The Medical College of Wisconsin: A brief history

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The first successful medical schools in Wisconsin were located in Milwaukee: the Wisconsin College of Physicians and Surgeons, established in 1893, and the Milwaukee Medical College, established in 1894. By the end of the century, each school occupied an impressive building, with adjacent hospital facilities. St. Joseph’s Hospital was across the street from the Wisconsin College of Physicians and Surgeons; Trinity Hospital was in the same building as the Milwaukee Medical College.

These proprietary schools were soon threatened with loss of accreditation since tuition alone could not provide for the educational requirements, much less provide a profit. On the verge of collapse, they were salvaged by their consolidation under the auspices of Marquette University in 1913, forming the Marquette University School of Medicine. The school was located in the building formerly occupied by the Wisconsin College of Physicians and Surgeons. Dr. William Jermain became the first dean.

A conflict over termination of pregnancy when the life of the mother was at risk soon led to the resignation of a number of prominent faculty members who felt that the position of the Catholic church was interfering with their freedom to practice medicine according to their best medical judgment. Dean Jermain was able to guide the school through that troubled period, but the conflict over Catholic philosophy remained an underlying issue that would periodically surface over the next 50 years.

By 1919, financial difficulties had become a serious threat to survival. A major fund drive propelled by the promise of a matching gift from the Carnegie Foundation established an endowment of $1 million and set the school on a sound fiscal course. A major gift from Harriet Cramer enabled construction of a new medical school building on the Marquette campus under the guidance of the Regent, Anthony F. Berens, SJ. The Harriet L. Cramer Memorial Building began use in 1932.

Dr. Eben J. Carey, formerly head of the Department of Anatomy, was Dean during World War II, a period when progress was impeded by shortages of faculty and an accelerated curriculum. Carey died in 1947 and was succeeded by Dr. John S. Hirschboeck, an alumnus and practicing physician.

As was true of many other Veterans Administration hospitals, the VA Hospital in Milwaukee was unprepared for the influx of many veterans of the recent war. The local hospital was among the first in the country to become affiliated with a medical school with guidance by a Dean’s Committee. Faculty members were based at the hospital to oversee care of patients as well as to supervise residents and students.

In 1952, the Liaison Committee for Medical Education (LCME) cited the lack of full-time faculty in the clinical departments as the reason for placing the school on “confidential probation.” This was a serious blow to Hirschboeck, who had already begun recruiting full-time faculty, a process that would consume much of his efforts and much of the school’s financial resources. The first full-time member of the Department of Medicine, Dr. William W. Engstrom, arrived in 1950. Other full-time department chairmen followed: Dr. Edwin Ellison in Surgery, Dr. John C. Peterson in Pediatrics, and Dr. Richard Mattingly in Obstetrics.

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and Gynecology. Many more full-time faculty members were added in both the basic science and clinical departments, but practicing physicians continued to contribute significantly to the educational efforts, especially in the hospital and clinic settings.

The death of Curtis Froedtert, a local industrialist, in the early 1950s brought a bequest of funds for construction of a hospital, which trustees of the estate determined should be a teaching hospital. That possibility was enthusiastically received by Hirschboeck, who proposed the development of a medical center in Milwaukee, with the medical school as a major component. That teaching hospital was to be called the Froedtert Memorial Lutheran Hospital. Ties to the Catholic medical school posed a conflict, and, along with other difficulties, would delay that development for some 25 years.

By 1950, the Cramer Building had become overcrowded with the addition of new basic science faculty members, and library space had become woefully inadequate. A fund drive led to construction of a major addition to the building in 1954, expanding research and office space, as well as library space. A major part of the funds had come from the Carey estate, and the addition was named the Eben J. and Helene M. Carey Memorial Library. The Milwaukee Academy of Medicine, a private organization devoted to establishing a medical library and promoting educational meetings, donated its substantial book collection to the medical school in 1953.

Dr Gerald A. Kerrigan, a member of the Pediatric faculty, succeeded Hirschboeck as Dean in 1965. The school was on a much firmer academic base, but the addition of many faculty members had been a drain on its financial resources. The medical school had been a separate corporation from the university since the late teens, a condition imposed by the Carnegie Foundation to assure that its contribution would benefit only the medical school. Father John Raynor, president of the university and also the medical school, made the difficult decision to separate the medical school from all ties to the university in 1967. In doing so, it was hoped that an independent school could raise funds from sources not previously likely to contribute to the Catholic school, including the state government. The school changed its name to Marquette School of Medicine. This separation from the university generated mixed emotions among many members of the faculty and the alumni.

The school went through the most devastating period of its existence during those years. Deficit spending culminated in a crisis in 1969 when the medical school was insolvent. It had expended its endowment funds and had sold the Cramer Building to Marquette University, but still was going deeper into debt in order to continue operations. The Board of Directors was unwilling to allow the school to close, and appealed for assistance to the Greater Milwaukee Committee. That influential body recognized the importance of the school to the community and the state, and resolved to use its influence to solicit help from many sources. Funds from alumni, the medical establishment, local organizations, and the general public enabled the school to continue operation.

A request for financial assistance from the state of Wisconsin was approved by 1970, allowing the school to move forward again. Support for the request had come from a Task Force appointed by the Governor, who then requested that the legislature allocate funds. The Assembly and Senate approved an appropriation, the State Attorney General approved the request as serving a public purpose, and the act was deemed constitutional by the state Supreme Court. The subsidy of $3.2 million over the two-year budgetary period set the school on a sound financial track. Funding for this subsidy was to come from an increase in the tax on beer, from $1 to $2 dollars a barrel. This tax had not been raised since it was imposed in 1933. In recognition of this support, the school would add governor’s appointees to its board, and give preference to Wisconsin residents in admission policies, but would continue as a private institution.

In an effort to establish an identity separate from Marquette University, in 1970 the medical school was renamed the Medical College of Wisconsin. Despite misgivings on the part of faculty and alumni, many of whom felt that the name would be confused with the University of Wisconsin, both Marquette University and the Medical College were successful in raising funds and expanding their programs.

A recommendation of the LCME was consolidation of the basic science and clinical teaching activities of the school. The basic science courses were taught in the Cramer Building.
on the downtown Marquette campus; the junior and senior years were spent largely at the County and Veterans Administration Hospitals some distance away, where most full-time clinical faculty members were based. The Milwaukee County Hospital served as the major teaching hospital, so it was logical to consider construction of a new medical school building on that site. Planning was underway to have that site serve as the base of the developing Milwaukee Regional Medical Center. Negotiations between county government and the institutions to be placed there met with many snags, but support from many sources, especially the County Executive John Doyne was successful in resolving these problems.

The Board of Directors of the independent medical school had elected one of its members to serve as president on a part-time basis. In 1975 the Board elected David Carley as its first full-time president. Carley was an entrepreneur with political connections and a dynamic personality. Although plans for a new building had been developed under Kerrigan’s guidance, financing had stalled, and was finally arranged by Carley. The new Basic Science Building on the Milwaukee County grounds began occupation in 1978. The Curative Rehabilitation Hospital had already located to that site, and the Froedtert Memorial Lutheran Hospital would open there in 1980.

Milwaukee Children’s Hospital, later renamed the Children’s Hospital of Wisconsin, faced a dilemma. Its facilities in downtown Milwaukee were outdated and it wanted to build a new hospital. Many of the practicing pediatricians on the hospital staff preferred a downtown site while the full-time faculty pediatricians favored a move to the developing medical center. After several years of debate, the decision was made to build the new hospital at the medical center, adjacent to the County and Froedtert Hospitals. The new hospital opened in 1988, was soon overcrowded, and an addition was completed a few years later.

With a new home for the basic science departments and adjacent hospital facilities for clinical faculty members, the school continued to develop and expand its resources. New problems continued to arise, especially the need for more space. In 1988, support from the Bradley Foundation, the Kresge Foundation, and the Midwest Athletes Against Childhood Cancer (MACC) Fund allowed for major expansion of laboratory and faculty office space, which became the MACC Fund Research Center.

Dr Edward J. Lennon served as dean from 1978 to 1985, after which he was appointed president, following Leonard Cronkhite. Dr Richard A. Cooper succeeded Lennon as dean. During his term, the Basic Science Building was expanded to include a larger auditorium and classroom space, an expanded library, and additional research laboratories. Dr Lennon retired in 1989 due to poor health, and T. Michael Bolger was named president. Dr Cooper left the dean’s office in 1995, and Dr Michael Dunn, a 1962 alumnus, was appointed dean.

The Medical College of Wisconsin, the heart of the Milwaukee Regional Medical Center, has survived many turbulent times. New problems undoubtedly will continue to arise and will require innovative solutions, but, looking back, it is probably safe to say that the first hundred years were the hardest.
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