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Interview by telephone with Dr. Jeffrey Flier by Laurie Sammeth Campbell

Class of 1972, Mount Sinai School of Medicine

May 15, 1995

LAURIE CAMPBELL: Dr. Flier?

JEFFREY FLIER: Yes.

LC: This is Laurie Campbell. I guess you know that I am co-writing a book on the Mount Sinai Alumni Centennial for Cindy Gruber?

JF: I didn't know that. I knew you were doing something, but I didn't know what.

LC: That's it. And what I'd like is to talk to you for about fifteen minutes, about the section and the Mount Sinai School of Medicine. Do you have time now or would you rather schedule—?

JF: Yes, no longer than fifteen minutes.

LC: Okay, yeah. So this is about the evolution of the medical school, and of course what they want is an alumni slant to the whole thing. So first of all, I guess you were in the first four-year class.

JF: Mm-hm.

LC: What was it like to be there at the beginning of the Mount Sinai School of Medicine?

JF: Well, for me it was pretty exciting. I think it gave me an extra boost of excitement on top of what would normally be there for starting medical school, to realize that it was just beginning there. I think obviously, the faculty was far more excited than would normally be the case about an entering class, given that it was the first entering class.

LC: Right.

JF: So you kind of feel the excitement. So when we had our first lectures, I guess Hans Popper may have given the first lecture, and everyone was kind of standing around. The room was filled, and they were—everyone was aware that this was the first lecture of the Mount Sinai School of Medicine.

LC: Yeah. So you were really making history.

JF: Yeah. Some people got more carried away with it than others. I tended to find it very exciting and stimulating, from my point of view.

LC: Did you also feel that you had an impact on the formation of the school, as a student?

JF: Sure. Well, I think you could probably verify the fact with other people that the class was a pretty activist class. We're talking about the early 70s.

LC: Right.

JF: A lot of people in the class were sort of veterans of the anti-war movement, were very much used to making their opinions felt. So there were a lot of interactions, I would say, between the students and the faculty. The faculty, knowing that it was the first class, they were probably more open to it than they would normally be, because everything was, "Gee, did we do all right? How is this looking?" And a lot of things were kind of being put together just at the last minute, or so it seemed. So there was more reason to be interested in what our reactions were.

LC: Right, right. Has it made a difference in your life, either professionally and/or personally to be an alumnus of this school, as opposed to another school?

JF: Well, I guess it depends what you mean. On some level. I mean, I still have good feelings about the fact that I was in the first class. I don't think the school has made all that much of a big deal about it, just in thinking about it. I mean, I don't think they have made an enormous effort to keep the first class in some special position in the school, or anything. I met my wife through the school; she was four years behind me.

LC: Oh.

JF: So it made an impact on my life that way.

LC: Right. What were the most positive aspects of your years as a student there?

JF: The most positive aspects were, since it was such a small class—we initially entered with 36, I think—there was a strong feeling of getting to know the faculty particularly well.

LC: Mm-hm.

JF: So that was a very valuable thing. I personally felt close to a number of the faculty in the pre-clinical years. And then in the clinical years, I just had very positive feelings about the experiences on the Medical service in particular. The attendings were really memorable physicians, many of them.

LC: Okay. What about any negative aspects?

JF: Negative aspects of the whole education?

LC: The whole experience, yeah. Maybe the other side of the coin of it being new. I don't know.

JF: Yeah, exactly. I didn't view it as too negative. I think most of the people who went there were self-selected in that way. They knew they were getting into a new thing, and just about everybody, I'm sure, had other alternatives. So I think it was selective for a group of people who thought it might be fun to be in a new medical school environment. So I didn't experience it as a particular negative thing.

LC: Are you an active member of the alumni?

JF: I think I am. I've sent membership on various occasions.

LC: Okay.

JF: Whether I did this year or not, I don't even recall.

LC: Okay. And do you find that it's—is it important to you to be a member of the alumni now? Are there things that you want to do with the alumni, or that you get out of being a member of the alumni group? I know you're out of town.

JF: I don't think they've done a particularly good job. I'm at Harvard Medical School, and I see what they do for Harvard Medical alums.

LC: Really?

JF: And it seems to me it's far more organized and more effective at getting people to come, and enjoy it when they come. What they will do, for example, is when they put together the program at the time of graduation, every year they have a nice program, a mixture of faculty from the medical school, the hospitals, and various prominent alumni, who will come and speak. They make an effort specifically to organize dinners or get-togethers for individual classes, which as far as I know they've never done.

LC: At the Alumni Week?

JF: So I've never felt particularly interested in going to the Alumni Day celebration because of that.

LC: Do you have any contact with students, or have you had since you're been out? Do you have any contact?

JF: Yeah, I have a couple of close friends who were members of the class.

LC: Oh, really? Now?

JF: Yeah.

LC: So is there a fair amount of networking that goes on, or no?

JF: A little bit, not all that much. Even when we had the—I guess it was the 20th reunion, based on our graduation in '76, so this was in '96. So wait, hold on a second. Yeah, '72. Then in 1992 we had the 20th reunion. And out of the class, there were only, I'd

say, around seven or eight people who came. No one made an effort to get the class together, except at the big alumni dinner kind of thing.

LC: That's too bad. What about with current students, the students that are actually at the school now? Is there anything going on between alumni, that you're aware of?

JF: Not that I know of, no.

LC: Yeah. Okay, where do you see Mount Sinai School of Medicine headed, in terms of what's going on in the medical environment as a whole?

JF: Yeah, well I don't actually know. I don't know about even my own institution up here in Boston. I mean, there's so many things changing, and changing quite rapidly, so that it's kind of mysterious as to what is happening. I mean, from the old days I know Jack Rowe pretty well, who is the president down there.

LC: Right.

JF: He was at Beth Israel where I am in Boston, for quite a number of years before he came down there. So I think they have good leadership, but I don't know what the future is, specifically.

LC: Okay. When you were at Mount Sinai and Hans Popper was there, and the whole thing of the Mount Sinai Concept that he developed, did you feel an impact from that, the humanitarian side of medicine that he put into, supposedly, anyway, into the curriculum?

JF: Yes. I think there was some of that. I think, for example, there was more—earlier than other schools did it, we, for example—it's not so much humanitarian, but there was an interest, for example, in community medicine. That was kind of a notable [unclear]. I'm not sure that all the things that community medicine did were all that outstanding, but there was evidence that they—that the school was thinking about that area earlier than other institutions were.

- LC: Okay. And now, your interest in the field of endocrinology, and the research—was that an interest you had before you went to medical school, or did it develop during that time?
- JF: It developed during that time.
- LC: Oh, it did? Uh-huh. So when you entered, you just knew you wanted to be in medicine, but not really what area?
- JF: Right.
- LC: Okay. Is there anything else that you might want to say about the medical school? Or being an alumnus of the medical school?
- JF: Well, not really beyond what I said. I really enjoyed the experience of being a student there and house officer there.
- LC: Oh, you were a house officer? Ah, okay.
- JF: Yeah, I was a house officer there, so I had a very strong attachment.
- LC: But you don't feel that same strong attachment anymore?
- JF: Actually, it's surprisingly diminished over the years, and I think in part because I don't think that they've been particularly professional about the way that they've dealt with their alumni. I think they could probably learn a few lessons from the way some other places do it. Just by the simple fact that if someone who had a very strong feeling about the school, who was in the first class graduating, feel that there wasn't a particular strong interest in keeping them really close as an alumnus, then that sort of explains it.
- LC: Yeah, right. That's a shame.
- JF: Yeah. Maybe it's my own odd perspective on it, but that is the perspective that I have.
- LC: Yeah, if you're saying they don't do things to keep the classes together, and they don't have these various functions that would do that...

JF: At least I haven't noticed it.

LC: I know there's every year that Alumni Week, but that's something else, I guess, where they bring—I don't know what it is.

JF: They invite people who are alumni to come, but I haven't seen that there's been an active group of—for example, at Harvard they have a couple of class representatives that the school helps to organize, and these individuals are the kind of people who, for whatever reason, are more interested in being involved. And they then take an active role, and one of them will always be from within Boston in Harvard's case; in this case it would be New York. And they'll frequently schedule an affair or a party at their house, or something, to make it more interesting to go back.

LC: Right, right.

JF: Because people don't necessarily want to come back just to sort of—

LC: Yeah, mingle with the whole group.

JF: —mingle with the whole crowd. They want to come—sometimes someone would, if it was a particularly good program. But if it's not a particularly good program, then they would only come if they thought it would have some personal value to them.

LC: Right. They do have class reps now for the centennial. They asked for them, anyway, so hopefully maybe that's something they can continue after that.

JF: Yeah.

LC: But they should have local things.

JF: Yeah. We're going to have a 25th anniversary of our graduation in two years. I would be pretty annoyed if someone at the school didn't make a really serious effort to ensure that that was a major event.

LC: Right. Do they have reunions every—do they have that kind of thing?

JF: What they had when my class had its 20th reunion, what they had was they said, “We’d like you to come.” And maybe they sent an extra letter or something. And what we did was we had a table with our ten or twelve people.

LC: That’s what you were saying, right.

JF: At the big party. But no one made an effort to do anything beyond that.

LC: Yeah, right. So you would come back to the school? It doesn’t necessarily have to be in Boston, but it would have to be a special occasion that would bring you there, just for your class, right?

JF: Right.

LC: Yeah. I will mention this, because I work with Cindy on the newsletter, too, so they’re always looking for ideas. Yeah.

JF: There’s a bunch of annoying things that they do, actually. [Laughs] As I say, I found it disappointing, the way that they do it. I mean, I’ll actually [unclear] one other thing to you. For example, two or three times, there’s some new award that they have that they give out to alumni. I think for the second time, I got a letter at some point, maybe it was in November, or something like that, saying—I don’t remember who exactly it was from, but it was someone from the medical school, saying, “You have been suggested as a possible winner of such-and-such award. To help the committee decide, could you please send your CV and a couple of your important papers, by a certain date.”

First of all, that’s really a very amateurish way of dealing with anything like that. You don’t send a letter to someone, tell him that we’re considering you for something, and then ask you to send your CV—not for this kind of a thing. In other words, if someone, if they can’t muster a few people to figure out what my accomplishments are by looking at the medical literature, then they’re really not up to the task of giving out an award.

LC: Yeah, right.

JF: And at the time they did that, there wasn't any indication of like when—even if I were to win the award, when would the date be? The whole thing was just kind of weird, and I was kind of left hanging. I didn't win the award, and it's the kind of thing that really leaves a negative taste in your mouth. Why did they bother to do this? And I guess the other thing is, I know that a couple of people who won it in the past were really not particularly outstanding people, but they had family connections at one time.

LC: Really? Oh, boy.

JF: So that's the kind of thing that made me, as someone who was about a big a booster of the place as there was, I just sort of don't have much of a desire to go there anymore.

LC: Too bad! Yeah, okay.

JF: Although I am going there to give medical grand rounds in [unclear].

LC: Oh, yeah. Cindy mentioned you were coming soon.

JF: It's actually the first time I've ever given a medical grand rounds since I left. So I am doing it.

LC: Oh, that'll be probably neat.

JF: Yeah, that should be fun. I told you more than you asked for! [Laughs]

LC: No, it's interesting though, actually. Thank you very much.

JF: Okay, you're welcome.

LC: Bye-bye.

JF: Bye.

[End of Interview]