In 1970, the University of Minnesota’s previously autonomous College of Pharmacy and School of Dentistry were reorganized, together with the Schools of Nursing, Medicine, and Public Health, and the University Hospitals, into a centrally organized and administered Academic Health Center (AHC). The university’s College of Veterinary Medicine was also closely aligned with the AHC at this time, becoming formally incorporated into the AHC in 1985.

The development of the AHC made possible the coordination and integration of the education and training of the health care professions and was part of a national trend which saw academic health centers emerge as the dominant institution in American health care in the last third of the 20th century. AHCs became not only the primary sites of health care education, but also critical sites of health sciences research and health care delivery.

The University of Minnesota’s Academic Health Center Oral History Project preserves the personal stories of key individuals who were involved with the formation of the university’s Academic Health Center, served in leadership roles, or have specific insights into the institution’s history. By bringing together a representative group of figures in the history of the University of Minnesota’s AHC, this project provides compelling documentation of recent developments in the history of American health care education, practice, and policy.
Biographical Sketch

Delores “Dee” Weaver was born and raised in South Dakota. She graduated from Lennox High School near Sioux Falls and then attended the University of Minnesota. She interrupted her education to serve in the Navy as part of the WAVES during World War II. She completed her service, and then continued work on her bachelor’s degree in business before pursuing a job as a flight attendant, based in Los Angeles. She then worked at Betchel Company in San Francisco as a procedural auditor until she married Lawrence Weaver and moved to Utah, where he was completing his Ph.D. in pharmacology at the University of Utah. In 1954, the Weavers moved to Indiana, where Dr. Weaver worked at Pitman-Moore, which became part of Dow Chemical, and served as an adjunct professor at Butler University and Indiana University. In 1966, the Weavers moved to Minnesota when Lawrence Weaver was offered the deanship of the College of Pharmacy at the University of Minnesota. During her time in Minnesota, Delores Weaver served as a volunteer at University Hospitals and Clinics while also raising the Weavers’ children. In 1984, Dr. Lawrence Weaver resigned from his position as dean to serve as vice president for professional relations for the Pharmaceutical Manufacturers of America (PMA) in Washington, D.C. He held this position until 1989. In 1994, the Weavers returned to Minnesota and the University, where Dr. Weaver served as interim dean until the hiring of Marilyn Speedie in 1996. As a result of Dr. Weaver’s work with the PMA, the Weavers became very involved in orphan drug advocacy, including Dr. Weaver’s cofounding of Orphan Medical, Inc., a company that develops therapies for the treatment of rare disorders. Dr. Lawrence Weaver died on December 21, 2011, but Mrs. Delores Weaver continues to live at their home in Fridley, MN.

Interview Abstract

Mrs. Delores Weaver begins her interview by elaborating on her education in South Dakota and then at the University of Minnesota. She then reflects on her military service in the Navy as part of the WAVES and her husband’s service in the Air Force. Mrs. Weaver then discusses her work as a flight attendant, her time doing procedure audits for Bechtel Company in San Francisco, and how she met her husband, Lawrence Weaver. She then reviews her husband’s early career, as an adjunct at Butler while working for Pitman-Moore, which became part of Dow Chemical, and his interest in pursuing a career in pharmacy. In reflecting on her husband’s work as dean of the College of Pharmacy at the University of Minnesota, Mrs. Weaver discusses all of the following regarding her husband’s work: the problems he faced with finding adequate space; creation of the PharmD program; the changing role of the pharmacist; his work on the formation of the Academic Health Center (AHC); lobbying the State Legislature; serving as vice president of professional relations for the Pharmaceutical Manufacturers of America (PMA); and his support of orphan drug work. She then discusses her own work as a volunteer at University Hospital, the couple’s return to the Twin Cities when Dr. Weaver served as temporary dean of the School of Pharmacy from 1994 to 1996, Dr. Weaver’s leadership style, and funding for the School. She concludes the interview by reviewing Dr. Weaver’s relationships with various vice presidents of the AHC and his work on orphan drugs.
Interview with Delores “Dee” M. Weaver

Interviewed by Lauren Klaffke

Interviewed for the Academic Health Center, University of Minnesota
Oral History Project

Interviewed at Delores Weaver’s Home, Fridley, Minnesota

Interviewed on August 25, 2013

Delores “Dee” Weaver - DW
Lauren Klaffke - LK

LK: This is Lauren Klaffke. I’m here today with Mrs. Dee Weaver. We’re in her home in Fridley, Minnesota. Thank you for meeting with me today. It’s August 25, 2013.

I wanted to get started and ask you where you were born and raised.

DW: I was born and raised in South Dakota, lived there most of my life through high school, in small towns in South Dakota. I graduated from Lennox High School, which is a very small school down by Sioux Falls.

I came to the University of Minnesota to go to college and I spent a little over two years here. Then, along came World War II and I went in the Navy.

LK: Oh, wow!

DW: When I came back, I did about another year here and, then, went to work for an airline.

LK: What were you studying when you first started at the University?

DW: I was a business major.

LK: Oh! Cool. Very cool. When you went into the Navy, were you in the WAVES [Women Accepted for Volunteer Emergency Service].

DW: Yes.
LK: Wow. So what did you do in the Navy?

DW: Actually, I taught air navigation. One of the things about military service is that they decide if you have some talent and you learn do it whether you knew anything about it or not. You can learn.

[chuckles]

DW: And you learn fast.

LK: Yes. Did you do flying yourself?

DW: I didn’t do any flying myself. I did, eventually, learn to fly. I soloed but I didn’t like it as opposed to Larry [Doctor Lawrence C. Weaver], who absolutely loved flying.

LK: Yes, I saw that.

Where were you stationed? Were you in the United States?

DW: In the United States, but I was all over: New York, Atlanta, Oklahoma, Seattle, and San Diego.

LK: Oh, wow! A lot of great traveling.

Doctor Weaver was in the Navy, as well?

DW: He was in the Air Force. The Air Force was actually a part of the Army. It was Army at that stage. It hadn’t become the Air Force. He had been at Drake [University, Des Moines, Iowa] only one semester before he went into the Army. He had flight training mostly out west, Reno [Nevada] and that area, I believe, and ended up flying the Hump during World War II, which is flying from CBI, China, Burma, India, that area. Now, people fly over it very casually, but, at that time, you didn’t have pressurized planes, so flying high meant that you had to go on supplemental oxygen.

LK: That’s a very mountainous region.

DW: Yes. Then, he came back to Drake after the war and finished his pharmacy degree there.

LK: When you returned to the University, did you take up business again?

DW: Yes.

LK: What prompted your interest in business?
DW: I guess I just had a natural aptitude businesswise.

LK: It seems like that wasn’t a very friendly field for women, at that time.

DW: Actually, everybody that went into business ended up, at some point, taking secretarial courses whether you were going to do that or not. It was strongly encouraged.

LK: Just the women or also men?

DW: No, just women. It was expected that you would become an assistant to someone. [chuckles] You would take shorthand.

LK: Did you complete your degree at the University?

DW: No, I didn’t complete my degree until after Larry and I were married and we were living in Utah.

LK: Oh! Okay. Wow. You did another year at the University of Minnesota after the war and, then, where did you go from there?

DW: Then, I went to work for the airline. I mostly lived in California from that point on. Then, I left the airline, eventually, and went to work in an office in California in San Francisco.

LK: What were you doing for the airline?

DW: Stewardess, flight attendant.

LK: Wow! Wow. That’s really cool. What was the training like for that?

DW: It’s a six-week training course of primarily safety things. At that time, airlines were into service. [chuckles]

LK: It was predominantly women, at that time?

DW: Yes, all women and no married women.

LK: Was that a rule?

DW: Yes. They wouldn’t think of it. When they first had flight attendants, they were all nurses.

LK: Interesting.
DW: Then, they decided they really didn’t have to have nurse’s training in order to be a flight attendant. That was the basis of it, originally. So it was considered a service component. We did meals and things like that.

LK: Did any of your training from the WAVES help you in being a stewardess doing some of that navigational stuff?

DW: No, I didn’t have to do any of that.

LK: Okay.

[chuckles]

LK: Then, you said you ended up working for a business in San Francisco?

DW: Yes. I decided I really needed to be thinking about a career and I ended up working for what was called Bechtel, a part of Bechtel Company.

LK: What were you doing for them?

DW: I was doing procedure audits.

LK: Oh, wow.

[chuckles]

LK: That sounds like a lot of fun.

DW: It’s the kind of thing I really enjoyed doing.

LK: Oh, good! Good! Whenever I hear the word audit… I have a friend who’s an accountant and he’s not a big fan of them.

How long were you in San Francisco?

DW: Let’s see. Probably about two, three years.

LK: What did you do after you left San Francisco?

DW: Married Larry.

LK: Okay. How did you guys meet?

DW: The one and only time my parents ever went on a fishing trip, they went up to Leech Lake [Minnesota], and I went with them. This was in the summer a year after I was out of the Navy. We got to this campsite. We were with other relatives. My dad
came back and said, “There are a couple of nice guys down there gilling and getting fish.” So I moseyed down to see what they were doing. Sure enough, it was Larry and a friend of his who was there. So during the process of the time we were there, they were around with us. Larry and Dale had taken off from school. With their last check, they’d gotten as far as Minneapolis and they ran out of money. They were working to get enough money to keep moving. They were traveling around the country that summer.

LK: Oh, wow.

DW: So I knew them there in the camp and we went out with family, my cousins, and that sort of thing in a group.

A year later, I think it was a year later, Larry went to school out in Reno one summer, and I was living in L.A. [Los Angeles], at that time. I was with the airline already. He came down and we had one date then.

A couple years later, I was living in San Francisco and that was the year he graduated from pharmacy. He flew with the National Guard and he came out. By that time, my parents were there, so we had dinner with them. When he got back to Drake, he called and proposed.

LK: Oh, wow!

DW: So we actually had three dates before we got married.

LK: [chuckles] A long courtship.

DW: That was over three years. We did correspond during that time. You didn’t use your telephone indiscriminately, at that time.

He was headed for [University of] Utah to start graduate school then. I still had a year to finish off on a bachelor’s [degree]. I finished off that and, then, went to work and he finished his graduate school.

LK: So you finished your bachelor’s at Utah?

LK: Okay, great. And you finished it in business?

DW: I finished it in business, yes.

LK: I was going to ask you what airline did you work for?

DW: United.

LK: I meant to ask you earlier… What prompted you to join the WAVES as opposed to another service area?
DW: I haven’t the vaguest idea. It just seemed like the right thing to do.

LK: All right.

So you and Doctor Weaver were in Utah and you finished your degrees. I saw that he taught for a while at Butler University?

DW: Well, actually, he went to work for Pitman-Moore. That became a part of Dow Chemical. He was working for them and was there for thirteen years doing research, primarily. During that time, he taught at Butler, too. He was an adjunct professor over at Butler.

LK: Ohhh, he did both?

DW: Yes.

LK: Was he also working for Dow when he was at Indiana University?

DW: That’s where we were, yes. That’s where Butler is.

LK: Ohhh, okay.

DW: It’s in Indianapolis.

LK: Do you know what prompted his interest in pharmacy?

DW: Yes. Larry was raised on a farm in southern Iowa. If you want to talk about people being raised in poverty, they were. They had very little, but good community support, that kind of thing. So he came through the one-room school house, that sort of thing, and when he was ready for high school, it meant moving to town—quote—and boarding somewhere in order to go to school. So he moved into town and was boarding at this house and he had a job in the pharmacy. He worked in that pharmacy all the way through high school to help put himself through high school.

LK: Wow. So would you say that’s what prompted his passion to create a more patient-oriented pharmacy school? You had mentioned before we began the interview that the University [of Minnesota] was very strongly research oriented.

DW: That’s right. When he took the job here at Minnesota, I think his description of his first day at work there was that you go through all the things with people coming in to say, “Hello,” and all of these nice things and you’re through with that. All of a sudden, he stood there and started looking out the window and thought, okay, what does a dean do now? He said that he found out in a few minutes when people started coming in with their problems.
[laughter]

DW: He looked at the school and looked at other schools. I have tried to think which ones were his best examples, maybe. I have to think that it would have been the California schools.

LK: The model?

DW: California was developing a reputation already in making the switch over to a more patient-oriented type of pharmacy. As he looked at the other pharmacy schools and what they had, I believe that he probably was highly influenced by that.

LK: Had he spent much time in California, other than his traveling?

DW: No, but he had a wide range of acquaintances. He was very serious about finding out what the best schools were doing.

LK: When he was at Dow, was his job there primarily to do research?

DW: It was research and, also, administration.

LK: Okay. Do you know what courses he was teaching at Butler in Indiana?

DW: I don’t know, but I would guess it would have been in the pharmacology area, because that is what his major was and his Ph.D. was in pharmacology.

LK: When he took over the deanship [at the University of Minnesota] and he started taking on that role of dean and having people come in with their problems, do you know what the major problems were that he was facing?

DW: I think he was very concerned about some of the course orientation. But I don’t think there was any one major problem. Space was a big item. They were talking about new facilities and how to expand the facilities they had, how it should go. I think that Pharmacy was always struggling for space. It seemed like they were outgrowing things at every point along the way.

LK: Even after they moved into the new building, they had a lot of space problems?

DW: No. Do you know where they were in Appleby [Hall]?

LK: Yes.

DW: It was the old School of Mines. It had been adapted for that. They still had a greenhouse and gardens. It was one of the things that was kind of bane for Larry, keeping the gardeners, that phase of it. I remember saying to him one time, “What’s the
justification for having that at this point?” He kind of laughed and said, “Because they grew digitalis there during World War I.

[laughter]

DW: Traditionally, it had been. Apparently, this was a major thing within the University system, the fact that digitalis was something that they needed badly. They had grown supplies of it here and processed it and everything, so it should always be there.

LK: I think it was around 1970, 1974 maybe, when they moved into the new building. Do you remember?

DW: I think it was 1979 or 1980 by the time they finally got into it. The process of getting the approvals and everything for the new building were very difficult.

Now, they had been making the transition in the Pharmacy curriculum long before that. Larry came up here in 1966. I ran into something the other day that was talking about the new people that came in and they came in 1969 and those were the first clinical people that were brought onto the staff.

LK: First clinical professors?

DW: Clinical pharmacy people that were brought in with the change in curriculum. I don’t know the first year that they did the PharmD.

LK: I have that, 1971.

DW: Okay. At that time, the pharmacy students that were in this program actually took some of their classes with the med students.

LK: Yes. Right.

DW: Clinically oriented pharmacy instructors were not available, at that point.

LK: Because they were so few in number?

DW: Yes. California was turning some out, by this point. The three instructors they brought in were all brought in from California, I believe, the first three in.

LK: Do you know what universities in California?

DW: I believe two of them, at least, were from the University of California. I’m not certain where Karl [Schattenhelm] came from, but [William Jeffrey] and… [pause] I can’t remember the second one that came in with William [Marty Jinks] [pause] I’ll have to think about the names of those. It’s probably in this book somewhere [referring
History of the University of Minnesota College of Pharmacy, 1892 to 1970 by Charles Vail Netz].

LK: I can look them up.

DW: Carl may have come from another California school. He may have come from Southern Cal [University of Southern California, Los Angeles].

There was a time when once you finished pharmacy school, you went and took your boards in whatever state you wanted to work, but California did not allow people to come and take the board there unless they had graduated from one of the California schools. So that became a standard of training, so the people could take the California board.

LK: There were a number of factors that I can see maybe influencing the need for more of a therapeutic consultant from the pharmacist. Do you have any sense of, like, what those factors were? I was thinking about a number of new drugs coming on to the market being one of them.

DW: I think it’s interesting how pharmacy changed over a period of time. There was a time—it probably goes back to when Larry was working in the drugstore—that the neighborhood pharmacist was the person you went to first for your primary healthcare, actually. So they discussed what you needed. Then, it went to a complete opposite where absolutely pharmacists would never recommend anything. They hardly spoke about anything. It was considered that they couldn’t prescribe—quote/unquote. Then, the switch over to where they became very much involved. It’s up and down.

LK: Yes. When would you say that that change from being very involved to not being involved happened?

DW: Just about during World War II and shortly after. That was the first that we started getting some of the… Penicillin must have come out about that time.

LK: In the formation of the Academic Health Center, I had read that Doctor Weaver had been very involved in those discussions with the Medical School and the School of Nursing, very early on, like several years before the Academic Health Center began.

DW: That’s right. I can remember the meetings first to convince people… I believe the committee may already have been formed to get the Academic Health Center, but he became involved in it immediately when he got here. It was plans for the building of the Academic Health Center and he felt that Pharmacy should become a part of it.

The earliest physical relationship… There was an apartment house over in the vicinity where the Academic Health Center is now that Pharmacy ended up taking over and putting students in various spots there. They used it for offices. They used it in connection, primarily, for the ones that were going into patient-related care. That was where the expansion came.
The people that were doing it had all sorts of stories about having offices in the bathroom and using closets. It was one of those things… The great stories that you end up with usually come from something that went wrong or something that was difficult. The ordinary things become blocked and it’s the things that were a problem or were unusual that stick in your memory afterwards. So I think the people that were involved in that have good memories from it.

LK: Yes. Yes.

DW: One of the things about Larry was that when he was involved in serious discussions with people in command, he felt that he had an advantage if he would invite them to his home for discussion. So we did a lot of entertaining.

I have been trying to remember who all was on that committee for the Academic…. I remember him bringing them out to the house for dinner one night. But my greatest memory of it, I guess, is because Elmer [L.] Andersen was one of the people on the committee. I can still remember Elmer walking into the house, walking over to where we had a ukulele laying on the piano and saying, “Gee, I haven’t used one of these since back when I was courting Eleanor [Mrs. Elmer L. Andersen].”

[laughter]

DW: I have tried to think who was on the committee. You may have a record of it.

LK: We probably do. I haven’t run across it, though, personally.

DW: Okay. It included not only people from the health sciences on campus, but community people like Elmer Andersen and some international… I thought Ed [Edmund D.] Pelligrino was on it—Ed is a bioethicist out and he was at Georgetown [University, Washington, D.C.]—but I can’t confirm that for you. But maybe he was.

LK: What year are we talking about with this committee?

DW: I think that would have to be the late 1960s maybe or early 1970s.

LK: It’s for the formation of the Academic Health Center?

DW: Yes, the formation of the Academic Health Center and what should be included.

During about that time, getting federal funds involved in establishing a statement of need or something like that, how many more health professionals were needed in order to justify the federal funds. A certificate of need, I think they called it.

It was also during, roughly, that period—I can’t come up with exact dates for you—that Larry served on the state commission with [Doctor] Ellen [Z.] Fifer. She was health
commissioner at that time, I think. They did an evaluation of health needs throughout the state.

LK: I may have the name of it. Was it the Minnesota Comprehensive Health Planning Advisory Council?

DW: That might have been it.

LK: I have that it as 1970, so it would be around that time.

DW: Yes.

LK: Okay.

DW: I believe one of the first things they came out with was that healthcare is a responsibility, a right, not a privilege. [chuckles]

LK: Oh, yes! That’s still contested. [chuckles]

DW: Yes.

LK: I saw something interesting that came out of that. It was talking about a public health nurse visiting every mother after she gave birth to a baby. Do you remember any of that?

DW: That sounds reasonable, like the kind of thing that would be recommended.

LK: It seems like Doctor Weaver was heavily involved in working with the State [Department] of Public Health. Do you know if he did a lot of work with the Legislature?

DW: Yes, very much so. His sidekick through all of that was Cherie [R.] Perlmutter. Larry always worked very with strong women. He had a great respect for them and he liked working with them. He and Cherie spent a lot of time working. He also got a lot of assistance that came from the state association [Minnesota Pharmacists Association] and Donald Dee was the executive director, at that time. They gave him a lot of help in helping to push, because the State Legislature was not very forthcoming with funds for a pharmacy building.

LK: Yes. Right. Was he working for funds more for building this new space for the Pharmacy School?

DW: That’s what started it, yes.

LK: Did he need a lot of funding to get the PharmD program started or approved?
DW: I think they did that on a shoestring.

LK: Okay.

[chuckles]

DW: I really do. I don’t think they got much extra funding in order to do that.

LK: It seems like it would be a big difficulty to...because he’s trying to hire professors who had this clinical basis.

DW: That’s right.

LK: So was he just having to, like, replace professors as they left or…?

DW: He came up with extra funds for things, federal grants and that kind of thing.

LK: Okay.

Earlier, you had mentioned because there weren’t clinically oriented professors, that some of the pharmacy students were taking classes with the medical students. Was that something that Larry appreciated? He wanted that collaborative environment?

DW: Yes. It was one of the things that he pushed very hard for was to have the students knowing each other while they were students. He was a strong supporter of CHIP [Center for Health Interprofessional Programs]. Does CHIP still exist?

LK: I actually ran across that, but I don’t know.

DW: CHIP is an outside student organization.

LK: I don’t know if it still exists. [CHIP, founded in 1970, continues to bring together students in the six schools and colleges and allied health programs in the AHC.]

DW: They had an office over in Phillips-Wangensteen [Building] for a long time.

LK: I’ll have to look into that.

DW: Where is your office, by the way?

LK: In Diehl [Hall]. It should be close if it’s there. [chuckles]

I also saw that Doctor Weaver was really involved with orphan drugs.

DW: Yes.
LK: Was that later?

DW: That was later.

LK: Okay. Do you have any comments on how he got involved in that?

DW: Oh, yes.

LK: [laughter]

DW: In 1984, we moved to the Washington, D.C., area, and he went to work for the Pharmaceutical Manufacturers Association [PMA]. His job there was, primarily, to improve the relationship between the various pharmacy organizations and the manufacturers. I think his title was vice president for professional relations, something like that, while he was working there. One of the things at that time that happened is a lot of the pharmaceutical manufacturers all have these little sidelines of drugs that they were producing for a very small number of people. They couldn’t get rid of them, because it would be a nuisance, frankly. They all had representatives in this organization of people that were working in that area in their company.

About that time, [Representative] Henry [A.] Waxman from California started hearings around the country about rare diseases. There was a woman at the NIH [National Institutes of Health], Marlene [E.] Haffner, who headed up the NIH area of it and another woman, Abbey [S.] Meyers, who headed an organization National Organization for Rare Diseases. All of these people along with Waxman started holding hearings around the country to find out what the needs of people were. Larry was the representative from PMA. He became very, very much personally involved with the idea when these people would say, “Nobody cares. No one pays any attention to us,” that sort of thing, the people that had desperate needs. That was when what’s called the Orphan Drug Act was passed. What it does is extend the patents on these things for the people who make it.

Over the years, a lot of those things have changed since that time, and you have companies that are manufacturing the orphan drugs now and making a profit from it.

LK: Yes.

DW: He also became very involved in international organizations, helping them get their legislation passed and helped companies spread the word and the activity of it. It was always a strong part of it.

Then, he formed another company when he got back here, a spinoff from another company that he was involved with.

LK: Oh. What was that?
DW: That was Orphan Medical [Incorporated]. It was a spinoff from Chronimed Incorporated. [Orphan Medical was founded in 1994. The company develops and commercializes therapies to treat rare diseases.]

LK: I’m impressed with how much you remember from all of this.

[laughter]

LK: Did he use you a lot as a sounding board for ideas and things?

DW: We had a routine at our house, as opposed to the way things are now. We didn’t talk during the day. That just was not… But when he got in the house at night, he would say, “Hello,” to the kids and they would get through [with dinner] and they would go down to Mickey Mouse Club. Then we would sit down to have a drink together and bring me up to date on what was happening. Yes, he shared a lot with me. It was fun because I got to be involved. I was a stay-at-home mom during all of that time.

LK: You had mentioned before we began the interview that you had done volunteer work at the University Hospital. When did you get started with that?

DW: Practically as soon as we arrived here.

LK: Oh, wow.

DW: Within about the first year or so, I think.

LK: What kind of work were you doing as a volunteer?

DW: Oh, patient families, primarily… I worked in the Hospital Auxiliary. At that time, we pushed a cart through the hospital with magazines, because there were no gift shops or anything like that around. I worked in the surgery lounge, seeing what families needed to make them comfortable.

LK: Okay. You said a lot of the wives did this kind of stuff?

DW: Yes. It was quite common for a lot of the doctor’s wives, particularly in administration, to be involved with the Hospital Auxiliary.

LK: Do you remember anyone in particular whom you were working with?

DW: The other doctor’s… [pause] The name will come to me sometime. I’ll skip it now and I maybe can pop it out to you later. [chuckles]

LK: That sounds good. How long did you do that volunteer work?

DW: I figure I did it for about forty years.
LK: Wow! Wow. You must have seen a lot of changes with that.

DW: Oh, yes. The hospital was over in Mayo [Building]. It was before the new hospital was built and before all of the subsidiaries. We were very limited where we were at first. There was a big question as to whether you should be so frivolous as to bring someone magazines and things. The Hospital Auxiliary maintained a library for the Hospital for years—I think there’s something left of it—not for the doctors but for the patients.

LK: Right.

DW: The Auxiliary did such things as mending the hospital linens during World War II.

LK: Ohhh…

DW: So they had their sewing machines. I never got in at that point, but I knew about the sewing machines and the work details, that they did that. Or they would be providing gifts for children at Christmas time. At one time, we did assembling of patient’s comfort kits when they came in. We had been doing it, I guess, for about a year when someone realized that really should be a job that the Hospital paid for. So it got returned to another area. So it varied over the years. An awful lot of the things that are paid-for activities now at the Hospital were done by volunteers.

LK: Hmmm. That’s interesting.

DW: The gift shop, eventually, was opened as a volunteer sort of thing.

LK: Do you think that kind of changes the feel of the hospital a little bit? It sounds like a lot of these activities being done by volunteers, that maybe it’s a little more…I don’t know if you want to say family oriented, but…

DW: Yes, there was a definite feeling of… Well, it was smaller. Everything was smaller. People knew each other. There was just a…well, things grow.

LK: Right. [chuckles]

When Larry first stepped down as dean in 1984, do you know why he decided to do that, at the time?

DW: That was when we made the move to Washington.

LK: Oh! Right! Right, of course. So he was just interested in pursuing that other…?

DW: He needed a change, he felt.

LK: He’d been doing it for quite a long time.
DW: Eighteen years, I guess…something like that.

LK: By that time, the school had been settled in the new building and all of that.

DW: That’s right.

LK: He had quite a few accomplishments for himself.

DW: Yes.

LK: Do you know if he was involved at all in the choosing of the new dean, Gilbert [S.] Banker?

DW: I don’t think he was involved at all with Banker and Banker coming in. Was Monem before or after Banker?

LK: Who?

DW: Monem. He was the temporary dean. [Dr. Abdel-Monem served as interim dean of the School of Pharmacy from 1984 to 1985.]

LK: I guess I don’t have the temporary…

DW: Let me think. I honestly can’t remember.

LK: What was the first name of…?

DW: Mahmoud [M.] Abdel-Monem. He went on to become dean out at Washington State.

LK: I’ll look him up.

When Doctor Weaver came back in 1994, is that when he began the company out here?

DW: He never worked in this company out here. He was on their board of directors.

[pause while Dee Weaver pauses to check a list in a book] [Yusuf Abul-Hajj and Richard Broderick, *From Digitalis to Ziagen: The University of Minnesota’s Department of Medicinal Chemistry*.]

DW: I was just seeing whether I had the answer here, but they didn’t list the in-between ones.

[pause]
DW: That’s interesting. This book doesn’t list him. He was just serving as interim dean.

LK: What prompted you to bring up Monem?

DW: Because he did serve as interim dean there at one time, and I couldn’t remember when. He was a long-time friend.

LK: Did Larry hire him?

DW: Yes.

LK: Was he a clinical…?

DW: Yes, he was one of the pharmaceutical chemistry people. They list him in the book because of his association there in the department.

LK: What prompted Larry to take up the deanship again in 1994?

DW: They hit a rough spot over there. I don’t know all the details on it. But Bob [Robert J.] Cipolle was also serving as an interim dean there while they were looking for a new one. Bob got into a disagreement with someone in the process there. I don’t know what that was over. All of a sudden, he said, “No.” He wasn’t going to act then. I fully remember it was on Larry’s seventieth birthday that they asked if he would come back and serve until they got…

We came back here in 1989. We moved back to the Twin Cities area. We did a fair amount of traveling, but we were here. This was our base. He had always stayed very much involved with the school, with the various activities that they were doing. He was over there a lot and he was involved with them. It was logical for them to come to him and say, “Hey, will you do it till then?”

I know he had encouraged Marilyn [K. Speedie] to apply for the job here.

LK: His appreciation for strong women.

[chuckles]

DW: Yes. He had encouraged her to apply for it at an earlier stage, but she didn’t think she was ready. He was very pleased with her. She’s a nice person.

LK: Did he hire her, as well or did she come on…?

DW: No. He encouraged her to apply and he probably strongly recommended her.

LK: Yes. She came on as dean in 1996.
Did he continue teaching at the school, at all, or he had served his time as interim dean and, then…?

DW: He was done then.

LK: Okay.

I had read an interview that Doctor Weaver gave in the mid 1990s. It sounded like people whom he groomed at the School of Pharmacy as his children… It seems like he had really strong relationships with a lot of the people he hired.

DW: He did. Yes. My personal opinion of—[chuckles]—Larry’s strength was that he hired creative people and tried to furnish them with the facilities they needed to do their job. He did not micromanage. As a result, he got phenomenal results. He did maintain close relationships with them.

Someone said to me, not too long ago, that things did not go always smoothly during all these transitions, into a new type of curriculum and all, and there was a lot of dissension, but they could be sitting there and be banging at each other and, then, they’d go out and have a beer together afterwards. They never made it personal. They could discuss that and keep the personal side of it separate.

He always referred to the students as his kids.

LK: In this interview that I read, he specifically brought up Robert Cipolle and Linda Strand.

DW: Yes.

LK: I know they were at the school for quite a number of years.

DW: He had an appointment in their office. They had the Office of Pharmaceutical Care. That was where his academic appointment was for a while.

LK: Doctor Weaver’s?

DW: Yes.

LK: Okay.

One big thing that I’ve seen in the Academic Health Center over the years is that there seemed to be a lot of money available in the 1970s but, then, in the 1980s and 1990s, there was a lot of budget cutting. I didn’t know if you had any comments on that or if you know anything about what Doctor Weaver’s experiences with that funding were like.
DW: No. He was always very much involved in looking for funds. That’s always been true. Fortunately, the College of Pharmacy got some pretty good endowments, some gifts. Oh, when did the Peters’ gift come in? I can’t say exactly when the Peters’ gift came in. Mildred [E.] and Bill [William M.] Peters were good friends of the assistant dean who was here when Larry came in, Doctor Netz, who does this book. They became friends of ours and people that we knew over there as an alum. They had no children. They had given scholarship money to the U over the years. They knew their scholarship recipients and had them to dinner, that kind of thing. Bill died first. We all took care of Mildred after that. So when Mildred died, I think it was something like $14 million that was left to the school.

LK: Oh, wow.

DW: At that time, that was the largest one that had ever come into the University.

LK: Wow! And it was left to the School of Pharmacy?

DW: Left to Pharmacy. I remember Larry being very concerned about how it would be set up, so that it wouldn’t get wasted.

LK: Right.

DW: It must have come during the time when he was acting dean.

LK: In the 1990s?

DW: Yes. It would have been during that era.

Then, the other big funding thing that came to the college… Bob [Robert] Vince in Medicinal Chemistry ended up with royalties from an AIDS [Acquired Immune Deficiency Syndrome] drug that he had developed [Ziagen]. That was set up so that there were monies that came to the Pharmacy, and to the University, and to Bob. I think there was a three-way split on it or something like that.

So the college has been in the position to be able to do expansions, had the funds to do it on its own.

LK: Yes.

I was wondering how much Doctor Weaver worked with the vice presidents for the health sciences. He had a role in getting them appointed, since he was so involved on the ground floor of the Academic Health Center. Do you know if he had a strong relationship with Lyle French?

DW: Yes. It’s one that developed over the years. Yes, it was a comfortable relationship.
Actually, all of the heads got together as friends on a fairly regular basis.

LK: So all of the different deans of the health sciences?

DW: Yes.

LK: Okay. That’s cool.

DW: The other deans of the health sciences and the administrator of the Hospital.

LK: It was a strong working relationship.

DW: Yes. I don’t know if Mortuary Science is still a part of it or not, but it was then.

LK: Mortuary Science?

DW: Yes.

LK: Oh, wow! I hadn’t run across that. Hmmm.

DW: Mortuary Science and Veterinary Medicine were considered part of the group.

LK: I know Vet Med is still involved. I didn’t know about Mortuary Science.

DW: I don’t know if they still teach it at the U.

LK: Neal Vanselow was vice president, as well, but this was towards the end of Larry’s tenure as dean. I don’t know how long you…

DW: Who was the next one in there that we knew? He went on to Johns Hopkins.

LK: [William R.] Brody?

DW: Yes.

LK: You had mentioned that Cherie Perlmutter was his sidekick of sorts. Do you know how they came to work together in the Academic Health Center?

DW: I think that Cherie was given the job to help… They worked together when they were trying to get stuff through the Legislature.

LK: So they did a lot of that work together?

DW: Yes.

LK: That was primarily for funding for the Academic Health Center?
DW: Yes. She always remained a good friend, and good working relationship.

LK: Once Larry left his second time as dean in 1995, did he continue to work on his orphan drug work?

DW: Yes. He was involved with the company here, Orphan Medical, and served on their board. That’s when he set up the [Lawrence C. Weaver] Endowed Chair. Jim [James C.] Cloyd [III] is there [the endowed chair].

LK: That kind of wraps up my questions. Is there anything you thought I should ask you about or any questions that I didn’t ask, topics that you wanted to discuss?

DW: I can’t think of any in particular. If I come up with anything, I’ll give you a call.

LK: Yes. Okay. We can always set something up again, sure.

DW: I may come up with some names that I’ll share them with you as I run through the things that I have here. I’ll see what I can do.

LK: Yes. Okay. That’s sounds great. Thank you for meeting with me today.

DW: Thank you. It’s been good.

LK: Yes.

DW: I enjoyed it.

LK: Me, too.

[End of the Interview]

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