James Herrick and IHD

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James Bryan Herrick (1861-1954) was born in Chicago Illinois. After receiving his BA degree in 1882, he entered Rush Medical College, and earned his medical degree in 1888. Herrick interned at Cook County Hospital, after which he opened a private practice in the Chicago area. Herrick also obtained a part-time teaching position at Rush Medical College, and was appointed as a full professor from 1900-1927. He was also on the staff of Presbyterian Hospital in Chicago from 1895-1945.

His first contributions in medicine came in 1910, when he described an unusual crescent -shaped erythrocytes found in a blood smear from anemic young black Grenada dental student. He also noted tinge of icterus, pigmentation and scars on legs. His description of the student’s disease was known for many years as Herrick’s syndrome (sickle-cell disease).

Herrick’s next contribution is widely acknowledged in coronary heart disease. Although by no means the first to describe, it was he, more than anyone else that made clinicians aware that patient of coronary thrombosis had a characteristic clinical presentation and some patients survived with little lasting damage and the event was not always fatal. He is therefore considered first to describe causes of myocardial infarction as we know today. When Herrick published his initial paper on Clinical features of sudden obstruction of coronary arteries in JAMA (1912), it aroused very little interest.

Herrick then learned use of Einthoven ECG machine with Frank Wilson at Michigan. He published first 6 leads ECG of myocardial infarction in 1918. In his lecture before the Association of American Physicians; he offered concrete ECG documentation in support of his conclusions. In a brilliant presentation, he announced the ability of the electrocardiogram to diagnose the presence of an acute myocardial infarction in a living patient. This was a revelation because, It was the conventional wisdom of the time that an acute myocardial infarction was incompatible with life. Much of Herrick’s documentation was based on experimental work done by Fred Smith, demonstrating the serial ECG changes in the dog following ligation of the coronary arteries,. Frank Wilson recorded chest leads with central terminus in 1934. It was only in 1942 when Emanuel Goldberger added augmented unipolar limb leads that 12 lead ECG came into existence.

Herrick died at the ripe old age of 93. Richard S. Ross, of Johns Hopkins University, eulogized him “as a leader in clinical science but “unwilling to let vanish the human values as family doctor.”