Memories & Reflections
Academic Medicine, 1936-2000

John B. Graham, M.D.
Professor (Emeritus) University of North Carolina Chapel Hill, N.C.
James Bell Bullitt, M.D., 1874-1964: A University of North Carolina Medical Giant

The University of North Carolina dedicated in 1984 the Preclinical Educational Building on the Chapel Hill campus to Kenneth Brinkhous and to James Bell Bullitt. Dr. Bullitt was one of the, four great leaders of the School of Medicine in the first half of the twentieth century, the others being Isaac Hall Manning, Professor of Physiology; Charles Staples Mangum, Professor of Anatomy and William de Berniere MacNider, Professor of Pharmacology. Those four men charted the course and fought hard for the four-year medical school. Dr. Bullitt, felt so strongly about this that he created an endowment fund to help support a four-year school and placed his own funds into it.

I want to share with the readers of the North Carolina Medical Journal my memories of Dr. James Bell Bullitt. I was very fond of him, and he had an important influence on my life. In fact, he served in loco grandparentis to me as I shall recount, although I doubt that he was aware of it.

Dr. Bullitt was born in Louisville, Kentucky in January 1874, 110 years ago, and lived to the age of 90, dying in March 1964. He was Professor of Pathology here from 1913-46 and served an additional 18 years as emeritus elder statesman, counselor, and friend of the Department and School. He came to his office almost daily until his final illness began two years before his death.
Dr. Bullitt belonged to a large family which has played an important role in the affairs of the state of Kentucky and of our nation. One of his great-grandfathers was Louis Marshall, the younger brother of John Marshall, the great Chief Justice of our Supreme Court. Justly or not, Louis Marshall, who was studying medicine in Paris during the French Revolution, was imprisoned for several years for "revolutionary activities." After his release Dr. Marshall practiced medicine in Kentucky and was later president of both Transylvania University and Washington College, now Washington and Lee University. Dr. Bullitt's brother, William M. Bullitt, was for many years an important figure in Kentucky politics and served as Solicitor General of the United States in the Taft administration. A cousin, William C. Bullitt, was the first American Ambassador to the Soviet Union in the late 1930s.

After his early education at Rugby Preparatory School in Louisville, Dr. Bullitt studied at Washington and Lee, then at UVA in Charlottesville, Virginia. His education occurred at the time when Cardinal Newman's "Idea of the University" was the American ideal, graduate education of the German type having only just been introduced at Johns Hopkins and Chicago. Newman's dictum, *mens sana in corpore sano*, was Dr. Bullitt's creed. In modern idiom, he was a man of high intelligence who tried to remain physically fit all his life.

Another influence which must have shaped Dr. Bullitt's outlook was the four years he spent at Washington and Lee not long after General Lee's presidency. In the South at that time, Lee's ideals — real and imaginary — were regarded as the hallmark of a gentleman. These included courtesy, kindness, thoughtfulness, and an elevated view of womanhood which seems very odd to us today. (Another W & L graduate, Tom Wolfe, has referred to this view of women as the "Myth of the Ice Goddess.") Generations of medical students referred to Dr. Bullitt affectionately and respectfully as "Gentleman Jim."

He was a lifelong athlete. He played football at Washington and Lee and I think I remember his telling me that he was also on the football team at Virginia while a medical student. Although he played linebacker and fullback, he was not a large man. But American football was a different sport at the turn of the century,
more like English rugby than armored warfare. My father, for instance, weighed only 125 pounds when he was All State quarterback at Davidson in 1910. Dr. Bullitt's appearance was that of an athlete. He walked with a firm step and stood straight as a ramrod as long as I knew him.

I first encountered Dr. Bullitt as a second-year medical student in 1939 when I was 21 and he was 65. My class was the first to study pathology in the "new" medical school building - now MacNider Hall. On the first day of class, we were met by a dignified and erect gentleman who appeared to be of middle age and who gave us detailed instructions on how to conduct ourselves in his course. The equipment in his new teaching laboratory included a new type of stool whose height could be adjusted and which swiveled 360 degrees. Wishing to be certain that everyone understood how to use it, Dr. Bullitt placed one atop the bench behind which he was to lecture, hopped up on the bench top, and spun himself around. We were dumbfounded, astonished both at the agility of this elderly gentleman and at the dignity with which he conducted himself. He always possessed complete aplomb, and I never once observed him to show a trace of self-consciousness.

Ten or fifteen years later, when Dr. Bullitt was now retired and must have been in his late 70s, I remember a conversation in the hall of MacNider with him and another person, possibly George Penick. We were discussing the importance of physical fitness. Dr. Bullitt insisted that it was a life-long matter and made his point by plopping down on the floor, salt-and-pepper grey suit and all, and proceeding to do five pushups. I am sure he would have done 25 had his astonished colleagues challenged him.

In conversation Dr. Bullitt spoke clearly, steadily, and at sufficient length to leave no uncertainty about his meaning. He joked about his loquacity and told a story on himself about a lengthy examination in college. Essay questions were normative in the 1890s, and Washington and Lee permitted unlimited time to respond. He wrote for seven hours on an examination and made a good grade, but his instructor requested that he come by for an interview. It consisted of a series of questions and answers.
"Are you from Kentucky?"
"Yes."
"Are the women beautiful there?"
"They seem to be."
"Are the race horses fast?"
"They are said to be."
"Is the whiskey good?"
"I suppose it is."

"Do you think, Mr. Bullitt, that it would be necessary for you to drink a whole barrel of whiskey to decide?"

I had conversations with Dr. Bullitt about many things, including financial matters. Two stand out in my memory. Both illustrated his belief that rational acts speak for themselves and require no explanation or apology. Dr. Bullitt believed strongly in husbanding his resources against adversity, having lived through at least three severe financial depressions. He pointed out that a well-known weakness of others was spending large amounts of money on unessential things such as expensive clothing. He said that he spent as little on clothing as would allow him to continue to be regarded as dignified. He explained that a man really needed only two suits of clothes if both were approximately alike and of moderately dark hue. One could be worn while the other was at the cleaners. He preferred a salt-and-pepper grey pattern because it did not show stains as readily as a solid pattern. A suit could be worn for many years if it was kept neat and clean, and no one would know whether it was old or new. An old one could be replaced by a new one, and no one would be the wiser. I don't know whether Dr. Bullitt actually practiced this policy, because I never knew when he was serious and when he was pulling my leg. I wish that I knew, however, because the clothing scheme had obviously been very carefully thought out and had much to recommend it.

On another occasion he told me a story about a stock market deal. Again, I don't know whether the story is true or apochryphal, because I heard it in almost the same words in a Broadway play several years later. Dr. Bullitt stated that in 1932 at the depth of the Great Depression, he decided that the country was either going to the dogs
or would completely recover. Stock prices were at rock bottom; General Motors, General Electric, Standard Oil, etc., selling for less than $5 a share. If the country were to disintegrate, he would probably not have to repay his debts. If the country were to recover, he could make a ton of money by investing in stocks. So he went to Durham, borrowed all the money that Mr. John Sprunt Hill would lend, and bought blue chip stocks. He told me this story shortly after I joined the faculty in 1946, by which time such stocks should have divided several times and probably were quoted at $25-50 a share. Although he never stated that the financial problems of his retirement had been solved by this astute piece of business, such a move would have been completely consistent with his rational approach to life and his decisiveness when action was needed. If the story is correct, it was a very wise move on Dr. Bullitt’s part because at his retirement in 1947 the University had not yet developed a pension plan for its faculty members. They received pay as long as they could visit the departmental office.

When I took Dr. Bullitt’s pathology course, it was tough, but it was taught in a very simple and straightforward manner. We read the textbook of William Boyd, following his outline chapter by chapter. Our readings were supplemented by Dr. Bullitt’s daily lectures, demonstrations of the day’s slides on the projector by Dr. Russell Holman, autopsies performed at Watts Hospital at any time of day or night by Dr. Fred Patterson, and Dr. Bullitt’s dreaded unknown slides.

Dr. Bullitt was an incredible lecturer. He would appear on the dot of the hour dressed in his grey suit, reach into his left inside jacket pocket and pull out a small set of 3×5 cards. He would turn to a spot marked by a paper clip, place it in front of him and start talking. He would talk steadily for exactly 40 minutes, put the paper clip at the point he had reached, replace the cards in his pocket, and answer questions. He went through this exercise without apparent effort for two semesters, touching on the major points and illustrating them with anecdotes, many of which dated back to his years in Mississippi. We thought that most of his stories were probably fabricated, because they fitted so neatly into his subject matter; but in any event they were memorable and anything might have happened in
Mississippi.

Thirty or so times a year, Dr. Bullitt exposed us to unknown slides, and we played the game of unknowns by very strict rules. Exactly 30 minutes were devoted to the examination of a slide and the writing of a 50-word description of the tissue and the diagnosis. If one did not finish on time, or if the description contained more than 50 words, an "F" was awarded. This exercise forced students to develop an unusual writing style, one which might be referred to as "Bullitt-English," a form of pidgin English. A paragraph of the approximately correct length was written and the words were carefully counted. Then the paragraph was reduced to exactly 50 words by deletion of a sufficient number of articles and prepositions.

A student later to become a prominent surgeon chronically failed to observe this rule. He flunked Pathology and was required to repeat the entire second year. He never again spoke to Dr. Bullitt after having passed the course on the second try.

Dr. Bullitt must have suffered from having to read these strange paragraphs, but he retaliated with trick slides, fabricating impossible tissues. We found several of these unknown slide sets after his death. I remember one: which consisted of a piece of human liver into which he had inserted the retina of an eye. Since identification of the tissue was the first step in diagnosis, this must have caused much head scratching. I also remember an unknown given to my class with the statement that the tissue had been obtained from a man found dead in bed in Hillsborough. The tissue proved to be from the pancreas. After spending 30 minutes searching unsuccessfully in my textbook for a pancreatic disease which might have caused sudden death, I gambled in desperation on "acute pancreatitis." When Dr. Bullitt returned the graded papers, he explained that the pancreas was in fact normal and that sudden death had resulted from having been hit on the head with a hammer while asleep.

Dr. Bullitt influenced me in other ways. He convinced me that I should smoke a pipe rather than cigarettes, and he taught me wood carving. He pointed out that even cheap pipe tobacco could be made smokeable by humidifying it in a canister which contained an apple. I learned from him about "Old Crop" which was sold at Shields' gro-
cery store on Franklin Street and was dispensed in a cloth bag at $1 a pound. I shudder to think how my colleagues and family must have suffered during the 15 years I smoked “Old Crop.” But woodcarving was innocuous and great fun; it even prevented me from going insane with boredom at a later point in my career when it became necessary to spend long hours in committee meetings.

Dr. Bullitt carved and polished his wood objects wherever he was, the polishing being particularly obvious at faculty meetings. He was quite unselfconscious about where he did his polishing, because the carvings had to be polished somewhere, and what else could one do at a faculty meeting? The wood polishing led the students to spoof Dr. Bullitt in one of the Student-Faculty Day skits by presenting a mock meeting of the Pathology department in which the student playing Dr. Bullitt would turn on a floor-polishing machine every time the student playing Dr. Brinkhous tried to speak. But Dr. Bullitt was really very thoughtful; he used only fine grain sandpaper at faculty meetings.

He was unfailingly courteous, kind, and thoughtful, and loved children. My children adored him and remember him with great affection. Whenever he saw them at departmental parties or in the halls of MacNider, he always stopped to speak, following which he would toss them high in the air. They remember him as tossing them without removing his pipe from his mouth. They thought that, like Popeye, it was part of his face.

Student Aid was a very small operation at Chapel Hill before World War II and many medical students were on very tight budgets. Dr. Bullitt was known to be always good for a loan when every other possibility had been exhausted. No one knows how many loans he made, but he told Miss Dunlap, the Dean’s secretary, that every loan he had ever made had been fully repaid, except one.

Dr. Bullitt was a life-long patriot. He had been a medical officer in World War I and I am certain tried to enlist when World War II began. Since he was in his late 60s and could not be accepted for military duty, he volunteered for the Red Cross, becoming the teacher of first aid for patriotic local ladies. Mrs. Berryhill remembers with amazement watching Dr. Bullitt teach resuscitation to the dignified ladies of the community under circumstances which would have been very
amusing had first aid not been such a deadly serious matter to them.

Gasoline was tightly rationed during World War II and Dr. Bullitt had a serious problem. He liked to go home for lunch, but four trips a day from Gimghoul Road to MacNider were too time-consuming on foot and a car required too much gasoline. So, naturally, he bought a bicycle. Dr. Bullitt on his bicycle—fully dressed, pipe in mouth, hat on head, clips on his ankles, and accompanied by a small beige dog—was an unforgettable sight in Chapel Hill during the war. Unfortunately, no one seems to have taken a picture of him in full flight, although there is a snapshot of him booted and spurred preparing to ride. At the war’s end, the increase in auto traffic caused Mrs. Bullitt to become very worried about his safety. She wanted him to give up the bike, but Dr. Bullitt had by now become very attached to bike riding, and it almost required an act of the Legislature to get him to stop.

I think Dr. Bullitt regarded George Penick and me as wild-eyed radicals when we returned to the University from World War II full of one-worldism and sympathy for the downtrodden. George was especially suspect because his father was the bishop of Dr. Bullitt’s diocese and the Bishop was thought to hold very advanced views about social issues. We had many arguments about social welfare, racial integration, the atomic bomb, and other important topics of the day. Neither side budged an inch, because all of us were very stubborn, but we always ended our arguments on a friendly note, prepared to stonewall again the next day.

Dr. Bullitt was the most thoughtful of men and in his later years was waited upon by an attentive group of ladies in the medical school whom Mrs. Bullitt referred to as his “harem.” Dr. Margaret Swanton, Miss Sara Virginia Dunlap (the Dean’s secretary), and Miss Mittie Pickard, his long-time technician, were the frequent recipients of flowers from his garden, or small gifts, and he never forgot their birthdays. They, in turn, were equally solicitous of him. Miss Pickard, unfortunately, has died, but if she were alive and here today she would be sharing in this appreciation. I would expect, however, that she would take me off to one side and chew me out for not having said things exactly the way she remembered them.

Dr. Bullitt appeared in the Department daily until he entered a
nursing home in 1962. This was the same year that we occupied the northern extension of MacNider Hall, now known as the Research Wing, and about a decade before we moved into the building we recently dedicated to Dr. Bullitt and Dr. Brinkhous.

I have wondered what Dr. Bullitt would have thought of our Preclinical Educational Building. It is tall and one's colleagues are scattered among nine small floors. We have learned that departmental collegiality is greatly impaired when departmental housing is arranged this way. I know that Dr. Bullitt would have disliked this very much, because he loved to wander around the halls in MacNider inquiring about our welfare and striking up conversations. But Dr. Bullitt always took the rational approach. Looking at all sides of the question, he probably would have opined that a nine-story building connected by eight flights of stairs is not the best arrangement, but it has at least one redeeming feature. One can remain physically fit by running up and down the stairs!

Dr. Bullitt was a member of the medical faculty, active and emeritus, for more than 50 years. This places him in a very small and select group. The group includes Dr. MacNider, his contemporary. It is very fitting, therefore, to those of us who knew them both that the building bearing Dr. Bullitt's name be adjacent to the one that bears the name of Dr. MacNider.

References and Notes