Frank Cockett and the story of the ancient anatomical wax model of the left iliac vein compression

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In 1988, Professor Donini organized an international phlebolymphology meeting at the University of Ferrara in Italy.¹ At that time, I was a young surgical resident with the task of picking up Professor Frank Cockett at the railway station. I recognized him immediately, introduced myself and, together, we crossed the station square to my car. I asked him where he wanted to be taken, and he asked me to go to the anatomical museum of the University. We arrived just before the closure time, and Mister Cockett was intrigued and enthusiastic about an anatomical wax specimen (Figure 1). It was a wax model of an autoptic study, an authentic work of art from the late eighteenth century owed to Professor Tumiati, an anatomy professor who was also an obstetric surgeon.² Cockett took a camera out of his bag and, after asking the museum custodian for permission to take photographs, took some pics. Afterward, he asked me to find a photographer who could prepare a slide quickly. The next morning Frank Cockett's inaugural reading began with that anatomical preparation. The congress hall was filled with hundreds of colleagues from different European countries and South America. He began by saying that Cockett's Syndrome should no longer be called by his name³

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Figure 2. Wax anatomical model from a *post-mortem* study by Giovanni Tumiati, 1799. The left common iliac vein appears enlarged below the common right iliac artery compression.





but by the name of Professor Tumiati, that is, the professor who had created the first anatomical wax model of the compression of the common right iliac artery on the common left iliac vein. Everyone was very impressed with Cockett's intellectual honesty.

I met Frank Cockett again in 1995, in London, after the social dinner of the International Union of Angiology World Congress organized by Andrew Nicolaides. I was sitting with some colleagues outside, and I saw Frank Cockett in a perfect dark suit who, together with his wife, was waiting for a taxi. I got up and went to greet him. He recognized me immediately and reminded me of the episode at the Anatomical Museum. At that point, I had the courage to say that I didn't think it was right that the syndrome was attributed to Tumiati. I told him that the anatomical wax masterpiece came from an autopsy of a young woman who had died while pregnant. In hind-sight, one might think that she had a pulmonary thromboembolism, perhaps favored by Cockett's syndrome. However, Tumiati was completely unaware, because Rudolph Virchow would describe

such nosologic entity only many years later. The intent of Tumiati, who was also a gynecological surgeon, was simply to describe an anatomical variant of the right ovarian vein (Figure 1). Cockett smiled and shook my hand, saying goodnight and adding an affectionate tap on the shoulder at the end.

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