In 1943, trim and attractive, Alice Jaros, joined the Women’s Army Corp, serving first as a cook and then as a message decoder in WWII’s Pacific theater. Following recovery from a serious case of malaria, she accepted an offer to study medicine with the GI bill covering tuition. One of five women in her class, she entered medical school at a time when the United States was experiencing an alarming increase in the number of polio cases, with older children and young adults becoming increasingly susceptible to the disease. Between 1951 and 1954, 160,333 new cases of polio were reported with 7,514 deaths.

Until the early twentieth century, polio had been primarily a mild endemic disease – little more than a flu-like ailment. But, as the world transitioned to indoor plumbing and one-family residences, polio suddenly appeared as an insidious killer and crippler that confounded the medical community and terrified the world’s population. In 1916, a polio epidemic that began in a poor immigrant area of Brooklyn eventually spread across 26 states and claimed over 27,000 individuals with 6,000 deaths; epidemics in the US occurred each year afterwards.

Parents kept their children away from large gatherings and public swimming pools. Municipalities instituted school and business closings and, during especially serious epidemics, some areas even authorized the use of toxic chemicals like DDT. Yet, in spite of public health warnings and recommended precautions, polio seemed to “own” each summer.

As a third-year medical student, Jaros commenced her clinical experience, caring for patients at City Hospital in Syracuse, New York. That year, the hospital admitted its highest number of polio patients. In 1951, Alice Jaros, MD, graduated from SUNY Upstate Medical University, moving to the University of Pittsburgh – “Ground Zero” for polio vaccine research sponsored by the National Foundation for Infantile Paralysis – to begin the first year of her specialty training.

As a young intern, she found herself “in the trenches” amidst children desperately ill with the poliovirus at Pittsburgh’s Children’s Hospital. While a first-year resident, the United States suffered its most deadly polio season with 57,879 reported cases; 600,000 cases had been reported worldwide.

In July 1953, Dr. Jaros returned to Syracuse, to begin the second year of pediatric residency. Wishing to be closer to family, the decision to return to her hometown placed her in the midst of an especially odd polio season in Syracuse.

Normally a late spring to early fall phenomenon, the ’53 polio season had started in Syracuse in January – with the admission of three patients. A little girl had died in May – early for polio. An epidemic in Dewitt (an eastern suburb of Syracuse) occurred in late October through November – late for polio in this cold, central New York locale. Over six inches of snow fell in Syracuse on November 7th.
“Things were happening so fast. We didn’t even understand how polio was spread from person to person. Gamma globulin injections were showing some promise, but no one knew exactly when the serum should be given or to whom. There was so much buzz about a potential vaccine when I was in Pittsburgh; Dr. Salk conducted seminars that we were able to attend. His Pittsburgh-area vaccine trials were underway while I was there. When I returned to Syracuse, I learned that City Hospital was one of 14 hospitals in the United States that cared for 80% of all acute polio cases. It was an overwhelming tragic period for all of us. What we needed was a cure, a vaccine, anything – and we needed it soon!”

–Alice (Jaros) Turek, January 2007

On November 1, 1953, Dr. Jaros entered City Hospital, aware that she would be making rounds on several polio patients – one a six-year-old boy who had been admitted to the hospital in the afternoon of October 30th. He had been immediately placed in an iron lung with a diagnosis of bulbar polio confirmed by spinal tap on the morning of the 31st.

His twin sister had been brought to the hospital on that same day to receive gamma globulin. Fearing for the little girl, physicians had determined that rather than administering the standard dose of the serum in the buttock, they would give her multiple shots in both legs and arms as well as in the buttock area. The doctors informed the terrified parents that if the serum did not prevent the disease, it might make the case less serious.

Although the Salk trials would follow in April 1954, gamma globulin was the best protection offered at the time. A study of 55,000 children had shown its effectiveness in providing temporary short-term immunity. Dr. William McDowell Hammon had received a National Foundation for Infantile Paralysis grant to study the efficacy of gamma globulin; field trials were conducted in Utah, Texas and Iowa in 1951 and 1952. In the summer of 1953, the National Foundation sponsored a mass gamma globulin inoculation program, though such “passive immunity” would prove inferior to vaccine prevention.

On the evening of November 1st, Dr. Jaros was summoned to City Hospital’s operating suite where the same little boy she had attended for the past two-plus days clung desperately to life. Surgeons had determined that a tracheostomy was necessary to clear secretions in his throat and lungs. In addition to paralysis of chest muscles, his muscles controlling coughing and swallowing had been affected. The child was literally drowning in his own secretions.

At 10:25 pm, Dr. Alice Jaros signed New York State Certificate of Death – Registration Number 2348. She certified that Frank T. Flood, Jr., age 6 years, 4 months and 3 days, succumbed to bulbar poliomyelitis after 61 hours of hospitalization. He died with his father, Frank T. Flood, Sr., embracing him. On November 4, 1953 (following her twin’s funeral), Janice Flood was admitted to City Hospital. Diagnosis confirmed by spinal tap: paralytic polio.
Fast Forward – March 2006

Dr. (Jaros) Turek has been retired since 1983. In the late ’50s, she married Victor Turek and continued in private pediatric practice for a few more years. She welcomed the April 1955 pronouncement that the Salk vaccine was safe and effective against the poliovirus. Less than a month later, she feared for the safety of some children throughout the country who had been inoculated with a killed-virus vaccine that contained traces of a lethal Type I polio strain – the Mahoney strain. In the early 1960s, she watched the world transition to an oral polio agent, the live-virus Sabin vaccine.

After earning a Masters in Public Health from Yale University in 1965, and with her supportive husband by her side, Dr. Turek transitioned from private practice to public health. She secured positions in Washington, DC, Maryland and Virginia, serving proudly in President Johnson’s “Great Society” initiatives. True to her original medical roots, she devoted her career to the needs of children.

During her tenure, the United States was declared free of the wild poliovirus; the year was 1979. She retired as Director of Health for Manchester, Connecticut, in 1983 and moved with her husband to the South. Ever the caregiver, she ministered to her husband for several years before he died.

While our country celebrated the end of polio epidemics, 1988 found 350,000 individuals worldwide still contracting the deadly virus. In retirement, Dr. Turek has kept abreast of medical advances, playing particular attention to polio developments such as our country’s return to a killed-virus polio vaccine in the year 2000.

Having read that polio continues to infect close to 2,000 people per year, she has become increasingly more convinced that the public health community must see its global efforts through to successful eradication. As a retired public health official, she is all too aware of the importance of vaccination against polio.

Janice Flood, after receiving intensive physical therapy, walked again. She participated in the 1954 Salk vaccine trials held in her suburb, where an overwhelming 89% of parents (far above the national average) gave their children permission to participate in the study. Over time, she made a complete recovery and became a proficient skater and dancer – even trying her hand at cheerleading in her junior year of high school.

She received a BA in psychology from Seton Hill College in Greensburg, Pennsylvania, and an MEd in rehabilitation counseling from the University of Pittsburgh. Like Dr. Turek, she walked the same hospital halls once traveled by Dr. Jonas Salk and his research associates. Her life has been shaped by both her polio experience and the loss of her twin brother. As a wife and mother, she has enjoyed a fulfilling personal and professional life.

Today, she experiences a few annoying post-polio problems and is determined to increase public awareness of polio. It was not until she became a mother that she mustered the courage to ask her own mother if her twin suffered during his 61-hour polio ordeal.

Although relieved to learn that in her mother’s words, “He was so sick that he never knew what hit him,” she
always yearned to speak with one of his hospital caregivers even though she never believed that she’d get the opportunity.

A few years ago, she began research for a book on polio. The eradication of polio has become her obsession, as has her desire to inform young parents of the continued need and importance of vaccination against polio. As part of her research, she eventually decided to request a copy of her twin’s death certificate; she never knew what time of day he had died on that November 1st so long ago. It was then that she learned that an Alice Jaros, MD, had signed Frankie’s certificate. Fortunately, Dr. Eric Luft, Curator of the Medical Archives at SUNY Upstate Medical Center, was able to supply Janice with Dr. Turek’s address and phone number.

How could a death certificate, signed more than fifty years ago by a young pediatric resident become the basis for a friendship between a polio survivor who still misses her twin and a retired physician who still practices the art of healing? For the past year, the two have shared memories of their polio experiences – one as a compassionate caregiver, the other as a determined polio survivor.

As you have probably guessed, I am the girl who once endured whirlpool therapy treatments, the girl who fell flat on her face when she took that first momentous step, and the twin who suffered unimaginable sorrow as she tried to come to terms not only with Frankie’s death but also what a place like Heaven was all about for him and what a place called Earth was all about for her – without him.

Although I had long ago come to terms with Frankie’s death when I spoke with Dr. Turek for the first time, I cannot tell you what it meant to me to be speaking with one of the last people who ever touched him, someone who over fifty years later could still speak of polio – and children like Frankie – with such passion and caring.

In February 2007, my husband Dave and I flew to Florida to meet Dr. Turek. Every time I picture her in my mind’s eye, I place her by my twin’s side in his final moments – what a comforting thought for a now grown woman who as a little girl played the part of “little mother” to her birth partner.

More than twenty years into retirement, Alice (Jaros) Turek, MD, Class of 1951, knows, as we do, the horrors of polio and the importance of ending its reign once and for all. She is a compassionate, wise voice that speaks not only to me but also to all of us: We are bigger than the aftermath of our disease. Each, in our own way, must continue the fight for research, advocacy, education and eradication. We’ll each find a way.

Dr. Turek has helped me find mine.

Nichols has written Twin Voices: A Memoir of Polio, the Forgotten Killer, which will be available in the fall (www.iUniverse.com). She explains, “It is written in multiple ‘voices,’ and my reason for writing the book is to stress the importance of the fight for eradication.” The book includes extensive endnotes, a bibliography, and provides information about the various organizations involved in this worldwide effort.