

Courage and character, leaders and legends: an interview with Clive O. Callender, MD, FACS

Dr Callender arranged to meet me in the lobby of Howard University Hospital. The history of this facility dates back to 1862; at that time the hospital was housed in converted army barracks and was named Freedmen's Hospital. Here, ex-slaves received medical care, being denied care in most other hospitals. In 1975 medical care was transferred to a new hospital, which assumed the Howard University name. As a level 1 trauma center, the hospital sits in a park-like setting on the university campus and has a bed capacity of 350. A large mural in the lobby, called the Legacy of Leadership, illustrates pioneers of Howard University's School of Medicine and Nursing.

Dr Callender met me in the lobby with a welcoming smile and a strong handshake. He has been on staff at Howard University since 1973; in 1996 he was made Chair of the Department of Surgery and appointed as the La Salle D. Leffal Jr Professor of Surgery at Howard University's College of Medicine. After taking a seat in his office, I could see the top of United States Capitol Building just a few miles away.

The Appeal of Medicine

I asked Dr Callender how he became interested in the medical profession and he began by telling me that by the age of 7 he knew he wanted to be a medical missionary. This dream grew from a sermon he had heard as a young boy. The minister told the congregation that the 2 greatest occupations in the world were ministering the souls of mankind and ministering the bodies of mankind. He never forgot those words and used them as a guiding light throughout his life. At the age of 15 he contracted tuberculosis, which resulted in surgical removal of half his right lung. He was hospitalized for 18 months. During this hospitalization he read the entire *Merck Manual* and *The American College Dictionary*.

After graduating from Hunter College in his home town of New York, Dr Callender entered Meharry Medical College in Nashville, Tennessee. His initial goals were to be in medicine and he won Meharry's top prize in medicine as a student. But during an externship in Dayton, Ohio, he was assisting in the care of a patient admitted with gastrointestinal bleeding. The medical team had done all they could when the surgeon came in and took the patient to surgery.

The patient improved and could go home. Dr Callender said he liked that instant gratification and he decided to do his internship in surgery. He did a surgical residency at Harlem Hospital but soon found that general surgery was not complex enough for him. He went to Howard University to become the Chief Resident. Although he learned about a grant from the National Institutes of Health (NIH) that would allow him to do a fellowship in surgery, in 1970, he chose to do the missionary work he dreamed about as a child; he went to Africa for 9 months to work as a physician.

Entering the World of Transplantation

When Dr Callender returned to Howard University he applied for the NIH grant and decided to focus on a fellowship in transplantation. He had graduated from medical school in 1963, about the time breakthroughs were being made in transplantation. He remembered reading about transplantation in medical school and decided to look into this area further with the opportunities afforded him with the postdoctoral program through NIH. In 1971 he travelled to the University of Minnesota where he studied kidney transplant surgery under Dr John Najarian for the next 2 years. He also studied at Downstate Medical Center in New York under the first African American transplant surgeon, Dr Samuel Koontz. Dr Callender returned to Howard University in 1973 to establish the first minority directed dialysis and transplant center in the United States. Later, between 1986 and 1987, he studied liver transplantation under Dr Thomas Starzl at the University of Pittsburgh.

Understanding Obstacles to Donation in the African American Community

In 1978, with a \$500 grant from Howard University, Dr Callender brought together focus groups to understand the obstacles to organ and tissue donation in the African American community. Five major themes emerged from the focus groups, outlining why the community was skeptical of organ and tissue donation¹:

- Lack of transplant awareness
- Religious myths and misconceptions
- Medical distrust
- Fear of premature death
- Racism

With these focus groups as a starting point, Dr. Callender formed the National Minority Organ and Tissue Transplant Education Program (National MOTTEP), a national organization designed to increase minority donation rates. Through educational programs, MOTTEP also focuses on health promotion aimed at preventing the need for transplantation in minority groups.^{2,3}

Greatest Contributions

I asked Dr Callender what he saw as his greatest contributions and I guessed that MOTTEP would be rated number one because of his passion for this project. However, I had forgotten about the influence he had in changing the process of allocating kidneys using HLA antigens, which he considered racially discriminatory. When he established the transplant program at Howard University Hospital, he also established a histocompatibility laboratory where he conducted research on antigen matching and immunogenetics in minorities. He found that HLA-B matching was decreasing allocation of kidneys to African Americans. Based on his work, additional studies were conducted that resulted in removing HLA-B matching as a priority for kidney allocation.⁴

Dr Callender has spent almost 40 years of his career in the field of transplantation. His work addressing minority issues in transplantation has made him a legend in our profession. His courage and leadership have provided us with new ways to manage the health care of African Americans requiring organs for transplantation. With a strong belief in ministering the souls and bodies of mankind, he demonstrates a persevering character that warrants recognition for his lifelong work in health care.

References

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