



Roscoe R. “Ike” Robinson

Academic medicine lost an exceptional leader with the death of Roscoe R. “Ike” Robinson on August 7, 2004. At the time of his death, Ike was vice-chancellor for health affairs emeritus and professor of internal medicine at Vanderbilt University School of Medicine. We mourn his passing. But we also celebrate the man, his unique nature, and his accomplishments.

Ike matriculated at the University of Oklahoma College of Medicine in 1950. He was among the top three students in his class and a charter member of Oklahoma’s Alpha Omega Alpha chapter. He was also the first intern recruited from Oklahoma to the Duke house staff by Eugene Stead. Ike excelled as a house officer, and after a research fellowship with Stanley Bradley at Columbia University, he returned to Duke as chief resident. Following military service, Ike joined the Duke faculty.

In 1962, Stead asked Ike to form and direct Duke’s Nephrology Division. The Division began with four people: Ike, Caulie Gunnells, Jim Clapp, and Chuck Hayes. Ike created a rich collegial environment hospitable to investigators, clinicians, and clinician-investigators — and he nurtured us all. He was a dazzling clinical mentor. His daily morning report, which I still remember fondly, was a splendid merger of clinical medicine, pathophysiology, and compassion for ill people. Ike was also intimately involved in investigative activities, generally collaborating with younger faculty and fellows. The following contributions are especially noteworthy: a study of urinary ammonia excretion, with the late Eugene Owen, Jim Clapp, and Chuck Hayes; micropuncture studies localizing the site of action of diuretics in the nephron, with Jim Clapp; an analysis of the pathogenesis of low-renin hypertension, with Caulie Gunnells; and a study of single nephron microperefusion, describing phosphate transport in the proximal nephron, with Vince Dennis.

Ike’s leadership yielded superb results. From the initial four faculty members, Ike and his colleagues trained at least 60 fellows. A minimum of 13 graduates of his training program have become nephrology direc-

tors, chairs of medicine or physiology, and/or editors. By the mid-1970s, Ike’s star was in luminous ascendancy. He was appointed to multiple administrative positions, both at Duke and in national organizations. Among the latter, Ike took great delight in being elected to the Council of the American Society of Nephrology, then president of the society in 1981. And the Duke tradition persists. Now led by Tom Coffman, Duke’s Nephrology Unit is outstanding.

Ike then enlarged his interests to encompass academia as a whole and served as vice-chancellor for health affairs at Vanderbilt University between 1981 and 1997. Some of the structures completed at Vanderbilt during his tenure include the Vanderbilt Child and Adolescent Psychiatric Hospital; the Vanderbilt Ambulatory Clinic; Medical Research Building I, renamed the Ann and Roscoe R. Robinson Medical Research Building in 2000; the Annette and Irwin Eskind Biomedical Library; and Medical Research Building II.

But big buildings are not, *sui generis*, indices to excellence. People, and their accomplishments, are. Here are some examples of the high level of scholarship at Vanderbilt under Ike’s leadership: Four of Vanderbilt’s basic science depart-

ments, whose chairs were recruited by Ike, are considered among the top ten in the country. There was a sixfold increase in Vanderbilt’s grants and contracts. Six faculty members were elected to the National Academy of Sciences, and one was selected as a Nobel Laureate. In addition, during Ike’s tenure, the number of full-time faculty members grew from 450 to approximately 1,000.

These data, clearly representative, provide ample testimony that Ike’s legacy will endure. More specifically, academic medicine in our country has been vexed for more than two decades by difficulties in balancing mercantile pressures with academic tradition. It is in this frame of reference that one should judge Ike’s contributions: an unwavering commitment to exalted academic performance, exceptional collegiality, and fiscal responsibility — all of this coupled to an insistence on providing exemplary care for ill people regardless of their financial resources. This splendid mix of pragmatism with academic and clinical gallantry is no small accomplishment.

Finally, there are Ike’s contributions to the International Society of Nephrology (ISN). The ISN began with the vision of the late Jean Hamburger, who wished to bring together students of nephrology from all over the world for intellectual dialogue and scientific meetings. It is fair to say that Ike’s contributions have been pivotal in achieving Hamburger’s vision.

More specifically, in 1972, the ISN launched a new journal, *Kidney International*. Ike was selected to serve as the founding editor of *Kidney International*. He held that position for nearly 13 years. Under Ike’s leadership, the journal became a remarkably successful academic instrument. His contributions to *Kidney International* need to be viewed in the context of the time. In 1972, nephrologic research was meager in many regions of the world. Yet the nascent *Kidney International* faced formidable competition with an array of distinguished journals. To resolve this dilemma, Ike balanced stringent editorial standards with a unique editorial style. Indeed, the most elegant facet of Ike’s editorship was his let-





ters of rejection. They were, in fact, brilliant tutorials, tactful and softened by a note of optimism indicating that a manuscript might be salvaged by added experimentation or extensive revision. And so it was not unusual to see a rejected paper reappear on Ike's desk as a first-rate manuscript.

What are the consequences of his remarkable stewardship? The academic standing of *Kidney International* is unassailable. *Kidney International* has met the ISN's goal of being global in scope, and under Saulo Klahr's editorship, the tradition of excellence continues.

Ike's second major contribution to international nephrology was the ISN *Forefronts in Nephrology* series. The intent of the Forefronts series, conceived originally by then-president Donald Seldin, was to bring

together leading renal investigators with peers from disciplines such as molecular biology and cell biology. In 1985, investigative work in the renal community was still oriented heavily toward classical physiology, pathophysiology, and immunology; the more ecumenical notions of molecular biology had not yet had a significant impact on nephrology. The first Forefronts meeting, organized by Ike in 1986, was the first international gathering that brought to bear in an explicit way the powerful resources of molecular biology to renal research. It was a powerful catalyst stimulating the growth of molecularly based inquiry in nephrology.

As president of the ISN from 1990 to 1993, Ike recognized that the International Congress of Nephrology faced two key problems: significant information gaps

between highly developed nations and maturing nations and the fact that some national meetings, particularly those in Western Europe and the United States, had become, in effect, competing meetings. Accordingly, Ike proposed that a thematic, broadly based program be adopted that would be palatable to all folk in the international renal community and that ISN meetings be coupled to meetings of national or regional societies. Both strategies worked brilliantly.

Ike's death saddens us. But we will all long remember his wonderful nature and his superb legacy to medicine.

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