Robert E. Scully, MD, FRCPath, Emeritus Professor of Pathology at Harvard Medical School, died on October 30, 2012 at the age of 91 years. He practiced almost his entire career in Boston, mostly at the Massachusetts General Hospital (MGH), but his influence was felt worldwide primarily because of his contributions to gynecologic and testicular pathology.

Robert Edward Scully was born on August 31, 1921. His father died of pneumonia three months after Dr. Scully was born, so he and his only sibling, an older brother, were raised by their mother, a schoolteacher. Dr. Scully graduated from the College of the Holy Cross in Worcester in 1941 and then attended Harvard Medical School, from which he graduated in 1944. Although initially interested in a career in general medicine, pathology had always appealed to him and he decided ultimately to apply for a pathology residence at the Peter Bent Brigham Hospital, and was accepted. He remembered his residency days under Dr. S. Burt Wolbach with great fondness. He also spent time during his training at the Children’s Hospital, and when his residency was over, spent one year at Pondville State Cancer Hospital in Walpole, followed by one year teaching at Harvard Medical School. During the latter year he was supervised by Dr. Tracy B. Mallory, the then Chief of Pathology at the MGH, who recruited him to join the MGH faculty. He took up that position in 1950, but early in his tenure spent two years abroad serving in the United States Army during the Korean War. He returned to MGH in 1954, an institution he was to serve for the next 54 years.

Dr. Scully was a classically trained general anatomic pathologist with considerable experience in autopsy pathology and all areas of surgical pathology. Indeed until late in his career, he would be shown examples

In tribute to their dedicated efforts to science and medicine, deceased members of the Harvard Faculty of Medicine (those at the rank of full or emeritus professor) receive a review of their life and contributions with a complete reflection, a Memorial Minute.
of specimens from diverse areas of the body for his opinion, and throughout most of his career at the MGH he and Dr. Benjamin Castleman were the “go to” people for difficult diagnoses. Dr. Scully’s eye was legendary not only because of the speed with which he would make difficult diagnoses but because of his great attention to detail and preparedness, if necessary, to study a difficult case relentlessly, making sure he left no stone unturned in arriving at the correct diagnosis. He was of the great tradition of clinically-based pathologists, being aware that while many observations were interesting academically to the pathologist, what really mattered was what they meant to the patient. He always warned of the hazards of making diagnoses, particularly of unusual cases, without a sound awareness of the clinical background of the patient and gross characteristics of the specimen. Although he felt that most of the time careful gross inspection and diligent evaluation at the microscope of routinely stained slides would suffice for diagnosis, he was quick to embrace new modalities, such as immunohistochemistry.

Dr. Scully published over 400 papers, which included descriptions of many new entities. Beginning as far back as 1953 with his seminal paper on the distinctive lesion of the abnormal gonad, the gonadoblastoma (his expanded experience being presented in an important 1970 publication), over the years he produced descriptions of distinctive ovarian tumors such as juvenile granulosa cell tumor, sclerosing stromal tumor, small cell carcinoma of hypercalcemic type, and others, all now accepted entities in the current classification of ovarian neoplasms. He also wrote three books. The first was on endocrine pathology of the ovary and was dedicated to Dr. Joseph Meigs, chief of gynecology at the MGH in Dr. Scully’s early years at the hospital. He also wrote the second and third series fascicles on the ovary in the well known series of tumor atlases. His final book was on testicular tumors. His interest in the latter topic began when as a resident he saw an unusual case, which prompted him to review all testicular tumors encountered at the Peter Bent Brigham Hospital. His mastery of the complex world of the pathology of intersex (gonads with indeterminate or mixed features) was remarkable and his lectures on that topic will likely never be surpassed. He did not consider himself a great public speaker but his lectures were meticulously prepared and concise, and he went to great pains to make certain that every slide shown had a point to make.

Dr. Scully served for 27 years as editor of the Case Records of the MGH in the New England Journal of Medicine. During that time his obligation was to have one case record published every week, so he essentially was responsible for editing a case report 52 weeks of the year, without fail. He started with a recorded version of what was presented at a weekly didactic session and the degree of re-writing that was necessary for him to turn those works into something that met his standards in the pages of the NEJM was a heroic editorial undertaking. His editorial skills were legendary to his many co-authors. He would relentlessly go over papers time and time again making sure there were no deficits in grammar and that if something could be said in 15 words as convincingly as in 25, the smaller number would be used. It was possible to be discouraged by the degree to which he “marked up” manuscripts that had been submitted to him with the optimistic assumption that he would consider them ready for publication, only to have them returned, barely interpretable because of his numerous marginal comments and suggestions for reorganization. Initial despair always turned to satisfaction when one realized one was not only learning how to write a paper properly but also that the finished product would be of a quality that would be to the credit of the junior author. On the subject of authorship, he was almost never one to show annoyance but would show a slight degree of irritation if junior colleagues “squabbled” over
authorship order, as he felt such matters were inconsequential compared to the educational impact of the paper.

Dr. Scully headed the distinguished group of pathologists who worked on the first World Health Organization classification of ovarian tumors, an undertaking that began in the early 1960s. Because the classification of ovarian tumors that existed at the time was disorganized, this was an important exercise and was brought into a state of good order by those who worked under his guidance. He was also a member of the group that performed a similar function for testicular tumors. Dr. Scully continued to be active in World Health Organization classifications as the senior writer of the classification of all female genital tract neoplasms, ultimately published in the late 1990s.

An example of Dr. Scully’s expertise in noting unusual clinical and pathologic circumstances was his role in helping establish the relationship between clear cell carcinoma of the vagina and cervix in young women and the use of diethylstilbestrol by their mothers during pregnancy. In the mid to late 1960s, Dr. Scully noted that at the MGH there was a surprising cluster of examples of these rare tumors in patients in the late teenage years, prompting clinicians to eventually make the connection with DES exposure.

Dr. Scully’s collection of unusual cases is remarkable. From early in his career he started receiving cases for second opinions. They eventually numbered over 27,000. He would start looking at them early in the morning and continued throughout the day, allowing for multiple interruptions for people to show him hospital cases. Saturdays and Sundays were no different other than a slightly earlier departure in the afternoon than during the work week. However Dr. Scully was not “all work and no play” he was a man of wide interests in politics and the arts and who closely followed sports, particularly his beloved Boston Red Sox.

Dr. Scully received essentially all awards that a distinguished diagnostic pathologist could receive including the Fred W. Stewart Award of Memorial Sloan Kettering Cancer Center in New York, the Maude Abbott Lectureship of the US-Canadian Division of the International Academy of Pathology, the Distinguished Pathologist Award of the latter society, and Honorary Fellowship of the Royal College of Pathologists. A named Professorship of Pathology in his honor was established at Harvard Medical School in the mid-1990s. Dr. Scully received his last award in May, 2012 when he was the first pathologist to be given the Lifetime Achievement Award of the Massachusetts Medical Society. His contributions in gynecological pathology and his additional work on testicular pathology and on the pathology of intersex constitute an enduring legacy.

Dr. Scully was very close to his two nephews and two nieces and their children, who provided him a warm family environment. His many trainees over the years were exceedingly fond of this wonderful, gentle man whose personal qualities matched his remarkable medical talents. Those who had the good fortune to work closely with him know that they worked with one of the giants in the field and a mentor second to none.

Dr. Scully remained well until his mid-eighties when a variety of health issues made it impractical for him to come to work and curtailed his travels. He remained in daily contact with some of his
trainees and former colleagues in the hospital, many of whom enjoyed speaking with him on the phone frequently, and visiting him in his condominium overlooking Boston Common. After suffering a stroke in late October 2012 Dr. Scully was taken to the hospital he had served so ably for over half a century. He never regained consciousness, dying peacefully a few days later.

Respectfully submitted,

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