

THE LENGTHENED SHADOW

September 19, 2005

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On January 26th of this year, The New York Times featured a shocking piece of news: the Plaza Hotel— beloved by generations of notable New Yorkers and high-profile tourists, and immortalized by Kay Thompson's Eloise—had been bought by a developer for conversion into condominiums and stores. Still worse, the hotel's magnificent restaurants and private function rooms no longer exist except in memory.

O Tempora! O Mores!

The Plaza was the site of cherished events in my family's annals. My parents were married in one of its private function rooms in 1917, and in 1925 my *wife's* parents were married in the *same* room. 50 years later my wife and I threw a glorious golden wedding anniversary party in that *very* room; and we helped celebrate *our* 50th wedding anniversary over dinner in the Plaza's Oak Room just four years ago.

Ah, the Oak Room! Recalling that elegant venue evoked other family memories—mainly of my mother's lordly father, known to me as Gramp. He was the solar body whose powerful gravitational field kept his huge family, his professional colleagues, his card club cronies, his old friends and his favored dinner guests circling in proper orbit around him. Having been anointed with membership in the last orbiting category when I reached manhood, I dined with Gramp frequently in the Oak Room-- his favorite restaurant.

Members of all five of his satellite groups gathered at testimonials—usually held at the Plaza-- that honored him with increasing frequency as he aged. I vividly recalled attending one such function held in the Plaza's grand ballroom at noon on December 6, 1953 with 500 paying guests. The nine speakers included Mayor-elect Robert F. Wagner, Jr., whose father, the late U.S. Senator, the honoree had known well; Styles D. Ezell, M.D., secretary of the New York State Board of Medical Examiners, whose position the honoree had once held; and Admiral Lamont Pugh, M.D., surgeon General of the U.S.

Navy, with whose immediate predecessors the honoree had been professionally associated. At last, following almost mind-numbing recitals of the honoree's accomplishments and attributes by the speakers, the emcee called on him to respond. He arose and strode briskly to the rostrum; laid his Havana cigar carefully in an ash-tray; disdainfully pushed the microphone aside; and started speaking in a baritone voice that seemingly without effort filled the ballroom. He said at the outset:

“On such occasions as this, since I cannot well memorize, I have always had to place my trust upon inspiration, and although unprepared and unstudied, it has always been my good fortune to carry on, barren of planned procedure. When thus on my feet, facts, anecdotes, quotations—all come to me readily, as though plucked from the ether.”

The remarks that followed—in turn witty and philosophical—were delivered in a uniquely rich vocabulary with carefully modulated emotional overtones precisely suited to the occasion. He finished, of course, to thunderous applause.

The singularities of this occasion were that Gramp, a.k.a. Maurice J. Lewi, M.D., was being honored on his 96th birthday; and that he was the president of the Long Island University College of Podiatry, a position he had held since he founded the school on January 1, 1913, and was to actively administer for three and a half more years until he died at ninety-nine. It was on this occasion it finally dawned on me that Maurice J. Lewi, M.D. was considerably more than the courtly, sometimes amusing, and always fascinating Gramp, whose age, public prominence, high starched collar and ever-present Havana cigar had always seemed to set him apart as a living public monument. I decided then to research his life and career some day, and record them-- for *his* descendants, as well as for those of his thirteen siblings.

Having finally completed that labor of love twelve years ago, I put further active consideration of Gramp on the back burner--until he was brought vividly to mind by the news of the Plaza Hotel's demise. I recalled, in connection with Gramp's accomplishments, Emerson's assertion that “An institution is the lengthened shadow of a single man”; I was moved to revisit the career of Maurice J. Lewi, M.D., and to share with you the story of the institution he founded.

Dr. Lewi's father, Josef Lowe (German for 'lion'), was born in 1820 in Radnitz, a small Sudeten mountain town near Pilzen in Bohemia. He studied medicine in Prague and Vienna, and returned to practice in Radnitz where his first patient was the wife of his boyhood friend Rabbi Isaac M. Wise, whose first child he delivered. The Wise family emigrated to America in 1846 and Lowe followed two years later. Instead of changing his name to Lyons or Low(e) as did most with his last name, he changed it to Lewi for reasons unknown. He was invited to live with the Wises in their house in Albany, N.Y.-- where Wise was a Rabbi--while Dr. Lewi established his practice and quickly became a very successful physician. In 1849 he married a young lady he'd met in New York City. Starting in 1850, Berta Lewi survived 14 full-term pregnancies, delivering a like number of healthy babies, in the ensuing twenty years. All of them lived to adulthood, and 12 lived into their seventies or longer. Dr. Lewi was one of the principal supporters of Wise's successful efforts to introduce Reform Judaism to his congregation. By 1854, when the Rabbi accepted the call to serve congregation B'nai Yeshurun in Cincinnati, the Lewi's had already moved to their own large home to accommodate their burgeoning family.

Maurice J. Lewi, born in December 1857, was the sixth of the fourteen children. He graduated from a private high school, exhibiting strong interests in politics and journalism. However, he decided on a career in medicine so he could help his father— whom he idolized-- by taking night calls for him. Also he was motivated by his father's complaints of metatarsalgia, a painful foot condition that his doctor couldn't treat successfully, but for which a chiropodist had provided relief. He said to his son that "maybe you can do something about this some day." Maurice matriculated at Albany Medical College at which his father taught obstetrics and gynecology. After the two year course and one year as a house physician at Albany Hospital, his father sent him to Europe to finish his training— in Heidelberg for a year of general medicine and in Vienna for a year of gynecology, obstetrics and pediatrics. He studied and played hard, returning home in 1880 with a thorough appreciation of the superiority of German

medical education. He was 5'10" tall-- 7" taller than his father—and fully bearded, with already well-developed political skills.

Dr. Lewi briefly fulfilled his promise to take night calls for his father. But before long his availability was erratic at best. He was appointed fire department surgeon and county coroner's physician; he became active in the Albany County Medical Society; he taught medical jurisprudence at the Albany Law School; and he was a member of the "Capitol Crowd", an informal group of lobbyists, legislators and state officials—many of whom were his patients-- who enjoyed frequent poker games lasting long into the night. Grover Cleveland was a member of this group while governor of New York from 1882-84. Early in 1885, Cleveland, as President-elect, asked Dr. Lewi to accept appointment as commissioner for the territory of Alaska. He recalled asking Cleveland "why appoint me? I've never voted for you and probably never will." Cleveland's response was, "I don't trust any of the Democrats asking for positions and you'll at least do an honest job." Dr. Lewi, who had inherited life-long Republican leanings from his father, declined the offer. Around the same time, he was asked by the Albany County Republicans to run for Congress; and the County Democrats assured him that if he ran, only token opposition would be offered. He also turned down this opportunity, preferring to maintain strong relationships with both parties in order to accomplish what he had decided was his mission in life: to improve health care by introducing the best of European scientific findings and methodology to American medical colleges and hospitals.

At the time Dr. Lewi returned from Germany neither New York nor any other state exercised meaningful control over the education, licensure or practices of those choosing to call themselves physicians. Such practitioners included members of numerous cults: for example, the Thomsonians who treated disease with hot baths and herbs; the Grahamites whose treatment was primarily dietary featuring whole-wheat flour; the homeopaths whose primary teaching was that likes were cured by likes; the osteopaths who treated disease with spinal manipulation and massage; and the Eclectics who combined Thomsonian and orthodox features. All these cults had powerful friends in the New York State Legislature who had stymied the efforts of orthodox physicians to regulate medical

practice. In addition, pervasive resistance to change severely curtailed introduction to America of the great advances in prevention, diagnosis and treatment of disease discovered in Germany, Austria, England and France during the nineteenth century.

This was the daunting situation facing Dr. Lewi in 1882 when he was appointed secretary of the Albany County Medical Society's legislation committee. He had a desk in the executive offices of the State Education Department and arrangements were made for him to review copies of all bills bearing on health matters that were introduced in the state legislature. For the next nine years, Dr. Lewi emended or wrote, lobbied and secured passage of numerous health measures—and helped defeat others. The culmination was passage of a law effective January 1, 1892 establishing State control over the education, licensure, and practices of physicians. It eliminated several politically powerful cults by establishing three State Examination Boards—one each for the graduates of eclectic, homeopathic and allopathic schools of medicine. The last was represented by the State Medical Society whose committee on legislation Dr. Lewi then chaired. He had recommended that the State Medical Society accept this compromise in preference to no law at all, and was appointed secretary of all three boards. He now was the gatekeeper of the right to practice medicine in New York State. He used his power fully to improve physician education and training by inspecting all the medical schools in the state yearly and setting increasingly rigorous standards. As early as 1895 Dr. Lewi had a bill introduced to create a single State Board of Medical Examiners, but it failed to pass. By 1907 virtually no graduates of the eclectic and homeopathic schools could pass their board exams. That year such a law finally passed and Dr. Lewi was named as the secretary of the single Board.

All but a few of the eleven medical colleges remaining in the state were in New York City. So Dr. Lewi—who had married Rose Saul in a highly publicized 1889 Albany wedding—was commuting the 140 miles between the state capitol and New York City on the New York Central Railroad almost every week. In fact, he supplemented his none too generous salary by serving as the railroad's part-time medical director for a number of

years. But in 1892, much to his and his wife's relief, the Board of Regents established his office in New York City. Dr. Lewi recalled his father's complaints of metatarsalgia and surveyed the medical colleges in New York to find out what they taught about diagnosing and treating foot problems. The answer was nothing; but a few professors did show him chiropodist's instruments they used in their own practices.

Dr. Lewi subsequently went into part-time practice as a foot specialist and was able to get many physician friends to refer patients. He had to give this up when the Board of Regents ordered him to transfer his office back to Albany later in the decade, only to recant in a year or so. He moved back to New York permanently with his wife and daughter; and he took a new part-time job as medical director of the New York Life Insurance Company.

During the years following establishment of a single New York State Board of Medical Examiners in 1907, the results of Dr. Lewi's efforts became clear to all. On the increasingly tougher board exams, the grades attained by graduates of medical colleges in New York State far surpassed those of the graduates from out-of-state schools. Dr. Lewi was delighted to cooperate with Abraham Flexner, who had been commissioned by the Carnegie Foundation in 1908 to study medical education in the United States and Canada, and to make recommendations for improving it. Flexner issued his landmark report in 1910; and by 1912 Dr. Lewi had installed those of Flexner's recommendations that would assure continuation and expansion of the improvements he had already initiated in New York. He realized this phase of his mission was well on the road to success, and he was ready for a new challenge.

One day in January, 1912, Dr. Lewi met with a group of Chiropodists who had been referred to him by an orthopedic surgeon. They asked Dr. Lewi to help them upgrade the New York School of Chiropody--a for-profit institution they had just started with the help of influential politicians-- so it could award state-authorized diplomas. Dr. Lewi thought it over for a few days and met with them again. He agreed that he would develop and fight for the necessary legislation, provided that: 1) they would convert their school into a

non-profit institution; 2) they would remove all the politicians from their board of directors; and 3) they would accept and endorse, without change, the legislation he would write. After considerable discussion, the group accepted his terms. Dr. Lewi typed the legislation the same evening and gave it to the group's leader the following day. Dr. Lewi instructed him to submit it personally to the Associate Commissioner for Professional Education in Albany with the message that Dr. Lewi had written it and believed it to be meritorious. The Associate Commissioner and Dr. Lewi secured the unanimous endorsements of the New York State Board of Regents and the State Medical Society Committee on Legislation; and also won approval by the legislative leaders of both parties. The law was quickly passed and signed; it was to become effective January 1, 1913.

References to foot problems date from at least as far back as the Egyptians in 2450 B.C.E.; they occur frequently in ancient Greek and Roman medical writings. Treatment of such problems in Europe was, for centuries, the province of barber surgeons, shoemakers, or itinerant tradesmen, most calling themselves chiropodists. This tradition was carried to America where it had continued into the 20th century. Despite efforts by a few chiropodists—particularly in England-- to develop scientific approaches to the diagnosis and treatment of foot problems, such ailments remained largely ignored by medical colleges and their graduates, as noted by the elder Dr. Lewi. The first state law in the nation pertaining to chiropody was passed by the New York legislature in 1895. However, licensure did not involve the state's Department of Education or Board of Medical Examiners, so it was totally ineffective, and deservedly ignored.

Under Dr. Lewi's legislation, profit-making institutions were banned; the examination and licensure of chiropodists were placed under the jurisdiction of the State Board of Medical Examiners. It was now his duty to inspect the New York School of Chiropody and all similar institutions, and to make appropriate recommendations to the Board of Regents. All the schools of chiropody were closed with the exception of the new one. At Dr. Lewi's suggestion, the Examiners gave it 18 months to reorganize as a non-profit entity under his Dr. Lewi's close supervision. The group that organized the school asked

him to help them find a physician to serve as president of their institution. He agreed, but was unsuccessful—whereupon they asked him to serve. After weeks of consultation with prominent New York physicians and the State Board of Medical Examiners, Dr. Lewi accepted leadership of the New York School of Chiropody and resigned as secretary of the New York State Board of Medical Examiners on October 30, 1912. At the age of 55 he had found his new challenge:

To change the ancient trade of chiropody that was scorned by physicians, into a modern profession of universally recognized medical practitioners, thereby significantly improving the care of patients with foot problems.

Dr. Lewi developed a twenty-five year plan for the New York School of Chiropody as his first order of business. The main elements were:

1. Entrance requirements would be increased from one year of high school to college graduation as quickly as feasible.
2. The course of study would be incrementally increased from eight months to four years, with the first two years being identical to medical school.
3. Undergraduate and graduate clinical training would be conducted in facilities comparable to those available in teaching hospitals for training medical students and graduate physicians.
4. The core faculty would be composed of full-time, highly qualified professional personnel, supplemented by competent part-time lecturers and clinical instructors.
5. The curriculum would be further broadened to include a thorough study of systemic diseases and their relationships to foot problems; pharmacology; medical ethics; and other subjects.

To carry out this ambitious plan, Dr. Lewi recognized the fundamental need to establish scientific underpinnings for the profession by developing, continually updating and publishing authoritative literature based on laboratory research and reliable clinical studies. And finally, he was convinced abandoning the discredited name *chiropody* in favor of the newer and more accurate *podiatry* would be an important factor in changing both physician and public perceptions of the nascent profession.

That this entire plan was almost completely implemented during his remaining lifetime is testament to Dr. Lewi's incredible energy; his singleness of purpose; his stature as a medical educator; and last, but not least, his consummate political skills. It is important to recognize that as Dr. Lewi established these new standards in the New York School of Chiropody, he pulled the other states in his wake thereby setting the same high standards nationally for schools of chiropody, as well as for the profession's national organization and journal. Time allows me to dwell on only a few illustrative examples of how Dr. Lewi succeeded in changing the trade of Chiropody into the profession of podiatry.

Establishing the name *podiatry* was easily accomplished in New York State. The school was formally changed to the *First Institute of Podiatry* in 1917; the names of the local and state professional societies in New York followed in short order. However, it was not until two years following Dr. Lewi's death that the traditionalists in national society finally succumbed after a bitter two year fight. In the meantime, Dr. Lewi used *podiatry* routinely except when circumstance required him to do otherwise. In 1939 he arranged the affiliation of the First Institute of Podiatry with Long Island University so the graduates could receive the Doctor of Podiatry degree that was newly authorized by New York State from the Long Island University College of Podiatry starting in 1943. In 1955 a new president of LIU decided to close the college. Dr. Lewi and his board regained title to the building, and secured a temporary charter from the State department of Education permitting it to continue operations as the New York College of Podiatry until its financial situation was secure. Two years after Dr. Lewi's death the name was changed to the *M.J.Lewi College of Podiatry*, an honor which Dr. Lewi had specifically rejected many times, holding that it would over-emphasize him at the expense of many others who had contributed greatly to podiatry's growth. Finally, in 1972 the name was changed to its present one, *New York College of Podiatric Medicine*--a name which Dr. Lewi would undoubtedly have found entirely to his liking.

In a matter of weeks after starting in his new position, Dr. Lewi secured agreement of numerous prominent physicians and chiropodists to contribute chapters to the first

authoritative *Textbook of Chiropody*. The 1,100 page volume, edited by Dr. Lewi, was completed in less than a year and published by the college in 1914. Immediately it became the standard chiropody text—in England as well as in America. In subsequent years he initiated and edited numerous books and articles by members of his faculty and noted medical specialists. For example, in 1915 a text on *Surgery in Chiropody*; in 1918 a text on Practical Podiatry by three faculty members; in 1932 a text on *Neurology in Podiatry* by a prominent neurologist on his faculty; a 1938 paper, of which he was co-author, on diagnosis and treatment of foot lesions resulting from diabetic neurovascular conditions; and many others. His final editing chore produced *Modern Foot Therapy* in 1948, a new text prepared with the dean of his faculty. The chapters were contributed by a nation-wide group of experts in their fields; it rapidly became the new standard text of the profession. This new text also enjoyed great success in England. Dr. Lewi's drive for scientific documentation energized his faculty and students for the rest of his life, thereby maintaining his school's leadership in improving foot care.

In 1912, even before he resigned from the Board of Medical Examiners, Dr. Lewi engineered affiliation of the People's Pedicure Clinic with the school. The clinic had been founded in 1910 in the basement of a church in Greenwich Village by a well-regarded chiropodist who was encouraged to do so by a group of clergymen interested in providing the poor with chiropody services. Dr. Lewi soon moved the clinic to the school's building in Harlem at 125th Street and Madison Ave., where it was renamed the Foot Clinics of New York. Since 1927 both the College and its clinical teaching facility have remained in the larger, more modern buildings on 124th St. near Park Ave. From the beginning, two signs were posted prominently on the Clinic wall: the first read "Every person who is poor and needy shall be admitted for treatment without distinction as to race, color or creed"; and the second read: "Patients are human beings. All persons coming to the Foot Clinics of New York must be treated exactly as if they were private patients paying the highest fee charged by one in private practice." The signs accurately reflected his often-expressed views on these subjects; and he saw that they were honored by the Clinic staff.

Dr. Lewi was all too well aware that the future of the profession depended on podiatrists having access to hospitals for clinical training and staff privileges. One of the first notable breakthroughs in this area was provided by the noted Joslin Diabetes Clinic in Boston. Dr. Elliot Joslin—whom Dr. Lewi knew well-- recognized the importance of innovations in foot care in managing diabetic patients, and employed the services of chiropodists at his clinic in the New England Deaconess Hospital starting in 1928. Also during the 1920s, Dr. Lewi established a very informal clinical teaching relationship between his School and the near-by Hospital for Joint Diseases. But overcoming adamant national physician opposition to hospital privileges for podiatrists was to remain the primary obstacle to fulfillment of Dr. Lewi's master plan. The Foot Clinics of New York was the state's only undergraduate and post-graduate clinical training facility for podiatrists until well after his death in 1957.

From 1913 to 1957 an estimated 1,500,000 patients were treated at the Foot Clinics of New York—55% of whom were treated without charge, exacting an unremitting severe strain on the College's finances. By the 1930s, Dr. Lewi was devoting much of his time and ingenuity to keeping the enterprise afloat. He used all his connections to raise funds. An enthusiastic expert bridge player, Dr. Lewi played almost daily, either at his card club or as a guest at other clubs, and he solicited their well-to-do members. He dined regularly at his favorite restaurants with wealthy friends who were prospective donors; and visited a few choice prospects in their homes. One of the latter was Lucius Littauer, the hugely wealthy glove manufacturer who lived on an estate on Long Island Sound. Litt, as he called him, gave significant contributions to the Foot Clinics—but Dr. Lewi's rigid concept of professionalism inhibited him from using the tactics that inspire truly major giving, as demonstrated by James Bryant Conant, President of Harvard, in 1938. That year Conant visited Littauer-- a Harvard Graduate--and left with a well-publicized commitment of \$2,000,000 for the University's new Littauer School of Public Administration, that would be housed in Littauer Hall. Gramp regarded this as very unprofessional conduct that would demean his stature as a physician. He put together an Advisory Board for the Foot Clinics which, that same year, included Eleanor Roosevelt, George M. Cohan and George S. Kaufman; but the same inhibition precluded his

capitalizing fully on these superb contacts. Dr. Lewi did manage to keep the enterprise afloat, but just barely, and only by dint of ceaseless effort. I was reminded of his fund raising struggles whenever I passed Littauer Hall during my years at Harvard.

The declaration of war in 1917 had a drastic impact on the First Institute of Podiatry-- both its students and faculty were subject to the draft. A few of the faculty members served as NCOs in the Army Medical Corps, but most, along with the students, served as infantry soldiers. Somehow Dr. Lewi kept the School going. As World War II approached, he directed his efforts at the armed forces to secure acceptance of podiatry as a profession. His first success came in 1940 as a result of his friendship with Admiral Ross McIntire, the president's White House physician, when three podiatrists were commissioned in the Navy Medical Corps Reserve. This precedent led to the commissioning of 81 podiatrists in the Navy Medical Corps during the war. However, many more served as pharmacist mates. Just before and during WW II, bills were introduced in Congress to create an Army Chiropody Corps analogous to its Dental Corps. Despite American Legion support, these bills died in committee because of strong physician opposition.

While Podiatrists were draft deferred, more than 1,500 served in the army voluntarily, most practicing their profession as NCOs in the medical corps. However, podiatry students did not receive draft deferments, and by 1942 there were only 108 freshmen in the country's six approved schools of podiatry. Dr. Lewi's success in convincing New York State to award the doctor of podiatry degree to the graduating classes of his college starting in 1943 now became a key factor in the college's survival. He quickly initiated an intensive program of post-graduate courses designed to qualify practicing podiatrists to receive their Doctor of Podiatry degrees. The popularity of these courses maintained the college's income until the war was over and the G.I. Bill assured a reliable income stream. These courses also set a precedent for the continuing education curricula that today constitute an important section in the catalogs of all the colleges of podiatry.

After the war, under the influence of physicians—primarily orthopedic surgeons—both the Army and the Civil Service continued to classify podiatrists as technicians. It was not until 1957, ironically the year of Dr. Lewi's death, that the Army finally started commissioning podiatrists in its Medical Corps.

The civilian medical establishment was even more resistant. Dr. Lewi castigated Albany Medical College in 1935 for his "frigid" treatment by its Alumni Society in not having been asked to participate in any of the activities of the school in the past 20 years. In May of 1938 the American Medical Association's House of Delegates considered a resolution declaring that no AMA member could affiliate with a chiropody school. It was voted down only after a large number of Dr. Lewi's most prestigious physician friends signed a letter to the AMA threatening their immediate resignation from the organization if the resolution was passed. In 1946 Dr. Lewi communicated with the Legislative Committee of New York State Medical Society complaining of its having publicly referred to podiatry as a cult; and in the early 1950s he wrote the newly retired editor of the New York State Medical Journal stating his extreme disappointment over podiatry having been demeaned in its pages for many years. His complaints finally had the desired result—at least in New York. Three articles by Dr. Lewi and a laudatory one about him appeared in the Journal during the years 1953-1956. Try as he might, though, it was an uphill fight for him to transfer the personal and medical stature of Maurice J. Lewi, M.D. to the profession of podiatry nationally. It's a pity he didn't live to savor the triumph in 1967 when President Lyndon Johnson agreed to add Podiatric medical services to Medicare, and followed through despite his receiving intense pressure from physicians to go back on his word.

A brief review of the profession's status of demonstrates the magnitude of Dr. Lewi's achievement. The first graduating class of the New York School of Chiropody in 1914 consisted of 8 students who needed one year of high school to matriculate and received Master of Chiropody degrees after 8 months of study that included 78 hours of clinical experience. They set up in solo practice without further training, and without hospital affiliations, after passing the New York State Chiropody Board Exam.

In contrast, there are now seven approved Colleges of Podiatric Medicine spread throughout the nation. In 2005 their 349 graduates-- of whom 62 had studied at Dr. Lewi's college--were awarded the degree of Doctor of Podiatric Medicine. They were all college graduates who had passed the Medical College Admission Test as a prerequisite for matriculation. The first two years of their four-year course were identical to those of medical school students, and the final two included many hundreds of hours of clinical experience—actually 2,000 hours in the case of the New York College. They had access to large libraries of medical and podiatry texts and journals, as well as to a host of audio-visual and EDP learning materials. After passing their State Podiatric Medicine Board Exams, all but a very few have entered one of the 722 approved residency positions in 251 teaching hospitals in 37 states for at least the one year of post-graduate study required by 40 states as a prerequisite of licensure to practice. Many will continue for a second post-graduate year in surgery. For example, the New York College of Podiatric Medicine now has formal teaching affiliations with 14 hospitals in the city, and 23 other hospitals in New York State have residency programs. Typically, the 2005 graduate will go into solo or small group practice; will secure appointment to the staff of at least one hospital; will join the 16,000 member American Podiatric Medical Association; will attend professional meetings and read a number of excellent professional Journals; and will complete the continuing education hours required by his/her state for re-licensure. While the practice laws in the various states differ in some details, they all include diagnosing, treating and prescribing for any disease, injury, deformity or other condition of the foot. (The ankle is also included by a majority of the states.) The laws also include surgery of the muscles, tendons and bones--as well as treatment of uncomplicated fractures--under local and general anesthesia. Dr. Lewi's vision has at long last become reality. His impact on foot care in England was also profound, save for one area—the tradition-bound British *still* call themselves chiropractors!

In 1957 I was married, had two daughters and lived in suburban New Jersey. As the months wore on with Gramp restricted to his New York apartment while a broken arm was healing very slowly, it occurred to me that even he was mortal. I wanted very much

for our daughters to experience one more personal encounter with their great grandfather that at least the elder—then 3½--might be able recall in the future. I wrote Gramp on May 21st that all four of us would like to have lunch with him two weeks hence in his apartment. His response, dated May 23rd, closed as follows: "...if your promises become factual, you, Betty and the children are to have a glorious time and I will act the part of host, providing all the pins in the bowling alley have not previously been mowed from their habitat. Until we meet, my love to all coupled with the expectations created by this latest correspondence.

Affectionately,

Gramp

As fate would have it, all the pins in the bowling alley *were* previously mowed from their habitat. Gramp, a.k.a. Maurice J. Lewi, M.D., died in his sleep on May 27th aged 99 years, 6 months and 27 days. He left a depleted bank account; no debts; and a safe deposit box that was empty save for a one-page will bequeathing his few personal possessions to my mother. All that remained behind was his lengthened shadow.