



RESPONDING TO CRISIS:

*Franklin H. Martin,
the ACS, and The Great War*



*by John S. O'Shea, MD, FACS,
Brick, NJ*

Crisis sometimes has a way of bringing out the best in people. Following the events of September 11, 2001, Thomas R. Russell, Executive Director of the American College of Surgeons, noted that "For every demon and villain to surface, thousands of heroes emerged.... Responding from the medical community [was]...a host of caregivers who actively participated in helping the injured."¹ The same sort of response occurred during World War I, on a larger scale, when the fledgling American College of Surgeons and its founder, Franklin H. Martin, MD, FACS, played a major role in organizing the nation's medical personnel to aid in the war effort.

Until the First World War, medical services were largely peripheral to the armed forces. Government funding was meager and the status of military physicians was extremely low.² When the College formally came into existence in 1913, the world was at relative peace, but the College, along with its leadership, faced significant resistance to its establishment. By the end of the war in 1918, governments were toppled, the map of Europe had dramatically changed, and the profession of surgery, as well as the ACS, had gained a considerable measure of respectability.

MEDICAL PREPAREDNESS

The Clinical Congress of Surgeons of North America met in London, England, from July 27 to August 1, 1914, under the direction of its Secretary-General, Dr. Martin. On the last morning of the conference, Dr. Martin awoke at the Hotel Cecil with "a sense of impending horror." He recalled that at dinner the previous evening, the mood had been care-

Left: Dr. Martin, circa 1918.

free, without even a mention of political events. When news arrived that the great European powers were now at war, the 1,100 American physicians and spouses who had been attending the Congress were suddenly left to find their way home any way they could.³

Although the U.S. was able to avoid entering the conflict for another two-and-one-half years, Dr. Martin and other medical leaders were convinced that the country needed to prepare for such an eventuality. The representative national medical and surgical associations were asked, through their presidents, to participate in formulating plans for medical preparedness. An organizational meeting took place April 14, 1916, at the Union League Club of Chicago, and the Committee of American Physicians for Medical Preparedness was formally created. As an aid to the general committee in surveying the medical resources of the country, an advisory committee was also selected in each state.

In his capacity as Secretary-General of the ACS, Dr. Martin traveled to Washington, DC, to offer the College's services to U.S. Surgeon General William C. Gorgas, MD, in connection with the work of reorganizing the Army Medical Corps. A list of ACS Fellows of military age was provided to Major General Gorgas, from which 2,000 Medical Reserve officers were chosen. On April 20, 1916, in a conference with President Woodrow Wilson, J. M. T. Finney, MD, FACS, then-President of the ACS, formally offered the services of the American Physicians for Medical Preparedness in order to "make a comprehensive survey of the medical resources of the country...make a complete invoice of such resources...and provide every soldier and sailor in the service of the Federal Government protection in sanitary matters, as well as proficient medical and surgical care."³

On August 29, 1916, an act of Congress established the Council of National Defense, which included the Secretaries of War, the Navy, the Interior, Agriculture, Commerce, and Labor, for the coordination of industries and resources for national security and welfare. In addition, the bill stated that "the Council of National Defense shall nominate to the President, and the President shall appoint, an Advisory Commission, consisting of not more than seven persons, each of whom shall have special knowledge of some industry, public utility, or the development of some natural resource, or

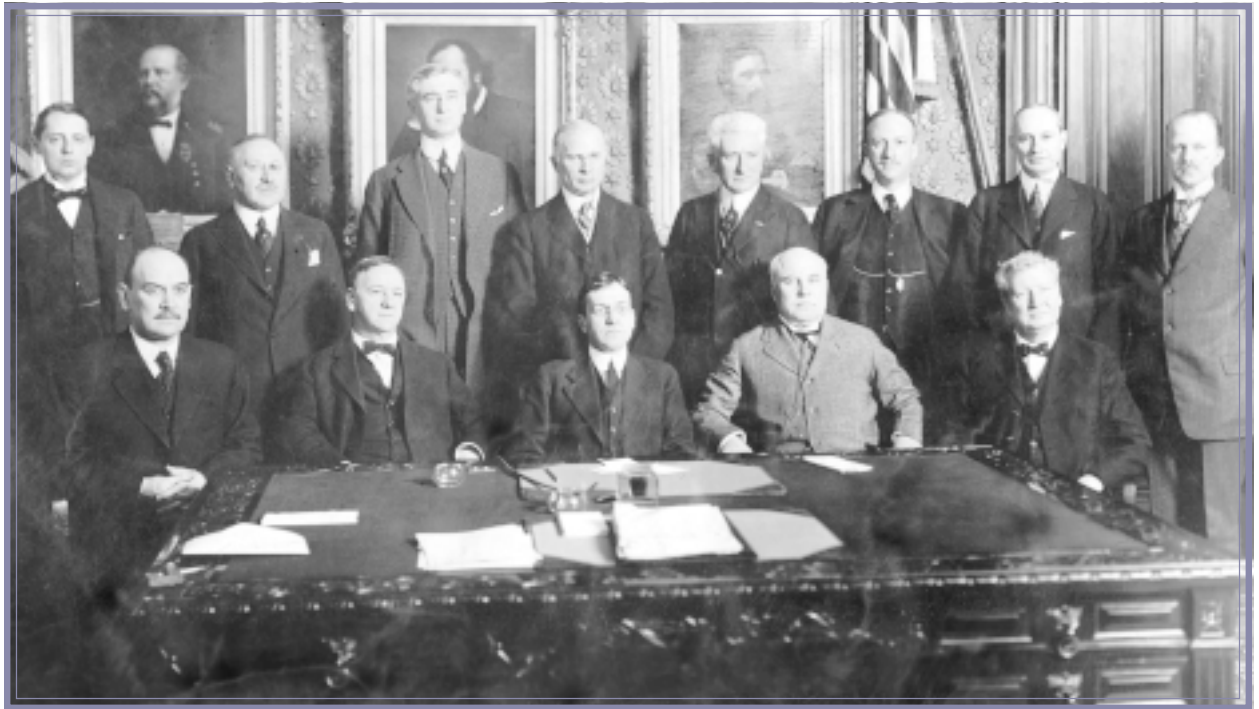
be otherwise specially qualified, in the opinion of the Council, for the performance of the duties hereinafter provided...."⁴

On October 11, 1916, Dr. Martin was notified by telegram that President Wilson had appointed him to serve as one of the seven civilian Advisory Commissioners. He was part of an exceptional group that included: Bernard Baruch, New York financier and economist, known for his comprehensive knowledge of wartime economies and industry; Samuel Gompers, president of the American Federation of Labor; Hollis Godfrey, professional engineer and president of the Drexel Institute of Philadelphia; Daniel Willard, president of the Baltimore & Ohio Railroad; Julius Rosenwald, president of Sears Roebuck & Co. of Chicago; and Howard Coffin, Detroit automobile engineer (see photo, page 22). The Council of National Defense and its civilian Advisory Commission had been created because, in the words of President Wilson, "Congress has realized that the country is best prepared for war when thoroughly prepared for peace."³

As the first act of the Advisory Commission, a conference of deans of all accredited medical schools in the U.S. was held on January 6, 1917, at which time it was resolved that all medical students should be instructed in military medicine in order to ensure the future supply of well-trained medical officers. Medical students and interns were placed in the Enlisted Reserve Corps, allowing them to avoid the draft until their education had been completed, thus furnishing annually a group of 3,000 graduates who would be available for medical service during the war. Recommendations were also made to the general hospitals of the country that their staffs be organized to release as many as possible of their members for military service, and they were urged to gradually acquire reserve stocks of drugs, appliances, and supplies to be used if needed for the war effort.

MOBILIZATION

American medical personnel provided services in Europe as early as the fall of 1914, when a group of Americans residing in Paris, headed by Harvey Cushing, MD, FACS, of Harvard University, converted the existing American Hospital at Neuilly-sur-Seine into a military hospital that became known as the "Ambulance Americaine." This or-



The Council of National Defense and Advisory Commission. Standing: Grosvenor B. Clarkson, Julius Rosenwald, Bernard W. Baruch, Daniel Willard, Franklin Martin, Hollis Godfrey, Howard Coffin, and Walter S. Gifford. Seated: David F. Houston, Secretary of Agriculture; Josephus Daniels, Secretary of the Navy; Newton D. Baker, Secretary of War; Franklin K. Lane, Secretary of the Interior; and William B. Wilson, Secretary of Labor.

ganization was supported and sponsored by the American Ambassador to Paris, Myron T. Herrick, who, along with George W. Crile, MD, FACS, developed the concept of the Base Hospital Unit, believing that “mediocrity well-organized is more efficient than brilliancy combined with strife and discord.”⁵

Initially, the principal features of the base hospital model called for a unit that could support 80 to 100 beds and an operating room, including surgical instruments, surgical dressings, anesthetics, and the staff of surgeons and nurses required for the operating room and the care of patients, as well as the ability to carry out clinical research. American medical universities would provide these services and materials on a rotating, three-month schedule.⁶ The plan was expanded to provide support for a 500-bed hospital and was presented by Dr. Crile at the Symposium on Military Surgery

at the October 1915 Clinical Congress of Surgeons of North America in Boston, MA.

By the 1916 Clinical Congress, held during the week of October 23, Dr. Crile was able to demonstrate the mobilization of a base hospital unit in Philadelphia’s Fairmount Park for the 3,000 surgeons, hospital superintendents, and nurses in attendance, with staff drawn from hospitals in Cleveland, including his own Lakeside Hospital. Following this demonstration, the Army Medical Corps assembled other base hospital units at Army training centers here and in Europe. In all, 129 U.S. base hospitals operated in France or England during the war (120 organized in the U.S. and nine organized in Europe).³ Six hospital units reached Europe before any other American military organizations and they were eagerly received by British and French officials, since both the military and civilian popu-



Prominent surgeons involved in the war effort. Front row: William Mayo, Charles Mayo, Berkely Moynihan, Franklin Martin, George Crile, and Alton Ochsner. Back row: Fred B. Lund, Raymond P. Sullivan, F. J. Cotton, J.G. Clark, F.F. Simpson, and John G. Bowman.

lations of those countries were in dire need of medical care.

FROM PREPAREDNESS TO SERVICE

Shortly after the 1916 Clinical Congress, President Wilson was reelected for a second term on a platform that included continued American neutrality. By his second inaugural address on March 5, 1917, however, the President knew that “to be indifferent to it [the European war] or independent of it was out of the question.”⁷ One month later, on April 6, Wilson again addressed the nation, this time to proclaim the existence of a state of war between the U.S. and the Imperial German Government.

On April 2, 1917, Dr. Martin was authorized by Secretary of War Newton D. Baker to appoint a General Medical Board to act as a cooperating agency between the Army, Navy, and Public Health

Service Medical Departments and the medical officers who would be enlisted from civilian life. This board included the three Surgeons General of the regular forces, the Director of Military Relief of the Red Cross, and many of the nation’s medical and surgical leaders (see photo, above). The Regents of the ACS strongly supported the war efforts, and letters were mailed to Fellows urging them to join the military services of their respective countries. On April 22, 1917, the Regents also authorized the establishment of temporary offices of the ACS in Washington, DC, to enable Dr. Martin to carry out his duties as a member of the Council of National Defense.

CONSEQUENCES OF THE WAR

Besides the achievement of important clinical advances, the war left a number of legacies for the College and the profession of surgery in America.

Although it was a nascent organization at the time, the leadership of the American College of Surgeons foresaw the importance of a competent, well-organized medical force in the nation's war effort. Just as some members of the medical establishment criticized the formation of the College as being at best unnecessary and at worst a vehicle of self-promotion, there were individuals who opposed Dr. Martin's appointment to the Council of National Defense and sought to discredit him with President Wilson and other officials in Washington.⁸ These attempts, however, were unsuccessful. For his extraordinary efforts during the war, Dr. Martin was promoted to the rank of colonel and was awarded the Distinguished Service Medal, the highest honor given by the U.S. government for service rendered in a noncombat situation. Other recipients of this award included: Marshall Ferdinand Foch, Commander-in-Chief of the Allied Armies; Sir Douglas Haig, Commander-in-Chief of the British Armies; Marshall Henri Petain, Commander-in-Chief of the French Armies; and General John J. Pershing, Commanding General, American Expeditionary Forces.⁹ Dr. Martin and President Wilson maintained their congenial relationship and correspondence long after the war.¹⁰

The American College of Surgeons emerged from the war a more mature organization, having gained in stature and respectability. An estimated 90 percent of the 3,795 Fellows and most of the Regents were in uniform in one capacity or another voluntarily.¹¹ They served at considerable personal risk, as this was the first time in "civilized warfare" that hospitals were selected as the special target of attack by an enemy's gun. The Red Cross was no longer sacred and the operating room, as much as an ammunition train or a depot of military supplies, could be the object of an aerial bomb.¹²

It has been suggested that "medicine is the only victor in war,"¹³ and whether war is seen as incompatible with the healing profession or its fulfillment depends to a large extent on how the medical community responds to the crisis. In response to the crisis of World War I, the American College of Surgeons took a leading role in organizing, preparing, and deploying the nation's medical resources. The Fellows who served acquired hard-earned clinical experience that allowed them to return to civilian practice as a more competent and efficient body of surgeons, and the leadership of

the College gained an organizational experience that could now be applied to programs that would advance the profession of American surgery. [Q](#)

References

1. Russell TR: From my perspective. *Bull Am Coll Surg*, 86(10):3, 2001.
2. Bourke J: Wartime. In: R. Cooter and J. Pickstone (eds): *Medicine in the 20th Century*. Amsterdam, Netherlands: Harwood Academic, 2000; 589.
3. Martin FH: *The Joy of Living: An Autobiography*, vol. 2. New York, NY: Doubleday, Doran, & Co., 1933.
4. An Act Making Appropriations for the Support of the Army for the Fiscal Year Ending June 30, 1917, and for Other Purposes. Public-No. 242-64 (H.R. 17498).
5. Martin FH: *Fifty Years of Medicine and Surgery*. Chicago, IL: Lakeside Press, 1934.
6. Crile C: *George Crile: An Autobiography*. Philadelphia, PA: Lippincott, 1947.
7. Wilson W: Second Inaugural Address, March 5, 1917.
8. Grimm EK: Notes on "The American College of Surgeons and World War I, 1914-1918," reel "W," section entitled "Dr. Franklin H. Martin—Criticism during World War I" (ACS Archives, p. 19).
9. Government Printing Office: 1927 American decorations. A list of awards of the Congressional Medal of Honor, the Distinguished Service Cross and the Distinguished Service Medal. 1862-1926. Washington, DC: Government Printing Office, 1927.
10. Letter from W. Wilson to F.H. Martin, February 1, 1922. F.H. Martin Diary (ACS Archives).
11. Davis L: *Fellowship of Surgeons. A History of the American College of Surgeons*. Chicago, IL: American College of Surgeons, 1960; 212, 214.
12. Pilcher LS: The influence of war surgery upon civil practice. *Ann Surg*, (69):6; 567, 572.
13. Clapesattle H: *The Doctors Mayo*. Minneapolis, MN: University of Minnesota Press, 1941; 573.

Dr. O'Shea is a
general surgeon
and chairman,
department of surgery,
Ocean Medical Center,
Brick, NJ.

