LAUNCH WORK ON 300 MILLION MEDICAL CENTER: Hospitals and Schools to Be World's Gr

Chicago Daily Tribune (1923-1963); Dec 8, 1949; ProQuest

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Hospitals and Schools to Be World's Greatest

BY FRANK STURDY

Earth shovels are scooping out excavations for the first buildings to go up in the 53.8 million dollar construction schedule launching Chicago's medical center district

on the west side.

The district, created by the legislature in 1941, is bounded by Roosevelt rd., Ashland av., Oakley blvd., and the line of the west [Congress st.] expressway, centering on Cook county hospital and the other hospitals and medical colleges nearby. When it is com-pleted, perhaps by 1961 altho the date is not certain, the district will represent an investment of 300 million dollars in land, buildings, and equipment.

Biggest Development of Kind

Existing structures, equipment and buildings represent 100 million dollars, so that when the buildings in this first phase of construction are ready for use the plan to create here the world's greatest medical center will be

half way to its goal

The current building program represents the biggest medical development of its kind in the world, Dr. Andrew C. Ivy, vice president of the University of Illinois, in charge of Chicago professional col-leges, said yesterday. New build-ings will add 1,400 hospital beds to the 4,250 in the district now, a concentration unmatched any-

Antidote to Political Aims

Conception of the great medical district is regarded by Dr. Ivy as the most potent possible counter to the Truman administration's drive for socialized medicine, or, as this eminent scientist more accurately labeled it, political medicine.

"The only way to stop the com-ing of political medicine in this country," he said, "is to meet the demand of sick people for the benefits of new discoveries in the field of curative medicine. Research is now 25 years ahead of service. Altho the answer is neither simple nor cheap, the issue is plain: The demand for doctors exceeds the supply."

New teaching and training facilities for students and interns are necessary if more doctors are to be graduated, and the Chicago medical center project is a step in that direction. Of all the doctors prac-ticing in the United States, about 20 per cent received some or all of their undergraduate or post-graduate education in the district.

Vast Hospital Facilities

Under construction now are the Illinois Tuberculosis hospital, to provide 489 beds at a cost of \$5,000,-000; the veterans' administration hospital, which will have 500 beds and cost \$10,000,000; an interns and resident doctors' residence for Cook County hospital, \$2,645,000; a modernization plan for Cook County hospital, \$2,205,000. An addition to the University of Illinois hospital, to add 411

beds, will be started next month, if the \$7,300,000 it will cost is released by Gov. Stevenson. Other buildings to be completed in the next five years are an outpatient department and regional offices for the veterans' administration,

\$15,000,000; a steam plant that eventually will serve the entire district, \$6,000,000; Presbyterian hospital nurses home, to replace a structure coming down in the path of the expressway, \$1,500,-000; for Cook County hospital, an outpatient clinic, \$1,500,000, and a receiving unit, \$300,000.

Great Loan Negotiated

Funds for the foregoing projects either have been appropriated or will be when they are required. Negotiations for a \$3,600,000 loan to finance student and staff housing for the University of Illinois

college group, Dr. Ivy said, are in progress with the Equitable Life Assurance society, New York.

The 1,400 beds to be provided by the new construction in the 53.8 million schedule will be added to the 3,400 row available at Cook. to the 3,400 now available at Cook County hospital, 480 at Presbyterian, 520 at University of Illinois hospital, and 120 at University hospital, operated by Loyola university.

"We need so many more doc-rs that these facilities should be used to their maximum capacity in training, and that can-not be done unless we have matching laboratory facilities," Dr. Ivy explained. "In medical education, the first two years require labora-tory facilities and the last two years, hospital facilities.

Training Resources Needed

"When the number of hospital beds reaches 5,900, we will be able to train a thousand juniors and a thousand seniors each year, we now have laboratory facilities for only 652 freshmen and sofomores in the three medical colleges in the center: the University of Illinois, Chicago Medical college and Stritch schol of medicine of Loyola university.

"The maximum number that the three colleges can graduate each year is now 326, the actual number somewhat less, because, of course, some of those who enter do not complete the courses. If we had the laboratory facilities to use our 5,900 bed capacity efficiently, we could graduate a maximum of 1,000 doctors each year."

Maximum capacity of the University of Illinois school is now 166 graduates a year, Chicago Medical, 72, and Loyola, 88. Dr. Ivy estimated that as a start toward the 1,000 graduate target of the three colleges, 17 million dollars would be needed for laboratory facilities, permitting the number of graduates to be raised to about 440 a year. Federal Subsidy May Be Needed

The Illinois school needs 6 mil-

lions, and Loyola and Chicago Medical, 5 millions each. Because high

taxation by the government is siphoning off sources of revenue from wealthy individuals who formerly provided endowments for educational institutions, Dr. Ivy believes private sources cannot provide the

money the medical schools need. "We probably will have to have a federal subsidy," he said, "but there is no reason why those who fear federal interference in educational matters should be alarmed if the funds are controled by the schools, and not by strings pulled in Washington. Aside from expanding teaching facilities, many medical schools are running in the red, and they can't even pay young scientists enough to keep them in vital teaching jobs. They go into practice."

More Graduates Needed

All the medical colleges in the country are graduating doctors at the rate of about 5,500 a year, he said, while the estimated demand is for a minimum of 6,500. Financial assistance for all of them is provided in a bill now before congress—Senate No. 1453. The bill would appropriate 50 million dollars as a starter toward 300 millions. It can and must be written, Dr. Ivy said, to prevent federal interference in college administration.

The larger figure would allow an increase of 20 to 25 per cent in the number of doctors graduated each

year.
"Plans are being made by the three colleges in the center for cooperating in making the most efficient use of the facilities we have, and hope to get," Dr. Ivy said. "Only by providing the private medical care that people want can we give a concrete anwant can we give a concrete answer to those who insist that political medicine is the only solution. Political medicine failed in Germany, and it is failing in Great Britain. It destroys the moral re-sponsibility of the doctor to his patient, and of the patient to his doc-"The way to end the natural

monopoly created by the present

shortage of doctors is to have more doctors, and the need for them is very real.

Great Advances by Medicine

"Curative medicine has made great advances in the past 25 years. In the 1920s, we had virtually no brain, chest or heart surgery, we had no insulin. Diabetics simply died after four or five years. Now more doctors are needed to care for our million diabetics, aside from demands for their services for other illnesses that we can treat successfully now, but could not 25 years ago.

"Pressure for compulsory health insurance has been created by medical science. If medicine didn't have something to offer, people wouldn't want it, and we've got to supply that want."

The scarcity of doctors is particularly critical in the fields of tuberculosis and psychiatry, Dr. Ivy said. He reasons that the cause for the small number of doctors electing to treat tubercu-losis and mental disorders is that institutions for caring for sufferers from those ills usually have been built away from medical centers, as is the case in Chicago. Students are interested usually, he said, in learning treatments that they can see make patients

Part of Problem Solved

Part of that problem is being met with the building of the state tuberculosis hospital at the cen-The need for a hospital for ter. The need for a nospital for treatment of acute mental disorders remains. At present, about 10,000 patients a year are admitted to the psychiatric division of the Cook County hospital, where their maladies are diagnosed, but where there are not accounted to allities for treatment sufficient facilities for treatment. They are sent to state detention institutions, where again there are not enough psychiatrists to treat them, and they become expensive, ong term public charges.

"If we had the proper kind of treatment hospital," Dr. Ivy said, "it would pay for itself in live years. One third of the paients could be made well enough o become outpatients after a few weeks of hospitalization, and could go to work, instead of going to institutions as burdens on the

axpayers.'

Great Many Helpless

Another long range goal of the medical center, he said, is space and equipment for rehabilitation of persons physically handicapped by injuries in accidents, crippled by poliomyelitis, or the like.