

OREGON HEALTH SCIENCES UNIVERSITY HISTORY PROGRAM

ORAL HISTORY PROJECT

INTERVIEW

WITH

Clarence V. Hodges, M.D.

Interview conducted November 22, 1999

by

Sarah Porter, Ph.D.

SUMMARY

The interview begins with Dr. Clarence V. Hodges discussing his early life and education. He was born in South Dakota, and graduated from high school at the age of fifteen. He began in engineering at Iowa State, but quickly changed to premedics. He went on to the University of Chicago Medical School, his father's alma mater. After his internship, he went directly into the military, serving as a flight surgeon with the Army's 8th Air Force.

Dr. Hodges became involved with urology when he went to work with Dr. Charles B. Huggins at the University of Chicago. Huggins won the Nobel Prize for Medicine in 1966, for work on prostate cancer that was conducted in his laboratory during Hodges' time there. Hodges shares his memories of Huggins.

In 1948, Dr. William Livingston invited Hodges to join the UOMS faculty as an assistant professor of urology; within a year, Hodges had been appointed chair of the Division of Urology. While at UOMS, Dr. Hodges participated in the first kidney transplant, on Oct. 9, 1959. He talks about that surgery and about the transplant recipient, Charlene Hamilton.

During his time in Oregon, Hodges also served as the physician to Oregon Governor Tom McCall, who underwent surgery for prostate cancer. Sadly, McCall passed away in 1983, largely because he put off recommended treatments. Dr. Hodges worked closely with physicians in private practices, and he comments on the town-gown relationships during his stay in Portland.

After leaving UOMS, Hodges moved to Hawaii where he became the chair of the Division of Urology at the John A. Burns School of Medicine at the University of Hawaii. He also practiced at Tripler Army Medical Center and at the Straub Clinic. He discusses his experiences at those medical institutions, and talks about life in Hawaii generally.

Dr. Hodges served on NIH funding committees, attended national and international conferences, and conducted groundbreaking research of his own. He talks about research funding and the medical community. In conclusion, he looks back on a medical career filled with fellowship and collegiality.

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Interview with Clarence V. Hodges, M.D.
Interviewed by Sarah Porter, Ph.D.
November 22, 1999
Site: Doubletree Hotel, Portland, Oregon
Begin Tape 1, Side 1

[Editor's note: Dr. Hodges returned to OHSU in 1999 to attend a ceremony in his honor, at which he was named Professor Emeritus. Viki Hodges, Dr. Clarence Hodge's wife, was also present at the oral history interview.]

PORTER: This is the interview with Dr. Clarence Hodges, on November 22, 1999, and I am Sarah Porter.

How nice that you're able to come back and present; and what a nice reflection.

HODGES: It's just been great. People whom I knew forty years ago, or longer. My home was in South Dakota, so I was not too far away from here, in an entirely different area, and high hills with terribly cold winters. I was reared in the Mile High City, and went to school there.

PORTER: In South Dakota?

HODGES: In South Dakota.

PORTER: So how did you find your way to Portland?

HODGES: Well, it was somewhat round about. I was intending to go into engineering, and my brother had gone to Iowa State for agriculture, and I thought engineering would be good at Iowa State, and so I went to Iowa State. But after one quarter of engineering I decided to go into medicine. My father was a doctor. After going to high school in Lead, South Dakota, I went to Iowa State and was accepted in engineering, and then I was allowed to transfer to medicine, premedic, when I changed my mind.

PORTER: Do you remember what led you to change your mind?

HODGES: Yes. I saw the seniors who were just then being interviewed by people from various businesses, and they were principally looking for draftsmen. And after a quarter of engineering problems, I decided I didn't want to do that all my life, so when I went in and told my counselor that I was changing to medicine—and my grades were good, so there wasn't a reason that I had, except that I wanted to. So that was effectuated and everything was squared away. So I spent three years, then, in premedic at Iowa State and then went to the University of Chicago, where I put in four years of medicine.

PORTER: So what year was it when you entered medical school?

HODGES: Nineteen thirty-nine.

PORTER: So you were going to school in the middle of the Depression.

HODGES: I'll say it was. And times were really tough.

PORTER: Did you work?

HODGES: I worked for the mining company. The Homestake Mine was at that time the biggest low-grade gold producer in the United States—probably in the world. I worked for them in the summertime and vacations. I could only work in the surface workings at that time because I was just a kid. But as I grew up and grew older—I graduated at fifteen from high school—and then they took me on as a surface worker in the electrical department, and I worked there until I graduated at sixteen, and I worked there during the summertime. They would give me a job whenever I came back, which was hard to find otherwise in those times. This was 1931.

So then I entered the Institute of the University of Chicago at eighteen. I had worked two years after graduation from high school and then started at Iowa State in premed, and so I was there two more years in premed and then entered the University of Chicago for medical school.

PORTER: So were you a little bit younger than your classmates?

HODGES: Yes, I was. I was three years younger than they.

PORTER: So you went through school pretty fast. You were pretty bright.

HODGES: I made the first three years in two years.

PORTER: And University of Chicago is a very outstanding university.

HODGES: Yes.

PORTER: Did you apply to others as well, or was that definitely the one you wanted to go to?

HODGES: Well, yes, I applied to the University of South Dakota and was accepted, but they pigeonholed my request, and on the night before I was leaving for Chicago the dean from South Dakota called me and said they had lost my application and they were very, very sorry, and if I would come, they would accept me—I had graduated valedictorian, and so they had decided they would take me in Chicago, but I was leaving, then, in the morning for

Chicago.

PORTER: So you were happy with your choice.

HODGES: Oh, I was. My father had gone there before me and was a doctor who practiced in my hometown. So I started at Chicago and was there for the next four years.

PORTER: So that brought you into the beginning of the war, actually.

HODGES: Yes, it did. From my internship I went directly into the armed services. I was assigned to the Army, and then I had an opportunity to go to Randolph Field to become a flight surgeon, and did that at Randolph Field and Kelly Field.

PORTER: And those are located?

HODGES: Both are in San Antonio, Texas.

PORTER: And part of your flight school—in the Navy they make the flight surgeons learn how to fly. Did you learn how to fly?

HODGES: They weren't doing that anymore. I did learn how to fly, but it was only just through flying with different people when they were going up to ground time a plane, or maybe we had to go somewhere to pick up something, and so I started getting flying time right away. I earned my wings and was a flight surgeon by about the following September of 1942.

PORTER: Right in the thick of the war.

HODGES: Yes. We drove—I was married by then. I bought a car in San Antonio and drove to Idaho, where my group to be, a heavy bomber group of B-17s, was stationed in Pocatello, Idaho. We wintered there and then moved to Pyote, Texas, preliminary to going to England to be part of the 8th Air Force. I was by then attached to the 96th Bomb Group, heavy.

PORTER: And was the 8th—was it the 8th Airborne, is that what it was called?

HODGES: Eighth Air Force.

PORTER: Was that part of the gearing up to land in Normandy?

HODGES: Yes, it was, but before that it was the tactical bombing that we did over all Germany, France, all occupied France, even Russia, Italy, and some of the ships landing in North Africa; and shuttle bombing we did of the places like air bases in Germany, factories of different kinds of war materiel, and bombing as far north as Scandinavia and into France, into

Germany, as far as Russia. I went to Russia once, and from there to Italy, and from there back to England. But we had three air bases in Russia that were used for shuttle bombing.

PORTER: And did you fly with the troops?

HODGES: I flew in thirteen missions. We didn't have to go on any missions, but there were some. The shuttle bomb missions we would go under orders, but otherwise we were encouraged to go to learn about what was called combat flying and what happened, who got shot, and how to escape from a downed ship, how to make your way out of the enemy country. You had certain things that you carried with you, explanations of the—whatever the company might be; learned some Russian. But I went on thirteen voluntary missions, for which I got the air medal.

PORTER: I can imagine.

V. HODGES: It helped with the morale of the men.

PORTER: Yeah, it really would help with the morale of the men.

HODGES: You got a new crew, and they were finding out that there were empty bunks in the quarters that day. The occupants hadn't returned from the mission. So that was exciting. The war went along, and preparations were being made for the landings, and we were there over the land; you couldn't see a thing. The undercast was so bad that you peered out the window and couldn't see a thing. And we never bombed the right beach that we were supposed to, and, of course, that was the bad thing about the landing. So I went through the war.

PORTER: You went through the war. You just have a lot of courage, sort of fearlessness.

HODGES: Well, it was one of those things where, you know, you were there to do it, to get it done. And anything that would make it go faster, they were happy about.

PORTER: So was there anything during the war that led you to finally settle on urology? How did that happen?

HODGES: Well, actually, before the war I was ready to graduate, and I had a person that was my idol, one of the surgeons there, who asked me if I'd like to work in his research lab. And you took—there was some time that you spent on your own. You could either go various places, visit other schools, you could work with someone—and I was assigned with Dr. Charles Huggins—or you could visit from place to place. Since this man whom I admired wanted me to work in his lab, I spent an extra period of time working for Dr. Charles Huggins, who got the Nobel Prize in 1966 for some work that I did in his lab. He got the prize, and I got some wonderful experience.

Then I started my internship at the University of Chicago in surgery, and finished that, and I decided to become a urologist, which is a person who works with kidneys and bladders and adrenals. And now we're transplanting kidneys and—actually, I'm here now to talk about a kidney that we transplanted forty years ago here in the local hospital.

PORTER: That was the first kidney transplant?

HODGES: It was.

PORTER: Forty years ago was 1959.

HODGES: We had done transplants in the lab here, and I had gone, as part of my urology training, to Johns Hopkins and spent a year in that system. Then, part of my time I spent with Dr. Huggins working particularly on cancer of the prostate. He received the Nobel Prize in 1966 for work that we did there.

PORTER: And so if it hadn't been for some of your work, he might not have been able to get that prize, I understand.

HODGES: That's right.

PORTER: So that was really important work, and when you were in the military you got a lot of extra surgical experience, I would think.

HODGES: Well, it wasn't so great, really, because so much of our work was just treating casualty wounds, and not only Americans, but Germans as well. I was sent over to Paris three months before the invasion. I was working in Paris at the American Hospital—principally on war wounds.

PORTER: In 1963, '63-64, I was working as a new nurse on 10-A at University Hospital.

HODGES: Where?

PORTER: Ten-A.

HODGES: What hospital?

PORTER: The University Hospital here.

HODGES: Yes.

PORTER: And that was the surgical urology unit. One of your residents, Dr. Giesy?

HODGES: Yes, Jerry Giesy.

PORTER: Jerry Giesy, right. He was a resident at that time. And we did have a patient who had received a kidney transplant. I believe it was a baboon kidney.

HODGES: Yes. We did that.

PORTER: Yes. I took care of one of your patients.

HODGES: That poor baboon didn't survive.

PORTER: No, didn't survive. I was there when she died.

HODGES: We didn't know what we were doing, really.

PORTER: But that was the nature of the hospital, though, kind of the leading edge of medical care in the state. In order to get the cortisone to suppress the rejection response I had to go to the supervisor, and she unlocked it. She would unlock it and bring it to the unit so we could give the medication.

HODGES: Who was the supervisor?

PORTER: I don't remember her name. I think the head nurse was Sutton.

HODGES: I was just trying to place myself with that hospital in mind.

When I finished my residency, I was going to live in Baltimore. We bought a house. Then I got a phone call, and Dr. Huggins had received a phone call from one of the doctors here, Dr. Tyrell Glen McDougall. He was a urologist here in town. But they had called Dr. Huggins to ask his recommendation for someone to come and head the newly formed Division of Urology here. Dr. William Livingston was Chief of Surgery.

My wife, Jonney Pha, had visited in Portland during the war—she was married to another person at that time—and she had always said if she had the chance to live anywhere, if she had a choice, it would be Portland, Oregon. I thought, well, I'd better have a look. I came out here just before the big flood.

PORTER: Oh, yes, the Vanport flood.

HODGES: Yes. My flight was the last one out. I spent two days here. I talked with Dr. Livingston and went up to Mount Hood and looked around, and I thought, boy, this would be a pretty nice place to live and to practice. So I went back and talked to my wife, and we agreed that we'd like to live here, and so I phoned back, "Yes, I would like to come."

PORTER: Wonderful. And did the nature of the job also look attractive?

HODGES: Yes, it did. I went to work in the hospital and was immediately made Chief of Urology. I got into some real good surgery right away. And I also met one of the town surgeons, Dr. Oliver M. Nisbet, who had also gone to the University of Chicago, and met other doctors from the Swedish Hospital. The woman who's married to the president of the University, Dr. Peter Kohler, whose grandfather was head of pathology at Emanuel Hospital: he asked me if I wouldn't like to apply for membership to do my private practice, which was really not encouraged by Dr. Livingston. He said, "I just want to pay my faculty members enough so they won't starve and they won't take any private patients." And, boy, I didn't want that, because I did want to do private cases, as now all of the faculty do. But I was the one who led the group who went to the Dean and said, "We would like some freedom," as everyone did elsewhere in the country at places like this. So as time went on, they brought in Al Starr and other people from various places, Harold Paxton from one of the Eastern universities. I met him one time.

Anyway, we went through various phases there and ended up by all of the faculty going into a faculty-practice plan; and I was there for I don't know how long under that plan until I decided to stay with the University and entered a lifelong practice with the University. I practiced at the hospital here until 1979.

PORTER: It would have been just about the time that I came here.

HODGES: I came over here in 1948. I came here and started working for the state in '48. I then finished with that University to join the new staff in Honolulu, when that medical school opened up, as Chief of Urology.

PORTER: Yes, I remember that: John Burns medical school.

HODGES: Yes. And I stayed with them for three years, and then I had been practicing with one of the local urologists in Honolulu.

PORTER: That wouldn't be Dr. Walter Strode, would it?

HODGES: Well, it wasn't Dr. Strode. He's with the...

PORTER: Straub Clinic.

HODGES: The Straub Clinic. I also went with the Straub Clinic for a while, but I was also making a trip every other week to the Big Island and operating there and was still operating at Tripler Army Medical Center and also occasionally at Straub. But it became obvious that I was getting too spread out, and so I quit Straub, quit the school, having served there three years, and then finally just started practicing on the Big Island.

PORTER: So you practiced on the Big Island. What a wonderful gift for the Big Island.

HODGES: Oh, what a big gift the Big Island was. I was the only urologist there, and we were just so busy and made such wonderful friends, and I just enjoyed it terrifically.

PORTER: I didn't realize that you had practiced there.

So how old were you when you retired?

HODGES: Sixty-seven.

PORTER: Yes. I was going to say, you have retired, but...

HODGES: I retired three times: once from the hospital here, once from my Big Island practice, once from Oregon State, where I served at the hospital. And by that time I was going to quit, but I really worked about seven years more on the Big Island just because I enjoyed it so.

PORTER: It's a wonderful place. Working there was a major highlight. Yes, it would be a wonderful, warm place.

Well, when you were a faculty here and you were doing your research, I think one of the areas that, certainly, the project is interested in is—how did you go about doing your research here? And sometimes funding is kind of difficult for research. You know, unless you're right at NIH, I think it's harder, especially out in the West.

HODGES: Two things. One, I was a member of the NIH council that studied the research grants, and that helped not all that much, but I became aware of where the money was going and how you went about it. Then I was asked to join a group of research people at various places like this, and more along the Eastern Coast and Midwest, but people who were interested in research and funding.

I was on the council that would determine how much money people should get, and in the course of that I became part of several cooperative groups from universities throughout the country studying, first, prostatic cancer and then bladder cancer and one other study that I don't even remember what we did. But they were picked up with the people who were listed as principal investigators, and they, to quite an extent, picked the group all over the country that wanted to do studies with them. We would meet maybe twice a year in various places, New York quite a bit but other places as well, and we learned what was going on everywhere else.

And then I served on the residency review committee for urology, and there I learned a great deal about what people were doing. About that time I was principally in Portland, and, with others who joined my research group, we joined various cooperative groups and ran studies on bladder cancer and some other cancers in urology. We weren't able to gain very much by our studies, but it was worth a try. And as time went on, finally I came along and then I finished the studies within Portland and then I was going to retire.

I got my trouble with my pancreas, and so I developed the trouble that I have, now, which is diabetes; and then I had a stroke, a big stroke. Big enough that we had to hire Viki to be my care person, and she—bless her sweet heart, she came and lived with me. I really needed help.

PORTER: And it looks like you got very good help. You are really recovered quite well.

V. HODGES: He's done a remarkable job. The trip to Portland especially has been such a great experience for him. A definite highlight of his life.

PORTER: Good. It's good to make all those connections again. It stimulates the brain and the heart.

HODGES: Well, I belong to some national groups, even one international.

PORTER: Well, I was going to ask you about—in terms of doing research, I think at the level that you do research, you must have that national connection with your colleagues in order to keep on top of the latest developments. But did you work with the international community as well? Were you able to find out what others were doing?

HODGES: Well, they would meet once every three years. They present papers that are not as good as what you would see, say, if you went to UCLA and did a fellowship there or met there. I belonged to one group that had twelve groups, and really all of the top-flight schools in the country were represented there. So although it took quite a bit of time, I really went to a lot of meetings.

PORTER: But it sounded like it was really important for you.

HODGES: It was the best way you could pick up what was going on around the world, certainly around the country.

PORTER: And also at that time you were Governor McCall's surgeon, I notice in my notes.

HODGES: Yes. I took out his prostate. But, you know, he was ten months late in allowing me to do it, and he went during that time from what was definitely operable to one

that was questionable and that surgery was no good.

PORTER: Just in that short amount of time.

HODGES: But he was ten months when he was trying to get the sales tax in, and, as you know, it didn't pass.

PORTER: He paid for it.

HODGES: Yes, he really paid for it with his life. And there was no arguing with him. You know, he was a pretty determined man, and he said, "I've got to work on this sales tax and then I'll come in to the hospital." And he did, and that was a bad thing.

I should tell you about a funny thing that happened when I was taking care of Tom. I had done his surgery, and it was two weeks later, and he was getting along well. I thought it was time for a vacation. We had a cabin on floats on Lake Tahkenitch. Do you know where that is?

PORTER: Is that in California?

HODGES: No, it's in Oregon.

PORTER: Oh, goodness, I don't know.

HODGES: It's in southern Oregon beach country. You had to have a boat to reach this cabin that was on logs. My wife and I went down, leaving the Governor to be discharged, I think the next day.

To get to the cabin you had to go by boat across the lake over to where a train came in. People like Bing Crosby and others used to take the train. Some had a fare that they would be put off at this other end of the lake, and they could fish there. Wonderful fishing for trout, particularly. And then I would go, take my boat across the lake, and we would stay there and fish.

At the place where the manager lived, if somebody wanted you—we didn't have a phone or anything, but you could go out every morning and look for the manager. If he came out on the beach and waved his hat, that meant something had come up and I had to go back and telephone the school. So that happened, and I went across in the boat. The University Hospital, where the Governor was just about to be discharged, was shaken by them finding a bomb in an unused women's toilet a floor below the Governor's room, with five sticks of dynamite in it.

PORTER: My word!

HODGES: Yes. Well, that shook him up. So they quickly moved him to another hospital here in town, but that wasn't enough security, so they moved him to Salem, and there he went in as Mr. Adams. That was the message that this man was giving me, and the police were going to fly down and pick me up. Well, I told them I had my car there and I might as well drive in to Salem, which I did, and my wife with me, and stopped at the hospital there where he was—he was about fit to be tied. He was really—he was saying, “I run the state army and navy”—I guess there wasn't any navy, but he said, “I guess I can get myself out of here.”

I examined him, and he had developed an infection, and so I said, “Well, we'd better do another operation in the morning. This will be a simple one. We're just going to remove one of his testicles, which is infected.” And so the next morning I drove back down and, as they said, from now on he'll be known as “one ball McCall” [laughter].

He could be discharged the day after that. So he went to his vacation place. Anyway, that was one... [laughter].

He survived for two or three years, and then he had a massive regrowth of the prostate cancer.

By then, I was in Hawaii, and I came back and saw him once, but there wasn't anything to be done then but complete the removal of his other testicle, and that—we had shown in another research study that by removing the testes and giving Premarin or some other female hormone that you could diminish the stimulation of these cancerous growths by quite a bit. But there was really nothing more that could be done to cure his cancer.

Following that, I developed my diabetes and had a big stroke. Since then I've just been really living in care homes, which is just principally just live with the routine. Try to exercise as much as one could to get control of the problem with the blood and the sugar, and that's what's been happening.

PORTER: That sort of really occupies your time. Rehabilitation is very time consuming.

HODGES: We went to the gym twice a week for weights and stationary bikes.

[End of Tape 1, Side 1/Begin Tape 1, Side 2]

HODGES: I'm still supported by the state of Oregon on my original contract.

PORTER: The PERS system.

HODGES: As member of the higher education system.

PORTER: Yes, it's a very good retirement system.

Well, your memory is certainly better than mine. You have a wonderful recall of names and of the sequence of events.

HODGES: Well, you just heard my life.

PORTER: Well, it's quite remarkable. The kidney—I was just interested in the kidney transplant, the first one that you did: were you able to follow that person's life after the transplant?

HODGES: Not too well. It was this girl who was here, Charlene Hamilton. I would hear—of course, as long as I was in the area and working in the hospital I would hear from her and they would come in, her mother would bring her in. When I moved to Hawaii after I finished work at the Oregon State Hospital I didn't have such close recall. But the people who were here would generally send me a report, so I've been able to follow Charlene's course quite well.

PORTER: Is she still alive?

HODGES: She was here; she was here the other night.

PORTER: Oh, how wonderful. And she was happy to see you?

HODGES: She was so happy, she gave a little talk and told how she got along. She's, of course, fifty-two, and she has one child and one grandchild, and she's gotten along great. And her sister, who gave the kidney, has done equally well. She's just a bundle of joy every time we see her.

PORTER: And that's a good situation, isn't it, with the twin sister, because she got the closest match that you can have.

HODGES: It was ideal. She had skin graft exchange, or a study of her various tissue types and comparisons with her mother and her father as far as her tissue types went. The two twins were just as identical as peas in a pod.

PORTER: And, then, you also got an award for your film, "Removal of Adrenocortical Carcinoma"?

HODGES: Yes. That was an adrenal tumor. And then I went to the Mayo Clinic and made a film there with Ormond Culp, who was the Chief of Urology there, and that was circulated around.

PORTER: So that was used as a training film?

HODGES: Yes.

PORTER: So, let's see. It sounds like your life here in Portland was extremely full.

HODGES: It was.

PORTER: Because you were also teaching residents.

HODGES: Yes.

PORTER: And being administrator.

HODGES: I had residents, and then I used to go out and help some of the local urologists who didn't have someone who would come over and help them.

PORTER: So you would go to some of the smaller towns in Oregon?

HODGES: Yes.

PORTER: And you were a farmer?

HODGES: Yes. I lived on a farm and had horses and cattle.

PORTER: How did you manage to keep on top of all of this?

HODGES: [laughing] Well, sometimes it was tough.

But mostly all of the hospitals were good, they were hospitable, and we urologists had local meetings. It was just kind of an all-time good place, good thing.

PORTER: And, as I recall, all the urologists that I've known have had a really good sense of humor. It just seemed kind of characteristic.

HODGES: Well, you see, most of them trained under me at the local hospital, like Giesy and Bob Moore—we just saw him. And the third one. Giesy, Moore, and Ted Lehman.

Oh, and Don Beardsley. I did so much surgery with Don Beardsley, who worked in Salem, but he would come up to the hospital in Portland, Emanuel, every Thursday, and he would bring his patients, and we would do their surgery, even, in one case, from eight o'clock one morning to eight o'clock the next morning, because everyone was willing. The hospitals didn't complain and the nurses didn't complain. The other local urologists complained, particularly those whom I had trained who went out and started practice and said, "Oh, you oughtn't be practicing anymore. You ought to be leaving us to your practice"

[laughter].

PORTER: [laughing] A little competition was probably good for them.

HODGES: Yes.

PORTER: So sometime during the seventies you were here. Did you start to have women come into urology as residents?

HODGES: I never had a woman resident. It was just they didn't apply, not for any reason that I had. I would have been just as willing to take women. And I know at UCLA, where I had many friends, they had some excellent women there.

PORTER: Women surgeons?

HODGES: Yes. I used to visit them frequently, and I would tell them I was happy to come back to Baja, Oregon [laughter].

You know, the city plans for San Francisco were stored in the City Hall at a place quite near where I finally practiced in Portland that was called Oregon City. That was the central point then of what was the San Francisco Territory, later California. I used to tell them at UCLA that we really were at the very first part of UCLA.

PORTER: And they probably appreciated that.

HODGES: [laughing] Oh, they loved being told that. They would hiss and stomp their feet. We were great friends.

PORTER: Well, speaking of space, I know one of the things on the Hill is that there has always been a crunch for space. Did you have problems with getting laboratory space?

HODGES: Yes. We never got real good laboratory space. We had some cages someplace in the hospital, but we didn't have real good animal surgeries and places to keep animals, like transplants that we wanted to watch for a while. We did transplants in dogs. In fact, there was a group that came over from Tripler, and we used to do kidney transplants on dogs here.

PORTER: So it was just kind of a continual battle to get the space.

HODGES: Yes. Space, like parking area, is pretty tough to get.

PORTER: But in spite of all that you still managed to come out with some really excellent research.

HODGES: We did some good stuff.

PORTER: And then you also went through the period when research tightened up, as far as human subjects' protection, and you went through that transition as well.

HODGES: We went through that, yes.

PORTER: Because I remember in the sixties, Dr. Stanley Jacob would walk around and put DMSO on people and just do it without...

HODGES: I think each faculty member had a jar of DMSO in his home that he used to put on burns and stuff like that.

PORTER: It seemed to work pretty well?

HODGES: Yes. Stanley was such an enthusiast that he was just starry-eyed all the time.

PORTER: Yes, he was.

HODGES: Did he leave?

PORTER: He's still here.

HODGES: Is he still here?

PORTER: He's still here. He has an office in the basement passageway in the bottom of Baird Hall, and I think it's close to where the bookstore is and probably the area where maybe the book storage space used to be, right near where the old morgue was, which then became the nursing student lounge [laughter].

Yes, so he still has an office, he's still seeing clients.

HODGES: Well, that's so interesting.

You know, when Dr. Dunphy came here, Stanley and Bill—the other surgical resident who finished his residency under Dunphy here and then was on the staff, is he here still?

PORTER: Dr. Dunphy?

HODGES: No, Bill Fletcher.

PORTER: Oh, Fletcher. I think so; I think he is. I think he's quite well known for doing cancer surgery in women, breast cancer.

HODGES: Yes. He owns some property near where I used to own some property in Hawaii. He used to call me occasionally to find out if he'd make any money if he sold his lots. Generally, at that time they were priced very low and not making money on them. But it wasn't hard to give him information. He had some pretty good looking lots. I don't live in that same area anymore.

PORTER: Well property values—I don't know what they are right now. They had certainly dropped.

HODGES: They went way down about in '87.

PORTER: Now it's going up?

HODGES: Lots around where we live now really went up more this year I think than a couple of years ago, when they were \$45,000 a lot; now it's \$95,000.

PORTER: That's quite a jump.

Well, maybe I should just ask you generally what else would you like to talk about in terms of your time up in Portland?

HODGES: I think the best thing that's happened in research is the—well, of course, the NIH was fantastic, but the meetings that they've sponsored have been very good, and the fellows that they've looked for I think have gotten very good training. Some of them have just done outstanding work. I think that's all been to the great good of research.

PORTER: Did any of your work contribute to the development of the PSA test for prostate cancer?

HODGES: No. That was separate—I don't remember who did that. When it first came out I was just amazed. But I did get it put in here and also in Hawaii. That's certainly proven a wonderful screening agent.

PORTER: That's wonderful.

HODGES: When I was a senior student, the senior students could spend a length of time within some faculty member's research office or research setup at the University of Chicago. Chicago is sort of unique in that none of the men were allowed private patients. Well, they saw private patients, but all the revenue went to the University. That's changed now, and they actively solicit private practice for the University members, but at the time I went to study in Dr. Huggins' laboratory it was all strictly within the walls. And you had to get your own funding, usually, but Dr. Huggins was probably more geared to that than many, or even most of the faculty members.

But Dr. Huggins had been at Michigan, where he learned surgery. He didn't know any urology when he came to Chicago to be the chief of urology. They ordered their surgical tools, like the Bovie and such stuff, and they learned overnight and started the next day. But they did send Huggins to Germany and to London to study under known innovators there, and Dr. Huggins learned German, and I guess he learned English; he had tea every afternoon, and we kind of enjoyed that.

You know, I misquoted that motto when I spoke the other night. He had this sign, it was above his desk in his office: "Discovery is our business." He wanted to know something new.

PORTER: That was his motto.

HODGES: I worked with him on his biggest study, which was on prostatic cancer. And I think I said the other night that I went back to visit him one time, and he asked his secretary to get out his gold medal and let me hold it. I said, "Oh, this is really wonderful." And he said, "Well, if I was a good sport, I'd give that to you, but," he said, "I'm not a good sport" [laughter].

PORTER: But to get the acknowledgment and dedication.

HODGES: A great part of my life. It was just wonderful.

PORTER: Well, it's nice you can reap the appreciation and the gratitude and to see that.

HODGES: Well, that was a high point of being here the other night. It was just great. A thing, as they say, to warm your hands in your old age.

PORTER: Yes.

Well, is there anything else that you can think of? There's probably tons.

HODGES: Oh, just the great fellow-hood in medicine. What people want to do for patients I think is just—it makes it wonderful to be in it. And when you get together with people like around here, seeing those whom you've known for years and remembering when, it's just great.

PORTER: Forty-five years and you connect right away, probably, from those early days.

HODGES: Yes. Like I never left.

PORTER: Like you never left, right.

HODGES: And seeing Bob Moore. Bob and his wife, and my wife and I, and Dr. Kammer—he's an endocrinologist—we went fishing up in Canada, and I can still remember Marian, Bob's wife—he's a resident, Ted—he and Bob practiced together here in town, and Giesy. I remember them in another boat, and we were all fishing for trout and having such a wonderful time, up about three hundred miles north in British Columbia.

The fellow-hood, the scope that went with that, was just great. And parties, too. Wonderful parties, and the fellowship. I think that was just great. We knew everybody's family, everybody's kids, all their minor problems and triumphs. It was all part of the family. Wonderful.

Well, that's about all I can think of.

PORTER: Okay. Well, I think that's considerable. It's really wonderful to have that part of your life, I think, to share with us.

HODGES: Oh, it's been great to have it.

The other part that I guess was very valuable was serving the NIH and the committee that I was on for things such as diabetes, various things within things, like I was on for a lot of the internal medicine, just because I was in urology; and things that were metabolic and different things; particularly how money is gotten within academic medicine, how they do it, how they go about it.

PORTER: There's quite an art to it.

HODGES: Oh, boy. Well, you know, the East Coast, if I ever got my eyes opened, it was to see Harvard and others, like Brigham, and how influential those schools around Harvard are when it comes to gathering money. There was a saying that was repeated meeting after meeting after meeting: Excellence must be rewarded. You could hear that echo through the room as some champion of some group was trying to get more money. But Boston was really powerful. Boy, they knew how to influence.

And it was no surprise to me there in Baltimore, they just had a big fund-gathering job, and the person who steamrolled that was—what's his name? He's an officer at Johns Hopkins now. Well, he was then kind of the central secretary who presented many of the requests for funds, and he would know everything about that request. He would know it better than the person whose job it was to study that up in preparation for the meeting, and, boy, he really—when he had this big program for Johns Hopkins, he just rolled in the millions. Unbelievable. I just admired that man no end, because somebody championing a small school on the West Coast has his problems with a thing like that.

PORTER: You're disconnected from that mainstream. So you had to work extra hard, and you made good contacts.

HODGES: One time I championed supporting a meeting in the south end of Africa. What is that there? It's gold mines, and then there's—they did the first heart transplant there.

PORTER: So not Johannesburg or Cape Town?

HODGES: Cape Town, yes. Well, I wanted to hold a urologic meeting with participants from various schools in the United States. And they could do that readily with diabetes and anything like that, heart disease, that would make it, but they said, when they thought about urologists, "We don't want a bunch of rich surgeons going on a trip just to get drunk" [laughter]. Well, I knew it would happen that way, too, but I thought it would be interesting to see what would happen. Nothing. But it was a great time.

Well—and you were here at this University?

PORTER: Right. I went to nursing school here from '60 to '63, and then I worked for a year after that. I had married a medical student who was actually very inspired by you.

HODGES: Really? What was his name?

PORTER: Larry Severson.

HODGES: That name is familiar.

PORTER: Yes, he was in Scott Goodnight's class.

HODGES: Yes, I remember Scott and his father. And didn't I know his grandfather also? I think so.

PORTER: So he was in that class. He didn't end up going into urology, but he certainly considered it.

HODGES: Good.

PORTER: It was just during those years that I was here. And I think I remember you, actually. Did you make rounds?

HODGES: Yes, I'll say I did. Every night.

PORTER: And I worked evenings and nights on your unit. That's the other reason I was particularly happy to be able to interview you, because I just felt like I had that connection already, right new out of nursing school.

HODGES: Mrs. Parcell, do you remember her? She was the supervisor of the Outpatient Clinic, upstairs, there, in the Outpatient Clinic building.

PORTER: Oh, no, I don't.

HODGES: Mrs. Parcell. Mrs. Scharf, she was chief of nurses in surgery. Dr. Shasky. She used to just badger him. The residents were just one step above the people who would clean out the—whatever low-place person had to be. Florian, for some reason, was particularly badgered by Mrs. Scharf. She just loved—she would take one resident, or maybe one or two. But that fellow had to really toe the line [laughter].

PORTER: That's the real resident training, I guess, is getting past some of the nurses.

HODGES: Yes, I'll say.

Another person on the other side, Miss Clarice Ashworth, she was so good. She was an artist, medical artist, and she would just do marvelous illustrations for you. You didn't pay her, she was paid by the school, I guess through the state.

PORTER: Yes, there was a medical illustration department, I think.

HODGES: And she was just so painstaking. She'd work so hard on the illustrations. Just wonderful.

[End of interview]

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