John Lindenbaum Memorial Lecture

The annual John Lindenbaum Memorial Lecture gives us an opportunity to reflect and recognize the importance and significance of John Lindenbaum. Many of us remember him as the vice chairman of our department. He was a house officer and a fellow here in the 1960s, followed by three years of public health service in Bangladesh, and then his return to the Columbia faculty for good - first as the head of Hematology on the Columbia Service at Bellevue and then, when that service moved to Harlem, as head of Hematology and Oncology at Harlem Hospital. He was also the Associate Director of that medical service for many years. At the same time he had an investigative laboratory at Columbia, engaged heavily in the academic activities of the department and later became acting chairman and vice chairman at Columbia.

That was the structure and the sequence of Dr. John Lindenbaum’s career with us. But what made him unusual, so influential, so important, and so exemplary? First and fundamentally he was a truly extraordinary clinician with a stunning breadth of knowledge and a gift for clinical instinct. How often many have said that he was simply the best clinician they had seen here or anywhere. As well, he was an aggressive, intensely inquisitive questioner of Medicine which ignited his research. John Lindenbaum’s research was the product of his observations during the care of patients, and that was evident very early. As a resident, he was the first to describe halothane-induced hepatic necrosis, and as a fellow, he published the first clinical description of the need for folate therapy in sickle cell anemia.

His three years in Bangladesh produced 17 publications on cholera and other intestinal disorders. When he came back to New York, he began his collection of over one thousand cases of vitamin B12 deficiency and more than 500 cases of folate deficiency, which formed the foundation of his considerable contributions to our understanding of those disorders.

His laboratory participated in the development of the B12 assay, of so much use to medicine and the cause of very interesting patent contentions that ended up in the Supreme Court. John would have been highly amused by that unforeseen development.

John was a gifted teacher. He seemed to have an instinct for knowing what to say to help the listener understand and learn. His rounds - the combination of the masterful clinician and the riveting teacher - were in many respects the height of clinical medicine.

John Lindenbaum simply had no patience for inequities and injustice in medicine. His advocacy took him to Bangladesh, it took him to Bellevue Hospital and years of devotion at Harlem Hospital, and it was the reason for so much he did here and elsewhere. He was particularly concerned about the representation and roles of minorities in medicine. He vigorously recruited and nurtured minority faculty for this department and particularly focused on recruitment and nurturing of house staff.

In 1997, the last year he was with us, John received the Baumfalk Award at graduation. He asked that the proceeds of that award be used to establish an annual lecture to be given by an esteemed biomedical scientist who was a minority. Over the years that lectureship was expanded to become the Lindenbaum Visiting Professorship.

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