In 1950, three authors—one pathologist, one internist, and a junior medical student—decided to collaborate on a review of published information on dissecting aneurysm of the aorta in English literature, emphasizing the contributions made since the classical monograph of Shennan was published in 1934.1

"To assure ourselves of interest in such a manuscript, we wrote John H. Talbott, who was then editor of Medicine, a journal catering to review articles, regarding his interest in the topic. In his cryptic reply he indicated that he was 'always interested in reviewing a good manuscript'—a reply that was encouraging enough for us to initiate the effort but permitted him the latitude to reject our manuscript if he considered it unsuitable for publication. We indicated that we expected to complete the manuscript in about a year and a half.

"Six years (and several revisions) later, the article was ready to submit. Our junior coauthor's contribution consisted largely of a summer vacation spent reviewing articles for the compilation. At that time, tabulation of data was tedious since there were over 400 articles on the subject and inexpensive duplicating techniques were not generally available. The articles were abstracted by hand, and many had to be obtained on interlibrary loans. We are greatly indebted to our two secretaries, Ardyce Koobs and Wanda Rice, for their patience in retyping the manuscript. Our opus was submitted in the spring of 1957, but we had not received any word of its acceptance by fall. Suspecting no news was bad news, we wrote Talbott, who informed us that his editorial board had been on vacation and had not had time to read the manuscript. It was an exciting day when we received the letter of acceptance, with publication scheduled for September 1958. Our 62 page review included information on 505 cases and included 346 references. No doubt the exhaustive review of this large series of dissecting aneurysms is responsible for this article being so frequently cited.

"A brief historical account was followed by a discussion of the causes and mechanisms of development of dissecting aneurysm of the aorta. When possible, an attempt was made to correlate symptoms and signs with the underlying pathologic process. We particularly searched for unusual findings on physical examination, x-rays, or laboratory studies which provided diagnostic clues that would prove helpful in recognition of the disease.

"A resurgence of interest in dissecting aneurysm occurred early in the 1950s with the development of effective surgical procedures by De Bakey and associates2 and more recently by the development of encouraging medical regimens by Wheat et al.3 Despite these signal advances, the mortality from the disease remains distressingly high, indicating that there is still much to be learned about this catastrophic disease.

"A recent, comprehensive, although less detailed, study of the disease is found in Acute Aortic Dissections by C. E. Anagnostopoulos.4