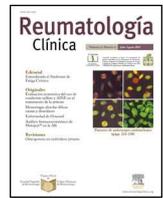


Reumatología Clínica

www.reumatologiaclinica.org



In memoriam

Dr. Carlos Ossorio[☆]

My knowledge of Dr. Carlos Ossorio Castilian as a medically relevant and exceptional human being is related to knowing him from my inclusion at the Hospital de la Princesa and the very difficult initial years after the creation and during the development of the current Rheumatology Department.

On the death of Carlos Ossorio, I think of the unique dedication that I made to him in my doctoral thesis: “To Carlos Ossorio Castellanos, exemplary companion.” Indeed, I said it then and now affirm it at his loss, because we worked together long enough for me to make such a categorical statement from the knowledge of his personality.

I met Carlos in May 1977 and I had a very intense relationship with him until 1988, when he left the Hospital del Escorial. Later, it was more sporadic.

Carlos had done his residency in Internal Medicine then at the Great State Hospital, with special emphasis on Rheumatology and had earned his place at the hospital when I joined there in June 1977.

Together we worked hard to structure a Rheumatology Unit using the possibilities offered by the hospital, invariably on the basis of adequate clinical work.

Carlos was a very intelligent, studious person and who, during this first phase of organization of the unit, analyzed the possibilities offered to us, so orderly and meticulously, as was indicated for a patient's history or treatment.

He always showed great interest in teaching undergraduate and graduate students, looking at the horizon for the possibility of research, but always stating as a prerequisite that assistance to our patients would not be affected.

He proved to be a great teacher in the training of specialists, as he formed our first residents, initially, Armando Laffón.

His supervisory capacity in clinical work, and in setting goals to be covered by studying, made him a reference person who kept in his environment not only young people from our unit, but also all the people who visited us, medically associated.

Hard work, intense study, warmth, humor and talent to dramatize any situation, from a condition of extreme modesty, made Carlos Ossorio unique and indispensable for the consolidation of any project.

Carlos enthusiastically encouraged the morning and afternoon shifts, from 9 to 6, exclusively, to make possible the reality of a rheumatology nucleus, which started from scratch and had as its first office a closet. It was extremely demanding that academic

activities, meetings, seminars, etc. be held in the afternoon; because he understood, and rightly so, that, ultimately, these tasks would damage morning care and ultimately adversely affect our patients.

In just 2 years he was excited when the first part of his dream, which was to have a unit that would serve outpatients, admit Rheumatology patients, respond to consultations with other services, and do the techniques of the specialty, came true. Carlos gave great importance to in-hospital reports, because he understood that, in addition to care provision, it made possible the incorporation of a new, authentic specialty to the hospital.

From standardization of care, Carlos gladly accepted, not only teaching medical residents to whom he poured all his teaching ability and tremendous energy, but also teaching fifth grade students, whose theoretical program he expanded and nuanced.

Dr. Ossorio was also a key person in the development of academic activities for the afternoon that gave meaning, coherence, and promoted our professional work.

Every week, we had: a general session in which all hospitalized patients were reviewed, a medical-surgical session, a radiology meeting, a clinical session in which a single case was analyzed and a review of the most interesting diagnosis at the polyclinic. Every two weeks we had a journal club. The guardian of this was Dr. Ossorio Castellanos, with humor, with a lot of humor to avoid conceit, but with much rigor.

His work allowed the group to think that we might someday become a team.

Once this stage was covered, we started thinking about clinical research and in this journey we found several fellow travelers for whom Carlos made things easy and pleasant. He had charm, the charm that made it easy to open more varied doors.

Carlos Ossorio was also a lover of innovation. Although during his residence he did not enjoy that possibility because his hospital was going through a difficult time due to weak prospects that the institution had; once that uncertainty cleared with new additions of persons and services, Carlos brought it with all the excitement he contained, which was a lot, to modern times.

He was very attracted to innovation, but not as a thought or a medical trend, but rather loved innovation to meet the needs and then to apply it as soon as possible.

From this intellectual attitude, he venerated both clinical and basic research, but it was due to his interest in clearing the unknown and breaking new ground. He cared very little about publishing; he understood that our journals were unsound, parasitized by ambiguous and weak studies. He only accepted the publication when it was the natural result of a correct method. In the journal club he clearly expressed that position.

[☆] Please cite this article as: Sabando Suárez P. Dr. Carlos Ossorio. Reumatol Clin. 2014;10:272–273.

Since he studied with great intensity and that knowledge rested with him because of great clinical training, he constantly proposed working lines. I remember some that he had put on the table in a few months, and I remember them due to their exponential growth in just 24 months, fueled with the old formula: hard work and thorough study.

Very soon, he proposed to study anything from basophil degranulation to gold salts' role in type I hypersensitivity in the pathogenesis of rheumatoid arthritis or hydantoins and lupus-like diseases, etc.

We began to publish and/or communicate in Congresses, modestly but continuously, with which Carlos got the scientific consideration which encouraged and satisfied him.

He also participated actively in a partnership we established with the membrane unit headed by Dr. Emilio Muñoz at the National Research Council, in order to work on experimental arthritis models, etc.

But Carlos, as I said, was reluctant to accumulate merit for the simple fact of building up curriculum, more so when obtaining academic degrees, perhaps influenced by his college experience, which was uncomfortable.

Convinced of the need to cover these procedures, as a thesis he presented a very interesting paper on "Liver disorders in rheumatoid arthritis."

To our Rheumatology Unit, at this crucial time, first came Armando Laffón, in the second year came Aurelio García Monforte and Rita Ortega came the following year. After three years, Carlos said that the unit already had the walls and we began building the roof and tried to achieve normality.

In 1982, when I was assuming political responsibilities, Dr. Ossorio agreed to take over the leadership of the unit and my associated Rheumatology class at the Faculty of Medicine of the Autonomous University.

He developed his responsibility brightly and well, both before and then, and when the circumstances were adverse he always acted with the criterion of reason from some higher principles.

When his level of medical and research maturity allowed us to contemplate that the presentation of his doctoral thesis could be imminent, his health seriously declined, a process never accurately diagnosed.

In 1988, having already defined the structure of the unit, all places standardized and with a tendency toward sustained growth, he decided to leave the Hospital de la Princesa and go to Hospital del Escorial, thinking, perhaps, of the great work the great village doctors in post-Civil War were forced to exercise for a while in rural areas.

Carlos Ossorio was a very cheerful person, with a keen sense of humor that was often used to stop dogmatic teaching or frauds, from the youngest to the oldest members of the audience. How he enjoyed pretending I was a grungy! All this was from his good friendship and camaraderie that for those who were accompanying him at work was a privilege.

Carlos was a hunter and a lover of good food, and from these hunts came memorable evenings.

Travelling in his company was nice because he was also a great reader. Travel and especially rooming led to the acceptance that a practical joke would induce shock and laughter.

I want to finish these lines with reference to the political commitment Carlos always exercised with tranquility, calm and consistency.

Carlos was a member of the Workers' Commissions (CC.OO.) and the Communist Party for many years. In CC.OO., he was associated with it from its beginnings in the underground, the Communist Party shortly after and later enjoying the consideration of some of its political and labor leaders, but not without the admiration and respect of his comrades.

I must emphasize that his political activism never caused a rift in relations with anyone in the unit, in fact it was quite the opposite. Not a single gesture of sectarianism was displayed. His flag was solidarity.

Farewell Carlos, a cruel disease that caused your early departure saddened us all, for you and yours, and for us to lose a close friend, a perfect man, a good friend of his friends, a wonderful person and a great rheumatologist.

Goodbye, farewell.

Pedro Sabando Suárez

Ex-Chief Servicio de Reumatología, Hospital de la Princesa, Emeritus Doctor, Servicio Regional de Salud, Spain

E-mail address: psabando@gmail.com