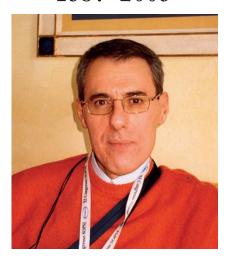
Franco Benazzi, MD 1957–2009



We are deeply saddened by the death of Franco Benazzi, MD, DTMH, PhD, which occurred on August 22, 2009. Franco was a unique individual, committed to clinical care and to his wishes to share his ideas about bipolar disorder. Franco was extremely devoted to his patients, most of whom suffered from bipolar disorder. What made Franco's scientific publications unique was that although he was a solo private practitioner in a small Italian community and did not have a full-time academic appointment, he still had as much impact as his colleagues from prestigious universities with large funding sources. Having no external funding, Franco had no "protected time" to conduct research. He had no need to publish to be promoted or to secure funding—only his wishes to communicate his ideas and benefit the field.

Franco's contributions were made possible by his systematically collected clinical observations of his own patients. He was mostly a solo researcher who single-handedly collected data, conducted statistical analyses, and wrote manuscripts without the support of a research staff. He was also a valuable collaborator who respected others' points of view, and even if he disagreed with a particular point, he was always willing to add value. The October and November issues of the *Journal* include 2 examples of Franco's thoughtful publications; one leading a group of collaborators from different institutions including myself (*JCP* 2009;70[10]:1424–1431) and the second as a single author (see pp 1514–1521).

Franco was a productive writer with over 300 publications, and he was an ISI Science Watch "most-cited author" in 2003. Among his major contributions to the bipolar disorder field were his ideas about and publications on the course and treatment of mixed bipolar depression. I had the privilege of collaborating with him in this area and feel very grateful for what he taught me. His observations were especially valued as they came from an experienced

clinician working in an ordinary outpatient private-practice clinical setting.

The son of a farmer, Franco came from humble beginnings and worked at various odd jobs before graduating from medical school. He was also a committed husband, and he had a fascination for European sports cars, especially BMWs. Franco will be greatly missed for his scientific contributions, but also, most importantly, for his warmth, good humor, and friendship.

Mauricio Tohen, MD, DrPH, MBA

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A brief bibliography of recent publications reveals some of the questions Dr Benazzi had been probing:

Dilsaver SC, Benazzi F, Oedegaard KJ, et al. Migraine headache in affectively ill Latino adults of Mexican American origin is associated with bipolarity. *Prim Care Companion J Clin Psychiatry*. In press.

Benazzi F, Berk M, Frye MA, et al. Olanzapine/fluoxetine combination for the treatment of mixed depression in bipolar I disorder: a post hoc analysis. J Clin Psychiatry. 2009;70(10):1424–1431.

Benazzi F, Akiskal H. The modified SCID Hypomania Module (SCID-Hbs): a detailed systematic phenomenologic probing. *J Affect Disord*. 2009;117(3):131–136.

Benazzi F. A prediction rule for diagnosing hypomania. Prog Neuropsychopharmacol Biol Psychiatry. 2009;33(2):317–322.

Benazzi F. Does hypomania distinguish bipolar II disorder from major depressive disorder? *Psychother Psychosom*. 2009;78(1):55–58.

Benazzi F. Classifying mood disorders by age-at-onset instead of polarity. Prog Neuropsychopharmacol Biol Psychiatry. 2009;33(1):86–93.

Benazzi F. Cyclothymic temperament: the impact of age. *Psychopathology*. 2009;42(3):165–169.

Benazzi F. A relationship between bipolar II disorder and borderline personality disorder? *Prog Neuropsychopharmacol Biol Psychiatry*. 2009;32(4):1022–1029.