1. You completed your high school education in Split. How much did reading Latin and Greek during that time influence your life?

Klasična Gimnazija Natko Nodiša was the only high school in Split offering students the possibility to study Latin and Greek. Given that I grew up in the shadow of Diocletian’s palace, not far from the ruins of ancient Salona, I found it challenging and intriguing. Thus, relatively early in my life, I became interested in antiquity and its civilizations. Reading the works of Greek and Roman philosophers, dramatists, and poets I became attracted by the written word and the art of the classic period. Reading the classics I became aware of the cultural differences. All this served as an introduction into the world of philosophy, theology, and science in the context of the history of our civilization. The study of the linguistic component of classic texts helped me appreciate the contents of other literary works of all cultures. At the same time, it stimulated my intellectual curiosity and fostered the love for the arts and literature. The book *Circe* by Madeline Miller is one of my favorite reads; the exhibition room containing the Parthenon freeze in the British Museum is my favorite meeting place. Early on in my life, I adopted the Latin dictum: *Nulla dies sine linea* (Don’t waste your day). In conclusion, the study of classic languages had a major influence and shaped my academic development.

2. After high school, you moved to Zagreb to study Medicine. Was it fun or just “so-so” or just awful and you do not want even to think about it at all? Did you have time for other extracurricular pursuits? How did you spend your summers?

For a youngster like me who came from the provinces, Zagreb was a promised city with its Austro-Hungarian architecture and the ambiance of a middle European town, art deco facades, plane and wild chestnut trees, trams gliding through the streets. Even the smell of basement coal holes was evocative. People spoke another dialect, containing many words of German origin and appeared more polite than what I was used to in Dalmatia. In the pastry shops, you could order chestnut puree and in the bars a banana frappe. I was mesmerized by the Stone Gate entrance to the Uptown and its narrow gas-lit streets full of old-time charm and history. I would visit the book store on the Cvjetni trg and gaze at the gorgeous art books eventually buying just the inexpensive paperbacks in Cyrillic. Over the weekend we went to the Theater ITD to see plays by Kafka or Stoppard or listened to the LPs of Arsen Dedić. All this was new and exciting. The song of Arsen Dedić ’Ne daj se Ines’ (“Don’t give up Ines”) was at the same time a reality and a poetry.

I rented a “maid’s room” in a large apartment opposite the Meštrović’s pavilion, colloquially known as the “mosque”. I still remember the noise and ringing of the trams passing in front of our house. The accommodation was very basic but was walking distance from the Medical School on Šalata and other places in the city where we had practical laboratory sessions. We survived by eating sandwiches on the park benches. Zagreb accepted me unreservedly and became my new home.

3. After graduation, which specialty was your first choice for further training? Did you consider an academic career?

In 1975 when I graduated from Medical School, for most students it was difficult to readily choose a specialty for post-graduate training. Thus I accepted an unpaid internship in the Department of Hematology at the ‘Sestre Milosrdnice’ Hospital. During that time I became interested in haematology diagnostics and in particular how microscopy can determine the treatment and the fate of patients.
I was fortunate that Dr. Znidarčić, who was in charge of the Cytology Laboratory, noticed my interest and invited me to apply to specialize in cytology. At that time, cytology was a new specialty and I think that I was really fortunate to get the opportunity to enroll in the postgraduate course of cytology (Figure 1).

The official roster of medical specialties in Yugoslavia, at the time cytology did not yet have the same status as other well-established disciplines of clinical medicine. However, this did not bother me and I continued my studies undeterred. Even though there was only one textbook of cytology, it was enough for me to fall in love with cells as they are seen through the microscope.

5. By enrolling in the cytology training programme did you actually know what you are getting yourself in for?

I thought I did. In the 1970ies Zagreb had a well-organized postgraduate cytology course. It was the only officially recognized cytology programme in entire Yugoslavia. As such it accepted postgraduate students from all parts of Yugoslavia, and thus it played a major role in training future cytologists for the entire region.

The course was well organized and included daily lectures and microscopy workshops. Since all the professors and many of us, students, worked during the morning hours in various hospitals, the lectures and laboratory sessions were scheduled for the afternoon and the evening hours. At the end of the 3 year-long postgraduate course we took the final exam and officially became certified Clinical Cytologists. By the time I left Croatia to move to London in 1981, there were 35 practicing Clinical Cytologists in Croatia.

6. How did it feel to be one of the pioneers of diagnostic clinical cytology in Croatia? How did you get your first job? How did your colleagues from other departments in the hospital treat you? Did you have to fight to get accepted?

Thank you for the compliment but the real pioneers of Croatian cytology were professors Hauptman, Črepinko, Ivić and docent Znidarčić, my mentors, who founded this specialty in Zagreb. Their contributions and reputation dwarf us who followed in their footsteps.

As a certified Clinical Cytologist, I continued working in the same Department where I started initially my postgraduate education. During the training period, I rotated through other medical centres and hospitals in Zagreb to expand my knowledge of different aspects of cytology and learn its role in clinical management of patients. I learned how to establish good working relationships and earn the trust and respect of colleagues. This is a slow and long process and continues until now. Many years later Gordon Conti, a well-known English cytologist told me: 'If you do not make a major error during the first two years, everything will be OK.'

8. How did you decide to move to the United Kingdom?

In retrospect, my decision to move to London was not a difficult one. The work in the hospital was interesting and I enjoyed it.
Nevertheless, the theories and my fascination with magic bone marrow cells were replaced by a repetitive daily routine, reduced to a ‘daily count to 500 cells’. Were they myeloblasts or myelocytes? The difference between life and death? Left to right, right to left, up and down—two bone marrow aspirates per day was my norm.

I loved my work and was not planning to leave Zagreb. However, once I met my future husband, I accepted this move as part of my life, a natural progression from one state of affairs to another, without great pathos, out of love (Figure 2).

Membership of the Royal College of Pathologists (MRC-Path). I passed that exam in 1988, 7 years after my arrival to the UK, while continuously working in my specialty. The specialty examination lasted 3 days and included both histopathology and cytopathology in a ratio of 4:1.

10. What was your first paying job in the UK? And what followed thereafter?

I was first employed in the UK as a Clinical Assistant in Cytopathology. This job designation applies in the UK to a fully trained foreign medical professionals who came to the UK to work but did not have adequate British qualifications. In order to qualify for an independent position that would enable me to work as a cytologist in the UK I had to be accepted in a British training programme and work as a trainee in histopathology and cytology under the guidelines outlined by the Royal College of Pathologists.

At one of the workshops of cytology, I chatted to the tutor about topics of common interest including cytology and apparently I impressed her favorably. A day later she called me up and suggested that I apply for the position of head-cytologist at the University College London. I protested, telling her that I still did not pass my MRCPath specialty examination, which was a prerequisite for that position. Despite the lack of formal qualification, after a rigorous interview in front of a panel of clinicians and pathologists, I was offered the position and thus became the head-cytologist at the University College London. I passed the required specialty examination two years later, at the same time as my trainees! Trained and fully qualified cytologists were rare at that time in the UK, and I was therefore very welcome! (Figure 3)

9. Once in London, did you have to recertify your diploma? Did they ask you to enroll in a British training programme, take all the exams, and then apply for another specialty certification?

Like Zagreb of my student days, London enchanted me as soon as I arrived there. I felt that it is a unique place, where I could live freely and realize most of my dreams. Open to newcomers, allowing them to immerse themselves in this magic melange of colors and cultures. It was the time of Beatles and Stones, Bob Dylan, and Leonard Cohen. All of us were Anglophiles. Wandering from one office to another, trying to make sense of the complexities of English bureaucracy I had the impression that each of us newcomers had a predetermined place in an official drawer, and it was only a matter of time before you found it which is yours. Even though the UK recognized my diploma from the Medical Faculty of Zagreb, I had to take the PLAB examination, and also enter the British postgraduate medical education system. Thus I had to spend 2 years studying histopathology to become eligible to sit for the specialty examination and admission to the Membership of the Royal College of Pathologists (MRC-Path). I passed that exam in 1988, 7 years after my arrival to the UK, while continuously working in my specialty. The specialty examination lasted 3 days and included both histopathology and cytopathology in a ratio of 4:1.
11. You are best known internationally for your cytology books. I see that your last book was published in 2020. How many books did you publish so far?

I have published 7 books. In the eighties, there were very few cytology textbooks and these were difficult to access. Trainees and even practicing pathologists interested in cytology were studying from journal articles, handouts and own lecture notes. Once I started work in a tertiary referral centre in London, which included teaching, I started thinking about writing a comprehensive textbook of cytology. This exercise also gave me the opportunity to share my personal experience accrued during many years in a centre of excellence with others.

12. What was the title of your first published book?

As luck would have it, the editors of the publishing house Churchill Livingstone asked me to write the second edition of the textbook 'Atlas of Diagnostic Cytopathology' by Chandra Grubb, a famous UK cytologist of that time. Dr. Grubb, who was by then retired, agreed, and thus I accepted the challenge (and the great honor) to rewrite her book as the sole author. Very soon, I realized that it would have been easier to start the project from scratch then to try and amend the existing text and images. The book contained a mixture of old and new that made it relevant to modern cytologists.

13. Was your first book an immediate success and did the publishers immediately offer you additional contracts to write more books of that kind? Or did you, as most writers do, end up writing one book proposal after another to get the publishers' attention?

The first edition of my Atlas was very popular. In part that was because in 1988 there were no other cytology books except for the American textbook of Leo Koss. The second edition was also sold out. I was satisfied seeing it being used by the trainees in the department.

Did the success of my first book stimulate me to continue writing books? Yes and no. My second book was in preparation for some time since I was collecting material over several years. However, the final impetus came from an editor who persuaded me to do it.

One of the Editors of my first book formed his own publishing company and asked me to write a book for them. I agreed due to my long-time interest in head and neck pathology, and the fact that I collected not only cytological, but also clinical images. The publication of the book coincided with the opening of the Centre for Cancer of Head and Neck at the University College Hospitals, London which was both fortuitous and satisfying. My books, even though they have different titles, all deal with the role of cytology in the clinical management of patients. Thus, ‘Essentials in Diagnostic Cytopathology’ was written for neophytes preparing for their specialty examination. ‘Diagnostic Cytopathology’, a book that I have dedicated to my mentors in Croatia and UK, includes contributions from experts in various aspects of cytology. It also contains the chapters on hematology and endometrium written by my Croatian colleagues Professor Ika Skelin Kardum and Professor Vesna Mahovlić from Zagreb. ‘Ultrasound FNA of the Head and Neck’, is the first book containing radiology and cytology images and data, supplemented with diagnostic algorithms for a systematic work-up of patients with head and neck lesions, and the critical role of cytology in that sequence. (Figure 4).

14. Worldcat data (https://www.worldcat.org/identities/lccn-nr97012834/) indicate that some of your books have been very popular, and they list your book Fine Needle Aspiration Cytology as having had 20 editions. Cytopathology of Head and Neck had 12 editions. Atlas of Diagnostic Cytopathology had 10 editions. How did you write such best-sellers? Do you have any “how-to” suggestions for other medical writers? Could you give us your secrets for this success?

I did not know about the statistics that you quote but am pleased to learn that my books are being used in impressive numbers. Such data reflect the interest of our colleagues and their commitment to continuous education worldwide.

How to write? I do not have a formula, but ‘with honesty and sincerity’ would be the closest. Most readers expect the authors to be writing from their own experience rather than lecturing. The written text should reflect one’s own thinking including tribulations of daily cytologic practice. The book ‘FNA Cytology: Principles and Dilemmas’, published by Springer, reflects just that, guidelines as well as quandaries. To admit that one is facing dilemmas is part of the honesty and sincerity that the readers expect. In the last chapter of that book I also made a reference to personal experience as an expert witness in medicolegal cases where I discussed a few cases of professional negligence as lessons how to avoid them.

15. Your books have contributed to the widespread use of Fine Needle Aspiration cytology, and the wider application of that diagnostic technique. Would it be fair to say that you were at the right place, at the right time and had the know-how for implementing some of your ideas? Or is it something that even you do not fully understand. To quote Henry James “We work in the dark - we do what we can - we give what we have. Our doubt is our passion and our passion is our task. The rest is the madness of art”? There is no doubt that you were ‘mad about your art’, but how did you manage to translate your passion for aspiration cytology into written words and books that would be read worldwide?

My contribution to the development of cytology reflected the time and place where I worked at a given moment. I was lucky to have received my basic education in Croatia, a country in which, in the 1970-ies, the FNA cytology practice was much more advanced than in the UK. Later on, my books contributed to the wider practice of cytology in the UK, and showed that the best results are obtained when the cytologists collaborate with other members of the diagnostic team, i.e. surgeons, radiologists and pathologists.
16. Did you ever think of your legacy? What would you like to be remembered for?

I am still active and do not think about my legacy, whatever it might be eventually. (Figure 7). The professional part of our lives is just one facet of many that we live in parallel and perhaps not the most important. I would like to be remembered that I lived my life honestly and intensely, never waiting a moment, never bored or tired of it. My books were just part of this philosophy: Exegi monumentum aere patrentius...

17. With all those books to your credit, you apparently found time for some commendable social activities. Among others you are the president of Almae Matris Alumni Croaticae-UK (AMAC-UK) that promotes friendship scientific exchange between your country of origin and your present domicile. You also made a memorable public presentation in the Jubilee Room of the House of Commons about Croatia. Would you like to comment? Maybe we can electronically attach a copy of your presentation to this interview?

AMAC-UK is a charitable society of former Croatian university students who live and work in the UK. The members of the elected Council meet on a regular basis during each academic year and raise funds for the annual awards given to deserving young Croatian scientists in order to facilitate scientific collaboration between UK and Croatia and promote scientific and cultural interaction between the universities in our two countries. Applications for these awards are publicised all over Croatia to attract the best candidates.

18. Final question: What does Croatia mean to you? With images of Split, Zagreb that, I am sure, appear occasionally in front of your closed eyes; and your dream house on the shores of the Adriatic south of Dubrovnik, I imagine Croatia means more than you would be able to say in a sentence or two. But, please try; for sake of those youngsters who are currently sitting in the classrooms of the Medical School on Šalata and will be one day reading these lines trying to learn something from your experience. And maybe even find some inspiration. THANK YOU.

My definition of the Croatian word domovina (translated into English as homeland or motherland or fatherland, Latin patria) does not include my actual birth-place nor my domicile where I currently live. It is a place where I received my schooling and where I have friends who understand my language without additional explanations; where I belong without having to stand out; where I am recognized by my gestures and dialect; where I share a sense of humour; where I eat bakalar na lešo; where I feel dizzy upon seeing the Adriatic sea again ….

I short, my homeland is a place to which I am attached emotionally. I dream about it even if those dreams don’t exist. Domovina provides a safe haven, a hideaway, a shelter and a refuge, a place where I belong (Figure 8).

For our younger colleagues who are still studying medicine, here are a few words of encouragement. First of all I envy you. Your entire life is in front of you and you can shape it as you wish; instill into it as much sense and purpose; direct it wherever you want to go. Second, you are lucky to have chosen a profession that is recognized and respected worldwide and where ever you practice it you will do well and experience internal satisfaction, even if all else fails.

If I were in your position now, would I leave Zagreb and Croatia as I did some 40 years ago and abandon my homeland which
today offers a free, modern European life style? I am not sure I would... Even in the communist 1970-ies my departure was not for political or scientific reasons or because I was restless and wanted to see the rest of the world. My main reason was...love. With a bag full of passion and love you can surmount all difficulties, conquer all adversities and rule the world. Love conquers everything, or in Latin, to quote Vergil: Amor omnia vincit. 'Love it or leave it'.

Figure 8. View from the balcony of my house in Cavtat, 2021.