

# Talent and persistence in hard times

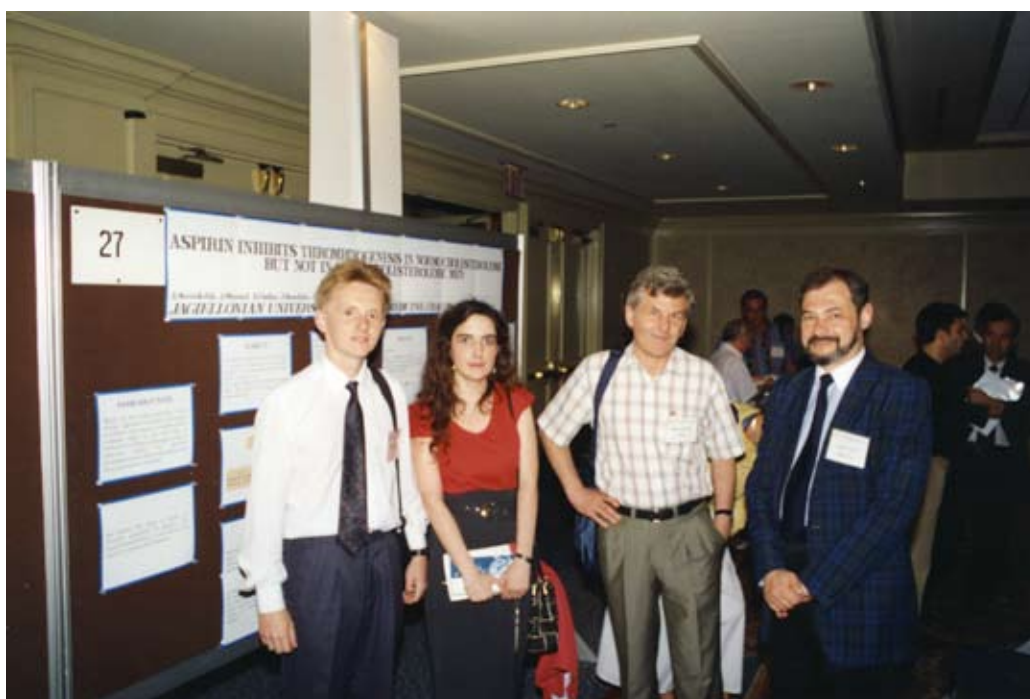
Jacek Musiał

2nd Department of Internal Medicine, Jagiellonian University Medical College, Kraków, Poland

It was not an easy task to perform biomedical research in Poland in the 1970s. But it was in 1972 when Associate Professor Andrzej Szczeklik came to Krakow to become the head of the Department of Allergology of the local School of Medicine. I joined the Department a year later and started my professional career in a small ward on the top floor of an old hospital building. The first move of the 34-year-old head of the Department was to transfer a small cellar room into a research laboratory. We were seeing patients in the morning and then in the afternoon we learned about lab methods, or spent several hours in the medical library to read foreign medical journals that were hardly available at the time. We also browsed the "Current Contents" where by using key words we were able to find scientific articles of a particular interest. Then we were taught to use preprinted postcards to ask authors for most relevant reprints. Xerox copies were a luxury with a limited number of copies reserved for the heads of the departments.

It required a lot of determination and effort to start research in those times. A young Professor Szczeklik was always the first in all these activities. During communism, the value of a dollar was enormous. A small bottle of a simple chemical reagent for the lab use could cost more than our monthly pay, but let us not speak about lab equipment. Some of those bottles came in the professor's pocket from the rare trips to the Western Europe, being usually a gift from the scientists Andrzej Szczeklik visited during those trips.

In the late 1970s, Professor Szczeklik brought from England one of the first versions of the Born's aggregometer, a relatively simple device to measure platelet aggregation in patient's plasma. It required the help of the Rector of the University of Science and Technology and its engineers to bring the device to life, and to manufacture hand-made silicone-coated glass cuvettes and plastic-covered stirring bars necessary to perform the tests. Of course, in the United States and in Western Europe, you could simply buy all



**FIGURE 28** At the congress of the International Society on Thrombosis and Haemostasis. From the left: Dr Jakub Swadźba, Professor Anetta Undas, Professor Szczeklik, Professor Jacek Musiał; New York, 8 July 1993

Correspondence to:

Prof. Jacek Musiał, MD, PhD,  
II Katedra Chorób Wewnętrznych,  
ul. Skawińska 8, 31-066 Kraków,  
e-mail: mmmusial@cyf-kr.edu.pl

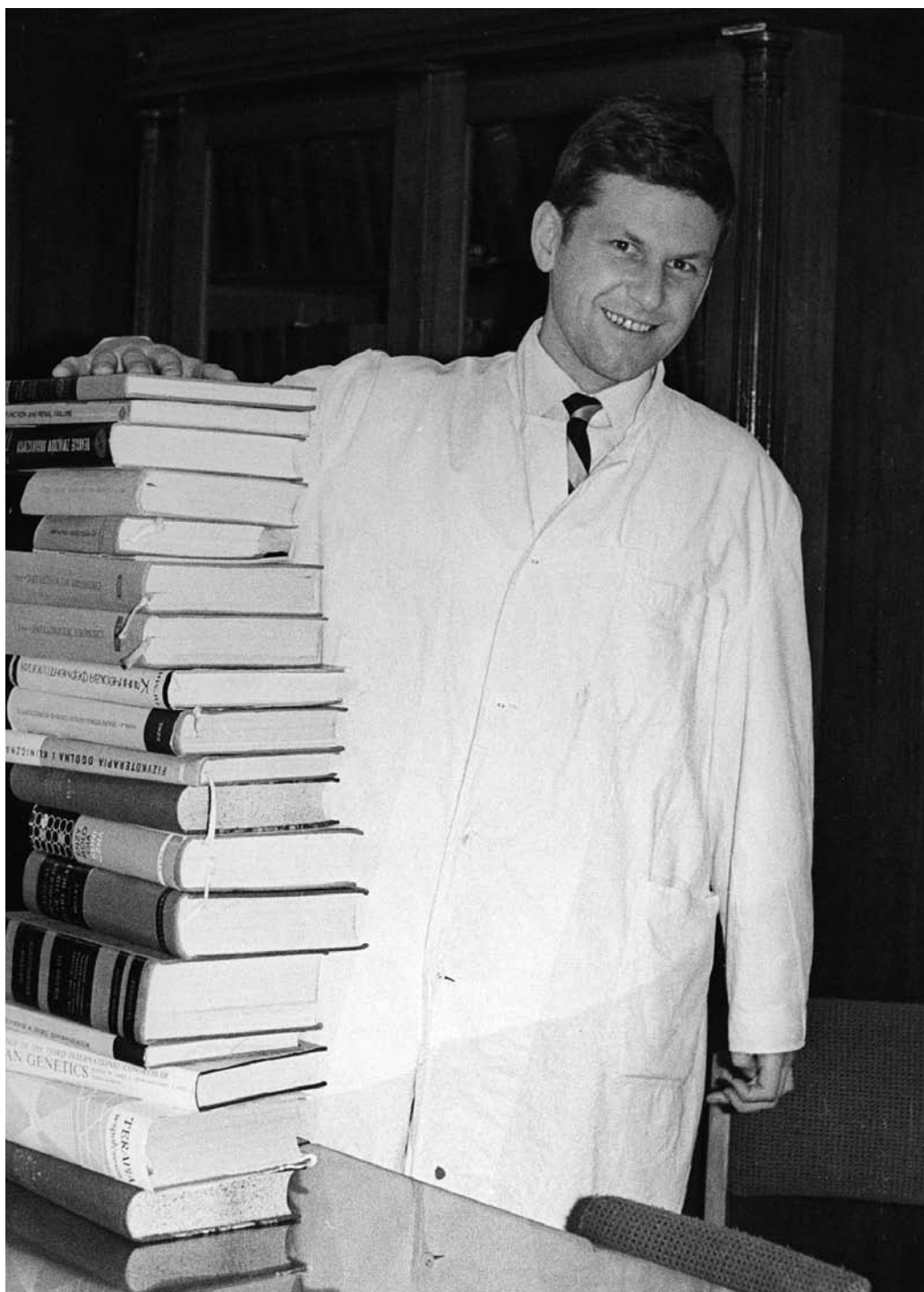
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**FIGURE 29** Professor Szczeklik spent hours in medical libraries, 1970s

that stuff. At that time, we already knew about the possible role of platelet thrombi in the pathogenesis of myocardial infarction and the inhibitory action of aspirin on platelet function. And thus my research began, which later developed into a doctor's thesis. Most importantly, we were keeping pace with similar research going on in the United States and Western Europe.

But to run a competitive research center, it was not enough to furnish the lab with relatively simple devices. Methodology was much more important. At that time, platelet function abnormalities were thought to play a crucial role in

the pathogenesis of atherosclerosis and its acute complication – myocardial infarction. It was (and still is) necessary to learn more complicated laboratory methodology abroad. This meant finding money for such scholarship. Again, this was a “mission impossible” if you did not have contacts in the Ministry of Health. Professor Szczeklik decided to contact a Polish researcher, who had left Poland 10 years earlier, and established himself as a chief of the lab specialized in platelet research at the Temple University in Philadelphia. The scientist was Professor Stefan Niewiarowski. He understood the problem quite well

and this way in the beginning of 1979, during a snowy and cold winter, I left Poland (by plane for the first time in my life!) and landed in Philadelphia. Professor Szczeklik knew, I am sure, that this one-year postdoctoral fellowship would not only enrich our lab with new methodology but also teach his assistants ways and means to conduct modern research. This is how we started an important section of our studies devoted to thrombosis and hemostasis in the 2nd Department of Internal Medicine. Soon, an antiplatelet and vasodilatory prostanoid – prostacyclin – was for the first time administered to men (that is – ourselves!) and the results were published in *The Lancet*. We were on top. Currently, that is in 2012, after all these years and many obvious changes, thrombosis and hemostasis still remain the center of our research.

Personally, I think that those remarkable efforts to create a scientific environment in such difficult times paved the way to the present worldwide position of Professor Szczeklik in biomedical research.