

With Dennis L. Breo

The unsung public health hero who helped launch the war on tobacco

REVOLUTIONS often begin in strange places. Consider the French antique coffee table sitting in the living room of the Indianapolis retirement home of Margaret Robbins, wife of the late career public health officer, Lewis W. Robbins, MD.

"It was at this very table," says Mrs Robbins, "that the first surgeon general's warning on the health hazards of tobacco was written in 1958 and 1959."

That seminal paper, which went through 42 drafts over an 18-month period, was published over the signature of US Surgeon General Leroy R. Burney, MD, in *JAMA* on November 28, 1959, and helped launch medicine's war on tobacco.

Mrs Robbins has been up "well past midnight" in preparation for this *JAMA* reporter, and a yellowed copy of the nine-page paper now rests on the sturdy walnut marble-topped table. An inscription at the top of the paper reads: "To Mother and Dad—This is what we've been working on—highly secret—'til now! Louie."

The "Louie" is Dr Robbins, whose 27-year career with the US Public Health Service (PHS) from 1941 through 1968 mirrors many of medicine's toughest battles against the big killers—heart disease and cancer. From 1957 to 1965, he was the PHS' first chief of cancer-control programs.

Dr Robbins died this past June just 10 days short of his 81st birthday, but his spirit lives on in the public health programs he helped start and in the medical philosophy he pioneered—prospective medicine—which relates behavioral health risks to the patient's "prospects" for surviving. Today, this philosophy is better known as preventive medicine, and it has become a growth industry. He created the concept that disease and death from pathogens like tobacco are a matter not of chance, but of choice.

The "we" in the *JAMA* inscription refers to Dr Robbins' close friend and professional colleague, Samuel Kirkwood, MD, who is now retired in New Hampshire and who actually wrote the early drafts of the *JAMA* paper. Mrs Robbins recalls:

"Sam was the state health officer in Massachusetts at the time, but he and Louie knew each other from their days together working on the heart disease study launched in the late 1940s at Framingham, Mass. Louie decided that Sam would be the perfect consultant to put together a paper on the health hazards of tobacco.

"Sam would arrive at our home in Washington [DC] in the afternoon, and he and Louie would stay up into the night hashing out how the paper should read. In the early morning, Sam would take his ancient portable typewriter, set it up downstairs on this coffee table, and write a new draft. Over breakfast, he and Louie would start discussing it all over again. Then, the two would go 'downtown' [to PHS headquarters], and all the brass in the surgeon general's office would nitpick the paper. We never did think it would ever see the light of day, but Louie was very determined and he always had a mind of his own.

"Once, I rearranged our furniture, and Sam couldn't find the coffee table in the usual spot. He was beside himself, and Louie persuaded me to relent and to tell Sam: 'You do whatever you need to with this table!'"

The first strong warning

The seven conclusions of this controversial 1959 report were by far the strongest warning to date from the government about the risks of smoking, and the *JAMA* paper preceded by 5 years the first formal warning about tobacco from the surgeon general. Its conclusions bear repeating today:

"(1.) The weight of evidence at present implicates smoking as the principal etiological factor in the increased incidence of lung cancer; (2.) cigaret smoking particularly is associated with an increased chance of developing lung cancer; (3.) stopping cigaret smoking even after long exposure is beneficial; (4.) no method of treating tobacco or filtering the smoke has been demonstrated to be effective in materially reducing or eliminating the hazard of lung cancer; (5.) the non-smoker has a lower incidence of lung cancer than the smok-

er in all controlled studies, whether analyzed in terms of rural areas, urban regions, industrial occupations, or sex; (6.) persons who have never smoked at all (cigaretts, cigars, or pipe) have the best chance of escaping lung cancer; and (7.) unless the use of tobacco can be made safe, the individual person's risk of lung cancer can best be reduced by the elimination of smoking."

Many reactions were predictable. The Tobacco Industry Research Committee called the paper a "warmed-over rehash of old statistics not supported by experimental evidence." A congressman from tobacco-growing Virginia fulminated, "It is shocking that a supposedly responsible government official would castigate the entire tobacco industry on such flimsy evidence."

More surprising, perhaps, was an editorial in *JAMA* itself, signed by newly named editor John H. Talbott, MD, which also questioned the report. Dr Talbott wrote, "A number of authorities who have examined the same evidence cited by Dr Burney do not agree with his conclusions. . . . Neither the proponents nor the opponents of the smoking theory have sufficient evidence to warrant the assumption of an all-or-none authoritative position. Until definitive studies are forthcoming, the physician can fulfill his responsibility by watching the situation closely, keeping informed of the facts, and advising his patients on the basis of his appraisal of those facts."

Today, the facts are in, and their appraisal vindicates Dr Robbins' courageous behind-the-scenes championing of this first warning from the PHS. Even in 1959, however, Dr Robbins was unfazed by the criticism. In fact, he expected it, as his diaries attest. This diminutive physician, who stood "not quite 5-foot, four-inches tall," according to his widow, left behind a mountain of paperwork, including annual "work diaries" dating back to 1941 and 80 additional boxes of records. "He saved everything," Mrs Robbins recalls.

The physician wrote the work diaries according to strict rules. "Things should be stated objectively," he once wrote in directions to other would-be diarists.

"Never give your attitude or impression in the log, but only in a personal diary. State only what actually happened. Be prepared to move in the optimum direction tomorrow by acting on today's facts, not today's feelings."

The diaries from 1958-1959 offer some intriguing insights. On February 4, 1958, he had observed, "At least half the physicians are not convinced or are not sure that smoking causes cancer. They would take strong exception to a federal health agency position on smoking and cancer until they were sure it was warranted. Public health does not get ahead of the medical profession on any public health program, and one so highly charged with emotion should be no exception."

On February 20, he wrote, "There is general agreement that any effort to educate the public aggressively concerning the dangers of smoking and lung cancer would not be practical," and he quoted another physician as observing, "Even doctor education would be an act of aggression."

However, on April 22, quoting another physician, he noted, "Doctors are changing their attitudes on smoking. The impact of smoking on the pathologists who examine lung specimens is considerable. Of 10 pathologists going to a medical meeting, only one smokes."

By May 30, 1959, Dr Robbins was convinced of both his facts and his feelings. "The greatest single problem in cancer," he wrote in his *personal* diary, "is that of cancer of the lung, which is more than doubling every 10 years, salvage of only 5%, no immediate hope of reduction." On July 2, he added, quoting Dr Kirkwood, "Anyone who can read and still smokes has holes in his head."

The paper went forward, but the education of both physicians and patients continues today.

Mrs Robbins observes, "Louie was chief of health hazard appraisal for Methodist Hospital [in Indianapolis] from 1968 to 1974, and Methodist was one of the first hospitals to have a 'smoke-free' environment. Well, even today, it's hard to get in that hospital's front door for all the cigaret butts left behind by smokers who are forced to go outside to smoke!"

Margaret and Lewis Robbins shared a long, exciting life together, right from the time they met in 1938 when he was a young public health officer for the Indiana Board of Health and she came in for a smallpox vaccination.

Dr Robbins acquired his MD from the medical school at Indiana University, did a residency in internal medicine at Methodist Hospital in Indianapolis, and went to work for the Indiana State



Margaret Robbins peruses one of the work diaries left behind by her late husband, Lewis W. Robbins, MD (left).



Dennis L. Erico

Board of Health. After earning a master's degree in public health from Johns Hopkins in Baltimore, he signed up with the PHS in 1941. During the next 27 years, he served in all 50 states and 23 foreign nations, including a stint from 1950 to 1953 as one of the first Americans in Vietnam, where he battled both malaria and guerrilla groups.

Mrs Robbins recalls, "Oh, on many occasions, I would meet him at the airport and we would go out to the car, where he would trade his suitcase of dirty clothes for a suitcase of clean ones. Then, he'd be off on another trip."

"He was a curious combination of formality and informality. He always wore a coat and tie, with only long-sleeved shirts and a fresh handkerchief, even when he was mowing the lawn. The only exception was when he was out on the water boating or fishing. On the other hand, he never met a stranger and he related well to everyone. I could take the middle seat on a plane, fly across the country, and never say a word to anybody next to me. In the same situation, Louie would know the life stories of the people on both sides of him—and, maybe, the ones across the aisle, too."

Gaining a 'survival edge'

In 1965, Dr Robbins founded the Society for Prospective Medicine. In 1970, he wrote the book *How to Practice Prospective Medicine*. And from 1968, when he retired from the PHS, until his death this year, he promoted Health Hazard Appraisal, Inc, as a way for physicians to help their patients obtain a "survival advantage" by changing bad life-style habits like smoking.

Dr Robbins left a rich legacy of diaries and papers, and his widow has enlisted the aid of Elizabeth Van Allen to catalog

and index the papers and find a home for them at a medical library.

Van Allen, who is pursuing a PhD in public health history at Yale and who worked for Dr Robbins on the health hazard appraisals, says, "I consider Dr Robbins a genius, and he was like a grandfather to me, helping to spark my love of public health history."

"His career parallels the recent history of public health, and since his papers are a historian's dream, I want to see that they're properly preserved."

Those papers show that Dr Robbins fought much more than tobacco. Among other things, he helped educate private physicians in the emerging techniques to screen their patients for such killers as breast, cervical, and rectal cancers.

He had his idea for prospective medicine as early as 1949, when he saw in the early Framingham studies how risk factors like high blood pressure and smoking were associated with higher levels of heart disease. He even patented a safety device for firearms. And, he never let up until his death from malignant lymphoma, a cancer for which he knew no preventive measure.

His widow concludes, "Louie was an avid boater and saltwater fisherman, and one of his favorite sayings was this:

"Instead of trying to salvage a sinking ship once it has crashed, a good sea captain will change the course when he sees danger ahead."

In his 1959 paper in *JAMA*, as throughout his life, Dr Robbins was a good captain who has helped millions of Americans change course toward a healthier life. □