

Alan Gregg, Physician

On the 19th of last June, Alan Gregg died. A great statesman in his every field of endeavor, he was highly respected in all countries where concepts of health are in harmony with available knowledge. He was beloved not only for the material assistance provided through his representations, not only for his understanding of every individual whose problems came to his attention—and many there were—but especially for his kindly consideration of everyone, great or small, wise or otherwise. This resulted in influences that will continue inevitably and will bring to Alan Gregg a distinction, in his immortality, such as any sincere and able man might covet.

This man Gregg, in the sense of Anthony's speech, cannot be categorized. The attempt would emphasize single attributes or activities. As important as specialization is, it all too often narrows the perspective, quite contrary to the expanding vision that was so characteristic of Gregg. When he received the highly merited Lasker Award a few months ago, it was said of him, "a physician who hasn't treated a patient in thirty-five years, a medical educator who has never taught a class, a research man who has done no research, yet—he accomplished more for medical research, medical education, and the practice of medicine than if he had been personally outstanding in all three." This is well said; yet what are vision of need, plans for fulfillment, and support of venture—all characteristic of Gregg's life work—if they are not research, education and practice in the broader sense?

How he chose medicine as a career is told by Gregg in *Our Anabasis*, an address made in 1954 to the Association of American Physicians. As is often the case, his own childhood illness and his family doctor's care (as much for the parents as for the patient)—care that involved less knowledge of the sore throat and more of the psychology of all concerned—were determining. Read this account. Any effort to convey the essence of Gregg's narrative would fall short of his own depth of expression. There are other fundamentals in this address that aid in an understanding of this vital person. They include his intellectual

maturity; his evaluation of knowledge acquired independently; the relative importance of knowledge for its own sake; and the process of arriving at the realization that medicine is not omnipotent and that all too often the result is not cure but, as he put it, "M.D.—Make Do.—Quaint idea! . . . Work for the handicapped . . . who is handicapped, your patients, or you? Both. Helping the survival of the unfit. . . . With more to come. What in the world was the solution. Where to find a formula for head and heart too?"

The necessity of earning money for his education delayed Alan Gregg's entrance into medical school by a year, but the experience was a maturing one, and he never regretted it. This was in 1912, and the scientific renaissance of medicine in the United States was well under way, at the expense of the art that had been so impressed on Alan, as a sick child, by his doctor. His interest in prevention, as distinct from treatment, of disease was soon kindled. So there was no hesitancy on his part at the end of his military service, in 1919, in accepting an opportunity to serve on the International Health Board of the Rockefeller Foundation. It will not be forgotten, even in this time of affluence, that this foundation is one of the group of great philanthropies of the Rockefeller family, which include the Institute, the General Education Board, and the Laura Spellman Rockefeller Fund. It has been more responsible, no doubt, than all other influences for the advance of medical education and research from a very inferior stage to their present high position.

Gregg remained part of this great scheme of things throughout his professional life. Early assignments in South America, and then Europe, provided years of unparalleled opportunity. He emerged without doubt the best informed individual in the field on institutions for medical education and for research, and on their resources, including, particularly, personnel.

It was my privilege to benefit from Gregg's wide information in 1929, when scientists were being sought for the exploration of problems of human behavior. This was no less than 4 years

before the Rockefeller Foundation approved psychiatry as a major concern of the Division of Medical Sciences—a decision in large part due to Gregg's interest in this important area of health. My conferences with him were helpful, and the weeks of travel and exploration that followed were largely based on his advice. My impression has grown to conviction, as the years have slipped by, that Alan Gregg was one of the few who appreciated the need for, and the potentialities of, the application of science to behavior. Certainly his influence has played a major role in present-day interest in, and understanding of, mental health.

Gregg's attention to behavior was not confining. He was alert to improvement in the pattern of approach to any health project, and it is not surprising that he supported the eager and sincere effort for basic understanding of the life history of the tooth in its relation to prevention of disease. Progress in this important subject must, in no small part, be credited to Gregg.

These examples—mental and dental health—are evidences of Gregg's inherent ability to discern problems not adequately under study on the widening horizons of health; his contributions remain as significant mileposts.

Alan Gregg's unusual adaptability came into evidence strongly in the last 5 years of his life. His assistance was in demand by many agencies concerned with the national emergency, so he withdrew, before his scheduled retirement, as vice president of the Rockefeller Foundation. It was my privilege to work with him on several committees, including those of the National Research Council in its associations with the Atomic Energy Commission, the Health Advisory Committee of the Office of Defense Mobilization, and the medical task force of the Second Hoover Commission. Again, and even more forcibly, Gregg's understanding of men from many of life's highways and byways, his capacity for objective analysis of problems, his suggestions for their solutions, and his extraordinary capacity to present the case for sympathetic consideration, made him outstanding.

Needless to say Alan Gregg was a busy man. There was scant opportunity for him to enjoy home and family, of whom he always spoke with a ring in his voice and a light in his eye that allowed no other interpretation than happiness.

It has been well said: "Better worlds are born, not made, and their birthdays are the birthdays of men." Alan Gregg was such a man.

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