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Editorial

The Origin of the Council on Arteriosclerosis

Thomas B. Clarkson, Gardner C. McMillan, and Henry C. McGill Jr.

This article describes the origin and evolution of the American Heart Association's Council on Arteriosclerosis. The council had its roots in the American Society for the Study of Arteriosclerosis, which began in 1947. This society and the American Heart Association merged in 1959. The society grew out of the efforts of two extraordinary pathologists, O.J. Pollak, MD, PhD, and Wilhelm C. Hueper, MD, who recognized a need for a broad-based body of researchers and practitioners to study the methods and models used in the study of arteriosclerosis. Today, the Council on Arteriosclerosis is a dominant influence in the world of arteriosclerosis research. (*Arteriosclerosis and Thrombosis* 1992;12:543-547)

KEY WORDS • arteriosclerosis • AHA Council on Arteriosclerosis • American Society for the Study of Arteriosclerosis • history • Wilhelm C. Hueper • O.J. Pollak • editorial

The Council on Arteriosclerosis of the American Heart Association (AHA) succeeded the American Society for the Study of Arteriosclerosis (ASSA) in 1959. However, the origins of the council and the ASSA date back to 1946, when two extraordinary pathologists chose to meet in New York City to discuss their different views of the methods of—and the animal models for—arteriosclerosis research.

The two pathologists were O.J. Pollak and the late Wilhelm C. Hueper. Pollak is an emigré from Czechoslovakia and was at the time a pathologist with the Wilmington General Hospital in Delaware. Hueper, an emigré from Germany, was a toxicological pathologist with interests in other areas of pathology as well. Hueper had published reviews dealing with arteriosclerosis and had written a review of atherogenesis excluding the papers Pollak had published on cerebral and experimental arteriosclerosis. Pollak took the initiative, contacted Hueper in New York City, and asked, "Couldn't we get together and talk about our contradictory research results and straighten out a few of these discrepancies and differences?"¹

Concluding that their initial meeting had been productive, they decided they would meet again the following year and invite others who were active in arteriosclerosis to attend. After a flurry of correspondence and preliminary meetings, an "Organizing Committee" for the society was created, which was composed of G. Lyman Duff, Harry M. Goldblatt, George R. Herrmann, Wilhelm C. Hueper, Robert A. Katz, William B.

Kountz, Irvine H. Page, O.J. Pollak, and Joseph B. Wolfe.² Announcements were sent to individuals whom Hueper and Pollak knew worked in the field, to researchers who had exchanged reprints with them, and to those recommended by the Organizing Committee. They also invited AHA members to attend, via a letter to Howard B. Sprague, then the secretary of the AHA.

Birth of the Society

The "constitutional" meeting took place at the Strand Hotel in Atlantic City, New Jersey, on June 9, 1947, during the annual American Medical Association meetings. Pollak rented one of the halls and hired two transcribers to record the minutes, and Mrs. Pollak solicited \$5.00 for dues at the door. The following is a reconstructed list of those attending: Liese Lewis Abell, Rudolf Altschul, E. Cowles Andrus, Nelson W. Barker, Margaret Bevans, Alexander Blain III, G.O. Broun, Maurice Bruger, Margaret Chieffi, Arthur C. Corcoran, Dean F. Davies, Nathan S. Davis III, G. Lyman Duff, F.W. Dunihue, Hyman Engelberg, J.T. Gault, Harry M. Goldblatt, George R. Herrmann, Russell L. Holman, Louis Horlick, Wilhelm C. Hueper, Louis N. Katz, Robert A. Katz, Forrest E. Kendall, John Esben Kirk, R.W. Kissane, Melvin H. Knisley, William B. Kountz, Irving Leinwand, Lena A. Lewis, Lester M. Morrison, Elliot Oppenheim, Irvine H. Page, James C. Paterson, Ruth B. Pick, O.J. Pollak, Myron Prinzmetal, Maurice Protas, W. Raab, Simon Rodbard, Howard F. Root, Aaron G. Saidman, Jakub G. Schlichter, Hans Selye, Henry S. Simms, Jeremiah Stamler, Edward J. Steiglitz, Alfred Steiner, J.B. Stubbs, Malford W. Thewlis, George E. Wakerlin, Robert W. Wilkins, Charles F. Wilkinson Jr., Robert W. Wissler, Charles A. Woerner, Joseph B. Wolfe, K.G. Wolkoff, Frederic D. Zeman, and M.M. Zuzman.

This society was to include "experimentalists and clinicians," "theoretical and practical investigators" who would "coordinate laboratory and clinical observations."³ In his address at the society's constitutional meeting, Pollak stated, "We would like to have a society which differs in character from other existing groups . . .

From the Committee on the History of the AHA Council on Arteriosclerosis (Henry C. McGill, Chair) and The Comparative Medicine Clinical Research Center (T.B.C.), Bowman Gray School of Medicine of Wake Forest University, Winston-Salem, N.C.; 5305 Burling Terrace, Bethesda, Md. (G.C.M.; retired from the National Institutes of Health); and the Southwest Foundation for Biomedical Research (H.C.M.), San Antonio, Tex.

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with the authors, O.J. Pollak reminisced, "I liked the Knickerbocker very much. The atmosphere there . . . I felt like the preacher after church saying goodbye to everyone and how is John and how is Mary, and what are your children doing, and shook hands with everybody who walked in and who walked out. . . . The downfall of this group was when we stopped going to the Knickerbocker."¹

It is interesting to contrast the topics discussed at these early meetings with those being discussed today. The current areas of interest, based on categories for the abstracts selected at the 1991 council meeting,⁹ include some that were not even known in the 1940s, e.g., transgenic animals, gene expression, and lipid moieties such as lipoprotein(a) and apoprotein B. In addition, there is now more focused research on topics such as cholesterol components, specific locations within the organism (e.g., cell wall, vessel wall, and arteriole), and molecular or cellular biochemical activity.

Growth and Change

The membership of the ASSA gradually rose from 85 individuals to 274 in 1958.² The organization had enjoyed a highly productive autonomous existence for 12 years. Pollak continued as Secretary-Treasurer and fulfilled this office with great efficiency and economy as the society grew. However, during the early 1950s, the AHA had been developing its own scientific councils. Conspicuously absent was a council on arteriosclerosis.

With much the same motivation then as the AHA has now in seeking to absorb the 24-year-old Lofland Conference on Arterial Wall Metabolism, the AHA sought to combine with the ASSA rather than to initiate a scientific council de novo. A plan was developed by which the ASSA would combine with the AHA to continue to function as a society and to become the Council on Arteriosclerosis. Such a union would bring considerable potential benefits in organization, funding, and scientific outreach; moreover, the distraction of a second competing society would be removed by such an affiliation. However, the leaders of the ASSA endeavored to preserve the society's independent identity in negotiating the merger.

Two issues were of critical importance to the society. First, the society negotiated that the AHA would agree to publish all accepted abstracts regardless of whether they were presented at the scientific session. Second, there was a firm agreement between the ASSA and the AHA that all future programs and other publications would bear the name of both the Council and the ASSA. Based on these assumptions, which were formalized in a "Memorandum of Understanding," the membership of the ASSA approved the merger with an almost unanimous vote (197 to 8) on March 14, 1959.²

The new council met in conjunction with the AHA's Annual Scientific Sessions in 1959, and later that year met independently.

Results of the Merger

Since 1959, the leaders of the council have often discussed whether the merger with the AHA was good or bad for the scientific enterprise of arteriosclerosis research in our country. Definitive conclusions have never been reached, based on the assumption that "only

history could tell," but secessionist motions have always been voted down in subsequent council meetings.

As this is a report of our council and our society's history, we cannot escape making some personal observations about the effect of the merger. It seems clear that the Council on Arteriosclerosis does not enjoy the depth of collegial interactions that occurred within the society in "the Knickerbocker days." Perhaps this is inevitable in these days of global collaboration. The size of the council membership (currently at 1,218) and the large attendance at the annual meetings seem to preclude such easy personal associations. We have seen a continued desire and need for those collegial interactions to occur in other venues, and it is perhaps for this reason that independent smaller meetings, such as the Lofland Conference and the Gordon Conference on Atherosclerosis, have prospered. On the other hand, the communication between arteriosclerosis researchers and members of the other scientific councils has resulted in a broader national outreach that would not have been likely had a merger not taken place. In our field, we have exchanged ideas with other councils such as Nutrition, Basic Science, Thrombosis, Epidemiology, Cardiovascular Disease in the Young, and Clinical Cardiology and probably have provided them with a deeper understanding of atherogenesis than would have been the case otherwise. Since 1959, the AHA, stimulated by the Council on Arteriosclerosis and other councils, has been a pioneer in programs aimed at preventing atherosclerotic disease.

For those of us who were members of the ASSA originally, there is some regret at witnessing the organization's current loss of identity. The AHA appears to have lost the "Memorandum of Understanding" when they moved from New York to Dallas in 1975. Rarely do documents from the council continue to bear the name of the ASSA, although the rules and regulations of the council list its formal title as "The Council on Arteriosclerosis of the American Heart Association: The American Society for the Study of Arteriosclerosis."² The council newsletter has also retained this official, albeit unwieldy, title. Fortunately, the original editors of the AHA journal *Arteriosclerosis* recalled the substance of the "Memorandum"; even though the document has been lost, the journal continues to publish all accepted abstracts submitted for the council meeting.

On balance, we conclude that the creation of the council was a positive event in the evolution of the study of arteriosclerosis. Also, the administrative staff support of the AHA has increased the sophistication of the meetings and provided international outreach. As a result of being a part of the AHA, the Council on Arteriosclerosis is a dominant influence in the arteriosclerosis research community worldwide.

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