Dr. William Kaufman was among the very first physicians to therapeutically employ very high doses of niacin and especially niacinamide. He also used ascorbic acid, thiamine, and riboflavin, all in large doses. His groundbreaking work, particularly in treating arthritis, remains important to this day.

William Kaufman (1910–2000) received his Ph.D. in physiology from the University of Michigan Medical School in 1937 and his M.D. (cum laude) in 1938. He became a Diplomate of the American Board of Internal Medicine in 1955, and was among the first inductees into the Orthomolecular Medicine Hall of Fame in 2004.

My special thanks to the late Charlotte Schnee Kaufman (1918-2005) for enabling this biography to be presented to the public for the first time. Mrs. Kaufman wrote these notes primarily between August 2001 and February 2002, at age 83. Dr. Kaufman had died in 2000 at age 89.

Their collected papers now occupy 30 feet of shelf space at the University of Michigan Special Collections Library, 7th Floor, Harlan Hatcher Graduate Library, Ann Arbor, MI 48109. Email: special.collections@umich.edu

How can I describe the kind of person Bill was: extraordinarily creative, productive, unusual, gifted. I wish now to leave a record of his life so that others will know him as a human being and appreciate his creativity and his contributions to society. In addition to all his great qualities as a human being, Bill was a loving husband whose first concern was always me, as mine was him. But he was always ready to help someone else. He truly was a healer and a problem solver.

We lived, for 60 years, so closely that in all that time we were never apart more than a total of one month. Add to that the fact that when he practiced medicine I was his office staff, such that I worked with him on every project.

Our First Meeting

Ann Arbor, Michigan, 1936: this is the story he loved to tell, and never tired of telling. It was early in the fall semester; he gave it the date of October 15. I was a student transferring in my junior year from Connecticut College to the University of Michigan. The place was a drug store near the Michigan Union. I was at the soda fountain, perched on a stool, sipping a Coke, smoking a cigarette. (At that time, I fancied myself a sophisticate.)

He was in his rooming house when a fellow lodger came bursting into his room shouting, “You’ll never guess what I saw: there’s a girl on campus with a monocle.” For some reason, this piqued his curiosity. In an uncharacteristic reaction (he was a serious, hard-working PhD candidate also attending medical school, who had no time for social life) he said, “Where did you see her?” As his friend started to tell him, but before he could finish, Bill left the house and walked the few blocks to the drug store, came over...
to me and said, “Are you the girl with the monocle?” He swears that at that point I picked up my monocle, on a black ribbon around my neck, and peered at him. What was said next I don’t recall. But he asked if he could walk me home and I agreed.

From that time on we were inseparable. We ate many meals together at the Lantern, and as often as possible, would meet in the library or at Wikel’s drug store or Drake’s Sandwich Shop. We also would meet at the laboratory where he was doing research under a Rockefeller Foundation grant, in addition to attending medical school. When he graduated, he spent his internship at Barnes Hospital in St. Louis and his residency at Mt. Sinai Hospital in New York City. In those years we corresponded but had few visits.

The New Doctor

After he concluded his residency at Mount Sinai Hospital, from the beginning of his medical practice in 1940, I worked with him. At first we rented for a year the office of a doctor who was on active military duty. It was all new to both of us; it was sort of like play-acting, so that procedures and methods were based on ongoing experience. It really was fun, sharing everything. Then when we moved into a home office arrangement it was even more interesting. It was as if we were living in a world of our own. This continued till he stopped practicing medicine after about 25 years.

I was in charge of the office, answering the phone, making appointments, taking a partial medical history of each new patient, being present when female patients were examined, sending bills, typing medical histories and taking care of correspondence. Because of his easy fatigability and lifelong medical problems, we limited office hours to Monday, Wednesday and Friday. He developed a 10-page form for the medical history of each patient, and for the physical examination, all of which, with summary of findings (discussed with each patient) would take from 3 to 5 hours. At this rate he could see only one new patient on days that he worked.

Word of mouth brought new patients, as people heard about the special kind of medical care this was. He practiced medicine in his own way, without regard to fads and fashion. He seemed to know intuitively what the clinical answers were; but he was a thoughtful person who did not make decisions lightly.

Vitamin Therapy

It was in the early days that he became interested in arthritis. Bill developed instruments and a system for measuring and recording mobility of joints before and during vitamin therapy. He used cameras to show before and after status of an individual, and we did our own darkroom processing of film. He bought an unusual color camera for photographing a patient’s tongue, gums and eyes to follow progress of vitamin therapy. We had a system for recording and transcribing patient interviews that was custom designed by the Dictaphone corporation in the early 1950s.

Letters actually reached him when they were addressed only to “The Arthritis Doctor.” When asked, he explained that his early interest in vitamin therapy was stimulated by an unusual situation. When he was a medical student at Ann Arbor, vitamins were first being talked about. Apparently they were discussed in many courses in the medical curriculum, and he became interested in their possibilities for treating illnesses. Early in his medical practice he explored their use. I recall the first time he tried niacin, when he had what is now the well-known reaction of flushing and itching of the skin. Although this was uncomfortable for him, it did not quell his interest in pursuing the subject, and of course he soon found that niacinamide as opposed to niacin did not give those reactions. [This, and other aspects of Dr. Kaufman’s protocol, is detailed in his privately published 1949 book, The Common Form of Joint Dysfunction.]

In those days (1940s) vitamin therapy was a rarity, but we found that niacinamide could be obtained from wholesale companies, so that we were able to have an adequate supply for dispensing to patients. Not
long after, vitamins became an item that local drug stores were able to obtain. I recall that he would give a test dose to each patient to be sure that there was no allergic reaction.

He was conservative in his approach to medical problems. He prescribed drugs sparingly, always aware of the potential for harm. He was careful also in his use of vitamins and minerals, and always skeptical of claims made by drug companies.

He was an eternal scholar, reading voraciously, and he had the gift of making connections and gaining new insights. He was an independent thinker who was constantly studying and learning, not just from the printed word, but from his patients.

Bill really listened to his patients. In fact, the atmosphere in our office was unhurried, always with time and attention for communication between doctor and patient. It sounds trite to say it, but he did consider each patient an individual, a real person, not just a body.

He had a depth of medical knowledge that seemed intuitive; he could get to the heart of a problem instantly. If you mentioned a medical problem, he could leave the room to find the information he wanted, going instantly to the right book or journal. With all his knowledge, learned and intuitive, and the seriousness with which he dealt with problems, he still had the most delightful sense of humor. Bill’s playfulness was manifest in his cartoon drawings (we called them “Kaufman’s Kritters”), as well as his writings and conversation.

**Wounded Healer**

Perhaps the greatest handicap Bill had, aside from scoliosis, was his poor vision, largely the result of malpractice by an ophthalmologist who used the wrong eye drops in his visual examination. This condition worsened with each passing year, so that he lost vision completely in one eye and saw poorly with the other. Yet even in this matter he complained very little.

In going through his papers I came across two sets of items that I had seen over the years. This time I was struck by their significance in relation to each other. On the one hand, the record of his academic achievements: the papers he wrote that were published, his many academic degrees and honors; the research he did, the articles, published and unpublished; the organizations in which he was an officer, the plays he wrote, and more. On the other hand, the medical reports of his lifelong bouts with ill health, many starting in childhood. In fact, his physical limitations were so severe that from the time I knew him in 1936 he always required frequent periods of bed rest and special diets. He had little physical stamina. Most of the time he was in pain because of his scoliosis. He had many allergies to foods, drugs and other substances, to say nothing of other illnesses including labile hypertension; recurrent mononucleosis; renal calculi; congenital kyphoscoliosis; prostatic hypertrophy; and degeneration of cervical intervertebral discs from whiplash injury.

Our life was unusual in the sense that we never had children, and that we were together, from 1940 to 2000 save for perhaps a total of a few weeks. There was an intimacy such that we knew all about each other.

Quite apart from his intellectual gifts, he cared about people which of course should be a primary characteristic of a physician. I remember how kind he was: loving, serious, funny, creative. He had a passion for knowledge, and a memory to match. And of course, he kept everything in print that he was even remotely interested in. The only domestic problem we had in all those sixty years had to do with the amount of print material that he kept. It was everywhere. From time to time I would get upset about the disorder, and he would bring the stuff out to the garage. That’s one reason why there is such a large quantity of boxes filled with paper. There is great irony in the fact: that these same accumulated materials that I was upset about are now a most valuable source of biographic information.

**Renaissance Man**

Bill’s interests were not confined to medical matters. In going through the countless boxes in our garage, I found things I had
never seen: essays on nonmedical subjects both published and unpublished, unfinished novels, television scripts, unproduced plays, poetry. He even wrote scripts for a Pittsburgh meeting of his allergy society that were broadcast on the radio.

Then there were our trips to New York to see plays and musicals; lectures to attend and courses to take in New York, Hartford, and New Haven. He played the piano, often improvising; he loved Mozart. He subscribed to about 30 medical journals, which he carefully read, and clipped articles for future reference. He was American editor-in-chief of the International Archives of Allergy and Immunology. Sometimes we would take brief courses in television or playwriting, visit museums or art galleries, see plays, attend medical lectures. Often driving home late at night, I don't know how we did it. In those years he always did the driving. Looking back that seems an impossibility, but he did. Remember, he didn't learn to drive until we were married...and I was his only instructor.

The life we shared was so special. He was so extraordinarily loving. I can hardly describe it. I always came first, no matter how important other things were, no matter however inconvenient or how difficult, whatever my problem, no matter how much time it took, he was always there to help.

Closing Thoughts

Bill's parents had always struggled to make a living. In the early days his mother was a milliner at a time when women wore hats, and she had a gift for designing them. It was assumed that when he finished high school he would get a job in a factory. He took several courses in a local business school, learning Pitman shorthand, and typing. Then one day two of his teachers in high school visited the shop to talk with his mother, telling her that he should definitely go to college, persuading her that he was too gifted not to go. This changed their plans, and his future life.

But now it is February 2002, and things are not going well for me. I have some physical problems that are hard to deal with, especially since I do not take medicines for one reason because I am allergic to many, for another reason because I don't want to begin a drug regimen for chronic symptoms and become dependent on these substances, or react to them. Then, too, I notice the symptoms lessen when I'm interested or intent on other matters, being distracted by changing my mental landscape. What is hardest for me is that I can't accept and integrate my great, unmeasurable loss of my husband, and I don't think I ever will.

Related References


