

Dr. George W. Comstock “Lucky All My Life”

Dr. George W. Comstock: I never really thought too much of it in terms of achievement it's been fun while there are people in science of course who are shooting for the Nobel Prize, who are shooting to be the top dog in this field. But I think most of us are just interested in learning something that will push the knowledge a little bit further ahead. And, you know, that's gratifying.

Dr. Moyses Szklo: I think Dr. Comstock is the best Epidemiologist or one of the best Epidemiologists that I have ever known, certainly the best Epidemiologist alive in my opinion.

Dr. Moyses Szklo.: He has made incredible contributions in many fields, but one of the main areas he's worked on is tuberculosis. In my opinion he is the foremost expert on tuberculosis, not just in the United States, in the whole world.

Dr. George W. Comstock: I thank you for coming. It's a nice day today.

Unidentified Speaker: Yes beautiful.

Dr. George W. Comstock: For a change. At least it isn't raining.

Reiko Sato: He makes you feel that you want to be a researcher and a better person, and also to look at the broader picture of public health, and I think that's really a gift he has in trying to convey that to students.

Kathy Helzlsouer: I think he's the great general practitioner of public health. He's not somebody that just works in the community; he works with the

community. And all those characteristics have been passed on and I have great admiration for them.

Dr. George W. Comstock: One, two, one, two.

Unidentified Speaker: He's well balanced. He stresses the importance of having a hobby, and for him it's his music, which he also brings to the community and works with that.

Dr. George W. Comstock: Bob and Laura Byler came to town, I think, in the late 60's. Bob's a psychiatrist and Laura was a psychiatric nurse. They joined our big group, the Elizabeth Honor Group. The music has been my major recreation since I was a kid.

Dr. George W. Comstock: I've been lucky all my life. Niagara Falls in the 20's and 30's was a prosperous town because of the electricity, and we had very good schools. So I was lucky there. I got a start. I went to a college, Antioch College, where we worked half time and went to school half time. That time I thought I wanted to be a metallurgist like my father. I was given a job with *(inaudible) company and quickly discovered, "I really don't like this very well." So I added more biology to my background. When I decided to go get a PhD in biochemistry--my boss was a biochemist said, "Don't be a darn fool. Get your MD and you can do everything I can do and things more." Well it kind of made sense. And when I was choosing medical schools he said, "Choose Harvard." And it turned out that Harvard, at that time, was the, I think, almost the only school in the country that didn't flunk out a quarter to a half of the students the first year. I was very lucky to go to Harvard in that respect.

And when it came time to choose an internship we didn't have all that much money, you know. My folks were pretty hard put and my wife was working to help me get through medical school. I was working when I could. And so I thought, "Well I'm kind of interested in public health service." And if you interned with them you got the pay of a second Lieutenant, where if you interned anywhere else you got room, board, and laundry and if you were lucky, \$50.00 a month. So I volunteered for that and I got sent to sea duty in the Atlantic. When I got off sea duty for reasons completely unknown to me, perhaps it's because I'd worked in TB center as a medical student and I was lucky to be assigned on to Columbus Georgia with a newly developed TB control division.

Dr. George W. Comstock: At that time I was beginning to get interested in high blood pressure. Partly because in our work down there we actually found more cases of hypertensive heart disease than we did TB, and I was allowed to use that as my doctoral thesis when the public health service sent me to Hopkins. I came to school with my data in hand and was able to complete my doctorate in one year, which was sort of cheating because I had done a lot of the work ahead of time. While I was at Hopkins, I think one out of every 30 Alaskan natives was in a TB hospital. Gives you some idea of the magnitude of the problem in the early 50's. Well the nurses wanted some background on Tuberculosis and they asked the public health service to send someone up. And no body in the TB division wanted to go so they said, "Well let's send Comstock. He's over at Hopkins. He's not doing anything." And, shucks, I'd

wanted to go to Alaska all my life, so I accepted in a minute. And when I discovered what the problem was I came back and said, "This is a wonderful place to start trying preventive treatment." I had trouble persuading them that it was really that bad. They said, "Oh no, they're just calling everything TB. It can't be that bad. Never has been that bad anywhere before." Well two things changed their mind. One, is they were finding similar situation in Greenland, which sort of hurt my feelings that they'd believe the Danes and not me. And they agreed to send some people up to do some Tuberculin testing and their Tuberculin testing showed, even in 57, that it was eight percent per year, which is still a horrendous attack rate. It doesn't take very long to get to a 100 percent rate, and they finally agreed and we started the program in December 1957. So that happened as a result of--if I hadn't been at Hopkins not doing anything I wouldn't have had this opportunity.

Patricia Crowley: Dr. Comstock is the reason that we have the research here in Washington County and his relationship with the community physicians, work in epidemiology, and his knowledge and expertise helped bring the projects here to Washington County.

Dr. George W. Comstock: The head of our department of the dean of the school were in interested in field training for epidemiologist. And we were lucky enough to get the first grant in that that allowed us to setup a training center where we could bring students out, supervise their field research, provide them with an office, provide them with clerical help, help in hiring

people and that sort of thing, Epidemiologic expertise. We've been able to keep going these years doing one thing or another.

Kathy Helzlsouer: He works with the community because he's realized how important it is and he took everything he knew from working in the community. And first thing, one of the fore thoughts to start a specimen bank that could be used to look for clues for prevention, and he was one of the first to set aside such a bank.

Unidentified Speaker: We'd start with our weekly staff meetings.

Sandra Hoffman: So it was really because of Dr. Comstock and his influence that I actually got really interested in public health. Dr. Comstock has a lot of respect for people and for the people who are our research subjects. He doesn't even like the term "subjects" because he feels like that's somewhat demeaning. He has ingrained in the staff here a feeling that we need to be very appreciative of our research subjects and that we need to, you know, protect them, protect their confidentiality, that's very important to him.

Dr. George W. Comstock: And some of these outcomes you may decide are not really all that important. You can cut those down too.

Robert Parker: To me it's been really amazing, the fact that he chose to come out to Hagar's town, to live in Washington County, to have to commute, you know, an hour and half both ways to get into teach classes to do his full time faculty work at Hopkins, as well as run the program out here in Washington County. To me this speaks volumes in terms of his commitment to the community.

Dr. George W. Comstock: Now if nobody drops out you don't need survival analysis. It's just straightforward and--

Dr. George W. Comstock: Students, you know, they're a remarkable bunch of people. We have some very, very interesting students. You can learn a lot from them. And when they seem to appreciate what you've done that's a big ego booster, too.

Dr. George W. Comstock: --Really unfortunate because they had a wonderful opportunity to distinguish--

Dr. George W. Comstock: To know that maybe you've helped somebody else progress, you know. I'm not much of a believer in immortality but in a way that's your immortality too isn't it?

Haroutine Armenian: I was a student in his famous Tuberculosis course. That was an experience on its own.

Haroutine Armenian: He's a role model to his students to--within and outside the classroom. And as a personality, has inspired us all. And he represents, still, what a teacher of public health should be.

Dr. George W. Comstock: The reason I'm not distributing, you see, I'm down to--

Dr. Moyses Szklo: He's very charismatic, in my opinion. He has that sort of attractiveness to students. He's not pompous, he's not like some professors are very formal and they're demeanor. He's very informal, very open. But also because he has that quality which is not too common, in spite of all his sophistication he's very down to earth.

Reiko Sato He gets down on his knees and picks up a pencil and actually do the calculation together with a student. He also makes the lab very interesting by bringing out little stories about people who developed the methods in epidemiology and I think that really adds an interesting touch to the student teacher interaction.

Kala Visvanathan: When you talk to him one on one on one, he doesn't intimidate you or make you feel small. Instead, he makes you feel like he's a colleague of yours. I think that's a great art because what it does, is it makes you learn from him and you feel comfortable to ask him questions and to talk naturally about things, even though he knows so much more than you and he has done so much more in the field.

Sandra Hoffman: Not only is he a good mentor and a researcher and a professional but he was also able to, in doing all that, maintain a wonderful relationship with his wife. They were married 60 years when she died, and she would travel with him. And so it's just an indication that family is important too and shows the well-rounded person that he is.

Dr. George W. Comstock: I think we were a team. She was the activist. She did the things that I--and she did them in a way that I would never have been able to do them even if I'd had the time. And of course she supported me, she kept the house while I was off in Alaska a month at a time and she supported the research, was interested in that. If it hadn't been for her I couldn't have done what I did. One, two, three, four. Well when I was a kid my parents wanted me to take the piano. That was the only rebellion I ever won and that

was even only a partial victory because they said, “Okay, if it isn’t the piano it’s got to be something else.” And that led to the recorders. This is my first recorder. I bought it in medical school after I’d given a transfusion and it paid you money in those days for giving transfusions so I went out and bought this recorder for \$5.00, probably be \$200.00 now days. It’s really a pretty good recorder. Let’s see there other strange--well the other strange instrument that you might like to know about, is the so-called Crum horn, curved horn, and it’s one of the more ancient instruments played during the medieval and renaissance times, the *(inaudible) where you have no control of it except the air pressure. I’m not an artist. If you’re talking about musicians and science. I’ve always said you don’t have to be an artist to be a satisfactory musician. You know, you just work hard. There’s still things to be learned and I guess in many instances it’s the hope that keeps us going.

Patricia Crowley: He has imprinted on all of us good, solid principals and hopefully he’ll live on through us and what we do, the many, many people that he’s touched everywhere.

Kala Visvanathan: I just think it’s very impressive that someone who’s achieved so much and has done so much for the field of public health and epidemiology is still so humble and still so enthusiastic.

Dr. Moyses Szklo: It’s been a great privilege. I think one of the best things that ever happened to me is to have had the opportunity to work with Dr. Comstock and particularly to be a friend of Dr. Comstock’s.

Dr. George W. Comstock: No man is an island. You know, we all depend on the rest of the people we happen to work with and I've been lucky all my life to work with top-notch people. You know I look back over my life, you know, just how so many little changes could have just made an entirely different person out of me at several places along the line, but what would I do if I were just graduating from medical school right now? I've often thought about that. I really don't know. I might still go into public health because there you can-- even though your successors measured by things not happening, and so you have to have your own private satisfaction from your successes. But still, you know, you can look back and say, "Well I'm doing something useful for a human." Horace Mann was the president of the original Antioch College and on the ground there's a monument there that has his parting statement to the graduating class of 1854 when he was giving up the presidency. I beseech you to treasure up in your hearts these my parting words, "Be ashamed to die until you've won some victory for humanity." That sort of struck me as the main purpose of living. You know, it doesn't have to be--none of us make a big victory but anybody can make some little victories.