



Raúl Oliveri (1929-2013)

On the 5th of May Raúl Oliveri died unexpectedly and tragically.

While medicine appears as a technical trade at the crossroad of many sciences and as the historical development of a collective effort, there are men who contribute to impress upon it a sudden boost with their personal drive; Raúl Oliveri was among them.

Those who participated from the start in his strategic plan to fine-tune the Cardiology Service at the Hospital Italiano de Buenos Aires, and through it that of Argentine cardiology, with the fast and impressive development of world cardiology, knew very well that in addition to being a passionate cardiologist, “el Rulo” (as we called him at the service) was a man who supported literature and the arts and kept a strong political commitment with Argentine reality.

BRIEF MEDICAL REVIEW

In a brief review of his medical achievements we should start by mentioning that he created and became head of the second coronary care unit of Argentina, as he wrote in memory of his friend “Quique” (referring to Carlos Bertolasi): “We met in one of SAC’s Congresses and immediately there grew between us an intense mutual affection and professional respect. Shortly after, he opened the first coronary care unit in Argentina at the Hospital Argerich. I followed suit and the following year (1966) opened the coronary care unit at the Hospital Italiano.”

He quickly developed research on the pathophysiology of pump failure with bedside hemodynamic monitoring, that won the Argentine Society of Cardiology Award 1970 for “Left ventricular heart failure in acute myocardial infarction.” Moreover, his broad clinical experience was acknowledged in 1973 with the “Beta” Award of the Argentine Society of Cardiology, for his work “Rupture of the interventricular septum in myocardial infarction.”

He incorporated, for the first time in the coronary care unit, a novel “M”-mode ultrasound scanner (Eko-line), with which we tried to simultaneously measure the left ventricular pressure (pulmonary capillary)-volume (echocardiography) relationship to calculate its distensibility slope during AMI.

He pioneered the introduction of modern hemody-

namic equipment which was used by Dr. Fierens and Leguizamón, Argentine disciples of coronariography initiator, Dr. Mason Sones, to perform the first coronary angiographies.

In the Cardiovascular Surgery Service, in late 1968, Dr. Suarez (trained in the United States) performed termino-terminal interposition of a saphenous vein segment in the right coronary artery of a patient with refractory angina, first attempts of what would later become the most famous achievement of Dr. Favaloro, the aortocoronary venous graft. It is worth recalling that in mid-1969, in a temporary visit to Argentina, René Favaloro performed several intramyocardial internal mammary artery implantations (Vinberg technique) in the service, and even the coronary artery bypass graft, CABG he had already begun to develop at the Cleveland Clinic in the United States.

Dr Oliveri took special care to instill in the service an atmosphere of open and unrestrained discussion, either at the patient’s bedside or in clinical case discussions, keeping the discussion meetings open to cardiologists and their patients from other services

In 1981 he published the book called “Adult Clinical Cardiology”, which outlines the different cardiac syndromes, illustrated by the experience gathered in the service during those years. His spirit of comradeship is expressed in the book cover, where the position of the seven authors followed a strict alphabetical order.

The preface says “All of us members of the Cardiology Department of the Hospital Italiano, have long participated over the years in its growth, contributing within our possibilities to grant it certain characteristics that we consider inherent to the medical practice. On the one hand we have tried to adapt to the overwhelming scientific-technical revolution of our time, trying to achieve an acceptable level in accordance with the limitations of the country in which we operate. But perhaps the essential element inside the authors’ medical ideology lies in a deep respect for the patient in his dual capacity of ailing individual, faced to his physical limitations and to the possibility of his own death, and in his social condition, ruled by his personal, family and work responsibilities. This idea defines a conduct and a humanistic ethics, in the true

and deep meaning of the word, that mark our professional activities and that we try to instill in the generations of young physicians who year after year come to our Service as residents or fellows of the country or from abroad, seeking technical training that will enable them to serve as cardiologists at different latitudes. “

The coronary care unit of the Hospital Italiano de Buenos Aires was a real medical cardiological school, where not only countless residents, fellows and interns from other services were formed, but also highly specialized nurses and technicians in cardiology, including technicians specialized in catheter placement, whether central or Swan-Ganz and in intra-aortic balloon pump counterpulsation. He managed to build and install completely the country's largest Cardiac Intensive Care Unit in the spacious ground floor of the new hospital (built with money FIAT had assigned for Oberdan Salustro's frustrated rescue), with funding obtained by the “ProCor” foundation he created and directed to finance the activities of the service. In this large unit, the integration of the joint management of clinical patients and cardiovascular surgery continued.

When walking along the broad central aisle of the coronary care unit, designed and planned in detail by Raúl, you can still delight in the row of impressionist paintings he selected.

In 1999 he published his major work, “Heart Failure”, a comprehensive treatise that goes from molecular biology to the most innovative treatments, summoning all national and a large number of foreign authors involved in the subject. As Jay Cohn writes in the foreword: “This book comes, therefore, at a propitious time. It provides a detailed analysis on most of the subjects that are of great concern to scientists and doctors around the world, but keeps its roots in Argentina and Latin America, as its information comes from leading South American medical experts.”

From 1998 to 2002 he directed the Argentine Journal of Cardiology and imprinted upon it a real Copernican turn, consolidating a team that has been stable for the last 15 years, trying to transform the AJC into a cardiology journal that is truly read in the country, leader in Latin America and with the possibility of re-inclusion in the Index Medicus.

NOTES ON HIS PERSONAL LIFE

He told me that in his early teens, he followed the development of World War II by listening to the radio and placing over a map of Europe pins with flags of the different fighting armies. He also expressed his immense relief and enthusiasm when he verified the movement of the Red Army flags breaking the siege of Stalingrad, with their subsequent unstoppable advance to Berlin.

I do not know when, but possibly since that time he sympathized with the feat of the Soviets and then became a member of the Argentine Communist Party.

In the interregnum between the military dictatorships of Onganía and Videla and during Campora's presidency and the end of Perón's one, there was a complex period but with great effervescence and expectation in huge masses of people. They received their first bucket of cold water with Perón's arrival on June 20, 1973, which has gone down in history as the Ezeiza Massacre. I was a first-hand witness as coronary care unit doctor awaiting Perón's arrival in an ambulance of the Hospital Argerich parked at the stage mounted in the bridge preceding the airport.

In that period the Head of Cardiovascular Surgery was Dr. Domingo Liotta. We received a delegation of cardiologists and cardiovascular surgeons of the Popular Republic of China, who upgraded their skills in the coronary care unit and took with them the technical knowledge to make biological pig valves, developed by Dr. Liotta himself and manufactured in the Cardiovascular Surgery Service.

At that time Dr Oliveri traveled with a delegation to the Popular Republic of China and personally met Chou En-lai, Mao Tse-tung's comrade and builder of modern China. Upon returning, even though the Chinese regarded the Soviet Union as social-imperialist (socialist in words but imperialist in practice), a concept rejected by the pro-Soviet CP to which he belonged, he acknowledged in a public hospital talk the huge advances of the Chinese revolution in different aspects and especially in medicine with the introduction of the “barefoot doctors” in rural communes after the Cultural Revolution.

After March 24 1976, in the dark years of the military dictatorship, several medical practitioners disappeared, some of them even taken from the hospital premises. In this situation, for a time, he attended the service with a revolver concealed in his clothes.

In the eighties he told me he was participating in a study group on the theoretical analyses of Antonio Gramsci and after the implosion of the USSR he resigned, disillusioned, to the CP.

I remember him leaving the hospital alone, after retirement, carrying under his arm the Manet painting, “Claude Monet painting in his Studio boat”, which was on the wall of his office.

He had a great passion for building, not only services, but also human groups, surrounding himself with the best people to achieve his goals, even if they disagreed with him or might eventually overshadow him. The groups he formed continued overtime, despite personal differences and the small miseries and injustices of every institution.

He did not fight to accumulate positions and his efforts did not receive the recognition he deserved, both in the hospital he drove to its present situation as in the Argentine cardiology he helped to develop.

His last years were of economic hardship, mainly because his savings which were kept in custody by a friend without any signed document were denied to him upon his friend's death by his descendants.

Perhaps his greatest mistake was the same naivety and trust his father, as a clerk in the city of San Pedro, had observed in farmers, who were offended when offered a receipt for the deposit in his safe of the “wads of cash” they brought after the harvest, because his word was enough.

THERE'S STILL MORE

In all his writing his elegant style and literary qualities can be appreciated, and referring to Borges he refers to himself when he writes: “And even when it does not relate to his own death we can perceive in his tale that he, somehow intuits his own in that alien death that snatches a loved one...”

He actually thought that “A doctor learns to accept and value the ungraspable vastness of life. The

humanist relates to the patient from the deep understanding of the uncertain signs of the approaching reality of death. Anyone who does not may be a scholar in medicine but never a doctor.”

And he concludes by saying: “In this immeasurable human exchange between two beings, one that trust and the other that protects, largely resides the secret of human and reasonable medical care.”

Paraphrasing Jacinto Benavente’s quotation, “When we die there only remains that which we have given”. We, those who have received, will always appreciate your passage through this life and ours.

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