The story of Dr. Hardy's life is of particular interest today, not alone for the reason that she is a distinguished female physician in occupational medicine, but for how she developed her career of practice, teaching, and research in an age of technological medicine.

Dr. Hardy attended Cornell Medical School (1928-32), had her residency training at the Philadelphia General Hospital (1932-34), and then began her career in medical practice as a school (Northfield) and a college (Radcliffe) physician. Out of these early practice beginnings she became increasingly interested in preventative medicine and in understanding diseases caused by working conditions.

At age 39 in 1945, Dr. Hardy moved to her first job in occupational medicine with the Massachusetts Division of Occupational Hygiene. There she was assigned to investigate a hepatitis outbreak and then those cases of "Salem Sarcoid" that we know today from her distinctive work as beryllium disease.

The story of beryllium disease with the resistance to its recognition by the profession, government, and industry is well known and the control of the disease remains a remarkable success story in the annals of occupational medicine and is largely attributed to Dr. Hardy's work. Following her recognition and description of chronic beryllium disease, substitutes for beryllium were found in 1949. Dr. Hardy's clinical-research interests grew, leading her to an awareness of the hazards of lead, cadmium, asbestos, and coal mine dusts. Her subsequent substantial contribution to occupational medicine education are represented in a textbook she coauthored with Dr. Alice Hamilton, Industrial Toxicology, and in her lectures to undergraduates and postgraduate courses on her favorite theme: man-made disease. From the 1950s onward there was her special job at the Massachusetts Institute of Technology as Director and founder of their Occupational Medical Service. Later came her appointment as the first female professor at Harvard Medical School and her appointment at Dartmouth Medical School, to mention but a few distinctions.

In the care of patients she demonstrated personal concern, an ancient tradition of medicine's art. As a practitioner and investigator, she worked with disabled patients as their personal doctor, sometimes their consultant, not in one-visit contacts but in long-term care, from which she knew the circumstances of their lives as well as the natural history of their disease. With colleagues she was always direct and honest, for some, perhaps unsettling. Her autobiography, Challenging Man Made Disease, published in 1983 by Praeger Publishers, is an excellent telling of her story and that of the seminal years of occupational medicine in the United States.