

P.F. BARTLEY

Dr Peter Franklin Bartley, Consultant Respiratory Physician: b. 9.4.1919; d. 17.1.1997. MBChB Otago NZ 1944, MRACP 1948, MRCP (Edin & Lond) 1950, FRACP 1985, FRCP Lond 1974, FRCP Edin 1977.

Peter Bartley was born in New Plymouth, New Zealand and moved with his family to Auckland in 1922. After graduating he was in active service in the Middle East and Japan. After demobilisation he did some of his training in the Brompton Hospital and subsequently returned to Auckland where he spent the bulk of his professional career as Head of the Chest Department at Green Lane Hospital. He was an exceptional teacher with a fine clinical acumen and trained a generation of chest physicians in New Zealand.

A.T. COOK

Dr Arthur Thompson Cook, Physician: b. 21.10.1923; d. 10.12.2000. MBBS Lond 1946, FRCP Edin 1965, FRCP Lond 1975.

Arthur Thompson was born in Kiating (Szechwan), China. He held house appointments at London hospitals before starting his military medical career at the British Military Hospital (BMH) in Suez as a trainee. He became Specialist in Medicine in 1949 and Consultant at the BMH in Iserlohn in 1961 and reached the rank of Major General.

T.C. HINDSON

Dr Thomas Colin Hindson, Consultant Dermatologist: b. 1.8.1934; d. 9.9.2001. MB BChir Cantab 1959, FRCP Edin 1975, FRCP Lond 1987.

Thomas Hindson was born in Newcastle upon Tyne. After several years as medical officer at British military hospitals (BMH) he was appointed an honorary research assistant at St John's Hospital for Skin Diseases in London. In 1965 he was appointed Senior Specialist in Dermatology at Rinteln BMH and two years later took the post of Consultant in Dermatology at Singapore BMH. In 1971 he became the Consultant Adviser in Dermatology to the Ministry of Defence. After his retirement from the army Dr Hindson worked as Consultant Dermatologist at Sunderland Royal Infirmary.

N.K. PEIN

Dr Nathaniel Kemsley Pein, Consultant Physician: b. 12.4.1921; d. 26.6.2001. MB Witwatersrand 1945, FRCP Edin 1971.

Nathaniel Pein worked as a house physician and registrar at various British hospitals before emigrating to South Africa in 1955. He took up the appointments of Head of the Department of Medicine at Grey's Hospital in

Pietermaritzburg and Consultant Physician to the South African Railways and Harbours in the Natal Inland Area. He also ran a private practice as a Consultant Physician in Pietermaritzburg.

K.M. CHALMERS

Dr Kenneth Moir Chalmers, Consultant physician: b. 18.2.1921; d. 3.1.2002. MB ChB Edinburgh 1943, FRCP Edin 1970, FRCP Lond 1972.

Kenneth Moir Chalmers was born in Ajmer, India, the son of a medical missionary and part of an extensive Scottish medical dynasty. His family returned to Inverness in 1927 and he was educated there and at the Edinburgh Academy before going on to the Edinburgh Medical School in 1938 where he met Mary Evans whom he married and who later became a highly respected Consultant Anaesthetist. His brother John became a distinguished Edinburgh Orthopaedic surgeon.

He graduated from the wartime fast stream in January 1943 and was houseman and then registrar to Stanley Davidson before returning to Inverness as registrar. From 1945 to 1947 he served in the RAMC and in 1948 became senior registrar to the Dundee Chest Clinic.

In 1951, at the age of 29, he was appointed Consultant Chest Physician to the hospitals of Stockton, Sedgefield and Hartlepool, covering a population of 350,000. In his early days he had been a keen advocate for out patient antituberculous chemotherapy and faced strong local resistance at first, but not for long, for Ken – a gentleman, a gentleman, a smooth charmer – commanded enormous respect amongst both his colleagues and his patients. In innumerable ways he showed kindness, support and encouragement to his trainees and to his younger consultant colleagues.

Ken had a dry sense of humour and always wore red socks, except to funerals. He was keenly interested in sport and on Teesside mixed business with pleasure as medical officer to the local racecourses.

He and Mary were great entertainers and they enjoyed looking after our College Presidents when they came down for the Stockton Symposia, and many will remember their splendid parties at Field house the night before the meetings.

His retirement was sadly marred by illness but they still managed to spend a significant part of it at their other home in Menton where he loved to swim in the sea.

Kenneth is survived by Mary, two daughters and a son.

DC & RS

R.N. CHAUDHURI

Dr Rabindra Nath Chaudhuri, Professor of Tropical Medicine: b. 2.1901; d. 8.1981. MB Calcutta 1925, FRCP Edin 1957.

Rabindra Chaudhuri held house appointments in Calcutta before becoming Assistant Professor at Calcutta School of Tropical Medicine in 1934. He was appointed Professor in 1947 and Director of the School in 1950. He also acted as Visiting Physician at Carmichael Hospital for Tropical Diseases in Calcutta.

J.R. CLARK

Dr James Robert Clark, Consultant Physician: b. 29.7.1918; d. 20.12.2001. MB ChB Edinburgh 1941, FRCP Edin 1962.

James Clark was born in Edinburgh. After two years as Resident at the Southern General Hospital, Glasgow, Dr Clark became Clinical Assistant at Edinburgh Royal Infirmary and in 1950 was appointed Senior Registrar. He moved to Peel Hospital in Galashiels in 1952 where he was appointed Consultant Physician in 1960.

B.H. GIBB

Dr Bryan Harold Gibb, Cardiologist: b. 16.8.1930; d. 31.10.2001. MB Cape Town 1953, FRCP Edin 1971, FRCPSG 1985.

Bryan Gibb was born in Cape Town. After graduation he held house appointments at King Edward VIII Hospital in Durban and then came to the UK where he worked at Neasden Hospital in London as Registrar in Infectious Diseases. In 1961 he became Research Fellow in Cardiology at Glasgow University and Senior Registrar at the Western Infirmary, Glasgow. Dr Gibb returned to South Africa and was appointed Senior Lecturer at Natal University and Physician at the Cardiothoracic Unit at Wentworth Hospital in Durban. He was also Cardiologist at Grey's Hospital and Edendale Hospital in Pietermaritzburg.

E.F. SCOWEN

Sir Eric Frank Scowen, Professor of Medicine: b. 22.4.1910; d. 23.11.2001. MBBS Lond 1932, FRCP Lond 1941, FRCP Edin 1965, Kt 1973.

Eric Scowen was born in London and trained there at St Bartholomew's Hospital (St Bart's). He became Chief Assistant at the Royal Chest Hospital and then returned to St Barts in 1937 as Assistant Physician being appointed Physician in 1945. He was appointed Professor of Medicine at St Bart's in 1961. Eric Scowen enjoyed an illustrious career that included 50 years on the staff of St Bart's and lengthy distinguished chairmanships of the

Council of the Imperial Cancer Research Fund (ICRF) and the Committee on Safety of Drugs (latterly to become the Committee on Safety of Medicines). Through the ICRF he promoted the establishment of a number of Chairs of Medical Oncology outside London (including the chair at the Western General Hospital, Edinburgh). Among the many honours bestowed upon him were elections to Fellowships of the Royal College of Surgeons of England, the Royal College of Pathologists and the Royal College of General Practitioners. He was knighted in 1973.

DAME SHEILA SHERLOCK – AN APPRECIATION

Dame Sheila Sherlock, Professor of Medicine and Clinical Scientist: b. 31.3.1918; d. 30.12.2001. MB Edin 1941, MD 1945, FRCP Lond 1951, FRCP Edin 1958, Hon FRCP Irl, Hon FRCPS Glasg.

Sheila Sherlock was for many decades the world's leader in the study of liver disorders. Together with her life-long friend, the late Hans Popper, she was a pioneer in modern clinical and scientific studies on the liver. The start of hepatology as a discipline probably dates from the creation of the International Association for the Study of the Liver, of which she was a founder member and its first president. Her dominance was achieved by a combination of an exceptional intellect, a remarkable memory, an uncanny ability to anticipate where the next advances were to be made, and a clarity of communication be it by writing, lecturing or in the sharp interchanges of panel discussions.

Sheila Patricia Violet Sherlock was born in 1918 in Dublin, educated at Folkstone Grammar School, and studied medicine at the University of Edinburgh (having been rejected by a number of colleges in the south). She graduated in 1941 and, as the top student in her year, was awarded the prestigious Ettles scholarship, at that time only the second woman to have received this prize. Unusually in the male-dominated surgical environment of Edinburgh, she was appointed to an assistant lectureship in the Department of Surgery of Professor Sir James Learmonth, her mentor, and with whom she wrote her first medical paper. On his recommendation she approached Professor Sir John McMichael, Head of the Department of Medicine at the Hammersmith Hospital and Postgraduate Medical School, who appointed her as his House Physician.

Thereafter her progress up the medical ladder was meteoric and this at a time when women in academic medicine were unusual and much discriminated against. In 1945 she was awarded a Gold Medal for her MD thesis. She held a Medical Research Council Fellowship, a Beit Memorial Research Fellowship and a Rockefeller Travelling Fellowship at Yale University (1947–8). On her return she was appointed Consultant Physician and lecturer at the Postgraduate Medical School. In 1951, at

the age of 33, she became by far the youngest woman to be elected to the Fellowship of the Royal College of Physicians of London. She was the first Professor of Medicine at the Royal Free Hospital and Medical School, holding the chair from 1959 until her retirement in 1983.

Sherlock's work in hepatology was broad-based, spanning the clinical, pathological and basic aspects of the discipline. She pioneered the use of percutaneous liver biopsy as a result of which she published, in 1943, her first important paper which established that acute hepatitis (not yet known to be of viral origin) was an inflammation of the liver parenchyma and not obstruction of the bile ducts by mucus ('catarrhal jaundice'). She was the first to describe the association between hepatitis B virus and primary liver cancer. She was one of the first to recognise the importance of immunological mechanisms in the pathogenesis of hepatitis and cirrhosis, and with Deborah Doniach helped create the serological tests used to diagnose primary biliary cirrhosis. For many years her department led the world in the study of portal venous haemodynamics. She appreciated the importance of having a close link with a dedicated pathologist and together with Professor Peter Scheuer she made significant contributions to our understanding of hepatitis, cirrhosis and cholestasis.

During her career she published more than 600 papers in scientific journals. In 1990 she was listed among the world's ten most cited women scientists of the previous decade. Perhaps more than anything it was her textbook *Diseases of the Liver and Biliary System*, first published in 1955, that made her a household name in medicine throughout the world.

When Sherlock arrived at the Royal Free Hospital it was regarded as being in the second tier of London teaching hospitals. Together with the late Francis Gardner, the then Dean of the School, she helped elevate the Royal Free (now the Royal Free and University College Medical School) to become one of London's leading medical schools. Their styles were totally different. Sherlock was quick, impulsive, perceptive and aggressive; Gardner was tough, shrewd, deliberate and most effective. The two often clashed but they were united in a common aim to make the Royal Free a top-ranking medical school. Ward rounds, usually attended by a cluster of ambitious postgraduates, could be difficult and stressful, and one of my tasks as senior lecturer and then reader was to support young, newly qualified house physicians who found the baptism of fire a little too warm. Her Wednesday afternoon postgraduate rounds were legendary, always informative, usually demanding and occasionally intimidating. Old colleagues still recall being challenged by Sherlock with awe.

She was the recipient of numerous awards, prizes and honorary degrees. In 1972 she was President of the

British Society of Gastroenterology; she was particularly proud of her DBE (1978) and her election as a Fellow of the Royal Society in 2000.

After she retired from the chair of medicine she continued to direct research, write and travel the world lecturing and participating in meetings. The eleventh edition of her textbook (co-authored with Dr James Dooley since 1993) was published in 2001. Did she ever retire? In 1998, when she turned 80, I wrote an appreciation of her career in which I wished her well in her retirement. Shortly after its publication I met Sherlock whose first words were 'lan, I want you to know that I am not retired.'

For all her fame, Sherlock was a modest person who had a genuine interest in furthering the careers of her staff. She had a keen interest in cricket and played an excellent game of tennis. The annual unit tennis championship was an intensely competitive affair. She was married to the physician D. Geriant James who was a significant and much appreciated support throughout her career. He survives her, as do her two daughters, Amanda and Auriole.

IADB

W. LINDSAY LAMB

William Lindsay Lamb, Physician: b. 10.11.1903; d. 25.11.2001. MB ChB Edinburgh 1926, FRCP Edin 1932.

Dr Lindsay Lamb was born in India where his father was in the Indian Medical Service. He was educated at the Edinburgh Academy and Fettes College. He qualified in medicine with honours at Edinburgh University in 1926 and entered general practice in Aberdeen. He passed the Membership examination of the Royal College of Physicians of Edinburgh in 1928.

He was successful in his application for the post of Assistant Physician to the Royal Infirmary in 1936. Thus began an association with Sir Derrick Dunlop in Wards 23/24 which became an enduring friendship between two very different personalities each recognising the sterling qualities of the other. Sir Derrick said about Lindsay – 'Most men as you get to know them have feet of clay but Lindsay has feet of gold. I never thought I would love a man so much whose sense of humour was so different to my own.'

During the War Lindsay served in the Royal Army Medical Corps. He had a hair-raising escape at the evacuation of Crete. The Royal Navy landed him at Alexandria with nothing but the dishevelled battledress in which he stood, and he was refused admission to the Officers' Club for being improperly dressed. He was returned to the UK by a devious route and after Normandy he came back to Edinburgh and the Royal Infirmary where he impressed the students by teaching at the bedside in battledress with the rank of Lt. Colonel.

After the War he had charge of beds in Chalmers Hospital from 1950–61 (in addition to his part-time commitment to the Royal). Moreover he paid a weekly visit to the Princess Margaret Rose Orthopaedic Hospital. He was the Chief Medical Officer of the Scottish Provident Institution, Medical Officer at Fettes and a Governor of the school for many years. He was in demand in private practice but in later years he passed work on to others because of his hospital duties.

From 1962 to his retirement in 1969 he was Physician-in-charge of Wards 32/33. He said this was the happiest time of his life in medicine, but could say also that he had never been unhappy in any of his posts. He stated often that he had been very fortunate in those with whom he had worked. This self effacing reference to others was typical of him, whereas it was remarkable how many bright young doctors and students wanted to work in Wards 32/33 while Lindsay was in charge. Many became Consultant Physicians and owe much to his example of a very high standard of medical practice. He created an efficient unit where common sense and courtesy were the order of the day. All who worked under him, nurses, secretaries, ward maids, consultants, registrars, house officers, and especially patients, appreciated his genuine interest in their welfare. He saw patients daily including Saturdays and Sundays, and insisted on prompt discharge letters to GPs which he wrote himself. He could not abide unpunctuality and was always early for his own appointments.

It was a measure of the respect for him as a good doctor that many colleagues and their families consulted him. They knew that they would have a thorough assessment of history, a careful physical examination and wise and practical advice. He had the 'holistic' approach long before it became fashionable to use the term.

He complained that he could not keep pace with modern medicine, but he was never too proud to seek the help of a younger doctor with specialised knowledge. He was a great supporter of the young and exercised a steady influence on youthful enthusiasm, stressing that modern investigations and treatments were not always in the best interests of the individual patient.

He was an effective writer of letters. In 1958 *The Scotsman* published correspondence in which he drew attention to the problems in the Royal Infirmary of overcrowding, shortage of nurses, long stay elderly patients and underfunding. Thereafter he persuaded his MP to raise the matter in the House of Commons. A further analysis of the shortcomings of the NHS was published in *The Scotsman* in 1975, six years after his retirement, when he accused the Government again of underfunding and mismanagement. This clarity of mind and his memory remained with him to the end.

He was a man 'in whom there is no guile'. His forthright honesty led him unerringly towards the truth whether it was bedside diagnosis, undergraduate teaching, advice to colleagues, or on the Board of Management of the Royal and other committees where his thoughtful criticism was most feared. He is remembered as a fine physician of innate goodness and fearless integrity, with an aura of warmth about him which endeared him to his friends and colleagues. He married Jean Leith-Ross in 1938. After the War they made a lovely home and garden in Ravelston Dykes where old friends were always welcome. They lived there until last year when they had to give it up because of ill health. His wife survives him with two daughters, six grandchildren, and six great grandchildren.

The Editor welcomes contributions to the Obituaries section, either self-written or written by relatives and friends. Please keep contributions concise, limiting pieces to 200–400 words.