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Times They Are A-Changing

Report from the Fifth Congress of the World Association of Croatian Physicians, Opatija, May 7-10, 1997

The times have really changed. In 1994, I travelled to the World Association of Croatian Physicians (WACP) Congress in Pula with two fellow physicians from Osijek who had volunteered in the Croatian Army at the battlefields of Osijek. We were driving fast through the rain and mud, discussing all the possible outcomes of the war and the occupation of a quarter of our country. We were determined, serious, and so much preoccupied with Knin and Vukovar that we did not care for the fun of the forthcoming meeting in Pula. Now, three years later, I was driving in the same direction, but the situation was different: the Croatian army had defeated the enemy in fascinating campaigns, and peaceful politics was about to win in Eastern Slavonia, ending the 1000-year struggle for freedom, democracy and sovereignty, and reassuring even those most suspicious and pessimistic about the Croatian strength. I drove in an expensive car, fast and comfortable, with two different friends: Zeljko J. Bosnjak from the USA, a great scientist, friend and devoted member of WACP, and my old friend Filip Culo, a unique academic person, presently the associate dean at Zagreb School of Medicine, and the dean of the newly established Mostar School of Medicine. We discussed academic matters: the Internet and equipment for Mostar Medical School, education of young faculty staff (Zeljko has educated the majority of scientists now working at the Medical School in Split), curriculum, and library. The Croatian victory has not been only military, but it has also spread to all the peacetime aspects of life: new buildings have been built along the road, new restaurants opened, Split got its Medical School, with the excellent staff and premises, Osijek Medical School has made a significant progress, and we have succeeded in establishing the Medical School in Mostar. I boasted to my skeptical friends that we would soon come to the newly built part of Zagreb-Rijeka highway. I announced the highway several times, and Zeljko and Filip were expecting it eagerly. Somehow we missed it, and they laughed at me, claiming that this was a typical ruling-party propaganda, easy to discern.

In Opatija, Zeljko was fascinated with a beautiful tourist resort, elegant hotels and a charming promenade. Filip dwelled on whether he was at the right meeting, and I took the opportunity to avoid the comments on our somewhat shabby hotel and bad weather. We hugged our friends in the lobby, and were introduced to the newcomers. Baca immediately offered drinks to all of us, and asked me to do several special tasks. There was Dolinar (the Congress would be pointless without him), Tomac (in charge of WACP student scholarships), Kulas from Sweden, three colleagues from Australia (unfortunately, our beloved Lj. Mihaljevic and S. Klaric were absent), many Croatian physicians from Germany, a number of dentists, Hebrang, Kostovic, and, finally, my old friend from Split, Niksa Simetovic, who has been living in San Marino for already three decades. The beginning was really promising.

Welcome Party

With the cessation of war, many lost their conversation topics, and the subjects of peace are tricky: democracy, privatization, criteria, academia – all elicit different views and opinions, and spoil the beauty of *viribus unitis* in the war. I viciously let F. Culo explain to our colleagues from foreign countries (and also to those from Croatia) why we needed medical school in Mostar. Culo asked his fellow Herzegovinians for help, and they started arguing among themselves; so, all others dispersed, and Culo was left with an even more difficult task – explaining to one Herzegovinian why another Herzegovinian should be included in the School's work although, as the inquirer thought, he was a corrupt man, a former communist, owned an illegal trading company, or smuggled cigarettes. Culo is good in defending people, not only because of his strength or determination but because of his good nature. So, I left him and looked for those who were new and alone, so that I could introduce them to interesting people.

I found Dr Juraj Osterman, my former teacher in Physiology, a nice, quiet, noble man whom I owe a lot of devotion and care. After my Physiology course, he went to the USA, and remained there. I introduced him to several nice, quiet and noble men like himself. However, this did not work – I

noticed that they soon did not have anything to talk about. So, I introduced them to the ladies and the Herzegovians, which turned out well.

Marko Herceg is a young physician from New York, and this was his first WACP meeting. His Croatian is not fluent but its accent is irresistible. Marko was sitting alone, afraid to approach and talk to domestic people because of his broken Croatian, reluctant to approach older guys for his youth, and forbidden to approach girls since he was getting married. I forced him to talk to several young WACP members, which made him claim later that this assembly was one of the best experiences of his life. (We will see about that later, after he gets married.)

However, the peace time is not always the best to organize a great welcome party. Z. Dolinar had laryngitis so nobody sang; Mostar conversation involved only Culo and two most pessimistic Herzegovinians, Baca went to bed early because he operated that very morning (no wonder he is so rich), P. Huljic talked about his new yacht with captain A. Baca, and I was left with Osterman and Simetovic politely discussing weather in Opatija. There was a lot of food left on the table, and many pretty ladies were yawning. I could not do much more than go to bed and save my energy to survive the welcome speeches of the next morning.

Day One

The morning plenary session started well – with the Croatian anthem and Andrija Hebrang. He is still the Minister of Health, handsome, intelligent and strong as ever. Andrija is of my age, but this can be seen only by his gray mustaches; his memory is perfect. So, he reminded us of what a great achievement WACP was, and urged us to work as diligently as before, now that the peace had come.

Ivica Kostovic has so many functions that he himself must consult his computer to see what he will be doing next, but, nevertheless, he is my favorite speaker. As an excellent scientist, Kostovic is always concerned with extremely important issues, but, as a politician, he, at the same time, tries to avoid telling the crucial things. Thus, he ends up in something which I call a “systematized confusion”: only those who know how to listen to him, i.e., that important things are always “in brackets”, can enjoy the charm of his confusion, the importance of his information, and the wisdom of his advice. He praised WACP for its internationally announced appeal to the UN to clarify the fate of missing patients from the Vukovar hospital, which resulted in most tragic discovery: after the fall of Vukovar in November 1991, the Serbs killed 200 patients and buried them at Ovcar locality; only after a disgraceful indecisiveness, deliberation over guilts of the parties involved, political and moral blackmail, the international community finally investigated the place and found what we were afraid of. Unfortunately, this did not prompt them to do the same at some seventy other locations of mass graves identified by our government, but they decided instead to investigate the place near Pakrac (Pakracka Poljana), where the Serbs claimed that their 1,700 victims to the Croatian army were buried. Indeed, the investigation revealed that 19 persons were buried there, killed under uncertain circumstances, but it occurred to no one to ask how it was possible that Serbs accused Croats of killing 1,700 persons! This is so typical for the Serbian propaganda and the attitude of the international community! It is identical to Jasenovac, Jadovno, and the whole history of Croat-Serb political interactions. Distorting the data by two orders of magnitude fulfills the criteria to be determined as Serbian Correction Coefficient (SCC).

This observation on Pakracka Poljana is mine; Kostovic restrained from further commentary on war crimes. He invited our colleagues from abroad to join the work on research projects financed by his Ministry of Science and Technology. He announced the establishment of Split and Mostar Medical Schools as independent institutions, and asked for collaboration and assistance. There are so many exciting things, new projects presently going on in Croatia – he exclaimed – so many that for those who like excitement Croatia is the country of choice!

I could barely wait for Dr Dolinar's speech. His voice was hoarse, but otherwise he did not change much after another two years without me. Excited, he gave a speech similar to that of Kostovic, but it was more confusing since he referred to more data. This year being a pathologist, he ended his speech with a striking slogan: “Better humor than tumor!” As usual, he couldn't have been more right.

Recovered after a good night sleep, Ivo Baca, the WACP president, gave an important speech. He informed us that WACP expanded to 405 members, from 19 countries (Simetovic, the only one from San Marino, smiled complacently – he alone represented the whole country). Then he read my proposal on how to associate WACP with the new Mostar School of Medicine, which I liked most, but others did not seem to share my excitement (Culo was whispering with a Herzegovinian, judging the case of another Herzegovinian). Baca discussed WACP's future. WACP had a clear-cut goal during the war – medical assistance; it also succeeded in connecting the Croatian physicians and dentists home and abroad, but at present, after the victory and arrival of peace, Baca could not think of anything better than the scientific courses and collaboration.

In the next, professional part of the morning session, Hebrang gave a splendid speech on the renewal of medical equipment in Croatia, executed by his Ministry and assisted by the loan from the World Bank. Although most of the new equipment seemed to be radiological (Hebrang is a radiologist), I enjoyed Hebrang's self-confident and clear speech. We also learned that there were already three privately owned NMRs in Croatia. Hebrang, naturally, mentioned that 142 medical institutions in Croatia were destroyed or damaged in 1991/92 war, with the damage amounting to two billion DM. His teams assessed the condition of the major medical equipment (it was terrible), made plans according to the Dutch and Canadian standards, and took a DM780 million loan from the World Bank. The loan was scheduled to be paid off in 17 years, with a 3% interest rate. None of the equipment bought would be privatized – an important information for all those suspicious of the future of Croatian health care. The intensive care units would be equipped next. It was interesting to find out that although the number of CTs in Croatia was doubled, the waiting period for patients to get examined prolonged from one to two months. Hebrang explained the paradox with a short comment: "The more devices, the more hungry the market becomes for their service". Interestingly, although most of the audience eagerly waited to catch him in some sort of contradiction, this allegation was unanimously accepted. Hebrang estimated that at least 80% of indications for CT were unsound, and, again, everybody nodded. Rather experienced in his dealing with Croatian hospitals, Hebrang arranged that the amortization for the equipment was not set within hospitals' budgets, but in a special fund of the Ministry, so that yearly amount of the money would be automatically deducted from the Ministry's payments to the hospitals. There were many questions and comments, mostly intended to be hostile, but Hebrang was self-assured, determined and witty, so that all the adversaries seemed insufficiently informed amateurs in comparison to him (true judgment). Croatia presently invests 7.8% of its GDP in health care, which is comparable to the average of west European countries, but only in relative terms: Croatian GDP is so much lower that the absolute investment barely suffices the needs. Hebrang maintained that a strictly controlled health care system was the only choice for developing countries like Croatia. The alternative would be some 30% reduction of the unit of medical service value as in Germany, or physicians' strikes as in France.

Hebrang's friend, collaborator and fellow radiologist from Germany, Dr Berislav Tomac, claimed that he could barely wait the opportunity to attack Hebrang; so he did. His voice trembled with anger, but he first made an introduction concerning the 1991/92 war, which softened him and melted his anger, so that he was unable to get sufficiently angry to the end of his speech. This may have been the reason why we did not like what he had said. He was the first man who made sacrifices in the war, and the loudest who asked others to do the same, but now, the times changed him as well. He sounded as a typical entrepreneur (he is the first to have a private NMR in Croatia) asking for various kinds of state support for private businesses like his. Fortunately, Hebrang resolved the situation in a friendly manner.

After that, the speech of my great friend and teacher Filip Culo came as a relief. Not only because he is a true expert on medical school curriculums, but also because of his irresistibly confused manner of lecturing. While Kostovic speaks confusingly because he is trying to conceal the information, Culo gets confused trying to suppress his erudition: he is extremely polite and actually ashamed to say clearly the things others are not familiar with. Thus, he apologizes for showing data, for explaining difficult things, and is embarrassed for his precise conclusions. Since I know him well, I was looking forward to his lecture, and I really enjoyed listening to it. Other participants listened in awe – only few were medical school teachers, and even they had probably never experienced the depths of problems seen by Culo. Finally, everybody liked the lecture, but few discerned its depth. Somewhat envious, I realized that Z. Dolinar was among those few.

Commenting on Culo's lecture, Z. Poljak claimed that medical school teachers did not need to be scientists but pedagogues. Although Culo, as everybody else, knew that Dr Poljak's ideas were mostly wrong, he was embarrassed by this tragic comment and responded disconcertingly making a long explanation and trying to avoid a polite but decisive "no".

Z. Metelko spoke on something about diabetes, but I decided to have a cup of coffee with Culo. He is desperate after every lecture for fear that he was not explicit enough. Metelko belongs to the famous-successful-diplomatic Granic-Skrabalo school, and I listened to them many times before.

I returned to the audience soon to listen to Dr Spomenka Tomek-Roksandic, my dear friend and a devoted gerontologist. The lecture was really nice, with the main pro-gerontology argument that soon most of the audience would be old. However, the threat did not disturb almost anybody, because most were married, and the discussion focused on other terrible messages of the lecture. Hebrang revealed that he had ordered the study, aware that it would produce tragic data. It did, not only because it concerned the elderly, but because the data showed that a lot of procedures that could have been performed outside Zagreb (like tonsillectomy, or gall bladder operation) were done in Zagreb. Dr Tomek-Roksandic hastily concluded that this indicated poor medical services outside Zagreb and financially burdened Zagreb health funds. However, some brilliant physicians who work outside Zagreb, headed by fearless war physicians J. Jelic of Slavonski Brod, and A. Petricevic of Split, challenged the argument, claiming that the data reflected the fact that great physicians of Zagreb invited wealthy and influential patients to treatment to Zagreb. I thought they were right, and urged them to shout louder, but they remained polite because the study had to do with the distribution of superspecialist beds done by Hebrang (favoring Zagreb, I figured), and they liked Hebrang for his assistance to their cities during the war.

Z. Pavelic came from the USA and, no wonder, gave a speech on gene therapy (there would be more of it later). He showed a number of slides which nicely praised his scientific achievements, but we liked most the photo of firemen taken in front of a burning house, and formally agreed with the assertion that one should first extinguish the fire and then take a photo.

The true star of this Congress was Kresimira Milas, a symbol of young generation of WACP members, better than her respected father, better than widely liked Marko Herceg, better than anybody. Pretty but modest, determined but mild, American but with her father's perfect Croatian, she talked about – gene therapy, showing sound, well systematized, cautious data, in her father's manner, but much, much more attractively. After her speech, everybody wanted to compliment her experiments, and her excellent Croatian. I restrained from joining the others, and devised another plan. Since I owe to her father my 1976 postdoctoral scholarship, I decided to introduce her to a handsome young dentist from Rijeka. Although a dentist and although from Rijeka, the guy was gorgeous, looking somewhat between R. Redford and Z. Glasnovic. Since Rijeka is not exactly in accordance with Kresimira's father's political views, I do not know whether he would consider my action an act of gratitude, but his daughter certainly did: the rest of the meeting she got along well with the guy, at least in terms of dancing and focussed conversation.

Then I skipped F. Dobrila's speech on breast cancer, because I cannot accept that breast cancer is caused by environmental factors, and returned to listen to my former teacher J. Osterman. I sat in the first row, like a good student who wanted to show his devotion to the teachers. It was not difficult since J. Osterman's lecture on pituitary tumors was nice and well organized, without any reference to gene therapy. Perfectionist Osterman spoke in English, slowly and gently, which reminded me that I had develop a habit to fall asleep during the lectures at my Physiology course in 1966.

The afternoon session on surgery started with Josip Bill, my former student, who gave a lecture on head and neck microvascular surgery. He began by citing somebody that "beauty is skin-deep, ugly to the bone". The slogan proved right, and I could barely wait the end of his speech to leave surgery for a cup of coffee in the lobby.

In the lobby, I joined K. Milas and Ingeborg Huljic, the beautiful wife of my dear colleague Petar Huljic from Frankfurt/M. I used to write earlier about P. Huljic, who is indeed a handsome, witty and learned man, which is all, however, insignificant in comparison to his wife! Ingeborg is a German polyglot who, among other languages, speaks fluent Japanese and Croatian, which has an additional charm of the

accent of Peljesac, where she fell in love with Pero many years before. So, I listened to them, two worldly ladies, one a complete American and the other German, speaking soft, nice, polite Croatian in the lobby of the Ambassador Hotel in Opatija. I did not have to intervene to stimulate the conversation – they admirably discussed Croatia (weather and sea only), children, Opatija, foreign (?) languages, all the issues that do not annoy, offend or elicit any anxiety – completely different from the style and subjects of my conversations. It was like a pleasant dream, and I was listening in silence until merciless Baca ruined the magic. He wanted to talk to me, and I was immediately back into my world, pondering on how to finish (compose, organize, finance, distribute, make profit) the 5th year anniversary book on WACP activities.

Day Two

We spent the first evening at a place which offered Istrian dinner. There was, unfortunately, not enough room, it rained, the food was abundant but tasteless, the music too loud, and I left by the earliest bus. By the same token, the morning of the second day did not seem promising, since it was scheduled for professional lectures, which I do not approve of – I think the whole WACP meeting should be devoted to three subjects only: Croatia, Croatia, and Croatia. But, then, I had no other choice, and went to listen to my friends. To make sure that I would not miss Z. Bosnjak, I had to listen about the role of ultrasound in emergency medicine. However, instead of putting me asleep, this subject aroused a passionate discussion which I enjoyed because I was on nobody's side, and I actually wanted them all to be wrong. The WACP experts argued mostly over the time period necessary to learn to decipher the blurry pictures their machines produce, sometimes even in color. One group insisted that it took at least 10,000 check ups to become an expert, whether others maintained that this was actually a piece of cake, and that an averagely intelligent man could learn about ultrasound in two hours. Later, I could hear some interesting gossips in the lobby about "amateurs who know nothing about ultrasound".

My great friend Z. Bosnjak delivered a beautiful speech in Croatian, which reminded me of the times of our first meetings when he could speak only English. This time it appeared that his speech would be almost as perfect as that of K. Milas. It really would have been if he, towards the end of his speech, had not used a very Serbian word for a *rat*. He got confused like Culo, perspiring and apologizing, but even that could not affect the beauty of his lecture. Nevertheless, the rest of the meeting, a number of smart alecks approached him to point out that this was a wrong word. Zeljko apologized to every one of them, and I reproachfully asked them to tell the Croatian equivalent for some difficult words. Poor Zeljko – even Culo, the man who sympathizes with everybody's troubles, found the situation amusing, and used the word when necessary and especially when it was not necessary.

I also liked very much the following lecture on robots in surgery, given by Dr Ivo Baca. Baca is a fascinating man, indeed! At first glance, he is completely normal, likes the sea, women, whiskey, traveling, all the normal stuff, but when it comes to surgery, he goes nuts. He spends his time between WACP meetings searching for more and more complicated ways of operating people. One year he performs appendectomy through a tube (laparoscopy), the following year he uses laparoscope to take out colon tumors, then he uses laparoscopes with very small diameters to take out large tumors (how?!), and this year he described how he performed operations alone, only with an assistance of a robot. He even talks to the robot, and the thing listens to him! He promised me a respective article for CMJ ("Solo Surgery"), and I am already amusing myself with how I will change the title into "Solitaire Surgery". I forgot to ask him if he could devise a robot for writing organized surgical papers.

Dr Neven Olivari is a surgeon whose name even a super-surgeon I. Baca whispers with awe, so I was really looking forward to meeting him. However, he was unapproachable, maybe because he was always talking to his wife, maybe because Baca trembled while introducing me, and most probably because the greater a surgeon is, the more he despises science and scientists. Therefore, I did not dare to ask him to publish his data in CMJ, although they were really unbelievably good. He operated exophthalmos in several thousand patients, by taking out fat and connective tissue from the orbit, which an average physiologist could never do. Oh, boy, where would I publish this data if they were mine! But Olivari left the publication matter unclear, said something underestimating about statistics, and restrained from reporting on the rate of relapses, so I felt relieved that I did not get the paper: to

make a paper of a German surgeon publishable an editor has to speak German, Croatian and English, have a computer, two statistical editors, and lots of color pages available without charge (yet, to make a paper of a Croatian surgeon publishable, an editor has to operate himself). Nevertheless, listening to Olivari one can clearly experience how good it is to be a physician, even a surgeon; the complexity of the operation, the relief brought to the patients and the beauty of slides make up for bad statistics, English and – editing.

Then we listened to an excellent lecture of my new friend Dr Z. R. Vlahcevic from the USA. He did not dare to speak Croatian, although he did not work with rats, but with gene therapy. He spoke calmly and softly like Osterman, organized like Bosnjak, and impressively like Olivari. He elegantly combined clinical work with gene therapy, biochemistry with statistics, hope with reality. In this latter respect, gene therapy for inherited metabolic deficiency seemed really promising.

My beloved city of Split was then represented by Dr N. Petri who attempted to turn hyperbaric medicine into a magic, but in vain. Without prospective, blind trials, without statistics, criteria of diagnosis, without Olivari-size samples nothing can be proven today. Petri looked smart in his Croatian Navy uniform, but his lecture belonged to the Yugoslav Army lumber room.

I persuaded Marko Herceg to speak in Croatian. His uncle Dane, a police official from Zagreb, is my dear friend who discreetly asked me to assist Marko in every respect, and advised Marko to listen to me blindly. Poor Marko thus frenziedly tried to translate his lecture into Croatian. He summoned all the domestic youngsters to help him; one could see them bending over Marko's papers in bars, cafeterias, at dinners and parties, discussing a lot and writing a bit. Finally, Marko managed to greet the audience in Croatian, but then, looking in my direction with his guilty eyes, switched to New York English. Trying to take the advantage of Vlahcevic's authority, he promised to speak in Croatian at the next assembly, but the complexity of the lecture and his New York accent gave little hope. (Back in Zagreb, I turned him in to his uncle, but only after he flew to New York.)

Nevertheless, Marko's lecture had a great bearing. He spoke on rehabilitation of patients after they survived a stroke, and showed the importance of the matter, the complexity of rehabilitation therapy, and good prospects of the procedure. I thought, with sorrow, of Croatian soldiers with head and brain injuries, feeling guilt and anger over the fact that they had not received even a remotely similar treatment. Instead of a careful and continuous rehabilitation treatment, they have been provided only with retirement payments, houses, and cars, and pretended to be happy, together with their benefactors. No, that is not the way to treat our veterans – we should use the kind of expertise Marko presented! Afterwards, I did my best to connect Marko with the Croatian physicians working with war veterans, but this was only a patriotic amateur gesture; we need a systematic action, with the assistance of foreign experts like Dr Herceg.

WACP Assembly

I do not understand why Baca scheduled WACP members assembly during the lunch break. This should have been the most important part of the meeting – there were 8 issues to be discussed, all complex and important, including the WACP awards for young scientists. This ceremony turned out to be the easiest part of the session, in spite of the speeches, results reports, hugging, kissing and taking photographs. The awards were received by the ladies: M. Cacic for medicine, and Z. Tarle for stomatology. Although the criteria for awarding did not seem sound and the decision was made in a very short time, the ceremony was pretty and moving, and the laureates beautiful, especially at taking the photographs with Baca.

Then the WACP president (I. Baca), secretary (I. Bokan), and treasurer (V. Barko) reported on the respective WACP activities. I. Baca thanked Dr A. Drazancic, the former president of the Croatian Physician Association (CPA) for excellent collaboration and support to WACP. I joined wholeheartedly, because I was the first one to doubt CPA's willingness to collaborate with WACP, and Dr Drazancic proved the opposite.

The rest of the assembly was marked by the word "integration". Everybody had a different idea on how to integrate Croatian physicians working abroad into Croatian medicine. Now, when the war

ended, we were unable to reach any conclusion. B. Tomac, for example, saw integration as WACP's asking President Tuđman to nominate one WACP member to the County House of the Parliament. However, since Tomac had to exclude himself from his own proposal, Bokan was a dentist, and Baca had the robot, we rejected the proposal. Finally, pretending that she did not understand the issue completely, K. Milas improved the situation by delightfully describing how a nice experience this was for her and other young WACP members. I think that this commentary may serve as the conclusion of this, and announcement of the next WACP assembly.

In the meantime, I was voted out twice: first in the issue that WACP assembly is held every year (Baca won with his proposal for the assembly to be held every two years), and then that the next assembly is held in Vukovar (people preferred Dubrovnik). Democracy has its price.

Farewell Dinner

The farewell dinner was not the final event, since the round table discussion was scheduled for the following morning. Neither was superb. I dislike farewell dinners, because they imply parting from great company and important work. Accordingly, I decided to work at this farewell dinner. While others were dancing to Ivo Robic's evergreens, or trying to talk to unknown neighbors accompanied by loud music, I outlined a doctorate thesis in public health related to dentistry. It was a hard work, but I enjoyed in the terrified face of my neighbor F. Culo who fears dentistry and despises public health. However, since this was related to one of his two schools (Mostar), he could not forbid me to write on the paper napkins. Thus, everybody had fun in their own way – including Culo, whose life is so difficult that he is having fun any time when he is not about to get a heart attack.

Round Table

I must express my compliments to Hebrang and Kostovic for their devotion to WACP: they stayed with us throughout the Congress, and in the end, they were answering mostly irrelevant questions at the round table for two hours. The questions were either self-contained or unanswerable, but the big shots kept answering seriously. I amused myself evaluating the extent and witticism of their avoiding the truth, and found Kostovic closely winning. Others, especially dentists, appreciated Hebrang more, so they ended up, for example, as far as discussing the development of health tourism in Croatia. Croatian health care must be facing great problems, since Hebrang openly asked our foreign colleagues for help – for now, in kidney transplantation, invasive cardiology, intervention neuroradiology, NMR, prevention of cardiovascular diseases, and health management. Nobody reacted, and everything would have ended well if D. Derežić had not suddenly decided to say something. He is in charge of Zagreb Medical School international collaboration, including the work with former graduates of the School. He speaks politely and with an intelligent expression, so that people are lured and begin to listen. But there is a catch – Derežić not only says nothing, but also makes such comparisons and uses such reasoning that everybody listening gets lost. So, we got lost.

Good-Bye

Partings are painful, so I tried to make this one as short as possible. Besides, Bosnjak, Culo and I were in a hurry, knowing that we would get lost on our way to Zagreb at least once because my opinion did not count, Bosnjak was from the USA, and Culo was showing the way. We missed my beloved highway once again, but this time we clearly saw the sign "closed". Bosnjak and Culo laughed at me again, but I did not care: they forgot that many people would learn to lecture in Croatian by the next WACP assembly. New times will open new roads.

Matko Marusic