Allan Friedman interview, 5/14/19

Susannah Roberson [00:00:00] My name is Susannah Roberson. I am here with Dr. Allan Friedman. It is Tuesday, May 14, 2019. And this interview is part of the David Sabiston oral history project. So thank you for taking the time to talk with us. I am going to start by just asking you a little bit about your background. So can you briefly discuss where you grew up, where you went to college, and what made you decide to become a doctor?

Allan Friedman [00:00:32] That's a tough one. So I'll do the easy stuff first. I grew up in Chicago. At the age of 16 and I went off to Purdue and I studied physics. I developed an interest in biophysics. I went to medical school expecting to be a researcher. I found I really liked interacting with patients and I moved into medicine.

SR [00:00:59] And where did you attend medical school?

AF [00:01:02] I was- I attended medical school as a James Scholar at the University of Illinois and graduated in 1974.

SR [00:01:11] And what made you decide to become a surgeon?

AF [00:01:14] Well, I was interested in the neurosciences—and although it sounds a little bit jaded these days—back in the day, neurologists didn't have a lot of tools to actually help people, so they did a lot of diagnosing but didn't do much. So neurosurgery allowed me to explore the neurosciences plus actually help people.

SR [00:01:36] And what brought you here to Duke?

AF [00:01:40] I was brought here to Duke because of Dr. Guy Odom. He was the chief of neurosurgery at the time. Dr. Sabiston was the department chairman, but Guy Odom was the chief of neurosurgery. And he was thought to have the best neurosurgical training program in the country.

SR [00:02:01] And, let's see. We're gonna just quickly go through all the different roles you've had here, because I know you've had many different roles at Duke. So if you want to just take us through a little timeline of your career, which I believe was mostly here but a little bit elsewhere?

AF [00:02:19] Yeah. So in 1974 I came to Duke as a intern. And of course Dr. David Sabiston was chairman of surgery, so I was an intern with him being the chairman. In 1975, I was invited to join the brain team and started my residency, completing with two years of chief residency starting in 1978 and extending through 1980 at Duke. I then took six months off and I was chief resident for Dr. Charles Drake, who was a cerebral vascular surgeon up in London, Ontario, Canada at Western University. And then I came back on January 1, 1981, as an assistant professor of surgery. I started off doing general neurosurgery but soon began a practice in epilepsy surgery, and then finally cerebral vascular surgery, which was my passion. I was able to have enough patients to actually have a practice in that. I continued doing that until the 1990s when endovascular surgery became more prominent. I decided I didn't want to go that route and so I took my various skills and teamed up with Dr. Henry Friedman and Dr. Darell Bigner and resurrected the Brain Tumor Center at Duke. And that's been a terrific ride to say the least. It was lots of energy, lots of discovery, lots of interaction with patients. It was really multifaceted. I'm very proud of that. In 1976 [sic; correct year is 1996], I became chief of neurosurgery myself and soon after became the Guy Odom distinguished professor of neurosurgery at Duke. I continued with the Brain Tumor Center which I- which I still do. I stepped down five years ago as chief of neurosurgery, once I secured us becoming a department. That's when we transitioned to the Department of Neurosurgery. Along the way, though, picked up a number of other projects, mostly in the way of education. So I work with women athletes at Duke who are interested in medicine with our CAPE [Collegiate Athlete Pre-medical Experience] program and that's been very prominent. And I working with the medical students probably for the last 15 years on Brain School, where we meet every other Tuesday afternoon and discuss advances in neuroscience, which could be applicable to therapies for patients suffering neurosurgical diseases. I think that brings me to where I am now.

SR [00:05:06] Wow, very awesome resumé. And so let's go back a little bit, and when did you first meet Dr. Sabiston?

AF [00:05:15] I first met Dr. Sabiston in December of 1973. Back in the day, there was no match for neurosurgery. And so basically, my advisor in medical school wrote to the 10 department chairmen of neurosurgery in Canada, and asked, where's the best places to go? Duke was number one on the list. I had probably seven interviews in one week. And in December, I remember coming to Durham. Durham was very different than it is now. I walked off the airplane onto the tarmac, picked up my suitcase off the tarmac, walked into the terminal, and caught a cab to come to Durham. The next day, I interviewed in the morning but had lunch with seven other applicants and Dr. Sabiston. That was my first meeting.

SR [00:06:16] And what was that lunch like?

AF [00:06:20] It was intimidating. I was the guy in my polyester suit from the Midwest, and in walked a fellow that you could tell the whole demeanor of the room changed when he walked in. He just commanded the room.

SR [00:06:35] Do you remember the first thing he said to you, or you said to him?

AF [00:06:39] I don't.

SR [00:06:41] So you got the internship, the interview was successful. And what was it like being an intern in surgery at Duke?

AF [00:06:51] It was transformative, is the only word I can say. So I, I don't think I'd ever been to a place that was so structured and had such high ideals. And that was a thing that was most striking to me. Dr. Sabiston was a role model. He was someone to not imitate, but more emulate. He seemed to have a very focused vision and really affected me. And I guess later in the interview, we'll talk about how that relationship evolved over time.

SR [00:07:36] Yes. So how do you think Dr. Sabiston put his personal stamp on the program?

AF [00:07:44] Well Dr. Sabiston wasn't a guy who let things slide. He set up a program with certain expectations and certain ideals and if you didn't meet those ideals, he didn't turn and head the other way. He just let you know.

SR [00:08:04] And how did Dr. Sabiston work on bringing in people of color and women into the program?

AF [00:08:13] Well, my year was the first year that there was a female intern. Her name at the time was Isabelle Fader (sp?) Since she is married, she- her name is Isabelle Richmond at the present time. She also was interested in neurosurgery. So in those days it was a pyramid program. But Isabelle was the first woman in the program. My wife, Elizabeth Bullitt, is the first woman to finish any of the surgical residencies at Duke. She graduated neurosurgery the year after I did. Dr. Sabiston just never showed any prejudices. I don't think that he took on people of color as if they were special and so forth and so on. He took on people who are very competent and if they happened to be women or if they happened to be people of color, so be it. I think that was really sort of striking in the day, because many of the older people at Duke, although they were always very accommodating, it was clear that they always drew a line. And with Dr. Sabison, I just never had that feeling.

SR [00:09:34] And how did Dr. Sabiston- excuse me, how did Dr. Sabiston's national reputation affect the program here?

AF [00:09:44] Well, obviously it affected in a very positive way, because he was able to attract the best of colleagues. He was able to attract the best of house staff. He was able to bring very prominent people to come and to speak at the university. And he was- it's interesting, he was always so attentive to details. Whenever one of these people would come- oh, well, let's start that again. So whenever one of these internationally famous people would come, it wasn't sort of a loose, that they come give a talk and then just

kind of hang out with people, I mean, every detail was taken care of. You know, there was a time schedule set. There was times for discussion. There were times for lectures, there were time for presentation. Again, he really served to me as a role model as to how one should do these sort of things.

SR [00:10:42] And how did Dr. Sabiston influence your research experience?

AF [00:10:47] Well, Dr. Sabiston was always very big on research. I was very fortunate in that the neurosurgical program had time set aside for research, and I believe back in the day most all the programs did. I ended up working in a laboratory with a fellow by name of Jim Davis, who was a neurologist, but we were kind of a satellite program for a guy by the name of Robert Lefler- excuse me, Lefkowitz, Robert Lefkowitz. And Duke was very nurturing. So I met with Dr. Lefkowitz once a week, and I met with a fellow by name of Irwin Fridovich, who was a biochemist who described superoxide dismustase, once every other week. Now these were pretty prominent people, yet they always made time to go over my research with me. Dr. Sabiston supported that tremendously. And when I came on the faculty, I had an opportunity to go and study in Switzerland. And I went to Dr. Sabiston and I said, well, you know if I'm going to leave, I'm going to get a gap in my practice and so forth, and he said, that's nothing. You know, go. And he was very supportive of that. When I went to work with Dr. Drake, he was very supportive.

SR [00:12:10] And how did your interactions with Dr. Sabiston change and evolve as you progressed through your residency?

AF [00:12:18] Well, it's sort of interesting you ask that. So obviously, when I was a resident, from what I've told you Dr. Sabiston was the chief, and there was probably three hundred miles between myself and him, as far as having substantive conversations of- as equals, was concerned. When I joined the staff, his office was next to mine and we were the only two people on the hall. And as my practice grew and as my visability grew, it wasn't uncommon for him to come over to my office and sit down and discuss things. And as he got older, the discussions came more freely. When he talked about his philosophies and also just his methods of how he got stuff done, I remember him telling me about the three paragraph letter, that had a standard beginning, a standard end, and the personal part in the middle. And this way he was able to recognize a number of people in the work they did in a relatively short period of time, because all he had to do was fill in the middle of letter. When he got time for retirement, it was almost a little bit sad, because his office was a real treasure trove. But I remember there was a dumpster in the hall, and I was pilfering through these papers that his colleagues had sent him. And he kind of walked by and asked what I was doing. And I remember in particular there was a paper sent to him by a Dr. Francis Moore. Dr. Moore was very interested in metabolism and surgery and was very prominent. He was a chairman of surgery at the Brigham Hospital up in Boston. And I was, I thought this was just terrific because as a medical student I was very interested in this sort of thing. And he just, he picked up the paper and he looked kind of wistful and then just kind of threw it in the trash as if he was moving on. I found that to be a very poignant moment. And then Dr. Sabiston and I always had a good relationship. I mean, he came by the time when I got offers to become chief at other institutions and would talk to me about it and whatnot, and helped me advance my career at Duke. And then he had a stroke. And I was asked to go in and be one of his physicians. So now all of a sudden things were a little bit different as far as the relationship was concerned. But I think Dr. Sabiston just had a tremendous effect on me. First of all, as a mentor. And then finally, actually as a friend. I think he's had a tremendous impact on my, not just my career, but on my thinking about the world.

SR [00:15:28] And did you interact much with Mrs. Sabiston?

AF [00:15:31] Well, I still do. We still exchange Christmas gifts. So she was a very warm person. Clearly the power behind the throne, no question about it. But very nice and very nurturing. And then when she had a grandchild who had some neurosurgery—I mean nothing malignant, nothing bad—I had interactions with that. But especially then when Dr. Sabiston was sick, we had more and more interactions. So the simple answer to your question is yes, I've interacted with her. As you know, she's still a force around the medical center. She still brings her friends over here where they have medical needs and whatnot. I probably haven't seen her in about a year, although I did receive a nice card from her and a box of cookies at Christmas, and she's still a force around the medical center.

SR [00:16:29] And do you have any particularly good Dr. Sabiston stories?

AF [00:16:33] Yeah, I- you know, I thought about that and I probably don't. I'm sure with the colleagues that you're going to talk to, you'll have plenty of Sabiston stories. I'd rather just leave it at more as an overview than any particular. Obviously, I have specific memories, but they're relatively personal and I don't think that they add anything to what I've told you so far.

SR [00:16:57] And is there anything else we should know about Dr. Sabiston, or is there anything I didn't ask you that you want to make sure you talk about?

AF [00:17:06] Well, I think you were very thorough, so I don't. And I appreciate that, and quite frankly, I appreciate the opportunity to give my remembrances to Dr. Sabiston and I hope that somehow that helps you with your project.

SR [00:17:20] Well, thank you so much for your time, and I appreciate it.