

A PIONEER BOWS OUT

MEMPHIS

In his 23 years as department head, Dr. James T. Robertson has been in the forefront of dramatic changes in neurosurgery.

BY TIM SEWELL

DR. JAMES ROBERTSON, HIMSELF A TALENTED NEUROSURGEON, HAS TRAINED 50 OTHERS DURING HIS CAREER.



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Dr. James T. Robertson was only eight when his younger brother, Clyde Jr., died of meningitis. His brother's death determined the course of Robertson's life and, indirectly, had a significant impact on the future of neurosurgery.

"That was the pivotal moment in my life," says Robertson, chairman of the department of neurosurgery at UT Memphis. "I was amazed at how rapidly a person could die with something attacking the brain. That's when I began thinking about a career in medicine."

Fifty-seven years later, Robertson, the son of a clerk-typist and a railroad clerk, has risen to the top of the medical subspecialty known as neurosurgery. On June 30, he will step down after 23 years as department chairman. Dean Robert Summitt of the College of Medicine calls

Robertson "a natural leader."

"I've known and admired Jim Robertson for over 30 years," the dean says. "He represents the best as an alumnus of the College of Medicine, as a faculty member, as a department chairman, and in his many capacities of natural leadership in neurological surgery."

Robertson has been at UT Memphis for most of the past 45 years, starting as a medical student in 1951. While he was in school, he worked part-time at Baptist Hospital in Memphis. He became fascinated with neurosurgery and met two men who would become his mentors and role models, Drs. Francis Murphey and R. Eustice Semmes.

"They inspired and challenged me," Robertson says. "I knew by my senior year of medical school that I wanted to go into neurosurgery."

Robertson graduated from UT Memphis in 1954 and did residencies in Memphis and Boston. Then came four years in the air force. In 1964, he came back to UT Memphis as an instructor in neurosurgery, a position offered to him by Murphey, who was neurosurgery chairman.

Robertson began developing a reputation as a local pioneer in neurosurgical methods and techniques. In 1965, he became the first Memphis surgeon to use an operating microscope for neurosurgery. He made significant contributions to the study and treatment of head injuries, strokes, brain tumors, and other neurological disorders. He pioneered a new approach to spinal disc surgery and helped document the cause and treatment of vasospasm, the sometimes deadly byproduct of a burst blood

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vessel in the brain. Robertson also helped chart the best treatments for brain tumors and carotid arteries narrowed by fatty deposits.

While he's received a number of awards and honors, perhaps the highest tribute to his skill as a neurosurgeon came in 1971. That was the year Murphey, Robertson's mentor, learned that he needed neurosurgery. He requested Robertson.

Murphey stepped down as chairman of neurosurgery in 1971; Robertson became chairman in 1973. Since either Murphey or Eustice Semmes had run the department since the 1930s, it was the end of one era and the beginning of another.

Over the past 23 years, Robertson has been on the front lines of the technological revolution in neurosurgery. Dramatic changes began in the 1970s with new imaging technology. Magnetic resonance imaging came along in the 1980s. Today the focus is on stereotactic surgical procedures.

"We can diagnose things earlier and do things for patients that we couldn't do 30 years ago," Robertson says. "Back then, the mortality rate for neurosurgery patients was 25 to 30 percent. Today the mortality rate is less than 5 percent."

Robertson has trained 50 neurosurgeons including his brother Jon, 15 years his junior. Jon is an associate professor in the department of neurosurgery at UT Memphis.

"I think my brother may have influenced my decision to some degree," says Jon of his choice of specialty. "When I finished medical school, I knew that I wanted to do some type of surgery—either neurosurgery or cardiovascular surgery. I chose neurosurgery.

"It's awkward at best to train in a program where your brother is the chairman. I think it was awkward for him as well. He couldn't show favoritism.

"He is an excellent teacher and a skilled physician," Jon says. "He has always conducted himself with the

highest level of integrity."

In addition to his teaching, research, and administrative duties at UT Memphis, the elder Robertson has been very active in national professional organizations. He was a founding member of the Society of University Neurosurgeons and has been a leader of at least three other professional groups.

"I have thoroughly enjoyed being a neurosurgeon," Robertson says. "I've enjoyed every aspect of it—the training, the research, the patient care, and the organizations."

The future of neurosurgery intrigues him. While the technological changes in the field during the last 30 years have been revolutionary, Robertson says the future looks even more exciting. He predicts major advances in imaging capabilities and stereotactic procedures.

"We'll be able to do major treatments through very small openings in the head," Robertson says. "Some interventional radiological procedures will blossom, and I believe the whole field of using drugs to dissolve blood clots in the brain will open up.

"We'll see new ways to modulate brain function. We'll be able to take brain cells from an uninjured part of the brain and restore function. We'll see such dread diseases as Alzheimer's and Lou Gehrig's treated. Tumors of the brain will be conquered with molecular biology."

Robertson predicts the number of cases of stroke and atherosclerosis will begin to decline as the result of preventive medicine. He also says Americans will be more educated about brain disorders and begin to equate the concept of a brain attack with that of a heart attack. In the future, victims of stroke will be taken immediately to a neurological center, he says.

While he looks forward to changes in the clinical side of medicine, he's concerned about changes in the business side. He worries about how managed care, with its emphasis on the primary care physician as gate keeper, will affect neurosurgery.

"Managed care will reduce the number

of specialists. That's not bad. There's no reason that we need 40 neurosurgeons in Memphis.

"[But] I am concerned about how managed care might restrict a patient's access to a specialist," Robertson says. "In this field, so many diseases are stereotyped, which means that they present in the same way. For that reason, one family member may be able to diagnose another family member and refer them to a specialist. Family referral has been a major source of patients."

Robertson has closed his private practice and resigned as chief of neurosurgery at Baptist Memorial Hospital. He is still chief of neurosurgery at the Veterans Affairs Medical Center but expects to resign this fall. He isn't retiring totally though. In fact, he's taking on some new projects. He will retain his tenured professorship at UT Memphis and continue as director of the Brain Injury Research Center, which he helped establish in 1992.

He'll go to England, where he's helping establish a clinical research center for spinal disease at the Frenchay Hospital in Bristol. The UT Memphis department of neurosurgery has been affiliated with Frenchay for 20 years, and Robertson is the senior consultant in neurosurgery.

With some of his professional responsibilities behind him, Robertson says he will take more time to enjoy nonmedical pursuits. He has six children—one a neurosurgeon in Fort Myers, Florida—and nine grandchildren. He enjoys gardening and raising cattle on his 270-acre farm near Olive Branch, Mississippi. He also enjoys fine wines and fishing.

Always the student and always the teacher, Robertson is learning to maneuver the Internet.

"I see that as a valuable tool for the future—both for education and for interaction with colleagues around the world. I want to learn all about it so I can be part of that." ■

Writer Tim Sewell lives in Memphis.