Obituary

Priv.-Doz. Dr. med. Rainer B. Zotz

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Hamostaseologie 2023;43:146-148.



Fig. 1 Rainer B. Zotz (1956–2022). [rerif]

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It is with great sadness and deep grief that we received news about the sudden death of Priv.-Doz. Dr. Rainer Bernd Zotz (Fig. 1). He was torn out of life on September 26, 2022 by suffering from an acute illness. As his long-standing mentor and colleague, it is my sad duty to write this obituary.

Rainer Zotz was born in Koblenz on October 26, 1956 to a family of physicians. He received his medical education at the Johannes Gutenberg University in Mainz, where he graduated and earned his MD in 1983. His thesis on "Fluorescence serological detection of antinuclear antibodies for diagnosis and monitoring of rheumatic disorders" already revealed his special interest in laboratory analyses. Consequently, after his internship, Dr. Zotz undertook a residency in laboratory medicine at the Armed Forces Central Hospital in Koblenz. He completed his training in clinical chemistry and laboratory medicine (mentor: Prof. D. Paar) at the University Hospital in Essen and had a second residency in internal medicine (mentor: Prof. H. Goebell) followed by a fellowship in gastroenterology, again at the Essen University Hospital.

In 1994, Dr. Zotz moved to the Heinrich Heine University Medical Center in Düsseldorf and joined the Department of Hemostasis, Hemotherapy, and Transfusion Medicine. It marked the beginning of a close, more than 14 years lasting, collaboration between us. As a result of his qualification, strength, reliability, and high productivity, Dr. Zotz was

© 2023. Thieme. All rights reserved. Georg Thieme Verlag KG, Rüdigerstraße 14, 70469 Stuttgart, Germany DOI https://doi.org/ 10.1055/s-0043-1766091. ISSN 0720-9355. promoted to senior physician (1996) and scientific co-director (2000). In November 2004, he was appointed Privatdozent by the Faculty of Medicine of the Heinrich Heine University.

I had the privilege of working together with Dr. Zotz closely for almost one and a half decade. While I was initially an academic mentor to him, we soon became partners in sharing responsibility for patient care, supervision of fellows, research, administration, and management. Throughout, Dr. Zotz was a competent, conscientious, and decent man with a loyal character. Specifically, we shared our enthusiasm for basic and clinical research and strengthened our efforts to translate scientific progress into application and clinical practice.

For example, Dr. Zotz made substantial contributions in 1995, when, as one of the first blood donation centers worldwide, we implemented genomic screening for blood-borne pathogens such as human immunodeficiency virus (HIV), hepatitis B virus, hepatitis C virus (HCV), and cyto-megalovirus in routine diagnostic screening of blood donors, using nucleotide amplification techniques (NATs). Based on this pioneering work, the Federal Authorities in Germany subsequently required NAT testing for HCV (as of 1999) and HIV (as of 2004) on all donations prior to the release of therapeutic blood components. Without his support and expertise, it would have been impossible to realize the project in short time. Dr. Zotz was also actively involved in

establishing an interdisciplinary program designated hemostasis-guided hemotherapy. A hallmark of this concept is the synopsis of clinical and abnormal hemostatic findings, rigorously replacing conventional (empirical) indications for hemotherapy ("transfusion triggers") and closely monitoring its efficacy. He also provided significant support in the development and establishment of the Düsseldorf Thrombosis and Hemostasis Center, thereby integrating comprehensive hemophilia care. Based on his clinical experience and expertise, he made significant contributions so that this institution rapidly gained high reputation and became an expert and reference center which also served as a role model for others.

Thrombophilia was Rainer's main field of clinical research with a focus on the assessment of genetically determined coagulation and platelet receptor variants. He devoted particular attention to the role of hereditary thrombophilic risk factors in pregnancy-associated venous thromboembolism (VTE). Results of his long-lasting trial entitled "Prothrombin and factor V mutations in women with a history of thrombosis during pregnancy and the puerperium" were published with Rainer as senior author in *The New England Journal of Medicine* (2000; 342: 374–380), an achievement for which Rainer was awarded with the Alexander Schmidt Prize of the GTH in 2001 (Fig. 2). In another key paper, again under Rainer's senior authorship, the individual probability of



Fig. 2 Rainer B. Zotz receiving the Alexander Schmidt Award in 2001 presented by GTH Council Chair Professor Wolfgang Schramm (left).

gestational VTE associated with thrombophilia was evaluated (Blood 2016; 128: 2343-2349). These objectives were also in the focus of Rainer's habilitation thesis entitled "Molecular-epidemiologic studies on risk assessment in arterial and venous thrombophilia," summarizing his scientific achievements. Among his many skills, Rainer had a special expertise in biometrics. Our entire research group benefited much from his experience in this field. For several years, Rainer was co-principal investigator of a CRC grant (Sonderforschungsbereich 612). He published more than 105 articles, including 12 reviews and book chapters.

In 2008, Rainer moved into private practice and founded an integrated medical care center for hemostasis, thrombosis, and genetics. In doing so, Dr. Zotz and partners were extremely successful. They gradually expanded the center to a real consortium with eventually more than 20 locations. Despite his heavy daily workload, Dr. Zotz was a muchdemanded consultant and frequent speaker of educational

sessions and training courses (including the GTH Intensive Course on Hemostasis). He also served as a prominent member of the GTH working group on women's health.

In spite of his many achievements, Rainer remained modest and reserved. In fact, he was a man of rather silent but lasting tones, and he had a fine sense of humor combined with a special kind of joie de vivre. He loved haute cuisine and was an expert of Bordeaux wines. In particular, he enjoyed sharing a gourmet dinner with friends and colleagues. All these characteristics and personal qualities made him a charming person.

We extend sincere condolences to Rainer's family, including his four children and three grandchildren. For many of us in the field who had the privilege of knowing and working with him, and for the many patients who benefited from his care and dedication, the sentiment of a Hebrew proverb seems appropriate: "Say not in grief 'he is no more,' but live in thankfulness that he was."