FULLER ALBRIGHT

January 12, 1900—December 8, 1969

BY A. LEAF

FULLER ALBRIGHT was born in Buffalo, New York, just twelve days after the opening of the twentieth century. His childhood and youth were passed in that period of peace, prosperity, and general optimism that came to an end with the outbreak of World War I.

His father was an industrialist, art patron, and philanthropist. His mother, a Fuller from Lancaster, Massachusetts, embodied the finest traditions of the New England culture. It was a large, happy, and close-knit family in which parents and children shared much of their lives together—whether at the great house in Buffalo, the long summer vacations at the family camp in the Adirondacks, the winter holidays at Jekyll Island, or on the “Grand Tour” of Europe.

It was a family characterized by a strong sense of humor—and no child growing up in it was in danger of developing a sense of self-importance. Nor were the close family ties confining. It was a hospitable household with a constant flow of visitors. However, when he entered Harvard College at the age of seventeen, young Albright was possessed of a naïveté that was unusual even in those days and an appearance that was positively cherubic! That look of boyish innocence somehow stayed with him always. He also displayed a natural ebullience and gregariousness that allowed him to fit easily into the society of a
Harvard undergraduate in the Boston community. In the Delphic Club he established friendships that he cherished all his life.

He graduated from college *cum laude* in three years and entered medical school in the fall of 1920. It was when he started to see patients that his long-range goals began to take form. At first he was fascinated by obstetrics. Later in the medical course he had a brief infatuation with orthopedic surgery but came to the conclusion that he did not have the manual dexterity to make a good surgeon. At the same time striking advances in medical research were being reported. Professor James Howard Means returned from a medical meeting to announce the dramatic discovery of insulin. Biochemistry was beginning to furnish new insights into the functioning of the body. Albright's natural curiosity was stimulated by the possibilities of applying the new discoveries to the study of disease. It was whetted too by the emotional experience of observing firsthand what, for example, this new insulin could do for a patient at death's door from uncontrolled diabetes. Throughout his later career his investigations were apt to be linked to the puzzles his own patients presented to him rather than to abstract problems of biochemistry.

After an internship in medicine at the Massachusetts General Hospital, he spent a year of research there with Dr. Joseph C. Aub, whose studies in lead poisoning meshed closely with Albright's burgeoning interest in the metabolism of calcium. In this happy environment in the company of Aub, Means, and Bauer, his latent talent began to blossom and clearly indicated the career that he should follow. Then came a year as assistant resident at Johns Hopkins under Dr. Warfield Longcope. Here he struck up an acquaintance with John Eager Howard, who shared his interest in endocrinology. They became fast friends and for years were in almost constant communication trying out new ideas on each other. Often, when
such ideas reached fruition, neither of them knew whose it was in the first place—nor cared. Before returning to Boston he spent a year in Vienna with the great pathologist, Professor Jacob Erdheim, who proved to be an inspiring preceptor.

The remainder of his professional life was spent in research, teaching, and practice at the Massachusetts General Hospital. It was an extraordinarily productive career, which brought forth new concepts in endocrinology and delineated a number of hitherto unrecognized diseases. During this period he had associated with him in his laboratory a succession of young investigators who became leaders in the field of endocrinology in this country and abroad.

In 1933 he was married to Claire Birge, of New York, in what proved to be a supremely happy match. Claire was a superb hostess, and their household provided warm hospitality to hosts of students and visitors from all parts of the world.

There are two sons: Birge, an attorney in Boston, and Read Ellsworth, who teaches at the Fenn School, in Concord, Massachusetts.

Dr. Albright's clinical investigations were highly original and far-reaching. His name is associated with the initial clinical description of hyperparathyroidism and the distinction between over-activity of all parathyroid tissue and the effect of adenoma of a single parathyroid gland. He called attention to the association of hyperparathyroidism with kidney stones; and, in fact, on the basis of an extensive study carried out in his Stone Clinic, he laid the basis for the modern diagnosis and treatment of this condition. In his laboratory was developed a method for measuring gonadotropins in the urine, which made it possible to characterize various types of amenorrhea as well as disorders of testicular functions. In 1928 he described a condition that has come to be known as Albright's syndrome, the distinguishing features of which are precocious puberty in girls, cystic bone disease, and brownish pigmentation of the skin. More than half
a dozen other original descriptions of disease might with equal propriety have borne his name. He pointed out the role of steatorrhea in depleting the body of fat-soluble vitamins. He first described renal tubular acidosis and its effective treatment with alkali. He called attention to the occurrences of thinning of the bones in women following menopause. He was among the first to use estrogen to inhibit ovulation in women and progesterone to correct the metropathia caused by estrogens. He unraveled the pathogenesis of Cushing’s syndrome and sounded the first warnings of the harmful side effects of steroids on the tissues.

A total of 118 scientific papers bear his name, and his book *The Parathyroid Glands and Metabolic Bone Disease*, published in 1948, is still a prime source of information on the subject.

Dr. Albright was the recipient of honors and awards from universities and learned societies all over the world. He was President of the American Society for Clinical Investigation in 1943–1944, the Association for the Study of Internal Secretions in 1945–1946, and the Endocrine Society in 1946–1947. He was elected to membership in the National Academy of Sciences in 1955.

In 1937, at the height of his productivity, the early signs of Parkinson’s disease made their appearance and progressed very gradually but relentlessly for nearly two decades. This long period was one of almost feverish activity for him, as if he were trying to outstrip the relentless advance of his disease. He maintained, nevertheless, a sublime indifference to his disability and managed to communicate complex ideas with extraordinary lucidity. Finally, in 1956, at his own insistence, he went through the newly devised surgical treatment for Parkinson’s disease, the indications and contraindications for which were not fully understood and which left him worse off than before. The remainder of his life was spent in helpless invalidism, mitigated only by a clouding of the sensorium and the devoted care of nurses and attendants at the Massachusetts General Hospital.
In 1955 Harvard awarded Fuller Albright the honorary degree of Doctor of Science with the following citation:

"Brilliant investigator in the complex field of nutrition and metabolism, your keen mind and enormous courage are a credit to this University and to Medicine."

His tastes were simple. He was never so happy as when casting a trout fly in an Adirondack lake, unless it was when he was talking shop with a colleague. He loved a good game of bridge. He had a good eye for color and form, but no ear at all for music. He and his wife Claire were both fond of travel and did a good deal of it in this country, in Europe, and in South America.

His dress reflected his lack of self-consciousness. Who can forget the old tweed jacket, the baggy trousers, and the jaunty bow tie?

One of Dr. Albright's best remembered characteristics was the twinkle in his eye, which was a manifestation of his unconquerable joie de vivre and a slightly amused outlook on the human condition. He carried his sense of humor into his medical writings and even into his lectures, a rare accomplishment indeed, which added immensely to his effectiveness and popularity.

Everyone who knew him has a stock of warm and pleasant memories of their associations with him. One day he was joined by a young aggressive foreign visitor in attendance at one of his clinics. In the course of the discussion regarding one of the patients seen on that occasion, the visitor reprimanded Dr. Albright for not having read the visitor's writings on the subject. Whereupon Dr. Albright humbly apologized for his negligence but added, "I hardly have time to read my own."

At that time he was already seriously incapacitated physically, but not mentally, by Parkinson's disease. Even then his cheerful demeanor and unrelenting good nature had a highly psycho-
therapeutic effect upon many of the patients who flocked to him for help. Minor complaints usually evaporated instantaneously in the presence of this revered physician who refused to make any concessions to his own unavoidable physical infirmities.

In addition to his continuous and diverse clinical investigations, he managed a busy practice up to the end. Several special clinics that he conducted were an important part of his clinical practice. Thus, he established and presided over the Ovarian Dysfunction Clinic, the Stone Clinic, and his Saturday morning clinic. When asked what he saw at the unnamed Saturday clinic, he was wont to respond with a twinkle in his eye, “These are the patients I refer only to myself.” In fact, it was from the often rare and esoteric problems that this group of patients had that many of his clinical investigations arose. He had an uncanny ability to capitalize upon Nature’s experiments, to unravel complex disorders and provide clear physiologic understanding that often led directly to rational therapy for his suffering patients. His pleasure in unraveling some important physiological relationship was indeed great, but he always thought of his new findings in terms of how they would relate to improved treatment for some unfortunate patient. The theoretical and the practical were productively enhanced by his ever-active mind.

In a tribute to Dr. Albright published in 1962, one of his younger collaborators wrote as follows:

“What about the personality of this remarkable investigator under whose luminous common sense so many knotty problems suddenly seemed simple? He never discussed personalities. His private life was uneventfully happy. He married Claire Birge and lived happily thereafter in a serene and comfortable home where friends from all over the world were received. What about his heroic battles with his tragic disease? Was it, after all, heroism which made him refuse to stop doing what he liked to do or was it just more of his famous common sense? His indif-
ference to pity was the indifference of a profoundly serene and happy man to public opinion of any kind. Perhaps Claire's role was more heroic; certainly it was brilliant. Charming, vivacious, and full of enthusiasm she appeared perfectly carefree as she added to her domestic duties the jobs of chauffeur, secretary, and finally nurse and shouldered all the burdens of the man of the house while appearing to depend on her husband. Although he never was made to feel dependent on his wife, Fuller could not have continued to work productively without her. Perhaps they are both heroes, but they are certainly not martyrs. Martyrs are never so widely loved and respected in their own time."

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DEGREES, APPOINTMENTS, AND HONORS

DEGREES

1921    A.B., Harvard University
1924    M.D., Harvard Medical School
1955    S.D., Harvard University (Honorary)

APPOINTMENTS

1924-1926  West Medical House Officer, Massachusetts General Hospital
1926-1927  Research Fellow in Industrial Medicine, Harvard Medical School
1927-1928  Research Fellow, Massachusetts General Hospital
1928-1929  Moseley Traveling Fellow, Harvard Medical School
1929-1935  Henry Pickering Walcott Fellow in Clinical Medicine, Harvard Medical School
1929-1937  Assistant Physician in Medicine, Massachusetts General Hospital
1930-1935  Instructor in Medicine, Harvard Medical School
1935-1938  Associate in Medicine, Harvard Medical School
1937-1939  Associate Physician in Medicine, Massachusetts General Hospital
1938-1942  Assistant Professor of Medicine, Harvard Medical School
1939-1958  Physician in Medicine, Massachusetts General Hospital
1942-1961  Associate Professor of Medicine, Harvard Medical School
1958-1969  Board of Consultation, Massachusetts General Hospital
1961-1969  Professor of Medicine, Emeritus, Harvard Medical School

MEMBERSHIPS

American College of Physicians
American Society of Clinical Investigation (President, 1943–1944)
Association of American Physicians
Association for the Study of Internal Secretions (President, 1945–1946)
National Academy of Sciences
Phi Beta Kappa
Alpha Omega Alpha
American Medical Association
Massachusetts Medical Society

HONORARY MEMBERSHIPS

1951 Royal Society of Medicine
1951 Swedish Endocrinology Society
1953 Columbia Endocrinology Society
1954 American Orthopaedic Association

AWARDS

1947 Roche-Organnon Award in Endocrinology
1947 American College of Physicians Award for Achievement in Internal Medicine
1949 Borden Award, Association of American Medical Colleges, for “extraordinarily original and monumental contributions to the understanding of metabolism of bone and other tissues.”
1951 The Joseph Goldberger Award of the American Medical Association’s Council on Foods and Nutrition
1955 Doctorate of Science, Harvard University
1961 Citation, Massachusetts General Hospital, for being one of the 15 outstanding physicians who had received early training at the hospital


1930

1931

1932

1933
With P. C. Baird and E. Cloney. Effect of cortical hormone in preventing extreme drop in colonic temperature displayed by hypophysectomized rats upon exposure to cold with preliminary
observations upon the effect of hypophyseal and other hormones. American Journal of Physiology, 104:489.

1934

1935
Hyperparathyroidism: a case with several unusual features, including a probably non-related chondrosarcoma, Bence-Jones proteinuria, and hyperplasia of all parathyroid tissue. Medical Clinics of North America, 18:1109–16.

1936

1937


1938


The metabolic effects of A.T. 10 (dihydrotachysterol) compared with those of vitamin D and with those of the parathyroid hormone. Trans. Assoc. Am. Physicians, 53:221.


1939


1940


With S. Sturgis. The mechanism of estrin therapy in the relief of dysmenorrhea. Endocrinology, 26:68.


1941


With R. Fraser and P. H. Smith. The value of the glucose tolerance


1942


1943


Cushing's syndrome, its pathological physiology, its relationship to the adrenogenital syndrome, and its connection with the problem of the reaction of the body to injurious agents (alarm reaction of Selye). Harvey Lectures, 38:123.

With P. H. Smith and E. Dodge. Modification on methods for the precipitation and assay of increased amounts of pituitary gonadotropic substance in the urine. Journal of Laboratory and Clinical Medicine, 28:1761.


1944


1945


1946


With C. H. Burnett, W. Parson, E. C. Reifenstein, Jr., and A. Roos. Osteomalacia and late rickets: the various etiologies met in the United States with emphasis on that resulting from a specific form of renal acidosis, the therapeutic indications for each etiological sub group, and the relationship between osteomalacia and milkman's syndrome. Medicine, 25:399.


1947


1948


1949


1950

John R. Mote. New York: The Blakiston Co. (Sponsored by Armour and Co., Chicago)


1951


1952


1953


1954


