

MEMORIAL RESOLUTION

CHARLES R. B. CARRINGTON (1935 – 1985)

Charles R. B. Carrington, Associate Professor of Pathology, was recruited to the Stanford University faculty in 1975, after a thorough search by the Department of Pathology for the most qualified person nationally to direct the autopsy service at the Stanford Medical Center.

When he arrived from Yale University, Charles brought far more than the world class expertise needed to shepherd a vital clinical service. Then aged 40, he was already recognized as one of the world's leading authorities on interstitial lung diseases. During his 10 years at Stanford, it became apparent that his clinical knowledge and expertise were seminal and he had greatly expanded the state of knowledge in his important field.

He was a maverick, a great, although sometimes acerbic, teacher who had little patience with those who would forego the pathologist's clinical role to concentrate in basic research. He truly believed that the place of the pathologist was as a clinical diagnostician who should not retreat into the theoretical world of rats and mice and genes. His teaching and clinical efforts reflected the vitality and importance of pathology as a diagnostic and analytical specialty crucial for setting the highest standards for the clinical care of patients and as a guide to fundamental laboratory research.

As one colleague said, his eyes would brighten when the facts of a difficult case were unfurled in his presence. He would concentrate his intellectual prowess on solving a patient's clinical problem, enlightening his students, or broadening scientific understanding.

Charles died after a long fight against cancer on September 25, 1985. At age 50 he was at a middle point in a career which was distinguished by a rare combination of qualities. Certainly he demonstrated the triple strengths of academic prowess, clinical skills and teaching excellence. Additionally, he showed rare qualities in being able to integrate public service with his ongoing academic commitments. Many sincere and conscientious academic leaders have offered their scholarly reputation in support of worthy, albeit often unrelated, social causes. But Charles melded his academic and clinical knowledge and skills in pursuit of social benefit in the public arena.

Specifically, he gave of his knowledge to those entrusted with developing public health policy in his specialty areas. In 1977, he was appointed to the federal Coal Mine Health Research Advisory Committee of the Department of Health, Education and Welfare. In 1979, he was appointed chairman. His expertise was so valued by his colleagues that he received presidential dispensation to serve beyond the normal course as chairman of the group. This was a vibrant panel under Charles' leadership; it played a strong role in guiding Congress to implement legislation alleviating safety and health threats to miners, including crucial laws protecting them against the then endemic scourge of black lung disease.

In another area, he grappled with the national hysteria involving the use of asbestos in construction in what his colleagues considered a balanced, moderate and scholarly fashion.

Even in the scientific community, the controversy had polarized expert opinion. Charles' impartiality is credited by colleagues with providing the credibility and informed leadership which precipitated the removal of asbestos as one of the most widely used construction materials in the nation.

In these two public areas, miner safety and asbestos, Charles served his nation in the highest sense. He proved that political influence need not be superficial but must indeed be the product of exhaustive research and expertise.

His public presence and his published academic efforts coalesced more dramatically, perhaps, when he became a central figure in defining the nature of Legionnaires' disease. His paper, "Pathology of Legionnaires' Disease," published in 1979 in the Annals of Internal Medicine, is considered the definitive description of an until-then mysterious ailment. It was the reporting of underlying pathogenic work which led rather quickly to successful clinical and epidemiological interventions for the condition. That article, as crucial as it was for public policy, was only one of 68 publications credited to Charles during his career.

Charles was a product of a Midwest boyhood. He was born in the central Illinois community of Watseka, where from his early years on in Onarga, the young boy's inquiries were encouraged by his lively and intellectually curious family.

During his final years at Champaign Senior High School, his advisers suggested the possibility of his choosing a private college out of state. His counselor gave him a list of schools which were considered excellent, including Dartmouth College. Charles was accepted and granted the scholarship he needed. In 1952, Charles arrived in the snowy setting of New Hampshire at an Ivy League college with the hope of a future in medicine.

Charles graduated summa cum laude from Dartmouth in 1956, and after completing the first two years of medical school at Dartmouth, he took a year from his medical education to pursue the research interests which had been nurtured during his undergraduate years. The 1957-58 "sabbatical" was spent with one of his early Dartmouth mentors, S. Marsh Tenney, Chairman of the Physiology Department.

It was with Tenney, during this year of teaching and research, that Charles began work on his first scientific paper, "Chemical constituents of haemolymph and tissue in the *Telea Polyphemus* Cram. with particular reference to the question of ion binding." It appeared in the Journal of Insect Physiology in 1959.

Following his leave from formal medical education, Charles married Patricia Whealon. It was a longtime commitment which had begun when the two first dated during their junior year in high school in Champaign. The newlyweds moved to New York where Charles graduated from Cornell University Medical College in 1960.

Charles completed an internship and a year of residency under the guidance of the well known pathologist John Kidd at the Cornell-affiliated New York Hospital. Contracting tuberculosis in the autopsy room, he was forced to spend several months recovering from this malady. But even while undergoing treatment, he was able to learn from his physicians and to actively expand his knowledge and deepen his interest in pulmonary pathology.

He completed his specialty training at Yale University Medical School, becoming chief resident in 1963. While there, he grew from student to distinguished colleague of the man who preceded him as one of the most eminent pulmonary pathologists in the nation, Averill A. Liebow. It had been Liebow and Kidd who arranged for or Charles to move from New York to Yale.

The apprenticeship days slid gracefully into the role of young faculty member. In 1964, he became with Liebow co-director of the internationally renowned course on Pathology of the Lung at Yale. Charles had become an instructor in pathology while still chief resident and, in 1966, he became an assistant professor.

In 1968, Charles followed mentor Liebow westward, where both joined the faculty of the new and promising University of California, San Diego. And it was there that Charles assumed the role of full professional leadership.

He was chairman of the committee on student affairs. His social interest flourished and during this era of social unrest he became a firm advocate for minority recruitment. He encouraged, often with the opposition of his colleagues, a student group's interest in helping to provide medical care to the nearby Mexican community of Tijuana. Ironically, in the face of his colleagues' criticism of his support of student activism, Charles was named vice chairman of the faculty at the UCSD School of Medicine in 1969.

Charles' first tenured post did not come in California, as he chose for personal reasons to return to Yale in 1970 to what he regarded as a more urbane, intellectually stimulating and comfortable New England. At Yale, he served as an associate professor of pathology and director of the autopsy service from 1970 to 1975, when he was recruited to Stanford.

The modest number of moves during an abbreviated career displayed a strong sense of commitment that was echoed in other areas, including his longstanding marriage and public service. He was an annual visiting lecturer on lung diseases at Dartmouth and Cornell for many years, for example. His clinical, scholarly expertise in interstitial lung disease resulted in his service, from 1968 to his death, as consultant in pathology for the Division of Thoracic Services at Boston University. He served as the pathologist for the Boston University Medical School program on lung injury, traveling to Boston to teach and to collaborate in research with colleagues, particularly Dr. Edward A. Gaensler. Charles also continued to publish with mentor Liebow until shortly before the latter's death in 1978.

At Stanford, Charles expanded all aspects of his multifaceted career. He directed the autopsy service, published scientific reports, spent many hours on national panels and lectured throughout North America and Europe.

Clearly, during his Stanford years Charles became nationally recognized for his classification of a variety of lung diseases. His knowledge was reflected in the published literature, and a consulting practice flourished as the continent's most difficult pathological questions involving lung diseases came to Charles, particularly after mentor Liebow's death. Colleagues noted that there probably isn't a single pulmonary pathologist in the nation who has not been profoundly influenced by Charles.

But despite every other activity, teaching remained a top priority. There was time to teach both on the formal and clinical levels.

Much of Charles' educational efforts, of course, occurred in the autopsy room and at the microscope where he worked closely with young doctors in training. But Charles also lectured extensively in the settings of the medical school classroom and postgraduate seminars.

His colleagues noted the tremendous care he displayed in preparing for the classroom and that every element of a Charles Carrington lecture, from the selection of a slide to illustrate a point, to the precise use of language to convey an idea, was always correct.

His sense of timing in lectures was also notable. It is a testament to his wry sense of humor that he would ask his hosts how long a visiting lecturer should speak. Charles would then comply with the appointed time frame, a sense of accuracy quipped about by his circle of intimate colleagues.

But of course it was the quality of his material that stood out. At such prestigious postgraduate courses as those given by the American College of Chest Physicians, Charles' lectures consistently gained the highest laudatory reviews from participants and attendees.

In 1985, just two months before his death, Charles received the Henry J. Kaiser Award for Excellence in Preclinical Teaching, voted to him by Stanford's medical students.

Charles' teaching style varied significantly, depending on his audience. With medical students, he was notably compassionate and supportive. With house staff and colleagues, he could be caustic, believing strongly that professional colleagues should not be patronized. But even when acerbic, his style was laden with wit and the perspective of an urbane man with wide tastes and intellectual interests.

Charles was a devotee of mysteries and intrigue in fiction, which is not surprising because so many of his clinical and research endeavors reflected the best aura and style of premier detective masters. Charles was also a gourmet cook and connoisseur of fine wines. This was an interest that allowed him to offer pleasure to others and share his zest for living with colleagues and friends. And there are many who will miss him!

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