In Memoriam

Frank Greenberg, M.D. 1948–1998

With great sadness I write to note the death of Dr. Frank Greenberg on July 3, 1998—one month before his 50th birthday—from an overwhelming infection. He was one of the most respected clinical geneticists of our time and made major contributions to the recognition and delineation of many genetic disorders. The consummate clinician-scholar, he was respected by patients and their families and admired and emulated by physician trainees and colleagues.

Frank was born in Perth Amboy, New Jersey on August 24, 1948. He received his B.A. in Zoology cum laude from the University of Michigan. After obtaining a Master’s degree from Rutgers Medical School, he obtained his Doctorate from the University of Pennsylvania. Frank completed his first 2 years of pediatric residency at the Children’s Hospital of Pittsburgh. His final year of pediatrics training was completed at St. Christopher’s Hospital for Children in Philadelphia, where he continued as a clinical genetics fellow for 2 years. He then moved to Atlanta, Georgia where he spent two years as an Epidemiological Intelligence Officer in the Birth Defects Branch at the Center for Disease Control and concurrently served as Clinical Assistant Professor of Pediatrics at Emory. Frank became an Assistant Professor at Baylor College of Medicine in 1981, where he spent most of his professional career until retiring because of a disability in 1994. In his retirement, he continued to contribute to medical genetics as a clinical consultant at the Diagnostic Development Branch of the National Center for Human Genome Research at the National Institutes of Health. He also continued to visit the Genetics Department at Baylor College of Medicine on a regular basis and provided insight and clinical acumen in the care of many patients.

Frank published over 100 original articles in clinical genetics, yet he is perhaps best known for his studies on contiguous gene syndromes. These include observations on the association between DiGeorge anomaly and chromosome abnormalities [Greenberg et al., 1984, 1986b, 1988] and the Miller-Dieker syndrome association with chromosome 17 alteration [Greenberg et al., 1986a]. He contributed substantially to the clinical delineation of Prader-Willi syndrome, del 15q12, Williams syndrome, del 7q11.23 [Greenberg and Lewis, 1988], and Smith-Magenis syndrome, del 17p11.2 [Greenberg et al., 1991, 1996]. He was also involved in maternal serum screening for congenital malformation syndromes [Schmidt et al., 1994] and served as the Director of the Prenatal Screening Program at Baylor College of Medicine. I was honored when Frank chose to do a sabbatical year in my laboratory in 1991 to 1992 to expand his involvement with molecular techniques and genotype-phenotype correlations. He was an important collaborator to many investigators, as he could integrate clinical genetics, cytogenetics, and molecular genetics to help elucidate the molecular bases of contiguous gene syndromes.

Frank was an integral part of the Baylor College of Medicine medical genetics training program for over a decade. He was responsible for training a substantial number of clinical geneticists who are now practicing throughout the United States. He introduced novel teaching methods, including the innovative use of the video camera to capture physical findings and minor anomalies of patients seen in genetics clinic and during in-patient genetics consultations. Frank was always an important presence and contributed in many ways to teaching and clinical conferences. He was instrumental in the formation of local and national parent support groups, and through his kindness and empathy, he affected the lives of innumerable families who will always remember Frank as a knowledgeable, resourceful, and compassionate physician. He spoke at the regional and national support group meetings and catalyzed research into the clinical manifestations, molecular mechanisms, and treatments of genetic syndromes.

Frank was an open and honest man, and this naturally extended beyond his personal life to his profes-
sional career. He embraced his individuality as he em-
braced the individuality of each of his patients. Per-
haps because of his own strong and loving family,
Frank was very self assured and challenged each of us
to accept each other based on merits rather than con-
formity. The impact of his professional life is imme-
asurable as he accepted his patients foremost as indi-
viduals, not only with needs to be met but with gifts to
share.

Frank imbibed life and his enthusiasm filled the
cups of his friends and colleagues. He loved to celebrate
with friends and food and always chose the most savory
meeting places to discuss the latest clinical advances of
genetic disorders. Frank had a passion for the opera, so
much so that despite illness, he traveled from Wash-
ington, D.C. to Houston so his reserved seats would not
be left vacant. He maintained a great sense of humor
even through the most difficult times of his life. Tragi-
cally, despite the best medical care for AIDS and the
unwaivering support, good wishes, and prayers of his
family, companion, friends, and professional col-
leagues, Frank is physically gone. But we can be cer-
tain that he lives on in the minds and hearts of his
patients and their families who were touched by his
caring hands, his students who learned from him more
than books can teach, and his colleagues around the
world who were stimulated by his knowledge and
ideas.

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J.R. Lupski*
Department of Molecular and Human Genetics
Baylor College of Medicine
Houston, Texas