IN MEMORIAM

Louis K. Diamond, MD
1902–1999

Dr. Louis Diamond, 97, died June 14, 1999, at his home in Los Angeles, CA. Dr. Diamond is best known to blood bankers for, in 1932, describing the problem of blood group incompatibility between mother and fetus. He is credited with developing the treatment for the problem in 1940 when he performed exchange transfusions for newborns suffering from erythroblastosis fetalis or hemolytic disease of the newborn (HDN). Exchange transfusions reduced the deaths due to HDN from 50 percent to 5 percent, and he is credited with saving thousands of lives each year before the development of Rh-immune globulin.

Dr. Diamond came to this country from Russia at the age of 2. He graduated from Harvard University in 1923 and Harvard Medical School in 1927 and started one of the first pediatric hematologic research laboratories in the country at Children's Hospital Medical Center in Boston. In 1930, he recognized and described thalassemia in Greek and Italian children. At least two other diseases bear his name: Diamond-Blackfan syndrome, a congenital anemia in children, described in 1938; and Gardner-Diamond syndrome, an autoerythrocyte sensitivity found in young females, described in 1950. He also participated in the first use of chemotherapy in childhood leukemia.

Dr. Diamond was at Harvard for 41 years as professor of pediatrics and head of hematology and associate physician-in-chief at Children's Hospital Medical Center in Boston. He retired from Harvard and moved to the University of California in San Francisco as a professor of pediatrics and went to UCLA in 1987 as an active professor emeritus, remaining active into his 90s.

In 1963, Dr. Diamond won the Karl Landsteiner Award, the most prestigious award of the American Association of Blood Banks. He is credited with being a founding member of the AABB and with helping to organize the national Red Cross system for blood donations and collections, when he served from 1948–1950 as the technical director of the newly formed National Blood Program.

The contributions of Dr. Louis Diamond to transfusion medicine and to the improvement of patient care will be remembered and honored by his colleagues.

Delores Mallory
Editor-in-Chief

Mary McGinniss
Managing Editor

COMMUNICATIONS

Letter to the Editors

"Those Were the Days"

I first heard about SCARE set up by John Moulds, about 20 years ago, and I so wanted to be a part of it. I was not sure that our service would be accepted as a member, but I wrote to John and received a positive reply. He told me that a second SCARE subscriber list was being compiled and that I could become a member. Among the first specimens that I received were two samples of blood from Gerbich-negative patients, one a Ge:-2,3 and the other Ge:-2,3.

As chances go, we received blood from a donor whose blood group was not clear. Our first look at the donor's blood showed us that the serum of this patient contained an anti-HI. The donor had never been transfused. During our initial investigation, we included the reference samples we had received from SCARE and lo and behold, the antibody in the serum was anti-Ge2 and the cells of the donor were Ge:-2,3. We sent this specimen to Ruth Sanger in the MRC Unit in London, and Ruth, in her usual way, wrote a wonderful letter to confirm our findings. Of course, the solving of this case was due to SCARE.

This is only one of the cases in which SCARE helped us to solve cases. Many of them were emergencies in which blood was required for transfusion, and the use of the reference samples we had stored allowed us to locally sort the specificities out. I often thought that the patient who required blood would have been in great

IMMUNOHEMATOLOGY, VOLUME 15, NUMBER 3, 1999

129
COMMUNICATIONS (CONT’D)

danger if we had to wait to send the blood overseas, have
the service investigate the blood, and then see about
finding a compatible donor.

There must be many centers all over the world who
have benefited by SCARF, and for places like our own,
where we are not close to a large reference laboratory, it
has allowed us to work so much more efficiently. John
Moulds and his coworkers in SCARF deserve the con-
gratulations of each and every one of us, wherever we
are in the world, who are still recipients of SCARF.

Cyril Levene, MD
6 Tchernikowsky Street
Jerusalem 92581, ISRAEL

Letters From the Editors

Dedication of the September 1999 Issue of
Immunochemistry to Ortho-Clinical
Diagnostics

The readers, editors, and reviewers of Immuno-
chemistry are grateful for the continued support of
Ortho-Clinical Diagnostics, a Johnson & Johnson
Company. Ortho-Clinical Diagnostics has supported the
publication of the September issue of the journal for 10
years, and has distributed thousands of copies of
Immunochemistry to Ortho Banker's Club members.

Ortho-Clinical Diagnostics is a leading worldwide
manufacturer and distributor of reagents for the blood
bank laboratory. This leadership is demonstrated
through the development and distribution of a full line
of blood bank products, infectious disease screening
tests, RhGAM™, Ultra-Filtered RhD(D) Immune
Globulin, and educational training and support.

What Happens to Abstracts?

As editors of Immunochemistry, we spend many
hours reading abstracts published for blood bank state
meetings, for meetings in Canada and the United
Kingdom, and for the American Association of Blood
Banks and the International Society of Blood Transfusion
meetings. Many of the abstracts present data that appear
suitable for publication in Immunochemistry and
other comparable journals.

We select some 100 abstracts every year and write to
each author asking that he or she submit a manuscript
based on the abstract for consideration for publication.
A few of the abstracts end up as manuscripts published
in this journal. Some are published in other journals, but
literally hundreds are never published. This results in
much worthwhile data carried in the literature only in
abstract form. Information is then lost or incomplete,
and thus of little value to the blood banking community.

I hope that those of you who have had abstracts pub-
lished will put pen to paper, not only for your own benefit as professionals, but also for the benefit of the jour-
nals that would publish them.

Delores Mallory
Editor-in-Chief

Mary McGinniss
Managing Editor

ANNOUNCEMENTS

Annual Symposium. The National Institutes of Health,
Department of Transfusion Medicine, is sponsoring the
18th annual symposium: Immunochemistry and Blood
Transfusion. The symposium, which will be held on
September 23, 1999 at the National Institutes of Health,
will be cosponsored by the American Red Cross and
Nexell. The symposium is free of charge but registration
is required. Contact: Karen M. Cipolone, NIH/CC/DTM,
Bldg. 10, Rm. 1C711, 10 Center Drive MSC 1184,
Bethesda, MD 20893-1184; fax: (301) 496-9990; e-mail:
cipolone@dtm.cc.nih.gov

Masters (MSc) in Transfusion and Transplantation
Sciences. Applications are invited from medical or science
graduates for the master of science (MSc) degree in
transfusion and transplantation sciences at the
University of Bristol, England. The course starts in
October 1999 and will last 1 year. A part-time option
lasting 3 years is also available. Candidates can apply now
for October 1999 or October 2000. There also may be
opportunities for PhD or MD studies. The syllabus is
organized jointly by the Bristol Institute for Transfusion
Sciences and the University of Bristol Division of
Transplantation Sciences. It includes:

\* Scientific principles underlying transfusion and
  transplantation