Nano-Man of the Moment
Changing the Way We Think About Medicine
In the past two issues of Medicine at Michigan, this series on the history of the deans of the University of Michigan Medical School has commemorated the lives and medical careers of deans from the earliest days of the Medical School through the tenure of Albert C. Furstenberg. In the conclusion of this three-part series, the leadership of the deans over the past four decades is highlighted. Although their legacies are fresher in the minds of the University community, it is hoped that acknowledgment of their contributions within the long-term perspective of the Medical School’s development will help us not only understand the past, but also shed light on the present and the future.

When Albert C. Furstenberg retired in 1959 after 24 years as dean, William N. Hubbard Jr. was appointed to succeed him. Hubbard graduated from Columbia University in 1942 and earned his M.D. at New York University in 1944. He planned to return to his home state of North Carolina and start a general practice, but the opportunities he found in New York changed his plans. He assumed the chief residency at Bellevue Hospital in New York City in 1950, which included responsibilities in research, teaching and administration at New York University. Hubbard, who specialized in internal medicine, became part-time assistant dean at NYU, and eventually full-time dean. Even though his work was becoming more and more distant from clinical practice, he always remembered the needs of the patient. He explained in 1965:

I changed from general practice to internal medicine to be more effective in patient care. Then I went into teaching and research so that I could have a wider influence on care. I turned to administration to enhance teaching and research. I still find the greatest satisfaction in the relation between what I do and the care of the patient, even though it is increasingly indirect. [University of Michigan Medical Center Journal, 1965; v. 31, p. 241.]

Hubbard joined the University of Michigan in 1959 as professor of internal medicine and dean of the Medical School. At age 39, he was one of the youngest in the nation to hold such a position. He was the Medical School’s first full-time dean — without private practice and departmental administration responsibilities — and helped to redefine the role. Hubbard reorganized policy and practices at Michigan, emphasizing the importance of translating medical research advances into educational programs for students and practicing physicians. He was successful in involving the entire faculty in the affairs of the school and aimed to provide leadership that would help students and faculty work more effectively. Hubbard also directed a $33.5 million program to remodel existing buildings and construct new ones at the Medical School.
In 1969, the U-M regents made Hubbard the first dean of the Medical School to also have responsibility for directing the Medical Center. The logic behind this administrative restructuring was that teaching, patient care and research are inseparable, and the chief administrator should be responsible for the intersection of hospital and academic functions. A primary objective of this new position was to increase and efficiently utilize financial support for the Medical Center’s activities.

Within a year Hubbard had resigned, becoming vice president of the Upjohn Company in April 1970. Prominent in medical affairs at the national level, he often served as a consultant to government officials regarding health issues. Over the course of his academic and corporate careers, he served on the executive council of the Association of American Medical Colleges and as chairman of the board of regents of the National Library of Medicine. Hubbard’s energy, experience and interest in the problems of students and faculty were great contributions to the University of Michigan.

Following Hubbard’s resignation, John A. Gronvall was appointed dean of the Medical School and director of the Medical Center. Gronvall had joined the Medical School in the summer of 1968 as associate professor of pathology and associate dean of the Medical School. He became a full professor in 1972.

Gronvall led the Medical Center through a period of growth during his tenure as dean and director from 1970 to 1982. With support from the federal government, enrollment at the Medical School was increased to record levels. In 1978, the biggest year, the Medical School graduated 250 new physicians. Women entered the Medical School in ever greater numbers; by 1980 the enrollment was 30 percent female. The Inteflex program was started, in which 50 select incoming freshman could integrate their undergraduate and medical studies in a period of six years. There was new clinical emphasis on family practice and patient education. Under Gronvall’s deanship, recruitment of top-level faculty to the Medical School was increased as was involvement of faculty in patient care activities. Support for research in the Medical School was also increased. The Medical Library moved to the new A. Alfred Taubman Medical Library on Catherine Street in 1981, and approval was granted and construction started on the Replacement Hospital Project. Gronvall also helped obtain approval for the construction of a Medical Science Research Building (MSRB I).

John Gronvall was educated at the University of Minnesota, where he received his B.A. in 1953, his B.S in 1954, and his M.D. in 1956. He held an internship at Minneapolis General Hospital and went on to the University of Mississippi to become associate professor of pathology, associate dean of the Medical School, and associate director of the Medical Center. Gronvall also served as a consultant to medical divisions of the federal Department of Health, Education and Welfare and was frequently invited to speak on medical center administration and medical education at various national meetings. His published articles included “The Medical School Curriculum,” which he wrote with William Hubbard Jr. and George R. DeMuth for the Journal of Medical Education in 1970. In 1983 Gronvall resigned to take the position of deputy chief medical director at the Veterans Administration in Washington, D.C. He died suddenly in 1990 at age 59.

Following Gronvall’s tenure as dean, the position of a combined dean of the Medical School and director of the Medical Center was eliminated. A new position, vice provost for medical affairs, was created in 1983 to provide direct oversight to the dean of the Medical School and the director of the hospital; George Zuidema, M.D., was appointed to the new position. At this time, Peter A. Ward was appointed interim dean of the Medical School.

William N. Hubbard Jr.

John A. Gronvall

Peter A. Ward
Ward, who earned his B.S. (1958) and M.D. (1960) degrees from the U-M, became professor and chair of the Department of Pathology at the University of Michigan in 1980, helping to strengthen the Department’s academic research programs. As Dean Gronvall had said of Ward, “His work has provided the scientific community with innovative techniques and basic information which have implications for a wide range of disciplines and disease processes.” [Hospital Star, December 1979.]

Ward was interim dean for three years, during which time he managed several important projects at the Medical School. He helped develop a process to reduce the size of the entering medical class by 30 students, necessary because of the changing patient population and patterns of health care delivery. The Neidhardt report on medical education, which would serve as a blueprint for curricular change, was approved by the executive committee. Under Ward, efforts were made to maintain the diversity of the class, including the implementation of the AIMED Program, a curricular innovation to support educationally underprivileged students. Ward also provided leadership during a Supreme Court case involving the University and an Inteflex student, which affirmed the right of professional educators to make academic decisions free from interference from the courts and determined that universities do not have a contract to guarantee the success of students. In addition, work on MSRB I continued, and construction was begun on MSRB II. Construction also continued on the new University Hospital and the Taubman Health Care Center. The Medical School received designation as one of a dozen Howard Hughes Medical Institute sites in the nation, and plans were made to locate it in MSRB I.

Ward returned to his responsibilities as chair of the Department of Pathology in 1985 and remains in that position today. He has conducted research on mediators and regulators of the inflammatory response, with special interest in cytokines, complement and protease inhibitors. He has also served on many national review boards and as president of the U.S. Academy of Pathology.

Joseph E. Johnson III was appointed dean in May of 1985. Johnson had earned two degrees from Vanderbilt University, a B.A. in 1951 and an M.D. in 1954. He specialized in infectious diseases and internal medicine and had been a member of the faculty in the Department of Medicine at the Bowman Gray School of Medicine of Wake Forest University.

During the period that Johnson was dean of the U-M Medical School, there were significant changes in medical education throughout the nation, with revisions to the medical school curriculum. For example, plans were made to put more emphasis on the importance of preventive care and to improve teaching in ambulatory care. The primary thrust of curricular reform, however, was to foster habits of critical thought and independent learning from premedical work through graduation. Johnson recruited eight new department chairs, and 11 endowed or collegiate chairs were established during his tenure. Research funding from external sources more than doubled, and the physical resources expanded as well.

Johnson worked to enhance the Medical Center. He was dean when the new University Hospital and A. Alfred Taubman Center opened in 1986. Several multidisciplinary “Centers of Excellence” were designated by the regents, including cancer and geriatrics centers. The Howard Hughes Medical Institute at U-M grew to 10 investigators, improving Michigan’s strength in molecular genetics. In addition, MSRB I was opened in 1986 and MSRB II in 1989, with planning begun for MSRB III. After completing his service as dean on June 30, 1990, Johnson remained on the faculty as professor of internal medicine.

Subsequently, Giles G. Bole was appointed dean. Bole spent nearly his entire academic career at the University of Michigan, earning his B.S. in 1949 and his M.D. in 1953. In 1959 he joined the Medical School faculty and from 1969 to 1986 was director of the Rackham Arthritis Research Unit. In 1975 Bole became chief of the Rheumatology Division in the Department of Internal Medicine, a position which he held until 1986 when he joined the Dean’s Office. He served as the Medical School’s associate dean for clinical affairs, then as senior associate dean and executive associate dean until 1990.

In 1990 Bole was appointed interim dean of the Medical School and was formally named dean in July 1991. The Medical School was recognized in several notable ways during Bole’s tenure, receiving a Robert Wood Johnson Clinical Scholars Program Grant and being redesignated one of the top members of the NIH Medical Science Training Program. The School was also refunded with the largest General Clinical Research Grant provided by the National Institutes of Health. The Medical
School moved up from sixteenth to ninth in the U.S. News and World Report rankings of research-intensive medical schools, and in 1996 it ranked ninth in total research funding from the National Institutes of Health. J. Bernard Machen, University provost, said, “Giles has an unusual grasp of the complexities of health care and has brought tremendous energy and leadership to his position.” [University Record, July 9, 1996.]

Bole also oversaw the appointment of 12 department chairs, as well as the appointment of the director of the NIH General Clinical Research Center and co-directors of the Mental Health Research Institute. In 1992, the School started using a radically new curriculum, and, to better serve the students, class size was reduced from 207 to 170. Near the end of Bole’s tenure as dean, the Medical School commissioned a cultural diversity audit, helping the School to critically assess itself and develop new ways of integrating the values associated with diversity into the School’s culture.

Bole’s leadership brought about improvement and growth in the physical plant of the Medical School and the entire University of Michigan Medical Center. Medical Science Research Building III was built, and the older Medical Science Buildings I and II were renovated and remodeled. The Medical School administration worked with the Michigan delegation in Congress to obtain funding for remodeling and reconstruction of the Ann Arbor VA Medical Center. Two other major construction projects were started: the Cancer and Geriatrics Centers building and the East Ann Arbor Health Center, a new ambulatory primary care facility. The Faculty Group Practice was organized in 1996.

In July 1996, Bole announced his intention to step down from the deanship and return to the faculty; he was named dean emeritus of the Medical School shortly thereafter. Upon Bole’s resignation, Homer A. Neal, interim president of the University, said, “His recent efforts have seen the Medical School respond to and meet the challenges of a rapidly changing health care environment. I know that I join his many colleagues and friends in thanking him for his years of service and dedication to the University community.” [University Record, July 9, 1996.]

Upon Bole’s resignation, A. Lorris Betz was appointed interim dean. Betz earned his bachelor’s, medical and graduate degrees at the University of Wisconsin, and did his residency in pediatrics at the University of California at San Francisco. He completed a research fellowship in pediatric neurology, also studying mechanisms of brain injury and edema formation in stroke and intracerebral hemorrhage, central control of blood pressure, mechanisms of cerebrospinal fluid production, and gene therapy to the central nervous system.

Betz had been appointed to the faculty of the University of Michigan in 1979 as assistant professor in the Departments of Pediatrics and Communicable Diseases and Neurology. In 1987 he was appointed as full professor in the Departments of Pediatrics and Communicable Diseases, Neurology and Surgery, and he became the director of the Crosby Neurosurgical Research Laboratories. He was named the first Crosby-Kahn Collegiate Professor of Neurosurgery and Neuroanatomy. From 1989 to 1993, Betz was associate chair for research in the Department of Pediatrics and Communicable Diseases.

Betz began his administrative career in 1985 as director of the Office of Research Programs in the Department of Pediatrics and Communicable Diseases. From 1993 to 1994 he was associate dean for faculty affairs, and he served as senior associate dean for academic affairs and executive associate dean before being appointed interim dean of the Medical School on August 1, 1996. J. Bernard Machen, provost and executive vice president for academic affairs, said at the time,

Lorris Betz is not only a respected member of the Medical School faculty, but he is experienced as a strong administrator. We are fortunate that he has agreed to serve in an interim role for the University as dean, and I look forward to working even more closely with him. He has been involved in all aspects of the administration of the Medical School, and I am confident that he will help us continue our leadership role as one of the top schools in the country. [University Record, July 9, 1996.]

Other transitions in the U-M Health System occurred as well. After the departure of George Zuidema in the mid-1990s, Rhetaugh G. Dumas, former dean of the School of Nursing, briefly held the position of vice provost for health affairs, reporting to the University provost. In 1997, review by the regents of the Health System’s executive structure resulted in the creation of the position of executive vice president for medical affairs, a position which continues to provide oversight to the dean of the Medical School and the director of the University hospitals while reporting directly to the University president. In September 1997, Gilbert S. Omenn, M.D., Ph.D., was appointed by the regents as the University’s first executive vice president for medical affairs. Omenn came from the University of Washington in Seattle where he had been dean of the School of Public Health and Community Medicine and professor of medicine (medical genetics) and environmental health.
During Lorris Betz’s service as interim dean, several new programs were started at the Medical School. The Biological Sciences Scholars Program was started to help recruit outstanding junior faculty in an institution-wide manner, and the Program in Biomedical Sciences was established to oversee the recruitment and admission of all Medical School graduate students. Also, the “white coat ceremony” was inaugurated for incoming medical students. After serving for more than two years as interim dean, Betz returned to the faculty; shortly thereafter, he was appointed senior vice president for health sciences and dean of the School of Medicine at the University of Utah in Salt Lake City.

Following Betz’s departure, Allen S. Lichter was appointed interim dean in December 1998. A native of Detroit, he earned two degrees at the University of Michigan: a B.S. in 1968 and an M.D. in 1972. He served his internship at St. Joseph Hospital in Denver, and completed his residency in radiation oncology at the University of California in San Francisco in 1976. Lichter went on to become the director of the radiation therapy section of the National Cancer Institute’s Radiation Oncology section, as well as a faculty member at the Johns Hopkins University School of Medicine.

Lichter is a professor of radiation oncology and served as the first chair of the department from 1984 to 1997. His clinical interests are in breast cancer, lymphoma and eye tumors. From 1984 to 1991, Lichter was director of the Breast Oncology Program at the University of Michigan Health System’s Comprehensive Cancer Center.

Dean Lichter is past president of the American Society of Clinical Oncology, the largest and most active group for oncology membership in the world. He is only the second radiation oncologist to be elected to this prestigious position. He is also on the board of directors of the American Society of Therapeutic Radiology and Oncology and serves as one of six associate editors on the editorial board of the Journal of Clinical Oncology, the world’s leading cancer journal. He has served on the editorial board of the Journal of the National Cancer Institute and the International Journal of Radiation Oncology, and he has been an editor of two books on breast cancer. He is also co-editor of the textbook Clinical Oncology, first published in 1995, with a second edition released in 1999.

Lichter is well-known nationally and internationally for his research in breast cancer treatment. He was an early advocate of the lumpectomy approach to breast cancer, and conducted one of the first clinical trials that found the use of lumpectomy and radiation therapy to be as effective as traditional mastectomy treatment. With Lichter’s leadership, the University of Michigan developed new three-dimensional X-ray imaging technology that allows physicians to guide radiation more directly to tumors, reducing damage to healthy tissue. He is a pioneer in three-dimensional treatment planning and conformal radiation therapy, especially for breast cancer. This technology is now widely used throughout the U.S.

On April 16, 1999, Gilbert S. Omenn announced that Interim Dean Allen Lichter would be recommended to the regents as dean of the Medical School. Lichter’s appointment as dean became effective May 1, 1999. The Dean’s Search Advisory Committee described Lichter as a “surpassing choice.”

At the time of Lichter’s appointment Omenn said about the new dean:

He is a wonderfully able, positive, and forward-looking individual with high values, keen interest in all of the missions of the Medical School and a commitment to diversity. I look forward to working with him as a key member of our Health System leadership team for many years to come.

The Medical School’s fifteenth dean, Allen S. Lichter follows his many able predecessors and becomes part of a long legacy of distinguished leadership in academic medicine in America.

Teresa Black, an Ann Arbor native, is a recent graduate, in anthropology, of New York University.

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