

From Jerry C. Rosenberg, MD, PhD

Fifty years ago I was part of a multi-discipline team starting a deceased donor renal transplant program at Detroit General Hospital. We were all faculty members at Wayne State University and I was the surgical representative. Because I had been engaged in research on the immunological mechanisms of rejection (an extension of my PhD thesis on septic shock) and, with great hubris labeled my lab a "Transplant Laboratory", I undertook the responsibility of arranging for tissue typing and crossmatching the donor and recipient.

I called Dr. Terasaki, introduced myself and asked for his help. As he had done for untold numbers of other novices in histocompatibility testing he generously offered to do whatever he could. Although I was loath to admit it at the time, I had not kept up with the new and growing field of immunogenetics and remained wedded to immunochemistry. For those who wanted to utilize Terasaki's method of histocompatibility testing, (the microlymphocytotoxicity assay) Paul would send out bags containing beads, an anticoagulant and a holding medium in which the patient's blood was placed and then sent to Los Angeles for HLA typing and crossmatching. We would wait for a phone call from his laboratory and as soon as we learned the crossmatch was negative, we took the deceased donor to the operating room and proceeded with the transplant. No surgeon would do a transplant without first having a Terasaki crossmatch for fear of courting hyperacute rejection, the devastating evidence of antibody mediated rejection in a presensitized patient. This phenomenon is now virtually extinct in clinical transplantation due to Terasaki's innovations and influence.

Dr. Terasaki's generosity and willingness to share what he knew about HLA is an example of collegial cooperation that is unequalled in the scientific world. He trained large numbers of scientists and their staffs by allowing them to visit his laboratory and gain experience and instruction. That is how our laboratory was started. People from my lab spent time with him and brought back the information and knowledge which we lacked. I became one of the few surgeon-laboratory directors in the field of histocompatibility testing because of Paul Terasaki. We became friends and found that despite different backgrounds we had many things in common. We were born in the same year. He was a few months younger than I was. Our sons went into medicine. Our wives were artists. When he was up for tenure in the Department of Surgery at UCLA, he asked me to write a supporting letter. It was an honor for me to do that.

From 1968, when I first contacted Paul Terasaki and asked for his help, until the last conference that was convened just recently to honor him, he continued to be a source of knowledge and an example of generosity which has been unmatched by any medical scientist or practitioner I have encountered in the more than 60 years that have passed since I graduated from medical school. I have been humbled by his humility and kindness. There is no question in my mind that he should be considered the exemplary originator and leader of our profession, the Father of Histocompatibility Testing.