

## Tributes to Maurice Adam, MD



Maurice Adam, MD  
(1921-2005)

### Peter A. Alivizatos, MD

I first met Dr. Adam, the surgeon, in 1972, when I came to Baylor to work as a fellow for Mitchel, Adam and Associates. They ruled cardiothoracic surgery in the Southwest along with their great rivals, Paulson, Urschel and Associates. Those were exciting years of unsurpassed Baylor dominance in this field, both academically and clinically, fueled by a noble and well-meant competition.

Maurice was a star player in that golden era, a superb and innovative technician of exacting standards and unnerving (to others!) precision. He stood above all, swift and elegant, with an unmistakable élan. He was the quintessential surgeon we all strove to emulate.

In 1984 I was back at Baylor, this time to start cardiac transplantation. I knew that Maurice had voted against my appointment, thinking me too old to start a new practice. (I was 47 then.) Later, when the transplant service was up and running, he came to me, shook my hand, and said, "I am so glad I was wrong about your joining us." I knew then Maurice, the man.

A few years later, I had the opportunity to dispel the myth about Maurice's often misunderstood frugality. True, he was a superb organizer and a money manager, but he was not mean, as John Capehart and I learned over the years of our association. When my wife's business fell apart due to meddlesome government intervention, Maurice pitched in with a substantial sum of his own money to get us restarted. I knew then Maurice, the kind human being.

My eminently qualified colleagues, Drs. Hal Urschel and Richard Wood, will undoubtedly elaborate on Maurice's professional accomplishments for the *Proceedings* readership. My only ambition would be to convey the image of Maurice Adam, tall and handsome with eyes full of anticipation, coming down the Truett surgical suite with aplomb—a true demigod in a glorious era of American surgery, which has, I am afraid, irrevocably passed.

Au revoir, Maurice, teacher, colleague, and friend.

### Harold C. Urschel, Jr., MD

Maurice Adam was a good friend for over 43 years. He was born on July 19, 1921, in Ecuador and died on July 3, 2005, of an adenoid cystic carcinoma after a long struggle.

Maurice was an excellent cardiovascular and thoracic surgeon, well trained and proficient technically. Even though we were competitors, there was a special feeling between us that allowed for a free, delightful, and professional relationship based on respect and integrity. That enabled us to share our experience with each other with no concern other than "for the good of the patient." This is a rare relationship amongst cardiovascular surgeons, in my experience.

In addition to our close friendship, I was his neighbor for many years in Highland Park, living right across the street. Each of us had the pleasure of watching the other family grow up, marry, and move away. Doris was an inspiration to us as to Maurice, until she preceded him in death after 43 years of marriage. His second wife, Emily, with whom he shared a wonderful relationship for 11 years, was a great encouragement to him as well. He was proud of his three children, Karis, Stuart, and Martha.

We had great fun with Maurice at the Southern Thoracic Surgical Association meetings in the Caribbean over many years and at other medical conventions.

Maurice made many contributions to thoracic and cardiovascular surgery and was one of the pioneers in promoting computer-based medicine in practice, both in the office and the hospital.

We will miss his kindness, caring, clinical excellence and, most of all, his genuine friendship.

### Rhoda Whitcomb, RN

Some nurses found Dr. Adam to be gruff and too demanding. He just wanted things done properly; perhaps that came with his mechanical engineering studies.

My first remembrance of working with Dr. Adam was in the early 1960s. I was in the cardiac laboratory, which at that time was located in the Veal Building, and we were just starting left heart catheterizations. Various approaches were being tried, and this day Dr. Adam was using the bronchoscope. He had lightly sedated the patient and was quietly explaining to her what he would be doing as he advanced the bronchoscope, then the needle to puncture the left atrium. We then threaded "plastic" tubing through the needle into the left atrium and left ventricle, measuring pressures, etc. He always had his patients well prepared, so it was easy to work quickly and quietly while the patients were awake. The many pacemaker procedures I helped him with were enjoyable for many of the same reasons. He was a meticulous surgeon and aware of whether or not you were anticipating his next move. He expected you to do your best.

A few weeks before his death, I was at Baylor and happened to see his secretary, who told me Dr. Adam was in the hospital. I felt fortunate to have had one last short visit and meet Mrs. Adam. As I shook his hand to leave, I was delighted to see the familiar smile and twinkle in his eyes. Goodbye to a fine surgeon and gentleman.

**Richard E. Wood, MD**

I appreciate the opportunity to write a tribute to my friend, Dr. Maurice Adam. He was really one of the first complete cardiothoracic surgeons here at Baylor, in that he was performing congenital cardiothoracic surgery in the early 1960s and was one of the first to implant permanent pacemakers. The most important thing he did, however, was organize a database for patient

safety and follow-up after myocardial revascularization. In those days, we didn't have 1- or 3- or 5-year follow-up, but his initial evaluation of these cases really set the starting point for what later developed into the Society of Thoracic Surgeons Database, from which thousands of cases can be compared and the risk, evaluation, and outcomes can be analyzed.

He was generous with his time. In fact, when one of my cases resulted in a lawsuit, he was my defense. With his professional help, we were able to win the case unanimously. In fact, I saw two of the plaintiffs in the office as patients the week after the litigation was won with Dr. Adam's help.

He was a very dear friend and helpful not only in that case but also in discussing other interesting cases. His smiling face will certainly be missed.