

Convocation

T.E. Starzl, President

BY convening the XIVth International Congress of the Transplantation Society in Paris, we have returned to our roots, where we met for the first time in 1967. Several who made this founding possible 25 years ago are facing you from this stage. It is a precious moment, and perhaps a fleeting one, as we are reminded by the chair occupied by his wife, Catherine, where our fourth President, Jean Hamburger (Fig 1), would be sitting were it not for his death early this year. Hamburger was proud of the French contributions to transplantation, and with justification.

At the turn of this century, Jaboulay in Lyon and others in Europe performed subhuman primate-to-human kidney heterotransplantation.¹⁻³ The basic reconstructive surgical techniques of transplantation came from the Frenchman Alexis Carrell.⁴ The operation of pelvic kidney transplan-

tation, which has been performed hundreds of thousands of times, was described in 1951 by Rene Kuss (the originator),⁵ Charles Dubost,⁶ and Marceau Servede.⁷ The next year, Hamburger, working with the urologist Louis Michon at the Hopital Necker, reported the now common transplantation of a kidney from a living donor.⁸

The use of the French operation by Murray and Merrill in the landmark identical twin case of 1954 inflamed interest in transplantation.⁹ The next step was not taken until January 1959, after the advent of sublethal total body irradiation, when Murray and Merrill succeeded in obtaining long-term graft function in a fraternal twin kidney recipient.¹⁰ Although this was the only survivor in 12 Boston attempts, it was an enormous step. The recipient had undergone the first successful renal transplantation beyond the identical twin cases.

In Paris, Hamburger's team added a second successful fraternal twin case in June 1959, and then succeeded with kidney transplantation from a nontwin sibling and from a cousin.¹¹ The cousin kidney functioned for 18 years before retransplantation. The recipient, who is now a member of the French parliament, is the longest surviving kidney transplant recipient (32 years) from that heroic pioneer era.

Also in Paris, Rene Küss reported long-term survival of three of six kidney recipients treated with irradiation in 1960 and 1961, a truly extraordinary achievement because two of these patients (cases 2 and 6) were given nonrelated kidneys that functioned for 17 and 18 months.¹² The first of these nonrelated transplants was performed in June 1960. During the critical period of 1959 through early 1962, the French succeeded while everyone else was failing, and thereby set the stage for drug therapy. In fact, Kuss was using 6-mercaptopurine and steroids in his irradiated patients as early as 1960. Hamburger was systematically combining prednisone with irradiation. George Mathe, on the stage today, worked both with Kuss and Hamburger, as did Jean Dausset, the father of human histocompatibility research.

Those examining this period historically were inclined to classify irradiation-induced and drug-induced graft acceptance as different phenomena. As it has become clear that this is not a fundamental distinction, the magnitude of the early French achievements seems all the more remarkable. What happened from 1962 onward was dominated by the



Fig 1. Jean Hamburger (1909-1992), circa 1985.

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demonstration of drug immunosuppression with 6-mercaptopurine or its derivative azathioprine, introduced experimentally in 1959 by Schwartz and Dameshek in nontransplant models¹³; by Schwartz and Dameshek,¹⁴ and Meeker et al¹⁵ with rodent skin grafts; and by Calne (your new president)¹⁶ and Zukoski et al¹⁷ with canine kidneys. Azathioprine when first used clinically was inadequate by itself,^{18,19} but when it was combined with prednisone, kidney transplantation was catapulted to a position of clinical practicality.²⁰

Every 2 years, from 1954 to 1966, the New York Academy of Sciences was host to an international meeting on transplantation under the leadership of the French-educated surgeon John M. Converse and his prize pupil Felix Rapaport, who also had been a teen-aged student in France. At first, these meetings were almost entirely nonclinical but the proliferation of clinical kidney transplant centers made the development of a transplant society not only necessary, but inevitable. This decision was made by a small group of leaders—perhaps no more than 20—who designated Bernard Amos the first past President of the new Transplantation Society.

The new society was proclaimed in February 1966 at the close of the seventh and last New York Academy conference. The first elected President was Sir Peter Medawar. The first President-elect was John M. Converse. The glue that welded the parts into a whole came from the founding secretaries: Jean Dausset from the Eastern Hemisphere and his trans-Atlantic research collaborator Felix Rapaport from the Western Hemisphere. Rapaport was destined to become the seventh president of the Society and its permanent archivist. The first congress took place in Paris on June 26, 1967.

Where we have gone in the succeeding 25 years will be told in this year's program. It seems that almost nothing is impossible for those who have inherited this field. We look back now, and tip our hats to those who came before as we begin the XIVth (Jean Hamburger) International Congress

on Organ Transplantation. I cannot rationalize the providential wisdom that took Hamburger from us on the eve of this grand occasion. But at least we were given back the time and place with which to honor him. This congress is now in session.

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