

Dr. William A. Cochrane, March 18, 1926 - October 6, 2017

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William A. Cochrane, MD. His career was a Canadian dream.

Dr. W.A. Cochrane was the last surviving dean from the four medical schools recommended by the Hall Royal Commission in 1964. His passing on October 6, 2017 ended an era in Canadian academic medicine not to be repeated. MD enrollment doubled from 1966-70 to 1,600 per year, increasing MDs particularly from Calgary and Hamilton.

The federal governments of the time are to be credited for bringing Canada temporarily closer to MD self-sufficiency. It recognized a national response was needed to meet the post WWII baby boom, a marked increase in immigration, the pending universal medicare program and the gradual doubling of the doctor-patient ratio of 1:500.

Two of the new deans (Dr. W.A. Cochrane and Dr. J. Evans) realized it was an opportunity to implement a unique curriculum. Both chose to design a three-year, continuously-taught, body-system based program that included a full clinical clerkship year. Their successors have sustained that approach. Since then all medical schools have developed much more clinically orientated curricula. Despite this trend, these two precedent-setting programs remain the only three-year ones in North America – an approach much favored by the programs' own graduates.

Dr. Cochrane's own career was a Canadian dream. The son of a Bernardo orphan who came to Canada in 1908, Dr. Cochrane was inspired by his family physician, so in 1944 he chose medicine over the navy. A natural athlete, he received the "athletic stick" award in his last year for exceptional athletic and academic performance.

Dr. Cochrane chose pediatrics because he loved working with families and their sick kids. His research focus was on non-diabetic hypoglycemia. He discovered that the protein leucine caused one form of it. His Cochrane test diagnosed it.

At 31, and already a widely published clinical researcher, Dr. Cochrane accepted a pediatric GFT¹ post at Dalhousie. He would later rise to become the Children's Hospital pediatrician in chief and the professor and head of pediatrics.

Foreseeing the need to expand pediatric services in Halifax, Dr. Cochrane proposed building an entirely new referral hospital. The central figure in funding became Dorothy Killam, the widow of Nova Scotia magnate Izaak Walton Killam. Dr. Cochrane persuaded her to pledge \$1 million toward the proposed hospital. It became \$3 million after a site visit. When she died shortly afterwards, her estate donated \$8 million of the \$24 million cost.

Four months before the release of the Hall Report in June 1964, Dr. Cochrane joined the faculty's medical curriculum review committee. It would be a career-changing decision.

The committee visited the original system-based curriculum at Cleveland's Western Reserve medical school. They studied several schools that had accelerated three-year programs for exceptional students. Dr. Cochrane convinced the committee to recommend conversion of the Dalhousie program to a system-based one. Before being released in 1966, the proposal was critiqued by Drs. John Evans and Alan Gilbert and the curriculum evaluation guru, Dr. George Miller.

Not accepted, Dr. Cochrane began looking elsewhere to implement it – to the University of Toronto, University of Manitoba, and the US. The only Canadian opportunity left was at the University of Calgary. The founding deanship came open in the fall of 1966. He was approached to apply for it. >



- When local academic and health leaders, the health minister and the premier were willing to be flexible – so long as the program had a family physician focus – Dr. Cochrane accepted the deanship early in Canada's centennial year.

His timing was not propitious. Universities were under intense pressure to expand their capital and operating budgets to face the student explosion. New faculties were being postponed or delayed. Growing at up to 25% per year, the U of C was particularly affected. To survive, the Calgary medical program relied heavily on its few staff and the substantial contributions of the medical community. It became a Calgary "Can Do" success story.

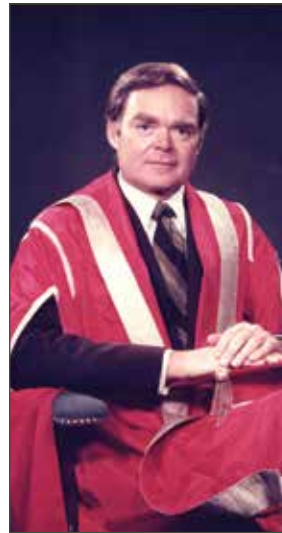
Dr. William A. Cochrane was named one of Alberta's 100 doctors of the century and became the second Calgary physician to be inducted into the Canadian Medical Hall of Fame.

Simultaneously, Dr. Cochrane began planning his unique curriculum, carefully selecting a new faculty to implement it, designing the medical school around it, and belatedly securing funding to operate it. The school was completed \$5 million under budget and two years early, using an innovative project management approach. The surplus covered the renovation of the warehoused research space. Development of the whole Foothills site totaled \$56 million.

Convocation of the first class coincided with the opening ceremonies in June 1973. The faculty was ecstatic when the first class earned above average marks on their LMCCs. It confirmed that a curriculum based on didactic presentations – small group teaching – and self-learning could be successful. The McMaster problem-based learning approach was only partially followed. The curriculum remained essentially unaltered until 1992, when it was modified to focus more on the 122 most common diagnoses. As research groups formed, they too were organized by body system, an approach that was well ahead of its time.

Dr. Cochrane resigned as dean after the convocation, when Premier Peter Lougheed offered him the deputy minister of health position. He wanted to learn how governments made decisions.

The next year he was asked to advise the U of C president selection committee. They offered him the position. With the premier's agreement, Dr. Cochrane accepted it and became one of eight Canadian medical doctors who went on to become the president of a university. As president, he weathered the last of the government's fiscal curtailment and began the innovative faculties of law and humanities.



With the Heritage Trust Fund approved in 1976, followed by early discussions on the formation of the Alberta Heritage Foundation for Medical Research, Dr. Cochrane anticipated research dollars would flow to the two medical faculties in unprecedented amounts. They would after 1980.

Connaught Laboratories began courting Dr. Cochrane to accept their CEO position. He did in 1978. It was risky because the vaccine maker was losing money. His strategy was to sell its patent for making insulin, concentrate on genetic engineering, focus on producing high volume vaccines for flu and polio, and expand into the US. Connaught was sold for almost \$1 billion in 1989.

Returning to Calgary, he incorporated W.A. Cochrane and Associates as a business and health care consulting firm. Joining many boards, he chaired several including the Banff Centre. He spoke articulately of the need for Canada to invest in biotechnology as a path into the future.

In retirement, Dr. Cochrane continued to support community projects and made many trips to China to foster pediatric programs there.

Widely known and respected, Dr. Cochrane was made the Medicine Chief of the Stoney Band, awarded two LLDs, a DSc and an Order of Canada.² He was named one of Alberta's 100 doctors of the century and became the second Calgary physician to be inducted into the Canadian Medical Hall of Fame.

Six thousand U of C medical doctors owe a debt of gratitude to Dr. Cochrane for his leadership. As he often said:

*Look not mournfully at the past
It comes not back again;
Wisely improve the present – it is thine;
Go forth to meet the shadowy future
Without fear, and with a joyful heart. (Longfellow)*

References available upon request. ■

