

# The Life and Legacy of Metro Ogryzlo

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**M**etro? He was charming, spontaneous, generous and amusing; but also an inventive, relentless, driven perfectionist.

A pioneering rheumatologist in Canada and abroad, Metro Ogryzlo was a professor, a researcher, a policy-maker, but above all a clinician who cared for his patients and sought to understand Rheumatology for the benefit of their treatment.

He was born in Dauphin Manitoba in 1915. He earned his medical degree at the University of Manitoba and was awarded the Manitoba Medical Association Gold Medal in 1938. His work and residency were interrupted by the Second World War, when in 1941 he enlisted to serve in the Royal Canadian Air Forces Medical Services.

Ogryzlo resumed his medical work in 1945 at Sunnybrook Veterans Hospital in Toronto, where he became interested in Rheumatology. He continued his residency and was named Chief Medical Resident at Toronto General Hospital. In 1952, he was also the first research fellow funded by the newly-formed Canadian Arthritis and Rheumatism Society.

Despite his success, his career at Toronto General Hospital began somewhat painfully. As Chief Medical Resident, he was asked to break up specialty services. No longer could Alman Fletcher, Wally Graham and Ogryzlo (all with international standing), who enjoyed an easy collaboration free from hierarchy, compare notes on patients on a single service. To benefit undergraduate and graduate teaching, Rheumatology was not to exist. This, however, would become the focus of Ogryzlo's lifelong ambition: the recognition of Rheumatology as its own specialty within Internal Medicine.



Undoubtedly, these were the “glory days” of Rheumatology: the discovery of rheumatoid factor and the LE cell tests allowed for better diagnosis, cortisone dramatically changed treatment, while advancements in the treatment and control of Gouty arthritis were also being made. A World Congress in Rheumatology was held in Toronto in 1957, centered not at the Toronto General Hospital, but at Sunnybrook Veterans Hospital. Debate rather than conformity was the ticket to international recognition.

Sunnybrook, an impressive teaching hospital, had 90 patient-care beds in Rheumatology which Ogryzlo supervised from 1955 to 1966. It featured the first Clinical Investigation Unit in Canada, modeled after Ward 4 of the Massachusetts General Hospital. Sunnybrook was capable of conducting metabolic “balance” studies, with careful measurement of all intake and output, and associated metabolic changes; perfect for studies of steroid effects. Ogryzlo, through his work as a clinical investigator, developed new ways of quantifying changes in serum proteins by electrophoresis, studying the formation of LE cells, the control of hyperuricemia and understanding corticosteroid metabolism. Favoring no specific sub-specialty, he published more than a 100 scientific papers contributing to the diagnosis, and treatment within these areas.

While conducting his research, Ogryzlo, determined to make changes, also became chairman of the medical advisory board of the Canadian Arthritis and Rheumatism Society. Ogryzlo and board members focused on the disparity between the excellent resources available to veterans with arthritis, and the obstructed access to teaching beds for nonveterans with arthritis. This challenge was met by the evolution of the Rheumatic Disease Unit concept.

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While teaching hospitals, scarcely resourced, were initially reluctant to participate in the creation of a facility, Ogryzlo was undeterred. An agreement was met between the Directors of the Arthritis Society and those of the Wellesley Hospital. It was agreed that Wellesley would rent a ward from Sunnybrook between 1963 and 1966. When the new facilities were completed, these included a 40-bed ward and a separate Clinical Investigation Unit with staff offices sandwiched between. There were four laboratory units in the research wing housing Ogryzlo, Gordon, Pruzanski and Smythe. Ogryzlo directed and soon Murray Urowitz was recruited, in part because Ogryzlo (characteristically) offered him the Lupus program, Ogryzlo's prime interest until then.

This new unit led to the realization that similar units should be established in all Canadian medical schools. Furthermore, to ensure that all medical students should have bedside training in Rheumatology, divisions of the Toronto Rheumatic Diseases Unit were established in other teaching hospitals under Ogryzlo's coordination. He also fought to have the qualifications and training of rheumatologists accredited and became the first Chairman of the Rheumatology Committee of the Royal College of Physicians and Surgeons of Canada. He was charged with developing and assessing training programs and organizing a national certification examination. In 1972 the first fellowships were awarded in Rheumatology.

Throughout his career, Ogryzlo continued to work within an academic setting in order to teach a younger generation of rheumatologists. He was first appointed in 1952 as a clinical Teacher to the University of Toronto and became Professor of Medicine in 1968, teaching until his death. An avid photographer, he amassed an outstanding collection of teaching slides which brought lectures and presentations to life. A true mentor, he inspired in his students a genuine interest in clinical investigation long before the value of research became widely appreciated in Canada. Undoubtedly, his impact on patient care and education carries on in those he taught and trained.

Working closely with the Canadian Arthritis and Rheumatism Society, his impact was also seen through policy making and the promotion of his ideals. He served as the chairman of its national Medical and Scientific Committee for 15 years, and as a member of the national Board of Directors from 1956 until his death.

By September 1973, he achieved his most impressive goal yet, the establishment of *The Journal of Rheumatology*, with an Editorial Board, 32 investors, and a slender \$16,000 in capital. This was one of his more controversial projects, and he was apprehensive that his friendships within the American Rheumatism Association and the Canadian Rheumatism Association might be damaged. However he felt even more strongly that there was a need for another forum for rheumatological opinion, independent from national organizations, expressing concerns of international interest. The editorial board was expressly international, as were the invited contributors to Volume 1, number 1, published in June 1974 to launch at a Pan-American Congress of Rheumatology, held in Toronto.

This was not the extent of his international endeavours however: Ogryzlo was Chairman of the review panel for the Gairdner Foundation which saw thirteen of its award winners become Nobel-Prize winners, President of the Pan American Congress held in Toronto in 1974 and had returned from a meeting of the European League Against Rheumatism at the time of his death in 1977.

There was much more that cannot be described in detail. There was the phagocytic lymphocyte at Atlantic City; the insulin-secreting pseudoadenoma, his collection of "odd" technicians, and "No matter how you pull, jump about and dance ..." [I won't give the last line!]. Ogryzlo, the Chair of the Department of Medicine, recognized the unique facility of rheumatologists to communicate while all talking at once; an early form of efficient multitasking. Those who worked with him know that he rejected all bigotry or barriers. He ensured that students and residents had primary access to patients, while staff, the reserve guarantee of quality, ensured that patients understood the lines of communication. There was also the distinctive team of collaborators, here not appropriately acknowledged. Finally, there was Gertrude Ogryzlo, Unit Manager, who somehow managed to keep us from falling off the virtual trampoline.

While Metro Ogryzlo's life and work represent a landmark in Canadian medicine, his legacy lies not only within the work he accomplished, but the work and dedication he inspired within others and that which continues in his name.