

OBITUARY AND PERSONAL TRIBUTE

DR. EDWARD B DIETRICH — 1935-2017

Dr. Edward (“Ted”) Diethrich (Fig. 1), arguably one of the most influential cardiovascular surgeons of our time, passed away on February 23, 2017. He was 81 years old.

He received the M.D. degree in 1960 at the University of Michigan, and remained in the state for Surgical Residency (in Ann Arbor and Detroit). He then moved to Houston to train as a cardiovascular and thoracic surgeon at Baylor College of Medicine under Dr. Michael E. DeBakey. He remained there as a junior Faculty and Attending until 1971, playing an important role in pioneering cardiac surgery developments with Dr. DeBakey and his team, including heart transplantation and many others. And it was obvious to anyone paying attention that Dr. Diethrich rapidly emerged as an extremely skilled surgeon and innovator.

In 1971, he left Texas and moved to Phoenix, Arizona where he founded the Arizona Heart Institute (AHI) which became the first free-standing center dedicated to the prevention, diagnosis, and treatment of cardiovascular diseases. From inception and until recently, he led the AHI Hospital as Medical Director and Chief of Cardiovascular Surgery, and AHI’s nonprofit research organization, the Arizona Heart Foundation that propelled Arizona Heart to national and international prominence with an impressive series of *firsts*, such as establishing the nation’s first cardiac catheterization lab in 1979.

Cardiac surgery was at the center of Ted Diethrich’s early career. Famously he invented the sternal saw which became a standard tool for median sternotomy all around the world,

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and made important contributions to the bubble oxygenator among many other important contributions. His notoriety in the field took a giant leap forward when he and the AHI cardiac surgery team were first in history to broadcast on live television an open-heart coronary bypass operation in the year 1983.

His insight and genius led to another first: the development and installation of ceiling-mounted fluoroscopic/angiographic capabilities in the operating room – reportedly picking up the idea in its primordial form while visiting at a hospital in Munster, Germany in the mid 1980s. So, he was instrumental in the early development of the “hybrid suite” many years before the term was even coined.

Research, education, and training were integral components of Dr. Diethrich’s activities. He wrote more than 400 scientific papers, several textbooks, and many lay publications, in addition to producing hundreds of educational videos and films. At AHI, he trained and mentored legions of surgeons and other cardiovascular specialists from around the world, and he was a world traveler where he demonstrated new techniques and ideas at innumerable meetings and events. Personally, Ted was a complex multifaceted man: a musician and sportsman, inventor and entrepreneur, film producer and media personality. And a dog lover.

He was the most competitive and driven person I have ever come across in my own life, equipped with a degree of dexterity and self-confidence that were enjoyable to watch could up-close. And I was fortunate to have had the opportunity to do so many times, especially in the late 1980s and 1990s. Attending AHI’s first International Congress in February 1988 (in Scottsdale, AZ) changed my life – in more ways than one. It was then and there that I met Ted Diethrich, and was exposed for the first time to the idea of a less-invasive future for vascular surgery and for our specialty overall. Only a few months later (in 1988), I could refine my interventional percutaneous skills at AHI scrubbing with Ted in a number of cases performed in his endovascular suite (Fig. 2). I found the concept of “the surgeon’s cath lab” so powerful and compelling, that I went all out to develop such capabilities at MedStar Union Memorial Hospital in Baltimore. The suite was built the same year (in the Fall), and Ted came to Baltimore (Fig. 3) to join me and our team as we announced and celebrated the formation of the endovascular unit and our imaging operating room (Fig. 4) – only the second hospital in the USA to have such capabilities at that early date.

But the opportunities to get to know Ted Diethrich and work more closely with him were just around the corner. The formation and founding of the ISES (now ISEVS) International Society in 1992 (Figs. 5-7) and of the Journal of Endovascular Surgery (now JEVT) 1 year later provided such context.

Ted Diethrich will be remembered and celebrated for many years to come. I feel incredibly fortunate to have had the opportunity to intersect with such a man. Truly one-of-a-kind, irreplaceable, unforgettable. ■

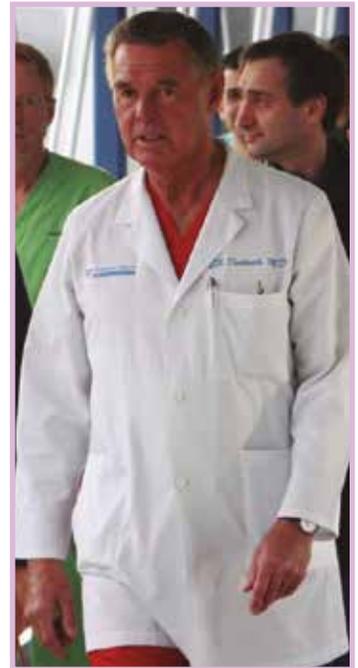


Fig 1: Dr. Edward B. "Ted" Diethrich.



Fig 2: Dr. Criado and Dr. Diethrich performing an endovascular procedure at the Arizona Heart Institute in Phoenix in 1988.

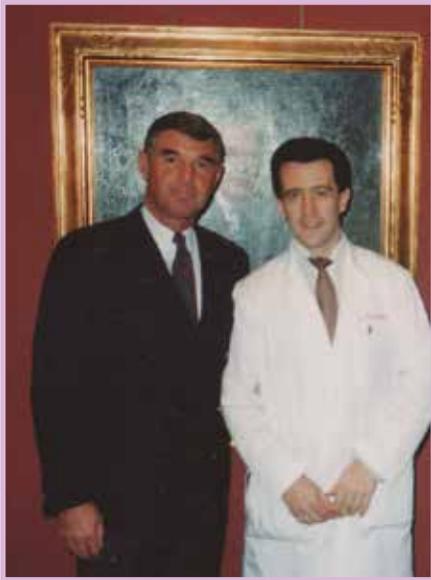


Fig. 3: at the Inaugural Celebration of the new Endovascular Unit and Imaging Operating Room at MedStar Union Memorial Hospital in Baltimore in December 1988.

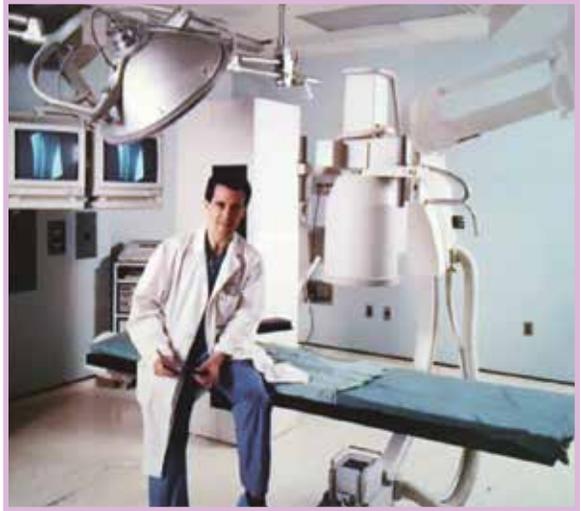


Fig. 4: Dr. Criado photographed in the newly constructed Imaging Operating Room (1988).



Fig. 5: Ted Diethrich handing Dr. Criado the Certificate of membership in the newly formed ISES Society (during AHI Congress, February 1993).



Fig. 6: meeting of the Executive Committee of the ISES Society in the early 1990s.

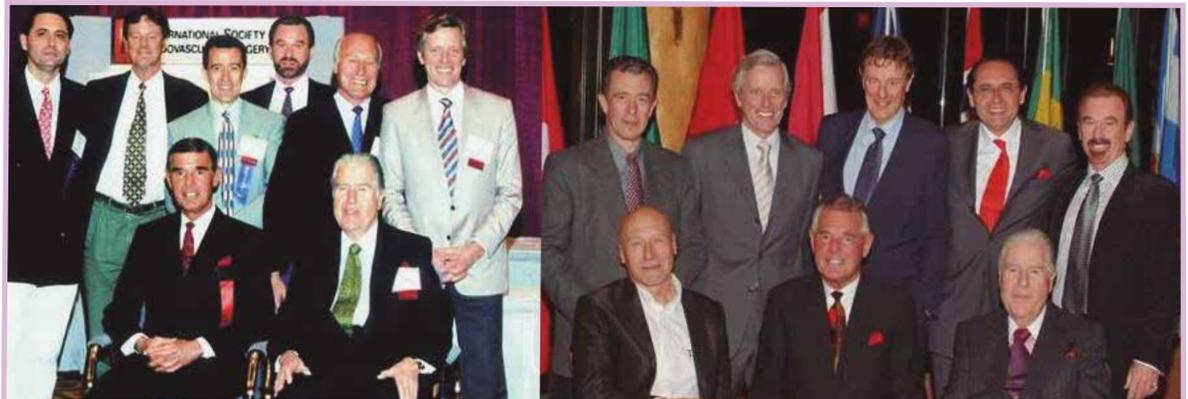


Fig. 7: ISES Founders.