The Greatest Good

When ROBERT LARNER, M.D.’42, was born in Burlington’s Old North End in 1918, the road ahead was anything but a sure thing for this seventh child of a roofer. Ten decades, and thousands of patients later, Dr. Larner stands as one of the most dedicated and generous alumni of the University and its College of Medicine. ALONG WITH HIS WIFE, HELEN, he has assisted hundreds of medical students over the last 25 years through the Larner Scholars Program, and has helped to foster the “culture of giving back” among his fellow alumni with the idea that grateful recipients would give to the fund when they became successful in their own professional lives. This past year the Larners committed $1 million to build an innovative Team-Based Learning Classroom in the Larner Medical Education Center, which was named for Dr. Larner in 2013. The Larners also contributed $300,000 in 2012 in the Larner Medical Education Center, which was named for Dr. Larner in 2013. The Larners also contributed $300,000 in 2012 to purchase five cardiopulmonary “Harvey” simulators for the UVM/Fletcher Allen Clinical Simulation Laboratory. Dr. Larner’s generosity has significantly advanced UVM’s educational mission, which was recognized with the 2013 UVM Lifetime Achievement in Philanthropy Award, and an Honorary Doctor of Science degree that was awarded at the 2014 Commencement Ceremonies. Vermont Medicine sat down with Dr. Larner to hear from him about his youth in Burlington, his early years as a physician in wartime and the California of the 1940s, and the fateful morning’s swim that gave birth to the Larner Scholars Program.

VERMONT MEDICINE: You grew up in what was the Jewish neighborhood of Burlington. Where did your family come from originally?

ROBERT LARNER: From Russia. My father came from Brest-Litovsk on the border with Poland. He was very active in the Jewish community — especially in the old Olavi Zedek synagogue. The family name was Likovsky — like many people in my family I changed it to Larner in my 20s. We lived on the poor side of town: North Winooski and Union Street, near Archibald Street. My father bought that brick house on the corner and we grew up there, my six siblings and I. I was the seventh child.

My father originally came to Burlington through his connection with his family, he had an uncle who lived in Burlington and was also a roofer. His uncle had a job with Blodgett’s roofing business, and got my father a job there. He worked there for years, until they laid everyone off in the Depression, and then he did roofing on his own. When I was in high school I remember working in the summer with him on the roofs, and that’s when we both decided this wasn’t going to be my career, and that I’d better go find something else!

I went to grammar school on Archibald Street. I always was more adept at science and math than I was at writing. When I got into UVM I didn’t really know what to concentrate on so I signed up for general science course, because that seemed to come naturally for me. Then after a year or so I focused on medicine — pre-med. I had a lot of incentive, I can tell you. After all those years roofing my father was making something like $32 dollars a week and bringing up seven of us on that. I could see that I’d better do something, because I certainly couldn’t be a roofer, and I’d starve. Fortunately I liked studying and learning.

VM: Was going to UVM a natural step for you?

RL: I was the only one in my family to go to college. They couldn’t afford anything — haircuts, or a nickel for the movies! So I got into college by virtue of winning some scholarships. I had a year-and-a-half of scholarships for winning the state championship in debating one year, and then the following year, and that gave me another one-semester scholarship. I finished my undergraduate studies in three years.

VM: Do you remember your first day of medical school?

RL: I remember that building, the old College of Medicine building at Pearl and Prospect. It was the whole medical school for four years — that’s all there was. You had pathology in the basement, and the classrooms in the first and second floors, and that was the whole school. They devoted the first two years to the basic sciences. By the third year you started to see patients — not a whole lot. Through it all I lived at home with my family.

VM: Where did you head for residency?

RL: I had to take my internship first — at Maine General in Portland. There were six of us — two or three of us from Burlington in the one-year program. We worked every day and every other night for 24 hours. Did our own laboratory work, our own slides, our own blood work. It was a lot of free labor. They paid us zero — they gave us a room and some meals. That was it. I had an interesting experience near the end of that time. After a few months I didn’t have any money, and several of the other interns came from families who also had little. We got together and decided we would ask the administration for some small income. A group of us six interns took a vote and...
REF: VM: But you weren't there for long…

RL: We had been doing some investing and were successful. I was thinking during one swim in my backyard pool — the whole thing came out in one swim, this whole scenario — that I'd been very fortunate to come from nothing, just a small-town kid, and it was time to start thinking about giving back. I wanted to do the greatest good, and I wanted it to be done in a way that would be lasting and permanent and grow indefinitely. I thought to myself: but for the College of Medicine I wouldn't be in this position, so I decided to concentrate my efforts where I could make a dent. I wanted to help other medical students have the kind of stimulating, gratifying practice of medicine that I'd had.

VM: And you had a successful practice for 40 years. Now let's fast-forward a few decades: what, in the mid-1980s, brought about the founding of the Larner Fund?

RL: I had a successful practice in Los Angeles. I was cast out into the world in 1956 — it was a whole new world for me. I was very fortunate to come from nothing, just a small-town kid, and it was time to start thinking about giving back. I wanted to help other medical students have the kind of stimulating, gratifying practice of medicine that I'd had.

VM: What was it about Los Angeles that appealed to you?

RL: It was like a small town at that time — like a larger Burlington. There were no freeways. It was clean, friendly — you'd stop at a light and you'd get in a conversation with the person in the car sitting next to you. It had that atmosphere, which I liked, and it had three medical schools, so I thought there'd be good professional stimulus.

VM: But you weren't there for long…

RL: Shortly thereafter I was in uniform. I spent nine months down in Carolina at a station hospital and then shipped overseas to a station hospital and spent the first year on Guadalcanal and the second year on Okinawa. Saw a lot of battle injuries on Guadalcanal, as the fighting was going on there. I could stand in the natural caves on Guadalcanal and watch as the Kamikaze planes came swooping down on our battalions in the harbor. It was quite an experience.

VM: When did postwar life begin for you?

RL: I got out in '46, and I went to Baltimore. I was cast out into the world in June, when all the residencies had already been filled for the next year, so it was rough finding an opening. I was accepted to a residency in Baltimore in internal medicine. I was there for a couple of years as a resident in internal medicine, then I stayed another year doing a residency in radiology. Then I went out into the world of self-employment, and looked around the country and picked out a place to live, and came to Los Angeles.

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RL: I've discussed priorities with Dean Morin and we talked about where I could do the most good. The Harvey simulators seemed like an eminently good idea for medical education. When you want to teach, say, on Wednesday morning on rheumatic heart disease, where are you going to get patients for the students to see? The Harvey simulator can make 30 different heart sounds, and you can use it at any time to refresh your knowledge.

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RL: I've discussed priorities with Dean Morin and we talked about where I could do the most good. The Harvey simulators seemed like an eminently good idea for medical education. When you want to teach, say, on Wednesday morning on rheumatic heart disease, where are you going to get patients for the students to see? The Harvey simulator can make 30 different heart sounds, and you can use it at any time to refresh your knowledge. And the residents at the medical center and the nursing school and first responders can all use them too. I'm also excited about the new classroom. I like to help build things that last for years and can help a lot of people learn. I expect to continue this program of putting in seed money where it will help improve the medical school, and particularly have an impact on the medical students. My preference has always been to support medical education and whatever improves it.

Larner Classroom Takes Shape

The Dana Medical Library will be the site of the new Larner Classroom, accommodating 120 students with flexibility for both small and large group functions. Funded by a generous donation from alumnus Robert Larner, M.D. ’42, and his wife, Helen, also the benefactors of the Larner Medical Education Center, the $1.25 million renovation will feature advanced educational technology including large display monitors, audience response system, advanced video and sound system and capacity to interface with existing learning management systems.

This project coincides with an initiative for the transformation of the Dana Medical Library into a Health Sciences Learning Commons, providing a unique opportunity to partner on a multi-phased approach to support a dynamic, integrated learning environment. To support this initiative, the classroom is being constructed this summer in the southwest portion of the library. Work began in mid-May with anticipated completion for use beginning this fall.

Above: Workers install new signage in the Green Courtyard last year as the educational facilities at the College of Medicine were renamed in honor of Robert Larner, M.D. ’42. At left: Dr. Larner in his home office with a photo montage of the first 100 Larner Scholars that hangs over his desk.

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