

[Social Soles]

Interview by Kiley Fischer
with Introduction by Faith Bennett



did medical school in India and they came over to the United States for their residency training. At that point they were in their early 20s in the 1970s. They always tell me, and this may be an exaggeration, that they came over with \$20 and a trunk, but it's probably close to the truth. Within a year, my mom was pregnant with my oldest sister, doing residency, and then the following year was pregnant with my second sister. She somehow was able to do all of her pediatric training, take care of two kids, and be here all by themselves because they were the only ones here. They didn't come over with any family, they just came over to do their residency.

I think that now, I went through whatever training I went through, but that doesn't compare. I only had to take care of myself, she raised a family and was very successful to the point that she had her own practice, she had two other daughters. It was probably a very tough time for her, but she was able to make it through. Sometimes I think about what life was for her then and it makes everything that I went through seem par for the course.

SBM: Wow. That's amazing. Even sometimes just being in a new city, let alone somewhere completely different –

Dr. Viegas: A completely different country without family or a safety net and two brand new kids and a husband who's also training in his anesthesiology residency.

SBM: Your mom sounds incredible. What advice would you pass along to anyone, but maybe especially those thinking about what they want to do?

Dr. Viegas: I think – in whatever career you choose – you have to do something where you feel like it's rewarding and you feel satisfied as well. I know a few people who feel like they haven't lived up to their potential, and you always feel the most satisfaction when you find your potential, find that thing that you're good at and excel at it.♦



SBM: So it really runs in the family. Is that what prompted you to go into medicine?

Dr. Viegas: It is. There are a lot of doctors in my family. My mom is a pediatrician and my sister is a family practice physician. I have two other sisters, one is a lawyer in health law and my other sister works in a hospital in Indiana. I think we were all prompted by our parents. I wouldn't say my parents were pushing me to go to medical school by any means, but my mom was like the pediatrician in town.

I grew up in Indianapolis, Indiana in a town called Greenwood, Indiana, and I think every single one of my friends went to my mom as their pediatrician. She was always very dedicated, very hard working but was somehow still able to find a balance where she took care of us, took care of all of those kids, and took care of my dad. She cooked dinner every day, cleaned the house, she was pretty amazing.

Her dedication to the kids is really what drew me to even want to go to medical school. When I started medical school, I didn't really know that I wanted to be a surgeon at all. I thought I would just be a pediatrician, take over my mom's practice, and go from there. But when I was in medical school, I realized shortly, when I was doing my surgical clerkship, that surgery felt like home to me. In particular, my first surgical rotation was actually pediatric cardiothoracic surgery, which is where I ended up.

SBM: So it really stuck.

Dr. Viegas: It did. It made quite the impression.

SBM: That can't be easy, though, being in pediatrics and seeing kids in that kind of state.

Dr. Viegas: It's not. It can be very challenging, but it's extremely rewarding. Even in adult cardiac, patients are in extremis and you help them and there are a lot of positive results, but especially with the kids, they're born with these defects and there's great satisfaction in being able to fix some of these kids. There's some kids that fare a lot better than others, but still, we're able to make an impact and just help correct some of their defects and extend their life.

SBM: When we were looking for someone to focus on in February, in trying to find cardiac surgeons in Pittsburgh, you really jumped at me because everyone else, it seems is, male. (Dr. Viegas laughs.) That in and of itself is so cool, but what was that like when you decided that's what you wanted to do.

Dr. Viegas: To be quite honest, I'm very lucky. There aren't a lot of women that are cardiothoracic surgeons, but there are several who have already paved the way for me. When I went through my training, I never really felt like my gender made a difference in my training. I had amazing mentors all throughout my training – all throughout general surgery, all throughout cardiac surgery – so I never felt like gender was an issue. I actually trained with a lot of other female surgeons. When I was in general surgery, my co-resident was a female. When I was in cardiothoracic surgery, there was a year where all of the residents were all female

in Los Angeles. It was something to be very, very proud of for our program itself. In that regard, I think I'm very lucky.

It is strange to me. Someone has said that to me before that I'm the only female cardiac surgeon. To me it's almost mind-blowing a little bit because of everyone else I've worked with in my life.

SBM: It's cool to see such a boost of women in science. That has to be neat even for your patients to see, something to aspire to.

Dr. Viegas: Right. And I think it speaks volumes to the women that came before me and all of us out in training, how it has made the training process easier. That's not to say there weren't some challenges, that there don't continue to be some challenges. I can meet some patients and they don't necessarily look at me and think, "Oh, she's a cardiac surgeon." If I meet people out and about and say I'm a cardiac surgeon, people are taken aback a little bit. But once they get used to it, it's not a big deal at all. I think we've made a huge step as far as having women in cardiac surgery and women in medicine in general.

SBM: And you teach, too.

Dr. Viegas: It comes with the territory of an academic position. You teach residents and fellows who come through, and medical students who are interested in the field. Having medical students interested in the field is even more important now because our training programs have changed to a shorter, integrated program where they decide, "Oh, I want to go into cardiac surgery" right after medical school as opposed to going through general surgery residency and then deciding. It's definitely a paradigm shift and having them exposed as much as possible will only have them know if this is a career choice they want to make.

SBM: What have been the most rewarding things for you? I mean, obviously –

Dr. Viegas: Right! (laughs) Just making such an impact on a patient's life and their family's life. Like I said, some of these kids come to us in dire straits and being able to change their life in such a dramatic way is extremely rewarding. Some kids are born with a structurally normal heart, but their actual heart function is not normal. I remember a patient who not too long ago came in and was very sick to the point that his heart was no longer working. That transition from a very unfortunate experience to him surviving, having a heart transplant, and now being home with his family, that really makes all these years of training worth every second.

SBM: (awed) Wow.

Dr. Viegas: It's not just training, to be honest with you. There's a lot of mentorship involved. I was lucky to train with so many great people all over the country. The people I look up to the most are people that were integral to my training which includes Vaughn Starnes, Winfield Wells, Craig Baker, Victor Morell, Jose Pedro DeSilva. Having such strong role models has truly helped me be the surgeon that I want to be.

SBM: I know that your shoes can tell a million stories, but if you could walk in someone else's shoes, whose would you want to walk in?

Dr. Viegas: Honestly, I'd probably want to walk in my parents' shoes. They grew up in India and

The Social Soles interview series is based on the saying, "You don't really know someone until you have walked in her shoes." We thought it would be interesting to begin each interview asking our guest to bring a pair of shoes that are significant to her. They can be the ones she was wearing when she first stepped into her mother's pediatric practice; The ones she wore the day she decided she wanted to follow in her parents' footsteps; The pair she was wearing when she graduated from medical school; The pair she wore the first time she stepped into Children's Hospital of Pittsburgh of UPMC; A pair we would have never guessed... What shoes will she bring?

We associate shoes with memories: good and bad. The question steers the path of the conversation. This route will show us a side usually not seen in the one we are talking with. A more personal side. We are excited to see in which direction we are lead – by the choice in footwear and the memories stirred. Come. Let's take a confident and life-saving walk...

You've seen the stories of window washers dressed as super heroes and Pittsburgh's sports heroes visiting Children's Hospital of Pittsburgh of UPMC to raise the spirits of the children who are staying there – some for a checkup and others for extended and hopefully life-saving stays. The real heroes walk its halls on a daily basis and, in February, a month that revolves around hearts, we wanted to sit down with one of them. Dr. Melita Viegas is a pediatric cardiothoracic surgeon and assistant professor of cardiothoracic surgery for the University of Pittsburgh School of Medicine and knows more than just a little bit about compassion, care, and heart.

Social Butterfly Magazine: Tell me about the shoes you're sharing with us today.

Dr. Viegas: The shoes I have are probably like every other surgeon's, but they are Danskos and they're from when I first started my adult cardiac fellowship. To be where I am takes a lot of training. I started in medical school and then went onto general surgery residency, which is five years. After that, it's another three years of adult cardiac fellowship and then a year of just pediatric cardiac fellowship, so nine years after medical school.

I did my cardiac training at the University of Southern California in Los Angeles, so when I started, I bought those shoes. I've kept them with me all this time and they're kind of my backup shoes now. They reside in my locker at Children's in case I get called in and there's an emergency and I happen to be out and about.

They've stayed with me for quite a long time now.

SBM: They have to have seen so much with you then.

Dr. Viegas: Nope, They have. They've seen a lot of

long days, a lot of long nights, early mornings, greater than 30-hour work days, probably longer than 80-hour work weeks from time to time.

SBM: And a whole lot of care.

Dr. Viegas: Yes. (nods) Yes. I don't even know how many patients they've probably seen with me. They've seen a lot of blood, but they've seen a lot of patients get better, too, and a lot of rewarding experiences.

SBM: On that thought, if they could talk, what kind of stories would they tell?

Dr. Viegas: I think they would probably mostly talk about the long nights. My adult cardiac fellowship was quite busy, but it's exactly what you want for a training program. In order to do what we do, you need a lot of good mentors and a lot of good training and you want that experience. It's a blessing that they've seen so much stuff because each experience made me a better physician and a better surgeon.

They'd also probably remind me how much dedication it takes to do what all physicians do.

Perseverance, as well. We see some patients that fly through their surgeries, but there's those patients that struggle as well, and it's those patients that you tend to form an even tighter bond with. It becomes a lot of your life goal just to make them get through their experience in the most positive way possible.

SBM: You're talking about that and it just hit me just how much they've seen, especially with how long they've been with you. That's a lot.

Dr. Viegas: Yeah. These aren't the only shoes I've had through training, but they were definitely the first ones. I remember buying them. When I did my general surgery, I was in Illinois and I bought them right before I went to California. I wanted red ones because I'm a cardiac surgeon. I've had quite a few. I've actually gifted a few of my Danskos to my mom.

My mom is a pediatrician and she is also on her feet all the time. She never really knew about Danskos until I got into the surgery world and now she wears them too.