

## Tributes to Our First President and Founding Father, Stanley J. Dudrick, MD, FACS, FASPEN

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Dr Stanley J. Dudrick, the first president and founder of the American Society for Parenteral and Enteral Nutrition (ASPEN) died on January 18, 2020. Dr Dudrick's groundbreaking research in the efficacy of intravenous feeding is recognized as one of the 3 most important advances in modern surgery.

Dr Dudrick's research, first published in 1968, and his continuing commitment to the development of parenteral nutrition (PN), has transformed the care of acutely ill patients and saved the lives of millions of children and adults.

"With the passing of Dr Dudrick, medicine has lost one of its most inspirational leaders," said ASPEN President Lingtak-Neander Chan, PharmD. "Dr Dudrick's legacy goes far beyond his pioneering research. While he continued as the seminal scientist in the development of PN, throughout his life he also chaired the surgery department at 4 institutions, authored textbooks and hundreds of journal articles, and taught and mentored countless physicians and other healthcare providers. Dr Dudrick will be remembered as a healer and visionary, whose kindness has deeply touched many people, and whose achievements have changed the lives of many."

"Dr Dudrick truly nourished other medical and healthcare professionals. He always found the time to meet with physicians, scientists, clinicians, and students from around the world to answer questions about his research and nutrition. ASPEN's archives are filled with letters of appreciation—and wonder—at his generosity, knowledge, and compassion," said Marion Winkler, PhD, RD, President of the ASPEN Rhoads Research Foundation and ASPEN's 30th president.

A tireless proponent of the importance of the science of nutrition, Dr Dudrick was one of the 35 healthcare professionals who worked together in 1975 to create ASPEN as an interdisciplinary association founded for the purpose of providing optimal nutrition to all people.

"ASPEN's interdisciplinary membership and approach reflect one of the principles that guided Dr Dudrick's life and marked his brilliant and life-changing career," said ASPEN's 8th president, Ezra Steiger, MD. "He practiced collaboration from the earliest days of his research when he reached out to other physician specialists, basic scientists, pharmacists, nurses, dietitians, and medical suppliers."

"ASPEN also continues Dr Dudrick's commitment to scientific research and advancement through its educational programs and journal publications that he championed," said Marion Winkler. "In addition, each year the Dudrick Research Scholar Award is presented to a mid-career scientist who is contributing to our understanding and the advancement of nutritional support."

ASPEN is far from alone in recognizing Dr Dudrick's contributions to medical research, education, and clinical practice. Throughout his inspirational life, Dr Dudrick received more than 100 national and international honors and

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awards including the AMA Joseph B. Goldberger Award in Clinical Nutrition; the AMA Brookdale Award in Medicine; the Ladd Medal of the American Academy of Pediatrics; the American College of Nutrition Goldsmith Award; and the American Surgical Association's First Flance/Karl Award in 1997 for his seminal and lifetime scientific contributions to surgery; and the American College of Surgeons Jacobsen Innovation Award in 2005.

"In 2017 we recognized Dr Dudrick's visionary and paradigm-shifting contribution to clinical nutrition in his development of PN and his outstanding mentorship of generation after generation of nutrition professionals with ASPEN's first Lifetime Achievement Award," said ASPEN's 40th president, Charlene Compher, PhD, RD. "His perseverance and insight were appreciated on that occasion with heartfelt toasts, hugs and tears from clinicians and patients alike. He will be sorely missed."

A native of Pennsylvania, Dr Dudrick graduated from Franklin and Marshall College with a BS degree in Biology with honors in 1957. He received his medical degree from the University of Pennsylvania School of Medicine in 1961. After completing a rotating internship and residency training in general surgery at the Hospital of the University of Pennsylvania (HUP), Dr Dudrick joined the faculty at Penn and rose in rank from Instructor to Professor of Surgery within 5 years.

His distinguished academic career spanned more than 40 years, including his selection as the first Professor and Founding Chairman of the Department of Surgery at the then new University of Texas Medical School at Houston. He went on to chair the departments of surgery at the University of Pennsylvania; at Saint Mary's Hospital, a Yale teaching hospital; and at Bridgeport Hospital/Yale New Haven Health System. He also served as Professor of Surgery at Yale University School of Medicine and Adjunct Clinical Professor of Surgery of Quinnipiac College, Bridgeport Hospital/Yale New Haven Health System. In 2007, Dr Dudrick was named—and remained active for a number of years—as Chairman Emeritus, Department of Surgery, and Director Emeritus of the Program in Surgery at Saint Mary's Hospital and at Yale.

When his health allowed, Dr Dudrick continued to participate in ASPEN programs and events, including ASPEN's annual Nutrition Science and Practice Conferences. "He drew a crowd wherever he went and never tired of sharing his inspiring stories with everyone. He followed new research with great curiosity and enthusiasm and was generous with his encouragement and guidance to young clinicians and investigators. He was a true educator, mentor and role model for all," said Immediate Past President Nilesh M. Mehta, MD.

"He also was very active in the ASPEN Rhoads Research Foundation, serving many years on the Board of Directors, and as Director Emeritus. This commitment to

research demonstrated his dedication to young investigators discovering the next important breakthrough in clinical nutrition," said Nilesh M. Mehta.

In a 2006 interview, Dr Dudrick said, "And I hope that I would be remembered as somebody who truly, greatly appreciates the privilege of having spent a wonderful life with wonderful parents, family, teachers, mentors, colleagues, residents, fellows, students, staff, friends, and patients, who have contributed so much to enrich my life and to allow me to feel that I might have achieved some of my own goals and aspirations and whatever the purpose or purposes were of my creator."

"Our condolences go out to Dr Dudrick's family and friends. Our thoughts are with his wife Terri (Theresa), who had been at his side since medical school and to his 6 children—Susan Marie, Stanley Jonathan, Holly Anne, Paul Stanley, Carolyn Mary, and Anne Theresa—who shared their father with laboratory experiments, patients, and medical students," said ASPEN Chief Executive Officer Wanda Johnson, CMP.

### **Eulogy Given by Stanley Dudrick Jr at the Funeral of His Father, Dr Stanley Dudrick, on January 25, 2020, in Nanticoke, Pennsylvania**

Praise, high praise.

So much can be said about Stanley John Dudrick. The challenge is, what can be said in church? Reverent or irreverent—there is a good chance of me being struck by lightning!

Genuine, unique;  
sincere, intense and determined;  
passionate, compassionate;  
committed and righteous;  
always caring and loving as a son, brother, husband;  
father, grandfather;  
student, teacher, and mentor;  
colleague, leader, and boss/chief.

He never faded from the Yeoman work willing to carry any burden, take on any challenge, dominate any adversity, work diligently and tirelessly for that in which, and for those in whom he believed with meticulous attention and scrutiny. Dad was always on top of us, almost as a specter we struggled to please. Although many times it didn't seem so, he always had the best and noblest intentions for us all to achieve our goals and maximum potential efficiently, effectively, and safely; hoping sincerely for our personal satisfaction and happiness.

Unlike a mother bird pushing her chick out of the nest for the first flight, he endeavored to prepare his children, students, colleagues, and patients knowing he would fail. This he did with great strength and fortitude, not cavalierly without concern or conscience knowing that advancement

requires overcoming inherent risk. When he was a boy riding on the handle bars of a friend's bicycle he took a tumble resulting in a permanent artificial tooth. Years later, when he was teaching his baby sister, Irene, how to ride a bicycle he chanted, "Look mom! No hands! Look mom! No feet! Look mom! No teeth!"

A moment of understanding, almost epiphany for me, was when, as a mildly rebellious twenty-something, I saw a picture of my mother and father at a Halloween party while he was a young chief resident. My mom's beautiful smiling face was next to a large mass of aluminum foil wearing my Dad's face. He went to the party as a suppository knowing that he was up everybody's ass! Mom never liked that outfit ... taking the foil off didn't change anything.

At any rate, I'm preaching to the choir.

A popular phrase to describe my father is "he touched so many people." Indeed, he did. From all walks of life, every gender, race, creed, and color, from every condition. He had an intuitive certainty, a keen perceptiveness. He could find a connection with anyone and everyone. Whether it was a malady or sparkle, he would form a bond. His almost endless energy, drive, and passion were from the personal, intimate, and satisfying reward he felt from such interactions.

With all the recognition, praise, and gratitude that he has received, usually to the point of embarrassment, he would say that he personally gained much, much more. He truly cherished life, with a childlike wonderment, he marveled at the God-given miracle of life be it plant or animal. Each and every one of you, and many, many more, made him the man that he was and the man that we will remember always. Through him we are all brothers and sisters and share the spark of life for a fleeting but happy and grateful moment. He practically doted on every one, as so many people, particularly his mother and father and their siblings and friends doted upon him during his youth. His sister, Sonia, of equal wit, humor, and strength cared for him and his children as only a mother could. To this very day, he loves his brother Dan wholeheartedly and without condition. Dan says, "He was more than just my brother, he was my best friend and effectively my father for over 75% of my life."

A special thanks to Mary Ann and Joan who shared the same mud with him for many years, diligently and devotedly managing myriad administrative, academic, training, and patient care issues. I can't imagine what he would have been like without such stout hearts.

Of all the blessings that we could want for him, all pale to Theresa. For over 60 years of marriage, and for some time before, Stash and Terry remain a very rare and precious item of unconditional love and devotion we admire, covet, and praise.

## **Lingtak-Neander Chan, PharmD, ASPEN President 2019–2020**

Imagine practicing in a world that we have no knowledge and means in delivering fluids, electrolytes, and nutrients safely and efficaciously to patients by vein when the enteral route is not feasible. My immediate response is, "This is inconceivable."

This summarizes the magnitude of the contributions Dr Dudrick and his team have brought to us. It is simply unimaginable now to take care of patients without the knowledge and technology gained from the research and practice experience related to the development of PN in the last 50 years. This is one of the many reasons that Dr Dudrick's groundbreaking work in the efficacy of intravenous feeding is recognized as one of the most important advances in modern science and medicine.

While the invention of PN is a medical breakthrough, Dr Dudrick's vision to bring people with different knowledge, ideas, skill sets, and practice disciplines together by establishing ASPEN showed his brilliance, long-term vision, and personal and professional commitment as a scientist, a healer, and a leader. The establishment of ASPEN provides the seeding ground for his ideas to continue to flourish. The core values of ASPEN—quality, integrity, interdisciplinary, excellence, mentorship, and discovery—reflect Dr Dudrick's vision and are shared by the ASPEN community. The organizational platform, such as ASPEN, has brought people together and tremendously advanced the science and practice of clinical nutrition at a much faster pace.

With the passing of Dr Dudrick, medicine has lost one of its most inspirational figures. Dr Dudrick's legacy goes far beyond his foundational, pioneering research. While he continued as the seminal scientist in refining the technique in delivering PN and advancing the science of clinical nutrition throughout his life, he has also fostered the growth and development of hundreds of thousands of clinicians, researchers, and advocates, who will continue his important work to improve the lives of patients. Dr Dudrick will be remembered as a healer and visionary, whose kindness has deeply touched many people, and whose achievements have changed the lives of many.

As an organization, we mourn the loss of our First President and a founding member. We remember his kindness and greatness and his inspiration and influence on all of us. As a community, ASPEN will continue to remember Dr Dudrick's and other founders' vision—envisioning an environment in which every patient receives safe, efficacious, and high-quality nutrition care, through our mission as an interdisciplinary association for the purpose of providing optimal nutrition to ALL PEOPLE.

**John M. Daly, MD; ASPEN President 1985**

The passing of Dr Stanley J. Dudrick has left a hole in the fabric of Academic Surgery and in the hearts of his family and friends, but it has also left a legacy of his trainees who continue to live up to his ideals and his patients who survived because of his commitment to providing them the nutrition they required in their time of need.

I first met Dr Dudrick in the summer of 1966 as he was finishing his chief residency at the University of Pennsylvania. I had just completed my freshman year at LaSalle College and had accepted a grant from Smith Kline to do research. Our school was matched to Penn, and so I was sent to meet the Assistant Dean at Penn who had a list of faculty willing to take a college student for the summer. Upon meeting Dr Dudrick, I knew he was to be the very best teacher and mentor I would ever know. I went to work for him at the Veteran's Hospital in Philadelphia where he was appointed the Chief of the Penn Surgical Service. Later that summer, my dad died and Dr Dudrick became like a surrogate father to me.

It was the summer of knowing that puppies could be fed completely intravenously and they could grow equally well to their chow-fed littermates. It was the summer of parenterally feeding an infant with small-bowel atresia who would live longer than a year providing her nutrition intravenously. It was a year of learning to feed starving patients who had developed small-bowel fistulas and watching those fistulas close as the patients gained weight and returned to health. This was the start of PN. With others, Dr Dudrick started an organization (ASPEN) that was multidisciplinary and whose purpose was to educate others to learn parenteral and enteral nutrition and to investigate the science of nutritional therapy. It was the year that started one of the 3 most important medical breakthroughs in the 20th century.

I continued to work for him for the next 14 years: during college and medical school at Temple University and then my surgical residency at the University of Texas, Hermann Hospital. Dr Dudrick trained me and so many others, as a surgeon but also as a man.

He instilled and enhanced the qualities of generosity, ethical behavior, caring for others, optimism, and a sense of purpose. As a taskmaster, he taught the principles and practice of surgery, always seeking to improve techniques, but recognizing the importance of sound surgical principles based on pathophysiology. He had time for everyone from the elevator operator to the University president. He recognized that medicine and particularly PN was a team activity encompassing doctors, nurses, dietitians, pharmacists, and others. He worked tirelessly to make parenteral and enteral nutrition safer, better, and specific to certain disease states and physiologic disorders. He worked tirelessly to develop

home PN. Little did I know that 40+ years later, my wife, Mary, would require home PN when she could not eat due to an intestinal fistula.

Dr Stanley Dudrick positively touched so many lives—healthcare workers, patients, and scientists throughout the world. He gave of himself to make our lives better and made our world better than when he found it. His wonderful legacy of trainees, patients, family, and friends live on in his name.

**Ezra Steiger, MD; ASPEN President 1984,  
ASPEN Rhoads Research Foundation Board  
Member Emeritus**

Stanley Dudrick, MD, was a chief resident in general surgery at HUP in 1966 when I was an intern there in General Surgery. He was appointed Chief of Surgery at the Philadelphia Veteran's Administration (VA) Hospital upon completing his residency. He requested that I be the first HUP junior resident to rotate under him at the VA hospital. He had completed the now-famous experiment showing normal growth and development in puppies nourished by vein and was starting to apply his findings to patient care. He asked me to help with initiating parental nutrition, or "intravenous hyperalimentation" as it was called in the early days, in patients at the VA and subsequently at HUP.

We bonded in an environment that was very demanding in terms of workload and long hours. The rotating HUP chief residents, Stan and I, spent several consecutive 24-hour days caring for surgical patients without ever leaving the hospital. His wife, Terri, played a crucial role in the early years raising 6 children and opening their home for get-togethers with residents and colleagues. Terri's support allowed Stan to spend time with his other family—his patients, trainees, nutrition support colleagues, and coworkers.

Despite his heavy load of clinical and administrative responsibilities, Stan always maintained a great sense of humor and had an infectious laugh. I'll always remember the Halloween costume party when he wrapped himself in aluminum foil and came as a rectal suppository. Alluding to his proud Polish heritage as well as his work with intravenous feeding, Stan often referred to himself as the original IV pole!

After my VA rotation, I helped to manage PN patients at HUP. We rounded on those patients at the end of long surgical days. Stan was very well-liked and respected by hospital workers from physicians and nurses to the cleaning crews. He would ask how they and their families were doing, and often times would stop rounds to talk with many people. This tested the patience of the exhausted surgical residents. However, he derived new energy from interacting with patients and hospital personnel.

In the early years, our General Surgery chairman, Dr Jonathan Rhoads, encouraged the publication of the early clinical experiences using PN for the management of various clinical conditions. Stan was not only a gifted speaker but a talented writer as well. Occasionally his careful dissection of a submitted manuscript and his suggestions for change made the original article almost unrecognizable, but always better. He was equally impressive in the operating room where he was a talented technical surgeon. He helped the chief residents at the VA through technically demanding surgical cases.

Stan Dudrick, MD, was a very hard-working, caring, innovative, and talented researcher, clinician, and surgeon. He was a mentor, colleague, and friend to me and many others. His support, intellect, experience, and wisdom will be greatly missed. His work, however, will live on forever through the countless lives that were and will be saved by PN.

### **Albert Barrocas, MD; ASPEN Board of Advisors**

Back in 1977, I had the privilege of meeting Dr Stanley J. Dudrick during the first ASPEN Clinical Congress at the Marriott O'Hare Hotel in Chicago, Illinois. Over the following 4 decades, my relationship with Stan underwent a metamorphosis from respect as a pioneering researcher to increased admiration as a wonderful friend, "mi amigo" (Figure 1).

In the span of that time, he served as a role model of dedication, commitment, compassion, researcher, teacher, mentor, and leader. From the beginning, his zest for the education of others did not differentiate between those of us working in small community hospitals and those affiliated with large academic and research centers.

His untiring efforts resulted in the growth of ASPEN from its infancy to the premier interdisciplinary/transdisciplinary, international nutrition society it has become. He has mentored and encouraged thousands of professionals to persevere in the quest for nutrition support knowledge and safe, quality healthcare delivery, always focusing on patients and family.

Dr Dudrick is an individual who has courage in supporting what is right, albeit not necessarily what is popular or supported by the majority. A testament to his philosophy was his support in the 1980s by the formation of the American Society of Nutrition Support Services (ASNSS) by a group of ASPEN members who felt disenfranchised and identified a need for a more inclusive group, at that time, that addressed the needs of nutrition support teams. While concerned about the potential negative impact a "splinter" group would have on ASPEN, but with the advice of his mentor, Dr Jonathan Rhoads, Stan provided support for the new group with the belief that by so doing ultimately



**Figure 1.** Drs Stanley Dudrick and Albert Barrocas, 2017.

more individuals would be involved in nutrition support, ie, "spread the wealth." I succeeded Stan as the President of ASNSS with the proviso that the two of us would lead the effort to merge the organization back with ASPEN, as the latter had become more inclusive. The merge was completed in 1986.

His perseverance and dedication to teaching were clearly demonstrated a few years ago during Clinical Nutrition Week. Stan agreed to present his enlightening lecture on the genesis of hyperalimentation to the Ibero Latin American Section (ILAS) of ASPEN. Unfortunately, he was stranded in Connecticut due to a heavy snowstorm. In a matter of hours, he was able to arrange for a Skype connection and delivered a memorable presentation to the group. Many of the younger members had never heard the history previously, particularly from "Stan the man" who made it happen!

His international outreach is extensive, as I observed during the 2012 FELANPE Congress in Panama, where he was recognized for his many contributions. Stan's penchant for scientific pursuit and compassionate care is equally balanced by his loyalty to his friends and a great sense of humor.

In sum, Stan, mi amigo, was a real human being (English), a mensch (Yiddish), a benadam (Hebrew/Ladino) and "Stan, un pedazo de pan" (Spanish)!

Sensitive  
Teacher  
Altruistic  
Nurturing  
  
Devoted  
Undaunted  
Determined  
Researcher  
Innovator  
Compassionate  
Kind

### Gil Hardy, PhD

Stanley J. Dudrick, MD, generally acknowledged as the “Father of Modern Parenteral Nutrition,” had many friends and former students in the UK and New Zealand, including Professor Ivan Johnston, cofounder of the British Association for Parenteral and Enteral Nutrition; Professor Miles Irving, who hosted the visit of Dr Dudrick to Hope Hospital, Salford, Manchester, to officially open the UK’s first Intestinal Failure/HPN Unit in the 1980s; and Professor Graham Hill, a pioneer of PN research “Downunder.”

Looking back to the early years, the importance of using aseptic techniques was well understood by Dr Dudrick and his team: *“changing of bottles and replacement of tubing should be handled under conditions that ensure asepsis.”* Indeed, almost 50 years ago he described a revolutionary schematic concept for a prepackaged multichamber bag (MCB), including individual compartments for micronutrients, to *“lessen the risk of contamination from airborne microorganisms.”*

Upon returning to the UK after visiting Houston in the mid-1970s, I was stimulated to develop, with colleagues at St Mark’s Hospital in London, the technology for the first disposable 3-L PN bag. Later similar home PN programs were established in the UK and Germany and formally launched by Dr Dudrick. However, we are still awaiting the “de luxe MCB” originally envisioned by Dr Stan!

The numerous and impressive awards that surgeon Stan Dudrick received summarizes achievements during his professional life, but they cannot describe his most important contribution as a motivator to the international clinical nutrition community. Suffice it to say that for all of us he was a great mentor, a dedicated and inspirational teacher, a true gentleman, and a good friend. Everyone who knew him or worked with him could always depend on his help and understanding as he never counted hours spent talking to people, trying to understand and explain even the most complicated nutritional or surgical issues.

Thank you for everything, Dr Dudrick. We send our condolences to your widow, Teresa (Terri), children, and grandchildren. You are sadly missed but we will continue

to explore this fascinating field of clinical nutrition in your memory.

### Charlene Compher, PhD, RD; ASPEN President, 2016–2017

Dr Stanley J. Dudrick provided a literal lifeline to millions of patients. From newborns to the aged, his development of PN meant the difference between certain slow death from malnutrition and a bridge to a life lived with health. The many family members who observe and assist their loved ones who experience nutritional recovery or stability due to PN would be incredibly grateful for the many hours Dr Dudrick spent in the laboratory, as well as the many collaborators he engaged to design the initial equipment that was needed.

He was a dedicated and consummate mentor. In addition to the many surgery residents that he trained in his varied faculty roles, he warmly mentored mid-career investigators from all of the major disciplines (medicine, nursing, pharmacy, dietetics, and basic science) at ASPEN. He personally called each winner, but also each candidate who did not win the cherished Dudrick award to provide much-appreciated support. The list of health professionals from global settings who attribute to Dr Dudrick the maturity of their professional society and their knowledge about PN is very long indeed.

His work ethic was truly amazing to observe. In an interview by Dr Ezra Steiger at Clinical Nutrition Week 2017, he delighted an audience of thousands with stories from the development of PN. Just 2 months before his death, even though he had challenging health issues, he came to Philadelphia to the national dietetics convention to show slides and tell once again amazing and wonderful stories from those early days.

While our hearts weep with his loss, we hold especially his dear wife Terri, who was his constant companion of 61 years, and his son Stanley Dudrick Jr, who provided such dedicated support in our thoughts. His wonderfully supportive children were all present for his recognition and celebration by ASPEN of his Lifetime Achievement Award in 2017. This pillar of our ASPEN community will be sorely missed (Figure 2).

### Marion F. Winkler, PhD, RD; President, ASPEN Rhoads Research Foundation, ASPEN President, 2006–2007

Stanley J. Dudrick, MD, was a brilliant physician, surgeon, investigator, educator, and friend whose pioneering work led to the development of PN—a truly life-sustaining and life-saving therapy. Dr Dudrick was a trailblazer and visionary, someone who gathered professionals together



**Figure 2.** Monument honoring Dr Dudrick in his home town of Nanticoke, Pennsylvania, draped on the day of his funeral.

in the creation of ASPEN, from all over the world and from different disciplines to work alongside each other with the common goal to deliver safe parenteral and enteral nutrition at the bedside and to improve patient care by advancing the science and practice of nutrition support therapy.

It is impossible to think about Dr Dudrick without celebrating innovation and discovery—the scholarly pursuit of new knowledge and novel techniques in nutrition support—core activities he passionately championed in his life’s work and through his generous support and contributions to the ASPEN Rhoads Research Foundation. We are grateful to Dr Dudrick for his Emeritus role on the Foundation’s Board of Directors and as Honorary Chair of the recently concluded Endowment Campaign that raised \$1 million for promising new research in nutrition and grant support to early-career scientists and clinicians.

Dr Dudrick truly inspired generations of investigators to drive discovery in nutrition research. He always believed his greatest contribution was “taking the sickest, most malnourished critically ill patients, and nutritionally supporting them to get them through an operation, to rehabilitation, and back home.” On many occasions, Dr Dudrick told me he wished he could do more to support the ASPEN Rhoads Research Foundation; and more he did, with campaign gifts at the benefactor level. I personally am committed to work in every possible way to realize Dr Dudrick’s dream that “all

people receive optimal nutrition under all conditions at all times.”

**Kelly A. Tappenden, PhD, RD; ASPEN President 2008–2009, ASPEN Rhoads Research Foundation Board Member Emeritus, 2005 Stanley J. Dudrick Research Scholar**

I have always felt so fortunate to specialize in a medical therapy so recently developed that the founders were present to tell us their stories, influence our thinking, and continue to shape our field. This gratitude is perfectly underscored by the opportunities generously afforded to me over the years by Dr Stanley Dudrick.

Like so many others whom he impacted, I am grateful for the strong influence that he used to positively mentor me. However, I differ from many of these individuals because I did not inherit his influence as a birthright associated with my academic pedigree. In fact, I initially met Dr Dudrick as a young graduate student from Canada, at my first ASPEN meeting (Figure 3). I did not know a soul! On his own initiation, Dr Dudrick kindly approached me after my minisymposium presentation—my first ever—and thoughtfully discussed my research with me. He told me how important this work was and encouraged me to “keep it up” because the future of our field depended on young scientists such as myself. He repeated these words to me



**Figure 3.** Drs Kelly Tappenden and Stanley Dudrick, 1996.

many times over the years. At some point, I began to believe in myself as that scientist that he saw. I tell this story to demonstrate how gracious Dr Dudrick is with his mentoring influence. One does not need to have gone to a certain school or trained with a particular individual. Dr Dudrick evaluated each individual for where they were at and gave them encouragement and his advice. He didn't sugarcoat it, but he always gave one the benefit of his opinion!

Through the gift of time given to me by Dr Dudrick and his lovely wife, Terri, I learned a great deal about the values that shaped his determination to overcome obstacles and develop the life-saving therapy of PN. Dr Dudrick was not easily daunted, nor afraid of hard work! He told me of the courage shown by his family who had emigrated from Poland and the work ethic of his dad who worked in the coal mines when Dr Dudrick was a child. Imagine how impactful these influences were in a small Pennsylvania coal mining town in 1930s. Dr Dudrick's commitment to his family's legacy was so apparent to me when I accompanied him and Terri to the home of relatives still living in Poland.

Dr Dudrick marveled at how the homestead developed in the US, paralleled that of the original we visited in Poland. He appreciated the similarities and rationale for where the chicken coup lay, in contrast with the vegetable garden. He emphasized the value of these systems to me—it was clear that he contemplated every aspect of a task and how best to tackle a problem, be it related to medicine or growing food. I don't believe these are just demographic or historical details, but key factors that shaped Dr Dudrick as an individual, and the work ethic that accompanied him as he went through college, medical school, and surgical residency.

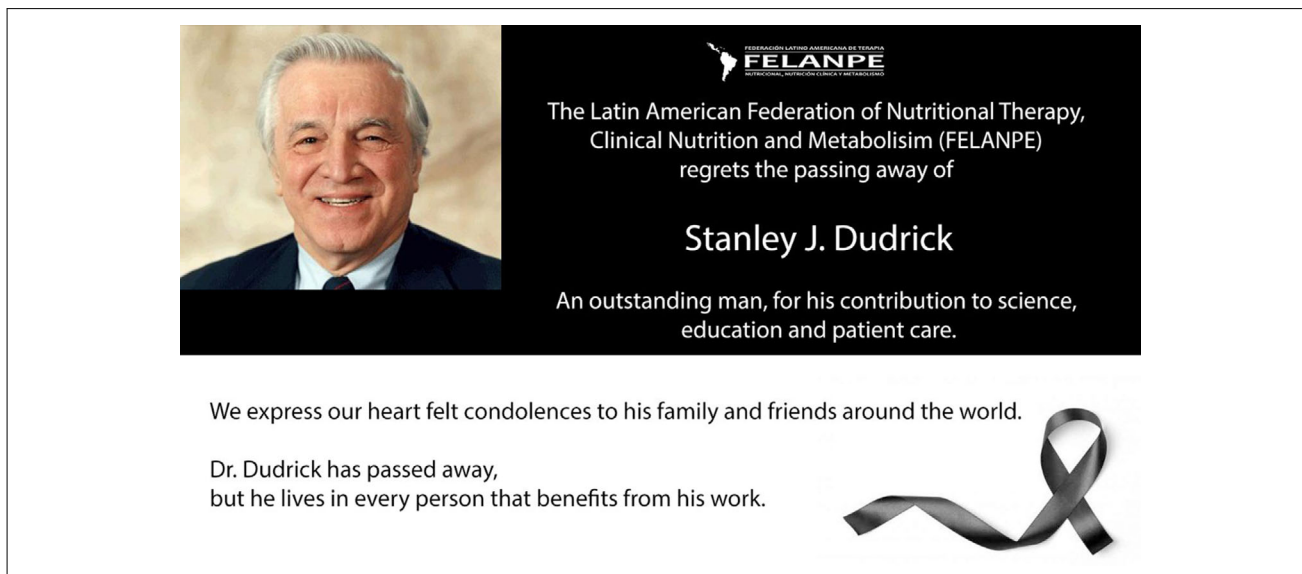
I vividly recall a conversation where I confided in Dr Dudrick the frustration I was encountering in my lab. After discussing the physiology of the specific problem at hand, he bolstered my determination by sharing his experience as a surgical resident. He told me how frustrated and defeated he was by the death of malnourished surgical patients with intestinal failure—so much so, that he considered changing specialties. However, he was challenged by his mentor, Dr Rhoads, to go to the lab and try and solve this problem, rather than quit. From what we know about Dr Dudrick's values and upbringing, quitting was not an option!

In fact, Dr Rhoads told me in a separate conversation that “Stanley Dudrick just wouldn't quit.” Almost in disbelief, he moved his head back and forth and stated, “Regardless of how dire the prospect of feeding patients intravenously appeared, Stanley Dudrick would not quit.”

So consider the challenge with going off to the lab to figure this out in the 1960s. There were no substrates, there were no suitable catheters, there were no protocols—nor acceptance for—central venous infusions, and there were not even infusion pumps! It strikes me that this was a time where Dr Dudrick's analytical and determined upbringing came into play. His timestaking, meticulous experiments began in two \$2 puppies from the pound, expanded to beagle puppies outfitted with supplies he purchased at the local hardware store—Pepboys—onto the first human baby girl whom he still spoke about with such clear affection 50 years later. As he recalled these times to me, he looked off in the distance and said how often he still thinks about that baby girl.

Dr Dudrick's impact on human life was immense. The impact of PN was recognized as one of the 3 most significant accomplishments in modern surgery, together with sepsis and antibiotic therapy. Since Dr Dudrick's successful development of PN, it is estimated to have saved the life of over 10 million newborns, and >400,000 adults annually, in the US alone. In addition to the myriad of awards bestowed upon him, at the recent centennial anniversary of the American College of Surgeons, Dr Dudrick was recognized as one of only 8 individuals named a “Hero in American Surgery.”

We have been fortunate in our discipline to have been led by Dr Dudrick—appropriately deemed “A Living Legend”



**Figure 4.** Condolences from FELANPE colleagues at the time of Dr Stanley Dudrick’s death.

by the Intestinal Rehabilitation and Transplant Association. It’s startling to think of moving forward now that he is gone. However, let’s not forget what he taught us and remember his words telling us “how important our work is” and “to keep it up.” As he said, we are responsible for the future of our discipline. Armed with the confidence and wisdom that he so generously shared with us, we must strive to honor his legacy with our strongest commitment. Quitting is not an option.

**Rubén Gustavo Klinger, MD; FELANPE President 2012–2014**

I had the pleasure of meeting an incredible person—a person who taught and transmitted his knowledge with enormous generosity. Thanks to him, thousands and thousands of lives have been saved. A man always willing to give a smile and that smile was sincere, always (Figure 4).

Dr Dudrick once thanked me for the honor of having been invited to a party, whereas we were grateful Dr Dudrick honored us with his presence at the party!

Dear and admired Dr Stanley Dudrick, you left your body while you were still shining and you have left us a legacy that will remain alive and bright, forever.

**Jianchun Yu, MD, PhD; Past President of the Chinese Society for Parenteral and Enteral Nutrition**

It’s my deep sorrow to learn the sad news that ASPEN mourns Dr Stanley Dudrick. At the Chinese Society for Parenteral and Enteral Nutrition (CSPEN), all of our

members are mourning and missing Dr Dudrick since he was the father of PN and the first president for ASPEN. He was lighting the career for clinical nutrition and saved many patients with PN in China and the world! He came to China several times with his excellent career and lectures lighting our career paths for clinical nutrition. I met him and expressed our great respect and deep appreciation of his work in China and in the ASPEN conference. He was the hero and mentor who created the history of clinical nutrition for ASPEN and the world! All of our Chinese medical professionals, students, and patients appreciated his great contribution to China and the world! We give our best blessing and appreciation with our best regards to the great mentor’s dear wife and lovely family. We are mourning and missing Dr Stanley Dudrick who is the great surgeon hero, clinical nutrition founder, and kindly mentor with his great spirit who was like the sun lighting our career. He is living in our hearts and encouraging our PEN societies to collaborate forever!

**Prof Stanislaw Klek, MD, PhD**

I first met Professor Stanley Dudrick in 2003 during his first trip to Poland. We have all been calling him ‘Professor’, and not ‘Doctor’ as people in the US have, because in our country if somebody was even once titled ‘Professor’, particularly if this person’s achievements are significant, him or her would always be called by that title.

I was still a surgical resident at the First Department of Surgery, Jagiellonian University School of Medicine in Krakow at that time. I had been practicing general surgery 6 years already, waiting for my exam, and I have been

dealing with nutrition for 5 years. I was lucky, because Stanley Dudrick's grandparents originated from Poland, so when he was planning to come to his country of origin one of his biggest wishes was to meet his family, and the family lived in our region. Advised by my father, I asked the local priest of Zegocina (40 miles south of Krakow) for help, and thanks to that we were able to find the Dudzics and paid them a visit. The Dudrick-Dudzic relationship which began in 2003 has lasted until the present day. We have visited Zegocina several times in the last 17 years, and I have always been happy to see the sincere and mutual joy of both families.

To me, Professor Stanley Dudrick (I never dared to call him by his first name) has been like my Father (that is another Polish language thing, the usage of capital letter for somebody important, out of respect). I know it sounds like a cliché, but that is how I perceived him. Why? Not only did he help me to solve my nutritional doubts (lifelong help), not only did he help me diagnose a pancreatic fistula in one of my hospitalized patients (Skawina, 2012), but more importantly he was there for me when I was on the crossroads of my professional carrier (New Orleans, 2009). He joined POLSPEN activities many times—giving lectures, mentoring, and simply talking to people. Unfortunately, to my great regret, he missed the last ESPEN Congress in Krakow, but I know he was there with us, even if not in person. We could feel that.

When we were about to open a hospital dedicated to patients with intestinal failure, nobody considered anyone other than him to become our patron. Of course, some people found naming a place after a living person disturbing, but it has never been an issue for us. We were proud to work at the place under his name. So far, our facility, which he visited frequently, helped more than 9000 patients in the surgical/IF unit, more than 500 home PN patients, and more than 10,000 individuals in the outpatient facility. We have been doing our best to make him proud.

One of my friends, Professor Alastair Forbes (Norwich, UK), once said that there was a key to achieve immortality—you have to be a great teacher to be remembered by your students—if it is true, and I strongly believe it is, Stanley is and always will be immortal and he will never be forgotten.

Professor Dudrick—thank you for always being there for me, for POLSPEN, for all nutritionists all over the world! Rest in peace.

### **Jose M. Pimiento, MD; 2019 Stanley J. Dudrick Research Scholar**

Dr Dudrick was the kind of unstoppable force that enters your life and changes it forever. I first met him when I was a rotating medical student from Colombia in his surgical service. Despite my broken English, he took the time to talk

to me, ask me questions, and try to understand my answers. We spend many evenings in his office discussing physiology, nutrition, medicine, and life. During these conversations, I fell in love with his medical philosophy, his love for his patients, his kindness, his generosity, his passion for surgery and nutrition, and his vision of what a true “surgeon-scientist” should be.

After my rotation, I was lucky enough to be accepted to his surgical residency program. As Chief of Surgery and Program Director, he always led by example. He was never too busy to talk about patients, projects, research, or personal matters. He spent innumerable hours on teaching rounds, journal clubs, in-training examination study sessions, manuscript editing, and presentation reviews. During these long hours, he would always remind us, his trainees, that his main job was to help us achieve our “God-given potential.” To this end, he was a consummate teacher and mentor capable of seeing in us the potential we did not see in ourselves. “Keep your mouth shut, keep your head down, and work your butt off” was his mantra!

In the operating room, he was a master surgeon with impeccable technique and unlimited patience. In “full teaching mode,” he would fine-tune every one of our moves, correct our prepping and draping, the light positioning, and every single surgical maneuver to become an efficient surgeon. Ultimately, he worked really hard molding us into the best surgeons we could be.

Outside the hospital, Dr Dudrick opened his home to his trainees and mentees without reservation. We interacted with Theresa, all his children, and most of his grandchildren, and we were honored to be considered part of his beautiful family. In fact, when I married my better half, during surgical residency, he was the one who gave her away as we considered him and Theresa the closest members of our family in the US.

In sum, I would always remember Dr Dudrick as a medical giant, a superb surgeon, a brilliant scientist, and a great humanist. But more importantly, I will always remember him as a friend, a father, and my “Boss.” My life changed when I meet him, and I will always strive to make him proud and be deserving of his unconditional love.

### **Joan Bishop; Executive Director, The Oley Foundation**

Dr Dudrick has been connected to the Oley Foundation for many years. At ASPEN meetings, his visits to the Oley Foundation exhibit were always a memorable highlight for Oley staff and patients who were there helping us with outreach.

At Oley conferences, patients and family members, clinicians, and members of industry gather to learn from each other, share experiences, meet old friends, and make new ones, creating an atmosphere of a family reunion where



**Figure 5.** Joan Bishop, proudly presenting Dr Dudrick with Oley's Lifetime Achievement Award at the 2017 Annual Oley Conference.

everyone understands the frequent bathroom visits, the tubes, pumps, bags, etc. We were fortunate to have Dr Dudrick attend more than one of our conferences (Figure 5). Imagine him there, bringing the history and his experience to our members.

His presentations on the research with puppies to pave the way for intravenous feeding mesmerized our audiences. There was an instant connection! In smaller, informal break-out sessions, Dr Dudrick was able to interact directly with the patients who sustain themselves on PN and those who have loved ones sustaining themselves on the therapy. Witnessing the warmth and eagerness to respond to questions and interact with attendees was outstanding. Throughout the meetings, Dr Dudrick moved slowly, greeting everyone he met, answering questions, bouncing children on his lap during lunch, posing for photos with patients, and blending in as a member of the family.

Dr Dudrick's impact is best described by the following comments from patient/family members in the Oley community.

Michael M. writes: "Some important people in history were simply in the right place at the right time. Dr Dudrick's monumental achievement in inventing PN was so much more than that. His innovations were born out of sense of compassion for people who were suffering and dying in the hospitals. And he also had a unique amount of gumption to leap over what many peers and mentors believed were insurmountable obstacles. I was one of Dr Dudrick's countless success stories, having been first placed on PN while inpatient at the age of 12 years in 1982 and subsequently lived on therapy at home for over 17 years. I



**Figure 6.** Dr Dudrick and home parenteral nutrition consumer, Ally.

got to know him a little in the last few years after I started working as a patient advocate and wrote an article about his struggle to develop PN. The person I knew was still very passionate about his work and helping people. Those who are patients or who work in nutrition support are forever grateful that Dr Dudrick was a special kind of person who chose an uncertain path and ended up changing the world."

Pam W. shares: "This man, who developed the technology that saved Ally's life, was such a humble sweet man. When I thanked him for his work that saved Ally's life, he replied that these kids are the real heroes. We are so grateful to the Oley Foundation for providing the conference that allowed us to meet him in person" (Figure 6).

Tammy Z. describes Dr Stanley Dudrick as "the inventor of PN, which is considered one of the most important advancements in surgery from the last century and has been responsible for saving millions of lives including our daughter Gabby's (Figure 7). He was a true pioneer in modern medicine and we are so incredibly thankful that we were able to meet him and hear him speak as well as personally thank him for saving our daughter's life."

Megan G.'s powerful statement: "My heart was saddened this weekend with the news that the doctor who saved my life as a child, passed away. Dr Dudrick was not only one of the most influential physicians in world history but a real-life superhero. A hero with a strong mind and dedicated soul who never forgot about his patients, their questions and concerns. His lab coat concealed his wings and I believe that he is now able to make house calls—flying in the wind."



**Figure 7.** Dr Dudrick and home parenteral nutrition consumer, Gabby.

### **Bettemarie Bond, OT; Home Parenteral Nutrition Consumer**

My heart aches to hear of Dr Dudrick's passing, and I send my deepest and most heartfelt condolences to his family and his lovely wife Theresa. I pray he is resting in a better place with no pain or illness, is able to see Kelleen (the first infant treated with PN), and is in a place where he can feel peace over some of the challenges he faced.

I had the honor of meeting Dr Dudrick, and at the time, I was speechless. If you don't know me, that's unusual. Even today, as I write this, it is extremely difficult to put into words all my feelings. PN is to me like wings are to an EAGLE. PN allows me to fly and to be me! Because of PN, I am alive!! But even more so, PN provides my body the necessary nutrition so I can live my life to the fullest and go after my dreams.

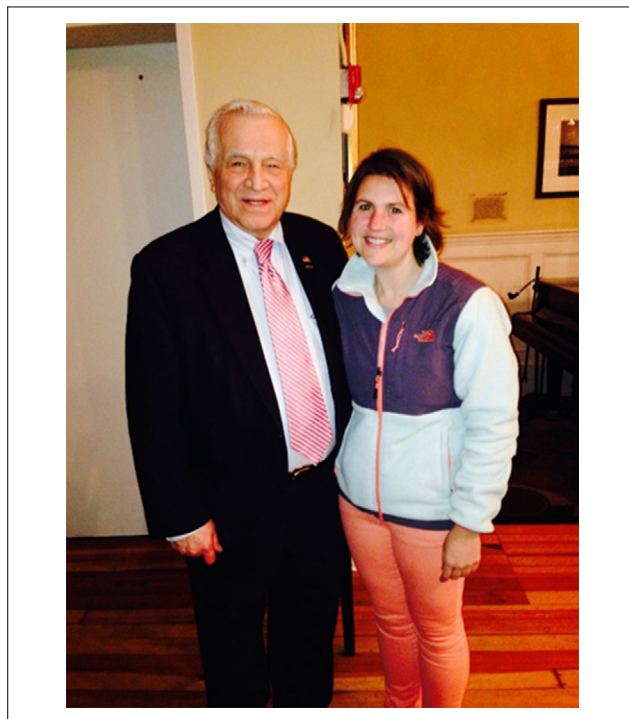
Dr Dudrick touched my life in an amazingly positive way though his creation of PN; and as a result of his creation, I've been able to touch the lives of many families because PN provides my body with the nutrition it needs to function. His work has lasting ripples that go on and on. For example: While working as a pediatric occupational

therapist, several of my students were extremely picky eaters. Because of my experiences, I changed for the better how feeding issues were addressed at many schools. As a result, children were calmer and less anxious during mealtimes, all while expanding their diet and becoming more independent eaters. One father said, "We were unable to eat together in public as a family before, and you gave us the gift to go out to eat as a family with our son."

Living life to the best of my ability is the best way I can show my appreciation for the most wonderful gift from Dr Dudrick, his wife, and his family. His contribution was a family effort—from his wife making harnesses, to his children walking the dogs. My heart is overfilled with gratitude for his dedication and lifetime of work and for his family's sacrifices! I am alive because of him and because they supported him in his work efforts!

### **Emma M. Tillman, PharmD, PhD; Home Parenteral Nutrition Consumer**

I had the pleasure of meeting Dr Stanley Dudrick on several occasions (Figure 8). His research and contributions to science in the area of nutrition support have impacted my career professionally and my life personally. I vividly recall the first time I met him. I was introduced to Dr Dudrick during Clinical Nutrition Week in 2014. At that time, I had been receiving PN for over 2 years and just starting to adapt



**Figure 8.** Drs Dudrick and Emma Tillman, parenteral nutrition researcher and consumer.

to that as my new normal. I was introduced to Dr Dudrick professionally as a clinician/researcher, but as we talked, I shared that I was not only a scientist researching the area of nutrition support but also a PN patient/consumer. He shared with me that both Jonathan Rhoads and Harry Vars benefited from PN during their lives and that I was not alone being on both the clinician/researcher side and the patient side.

I shared with Dr Dudrick that I wanted to get back to marathon running, an activity I really enjoyed before starting PN, but I was worried about hydration and fueling during the race. He took time to brainstorm with me about ideas for hydration delivery and securement during the

race, and more importantly, he assured me that this dream of wanting to participate in a marathon with intravenous hydration was not crazy or impossible and it could be done.

I was starstruck when meeting him because he was like a celebrity to me! I remember my excitement for meeting him was mutually felt as he was just as excited to meet me, a PN consumer living life to its fullest because of PN. Five months later, I ran my first marathon with intravenous hydration held in a waist belt. Throughout Dr Dudrick's career, he always looked for the solution to problems, no matter how complex. I will forever be grateful for his contributions to PN, but also the wonderful interactions that I had with him and his true excitement in meeting patients living with PN.