

March 1985

BIOGRAPHY INFORMATION - MYLIE E. DURHAM, JR., M.D.

BACKGROUND:

Native Houstonian. Born and reared in the Houston Heights. Now practices medicine 1/2 block from the house in which he was born.

Son of a physician, Mylie E. Durham, Sr., M.D., and Jolly Abercrombie Durham. Both parents deceased. Father was co-founder of Heights Hospital. One brother, Charles A. Durham, M.D., now deceased. One sister, Betty Durham Pritchett.

Married 1954. Wife Patricia Carlton Durham. Also native Houstonian.

Two sons- first born, Mylie E. Durham, III, now resides in Denver Colorado. Second son, Joseph G. Durham (Jody), currently resides in San Antonio with wife, Kathy and two children, Monica, age 6 yrs. and Gregg, age 5 yrs..

EDUCATION -ARMED SERVICES- MEDICAL PRACTICE:

B.A. degree - Baylor University, Waco, Texas - 1940
M.D. degree -University of Texas Medical Branch, Galveston, Tx. -1944
Internship -Jefferson Davis Hospital, Houston, Tx. 1944-45
Surgical Residency - Jefferson Davis Hospital, Houston, Tx. 1945-46

Private Practice (General Practice) Houston 1946- 1951

Captain, United States Army Medical Corp 1951-53. Served in the United States, Austria, and Italy.

Private Practice (General Practice), Houston, Tx. 1953-57

General Surgery Residency - Hermann Hospital, Houston 1957-61

Private Practice as general surgeon in Houston since 1961

Medical Fraternity: Theta Kappi Psi

PROFESSIONAL ACTIVITIES:

Member of Harris County Medical Society, Texas Medical Association, and American Medical Association since 1944.

Served on many committees for Harris County Medical Society, served on the executive board for seven years and was elected county president in 1966. Has continued to work in the county society in various capacities.

Has served the Texas Medical Association in many capacities.

*"Brought it on ourselves" 60% = ER
-interview DRG-*

Served on various committees and councils as well as on the executive board. Was elected president elect of the Texas Medical Association in 1977 and served as president in 1978-79.

Was elected alternate delegate to the American Medical Association in 1967. Was elected delegate to the AMA in 1973. Served as vice chairman of the Texas delegation to the AMA in 1977 and was elected chairman in 1978. Has served as chairman of the delegation since that time.

Served on the TexPac Board for eight years.

Is a member of the Southern Medical Association and served that organization as vice president in 1965-66.

Is president and administrator of the Durham Clinic, a 19 member medical group clinic.

Serves as chairman of the National Medical Advisory Council for American Medical International, a California based hospital owning corporation. Serves as co chairman of the Divisional Medical Advisory Committee for AMI.

Formerly served on the board of directors of the Medical and Dental Service Bureau in Houston.

Served on the board of directors, and as vice president of the Heights Hospital Corp. for many years. Served two terms as Chief of Staff for Heights Hospital, and currently serves as Chief of Surgery for the Heights Hospital Medical Staff.

Assisted with the organization of, and served as first president of the Northwest Branch of the Harris County Medical Society.

Assisted with the organization of, and served as a member of the Congress of County Medical Societies for two years.

Served six years as a member of the Texas Hospital License and Advisory Council.

Is a founder member of the Houston Museum of Medical Science.

Served as medical director of Provident Security Insurance Company for two years.

Served as member of the Board of Managers of Jefferson Davis Hospital 1963-65.

Member of the Board of Managers for the Harris County Hospital District 1967-71. Served as chairman of the Board 1968-70.

Receipient of the Violet H. Keiller Award as outstanding Hermann Hospital House Physician in 1961.

CIVIC AND OTHER ACTIVITIES:

Lifetime member and long time director of the Houston Livestock Show. Served on various committees.

Served on executive board of the Houston Hereford Club, and as vice president in 1967-68.

In recognition of outstanding service to vocational agriculture in the state and to the Future Farmers of America, was awarded honorary chapter farmer degree in 1965, then awarded honorary membership and the Lone Star Farmer degree in 1967.

Served on the Board of Directors of Texas Commerce Bank-Reagan.

Served on the Board of Directors of Central National Bank.

Member of Reagan Masonic Lodge since 1947. Member of the Houston Scottish Rite, and Arabia Temple in Houston.

Lifetime member of the 100 Club of Houston.

Honorary member of Board of Directors for Citizens for Animal Protection.

Was charter member of Pine Forest Country Club, and served as president of the club in 1966.

Member of the Houston Club.

Has worked on innumerable civic and community projects. He, like all members of the Durham family has contributed greatly to the community. The Durham family has been honored many times for their continued loyal support and willing service to the community.

OTHER INTERESTS:

Avid sports fan. Good armchair quarterback and is adept at quoting notable statistics on baseball, basketball, football, and golf.

Tremendous music buff and reads everything from medical journals to murder mysteries.

Incurable collector - often of various asundry things. Primary collection interest is in guns and knives.

Loves to play golf, enjoys tennis, and has a keen interest in a variety of areas.

SUMMARY OF INTERVIEW WITH DOCTOR MYLIE E. DURHAM, JR.

Doctor Mylie Durham, age 65, was born on 21st Street in Houston Heights, one block from where he practices medicine today.

Father

His father was a physician who graduated from the University of Tennessee and who interned at St. Joseph's Hospital where he met his wife, Jolly. He started Heights Hospital in 1924 with four beds in a small house. He remembers vividly from a young age spending time with his father. "In those days he didn't spend too much time in the office because he had to go make house calls and he delivered babies in the home and everything, so he would be gone overnight just to deliver a baby." (Page 3)

Doctor Durham's earliest memories of his boyhood were following his physician father around. "My father liked sports but we never saw a kickoff. We were always late because he had to work. I would have to go and bug him at the office in order to get him to leave to get there to see some of the ballgame." (Page 4)

When Doctor Durham was old enough to drive, he would drive his father to the golf course and carry his golf bag and then drive him around on his house calls. He recalls sitting in a car without air conditioning waiting for his father to finish his house call. "He used to do children's tonsillectomies in the home, and after I got old enough, it got to be where I would go with him and he would put the child under ether and he would fix everything and I would drop the ether in the mask over the child's face. So I helped him operate and take out tonsils in those days. Also my job at the end of each tonsillectomy would be to carry the small child over to the couch in the living room and to see the child was on his side with his head down so he would not aspirate anything when he started waking up." (Page 4,5)

Doctor Durham also remembers the first operation he ever saw. His father let him come in the operating room when he was 14 years old. He said this would not be permitted today. "There wasn't any privacy or anything like that, and we didn't worry about malpractice too much. He gowned me and I walked in and he showed me how to scrub my hands and everything. So they put the gown and gloves on me and told me where to stand. He was fixing a hernia, and it wasn't too long before I felt really hot and started to faint." (Page 5)

Despite the fact that Doctor Durham spent all his time following his father around, he said his father told him not to study medicine. "In fact, he always told us the bad things about medicine. He had a favorite saying. He said, 'If you study peanuts, as hard as you study medicine, the whole thing about

peanuts, you will be much richer, you will work less, and you will have more knowledge about one thing than you will about medicine.'" (Page 9) Both he and his brother, Charles, studied medicine.

Brother

Doctor Durham had one brother, Charles, who became an obstetrician and gynecologist. They were very close friends and colleagues growing up. They attended college together but went to separate medical schools. Mylie went to the University of Texas at Galveston and Charles to LSU medical school in Louisiana. His brother died suddenly when he was 44. He had a stroke. It happened one Sunday afternoon while he was home. He had a convulsion. He and his father helped him out of the first one and shortly thereafter, a second one occurred. "So I brought him over to the hospital and did a tracheotomy on him so he could breath, but the next day he died and he never did regain consciousness. Prime of his life. I never did get over it. I guess I never will. We were the best of friends. He was a great guy. (Page 7)

Mother

Doctor Durham's mother, Jolly, was a daughter of one of the Abercrombie brothers. "But he was the other side of the Abercrombies that hit 14 dry holes in succession and lost all his money and never did recoup it." (Page 2) He describes his mother as a very strong role model in his life. "We had a lot of fun together. She liked to read a lot and she read all the time. She was a very intelligent lady. She developed me by insisting that I start reading at an early age. We got the most enjoyment out of it. We were very good friends and good buddies. She was a strict disciplinarian."

Early Education

When Doctor Durham was 8 years old, he developed bronchial asthma and two years later had pneumonia twice and nearly died. In part, because of his illnesses as a young child, he developed a sympathy for people who were ill. He had to attend high school at Shriners Military Institute in Kerrville. It was here he developed his love for a strict military life and this influence remains with him even today.

College

Doctor Durham and his brother both attended Baylor University in Waco. He was very interested in chemistry while he was there. He

worked as a lab assistant in chemistry.

Medical School

In 1940 Doctor Durham went to the University of Texas Medical School in Galveston. After being there for two years, the war came along and he volunteered for the Army. He was sent to Fort Sam Houston for basic training and graduated as a First Lieutenant in the Army. In 1944 he came to Houston to intern at Jeff Davis Hospital. Ten percent of the interns were able to complete their residency and he remained one more year as a surgical resident. He wanted to return to the Army after that but was denied acceptance because of his history of chronic illness. (Page 20)

Early Medical Practice

Doctor Durham returned to the Houston Heights to work as a general practitioner with his father and brother, Charles. "The most difficult thing I had to overcome when I came out here was that my name was Mylie Durham, Jr. I had people come in that would not let me give them an IV because I was young and raised with them. They called me Junior. 'Junior, call your dad and ask him to do this.' It was very humiliating, especially to someone who thought he was the greatest doctor in the world. It was hard to overcome that stuff." (Page 21)

He described general practice in the 40s as the greatest thing in the world. (Page 23) He said the Heights Hospital had the third largest emergency room in Houston at that time. He would take one week at a time in the emergency room. (Page 23) " There would be two or three days when I wouldn't get home doing my own practice and working in the emergency room. In those days we made house calls. We made 14 to 16 house calls a day. We didn't have any office hours. People would come in and wait. We did close the office at six o'clock at night, but if you got there before that time to register, we would see you. So we would work until eight o'clock at night and then we would go to the hospital. We would make rounds and then house calls. It was not uncommon of me to get home around 11:30 at night, eat supper, and go to bed." (Page 23)

Doctor Durham said people had respect for you as a doctor in those days. "There wasn't a lot of red tape, paper work, and the fear of being sued that there is right now." (Page 24) You were the doctor and what you said was the law. People had the utmost respect for you. They would do anything they could to try to pay you. It was just a great thing to do. We were seeing people who

were sick. We were really helping people. It was just a good feeling." (Page 24)

Doctor Durham said there were no answering services and no office hours. "So the home phone was really something. That phone was everything. Availability to that phone was really something. I would get home in the afternoon and there would be 25 numbers for me to call." (Page 27) This was a task his wife performed and one which she grew to dislike very much.

Return to the Army

Doctor Durham wanted to return to the Army when the Korean War came along because he was in a very unhappy marriage. He had a letter from the Armed Forces saying he was not qualified, but he talked privately to friends of his at the Draft Department who said they would help get him in. He said that some people thought the military was too confining, but for him it was a freer atmosphere. "You don't have to worry what you will wear every day." (Page 32) Doctor Durham said his father raised hell and did everything he could to get him out. He had already told the Draft Department that this might happen and that no political attempts should be made to keep him at home. He said his brother knew how unhappy he was in his marriage and understood why he wanted to go. (Page 34,35)

Doctor Durham was first sent to Camp Polk in Louisiana where he was a supply officer of a medical clearing house. (Page 35) They would repair the people injured in the war. Then he was sent to Austria where he was made commander of a company in Salsburg. He said he missed the practice of medicine terribly but he enjoyed being back in the military life. "I had to choose half of the company to go and be saved, if anything happened, and half of the company to stay and be wiped out. So I chose." (Page 37) His job was to get the company in shape and they simulated casualties in various locations around Italy known only to him and his driver.

By this time it was 1952 and Doctor Durham heard from his father who had his power of attorney that his wife wanted a divorce. This was good news for Doctor Durham.

He was doing surgery in a small hospital which was in the back of a 3,000 bed Italian hospital. He remembers operating on an 18 year old boy one day who doctors thought had appendicitis. "But he didn't have appendicitis. He had a ruptured ulcer in his stomach that he had perforated. So I closed up the little incision that I had made for his appendix and made another incision and repaired his ulcer. Well, they had had three

soldiers previously that had perforated ulcers and they had sent them to the Italian hospital. All three of these soldiers died. The Army in those days didn't have what we call a nasogastric tube. They were long rubber catheters that we would suck out the stomach with. I made one of those suction and got this tube and put him on suction which they didn't use in the Italian hospital at all. The boy lived and from then on, I was a hero. A big surgeon to those Italian doctors and they would call me over there to make rounds with them." (Page 39)

Return to the States

In 1953 at age of 34 Doctor Durham returned to the United States and lived at home. "My father, who was old-fashion, thought I should have somebody home to answer the telephone. That's what I tell my present wife...why we got married. Because I had to have somebody answer the telephone." (Page 42) Doctor Durham met his present wife at this time and fell very much in love. "Something grabbed me like it never had grabbed me in my whole life. It still has got me. I don't know what the hell happened to me. Never thought I would do it." (Page 43)

Doctor Durham returned to general practice doing obstetrics and surgery. He said one of the only specialists in those days was a proctologist. He says that specialists today have affected the personal medical care that people use to receive. "It is not uncommon for six doctors to see one case. We all have our little areas to take care of with the patient. I don't think that is good. (Page 46) "I use to operate on a family member and I knew them and I knew the whole family. I delivered a baby for one or two of them. I didn't have any trouble with the family. If something serious happened to the patient, or if they had a serious illness, I was more or less there as a friend, a doctor, an advisor, all kinds of roles that we served in those days besides just being a doctor. Now I am a surgeon. I come in, I cut somebody up, and then I leave. I take care of them and I see them in the office, but I don't get close to them like I use to get close to them. I think that it makes for better care to get close to the people and for those patients to have confidence in you. Medicine has become impersonalized, it really has. There is just a total difference in that respect. The doctor was part of the family in those days. Now he stands off from the family and in some cases he is an adversary to the family. Like a lawyer would be. I don't get close to people anymore and that worries me because I know I am not giving as much total care as I use to give when I was doing general practice. (Page 45)

Doctor Durham says that the way medicine is practiced today

simply costs the patient more. "I don't care what you say. There are some specialties now that don't need to see that patient every day, but they see that patient every day. When an Infectious Disease consultant comes in to see the patient and order an antibiotic, he says that I feel like this antibiotic should be changed and he sees the patient every day. What the hell can he do for that patient every day? You know he has given the antibiotic. Why can't he see the patient once a week or once every four or five days? But he doesn't do that. he sees the patient once a day. I see the patient once a day. So many times a doctor refers me to a case and I operate and he doesn't have anything to do with the operation, but still he visits that patient every day. We see family practitioners do this and internists do this. What can they do for the patient? The patient is recuperating from surgery. He has a clean wound. There is no reason for them to visit every day and to charge the patient for a visit. I think we should look at things a little bit." (Page 46)

Influential Figures

Doctor Durham remembers his surgical residency at Hermann Hospital when George Hermann's will was strictly enforced. "Most people paid very little, if anything, to come and be treated in the hospital." (Page 50) "It wasn't like your old charity hospital. We had good patients who paid something, but at least half of them, I would say, did not pay anything. It worked very well in those days. Of course, that was before Medicare." (Page 51)

He recalls one of the most influential figures in his life was a surgeon with whom he trained named George Waldron. He said that he looked and acted like a doctor and was a very professional man. (Page 52) "He was also an excellent surgeon. He was the kind of surgeon I would want to be. I hope I am like that. He had good training in the first place. Secondly, he had excellent judgement. Judgement that most surgeons do not have. He could do operations very fast and very quick and very thorough. He didn't waste any time during surgery. I could see how well they got along by being operated on pretty fast and doing such good work. I really had the utmost respect for him." (Page 53)

The second influential figure in Doctor Durham's life was Doctor Raymond Gregory. "In medical school I hated him at first because he was so tough and so hard on the medical students. He was a pharmaceutical teacher in my sophomore year. He was a real disciplinarian, but he was fair and honest and honorable and very smart. He just demanded everything of you even though we were so young and we didn't think we should give him that much. But we

did because of him. The funny thing was that all the sophomores were glad to get through with the sophomore year and to get out from under Raymond Gregory's clutches. Sure enough when we got to be Juniors, they transferred him to the Internal Medicine department. We had him for our Junior and Senior years, too. So he had a great influence on me." (Page 53) He is a man who is intelligent, a tireless worker, but also one who has good judgement. Medicine, so much of it, is not black and white. It is gray. It's judgement, You have to have good judgement when you do things in medicine. Especially when you are busy and you are influential and you treat a lot of people. He had it. He was so good. He demanded so much of his students. He also remembered our names. He would see us on the street and you would think he didn't know you and then he would say, 'Hello, Mylie, how are you?" (Page 54)

Doctor Durham says that the 40s and 50s were the golden years of medicine to have practiced medicine as a general practitioner. "Medicine in those days was a freer type of practice." (Page 56)

"There wasn't the weight of a lot of things like malpractice, governmental intervention, and other things, like third party interventions." (Page 56) In those days you felt like you contributed something. "Your patients were your friends. You felt like you were respected. Medicine had an aura of respect and dedications to it." (Page 57) He said patients paid their doctors. "They felt obligated to you because they liked you and trusted you. I remember in those days that we made many house calls. It wasn't uncommon to make a house call. You would see someone in the home that was sick, and you would say, I will call in this prescription or medicine and I want you to call me in two days or I will be back to see you tomorrow. So you would get ready to leave and they would say, just a minute, doctor, I have cooked something for you or I have made something for you. Pie and coffee. Here's a hot meal for you. You know, if it was late at night. People were always bringing you things. In this area, there were alot of truck farmers and they would bring you things." (Page 57,58)

Doctor Durham says that the advent of Medicare and now DRGs, insurance companies, and the numerous reports have changed the doctor/patient relationship. (Page 58)

Doctor Durham recalls that in 1966 when he was president of the Harris County Medical Society they decided they would try to do something in order to preserve the doctor/patient relationship. "We got up the individual responsibility program. That was not taking assignments. Our contract was directly with the patient

and I would serve the patient and the patient would pay me. If the patient didn't have insurance that was fine, but he still had to pay me. If they had insurance, then the contract was between that patient and the insurance company. It was not between me and the insurance company. I didn't have anything to do with the insurance company. My contract was with the patient to take care of them." (Page 59)

"So we would bill the patient. The patient in turn would submit the bill to the insurance company along with an attending physician statement. The insurance company would pay them and they would pay us. That was the whole individual responsibility program in a nutshell." (Page 59) Doctor Durham has maintained this system of payment in his clinic and they have enjoyed a 95% collection rate. He says this system makes the patient responsible and it works out very well. (Page 60)

Doctor Durham says that medicine is more of a business than a profession today. "We got a product to sell, but nowadays it is a bad product a lot of times. In some respect, there is still an adversary feeling between the patient and the doctor. I don't know if people like doctors anymore. I don't know whether they really trust them. I don't think they really know anything about them. I think they think they make more money than they do. Granted, don't misunderstand me, I think we brought most of this, or at least 60% of this, on ourselves." (Page 61)

Doctor Durham feels that the development of the emergency room and the emergency room clinics have made people think they are getting a good deal when they go to them, but, in fact, they are just having to pay more for basic medical care. He said the emergency room was never designed to be a clinic where you could see your general practitioner. That is what it has involved into today. When doctors stopped making house calls, the patients started to go to emergency rooms. He thinks the profession has gotten too caught up with the value of high technology. "I think we have quit examining the patient. I think, by and large, we have quit sitting down and talking to the patient and spending time with the patient. It is too easy to get a CAT scan on the patient nowadays and also this looks good to the patient. The patient wants all these things. They read all about these things. Patients are more informed these days." "I think we have quit taking care of the troops, really taking care of them." (Page 66) He said that a lot of doctors have become servants of technology and, in a way, the patients have also become its servants. It is exotic and it is new.

He says that today patients who come to the hospital's ER will

have 27% of their bill due to nothing but defensive medicine.

Medical Costs

Doctor Durham says the government made a mistake when they passed the Medicare law. "They passed a law and they had no idea what it would cost. They had no idea how they would be extended and now they are trying to do something with it in order to cut costs. The only way they can do it is with the DRGs now and the PROs. Maybe something like this will work. But there has to be some sort of means test as to who gets medical care. The millionaire who is over 65 doesn't have to pay any more for his medical care than somebody who makes \$30,000 a year. There has to be some means test someplace with all of this. You just can't give everybody the same thing. They didn't do that with income tax. Why did they do it with health care?" (Page 71)

Doctor Durham says that doctors' fees have not risen like hospital costs have risen. "People confuse medical care with health care. I give medical care. I am one of the health care professionals in this country. Health care, or hospital care, is where all the rise in health care costs is and this is because of the high technology labor. These people who run the CAT scan are well trained and command a big salary. It is that way with the people who run the ultrasound. Nurses, nowadays, are finally realizing that they should have been paid more a long time ago. Labor is a big cost in hospitals and most people don't understand that. It really is a big, big percentage of the costs. Medical care and doctors' fees, haven't risen like hospital costs have. Hospital costs are so high." (Page 72)

"When nurses, laboratory technicians, and all the different aspects of hospital employees begin to unionize, hospital care costs will again rise." (Page 73) He says that nurses today have become quite professional and are certified and Medicare pays for them. Certified nurses are demanding higher salaried positions in the health care system. There is less bedside nursing going on today. The patient is more computerized and isolated. There is less human attention to the patient and less emphasis on bedside nursing. There are more chiefs and fewer Indians.