

Interview with Raymond Adelman MD
Nov 18, 2021 ASPN History Project

Raymond Adelman MD, now retired, obtained an MD trained in pediatrics at the Albert Einstein School of Medicine, Department of Pediatrics where the “powerhouse division’ was pediatric nephrology with Henry Barnett, Chet Edelman, Ira Greifer, Adrian Spitzer and where fellows such as Juan Soriano and Ernst Leumann were training. The atmosphere was exciting and intellectually challenging. He then trained in pediatric nephrology at the University of California [UC]- San Francisco with Malcolm Holliday, Donald Potter and Carolyn Peal. From there he took his first job in pediatric nephrology at the UC-Davis as a solo pediatric nephrologist.

Ray built the division at UC-Davis adding faculty and developing a research presence. His career trajectory moved him into leadership and administration when he moved to Eastern Virginia University [EVA], Norfolk, VA where he became Chair of pediatrics and head of a Research Institute. In these positions he recruited nearly 100 faculty and the Research Institute became the strongest research presence at the medical school. He says he really enjoyed the chance to lead innovation and foster growth allowed him in the position. The environment changed and he chose to take a sabbatical in England [Hereford] where he worked as general pediatrician.

After one year in England, Ray returned to the US and served as an associate dean at EVA for one year before moving on to Phoenix Children’s Hospital as Chair of Pediatrics and then as an attending pediatric nephrologist. He retired in 2007 and now lives in Washington DC.

During his career, he had little interaction with internist-nephrologists except at annual meetings and, early on, in dialysis units when children had to be dialyzed with adults. He thought the big changes in pediatric nephrology over his career and to today include: dramatic improvements in end stage kidney disease care for children especially younger children; dramatic change in transplantation [medications, surgical approaches]; treatment for hypertension; understanding and treatment for genetic diseases.

In his own area of research interest, which was the care of neonate with hypertension and the neonate with acute kidney injury especially injury due to aminoglycoside toxicity, he sees considerable advancement and improvement. His other area of long term interest, beginning while at UC-Davis was ethical questions in pediatrics and pediatric nephrology.

When asked about advice he would give to those considering a career in pediatric nephrology, he responded this way:

- 1] Pediatric nephrology remains interesting, challenging and intellectually stimulating
- 2] Train in a strong program that provides excellent clinical training and strong research opportunities and training.
- 3] Plot your career path-assure you will work where you have sufficient colleagues with common interests to your own, protected time to pursue your own non clinical interests and support to pursue them.
- 4] Seek mentorship locally but also look to the larger pediatric nephrology community for help as well.

ASPN membership benefit:

- 1] Proud and glad to be a member of the “guild”
- 2] He met smart, helpful and “wonderful” people
- 3] Collegiality and collegueship both clinically and in the research sphere enhanced the satisfaction he had in his career.

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