York City his entire life. He retired in 1954 when he chose Dr. Edith Sproul as his successor. She was a Columbia graduate who had completed her pathology residency there under Stout, and she had assisted him in the design of the laboratory at Delafield Hospital. Her past experience included work with Dr. Papanicolaou in the development of cytologic testing. She had been head of the pathology department at the American University of Beirut before coming to Delafield.

Stout as an emeritus was anything but retired. He had a strong commitment to teaching, and every day he walked the four blocks from his medical school office to hold a noon slide conference in the Delafield laboratory. He brought with him slides of tumors and accompanying clinical information, most of which he had received in consultation. Howard and I soon learned that Stout was recognized internationally for his expertise in surgical pathology. He began his medical career as a surgeon and not as a pathologist.

From surgery to pathology

Details of his life and transformation to surgical pathologist have been given by his associates Virginia Kneeland Frantz (ΑΩΑ, Columbia University Vagelos College of Physicians and Surgeons, 1921) and Raffaele Lattes (ΑΩΑ, Columbia University Vagelos College of Physicians and Surgeons, 1956).[1,2] However, in 1997 his autobiography appeared in *Guiding The Surgeon's Hand—The History of American Surgical Pathology*: *"Notes on the Education of an Oncological Surgical Pathologist."*[3] As he states in an introductory paragraph, "…I have written them solely for my own amusement."[3] He did not intend publication, but after retirement he left his autobiography with Lattes who subsequently authorized Dr. Juan Rosai (ΑΩΑ, University of Minnesota Medical School, 1961), the editor of the surgical pathology history, to include it.

The autobiography is very comprehensive, beginning with his entry into Columbia in 1908, and concluding in 1955 with Stout, now with some physical handicaps of old age, wondering about whether he can continue with consultations, scheduled seminars, and lectures. It is not just his autobiography but a history of medicine through his eyes. He describes 1908 as part of an era that might be called the triumph of surgery[3]



Lt. Arthur Purdy Stout in France, 1918. Wikicommons

Stout decided to become a surgeon and obtained a residency in surgery at Roosevelt Hospital. He practiced surgery, and during World War I was a First Lieutenant on active duty in the Army Medical Corps in a field hospital in France. However, even from his first year in medical school his passion was surgical pathology. At that time it was customary for clinical departments of surgery to have their own laboratories of pathology that were under the control of the department of surgery and not the department of pathology. The Laboratory of Surgical Pathology at Columbia was opened in 1910, and Dr. William C. Clarke, who had been trained as a surgeon, was appointed the director.

All through the four years of medical school, Stout spent part of his summer vacations in the surgical pathology lab where he became familiar with Clarke's surgical research as well as gross and histologic microscopic examinations. During his two-year internship at Roosevelt Hospital he had the opportunity to work in the surgical pathology lab. In 1914, he was appointed instructor in surgery at Columbia, which added teaching responsibilities in addition to surgical out-patient duties but allowed him to continue to do surgical pathology.

At that time, he formulated the philosophical approach he used throughout his professional career. As he describes it, "I made rounds with the surgeons at the hospital as often as possible and familiarized myself with the clinical aspects of the cases I studied in the laboratory. Thus, I learned early on the great importance of a close correlation between clinical and pathological studies. Each complements the other; it is impossible to do intelligent surgery without a thorough understanding of the pathology of

disease, and it is equally impossible to make an intelligent interpretation of pathology without a clear understanding of its clinical implications."[3] Stout also kept detailed clinical information along with the slides and pathological description of his cases. This was an entirely new approach to surgical pathology.

When he returned from Army duty, Allen O. Whipple (AΩA, Columbia University Vagelos College of Physicians and Surgeons, 1907), the chairman of surgery, appointed him assistant professor of surgery, and in 1928, associate professor of surgery and director of surgical pathology. His major area of interest in surgical pathology was neoplasia. He used a sabbatical year in 1928 to begin writing his book *Human Cancer,* which was published in 1932.[4] His organization of the contents of the book, its typography, was innovative. "I have already indicated that I felt it was important to make a book of tumors for the use of pathologists and clinicians which would deal with all of the tumors one was likely to encounter in each organ and anatomical region so that in seeking this information one would not be forced to consult many different and widely separated pages to assemble it."[3]

Stout used similar organization of case material in numerous presentations, lectures, and conferences devoted to neoplasia. He became a member of the National Research Council Subcommittee on Oncology that was formed to prepare an atlas of tumor pathology. This was published in the form of fascicles—each fascicle devoted to an organ or tissue system. He wrote and edited three of the first fascicles on tumors of the peripheral nervous system, the soft tissues and the stomach. The fascicles proved to be a great help diagnostically. They were expanded to include all organs and tissues, and they were continually updated by the Armed Forces Institute of Pathology (AFIP). Stout became an official consultant to the tumor registry of the AFIP in 1945.

His publications indicated his broad interest in all of oncology, but his special area was the identification and classification of neoplasms of soft tissue. For many of these tumors, the cell of origin was uncertain and as a result different names would be used to identify them. Stout would search the medical literature to present these varied opinions and then present his own opinion in publications and in international and national meetings to discuss the interpretation and classification of such neoplasms. In his research of such neoplasms, along with Margaret R. Murray, they began using tissue cultures of tumor explants in attempts to identify neoplastic cell types.

Delafield noon conference, summer 1960. From right: H. Fox, Dr. Edith Sproul, Henry Bowers, Elfriede Kohout Dutz, Dr. Arthur Purdy Stout, unidentified resident, Bolivar Kunhardt, Werner Dutz, Gleb Budzilovich, unidentified resident.

Daily noon conferences

The daily noon conference at Delafield was conducted by Stout in a manner apparently similar to his other teaching activities. In the lab all the participants were seated about a large desk with their microscopes. Everyone had had a day to review the slides. Stout asked each one of us for our diagnosis and interpretive reasoning. He insisted that all participants must give a diagnosis before he would discuss his own interpretation.

Howard and I were astounded when he included us in this conference, and we, like the others, had to give our diagnoses. We were in over our heads—we had no special training other than the usual general pathology medical school course, although Howard had done graduate work in anatomy. Stout was an urbane, pleasant, and tolerant man—he would just smile at some of our wilder interpretations, but he always considered our attempts along with those of the others.

It quickly became clear that the others were identified as residents and clinical fellows but they were also an international group of experienced pathologists who were there to work and study with Sproul and Stout. They included Egyptian Henry A. Azar; Viennese Werner Dutz and wife Elfriede Kohout Dutz; Russian Gleb Budzilovich; Dominican Bolivar Kunhardt; and Hungarian cytotechnologist Andrew Huvos (AΩA, Boston University School of Medicine, 1954). Each went on to successful practices in the United States. They spent much time helping Howard

and me with our microscopic interpretive efforts. We also accompanied them while they were doing frozen sections, autopsies, surgical case dissections, and writing surgical and autopsy descriptions.

A dedicated teacher

The big moment for Howard and me came near the end of the rotation when at the slide conference there was a case of an unusual tumor composed of a jumble of mesenchymal elements. We independently thought it was benign but we collaborated to give it a name. We finally agreed on mesenchymoma. At the conference, when Stout called on us we both gave that diagnosis. Amazingly, that was Stout's diagnosis. As I discovered later, Stout had described and named similar tumors.[5]

Even in our brief three-month exposure it was clear that Stout was an extraordinary man and a dedicated teacher. Many of the surgeons and pathologists he worked with, and the surgical pathology residents he taught, recognized his talents and perpetuated the spirit of his teaching by forming the Arthur Purdy Stout Society of Surgical Pathologists, which still exists today.

During the remainder of our time in medical school, neither Howard nor I had another chance to revisit the Delafield laboratory. Our post graduate training took us out of New York—Howard went on to become a neonatologist and I became a pathologist.

The Delafield building remains, but it was closed as a functioning hospital in August, 1975 as a result of Mayor Abe Beam's budget cuts brought on by New York's monetary crisis.The building is now used for elderly housing. Similarly, the Armed Forces Institute of Pathology was "disestablished" in September 2011. The Columbia College of Physicians and Surgeons is now named the Columbia University Vagelos College of Physicians and Surgeons. Stout died in 1967, at age 82. All of the other physicians mentioned above are deceased as well. That small group at Delafield Hospital laboratory in 1960 exemplified Stout's professional standards of scientific inquiry, and service and teaching as demonstrated by their careers after leaving Delafield. Sproul went to Roswell Park Cancer Institute to be Associate chief of cancer research and clinical professor of pathology. Azar became professor of pathology at the University of South Florida College of Medicine. Werner Dutz returned to Vienna to be professor of pathology at the University of Vienna. Budzilovich became a neuropathologist at New York University Medical Center and Bellevue Hospital. After medical school in Germany, Huvos returned to Delafield for his pathology residency, and to Presbyterian Hospital for his hospital fellowship in pathology and then went on to become attending pathologist and member at Memorial Hospital for Cancer and Allied Diseases at Memorial Sloan-Kettering Cancer Center in New York City, and professor of pathology at Weill Medical College of Cornell University. Kunhardt and Elfriede Kohout Dutz were pathologists in Veterans Administration Hospitals in Miami, and Richmond, Virginia, respectively.

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