David H Spodick (1927 –2019)



David was born on September 9, 1927, in Hartford, Connecticut. He graduated from Kingston High School in Kingston, New York in 1944 and from Bard College and New York Medical College in 1950. He interned at St. Francis Hospital in Hartford and did his Fellowship at Beth Israel Hospital and Tufts Medical Center. After serving in the United States Air Force during the Korean War, he worked at the Lemuel Shattuck Hospital with appointments at all three Boston Medical Schools. In 1976, he took the position of Chief of Cardiology at St. Vincent Hospital in Worcester, MA with an academic appointment at the University of Masschusetts Medical School where he worked until retirement at the age of 87. David was a humble but brilliant researcher in

the world of cardiology, specializing in non-invasive cardiology and pericarditis. He produced over 400 research papers and authored numerous books, chapters, and abstracts. His greatest joy was working with Fellows and Residents to properly read electrocardiograms and develop research ideas for publication. Concerned about rigor, he consistently advocated the use of randomized controlled trials and other sound ways of establishing evidence through research, leading some to call him "The Conscience of Cardiology." He also identified "Spodick's Sign," *Spodick DH. Electrocardiogram in acute pericarditis. Distributions of morphologic and axial changes by stages. Am J Cardiol. 1974 Apr;33(4):470–4.* that signified a down-sloping TP segment in patients with acute pericarditis that remains an important diagnostic tool todayThis sigh is characterized by downsloping TP segment in patients with acute pericarditis, potentially present in about 80% of the patients affected with acute pericarditis and the sign is often best visualized in lead II and lateral precordial leads.

David chose the path of academic medicine, which allowed him to travel the world with his wife Carolyn and share his knowledge with others. In addition, he enjoyed history, language, reading, and food. He opened lectures in other countries by speaking the native language and apologizing to the audience for continuing in English. Proclaiming, "words were his hobby,", he would often read dictionaries in several different languages. Although not religious, he enjoyed being culturally Jewish and supported numerous causes. He was an American Cardiologist, Clinician, researcher, educator, and administrator in cardiovascular medicine for over 50 years. Key areas of interest were noninvasive evaluation of the heart, including physical examination; diseases of the atria; diseases of the pericardium; and electrocardiography. Eponymously affiliated with Spodick sign in pericarditis (1974).

We wrote together one historical manuscript about the history of electrocardiology published in the red Journal

Major Publications

Spodick DH. Electrocardiogram in acute pericarditis. Distributions of morphologic and axial changes by stages. Am J Cardiol. 1974 Apr;33(4):470-4. [PMID 4818046]

Spodick DH. Differential characteristics of the electrocardiogram in early repolarization and acute pericarditis. N Engl J Med. 1976 Sep 2;295(10):523-6. [PMID 950958]

Spodick DH. Randomize the first patient: scientific, ethical, and behavioral bases. Am J Cardiol. 1983 Mar 1;51(5):916-7. [PMID 6829458]

Spodick DH. Comprehensive electrocardiographic analysis of acute myocardial infarction by individual and combined waveforms. Am J Cardiol. 1988 Sep 1;62(7): 465-7. [PMID 3414524]

Spodick DH. Flow-directed pulmonary artery catheterization. Moratorium vs clinical trial. Chest. 1989 Mar;95(3):489-90. [PMID 2920571]

Spodick DH, Raju P, Bishop RL, Rifkin RD. Operational definition of normal sinus heart rate. Am J Cardiol. 1992 May 1;69(14):1245-6. [PMID 1575201]

Spodick DH. Acute cardiac tamponade. N Engl J Med. 2003 Aug 14;349(7):684-90. [PMID 12917306]

Mehrzad R, Spodick DH. Interatrial block: a virtual pandemic requiring attention. Iran J Med Sci. 2014 Mar;39(2):84-93. [PMC3957018]

Spodick DH. The Pericardium: A Comprehensive Textbook. CRC Press. 1996

Spodick DH. Acute PericarditisGrune & Stratton. 1959.

Chaubey VK. Spodick's Sign: A Helpful Electrocardiographic Clue to the Diagnosis of Acute Pericarditis. Perm J. 2014 Winter; 18(1): e122. [PMC3951045]

Chhabra L, Spodick DH. Ideal isoelectric reference segment in pericarditis: a suggested approach to a commonly prevailing clinical misconception. Cardiology. 2012;122(4): 210-2. [PMID 22890314]

Makaryus JN, Makaryus AN, Boal B. Spodick's sign. Am J Med. 2008 Aug;121(8): 693-4. [PMID 18691482]

Imazio M, Spodick DH, Brucato A, Trinchero R, Markel G, Adler Y. Diagnostic issues in the clinical management of pericarditis. Int J Clin Pract. 2010 Sep;64(10):1384-92. [PMID 20487049]

Masek KP, Levis JT. ECG Diagnosis: Acute Pericarditis. Perm J. 2013 Fall; 17(4): e146. [PMC3854820]

Maeba H. Isoelectric reference for pericarditis: TP may be better than PR. Cardiology. 2012;123(1):39-40. [PMID 22964515]

Dear David, thank you for all you have given us in your fruitful academic life

Andrés Ricardo Pérez-Riera MD PhD São Paulo Brazil