

Interviewee: Bransford, Paris

Interview: April 17, 2007

**UNIVERSITY OF HOUSTON ORAL HISTORY OF HOUSTON PROJECT
AND
THE AFRICAN AMERICAN PHYSICIANS OF THE 20TH CENTURY HOUSTON
PROJECT**

Interview with: Dr. Paris Bransford

Interviewed by: Ramona Hopkins

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Transcribed by: Suzanne Mascola

RH: Well, today's date is April 17, 2007. I am Ramona Hopkins. I am with the University of Houston's Center for Public History. I am talking to Dr. Paris Bransford about his experience as an African-American doctor in Houston for the Houston Medical Forum Black Doctors Project. Are you ready to get started?

PB: Ready.

RH: All right. Well, the first question I have is just about your background. Where did you grow up? When were you born?

PB: When was I born?

RH: Yes.

PB: Now you are getting nosy, aren't you?

RH: Yes.

PB: I grew up in Huntsville, Alabama and I went to Horton School which was a little school given to the blacks, by my Uncles property because he had . . . And that little school was a two room school with a big stove in the middle and that is where I started my schooling. And I was in the first grade, they skipped me. They skipped me from the first to the second grade with my sister. So, I became the biggest . . . but I didn't realize how fortunate that move was because later on in life, I decided to quit school in order to work on the farm and my brother in the Navy and by me skipping a year, that left me still with my age group once I got into high school. What else do you want to know about me?

RH: Well, where did you end up going to school – at college and then medical school?

PB: I went to college at Tennessee State University after I got out of the service. I got out of the Air Force in 1953. I went in in 1950 and got out in 1953. I was stationed out at Travis Air Force base out in California the whole time. Then, I came to Tennessee State and finished that in 1956; 1953 to 1956 – 3 years. From there, then I went to work for the government in the missile program. My major was chemistry. I got my bachelors in physics and biology. And I went to work for the government . . . in the missile program, the Jupiter Series. Have you heard of them?

RH: I don't believe I have, no. Sorry!

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PB: That was our first missile we put in space. I worked on the guidance system. So, I was definitely a missile geek. I loved it. And after that, I went to med school. Actually I applied to med school in about 1954 or 1955 but I realized I didn't have the money to go to med school so I had to work. Then, after I worked about 1-1/2 years, then I reapplied to med school and was accepted at Meharry Medical College in Nashville, Tennessee. What else do you want to know?

RH: Well, just a little bit more about like where did you end up doing the residency?

PB: Well, when I finished med school, I went to RJ Reynolds in North Carolina to do my residency in surgery and I stayed there until about 1956 or 1957. Then I came back and went into practice in Fayetteville, Tennessee and I practiced there for 3 years with an older physician – Dr. Donaldson. I didn't like it. Then, a bunch of my friends, they were in Houston. They asked me to come over here and look, so I came and I brought my family, they got to Houston and Houston got them.

RH: Oh, O.K.

PB: So, I had no choice but to just . . .

RH: So, your family just kind of liked it so you decided to stay? O.K. So, your specialty was surgery?

PB: Yes.

RH: And what year did you actually graduate from Meharry?

PB: You already asked that.

RH: Did I? I'm sorry.

PB: I can't remember. The 10th day of June in the year of our Lord, 1963.

RH: What encouraged you to want to be a doctor? Why did you decide to become a doctor?

PB: Well, that is a long story. Since I was the only one in the family that passed high school, I had no one to look to because of that so I wanted to go to med school because of a friend of mine in Huntsville by the name of Dr. Drake. He was the type of doctor he knew everybody and everybody knew Dr. Drake. He was a wonderful person. And I sort of wanted to go because he was a doctor. I remember walking from home one rainy Monday morning down at my grandfather's house to catch the school bus. So, sitting down . . . to write to the medical school and ask them to please send information about on how to be a doctor. I wrote to Washington, D.C., Howard University. In about 6 weeks, I got a catalog and I kept that catalog with me through the service the whole time I was there I kept reading it and reading it. So, when I got out, I knew exactly what I had to

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take and what I wanted to do. And one of the things they outlined was science courses that you needed to get in med school. So, when I got ready to come home from Travis Air Force Base in California, I wrote to Tennessee State and said please admit me to your school or something similar to that. I sent them my high school diploma, mailed it to Tennessee State and they wrote me a letter back saying, "Come on to State, we've got a place for you." And I remember when I handed it to them they said Paris it is too late to get into medical school . . . because the classes were already filling up. I said, "I'm going to be in somebody's school come September," and I was. I went home and put down my GI bag, left for Tennessee State the next morning. That is where I stayed for 3 years until I finished.

RH: And then you went and did your residency in North Carolina?

PB: At Katie B. Reynolds Hospital in Winston-Salem, North Carolina and did my residency in surgery at Kate Bittines Reynolds.

RH: So, you had that catalog to kind of help keep you focused on what you needed to take?

PB: Oh, yes. It let me know what I had to do, the courses I had to take in order to get into med school. So, that let me keep focused.

RH: Now, when you did finally come to Houston, where did you set up your practice?

PB: Well, when I got to Houston, I set up my practice there on Almeda Street right across the street from the radio station. I stayed there about a year and then built this building down there which was the Almeda . . . right down the street. And I moved in there about 3 to 4 years. After that, I moved to Pasadena, Texas. You heard of Pasadena, Texas?

RH: I have heard of Pasadena.

PB: You been there?

RH: I have never been there but I have heard of it.

PB: KKK. I went down there. Had a wonderful practice down there . . . I stayed down there until I had to quit practicing.

RH: And you retired, it was 2003? Was that the date, something like that?

PB: I retired, yes.

RH: What made you decide on Pasadena?

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PB: Well, first a friend of mine was down there. . . Ken Mathis, was there. He was a very good friend of mine. He said, "Paris, if you've got some free time, I wish you'd come out here and check it out and possibly work with me." I said, "O.K." I went down there, I saw he had a booming practice. He had a lot of people in there so I told him after some time, "I know you have a lot of stories about Pasadena." I said, "Yep." He said, "But knowing you, you won't have any trouble in Pasadena." I said, "O.K." So, with that, I decided to go down in the mornings and give it a try in the morning. My patients built up so fast down there that I had 30-40 patients a day in the mornings. So, after that, I said well, I'll spend some time in the afternoons down there. Then I got more patients there then in the Houston office. From there, it was a booming practice down there. So, I stayed there a while and I decided I am not giving him a pile of money and I set up my own office so I set up an office on Strawberry Street and stayed there 4 or 5 years until I had the second aortic aneurism and I had to quit the practice.

RH: So, you never had any problems in Pasadena?

PB: No. The only problem I had down there was people got mad at me for leaving. Even now . . . That is the type of relationship I wanted to have. It is a heavy white population, heavy Mexican population. Very few black patients. I enjoyed the work.

RH: So, you had white patients and Mexican patients?

PB: Sure. It was 70%, right?

RH: That is what you said. All right, were you a member of the Houston Medical Forum?

PB: Um-uh. I thought you were going to say was I a member of the KKK.

RH: You may have. You may have said that. I think I just heard KKK and I was like, oh, O.K.

PB: No. The Houston Medical Forum . . .

RH: Well, how long were you a member of the Houston Medical Forum?

PB: I came down here in 1957. Since 1957 to present.

RH: O.K. That would make it 50 years. And why did you join it?

PB: Well, either join it or join nothing.

RH: That was the only option you had at the time?

PB: At the time, they did not like people of a different shade in a white medical forum, so this was a strong organization. I became a member and from there, I became president

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of the state organization and from there, on a national level, I was chairman of the board of the National Medical Association. So, it gave me an opportunity just to see a lot of the business side of medicine.

RH: What is the importance of the Houston Medical Forum today?

PB: Well, today it is, even though you can join both organizations, you need to stay in the Houston Medical Forum because it speaks to issues that are prevalent to the minority community. It is important that you stay in there, for instance we had a meeting, the only time they had a meeting outside of the United States, and we brought the senators from Washington over to Canada to talk to us. There was Congressman Waxman from California, we talked about the issues that were related to the minority group. For instance, Medicaid, they were giving one of our doctors hell because she was seeing too many Medicare patients. But what else can you do? I mean, you are sitting in the middle of a Medicaid population that offers . . . I've seen 10 you can't see anymore. No, you see everybody that comes in there. And if it just so happened you were heavy on Medicaid patients – so be it. You have to treat them, too. A lot of times, you give them medicine I'd give them samples they'd give me. I kept a room full of samples that I gave to patients when they came in because they could either pay me or pay the pharmacy. So, I gave them medicine, I said, "Look" . . .

RH: My doctor did the same thing. I always thought that was a really nice thing for him to do. Did you eventually become a member of the AMA, of the American Medical Association?

PB: I was always a member.

RH: You were always a member? O.K.

PB: I belonged to the AMA and the NMA. Both.

RH: What were some of the changes that occurred in medicine during that time period that you practiced?

PB: Well, the changes come about because the government regulation of a practice said things you've got to do, they want you doing, most of the time, were not feasible to do but if you wanted to stay in the game, you still had to do them. For instance, on how you billed Medicaid, how you billed Medicare. The first thing they put down was before you could do surgery, you must have a second opinion. That didn't work out too well because who going to turn you down if I'm a surgeon and you're a surgeon and I say I think he's got appendicitis. O.K. . . . because tomorrow, he will be asking me to see one of them. Those are the sort of things I think are the changes that occurred in medicine. Plus the fact I think that they cut back on your financial gains so drastic.

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RH: Well, the next question is about the managed care, the Medicaid. You kind of talked about that a little bit, about how that changed and made things a little different. The next question: What contributions have African American doctors made to the black community of Houston?

PB: Well, number one, they made the contribution . . . of an impact that they have on the health of the minority community. For instance, no one has come out in the community and talked about breast cancer in the black females. No one has come out and talk to them about prostate cancer. Only up until here recently, they begin to do a screening of the population and found that in a number of the black people, the black males, had a positive PSA. So, I would have to say the impact that they made educationally, being available, medicine available to the minority population. And one besides that, I think, is making medicine more available to them. For instance, most of our offices at that time were in the minority community. Now, they are beginning to branch out in other places. But that within itself is you sit down here in the corner of Dowell and Ennis, being in the middle of the minority population, you say, well, that is an advantage for them and they've got some place they can go if they have a cold or an upper respiratory tract infection or something. So, those are some of the prominent . . .

RH: O.K. What sort of contributions have the African-American doctors made to the medical field itself, do you feel?

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PB: Well, for instance, sickle cell. They are more and more working on the sickle cell itself to get an understanding to the people of what sickle cell is. Sickle cell is actually a disease with absence of number 9 protein on the protein chain . . . Like, I know some friends came and said, “Dr. Bransford, I am sure you would say it was O.K. to put your name on this if they got a cure for sickle cell. I said, bull, . . . I know what it is . . . to cure sickle cell, you have got to go inside the bone marrow where the cells are produced and you can’t go in there and change it there because it is going to still kick out those sickle cells. That is one of the big things that done. . . we have, not here in Houston but one of the leading vascular surgeons in the country up in Baltimore, he went to China as part of the team to separate those twins that were joined at the head. And he was black. . . He is sharp, and so on down the line.

RH: The next question is about discrimination. How did you deal with discrimination in your practice, when you went to school, residency, things like that?

PB: Funny that you would ask that. Discrimination. That was at the time that I first started medicine. You wouldn’t dare come to my house, you would not have come to my house. Do you know what I mean?

RH: I do know what you mean, yes.

PB: But I like to tell people, I rub my hand on them . . . “See, you will not turn black,” you know, but discrimination is certainly been a big factor. Actually, I guess I might

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have come on at a time when it was just trying to end because when I first got in the service in 1950, Truman passed a law that there wasn't going to be any more segregation in the armed forces. I was at Travis Air Force base at that time and they had just integrated our company. And so consequently, you found out that people are people. You bleed. You cry. You want to be loved like everybody else. So, what else is new?

For instance, when I went to med school, I was sitting in class when the sit-ins started. I remember . . . significant of that was that the professors would say, "O.K. fellows, we are going to have a sit-in downtown today. You guys can stay in the classroom or you can go help." And come to find, I read the paper the next day that those guys had put their houses up for mortgage in order to keep those kids out of jail. So yes, that was something.

I remember Martin Luther King coming to our campus when I was a student. He must have been about thirty something years old. . . One time, I remember him coming Although Tennessee State was a "predominantly black school," the legislature stated that every spring, put down pipes and fix the campus.

And I remember the first two white students who came to Meharry. One was, I can't think of his name. We treated them just like they were a light shade of black. Do you follow? No different. Ralph Lauman, a little Jewish. He was one of the first one in med school.

RH: You would have been at Tennessee State right when Brown versus Board came down in 1954? You would have been in college right when Brown versus Board of Education came down in 1954.

PB: Yes.

RH: I am sure it was very exciting, very interesting.

PB: I started Tennessee State in September, 1953 and finished in 1956.

RH: Well, you kind of talked a little bit, the Jim Crow laws. Well, we haven't talked about the Jim Crow laws. We talked about discrimination. What were your experiences with the Jim Crow laws? You did go to a black school.

PB: Right.

RH: What would you say is the place of African-American women in the medical field right now?

PB: I would say that place is the same as the male. There is no discrimination based on sex in our school because when . . . I always remember a woman named Faye. Faye had two babies in med school and never missed a day. But we sort of took care of her anyway. We didn't allow her to do nothing. We did all the dissection of the body for her. We told her, "You just stand and watch." We sort of put the protected around the girls in our school.

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RH: What is your favorite contribution or accomplishment that you made as a doctor?

PB: I guess working in the community. I have been the medical director for the longshoremen, and I was actually a . . . card carrying longshoreman member. I was a member of the Red Cross here, a member of the Red Cross in . . . Tennessee. Working with the HISD school system as the school physician, and I worked with several different schools including Booker Washington, Yates, and a couple of other schools as an official doctor. And I got a chance to talk to some of the students, some of the kids on the football team. They sort of respected me and a lot of them respected my say so. In fact, I used to fuss at them about, go to class, use football but don't let football use you – that was my philosophy – and to finish your education. And I guess that is one of the reasons . . . I call some of them my kids, they will stop and talk to me about that. “Don't you remember me?” “O.K., yes.”

RH: Yes, it is pretty neat when you have impacted a child's life.

PB: That's right that's very true.

RH: What advice would you give for young people today who want to go into medicine?
Young people in the minority, what kind of advice?

PB: I guess I have . . . last Sunday, I was at my son's house and there was a young man who came there. He was 21 years old, and he sat down between me and another

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black doctor . . . And so again with me I'm nosy, "How old are you?" "20, 21." "What you do?" "I'm in school." "Where" "At Lamar?" "What are you taking?" "Premed." "Oh-oh. Said the wrong thing. Premed? Uh O.K." Then my point to him aside from you got to learn how to read, you've got to learn how to read and read fast and rapid and remember what you read back there. Because it is all going to come back on you. The other thing we tell them: there are no shortcuts in medicine, that big book over there, . . . that's a physiology book. You have to read so that you can close your eyes on the exam and cheat on the exam. I don't mean cheat but anyway. . . . there is a picture in there of the side of a person's face . . . And they asked me, "Give me the mechanism of smell." I didn't read it that night before but I remembered that picture. And I talked for 10 minutes on that picture about the olfactory nerves, etc., etc. But that is the sort of thing that I was telling him. You've got to learn to read. Read with understanding.

RH: O.K. Those are all my questions. You've talked a little bit about the sickle cell anemia. Did you actually work at all with sickle cell anemia? Did you do any work with sickle cell anemia in your practice?

PB: Well, I had about 4 of my patients with sickle cell. You really have to go and learn how to treat them. It is amazing to me . . . that I went to a meeting in Chicago one time and I was seating there next to a patron and he didn't know anything about sickle cell anemia. Here, he said, "What is sickle cell?"

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RH: Well, I didn't know about sickle cell anemia until I was . . . I think I was in high school. A group of kids came to a camp I was working at who had sickle cell anemia. I remember them talking about the pain in their legs and limbs.

PB: That is right. See, what most whites don't know is there are two anemias with the . . . name: Mediterranean anemia and sickle cell C. The white group comes from the Mediterranean area.

RH: I did read on the internet that the Mediterranean area, like Greece. O.K. We are also trying to make sure that we get some information about like what it meant to be practicing like you specialty, surgery. What was your typical day? You did say that you had quite a few patients out in Pasadena.

PB: Until I slowed down, I always scheduled my patients 2 weeks ahead and I always took the 8 o'clock spot, 8 o'clock in the morning. Some of the guys, they liked to operate like 10, 11 o'clock in the afternoon. I wanted mine first thing in the morning I want to be in that operating room, and I always scheduled mine at 8 o'clock. Normally about 8:30 when I'd get started, 8 o'clock to me was the time I could do my surgery, be through with it, everybody is fresh and then go back to the office.

RH: O.K. And then finishing up the day?

PB: That's right.

RH: Is there anything else that you want to add that you have been thinking about.

PB: . . . I can't think of one . . . How would you like to help me write a book?

RH: How would I like to help you write a book? I think that would be very interesting. I think that if I couldn't do it, then there would be somebody at the University of Houston who would be able to.

PB: My daughter . . ., she wants me to write a book on my life story which is one of the things I want to do. My favorite question I ask people is when did World War II start?

RH: For Europe or for us?

PB: Us.

RH: Well, technically it started in 1939.

PB: That's exactly right. Why?

RH: Because that was when Germany invaded Poland

PB: Invaded Poland, and a whole bunch of small countries over there. . .

RH: Yes. That was the straw that broke the camel's back.

PB: You are the first person I've asked that really knew it . . . since I was 9 years old and I would read the paper. And to me, it was frightening as a kid to read the paper about Hitler, Mussolini, . . . I looked to the west and I thought you could see the Japanese coming over from the west. A kid's idea. I remember in 39 and 40 when the government took our property . . . 8% of the property was owned by blacks and my uncle owned our property. See, I remember when the soldiers came through there and ropes right through the cotton fields cutting them down . . . 1939, 1940 and 1941.

RH: I am sure 1941, if you were looking to the west and afraid that they were going to come over and they did, it was look, oh, O.K., I am sure it was frightening.

PB: What we did to me was stupid. They sold all this scrap iron to the Japanese . . . all the scrap metal you had, you could send it to them and they would give a dollar and a half something like that. And they would take that metal and sell it because Japan was very poor . . . They would buy all the scrap iron, send it to Japan . . . I remember when penicillin came through. Do you remember that?

RH: It was discovered in 1926 and then it wasn't until the 40s that the drug companies were manufacturing it.

PB: Right, what happened was German's did not have access to penicillin.

RH: Because it was a U.S. pharmaceutical company that manufactured it . . .

PB: A secret submarine, left Germany, went all the way to Japan . . .

RH: Wow. What would be quite the journey. Well, anything else? Like I said, I have asked my questions. I want to thank you for talking with me.

PB: Thank you for being so patient and everything.

RH: Oh, that is no problem. I am going to turn off the camera now.