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INT 0193

**Interview with Mrs. Vivian Clark re: William Clark, MD by Norma Braun, MD, with Michala Biondi, Archivist for the St. Luke's-Roosevelt Hospital Center Archives
Conducted in the Physician's Lounge at Mount Sinai St. Luke's Hospital
St. Luke's-Roosevelt Hospital Center Alumni Oral History Archive
November 14, 2017**

MICHALA BIONDI: It's November 14th, we're in the physician's lounge with Vivian Clark and Dr. Braun, who will be interviewing her. This is Michala Biondi, the archivist for the St. Luke's Roosevelt collections. Dr. Braun?

NORMA BRAUN: I'm Dr. Braun, Chairman of the Archives Committee of the Medical Board of Mount Sinai-Saint Luke's-Mount Sinai West-Roosevelt. We're fortunate today to be able to have Vivian Clark here, who is the wife of one of our former chiefs of medicine, Dr. Bill Clark. So I'm going to ask her to tell us about his career here, his incredible input into the training, the evolution of arthritis and its treatment through the time that he was active in his career, and his untimely death, which led to other changes.

But at any rate, we're so lucky to have Vivian here today. So Vivian, we're going to start at the beginning. What do you know of Bill's—where was Bill born and where did he grow up? Where did he go to school? How'd he decide to become a doctor, and then become a rheumatologist?

VIVIAN CLARK: Bill was born in Dayton, Ohio, to a man who was a teacher and his wife who had not finished high school. There were four children in that family. Bill was the youngest. I think in the succession were a brother and two sisters, and then Bill. Bill's father died in the 1918 flu epidemic, and is buried in a cemetery, part of a cemetery in Dayton that was opened up during 1918, and every plot around the Clark plot started in 1918. His only memory of his father was his father lying in a coffin when he was three years old, in the living room.

There were two sets of grandparents. It was more or less depressed times, certainly, in Dayton. And somehow, between the two sets of grandparents and his mother, three of the four children grew up. One sister became a nurse, one sister became a teacher, and Bill ultimately became a physician. I think he had always wanted to be a physician. I think to him, as I think back on it, it was a calling very much like the priesthood, as I always said, but I think that's true. And the family—he graduated from University of Dayton in 1934 and from the St. Louis [University] School of Medicine in 1938.

I think because he was so talented of mind, everybody that was involved in his education felt that he was a child that needed to be propelled. The family had no money to help him at all. Just, it didn't exist. But somehow, by already teaching

anatomy, I think, when he was in med school, he got through it, and was just propelled by the fact that he was very, very bright. He was also rather attractive, which never hurts. [Laughs] It doesn't. And somehow he just kept going.

He became a general practitioner in Dayton, married relatively early, and had one son relatively early. And then, as he was successful and put some money together, he decided he wanted to specialize, gave up his practice and went down to work with a man at Tulane. I forgot what his name was; doesn't matter. Went down to work at Tulane [University] and the man who he went to work with, which was in, I believe, surgical pathology, said he decided he couldn't stand it in New Orleans anymore, and he pulled Bill down there, and he felt he owed him something, and where did Bill really want to go and keep his training going? And Bill said he really wanted to go to the Mass. General Hospital and work with a man named Dr. Walter Bauer, who was a rheumatologist.

NB: Walter Bauer was my patient. Okay. [Laughs]

MB: Small world.

VC: Small world. So somehow that came to pass, and Bill went to Mass. General and worked with Walter, and just kept sort of rising up in his expertise.

NB: How did he choose rheumatology? Do you have any idea?

VC: I have no idea.

NB: Did the polio epidemics have anything to do with it?

VC: I don't really think so, because his exposure to that was later.

NB: Yeah.

VC: Was way later. I think he was always interested in rehabilitation.

NB: Mm.

VC: And I know that he was a friend, but not a close friend, of Howard Rusk's, and they had always wanted to work together, but that never happened.

NB: Mm-hm.

VC: Whether that was influential? I don't know. I know there were an awful lot of really very talented doctors, later, who were born in Ohio and left Ohio, and sort of never went back and settled, more or less, on the east coast.

NB: That was definitely before the Cleveland Clinic?

VC: Oh, yeah.

NB: Because since then, they've upgraded medicine in Ohio tremendously.

VC: Tremendously.

NB: So, did he stay in Ohio to do his internship and residency, then?

VC: Yeah, but he never did a full internship and residency. I don't think he ever did the amount of years that you have to put in today. I don't know what the regulations were in those—I have no idea.

NB: In those days it was two years of internship, and usually, two years residency for internal medicine.

VC: Right. I am not really sure he did that. He did some years but I don't know how many. I never asked the question.

NB: You go into practice, you get your license by taking the exam, but that would, then, bring him an income because now he has family to support.

VC: Right.

NB: Because I'm sure it was tough. In those days the stipends as a intern-resident was—

VC: Slim to nothing.

NB: Oh, it was pathetic.

VC: You couldn't live on it.

NB: No. Even when I was an intern, it was \$800 a year.

VC: Oh, my god!

NB: Salary. So it worked out. it was about 26 cents an hour.

VC: And I would have to say I really never asked those ques—I never got—I never asked the question. I never thought to ask the questions, frankly.

NB: You wouldn't, exactly, but I can certainly see you as a little ahead of his time, because at that time the most common rheumatologic diseases were rheumatic fever. It was extremely prev—it was epidemic.

VC: I know he did some work and it's not on his CVs. He did some work—he had TB, and was sent to Arizona at some point.

NB: A sanatorium.

VC: Right. And worked out there as well. But the years? There's nothing in my paperwork that clarifies that.

NB: Okay. All right. So then, how did he get to St. Luke's?

VC: Well, from the Mass. General he went to what is now Case Western Reserve, which was Western Reserve. He went with others from Harvard and other parts of the country. There was a man out there, whom I believe was named Millis, who was working on the medical curriculum and upgrading the standards of the medical curriculum. And he pulled Bill in from Harvard, and various others, and among them Bob Ebert, who went back to Harvard as Dean of Medicine.

And Bill spent—let me see, how many years did he spend over there? He was at the Mass. General from 1945 to 1953. From '53 to '58 he was at Western Reserve, where he was engaged in teaching and patient care, and was director of the arthritis unit. And also he was one of the planners of something that was called the Clinical Science Curriculum and Continuity, where residents, as students, were assigned to families. And they kept track of them medically until they graduated. So that was part of, I think, what Dr. Millis was trying to put together. Do you want me to stop?

NB: No. We're going back to that.

VC: Okay.

NB: We're discovering that the residency training should include that continuity, and they are supposed to have their own panel throughout their entire training period to understand the elements of disorders in people, as opposed to just the disorders, which is, I think, vital to what care is, care of the whole person. So, now it has to be carefully documented with a check list. They give an Excel spreadsheet now for all this that they have to complete before they can even take their boards, their board exams. So.

VC: But at that time that was—it was so long ago. It was pioneering.

NB: Yeah.

VC: Concept.

NB: It didn't seem logical, but it was.

VC: Actually, when you take a look at it in retrospect, it was a very simple idea.

NB: Yeah, yeah.

VC: And develop, obviously, a personal relationship with the patients.

NB: So, was this the background that led him to be considered for the chief of medicine here? How did he get here?

VC: Well, the reason that he came here: when he left the Arthritis Foundation, the next step in his career was to go to the National Foundation March of Dimes as medical director. The March of Dimes vaccines had just come to be. The March of Dimes had an arthritis component and a rehab. So he was recruited to plot something else for the National Foundation March of Dimes to pursue.

And they came up with—Bill and a group came up with the birth defects program, which is still what makes the March of Dimes tick, and they still raise an awful lot of money and have done really wonderful pioneering work. So he spent, well, six years at the National Foundation March of Dimes, and then the arthritis component of March of Dimes spun off and became free-standing: the Arthritis Foundation.

NB: Mm.

VC: And he could have stayed at the March of Dimes but he opted to go with the Arthritis Foundation, and he became its chief executive officer. When he left the Arthritis Foundation, the board had a very large right-wing component to it.

NB: Mm.

VC: And they were from all over the country. The Arthritis Foundation, like the National Foundation, had chapters, which were regional, and the whole thing. And Bill traveled extensively. He put both the March of Dimes and Arthritis Foundation; he was traveling about 100,000 miles a year.

NB: Wow!

VC: So, basically, he was speaking—he claimed that he had spoken in all of the counties of the United States in the lower 48, but I'm not—yeah. He probably came close.

NB: It was predominantly for fund-raising?

VC: It was a mix of fund-raising—

NB: Education.

VC: —education, obviously visiting an awful lot of hospitals and programs around the country.

NB: Mm-hm.

VC: But as I said before, there was a right-wing group that I think thought Bill was—he was not wildly liberal. He was more, I would say, sort of a conservative Democrat, or liberal

Republican. He was somewhere in the middle, but he stood for what was right and that was, I think, one of his great strengths. He went from being a clinician to being a teacher, and then he got a little sick of pushing papers around and being a chief executive officer, and really wanted to go back to taking care of people.

NB: That's where he had the most fun doing.

VC: And since the board was really quite nasty, he finally said, "That's it. I'm out of here. I'm going back to practice. You do what you want, but I'm leaving." And he did, and he was given a clinical appointment at Cornell Hospital for Special Surgery here in New York, because one of his greatest former pupils was the medical head of Hospital for Special Surgery here in New York, and they got him an appointment, and that's where he started and started doing clinic work.

NB: Was that Chuck Fister [unclear]?

VC: Yeah. And at that time the person who was head of rheumatology here at St. Luke's Hospital was John Stage-Davis.

NB: I remember John Stage. Charming man.

NB: *A number of comments at this point have been redacted.*

NB: Who was a rheumatologist. [speaking of Charles Reagan.]

VC: Who was a rheumatologist, who was up at Presbyterian, at PMS.

NB: Right.

VC: He called Christian and said he had this problem, and maybe Bill would be the right person to pull up to St. Luke's and ask for Chuck Christian's input as to what kind of a teacher Bill was. And Chuck said, "Well he taught me, so he must have been okay," and maybe he would be a good fit. And that might be something that Stage-Davis would not be terribly insulted by.

NB: Right. More of an academic—

VC: Yeah. So, Bill came to St. Luke's, and I forget how many years later the then head of medicine, Ted VanItallie, who was an extremely distinguished man, and is as we speak, in 2017, still alive. For some reason, one weekend he quit. And shortly thereafter, within a couple of weeks, there was some sort of trustees retreat. They came to Bill and asked him whether he'd be willing to take on that spot on a temporary basis.

NB: Mm-hm.

- VC: And Bill had exactly what they were looking for at the time. He had an academic background. He was a clinician.
- NB: A teacher.
- VC: He was a teacher and he also was an administrator. So he was the perfect choice. In addition to the fact that he was a white Anglo-Saxon protestant from the Midwest, which was a big deal here in those days.
- NB: Oh, yeah. Oh, yeah.
- VC: It was a very big deal. And so, he was appointed.
- MB: What do you mean by that, "It was a big deal?"
- NB: It was one of the criteria.
- VC: That was one of the criteria.
- MB: To be a Midwesterner?
- NB: No. to be a WASP.
- MB: A WASP. Interesting.
- VC: This was a place where there was—I mean, I do know that he's still alive, too. Miles Schwartz was the first Jewish attending here?
- VC: Seichi [Shimomura] was probably the first Japanese American. There were some Catholics. Cecil Broderick was probably the first black attending. And that's just the way it was, and it wasn't very nice, but those were the facts. And I'm not embarrassed to say this on tape because that's the history of this place.
- NB: Mm-hm.
- MB: It's good to have the underside of the history sometimes.
- VC: Yeah, you need the—yeah. And they were very—Bill didn't come from a rich, east coast, WASP family. He came from the Midwest with no money, but they were clannish in their own way. They were very clannish, and one of the reasons they somehow accepted Bill, the physicians here, was because he was a WASP.
- NB: Also because he was very good.
- VC: The other part was—at the time they gave Bill the position on a temporary basis, the others, who were vying for that position, should [Theodore B.] VanItallie [Chief of

Medicine] step aside, all had a base of followers, and I think the trustees had the smarts to realize that that was not the way to go.

NB: That was Larry Huntington [then president of Board of Trustees]

VC: Well, Larry was a “limousine liberal,” if you remember the terminology.

NB: Oh, yeah.

VC: Larry had a townhouse here, up here someplace between Riverside and West End. Yeah. But that’s the way the world was at that time in history. I don’t think I’m saying anything out of turn. It’s just—

NB: How long he was chief?

VC: Bill?

NB: Yeah.

VC: Bill was chief for ’75 to ’79.

NB: Mm. So part of the reason Dr. VanItallie left was because of his feeling that we should continue our strong collaboration with Columbia, and it was at the time of the merger with Roosevelt.

VC: Mm-hm.

NB: And no one seemed to be hearing Ted, and that’s why Ted resigned, because almost everything he had put forward, with a great deal of effort and planning with background, etcetera, was ignored. And he was upset about that. And Christy had become chief of medicine at Roosevelt.

VC: Yeah, Nick Christy

NB: Nick Christy.

VC: Yes.

NB: And Nick Christie’s administrative skills at the Roosevelt took them into bankruptcy.

MB: That’s right.

NB: Which meant that the state came to St. Luke’s, VanItallie at St. Luke’s, in particular Gary Gambuti [former president of St. Luke’s-Roosevelt Hospital Center], to merge with Roosevelt to bring Roosevelt out of debt.

VC: I got my piece of it, but that’s absolutely right.

NB: —to reconfigure. So it became St. Luke's-Roosevelt Hospital Center as a consequence.

VC: That's right.

NB: But VanItallie felt that it was not the way he saw things. And I know that one of his reasons for having Bill here was also because he was very focused on having all the subspecialties in medicine evolve into better than what they were in both research, education, and in teaching.

VC: Mm-hm.

NB: So, that was Dr. VanItallie's reason.

VC: I never knew that until now.

NB: Yeah, yeah. And of course, people talk about it now, right? This many years after.

MB: Yeah.

NB: But nevertheless, it was very painful for him when he felt he had no recourse except to resign. Good for us that Bill was here. We were lucky enough to have him. He was a very good interim chief because he really—well, first, he was so—he was such a low-key—

VC: Balanced. He was a balanced person.

NB: —mellow guy. He didn't fly off the handle. But he always had a lot of depth and he had a lot of, I call it sagacity. Wisdom. And he could calm things down when things were like helter-skelter or going a little crazy, which I think—when a ship's in troubled water, you want a captain that's going to keep it stable from tipping over.

VC: Which was what his strength was.

NB: Yeah.

VC: Yeah. He very rarely lost his temper. He may have been seething underneath, but it didn't—it didn't show.

NB: Somebody says, "A whistling teakettle."

VC: Yeah.

NB: Was fine on the outside, blowing on the inside.

VC: Yeah. But that's the kind of person he was, and I think he was very good at what he did. And he enjoyed it.

NB: Well, he then expanded into looking for the next chief, that type of thing, and I think that's when Dr. [Gerard M.] Turino came. It was after Bill.

VC: No, [Stanley] Cortell was in between.

NB: No, no. Oh, you're right.

VC: Cortell came.

NB: You're right. Right.

VC: And then Turino.

NB: Right, right, right. And Turino was the first Jack Keating Professor, because that was when the money had been raised to have a Columbia professorship, a named professorship and that's how it became the first Jack Keating Professor. Things all link. This is so beautiful.

VC: Yeah.

NB: Well, what happened to Bill's family?

VC: Bill had four children, two by his first wife, two by his second wife and none with me.

NB: Comments at this point are redacted.

VC: And Bill also went into the Army, was career, and retired after I think 27 or 28 years, and his son is now fourth generation United States Army.

NB: Oh, wow.

VC: Isn't that cool? I'm really proud of that. They're living happily ever after outside of DC, in Manassas, and he is now in the private sector, working mostly with the military.

My youngest step-son, James, whom I was extremely close to, he married a woman who didn't like the Clarks, individually or collectively.

NB: Oh, gosh!

VC: She only liked Bill and once Bill died, that was the end of that. Jim and she adopted a child from China about fifteen years ago. I have never met that child.

MB: Oh!

VC: They just ditched me.

NB: Mm-hm. Was that after Bill died?

VC: Oh, everything was after Bill died.

NB: Yeah, yeah. So how did you and Bill get together?

VC: Well, I had a friend whom I followed in various jobs. I've forgotten where we originally met—oh, yes, I do know where I originally met her. That was in the public relations business. She left that job, and I got it. That was working for a man named William Howard Chase, who was one of the founders of the public relations business, had his own firm. Mary worked for him, and she decided to go, to get another job for some reason. So I started off knowing her there. And then she worked for Bill at the Arthritis Foundation. And she called me one day and she said, "This is a very boring job and I'm going back." She had been on Nixon's staff when he was Vice President of the United States. And she had worked for Herb Klein in the Nixon administration, and all the others, and traveled a lot with Nixon on his campaign, which was the last—last campaign that was done on prop planes.

NB: Uh-huh. Yup, slower.

VC: Much slower. And she said the Arthritis Foundation was a rather boring job, and I was looking for just such a thing at that time. I had left Howard Chase and gone—I don't know where I was, somewhere down in Wall Street briefly, and I was looking for exactly that. Well, I got to the Arthritis Foundation and built it into a real job. I was the one who put together the medical meetings for the rheumatologists, and I guess the biggest meeting that I planned included 800 doctors.

NB: Wow.

VC: I planned the meetings in Tucson, Detroit, I forget where else, and Washington DC. And so one day Bill walked into the office at the Arthritis Foundation and said—and I had known that his wife had already sued him for divorce before I ever worked for him. But he walked in one morning and he said, "My wife is suing me for the second time and this time I'm getting out."

NB: [Laughs]

VC: So I said, "Okay." And he said, "I'm going to need a very, very good lawyer." And he said, "I have to start looking around." I said, "I think I can be of help." I had dated a man who had a Connecticut divorce, who was a senior vice president for a small company called Phillip Morris, and I remember his story about his divorce. So I went to my phone and called Clifford Goldsmith at Phillip Morris and told him the story. And he said, "Hold on. I think I can be of help." So he went to his Rolodex and came back, and said, "This is the firm in Connecticut. Have Dr. Clark use my name. It is a firm that only represents the men."

So, Bill went to Goldstein and Peck in Bridgeport. They took his case. They laid down the ground rules of what he could and could not do, and they made it very clear that as long as he stuck within the lines they would represent him, and the minute he got beyond any of the lines, they would drop him. So he got his divorce and we got together and lived—we lived together for 28 years and were married for 25, and I wouldn't trade a minute of it.

NB: I know you two had some kind of spark. I didn't know exactly what it was.

VC: We really did.

NB: It was a partnership, a true partnership.

VC: It was a true partnership. And I must say not only did I learn an awful lot, he gave me the ability to learn everything I could. He was totally behind me in terms of broaden your horizons. I will obviously go first, and I want you to be able to do whatever - whatever avenue you want to pursue. He was totally fair, but he was totally fair with women. He respected them.

NB: That's his connection, strong connection to his mother.

VC: Yeah.

NB: Yeah.

VC: And when he was in his first marriage, when he made money, he bought his mother a house at 20 Sandhurst in Dayton, Ohio, and his first wife almost left him over that.

NB: Ah! Really?

VC: That house is still in the family.

NB: That's great.

VC: Isn't that cool?

NB: It is cool.

VC: When I sent a Christmas card to 20 Sandhurst every year, it gives me great pleasure that that house is now being lived in by a great niece, whatever. It's still there.

NB: It's still there. I think that's a marvelous story. The continuity in that, too.

VC: But Bill was an extremely fair person. He respected people for their intelligence and their abilities.

NB: I think one of the characteristics I remember, too, is that there was not a jealous bone in his body. If you succeeded, he was thrilled.

VC: Pleased.

NB: And that I thought was somebody with self-confidence.

VC: Yeah.

NB: That people didn't threaten him, which then allowed the people around him to thrive, and to shine, which is a collaborative environment of work, which made you joyful to go to work every day. And it was infectious, in terms of the spread to the staff, I think. I think that's a healthy environment.

So, he did research.

VC: Mm-hm.

NB: He did a lot of that at MGH, and I just wondered how much of that was—what his focus was. I seem to recall predominantly clinical research.

VC: Well, it was clinical research, and then he got involved here and had a—we had a good friend who helped fund this. He was one of the first labs in this town working on AIDS.

NB: Yes.

VC: —with Yori Yonada [?].

NB: Yeah, absolutely. Yonada was fantastic.

VC: Yeah.

NB: And Michael Lane.

VC: Right. They worked on that, and oh, I don't know. I was head of—later, after Bill died, I was always involved with UNICEF, because a great friend of mine said to me when she met us socially, and they became very close friends—she said to me, “You know, you like kids. Maybe you'd like to be involved. And you come from an international family, so maybe you'd like to be involved in children around the world.” And I said, “Yes, that would interest me a lot.” So, I got involved with UNICEF and I served on that board for eighteen years.

And from that I got involved in something called—what was then called the Ladies Christian Union and now is called the LCU Foundation, which is the second oldest charity in New York, the eldest being The Children's Aid Society. And I rose to be president of that. And we still had residences for young women who came to New York

to either start careers or to go to school. And then it came time to upgrade one of the houses. We had one very large house that had 80 girls in it that was on 13th Street, just west of 6th Avenue. It was called Catherine House. And the other one was called Roberts House and it was on East 36th Street. And once you start to upgrade a building, you have to upgrade it from A to Z; you can't just pick what you want to upgrade.

NB: Mm-hm.

VC: So we sold the two houses, took the money we got from that, which was at that point a high end in the real estate market in New York, and put it with the money we still had, and from that point on we became a grant-giving foundation, and gave to 25 colleges and universities in this town, so they could give their female scholarship students housing stipends. And that's still going. I'm no longer involved, but that is still going. And through that, I sort of got involved in other things. And I was once at a party for the graduate center of City, which is in the old B. Altman building. And I was introduced to a lady named Matilda Krim, who was the one who started amfAR. And we started to chat and she said, "You know there was"—she said, "When we were just starting this, there was this nice guy up at St. Luke's." And I said, "Well, the nice guy was my late husband." [Laughs]

NB: Oh!

VC: [Laughs] So, Bill was always interested in research. Also, if you vaguely might remember, there was a time when there were recertification boards they have to pass.

NB: Oh, yes. They still are.

VC: And Bill went to, I guess, once of the med school's bookstores and bought a whole bunch of stuff, and every Saturday he was studying so that he could be the first up here to take his recertification boards, because he had great plans for forcing a lot of other people to do the same thing. So, of course, he took them and he did pass them, and then he sort of tried to guide some other guys to do that. I think he really had total respect for other people, and I think that was part of his charm.

NB: Yeah, yup. He did, he did. He was never threatening or intimidating.

VC: Hm-mm.

NB: There was this very calm demeanor at all times when he dealt with people. And he could chastise somebody in such a gentle way that they would hardly realize it, but they'd get the point and not—

VC: Yeah. You don't have to make a scene.

NB: Yeah. Exactly.

- VC: And there were some people that were so volatile that they just—it could be quite unpleasant. He was never unpleasant.
- NB: That's for sure. So, he wound up stepping down.
- VC: He went back to being head of Rheumatology.
- NB: Yeah. Right. Right, right, right.
- VC: And basically, he wanted to go back to having a full-time practice. The deal was here that he could keep his practice, but on a limited basis, and come up here at lunchtime and do this job. And that was the deal, and we cut a deal financially with Gary Gambuti that most of his salary would be held for a later time. And I must say, our relationships with Gary were perfect. There was never one inch of trouble on that, or with the trustees. So, it was a win-win situation. Bill was dearly loved, I must say, by the staff here, and he loved them in return.
- NB: And the house staff, too.
- VC: Oh, they adored him!
- NB: Did you ever find out what happened to him so suddenly?
- VC: Well, he was thrown in the wind and his hip broke.
- NB: Oh.
- VC: And, there again, it was a Saturday. He'd gone off to a particular chemist to buy a particular kind of lozenge because we were going to a concert that night, and his coat sort of became a sail and picked him up and threw him on the ground, and somehow, some ladies got him into a cab and got him home. And the guys in the building took him up to the apartment. I'd been out doing errands, and I came home and the guy in the lobby said to me, "Your husband's in trouble." And I walked through the bedroom door, and Bill said, "I've broken my hip."
- NB: Oh.
- VC: And I said, "Okay." Well, I had Chuck Christian's private number at HSS and I knew he came in on Saturdays. So, I called good old Chuck, and Chuck said, "If Bill says he broke his hip, he broke his hip. I'll send an ambulance." And the man who operated on Bill's hip on Sunday—there were two other doctors who'd had similar accidents somewhere, and he had never met any of the three of them before, but he operated on all three that Sunday.
- NB: Ooh, wow!

VC: Chip Cornell. [Laughs]

NB: Yeah. My gosh.

VC: You know, it was a colleague.

NB: Right. Right.

VC: It was a colleague. So, he got over that and I don't really know what happened except I think he was used up. I think he'd had physically a tough life. He started very young. He'd had TB. At the time he was in once here, up at St. Luke's, they were—no! That was also at Atlantic. Then something went wrong. Jonas Goldstone had gone to Lenox Hill from here.

NB: Right.

VC: And Jonas was his doctor, and Bill got up one day and really couldn't stand for some reason. Something had just—so they admitted him to Lenox Hill, and Jonas was afraid that his TB had come back, but that was not the case. We'll never know what really went wrong. It just all of a sudden, like the domino game, came down, and I think Bill had just kind of had it. I don't quite know why, but he had.

NB: Tired.

VC: He was tired. He was used up. I mean, nothing more complicated than that. His body just said, "This is enough." But he was certainly not supposed to die and he did. I called him on Sunday morning and Jonas—whoever was covering for Jonas called me up and said, "Mrs. Clark, I'm terribly sorry to tell you but your husband just died."

NB: Mm.

VC: But—

NB: I know that was like out of the blue.

VC: It was out of the blue. But I think he had a very rich and very rewarding life, and I think also the fact that he had three wives, but he also had three careers. And I think it's nothing more complicated than that. I think at different stages the—the first wife—both wives were jealous of what he was achieving, and resented the fact that he was so involved with his career. I must say I never felt that way, but then again—

NB: You had your own career.

VC: I was allowed to be a participant, and at the time we got together, Bill said to me, "You know, there are things you are very good at." He said, "So, you're in charge. If you have a problem, come to me, but—" And I say this perfectly straightforwardly, I made him

read the income tax form before he signed it, but he had nothing to do with it. He put me in charge of—you have to run the budget. You have to figure out how to pay the malpractice insurance, you have to do this, that, and the other thing. If you have a problem, please speak up but, if you don't—" So, he had faith in me.

NB: Right.

VC: And that gave me the faith to put myself together. I remember when I was planning Bill's service, which was at the Church of the Heavenly Rest, where we had, I don't know, some 300 people, with all, everybody he had cared for so much from various parts of his life. I remember saying to Jim Burns, who was then the rector, "And how am I going to get from the front row to the back of the room?" And he said to me, "I'm coming down off the altar and picking you up." And that was a beautiful, sunny fall day, and the sun was streaming in the rose windows and it just was stunning. And for somebody who started off with a lot against him, in terms of the family having no means and wanting a career where most of the crowd did have means, I think he achieved quite a lot.

NB: Tremendous. Tremendous. Because obviously, all these incredible people leaving their legacies—

VC: Mm-hm.

NB: —behind, because of the kind of people they were.

VC: They were.

NB: And part of his approach to women was that they had equal standing. It was never a limit, which made it better, because as women started to get into the medical field in larger numbers, there was always—it was always tough.

VC: I think the one person who might have shown him the way was somebody who worked with Bauer, who was a woman named Marion Ropes, who was at Mass. General and highly regarded. And there were women and it helped.

NB: That helped.

VC: It probably helped. And his mother, who at the time her husband died, leaving her with the four children and did not have a high school degree, at the end of her life she had become the women's head—the head of the women's division of the Dayton Police Force. So, she pulled it together, too.

NB: Mm-hm.

VC: And it was just another era, but she did. She was left with a problem, and with the help, I suppose, of both sets of grandparents, they somehow got the kids through school. She

got herself pulled together and she worked. And his two sisters certainly did. And I didn't have much—

NB: What happened to his oldest brother?

VC: He died in diabetic something-or-other.

NB: Oh!

VC: I was told, but I mean, that's—

NB: Don't know.

VC: Bill was a kid when he died.

NB: Yeah.

VC: Yeah. So God knows what he really died of. But I didn't know the family in Dayton well at all. We were out there several times but—I mean, I knew them but I didn't know them.

NB: Mm-hm.

VC: I was a New Yorker, and they thought that was a little weird. But, okay. I mean, Midwesterners. However, they were all very nice people and very solid. The best of this country has come through the Midwest. They have a good sense of gravity, and they think in straight lines. I mean, it's highly respected. So, I'm glad I met him. I'm glad Mary Werner thought it was a dull job and glad I had a crack at it.

NB: Right.

VC: And Bill was also the first editor of a journal that is now over 50 years old called *Arthritis and Rheumatism*.

NB: Mm.

VC: And about five or so years ago, maybe a little more now, Chuck Christian called me up and said, "There is an event to honor the 50th anniversary of *A and R* and I think you should come to Boston."

NB: Oh.

VC: So I said, "Okay, that can be arranged." And I couldn't get myself a room, so I called the Arthritis Foundation. There were still some people there who vaguely remembered the name Clark, and they said, "Well, we have some suites we're holding back. If Dr. Christian says you're—we'll give you one of them. So, I got one and I went to Boston. Bill was the only editor who was not still alive. It was a wonderful time to be there with

them all and Chuck, of course, shepherded me, and also Mark Mannick, who was a full professor and his other super-star in Seattle. And I took my step-grandson, the one who was teaching—

NB: James.

VC: —with me. Not James. I took Aaron. I took Aaron to the events because he was interested, and it was really cool. And when I planned my—the biggest meeting I ever planned for the Arthritis Foundation was 800 doctors. That weekend, whatever year it was, there were 14,000 rheumatologists in Boston.

NB: Mm. Oh.

VC: It was wild. The busses went from all the big—from all the hotels from 6:00 am to midnight.

NB: Wow.

VC: To the convention center. I mean, it was hilarious, but I thought Bill would be proud of that, too.

NB: Oh, yes, I'm sure it was such a—

VC: Fourteen thousand rheumatologists? You got to be kidding!

NB: Yeah.

VC: So, I got a chance to see an awful lot of people that were still walking around.

NB: What year was that?

VC: I don't know, about five, six years ago.

NB: Okay, so relatively recently.

VC: Relatively recently.

NB: Yeah.

VC: I must say, I don't see Mark Mannick because he doesn't come to New York too often, but I don't think in all the years since Bill's been dead that Chuck has been in New York more than twice that I have not seen him. Basically, we connect up at least twice a year for dinner or something, and I'm really thrilled to have that loyalty. And as long as Charles is still with us, I got a backing.

NB: That's marvelous.

- VC: It's marvelous.
- NB: Yeah, it's marvelous.
- VC: It's really marvelous.
- NB: So it's been very fruitful—?
- VC: I think the whole thing was terrific. Absolutely terrific. And I enjoyed my affiliations here. We were friends with several couples here. We had a good time together. I enjoyed their friendship. Now some of them just aren't here anymore, but I enjoyed it. I liked hanging the Christmas decorations. I liked all the things that I did. I remember when we had the strikes, and Bill once was operated on for meningioma. Do you remember that?
- NB: Mm.
- VC: Yeah. And I forget who wheeled him into the OR, but it was during one of the strikes. And in all the strikes I said, "Look, I'm very good in kitchens and I'm very good in offices. I don't know anything about patient care, but the rest of it I can do." So I've always participated on that front. We had a very good friend, who also volunteered, who was a Lebanese lady of great means, who always came in and helped taking care of patients because she was good at that.
- NB: That's marvelous.
- VC: Yeah. You do what you can. You do what—
- NB: Yeah. I worked as a respiratory therapist during the time of the strike because the all union staff was striking.
- VC: Striking, yeah.
- NB: So we did everything. And our kids came in a volunteered, too.
- VC: Yeah.
- NB: And they worked at moving patients around, in transport.
- VC: Yeah!
- NB: To get tests done and things like that.
- VC: Yeah, it was terrific! but I would have to say my affiliation with this place—I served on the [St. Luke's Women's] Auxiliary for very many years. I was asked—oh, this is a funny story and it maybe ought to go in the archives, too. Somebody called me up and said, "We'd love for you to join the auxiliary, but we need a CV." So I hung up. I told this to

Bill and he said, "No dice." He said, "I'm chief of medicine. They either take you or they don't take you."

NB: Right.

VC: He said, "CV, forget about it."

NB: Yeah, what's the point?

VC: He said, "They want to know how many times you've been married, who you've been affiliated"—he said, "No, ain't doing this." So, obviously, they took me. They didn't really have much choice. And there was a woman here who was a trustee in the Women's Auxiliary, who was about this high, named Lucy Folkes. Lucy Folkes came from the British American—the fortune was the British American Tobacco Company. And Lucy was one of the smartest little ladies you'd ever met in your life. So the first year I went to these meetings and I would say to her, "Lucy, is this an appropriate question to ask? May I?" And then she finally said to me, about a year later she said to me, "You know, you're off and running. You don't have to ask me anything. You're fine."

So, I met some of the people like Marion Linze, who was here as a volunteer. Some of the women who were involved with the auxiliary—and then we merged with the auxiliary of Woman's Hospital; they were separate entities. And then years later we got together with the Roosevelt crowd, and then it became the Associate Trustees Board. Well, some of the women with their pink coats in the gift shop downstairs put in more hours than staff did. I mean, they were really—they were fabulous! They were married to bankers or lawyers, or they came from money themselves, or they probably did come from money themselves anyhow, and they couldn't be in the workforce because women of those families didn't work.

NB: Work. They volunteered.

VC: They were volunteers because they couldn't sit home all day, and they obviously had household help, but the bottom line is they wanted to do something, and they were fabulous!

NB: Right.

VC: You could learn a lot from all those gals. And I did. Then, because the town isn't big enough, they showed up at various other things [laughs] that I was involved with.

NB: Right. Oh, they also fundraised.

VC: Oh, yeah, big time.

NB: For projects at that hospital staff could compete for.

VC: Right. That's right.

NB: Right up, and it was a very big component of what we called seed money.

VC: That's right.

NB: Because you have to have some kind of background of accomplishment before you could compete for bigger grants, either from the foundations or from the National Institutes of Health.

VC: Yeah.

NB: So these were seed grants that allowed them to get these things done, which the Women's Auxiliary raised the money for. And that was disbanded when we became part of Mount Sinai.

VC: Yeah. Unfortunately.

NB: I know that the people who volunteered in that group felt very hurt.

VC: Almost lost.

NB: Yeah.

VC: And the plaque that's down at Roosevelt is an insult. I've seen it because I was invited as a former whatever—sister. It's on a wall where you walk by it, and you'd never notice it. And I thought that's really shabby because so much effort was put in by these three groups of women over so many years, and they raised a ton of money with the galas. I went to many galas after Bill died, with Hope Preminger.

NB: Right.

VC: Hope was a great friend of mine, and I must say, she went blind, and it's the only friend that I know that I have a guilty conscience about in that I let her down. I became so angry with the Almighty that he would let such a fine woman, who did so much good stuff, that he would saddle her with going totally blind. I was really ticked.

NB: Mm.

VC: I've never reconciled, that and somehow, I just couldn't watch it. So that was one—it's the only time when I really, I just couldn't deal, and I felt very badly about it, but I just couldn't.

NB: Yeah.

VC: I could not.

- NB: Well, she cared. She really, really cared.
- VC: She was a wonderful person. Her late husband and my father knew each other vaguely in Vienna, and vaguely here. He was the film producer, Otto Preminger.
- NB: Mm-hm.
- VC: And some of his films, they're still just as good as when they came out.
- NB: Oh, yes.
- VC: My god, they're fantastic!
- NB: They're classics now.
- VC: They're classics.
- NB: Exactly, exactly.
- VC: But I learned a lot from a lot of these ladies. It was a pleasure to be part of this. I really got a lot more out of it than I put into it, and it gave me a skill set to go on to serve in other things. And in my capacity as president of the Ladies Christian Union, when we were giving up the houses and had to give up our office space, or the big part of it, our archives were in very good condition. They now are at the New York Historical Society.
- NB: Oh.
- VC: And, because of that, I have a male friend whom I don't know terribly well, but do know long enough, who was president of the Children's Aid Society. So the two oldest charities in New York archives are at the Historical Society for anybody who wants—it's all been digitized or whatever, so that anybody doing papers going forward can see what women did as volunteers in this town, starting at the end of the Civil War. It's pretty good. Very cool.
- NB: Maybe I can get you involved in the National Women's History Museum.
- VC: Oh.
- NB: I'm a charter member, and we've been fighting hard to have a museum in DC but we finally got that. Finally, after so many years. But the other is to have it at the same type of venue as all of the museums for men, of which there are numerous in Washington. So that's this next phase.
- VC: Yeah.
- NB: It's very active. They put out a wonderful quarterly newsletter talking about the accomplishments of women through the generations in so many venues. And the

Library of Congress has some of this. But now we're collecting all the women's history into this women's—and that kind of data that you're talking about should be in that, absolutely should be in that.

VC: Well, I'm really pleased that it's at the Historical Society because it is New York.

NB: Yes.

VC: And that I pulled it off. I remember having a big fight with my board at the time because I wanted to give them the money to archive it.

NB: Which is appropriate.

VC: Which was appropriate, definitely, and I made a spiel—that's one time I really did get kind of nasty. I said, "Look, if you want to give somebody a Gutenberg Bible and you don't give them the money to research it, you can keep it."

NB: Mm.

VC: I said, "them's the facts of life, ladies." You have to not only give it to them, but you have to make them be able to use it.

NB: Right.

VC: And if you don't do that, don't bother.

NB: It's useless.

VC: And I won my point. But I'm also pleased that anybody who is researching something can go to the Historical Society, and there's the data base, and you can work with it. Just doing it—sitting in a box it does nobody any good.

NB: Right. Right.

VC: And there's an awful lot of stuff in this country that is just sitting in boxes that are important records.

NB: Mm-hm. Yup. I think that's true. It's true.

VC: And raising money for that is not sexy, which is what—it always has to have a slightly sexy appeal to it to get people to open up their checkbooks.

NB: Mm-hm.

VC: It doesn't matter what it is.

- NB: Can you sum up Bill in one sentence? It's not a fair question, but nevertheless. [Pause] Because it's clear you have enormous love and respect for him, and your lives were rich together.
- VC: Oh, absolutely.
- NB: It allowed you also to contribute so much to us, because if you hadn't tied up with Bill, you wouldn't have done some—
- VC: No! No, no.
- NB: —of the things you did.
- VC: Absolutely not. I would have to say that I think he was, in many respects, the very best of what this country stands for, total integrity and honesty, a goal for himself that he was fortunate enough to be able to achieve, but that he wanted to share with other people. And he wanted other people to have that faith in themselves as well.
- NB: Wonderful. Wonderful.
- VC: I think that he really stood for something that you—and my father did, in a completely field from a completely different country. They stood for something, total integrity, and that I think we've lost and it makes me sick.
- NB: It's the model that—
- VC: Yeah. It makes me sick.
- NB: —is not a prevalent. It's not sexy enough, I guess, because the news only likes the salacious.
- VC: Also, you have to know when to back off, and say, "This is wrong. I'm not going along with it." This is why I left the Ladies Christian Union. There was something fishy going on and they—our investments were with Morgan Stanley, which is one of the finest companies in the country, and some of the younger women, much younger women, wanted to look around. And I said, "Fine. Let's see what's out there." And there was a small group who decided that there was an outfit in Saint Louis. I thought to myself the whole world comes to New York. This doesn't sit. What's going on here? And then it became clear to me that I couldn't do anything about this. I had one more year to go. I was eligible to stay on for one more year as president for five, and I thought, but I have an option, and that is to walk out the front door.

And that is precisely what I did. I said, "Thank you, ladies. It's been a pleasure. I've enjoyed every minute of it but I'm leaving." And any time I ran into anybody who was still involved with that group, I never asked a question. I wanted to be able to walk into a courtroom and say that as long as I was there everything was on the up and up,

and I cannot speak to what happened after I left, but I know nothing about it, and be right.

NB: Brutally honest.

VC: I have never asked a question of anybody, and I run into them.

NB: And they don't offer it, either.

VC: No, they don't offer it and—they don't offer it and I don't ask.

NB: Mm.

VC: —because I really—I thought, huh-uh. Bye.

NB: There you go.

VC: That I can do.

NB: Amen. Well thank you so much!

VC: It was a pleasure.

NB: Now all this is yours.

VC: Okay, great.

[End of interview]