

**MEMORIAL RESOLUTION OF THE FACULTY
OF THE UNIVERSITY OF WISCONSIN-MADISON**

ON THE DEATH OF PROFESSOR EMERITUS JOHN F. MORRISSEY

Al Maguire, the Marquette University basketball coach and later CBS basketball commentator, when asked why he had left Marquette for network TV, reportedly said, "It may be that there is only one time in one's life when there is a chance to leave the shallows of the beach and swim out to the deep water with the big fish." For John Morrissey, that moment came in the early 1960s when he saw a demonstration of a Japanese gastrocamera (a device looking much like a modern endoscope with a 35mm camera on the tip for blindly recording pictures of the stomach) that had been smuggled into this country down the pants leg of a visiting Japanese oncology fellow (out of concern at being accused of being a spy). As Morrissey told the story, in that moment he realized the potential for direct visualization for diagnosis of the stomach and, subsequently, therapy of gastric disease. Beginning with his seminal paper in 1965 on the use of the gastrocamera for the diagnosis of gastric ulcers and continuing through the fiber optic endoscopy revolution, Morrissey rapidly became one of the leading figures in the world in the development of this technology. In some sense, each person that has an endoscopic procedure, whether upper endoscopy or colonoscopy, owes a debt to this University of Wisconsin giant.

John Morrissey was born in Brookline, Massachusetts. He often spoke of his father, who lost his bank job in Boston during the depression and then became a bank examiner, a position controlled by the Boston political machine requiring the annual purchase of a book of photographs of the machine leaders at the cost of \$2,000. John graduated from Dartmouth College and then Harvard Medical School in 1949. He served with distinction in the Korean War, acquiring tuberculosis in the process, which eventually required inpatient treatment at the new Madison VA TB sanitarium (now the William S. Middleton VA Hospital). He fell in love with Madison, completed his internal medicine training here after successful TB therapy, and was then sent by the UW chair of internal medicine to the University of Washington to complete one of the first fellowships in gastroenterology. Returning in 1962 with his original intent to establish a research lab, he used to tell us that when he saw the gastrocamera, he closed his lab and saw his future in developing GI endoscopy. He rapidly rose through the ranks at the University of Wisconsin, becoming full professor in under a decade and then vice-chairman of the Department of Medicine in 1973, a position that he held with distinction for years due to his strong organizational and business skills. Nationally, he was seen as one of the pioneers in the clinical use of gastrointestinal endoscopy and became president of the American Society of Gastrointestinal Endoscopy in 1976. He began teaching a two-week course in the use first of the gastrocamera and then the fiberoptic endoscope, which attracted the new generation of GI endoscopists. Indeed, the list of attendees at this course is literally a who's who of the first three decades of GI endoscopy in this country. Recognized not only as an outstanding teacher nationally, but as one of the most insightful thinkers about endoscopy and clinical gastroenterology, he became a consultant to the FDA, the FTC, the National Cancer Institute, and the National Science Foundation. He was the RAND Foundation's main advisor on the clinical utility of GI endoscopy for years. He taught generations of GI fellows who, due to their superb training, never had a problem finding outstanding jobs. Based on his unique contributions to the field, he received every award possible from the American Society for Gastrointestinal Endoscopy and other honors as well.

His integrity and commitment to always doing what is right is exemplified by his position on endoscopy fees. As an early leader in the field, he literally could have set the fees for his procedures at any level that he wished. However, he always felt that each procedure should be paid for at a reasonable level and therefore personally held down the cost of endoscopy both locally and regionally. He made no friends by being asked by insurance companies to comment negatively on the fees of others. Setting the relative value of endoscopic procedures remains a contentious issue and an intense focus of national debate. Dr. Morrissey's counsel is sorely missed, as his was the voice of reason, insight, and compassion for patients.

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As proud as Dr. Morrissey was of his professional accomplishments, he was more proud of his family. His wife, Ruth, and children, Anne and Sarah, were a constant source of joy. He was a devoted family man, and his face would light up when discussing family news. After losing Ruth to non-smoking lung cancer in 2001 at the age of 78, he fell in love again and married Shirley Downing. He retired to Bend, Oregon, where his organizational skills led him to develop a region-wide senior golf tour. He continued to be busy serving as a consultant to industry and others. He was honored by being made an honorary member of the Japanese Society of Gastroenterology, a reflection of his international fame and an honor rarely bestowed upon those from outside the country. He is survived by his wife Shirley, his brother David, his daughter Anne and her husband Joe, his daughter Sarah and her husband Jeff, and his grandchildren Robin and John. His abiding interest in guarding the environment is exemplified by the request that memorial contributions be made to the Nature Conservancy, an organization that he supported with enthusiasm and vigor.

He is sorely missed by all of us.

MEMORIAL COMMITTEE

John Hamilton

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