Historical Resources Center: Heritage Services

Research Medical Library THE UNIVERSITY OF TEXAS MDAnderson Cancer Center Making Cancer History

John Mendelsohn, MD, tells a story about the Leading the Institution

Dr. Mendelsohn came to MD Anderson in 2011 to serve as the institution's third president. In an interview conducted in 2012, he talks about the vision of growth he developed on his arrival and the impressive growth achieved as a result of his approach. Dr. Mendelsohn stepped down as president in 2011. He passed away in 2019



A Vision for Explosive Growth in the 1990s

Why did we want to grow, especially at a time when we'd been cutting back? One, as the public began to understand more and more about the complexity of cancer care, when a person learned that they had cancer they would want access to an outstanding facility with experience. Between the east coast and the west coast, there were very few institutions that could provide that. We happened to be ranked the number two cancer hospital in the country, so people wanted to come. The second reason is that we had at least 100 legitimate research programs, and there were a lot of new ideas about what we could do in our research. Each research program wanted to grow. We wanted to do more breast cancer research. We wanted to do more research on genomics. We wanted to do more research on radiation therapy with new modalities.

The way we grew has to do with what I learned talking with the Board of Visitors and lengthy discussions with Leon Leach, who I hired as my executive vice-president. I would provide expertise in academics and research and patient care and he would provide expertise in business and the administration of a health institution, and we would work together. We decided that for MD Anderson to achieve its mission and its vision, growth had to be in parallel. We had four mission areas—clinical care, research, education, and prevention. If we were going to grow in our patient care capabilities 50 percent and build the facilities and hire the people, if we were going to be able to give the same quality of research-driven care, and provide the clinical trials for that increased number of patients, we had to grow the research program 50 percent. That was thought to be a huge, big, hairy goal. We actually achieved more than 100 percent in less than a decade. It was important to grow the education program 50 percent and the prevention program. So immediately we're designing a growth strategy that encompasses the missions of MD Anderson, which is a little different than saying, "I'm going to pick five areas and grow in those." For what I saw in 1996, I thought this was the right way to grow MD Anderson.

After 10 years we more than doubled the number of patients. We more than doubled the number of faculty. We tripled the number of trainees. We tripled the number of employees. We actually ended up quadrupling the amount of space. We did it very quickly, first of all, by the faculty being excited and anxious to do this, and then by doing some simple things to improve efficiencies and by helping to streamline the clinical research programs so that we essentially doubled the number of patients on clinical trials.

About This Content

This interview clip was taken from an in-depth interview conducted for the Making Cancer History Voices Oral History Project. This ongoing project currently contains almost 500 interview hours with MD Anderson institution builders.

The transcript has been edited from the original.

The content is available for public use.

Interview link: http://mdanderson.libguides.com/MendelsohnJ

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