

Chronicles

Newsletter of the UCSD Emeriti Association

Volume II, No. 2

November 2002

President's Letter

—by Sandy Lakoff

“*Abi gezunt*” (“as long as you’re healthy”)—the standard Yiddish expression of hope and consolation—



has never been more apt. It’s not that illness is more likely now, but that good treatment is harder to get and afford. People over 50, for example, are told they should have a colonoscopy every five years. Good luck getting your HMO to schedule even one such exam in less than a year’s time. Overall, long waits for doctors’ appointments are common and costs are rising steeply for everything from hospital services to prescription drugs.

New Dimensions, the excellent UC newsletter for annuitants, reports that after a decade in which health care costs rose only modestly, they are now going up steeply—just as a weakening economy makes employers unwilling to absorb the increases. The shock is being felt even by CalPERS, which spends \$1.58 billion to cover 1.2 mil-

lion (non-UC) state employees and can therefore use its market clout to get premiums well below the national average. This time, it has had to agree to contracts with average premium increases of 25%. And the end is not yet in sight: the CalPERS bill for health coverage is expected to double over the next three years.

The UC system faces a similar challenge, as we learned October 7 at the very informative Senior Health Care Symposium that **Marjorie Caserio** was instrumental in organizing at the Beckman Center of the National Academies in Irvine. The University too faces a double whammy. Health care costs are rising steeply at the same time as the state is running a \$23 billion deficit and projecting more red ink to come, which inevitably means that the UC budget is being cut back drastically.

Health care costs are rising for many reasons. Longevity is up: There are now 40 million Americans over the age of 65, many more than ever before. And the longer we last, the more vulnerable we are to illness and injury and the more we need hospital care, expensive new drugs, surgery,

REMINDER!

If you have not yet paid your membership dues in the UCSD Emeriti Association for the academic year 2002–2003, you may use the form on the back of this issue to send them in. Dues are \$25/year or \$200 for life membership. See page 8.

and improved diagnostic and therapeutic devices. “The elderly” (that’s us, I’m afraid) make up 13 percent of the population but nearly half of the top five percent of health care users. We also account for over 30% of hospital days used. Drugs now take 20 cents of every dollar spent on health care; from 1999 to 2000 alone, drug expenditures rose 17%. Direct ads to consumers raise costs by encouraging patients to insist on the latest propri-

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Mark Your Calendar!

Emeriti Association Meeting November 13, 4:00-5:00 PM

Davis/Riverside Room, Price Center

Susan R. Peerson

Director of Physical Planning

“Planning the Campus”

The speaker for our second meeting of the year was just recently named director of physical planning for the campus. A summary of her background and qualifications appears at the bottom of page 2.

etary medication rather than older generics: spending on these ads shot up (no pun intended) from \$791 million in 1996 to \$2.5 billion in 2000. And the 41 million uninsured who must resort to Emergency Room care burden hospitals with additional expenses. (The USC Medical Center, for example, treats 200,000 patients a year—most without health insurance.) Administrative costs are much higher in private insurance systems than for Medicare (by a factor of 10-25 to 1). Malpractice premiums also drive up costs and force practitioners, especially in OB/GYN, to close their clinics.

To control costs, the Health Maintenance Organizations (HMOs) and Preferred Provider Organizations (PPOs)—six of which now control 80% of the market in California—use various techniques, including barriers to service, prescription formularies emphasizing generics, rationing by delay, and administrative review. But resistance from doctors and patients has forced them to relax controls, so costs are going up for that reason as well.

The problem has only gotten worse because, except for a few programs, notably Medicare and Medicaid (MediCal in California), our governments, federal and state, have failed to address it comprehensively. Unlike other countries, we do not provide universal coverage; in addition to the uninsured, many have coverage inadequate to their needs, especially in rural areas and among those too poor to afford costly drugs. The effort to add even a modest prescription drug benefit for Medicare recipients fizzled this year. The government's failure is not just the fault of the politicians, however. Though a few states have done better than others, ideological disagreements, dependence on special interest campaign contributions, and public unwillingness to bear the costs via direct taxation or by imposing them on employers have all but paralyzed the political process. The problem is not that we are spending less than other countries. The U.S. spends a higher proportion of our GDP—13.5%—on health care than any other country (Switzerland is second, with about 11%) and is projected to spend 16% by 2010. The difference is that our providers tend to be better paid, our patients demand the latest technology and drugs, our overhead costs are higher, there's more redun-

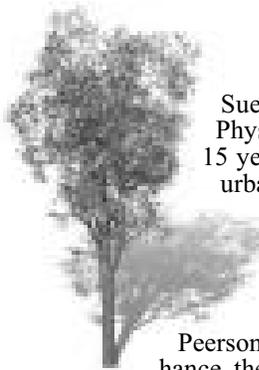
dancy in our provider system, and we don't put enough emphasis on preventive medicine and "wellness" (good nutrition, anti-smoking campaigns, exercise, etc.).

The present crisis may prove a wake-up call, especially now that middle-class voters are feeling the pinch. State pension plans are joining the Washington-based National Coalition on Health Care. Senator **Breaux** of Louisiana is working with Republican colleagues to craft a bill that would provide universal coverage. Even the right-wing Heritage Foundation is preparing a proposal for universal health care—though by using tax credits it would compel continued reliance on high-cost private insurance. Another plan would provide everyone with vouchers that could be used to buy services in a presumably competitive market. My own preference would be for a tax-financed "single payer" system, like Medicare but with better cost controls and no need for supplementary private insurance.

Those of us fortunate to be in the UC system have enjoyed one of the best health coverage arrangements in the country. Our choices are no longer quite as wide-ranging as they once were. In 1990 we could choose among 11 different plans; in the upcoming year, we will have six options, ranging from one that is completely subsidized except for small co-payments, to the relatively costly High Option plan. But that's more than many other employers offer. And we pay much less on average than others do. Na-

tionwide, employees typically pay at least 15% of the medical premium for single coverage and up to 30% of the premium for family coverage. Retirees pay even more, when they are lucky enough to have any coverage. Only 23% of companies with 200 or more employees provide supplementary health care for their retirees on Medicare—down from 50% in 1988. Even with coverage, a typical retiree pays about 60 percent of the cost of an employer-sponsored plan covering expenses not picked up by Medicare. Some employers are eliminating such plans altogether. Others are raising caps on coverage and the proportion of retiree contributions. In the UC system, employees and retirees are eligible for the same benefits and pay only a small fraction of the cost.

This year the Regents have come to our rescue by raising tuition for out-of-state students and earmarking the proceeds for our health benefits. (Faculty salaries, however, will rise by only a measly 1.5%.) With the Regents' help, good bargaining, and budgetary shifting, our dedicated health care administrators think they can maintain the status quo, at least for this year. And we will keep our dental coverage as well. It remains to be seen whether over the next few years the Regents and administrators will find more rabbits to pull from the magical top hat they keep in some U-Hall closet. The moral of the story? Elect politicians serious about improving health care—or else, *Zay gezunt!* ('Stay healthy!')



SUSAN PEERSON

Sue Peerson assumed responsibilities as Director of Physical Planning, effective October 1, 2002. She has over 15 years of physical planning, landscape architecture and urban design experience in both the public and private sectors. Ms. Peerson came to UCSD in 1999 as a Senior Planner and has since overseen the preparation of plans that are guiding the physical development of both the UCSD School of Medicine and the UCSD Medical Center in La Jolla. In addition, Ms. Peerson has been responsible for plans to conserve and enhance the UCSD Park, the campus system of ecologically valuable habitat areas and eucalyptus groves. As Director, Ms. Peerson's responsibilities include administration of the campus land use plans, the selection of sites for new buildings, and environmental impact analyses.

Ms. Peerson, earned a Master's in Landscape Architecture at the University of Pennsylvania and a Bachelor of Science in City and Regional Planning from California Polytechnic State University, San Luis Obispo.

Report of Symposium on Senior Health Care

—by Marjorie Caserio



Three summers ago, the idea of a symposium devoted to health care issues affecting UC annuitants became a proposal to the Council of UC Emeriti Associations (CUCEA) to organize such an event. Former CUCEA president **Julian Feldman** (UCI) deserves credit for the idea and for convincing CUCEA, and subsequently the Council of UC Retiree Associations (CUCRA) and the UCOP Health Benefits Administration, to support it. This

was not an easy sell for a number of reasons. Who will pay for it and what purpose will it serve are obvious questions. But a concern that seemed most likely to derail the plan was the possibility of backlash. That is, a symposium devoted only to health and welfare issues of seniors who, as a group, are no longer active members of UC yet require more from the health care system than active members, could be seen as self-serving and ultimately work to the group's disadvantage. Despite this caveat, CUCEA went ahead and won the support of the Administration (Associate VP **Judy Boyette** in particular) and CUCRA to proceed.

Why, you may ask, should there be a symposium on senior health care? This question is easier to answer than it was two years ago. The economy has a lot to do with it. Rising medical costs, recent losses in the Regents' retirement portfolio, losses in personal IRAs, concerns with Medicare, failure to provide prescription drug coverage—all have hit heavily on the retirement community and are of increasing concern to those approaching retirement. A more subtle reason, and one which was compelling from the outset, relates to the particular needs of seniors as they age and face illness in themselves or their partners. How well do medical plans meet their health needs? If you agree that these are reasons enough to justify a symposium, the next question is how it is possible to address issues of such breadth and depth in any meaningful way in a one-day symposium, and what would such an event hope to achieve. In retrospect, everyone involved has silently acknowledged that we did not have very clear answers to these questions nor a good "business plan" but trusted that they would emerge as the program developed. I did not fully realize this when I agreed to be the Program Chair, but that is another story. In spite of stumbling into an area quite beyond my expertise, I am happy to say that the symposium (the first of its kind) was a success by any measure. The venue was marvelous (Beckman Center, National Academy of Sciences at Irvine); the day was sunny and warm (Monday, October 7, 2002); everything went according to plan (thanks to the outstanding efforts of **David Sheldon**, Emeritus VC at UCSB, who served as the Arrangements Chair); the audience was receptive; and, most importantly, the speakers were excellent.

There were two parts to the program. The first concerned the topic *Healthy Aging: Issues Affecting Health Care for Seniors*. The second covered some aspects of *Health Care Policy, Medicare, Health Economics, and the Status and Future of UC Health Plans*. Regarding individual presentations, **Lester Breslow** (Emeritus, Public Health, UCLA) commenced by reminding everyone that with the control of disease comes increased longevity and the need to match this with reasonable health habits. He stressed the importance of "health" plans as well as "medical" plans. **Jay Luxenberg** (Geriatrician, UCSF) spoke about his experiences with centenarians, some of whom would tell him that they achieved longevity in spite of their health habits, but all of whom shared a dread of losing mental ability, and expressed the need to retain their individuality and respect from younger people. Loneliness is a great burden. Jay made one point that we can all relate to, namely, the centenarian's self-perception is that of a much younger person. **John Daly** (Geriatrician, UCSD) reinforced these sentiments. The population of 85+ years is the fastest growing age group in the US, and the familiar adage "*the older the violin the sweeter the music*" is a reminder to make a success of aging by starting young. He stated that the maximum uptake of oxygen (and thereby the maximum energy output) occurs at age 25 and decreases continuously as we age. How interesting it is that the body changes with age but we don't.

Andrea Steiner (UCSC) gave an insightful presentation on how society grapples with aging, or *ageism*. She reflected in a sensitive way on aspects of health and aging that we seldom question. For example, society accepts that health risks are borne by the individual; this discounts mysterious attributes and external factors on individual health. Society thinks about aging as involving a disproportionate share of health services; a polarity between neglect and "medicalization" (who wants to be medicalized?); a polarity between autonomy and dependency (interdependency is natural at all ages); an admonition to hide your age or act your age. Finally, the unrecognized burden on caregivers, their unpaid, undocumented service is something of a national disgrace. **Enid Rockwell** (Psychiatry, UCSD) also identified caregiver stress as an unappreciated problem. She also emphasized the impact of stress on individuals in late life. The greatest obstacles are the loss of identity on retirement, loss of self-esteem, and social isolation. Treating acute anxiety requires hourlong interviews, medication, exercise, nutrition, and group therapy.

The session concluded with an informative talk by **Julie Schoen** about surviving the Medicare system. Julie is legal counsel to HICAP (which stands for Health Insurance Counseling and Advocacy Program). She made it clear that many persons misunderstand what Medicare will or will not pay for. Survival tips on the Medicare website are helpful (www.medicare.gov), or call HICAP 800-434-0222, or Soc. Sec. Adm. 800-772-1213.

[Continued on p.5]

Reminiscences: Early UCSD History

This article and the next continue the series of personal histories by early faculty with insiders' perspectives on this campus.

Melvin Voigt and the Development of the Library

—by Andrew Wright

When I visited La Jolla in December 1962, I was dazzled by the intellectual level and the human quality of the stars to whom I was introduced. **Jon Singer** (who met my train at the San Diego station), **David Bonner**, **Stanley Mills**, **Gifford Ewing**, **Martin Kamen**, and of course the Chancellor, **Herb York**, who walked me along the cliffs above Black's Beach (then unfrequented) and asked me if I would consider coming to the campus to found a literature department. I demurred because I knew I had no talent for empire building; but I suggested that he get in touch with **Roy Harvey Pearce** (the rest, so to speak, is history—excellent history, too). But there was another reason for my hesitation: I was a scholar and there were no books—at least none that I could read. To be sure there were some treatises on biology and chemistry in some rooms at SIO, but there was no library. Oh, not to worry, said Herb: he would

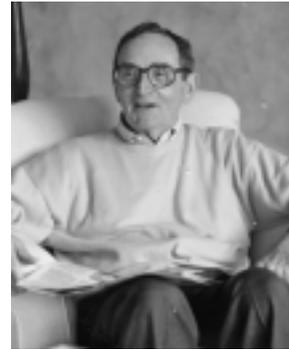


send me to the British Museum as often and as much as I'd like (and he did). Still, a scholar without a library? Then I met **Melvin Voigt**, who turned me around. He was not a charismatic figure, not by any means; he was soft-spoken but obviously had iron in his

soul and brains in his head. **Roger Revelle**, who said he wanted San Diego to become the Boston of the west, sensing Mel's quality, plucked him out of Kansas (many years later he said that Mel was the best appointment he had ever made).

For a start, Mel was well trained in science and he could add and subtract. He knew how to penetrate the miasmatic directives that arrived all too often from Berkeley (in whose library he had worked for a number of years). In his quiet way he could resist the obfuscating blandishments from on high. But that was only the beginning: he had a grand vision, together with the practical sense of how to make his dreams come true. In this endeavor he was strongly supported by **Clark Kerr**, and subsequently by **Herb York** and **John Galbraith** (who persuaded the Bishop of San Diego to introduce a prayer for the development of the library at a commencement ceremony).

Mel was well-liked by the Board of Regents because he proposed a revolutionary money-saving scheme for buying and cataloging books for the three new campuses—San Diego, Santa Cruz, and Irvine. The New Campuses Program, as it was called, was a fine idea—and it saved some \$400,000—but what books and how many? Mel's idea was to establish three collections of 75 thousand volumes each, based on a list that he would cause to be compiled: there were no precedents for starting from scratch. It was true that Harvard and Michigan, for instance, had small libraries containing core books, but they had come



into being as recipients of the overflow from the main libraries in Cambridge and Ann Arbor. Mel could

do better, and his list, *Books for College Libraries*, established the California collections. This publication made Mel famous in the library world, and it has been widely—internationally—influential over the years.

But that was only the beginning. In his years as University Librarian Mel vigorously pursued the goal of establishing a first-class collection. He had to compete with Berkeley and UCLA, which liked to style themselves as the “Flagship campuses.” He had to suffer the gubernatorial strictures of **Ronald Reagan** (“Pull your belts in a notch or two”). He won his battles and stayed friends with those who would keep UCSD in its place as a small offshoot of UCLA. For a number of years the library's acquisitions rate was 100 thousand volumes annually, a staggering achievement

Also, he reached out to the community, establishing connections with San Diego State, the University of San Diego, and the state and county libraries. Mel was also a cultivated man with literary tastes. The *Hill Collection of Pacific Voyages* came about because **Ken Hill** was well impressed by Mel. Likewise the *Mandeville Department of Special Collections* was established as **Ernest Mandeville**, a local newspaper editor and community benefactor, came to admire Mel's vision.

Of course Mel was not alone. **Helen Raitt** and **Margaret Landon** were tireless in their efforts to bring book lovers into the picture. They persuaded Mel to start the **Friends of the Library** when there weren't many books to be friends toward. Nowadays the UCSD Friends is the largest such organization in America, perhaps the world. No wonder then that the Department of Special Collections can now boast the *America Castro Collection of Spanish Literature and History*, the *Southworth Collection of Spanish Civil War Documents*, the *Archive for New Poetry*, and the *Baja California Collection*—all besides those already mentioned, and many more.

There remains the triumphant library itself—the building. While it would probably be cruel to suggest

that the library is the only architecturally interesting building at UCSD, it is obviously the outstanding edifice, a fact well attested in the multiplication of representational logos on official letterheads and other documents emanating from our campus. I do not know whether Mel chose **William Pereira** as its designer, but the choice was inspired; and Mel lent himself to the enterprise with his customary zest. Finding that Pereira had never designed a library in the course of a long and distinguished career, he set about educating him on the subject. Moreover, he and **Leonard Newmark** toured the eastern seaboard examining libraries that had been built in recent years, and brought back important suggestions to Pereira. Then, after the plans had been approved both here and in Berkeley, Mel watched over the construction

phase and almost brought it to a halt when an inexperienced project architect, manifestly out of his depth, was sent down from Pereira's firm. Mel went to Los Angeles and had words with Pereira, who thenceforth saw to the supervision himself.

When Mel retired in 1976 he kept a carrel in the library so that he could pursue his researches and continue his editorship of two professional journals. But he never hovered in the vicinity of his successor's office, nor offered suggestions to her or anyone else about the stewardship of the library. Such was his modesty, not the least of his winning characteristics. And if San Diego has not yet become the Boston of the west, it is certainly a lot more interesting than it was in 1962, nor can it be denied that Mel Voigt is one of the trail blazers in this transformation.

[*Caserio* from p. 3]

Tom Rice (Public Health, UCLA) opened the afternoon session with a talk on *Medicare Reform*. He spoke forcefully on what a good insurance program should be and, sadly, how far removed Medicare is from this ideal. Medicare was originally conceived as a program to protect the individual from going broke by getting sick, but this changed in 1989 when Congress repealed Medicare catastrophic coverage. **Tom Buchmueller** (Graduate School of Management, UCI) continued with this theme, particularly as Medicare reform initiatives impact on retirees' choice of health plans. **Richard Kronick** (Community and Preventive Medicine, UCSD) addressed the overall picture of health economics, especially the future of employer-based health insurance, which he described as "dismal". Throughout the 1990s, cost and tax benefits of group health insurance sustained employer-based health insurance plans. Consequently, the number of uninsured persons remained fairly flat in the 1990s. This circumstance is likely to change because rapidly escalating health care costs are being

passed on to employers. **Barbara Adachi**, who is health plan consultant to UC from Deloitte and Touche, echoed this. She described the current health care environment and the source of the escalating costs. The market place is changing; there is an emergence of consumerism and cost shifting. This set the stage for **Michele French** (UCOP) who gave the final presentation on *The Status and Future of UC Medical Plans*. She spoke briefly about the volatility of the health care market, which previous speakers also addressed, as well as the impact of state budget cuts. Their magnitude in 2002-03 is ill-defined because it is an election year, but the budgetary crisis is expected to continue. UC has rebid some of its medical plans (not the HMO plans) and has replaced Aetna (formerly Prudential) with a 3-tier plan from Blue Cross. A High Option plan remains, and the monthly payments for retirees on Medicare are within reason. A prescription drug program will also be offered. The details are in the documents mailed to each employee and annuitant in preparation for the November open enrollment period. Michele urged everyone to read the information carefully and thoroughly before choosing a medical plan. She

concluded by saying that UC has made every effort to keep the costs to a minimum, at least for this year. The Regents helped materially by approving an increase in out-of-state tuition, the proceeds to be used to defray increased medical plan costs.

Yes, the symposium was a success. There was a lot of substance to it and a lot to think about. In one sense it achieved the objective of drawing attention to health care issues for an aging society. While seniors inevitably consume more health care dollars, active persons also face the prospect of aging; and we all hope to do so in good health, with grace, community support, and without going broke.

The cost of the symposium was largely born by UCOP, Human Resources and Benefits, at the request of Associate VP Judy Boyette. Her support has been invaluable, both financially and philosophically. The event was also taped for showing on UCTV, which means that it can reach a wider audience than was possible on October 7. The next step will be to assess the symposium and the recommendations that can be made from its findings. The outcome of this analysis is likely to determine whether related symposia will be considered in future years.

The Creation of the Physics Department

—by George Feher

It all started 43 years ago (1959), when **Roger Revelle**'s dream of a UC campus at La Jolla took concrete shape and became a reality. He hired **Keith Brueckner** to chair and shape the Physics Department. Solid state physics (now called "condensed matter physics") seems to have been high on Keith and Roger's list of priorities and five appointments were made in that field in the first year. At the time, I held a joint appointment between Columbia University and Bell Labs in an effort to decide between industry (I had joined Bell Labs in 1954) and academia. Keith came to Bell Labs where he tried to recruit two experimentalists, **Bernd T. Matthias** and myself, as well as a theorist, **Harry Suhl**. In addition, he recruited **Walter Kohn**, a theorist at the Carnegie Mellon Institute. In the spring of 1960, Roger Revelle invited the three of us from Bell Labs to come separately for a visit to La Jolla.

Roger was a charismatic, charming visionary who enthusiastically painted a rosy picture of a new university that he wanted to create. He envisioned the university as having only a graduate school with a light teaching load for the faculty and with emphasis on research in the exact sciences: physics, chemistry, and biology. This was very appealing to us. He had other unorthodox ideas. For example, he opposed the establishment of an engineering department. He had come to the conclusion that most advances in engineering, like the maser, the laser, and the transistor, did not come from engineers but from people working in the basic sciences. Roger was also an excellent, if not entirely scrupulous, salesman. For instance, he showed me a beautiful lot in the Scripps Estate with a 180-degree view of the ocean that I could get if I came. We later

found out that he offered the same lot to all of us. None of us of course got it. After all, it had to be kept for further recruitment purposes. Roger clearly was "the end justifies the means" kind of a person. At any rate, it sounded exciting to us to be on the ground floor in planning and of building a new campus where one's ideas can still



make a difference. My colleagues at Columbia thought I was crazy to forego a professorship at Columbia and move to La Jolla. They and others thought it would be impossible to build a first rate university in an idyllic playground like La Jolla. They were, of course, wrong. Scientists carry their compulsions, neuroses, and talents with them and are to first order unaffected by the environment.

There was one concern that the three recruits from Bell Labs had, and that was anti-Semitism. We heard that real estate brokers had an unwritten agreement among themselves not to sell lots or property to Jews (as all three of us were). We brought this up with Roger who assured us that this was no longer the case. He told us about a meeting he had with the La Jolla Chamber of Commerce in which he gave them a choice between a university and abolition of prejudices or no university. They opted for the establishment of a university. Although it seems a bit bizarre that one can abolish bigotry by decree, I am happy to say that, outwardly at least, we encountered no discrimination.

All three of us from Bell Labs accepted the offer. I came in September 1960, Harry a few months later. Bernd in his typical manner reneged on his promise to come in 1960 and declared: "During the first year there will be too many administrative chores. I will come a year later." And he did. I had one more problem that I had to clear with Roger. My intention was to switch to biophysics, a field that had not been contemplated to be pursued at the beginning. We reached an agreement that I would help build up experimental solid state physics and then switch later to biophysics. To do this, I was given a green light to bring and train a junior faculty member. I picked **Shelly Shultz**, a promising recent graduate from Columbia University. Although Shelly's thesis was in molecular beams, he quickly became an expert solid state physicist. It amazes me now how easily appointments were made in those days compared to the long and arduous procedures of today.

Another difference between then and now was the ease with which money could be obtained. Not only did the granting agencies approach you to apply for grants, start up money was also very generously available. In addition, we asked for and were granted a subsidized machine shop and electronic shop for the Physics Department. This was a luxury unheard of in the other campuses. It has served us well to this day. Shelly was in charge of the machine shop and I of the electronic shop. During the second year (1961) **Roger Isaacson** joined our group as a graduate student and an electronic technician, and I am happy to say that after 41 years he is still with us and is an indispensable member of our research group.

So far I've only talked about the solid state physics group. I want to

describe briefly the rest of the faculty and activities of the Physics Department. In the first year (1960/61), the following additional appointments were made: theoretical nuclear physics and elementary particle physics were covered by **Keith Brueckner** and **Maria G. Mayer** and two junior appointments, **David Wong** and **Bill Frazier**; experimental particle physics by **Oreste Piccioni** and by a junior appointment, **Bob Swanson**; and plasma physics by **Marshall Rosenbluth**. In addition, two faculty members who were on the staff of the Scripps Institution of Oceanography joined the department. They were **Leonard Lieberman**, an experimental physicist/oceanographer and **Carl Eckart**, a mathematical physicist.

The first year we had about 20 graduate students and covered all basic first year courses in physics. During the second year (1961) Keith Brueckner left for a position in Washington D.C. and **Walter Kohn** became our chairman. In the second year, we were joined by **Norman Rostoker** (plasma physics), **Meir Wager** (experimental/theoretical solid state physics), **Carl McIlwain** (space physics), **Normal Kroll** (theoretical physics) and **Nguyen Xuong** (experimental particle physics). The number of students during the second year increased to about 35. In the third year two astrophysicists, **Margaret** and **Geoffrey Burbidge**, joined us, as well as **Larry Peterson** (space physics), **Don Fredkin** (theoretical solid state physics), **John Goodkind** (experimental low temperature physics), **Manny Rotenberg** (mathematical physics) and **Francis Halpern** (theoretical physics). By this time we had a well-rounded physics department, except for biophysics, the development of which I shall describe separately.

As I mentioned at the beginning, Roger Revelle agreed that I would be given a free hand to develop biophysics after an experimental program in solid state physics was established. However, when the question of sup-

port for biophysics came up in the mid-sixties, there were some objections raised, and several heated discussions at faculty meetings ensued. This is not the place to describe in detail the arguments pro and con. The most vocal opponent to biophysics was Oreste Piccioni, who felt that biophysics is not “real” physics. “It is bad enough to have solid state physics, but do we need now also living state physics?” On the other hand, Maria Mayer was very supportive of biophysics and in the end a bare majority of the department was in favor of pursuing biophysics. Consequently, in 1967-68 I took a sabbatical in the biology department at MIT, and upon my return devoted myself to developing a biophysics program. Skipping a few decades, I am happy to say that the department is now very supportive of biophysics and we now have 7 faculty members working in various areas of the field.

Let me return again to the early years. In parallel with the Physics Department, the two other basic science departments, Chemistry and Biology, were developed under the chairmanships of **James Arnold** and **David Bonner**, respectively. There were close interactions among the three departments and we discussed together the future directions of the campus. One of them was the establishment of a medical school, with David Bonner playing a leading role in these discussions. We envisaged a medical school focused on research and the basic sciences, with the clinical part playing a minor role. Alas, it was not to be. The untimely death of David Bonner, as well as the fact that Roger Revelle, who everybody expected would be nominated Chancellor at UCSD, was passed over by the Regents contributed to the dissipation of many of our unorthodox ideas. **Herb York**, a physicist and high ranking official at the Pentagon, was appointed Chancellor. Herb, clearly a very able administrator, but less of a dreamer than Roger, opposed many of our original ideas, and he ultimately prevailed. The medical school is gov-

erned by clinicians, UCSD has not remained a graduate school (as a matter of fact UCSD’s ratio of graduate students to undergraduates is smaller than that of four other UC campuses), and Roger’s model of Cal Tech or the Rockefeller Institute was replaced by a model closer to the Berkeley campus. *Sic transit gloria!*

Before continuing to describe the inexorable path of UCSD towards a “standard” type of campus, allow me to indulge in a bit of nostalgia. When I look back to those early days, a warm feeling overcomes me. It was the combination of excitement and hope coupled with the pleasant ambiance and congenial camaraderie that prevailed. We were housed at SIO (Sverdrup Hall), with beautiful surroundings next to the beach. There were so few of us in the three departments that we all knew each other. We fully mingled with the graduate students, ate lunch together on the lawn or on the beach, and many of us swam and surfed at noon. Recently a visitor came by whom I hadn’t seen for 40 years. He was very disappointed that I no longer keep a surfboard in my office. It apparently had greatly impressed him at the time. Occasionally a student would come to class in a bathing suit or scantily dressed. We didn’t mind it, except perhaps for Walter Kohn, who was a bit more formal than most of us. But he couldn’t tell the student off lest he be called a stuffy professor. He finally solved this problem by telling the students that he didn’t mind their behavior but did not want to see them acquire bad habits because some stuffy professor might take offense.

Another episode that showed the local culinary level of sophistication at the time comes to mind. We brought a Jewish deli expert from New York to provide the food for the outdoor cafeteria. After a while he complained that the bagels on the menu didn’t sell. The reason was simple; most people at the time did not know what a bagel was. We suggested that he hang a bagel

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[Fehér from p. 7]

on a string with a big sign “THIS IS A BAGEL.” It solved the problem.

In 1963, the development of the upper campus was started and in 1964 we all moved up, and the first class of undergraduate students arrived. Many other departments in the humanities were established, an engineering school and medical school were started, and the campus is continuously expanding. It is projected that UCSD will become the largest campus in the UC system. If size is a measure of success, we are no doubt succeeding. Personally, I don't think that size is the right yardstick, but quality is. So far, quality has been maintained, and I hope that it will continue to be in the future.

In summary, although our original dream of creating an extraordinary and unique campus has not been quite realized, UCSD is a first rate institution, and I am glad to have had a hand in shaping it and to continue to be part of it.

[CUT HERE AND MAIL]



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