

The IR Platypus

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Yesterday, I experienced a profound sense of melancholy, without a clear understanding of its cause. During a conversation with my esteemed Mexican colleague, Dr. Masao Yamamoto, the misfortunes of our work in Interventional Radiology (IR) became the topic of discussion. In a rather solemn manner, Dr. Yamamoto drew a parallel between IR and the peculiar platypus. With unwavering composure, he made the comparison without offering any further elucidation. Thus, I find myself contemplating the profundity of his words.

Interventional radiologists, by the very nature of our work, embody a unique subject of study. Despite carrying the official title of radiologists, we do not engage in the conventional tasks of interpreting X-rays, MRIs, or CT scans. Instead, our realm of practice aligns more closely with that of surgeons, yet we lack the comprehensive training and qualifications they possess. This peculiar dichotomy, akin to the platypus, sets us apart and evokes a sense of intrigue among other medical professionals. While some may regard us with admiration or fascination, our endeavors consistently reside within the realm of the extraordinary.

Regrettably, our professional identity remains an enigma to many. Colleagues often perceive us solely as experts in medical imaging, disregarding the fact that a substantial 80% of clinical diagnoses are made within the Radiology Department. Despite being doctors, doubts are

cast upon our status by those who fail to recognize the intricate complexity of our specialized field. (Fig. 1).

The words of Miguel Angel Asturias, [1] the esteemed Guatemalan anthropologist and writer, resonate deeply in this context. “Mirrors are like consciousness,” he observed. “One sees oneself as they are, and as they are not, for those who peer into the depths of the looking glass strive to conceal their flaws and present a more comfortable façade.” In the realm of interventional radiology, personal perception alone holds little weight. The validation and recognition we seek stem predominantly from the perceptions of our peers and the medical community at large. It is their acknowledgement that bestows upon us the privileges and esteem befitting our profession.

I cannot overlook the distinction between diagnostic radiology and interventional radiology. While the former has managed to transcend the derogatory notion of being merely “medical photographers” through perseverance and scholarly pursuits, the latter, owing to various reasons, has yet to garner the recognition and privileges it so rightly deserves. Perhaps, in retrospect, the comparison between our profession and the charming platypus was misguided. However, a recent discovery shared by Dr. Samantha Hopkins [2] from the University of Oregon offers some consolation. The platypus, a remarkable mammal, represents one of the few surviving descendants from an ancestor that diverged from other mammals a staggering 166 million years ago. Furthermore, it holds the distinction of having the least connection to the human species among all mammals. Such knowledge brings solace, as my previous concerns regarding sporting a duck-like beak and otter-like paws now seem trivial and inconsequential.

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Fig. 1 The platypus interventional radiologist

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Declarations

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2. Hopkins S. The evolution of fossoriality and the adaptive role of horns in the Mylagaulidae (Mammalia: Rodentia). *Proc Biol Sci.* 2005;272:1705–13.

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