The incredible career of Henry H. Bohlman, MD, spanned over four decades at University Hospitals Case Medical Center. He was an innovator and pioneer, designing several techniques for the management of several spinal pathologies while advocating the anterior approach to the spine. Dr. Bohlman’s legacy is preserved in his fellows who have become leaders in spine surgery throughout the world.

Key words: anterior approach, Bohlman technique, Cleveland, Henry Bohlman, innovator, modified, pioneer, segmental instability, spinal surgery, spondylolisthesis, wine and spine.

Spine 2016;41:1628–1629

B orn on July 22, 1937, Henry H. Bohlman grew up in Baltimore, MD, moving to nearby Arnold, MD during his adolescence (Figure 1). Graduating from Washington and Lee University, he attended the University of Maryland School of Medicine. He completed his training in orthopaedic surgery at Johns Hopkins University where his father, Harold Ray Bohlman, was a professor. As an arthroplasty surgeon, Harold was one of the first investigators of Vitallium metal implants and antibiotic therapy in bone infection.1 Henry emulated his father’s dedication to research early in his training working as a fellow of the National Institutes of Health investigating fatal craniospinal injuries. Henry’s research on the cadaveric characteristics of injury to the craniospinal junction in fatal accidents spurred a lifetime of devotion to pathologies of the spine.2

During his career, Dr. Bohlman pioneered many spinal operative techniques used to this day. Among his more notable contributions involved improvements in the management of high-grade spondylolisthesis and fixation of segmental instability.3–5 Dr. Bohlman designed and taught the triple-wire fixation technique for stabilizing single or multilevel segmental instability, a technique that improved on a method previously described by William A. Rogers in 1942.6 In cases of high-grade spondylolisthesis, Dr. Bohlman wrote several seminal papers on the technique of posterior fusion and decompression with oblique interbody fusion.4,5 This would later be adapted to include pedicle screw stabilization, commonly referred to as the “modified Bohlman technique.”4,5,7 Additionally, Dr. Bohlman is widely recognized for his innovations in expanding the role of the anterior approach to spine surgery, fundamentally changing the treatment of pathologies throughout the spine.

After a 2-year stint in the US Air Force, Dr. Bohlman joined the Department of Orthopaedics at Case Western Reserve University and University Hospitals in Cleveland in 1972. He became an instructor and quickly rose to full professor in Orthopaedic Surgery, remaining on faculty during his entire career. Dr. Bohlman also served as the Chief of Acute Spinal Cord Injury Unit at the Cleveland VA Medical Center for 27 years. From 1988 to 1989, Dr. Bohlman served as the president of the Cervical Spine Research Society, of which he was a founding member. In 1994, he was elected as the President of the Federation of Spine Associations and made a national consultant for the US Air Force Surgeon General’s Office for Spine Surgery.

After decades of influential research and leadership, Dr. Bohlman was inducted into the Society of Scholars at Johns Hopkins in 2006. In their acknowledgment, Dr. Bohlman was revered as “a leader in the understanding and treatment of cervical spine pathology… [who] has written seminal works on the anatomy and biomechanics of those injuries.” The honoree announcement continued, “… virtually every leader in this field today trained at some point with Bohlman.”8 In that same year, he was awarded the Leon Wiltse Award from the North American Spine Society and in 2008, received the Nicolas Andry Award for Lifetime of
Achievements in Spine Surgery from the Association of Bone and Joint Surgeons. After his passing in 2010, Dr. Bohlman was awarded The University Hospitals Case Medical Center Distinguished Physician Award, the highest honor awarded by the hospital for achievement.

Dr. Bohlman’s impact on the field of spine surgery extended beyond his academic output of 121 peer-reviewed papers, 45 book chapters, 445 lectures, and 6 consulting editorial positions. His breadth of knowledge and contributions to the field cultivated one of the most coveted spine fellowships in the world. Henry took great interest in his fellows, educating them in not only in spine surgery but in the scholarly and ethical practice of medicine. As a great lover and collector of fine wines, part of his fellowship involved an education in oenology, taught at several memorable dinner parties. Upon completion of the fellowship, trainees gained admission to the prestigious Bohlman “Wine and Spine” society. As a testament to his mentorship, the funding of the Henry H. Bohlman MD Chair in Spine Surgery at University Hospitals Case Medical Center came from donations from his protégés who are current leaders in spine surgery at major medical centers throughout the world. Similarly, his colleagues from the Cervical Research Society named an education endowment fund in his honor. At the end of his career, Dr. Bohlman had personally trained 81 domestic and 35 international fellows, while influencing countless other surgeons throughout the world. Henry H. Bohlman, MD, was truly an innovator and leader who left an indelible mark on his friends, fellows, colleagues, and on the field of spine surgery.

References