

Tucks

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Tux

Bordering on six feet, a stately and erect woman, in simple but fashionable dress, wearing large horn rimmed glasses, strode confidently across the quadrangles toward the Chicago Ly-ing Hospital. Her destination was the office of Dr. Joseph Bolivar DeLee, where she planned to apply for an Obstetrical residency on his service. She had heard, which was subsequently verified, that he had only one requirement, that the applicant have a license to practice for at least six months. He took twelve of them for a period of six months, and then chose one who would complete a residency of three years. De Lee was a handsome, dignified individual with a carefully groomed goatee, who might appear gruff on initial meeting. He had been, and was a well recognized champion of academic and clinical obstetrics, one of the very few in the country, in 1929. Our applicant was anxious then disappointed when she learned that Dr. DeLee was out of town; but she was relieved when his secretary assured her that she could file the application, and further was certain that she would be accepted, then asked her to return in 3-4 days. As she left, she looked back and noticed that the secretary was smiling broadly, head tilted to one side as if to say: "I meant exactly what I told you..." Now walking elatedly through the campus, she stopped, recalling what several of her college friends had mentioned: " Dr. DeLee dislikes having female doctors on his service."

Dr. Beatrice Tucker was born in Carbondale, Pennsylvania in 1897. Her childhood and early adolescence provided love and affection in a setting where her mother was the bulwark of stability. Her father, however, moved his family from town to town in the northeast, always hounded by the law and the scorn of the medical profession

since he was practicing medicine without a license. Finally, he settled in a town near Peoria where he obtained a certificate to practice Optometry. During this turbulent childhood, his daughter was surprisingly comfortable in social encounters, was a determined individual who at times exhibited an almost feisty attitude. Announcing from the age of six by desire and later in her early teens by expectation, that she was to become a medical doctor. After two years of college at what is now Bradley University, she completed her requirements at the University of Chicago, received her B.S. degree in 1918, then graduated from Rush Medical College in 1922. She became the first female Intern at the Evanston Hospital. On completion, she opened a general medical practice in Peoria , also working in the field of Public Health with Infant Welfare, venereal disease Clinics, women's jails, and then spent three years as an assistant to a general surgeon in Evanston. When asked, "When did you decide to specialize in Obstetrics?", Dr. Tucker answered: "Finally after nine years. And I always liked Obstetrics. I don't know why I fooled around." Some fooling around!!

When she returned to meet Dr. DeLee, she no longer felt overwhelmed because indeed, she had been accepted into his program. This tall, imposing man described his probationary period of six months after which one of twelve would be chosen to complete the three year residency. He reminded her that he disliked having women on his service; further, that she was the first to be so endowed. Early on, when she heard that he had made a disparaging comment about her, she went to his office and told him:" You shouldn't have talked like that. You don't know what I can do..and until you do, you should not make any remarks in front of anybody." (quoted in Berkow, Maxwell Street). Afterwards, recognizing her talents, DeLee became her primary teacher and mentor as

well. At the completion of her formal training she was anxious to go into practice, but was convinced by DeLee to go down to the Chicago Maternity Center; she remembered his saying: "Just because you've had three year's training in Obstetrics doesn't really mean you know it. If you go to the Maternity Center you will learn more about obstetrics and become a really fine specialist." Further, Tucker in the same interview given in 1983, states: "DeLee believed in home deliveries, he really did; he said that it was very important, and you would learn a great deal more because you sit with the patient. If you're out on the district, you know that you may sit for twenty four hours if the patient is in labor, and you really learn about labor. You learn all the physiology of childbirth; you have to know it well before you can apply your obstetrical knowledge to manage and deliver a baby properly." She was thirty five years of age as she left for the Maternity Center in 1932.

The Maternity Center was an outgrowth of the Maxwell Street Dispensary which DeLee started as early as 1875. The University of Chicago had ceased its interest in home deliveries in '32, and deeded its three story building on the corner of Maxwell and Newberry streets to Dr. DeLee. He named Tucker and her partner in private practice, Dr. Harry Benaron, as co-medical directors of the Chicago Maternity Center; she having ultimate responsibility in all operational areas including teaching and staffing. Realizing that the Center needed physical revitalization, she took on the task of "cleaning the place up." Looking up the records of satisfied patients in the dispensary and Center, she found husbands who were tradesmen in painting, electricity, plumbing and the like. She paid each a dollar and a half plus food for their labors; new linoleum was laid, and in two weeks the Center had taken on a new face. During this ordeal, Dr. Tucker would at

times became impatient, voicing her displeasure. Then, Benaron would say:” Tucks, just relax, everything is going fine.” She would respond simply; “ O.K. Benny.” This is how their contemporaries would always address them; Tucks and Benny. Taking a crash course in fund raising from DeLee, she received in kind, donations of chairs, fixtures, and curtains; she chose to set up her living quarters in a basement room rather than on the second or third floor. It turned out to be hot in the summertime, cold during the winter months, noisy and steamy from the traffic outside her window, with rodents and insects to keep her company.

Hospital back up was handled first by the Women’s and Children’s and next by Chicago Memorial until 1946, at which time Chicago Wesley Memorial started its affiliation. This progressed, so that in 1949 a formal Northwestern University residency program was formed, combining Wesley and the Maternity Center. The decade from the mid ’40s to the mid ‘50s was a highlight in the Center’s history. There was a full complement of residents; plus “interns” who came from neighboring states for a three to six months experience. Tux was able to recruit four attending M.D.s from Michael Reese Hospital to augment her and Benny on the district, and the two week student clerkship from the Chicago medical schools was highly competitive. Inside the Center, a large chalkboard, situated adjacent to the switchboard, tracked all patients who were being attended by Center personnel. When the call came in, for instance, regarding a patient who had had two previously uncomplicated deliveries, two students were assigned, the Senior on his second week, and the Junior, on his first. It was customary that the senior would deliver the baby, assisted by his team mate. The Senior on this case was a student at Northwestern. It was Dr. Tucker’s edict that the assigned team

would depart the Center within twenty minutes of the call. Boarding the street car, each carrying a Dr's bag which contained all of the equipment necessary for a normal, spontaneous delivery. They spoke quietly as they ventured well into the segregated Negro belt of Chicago. Several people looked at their bags, greeted them and pointed to the building where they were going. They felt safe. The small apartment was neat with adequate newspapers for their purposes to maintain as much as possible a clean, aseptic environment. The patient was examined; indeed, she was in labor. There were three other women in the room, one of whom led Bob to someone who had a telephone—they were then officially on the chalkboard. At the appropriate time the senior, giving instructions to the mother, delivered a chubby little boy. The remainder of the process went uneventfully; the infant was cleansed, and handed to the mother when the door to the other room opened; the father and his two daughters went to the birthing bed. A record player belted out jazz, hymns, gospel and the "doctors" joined in the festivities, eating food that the grandmother had cooked. They spent the obligatory two hours observing the patient, packed up, and caught the next streetcar "home." Later the senior student described the importance of having the opportunity of being able to experience being a "doctor" with the responsibilities therein; and also having had no previous significant contact with the Negro community, nor with the mix of other ethnic group cultural differences. Thus, seeing life in the raw, leading to educational appreciation of the social impact afforded him during the entire two weeks, as well as the unique experience of seeing a patient in her own environment. He concluded: "my two weeks at the Maternity Center was the best experience I have had in Medical School." As an aside—this student later in life became a member of the Chicago Literary Club.

It was a Sunday, mid morning, when Tucks came up the stairs from her boudoir to meet Chris, a new resident. She spent most of two hours describing to him the working and the protocol of the Center. Spying Luke, the senior resident, she called out: "Lazer, this is Chris. Today would be a good day to indoctrinate him into the neighborhood." Maxwell Street was crowded with people seeking, often buying goods from stalls and tables lining both sides of the street; some of the goods were old, some new, some were authentic, some fake, some were purchases made from other individuals, some honest, some of whom were thieves. Bargaining was expected, adding to the din which Berkow describes as a "bazaar." Happily, there were bargains to be had. The hawkers outside the clothing stores on Roosevelt Road, spying a potential customer, puts a hand on his shoulder and entices the curious one into the store.. Once inside, a sale was generally executed even if it took a lengthy bargaining session. On the way to Nate's Delicatessen for a sandwich, Chris asked:" What does Lazer mean?" "It's my name in Yiddish.. Dr. Tucker is fluent in Yiddish; you'd think that she was raised in the old country." Nate shouted from behind the counter:"Lazer, what for you?" "Corned beef on rye, extra lean.." "What are you trying to do? Put me out of business? I make two kinds of corned beef, lean and regular, and I charge the same. The regular has some fat in it, gives it a little flavor. Who's your friend?" "Chris." "Chris, what a name. So what can I serve you?"

"Ham and cheese on rye." "Sssh,Sssh, don't talk so loud. If the customers hear you, in five minutes everybody in the street will know about it, and then I'll have no customers. So what do you want?" "Corned beef on rye, extra lean." "Lazer, send your mother down here, so she can see what kind of a boy she raised. Sadie!! Two CB, lean."

As they left, Chris said: “That was quite a thing.” “Don’t worry about it. Jewish people aren’t supposed to eat pork, and never to mix meat and dairy food in the same meal. Ham and cheese, two mistakes--- Don’t worry about it. With Nate, it’s only a game. Next time, listen to a conversation-- who can answer a question with a question, or asks more questions than the other usually wins.”

Luke answered the phone at 11 o’clock; an intern asking for help; a primiparous patient, fully dilated, fetal head in the pelvis, no progress for one hour, contractions less frequent, baby o.k.. He phoned downstairs: “call the nurse, have the bags ready, we’re going out within ten minutes.” The bags were larger and heavier than the student’s, since they held all of the equipment necessary if a more complicated delivery were required. Just prior to leaving, Luke was told by the veteran switchboard operator that either Tucks or Benny were on call if he needed one of them. At the patient’s home they were greeted at the curbside by a large, muscular man who carried the bags up three flights of stairs as if they contained nothing but match sticks. Luke examined the patient, as his nurse quietly prepared the kitchen table for a delivery, finding that the fetal head was in a position that thwarted vaginal delivery. Attempt at manual rotation of the head was unsuccessful just as Dr. Tucker arrived. After her examination she agreed with Luke’s findings.. she then went on, explaining the key-in-lock forceps rotation in detail, emphasizing not only the basic tenets of the procedure, but also the gentleness needed so that there be no harm done to either maternal or the fetal tissues. “I’ll scrub in with you.” The “Scrub”, ten minutes up to the elbow, always in cold water.. After local anesthesia to numb the pelvic area, she assisted her resident as he patiently performed the key-in lock maneuver successfully. The two family members who were

holding the patient's legs in their proper position watched his forceps extraction with Tuck's caution to mimic a spontaneous delivery. The baby squealed her delight upon arrival, and as soon as possible, the tall muscular man was ushered in to see his wife and daughter. "You did a good job, Luke," Tucks said, "Keep an eye on her for an hour, then take Dottie out to the Covered Wagon for an early morning breakfast. I'll cover for you" "Thanks. We'll do it, gladly."

In 1948, Dr. Tucker adopted a newborn child, probably the first single, unmarried woman to do so in the State of Illinois. Prior to this event, she moved out of her basement apartment at the Center into a home of her own, and two years later adopted another son. Her children grew successfully into adulthood. In the 60's, the number of Center deliveries began to decrease from the highs of well over three thousand per month. Given a choice, more women were leaning toward hospital care; this included the under privileged who could seek other facilities for prenatal care and hospital delivery. The Health Division of the Welfare Council of Metropolitan Chicago in 1964 published their Chicago Maternity Center Study.; In the six and 1/2 years ending June 30, they found that the maternal death rate (per 1,000 live births) in home and hospital was .13, and in the home itself .09, significantly lower than the rates in the City of Chicago and the State of Illinois. The premature rate at the Center was 12%, often associated with a higher neonatal death there which was 14.5% (per 1,000 live births). Dr. Tucker, in an even larger study found that 65.% of neonatal deaths occurred in women who received no prenatal care. Dr. Louis Katz, President of the Welfare Council summarized their conclusions, stating: " We believe that loss of the services provided by the Chicago Maternity Center would have very serious consequences from the points of view both of

providing good care for a large number of patients and of making available teaching opportunities that are greatly needed and are not available elsewhere.”

In October 1964, an event occurred leading to ramifications which significantly affected the Maternity Center. The Northwestern resident and his nurse, having finished their case, were carrying the bags to the car. Upon opening the trunk, he was suddenly struck by a two by four in the back of the head. As he dropped to the ground, his nurse saw a young man dropping his “weapon,” rapidly running away. Fortunately, the resident was not severely injured, and after a week returned to finish the remaining nine months of his scheduled time. However, word quickly got around: “The district is no longer absolutely safe!!” As the decade moved on, Tucks was challenged by other serious, divergent issues. Other teaching hospitals in Chicago with training programs of their own, chose to forego home deliveries, with cessation of students coming to the Center. The remaining students, all from Wesley Hospital in the Northwestern program, were apprehensive, even fearful about setting out, usually on public transportation, to the South side of Chicago, where sporadic instances of violence were more frequently reported. In the late 60’s the Chairman of the Department of Ob-Gyn revised the Residency program deleting the requirement that a one year at the Maternity Center was mandatory; the students’ two week clerkship was similarly affected. Tucks strove valiantly in all quarters to alleviate her staffing problems, emphasizing that bare staffing must include at least one resident and four to six students; she even suggested that a new medical director be procured, also to no avail. The prenatal clinic continued for a short time, the patients being referred to a public or private hospital. She still ardently believed in home deliveries, but the new Prentice Women’s Hospital was well on its way.

Finally, in 1973, she closed the doors of the Maternity Center. She was proud of the fact that in forty years there were over 100,000 patients delivered at home with overall excellent results.

She was seventy five years of age..

Tucks, Emeritus Associate Professor at the Northwestern Medical School, continued her private practice until the death of Benny in 1975. She remained active, serving in many out patient clinics, speaking passionately and publicly, often stressing her belief in legitimization of legal abortion and openness regarding use of contraceptive measures, occasionally performing a home delivery, receiving many accolades, and honors including an Honorary Doctor of Science at Lake Forest College. One of her last public appearances in 1982 was at the Health and Medical Policy Research Group's conference in 1982. There, in addition to her accolades, she agreed to an interview entitled "Recollections," which was subsequently published in 1983, in the Journal of the HMPR.

Tux died in 1984, just a few months prior to what would have been her 87th birthday, from complications secondary to a long standing asthmatic condition.

Bibliography

1. Archives of the Northwestern Memorial Hospital
2. DeKruif, Paul, "The Fight for Life," 1938
3. Berkow, "Maxwell Street," 1977
4. Journal of Health and Medicine, Policy Research Group, Volume 1, Issue 4, "Recollections," an interview with Dr, Beatrice Tucker, 1983
5. Welfare Council of Metropolitan Chicago, "Chicago Maternity Center Study," 1964
6. Women Building Chicago, 1790-1980, "Beatrice Edna Tucker," Indiana University Press, 2001