Historical Perspectives of The American Association for Thoracic Surgery: Alton Ochsner, MD (1896-1981)

Courtesy of Dr John Ochsner

When I was asked to write this biographic sketch of Dr Alton Ochsner, many poignant memories of my beloved chief rushed to my mind. He was the ideal mentor, disciplined yet compassionate, demanding yet charismatic, awe-inspiring yet accessible, and exemplary as a teacher, model, scientist, and friend. Born in 1881 in Bear Valley, Wisconsin, Alton Ochsner was destined for a place in medical history. After graduating from Washington University Medical School in St Louis and completing his residency training at Augustana Hospital in Chicago, he studied abroad and had a short stint at the University of Wisconsin Medical School before settling in New Orleans, Louisiana, for a notable career in American surgery. His leadership qualities were manifest early. While studying in Switzerland and Germany, he introduced blood transfusion to the European medical community and soon became “the blood transfusion specialist” of Europe. His keen sense of observation was similarly evident early in his career. Soon after joining the faculty at the University of Wisconsin Medical School, he observed that bronchoscopy would be therapeutic for bronchiectasis.

I became a surgeon because I had the greatest respect, admiration, and affection for Dr Ochsner and because he invited me to enter the field and to work with him. It was one of the greatest privileges of my life. Thereafter, together we studied and published reports on cancer of the lung, esophagus, and stomach; amebic hepatic abscess; subphrenic abscess; bezoars; and venous thrombosis.

A man whose sparkling eyes and winning smile endeared him to all who knew him, he undertook heavy responsibilities at an early stage in his career. Recognition of his astute intellect and leadership qualities led to his appointment, at the age of 31 years, to the chairmanship of the Department of Surgery at Tulane University School of Medicine in New Orleans to succeed the world-renowned Dr Rudolph Matas. There he rose to national and international prominence as he organized a prestigious department of highly capable and distinguished surgeons acclaimed for their teaching, research, and patient care activities.

Dr Ochsner’s visionary qualities were evident when he foresaw certain clinical associations that were previously unsuspected. In 1936, for example, when we first speculated on a causal relation between smoking and carcinoma of the lung, he launched a vigorous crusade against cigarette smoking. Many years later, the scientific proof of that relationship testified to his foresight. Yet at the time, he was severely criticized, even by some eminent colleagues like Evarts Graham, who later apologized to him after having converted. Dr Ochsner emphasized the importance of distinguishing thrombophlebitis from the potentially fatal phlebothrombosis, a differentiation that was critical because effective treatment depends on early and accurate diagnosis. His pioneering approaches to the treatment of carcinoma of the lung and esophagus, mediastinal tumors, and peripheral vascular disease contributed significantly to the creation of the specialty of thoracic and vascular surgery. In 1948, as president of The American Association for Thoracic Surgery, he appointed

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a committee to form The American Board of Thoracic Surgery for the certification of surgeons in this specialty.

This energetic giant was tireless in his efforts to administer his department, educate his students, care for his patients, search for causes of certain human illnesses, and improve their surgical treatments. By word and example, he taught the importance of compassion and humility in a physician. In his presidential address in 1952, he said, "While working for the benefit of humanity, let us not forget that our work is also for the benefit of the patients who seek us out in their hours of need and who need compassion and understanding as well as scientific care."

Not satisfied with his exhausting academic and clinical duties, he wrote and published many articles and books, served on medical editorial boards, traveled extensively to lecture at meeting and disseminate new surgical information, and participated in many community and national activities unrelated to medicine. As a medical student working in his laboratory, I published my first professional article, and thereafter we coauthored many publications on a variety of surgical subjects on which we were working. From him I learned the importance of bibliographic research, meticulous abstracting of publications, verification of data and references, and careful writing and documentation. It was a lesson that became a lifelong habit. We were coeditors of *Christopher's Textbook of Surgery*, and as editor of *Surgery*, he helped shape that prestigious journal.

Exceptionally dexterous, he was also resourceful, a quality every surgeon needs as unexpected events are encountered in the operating room. In one memorable incident in which preoperative studies indicated a mediastinal tumor

adjacent to the aortic arch, he found, on operation, a saciform aneurysm of the thoracic aorta. Peeling away the overlying lung to expose the aneurysm, he noted that it was briskly leaking blood. After applying a partial occlusion clamp, he unhesitatingly excised the aneurysm and repaired the opening in the aorta by means of a lateral aortorrhaphy. The first successful excision of an aneurysm of the aorta was thus performed.

I witnessed, first hand, Dr Ochsner's determination to meet the many obstacles and frustrations that life imposes. Frustrated that he was unable to establish a clinic and hospital within academia that would not only offer optimal care to patients in a single facility but would also provide a comfortable environment for anxious families, he joined with 4 other distinguished medical specialists to launch the highly acclaimed Ochsner Clinic in 1942, now a premier medical facility in the south.

These are some aspects of Dr Ochsner's legendary professional genius. But it was our personal relationship that I fervently treasure. Despite his overfilled days, he never wavered in giving me his time, guidance, and encouragement. Dr Ochsner was a surgeon *extraordinaire*, but he was also a warm and benevolent human being who gave his life to his students, patients, profession, and family. When he died in 1981, I felt as though I had lost a close family member, for as my surgical mentor and, later, my colleague, he *had* become a part of my family. He has taken his place among the giants of surgery, and he will always occupy a very special place in my heart.

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