Edward Peirson Richardson Jr. (1918–1998)

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Edward Peirson Richardson Jr. (“EPR”) was born at the Massachusetts General Hospital (MGH) on April 3, 1918, and died at his home in Brookline, Massachusetts, on November 30, 1998. His career spanned half a century and was spent almost exclusively at the MGH. Indeed, when a young trainee once asked him, “Dr. Richardson, how long have you been at the MGH?” he replied, after a thoughtful pause, “Well . . . I was born there.”

He was a member of a family with long ties to the MGH and to Harvard Medical School (HMS). EPR was the descendant of two illustrious Boston medical families: his father (Edward Peirson Richardson) and paternal grandfather (Maurice Howe Richardson) were Chiefs of the MGH Surgical Service as well as professors at HMS; on his mother’s side (Clara Lee Shattuck), he was the sixth Shattuck physician in the direct line, including four generations of HMS professors, the first of whom also served as Dean (1864–1869). Shattuck Street, the current site of HMS, is named to honor this extraordinary family.

EPR was the eldest of three children, all of whom went on to remarkable careers. His younger sibling Eliot Lee Richardson, a lawyer, attained several high Cabinet offices in the Nixon administration, including that of Attorney General. The youngest of the three boys, George Shattuck Richardson, also distinguished himself as a staff member in the Department of Gynecology at the MGH and as an Associate Professor of Gynecology at HMS.

After attending Milton Academy, EPR joined the Harvard College Class of 1939, majoring in German. He retained a keen interest in the German language and culture throughout his life and, although he never lived in German-speaking countries as a young man, he spent time in Giessen at the Max Planck Institute in the latter half of 1955 and obtained an Alexander von Humboldt Award that allowed him to spend a sabbatical year in Berlin in 1982–1983. His command of the language was exceptional; he could simultaneously read and translate into English a written text from the medical literature with precision and fluency; his spoken German was also remarkable, and he delighted in engaging German-speaking colleagues at international meetings or reciting poetry (he was especially fond of Goethe’s “Erlkönig”). He was also fluent in French and had knowledge of Italian and the Scandinavian languages. He entered HMS after college, graduating in the class of 1943A.

Dr. Richardson’s professional association with MGH began with an internship in medicine (1943–1944). He then served with the U.S. Army as a neuropsychiatrist in Hawaii from 1944 to 1946. He returned to the MGH in 1946 for a residency in psychiatry under Dr. Stanley Cobb, whom he greatly admired. EPR fondly remembered the years with Dr. Cobb and invited him to...
spend time in Neuropathology during Dr. Cobb’s retirement years. In 1947 Dr. Richardson went to London to study neurology at the National Hospital for Nervous Diseases at Queen Square and psychiatry at the Maudsley Hospital. While at Queen Square he met Dr. J. Godwin Greenfield, the noted neuropathologist who had trained Dr. Charles S. Kubik, the founder of the MGH neuropathology laboratory (chapter 17). In 1949 Dr. Richardson returned once more to MGH as Dr. Kubik’s assistant (figure 11.1). In 1951, upon Dr. Kubik’s retirement, Dr. Richardson took over the direction of this laboratory (figure 11.2) and led it to international recognition, working with illustrious professors of neurology and pathology (figure 11.3), including Drs. Raymond D. Adams (chapter 17), C. Miller Fisher (chapter 17), Benjamin Castleman (chapter 8), and Robert T. McCluskey (chapter 14). He directed MGH Neuropathology until 1989. Although he formally retired in that year, he continued to work and teach until a few months before his death. In addition to his many neuropathological duties, Dr. Richardson was a sought-after clinician, attending regularly on the wards and engaging in a limited clinical neurological practice.

EPR was a much-respected and beloved teacher of neuropathology, not only of MGH neurology residents, who for 25 years spent one year of their training in his laboratory, but also of pathology residents and HMS students. He taught for more than 20 years in the HMS neuropathology course directed by Drs. Raymond D. Adams and Alfred Pope. Although this course was designed for the second-year medical students, it was also taken by trainees in neuropathology. The course had the additional benefit of enabling all the young neuropathologists in Boston to get to know each other, as well as EPR. His interest in medical student education continued well into his eighth decade and included his taking a leading role in the design, implementation, and teaching of the neuropathology portion of the “New Pathway Course in Neuroscience (Human Nervous System and Behavior).” He made numerous contributions to the weekly CPC cases (chapter 24) and discussed some as the clinician. He helped prepare the clinical protocol for the neurological cases, presented many of the neuropathological

Figure 11.1  E. P. Richardson Jr. after his return from England, ca. 1949

Figure 11.2  E. P. Richardson Jr. at the microscope, 1950s
correlations between the clinical and pathological features of the case. Dr. Richardson's contributions to neuropathology were extensive, and the breadth of his interests in neuropathology was extraordinary, encompassing almost every category of neurological disease. Notably, he maintained this breadth throughout his career. In the 1950s his important papers ranged from one with Dr. Kubik addressing brain abscess (1) to another on seizures secondary to cerebral infarcts (2), to his first paper on the leukodystrophies (3). This last paper was a result of a collaboration with Professor P. B. Diezel when EPR spent time at the Max Planck Institute in Giessen. His lifelong interest in the leukodystrophies sprang in part from these studies.

Perhaps most notable of his early seminal papers were the two on progressive multifocal leukencephalopathy (PML) written in 1958 and 1961 (4, 5). Both papers gave definitive descriptions
of the newly recognized entity. Oddly enough, as EPR was a most generous man with his time and knowledge and also with the material in the laboratory, there was some quibbling in various venues about the primacy of the observation and primary credit for the discovery of the disease. The disease was relatively rare and was known to affect immunocompromised patients preferentially; with the emergence of AIDS 20 years later, it reappeared in a new population of immunodeficient individuals and achieved new prominence. His editorial published in the *New England Journal of Medicine* in 1988 gives a complete rendition of the evolution of understanding of the disease (6).

His work in the 1960s was similarly broad, ranging from studies in medical education (7) to the seminal description of corticobasal degeneration (8), an exhaustive analysis of the myelopathy of pernicious anemia (9), an important paper characterizing granulomatous angiitis of the central nervous system (10), and a classic study on the neurological and neuropathological features of systemic lupus erythematosus (11). Dr. Richard T. Johnson, who became a distinguished neurologist with an international reputation for his work on neurovirology, once noted that of his many contributions over the years, the paper on the neuropathology of lupus, written while a trainee rotating in the Neuropathology Laboratory, was the one that was quoted most often.

In the 1970s EPR published important papers on periventricular leukomalacia in infants (12), adrenoleukodystrophy (13, 14), Hallervorden-Spatz disease (neurodegeneration with brain iron accumulation type 1) (15), an unusual cause of thalamic dementia (16), spinal epidural abscess (17), and ischemic leukoencephalopathy (18). An often quoted paper from the late 1970s is a complete description of the neuropathology of Creutzfeldt-Jakob disease, which for the first time gives a documentation of the histopathologic changes over the course of time, defining the various stages of spongiform degeneration (19).

In the 1980s he published key papers on the neuropathology of AIDS (20) and on what would become a major interest of his in the last part of his career, Huntington’s disease (21–23). A contribution from the 1990s was a textbook on peripheral nerve pathology written with one of the authors of this chapter, Umberto De Girolami (24). This grew out of an earlier project with others (Drs. Raymond Adams and William Schoene) to create a new textbook of neuropathology. The book on peripheral nerve pathology resulted from 10 years of regular meetings between its coauthors, either at MGH or at Brigham and Women’s Hospital, to collect and study cases from the hospital files, review the literature (which included taking copious notes and then tabulating everything), and write. The authors usually dined in the Prouty Garden at Children’s Hospital, where the two could sit on the veranda and admire the blooming trees and exotic plantings. The monograph was a product of this long-standing collaboration and one that De Girolami remembers fondly, since the review of the world literature with his coauthor was so thorough.

Dr. Richardson’s interest in the history of neurology and neuropathology was also keen, leading to a number of publications (25). In this regard, a fascinating article of his was published posthumously in the *New England Journal of Medicine* on the neuropathology of Eugene O’Neill’s illness (26). Over the course of his career, he also wrote definitive chapters on the neurodegenerative diseases in *Harrison’s Principles of Internal Medicine*, and on striatal syndromes and systemic lupus erythematosus for the Vinken and Bruyn *Handbook of Clinical Neurology*.

Dr. Richardson was widely recognized for his achievements and received numerous honors. He was appointed Professor of Neuropathology in 1974 and Bullard Professor of Neuropathology in 1984 at HMS. He served on the editorial boards of many neurology, pathology, and neuropathology journals. He was elected President of the American Association of Neuropathologists.
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for 1973–1974, and in 1988 the American Association of Neuropathologists bestowed on him its Meritorious Service Award. He was a Charter Member of, and an active participant in, the Diagnostic Slide Session of the American Association of Neuropathologists from its inception in 1959. He served as a consultant to the National Institutes of Health in many capacities, including service on the Council of the National Institute of Neurological and Communicative Disorders and Stroke. In 1982 he received the Senior Scientist Award of the Alexander von Humboldt Foundation. He was elected a member of the Royal Society of Medicine in 1984. He was twice Litchfield Lecturer at Oxford University, first in 1975 and again in 1990. Also, in 1990 he was the Dorothy Russell Memorial Lecturer of the British Neuropathological Association. He served on the boards of the National Multiple Sclerosis Society, the United Leukodystrophy Foundation, the French Foundation for Alzheimer’s Research, and others.

EPR had a deep appreciation of music. He played trombone for the Harvard Band while in college and again at the 75th Anniversary of the Band celebrations in 1994, when he performed on the field. He played each year in the annual holiday concert at MGH. He was an active

supporter of the New England Conservatory of Music. He also maintained a lifelong interest in sailing. Many of his happiest moments were with his family aboard their schooner, Serenity, in Maine waters (figure 11.4). He also kept up a long-standing interest in railroads, steam trains, narrow gauges, and Pullmans. He was a vigorous individual, and even while ailing would still run up three flights of stairs, chop wood, or vault a rural streamlet like a youth.

Above all, EPR was a warm, friendly, courteous, cheerful person who was unfailingly kind to all he met. His soft-spoken, friendly manner endeared him to his trainees and his colleagues. He was a paradigm of fellowship and probity and had an equanimity that was the envy of his colleagues (figure 11.5). One of his instantly recognizable personality traits was his courteous, calm
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interest in what others had to say and what they were about. Yet this attentive listening was not uncritical and would elicit a spirited response when what was heard was imprecise; when accurate, it might well be amplified in good cheer by new data and historical insight. He was a quiet, private man, not given to excessive rhetoric and always measured in his expression, although very much capable of youthful excitement and fascination at the discovery of new things. The breadth and depth of his knowledge in neuropathology was continually fed by his excitement upon looking through the microscope, especially when it was rewarded by finding a hitherto unrecognized diagnostic feature or by gaining insight into a disease process. Such an event would suddenly alter his placid manner to one of joyful exuberance. Over the half century he served on the staff of MGH Pathology and Neurology, he willingly imparted his wisdom to countless residents with equanimity, patience, and generosity. The deep affection that he engendered in his trainees was demonstrated by the return of more than 130 of them to a celebration in his honor in 1990 (figure 11.6). EPR’s long-term interest in medical students and their education was manifested by his benefactions to MGH and HMS, including establishment of the E. P. Richardson, Jr. Fellowship in Neuropathology at MGH.

His brother George, speaking at his memorial service, captured him in the following words: “Tended and taught by the gentlest and wisest of beings, he became as a teacher the gentlest and wisest himself, with all the good things in that Latin word, ‘pius’: dutiful, filial, brotherly, fatherly, honest, upright, conscientious. What seemed to be quaint and old-fashioned formality was the merest hint of a deep-seated reverence: seeing the Universe in its details, the world in a grain of sand, and in us, in all of us, striving souls, like himself.”

Note: Portions of this chapter were taken from the following three sources:


References


