

IN MEMORIAM ALFONSO MEDINA

Goodbye to a 1,1,1 cardiologist

In memoriam Alfonso Medina Fernandez-Aceituno, MD, 1946-2017

Published on 20 June 2017

no comment yet | print article | request a reprint | request permissions | get citation



Manuel Pan^{1*}, MD, on behalf of the European Bifurcation Club Committee: Remo Aibero², MD; Adrian Banning³, MD, PhD; Francesco Burzotta⁴, MD, PhD; Yiannis S. Chatzizisis⁵, MD, PhD, FAHA, FACC; Alaide Chieffo⁶, MD; Olivier Darremont⁷, MD; Mirosław Ferenc⁸, MD; David Hildick-Smith⁹, MD; Jens Flarsted Lassen¹⁰, MD, PhD; Thierry Lefèvre¹¹, MD; Yves Louvard¹¹, MD; Goran Stankovic¹², MD, PhD

1. Hospital Reina Sofia, Cordoba, Spain; 2. Clinica San Rocco, Brescia, Italy; 3. Cardiovascular Medicine Division, Radcliffe Department of Medicine, John Radcliffe Hospital, Oxford, United Kingdom; 4. Institute of Cardiology, Catholic University of the Sacred Heart, Rome, Italy; 5. Cardiovascular Biology and Biomechanics Laboratory, University of Nebraska Medical Center, Omaha, Nebraska, USA; 6. Interventional Cardiology Unit, San Raffaele Scientific Institute, Milan, Italy; 7. Clinique Saint Augustin, Bordeaux, France; 8. Herz-Zentrum Bad Krozingen, Bad Krozingen, Germany; 9. Sussex Cardiac Centre, Brighton and Sussex University Hospitals, Brighton, United Kingdom; 10. Department of Cardiology, The Heart Centre, Rigshospitalet, University of Copenhagen, Copenhagen, Denmark; 11. Institut Cardiovasculaire Paris Sud, Massy, France; 12. Department of Cardiology, Clinical Center of Serbia, and Medical Faculty, University of Belgrade, Belgrade, Serbia

Alfonso Medina Fernandez-Aceituno, MD, 1946-2017

Goodbye to a friend and to a 1,1,1 cardiologist

"Simplicity is the ultimate sophistication" – Leonardo da Vinci

Alfonso Medina studied medicine at the University of Granada (Spain). After obtaining his MD, he received training in Cardiology at the Fundacion Jimenez Diaz in Madrid and at the Parkland Memorial Hospital in Dallas. In 1975, he arrived at the Hospital Nuestra Señora del Pino in Las Palmas de Gran Canaria (Spain), where he was appointed head of the Department of Cardiology. He worked tirelessly in this hospital (later replaced by the new Dr Negrin Hospital) until he reached retirement age in 2016. There, he developed an intense clinical, research and teaching activity over more than 40 years. He was also a brilliant speaker with a great sense of humour. He was the inventor of very ingenious devices, for instance the coronary variable length balloon catheter (1994) and the adjustable vascular introducer for balloon valvuloplasty (1989). Professor at the University of Las Palmas, he was the master of many generations of cardiologists. In 1987, he started a fruitful scientific relationship with Dr Jose Suarez de Lezo from Cordoba. Together they founded the CORPAL (Cordoba-Las Palmas) group, which made a significant number of important contributions in the field of coronary, valvular and congenital heart disease over a period of 30 years. In 2005, he became a member of the European Bifurcation Club (EBC). While he was attending the first EBC meeting in Bordeaux, his classification of bifurcation coronary lesions was proclaimed as the unique EBC classification by total consensus. Since then, this contribution has been widely used in papers and in cardiology congresses. The article in the *Revista Española de Cardiología* (2008) describing the Medina classification has reached a record number of citations (388 according to the Scopus database). For more than 10 years he continued to attend the EBC meeting, contributing original ideas, such as the "eyebrow sign" (IVUS predictor of side branch occlusion) or the SMS technique as an alternative to the kissing balloon. In Valencia (2007), he was honoured by the members of the club for his contributions in the field of bifurcations. Over the following years, he continued participating in and enjoying the EBC meetings until he recently passed away. We will miss him in future congresses, but his legacy will always remain in the ambience of the

AUTHORS

Pan M
Banning A
Burzotta F
Chatzizisis Y
Chieffo A
Darremont O
Ferenc M
Hildick-Smith D
Lassen J
Lefèvre T
Louvard Y
Stankovic G



It is with deep sadness and a heavy heart that I write these lines of farewell and remembrance for Dr. Alfonso Medina Fernández-Aceituno. Despite a friendship spanning more than 40 years and our shared career paths, I am not sure that I am the best person to do so, but I accept the challenge, aware of the difficulty of trying to describe someone who was exceptional, as a cardiologist, teacher, researcher and scientist and, not least, as a person. Someone unique, who has left us. I met Dr. Medina in 1976. He had recently completed his cardiology residency in Clínica de la Concepción de Madrid and took up a position in the Coronary Unit of Hospital La Paz, where I was finishing my residency. We immediately shared a vision of our medical lives, both deciding to return to our home cities to fight for cardiology, starting from scratch. That coincided with the beginning of interventional cardiology and the huge expansion known as "cardio-ence". We traveled together to courses in Geneva and talked endlessly. He, with initial help from Drs Armando Bethencourt and Carlos Macaya, brought together a first-rate team of Spanish cardiologists in the former Hospital El Pino, and later in the Hospital Universitario de Gran Canaria Dr. Negrin. At that time, the "3 ems" (Medina, Manzano and Mainar) were considered throughout Spain as the pillars of El Pino. At the beginning of the 1980s, Dr. Medina began to make his mark. With his imaginative mind, he designed devices that caught the eye of industry and overcame some of the problems of that time, such as Medina balloon catheters, manufactured by Schneider, which allowed the length of the balloon to be adapted to the length of the lesion, and Medina adaptable introducer sheaths. In 1987, coinciding with the expansion of percutaneous valvuloplasty, CORPAL was founded, a joint enterprise between persons working in Córdoba and Las Palmas to collaborate in making progress in new interventional techniques, formulating questions together and attempting to use our experience in each center to find answers. Data were shared and exploited together. Thus, CORPAL aspired to achieve a medical approach free of

Rev Esp Cardiol. 2017;70(7):609-610

In memoriam

Alfonso Medina Fernández-Aceituno

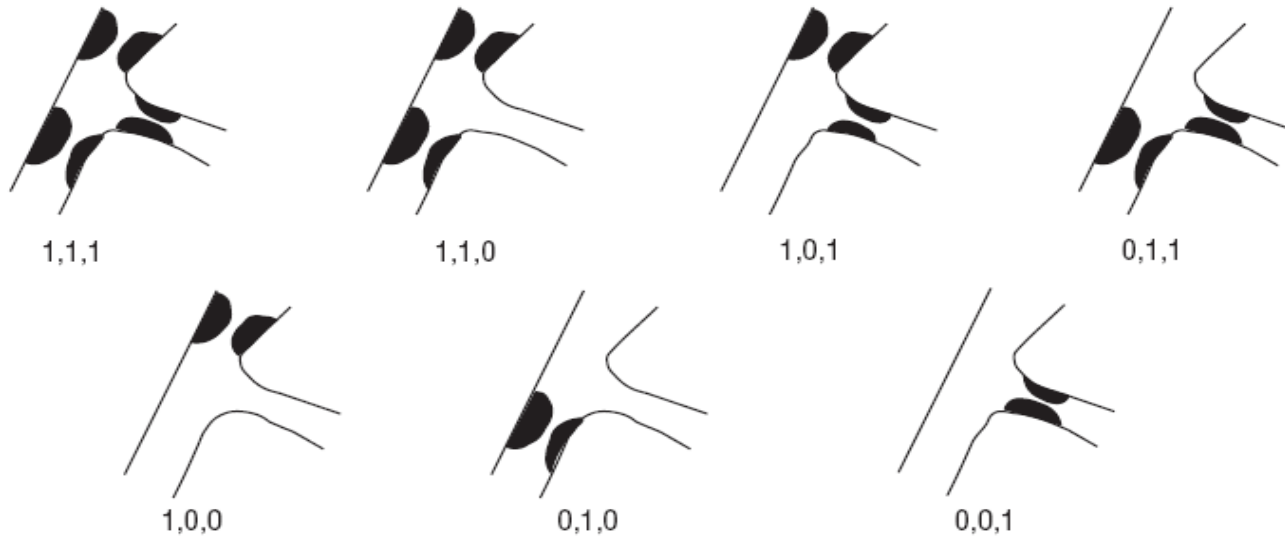
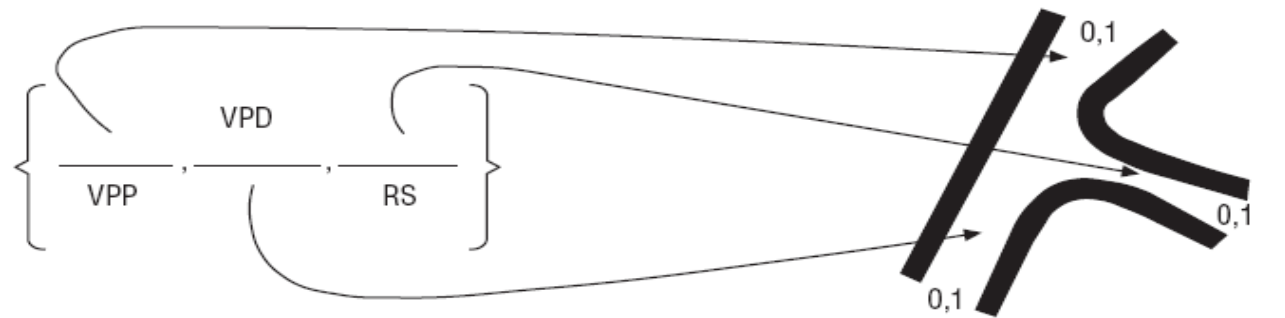
personal considerations, a meeting of minds, with constant self-criticism and a collective ethos. We wanted to learn through experience rather than by reading about the experience of others. Together we organized CORPAL courses in interventional cardiology and published our clinical research. Dr. Medina's contributions were many and brilliant and his proposals were always surprising, contrasting with his unconscious humility and unassuming nature. Perhaps his greatest contribution was his coronary bifurcation classification, which has been used worldwide since its publication in *Revista Española de Cardiología*. This classification was created without any grand design, simply for the purposes of our shared data. At that time, there were several complicated classifications, which lacked clarity. Medina's classification was adopted by the CORPAL group with ease and, on its presentation at the PCR in Paris in 2005, caused quite a stir. So much so that we hastened to describe it in a Letter to the Editor published in *Revista Española de Cardiología*. The letter received so many citations that it somehow helped to increase the journal's impact factor (to date, it has received 335 citations).

However, besides his multiple contributions, I believe that what really stood out was Dr. Medina as a person. His ingenuity and deductive ability, together with his serene analysis of any topic, were always captivating. He never lost his air of perpetual resident, making him a natural ally of the succession of trainee cardiologists he mentored. He never attached importance to what he did and felt enormously responsible for the work in the hospital, which he found tremendously fulfilling. Our talks about medicine and life were constant. Throughout these years, talking and discussing matters with him has given me enormous intellectual, medical, and scientific enrichment. Alfonso was the best medical professional I have ever known, the most humble, and the least self-regarding. He oozed humanism with his highly critical mind, which impressed everyone who knew him. He was respected and feared for reasons I don't understand, because he was always serious but kind to everyone and supported and mentored all those who arrived at the cardiology department over the years. He was interested in humanity and what would become of it. He feared the destruction of the planet. As the genius he was, he combined intellectual sublimation with a lack of self-regard. He had no difficulty in reacting to the heights while seeing himself as the lowest of men. For him, he was the least important person in the cardiology department. This was his extraordinary greatness, which we should proclaim rather than silence. He dreaded retirement, as it would mean the loss of connection with the hospital, his true home throughout his life. However, he became deeply engaged in leaving his legacy in the best hands, which was his last achievement. All his bets paid off.

Last, a bitter question must be asked: What sort of society are we? How are we able to waste the talent, experience and dedication of an internationally renowned clinician and scientist simply because he has reached the age of 70 years? If that was his life, why did they take it away? I was lucky enough to see Dr. Denton Cooley perform 15 interventions under extracorporeal

Bordeaux 2005





Rev Esp Cardiol. 2006;59(2):183-4

SCOPUS CITATIONS: 404
WEB OF SCIENCE CITATIONS: 367

3rd EBC Meeting - European Bifurcation Club

Friday 28 and Saturday 29 September 2007
PALAU DE LA MUSICA, Sala Rodrigo – VALENCIA, SPAIN





Eyebrow sign

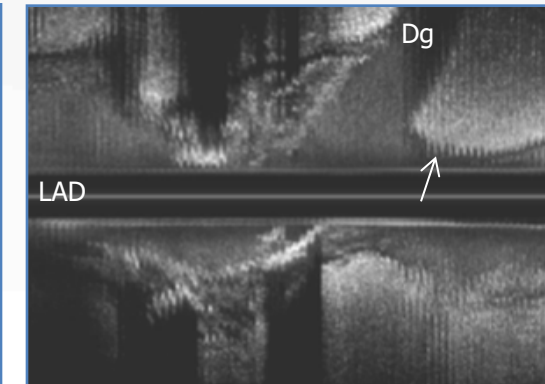
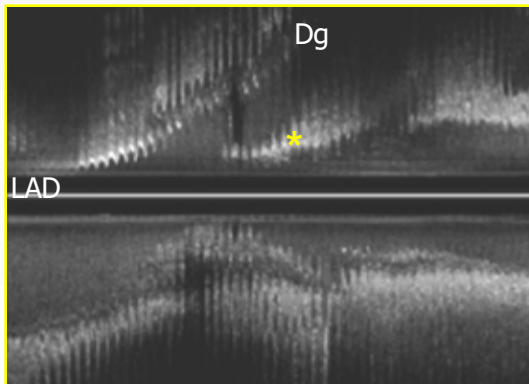
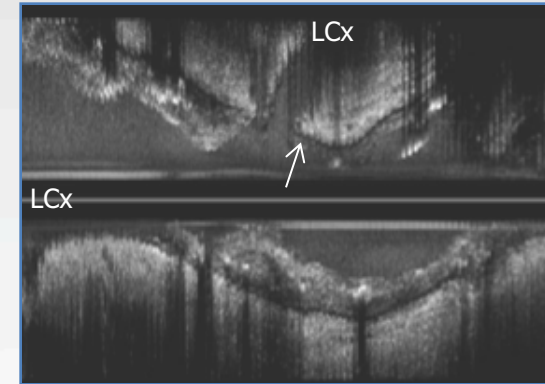
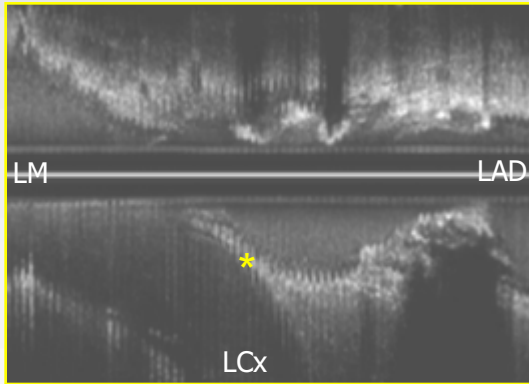
(n=195)



YES: 87 (45%)

"spiky carina"

NO: 108 (55%)



<http://secardiologia.es/xxvii-reunion-anual-de-la-seccion-de-hemodinamica-y-cardiologia-intervencionista>

Aportaciones del grupo CORPAL al intervencionismo español

APORTACIONES
DEL GRUPO CORPAL
AL INTERVENCIONISMO
ESPAÑOL

DR. ALFONSO MEDINA



2:20 / 1:06:04





“We will miss him in future congresses, but his legacy will always remain in the ambience of the club”.