In Memoriam

In Memoriam Tribute to James A. Shaver, MD

James Scheuer, MD; Barry London, MD, PhD

Dr James A. Shaver, our friend and colleague, died of pneumonia on April 13, 2012, after a long history of chronic renal disease. At the time of his death, he was professor of medicine and the former chief of the division of cardiology at the University of Pittsburgh School of Medicine. Born in Ridgway, Pennsylvania, he was elected to Phi Beta Kappa at the University of Pennsylvania and to Alpha Omega Alpha at the Hahnemann Medical College, from which he graduated in 1959. Dr Shaver trained in internal medicine at the University of Pennsylvania and the University of Pittsburgh, where he also completed his cardiology fellowship. He joined the Pitt faculty in 1965 and rose through the ranks to become a full professor in 1977. He was director of the cardiac diagnostic laboratories and then became director of the division from 1971 to 1994. Dr Shaver also served as director of the Cardiovascular Fellowship Program from 1971 to 2006, training more than 325 fellows, many of whom went on to assume leadership positions of their own. Since he left the division directorship, he led the medical school second-year course in physical diagnosis and continued to play an active role as a consulting cardiologist and a charismatic teacher at all levels of medical education.

Dr Shaver was an important member of the Pittsburgh research team of James J. Leonard, Donald F. Leon, and later, Sudhakar Pesara Reddy. They published a series of articles using simultaneous intracardiac sound and pressure to define the genesis of heart sounds in normal persons and those with a variety of cardiac diseases. Dr Shaver provided the leadership for many of these studies.

Among the many observations from their research, the group defined the origins of the ejection click and the mechanism of the Austin Flint murmur in patients with aortic regurgitation, and described the responses of the right ventricle to various hemodynamic loads. Dr Shaver led a series of studies of atrial function in humans that clarified the mechanical contribution of these chambers in a number of normal and abnormal cardiac states. He was one of the first to focus on the importance of diastolic relaxation in humans, a portion of the cardiac cycle that has become increasingly relevant to understanding heart function in disease states. He published one of the first hemodynamic studies of the transplanted heart in a human. He pointed out the importance of dysrythmia in patients with dilated cardiomyopathy and left bundle branch block, a study that became relevant to the development of biventricular pacing in patients with congestive heart failure. Dr Shaver’s work was published in the highest impact medical journals, including Circulation, the New England Journal of Medicine, and the Journal of Clinical Investigation. Because of his wide recognition, he was invited to write numerous reviews, monographs, and chapters dealing with the cardiac physical examination and hemodynamics.

Dr Shaver was a cardiology leader, with international and national recognition. He was active on many committees for the American Heart Association and the American College of Cardiology. This included serving on the boards of directors and executive committees for the Council of Clinical Cardiology of the American Heart Association and the Pennsylvania Heart Association. He served as president of the Western Pennsylvania Heart Association. He held leadership positions for the Central Society of Clinical Investigation. He was president of the Laennec Society and an active participant in the Association of University Cardiologists. He served in the International Society for Heart Transplantation and the International Society of Noninvasive Cardiology.

Dr Shaver’s teaching of clinical cardiology was legendary, and he instructed thousands of medical students, residents, and cardiology fellows about how to listen to the heart. He won awards from the major cardiological associations, in-
cluding the American Heart Association and both the Teacher of the Year and the Richard and Hilda Rosenthal Foundation Awards of the Council of Clinical Cardiology. He also garnered numerous additional teaching and service awards from the Western Pennsylvania Heart Association and the University of Pittsburgh. When the University of Pittsburgh School of Medicine created an Academy of Master Educators in 2006, Dr Shaver was elected as one of its founding members. Among his proudest awards was the American Heart Association Pulse of Pittsburgh award in 2007, and gifts in Dr Shaver’s name related to this award were used to fund several research grants from the Great Rivers Affiliate of the American Heart Association.

Dr Shaver developed chronic renal insufficiency as a young man, and subsequently underwent dialysis years before he had the renal transplant that kept him alive for >34 years. More recently, he developed paroxysmal atrial fibrillation that required several cardioversions, and he became primarily wheelchair bound. We cite these personal facts to highlight that, even with these medical conditions, Dr Shaver never lost a beat in teaching, providing clinical care and leadership, and involving himself in international activities. Before his transplant, he traveled widely, and when he required dialysis during those trips he would arrange to undergo that procedure wherever he was, and then go about his visiting professor or conference duties. At home he taught, saw patients, and provided leadership right up to the end of his life. During most of his years he was an avid bicyclist, and participated fully in all activities of life no matter what complication he might be experiencing at the time. Despite his difficult health, Dr Shaver remained energetic and optimistic, and wanted to contribute to cardiology as long as was possible. He succeeded.

Dr Shaver represents a vanishing species of academic cardiologists: a master clinician and educator with the highest standards; a fine investigator of normal and abnormal cardiac function in humans; a charismatic leader with a broad view of our field who, by example, stimulated outstanding performance in others. Dr Shaver was a warm individual who attracted and motivated generations of students and young physicians. He was an inspiration not only to his trainees, but also to those of us who were lucky to work with him professionally and to count him as a friend. His energy, his optimism, and his devotion to excellence affected our lives profoundly. The interactions we had with our friend and colleague left us richer as human beings and as physicians. Dr Shaver was a devout Catholic, with deep faith. He is survived by his beloved wife Kathleen, 3 children, and 6 grandchildren. They and we will all miss him.

Disclosures

None.
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