INFLUENTIAL PEDIATRICIANS IN TEXAS: A SOCIAL HISTORY

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Introduction and History of Pediatrics

Medicine is one of the oldest professions that exist in this world. Medical practice developed in Greece with the teachings and philosophies of Hippocrates who brought concepts such as diagnoses and medical ethics into fruition. The Hippocratic Oath was written in the 5th century BCE. Thousands of years later, physicians are still entrusted with caring for people at their most vulnerable times. Throughout this paper, I aim to provide a history of pediatrics as it has emerged as a separate field of medicine, as well as outline a set of unique traits needed for future and current pediatricians in order for them to become influential leaders. Focusing on Texas as a broad region of the United States, a handful of key pediatricians in Texas history will be highlighted to further illustrate how certain traits have been exemplified in real life.

Pediatrics is derived from two Greek words: pais meaning child and iatros meaning doctor or healer [1]. Medical education distinguishes the differences between the child and the adult patient. However, when medicine was making its way across the world, physicians were healers of people, and children were treated no differently than adults. As modern medicine began to develop, there was a shift into dividing physician practices into distinct disciplines. In this regard, a surgeon could hone his or her skills in one specific area, leading to better outcomes for patients. This thinking gave rise to pediatrics becoming its own field distinct from general adult medicine.

The first pediatric hospital in the western world is believed to have been the Hospital des Enfants Malades, (Hospital for Sick Children) in Paris, France which opened in 1802. If this is regarded as the first time in which pediatrics is described and treated as a distinct field, then pediatrics as a specialty is itself barely over 200 years old. And even though physicians were mentioned during the time of the Hippocratic Oath, pediatrics as its own specialty is still a very new concept. Sir George Frederic Still was an instrumental physician from England who specialized in pediatrics[2]. His life’s work is published in his book Common Disorders and Disease of Children. Born in 1868, Dr. Still lived to age 73. Dying in 1941, Dr. Still was able to witness many of the changes and advancements in the field of pediatrics. Based on
documentation of Dr. Still’s life, it is apparent that he pursued the care of children because he was truly passionate about this population. He grew up without much financial security after the death of his father when Still was 17 years of age. He witnessed the death of four siblings: three died before their first birthdays and an additional sibling passed away as a young child due to scarlet fever. These childhood hardships are most likely what catapulted him into advocating for the well being of children. Apart from treating children in his own practice, he became a professor and chair of the pediatrics department in London. He gave many radical lectures explaining new pediatric conditions to future physicians, thus creating a pathway for future pediatricians in the region. A rarity at that time, Dr. Still not only emphasized what childhood conditions exist, but also that more work must be done to develop an understanding of these conditions. His approach to treating children was a more humanistic model in that he cared about causes of illnesses and how treatment would affect these patients in their daily lives [3].

Much like Sir George Frederic Still provided for London, America has its own “father of pediatrics”. German-born, Dr. Abraham Jacobi who set up practice in New York in 1853, is affectionately labeled as the father of pediatrics in America [4]. Dr. Jacobi developed several pediatric societies, began the publication of several pediatric journals, and helped construct multiple children’s departments in hospital systems within New York. He was dedicated to promoting the healthcare of children and passed along his legacy by helping with the creation of the American Pediatric Society along with Job Lewis Smith in 1888. The major pediatric society of the modern area is the American Academy of Pediatrics, which was formed in June 1930 by a group of 35 pediatricians.

Since this paper is focusing on Texas rather than the rest of the United States (or the western world for that matter), a brief introduction to the specifics of pediatric practice historically in Texas is warranted. When discussing this matter, it is appropriate to use the cities of Dallas and Houston, TX as the foreground. The first pediatrician in the state of Texas was Dr. Hugh Leslie Moore who arrived in Dallas in 1908 [5]. Born in Texas, he traveled to England and Germany to study this “new specialty” of pediatrics, and then brought his knowledge and experiences back to his Texas community. He became the chief of pediatrics at Baylor University College of Medicine in Dallas (before its relocation to Houston in 1943). His altruistic spirit taught many classes of future pediatricians and helped thousands of
children in the Dallas community. He even provided free office space to new pediatricians until their practices were established. Through his leadership in the early decades of the 1900s various childcare activities and facilities evolved. From rudimentary “baby camps” in which tents were set up on the lawn of the city-owned Parkland Hospital to treat infants with summer diarrhea, to the establishment of a free-standing children’s hospital called Children’s Medical Center, the landscape of pediatrics in Texas improved dramatically [6].

Throughout the rest of the 1900’s, new technology helped advance research opportunities in the field of pediatrics. By the mid 1980’s there was a concept that pediatrics should develop subspecialties within the pediatric department. The most successful subspecialties originally were those of orthopedics and surgery. While Dallas was expanding with Children’s Medical Center in the 1940’s, Baylor University Medical Center moved to Houston and established its own free-standing children’s hospital, Texas Children’s. As these two major regions in Texas expanded with new technology, research, funding, and support from governmental organizations, other regions of Texas benefitted as well. Slowly other regions of Texas began recruiting pediatricians to work in their areas by establishing pediatric wards and children’s hospitals.

Currently, the process to become a licensed pediatrician is heavily regulated. Once completing medical school and passing various United States Medical Licensing Exams, a doctor who decides to pursue pediatrics as a specialty enrolls in a 3-year pediatric residency in association with an institution and/or children’s hospital that is accredited by the United States. Once this residency is complete, the Texas State Licensing board approves a physician to practice on his or her own without supervision, granted they meet certain requirements. Completing a pediatric residency qualifies a physician to be a general pediatrician. In order to become a specialist within the field of pediatrics, a physician must complete a fellowship, which is generally another 3-year long training period. As of 2017, these were the pediatric subspecialties that offer fellowships (list may not be exhaustive): adolescent medicine, allergy and immunology, cardiology, child abuse, child/adolescent psychiatry, critical care, dermatology, developmental and behavioral, emergency medicine, endocrinology, gastroenterology, hematology-oncology, hospitalist, infectious diseases, neonatology, nephrology, neurology, pulmonary medicine, and rheumatology.
**Thesis Statement**

In order to become a pediatrician who successfully manages to create a lasting positive influence in the lives of their patients as well as peers, one must strive to be altruistic, continue to be in pursuit of new knowledge, and practice humanism. There are numerous examples of these crucial traits throughout the history of pediatrics. The following three sections of this paper will delve into each quality individually and provide an example of how that quality was responsible for a famous Texas pediatrician’s positive influence in the field of pediatrics. I will also develop arguments that will serve to dispel the belief that an influential physician is one who has been trained at a prestigious institution, someone who accumulates wealth, or a person who appears to have the largest knowledge base.

**Altruism in Pediatrics**

In its truest sense, altruism is defined as the practice of selfless concern for the well being of others. As pediatricians, this is a trait that is vitally important. Children are considered a vulnerable population. This stems from their being unable to care for themselves the way that an adult is capable. In order for a pediatric physician to influence their own communities, they need to perform their duties solely for the patients they’re serving. If physicians are performing their jobs mainly for monetary compensation, they will make a living but they won’t necessarily be changing lives. The history of pediatrics is filled with doctors who have inconvenienced themselves for the betterment of the children they work to keep healthy. A prime example of this are free clinics staffed by pediatricians, nurses, pharmacists, phlebotomists, office staff, and/or students who volunteer their time to provide high quality medical care to children whose families do not possess health insurance.

There are a handful of hospital systems that have missions to serve children, regardless of their ability to pay. Two of these children’s hospitals are St. Jude Children’s Research Hospital and Shriners Hospitals for Children. Shriners Hospital operates a few branches in Texas. One such location is in Galveston, TX, a verified pediatric burn care center which first started treating pediatric burns in 1966. The catchment area for severe burns encompasses the entire state of Texas as well as certain areas of neighboring states. Based on data obtained from the US Census Bureau, out of a total Texas population of approximately 24.5 million people, about 4 million people fall in the category of 21 years of age and younger [7]. There are many instances in which a child may be severely burned, either accidentally or intentionally. Science has since improved and once a near death-
sentence, now children with burns over 90% of their total body surface area are surviving due to the remarkable work being done at Shriners Hospital in Galveston, TX.

A physician worthy of highlighting for his sense of altruism at Shriners Hospital is Dr. David N. Herndon, the current chief of staff and director of research at the Galveston location. Dr. Herndon specialized in burns before turning his attention to pediatric burn cases specifically, and has a long history of being recognized for his selfless work on behalf of children and the nation. He served in the U.S. Army and received the Distinguished Service Medal in 1977. Since that time he has received numerous awards from burn associations as well as surgical associations for the work that he has done for pediatric burn patients. His dedication to improving chances of survival from severe burns is what drove him to conduct research on this matter. His research has significantly contributed to advancements in controlling infections, decreasing hypermetabolism following burn injuries, early wound closure, decreased scarring, improved rehabilitation post-injury, and treatment of inhalational injury. The truest measure of his work has been evidence of decreased mortality rates among burned children at his institution [8].

Another facet of altruism in the pediatric world involves sharing one’s wisdom with the younger generation of future pediatricians. In this model, as future generations continue to incorporate the best qualities of pediatricians before them, each wave of physicians that hits their communities will have many techniques to draw from. Dr. Herndon has channeled his inner wisdom about the care of children into writing and publishing multiple books. He is now considered one of the pioneers of burn care around the world. His textbook, Total Burn Care, emphasizes not only addressing a patient’s clinical needs, but their physical and social needs as well. This is also a physician who values humanism. A “team approach” to treatment is a key phrase throughout his writing. An influential physician is not one who knows the most on their own, but one who values other team members in decision making processes for patients. It is this teamwork that leads to success in patient recovery as well as patient satisfaction.

Dr. Herndon is just one example of a Texas pediatrician, who demonstrates that altruism is a crucial trait for influential pediatricians. Altruism is a trait that is ultimately inherent in every person who decides to pursue the noble profession of medicine. However, like many things in life, it is also something that needs to be cultivated in order to affect change. In Texas, as well as across the
nation, medical schools and residency programs are doing their best to nurture this trait amongst future and current pediatricians. With required US pediatric residency programs including child advocacy in their curriculum, many young pediatricians are learning the tools necessary to act selflessly and on behalf of their specific patient population.

**Pursuit of New Knowledge in Pediatrics**

It is vitally important for a great pediatrician to have the self-drive and motivation to pursue new knowledge in this field on their own. Medicine is such an interesting profession mainly because knowledge is always evolving. Thousands of research labs around the world are working to prove new theories, develop new pharmaceuticals, and find better ways to diagnose illnesses. Medicine is very much a collaborative field and with a multitude of conferences and journal publications available, information discovered in one small city can then be disseminated across the world and affect patients millions of miles away.

A successful pediatrician does not stop his or her pursuit for knowledge once the residency and training period is over. In order to stay at the forefront of the profession, one must stay up to date on major advancements in pediatrics. But, with the studying of new ideas and concepts, a truly great pediatrician maintains also a sense of critical thinking. It is important to challenge assertions made in publications and come to an individual conclusion about what the data is reporting. In many instances, misinformation may become widespread, leading confusion among our patient populations.

However, for every one physician or special interest group that tries to misinform the public, there are hundreds more who strive for the pursuit of knowledge in their field to help their patients. One such woman was Dr. Martha Dukes Yow (1922-2005). Dr. Yow was an influential pediatrician in many ways. She entered medical school in the 1940’s in an academic environment that was deeply patriarchal. Being one of a handful of female students pursuing a career in medicine and research left her susceptible to a large audience who did not want her to succeed. Instead of shying away from the adversity she faced in the beginning of her career, she decided to succeed anyway. Her passion for children and treating as well as preventing their illnesses, drove her to continue her quest for further knowledge in pediatric infectious diseases. In fact, she is credited as being one of the pioneers in the specialty of pediatric infectious disease.
Dr. Yow spent time performing research on topics such as epidemic staphylococcal infections, congenital rubella syndrome, neonatal group B streptococcal disease, and cytomegalovirus infections. By the end of her career she had amassed over 100 publications. This number of publications for a single physician is staggering, but what makes it even more impressive is that she only began her career as a pediatric researcher after taking a break to raise her three children. Faced with the pressures of society in the early 1900’s, after pediatric residency training she became a full-time wife and the mother of her three young children. She expressed that she felt isolated from her profession as well as feeling guilt for not being the perfect wife and mother. She referred to her family life and professional life as a “balancing act”. She moved to Texas and shortly afterwards her husband passed away from Hodgkin’s disease. It was at this time that truly began her research career.

As a pediatrician and mother, Dr. Yow cared for many children. Her research in pediatric infectious disease shed light on a subject that is still relevant in today’s treatment of children. As a young girl Dr. Yow had dreamed of having a career as a physician and despite the many obstacles she faced, she managed to do it. She is a very inspirational Texas pediatrician not only because she was one of the first female pediatricians but also because her pursuit of knowledge drove her to challenge societal norms in order to save the lives of children. Her reference to having a career was well as raising a family as a “balancing act” is extremely relevant in today’s world. Women and men alike, both physicians and non-physicians, voice frustrations about the necessity of dividing their time and energy between their work and home lives.

A pediatrician in the modern era can certainly be inspired by Dr. Yow’s lifelong appreciation for the pursuit of knowledge. Emphasizing that a successful pediatrician is one who pursues knowledge indefinitely does not mean that a person with the highest level of knowledge has less to learn. The process of pursuing knowledge and using critical thinking to come to conclusions is the key, not only the factual knowledge gained from the pursuit. It also does not matter which medical school or residency a pediatrician hails from, but rather his or her passion for protecting the well being of children. A physician who trains at the most prestigious institute is no better versed in the pursuit of knowledge than a physician who trains at a community center for example, because this passion for knowledge is an inherent quality that must be nurtured on one’s own.
Humanism in Pediatrics

The third and final trait a pediatrician must embody to become an influential doctor and healer is humanism in medicine. The very core of this concept has been inexistence for approximately 200 years, since the Renaissance era. In a modern spin on this philosophy, a humanistic physician is one who treats a patient as a whole and not simply as a constellation of medical symptoms. For example, humanism in medicine may assume care for the mind, body, and soul by healing an infection with a medication, ensuring that social issues such as cost or transportation do not become factors in non-compliance, and being able to have open conversations with the patient about their fears and goals for treatment. A humanistic aspect of care is not something that should only extend to adults. In fact, even neonates will benefit from a pediatrician who practices humanism in medicine. An influential Texas neonatologist, Dr. Mubariz Naqvi, is one example of somebody who truly embodies the role of a humanistic physician.

Born in Pakistan and eventually settling in West Texas, Dr. Mubariz Naqvi treats every baby as an individual person. Dr. Naqvi found his way to Amarillo, TX in 1976 through a community effort to focus on the problem of high infant mortality [11]. His tireless efforts have helped save the lives of thousands of children throughout his over 40 years of work in Texas. His calm demeanor, soft-spoken voice, and charm with neonates have elevated him to become one of the most beloved pediatricians in the West Texas community. Hardly a day goes by in which Dr. Naqvi is able to walk through the halls in the hospital without a family member or member of staff striking up a friendly conversation with him.

Apart from his work with patients, Dr. Naqvi believes that his real inspiration for coming to work each day is to teach future doctors how to be compassionate physicians. An important lesson that he teaches to medical students is how best to deliver bad news to families. It is emphasized that this delicate process needs to take place in a private, calm environment. All members in the room must have a place to sit down and feel heard. Then he describes the honesty that a physician must have to convey a difficult situation to a family. The mere mention of this technique proves that Dr. Naqvi practices humanistic medicine each and every day of his career. His willingness to allow students to participate in the process also ensures that these young doctors will take his humanistic skills and apply them to their own sets of patients in the future.
Dr. Naqvi’s teachings have not gone unnoticed in the West Texas community. This influential Texas pediatrician has received countless awards from students and the local medical school highlighting his nurturing qualities. At a ceremony to honor his newly designated title as a Distinguished Professor, speeches were given by individuals in his professional life who know him well. In one instance a fellow neonatologist spoke about how she was inspired by Dr. Naqvi’s passion to continue to read and review the most current data published in his field. His insistence of starting a monthly journal club amongst the neonatologists teaches the younger generations of doctors that new knowledge needs to always be pursued for the betterment of their patients. A pediatric resident spoke to Dr. Naqvi’s ability to form strong connections with patients and families. When it was finally his turn to give a speech, he started it by humbly thanking almost each and every person that he has worked with over the past few years. He firmly believes that the care of children is a team effort.

Spirituality falls under the scope of practicing humanistic medicine. What future and current pediatricians must remember is that patients and families all have some level of fear when in the hospital. They are thrust into a system in which they do not always understand the jargon, where there are multiple different people involved in their care, and where many are ultimately worried about death. In these circumstances, many people turn to their spiritual beliefs. A humanistic physician is one who recognizes that spirituality can be a component in a family’s healing process. As Dr. Naqvi artfully employs this technique, he will non-judgmentally approach the subject of spirituality with parents of very sick babies. By offering the services of hospital religious figures or even participating in being present if a family wants to involve their pediatrician in spiritual proceedings, the doctor continues to play a role in the overall healing process. It is worth mentioning that there are thousands of different cultures and customs providing the background for the millions of patients seen in hospitals across the world. Since there are so many unique viewpoints a pediatrician must approach this subject with a neutral and open mind for the sake of their young patients.

In 1998 the Neonatal Intensive Care Unit (NICU) at Northwest Texas Hospital in Amarillo, TX was named in honor of Dr. Naqvi. In an interview with a local news station 19 years ago, he mentioned some advice that he gives to future physicians. Even though this interview was almost two decades ago, Dr. Naqvi still gives this advice to students and pediatric residents on a daily basis:
Try to do your best where ever you are and work well with people, give them your love and support and honor, particularly those patients who are sick and their parents who are so worried.” [12]

A history of influential pediatricians in Texas would be incomplete without the mention of Dr. John P. McGovern. A name now so ubiquitous amongst the Texas Medical Center in Houston, TX, Dr. McGovern started his career with the simple goal of caring for children. A true testament to the adage that your childhood invariably affects your adulthood, a young John P. McGovern grew up during the Great Depression in Washington, D.C. Upon seeing his grandmother feed the hungry in his childhood home, he internalized that doing good for the world would be his calling.

I learned from watching my grandmother that giving and receiving is the same thing. [...] I could see in her eyes that it made her feel good. ... I think everybody's got an empty spot inside, and I call it the God-sized hole that we have to fill. And you can't do that with Caesar's world stuff — money, property, prestige. That doesn't fill that hole. Love does. ... love in the sense of deep caring. [13]

It is deeply inspiring that humanism became a part of Dr. John P. McGovern’s core beliefs from such a young age. Throughout his career in medicine, he continued to stay true to this overarching ideal of how an ideal physician should treat their patients. As a medical student, he would make children laugh by pretending to pull coins out of their ears in order to get them to be more cooperative with his medical exams. As a resident he championed the start of a wheelchair basketball league for young veterans who had come back with their lives shattered after World War II. [14] His attention to the mental, physical, and social side of the patient experience led him to treat even the tiniest of patients with compassionate care.

In a book he helped co-author entitled, *The Doctor As A Person*, Dr. McGovern describes medicine as not purely a science or an art form, but rather as an art based on science. [15] His reflections on medical
practice expressed the views of a physician who had studied, at that point, throughout the 1940’s up until the 1980’s, with this particular book being published in 1988. Although *The Doctor as a Person* is almost 30 years old, McGovern’s astuteness in recognizing the merits and flaws of the medical system are still incredibly relevant today. He notes that as technology and advances in medication continue to increase, the humanities are slowly taken for granted and forgotten about in medical education. In his opinion, technology alone does not heal a patient. Physicians must also cultivate the art of listening, paying attention to physical exam findings, and connecting with patients as human beings. Dr. McGovern devoted his life to the children he cared for in his allergy and immunology clinics throughout Houston, the greater Houston community, and the many medical students in whom he instilled the core values of humanistic patient care.

John P. McGovern was an Oslerian scholar. He was trained under a physician who had the privilege of being trained by Sir William Osler himself. Through this school of thought John P. McGovern was able to influence the lives of thousands of Texans – both while he was alive and today through the McGovern Foundation which continues to honor his legacy.

Humanism is a crucial concept in the world of pediatrics. In a field in which the patients are not self-sufficient, there are many factors that affect their health that they are not able to control. Pediatricians have the tough task of speaking to parents or guardians to gather information, asking age-appropriate questions to the actual patient, and then educating both the patient and family about the child’s health. Perhaps the most unique aspect of pediatrics as compared to other specialties in the adult sphere is that pediatricians form a bond with patients from the day they are born until they are full adults. In this incredibly influential time in a person’s life, their one constant may be their childhood doctor. As a child grows and develops from visit to visit, the relationship a pediatrician has with their patient constantly evolves as well. An influential pediatrician will treat their patients with humanism in order to help them reach their full potential as adults. Children have dreams and goals for their future lives and pediatricians become tasked with preventing a medical illness from being a reason for holding them back.

Apart from being an excellent pediatrician to admire for his humanism, Dr. McGovern also demonstrates the previous two traits discussed in this paper as well: altruism and the continued pursuit for knowledge. He has an altruistic spirit as well as a desire to stay
involved in research. Upon graduation from medical school at Duke University, a young John McGovern, MD was a recipient of the coveted Borden Prize for student research. Being recommended by his mentor, along with his interest in research, he was accepted as an intern at Yale Pediatrics for the first year of his residency training. At that time Yale was one of the few medical schools in the United States that required a research thesis for graduation. It is unsurprising that a newly graduated physician with an interest in research was offered one of only two positions in their internship program. In 1946 John McGovern was drafted into the army and assigned in Richmond, VA. During this time he participated in a number of research assignments and even published an article in the Journal of Allergy. It is interesting to note that Dr. McGovern flourished as a pediatric allergy and immunologist in Houston many years later and that this particular research project was his first encounter with the field.

For those familiar with the Texas Medical Center in Houston, Dr. John P. McGovern’s sense of altruism needs no explanation. He had a strong sense of wanting to give back to the community. While running a successful private allergy and immunology clinic in Houston, Dr. McGovern began investing his money in real estate surrounding the Texas Medical Center and greater Houston community. He began his foundation with an initial donation of $10,000, which has now grown to hold millions. Apart from his private clinic, he also helped start a clinic at the UT Health system in Houston, which as of a few years ago, now bears his name. Since the humanities and ethics played such a huge role in his life as a pediatrician, he wanted the same to be true for aspiring physicians. His foundation currently funds a 4-year integrated curriculum in medical ethics and humanities designed for medical students who are interested in cultivating the skills not necessarily taught in medical schools at this time. Initially launched in Houston, TX in association with UT Houston’s Medical School (now renamed as the McGovern Medical School), this certificate program is also offered at Texas Tech University Health Sciences Center in Lubbock, TX. Graduates of this program join the ranks of prior John P. McGovern scholars and are pursuing their careers with the noble ambition of bettering the lives of their patients and themselves.

**Conclusion**

As illustrated in the preceding sections of this paper, there are three major traits that work together synergistically to create a pediatrician who will positively impact the lives of children. First, altruism is a must. A selfless pediatrician has the mindset that all children deserve
medical treatment, regardless of insurance or socioeconomic status. Altruistic pediatricians volunteer their time to help children in the community either at free clinics, raising money for organizations that promote children’s health, or participating in events that have the well being of children as their main mission. An inner drive to continue to seek out new knowledge in pediatrics is also essential in a heartwarming pediatrician. Pediatrics, similar to other branches of medicine, has the ability to be revolutionized by new innovations in the medical sciences. Future pediatricians with the passion for staying up to date with new knowledge serve their patients better than those who are content with just maintaining the status quo. Lastly, humanism is a key trait for any pediatrician striving to make a difference in the lives of children. Treating a patient not just as a medical diagnosis, but as a full assembly of their mind, body, and soul has the ability to transform experiences. The many pediatricians who, in years past, have implemented this technique in medicine have shown through their immense successes that even in the modern era of billing codes, insurance issues, and politics, humanism is both possible and needed.

There has been no mention of where medical training should be accomplished in order to become an influential pediatrician. This is because the skills and traits needed to do this all come from within. Whether a future pediatrician trains at the most prestigious institution or not, every future doctor has the capability to become a great healer if they cultivate the three traits discussed in this paper.

In striving to achieve the essential traits of altruism, the continued pursuit of new knowledge in pediatrics, and humanism, monetary earnings do not play a role. In the example of Dr. Herndon who works for a non-profit organization in which burn care is provided for every family regardless of their ability to pay, wealth isn’t a factor in his choice of full time occupation. Dr. Naqvi works tireless hours in the newborn nursery, NICU, and medical school teaching students in order to advance the field of pediatrics. His monetary compensation most likely does not reflect the amount of work he actually does on a daily basis, but he is a prime example of somebody who does his job because he loves it, not just for the compensation. In the case of Dr. McGovern, the wealth that he has garnered through his foundation is used purely to advance the Houston community and the knowledge of medical students. He did not create wealth for himself, but rather for it to be implemented in advocating for sick children in his community.
Lastly, as Dr. Martha Dukes Yow so poignantly exemplified, the greatest pediatrician is not the one with the largest knowledge base, but the person who is willing to seek out the answers for things that they do not know. She devoted her life to discovering all she could about infectious diseases that were killing so many babies during her era. She saw a gap in the knowledge base and instead of accepting this as fact, she strove to figure out why the scientific community did not know more. These are the actions of an inspirational health leader.

References Section


