

Remarks on Receiving the John K. Knutson Distinguished Service Award: Images in My Rear-view Mirror

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PAGING DR. KNUTSON!
CALLING DR. JOHN
KNUTSON!
PAGING DR. KNUTSON!
IS DR. KNUTSON HERE?

Ahhhhh! There, in the back of the room, is that an image? YES! ... there's an image and it's becoming clear ... Yes, now I see a trim, handsome man and he's smiling! ... He's standing, tan with dark hair, and good looking with a devilish grin. It's John Knutson! And he's looking at me just as he did in Washington, DC, 45 years ago.

In my first week on a new job, we boarded a crowded elevator early one morning and I was the last one to get on. Dr. Knutson saw me and from the back of the elevator called out in a commanding voice: "Hi, Dief! Are ya doing any *good*?" Like a frightened turtle, my face and neck shrank into my collar. *That* was vintage Knutson. He could extend a greeting and managed to deliver an insulting compliment. Another example was when Knutson first introduced me at his staff meeting. He said: "I want you all to meet Dief. I've already asked him if he thinks he'll amount to anything and he didn't know what to say, ha, ha. Right, Dief?" Ouch! But that was John's way of letting you know he rather liked you—while reminding everybody he was in charge. Big John worked at proving his superiority to peers and underlings alike. He was smart and he knew it; he was politically astute and used it; he was daring and flashed it! Most annoying, he could be arrogant and get away with it.

John Knutson could be a deceptive charmer, admired by many and disliked by some; but all agreed he was flamboyant and demanded a high standard of excellence. That is why the Knutson Award is coveted. The Knutson Award is to dental public health what the Hall of Fame at Cooperstown is to baseball. I can see John laughing and nodding approval. What a lus-

trous honor you have conferred on me. Thank you, Oral Health Section and Awards Committee. Thank you, Colgate Oral Pharmaceuticals, for your generous tip of the hat.

Herschel Horowitz deserves a hearty salute for his B# Major introduction and warm comments. Herschel's talents include the piano and currently he is an art connoisseur. Then the "horn solo" introduction by Herbert Hazekorn was worthy of Johannes Brahms' typical horn calls. I don't think Herb knew Brahms personally, but he patronizes his barber. Thank you, both, but 'tis a pity to waste such tributes on the living. This material might be useful again at my memorial service, which I have postponed indefinitely.

Many of you probably wish I would sit down now ... but I won't.

This event is the last Knutson Award of the century. That calls for a toast! I borrowed from composer Stephen Sondheim's "A Little Night Music": To John Knutson! *[toast]*



"Isn't it rich? Are we a pair? Me here at last on the ground, you in mid-air. Send in the clowns, there ought to be clowns. Let's bring in the clowns."

I thought you might enjoy a few of the "Images in My Rear-view Mirror." These images are outtakes from the cutting room floor. The first shows John Knutson as the chief dental officer in 1960. About 20 dentists in the Public Health Service (PHS) nearly got busted in a whorehouse in Juarez, Mexico. It all began as a scientific meeting (ahh ... ahem). That year the regional dental consultants chose El Paso, Texas, for the annual staff meeting. The objective was to train all the regional dentists to use three dental

indices uniformly. Knutson was the expert on the DMF, Dr. A. L. Russell on the PI, and Francis "Pokey" Arnold from the National Institute of Dental Research (NIDR) on fluorosis. Using five dental chairs, the experts independently examined 15 children. Then each of us independently examined the same children. The children giggled and behaved at least as well as the dentists. Differences in findings among the examiners were specified and resolved.

That evening, the dental officers walked over the bridge to Juarez to party at a star-rated joint. I think everyone was present, but there is no proof. For a flat charge each of us had several tequila drinks. They were delicious, followed by another round. Appropriately the ranking officers had the best seats. Then came the dancers and an exotic floorshow. Are you getting the picture? We cheered for more, stomping our feet for encores. And there were encores!

After the final curtain the madam manager thanked us for our business and said there would be an added \$2 charge per person for the very special floorshow. "Oh no!" We shouted, "You didn't tell us about the extras!" We got boisterous and pushy. The madam curtsied and left the room. In the doorway appeared a trio of uniformed, mustachioed policemen. Stupidly, I approached the sergeant demanding his name and badge number. Fortunately, he just laughed. Somebody suggested we offer to pay half the extra charge. The madam accepted and we quickly departed the best little whorehouse in Juarez. Staggering across the bridge back to our hotel, we realized how close we were to being arrested for disorderly conduct. We imagined a headline in the *Washington Post*, e.g., "Naughty PHS dentists arrested in Mexico." Talk about clowns? Oh yes, there were clowns that night.

Now go back 10 years before Juarez. As a junior dentist in Los Angeles, I mailed to headquarters a question-

naire about graduate training. To my great surprise, a telephone call came from somebody in Washington. Gruffly he asked, "What training are you interested in? Don't you like clinical dentistry? Is something wrong?" It was a strange conversation and it was John Knutson sounding me out for the Division of Dental Health. Dr. George Nevitt was given the assignment of remodeling me from a clinician to a public health dentist. That experience is chronicled in the article "Genesis of Residency Training in Dental Public Health" that appeared in the *Journal of Public Health Dentistry* (1).

Dr. Nevitt complained that my names were too hard to remember, but my middle name, Leroy sounded Southern. After that George always called me "Leee-roy." I tagged along with Nevitt to the State and Territorial Dental Directors' meeting in Washington. There I got to meet all the pioneer public health dentists, including: David Ast of New York, Carl Sibelius of Tennessee, Frank Bull of Wisconsin, James Owens of Kentucky, Fred Wertheimer of Michigan, William Jordan of Minnesota, Robert Downs of Colorado, Ernest Branch of North Carolina, John Crietzborg of Georgia, and many more. David Ast and John Knutson got into a heated argument, clearly exhibiting their mutual antagonism. Another good fight occurred between Frank Bull of Wisconsin and Trendley Dean, the father of fluoridation. Bull and state dental directors were furious with the PHS for not approving artificial fluoridation outright. Dr. Trendley Dean refused to stick his neck out and Bull suggested Dean's head was in a leaky bucket. Dr. Bruce Forsyth, the first PHS chief dental officer, intervened with Bull, Ast, and Robert Downs of Colorado to work out an acceptable statement. Five months later, the American Dental Association (ADA) also approved fluoridation. The approval of fluoridation unified practicing dentists, the ADA, and the dental professional at all levels. That unification was essential in the fluoridation movement.

At the time, I was busy studying tooth decay and fluorosis in Missouri schoolchildren. A typical morning would begin at 7:00 AM in the Kansas City government garage. There I stuffed a portable 35-pound dental chair and a 40-pound air compressor, nicknamed Hernia Babe, into an old GI

station wagon, and drove for several hours to the school. Nine cities were in that study (2). After the report was in final draft, I was advised that Dr. Trendley Dean would like to see it. He scanned the copy, criticized the methods, reminded me that public health dentists were not trained in research and, showing me the door, said, "I don't think your work warrants publication."

One of the best-kept secrets of the Public Health Service is how much you learn about real estate. The PHS transferred me to 10 different cities so I could experience living in five apartments and three rented houses, and buy and sell five houses. The move from Washington, DC, to Seattle in 1959 was so much fun I must tell you of it.

We sold our house and according to PHS orders shipped our household stuff, including the Steinway, to Seattle. We departed Washington, DC, while a fight flared in Congress over opening a new regional office in Seattle. Congress blocked the funds. Dr. Galagan changed my orders to a temporary assignment in Denver and told me to go fishing. Adele's folks had a fishing cabin in Utah, so that's where we went. Three days later Galagan said keep fishing and call back next week. The fall school term was nearing. Finally, Galagan tells me to stay in the Denver office, but don't buy a house. Six weeks later our household effects arrived from Seattle storage and we moved into a rented house. The joy within the family was almost unbearable. While we were unpacking, I received a bill from the government for illegally shipping our stuff to Seattle.



Don't you love farce? My fault. I fear. I thought that you'd want what I want. Sorry, my dear. But where are the clowns? Quick, send in the clowns.

In 1961, the Public Health Service was reorganized. Don Galagan was the only dentist appointed to the committee. The report recommended PHS hospitals be consolidated, the Centers for Disease Control be expanded, the Division of Occupational Health and

Safety be elevated, and clinical research become a priority. In the dental area, the Division of Dental Health Resources headed by Dr. Jack Pelton was combined under Galagan's Division of Dental Health. Galagan moved me back to Washington from Denver. Jack Pelton thought he had been sold short by Machiavellian tricks by Galagan and wanted out. While Galagan was away, Pelton came to me with his retirement papers to be signed. He didn't want Galagan's name on them. That was a sad day. I remember Jack watching me sign him out of the PHS. I did so with humility because Pelton was one of my heroes. Jack Pelton was the brightest and deepest thinker of all public health dentists I ever knew. The University of Alabama made Pelton a professor to develop its community dental program and Pelton made it shine. Pelton and I remained close friends until he died in 1991.

The nationwide fight over fluoridation became vicious. At town meetings across the country, rabid opponents of fluoridation battled proponents in polemic public debates. The controversy was as emotionally packed as the abortion issue is today. Top reporters of the press, radio, and television covered the story city by city. A reliable account of "The Fight for Fluoridation" was written by Donald McNeil (3). In the early 1960s, city councils in San Antonio, Trenton, St. Louis, and Los Angeles requested the PHS to provide witnesses to testify. Knutson asked me to "get in the tank" with them. Big John said, "When you testify, people may rough you up because you are a fed." He was right. Over the next several months, I received hate mail and threatening phone calls at home. However, Trenton and St. Louis approved fluoridation; San Antonio and Los Angeles turned it down.

Occasionally, the fluoridation battle flares again, as it did last week in eastern Indiana (4). According to the *Chicago Tribune*, November 1, 1999, the local dentists of Connersville strongly supported fluoridation. The opposition group claimed putting fluoride into public water systems is a government conspiracy, a way of disposing of toxic waste, and the 200 million Americans who drink fluoridated water are losing brain cells and developing brittle bones with each gulp.

Another priority when the PHS reorganized was more applied research

and clinical trials. When the nursing residence of the hospital in San Francisco became vacant, Galagan saw an opportunity to get the building for the division's applied research. The building cost nothing, but we had no funds to modify it. Galagan approached NIDR to work out a joint deal, but Pokey Arnold wasn't interested. Galagan asked Ed Dyer, our financial guru, and me to find money in our budget to reprogram. That was risky, but we found enough to start remodeling and nobody asked how. The next year, the House Appropriations Committee gave us the money to finish the job. At the dedication ceremony of the new Dental Health Center in San Francisco, the keynote speaker was House Appropriations Chairman John Forgarty. On that bright sunny day the flags waved briskly on the Presidio as the US Coast Guard Band played "Semper Fidelis." The California Dental Association and all the top officials of the ADA came to cheer the new, exciting venture of the division. It was one of the most glorious days ever for dental public health.

In my rear-view mirror, the 1960s appear as the halcyon years for dental health programs in America. Mr. Forgarty, Senator Hill, and Senator Kennedy in the Congress, Dr. Harold Hillenbrand, of the ADA, and Dr. Eddie G. Smith, Jr., of the National Dental Association championed the Division of Dental Health. Of equal importance, state and city health department dental programs flourished as well.

For the next decade, the new multimillion dollar Health Professions Education Assistance Act of 1963 became the major initiative. Drs. Harry Bruce and Stan Lotzkar were our new stars. The deans of dental colleges came knocking for funds to enlarge, modernize, or replace dental schools coast to coast. Every dental dean in the country today can attest to the impact this program had on improving dental facilities, the quality of education, faculty, and the number of dental students and hygiene students. Most practicing dentists today were beneficiaries of scholarships and loans under this program administered by the division.

Next, the division opened the Manpower Development Center in Louisville, KY, in 1964. Based on five-year results from earlier research, the Louisville Center was designed to further

expand the functions and clinical procedures performed by dental auxiliaries that would increase productivity of dentists. Carefully measuring quantity and quality of services over five years, the Louisville Center demonstrated that the clinical productivity of dentists was increased by more than 100 percent by delegating additional functions to trained auxiliaries. Dr. Lotzkar reported on the entire study in the *Journal of the American Dental Association* (5,6).

President Johnson's "War on Poverty" offered the division an opportunity to be involved in HeadStart, Neighborhood Health Centers, and the Office of Economic Opportunity (OEO) programs under the director, Sergeant Shriver. The division assigned Dr. John Frankel to Mr. Shriver in 1965. Frankel became the chief health officer of all community action programs of OEO and served that program until he retired in 1970. You could say the division grasped all opportunities.

In the mid-1960s, the promotion of fluoridation lagged behind our projections. Working with the staff of the ADA, the division planned a bold extravaganza: "The National Dental Health Assembly, Emphasis: Fluoridation" (7). The meeting was staged in Arlington, VA, February 6-8, 1966. The keynote speaker was Congressman John Forgarty. Other dynamic speakers included: world-famous pediatrician Dr. Benjamin Spock; Senator Maureen Neuberger of Oregon; Dr. Arthur Flemming, president, University of Oregon; Dr. Luther Terry, former surgeon general and vice president, University of Pennsylvania; Louis Harris, president of Harris Public Opinion Polls; Dr. James Sterner, medical director of Eastman Kodak Company; Katherine Cornell, actress; Dr. Leland Hendershot, editor of the *Journal of the American Dental Association*; Dr. Robert Felix, director of the NIMH; and Dr. John Knutson, professor of preventive dentistry and public health, University of California. It was a fast-paced program for the 500 people representing law, engineering, social sciences, education, public affairs, medicine, dentistry, and public health. They came from 41 states, Canada, Puerto Rico, and the District of Columbia. One highlight was a sociodrama written especially to portray the fight over fluoridation by people in small

towns. The play was introduced by Katherine Cornell. The National Dental Health Assembly received wide acclaim, reflecting well on the division.

Two specific happenings stemmed from the National Dental Health Assembly. First, community interest in fluoridation was rejuvenated and the Community Fluoridation Act of 1968 was passed. It provided categorical grants to states for the purchase and installation of fluoridation equipment. Second, President Johnson said, "I want to let you in on another secret. That is one of the reasons I asked (HEW Secretary) John Gardner ... to create new plans for a new program you haven't heard before to assist in financing dental services for children."

Wow! This culminated six years of work by the division and the ADA hammering out a national dental health program for children (8). The legislation passed both houses of Congress; however, the program was never funded, a casualty of the Vietnam War, the Democratic Party convention debacle in 1968, and President Johnson's withdrawal as a candidate for election.

In the meantime, NIDR was complaining about encroachment and overlap of their research areas by the division. I assembled the division's team of Drs. John Greene, Harry Bruce, George Mitchell, and Mr. Ed Dyer and we met with the leaders of NIDR over many days, many hours, and sometimes into the night. It was to no avail. I thought the time had come when the division and NIDR should merge to form a new National Institute of Dental Health comparable to the existing National Institute of Mental Health. Neither NIDR nor the NIH director would consider it. What NIDR really wanted was to grab the dental school construction grant programs and all epidemiology research of the Dental Health Center. That would emasculate the dental public health division. It was a heated fight, but no decision was reached and the matter was dropped. At the time, I thought dental research and dental health lost a rare opportunity to build together a strong, coordinated program. In retrospect, I believe a new NIDH would have enhanced the nation's dental health, dental research, state and city dental health programs, and the profession of dentistry. But nothing hap-

pened and after 1970, the PHS dental health programs were pulled apart. This is my most disappointing time in dental public health.

A pleasant memory is Children's Dental Health Week, February 1970, when the ADA arranged for me to appear on the "Today Show." Thirty years ago, the "Today Show" was new, Barbara Walters was wafer thin, with shoulder-length, brunette hair. The cohost was Sandy Van Ocker, who sported heavy, lambchop-shaped sideburns. We talked about the prevalence of dental disease, Head Start programs, fluoridation, and the need for a national dental program for children. Barbara mentioned jokes about pain in the dentist office that didn't go over so she quickly apologized. My son, Bill, made an audiotape and 35 mm photos of the program for our home TV set. There were no VCRs back then.

In 1970 national health insurance was at the top of the political agenda of the country. That year 13 bills proposing national health programs were introduced in Congress. Opinion polls reported the American people wanted a national health program. Some proposals included dental care, most did not. In anticipation of congressional movement toward national health, Dr. Harold Hillenbrand in his retirement speech recommended an ADA task force to prepare the association's policy. Hillenbrand urged me to join the ADA staff to lead the project. On July 1, 1970, I retired from the PHS to accept the position of assistance executive director of the ADA. What a disappointment that turned out to be! A task force of 17 members, five special committees with 22 members, plus 13 ADA support staff provided enough people to stage the opera "Aida."

There were representatives from the National Dental Association, labor, business, consumers, medical, osteopathic, pediatric and dental specialties and auxiliaries, insurance carriers, the dental trade industry, dental educators, Delta Dental plans, and Blue Cross and Blue Shield. After 18 months of hard, concentrated work, the task force produced a report with 93 recommendations for the Board of Trustees and the House of Delegates in October 1971 (9).

After marathon sessions at the ADA's annual meeting in Atlantic City, the ADA House of Delegates adopted the report with some revi-

sions and titled it: "Guidelines for Dentistry's Position in a National Health Program" (10). The pot was boiling for action in Washington and then ... the Watergate fiasco brought legislative activities to a halt and national health insurance once again lost out.

When Dr. Harold Hillenbrand retired, the ADA floundered from lack of leadership. Staff morale deteriorated, the Board of Trustees drifted to squabbling, and elected officers began micromanaging and meddling with work of the staff. On one occasion when I roared and cussed about the interference, I was admonished to back off. When I criticized a board action impossible for me to carry out, I was cut short. The next morning, I wore a Charlie Brown sweatshirt to the staff meeting and quit. The ADA announced I resigned, but really I was pushed. *Fired* is the correct word. My scorching letter of resignation was given wide circulation. Later a few others also left the ADA, but they departed with *savoir faire*.

Either by chance or divine intervention a new school of public health was being shaped at the University of Illinois at Chicago. The founding dean, Dr. Paul Peterson, and associate dean, Dr. Alan Donaldson, had been PHS colleagues of mine in Washington. They invited me to lunch to lead a faculty seminar on national health proposals. That audition, without my knowledge, was a suitability test for a faculty appointment.

The following week, the dean called to inquire if I might be interested in developing a program in health policy and administration. Enthusiastically I accepted, not knowing how little I knew about formulating and staffing an academic department. I had no idea that the bureaucratic maze of a big university is as great a mystery as the federal government. Another surprise was the snobbism of academic types who resent people from the outside entering their world. A graduate college professor said, "You have been a dentist with the federal government and you think you're going to do *what?*"

Providence intervened again in 1977. The newly elected governor of Illinois asked our dean to be a member of his cabinet as director of the state's Department of Public Health. This boasted the school's reputation mo-

mentarily, but left a major vacancy. In sequence, the associate dean became acting dean and appointed me associate dean. Six months later, terminal illness forced him to retire. The university president and chancellor began a national search for a new dean. As candidates were eliminated, I was still on the list. I hardly remember walking to the chancellor's office July 3, 1978, when he offered me the deanship. The School of Public Health moved into a new building. The faculty and staff decided to try me out. People in offices without windows asked for outside rooms with windows. Then on sunny days, some people with windows covered them up. There was bickering over corner offices. The building temperature was too hot on one side and too cold on the other. Some complained the cleaning crew was leaving lunch bags in their offices. I took a list of complaints to my first executive staff committee meeting and said, "You don't need me! You need a clergyman or a frustrated engineer." Being located in a depressed area of Chicago, there were burglaries, purse snatchings, and assaults.

There were love affairs and marriages among students, between staff and students, and even faculty and students. There were babies born, not all of them timed conveniently for the academic year. Occasionally people from the street wandered into the building. One of them came into my office holding a sign reading, "Don't forget Jesus." I turned to Berenice, my secretary, and said, "Did we give Jesus that corner office with the window he asked for?"

The School of Public Health, University of Illinois, Chicago, continues to flourish. The state of Illinois supports it well and the school is a campus leader in receiving research grant money. Students and faculty are working directly on problems of the inner city, on preventing violence, AIDS, etc. I'm proud of them. With Dean Susan Scrimshaw's leadership, the school is moving into a new home this fall.

There have been 17 previous recipients of the Knutson Award. It has been my good fortune to have known personally every one and to have worked directly with 13 of them. Is there a trait common to all of them? Carefully, I studied their names. Let's see: Ast, Striffler, Galagan, Pelton, Fales, Black-

erby, Dummet, etc. Yes, I find at least one touch among them. Everyone has acknowledged how much their success resulted from the blood, sweat, and work of other people. None has claimed to have made it on their own. An excellent example is Myron Alukian's tribute last year, in which he said: "This award is really for all of you and what you represent."

Having served in several capacities over 38 years, I see images of people and smiling faces, hundreds of them in public health who walked with me and many did the heavy lifting. Please don't leave here thinking my work was exceptional. Mother Teresa got it right, "We can do no great thing, only small things with great love."



*Now, I'll make an exit with my usual flair.
Sure of my lines. No one is there. Where are
the clowns? There ought to be clowns. Well,
maybe next year.*

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