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Interview no. 792

Louis Casavantes

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UNIVERSITY OF TEXAS AT EL PASO

INSTITUTE OF ORAL HISTORY

INTERVIEWEE: Louis Casavantes, MD
INTERVIEWER: Mark Casavantes
PROJECT: Medical History
DATE OF INTERVIEW: April 14, 1993
TERMS OF USE: Unrestricted
TAPE NO: 792
TRANSCRIPT NO: _____
TRANSCRIBER: _____

BIOGRAPHICAL SYNOPSIS OF INTERVIEWEE:

Born and raised in El Paso in 1923. Recieved medical degree after World War II in part because of the help received from the GI Bill. Practiced Medicine in El Paso for 35 plus years.

SUMMARY OF INTERVIEW:

Discusses early years in El Paso; experiences during World War II; benefits of GI Bill; medical education at Baylor University; some stories of medical practice over the years; changes in medicine over the years.

Length of Interview: 45 minutes Length of Transcript _____

Oral History Interview Outline

**Subject: Louis Casavantes MD
70 year old medical doctor**

- | | | |
|--------------|---|------------------|
| I. | Education prior to World War II | (0-55) |
| | A. Dilas Elementary | |
| | B. Morehead Elementary School | |
| | C. El Paso High School | |
| | D. El Paso Vocational School | |
| II. | Machinist prior to World War II | (56-64) |
| III. | Served in U.S. Army as a Machinist | (65-67) |
| IV. | GI Bill education benefit | (68-111) |
| V. | Premed at the College of Mines and Metallurgy
(University of Texas at El Paso) | (112-122) |
| VI. | Admission to Baylor University Medical School | (123-147) |
| VII. | Educational Experiences | (148-322) |
| | A. Anatomy laboratory | |
| | B. Phi Beta Pi medical fraternity | |
| | C. Dr. DeBakey (Professor of Surgery) | |
| | D. Dr. Big John (Professor of Anatomy) | |
| | E. Summer Employment at Rusk State Mental Hospital | |
| | F. Internship at Fresno General Hospital | |
| | G. Residency at R.E. Thomason General Hospital | |
| | H. Residency at St. Joseph's Maternity Hospital (closed) | |
| VIII. | Experiences of Medical Practice | (323-382) |
| | A. Burn victims from oil rig fire | |
| | B. Head injury | |

C. House Calls

i. House calls no longer performed due to legal risk

ii. Trauma case in Liberty, Texas

IX. Disease treatment improvement

**(Side two)
(0 - 113)**

A. Polio

B. Syphilis

C. Gonorrhea

D. Tuberculosis

E. Osteomyelitis

X. Ineffective or dangerous drugs

(114 - 136)

A. Coramine

B. Mercurials

Oral Interview Narrative

Louis Casavantes MD discusses his pre-World War II educational experiences, the GI Bill Benefits which gave him the opportunity to become a Medical Doctor, and his experiences as a Medical Student and Medical Doctor.

Louis Casavantes MD was born in El Paso, Texas, to parents who immigrated from Mexico and only spoke only Spanish. When he began elementary school Louis knew no English, and could not understand any of the teacher's instructions. He relied on fellow students to provide him with assistance.

He did not grow as fast as other children his age, due to an inadequate diet. Upon entering El Paso High School he was 4'-6" in height and during his military service in the U.S. Army he had an improved diet and grew to his current height of 5'-6".

In El Paso Vocational School (Currently the Rio Grande campus of the El Paso Community College) he learned to be a machinist, and worked at that trade prior to World War II and while he served in the U.S. Army. Because of his military service he earned his Veterans Administration GI Bill education benefits. He wanted to become a Medical Doctor and was evaluated and tested by a psychologist in the Albuquerque, New Mexico, office of the Veterans Administration. He scored higher than the average student on an Ohio State University exam designed for seniors in a premed program. This convinced the psychologist to approve him for Premed training.

Casavantes attended the Texas College of Mines and Metallurgy (now the University of Texas at El Paso), where he completed his premed training. He applied and was accepted to Baylor University Medical School. The acceptance rate to Baylor University Medical School at that time was 91 accepted out of over 7000 applicants. It had been six years since a premed student from the Texas College of Mines and Metallurgy had been accepted to Baylor University. Historically the school had determined only 70 students would graduate out of the 91 students accepted into the freshman class. Some students eliminated themselves either because they determined medicine was not for them, or that they were not willing to put in the required effort. Once every four years or so a student would either commit suicide or become a psychiatric case.

Casavantes joined the Phi Beta Pi fraternity while he was a student at Baylor. He considered this to be very helpful as its primary objective was to insure that a fraternity member graduated from Medical School. Distractions to study such as radios without private earphones, going out to dinner, or watching television were not permitted. Once a week, each Saturday, there was a mandatory fraternity party held in the frat house. Twenty one freshmen students lived in the frat house and the upperclassmen lived elsewhere. During his second year he became the frat house manager and he was given free room and board.

He worked during the summers to augment his GI Bill Benefits while he attended medical school. He worked nights in a hospital laboratory for additional income and experience. Casavantes also worked at Rusk State Mental Hospital as an extern (an extern is similar to an intern except an extern has not yet completed Medical School). He worked in the emergency room, sometimes assisted in surgery, performed histories, physicals and participated in board meetings.

The conditions in Mental Hospitals then are not like they are today. The students were given lots more liberties than they would be permitted today. The doctors employed at Rusk State Mental Hospital were retired doctors from many fields. Casavantes had a supervising physician who was a retired obstetrician. This was not the proper background for a mental hospital. Medical students attended board meetings where their votes and opinions counted in determining if someone was insane or not, if the patient required hospitalization or not, should be released or not, and to give diagnosis of a patient. Medical students performed electric shock therapy, insulin shock therapy which is no longer performed, and were allowed to perform frontal lobe lobotomies. Lobotomies were performed using electric shock therapy as the anesthesia for the operation.

Baylor University had some outstanding professors. One of them was Dr. DeBakey whom Casavantes considered to be a genius. Dr. DeBakey had developed several new surgical procedures for cardiac surgery, organ transplants, and artificial blood vessels to replace aneurysms. DeBakey was a harsh teacher who required you to look up and read numerous articles every day. At that time there were no copy machines, and each student was seeking the same articles at the same time. Another outstanding professor was the Professor of Anatomy who was called "Big John" by the students. Big John was a big man who had a

friendly smile and a loving personality, but was demanding on the students to learn. All his exams were oral except his final exam. During an oral exam a student would have to explain and demonstrate his knowledge on a cadaver. Two students shared one cadaver. Every two weeks the medical students would be required to go to the "green room" which was not named for the color of the room, but the color it turned the students when they took their oral examinations.

Casavantes performed his Internship at Fresno State General Hospital, which was one of his more enjoyable periods of his life. He enjoyed the limitless supply of free fruit and fruit juices as well as the experience he gained.

Residency at R.E. Thomason General Hospital in El Paso, Texas, was difficult due to its massive workload, and Casavantes discontinued his residency because he believed his health might be affected.

He then became a resident doctor at St. Joseph's Maternity Hospital, located in the rear portion of what used to be Hotel Dieu Hospital. The conditions which existed in this facility are not what are encountered in today's modern hospitals. It was sort of like the blind leading the blind. The staff physicians seldom gave advice or assistance and would only be present in the hospital if they were called to give assistance by the residents when there was a problem. No training was ever given to the residents by the staff physicians. Prescriptions could only be given for drugs which were available from donations as samples from various drug companies. This hospital had many other shortcomings which Casavantes did not wish to discuss.

Dr. Casavantes began his medical practice as a General Practitioner in Liberty, Texas. He was invited by two doctors to come to Liberty for an interview. During the interview three men entered the office; one of them was nude and all were severely burned from an oil rig fire. The men were transferred across the street to the hospital. Casavantes believes that giving these men a general anesthetic saved their lives, otherwise the treatment would have been very painful. He also thinks giving a general anesthetic may be helpful in the treatment of all serious burn victims.

During his internship in Fresno, California, Casavantes had gained experience with head injuries since Fresno General Hospital is located near a major highway, and automobile

accident victims were taken there for treatment. His experience at Fresno General helped him with cases he treated in Liberty, Texas. Today an intern would never get this experience.

House calls used to be performed by doctors but now no one dares perform house calls (perhaps with only a woman present) due to false accusations and legal risks. During a house call in Liberty, Texas, a tree had fallen on an individual causing serious trauma. In a large city specialists would have been available for this type of case. Casavantes gave the patient a local anesthetic, set the fractured ankle, removed the blood from the patient's lungs into a sterile container and re introduced the patient's blood back into his system, since blood from another source was not available quickly enough. The patient successfully recovered from the treatment.

There have been many improvements in medical treatments of various diseases such as polio with the invention of the polio vaccine. Polio affected many people before the vaccine was developed and there was an entire ward of polio victims at Fresno General Hospital who required iron lungs to breathe. A twelve year old boy on the ward was having trouble breathing because a lever which operated the bellows was broken. Casavantes tried to put the two parts of the broken lever together and lacerated his hand. The iron lung was then operated manually until a new iron lung could be delivered from San Francisco the following day. The boy survived and later regained some of his ability to breath without the use of the iron lung and possibly he is still alive today.

Syphilis is a disease which was incurable a few years ago. Syphilitic cases developed an insanity peculiar to syphilis and if the spinal cord was involved lost their ability to balance themselves with their eyes closed. Since the discovery of penicillin syphilis can be treated.

Gonorrhea is now curable after penicillin and other antibiotics were discovered. Before gonorrhea was curable one of the most unpleasant clinics a medical student could be assigned to was the Female Gonorrhea Urethral Strictures Clinic where a very painful procedure of dilating the urethra with metal rods was performed periodically for women with gonorrhea.

Tuberculosis was treated at one time by bed rest, nutrition, and legal incarceration. A tuberculosis patient could not leave the hospital. If a patient left the hospital the police were notified and the police would return the patient to the hospital when the patient was

found. There were few procedures which could be used in the treatment of tuberculosis. One procedure used the removal of several ribs to allow for the collapsing of the chest wall in order to drain puss from the lung cavities. Another procedure used the introduction of air between the lung and the chest wall to collapse the lung in order to drain puss from the lung cavities.

Osteomyelitis had an unusual treatment prior to antibiotics. Maggots were introduced into the wound to eat the diseased bone tissue. After the maggots ate all the diseased bone tissue the maggots were removed.

In the past there have been many drugs which were later found to be completely ineffective or dangerous to use. Coramine is an example of a drug which was later found to have no effect on a patient which was used whenever a patient was believed to be in heart failure or had a condition in which required cardiac stimulation. Murcurials were used as diuretics and were very effective diuretics but were dangerous because they contained mercury. Neither of these two drugs are manufactured or sold today.

This concludes this interview.