

In memory of Mrs. Karen Zander, who created the clinical pathway and played  
a major role in its dissemination worldwide

Hidehisa Soejima MD. & PhD.  
Director, Japanese Society for Clinical Pathway

Immediately after the large typhoon in September, I read Karen's obituary. I had heard that she was ill, but sadly she passed away on August 30th.

Recalling the first general meeting of our society at the Komaba Eminence in 2000, it exceeded expectations, and the atmosphere was charged with enthusiasm. However, I don't remember much of the presentation Karen gave because, as person in charge of the meeting, I was running around or at another venue.

In 2001, we planned an overseas training in the US for the Society, which I participated in. I heard Karen's presentation on outcome-oriented pathways at North Shore Jewish Hospital in New York, and came back to Japan feeling that my eyes had been opened. Until then, pathways had been mainly used as schedules or for obtaining patient informed consent, and there was almost no process management perspective. When she had begun developing and using pathways in the 1980s, DRGs had started in the United States and medical efficiency was required.

The outcome-oriented pathway was an innovative idea in medical management using analysis of variance to improve the quality of medical care, but to understand the concept, an engineering perspective was required in addition to knowledge of nursing care. In the United States, at the time, there was almost no clarification or comparison of treatment details, and it was difficult to know what the doctor next to you was doing.

In addition, there was a strict hierarchy with doctors at the top, and there was a feeling that it was forbidden for non-doctors to be aware of treatment details, making it very difficult for pathways to spread. However, the medical safety required by patients and informed consent helped them to spread.

After the training in 2001, the Society had formed a close relationship with Karen. The last time I met her was in 2007 when the meeting of the European Pathway Association (EPA) was held in London. Karen and I made keynote speeches. Afterwards, at a dinner with the main members, Karen appeared to be dragging her legs, and when I asked her about it, she said that she would have surgery on her lower back after returning to the US. It seems that the surgery was not successful. In 2010, when I attended Medical Create's 10th anniversary party, I received a video of her, but she was lying down, so it seemed that her rehabilitation was not going well.

Karen was like an "American aunt" to me and was always smiling. We were good friends who could talk freely. The outcome-oriented pathway that she developed and helped introduce in Japan has evolved into a mechanism for efficiently collecting data in the form of an electronic clinical pathway. It has been widely adopted not only in Japan but also worldwide and it is no exaggeration to say that it has brought about a quiet revolution in medical care.

We would like to express our heartfelt gratitude to Karen for guiding us over such a long period of time and offer our deepest condolences.