The outpouring of grief that followed the shocking news that Bongani Mayosi had taken his own life reflects his stature as a giant of modern medicine in Africa and a beacon of hope in a period of turbulent transition. At the time of his untimely death at 51 years of age, Professor Mayosi was Dean of Health Sciences at the University of Cape Town (UCT), South Africa, having been Head of the Department of Medicine at UCT for the decade before that. He was known internationally as a transformative clinician scientist and cardiologist who was driving major advances in understanding the cardiovascular diseases that afflict the poor and disadvantaged in the global south.

Bongani Mayosi grew up in rural Transkei during the Apartheid era, one of 5 siblings and son of a district surgeon. He was home schooled by his mother, who instilled in him a love of learning and a remarkable sense of responsibility: to always help others, to lift as you rise. He qualified in medicine at the University of KwaZulu-Natal, taking a year out to do original research for a BMedSci, a first for that medical school. By his own account, he became hooked on discovering new knowledge. In 1998, after completion of registrar training as a physician, he won the prestigious Nuffield Medical Fellowship to study for a DPhil in the Department of Cardiovascular Medicine in Oxford. Already at that time, many believed that Bongani was destined to become a future leader of medicine in Africa; his supervisor (HW) felt some pressure but soon realized that he needn’t have...
worried. Bongani arrived in a whirlwind of benevolent energy, and everyone saw instantly that he had the intellect, rigor, drive, and people skills to accomplish all he set out to do. His first project, to define a novel gene for arrhythmogenic cardiomyopathy in a family that he had cared for, proved not to be tractable at the time (he later came back to it and finally cracked it last year). His tenacity and resilience became clear when he changed direction to work on the complex genetics underpinning cardiovascular risk factors, work that in fact set him up for what was to follow.

Bongani returned to Cape Town in 2001 to pursue his career as an clinical academic cardiologist at UCT and the historic Groote Schuur Hospital. In 2006, at only 38 years of age, he was the first black person to be appointed Chair and Head of the Department of Medicine at UCT. He set about to use his scientific acumen, and a natural authority born from his passion and vision, to bring colleagues together to tackle major, neglected cardiovascular diseases and to strengthen health systems on the continent. Although conventional academic wisdom would say focus, he set out instead to study rheumatic heart disease, tuberculosis pericarditis, heart failure, and cardiomyopathy, spurred on by the huge unmet medical need that he saw in his clinical practice. Similarly, from the start, he sought to extend his studies across Africa, drawing on support from many with whom he had trained who had, from the outset, seen something special in him, in particular that he saw solutions not obstacles. This is well illustrated by the IMPI trial (Investigation of the Management of Pericarditis) of steroids in tuberculosis pericarditis, aptly named for its meaning of a group of Zulu warriors. With the critical support of Salim Yusuf, Bongani and colleagues set up a network of recruiting sites across the continent, often in centers with no research track record, indeed countries with no research ethics framework or infrastructure, and all without external funding. The trial, published in the New England Journal of Medicine in 2014, changed practice and showed the way forward. Even larger registries and trials followed in rheumatic heart disease, cardiomyopathy, and heart failure. Appropriately, such success was marked with major honors and awards. Most notably, in 2009, Bongani was awarded South Africa’s highest honor, the Order of Mapungubwe, for services to medicine. Likewise, he received international recognition, including election to the US National Academy of Medicine in 2017.

As one of the truly internationally outstanding researchers of his generation in South Africa, it was inevitable, indeed long anticipated, that he would be asked to take on leadership roles. In the first instance, as Head of an already strong Department of Medicine, this was a great success, allowing him to develop as a truly visionary leader with a dedication to public service, academic excellence, and capacity building. The department thrived and grew in stature and influence, becoming the largest and most productive on the continent. He ensured that talent would meet with opportunity. In the words of one of his colleagues, he managed to make the department “a lot more black,” as it needed to be. Bongani coupled his heavy administrative load during his 10 years in this role with an undiminished energy and enthusiasm for science, successfully leading projects that others might have thought undeliverable. He made time for broader contributions to the cardiovascular community, not least his role as Associate Editor of Circulation, a task he carried out with conviction and outstanding perspective, all while accomplishing his numerous other responsibilities.

In 2016, Bongani was appointed Dean of the Faculty of Health Sciences at UCT. His appointment, unfortunately, coincided with a devastating time of student unrest at South African universities, including UCT, with the early days of his Deanship seeing him challenged by violent student protests over transformation of higher education institutions, tuition fees, and calls to decolonize the curriculum. This period included a 2-week occupation of his office by the students. As an unfailing supporter of the disadvantaged, but at the same time a holder of high administrative office with an unshakeable belief in the values of rigorous science and education, the conflicting pressures on him must have been extreme. With the benefit of hindsight, we know that he was profoundly hurt by the acrimony that followed, especially that directed at him by some of those he believed he was there to serve. The violence and aggression must have been an anathema to him and antithetical to all he stood for. At the same time, he had to contend with a growing voice of discontent from academic staff members who were critical of his leadership as Dean. Bongani had to take time off in 2016 and 2017. Although he returned to work, he struggled thereafter with depression, and he lost his usual confidence and optimism. In this period, he resigned twice but was persuaded to reconsider his decision; although a change in role was later offered, ultimately, he took the desperate decision to end his own life.

In his pursuit of excellence, Bongani inspired a generation. He was never daunted by a research challenge; scientific courage was a defining characteristic. He believed that research should be not just innovative but ground-breaking, and he demanded clinical impact. He argued that African scientists had to be trained to the best standard in the world to use their technical competence to apply to local needs to become world leaders on Africa’s problems. To this end, he secured funding for the remarkable “1000 PhDs in 10 Years” program. One of the most striking impressions from his funeral, attended by thou-
sands of mourners who remembered him with awe and love, was the abundant evidence of his commitment to bring others with him, nurture talent, and provide the sorts of opportunity from which he had benefited. He knew that to redress the harms done to his community in the Apartheid era, he had to be more than a role model, he had to work tirelessly to build capacity. We speak for many in saying that we are in awe of what Bongani achieved. His legacy is huge, and it will grow with those he mentored. If the future of medicine in Africa looks brighter, the important contributions he has made must be acknowledged.

Bongani Mayosi is survived by his wife and soul mate, Nonhlanhla Khumalo, a dermatology professor at UCT who shared his life’s work, and their inspirational and loving daughters.

ARTICLE INFORMATION
At Circulation, we have established a policy of not publishing In Memoriam. Here, we make an exception in light of the sudden, tragic loss of a valued member of our team of editors, Professor Bongani Mayosi. Already, we miss his considerable insights, boundless energy, dedication to scientific rigor, and high-voltage smile. Two of his closest colleagues, Professors Hugh Watkins and Ntobeko Ntusi, remind us of Bongani’s towering achievements and a world made better by his time with us.

—Joseph A. Hill, MD, PhD, Editor-in-Chief

Affiliation
Radcliffe Department of Medicine, University of Oxford, United Kingdom (H.W.). Department of Medicine, University of Cape Town, South Africa (N.N.).