



Lifeline



Valentina Garibotto, after training in Italy (Milan) and Germany (Jülich), now conducts clinical research at the Geneva University Hospitals in Switzerland, as leader of the neuroimaging and innovative molecular tracers laboratory. Her laboratory, in collaboration with international centres of excellence, uses molecular imaging to understand how Alzheimer's disease develops and to identify targets to stop or delay disease progression.

What has been the greatest achievement of your career?
Becoming a group leader. The challenges and opportunities of the work have changed a lot from what I did as a post-doctoral researcher. From one day to the next my goal is to establish a research programme that will host the achievements and ambitions and skills of my collaborators, with me in the background.

What inspires you?
On the one hand, the questions of patients and colleagues for which there are no answers yet, and on the other hand, the technical progress I witness in my field; bridging these two elements is a challenging and fun exercise.

What do you think is the most neglected field of science or medicine at the moment?
I sometimes have the feeling that the community could label as "impossible to solve", and thus neglect, complex multifactorial disorders associated with aging.

If you had not entered your current profession, what would you have liked to do?
I would have entered applied research in any case, but I would have liked working on a variety of topics: studying determinants of climate change, the origin of different languages, astronomy, you name it!

Who was your most influential teacher, and why?
My parents! My mother's profound sense of duty as a high school teacher and my father's enthusiasm for research as an image processing engineer are constant references in my professional life every day.

How would you improve the public's understanding of research?
With a movie in which individual stories are presented before and after a major breakthrough in research: for instance, giving birth before and after Semmelweis or getting pneumonia before and after Fleming. It should soon be possible to show how research is improving the life of people born with genetically determined conditions, and hopefully one day we will also be able to cure patients with Alzheimer's disease.

What one discovery or invention would most improve your life?
A time dilating device: to be used with moderation; but it would be fantastic if some days or some weeks could last longer than others.

Focal Point

Charcot's death masks

Jean-Martin Charcot brought landmark contributions to neurology, from the initial description of amyotrophic lateral sclerosis to those of the hereditary neuropathies.¹ He died of a lung oedema at the age of 67 years, on Aug 16, 1893, in an inn at the Lac des Settons (France). Charcot was there to rest after a gruelling period of work, accompanied by two of his students and friends, Isidore Straus and George Maurice Debove.²

The historian Dagobert Asmara told us that, according to the testimony of the scholar Joseph Bédier (1864–1938), shortly after Charcot's death, Debove thought of the making of a death mask. Since Roman times, death masks have been used to preserve the objective image of the face of the deceased. Their use was popular in Europe in the 18th and 19th centuries, but largely disappeared within the first half of the 20th century. Debove asked advice on creating a death mask to Paul Brouardel, the founding father of French forensic medicine, and also a student of Charcot. Brouardel is believed to have said to Debove, "if you just ask the others, they will naturally call Richer". Paul Richer was a professor of fine arts and a neurologist at the Salpêtrière Hospital. He had supported Charcot in his application to become a member of the Academy of Medicine in 1873. A suitable candidate had to have not only academic degrees and achievements, but also art or literature publications proving a humanist sensitivity, and Charcot had asked for Richer's help in writing two papers about the representation of grotesque and misshapen personalities. Debove was afraid that Richer would produce an embellished and idealised mask, not Charcot's real face. On the morning of Aug 19, as the body had just arrived to Charcot's home on Boulevard Saint-Germain in Paris,* Brouardel called on a young moulder, Charmet, who worked at the Institute of Forensic Medicine. Charmet drafted three masks, two with a golden patina for Debove and Straus, and one with an orangey patina for the Medical School, that was eventually displayed at the History of Medicine Museum. The mould was then broken and placed in Charcot's grave in the Montmartre Cemetery. The masks show Jean-Martin Charcot as he was: a puffy face, with scars and wrinkles, taciturn, and reserved. His rich personality possessed charismatic energy. Charcot had an incisive mind, was emotionally hypersensitive, and had great intuition.

Emmanuel Drouin, Yann Péréon

- 1 Goetz CG. Charcot: Past and present. *Rev Neurol (Paris)* 2017; **173**: 628–36.
- 2 Teive HAG, Marques P, Germiniani FMB, Walusinski O. Requiem for a neurologist: the funeral rites of Jean-Martin Charcot. *Arq Neuropsiquiatr* 2017; **75**: 827–29.

*Charcot's house is nowadays known as the House of Latin America, 217 boulevard Saint-Germain in Paris