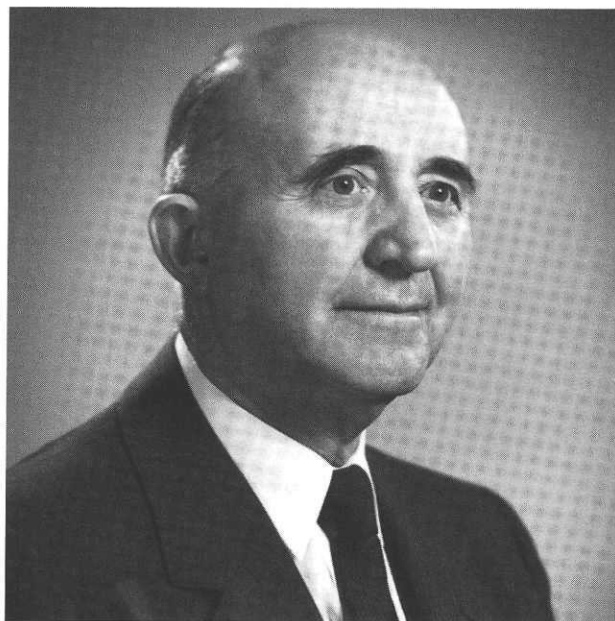


Bingham Canyon Physician: Paul Snelgrove Richards, 1892–1958

By ERIC G. SWEDIN



BOYART PHOTO, COURTESY OF CLARK G. RICHARDS

When Paul Snelgrove Richards was born into a prominent Mormon family on November 25, 1892, Utah was on the verge of the transition between a territory and a state. Paul's grandfather was Dr. Willard Richards, an early leader in the Church of Jesus Christ of Latter-day Saints who survived the mob attack at Carthage Jail when the faith's founder, Joseph Smith, was slain. Paul's father, Willard Brigham Richards, was born in Winter Quarters during the Mormon trek west to Utah. But Paul Richards was a man of the twentieth century. After obtaining a medical degree from Harvard, he served most of his professional life as a physician in Bingham Canyon. By the time of his death in 1958, he was a recognized national authority in industrial medicine.

The fourth child of Willard Brigham Richards and Louise Snelgrove, Paul grew up in Salt Lake City. His father worked two farms outside of Salt Lake City, though he raised his family on an eighteen-acre lot at 1935 South 900 East—in the city, where his children could obtain a good education. Paul recorded many fond memories of a childhood that was still rural in the state's largest city. The family raised much of their own food from the orchards, gardens, and livestock on their lot, and they obtained grain from their farm in Cache Valley. There was a strong sense of order within the family. At mealtimes, the father sat at the head of a large table with his oldest son at his left side and his wife at his right. The children were arranged around the table in order of age so that the youngest sat next to his mother.

As a youth, Paul was often sick with inflammatory rheumatism. During

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episodes lasting six to eight weeks, he was confined to bed with red spots over his lower body, fever, chills, and bloody urine. This prevented him from keeping “up with the group either educationally, physically, playwise, or from any angle.” As he related later in life, this inability to keep up created an “inferiority complex” within himself, and his feelings of inadequacy were compounded by depression. During childhood, he stammered when he talked. As an adult, however, he experienced success in college, which lifted his depression and gave him a sense of self-confidence.¹

In 1911 the LDS church called on the young man to serve a proselytizing mission in Scotland. Even though he was nineteen years old, he had completed less than two years of high school at the time. Because of his health, doctors objected to his going, but his mother supported the idea. She felt that if he died on a mission, at least he would be engaged in the work of the Lord. While in Scotland, Elder Richards overcame his stammering, and he became more self-assured. Then he fell ill during an epidemic of diphtheria. He spent six weeks in an Edinburgh infirmary, where the doctors had little hope for his survival and expected him to be an invalid if he did pull through. His cousin Steve Wilcox, who was also on a mission in Europe, came to Edinburgh and took Paul to mission headquarters in Liverpool, where mission president Rudger Clawson prescribed a small glass of port wine several times a day. After two weeks, Richards was carried by stretcher onto the *Lusitania*, and two other missionaries accompanied him home. His companions became violently seasick, but Richards avoided seasickness and improved enough to be able to walk off the ship in New York. He then weighed less than a hundred pounds. After six weeks with his brother in Washington, D.C., he returned to Salt Lake City, underwent an operation to remove his tonsils, and spent the summer recuperating.²

In the fall of 1913 Richards was admitted into LDS College despite his poor academic record. Encouraged by his instructors and growing in self-confidence, he applied himself to school. Reading a book on psychoanalysis convinced him that he suffered from a fear of failure, which he strove to overcome. In three years of study he finished his high school education and came close to finishing a bachelor's degree.

Five of Paul's relatives, including his grandfather and three uncles, had gone into the medical profession, and he chose to follow that professional path. Although he lacked a bachelor's degree, his grades were high enough for him to be accepted to medical school at Johns Hopkins, Columbia, and Harvard. He had seen the first two during his time in the East and thought their schools looked a bit rundown. On the other hand, a picture of five

¹ Paul Snelgrove Richards, “The Memoirs of Dr. Paul,” 1–7. This typescript autobiography is available at the University of Utah Eccles Health Sciences library and also at the LDS Church Archives in Salt Lake City.

² *Ibid.*, 10, 15, 19–21. Two years later, on May 7, 1915, the *Lusitania* was sunk off the coast of Ireland by the German submarine U-20.

new white marble buildings that Harvard sent him inspired him to go to New England.³

Paul married Ethel Bennion on September 7, 1916, a few days before they left for Boston. Their first child was born a year later, and they named her Lenore. While a student, Paul labored during the influenza epidemic that swept the world in the wake of the First World War. For the first time in his life, he faced death in “large proportions.” On some days, he pronounced as many as ten people dead. Such a strain caused him to seek out some type of philosophy to sustain him. He concluded that one can only “do the best one can in any situation and then accept the results.”

In May 1920 Richards graduated high in his class. He spent the summer completing a residency in surgery at Peter Bent Brigham hospital, then spent a year in general practice at Cincinnati General. Returning to the Boston area, he practiced obstetrics and gynecology for six months each at Boston Lying-in Hospital and the Free Hospital for Women in Brookline.⁴

While at the Free Hospital for Women, young Dr. Richards developed a new technique for using radium to treat cancer of the cervix and uterus. Previous efforts to use radium had resulted in damage to surrounding tissues, including holes in the rectum and bladder. Paul’s treatment was based on a good-luck piece that he carried—a silver dollar on which he had used acid to etch the date of his twenty-first birthday. By placing the radium in four locations on a silver dollar and sewing the silver dollar in place, he reasoned, the radium could be applied to the cancer alone. Later treatment methods would be based on his idea, although a colleague of his joked that the idea of using a silver dollar would only occur to someone from the American West, where silver mining was so important to the economy.

While the medical profession appreciated the benefits of radium in making x-rays and treating different forms of cancer, there was not yet sufficient understanding of the dangers of radium. At the time, x-ray tubes were not shielded to protect the operator, and it was not until 1924 that the first daily exposure limit to x-rays was proposed. Dr. Richards was as careless as his contemporaries were. Even the fact that the hospital’s radiologist had already lost a number of fingers to radium exposure did not sufficiently alarm the young doctor. While an intern, Paul “burned” his hands with radiation; his eldest daughter cannot remember him without “funny-looking fingernails and heavy crusted areas on his hands.” He “was always whittling on his hands or fingernails” with a “beautiful sterling silver pocket knife that he kept at the other end of his watch fob.”⁵

³ Ibid., 10, 20, 22, 24.

⁴ Ibid., 24, 27–28, 30, 32–33. For a more complete account of the influenza outbreak, see Alfred V. Crosby, *America’s Forgotten Pandemic: The Influenza of 1918* (New York: Cambridge University Press, 1989).

⁵ Richards, *Memoirs*, 24, 27–28, 30–32; Lenore Richards, interview with author, Salt Lake City, February 2, 2000. See also Ronald L. Kathern and Paul L. Ziemer, “The First Fifty Years of Radiation Protection,” in Kathern and Ziemer, eds., *Health Physics: A Backward Glance* (New York: Pergamon Press, 1980), 1–9.



A view of Bingham Canyon, n.d.

During that last year in Boston, Paul purchased an old Model-T Ford and repaired it himself. When his residency ended, he drove his small family across the country back to Utah, taking time along the way to visit early Mormon history sites that they had learned of in their youth. In the old Nauvoo cemetery they located the grave of Jennetta Richards, his grandfather's first wife.⁶

On the day of the family's arrival in Salt Lake City, October 6, 1922, he was contacted on the behalf of Dr. Fred E. Straup. Straup owned a medical practice and hospital in Bingham, but he was ill, so he hired Richards for six months, at two hundred dollars a month, to take care of his business while he recovered. The next day Richards left his family in Salt Lake City and moved to Bingham to begin a short-term contract that stretched into twenty-six years. As his eldest daughter described it, "He was going to be the ladies' doctor and woke up being the miners' savior."⁷

Bingham served as home to the workers of several mines, including the large Bingham open-pit copper mine. The buildings of the town lined a single main street strung along the narrow canyon. Dr. Straup had contracts to provide medical services with three mines in the area: Utah

⁶ Richards, *Memoirs*, 34–35.

⁷ Lenore Richards interview.

Consolidated (Highland Boy), Utah Metals, and U.S. Mine. The Bingham Canyon Hospital and Clinic employed three nurses, a janitor/cook, and an "office girl." On his first day, Paul found the hospital little more than a first-aid station, and "very sub-standard in cleanliness." Fortunately, surgeries were usually performed at the county hospital.⁸ That first day also introduced the doctor to his patients. He was impressed by the diversity of nationalities among his patients; immigrants from England, Ireland, Scotland, Wales, Finland, Japan, and the Slavic countries of eastern and southern Europe were among the many ethnic groups that made Bingham and the surrounding mining communities their home.

The following day he purchased a pair of coveralls, some soap, and a scrub brush so he could scrub down his operating room. Two days later he was forced to use the room to deal with a ruptured appendix in a pregnant patient, and when she survived with no infection, he credited his newly cleaned operating room. He also began purchasing modern equipment for the hospital.

The new doctor soon settled into a routine: surgery at 6 a.m., then visits to hospital patients. The rest of the morning included office hours for medical examinations and visits to patients at their homes. After lunch he held afternoon office hours and visited hospital patients again; he also held after-dinner office hours and did evening house calls. The round-the-clock nature of mining operations required a grueling all-day routine, including on-call work. When winter came, he was often forced to rely on a horse to reach his home patients, since automobiles could not use the steep roads.

Under Richards's care, business at the clinic and hospital increased so rapidly that he could employ an additional physician. Among the reasons for the increase in patients were the ability of Paul to perform surgeries within the hospital and a growing sense of confidence among residents that he could provide the care they needed. The people of the town welcomed the doctor into their activities. That first winter, for instance, he was invited to several different Serbian homes to celebrate Christmas—visits that became annual events that he remembered fondly.⁹

A second daughter, named after her mother, was born to Paul and Ethel in Salt Lake City on September 16, 1923. Their son, whom they named after his father, was born on May 24, 1925. By then, the family had joined Paul in Bingham and were living in a house across the street from the hospital. Daughter Lenore remembers her father's daily schedule as "leaving for work at 4:30 or 5:00 in the morning"; he came home for meals, including dinner at 5:00 and a nap afterward. He then returned to the hospital and finally came home at 9:00 p.m. During "slow" times, like Sunday, Richards

⁸ Richards, *Memoirs*, 38. For a history of Bingham Canyon and the mines, see Lynn R. Bailey, *Old Reliable: A History of Bingham Canyon, Utah* (Tucson: Westernlore Press, 1988), and Marion Dunn, *Bingham Canyon* (Salt Lake City: Publishers Press, 1973).

⁹ Richards, *Memoirs*, 38-41, 43. See also Claire Noall, "Serbian-Austrian Christmas in Highland Boy," *Utah Historical Quarterly* 33 (1965): 316-25.

took his children with him as he made his rounds.¹⁰

After a time, Richards leased the hospital from Dr. Straup—choosing to lease instead of buying because he thought that owning any property in Bingham was a “bad investment.”¹¹ When he had first arrived in town, the building contained a dozen beds, “a kitchen, two small waiting rooms, two dressing rooms, an operating room, and a one-room clinic.” Gradually, the business grew into a four-story structure with “seventeen examining rooms, two waiting rooms, dressing rooms, a complete laboratory, a wonderful diagnostic X-ray department, a modern operating room, and a fifty-bed hospital with kitchen, dining room, laundry, and all [the] modern conveniences.” Because of the steep slope of the canyon, each hospital floor actually opened out onto a street. Such a major change merited a new name: the Bingham Canyon Hospital and Clinic. At its peak, sixty-seven employees and five doctors served where once there had been five employees and a single doctor.

To relieve the stress of running such a large organization, Richards constructed a terraced garden on the steep hill behind the hospital. In the mornings he watered the garden, and he spent two or three hours tending the flowers and plants in the evenings. He was proud of the garden and “did a lot of entertaining in it during the summertime.” Paul had obviously transcended his sickly youth and matured into a man of considerable energy. He also enjoyed a good joke and confessed an inclination toward off-color humor.¹²

Having established Bingham as his home, Richards brought his medical expertise into efforts at community leadership. Dr. Straup had been the town mayor, setting an example of professionals providing leadership within the town. For his part, Paul began by organizing an immunization campaign within the local schools to combat typhoid fever, smallpox, and diphtheria. He also donated professional time; during times of economic hardship, local dentists and doctors provided their services to needy schoolchildren at no cost, pulling teeth and removing infected tonsils and adenoids. Dorothy Lowman, then a public health nurse for the local school district, described doctors giving “tonsillectomies en masse” to twenty or thirty children a day. “You’d get one ready while the doctor was taking another child’s tonsils out, then take the second one in and the first one to the recovery room.” Paul presented sex education classes to the local high schools and served for six years as a member of the Jordan School Board and for ten years as its president. He was also an active leader in the local Boy Scouts, eventually receiving the Silver Beaver for his lifetime contributions.¹³

¹⁰ Lenore Richards interview and Richards, *Memoirs*, 44.

¹¹ Lenore Richards interview.

¹² Richards, *Memoirs*, 79, 84–87; Lenore Richards interview.

¹³ Richards, *Memoirs*, 45–50, 96. Lowman is quoted in Ward B. Studt, et al., *Medicine in the Intermountain West: A History of Health Care in Rural Areas of the West* (Salt Lake City: Olympus Publishing Company,

Dr. Richards's major medical accomplishments were in the area of industrial medicine. Having observed that too many of his surgical patients did not recover well because of complications from silicosis-related tuberculosis, he encouraged the local mines to introduce health measures such as improved ventilation and wetting down the dust to prevent the inhalation of fine silica particles. He also successfully lobbied the local mining companies to jointly hire an expert in industrial hygiene, Oscar A. Glaser. The two of them collected chest x-rays and other clinical information, an endeavor that eventually led to an industrial-health research project under the auspices of the United States Public Health Service. Richards later received a U.S. Presidential citation for these activities.

He also helped promote a Safety First program both locally and nationally, which led to improved sanitation and lighting, ventilation for miners, and requirements to wear helmets and safety goggles. He contributed toward the design of the goggles by making plaster faces, exposing them to dynamite blasts, and analyzing the patterns formed by the embedded particles. As a well-respected community leader, he was particularly effective in convincing mining officials of the advantages of safety programs. From 1938 to 1940 Paul served on Utah's Medical, Labor, and Industrial Council and served on a committee that drafted the first occupational disease law for Utah in 1941.¹⁴

Medical practice in a mining town included many emergency surgeries to treat injuries from falls, blasting, fires, floods, snowslides, and cave-ins. The dangers extended from the mines into town because of the nature of the narrow canyon into which the town was wedged. In February 1926 a heavy snowfall followed by rapid warming led to a snowslide engulfing part of the town. Fires among the debris further added to the danger. In all, the disaster killed thirty-nine town members and buried another 150. Many victims removed from the snow hours later were frozen into immobility yet had faint, slow heartbeats. When the victims were brought to the hospital, Paul instructed that they be placed in a cold room, where towels were used to wipe away the snow. Paul then instructed volunteers to gently massage the entire body of each victim, using the warmth of their hands to gradually melt away the frost. At times, sixty to eighty people were working over the frozen people. Each victim who had a discernable heartbeat, even as slow as eight beats per minute, revived and recovered.¹⁵

Later, physicians attending medical conferences often disbelieved accounts of this experience, but there had been many witnesses. A nurse,

1976), 64. On Straup's mayorship, see Ivy Baker Priest, *Green Grows Ivy* (New York: McGraw-Hill, 1958), 26-27, 35-36. Priest grew up in Bingham Canyon and later became the U.S. Treasurer.

¹⁴ Richards, *Memoirs*, 51-58. For a national perspective on the industrial safety movement, see David Rosner and Gerald Markowitz, eds., *Dying for Work: Workers' Safety and Health in Twentieth-century America* (Bloomington: Indiana University Press, 1987).

¹⁵ Bailey, *Old Reliable*, 158; Richards, *Memoirs*, 63-71. Dunn, *Bingham Canyon*, 115-17, provides some vivid anecdotes of the 1926 snowslide.

Louise V. Jager, remembered an incident that occurred that day:

Dr. Richards brought in a little five year old girl, apparently dead. He took over the treatment of hot-packing the entire body. I just handed him what he needed. The doctor's lips were moving but no sound was heard. After a time the child moved her head slightly, and little slate-colored hands became pale, then there was a sigh. She opened her eyes slowly, smiled a little and whispered, "Hi, doc, I'm cold." Tears blinded my eyes. Orders were left for her care as the doctor quickly left the room again.¹⁶

Richards was also active in rehabilitative surgery. At the time, a fracture of the spine was thought to lead to permanent disability, but he reversed this belief by demonstrating that workers could recover with the appropriate surgery and care. As part of these activities, he became one of the first to perform intervertebral disc operations. His skill became so well known that during one year he operated on patients who came to him from twenty-two states. Patients also sought out his skill in repairing ruptured supraspinatus tendons in the shoulder, another common cause of disability. In 1953, along with Dr. Louis E. Viko, Richards received another Presidential citation for outstanding service in rehabilitation.¹⁷

Outside the clinic, the doctor was given to adventurousness. In May 1928 he flew across the United States as a passenger in a biplane carrying mail—a flight of twenty-two hours from Salt Lake City to Newark, New Jersey. Another time, a miner fell down the 2,500-foot-deep Yampa Shaft. Out of curiosity, Paul rode on top of the elevator cage up and down the shaft, noting the "forty-five or fifty" times that the body had struck the side of the shaft. Searchers could not find the body, and on the doctor's insistence the sump at the shaft's base was drained. They found the body—with the bones and internal organs completely pulverized within a bag of intact skin. The body had actually slipped through a gap of four and one-half inches between wooden planks set over the sump. This incident was referred to in later years as "the Bag of Bones."¹⁸

In 1948 cancerous lesions on his hands from overexposure to radium and x-rays forced Richards to leave his Bingham practice. He traveled to New York City and underwent operations that removed all the skin from his fingers and from parts of his hands. A tourniquet used during surgery caused him to lose the end of his right middle finger. During his painful recuperation, which lasted more than a year, he preferred to be away from his family, fighting an addiction to medication and resorting to whiskey to dull his pain. After his recovery, he put the liquor away.¹⁹

Having recovered from the worst effects of the operations, he convalesced in Idaho for twenty months on a ranch that he partially owned.

¹⁶ Louise V. Jager, "From Employment to Retirement: 1925–1958"; typescript, copy in author's possession.

¹⁷ Richards, *Memoirs*, 59–62; "Deaths," *Journal of the American Medical Association* 169 (February 1959): 863–64.

¹⁸ Richards, *Memoirs*, 71–72, 82.

¹⁹ *Ibid.*, 92–93.

When his daughter Lenore completed her residency in surgery at Cincinnati General Hospital, Paul joined her, reentering the practice of medicine in 1951. While he had never particularly encouraged Lenore to follow his profession, Paul “never discouraged” her in her career choice and “was a staunch supporter” once she started her studies. However, as a woman Lenore was not initially granted physician privileges to practice at LDS Hospital, a common problem for female physicians of that time.²⁰

Paul enjoyed working with his daughter and respected her professional skills as a diagnostician and surgeon. In 1953 father and daughter opened the Memorial Medical Center in Salt Lake City, naming it in honor of Paul’s grandfather, Willard Richards, and his father’s three brothers, all of whom were physicians. The practice included fourteen physicians and two dentists. The Center, built on the family farm near where Paul had grown up, is now called the Memorial IHC Health Center.²¹

In 1954, cancer returned and Richards submitted to more operations. As he suffered through terminal prostate cancer, his wife was also declining with palsy. As one of his last professional efforts, he founded in 1958 the Richards Memorial Medical Foundation to fund future medical research. The foundation currently donates about \$45,000 yearly to various universities in Utah for science scholarships and development. He also dictated his autobiography to his family, thus preserving the story of an interesting life. He died at his Memorial Medical Center on November 20, 1958, at the age of sixty-five.²²

While Dr. Paul Snelgrove Richards did not make a major contribution to any one particular field, his interests and activities contributed to smaller advances in a number of fields, refining the work of others in industrial medicine and rehabilitative surgery. Today, the town of Bingham is gone, consumed by the ravenous appetite of the open-pit mine. Yet the doctor’s legacy lives on in the lives of the people he helped and in the medical and safety innovations that he promoted.

²⁰ Lenore Richards interview.

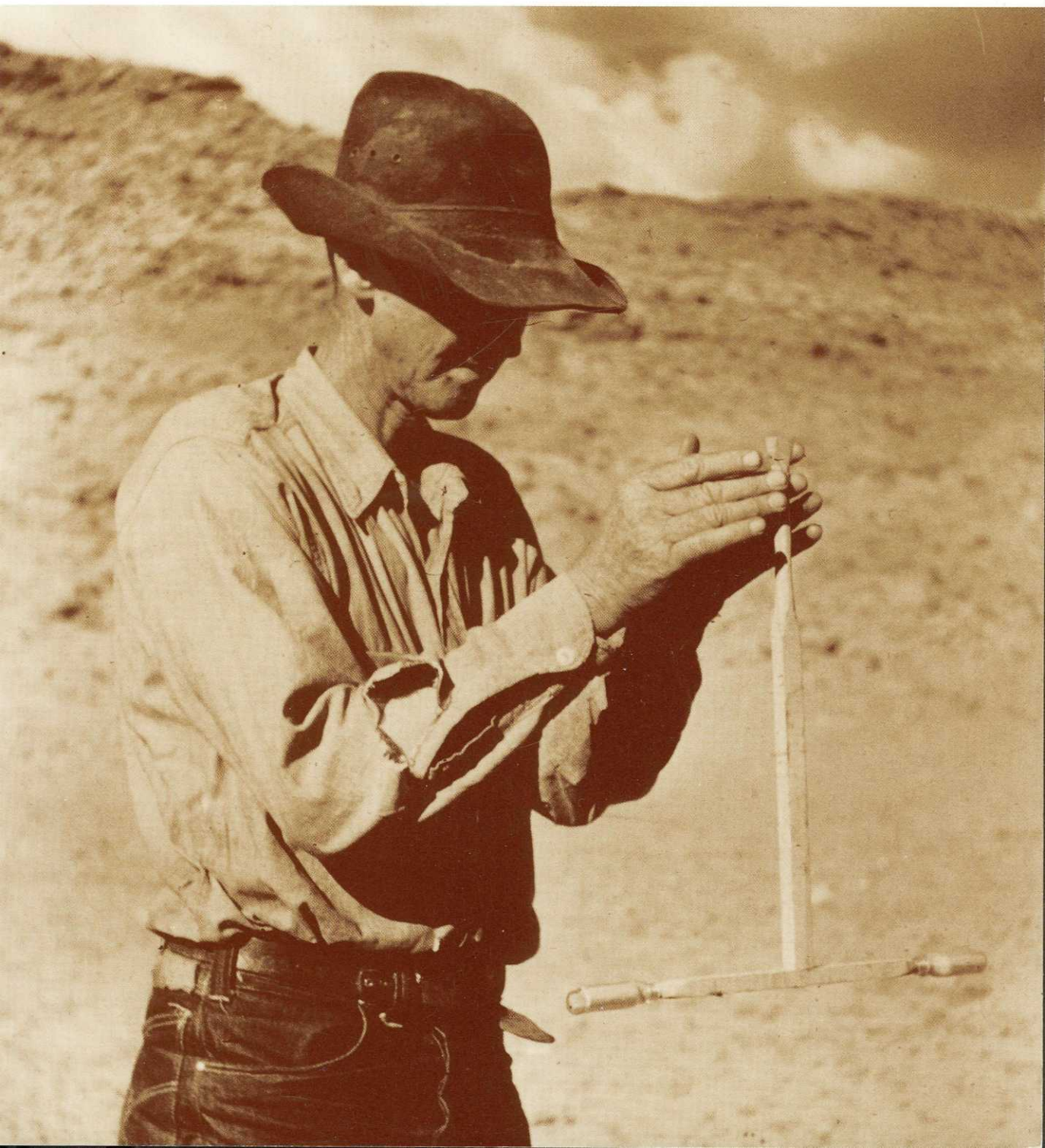
²¹ Richards, *Memoirs*, 94–95, 110, 117.

²² Lenore Richards interview; Richards, *Memoirs*, 114, foreword.

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