Ten years ago Abe Lopman took a risk. He left a prestigious job and a comfortable future at one of the country’s great cancer centers, Memorial Sloan Kettering, for an enticing possibility in the small city of New Haven.

“No one then regarded Yale as a powerhouse in cancer,” Mr. Lopman remembered. “So it took a few visits and a lot of conversation with some key people—Marna Borgstrom [President and CEO, Yale New Haven Health System], Rick D’Aquila [now President, Yale New Haven Health System], and Bob Alpern [Dean, Yale School of Medicine]. They convinced me they were committed to doing something very different and very right in developing a cancer program at Yale New Haven.”

Part of their vision was going up on Park Street in New Haven—a new cancer hospital, still nearly two years away from opening, named after its major donor, Joel E. Smilow. “Very few of us get to finish designing and implementing a 500,000 square foot, half-a-billion-dollar hospital devoted to delivering top-notch care to patients and their families,” explained Mr. Lopman.

He seized the opportunity, and in February 2008 began his new job as Vice President of Operations for Yale New Haven Hospital and Executive Director of the half-built Smilow Cancer Hospital. In the last decade, he has played an indispensable role in Smilow’s story, a role that ended in October 2018 with his retirement at age 68. Charles S. Fuchs, MD, MPH, Director of Yale Cancer Center and Physician-in-Chief of Smilow Cancer Hospital, called Mr. Lopman “the architect of our great Center,” and added that his leadership and vision were instrumental to its growth into a nationally renowned hospital with a network of 12 cancer care centers throughout Connecticut.

Catherine A. Lyons, RN, MS, Vice President of Patient Services and Chief Nursing Officer at Smilow, seconds Fuchs emphatically. She was recruited by him in 2010 to revitalize the nursing and patient care programs. “Smilow would not be Smilow without Abe Lopman,” she said. In 2009 when Mr. Lopman teamed up with the newly-arisen Thomas J. Lynch, Jr., MD, the hospital’s founding Physician-in-Chief and new Director of the Cancer Center, “It was magic,” added Ms. Lyons. “It was a coming together of like-minded people driven to build a world-class organization that took care of patients and families with the utmost compassion. Smilow went from being a place almost no one knew about to a formidable facility.”

Mr. Lopman, with Dr. Lynch, Ms. Lyons, and the people they recruited, thought about every aspect of cancer care. That meant discarding the typical staff-to-patient ratio. In some areas, the nursing staff doubled. The medical school and Cancer Center hired more than 125 new faculty members, whose expertise greatly benefited Smilow’s patients. While the hospital was still under construction, Mr. Lopman insisted that some spaces be redesigned to minimize stress and noise, and to maximize amenities that might give patients and their families comfort and peace at the difficult times of diagnosis and treatment. “We wanted them to know that we weren’t focused only on the physiological part of it,” he said.

For instance, the plans called for flat screen televisions in all the waiting rooms. No, said Mr. Lopman. When a patient and family are waiting to have what may be the most frightening medical conversation of their lives, they shouldn’t be forced to listen to a stream of bad news or a screaming talk show. He put in fish tanks instead.

And speaking of those waiting rooms, he added, they’re way too big and we’re going to shrink them. “Large waiting rooms means you have a flawed system,” he said. “We were not going to tolerate waiting. We converted all that saved space to exam rooms and clinical spaces where patients could be seen, and we built systems to make sure patients don’t wait long. If they do, we have failed.”

He also put his office in the center of the hospital so he could walk through the units and interact with patients and staff, something he says he will greatly miss, along with the people he works with, “The best people by far that I’ve ever been surrounded by in my 47 years in healthcare.”

It’s clear why Ms. Lyons calls him “the cheerleader-in-chief,” and says, “He stretched our capabilities. We had to develop skills we didn’t know we had. He’s the consummate coach and mentor. He always finds the good, even if you’ve made a mistake. Even if you’re playing golf with him—he’s an avid golfer—‘if you make a terrible shot and end up in the sand trap, he tells you it’s a great position to be in. I’m not sure how he does it, but he turns things around and finds a solution. He is a wonderful human being,” she added. “We will all miss him.”

Mr. Lopman’s parents were Holocaust survivors from Poland who raised him to believe that medicine was “the ultimate and most rewarding thing you could do.” He began college at City University of New York expecting to go to medical school or become a medical researcher. Meanwhile he worked part-time drawing blood at a hospital and doing other medical jobs. An administrator at the hospital saw something in him and suggested that he would be good at administration. The idea shocked him at first, but this mentor convinced him to take some training courses.

“That was the beginning of my understanding that I could make an impact in medicine without being a physician,” he said. “But I never lost the feeling that medicine was an integral part of me and I was an integral part of it.”

Mr. Lopman describes the turnaround over the last 10 years in Yale’s reputation for cancer care and research as “unprecedented.” “Is that what makes him most proud?” “No,” he said quickly. “That’s a byproduct. I am most proud of the care that’s afforded to, and available to, three million citizens in Connecticut and beyond. I’m most proud when my wife comes home from volunteering at Smilow, where most people don’t know she’s my wife, and she tells me stories of how people feel about the place—not about their cancer, but about the place. That’s what we set out to do—to change the way cancer care was being delivered in this region. All the rest is a byproduct.”

Kate Eisemann

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