An Interview with Prof. Dr. Richard Sutton

Prof. Dr. Richard Sutton ile Söyleşi

Dr. Richard Sutton is one of the pioneers in Cardiology era. He succeeded great researches on pacemakers and vasovagal syncope. In cardiology, when you think about dual chamber pacemakers, neurally mediated syncope, he is the first to be remembered. I had great honor to be his cardiology fellow at Westminster hospital for one year from 1989-1990. He is one of the professors who had a great role in my career. In September 2012, he visited İzmir for a Cardiology meeting and I did have a chance to have an interview with him. After so many years, he was still fit and handsome.

SG: First of I would like to say you welcome to my country and my lovely city İzmir. I thank you so much for accepting this interview. Prof. Dr. Bilgin Timuralp, the Editor in Chief of Anatolian Journal of Cardiology and who you know very well, asked me for this interview which is going to be published in the Anatolian Journal of Cardiology. We had met each other several times in International Cardiology Meetings after I left London, but today I am excited to have an interview with you after many years. My training as your cardiology fellow, helped me so much to have a successful career.

RS: You are welcome. I am also happy to see you and give this interview. Please send Prof. Dr. Timuralp my best regards and I am hoping to meet him for some time.

SG: I would like to start with your childhood, where and when were you born?

RS: I was born in Newport, Monmouthshire, Great Britain in 1940. I was the only child of my family. My father was a doctor, ENT specialist, my mother was a housewife. Our house was large with 11 rooms and two maids were working. I decided to be a doctor at the age of 15. My father told me if I want to be a doctor, I had to work hard. I graduated from high school with best grade. My medical school was Kings College in London.

SG: Would you tell us about your early days, as being a junior doctor?

RS: When I graduated from my medical school, I was 24 years old and my first job was at Plymouth General Hospital as a house surgeon in General Surgery. It was a very busy hospital and I worked there as a junior surgeon from 1964 to 1965 and did more than 20 appendectomies and one cholecystectomy. I achieved great experience there especially in surgery. In those years I really worked hard and started to admire my job. After that, I was trained in Internal Medicine especially in Diabetology at the same hospital. As a house physician, I worked at Kings College Hospital, St. Stephen’s Hospital and London Chest Hospital. During my training at St. Stephens Hospital, I had great inspiration from my consultant Dr. Philip Harvey.

SG: Why were you so interested in cardiac pacing? Was it because you worked as a registrar in Dr. Aubrey Leatham’s clinic so many years?

RS: I believed, that kind of therapy was a very good treatment. Working with Dr. Leatham was a second reason. He was liberal and he encouraged me so much. But he also criticized me in a scientific way.

SG: When did you decide to become a cardiologist?

RS: At the time of my post at London Chest Hospital in 1967. Actually, Cardiology was the section I enjoyed most during my medical school training.

SG: Can you mention your first presentation and publication?

RS: My first presentation was in European Cardiology Congress in 1968. It was about 50 pts with implanted permanent pacemakers, from 1960 to 1963 followed for 5 years. Those patients had stayed for 240 days (mean) at hospital at those days. Today, patients can be discharged even in one or two days. This shows how medicine has developed.

My first publication was in Lancet and the topic was temporary pacing in patients with acute myocardial infarction, in 1968. In late 60’s, most of the temporary pacing was performed by me in most of the hospitals in London. After a phone-call, I was riding with my small car, to that hospital and doing the procedure.

SG: When did you become a Consultant Cardiologist?

RS: In 1976. I worked as a consultant first at Westminster and St. Stephen’s Hospitals. Westminster is an important hospital in...
my career. In 1976 Adult Cardiology at Westminster Hospital consisted of ECG and cardiac catheterization with angiography of 2-3 patients per week. During my tenure of this post, I introduced exercise stress tests, M-Mode, 2-D Doppler and color flow echocardiography, 24-hour electrocardiography, nuclear cardiology, cardiac pacing, cardiac electrophysiology, cardiac biopsy, coronary angioplasty, endocardial ablation, and implantation of cardiac defibrillators. These introductions brought Westminster Hospital up to modern standards. These developments particularly contributed to advancement of treatment of cardiac bradyarrhythmias and pacemaker therapy. The hospital became one of the major implantation centers in the UK with more than 200 units per year.

SG: Today in 2012, what is your suggestion on physiologic pacing? When I was your fellow, 80% of pacemakers we were implanting were dual-chamber. Is dual-chamber pacing still your favorite? What will be the future developments, researches in cardiac pacemakers?
RS: Yes DDD is still my favorite, Westminster pioneered the introduction and development of dual-chamber cardiac pacing. It is a physiologic way of pacing, and recent meta-analysis showed that. Exciting point is CRT now, which is lengthening and improving life, I believe that indications will increase in even patients. In the area of reflex syncope more studies are needed. We are investigating this in the very recent trials, such as ISSUE trials.

SG: As a Pioneer, you did a lot of research in vasovagal syncope. You conducted international studies on this topic. Could you please mention some tips of vasovagal syncope in terms of diagnosis and drug or pacemaker therapy? In 2012 we, as cardiologists, did we solve this problem, properly? What is your suggestion for young cardiologists?
RS: ISSUE 2 trial answered some questions. There are some methodology differences in studies in VVS, In patients with reflex syncope over 40 years old with at least 3 syncope in the last 2 years, we put a loop recorder. In 100 patients out of 400, ECG diagnosis of syncope was achieved and 50 patients had a pacemaker. 50 patients did not. Difference was enormous. ISSUE 3, a randomised controlled trial of similar patients to ISSUE 2 showed a real benefit for pacemakers in the medium term. It was published in Circulation this year. It is positively in favor of pacemaker.

My latest project ISSUE -4 is waiting to be started. We will include patients between 18-40 years old. But we are having some financial problems.

SG: Dear Dr. Sutton, are there any the milestones of your medical life?
RS: Closing of Westminster Hospital was a bad milestone in my life. Then I went to Royal Brompton Hospital in 1993. In 1996 I had hard and bad events in my private life. I divorced from my wife in 1998.

SG: For many years, you trained a lot of foreigner cardiologists. As far as I know Prof. Bilgin Timuralp was the first Turkish cardiologist worked with you so many years ago. How many registrars did you have from Turkey? How many registrars from other countries?
RS: Bilgin was the first of any fellows. I enjoyed interaction with people from other countries. More than 25 fellows worked with me from all over the world. They all worked very hard. Bilgin and you became a professor of Cardiology and Dr. Panos Vardas from Greece became the president of ESC. I am deeply honored to be their consultants.

SG: If you would not be a doctor, what would you be?
RS: Never thought about that, may be a lawyer.

SG: If you would have born again would you be a doctor? Would you be a cardiologist? Or choose another branch of medicine?
RS: Yes, I would be a doctor and a cardiologist.

SG: In the world, which is the best city for visiting? Which is the best city to live?
RS: Paris is my favorite city and London is the best place to live.
SG: You live in Monaco today. Why did you choose this country as being a British citizen? Are you retired or semi-retired?
RS: Semi-retired, I am dealing with cardiology training. Jeanne Marie Arrighi who is my girl friend lives in Monaco and I moved there last year.

SG: How many times did you visit Turkey for giving lectures and having presentations? Which cities did you see in Turkey?
RS: First in 1980, a consulting visit for a patient in İstanbul. After that I visited Turkey 8 times, twice Antalya, Eskişehir, İzmir and the rest to İstanbul.
İstanbul is an amazing city, with geography, marvelous history, Bosphorus and delicious foods.

SG: What was the thing that affected you most in Turkey? What is your favorite food in Turkey?
RS: Turkish cuisine is very good, delicious, especially desserts, Baklava!

SG: What is the happiest and unforgettable day in your professional and personal life that you can remember?
The day which I became a professor in 2003.

SG: When you look at your life, is there any occasion in the past, that you would not wish to do today?
RS: Professionally, we were mapping right heart cavities, but we missed the His bundle. Unfortunately the same year it was published by Sherlag B et al. I wished, I would not miss that. It is a frustration for me.

SG: What do you do in your spare time? Do you have hobbies?
RS: Exercise every day, swimming, opera, classical music, fashion, collecting antiques, interior decoration.

SG: Dr. Sutton you are a Pioneer in cardiology especially in cardiac pacing and you had worked very hard, spent a life on science and care of patients. You did an excellent job. Doing all those things may have affected your private life. Do you have any suggestion in terms of personal and professional life?
RS: It’s a question, but I don’t know the real answer. Cardiology is so absorbing, you cannot spent sufficient time with your family.

SG: What is the key to be a successful, worldwide known cardiologist?
RS: Working hard, respect your colleagues at every level, and of course publication.

SG: Is there anything else that you want to say to Turkish Cardiologists?
RS: I see a lot of energy in Turkey. There is a good potential in your country. Standards of English have improved from Turkey. Senior doctors must lecture on how to write a scientific paper and educate on that.

SG: Thank you very much for this wonderful interview. I wish to see you again in another time. My best wishes for you and your family.
RS: I thank you very much for this kind conversation. I also wish best for you and your family.

Prof. Dr. Sema Güneri
İzmir, 07.09.2012