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Letter to the Editor

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Setting the stage for increasing diversity in congenital cardiology: let's celebrate the 75th anniversary of the Blalock–Thomas–Taussig shunt

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Dear editor,

Recently, the Editors of the Lancet Group announced a laudable "Diversity Pledge" to increase gender equity, diversity, and inclusion in research.[1] They also encouraged members of the scientific community to contribute to this initiative. This year's 75th anniversary of a landmark medical achievement provides the perfect opportunity for the congenital cardiology community to follow their lead.

In 1944, the first surgical creation of a systemic-to-pulmonary shunt was successfully performed in a blue baby, as a surgical palliative treatment for tetralogy of Fallot.[2] Helen Taussig, a White paediatric cardiologist at John Hopkins Hospital, realised that infants with severe cyanosis would benefit from an assured pulmonary blood flow. She therefore challenged Alfred Blalock, head of surgery at John Hopkins and also White, to surgically create a similar type of shunt.[3] This procedure, which became known as the Blalock–Taussig shunt, has prolonged thousands of lives and spearheaded the development of heart surgery for CHD. However, it is nowadays generally acknowledged that a third person played a key role in leading this life-saving surgical procedure into clinical practice: Vivien Thomas, Blalock's African-American laboratory assistant. He first developed the technique in a myriad of laboratory dogs, then adapted the instruments for human use, and eventually coached Blalock through the first operations on infants.[4,5]

In those times of racial segregation, Thomas did not share in the fame and recognition that Blalock and Taussig received after publishing this landmark achievement. As a Black, non-degreed laboratory assistant Thomas was initially not included in any form of publicity nor acknowledged for his undisputed experimental and clinical contributions. Decades later, attempts were made to alleviate this inequity: Thomas was awarded an honorary Doctor's degree by Johns Hopkins University. Yet, despite earlier suggestions to rename the Blalock–Taussig shunt into the Blalock–Thomas–Taussig shunt[5–7], trivial arguments as "it would be impractical to change the name of the shunt"[6] have apparently precluded to provide Vivien Thomas the deserved honour of having the shunt named after him.

Let us now put this Diversity Pledge into practice, and rename the Blalock–Taussig shunt to the Blalock–Thomas–Taussig shunt, as a shining example to support and encourage diversity. The Blalock–Thomas–Taussig shunt would not only rightfully honour Vivien Thomas but also repeatedly remind us to value intellectual contribution instead of race, gender, socio-economic status, or other factors that may influence authorship until today. Especially in paediatrics and adolescent medicine, such statements are encouraged and highly needed.[8] We therefore call on the congenital cardiology community to follow the laudable initiative of the Editors of the Lancet Group: let us celebrate the 75th anniversary of this landmark achievement and, instead of the former Blalock–Taussig shunt, from today on use the name Blalock–Thomas–Taussig shunt.

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