Clarence Legerton was the first board-certified gastroenterologist in South Carolina. He founded the GI Division at MUSC in 1966, led it with distinction until 1988, and made many other contributions to MUSC, and to medicine in general. He was assistant to the MUSC President for five years, and received awards for teaching, including the Alumni Association’s Distinguished Alumnus award. He chaired several NIH scientific review committees, and received the highest honor of the American College of Gastroenterology. Dr. Legerton also proudly served the Charleston community in several ways. He sat on many local boards and committees, was the right-hand man to Mayor J. Palmer Gaillard, Jr. during the construction of the new auditorium, and was a leader in the Presbyterian church.

The faculty was small initially, as can be seen by the attached faculty listing. Former fellow and current faculty member Brenda Hoffman writes: “When I first came to Charleston in 1983, the attendings were John Cunningham, Clarence Legerton, Bill Marsh and Will Lee. Carlos Lamar was chief at the VA for decades. The fellowship program was two years in length with two fellows per year. We were very much a small family. The offices were on the eighth floor of the Clinical Science Building across from where the chairman’s office is now. There were two endoscopy rooms in that hallway and ERCPs were arranged with radiology. Laparoscopies were performed in the endoscopy suite. All procedures were done under moderate sedation including ERCPs and laparoscopy. We had three endoscopy nurses.”

Glen Daves (a fellow from 1976-78) writes: "Dr. Legerton is the reason I became a GI doc. He was stimulating and encouraging, a superb doctor and communicator. I have good memories of doing unsedated EGDs with Jaime Cuervo at the VA, screaming ‘Esswallow esswallow de tube,’ and doing
unassisted colos at County Hospital with the ACMI joystick scope, flushed with soap, water and alcohol, and stored in the clothes locker. There was no air conditioning. John Cunningham would leave his boat long enough to do ERCPs. There were essentially no therapeutic procedures. Fred Pittman was exploring C diff. Bijoy Das was a supportive mentor; journal club at his house was a digestive challenge."

Will Lee joined the faculty in July 1980. He writes: “At that time, Charleston was a sleepy town. We escaped the chaos of raising small children in Manhattan with its high crime rate and no garbage pickup. By contrast, I rode my bicycle to work every day along East Bay and, instead of a busy NY practice, was called “the rat doctor” because I set up a lab in the room next to the Endo suite. We prepared isolated hepatocytes and did a series of experiments on acetaminophen with David Jollow in Pharmacology. I also collaborated with Bob Galbraith who served as Chair of the Department of Immunology and Microbiology.

“I succeeded Clarence as Chief of the Division in 1988 appointed by the then Chair of Medicine, Jim Allen. Our faculty at that time included Clarence Legerton, Fred Pittman, Carlos Lamar, Bill Marsh, John Cunningham and myself. We were covering the VA, County and the University Hospitals. There was a dedicated GI service but no separate liver service. These were the early days of liver transplantation. I developed a link to the University of Nebraska, Omaha via Mike Sorrell, and sent 25 South Carolinians there for transplants.

“Not long after assuming the Chief position, my wife became Headmistress of the prestigious Hockaday School in Dallas. We moved there in 1990, and I have been at UT Southwestern ever since. The day I left MUSC, Joe Cofer arrived to launch MUSC’s Liver Transplant Program. Bob Galbraith, who had initially trained as a hepatologist in London, took over care of my liver practice until the arrival of Adrian Reuben in 1993. John Cunningham was our leading therapeutic endoscopist, having spent a six-month sabbatical at the Middlesex Hospital in London with Peter Cotton.”

Fred Wilson came from Hershey Medical Center and took over the Chair of the Division in 1992. He was particularly interested in small bowel function, and specialized in the care of patients with IBS and IBD. Key faculty members at that time included Adrian Reuben, John Cunningham, Brenda Hoffman, Charles Bickerstaff and Bill Marsh. The endoscopy unit had three procedure rooms on the first floor of the Clinical Science Building (now devoted to bronchoscopy).
The Division was given a major boost when Ian Taylor was recruited in 1994 to become Chair of Medicine at MUSC, having been Chief of GI at Duke. He persuaded Peter Cotton to move with him. Together they developed the Digestive Disease Center (DDC). This proposed a multi-disciplinary organization to “provide patient-friendly care, and the research and education to improve it.” It was sponsored by leaders throughout the MUSC community, including then-President Jim Edwards, Dean Layton McCurdy, the Chairs of Medicine, Surgery Fred Crawford and Radiology, Jeremy Young, as well as by Hospital Chair Charlene Stuart, followed by Stuart Smith. This broad institutional support allowed recruitment of other heavy-hitters (such as Rob Hawes from Indiana) and new facilities for clinical practice and research.

Endoscopy has become a major commitment for most gastroenterologists, and Divisional faculty members have been no exception. The primitive early endoscopy facilities expanded dramatically in 1998 with a new out-patient unit in Rutledge Tower and, under Marilyn Schaffner’s leadership, a high-tech unit for complex procedures on the third floor of the North tower. Phyllis Malpas took over when Marilyn became CNO of MUSC Hospital. In turn, these units were superseded with state-of-the-art facilities in Ashley River Tower, which opened in 2008. Our in-patient services have long been managed efficiently by Rhonda Flynn.

Adrian Reuben adds: “Hepatology was not added to the designation of the Division until a year after I established the Hepatology Section in 1994. Ian Taylor agreed to my request that recognized our contribution of Hepatology formally to the performance of the Division, clinically and academically, and its major contribution in expanding and enhancing the fledgling Liver Transplant Program.”

Both Peter Cotton and Ian Taylor were temporarily Chiefs of the Division after 1994 until Mark Payne was recruited from Kansas and became Chief in 1997. The Division thrived under his leadership and, in partnership with the DDC, put MUSC firmly on the national map. In 2003, the Division ranked 14th in the nation by US News and World Report.

Multi-disciplinary collaboration was facilitated greatly by bringing all the GIH and
GI Surgery faculty offices together on the second floor of the Clinical Sciences Building in 2002. The concept was further enhanced later when “Digestive Diseases” became a major component of the new Ashley River Tower building, which opened in 2008.

**Mark DeLegge** succeeded Peter Cotton as Director of the DDC in 2007. Dr. DeLegge served until the DDC was morphed into the Digestive Disease Service Line, which was led by Mark Payne and **David Adams** (from GI Surgery). The DDSL was in turn succeeded in 2016 by the ICCE (Integrated Center for Clinical Excellence), led by Brenda Hoffman. MUSC is evolving into a seamless organization called MUSCHealth.

We have been fortunate in our senior administrative staff: **Dallas Ellis** for the Division from 1994 to 2016; **Vicki Marsi** for the DDC from 1996 to 2014; and **Brian Sloan** from 2014 to 2017 for the DDSL and ICCE. We have also benefited from a strong IT group led by **Harold Mackey** for more than 20 years, including **James Webb** and **Linda McDaniel**.

The Division has been strong in all three aspects of the academic mission: Education, Clinical Care and Research. The fellowship program started in 1972, with **Jamie Ravenel**, followed by **Bright Williamson**, Jaime Cuervo and John Cunningham. There were two each year until expanding to three in 1982. The program also extended from two years to three in 1991 and, starting in 1995, standard fellowships were supplemented by post-fellowship advanced trainees who came for one year, mainly to study advanced endoscopy procedures. U.S. graduates were appointed as **Instructors** and could bill to support their salaries. For a while, we also had trainees from overseas (from a total of 21 countries) mainly supported by educational grants from medical device companies. Lists of the fellows, instructors and advanced trainees are attached. The list of Instructors includes three long-standing and valued Physician Assistants.

Local teaching was enhanced by holding multiple workshops for physicians and nurses from all over the country in a purpose-designed conference facility. In addition, many faculty members have been in demand as speakers at regional and national workshops and conferences. We held annual update CME conferences for regional clinicians for many years, and restarted them recently in collaboration with the South Carolina Gastroenterology Association (SCGA). The third annual such conference was
held at MUSC on September 24, 2016, with 120+ attendees. This included lectures in honor of Clarence Legerton and Don Wilson, respectively done by Sununda Kane (from Mayo) and John Cunningham (back from Arizona), as well as one sponsored by SCGA. Peter Cotton and Rob Hawes co-directed Beach Meetings each year immediately after DDW, from 1995 until 2011. These were updates on all aspects of advanced endoscopy with many overseas star speakers, held at Wild Dunes Resort, Isle of Palms, SC.

Clinical care has expanded progressively in range and volume over the years, covering all aspects of the field. Don Castell brought his long-standing expertise in esophageal disease to the Division in 2001 and has developed a strong clinical referral service and research program. His writings, lectures and many trainees have facilitated the management of complex esophageal disorders throughout the world.

There has also been special emphasis and expertise in liver disease (Adrian Reuben, Ira Willner, David Koch and Kimberley Beavers), IBD (Jennifer Seminario-Diehl and Nilesh Lodhia) and advanced endoscopy (especially ERCP, EUS, EMR, ESD and enteroscopy). These complex procedures were started by John Cunningham and Brenda Hoffman, supplemented by Peter Cotton, Rob Hawes and Joe Romagnuolo, and most recently by Andrew Brock, Pooja Elias, Greg Coté and Joe Elmunzer.

Each of these individuals have developed substantial referral practices, and have been productive in clinical research —both federally- and industry-funded— with resulting national presentations and related publications. Our clinical practice has been supported for many years by the sterling work of Physician Assistants Greg Buck and Merriman Dowdle, and by Nurse Practitioner Tammy Davidson, and earlier by Laura Lail, Peggy Leveen and Nancy Billings.

Tertiary level care of complex cases demands multi-disciplinary collaboration, the
central mission of the DDC. The Division has benefited greatly from a seamless interface with many colleagues in Surgery (General, GI, Pancreato-Biliary, Liver and Cancer), sophisticated diagnostic and therapeutic radiology, and expert pathology (David Lewin). The growth of the Division has been mirrored by recent expansion in Pediatric GI under Antonio Quiros.

Since gastroenterology has been described as the science and art of “helping patients to get square meals through round holes” (by Sheila Sherlock, no less), nutrition is also an essential Divisional focus, with a nutrition section having been initiated by Mark Delegge during his tenure. Recently, Bernadette Marriott joined the Departments of Medicine and Psychiatry, and the Division, to run a sophisticated research program focusing on the interface of nutrition and behavior with large clinical studies coupled with national-level nutritional epidemiology focused globally and in the United States.

Basic research in the Division was started by Will Lee, as highlighted above, and followed by Adrian Reuben, Ian Taylor, and continued for many years by Adam Smolka (who studied gastric epithelial cell proton pump biology and Helicobacter pylori) and Tom Gettys (who studied G protein-coupled receptor pharmacology). The recent recruitment of Don Rockey (as Chair of Medicine), Wing Syn, and Serhan Karvar has greatly expanded basic science investigation in the Division. These investigators have been focused on basic cellular and molecular mechanisms of hepatic fibrosis. And this year, Ray Dubois, who studies colon cancer, became Dean of the College of Medicine. Both brought their labs with them.

Clinical research in the Division has flourished for many years, and has touched on virtually all areas in gastroenterology and hepatology. The advanced endoscopy group (originally John Cunningham and Brenda Hoffman, then supplemented by Peter Cotton, Rob Hawes, Mike Wallace and Joe Romagnuolo) focused on the management of pancreatic and biliary diseases,
and GI cancers, as well as the appropriate use of ERCP, EUS and resection techniques. Studies in these areas are now pursued aggressively by Brenda Hoffman, along with recent recruits Greg Coté and Joe Elmunzer (with NIH funding), along with their trainees. Don Rockey and Andrew Brock are active in research in GI bleeding, Jennifer Seminario-Diehl and Nilesh Lodhia with multiple treatment trials in IBD, and Don Castell and Puja Elias in several aspects of esophageal diseases.

Clinical research in liver disease has covered many different areas, including acute liver failure (with the NIH funded Acute Liver Failure Study Group, Adrian Reuben and David Koch), hepatopulmonary syndrome (David Koch), drug-induced liver injury (with the NIH funded Drug Induced Liver Injury Network, Don Rockey), hepatitis C (Adrian Reuben, David Koch and Kim Beavers), coagulopathy (Adrian Reuben), non-alcoholic steatohepatitis (Don Rockey, Wing Syn), liver fibrosis (Don Rockey), portal hypertension (Don Rockey), and liver transplantation (Ira Willner). The impressive list of publications by faculty in 2015 and 2016 is attached.

MUSC’s Gastroenterology and Hepatology Division is surely thriving on our 50th anniversary.

Peter B Cotton MD FRCS FRCP. February 2017