I obtained my Ph.D. in Clinical Psychology from Teachers College, Columbia University, in 1957. I was not enthusiastic about a career in psychotherapy or diagnostics with psychiatric patients, but had enjoyed my rotation through neurology during my internship at the Bronx VA Medical Center. On the day I deposited copies of my doctoral dissertation with my mentor, Dr. Joel Davitz, he told me his cousin, Dr. Robert Katzman, had indicated that there was a fellowship open in the NIMH Interdisciplinary Program in the Nervous System in the Department of Neurology at Albert Einstein College of Medicine.

I first met Saul Korey when I interviewed for the post. He impressed me with his intelligence, energy, enthusiasm, and charisma. I eagerly accepted the fellowship when it was offered.

I was not disappointed. Part of Saul’s genius was identifying and attracting people committed to a career in multidisciplinary research. I soon met Herbert Vaughan, Isabelle Rapin, and Herman Buschke, all of whom were vitally interested in the interface between the nervous system and behavior. Vaughan and I established a laboratory on ward 4 West at Jacobi Hospital where we embarked on research in what was just coming to be known as clinical neuropsychology. We studied the organization of sensory, motor, and cognitive functions in patients with diffuse and localized neurological disorders. The interdisciplinary program brought in a series of guest lecturers with whom we could share our findings.

Vaughan started an evoked potential laboratory where we explored the relationship between behavior and electrophysiological events in normal subjects. The advice and stimulation provided by Josiah Macy, Jr. and Herbert Shimmel were invaluable in this work. I joined Isabelle Rapin in her research program on children with language disorders, wedding neurological and experimental psychological approaches to the understanding of their behavior. Neuropsychology is a multidisciplinary endeavor. I joined with others in the establishment of the International Neuropsychological Society, open to members of all disciplines, which now has almost 5,000 members.
Saul died in 1963, and his loss was a blow to all of us, but he had been with us long enough to strongly influence our professional development. His desire to see the whole picture became fused in my mind with the realization that neurological disorders have profound social consequences.

Consequently, I was pleased to foster the development of the University of Victoria’s Centre on Aging which brings together social scientists, lifespan developmental psychologists, neuropsychologists, and physicians. The Centre is now directed by my former student Professor Holly Tuokko.

For me, a further confirmation of the validity of Saul Korey’s approach to research involved my participation in the Canadian Study of Health and Aging. It is a nationwide study involving 18 university centres and 52 senior investigators including neurologists, neuropsychologists, gerontologists, geneticists, epidemiologists, and sociologists investigating the incidence, prevalence, risk factors, care-giver burdens, and course of dementia in an aged population of over 5,000 Canadians. Clearly Saul Korey’s conception of scientists of many disciplines working together to increase our understanding of the nature and consequences of neurological disorders has come to fruition.

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