

Historical Vignette

Development of neurosurgery at the University of Michigan

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✓ The University of Michigan Medical School was founded in 1847, 30 years after the university itself. The first hospital in Ann Arbor was a 20-bed unit converted from a private house, that admitted only charity patients. The second University Hospital was built in 1925. The Section of Neurosurgery was founded by Dr. Max Peet, who was followed by Drs. Kahn and Schneider as section heads.

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THE University of Michigan was founded in 1817 but did not develop its own medical school until 1847. Initially, the medical curriculum was taught in Detroit where students and faculty had access to a hospital and patients. That situation prevailed for a number of years until the first hospital in Ann Arbor was opened. It was a 20-bed unit converted from the home of a faculty professor, and admitted only charity patients for medical student teaching purposes (Fig. 1). The hospital expanded temporarily into a larger residential building until the University Hospital was built in 1925 (Fig. 2). That hospital (designed by Edgar A. Kahn's father) was a 1000-bed facility built specifically to be a medical school and a teaching and patient-care facility. At the same time, the faculty became full-time employees of the University, led by Professor of Surgery and Dean of the Medical School Hugh Cabot, M.D. The current University Hospital (the third in Ann Arbor) was completed in 1987.¹

Neurosurgery at the University of Michigan owes its beginning to Max M. Peet, M.D. He grew up in Detroit, graduated from the University of Michigan Medical School in 1910, and then took general surgery training at the University of Pennsylvania with Professor Charles Frazier, M.D. Because of Frazier's interest in neurosurgery, Peet learned some of the procedures that were later to make him famous. He returned to the University of Michigan as an Assistant Professor in general surgery in 1916. Initially under Cabot and then

under Frederick Coller, M.D. (the next Department of Surgery chairman), he devoted his practice increasingly to neurosurgery. At the time of the move into the new teaching facility in 1925, he was still a general surgeon. He performed the first procedure in that hospital, an appendectomy for acute appendicitis. In 1926, Peet decided to devote himself completely to neurosurgery and took on his first resident, Edgar A. Kahn, M.D. Dr. Kahn was a native son of Michigan, a hockey star as an undergraduate (University of Michigan Class of 1920), and a medical graduate in 1924. After his initial training with Hugh Cabot in general surgery, he took residency training with Dr. Peet. During those years, he spent brief periods with the renowned neurologist Foster Kennedy, M.D., at Bellevue Hospital in New York City and with the neurology staff at the National Hospital at Queen Square in London, England. Kahn's interests were primarily clinical, which coincided perfectly with the needs of the initial neurosurgery unit at Michigan.²

Dr. Peet died in 1949, and Dr. Kahn succeeded him as section head. Kahn promptly persuaded Richard C. Schneider, M.D., having only recently returned from the European theater of World War II and practicing in Cleveland, to join the faculty in Ann Arbor. Schneider had trained in neurosurgery at the University of Michigan with Peet and Kahn soon after the war. The combination of Kahn and Schneider then carried on the training program and the strong clinical tradition



FIG. 1. The first hospital at the University of Michigan, Ann Arbor. The building began as a faculty residence; then was converted into a teaching hospital in 1869.

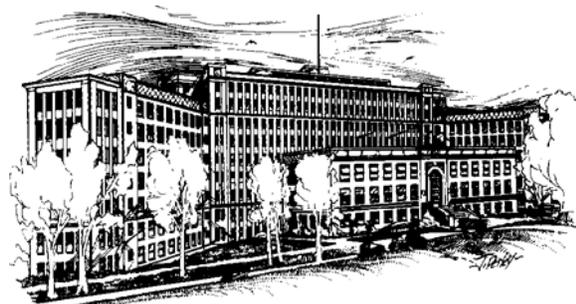


FIG. 2. Drawing of the second University of Michigan Medical School building. Artist: John Desley.

for the next three decades. Elizabeth C. Crosby, Ph.D., a well-known neuroanatomist, became involved in clinical neurosciences about 1950. Her interests, combined with those of Kahn and Schneider, focused on descriptive neuroanatomy and its correlation with clinical findings. She joined the clinical team more and more, making rounds up to three times a week. She was involved with patient examinations and didactic teaching sessions for medical students, house staff, and the faculty. These three individuals thus became an integral part of the medical school and hospital. Their teachings were compiled into the classic textbook, *Correlative Neurosurgery*, first published in 1955.³ When Dr. Crosby retired from the anatomy department in 1959,

she became a full-fledged member of the Section of Neurosurgery where she continued her anatomical investigations in the laboratory. Her teaching activities continued thereafter until her death at the age of 94 years.⁴

Drs. Kahn and Schneider built the residency program at University Hospital into a highly renowned clinical unit with an outstanding record for training high-quality academic and practicing neurosurgeons. Dr. Kahn retired from his position as section head in 1969 and was succeeded by Dr. Schneider. Schneider's interests, in addition to patient care and teaching, included clinical and laboratory investigation of spinal cord injury and the mechanisms of brain injury. Among his many contributions were the first description of the central and anterior cord syndromes after spinal injury and the development of equipment necessary to protect athletes from injury. Dr. Schneider retired as section head in 1979, but continued active practice until his retirement in 1983.⁴

Max Peet started our discipline at Michigan. Kahn, Crosby, and Schneider followed, basing their teaching on the correlative anatomy essential for neurosurgical practice. All four were responsible for a long list of outstanding trainees. A golden era at Michigan ended when Dr. Crosby died in 1983, Dr. Kahn in 1985, and Dr. Schneider in 1986.

The Section of Neurosurgery now consists of eight clinical faculty members. It has an active laboratory with four neuroscientists, a 6-year neurosurgery training program, and substantial involvement in the medical school curriculum. The unit is currently headed by Julian T. Hoff, M.D., who took that position in 1981.

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