This eminent Full Professor of Internal Medicine and pioneer in specific treatment for Chagas disease has been considered one of the more important figures in the recent history of American trypanosomiasis. Very early on, Carlos Chagas and other eminent researchers, such as Villela, Mazza, Dias, Romaña, Botafogo, Muniz and Pakchanian, worked with dedication to face the challenge of developing a specific treatment; however, their results were consistently discouraging. A wide variety of drugs and treatment schedules were tested and all were repeatedly ineffective. Thus, until the 1960s, the treatment of human Chagas disease (HCD) was understood as almost unmentionable and unattainable subject. At that time, Cançado became more and more preoccupied with the high prevalence of chronic HCD in the hospitals of Belo Horizonte and with the continuous detection of acute cases in Minas Gerais, both situations induced very strong motivation concerning the disclosure of this disease, its specific treatment and medical management. Simultaneously, another emblematic name in Chagas Disease research, Zigman Brener, was implementing a brilliant study in experimental chemotherapy, showing the effectiveness of certain nitroimidazole compounds in acute and chronic infected mice.

The first trials in human cases were conducted in Argentina (Cerisola, Rowheder, Bocca Tourres) and Brazil (Ferreira, Rassi, Cançado), with optimistic results reported primarily in acute cases. Nevertheless, Cançado insisted on treating chronic patients, because of their major epidemiological importance in all endemic regions. Treating dozens of patients with Brener’s long-term proposal/protocol, its effectiveness in resolving acute disease and as an important suppressive action in chronic individuals (determined by serial xenodiagnosis) were unquestionably proven, leaving the ongoing problem of cure assessment in chronic individuals in whom conventional serology continued to be positive for several years. Some of Cançado’s important scientific characteristics were his deep sense of logic and a tremendous patience to explore all the aspects and possibilities of his ideas. The action of nifurtimox and benznidazole against various strains of Trypanosoma cruzi had been established for both blood and tissue forms, but the persistence of conventional antibodies in chronic treated patients remained a reason for the scientist’s discouragement, since it indicated therapeutic failure. During this period, Cançado had always been very resolute and restrictive: the only accepted cure marker for him was total and permanent serology conversion from positive to negative results. The permanence of positive results following treatment could only be explained by drug failure or by the long-term persistence of prior formed antibodies. Both possibilities were considered by Cançado, for whom serum serial negative results of xenodiagnosis at least indicated an important suppression of the parasite. Some years later, Sonia Andrade and others studied results following treatment could only be explained by drug failure or by the long-term persistence of prior formed antibodies. Both possibilities were considered by Cançado, for whom serum serial negative results of xenodiagnosis at least indicated an important suppression of the parasite. Some years later, Sonia Andrade and others studied results following treatment could only be explained by drug failure or by the long-term persistence of prior formed antibodies. Both possibilities were considered by Cançado, for whom serum serial negative results of xenodiagnosis at least indicated an important suppression of the parasite. Some years later, Sonia Andrade and others studied...