Profiles in Cardiology

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David H. Spodick

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When medical historians review important twentieth-century contributors to cardiovascular medicine, David H. Spodick, M.D., (Fig. 1) stands out because of his insistence on exactness in language and thought. He has required generations of students and colleagues to think and articulate their views with precision. Those in his presence are required to meet his rigorously demanding standards. David regularly challenges popular beliefs not based on rigorous scientific thought. He champions carefully constructed research, the randomized clinical trial, and appropriate and ethical application of that work.

David H. Spodick was born in Hartford, Connecticut, in 1927. Ten years later, his family moved to Kingston, New York, where David graduated early from Kingston High School in 1944. Twenty years before the civil rights movement, he delivered as class orator a talk entitled, “No Second-Class Citizens,” in which he endorsed equality for Afro-Americans. He then attended Bard College, completing three academic years in two calendar years. While in college, David was the official parliamentarian and was moderator of the joint student faculty government council. Thirty years later, Bard awarded him a Doctorate in Science for his work in the field of noninvasive clinical cardiology and physiology. His last undergraduate year was incorporated into the N.Y. Medical College curriculum. After graduating from medical school in 1950, he interned at St. Francis Hospital in Hartford. David moved to Boston for his residency training, first at Beth Israel Hospital, then at New England Medical Center. His two years at the New England Medical Center were interrupted by two years in the Air Force. Military service offered him the opportunity to travel extensively in Europe. Traveling became a lifelong passion and an integral part of his professional career.

Although Dr. Spodick became interested in the emerging subspecialty of cardiology during his residency, his career started in earnest when he became David Littmann’s first fellow in cardiology in 1956. After participating as a special post-doctoral fellow, sponsored by the National Heart Institute at the West Roxbury Veterans Administration Hospital, he moved to the Lemuel Shattuck Hospital, where he began an illustrious academic career in Boston spanning 19 years. During that tenure he had academic appointments at all three of the Boston medical schools. His contributions to that community also included his reading all of the Boston Evening Clinic’s electrocardiograms without remuneration for 15 years. In 1976, with the support of colleagues and friends, David Spodick accepted the position of Chief of Cardiology at St. Vincent Hospital, where he joined Chief of Medicine Gilbert Levinson, an established cardiovascular researcher. Dr. Spodick has remained there for the past 27 years and has been a skilled practitioner, revered educator, and, until recently, has capably overseen the Noninvasive Unit. His academic appointment at the University of Massachusetts Medical School has enriched the young careers of countless medical students. He has become a gracious ambassador for the cardiovascular community in the United States as he receives countless invitations to make international presentations.

David Spodick’s career as a clinician, researcher, educator, and administrator in cardiovascular medicine continues to evolve after 50 years. His depth and breadth of both interest and information are legendary. However, he has paid attention to four particular areas; noninvasive evaluation of the heart, including physical examination; diseases of the atria; diseases of the pericardium; and electrocardiography. His meticulous examination of all available data, and in particular his ability to synthesize the information into well-grounded constructs, has led him to become a world expert on the latter two of these top-
ics. As such he has been referred many difficult cases for second, third, and fourth opinions. His curriculum vitae includes well over 400 articles, as well as numerous books, chapters, and abstracts. His letter writing is legendary, and he may well have set the standard for this form of scientific communication. David was honored to be asked to write the obituary for Paul Dudley White for the *Journal of the American Medical Association*. He has held many editorial positions and is an esteemed reviewer for many cardiovascular journals.

Awards and accolades have been numerous and richly deserved. Early in his career he was the Brower Traveling Scholar of the American College of Physicians at St. George’s Hospital in London (1964). In 1998, he received the Burger Award of the European Society of Noninvasive Cardiovascular Dynamics. Most recently (2003), Dr. Spodick was awarded the Melvin L. Marcus Memorial Award for his distinguished contribution as a gifted teacher in cardiology by the International Academy of Cardiology at the 3rd World Congress of Heart Disease. However, Dr. Spodick’s most important praise, according to him, has come from his cardiovascular fellows. They have recognized him for decades with teaching awards on an almost yearly basis.

As mentioned earlier, David Spodick’s greatest contribution to our profession may have been his call to all of us to remain intellectually honest, to adhere to the scientific method, and to interpret data properly. His strong belief in the randomized controlled trial and his urging the scientific community to use this methodology faithfully has no doubt led to improvement in patient care. Concerned about the absence of “good” data in the late 1970s and early 1980s, he wrote frequently on the controversial value of coronary artery bypass surgery based upon available data. These comments culminated in his 1983 article entitled, “Randomize the First Patient: Scientific, Ethical and Behavioral Bases.” In addition, he has challenged traditional thinking in many other areas. For example he admonished the medical community that inappropriate use of the pulmonary artery flotation catheter carries with it measurable risk. Similarly, in the early 1990s, his publication entitled, “Operational Definition of Normal Sinus Heart Rate” caused all of us to rethink when we should label patients as having sinus bradycardia or sinus tachycardia. David Spodick has reminded us all that we should not be too certain of what we know and that openness may be our greatest intellectual asset.

This openness likewise transcends science and is one of his endearing personal characteristics. His “No Second-Class Citizens” talk in high school was an early manifestation of his deeply held belief in the equality of all. Many of his other personal characteristics are best described by his fellows. Supportive (a father figure), affable (“the gift of gab”), knowledgeable beyond imagination in peoples, languages, and cultures of the world, and respectful of all individuals are often quoted labels. If there were one image that could portray his happiest professional moment(s), it would be that of him sitting in his small office huddled with a fellow or resident in intense conversation over a research proposal. He is loved and respected by his medical community, both physicians and nonphysicians alike.

David Spodick continues to be highly productive in the cardiovascular medical community through his work at St. Vincent Hospital and the University of Massachusetts Medical School in Worcester, Massachusetts. He is Director Emeritus of the Cardiovascular Medicine Fellowship Program at the former and Professor of Medicine Emeritus at the latter. He lives happily in central Massachusetts with his wife Carolyn, with whom he has had four children and with whom he travels extensively.

References