

OBITUARY

PROF. M.M.S. AHUJA

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Professor MMS Ahuja was a pioneering clinical endocrinologist of this country, who made several valuable contributions towards the understanding of the syndrome of diabetes as seen in India. By training he belonged to the British class of clinicians. However, his native investigative flair and early training at Harvard transformed him into a Clinical Endocrinologist with an American flavour. During the course of his tenure at AIIMS, under the leadership of that doyen among clinicians, Prof. K.L. Wig, he matured into a clinical endocrinologist of uniquely Indian vintage.

At AIIMS, I had the good fortune of joining him as an intern, soon after his return from Harvard. In the Endocrine clinics run by Dr. Ahuja at AIIMS, early in the sixties, discussion on new patients used to run late into the nights and there was all round excitement about seeing Indian patients in the light of new American information! Those days in India available knowledge in the discipline was confined to a few hundred pages of an advanced text in internal medicine. With the arrival of Dr. Ahuja, the scenario quickly changed; the AIIMS library began rapidly acquiring Journals, reviews, monographs and specialized texts dealing with current topics in clinical endocrinology. A metabolic laboratory was soon in position. Clinical scientist and specialist of international repute began frequenting the Institute. For Indian Specialist returning to their country after advanced training abroad, AIIMS became a favourite sojourn. Invited lectures, symposia, postgraduate seminars, case reviews, endocrine rounds and Journal clubs constituted busy weekly schedules. I remember Dr Rastogi as one of the early CSIR scientists working in the Department, in those exciting days. He soon moved over to PGI Chandigarh to develop the new well known programme on DM endocrinology there. Dr. Ahuja's priorities, however, were different. He was more keen to get on with the important task of documenting, discovering, dissecting and disseminating the many unique facets of endocrine and metabolic bio-medicine as experienced in India. He established laboratories with state of the art techniques for measuring hormones and metabolites acquired instrumentation and standardized techniques for tracer studies using radio-active isotopes. He worked with M.D. level trainees to inculcate in them the culture of developing and

using laboratory technology to address scientific questions in clinical endocrinology. I was one such trainee with him during 1964-66, and I distinctly remember how he guided me through the conceptual jungle of iodine kinetics, and ultimately helped me develop a protocol to study a set of complex parameters of quantitative iodine metabolism in a variety of simple goiter seen in Delhi area. This study lead to the striking discovery that iodine deficiency is the cause of goiter in Delhi, a pioneering observation that lead to the discovery of a large number of extra Himalayan areas of iodine deficient endemic goiter in the Indian sub-continent. During the decades spanning 1962-85 he initiated into research programmes and trained over a hundred MD students in the nascent discipline of clinical endocrinology and metabolism and in that process gathered an impressive body of original information about endocrine and metabolic disorders as seen in India. The large numbers of specialist that he has so trained are now occupying chairs in academic institutions and leading professional groups nationally and internationally. The quality of scientific and professional contributions made by Prof. Ahuja's students at the national and international levels can be gauged from the fact that annually thousands of citation of their work are documented in international Science Citation Index.

It was Dr. Ahuja's preference to be an endocrinologist, in the larger context of an internist. And even as an internist, his contributions have been original and creative. Thus, during the late seventies and early eighties he exhaustively reviewed published work in internal medicine in general and clinical endocrinology in particular from India and got together a large number of contributors and edited and published a series of volumes on "Progress in Medicine". These extremely popular volumes were indeed unique and monumental documentations of scientific work done in India on problems unique to Indian Medicine. Many generations of students of Internal Medicine benefited enormously from these volumes.

Clinical diabetes was Dr. Ahuja's first love as an investigator. Through persistent investigative effort, spanning three decades, he made major contributions towards the understanding of the

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syndrome of diabetes mellitus as seen in India. The two epidemiological studies conducted by him under the aegis of the ICMR are unique bench mark studies at the national level. These studies are the only authentic source of information on the prevalence and epidemiology of diabetes in India. His characterization of the unique type of ketosis resistant young diabetics, which is distinct from the chronic fibrocalcific pancreatitis-related diabetes described by Gee Vargheese from Kerala, still continues to hold ground as a distinct entity accounting for roughly a quarter of the young diabetic seen in North India. His contributions towards profiling the pattern of complications of diabetes in North India, is internationally recognized. The fact that we are all here today under the organizational umbrella of RSSDI to compare notes, discuss and debate scientific issues in diabetes is indeed the most telling example of professor Ahuja's visionary zeal and scientific fervour. He gave this unique name for the organisation; "Research Society for the Study of Diabetes in India", thus emphasizing the main objective of the society, i.e. Research. This is a telling example of Dr Ahuja's life long involvement with science and research, his total commitment to the rational and objective way of looking at issues of life in general. At a time when, in the medical schools of India, professorial opinion on clinical problem was accepted as unquestionable 'truth' Dr Ahuja was refreshingly candid and open minded, and on rational basis anyone, even an intern, could question his opinion and clinical decision. Indeed, he used to aggressively encourage questions during teaching exercises and ward rounds and the positive chemistry we had mutually between us was entirely because of my questioning nature and Prof. Ahuja's appreciation of a questioning mind. To the young mind exposed to the baffling biology of bedside phenomenon, the natural response is in the form of innumerable questions. Many of them may be

foolish or even ignorant, but several of them may indeed be sensible and may be even without an answer! As a young trainee in internal medicine, bed-side phenomenon use to evoke more questions than answers in my mind and the whole process of bedside learning at AIIMS was made doubly exciting because senior teachers, and particularly Professor Ahuja, used to candidly admit their ignorance which often encouraged me to pursue the answer in literature or through investigations. The self confidence inculcated in students through such candour among teachers like Dr. Ahuja's, contributed greatly to the learning process at AIIMS.

Professor Ahuja was indeed a clinical scientist; a clinician with well honed scientific temper and investigative zeal. Clinical scientists can play the most pivotal role in generating new knowledge in human biology; for he directly deals with nature's experiments when he observes and infers on as bedside phenomenon. Therefore, when endowed with astute bed-side skills, deep knowledge in basic biomedical sciences, and assisted by sophisticated laboratory support, a clinical scientist is placed most favorably to make scientific discoveries immediately relevant to human biology than investigators who generate information through animal experimentation. Dr. Ahuja had the mind-set and skills to shape up as a clinical scientist par excellence. However, the techno-science base if endocrine and metabolic biomedicine was weak during formative years of his professional career. Despite this disadvantage, Dr Ahuja made valiant efforts to keep abreast of the breathtakingly fast developments in basic sciences relevant to clinical biology and made impressive contributions as a pioneer in India. And this accomplishments speak volumes about his indomitable will, driven by the 'Srasha' native to his Being.