

This Week's Citation Classic

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Prichard R W. Tumors of the heart. *Arch. Pathol.* 51:98-128, 1951.
[Laboratory of Pathology of the New England Deaconess Hospital and the Harvard Cancer Commission, Boston, MA]

An analytic review of heart tumors, primary and secondary, is supplemented by a description of 150 newly reported tumors. One hypothesis concerning the origin of cardiac myxomas, tested by study of a series of human hearts, could not be confirmed; an alternate suggestion is made. [The SCF® indicates that this paper has been cited over 220 times since 1961.]

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"Finding my 1951 paper on a computer printout with classical examples of basic research is sobering evidence of the machine's impartiality. My first reaction to the invitation to write this piece was to decline; no one should think me unaware of the qualitative difference between my paper and the earlier ones in the series.^{1,2} But if my largely analytic and descriptive effort has been useful over more than a quarter century, perhaps there is merit in saying a word for a type of scientific writing often disparaged by people who should know better. Careful description of the natural experiments we call 'cases' have played a major role in the development of scientific medicine and are often a starting point for basic insights into disease and its treatment. I hope young people in medicine will accept case studies as part of their scholarly

obligation.

"In spite of their present unpopularity, there was even less money available for case studies in 1949. As a second-year pathology resident, I was dependent on the kindness of my chiefs — Drs. Shields Warren and William Meissner — for the services of their laboratory in preparing sections and taking pictures. I had never heard of a primary heart tumor when the first patient with one came through our autopsy service. The last review in English had appeared in 1931.³ Convinced that waiting in the wings were developments in diagnosis and surgical treatment that would make at least some of these tumors curable, I took to the literature. Within a few months three more primary tumors came through the autopsy laboratory. The most common primary heart tumor, the myxoma, was not considered a true neoplasm by some authorities. Thinking this might have led to underdiagnosis, I concentrated my efforts on this tumor type, particularly to demonstrate that it is a true tumor.

"Soon after the publication of the paper, I got some inkling that it had been useful. A pioneer cardiac surgeon told me that as he blindly put a finger in a patient's atrium in the old mitral valvulotomy technique he felt something soft and immediately realized he was feeling a myxoma, having recently read about them in my paper. He changed his operative strategy and later removed the tumor. There were other similar experiences. Now there have been major advances in the understanding of cardiac tumors, all of them gratifying because of the curability of some of the tumors. That the humble case study helped is personally satisfying. That the paper was turned down by the first journal to which it was submitted suggests to all authors that persistence is worthwhile!"

1. Mahaim I. *Les tumeurs et les polypes du coeur; etude anatomo-clinique.* (The tumors and polyps of the heart: an anatomical study.) Paris: Masson & Cie, 1945, 568 p.
2. Whorton C M. Primary malignant tumors of the heart. *Cancer* 2:245-60. 1949.
3. Yater W M. Tumors of the heart and pericardium: pathology, symptomatology, and report of nine cases. *Arch. Int. Med.* 48:627-66. 1931.