COMMENTARY



Commentary: "The Feud," a personal narrative by Dr. Joseph Coselli

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In this issue of the *Journal*, Dr. Joseph Coselli shares a personal accounting of a historical moment in medicine and its subsequent aftermath that has arisen to the stature of medical lore for those of us who remain tied to the field of mechanical circulatory support, heart transplantation, and medical

history. The first use of the total artificial heart as a bridge to heart transplantation by Dr. Denton Cooley on April 4, 1969 brought forth an astonishing technological innovation and novel approach to the medical treatment of endstage heart failure. Unfortunately, the event triggered a worsening of an already strained relationship between two giants of cardiac surgery of the time, Dr. Michael DeBakey and Dr. Denton Cooley, that led to complete dissociation of any professional or personal relationship. The firsthand accounting of this event by Dr. Joseph Coselli, or "The Feud" as referred to it in a New York Times article,² is an enlightening narrative and brings forth to the reader a number of important issues surrounding the event, each worthy of hours of discussion. Inarguably, the event was, by all accounts, a medical achievement of outstanding proportions. The act of removing a heart, replacing it with a mechanical substitute, and then removing it and performing heart transplantation, was a demonstration of a viable treatment paradigm that has stood the test of time for 52 years. The fact that it was achieved at that time in medicine, with that level of technology and medical knowledge available, was truly remarkable. Unfortunately, in the aftermath of the event, other important issues were raised that remain relevant to this day and cloud some of the

overall achievement of the event. Questions were raised regarding the completeness of the "patient informed consent" process and whether the operation was premature in nature. In addition, issues pertinent to the ownership of the total artificial heart design and whether intellectual property rights were properly recognized before proceeding with the use of the device were raised, as well as stewardship over medical research and funding. What is clear, is that the success of the device development and clinical implementation of the total artificial heart technology resulted from a clear collaboration between physician and engineer/scientist, a message that remains relevant today. Subsequent investigations into these issues by the Baylor College of Medicine and National Institutes of Health did lead to changes in the landscape in how medical research was conducted at St. Luke's and Methodist Hospitals and raised important insights for the medical community.

Dr. Coselli's first-hand accounting of the event brings a humanizing appeal to the story and his close relationship with both men and the historical event is evident. The narrative is presented in an objective fashion without recrimination of either Dr. DeBakey or Dr. Cooley. The addition of a video of the historic operations performed by Dr. Cooley and the follow-up comments by Dr. Cooley provides the reader with a unique sense of the drama surrounding the event. As everyone reading Dr. Coselli's commentary on the historical account knows, Dr. DeBakey and Dr. Cooley resolved their differences before the eventual death of Dr. DeBakey in 2008. Dr. Coselli provides an enlightening account of a medical event that was drawn out over 40 years but remains an important milestone in medicine and provides valuable insights for physicians today.

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CONFLICT OF INTEREST

The author is a non-compensated scientific advisor for FineHeart, Inc., CH Biomedical, Abbott Laboratories, and Medtronic, Inc., and a member of the Data Safety Monitoring Board for Carmat, Inc. and the National Institutes of Health, National Heart, Lung, and Blood Institute, PumpKIN Study.

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