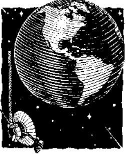

Features

Chroniques

Charlotte Gray is a *CMAJ* contributing editor.

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Dr. Max King: the sad life and early death of Mackenzie King's physician brother

Charlotte Gray

In brief

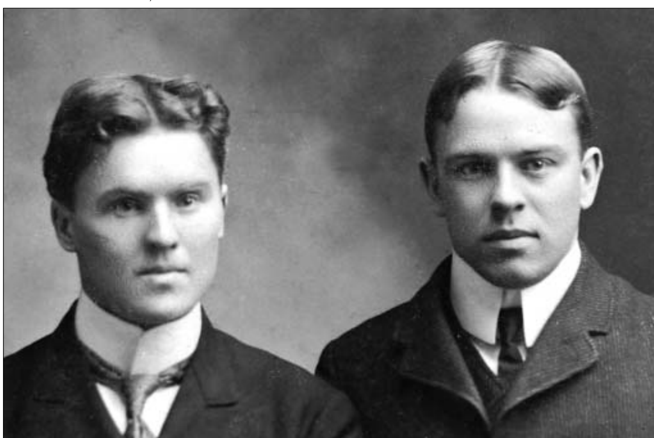
WHILE RESEARCHING HER BEST-SELLING BIOGRAPHY, *Mrs. King: The Life and Times of Isabel Mackenzie King, CMAJ* contributing editor Charlotte Gray discovered a wealth of information about Dr. Dougal Macdougall (Max) King. Although he never became as famous as his older brother Mackenzie, Gray presents a convincing argument that Dr. Max King's life and early death speak volumes about medicine and the medical profession at the turn of the century. She also argues that Mackenzie King's own life would have been much different had his brother not died at the too young age of 42. Gray's book was nominated for the Viacom Award, which honours the best nonfiction book published annually in Canada.

En bref

PENDANT QU'ELLE EFFECTUAIT SES RECHERCHES POUR RÉDIGER SON BESTSELLER *Mrs. King: The Life and Times of Isabel Mackenzie King,* Charlotte Gray, rédactrice contributrice du *JAMC,* a découvert toute une masse d'information au sujet du Dr Dougal Macdougall (Max) King. Même si ce dernier n'est jamais devenu aussi célèbre que son frère aîné Mackenzie King, Mme Gray présente des arguments convaincants sur le fait que la vie du Dr Max King et son décès prématuré illustrent bien la médecine et la profession médicale au tournant du siècle. Elle soutient aussi que la vie de Mackenzie King aurait été très différente si son frère n'était pas mort trop jeune, à l'âge de 42 ans.

"Dougal has always been one of the most stirring and active members of the Class of '02 in Medicine, and has always shown himself ready to work for any cause the Class has at heart. Following in the footsteps of his ancestors, amongst whom is the famous William Lyon Mackenzie, he has always been ready to rise to take exception to the logic or the arguments of his Class associates in their merry business meetings."
— *University of Toronto Year Book,* 1902

National Archives, C2856



Dr. Max King (left) and his brother Mackenzie, the future prime minister

The author of this cheerful passage about Dougal Macdougall King — Max to his family — was dead right. Max King inherited a lot from his firebrand grandfather William Lyon Mackenzie, the Little Rebel of 1837. He shared Mackenzie's hot temper, impetuousness and unfortunate tendency to run off in all directions at once. But unlike his elder brother William Lyon Mackenzie King, Max also had his grandfather's sense of humour and *joie de vivre*, as well as his square jaw, craggy forehead and piercing blue eyes. The future prime minister was the King who bragged about his rebel ancestor, but it was his physician brother who was the Little Rebel's grandson in looks and personality.

I learned about Mackenzie King's younger brother while writing a biography about their mother, Isabel Mackenzie King. Like most Canadians I had assumed that

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Isabel only had one son, the "precious Willie" with whom she enjoyed the most intense relationship in Canadian political history. Most of us are ghoulishly aware of our former prime minister's attempts to communicate with his mother after her death, and it hardly seems possible that there were other siblings with whom he had to share her. Yet Isabel had 4 children: Isabel Christina Grace (Bella) was born in 1873, Willie followed in 1874, Janet Lindsey (Jennie) in 1876 and Max in 1878.

Willie was always the family star, the brilliant son who would pull them all out of genteel poverty and erase the stigma of being descended from a traitor. (William Lyon Mackenzie's activities in 1837 were not deemed heroic until the early years of the 20th century.) However, Max was also a young man of promise who seemed destined to reflect glory on his family. "He has a splendid bodily presence, a leonine head and a fine disposition," Willie noted after visiting Max in the dissecting room of the University of Toronto. "I prophesy for him a great future."

National Archives, PA195587

Dr. Max King, on his way to Boer War at turn of century

Unfulfilled promise

Sadly, Max never fulfilled his promise. He was defeated, in part, by the difficulties and risks of practising medicine in the era before antibiotics and health insurance. Regardless of physicians' complaints about medical life in the 1990s, medical students and physicians today face a much easier and more lucrative future than Dr. Max King and his contemporaries did. In fact, Max was financially dependent on his elder brother for most of his adult life.

His medical career started well enough, for at the turn of the century there were plenty of opportunities for adventurous young medical students to ply their skills in remote areas in exchange for a pittance. It wasn't so different from today, when doctors can fly off to the Third World with organizations like CUSO or Médecins Sans Frontières, but back in 1901 the remote areas were within Canada. While Max was in his third year at medical school, for instance, a few cases of smallpox were reported in Northern Ontario. The Ontario government took the outbreak very seriously because a smallpox epidemic in Montreal had affected more than 20 000 people and killed 3000 of them, mostly children, only 16 years earlier. The epidemic could have been contained if the city had isolated the first patients and immediately introduced compulsory vaccination, the efficacy of which had been known for 80 years. Determined not to allow a repeat of that disaster, the Ontario government advertised for doctors to help administer an immunization program and established elaborate quarantine regulations.

It was an irresistible chance for Max to escape the suffocating domesticity of home, where his elder sisters fussed around with too little to do. Brushing aside his mother's objections, he signed up as a government health officer and took charge of an emergency smallpox hospital at Nairn Centre, a small town clustered around a sawmill 25 miles west of Sudbury. He had already been vaccinated so was at no risk himself.

True to form, Max had a great time. One day he would be driving in a dog sleigh in minus-20 temperatures to visit a lumber camp deep in the bush, where he would vaccinate 25 lumberjacks. The next day he was arguing with the manager of the Klondike Hotel, who wanted to break the law and reopen even though a new case of smallpox had been discovered. When Max finally lifted the hotel's quarantine a "howling mob of lumbermen . . . went on a most glorious drunk."

The presence of a doctor was a novelty for the trappers, natives and lumbermen of Nairn Centre, who were trying to scrape a living for themselves and their families on the harsh Canadian Shield. A steady stream of locals began arriving at Max's door. "You would laugh to see the large private practice I have — grippe, dysentery, asthma, appendicitis, heart disease," he wrote to his parents. "The day before yesterday I had my first confinement case. I managed to get through with it alright, learning on the side quite a few pointers from the old woman who was helping me." His biggest challenge was the local bar, because everybody wanted to treat the young doctor. "I now have my bureau drawer half full of cigars."

Since he was receiving $5 a day plus expenses from the government, Max didn't have to worry that none of his "private patients" could pay him in cash. However, he still had to pass his final exams, so after a couple of months up north he reluctantly headed back to Toronto. There he kept the King household in a constant state of hilarity with his raucous performances of lumberjack songs. "The worst of it is that we can't get him to bed," his sister Bella wrote to Willie, who was now a deputy minister in Ot-

tawa. “He comes into our room and sits on the end of the bed telling backwood stories.”

The army beckons

After this taste of independence, Max found family life in Toronto relentlessly humdrum. He eagerly looked around for another government job that offered both adventure and a salary, and was soon absorbed in events on the other side of the globe. In South Africa hostilities had just erupted for the third time and English Canada pulsed with Imperial fever. On the dining-room table at the King house — 147 Beverley St., Toronto — Max and his father John rolled out a map of the Dark Continent and began marking the battle sites with red flags.

In December 1901 Sir Frederick Borden, a Nova Scotia physician who was minister for the militia and defence in Wilfrid Laurier’s Liberal cabinet, announced that he would dispatch more Canadians to the Transvaal. Moreover, for the first time Canada’s troops would be accompanied by their own field hospital, with qualified doctors and the best equipment available: the newest design in ambulances and an acetylene gas lighting system for its makeshift operating theatres. Recruiting for medical personnel for the 10th Canadian Field Hospital began Jan. 3, 1902, and first in line was Dr. Max King.

John King, a lawyer, was thrilled at his son’s impulsive step. “It will give him a knowledge and experience of his profession,” he wrote to Willie, “that may never occur again, and a knowledge also of men and affairs and the most modern and scientific appliances in his profession. His exams will be allowed him and he will return with a full-fledged MD.”

Soon Max and his fellow soldiers were in Halifax waiting to embark. “This soldiering business is a great thing,” he wrote. He was issued his uniform and a “bag, greatcoat, blue working pants with red stripe, forage cap, gloves, two pairs of soft under-flannels, two shirts, sweater, toque, belts, clothes brush, shaving outfit, hair brush.” To a young man who had previously “made do” with his father’s and brother’s hand-me-downs, the full kit was a delight.

After disembarking at Durban, the Canadians travelled north to Natal and were on the battlefield by the end of March. Under British leadership, they were soon drawn into a trap and ambushed by a large force of Boer commandos. The result was a bloody defeat, but the Canadian Mounted Rifles displayed extraordinary bravery that an officer said was “well worthy of the best traditions of Canada and the whole Empire.” Eleven Canadians were killed or died of wounds, 43 were wounded and 7 went missing.

“I am rushed to death helping to operate and dressing wounded men,” Max wrote from the field hospital, which had been set up hastily behind the British lines. “I was not directly in the scrap of March 31st, but came in for the brunt of the work in relieving the men of their pain.”

National Archives, PA16431

A Canadian army camp on the South African veld

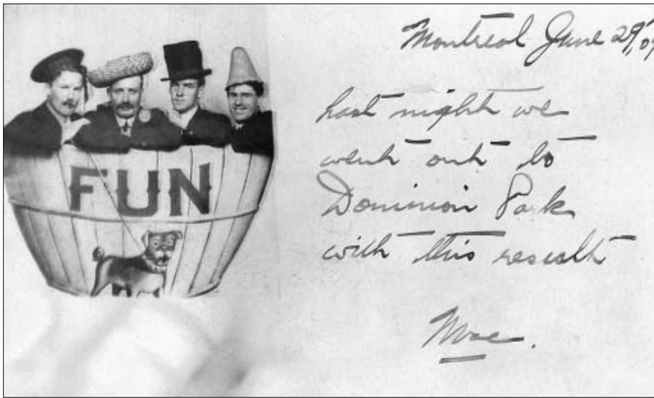
For all his boyish irreverence and impulsiveness, Max was a good and careful physician who enjoyed the challenge of patching up wounded men. He was learning to amputate limbs, cauterize wounds, stop hemorrhages and remove bullets. “I am perfectly happy, never felt better in my life as far as health is concerned and am having a world of experience.”

But his moment of glory was brief. First, he made a stupid mistake, failing to bring the “field companion” — a vital trunk full of bandages and medical supplies — during a 4-day march with the Canadian Mounted Rifles. As a result, he was demoted. Next, he caught the dreaded “enteric fever” that swept through hospital personnel in June. He was still sweating and retching with bacterial enteritis when the medical corps finally arrived back in Toronto in July. He never fully recovered his health, and from this point his medical career went steadily downhill.

A serious profession

On his return from South Africa Max was, in theory, eminently employable. The university had excused him his final exams and awarded him his medical degree, so he could now hang his shingle. By the turn of the century medicine had lost its image as the domain of glorified barbers and snake-oil salesmen, and was regarded as a serious profession, peopled by august pioneers such as William Osler. Moreover, a string of scientific advances was making surgery more effective and less painful. Lister’s carbolic disinfectant had cut mortality rates dramatically,

National Archives, PA195588



Dr. Max King (right) and friends had this photo taken during a 1907 medical meeting in Montreal. He wrote: "Last night we went out to Dominion Park with this result."

chloroform was coming into general use and the new x-ray machines allowed doctors to detect bone fractures and foreign bodies with far more accuracy. After his experiences at the battlefront, Max should have been much in demand.

But he couldn't find a job. The supply of medical graduates from Canada's 7 medical schools far outstripped the demand for services in a country where people had to pay for every doctor's visit and every prescription. Even the wealthiest families only consulted a physician after such well-worn remedies as Paine's Celery Compound ("For the Nervous, the Debilitated, the Aged") or Ayer's Sarsaparilla ("The Strongest, Best, Cheapest Blood Medicine") had failed. Max had no entrée into the tight little old-boys' network that controlled recruitment to prestigious institutions like the Toronto General, nor did he have the capital to finance the slow build-up of a private practice in the city.

Max's classmates all joked that his only answer was to marry a rich widow, but he shrugged off that idea because he already had his eye on May Wookey, who taught the piano. Marriage was out of the question until he had an income, yet that fact didn't convince him to swallow hard and knuckle down to working in less-than-perfect conditions. He refused to consider practice in a small town, a fact many of today's graduates could identify with. Max called this "eking out an existence among a pack of gossiping, narrow-minded boors." He was as impulsive as ever, inclined to quit a job if anything went wrong and then arrive home in a steaming rage.

He applied for hospital jobs in Toronto, Hamilton, Guelph, Brantford and Ottawa, and filled in time by taking assistantships with various country doctors. He got to know Ontario's geography depressingly well. His first stint was in the little town of Merlin, Ont., near Chatham, where he earned $25 plus expenses per month. The practice ended when his patience did: he could not handle life in the narrow-minded community of 350 people. The next temporary job, 150 km north of Toronto in Huntsville, ended because Max didn't approve of his employer's ruthless entrepreneurial attitude and determination to make a buck from medicine. He declared that his boss regarded medicine as a "shark game to get money and asked me to enter into little swindle games."

$10 a day

Max did manage to get on the government payroll again when he was put in charge of the smallpox isolation hospital in Galt, Ont. He earned a heady $10 a day but the job only lasted a few weeks. To go with the bad news surrounding his career, Max's health and temper were worse with each visit home. He developed rheumatism in his right hand, lost weight, had constant gastric problems and no longer played practical jokes or teased his sisters.

In September 1903, Max finally abandoned the limited opportunities available in Canada and left to try his luck in the US. It is not clear why he picked Denver as his destination, but his own ill health was probably a factor. He could not face another Canadian winter and he liked the idea of what was, 100 years ago, still a pretty rugged town. Denver was a mecca for mineral prospectors and for "lungers" — the thousands of men, women and children with "the white death," tuberculosis. The city was filled with sanatoriums and bars, and within weeks of his arrival Max wrote a cheerful letter home, describing all the future patients he was meeting through the International Brotherhood of America, the First Avenue Presbyterian Church, the Acanthus Club, the local cricket club and the local medical school. "If I have to get out and shovel mud I am going to make things go in Denver."

But Denver already had too many doctors and Max couldn't even make enough money to cover his rent. He sent desperate notes to Willie pleading for money, but they were ignored. Willie assured their mother that if Max would stop going to dinners and playing cricket he would get his practice established. His mother, however, had a far better understanding of the difficulties faced by physicians in private practice. She told him it was important for Max to meet people and that a safe, salaried civil servant like Willie had no idea of the obstacles a private practitioner faced. "When you went into office it was there for you and you never knew what it was to have to pay office rent."

Down and out in Denver

By the end of the year, Max was flat broke. Faced with the prospect of bankruptcy, he abandoned his dream of a Denver practice and signed on as a surgeon on the hospital

staff at the Copper Queen Mining Company in Bisbee, Arizona, for $1500 a year. Bisbee, a rough mining town close to the Mexican border, made Denver look like Paris. By now Max's braggadocio had worn awfully thin. "I shall only hang on to this position until I make some money and then quite possibly I shall come back to Canada," he wrote Willie.

He was back in Canada far sooner than he expected. After only 4 months in Bisbee he was rushed to hospital with an acute bladder infection that required emergency surgery. On May 4, 1905, he arrived at Toronto's Union Station.

Three years earlier, when he returned from South Africa, he had been plump and tanned even though he was recovering from a gastric fever. The figure who staggered off the train this time was haggard and hunched like an old man. He had lost 8 kg and couldn't lift his own bags without help. His family was horrified.

Going to the dogs

Eventually Max did manage to set up as a general practitioner in New Edinburgh, then a shabby Ottawa neighbourhood just beyond the gates of the Governor-General's residence. Business never thrived, and at one point he kept himself going by catering to dogs and cats as well as human patients. In 1911 he felt financially secure enough to marry his sweetheart, May Wookey, and 2 years later she gave birth to twin boys. Soon after the birth Max fell ill with what was first described as "grippe" and then diagnosed as pneumonia. In April Willie escorted his ailing brother to a sanitarium at Ste-Agathe, high in the Laurentian Mountains north of Montreal, in the hope that clear, dry air would heal his brother's lungs. After Max continued to cough and lose weight a leading Montreal specialist was consulted. He examined Max carefully and then told Willie that his brother had advanced tuberculosis from which there was practically no hope of recovery.

It seems extraordinary that Max had not diagnosed his own condition. As a physician he was well aware that TB was the most common cause of death in North America and much of Western Europe. In medical school he had learned about the discovery of the tubercle bacillus and that it was an airborne infection, and he had worked directly with TB patients in Denver and Ottawa.

Reading through his papers almost a century later, I can only assume that Max refused to acknowledge what was happening in the desperate hope that his life would not be cut short. When he learned he had TB he collapsed into a fit of weeping. He was left retching and gasping for air at the thought of leaving May and the twins after such a brief taste of marital bliss.

Willie arranged for his brother go to the Agnes (Phipps) Sanatorium in Denver, a monumental new institution high in the Rockies that accommodated more than 300 patients in varying stages of the disease. Today that sanatorium, with its majestic architecture and 3-course dinners, seems more like a spa hotel than a modern hospital. Ninety years ago, the fresh, dry mountain air and the enforced rest and isolation guaranteed that Max would be free of stress and in no danger of infecting others.

He teetered on the brink of total collapse for the first few weeks but gradually his stamina improved with the rigorous routine. Each morning he was given an alcohol rub, and along with the nutritious meals brought to his bed on a tray he took a cup of "beef juice" twice a day; every afternoon there was a silent rest period, and his light was put out for the night at 9 pm. His weight, which had sunk as low as 120 pounds from his football-playing high of 170 pounds, began to climb. By 1914 he, May and their sons were established in a little bungalow in Denver and May was giving piano lessons to supplement the allowance Willie sent each month. Max became an expert on his own disease: in 1917 he published *The battle with tuberculosis, and how to win it*.

But Max himself lost the battle. By mid-1919 he noticed a tremor in his right hand that marked the beginning of progressive muscular atrophy, probably Parkinson's disease. His constitution was so damaged by now that the disease quickly overwhelmed him. In 1921, Max's elder brother boarded a train for Denver 4 days after becoming Canada's prime minister. Willie found Max weak and partially paralysed, with not long to live. When the 2 brothers parted after a week, both knew it was for the last time. In his compartment on the train back to Canada, Willie "cried like a child."

Max died Mar. 18, 1921, at age 42. Had he lived and successfully established himself as an expert in pulmonary disease, he had the potential to become a leader within his profession. He had all the social graces and easy gregariousness that his brother lacked. He would also have had a salutary effect on his brother, with whom he had started to develop a close and candid relationship. Instead, once Mackenzie King became prime minister he had nobody in whom to confide his fears about his health and worries about state affairs. As the years advanced he became increasingly remote from his advisers and less subject to criticism on personal matters.

Thus, no one took the place that Dr. Max King might have filled. Many of the habits and idiosyncracies developed by Mackenzie King, the lonely bachelor, might well have perished at an early stage had his brother's judgement and common sense still been on call.