

ORAL HISTORY INTERVIEW - ROBERT GRACY, PhD.

Blake Hailey: Today's date is January 26, 1994 and we are pleased to have with us Dr. Robert Gracy the Associate Dean of Basic Sciences and Research here at the University of North Texas Health Science Center at Fort Worth and we are doing the videotaping in the Gibson D. Lewis Library in the biotech communications center. I'm Blake Hailey, and after saying all that I think we are ready to go Dr. Gracy if you are.

Blake Hailey: If we could go back in time to when you first came to Texas and UNT I believe and talk a little bit about your relationship with UNT and how it developed into the relationship with TCOM.

Dr. Gracy: I came to UNTHSC initially not knowing anything about TCOM. I was at Albert Einstein College of Medicine and recruited to the University of North Texas in 1970. I came to the Department of Chemistry and then looked toward developing a dept. of Biochemistry and that was the main focus that they were interested in and so they attracted me to come in and head up an effort to develop a dept of biochemistry at the university. I came to Denton and established my lab there and the first year was kind of tough. The year was tough in the sense that there were no other biochemist there at that time, so I did not have any colleagues around to communicate with. Fortunately the people at UTHSC at

Southwestern in Dallas at that time had one of the outstanding departments of biochemistry in the country. They were very helpful in saying that if you need some help or need to use some space, we would be happy to provide it to you. They were very helpful, and in that first year I got my program going and was fortunate in obtaining the career development award from the National Institute of Health. That was a 5 year award that would pay my salary. We were able to do that and release my salary to obtain another faculty member in biochemistry. We hired Mike Jacobson and brought in Ben Harris from Biology. Again at that point, a corium or at least 3 people to put together a biochemistry program. Then fortunately in 1972 with the TCOM coming on board or becoming a part of the equation gave us tremendous new opportunities. When that happened I had never had any experience with Osteopathic Medicine. I did not know what a D.O. was and had absolutely no clue on the concept. They put together a program where we would teach the first 2 years of basic sciences on a contractual basis in Denton. We rapidly remodeled the attic of the biology building to have room for lectures. Actually in the 1st year we had lectures in the biology building before the remodeling took place. That began the program but did give us the opportunity to bring in new people to create a nucleus of faculty who could be involved in generating basic types of academic programs.

Blake Hailey: So, you did that until about 1975 or so, or did you move down to Ft. Worth with that same department.

Dr. Gracy: No, what happened Blake is that between 1972 and 1975 we continued to teach the program in Denton. We recruited some new faculty in the various departments. I was a faculty member in biochemistry with Gordon Skinner being the chairman of biochemistry. Each department kind of developed at it was a situation which I think many places have seen in a good deal of flux. We had offices here, offices there, in the health science center in some newly renovated dormitories, in the chemistry building, in the biology building and it was not ideal for communication. In 1975 the legislation was put through to make TCOM a part of the institution, and a state operated medical school. That obviously gave us an opportunity to look at this as a long term commitment rather than just a commitment for what had been the previous 3 years.

Blake Hailey: It was about that time you went to Germany as a visiting professor. About '76 or so, is that right. Then you came back to Denton, or in Ft. Worth and continued on in the same role you were in?

Dr. Gracy: Well, not exactly, I took a sabbatical at the end of 1975 to go to Germany to learn some new techniques, and to work on our research program there which was very successful. While that period of time was evolving, a lot of changes were going on in Denton and in Ft. Worth. Somewhere toward the end of my sabbatical I got a letter before faxes, and the indicated to me that they

wanted me to take over the chair of the dept of biochemistry on returning. I came back in September of 1976 and accepted the chairmanship of the department of biochemistry.

Blake Hailey: You were housing in Denton, and still commuting back and forth about the time the river plaza building was in line.

Dr. Gracy: That is right Blake. Again, the whole scenario has been one of continual flux and at times that was frustrating to people but in retrospect I think it was very very good because we were moving and doing all kinds of things. It was and is to see the continual movement that we have in this institution. I came back and there was some facilities that were being leased in the River Plaza area. Med-ed 2 was opening and being completed and that was a big change from the bowling alley. I had taught some lectures in the bowling alley. Things were really starting to take shape and it seemed like there was a long term plan evolving. I don't think anyone had all the answers, but the basic science departments which housed in Denton began to move down to the facilities that became available. Some labs became available in Med-ed 1 and some over in River Plaza. Physiology, pharmacology, anatomy, and microbiology pretty much moved there facilities from Denton to Ft. Worth. Biochemistry by that time had grown to be a very large department. We had a big graduate program and there was simply no space in either River Plaza or Med-ed 1 to take care of our obligations in labs. We got offices in River Plaza but not labs.

Blake Hailey: Did you have to come over here to do the lab part?

Dr. Gracy: Well, we kept our labs in Denton, so we drove back and forth. I think or challenge anyone to tell me anyone who has driven back on 35-W more than the biochemistry faculty during that period of time. We drove back and forth literally every day.

Blake Hailey; How was the relationship at that time. Was the faculty in a sense of the two institutions. Some of you with joint appointments if you will at UNT and TCOM. What was the relationship between the other faculty members and the regents, or chancellors. Was that pretty good or were there some problems?

Dr. Gracy: I think there are always with two institutions evolving with two independent sets of goals, there are going to be some conflicts. What happened was biochemistry was the department that was serving both campuses. We were the only department of biochemistry that functioned at TCOM, and the only department of biochemistry that functioned at UNT at that time. We were being asked to do things on both campuses. Sometimes there were conflicting things about doing this at this time or doing that at that time. Out of that by necessity grew some interaction between the two vice presidents of the two institutions. I think it required that the two institutions start working together and looking at some things. Partly because of that a group called Entec evolved. That was an acronym for North Texas TCOM, I don't remember

the last part of it. The point was that it was a collaborative committee. It was a committee that would meet on a regular basis with the vice president of the two institutions and a number of us that were involved in joint programs. The idea was to see what could be developed that would be mutually beneficial to the university in Denton and the evolving campus here in Ft. Worth.

Blake Hailey: You were spread pretty thin back then it sounds like going back and forth. Who was the vice president of TCOM at that time?

Dr. Gracy: We went through lots of presidents and vice presidents at that time. We saw 5 presidents at UNT and at least an equal number of vice presidents. Let me just say, I will, in retrospect, say that all of them made contributions to where we are now. While I might myself argued with this one or that one at some point in time, I think they all made major contributions in aiming toward this institution becoming an academic institution rather than becoming a trade school or very narrowly focused school. Which could have happened at that time.

Blake Hailey: When did you finally get into one or two particular buildings where you did not have to go back and forth?

Dr. Gracy: Blake that took a number of years and did not happen overnight. When Med-ed 2 began to evolve and I was on the planning

committee. We had an excellent group of people all the way from the president to the people in administration and faculty, to outstanding architects and people we had as consultants. We went around and looked at other medical schools in Texas. We went to Philadelphia, to a number of other places to look at specifics about animal facilities and research labs. We designed this building with a lot of input from a lot of people. I think a lot of people might disagree about one thing or another, but it turned out to be an outstanding facility. When this building, Med-ed 2 was completed, that was the first chance that biochemistry had to move from Denton to Ft. Worth. We moved in one bolus of people at one time. We still didn't have complete space for everybody and in fact only a year and a half ago did we get the last person really moved in. So, it has been a gradual process.

Blake Hailey: What was your position at that time? as far as your title and your responsibilities. Were you still chairman of the department?

Dr. Gracy: I was still chairman at that period of time. I was chairman of two units, the department of biochemistry at TCOM and also the division of biochemistry at UNT. That sounds more schizophrenic than it really is. The move was made with a lot of cooperation, but it wasn't without problems.

Blake Hailey: But, the relationship even today is pretty good with

the UNT faculty and our faculty here I understand.

Dr. Gracy: Yes, it is a evolutionary kind of change and during a portion of that time for example, I chaired for two years also the department of microbiology and immunology. There was one period of time where I was chair of 3 departments at one time. But everyone worked very much together, and realized the mission was an evolving process. I think that we had a great number of interactions with UNT both in research and teaching.

Blake Hailey: It sounds like someday's you wondered where you had to go. What hat to wear so to speak. I know you plan on adding a couple of floors or possibility of 2 floors to med-ed 2, are you going to be involved with the committee to add that?

Dr. Gracy: Yes, we are actively planning that program and the architects have been meeting with us to extend this building 2 more floors. When Med-ed 2 was built it happened at a time when inflation was very heavy and the original plan was to make this building the same size as Med-ed 1 with 8 stories. The time that was required in the architectural drawings, the land acquisition and such things, the dollar had shrunk and we had to build a smaller building. We did that with the anticipation that we would eventually ad on to this building to accommodate 2 more floors. That can be done now with any major additional cost.



Blake Hailey: Now that we are a Health Science Center. I want to talk about that in a second. You have also been doing a lot of research. Could you go into some of the research aspects that you have been doing. From looking at some of the paper work on you, you are into quite a bit of things; gerontology, the eye, and so forth. Could you discuss a little of some of your research activities and where you are today on some of that?

Dr. Gracy: When I came from the Einstein, I came with a program. I submitted a proposal even before I came to look at some genetic diseases and carbohydrate metabolism. In fact the grants were funded even before I moved here. So, to a certain extent I had a running start. We moved through those and were working on those projects quite successfully. Actually when I was at the Einstein as a post doc, a colleague of mine I asked what are you going to do when you grow up? He said well I am going to work in aging research and this was 1969 when aging research was unheard of. Nobody ever talked about it. Aging, why would you think about that. Then he explained to me his reasons and I sort of blocked it out and didn't think about it again. Then 8 or 10 years later we were working on a project and we kept finding some strange patterns in the laboratory on gels and analytical things and we couldn't understand what was going on. we had been forced to go into looking at human cells because this genetic disease is very rare and essentially lethal. A homozygous child will die, so we had to get cells in a culture to get to look at them. We couldn't understand some of

these differences. We brought everybody back into the lab and compared notebooks and said why is this so strange. We found that the differences were because of the ages of the cells that we were looking at. The donors age. So we said, well this is very interesting and began to develop an idea that this was an age related modification. We put a proposal into the National Institute of Aging and they responded. Then we began to develop a program which has expanded a great deal, to look at why modified proteins accumulate as we get older. We were very fortunate in that after our program got going, and we had a very successful 5 years or so. We were very successful in being chosen to receive an award from the National Institute of Health. Basically the NIH picks a very small group of laboratories which they feel are highly qualified to work on an area and the area is a high priority area. We were fortunate enough that we were working on an area in molecular changes that occur with aging. I guess we had established ourselves as being a laboratory with national recognition. They awarded us this merit award for a ten year commitment for funding the program. That of course made a tremendous difference in the potential that we could explore because that meant we did not have to write grants every 2 or 3 years and could devote our time to doing the research.

Blake Hailey: So, you still have the grant. We are still within the ten years?

Dr. Gracy: Right, we are still within it. We have been very

active. I have an exceedingly outstanding research group. The credit goes to them not myself. We have expanded beyond areas that we could have done at that time.

Blake Hailey: Your far too kind on yourself. It sounds like you have done a lot from what I can gather in that field. You also were a while back working on getting the Statmans to help out or something like that. Is that coming along or working out?

Dr. Gracy: That has been a very interesting proposal and relates to what we were just talking about. Our program in aging developed and was very successful, again because we had a lot of people around us. It goes back to the point that you mentioned earlier, and that is that the University of North Texas in Denton had established a center for studies in aging back in 1962. It happened at this time in Michigan and North Texas were the first two universities in the country to establish an academic center for studying aging. It was long before any place thought about aging being a real academic question. The unit at North Texas developed mainly in sociology and health care. It went along for a certain number of years under the direction of a very competent leader named Haram Frietzer. Harbans came over to my office one day and said how about getting some biochemists, and biologists involved in aging. We looked at it and he put up some money out of their grants and we got a unit going in biologic aging. That happened to dovetail with our own interest in getting into aging. We had at

that point a natural evolution of a nucleus of people with an interest in aging and so what then happened is we began to, as the mission of this institution grew and develop, clearly there was a commitment in terms of preventive care, long term health care and in the clinical departments to explore aging. We developed within the department of medicine a geriatric center and that allowed us to expand not only into basic research but also the clinical areas. Now we had a much broader scope that now covered the sociological areas that were covered in Denton but also the biological areas were being covered here in basic sciences. The clinical areas were now covered in the clinical departments. Only if we had that could we approach someone like the Statmans and the NIH people who are the national academy of science and have a huge reputation. Only then could we approach them and try to say would you be interested in possibly coming here.

Blake Hailey: It sounds like now you have all the bases covered in the study of aging. What other types of research are you doing, or have an interest or are you working on. Is that your only focus, or do you spread yourself kind of thin there as well?

Dr. Gracy: We are hoping that we don't spread ourselves to thinly but we are a growing institution and will find colleagues that will pick up and help in areas. We established the aging institute here when I came back from sabbatical a few years ago. Dean Cohen said lets establish that one in our first shot as a

center of excellence. We did that and it is going very well, had we not done that we certainly would not have been able to even begin to attract the Statmans. In fact when we established the first institute we brought the statemans in to give an introductory talks and the inauguration of the institution. That has been very successful and I think as you may know that we just got a major grant with Dr. Knebl in the area of 1.5 t 2.0 million dollars for her studies in training clinician in geriatric care, in both dental and general care. That is just one example of how this whole area is blossoming. Back to your question, there are a number of areas that we have seen as extensions of this, and I don't think they are separate. The vision institute for example, was an extension of that. Obviously, as we age, vision problems become a major problem in most all elderly people whether it be glaucoma, cataracts, or diabetic retinopathy. We began to establish a core of people to look at vision. We established a group of people who met monthly and talked about it. No support from the outside but just got together and talked about it. Then Jim Turner came and is leading that institute. The other institute that Dr. Lal is leading is substance abuse, is the 3rd institute to take hold. The other one which we are very involved in is wound care. That is just getting going and obviously wound care relates back to aging because as we get older the bodies ability to heal wounds is remarkably impaired. Know one seems to know why wounds heal so much slower as we get older. So, we have a major effort that is directed toward those kinds of things. That involves a great deal of clinical as well as

basic research.

Blake Hailey: So, all these areas of research that your doing are in some form revert back to the research on aging.

Dr. Gracy: It relates back ironically to my colleague at Einstein when I said what are you going to work on when you grow up. He said aging and I said why would anyone want to work on that.

Blake Hailey: If someone had asked you 5 minutes later you wouldn't have remembered it. Many years later it has come back to haunt you, so to speak. Now this happened when Dr. Cohen asked you in what, 1990, right after your second trip to Germany. I'm trying o get a feel for the time. Why is it important for us to be a Health Science Center. In regards to what your doing, do you think it is very important or will you go on with the research in the same vein you were when it was just TCOM?

Dr. Gracy: I think it is very very important and I think it is the most important, looking back 22 years or such. You look at landmarks along the way and I think this has been a tremendous landmark because it establishes us as something more than just a school that was focused on training of osteopathic physicians. We were very good and are very very good and will continue to be outstanding in that, the osteopathic medical profession. This gives us the opportunity to be recognized as a health center and

expand to many other areas. Some of which we were already doing but were not getting recognized for it. The graduate program we already had built from the time we were in Denton to the time we were here. That goes back 20+ years and that program has been solid. We have been reviewed by a number of groups nationally. They look very carefully at where you place your phd., where they go, how successful they have been and so on. We have had outstanding records on that and are very proud of course. Some of the things that evolved, to where we are now, but being a health science center not only gives us credit for some of the things we have been doing but allows us now to expand into other areas which are natural for us to develop. It is a time of changing health care programs and responsibilities. It is a very challenging time that is not going to be easy. You have to be creative and funding for research is much more difficult now than at anytime in the past. Yet, we have a core of people here in both clinical and basic science. I personally are very proud of them, and feel very confident in them meeting the challenge.

Blake Hailey: It seems to me that a common thread to our research so far is the health care issues are very big on your minds and all. Where that puts the school and all. How do you view this Health Science Center versus the others in Texas, are they markedly different or are we all running about the same?

Dr. Gracy: If you compare us, or look at size, number of

people, numbers of programs or numbers of students then we are still a small player compared to some of the bigger institutions. In terms of quality of the research that comes out of here it matches. We publish in the same journals and are reviewed by the same people, our grants go to the same subsections, so I think we are very satisfied to go up with any other institution in quality. I think quality stacks up with any of the other institutions. It is not a competition, each institution works very closely together and our colleagues in Dallas for example, work with us all the time in terms of exchanging information and techniques. They send people over here to learn new techniques and methodologies and we send people over there. While we all have different names and different budgets, from a scientist standpoint we all work together almost as a continuum. I think it is a fairly healthy thing. That is one of the beauties of what we have in Ft. Worth and I know I'm starting to sound like the chamber of commerce. One of the beauties of this institution is having, Southwestern across the metroplex and the airport in between. When you recruit new faculty you can so have lots of folks in our own institution, lots of folks in the community who are dedicated, and people in Dallas who if you can't find a specific thing that we don't have you can probably find it there. In our profession you have to have people that travel, and can come in to give seminars and the airport is a tremendous asset for us.

Blake Hailey: Where do you see the Health Science Center going in



the future/

Dr. Gracy: I think, we have been very fortunate and when we began to put together the mission statement of this school. This happened over in River Plaza and I happened to be one of the people with Charlie Oglvie and a few of the other foresighted leaders. We sat down every week and developed the so called mission statement. It dealt with preventive medicine and those things that, again, were before they were discussed with the general media or general public. We were way ahead, there is no question, ahead in planning that and the evolution of when we put our efforts in clinical and basic sciences. We now see that the whole country recognizes that and of course any health care program that evolves out of this will most certainly have preventive medicine as its foundation. We are in a very fortunate situation. We had at the outset the mission of training physicians who would be involved in primary health care, who would go out into the rural areas. Everybody wants to say that now but we have been doing it. I see us evolving, not necessarily wanting to be the largest institution, but we do want to be absolutely the best, quality wise. I think the president has said numerous times, quality is the key word. If we stick with that and use that as the key word, whether we are talking about basic science research or clinical practice, or teaching quality, it is going to work out.

Blake Hailey: It sounds like then that with the health care

proposal, the school is in a good position to make changes very easily for whatever comes out of that in the next few years.

Dr. Gracy: Well, changes don't come easy. I don't want to paint a picture that is so rosy. In retrospect, where we are looks very nice and is fun to see it but it has not been a straight shot. It has been a roller coaster at times, and times when we had to fight with faculty, administration and Austin. That will continue and it is a constant battle because resources are limited. If we had maximum resources we could charge on with total abandonment, but that is not the case anymore.

Blake Hailey: Do you see your role changing significantly since we have become a Health Science Center?

Dr. Gracy: Currently when we became a Health Science Center this last September, I accepted a position as the Dean for basic sciences and research. My duties have changes somewhat.

Blake Hailey: Where do you see yourself going or that particular area as far as a Health Science Center.

Dr. Gracy: Before I took the position, the Dean assured me that I could continue with my own research program. I think that is important that people who are involved in administration maintain active programs in both teaching and research. Otherwise you get a

situation of isolation from what really goes on. If as an administrator I can't get frustrated with the funding situation then I can't adequately be sympathetic or apathetic to people who have those problems. If I am not teaching then I don't understand the frustration with the student attendance in class. I maintained my research program and my teaching just as I did before. My only change is that instead of chair of a department I am dean of sciences and research. It is a more global picture, but it is things I think I have a fairly good picture of, and I have experience in. What it means is you look at what can be developed, for example in the clinical realm of clinical trial. What kind of opportunities can we bring in to give our faculty more types of opportunities in the area of research. Basic Science opportunities are also changing because you can't rely strictly on the NIH as has been the case in the last 20 years. You have got to be more creative and look at biotech companies, industry, integrating and putting together a program that really attacks the major health problems. Those are the kind of problems you don't solve with one person in one lab. Everybody will agree with that, you have to get teams to solve the major medical problems in this problem or any country. You have got to be able to put a biochemist and a physiologist, a cardiologist, someone in general practice, teams together to approach those problems. That is the real challenge that we have to do now, and is really no different than any other health science center would have to do/

Blake Hailey: You don't see that changing in the near future?

Dr. Gracy: I think we going to have a very changing situation, but again if you look back 20 years everything has been changing. I think that is part of the excitement of where we are now and where we have been. Certainly, it is going to continue to change, but I see that as a positive thing. We have to recognize challenges and we cant be reactive but have to be proactive.

Blake Hailey: You're also constantly writing grants and putting in proposals to various agencies to keep the funding coming in.

Dr. Gracy: One went yesterday and one went today.

Blake Hailey: And, you probably have another in the works.

Dr. Gracy: Sure, it is a continual thing.

Blake Hailey: Do you have anything that you would like to bring up. I know I probably missed a lot in my unfamiliarity with a lot of this. Are there any areas that I missed that you would like to touch on?

Dr. Gracy: No, I just want to say that I could go on for hours and tell you all kinds of anecdotal things, and stories of things that have happened over the last 20 years or so, but some of them would

have to be deleted because they would probably try to drag me into court. I can say that the reason that I have been here for this length of time, and the one thing I try and say when I recruit people into this institution. I explain to them that when I came to Texas I thought I would be in Texas maybe 5 years and it has been 25 years. The reason is the quality of the people and the attitude that we have in this institution. Again, it is not a big institution, but people work together and people have a very positive attitude. That is not just something that is just in the institution but in the community too. There are big medical schools and big medical centers that I have been at , where competition becomes a detriment and you get people becoming reclusive and separating out into camps. In some cases even fighting among each other. That is not the case here. People have disagreements all the time, but this institution is fortunate in being small and people resolve their problems and continue working together very well. When people leave here, who have never been here before, who we bring in to interview, the things they say are quite different. They say the facilities are great of course, but they say the people are so wanting to work together and enjoy what they do. That doesn't mean we are paying everybody what we should be paying them. I am sure everybody would agree with that. I think there is a sense of camaraderie and collegiality in this institution that is probably envied by a lot of places.

Blake Hailey: It sounds like to me that you don't view this as a

job but as a labor of love, if you will, from what I get talking to you today.

Dr. Gracy: Well, this part has to be deleted from the camera because if the Dean hears it he would cut my salary. I have said to many people, that I love what I do and wouldn't trade jobs with anybody. I love the people I work with and think the institution has a tremendous potential to do things, that we all working together can do. I come into work very early in the morning because I like to come in early. I am not the only one, or the first person in the parking lot. We have a lot of folks who are dedicated to this institutions.

Blake Hailey: Well, I didn't bring another release form to bleep out things. Are there any other remarks you would like to make before this goes to Dr. Cohen and Dr. Richards.

Dr. Gracy: I think this is an outstanding idea that you have to put this program together. I think it is obviously more useful and interesting in retrospect. Getting peoples views and looking at it 5 years from now, and seeing how correct or incorrect someone was, gives people ahead of time a little clue as to where you go and how wrong we have been. We haven't gone on a straight shot and have tacked back and forth, and had to change our tactics because the wind blows from different directions and times when the wind doesn't blow. You can get frustrated when you sit and the wind

isn't blowing. When the wind does start to blow you have to figure out how to catch the best wind, and I think we have done that pretty well. I mean that for the institution, faculty, and for everyone. I look forward to where we are going and I think we have a good crew on board.

Blake Hailey: I think definitely the remark you made here today will be useful in years to come. I do appreciate you taking time out of your extremely busy schedule. I know that you have a meeting relatively shortly, that you have to get. I do appreciate the time you took to talk to us and hope we can do it again sometime Dr. Gracy. You have lived up to everything I had heard about you in this time I spent with you. I want to thank you.

Dr. Gracy: It has been my pleasure.

Blake Hailey: We will wrap this up and have a good afternoon.

Dr. Gracy: Thanks very much and you too.