

## INTERVIEW I

DATE: June 5, 1985

INTERVIEWEE: MIKE THOMAS FRANCIS GORMAN

INTERVIEWER: Clarence Lasby

PLACE: Mr. Gorman's office, Washington, D.C.

### Tape 1 of 3

L: Let me ask you first just a few words about your early life, where you started your journalistic career, and then leading into how you got started as a protagonist for better health.

G: Well, very simply, I started out to go into the academic field. I went to New York University, undergraduate and graduate, and studied under Henry Steele Commager. The Depression came along and it was very difficult. We had a forty-one member department, and I was what you would call a student instructor on a fellowship. I was getting thirty-two dollars a week. And my father had died. He was depressed; he had made a great deal of money but the Depression wiped him out. My mother was ill. I had a younger brother who wanted to go to college. And I figured I just cannot afford these things, so I went to Dr. Commager and said--or to Dean Musad [?], the dean of the graduate [school], I forget--and I said, "You know, I have this covetous fellowship," which in those days was fifteen hundred dollars. It was very big money. It would be like ten thousand dollars today, the Penfield graduate fellowship in American history. I said, "Now, how long before I go from instructorship to an assistant professorship where I can make twenty dollars, twenty-five dollars more, in a forty-one member department?" He said, "Within a decade." I said, "I can't win. I just cannot win. I'm in debt now two thousand dollars."

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L: It's still the same today. (Laughter)

G: It's still the same. But I said, "I'm in debt and I cannot be in debt. I cannot abide it." So I went off and decided what do I really want to do. Well, I had been on a college newspaper, I'd just been an associate editor of the college newspaper, but I liked to write and that sort of thing. And then there was an opening at the *New York Herald Tribune*. A colleague of mine had gotten on the *New York Herald Tribune* and said, "Well, you can come on here, and we do good and you'll certainly get more than thirty-five bucks." I don't know what they paid me in the beginning but about forty-five. "At least you can move up and you can do what I'm doing." This is John Radosta, R-A-D-O-S-T-A. He said, "I do magazine pieces on the side, and you can really--you know, you have some freedom that you don't have in the academic world. I mean, you don't sell the stuff that you write for the *American Historical Review*. It doesn't sell."

So I did that and that led me to all those things. Then that was just before the war opened. Then during the war I was with the 45th Division--it was an Oklahoma division, which I had just bounced into by accident. I was delighted by them. I wanted to get into intelligence. I could have gone into the press thing and could have gone on the press side of it, you know, got with *Stars and Stripes* or done something else, but I didn't want to do that. I figured if you're in the war, you might have volunteered because you felt pretty angry about Hitler, and I decided you don't get on *Stars and Stripes* to get hold of Adolf. So I thought intelligence would be an interesting area to get into and find out what they were up to, because I figured they were smarter than we were maybe, and they were damn near smarter than we were.

So in the course of my ramblings I ran into Walter Harrison, who was the chief of

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intelligence for the 45th [and] later went way up the hierarchy, [and] later went over to the Pacific for [Douglas] MacArthur, became his chief of intelligence and defied MacArthur and was jailed for a year by MacArthur. I was jailed, literally jailed. But that was MacArthur; he was always a great libertarian. But Walter said to me one night when we were drinking somewhere, "Why don't you come down to where I'm going? I am the managing editor of the *Daily Oklahoman*." Now he had come out of the *Des Moines Register Tribune*, a superb newspaper, and he had gone down there because he was very impressed with the *Oklahoman*, which is a darn good newspaper. I thought about it, and so one night I got really buzzed up and I called him up and I said, "Are you still serious about that?" He said, "I've been waiting since I got back here. Where are you?" I said, "I'm in New York and I'm bored with it. I'm a native New Yorker, but I'm bored with it. I'm bored with everybody I see and everything I do. Everything is business as usual and I don't want this."

So I went down there, and I started in and within six months Walter had gotten into a flap with E. K. Hill, [E. K. Gaylord] who lived to be a hundred years old and is the oldest publisher in the business, started the newspaper, before statehood, in the Oklahoma Territory. He came from Colorado in 1902. The guy lived to be a hundred years old, made a fortune. Cold, puritanic, severe, the absolute--well, not the absolute publisher, because most of them are really bastards, but he was super puritanic. But when Walter left I thought, well, I'll get out of it, but then his successor also proved to be a very thoughtful managing editor.

Then one Saturday I was sitting there doing Saturday duty, which is the dirtiest duty of all because there isn't much coming in. The Sunday paper has gone to bed. You're just hanging around for some thing. But somebody called up and said there's been a murder down at the state mental hospital. Just a call came in. All right. It's twenty miles away at

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Norman, which is the site of the University of Oklahoma. So the managing editor, who happened to be on duty that day, a great friend of mine, Jay Peach [?], looked around to see--there were just a few of us, a skeleton staff--and said, "Gorman, cover this thing, will you?" I said, "I don't know where the hell the place is! Now what do you want me to do? What is it, a nut house? I've never been in a nut house before." He said, "Well, there's a charge that this patient was killed and there is a whole flurry about the thing. It's probably not very much, but we've got to cover it. I mean, what the hell? It came in over the police bulletin." And the reporter who covers police--the cop shop, we called it--was out, as usual, Saturday.

So I went down to this medieval fortress, absolutely medieval fortress. I couldn't get in. I went to the gate and said to the guard who was in front of this big gate--I couldn't find him. I asked the cab driver to take me to the mental hospital. He said, "You mean the university, don't you?" I said, "No. It's the mental hospital, Central State Hospital." "Oh," he said, "you have a relative there?" I said, "No. I'm a newspaperman." He said, "You don't want to go to the mental hospital. Nobody ever goes there except a relative, and they very seldom go there." He had this reluctance to go there, to pull up to the gate.

So he pulled up to the gate and the guard asked me for my identification. I said, "What do you mean, my identification?" I showed him my *Daily Oklahoman* press card. I said, "This is my identification." "Well, what's your relative's name?" I said, "Look"--still being pleasant, I knew the drill that was going to happen--"I have no relative there; I'm interested in finding out if a patient's been killed here. I've got a report. It came to our Oklahoma City bureau," and so forth and so on. He said, "Well, we can't let you in unless you have a relative." I said, "Look, I'm going to stand here all day, fella." He had really got

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me annoyed at this point and [I was] telling him, "I'm going to stand here, right here. So you better get that call box over there and you better call whoever is in charge here and tell them."

Well, it took about half an hour. We waited in the broiling sun in Oklahoma, hot July, and got inside and started to move around. Well, I didn't want to get announced to the superintendent, announced to [inaudible] office. I just moved through the corridors, went upstairs, saw a row of cells where patients were lying on the floor naked in their own excrement. Oh, definitely, they were all up on the third floor naked; I can still see it to this day. Being a first impression, it's very difficult. It imploded on me. I couldn't stand it. I figured, this is a state institution, we pay for this thing, and, you know, what are these people, what is this thing? If there are three thousand, six hundred people here, because I just had a rudimentary--they gave me a little fact sheet, a very little fact sheet as you may recall.

So when I got through--I said to the guy, I think it was the assistant superintendent, who was handling the hospital that day; it was a Saturday. And I said, "We have a report that this patient has been beaten to death." He said, "Well, you know, this happens. The guards subdued him and I guess they were just too violent; he attacked them," some such nonsense like that. So I took down the stuff for writing this, and I said, "Well, you know, there has to be a coroner's inquest on everybody in a public institution, anybody's death. There must be a coroner's inquest." I know it because I covered the police beat. He said, "Oh, no, we don't have to do that here." I said, "Well, where is the guy? I want to see the patient. I want to see the patient." "Oh, we dump them out in a field. He's been buried. We don't know where he is."

I got it all down, took it all down, and wrote it straight as a story, just straight, no

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editorial line, just straight. It landed on page three I think, not page one. I raised hell about it, "That's a page-one story. We've got to wake people up here." I went back and figured, well--I felt so--we were going out that night, came back, and my wife was also a newspaperwoman, she was the woman's page editor, and hard news. She didn't want any fancy stuff; she was hard news. She covered the cop shop during the war, you know. She's a hard-news gal, political. I said, "You know, I can't even look at food tonight. I don't know what the hell we went [to], it was a big Democratic Party or something like that. I went there and I just couldn't get it out of my head, and all day Sunday I was in a terrific depression as to what I would do.

Now, I decided by Monday morning I would forget about it. I mean, I cannot do this thing because there are four of these hospitals. This is a big thing. It's a conservative newspaper, very conservative newspaper. It's not like I'm working for some radical leftist sheet in New York. I'm not. And they don't want to expose things, particularly in Oklahoma, because they're very insecure psychologically. I understood this. Like Texas, they were very insecure about how they want people to look [at them] not that they're all dumb cowboys and rednecks, you know, and that sort of thing. And I said, they're not going to take lightly anything like this, about institutions, you see. I didn't even know the [inaudible]. I hadn't touched this area, I hadn't touched the area, didn't know a thing about it. There are only a few books in psychiatry that interest me. I've read a little Freud, not a hell of a lot of Freud, but what I read interested me, you know, things like that. I read Karl Menninger's *The Human Mind* when it came out in the early thirties, and that's about all I knew. So I wasn't an authority. There were practically no psychiatrists in private practice in Oklahoma City, just a couple really. It was just the dark ages.

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So I dropped it and I went back to doing what I was doing, had a lot of other stuff to do, and I was covering the state legislature during a session, which is active and which I like to do. But I couldn't get the damn thing out of my mind. So I went back--I got to talking to the *Daily Oklahoman's* correspondent at the Capitol, a very conservative guy named Otis Sullivant, a very decent guy. And I said, "Otis, I'm still thinking about this thing that happened out there. What should I do? You've been in this thing twenty-five years. How has it gone for you? You're a good reporter." He said, "Mike, I would follow this thing, but you're going to get all kind of--I tell you what you're going to get hit with. It's going to be a mess, and the guy who runs the institutions is not the full-time guy; he happens to be the president of Coca-Cola, he's the chairman of the board, Virgil Browne [owner of the Oklahoma City Coca-Cola Bottling Company], and he's the closest friend of E. [Edward] K. Gaylord, the publisher. So you're going to get into a real mess as soon as you get close to Gaylord's friend, Mr. Browne, Virgil Browne."

So I said, "Well, in light of that and all the other difficulties of everybody going to be resistant to me every time I walk into that hospital," because I could feel the hostility of a reporter walking through a hospital, this had never been done before--"I don't want to kill myself in it. I love this thing, but I can't get it out of my mind." He said, "Do it. I've had the same experience a couple of times where I couldn't get a story out of my mind. You'll never get it out of your mind. Do it. I'll help you any way I can. There's not a lot of help I can give you, but I can talk to the publisher. I'm one of the few people he even talks to." The publisher never talked to anybody, Gaylord, but he did talk to Otis, because Sullivant used to bring him the messages from Gaylord to tell the governor what to do. Oh, the governor--they were all puppets. Gaylord really ran the state; he created the state from

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territory. He literally created the state. And so he would send messages by Sullivan to the governor and say, "No good. No good." He was--when the governor least--one idiot governor after another, like Texas.

I remember once we were sitting around in the National Press Club having Coca-Colas--and we got pretty high on Coca-Cola, the old Coca-Cola. Creekmore Fath was a Texas newspaperman and we were jabbing him about Texas newspapers, what crummy newspapers they were. We started with the *Dallas Morning News* and went all the way down the damn list to the *Houston Chronicle*. Having newspapered in Oklahoma, I had gone down to Texas many, many times on stories--enemy territory, you know--and come back. So finally one guy who was there--Max Fine [?] of United Press--said, "Creekmore, who was the best governor of Texas?" We knew who they all were from Ma [Miriam] Ferguson to Pa [James] Ferguson to Allan Shivers. It was a horrible litany. It was a good question. So he thought a minute, and he kind of spit--he chewed tobacco--and he said, "Santa Ana." I thought that was the perfect answer. He was the best governor in Texas, and they blew it; they blew it. Now we're a divergence about Santa Ana. But the thing is, this was a tough assignment. All right. I got interested though. I went back and I told the managing editor, who was the successor to Walter Harrison, what I wanted to do, and he said, "Well, okay, but it's going to be a tough one. There's going to be a lot of issues about libel. We're going to need the libel lawyer upstairs," who was really very powerful. He's the most powerful guy next to the publisher; everything was libelous. If it was raining outside and you said it was raining, it's libelous--you aren't outside. But he said, "If you want to do this, this could be very interesting." "All right." "So I'm going to release you from that." I [had] said, "You have to release me. I want to be released from that legislature.



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I can't do both things at the same time. I've got to tour the state hospitals first; I've got to find out. I've got to do a hell of a lot of reading, and it's got to be at night and weekends; I don't have time to do both. I've got to find out what this is all about, what mental illness is about. Can you treat these people? Why are they here? How do they get here? What are the legal, statutory requirements? How can they wind up on the third floor naked in a cell in their own excrement? Now, does anybody visit them, see them? There are eleven thousand of them!" I didn't know what the countrywide level was. It was then five hundred and fifty thousand who were state patients. And they [state institutions] were all the same. I went on a tour later on of the whole thing, but I went up to Kansas.

Karl Menninger became my mentor, having read the--and I called him up, called one day, and I said, "Listen, I'm Mike Gorman. I'm a reporter for the *Daily Oklahoman*. I read *The Human Mind*; I liked it. You're very smart. I want to clean up the mental hospitals in Oklahoma, but I want to talk to you." He said, "Come right up." And I spent three or four or five weekends with Dr. Karl asking him question after question after question, because he had thought about it. And at one point I said to him, "You know, I'm very curious. You're running this very fine private institution of sixty beds"--it was terribly expensive--"and you are doing something for people, but of course you have an enormous team of people. You have ten times what they have in any state hospital. You have miles [?]. You have nurses. They don't have registered nurses. And yet I see nurses running around this place in those lovely white uniforms, and this is an asset." He said, "Yes, we do. It's very difficult." I said, "But I'm curious about your state hospital. It's only two blocks away. When was the last time you visited there?" "Oh," he said, "about twelve years ago." I said, "Don't you feel any sense of guilt about the fact that"--well, we had gotten to be good friends, I wasn't needling

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him--"Don't you feel any sense of this?" He said, "I do, but I'm so busy here, but you're absolutely right. Let's go."

He put his hat on and we walked the two and a half blocks to this place, which was just like any Oklahoma institution. I said, "It's terrible. You must hear these people screaming at night from where you are. And your brother's going out"--the younger brother was Dr. Will [William Menninger]. It was Dr. Will and Dr. Karl. Dr. Will was not pragmatic in the sense that Karl was. He wasn't the innovator Karl was, you see. Karl said, "God." And as we walked through, the thing that bothered him more than anything, although there was screaming and yelling--in some of the wards they would just be yelling at you as you walked through, or they would throw feces down from the third floor at you. Oh, yes, these were the patients, you see. To me it had become par for the course, but for Karl it had not become par for the course. And then we would get into a ward which would be absolutely quiet, just be absolutely zombie land. The tranquilizers had just come in and they were pouring tranquilizers in them and making these people zombies almost. Karl said, "It's so terribly quiet here. Not like my place; it's exciting over there. We have music therapy; we have this going in the patients' rooms. We've got to shake them out of themselves." He said, "What this place needs is three pianos. It needs somebody banging a piano, making a noise, waking people up." But he went back and he was my ally. I took him and we went to the Kansas legislature. We got about a million bucks more in the first year. You couldn't keep it off of page one. You couldn't keep it off because it was murder, it was death, it was people.

Now I kept this thing up, just initially with total Lasker Foundation support. We set up a committee. There was a National Association for Mental Health, which is the same

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kind of trade association I described before to you, like the American Heart Association, the American Cancer Society: don't make any waves, and then people will contribute because they'll feel good about contributing to charity, but don't get into any hassles, confrontations, fights, particularly with the medical profession. Do not get into any fights. That's exactly the opposite of what I had to do.

L: Had you heard of the Laskers at this time or you just applied to a foundation?

G: I had not. I had not. We did not set up the National Committee Against Mental Illness until I had finished with Truman, and we'll get into that. In 1953 we set it up. I said, "It cannot work. I've got to have an umbrella over me, because I want to continue to do this," so Mrs. [Mary] Lasker [was] very interested in mental health in those days--she still is, but in those days she was **very** interested in it. She in fact brought Franz Alexander over from Europe to set up the first psychoanalytic institute in Chicago in 1932. And that's amazing, the first psychoanalytic institute in America. And she wasn't that hep on psychoanalysis but she said, "Well, we don't seem to have any drugs or any other armaments here [?]. He's very good." He was really fond of her.

But that was before, that was pre-Lasker. No, I didn't know her. This is the last year, before 1948. I didn't know what the hell I was or what I wanted. Well, so all right. I decided when I finished the series in the *Daily Oklahoman*, which they really played up, they played up in spite of everybody. They even published some of the ghastly photographs. Of course, they wouldn't publish the third floor cell and stuff like that. They'd put little black lines over eyes and noses. And libel, I had the libel lawyer so much on me that I said, "Well, Major Peck [?], why don't you just get a desk next to mine, because you're going to be here all day." You know. But it was that bad, because I described the superintendent. The

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superintendent was seventy-eight and he was doddering. He was a general practitioner.

They used to retire and then go off to the state mental hospital. It was a very nice job. He had a beautiful house, you see, and there was food and clothing and a car. And I described him in no invidious terms. See, I had to be very careful not to be invidious, not to get caught, and I just described him as Dr. [David Wilson] Griffin, "who has served the state these many years as a general practitioner. He has received no specific psychiatric training." Peck said, "That is libelous." From a lawyer's point of view--I didn't see it then but I can see it now--what you're saying is he's really not competent to do the job. I didn't say that. I said, "I didn't say that. That would be editorializing."

L: You just stated facts.

G: I just stated that he has received no psychiatric training, because I asked him, I asked him about this question. So it was things like that we'd argue about. And I had to lose it; I lost that one. We took that sentence out. I said, "Well"--and in retrospect, you know how much copy hits the floor or gets in overset on the spike and you moan about it. That was the classic of all time. It hurt. But I felt, well, the major thing is getting across, because people were buying it and calling me up and writing. It was madness. And the paper had a jump and thirty thousand more papers were sold, which pleased the publisher. He didn't need the money but liked the fact of a sudden jump of thirty thousand. I said, "Well, isn't it due to the fact that it's raining and we haven't had any rain in two and a half months, Mr. Gaylord, right? So something is happening, right? It's these stories," which were appearing every day, page one and the back. People were writing in, "How can you stand a horror like this?" Legislators now panicked. They wouldn't talk to me before and now would say, "Well, how do we get out of this?" "Put some money into this damn place. You don't even have a

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mental health commission. You have a board of three."

Then I got into the board of three with Virgil Browne, and I had to be careful again by describing him as one who came and they met. The board met every three months to receive reports from the institutions as to what was going on. And I went up to see Mr. Browne--Mr. Browne didn't want to see me the first time, so I went up to Mr. Gaylord and said, "You know, it's a delicate problem and I know your relationship with Mr. Browne." And I was quite a brash guy, already, a guy in his early thirties, out of New York, and was really not so hot. Gaylord in his alpaca suit, four buttons, sitting there. I said, "I want to talk to Mr. Browne because he is the chairman of the board and he is the responsible guy for the mental hospitals of Oklahoma and for eleven thousand people and all their families, and he will not talk to me." So he picked up the phone and he said, "Virgil, talk to my friend, Mike Gorman"--reporter, not friend, I think he said reporter.

So I went out and talked to Browne. He was wary of me, and I said, "You have these meetings?" "Yes," he said, "we have to meet by statute every three months, and there are two other members of the board," and he named them, both fat cats, one an oil man. I said, "Well, what do you think of the hospitals?" He said, "What do you mean, what do I think of the hospitals? We run them." I said, "Well, physically, I mean the personnel, and the filth that I saw." "That's not part of my job, inspecting [?] the hospital. This is a board. I said, "But you are responsible. You appoint the superintendents." "We ask the state medical society to recommend somebody for the job, but I don't really know about medicine."

I had to handle this very delicately, but I did a straight interview with him. Always I learned. I'd take some of my copy over to Sullivan, this older reporter--not old chronologically, but with twenty-five years of experience--and he'd take out some sentence.

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I'd say, "Okay. Okay, Otis, just protect me against myself, because these guys are looking for something to grab me on and I'm not going to give them anything, I'm not going to give it to them."

So I made the crusade. Now the crusade--we'll go into this a little more, but I went up to Minnesota. I did Minnesota first, because there was a marvelous governor up there, [Luther] Youngdahl, and he'd heard about these things. I don't know how. But anyway, he'd heard about it. I went out to California when Earl Warren was still governor, wonderful, progressive, and I did a series and of course it appeared in the *Los Angeles Times*, and the *San Francisco Chronicle* picked it up. I had not met him yet, I wanted to do the hospitals and then meet with him. There's no point in going up there and talking to him and saying, "How many hospitals you got?" I then began to get a dossier, a number of pages, began to realize the five hundred and fifty thousand [state patients] in the country [were] all in the same condition. Many manacles. See, I haven't described the manacles. I had gotten used to the whole business of it. You don't see patients--because they were all--and this is the level at which you talk about alcoholism, which I later got into, and we won't go into that, but I had ten years of [studying] alcoholism while on the Mental Health Advisory Council. But the problem was [the attitude that], "They must be all the dirt of the earth; they're obviously people who couldn't make it and what's the use of worrying about it. What's the difference if the average per diem was eighty cents a day per patient." I said, "That's all food, all clothing, and all spiritual care." I remember that as the first paragraph of one where we really got them.

But I had done these sporadic things, and I figured, I can't do this forever, and I've got to get back to the *Oklahoman* and do something for them, although they were very--this

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thing was going on and on and on. What I was wondering was where and how it was ended, but I had this virus and I had to--I said, how can I clean up the country? I can't with fifty states and all--forty-eight states in those days. I must develop a series of mechanisms. I must eventually get a committee--this is before I got the Truman thing. I must have the governors behind me. I know the National Governors Conference. I covered it as a newspaperman, just once, but I knew it. There are regional governors' conferences. There was the beginnings of state legislators on these [organizations], but they were weak. State legislators are now very important; the National Conference of State Legislators, I can get all the books on it. I'm always in correspondence with them, I speak to them. There wasn't that mechanism [then]. But I said, I have to get to every large mechanism I can use, because I must short cut this thing. Not a matter of time or being manic [?], but I have to shortcut at some point. The fact [is] that these trips are enormously exhausting. I have to get so much data on an individual state before I go in. I must be careful what I say. If I say there are only sixteen attendants, there had better be only sixteen attendants in a place.

So I had to see it that way. So I thought of it and then after I had finished it and finished in Oklahoma and we got a mental health commission and abolished the board--structural reform I did very well, I must say that, because people wouldn't tolerate the board and Browne resigned. He just said, "I realize I'm not competent to do this thing." He wasn't unkind about the whole thing he just said, "I see your point." We got a commission. The first one wasn't very great. But at least--he was in the middle of listening to these psychiatrists, [?] you know what I mean. The thing was set up in that sense, and Griffin got out eventually.

But there I was. I became, as a result of all this, tired of the newspaper business. I

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got burned out. I'd seen too many bright people in New York before the war and in Oklahoma after the war, stay with the newspaper who did a heck of a lot of drinking. I'm not a purist, I love to drink, but these guys had to come in and--on the p.m. sheet they'd come in at six o'clock in the morning. This was a dry state; it was the only dry state left. They'd have to bring in their booze. They'd go upstairs in the men's room and just take an awful belt. I was so close as to find this procedure hard to swallow. But I don't need it; I don't need any juicing up. I'm juiced up from the moment I wake up, I don't need it. But some of them did, because they'd been drinking all night, so they needed something to keep going in the morning. This was literally six, six-thirty, because we were putting out a--when I went on a p.m.--I'd go p.m., a.m. It was interesting to learn both sides. I wanted to learn deadlines, the harshness of a deadline. Your first paper hit the streets at ten-thirty in the morning. You really had to move, you had to move. And I wanted that. Then I'd go back on the a.m. and I'd have some long pieces to do, and I'd say, "Let me go on the a.m. for a while."

Well, I went through a very difficult period, and my wife went through it with me. She was very gallant about it. Then the daggers got out. A guy came up from Texas, Donald Day who was professor of literature at the University of Texas. I don't know if you've ever heard the name. Donald Day. Donald Day.

L: I don't think so.

G: Now this was in the forties, in 1947. And he said, "You know, the *Reader's Digest* has got me down here kind of looking for stories. If I find any story here I've got a great friend up in New York, Charlie Ferguson, and he's a senior editor of the *Digest*. We went to school together." Something like that. Charlie came from Texas. He said, "I saw your series the other day. It was just absolutely fabulous. I talked to Charlie, and Charlie wants to talk to



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you." I said, "That's fine. What about?" He said, "He wants you to do a book. They want to condense it." I said, "Well, I'm not averse to it, because I feel I want to formulate my thoughts and get them all together. I don't know where I stand, and it may be good discipline for me to take a sabbatical of a couple of months"--which is all I got was two months to do the whole damn thing. "But it would be a good lesson for me to learn the [United] States, what is needed."

So I went up and talked to Ferguson. He was a very thoughtful guy. I don't know how the hell he wound up with the *Digest* but that's DeWitt Wallace [founder of the Reader's Digest Foundation] because he was a marvelous guy. He had done a beautiful biography of [Thomas] Wolsey; he was a beautiful writer. But he was a senior editor, and he said, "Yes, we're very interested." So I did the book, it's *Every Other Bed*. It was the first book on mental illness that really got any sale. I mean, it really got [inaudible]. And for a book like that--I don't know, ninety thousand or a hundred thousand. It was a good seller. And then when the *Digest* condensation came through, of course it was an enormously popular book.

Then I thought, wait a minute now. I'm really no longer a newspaperman. See, I'm moving in on it almost by serendipity. [Inaudible]. And I said to my wife, "I just want to sit down with a typewriter and start writing. I don't know what I want to write yet," and so forth and so on, "so in other words I'm a free-lance writer now. We'll have to live with that." We have two children [Michael E. and Patricia (Breon) E. Gorman]. She's a newspaperwoman. She said, "Listen, I'll carry on for a while. I'm ready," and she had started a women's national news service. See, there was no syndicated wire service for women. She said, "I want hard copy women's stuff, hard copy." She really got all started and they were doing awfully well for a couple of years, and financially, too, until the AP decided that that's what

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they'd like to do, too, and that blew her out of the business. They set up a women's wire service. But it was really ingenious of her to do that. She said, "All right, where do you want to settle?" I said, "Well, the *Digest* has been talking about going west, and Donald Day is going west, and he will become their regional editor out there." I still think he was teaching at the University of Texas. You could check up on all this. But he was teaching I think at the University of Texas. And he was a maverick character, but interesting. Interested more in country humor than anything. [Inaudible] he would talk about for hours, and with that accent he had, he really was a Texan. He edited a very interesting book on [Mark] Twain, almost a biography, but that sort of thing. But then he was an interesting guy, and the *Digest* liked him.

So he went out there. He said, "They want me to locate in Los Angeles." I said, "I don't like Los Angeles, but I'll do it." Because then it will give me a place to be and some feeling. Otherwise you're just a freelance from home or something like that, and so I went out there. Now, I was out there and I did some magazine stuff, and then the *Digest* picked up an awful lot of stuff I did, because they had gotten to the point where they were planting articles. They could not get what the original concept of Wallace was, understandably so, when he started that mimeograph sheet in 1923 in Greenwich Village. He just picked up from the magazines what it was, and then that became the *Digest*, mimeographed, sold originally, he and [his wife] Lila, door to door, door to door. It became, little wonder, a classic profile in the *New Yorker*, nineteen million circulation eventually. A great, great thing.

But I would know that I could get stuff in the *Digest* or they'd throw it into the *Rocky Mountain Empire Magazine* in Denver. I appeared in the *American Legion Monthly* once.

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My wife said, "What are you, a fascist?" I said, "No, that's where they put them, and then they pick it up, in this *American Legion Monthly*." And then they'd give the magazine a little more money; they subsidized it, not a great deal, but the magazine got a great deal of prestige, or the newspaper.

So I did this for a while. I liked it very much, and then my wife called one day and said that the--I was walking down the beach. We had left Beverly Hills. We started in Beverly Hills, and the office was in Beverly Hills, but Donald Day had become convinced he was going to write a great psychological novel. This became somewhat awkward for me; I wasn't bananas about this. And then the Hollywood people were all talking about movies. Everybody who went out there as a writer was dying to get with one of the studios, you see, and that sort of thing. And I really had no interest in it. I don't know why, I just had no interest in it. So I said, "I'm going to be getting out of here." By a quirk of fate, my old city editor, who had not been physically well for a long time, went out to San Diego to become the city editor of the *San Diego Tribune*, a Copley newspaper. He said, "Come on down. I can get you a house"--I got a house that was wonderful. It was on the beach. You know, I said, "It's all I want." And I went up to the *Digest* once a week and made a report, you know, have them send me this guide [?]. That was when my wife called out the window one day--I used to take afternoon walks on the beach to think about a piece or what I had to read. It was either reading time or walking time, and the beach was deserted. Today there are two million people in motels; in those days there was nobody down there. Everybody said, "San Diego? What do you live down there for?" It was for peace and quiet and tranquility.

So she said, "The White House is on the phone." I said, "Honey, you have a terrific sense of humor. I'm taking my walk and I'm really contemplating." She said, "I know you

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are, Reverend, but it is the White House and I would suggest that you come up." It was Matt Connelly, who was the President's appointments secretary. He said, "The President is setting up a commission on national health insurance and he'd like to talk to you about it because we have brought to his attention, the article you wrote in *Colliers*"--1947, 1948, the dates now aren't clear to me--"on national health insurance. It's the only thing we've ever seen pro-national health insurance. And the President has already sent up the first message in 1947 on national"-- he was the only president who really believed in the national health insurance. I really mean it. Roosevelt was quite afraid of it. In fact, when the social security bill was originally drafted, and as you know, passed in 1935, national health insurance was in it because of the insistence of Senator Robert Wagner of New York, who had introduced the first national health insurance bill in the Senate in 1938. Then [James] Murray and [John] Dingell were added, so it became the Wagner-Murray-Dingell [bill], but it was Bob Wagner, who I knew very well, who had introduced this.

Now, Roosevelt left it out at the suggestion of Harry Hopkins. But Roosevelt was a great pragmatist. I had a great feeling of affection for him. He was no intellectual. And Hopkins said, "Look, we're going to have enough of a fight with the American Bar Association about the social security." They were all annoyed about it. "Do you want to take on the American Medical Association at the same time? You'll never pass social security!" Well, he had a point, he had a point. So it was left out. And for two years Wagner did not speak to Roosevelt, he was so furious about this. He really was. He felt that it was a personal affront. He was from New York. Roosevelt was from New York and had been his governor.

But anyway, I said, "Mr. Connelly, I'm involved in what I'm doing; I'm very happy

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with it. I would like to help. I don't think it's my métier. I don't know the federal government. I can learn it. But I don't want to administer anything; I'm a writer." He said, "That's what we want is somebody who can write. Nobody around here knows how to write about this stuff, and the President can't get anybody to write a speech for him about health." So I said, "Well, respectfully, I don't want to, really, but I appreciate the call" and so forth and so on. That was the way it was left.

Then about a month later maybe--it's hard to [remember], but in four weeks [?] I get another call, same thing, pretty much the same thing. I think it was Connelly again. Then he said, "Just a minute, I'll put the President on." He put Harry Truman on. He said, "Mr. Gorman, I understand that you don't want to volunteer for this job." I said, "Well, the last one I volunteered for took me three years and eleven months to get out of it, and that was the United States Army. I don't want another one of those deals." He laughed. "You know, these things about volunteering and getting a letter, the next thing you'll be sending me a letter." He laughed; Harry had a good sense of humor. He said, "Well, you certainly can't refuse seeing me, can you?" I said, "No, Mr. President, I certainly can't." He said, "Well, how about next Tuesday, eleven o'clock in the morning. You come in and see me." "Okay," I said, "yes, sir."

So I started to go east. My wife said, "Should I start packing now?" I said, "Don't be so very funny. I'm just going to tell the President I'm not going to do it." "Yes, you are. You are. But you let me continue to pack, so when you get back we'll be ready," you know, like that. I really didn't know. I was determined I was not going to do it. I said, [to Truman] "Listen, it's political, this and that business. I know what I'm going to get into. I'm not naive. I know the realities of state legislatures; I know what governors can do. I don't know what

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you know, Mr. President, but I know a hell of a lot about politics already, and I'm still a pretty young guy." He said, "Yes, you're going to get that, and you're not going to be popular and you're going to get your fanny kicked just like I am by the AMA, which is calling me a socialist and everything else, that sort of thing. But I would like you to really run this thing. We will get a good commission and we will let the doctors decide whom they want on this thing. This will not be a loaded commission or anything. But somehow I've got to get out to the public what this problem is all about. Obviously they're not doing anything. The Congress is not backing me; I'm sending them up messages." And he wound up with three messages sent up [by] him, but nothing was ever done about it. It never even came to a vote. [There was] one set of hearings which was dilatory, by Senator Murray obviously, but nothing. So I said, "Well, I just don't know what to do. I come here--" Well, eventually, to make this story short, I came.

Now, when I got here I found the first of a number of obstacles chosen for me. The chairman of the Democratic National Committee was Bill Boyle. Now, he was an old Kansas City pal of Harry's, incompetent but also a drunk, a fierce drunk, and of course had no interest in issues. That was the last thing he wanted the party to get into was a bunch of issues, because Harry's popularity was very low. Very, very, very, you know what I mean? Now he gets into health insurance, Jesus. So he was sitting there. India Edwards was the only one I knew. She was the most powerful and still is, as vice chairman. You don't hear about the--I don't even know who the woman is now who is vice chairman of the Democratic National Committee. But she [Edwards] was well known by everybody; she was a power. She'd come out of the *Chicago Tribune*. She'd been a woman's editor, came to Washington, got interested in politics. She really was highly respected by Truman and by everybody.

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She saw the issue. She wanted it. She was issue-oriented, said, "We've got to have some issues in this thing."

So they dropped me over at the Democratic National Committee temporarily while they collected the commission, the membership, and back and forth we went. I saw Howard Rusk and said, "Howard, can you get so-and-so; can you get so-and-so? I want you to get a Republican for chairman, a guy who has been on the inside of the AMA, everything else, and it can't be you, although you are conservative. I know you." Howard and I had become great buddies. I said, "You are fine, but they think you're kind of a communist, too, because you write for the *New York Times*." He had a Sunday column throughout the years, unparalleled for twenty-two years. He said, "I got the guy, Paul Magnuson. He's a surgeon," had been with the VA. He quit the VA because the senators wanted--they would like to have their VA hospitals in their own states and K. [Kenneth] D. McKellar, from Tennessee, who was chairman of the Senate Appropriations Committee, wanted them there and Paul said no, and by God, he had to resign. That's the same guy that when I mentioned his name, Harry said, "That's all right." I said, "It's a delicate issue." He said, "He resigned on good grounds."

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L: All right. You were talking about the Harry Truman years.

G: All right. I was put over at the Democratic National Committee office temporarily, and then at the Executive Office Building, where we set the commission up. The commission labored very hard for fifteen or sixteen months, and we expected [Adlai] Stevenson to be elected and that we would be able to continue with the thing, and we were cut off very suddenly so I had to do a massive amount of writing. In fact, the last six months of it I did in early 1953

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through the kindness of Howard Rusk, who had a Health Resources Advisory Committee that Truman had appointed him to. So I was over there luckily. Otherwise the other four volumes of the report would never have come out. They were very important for the field hearings, which I had run.

But of course this report was generally neglected, again the public response. We got good newspaper coverage, but that doesn't do it, because that's always a temporary deal unless it's followed through year in and year out. We always bear in mind [?] that--some guy said, "Yes, I had a great story in today's paper," and somebody said, "Yes, some old lady out in Dubuque is going to wrap her old dirty fish in it and throw it in the garbage can. So you're immortal." So immortality went and then . . .

So the National Health Insurance, which I came back to ten years later, and I won't go into that too much because it's too detailed, but we did form a committee for national health insurance in 1969 and we spent ten years on that. Senator Ted Kennedy was most active in that, and Walter Reuther and many others, and that didn't get anywhere either, because again, the expense and this and that, and all the rest of the business. But today they're carrying out the principles of that--the Prospective Payment Plan that was finally adopted here by the Congress, and also by the President, wasn't the thesis and the heart of what we had to do. We had to cost contain, we had to plan in advance. We had a chaotic American medical system. Remember, this is the whole problem I had; it wasn't just national health insurance. All right, now--

L: Did you get tied in with Mrs. Lasker at this time as well, while you were working with her?

G: Not during the Truman thing, because that was more or less off-Hill, it was a Washington operation and a tough operation. I saw her once in a while, but not really--I saw people like



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Howard Rusk and others much more than that. While she was for national health insurance--she was an amazing woman--but she was also at the same time worried about its controversial nature in relation to medical research and in relation to the things we were trying to do in gaining the support of doctors. A legitimate worry. So I didn't tap her much at all, to be honest. But I would see her three or four times a year and she'd come down here or I'd go up there. She had a beautiful house at 29 Beekman Place, and I'd have dinner with her and with [her husband] Albert while he was alive. But no. But in 1953 there was some thought as to what I would do. I'd begun to think about it when I'd finished up the other four volumes. She then said, "You really ought to get back"--she still had an enormous interest in mental health, enormous interest. And she had actually gone ahead and formed this National Committee Against Mental Illness and hired the guy who was the executive director of the Maryland Mental Health Association, who could be a terrible flub. So she said, "Would you take this over?" I said, "I don't really want to, but I would like to have a year or two to take a national crack at this and see what happens." So I did and then we got into all the states and got our National Governors Conference and got two hours on their program, which was really tough to get. They were still kind of a drunken outfit. They would have a three-day National Governors Conference and everybody got drunk, you know. Herbert Lehman, the great senator from New York and a great governor, said, "You know, I don't really want to go to this, because they're just drunk things and nothing happens." But in the fifties under Frank Bain [?], it became issue oriented to an extent that one or two issues were discussed. So I got on the 1953 thing, vehemently opposed by [Gov.] Price Daniel, then governor of Texas, a tribute to Texas. You always can find tributes to Texas, without trying. But I said, "Well, I'll do this for a year or two." So I did this thing and started to build this up.

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Then we didn't really move into a discussion. I'm trying to figure the chronology of the thing and the first thoughts we had of the regional medical program.

L: That would have come probably in 1965.

G: In the early--I'm trying to think back there. But we started to talk about it, and by the time Kennedy had come into office we had a clear idea. By 1959 I would say we had a pretty clear idea of it, this is what we want, a commission on heart disease, cancer and stroke, distinguished people, a full report, and what could we do about it, what was the game plan. It was a good commission at the time, I thought.

L: Just before you go ahead with that, could I have you say a little about the Johnson speech in 1959 that you wrote? In fact, let me ask you this: one thing I have noticed in the [John] Fogarty papers, the [Lister] Hill papers, and in this instance, you are the speech writer for people very often in the health field. How did it come about that you wrote the speech that Johnson gave in 1959? There was a big budget debate in 1959.

G: Well, there was a tremendous debate. That was the year that Hill decided--you see, Johnson had [had] a very thin majority. He had a one- or two-vote majority when he became majority leader in 1955. See, he was only majority leader for six years, and it was very difficult. When he had one or two votes, I mean, really it was just terrible. He'd get people out of Montana to come in for one vote; one-vote things kept going on. But the 1958 elections gave us about six or eight more Democratic senators. So Lister Hill, who was the chairman of the Labor and Public Welfare Committee and a powerhouse, and who had been the majority leader for a brief period, eight months, way back in 1948 but had to drop it because of the Alabama connections to civil rights, because the civil rights plank was adopted by the Democratic convention in 1948. That was the Hubert Humphrey

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amendment.

So Lister decided, "Well, I'd like to get Johnson behind this thing and really pull these guys, because it's going to be a tough vote, a big budget battle," and Lister was going for broke this time. He was conservative, but he said, "I can get some real money now here in 1959. We've got a working majority." And he said, "Lyndon, Mike writes for"--now, the speech-writing thing is awful difficult to explain. It more or less is a circuit rider's deal. The best way to explain it is if somebody finds out that you can write a speech, it's gold, because, you see, a senator can have everything including money, but if he doesn't have a good speech writer he's dead. He's really-- and he knows it; he knows it. I say I have the coin of the realm. And people say, "How come you can wander in and you can wander into the Senate Dining Room and sit down with these guys?" I've written speeches for practically everybody I sit down with--I can look around the room, so forth and so on. That is gold to me. See, if I came in with ten thousand dollars, they'd say, "I don't want that. I want a speech, I want a good speech. Nobody on my staff knows a thing about it."

So you become a speech writer. Now, it is difficult. It's one thing--I ought to write a book just on the spirit of the speech writer, because he is an anonymous character. I mean look how anonymous we were during Stevenson. I was thinking of Charlottesville and the agony of the Old Ivy Inn, which is gone, a lovely old inn is gone. Charlottesville doesn't have any decent inns anymore. We used to go down there for four days at a time, getting four speeches ahead, five speeches ahead. John [Bartlow] Martin, Mike Gorman, Newton Minow, Bill Wirtz, [who] later became secretary of labor. And this was labor to do that kind of goddamn thing. But there was a pride in it. You were writing for a presidential candidate and you did it, you know. And Stevenson was the most difficult to write for of all. He was

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just absolutely the Hamlet of the world; we won't get into Adlai Stevenson. But, my God. Roosevelt had DeGaulle and we had Stevenson.

But in 1959 Lister needed the Johnson push, so he said, "Now one thing, Lyndon"--and they didn't get along at all but they were politicians and they were on the same Democratic team--"I want you to do it. Wait a while. We'll have the early debate, and I'm not going to go in it for long, and when we get enough people, I'll ask you to do it. But I want at least fifty or sixty people on the floor to get the impact of what this thing is, because I want a vote taken today." Lister was the shrewdest guy about votes I've ever known.

So this was the agreement. I did the speech, and it was a damn good speech. So they go in at noon and Johnson is ambling around. He's majority leader; he's got to be there, of course. But Lister is there, and they're talking a little bit. The early debate begins, and it's preliminary debate; it's just junk in the beginning. You just run through the essence of what the budget of Health, Education and Welfare is, and then some guy gets up and talks about it. Well, Johnson, within the hour gets up. He wanted to get out of the damn thing, he didn't want to do it, but he had to do it. I made the guy [inaudible], "Mr. President." Hill was absolutely furious, absolutely livid. He said, "It's just like the son of a bitch, just like him. He carried out his promise but he didn't do what the hell I wanted him to do and it was worthless what he did." Well, we made the thing by about two or three votes, we finally made it, but the speech was, frankly, of no use because there was no one in the chamber.

L: So at this point in time you really didn't feel that Lyndon Johnson was a super ally for health?

G: No, not at all.

L: He was willing to go along to help his party, but he wasn't really--?

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G: That's all, that's all. He didn't know the field, of course, which was understandable. Mary and I had talked to him once or twice, but Mary had not really gotten deeply acquainted with him until the sixties, really until the start of the vice presidency first and then of course the presidency. She really was not, you know, that wired into him--

L: Exactly.

G: --to push him forward, I'd say. And Lyndon had many things on his platter as majority leader. I understand, it's a terrible job. So I wouldn't say that he was in any way a super ally, was eager to do any of these things. In fact, he would have liked to have not done that speech, but since he had made the promise, he'd give the speech.

Okay, that takes us through--

L: Then you came to the 1960 Democratic National Committee where you actually got written into the platform plank that there would be a conference on heart and cancer. How did you manage that?

G: That's right. Well, that wasn't too hard to do, because, you see, to get anything in a platform is really not an achievement. Now, there's no point in fooling around about that.

L: Oh, I see.

G: But that's like slipping something into a tax bill. That's like Russell Long sticking something into the finance bill. Who the hell, he just says it's in, you know. And it wasn't hard to get this thing in, but nobody felt that--well, it's innocuous, nothing will really be done about it and there were a lot of motherhood things in a platform. Who the hell pays attention to a platform?

L: Yes, that's right.

G: That point has been made time and time again.

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L: And yet the key is that once you got that written in--

G: It was important to us.

L: --you held John Kennedy to it, in a sense.

G: Oh, yes.

L: You worked hard. How did you feel about Kennedy? Were you optimistic when he came in office with his New Frontier talk and all? Were you--?

G: That's a very difficult question and that is one of the most difficult and it's a penetrating question. I'll answer it this way, very frankly. Lister Hill was very fond of John Kennedy. When Kennedy became a senator in 1954 [1952], Lister got him on the Labor and Public Welfare Committee. In fact, all three Kennedys came on the Labor and Public Welfare Committee. Lister was shrewd, he picked people. He was a real power, this guy was a fabulous power. I really admire him so much. So he got Jack on and then he was the first guy to really see the aging problem. He said, "You know, [it's] one of the big things that we haven't touched, that we haven't done a thing [about]. I don't even have a subcommittee on aging yet." And yet now today, you know, Claude Pepper and--

L: Exactly.

G: Everybody wants to get on it. And this was an important vacancy [?]. So he said, "I'm going to give this to young Jack Kennedy, because nobody wants the damn thing. I'll give it to Jack and you help him. You write stuff for him, Mike." And I got interested in aging. I was very interested in aging, and was pushing then for an aging institute which we didn't get until 1975. But you push way ahead and you think way ahead and this was, after all, 1960, maybe 1961. But Kennedy did not do a--he did a very bad job as chairman of this subcommittee. He held a couple of perfunctory hearings. He was obviously not interested in it; his office

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was not interested in it. They were interested in his becoming president, as we all know, and first of all becoming vice president in 1956, and then of course the illness of 1955 which knocked him out for a whole year. He was down at Miami for a whole year.

But Lister was terribly disappointed that he--I said, "Listen, I write the stuff for him and he delivers a perfunctory speech somewhere and it doesn't mean anything. I give him a series of questions, I bring in some witnesses and he comes in late, comes in a half an hour late. He's very vague about it, very bored, and closes the hearing at a quarter till twelve, so he can get off somewhere to lunch with some babe." And I said, "You know, it's not going." Then Hill didn't really accept that. He was enormously fond of Jack. He said, "You know, Jack's got potential." I said, "Well, it's not in the health area."

But anyway we had the commission set up in the resolution by the Democratic National Committee. So we appointed it and [there were] some very distinguished guys on it, and they came to the White House in 1961. See, I was against this. Now, I was not very involved in the beginning in the first one because I was very skeptical of Kennedy, very skeptical of Kennedy. People would say, "Well, Mike, come on, this is really your baby, you know, you and Mike DeBakey and Mary Lasker are the honchos." I said, "I'm not a honcho with Jack Kennedy around, because I know not only Jack but his people--[Theodore] Sorensen's not interested in it; [Myer] Feldman's not interested in it. These are the people that you really have to go through on this thing, and I know"--because I'd been through these guys before. Set the thing up, but I would sit in along with the commission.

I didn't want an official title, never took a title, because I thought that was dangerous, you know, to take a title, because I was a marked man from the point of view of the AMA. They knew my stuff and what I had written and so forth and so on. Not that I'm that

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important, but they knew me as a marked man, and this is very bad business when you're a marked man. So put somebody else in, but be a consultant, watch things and speak to the people that count later on in the evening. So they decided they would do a preliminary report and see whether they were meeting the goals of the commission. I think that's--you don't ask people, you just do the damn report, and, you know, you don't go and ask people if they like it. You know what I mean?

L: (Laughter)

G: They went in and it was at the time of the Bay of Pigs. They got ten minutes with the President. They were furious. Now Ravdin was the vice chairman, I. S. Ravdin, very distinguished Philadelphia surgeon, one of the really great ones, in the DeBakey class.

L: Yes, Ike's ileitis surgeon, as I recall.

G: Yes. Yes. And very, you know, big gun, big name. He was livid, he was livid, and we were working, too, but I went with him over to the Army and Navy Club. He had been a general during the war and all that stuff, Ravdin, you know, and he sat there just burning and burning and stoking at one thing after another, at eleven o'clock in the morning. They'd had that ten minutes and they were shoved out. They thought they were going to get an hour or an hour and a half with the President and explain, "Well, here's what we're going to do here," and, "Here's what we're going to do here," and, "Here's the task force over here, one on stroke and one on heart." Mistakes, mistakes. I said, "I told you that, Ravdin. I told you that, Ravdin." The only guy that I can say that to, I told you so, it was going to happen, you got brushed off.

Now, the point that you made somewhere or somebody made, not you, I'm not going to accuse you.



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L: (Laughter) I may have made it. I--

G: No, no, it was in a tape, it was in a tape, because from then on everything became incorrect and became kind of like a standing joke about the Bay of Pigs health report. You know, this was snide. And guys were pushing us around, [Lawrence] O'Brien among them and others, because they were in accord together and these guys weren't interested in health in the first place.

L: So they were the ones who really criticized it by calling it the Bay of Pigs health report?

G: Oh, yes, that was the whole business.

L: All right.

G: That was it. The whole business was snide as hell. In other words, this is about as good as the Bay of Pigs, you know. And then it became dead. I thought it was dead. I said, "Let it go. We got a lot of things to do; I'm still doing the mental health thing all across the country. I'm really very busy." But Mary would never give up. Not DeBakey. DeBakey said, "Well, what can you do? It's really--"

Well, then, Jack was assassinated.

L: In fact, let me catch you even before that. By the summer of 1963 you and Mary were working again on a presidential commission. I saw one document where you had actually written out prospective members of this commission.

G: Yes, we were working on it, but it--was it the summer of 1963 or was it after? Was it before Jack was assassinated?

L: Yes, even before he was assassinated. And there was one other question I had about that, and that is that from the time of the 1961 conference on heart disease and cancer, by 1963 the talk is of heart disease, cancer and stroke. Was the decision to add stroke actually a

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conscious decision, because--

G: Yes, it was Mary Lasker's, largely.

L: I wondered about that.

G: She was very interested in stroke. Well, see, we had tried to establish a separate institute of stroke as far back as 1950 under Claude Pepper.

L: Oh, so this wasn't simply a political approach to Joe Kennedy's illness?

G: No, no, nothing to do with it, nothing to do with it. But stroke, we tried in 1950 to set the stroke wing because it's a terribly big problem and a neglected problem. And we didn't get it. Finally we now have neurological and stroke as an institute. We still don't have it separate, but we had to take out the Eye Institute and make a separate eye institute and put stroke in there with neurology. So the guy we've got running it now, a superb guy, [Murray] Goldstein, is interested in stroke more than anything else. That's why he's there. So it was no idle decision or any attempt about Joe Kennedy's stroke, had nothing to do with the thing. It was going to be heart disease, cancer and stroke, that was the thing, because they were the three big killers.

Now, after the assassination, we figured, well, we've got to get Johnson aboard and get him to do this thing, and it won't be that easy. Because, you see, he still had not established any fingerprints in health, Johnson. He had not established any fingerprints. There were the beginnings of discussion of Medicare, but everybody claimed he was picking this up from Jack. And I will tell you this, very frankly. There was a big Madison Square Garden rally on Medicare in the spring of 1963 [1962]. Now, this was really going to kick off the Medicare business because this had been going for--the first bill had been introduced in 1958 by Aime Forand. So it was not anything new. Hearings had been held and we were

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moving slowly toward it and I was very involved in that. So I wrote a speech for Jack, which was par for the course, and it was a damn good speech. And it was for Madison Square Garden, which I knew and liked, and it was going to be a . . . He didn't use the speech; he just kibitzed around once and made, I thought, several gauche jokes. For example, "Well, of course, this doesn't involve me, you know, because"--his father had had the stroke. He said, "He's well taken care of." It didn't go over; there was no laughter in twenty thousand people in Madison Square Garden, and a lot of the labor people were absolutely furious at that kind of a crack. He made several cracks like that which were very unwise for a politician to make when you're introducing something like this. You know what I mean: "I don't have to worry, because my father's well taken care of." So I was very angry about that whole goddamn thing.

Now, when we started with Johnson, it was very slow going in the beginning, too, again. I did a kind of a new format. I had to rewrite the Kennedy [speech], make it seem something new. Because I know one of the first things Lyndon would say--he's smart--"Well, that's that old Kennedy stuff." God, he had to carry Kennedy's Vietnam War, what else was he going to carry? That was Kennedy's war. So I wrote a new format and I thought, now, how am I going to get it back to him? I talked to Mary about it, and Mary was all for plunging, always, early into the thing. She was really--you'd say, "Mary," and she'd see a pool and you'd say to her, "There's no water in it." And she'd say, "Well, I'll find out," and she'd jump. Well, I don't do [things] that way. Let somebody else jump and then I'll go in, you know. So she wanted to get right at Johnson on this thing; she still didn't have the close wiring but she was getting close to him, and during the vice presidency she had talked to him somewhat and got to know [Lady] Bird but not too well, because I was around those

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circles and knew what the hell was going on.

But she was impressed, among other things, with the enormous vitality and energy of Johnson. That always impresses. The first thing she would say, "It's not anybody smart. [?] Mike, he's got enormous energy." And like I'd say, "Well, this guy's--Mary, he's an idiot." She'd say, "But he's got enormous energy. If you can harness that." You know, it was like harnessing the Tennessee Valley Authority. See what I mean? And when she talked to people about me, and I'd hear this later on, "You know, Mike, the thing is, she appreciates what you've done in a way, in a way she does, and we've got many volumes to base it on," but she'd always say, "God, has he got energy. Day and night, you know, it doesn't matter. Call him up on Sunday, get something out, and Monday morning call me on the phone and give it to me and I can take it over to Johnson." Well, he had the energy. How would we get to him what was a rehash and a flop in 1961. Not a well-known flop, but known in our circles as a flop, known in the White House as a flop.

L: Yes, yes.

G: Because of the Bay of Pigs. So I decided, I said, "Abe Fortas is the one; he's the key." She didn't [inaudible]. I said, "Abe was the best man at my wedding. Abe and I have been close for years. There's no man closer to Johnson than Abe." Because he'd saved him his seat in 1948. Johnson was really beaten in 1948. Maybe they stole the seat from him in 1941 but Coke Stevenson [inaudible]. But Abe went down there and through a lot of skillful legal processes had a recount done of Deaf Smith County and in fact [LBJ won] by very few votes, very few votes.

But Johnson couldn't get--you know, the connection between this Pedernales Valley character, you know, this cowboy, and Abe Fortas, highly educated although [a] poor boy

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from Tennessee in the beginning, but then a professor at Yale Law School number one, Yale Law Review. Then a Roosevelt guy, a real Roosevelt guy, who came down with Bill Douglas in agriculture then, under secretary of interior, [who] could have been secretary of interior except for Harold Ickes who was one of the most difficult men I've ever talked to. [He] could have been secretary of the interior but decided, "I can't take any more of Ickes" and went into private practice; built up an enormous law firm, Arnold, Fortas & Porter. And the President would call him three, four or five times a day. Now this was right after he became president. Abe was over at the White House, it was killing Abe, he looked exhausted and he looked pale. He really was going down. It was Johnson. You know, he was trying to carry on a law practice and had clients.

Well, I went over to Abe's one evening. I don't know where it was, his house--no, it was in the office. I wanted to talk to him in the office; I didn't want to fool around in the house. And I said, "I've got this thing and I've written this memo." He said, "Oh, that's that Kennedy thing, isn't it?" I said, "Oh, come on, knock it off. The President unfortunately was assassinated. Just knock it off. The President's Lyndon B. Johnson. Lyndon Baines Johnson. Ever heard of the man?" "Yes, I think I've heard of him. Yes, yes, I think I know something about him." I said, "You've only got to go and take this to him and sell it to him. There's something [inaudible]."

He said, "Okay, I tell you what you do"--Feldman was still with Johnson at the time; Sorensen I think had gotten out by that time. Feldman wanted to stay on in the worst possible way--I don't know why, because now he's a multimillionaire real estate developer. I never liked him. Oh, yes, he's a multimillionaire. But, anyway, he wanted to stay on. In fact, he ruined himself by excessive promotion staying on the job in 1965 by getting the

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mayor of Jerusalem to send a wire to Johnson, by everybody--what a support, that's the worst possible thing you can do with Lyndon. That means you'll never get it! He had a wire from Teddy Colander [?] saying that he's indispensable because he regarded himself among other things as the ambassador on Israel. He was Jewish and he ran over to Israel, and Truman was very interested in Israel and Kennedy became interested in it, you know, and the whole--so Feldman killed himself off, you see, he really killed himself.

Anyway, I had a good reason to take it to Feldman who was handling issues on this thing and was still with Johnson. I think he left Johnson in 1965.

L: Yes, he did.

G: By mutual agreement, I'm sure. I'm putting it politely, because Johnson probably kicked his butt out. When he got that wire from Jerusalem, Jesus Christ, that was it, boy.

L: (Laughter)

G: So Feldman reworked my memo, reworked the memo, and then he said, "Who did you show it to?" I said, "Just to Fortas." And he knew enough not to fool around with Fortas. If I had said anybody else, he might have said, "Why did you have to do that?" He said nothing. Sent it back to Fortas. Fortas got it and called me up a couple of days later and said, "What kind of a memo is this? It's a bunch of crap." I said, "What do you mean? The memo I sent you--what--?" "Did you look at it?" I looked at the thing and I immediately saw that it was Feldman's rewrite of the whole thing; it was just absolute bureaucratic crap. Just crap. He'd picked up all the stuff from the old Kennedy stuff, you know, and just put it all in there. Not a goddamn--I said, "That's not it; that's bullshit. The original one. Now, look, you got fifteen minutes. You read fast; read that fast, the first one. You didn't read it yet." He said, "Honestly, I didn't." I said, "I thought you were going to take--Feldman was going to do it

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right." So he read through, "Oh, this is it. All right, fine, fine. I got it." So he was the guy doing it. So Mary doesn't really understand this yet. I think maybe it is an ego problem after all.

L: I think she believes that she still had more influence than--

G: No, no, not then.

L: Yes.

G: I know. I know. Her influence came later. Abe was the one who sold it. Johnson in the beginning was kind of unenthusiastic about it. But Abe said it's a good thing and it's one of the things you're for. And of course, Johnson being a good liberal said, "This is very important." I gave Abe just enough of the facts. Abe was pretty good, he said, "You know, these people are dying; they need these services. Do something. [We] can't pass national health insurance, but we can get something done on this. I mean, you, President, lead the people." So he appointed a new commission, entirely new commission, and this time made DeBakey the chairman.

L: Do you know who suggested DeBakey?

G: Well, he was in the cabal [?]. It became almost natural that he would be the number-one guy. Of course, the fact that he came from Texas didn't hurt.

L: Exactly.

[Inaudible]

G: Except he was never very close to Lyndon. But he was from Texas and was kosher. So the commission was set up. And at least we had running room this time. I mean, we had been cut off. We got out I think what was a very good report.

L: Let me ask you this. One of the things with the commission [was that] there was always this

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thought of centers. I've read through most of the debates and no one seemed to know quite what they were after, or at least there was confusion or there was disagreement. What were you really hoping to get out of the commission?

G: Well, you make a good point. For this simple reason we thought of getting a series of regional NIHS, that's what it amounted to, in various regions of the country which would concentrate the expertise of people in heart disease, cancer and stroke. To make this the focal center.

L: Now, in these centers would you have had, you and Mary Lasker, opportunities for individuals to go in and be treated?

G: Yes, but they would be more research than anything else, but they would also be the high-powered place that when an individual doc thought, "This is beyond me," [he could] send them over there and say, "Well, I think he's got a stroke. He's going to get a stroke, but, I don't know," or "He's had one coronary and I'm very worried about him." So you would have a center in Kansas City, and you would say, "Wait a minute. We know about this, and this is not unusual." We've got a lot of these high-powered centers going now, in cancer for example, all over the country. I would rather be in a regional cancer center in many places in the country where high-powered docs are, in a center supported by the federal government in large part, [who charge] very little. They charge fees if you can afford it, but most people can't afford it. But they're treatment and they're also research centers. So the idea is not a new one, but I think it's a terribly important one, that you don't only have Sloan-Kettering in New York or the Sidney Farber up in Boston and then you don't have a goddamn thing for the rest of the entire country. If you're a cancer patient out in Montana or Wyoming or Utah or New Mexico, it doesn't have a goddamn thing. Well, Texas did have



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one, because M. D. Anderson is a cancer [center] under Lee Clark. But the government didn't establish it [?]; that was due to Lee Clark. So we knew what we wanted but at the same time I could see there was some confusion in the club [?]. You know, structurally the concept was difficult to buy at the time, you see. It was before you had the cancer centers and a lot of things; now the heart gets its centers. It's the fashion these days, and it's a good fashion. I don't say that pejoratively. It's a good fashion. So, for example, Elliot Richardson, who was secretary of HEW--I can never figure which job Elliot was in at the right time. He was my close friend [?].

L: (Laughter)

G: But Elliot said to me at one point--and he had to come up and testify on the damn thing, and he wasn't very enthusiastic about it. He called me to his office one day--well, he was HEW secretary from 1968 to 1970, roughly, 1968 I guess. When he went over to Defense, 1970 to--I really can't [remember]. It's really stupid, but he was in six cabinet jobs. He said, "I can't get this concept of the centers. I don't know what you are driving at." So I spent about an hour explaining it. And he was a Republican; I'd even done speeches for him. I'd do them for anybody. It's awful. I told him the things. He said, "I kind of get it now, but I don't think it's generally saleable; it's kind of difficult. A lot of people are going to find difficulty with this concept, particularly the Congress." I said, "You're right. We're going to have all kinds of problems. We think we know what they are."

Well, we got busy with the report and it was a good commission, and we worked terribly hard. We didn't have any problems in the Senate really because Lister Hill was still there. And, Lister, he was for it.

L: This was for the regional medical program that came out of it. Do you remember the man,

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Edward Dempsey, who helped write that? Was he--?

G: I don't understand where you got that. You got it from some tape, I'm sure.

L: No, I got it from the documentary material where he was actually describing what he was doing and what he was writing and all, and I just wondered.

G: Oh, I know he would always come in with some written material, Ed Dempsey. But he was an unprepossessing guy, and he was not articulate. He was the most inarticulate guy on the commission. So he would write down on yellow pads all the stuff he could say, you know. And this helped because he was really awful when he got caught in his own underwear. And I liked Ed in a way, but I wouldn't think of him as a power in it. I can see him writing stuff--

L: No. I really didn't think of him as a power so much as that what surprised me was that he was the one who ended up sort of writing the legislation, because he didn't stand out in terms of the commission itself and the debates.

G: No, no, no, no.

L: Although he was actually hired by HEW; he came from Washington University Medical School.

G: That's right, that's right.

L: And then he stayed on I think for some months to work on that and then he didn't get a job that Phil Lee got, I think was it.

G: Yes, right, assistant secretary of health.

L: I'm interrupting, in any event.

G: No, that's right, he didn't get an assistant secretary of health job. That went to Phil Lee, 1966.

But the report came out--I'd say it was a good report--through the Senate, but we

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knew the problems would be the House, obviously, you know, [inaudible]. And Paul Rogers I guess was then the chairman of the thing. No, Oren Harris was. See, I'm going ahead of myself. Oren Harris was from Arkansas. He had the full committee, and this was in the health and commerce committee and it was a big, over-all committee. And he had a subcommittee on health that had a series of unsatisfactory chairmen, the last being [Kenneth] Roberts of Alabama. So he got rid of Roberts--Roberts was eventually defeated--but he got rid of him, and Oren took the subcommittee, which was very odd because Harris had no interest in that; he was in oil and gas, and other things. But in the commerce part, of health and interstate commerce--or was that called the Interstate [and Foreign] Commerce Committee?

L: Yes.

G: But health was thrown into it. Rayburn had grabbed hold of it; Sam Rayburn, the original operator, you know. And interstate commerce of course was oil and gas to him. But he grabbed the health committee because he grabbed any subcommittee that was around; he grabbed them, and who's going to say no to Mr. Sam? So Harris, we knew we were going to have real problems, and he was on this [inaudible]. And he held to your *pro forma* hearings. The department's testimony was atrocious. It was absolutely, unbelievably atrocious.

The Secretary of HEW was then a guy by the name of [Anthony] Celebrezze, and he had been appointed by Bobby Kennedy, because they said, "Well, you don't have any Italians on the thing." So he went to Jack and said, "You've got to have an Italian." This guy was the mayor of Cleveland, Ohio, and the only thing that he could talk about that I remember being very eloquent about was they had the best garbage disposal system in the United States. I had some second thoughts about that one, too. This guy was really dumb.

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And I said to Bobby Kennedy once, who had a very thin skin--I never liked that guy. He's a tough guy to write a speech for, too, never thanked you for anything, you know, he snarled. Books are coming out now about the real Bobby. But anyway, one day we were talking about Celebrezze, and I said, "I don't mind you putting an Italian [on], but why did you put the dumbest wop in the country?"

L: (Laughter)

G: "Because you did." He was awful. Now, he went up there and, you know, testified; he insisted on testifying on the thing. After all, he had Wilbur Cohen there as one of his assistants, a brilliant guy. But he made a mess of the thing. And Harris was furious and knew--Harris, with all of that, if you're a good professional politician, like Harris was--let's put it on a factual basis--knew a lousy piece of testimony. [Inaudible]

Now, Bo [Boisfeuillet] Jones had come up there as an assistant. He was out of Atlanta, Georgia. I don't know how we found him. He had been on an earlier commission of some damn thing. But, anyway, he was somebody's nominee; it might have been Senator [Walter] George's or somebody. These guys come up from anywhere. Bo Jones was a bright guy and he had run the Woodruff Foundation, you know, the Coca-Cola thing. He was very thoughtful and we wanted to make him assistant secretary for health, but we missed on that, but we finally got it later on in 1966. But he came up and he was an influential guy. I was trying to think of why I picked up his name, because I got close to him in the very beginning, you know, that he was a mover and shaker.

Now, we got together and realized our problems in the House and what we could do. We tried everything with Harris; I brought DeBakey up one time. Mike, you know, always resisted. "You've got to come up and see this thing. They're going to go to a mark-up pretty

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soon, and Harris is just absolutely adamant about it; [he] said he's going to castrate it, the centers are going to go, everything's going to go, and what you're going to wind up [with] is what always winds up: money for the medical schools." This is what came out of it, to be honest about it, a) money to the medical schools which they wanted; and b) intensive coronary care units. And that was a useful recommendation, but that was recommendation number four, let's say, and you built maybe three hundred coronary care units, which would have meant some of them had already started. So it wasn't a startling idea. But that's all you got out of it, but the guts went out of this thing, the guts went out of it. But we still felt, well, we ought to pass it somehow. In fact, Harris was going to defeat it. He was going to defeat it when it came up, and the AMA had also gotten to him. And this is obvious, this whole thing. [Inaudible] was on the take. With a very conservative committee and he [as] chairman of the subcommittee on health, well, Jesus, what can you do?

So the deal was made. And I guess it can go on the tape; I don't mind, I don't mind the deal. The deal was Harris wanted to go on the federal bench, and that was how the deal was made. Johnson got him on the bench, you see. He didn't say anything to Celebrezze, you see. Johnson used to get up and praise Celebrezze. He did. In fact, at the ceremony in 1965 in the Rose Garden he praised him to the skies, and he even in private would say, "That dumb son of a bitch." You know I've thought of saying to him, and I didn't have the rank to say to a president, "Why in the hell don't you get rid of him?" But Hill said it to him, said, "Why don't you get rid of the damn fool?" "Well," he said, "you know, he's a Kennedy appointee and I'm"--it was touchy; it was still touchy, you know. So he finally offered Celebrezze a district judgeship in Cleveland. Fine. Celebrezze said, "Oh, no, I want to be a secretary." It was dumb, but it was not smart. He got a circuit judgeship. And that's how he

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got rid of him in 1965.

L: I wondered why he left.

G: 1965. Oh, they wanted to get rid of him for the longest time, but Lyndon had to wait. The Kennedy business was still around. Bobby was still around.

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L: You were talking, I think, about the deal with Oren Harris.

G: Yes, so finally the bill was passed by the House and then became law and so forth and so on, and, as you know, was a great disappointment because of the lack of centers, the lack of physical centers and things. You had a secretary like Richardson, who was a very bright guy, come in and say, "I don't know what this is all about. I've got a law on my desk here that says regional centers are out." I said, "Well, they have been castrated. Here's what's left. We've got coronary care units and we've got a few other things. The medical schools grabbed hold of it, the money." And the money was good in the beginning. The money was all right. They took it and set up separate departments. They always do that. If you have any loose money, they'll set up a department on emphysema, you know, New York University Medical School, my own medical school. Instead of using it for structural, [inaudible] purposes, they got to set up a new area, you know, to be new, to be innovative. And the medical schools have a really sorry record on this type [of] thing. They have an association of a hundred and thirty medical schools; I mean they have a reactionary record that almost parallels that of the AMA. [They are] interested in a very parochial way, not interested in medical care generally. The delivery is the same; the inadequacy in medical education, the many searching things that many people raise outside of their field, like Paul Starr raises as a sociologist. The National Academy of Sciences raises [questions]

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constantly: Isn't our medical education really antediluvian? It is. That four years is absurd; there's a lot of wasted time in it. It could be two years. I could go on and on and talk to these guys, but they say, "Well, we don't want to rock the boat. This is a four-year medical school and there is the German medical model; there's the Hopkins' model." I said, "My God, you guys talk like a bunch of fuddy-duddies. This is 1985, you know what I mean, and you're doing very little." You know, in the way of curriculum changes and for years they watch the specialty medicine field grow [in] to the latest specials--we're going to be the starving the next few years, there are so many specialty residences being created while primary care was being neglected. Because it's not elitist, it's not--and you had the lobbies like the Red College of Cardiology, lobbying for specialty residencies. And the AAMC [Association of American Medical Colleges] sitting there. Well, that's part of the point except that you look for your allies, you figure, well, it certainly will come from the medical schools and strength, you know, strength. I never used them. I never found them of any use, at any time.

L: Did you and Mrs. Lasker, after this sort of compromised away the regional medical programs, that is, it is not what you had hoped to get, did you sit down with great disappointment and just feel that you'd sort of lost out, or did you just accept it as "This is the way politics works?" Did you have any hard feelings against Lyndon Johnson, for example?

G: No, because it wasn't his fault, wasn't his fault in any sense. I mean he really pushed as hard as he could on this thing and, of course, not knowing the health field he was subject to a lot of pressures. For example, Mary would constantly push him. For example, getting away a minute, but this is very important in the picture of Lyndon. By now, Mary had become very close to him, with all of this regional medical stuff and everything else, and the Rose Garden

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meetings and all this kind of stuff. Now she was very close to Bird, you know, and she'd send her a yellow rose every morning. You know, Mary lobbying.

She said now when she went to the National Institutes of Health, she felt he'd gotten enough immersion and got his feet wet. And Mary was always [inaudible]. She'd been on all the advisory councils of the thing. Most of us had been on them, but I had stuck to the mental health thing, the advisory council, been on it twice, and it's a chore, a four-year term, but you work your butt off, all these hundreds of applications.

But she went after him on targeting research. "They're not targeted out there. They just take what comes in. They are receptors; they're not innovators." She would point out in cancer, "Why don't we do this with cancer? Lyndon, what are we going to do with this decimation? Look at heart disease and what it does, a million deaths a year. It's an epidemic. Not any other country in the world has the level of heart disease that we have in the United States. It is a disgrace." I've been there when she said this to him. Here was a man that had had a heart attack, you know. On Harry Byrd's farm. I was there [when she said it to him]. So he began to get really thinking about this thing, you know, "Jeez, what in the hell will we do?" And she said, "You know, what you've got to do"--and you've got this somewhere on one of the tapes--"is go out there and see some of these people," because they were all a bunch of damn bureaucrats. Most of them really were a bunch of damn bureaucrats. "And talk to them and tell them." And he made several talks and he went out there once, I think. He went out there twice. But the first time he went out there he did really lay down the law and say, "You know, I want--"

See, Mary's, some of her points were very good. She's not articulate, she doesn't like to speak, she's very shy [about] public speaking, she cannot do it. But she could get a phrase



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going, get something going. And to her the simple thing which Lyndon could get was, "Why do we keep some of these things in the laboratory? Why don't they get to the bedside? Why aren't these people ever concerned about the bedside? Why don't they do clinical trials? If they doubt a therapy, why don't you conduct it with [inaudible] heart?" Heart has done the most. I'll give you an example. I'm closer to heart today and cardiovascular medicine in the last ten years than I ever have been in any other area outside of mental health. And a clinical trial is a tough job, it's a ten-year job, it's costly but you're taking therapies and proving them.

For example, mild hypertension is a beautiful example. Most of your doctors, 70 per cent of hypertension is mild hypertension. But it's going to progress; it's not going to get any better. It may stabilize, fingers crossed, but watch it, watch it. But the docs would not treat it. They had the drugs there to treat it when it got up to ninety diastolic, up to a ninety-five, they would still fool around with a damn diet or talk about salt, which is absolute nonsense. The English regard this as absolute junk. They all go for salt and I have great respect for English medicine, and I think it's junk, all that salt is. But the department's always putting out stuff about your sodium content, grocery markets have it, and it's really, you know, and I'm a hypertensive and have been since 1962, so I know what junk it is. But the thing is that--I'm trying to get a thought here which I've lost.

L: That Mary Lasker was interested in these trials?

G: Yes, interested in targeting, to get Lyndon to tell them. He went out there and made this speech and told them, "You got to target your research in clinical." Well, there was an uproar from these guys. They become very defensive. I mean they're very thin-skinned in the first place and to have a president come out--and they know where the stuff was really

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coming from. But he went out and he meant it with his heart, he always had his heart in this thing, and he meant it. He could see, "Well, yes, why isn't it out there in the bedside?" I mean, what the hell? But they caused such a flurry and a mess and nonsense, that it was neglecting basic research, that he really had to swallow crow and go out there at the second meeting and say, "Well, I'm really for basic research and you're the greatest things in the world. It's the greatest one billion dollar investment in the world." And all that kind of jazz. None of which I had anything [to do with]. I didn't write that.

L: No, I know on the first time he went out, Doug Cater called you and Mary Lasker in apparently, and you prepared questions and you really had the President set up. But then--

G: We had him set up for a meeting to tell these guys out there, the institute directors, that "I'm the president and I'm interested in what you're doing, but tell me what you're doing in this," and then clinical trials and everything else. And he got the picture, he knew it, I mean he was shrewd. But then, see, this flurry started against him.

L: On the second time he went up, Cater did not call you and Mrs. Lasker in then. Were you aware of what was going on? I've always wondered about that.

G: Yes, I was aware. Fortas was telling me it all. He felt that he had to go out there and so forth, and several influential doctors came in and said, "This is a bad thing for the NIH." And, of course, these doctors were all dependent on the NIH, they're whores. Research grantees were getting all their money; 75 per cent of all research in the medical schools, 80 per cent, is NIH money. These guys had no freedom. Even a guy like Karl Menninger, he had a mediocre director of the National Institute of Mental Health and once did the most sycophantic letter to him about a grant that had been turned down. I called him up and said, "Now, how can you whore around like that? You're a distinguished psychiatrist and you're

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writing to a hack." Well, he said, "I need three hundred thousand dollars. I've been turned down." I said, "I wouldn't do it. I would rather die." But this was the attitude. So they got this flurry and Lyndon got the backlash. I heard about it. [Inaudible] do it, because they're not going to do it anyway, you see. This was the point I had, I'm not a nihilist, never have been. But they're going to listen to the President as they did to the first one and then they're going to go back to doing what they damn please the next day, you see.

And we didn't get real clinical trials going until the early seventies, by persuading individual directors of the institutes to do it. I said, "Mary, that's really the way to go. The way to go is to--" Mary didn't believe in ever convincing anybody but a president. And Dr. [James] Shannon was the great director of NIH and he was a brilliant guy, came from New York University. It was a total accident. He was interested in the physiology of the kidney. He came to the Heart Institute to do further laboratory work, intramurally. The Heart Institute director died of a heart attack, appropriately. A very sweet guy, [inaudible] very sweet, very effective. Shannon became the director of the Heart Institute. He didn't want it, but there was nobody else around with that kind of prestige. I'm talking now about the fifties, the early fifties.

Then when the NIH directorship opened up, by that time Dr. James Shannon had established himself as quite a figure. And he was an enormous figure. Now, we were his total adversary because he had certain predispositions. First, he was totally anti-psychiatric, I mean like any Irish Catholic. I'm an Irish Catholic. Now, we would sit down and drink and I said, "The trouble with you is you are just so damn pig-headed about everything, Shannon." You know, and Foley had said this, another Irishman, three Irishmen, three Irishmen fighting. And he would go on the two of us for [inaudible]. And I said, "You

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know, I'd like to cause you a lot of trouble, Shannon, if you don't cut it out and stop going up and around and talking to Hill on the side"--you know, he'd go around and sneak up to Senator Hill--"because I find out about everything that you talked to Hill about, because Hill tells me. So what are you wasting your time for? You know, what I mean, talk to me."

Mary Lasker went to him once. Now all that time, this guy had this influence for fourteen years; he was a czar, a czar. Finally we got the Mental Health Institute out of the NIH, by my being so miserable to him and bitchy to him. He said, "I'm going to throw you out." I said, "Make my day."

(Laughter)

"Make my day," whatever I said, "Make my day," you know, get out from under you, because you are so anti-psychiatric it's unbelievable. But it's a big institute and it's getting bigger; it's going to get bigger, it's going to really pain you. He had no interest in training. He had an absolute blind spot about training, not only in mental health but in everything else. [He] said, "This is a basic research place." I said, "Yes, and there's also pure oxygen but it's hard to find, it's hard to find anywhere."

But Mary had this one meeting with him. And she always brought out a couple of charts, two or three charts on the decline of this and the decline of that. But she had also her mice charts; they drove me crazy, because they are all about how they are curing cancer among the mice. I said, "Jesus Christ, the senators don't get elected by mice."

L: (Laughter)

G: You know what I mean? They don't understand if they can't--she said, "Look at the miracle that's happening. Here's the mice over here and look at this carcinoma and over here it's clear. You guys are lucky." I said, "Well, it's great for mice. We're lobbying for mice this

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year." But she couldn't understand that and she did the thing with Shannon, and Shannon lectured her, said, "Now, you know, I am the director of the National Institutes of Health. Now, Mrs. Lasker, you may think you're on it. I was there. You may think you're on it, but you're not. You're not. And it's going to go the way I want it to go. You can do all the influence you want to do and all the things you want to do, talk to all the directors." And it was marvelously--directors, I got to know all the directors and I'm still very fond of many of them, present ones, past ones. And I said, "What is a directors' meeting like with Shannon? When ten directors with all this money, four billion dollars and now it's five billion dollars, get together to talk about where are you going in medical research today. What do you mean dialogue? It's a monologue. He speaks and he says this and that." And one day a great friend of mine, Dr. Fred Stone, [who] was the director of the General Medical Sciences Institute, which is basic research, largely, with big money and therefore supposedly--and they'd been very friendly to Shannon because Shannon was a basic research man. And Fred was a Ph.D., a microbiologist. Shannon said something and Stone did not agree with it. And Stone said something, and Shannon said, "Did I call on you? Did I ask you?" This was the attitude, this was the colloquy that went on, you know. So you had to live with Shannon, but Mary couldn't live with him very--she couldn't live with anybody that was totally opposed to her. And she would complain to Lyndon about him; well, Lyndon wasn't going to get into that stuff, I mean at that level. How in the hell is he going to do anything about it?

Now, I got along with him, because I knew that people are diverse, and if you work with a political animal, you know that he's going to have certain strong feelings and they may be a hundred per cent opposite you. But if he likes you, what the hell? At least you're

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going to have a dialogue. You know, at the end if you don't convince him and you walk away and you're his friend you say, "All right, I can't sell you. I tried to." I used to kid around with him: "I don't want to walk in his office and waste my time and waste your time, so I've blown it. The next time I'll come around with a better pair of shoes." And they laughed and that was the end of the whole goddamn thing. Mary regarded this as very difficult to tolerate.

Now, in the years--what else can we say about Johnson, I guess?

L: Let me just ask you one thing about that whole issue of Shannon and you and Mrs. Lasker. That was the article by Elizabeth [Brenner] Drew, which seemed to be--

G: Noble conspirator, ignoble conspiracies ["The Health Syndicate/Washington's Noble Conspiracy," *Atlantic Monthly*, 1967, Vol. 200, p. 75-82.]

L: Yes, exactly.

G: We came out ignoble. Well, this was very difficult because I didn't want--the first time, because she was very new in the business at the time. She now writes for the *New Yorker*, very dull stuff, I think. But I didn't want to see her, but, you see, Mary wouldn't talk to her. Mary is very averse to talking to anybody. You'd think that, well, she's right in that sense, that this is going to be misunderstood and she's going to be a power. And she always said this, and I think this is very important, that you give credit to the congressmen, don't ever talk about what you're doing. Say what Senator Hill, what Congressman Fogarty did, [inaudible] you know. Much of the time we'd forget and then, "Remember that, talk about the congressmen." You know what I mean, and [when] people would ask me about a speech I'd say, "Well, I helped a little, checked a couple of facts." There's no point in going any further, no point in going any further. But you learn these lessons as you go on, and she

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knew this by saying, "It's your bill and you've done it." And that's the way she'd work on Lyndon. She'd work on Lyndon's ego, which was not exactly underdeveloped. And she would say, "You can be the greatest figure in the world of medical history." He could have been, if he'd done all these things and everything else. And if he had had maybe an earlier start in health. His interest was more on education, I think. Some of his remarks come out in a human way, like he'd say, he had a way of talking about giving a person all the education they can get and more. I could see him stuffing food down a person. It was food to him. And that was a wonderful populist feeling, and he felt it about education, because he'd been a schoolteacher, you know, and then his mother and everything else. About education he felt very, very, very strongly. And of course [Douglass] Cater did and Gardner did. You never see--John Gardner resigned only because of the budget and of course Lyndon was caught in the war and didn't resign until 1968. So Lyndon's gut feeling was more toward education. It was certainly more toward Medicare, toward the elderly, oh, yes, oh, yes, very definitely. He could be very moving talking about anecdotes, and either his mother or father was very ill and they were very poor. I don't know which one it was. He had this feeling. This is something I can understand; I could feel that we have no programs for this these people. What do they have? They can't afford health insurance. So he knew this.

With health, see, she brought him from an area of sophistication. Now, here was a woman who wanted to go to medical school but in her day in Wisconsin, where she was born, you didn't do that. Her father was a small-town banker, and girls didn't go to medical school or go to that kind of thing. You know, Mary was born in 1900 and you just didn't do that kind of thing, you see. So she was a frustrated doctor. She'd never read a book through. [Inaudible] always talk about that. I knew about the skipping business, because I'd make a

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reference to something and she'd say, "Well, I don't remember that. Where was that?"

"Well, it was a book you just said you'd read." But she'd skip--but she really went to all the medical meetings, she read interminably in the medical magazines, she talked to hundreds and hundreds and hundreds of doctors. She really knows more doctors, I think, than any doctor in the United States, including Debakey. She really does. If she's in California, she'll have one after another come over to her place and visit. If she's in New York, she'll have doctor dinners. [?]

I remember one time when Albert Lasker--this was before he died in 1952--that there was a dinner and we were going on to the theater. [Inaudible] But of the group Albert had invited several of his friends. There was one guy from France, he had invited him and some body else. And Mary was surrounded by the usual cabal of doctors, plus Senator [Abraham] Ribicoff and his wife, I don't remember. And she started in a whole involved business about cancer, and it started to dominate the room, this beautiful dining room on the East River. And Albert, just out of nowhere--he was wonderful, I loved Albert--said, "All right, Mary, that's enough of that goddamn stuff about medical research. Let's just have a social evening and let us cut it out." Well, she was terrified because, see, the one person she really was afraid of was Albert Lasker. He was enormously--you know, like Lyndon. He also came out of Texas, too, you know; he was a German Jew, came out of Texas for more money. Always had that story saying, "I came out of Texas with fifty cents. I don't know where I got the fifty cents," but he said, "I got to Chicago with fifty cents." Became a multimillionaire, you see.

And his roots were in Chicago and I don't know how she ever talked him into going to New York, because he gave a great deal of money to--I think the biggest monies he gave



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were to the University of Chicago, gave them his whole estate, which was everything, a golf course, a movie house and everything. They got enormous investments from Bob Hutchins, who is president of the University of Chicago. But she got him to move from Chicago--and they married in 1940--to New York to set up the foundation. He was somewhat interested in it. He had given up the advertising business; he was in a semi-retired state. But she was afraid of him, because she knew that "this is one guy that's smarter than I am." And he was. And he was tougher. But he taught her a lot; he really taught her a lot. The one thing he taught her as a principle, and I have no real perception or feeling about it, he said, "Mary, you haven't gone"--she was talking about the federal government and the fact that she wasn't getting any real money out of them; now this is in the early days of this. This was right after the war and Albert died in 1952, so I don't know when this conversation took place. But he said, I remember, I was there, 29 Beekman Place, he said, "What you've got to do is offer them one for one. Say you will give them a dollar if they will put up a dollar. Make everything a matching thing."

Now, that was Lister Hill's thesis, too, because it started back--and I thought about it then in the forties. Then I went in one day when Lister first got the chance. I had known him before that, but only as Senator Hill from Alabama and figuring, what the hell, he's on Armed Services [Committee] and everything else. Well, when he took over the Labor and Public Welfare [Committee], I found out that his father had been a surgeon and he had inherited his father's medical library, which is the largest in the South, you know, private library. And he had gotten the principle and he said, "I want you to put it in a speech." Well, I ran through a lot of quotation books and things like that and I came to Benjamin Franklin. Not a contemporary, but who had said he wanted a hospital in Pennsylvania. He said then

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that if the people would raise a dollar, the state should put up a dollar, and that's the collar.

And that's how it was done. So I put in the Benjamin Franklin principle which became our principle in everything. That's Hill-Burton, it was the same way. You pay, they pay. In other words, the states have to put a certain amount. Of course, he did what we call the Alabama formula, which meant that the southern states only put up one-third and northeast they, put up two-thirds. But we got used to the Alabama formula. I said, "Shall I put it in the speech, the Alabama formula?" He said, "Don't you dare."

L: (Laughter)

G: "Well, can I say Confederate?" And he said, "No, you're not to say that either."

But it was that matching principle, you see. Now, that is very intriguing to a lot of legislators who say, "Why should we give a hundred per cent to this, or this to that?" But if you say to them, "Well, we're going to make it a matching thing," they would say, "Oh, well, that's different, if somebody else is going to get involved in this thing." It's the strength of a lot of legislation we now have on the books; [it] is strictly matching formula legislation. Well, I'm getting away from Johnson again. I can't think of any--if you think of any other things you--

L: One other thing that happened toward the end that had almost a bit of justice to it was that it was a victory that Mary Lasker won against Shannon and that was the establishment of the National Eye Institute. Were you involved in that in any way?"

G: Very much so, but it wasn't a victory against Shannon.

L: Oh, it wasn't. Somehow I thought he was opposed to a separate institute.

G: Well, it may be on the tapes. He was opposed to any additional institutes, that is for sure.

But he was not alone in that opposition. Paul Rogers, who became a superb chairman of the

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subcommittee on health, didn't want any additional institutes. The American Medical Colleges didn't want any additions from the beginning. So we regard that as par for the course when you set it up.

Now, the Eye Institute, we had tried it originally in 1950 when Claude Pepper--it was his last year as a senator--set up four institutes. Really it was his whole trip. We couldn't get it then. We didn't have enough steam, and I remember Claude saying--Claude's still around, you know, I just had breakfast with him last week. He's going to run again, so he implied. Claude said, "I can just do these four. I can't do anymore." I said, "That's all right," but Mary kept piling institutes on: neurology, microbiology became the General Medical Sciences Institute. Allergy and Infectious Diseases. A very difficult thing to do. He was then chairman of Labor and Public Welfare. Defeated in 1950. Then--I've lost my train of thought again. We were talking about the Eye Institute.

L: Right.

G: No. Then when we got that, we kind of let it go. I mean, what the hell, that's--so it was still attached as a section of neurology, but a minor section, but a very small amount of money. So, I got interested in the Eye Institute; I'm still interested. In fact, I just finished a paper on glaucoma which was for somebody, I don't know, a House member or senator or something. I've always been interested in the Eye Institute. Now it's a hundred and sixty million dollars. But they had about, in neurology, six or seven million dollars; it was a little section. Neurology has an enormous amount of problems. Endocrinology is in it and everything else.

But we didn't get the Eye Institute, you see, until 1970. A long, long wait for it. It's just fifteen years old. In 1970 we finally got it, and the main pusher behind the institute was

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Ed Mormaly [?], Dr. Ed Mormaly of Johns Hopkins plus Jules Stein, a multi, multi-millionaire who had been an ophthalmologist, had not actually practiced, but then became the chairman of the board of MCA. Jules was really the mover and shaker. Now, Mary was behind it. She was in with Jules because I remember us being together in Los Angeles, God, in the sixties, sometime during the sixties, and Jules saying, "Well, we've just got to get an institute now. We've got the people and the power now that we didn't have before." And Stein put up an enormous amount of money, which Mary did not put up lobbying. Mary does not have--I don't know whether she would want me to tell you, but I guess she would. Mary does not have that much money; people have the illusion she has a hundred million dollars or something. Nobody really knows what the foundation has. But you see Albert gave so much money to the children, his own children, and his two sisters, and other things that there wasn't a hell of a lot left. I think the foundation started--and this is all speculation, but she doesn't report anything, she doesn't--you know, she's very private. Ten million dollars, twelve million dollars, a very small amount.

L: Which makes her accomplishments even more amazing.

G: Yes, it does. When I say ten to twelve, it could be high. It couldn't be low, it could be high. It could be high, because, you see, they have a foundation book they put out and she's never been in it. And somebody asked me--oh, they've asked me a number of times--"Well, why isn't she in the book?" I say, "Well, she doesn't choose to be. You don't have to be in the book if you don't want." Well, she would be embarrassed.

Tip [Thomas] O'Neill to this day thinks she's got about two hundred million dollars. You know, Tip's very close to Mary and [inaudible] they named it, they took a convent over at the NIH, and they're going to do a training bit. They want doctors to get into research.

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Doctors do not do much research. Psychologists do research, others do research, biologists do it, microbiologists, chemists do it, not doctors. Now, this is for a guy between the second and third year, a training institute, something they always wanted [but] they didn't have the physical space. The convent folded, the Catholic convent, we're very sorry that it folded. It folded. We grabbed it, we grabbed it quickly, and it's going to start this fall, it's named the Mary Lasker Research Training Center. And this is a very nice tribute to her, you see.

Now, that--I don't know how I got off on that. A friend of mine, Jonas Morris, wrote this book that's called *Searching For a Cure*, and espousing the health movements. It's put out by one of these vanity publishers. And Morris has had some experience, but he misses totally--he just misses on everything. You see, if you're not inside and know what the dynamics [are] and you write from the outside, I don't see how you can write. I mean, people do write that way. An historian writing about the fourteenth century like Barbara Tuchman, she's from the outside obviously, can do it, but it's a book of history. Now, when you're writing about health policy and health politics, it's a different kettle of fish as to how this developed, how did NIH oppose two clinical trials, which is the only way you can prove a [inaudible]--we just finish women and cholesterol. Now we've had a thirty-year anecdotal war.

L: Exactly.

G: Thirty-year anecdotal war about, "Is it important or isn't it important?" But this trial came out and said, "Yes, you can drop cholesterol [levels]. You can use either a drug like cholestomine or you can drop it by diet." But this is a ten-year study, cost seventy million dollars. Dr. [Robert I.] Levy was then the guy who really got it going. We have a new director now.

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L: Is he still alive? Dr. Levy.

G: Oh, yes, he's at Columbia University. Yes, yes. But he felt that there is no way to go--they used to argue, you know, DeBakey would argue with Dr. Ervin Wright who was the DeBakey of the West Coast and they would argue back and forth about the value of cholestomine. I thought to myself, all this is so anecdotal. I mean, nothing--you're not going to prove anything to anybody. It's the same as we did in hypertension, you see, but mild hypertension. We did a ten-year trial there, again seventy or eighty million dollars. That's a difficult trial, it's four years of pilot even before you start the trial. Why is it? I'm trying patiently [to understand it] [?], but, my God, a ten-year trial plus a four-year pilot, that's fourteen years. Well, we finished that one. The mild hypertension trial made its first report in 1979, and the first discussions we had were in the mid-sixties about setting up a mild hypertension trial and then a pilot.

And I'd go out to Levy--Levy took over in about 1970 or 1971 as the director--and while not impatient, he wanted this done, he's a good scientist. And he said, "Mike, to all these skeptical bastards, you've got to prove it and prove it again and make sure." And I said, "My God!" Then even after it was finally done, and I was very close to all the trials and read all the stuff, he didn't come out with it for nine months. I said, "Why did you do this?" He said, "I wanted a consensus report." He brought in two hundred and fifty cardiologists to fine-tooth comb that goddamn report. I said, "I think it's superb. You've had all along a running evaluation committee headed by people like Dr. [?] Stammer of Northwestern." I could name all these cardiovascular guys who'd been through this and have evaluated it constantly. Now, they have come out and said, "They're right. You must treat the mild hypertensive." "Now, why do you want to bring in many guys who are not in it?"

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He said, "Because I want to give everybody a shot at it." And it was a tough two-day-consensus and a lot of bitching about it, and, you know, the standards of it. And the one thing that saved us, among other things, was the Australian trial, which came out with exactly the same findings, exactly the same year and they'd stopped it at the end of four years. They said, "It's proven. In four years we've proven it. Why the hell do we have to do ten years? We've proven in four years that you can drop it significantly and that otherwise it's a risk." But in this country you have to prove a drop in mortality and a drop in morbidity; it's very difficult to prove this even over a ten-year period, you know. The way you use your control trial is just [on] one side those who have had no treatment whatsoever, your so-called placebo group, and your experimental group, you see. And here, even in the case of the hypertension group, to show you the complexity of it, the placebo group was not a placebo group because by now doctors were giving drugs to their patients.

L: Exactly, exactly.

G: So it became a messed up kind of placebo group and it was then criticized by the consensus, because you never had a pure thing, and Levy, and others saying you never can get it, because it changes from the original--when we started the plans in 1965 nobody was doing this kind of thing. Now, he said, we're pretty well out there with it, not totally. But they still accepted it, it really has been accepted. And then we've done three medical consensus reports which are very important. This is the thing that some of us worked out, Dr. Marvin Mosyer, who is now at Yale, and [inaudible] Westchester, and Ray Gifford, who represents the American Medical Association. I don't know, if they ever find out what he's doing in that thing they'll fire him. He's running for the board this year. I said, "They're going to find out you're a Trotskyite, you bastard."

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L: (Laughter)

G: He's never that. He didn't know who the hell Trotsky was. But I said, "You're a Trotskyite."

L: In spirit he is, anyway.

G: Oh, sure. And we got together and said, "You know, what we need above all is to put out to the general practitioner a step by step bible. Step one, you do this, start them on a diuretic; step two, you do this; step three, you do this. Give them a goddamn bible. Set up a joint commission of distinguished cardiologists in the field, you can't go in any internist's office--I don't know about the GPs--and not find their bible there. The guy's got a hypertensive and is unable to handle [it] on a diuretic, step two, go to a Beta-block. It's almost like going down this path, go down Connecticut Avenue and turn on 18th Street. Here are the side effects, here's what's going to happen. They're going to say they're dizzy or fatigued. That's all right; that's all right. Make out you're changing the drug, but don't change it. I mean all this jazz is in there, and these things are bibles to the medical profession and we should use a lot more of it.

Now, cancer is able to do it in some areas, but it's very difficult, because cancer is a terrible disease. I think it will be with us for the remainder of man's existence on this planet.

It was there four thousand years ago, really it's in every animal form. We can ameliorate it; we can ameliorate it in certain areas. But even in obvious things like breast cancer, we really could do that, because Charley Hovins, who won a Nobel Prize during World War II, was the first one to try the hormones, the estrogen and testosterone, on cancer. Looked like a big breakthrough. It's been a minor breakthrough. Even in breast cancer, I was reading something the other day from the Cancer Institute. From 1960 to 1984 they've gone up in control of breast cancer, which is kind of like a [inaudible] these things, from 63 to 72 per



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cent of five-year survival. And that is pretty lousy. Now, in other areas there's practically no progress. Cancer of the colon is a perfect example. They've concentrated; they've got a task force on it. They've done clinical trials of all kinds on colon cancer. I'm very involved in the situation, interested. It still keeps a damnable 46 per cent, five-year survival. Now, the five-year survival in itself is a cop-out because that to me is a terminal survival.

L: Exactly.

G: Now, when I say that to the director when I'd like very much to convince--Vincent DeVita--he said, "Everybody uses a five-year survival." Well, what comes out at the end of five years? My God, nothing, the guy doesn't have a colon anymore, he carries a bag around with him, you know, he's really a shell--

L: And he's still living in great fear as to the sixth year.

G: Oh, metastasis can occur and does occur, and DeVita would admit this but he said, "Well, it's something. It gives us a chance to get some good statistics." See, they're realists, these guys, otherwise they've got nothing. I said, "Because these people that I've seen, the five- year survival, a friend of mine, a very close friend of mine, has survived five years with cancer of the colon and the final operation. I had--three of four operations were done in Charlottesville. Now why the hell was it done in Charlottesville? I don't know. They must have somebody down there that's very hot in cancer. A three-hour operation. This guy's very close to me. Well, he's been a ghost since. Now, he's had the five-year survival. He's pale. He's got edema. He's shaky. He's in his mid-fifties. But he's a five-year survivor. You know, I'm frank enough to say what's happening.

L: Well, I think we've run out of time on the third tape. Any other comments about Lyndon Johnson before we end?

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G: Well, can you think of any because you're closer to the LBJ situation. You've been through the [LBJ] Library?

L: I think we covered almost everything. I did want to ask you about one other thing that comes through the papers so much, and that is, your constant attention and Mary Lasker's constant attention to appointments, trying whenever you can to get the right person on an advisory council, or in 1968 you tried very hard to get a particular person appointed as director of NIH and so on. You might say just a few minutes about the importance of this as you see it.

G: Well, I think it's terribly important. Now, the advisory councils, which are kind of like the college of cardinals, they are important. They meet four times a year and all of us have been on them, DeBakey, Lasker and myself. An institute director cannot make a grant without permission from these. It has to have the consent, you know, of the advisory council. Secondly, the study on the application--you send an application in from Austin, okay. You're a scientist. It goes to a study section assigned not by the Institute but by the Division of Research Grants. There are all kinds of study sections and they have the scientists around the country, not intramural. When we get it, all we get is a pink-sheet summary--that is, the advisory council--three pages, four pages. If you are confused by the pink sheet or doubtful, you send for the application, which we have an absolute right to do. Full application. I might have done it many times. It's a form of masochism, to read through the whole 160-page application and then to say, "No, I don't agree with the pink sheet." Because then what you do is put a number on it, you see, and the numbers rate you and that's how you get paid. In other words, 100 is the highest number and then you go to 500. Now, we've been paying lately under Reagan, you see, we're down to a danger point where we're paying at 130. And

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that is terrible, 100 being perfect, 130, you see. In my day in the mental health councils, we were paying up to 250, 260. Now, these were all scientifically approved. They've all been approved by a study section, recommended at this level, see, and yet we had to pay.

Now, therefore, it was very important that we get on the advisory council people who are simpaticos. Now, there are also political influences. That is, the president can appoint certain guys--Frank Sinatra was very influential in getting DeBakey on, because Reagan wasn't all that fond of putting DeBakey on the advisory council. I'm talking about the current Heart Advisory Council, because he knew of DeBakey's Democratic record from the beginning. They gave him a line on who he was supporting in Houston and that he was a Democrat. I mean, he goes back to Truman. And it was hard to--Sinatra, though, he had operated on Sinatra's father and so forth.

So there are political considerations; there are other considerations. There's all kinds of wheeling and dealing. Then the institute director tries to block you. Now, the original push for me in 1961 came from the Kennedy Administration, [he] put me on the council. The Director of the National Institute of Mental Health hated my guts, because I was critical of psychiatry, it's walking away from state mental hospitals, this whole business. This guy was a hack. He was just a hack. He'd been in the Coast Guard during the war. He tried and he had a lot of influence, held it up six months until finally it got to the point where it went to the Secretary of HEW, largely through Florence Mahoney, who said, "You know, they're holding up Mike Gorman's appointment." She reiterated this to me again last week because I was kidding around about it. I said, "What's Ribicoff doing now?" Well, he's retired, he's retired only four years ago, marvelous guy. He just called up the director and said, "He's a friend of mine. I'm telling you, I'm the Secretary of Health, Education and Welfare." So I

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was appointed [?] reluctantly, and it was a very tense business.

And that's just one example of the kinds of stuff that constantly go on and the importance of getting people on and getting an affirmative vote. See, we're going [to] start a whole clinical trial business. This has to be approved by the advisory council. When we did the mild hypertension thing, I was not on the heart council at the time; DeBakey was not on it. It was very tough to do, to get the actors and those people who were then on that council, which is a rather conservative one, but fortunately I got to a few of these guys and got them to vote, because they said, "God"--and he then said it's fifty million. They said, "Oh, my God, fifty million. What's going to happen to the individual investigator?" Because that's all they're worried about, their individual grants. You're going to take fifty million dollars out of us?" And we would say yes, because we have to get something on mild hypertension. We have to do this. The same thing with cholesterol. The major objection of these guys, your academia, they you know, put it in high, flowing terms. It's all raw, basic research. Discourage individual--you know, all the shit they put out. But it comes down to the fact "Hey, I'm going to lose a grant if you guys fool around with seventy million dollars in a ten-year program."

And it was always a battle. So you got people on. Mary called up people at times, got people pushed on, you know, to the cancer, particularly cancer. Cancer's always been her primary interest. And she would get people put on that thing that [inaudible]. When we established the Nixon panel, the three members, the fake panel as we called it--the presidential panel, she wanted originally Laurance Rockefeller. Laurance is too recessive and too shy. Put on Benno Schmidt from Wall Street, a powerful guy. Then we got Joshua Lederberg, who's now president of Rockefeller University, and is sympathetic. We always

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found out are they sympathetic to us; do they understand what we were trying to do? You know what I mean? We kind of missed on Lederberg, because I didn't miss but I had served with Lederberg on a council and I said, "No, he's not what you think he is, Mary. He's a geneticist. So watch out for that. If you're interested in your grandfather." So, it was politically important.

Tape 3 of 3 and Interview I

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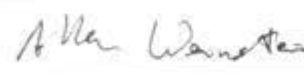
Legal Agreement Pertaining to the Oral History Interview of

MIKE THOMAS FRANCIS GORMAN

In accordance with the provisions of Chapter 21 of Title 44, United States Code, and subject to the terms and conditions hereinafter set forth, I, Michael E. Gorman, of Charlottesville, Virginia, do hereby give, donate, and convey to the United States of America all my rights, title, and interest in the tape recording and transcript of the personal interview conducted with my father, Mike Gorman, on June 5, 1985, in Washington, D.C., and prepared for deposit in the Lyndon Baines Johnson Library.

This assignment is subject to the following terms and conditions:

- (1) The transcript shall be available for use by researchers as soon as it has been deposited in the Lyndon Baines Johnson Library.
- (2) The tape recording shall be available to those researchers who have access to the transcript.
- (3) I hereby assign to the United States Government all copyright I may have in the interview transcript and tape.
- (4) Copies of the transcript and the tape recording may be provided by the Library to researchers upon request.
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Legal Agreement Pertaining to the Oral History Interview of  
MIKE THOMAS FRANCIS GORMAN

In accordance with the provisions of Chapter 21 of Title 44, United States Code, and subject to the terms and conditions hereinafter set forth, I, Breon Gorman, of Los Angeles, California, do hereby give, donate, and convey to the United States of America all my rights, title, and interest in the tape recording and transcript of the personal interview conducted with my father, Mike Gorman, on June 5, 1985, in Washington, D.C., and prepared for deposit in the Lyndon Baines Johnson Library.

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<u>Breon Gorman</u>	<u>January 27,</u>
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