

Eliot Corday (1913–1999): A giant in cardiology, with a human heart

On the stage of world cardiology, only a few actors have played a leading role both as a scientific pioneer and as an architect of its structure and organization. Dr. Eliot Corday was one of those few actors.

Eliot was born in Canada in 1913. As he told his family, his decision to become a doctor was made at a very early age in his childhood after being saved from near death (a similar decision at a similar age in a similar situation was made also by the writer of these lines). The year 1940 was when not only his life-long career as a physician, but also his life-long bond with Marian, started. During World War II he served in the Canadian Air Force, and after the war the young Corday-family moved to New York. There he worked first with the, later to be, Nobel Prize winner Dickenson Richards and then played a crucial role in developing the theory and praxis of exercising the heart on a two-step footstool with Arthur Master, a pioneering method of cardiac diagnosis. Although born in Canada, Corday became “chauvinistically proud to be a naturalized US citizen” [1].

In 1949 Los Angeles became the Corday-family’s home and Cedars of Lebanon Hospital (later Cedars-Sinai) Eliot’s home-ground, for the rest of his life. Here his talent for innovation and his born aptitude to educate and teach blossomed. Beyond becoming a much-respected clinical cardiologist, Corday pioneered invasive cardiology as well as non-invasive diagnostic tools such as ambulatory ECG monitoring and nuclear cardiology. His interest in sudden cardiac death, ischemic heart disease and related subjects led to the concept of intensive coronary care units; the important role the nurses play in these units was emphasized by Corday during his presentation in 1965 at the second Bethesda conference. Under his leadership, Cedars of Lebanon developed into one of the leading academic cardiology centres, packed with talented young fellows, from both America and overseas.

Eliot Corday played a decisive role in the life of the American College of Cardiology (ACC). This organization was started in New York in 1949 as



a modest platform for those American cardiologists, mainly recently immigrated, who at the time felt marginalized by ‘the elite New York and American cardiology’ and by the American Heart Association, whose leaders ‘reflected the cultural attitudes of their time with respect to issues of religion, race and gender’ [2]. Eliot Corday’s early joining of the College

was a great boost to its prestige and an enormous contribution to its growth and towards establishing its role in American and international cardiology. Corday was elected ACC President in 1960 for a two-year term and later played a major role in planning and setting up the ‘Heart House’ in the early 1970s.

Corday was a forerunner in establishing a relationship between the cardiology community and the American Government. As Bruce Fye writes, ‘Corday thought the college could play a vital role in overcoming the time lag by coordinating occasional meetings on cardiology topics between government officials and nongovernment experts’ [3]. Corday’s frequent invitation to advise US Presidents, to testify time and again before Congress as a representative of the cardiology community, made him a leader in American medical politics. He flew back and forth to Washington — sometimes on a weekly basis — to speak with senators and representatives about increasing funding for medicine and research.

Corday’s role on the international scene was underlined when he initiated and later became Chairman of ACC’s International Circuit Course Committee. In 1961 he was on the faculty of the first Postgraduate Course in the Philippines and Taiwan. Upon Corday’s recommendation, these international courses became frequent events and were considered by Corday to be ‘missionary work’ becoming an important part of American foreign policy [4]. In the 1960s and 1970s he travelled with the faculty extensively throughout the Soviet bloc nations and Asia. He was most enthusiastic about education and improving the health of the people of the world.

A book of fundamental importance was edited by Eliot Corday together with Jeremy Swan, in 1979 [5]. In their introduction we can read questions, appropriate even today, about the causation of ischemic heart disease: 'When do the irreversible changes supervene? Is there a "twilight zone"? Why does myocardial infarction occur without coronary occlusion? Are infarct size measurements accurate? What is the significance of the collateral circulation? Why the divergent literature regarding benefits or detriments of an intervention?' I was privileged to write a Chapter in this book and a copy of it, dedicated by Eliot and Jeremy during one of my visits in their Department in LA, has an esteemed place on my bookshelf.

In his private life, Eliot was a devoted family man. In his eyes, Marian was the most beautiful woman on earth and he became a fabulous father. His son, Stephen, was destined to be a doctor from the age of two because Eliot willed it. Stephen later graduated from Stanford medical school and Eliot's proudest moment was when he went into medical practice with his father [1]. Another reason for being proud was his daughter Joanne's career in public life, becoming Californian Secretary of State and Consumer Services and University of California Regent. Last but not least, his two grandchildren always uplifted him, he went to visit them daily and he saw in them the ones who 'represent life' [1].

The last clinical and research interest of Eliot Corday was to put into use his original idea regarding the retrograde delivery of pharmacological and diagnostic agents via venous circulation and the coronary sinus into the heart. His invention was patented and during the last years of his life he devoted much of his time and energy to developing this idea into a practical method; time will certainly show in the near future the use of Eliot Corday's ingenious method.

Eliot Corday passed away in Los Angeles at the age of 85.

Acknowledgements

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References

1. Joanne Kozberg-Corday. Personal communications.
2. Fye WB. American cardiology. The Johns Hopkins University Press, Baltimore, London 1996: 135, 141.
3. *Idem* 236.
4. *Idem* 199.
5. Corday E, Swan HJC. Clinical strategies in ischemic heart disease: New concepts and current controversies. Williams and Wilkins, Baltimore, London 1979.

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