

In memoriam

Alfonso Medina Fernández-Aceytuno



It is with deep sadness and a heavy heart that I write these lines of farewell and remembrance for Dr. Alfonso Medina Fernández-Aceytuno. Despite a friendship spanning more than 40 years and our shared career paths, I am not sure that I am the best person to do so, but I accept the challenge, aware of the difficulty of trying to describe someone who was exceptional, as a cardiologist, teacher, researcher and scientist and, not least, as a person. Someone unique, who has left us. I met Dr. Medina in 1976. He had recently completed his cardiology residency in *Clínica de la Concepción de Madrid* and took up a position in the Coronary Unit of *Hospital La Paz*, where I was finishing my residency. We immediately shared a vision of our medical lives, both deciding to return to our home cities to fight for cardiology, starting from scratch. That coincided with the beginning of interventional cardiology and the huge expansion known as “cardioscience”. We travelled together to courses in Geneva and talked endlessly. He, with initial help from Drs Armando Bethencourt and Carlos Macaya, brought together a first-rate team of Spanish cardiologists in the former *Hospital El Pino*, and later in the *Hospital Universitaria de Gran Canaria Dr. Negrín*. At that time, the “3 ems” (Medina, Manzano and Mainar) were considered throughout Spain as the pillars of *El Pino*. At the beginning of the 1980s, Dr. Medina began to make his mark. With his imaginative mind, he designed devices that caught the eye of industry and overcame some of the problems of that time, such as Medina balloon catheters, manufactured by Schneider, which allowed the length of the balloon to be adapted to the length of the lesion, and Medina adaptable introducer sheaths. In 1987, coinciding with the expansion of percutaneous valvuloplasty, CORPAL was founded, a joint enterprise between persons working in Córdoba and Las Palmas to collaborate in making progress in new interventional techniques, formulating questions together and attempting to use our experience in each center to find answers. Data were shared and exploited together. Thus, CORPAL aspired to achieve a medical approach free of

personal considerations, a meeting of minds, with constant self-auditing and a collective ethos. We wanted to learn through experience rather than by reading about the experience of others. Together we organized CORPAL courses in interventional cardiology and published our clinical research. Dr. Medinas’ contributions were many and brilliant and his proposals were always surprising, contrasting with his unconscious humility and unassuming nature. Perhaps his greatest contribution was his coronary bifurcation classification, which has been used worldwide since its publication in *Revista Española de Cardiología*. This classification was created without any grand design, simply for the purposes of our shared data. At that time, there were several complicated classifications, which lacked clarity. Medina’s classification was adopted by the CORPAL group with ease and, on its presentation at the PCR in Paris in 2005, caused quite a stir. So much so that we hastened to describe it in a Letter to the Editor published in *Revista Española de Cardiología*. The letter received so many citations that it somehow helped to increase the journal’s impact factor (to date, it has received 335 citations).

However, besides his multiple contributions, I believe that what really stood out was Dr. Medina as a person. His ingenuity and deductive ability, together with his serene analysis of any topic, were always captivating. He never lost his air of perpetual resident, making him a natural ally of the succession of trainee cardiologists he mentored. He never attached importance to what he did and felt enormously responsible for the work in the hospital, which he found tremendously fulfilling. Our talks about medicine and life were constant. Throughout these years, talking and discussing matters with him has given me enormous intellectual, medical, and scientific enrichment. Alfonso was the best medical professional I have ever known, the most humble, and the least self-regarding. He oozed humanism with his highly critical mind, which impressed everyone who knew him. He was respected and feared for reasons I don’t understand, because he was always serious but kind to everyone and supported and mentored all those who arrived at the cardiology department over the years. He was interested in humanity and what would become of it. He feared the destruction of the planet. As the genius he was, he combined intellectual sublimation with a lack of self-regard. He had no difficulty in reaching the heights while seeing himself as the lowest of men. For him, he was the least important person in the cardiology department. This was his extraordinary greatness, which we should proclaim rather than silence. He dreaded retirement, as it would mean the loss of connection with the hospital, his true home throughout his life. However, he became deeply engaged in leaving his legacy in the best hands, which was his last achievement. All his bets paid off.

Last, a bitter question must be asked. What sort of society are we? How are we able to waste the talent, experience and dedication of an internationally renowned clinician and scientist simply because he has reached the age of 70 years? If that was his life, why did they take it away? I was lucky enough to see Dr. Denton Cooley perform 15 interventions under extracorporeal

circulation per day in the Texas Heart Institute when he was 79 years old; he was a loved and respected figure in the center and nobody could entertain his leaving. I believe he was active until his death. In 2003 I visited China on both business and pleasure with Dr. Tsung O. Cheng, born in China and a university professor in Washington, as well as an admirer of Alfonso. There I met his friend, Professor Wo, whom we visited in his home. He was 92 years old and had been directing heart surgery in his center for the last 4 decades. He kept an office in the hospital and mentioned that he had been active until the age of 85 years; he maintained all his mental faculties and was completely lucid. He was much loved

and respected and nobody could do without him. I believe our beloved Alfonso deserved such recognition during his lifetime, to be appointed an unpaid advisor, a great *aficionado* of medicine, a lover of the hospital, proud to have him and maintain his leadership, proud of his prestige. That did not happen and he was cast out. What an unfeeling way to hurt the heart of a genius. . .

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