# **OBITUARIES**

# **Max Harry Weil**

Founded the specialty of critical care medicine

As Max Harry Weil rushed into his office to interview a waiting fellowship candidate, he looked more like an overworked intern than a renowned medical researcher. It was 1972, and Weil was head of the Center for the Critically Ill at the University of Southern California (USC) in Los Angeles, and founding president and driving force of the newly formed Society of Critical Care Medicine.

The waiting fellowship candidate, Arnold Aberman, recalled, "He bounded in full of energy and dressed in green scrubs and told me he had just intubated a patient. Heads usually wore suits and spent time in their offices and let the juniors do the work. This was a good sign: he was not your usual professor."

And Weil's centre was not your typical university affiliated research centre. Instead of being located at a major teaching hospital, swarming with professors, Weil's centre, also known as the USC Shock Research Unit, was hidden away at Hollywood Presbyterian Hospital, a community hospital. Weil and his research partner were the only members of the university faculty.

For Weil this was an advantage. Controlled by general practitioners open to the concept of critical care medicine, Hollywood Presbyterian allowed Weil freedom away from the sceptical gaze of specialist colleagues. "He was a maverick," Professor Aberman said. "No one else offered critical care fellowships at the time. He was trying to found a new discipline, and he did."

# "Shock ward"

Pamela A Lipsett, president of the Society of Critical Care Medicine and professor at Johns Hopkins University, agrees, calling Weil "a founder of the field of critical care medicine." She credits him with proposing the term "critical care" and establishing the first "shock ward" to provide continuous monitoring of seriously ill cardiology and postsurgical patients. She added that he also developed a cardiac catheterisation laboratory and monitoring facility for surgical patients, as well as a clinical physiology unit for haemodynamic and metabolic studies. Additionally, he introduced computer techniques for monitoring patients.

Professor Aberman noted that Weil's two bed unit featured monitoring equipment connected

to a Xerox Sigma 5 computer housed in large cabinets one floor up. The Sigma 5, which cost about \$300 000, was cutting edge technology and a big step forward in critical care medicine.

Max Harry Weil was born on 9 February 1927 in Baden, Switzerland, to Jewish-German

parents. The family moved to Stuttgart, Germany, before emigrating in 1937 to the United States, settling in New York City. In 1948, after service in the US Army Medical Corps, he gained a degree in science and mathematics from the University of Michigan in Ann Arbor, followed in 1952 by a medical degree from State University of New York Downstate Medical Center in New York City. After an internship and residencies in internal medicine, he took a senior fellowship in cardiology and cardiovascular physiology at the Mayo Clinic in Rochester, Minnesota. In 1957

he gained a doctorate in physiology from the University of Minnesota.

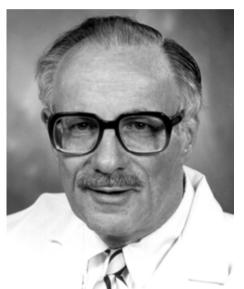
He joined the faculty of the University of Southern California in 1958, meeting fellow cardiologist Herbert Shubin, who would become his research partner until he died in 1975. At the Los Angeles County-USC Medical Center, the two young doctors noticed that a substantial number of patients died, often at night, while recovering from heart attacks, serious illness, or surgery. Weil and Shubin thought that a system to continuously monitor blood pressure, pulse, breathing, and other vital signs was needed to alert staff to life threatening problems. In addition to the USC shock unit, the two also founded the Institute of Critical Care Medicine, which was later renamed the Weil Institute of Critical Care

Medicine, and which now operates in Rancho Mirage, California.

In 1981 Weil moved to the Chicago Medical School to become chairman of the department of internal medicine as well as chief of cardiology and of critical care medicine. He stepped down

> in 1991 and returned full time to his institute in California, where he remained active in teaching and research until his death.

> The author of more than 500 scientific papers, Weil trained hundreds of doctors from around the world. He held 25 patents and helped develop many medical devices and treatments, including a capnometer for measuring severity of shock, a resuscitation blanket, and an automated chest compressor.



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# **Analytical mind**

Despite having an analytical mind, Weil

focused throughout his life on his patients. His daughter, Susan Margot Weil, a gynaecologist, remembers him helping strangers in need of emergency care in restaurants, in theatres, and on car trips. "My father would stop on the road on our vacations and would ride in an ambulance to a local hospital with a victim while my mother and us kids trailed along in our station wagon behind," she said.

Weil leaves his wife, Marianne Posner Weil, from whom he had been separated for many years, and their two daughters. Margery Stone, his companion of 20 years, died in 2008.

#### **Ned Stafford**

Max Harry Weil, (b 1927; q 1952, New York), died on 29 July 2011 from prostate cancer.

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# Katharine Margaret Dawson Coltman



Former general practitioner Aysgarth, North Yorkshire (b 1921; q Leeds 1946), d 28 June 2011.

Katharine Margaret Dawson Coltman ("Kit") took up general practice with her husband Bernard in Aysgarth after they got married in 1947. At the time, female GPs were still a rarity, the NHS was about to come into being, and the remoteness of many of the settlements in this Yorkshire Dales practice meant that visiting patients could be difficult, especially during the winter months. Home births were the norm at this time, adding to the workload. Kit served the Wensleydale practice with Bernard for over 33 years until she retired in 1980. Her interests included genealogy, gardening, art, and music. Predeceased by her husband in 1995, she leaves two children and seven grandchildren. **Stephen Coltman** 

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#### Alison Munro Elliman

Former consultant community paediatrician Luton (b 1938; q Glasgow 1962; MRCP), d 24 June 2011.

Alison Munro Elliman (née Fraser) started her career in pathology and then moved to paediatrics and quickly became consultant at West Middlesex Hospital. She married, adopted two children, and took a partial career break. She returned to community paediatrics in Amersham and Chesham and in 1993 became the first full time consultant community paediatrician in Luton, emphasising child protection and care of looked after children, as well as being medical adviser to the adoption panel. After retiring she relocated to Orkney and became

an integral part of the community, singing in a choir, and taking up painting, tapestry, and bird watching. She leaves a brother, two children, and one grandson.

Pauline Hey

Cite this as: BMJ 2011;343:d6196

# **John Richard Findley**



Former prison medical officer (b 1950; g University of Sheffield 1979), d 31 December 2010. John Richard Findley entered medicine as a mature student. After a period in general practice, he entered the Prison Medical Service as a senior medical officer. From 1991 to 1993 he was chairman of the International Prison Doctors Association. John became disillusioned with some of the changes in the NHS and retired early, working with local charities for much of his time. A keen sportsman, rugby referee, and cricket umpire, he was a lifelong supporter of Arsenal FC and Essex CC. On holiday in 2009, he injured his cervical spine in a fall. He died as a consequence of multiple organ failure. He leaves his wife, Pat.

Leslie J Findley

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# Joseph McEvoy



Retired nephrologist (b 1936; q Belfast 1959), died from a head injury after a fall on 11 April 2011. Joseph McEvoy was accepted by the faculty of medicine at Queen's University Belfast at age 16. In 1967 he was appointed consultant nephrologist and senior lecturer in medicine in the Belfast City and Royal Victoria Hospitals Belfast. He cofounded the Belfast City Hospital Renal unit with Dr Mollie McGeown; they showed the efficacy and safety of low dose steroid therapy in the prevention of rejection. As a teacher he was renowned for his clinical skill, but also for his wit, storytelling, love of earthy jokes, and capacity to remember and recite limericks. In 1975 he emigrated to New Zealand and then the United States, spending his latter years in California. He leaves three children.

Peter McNamee

Cite this as: BM/ 2011;343:d6192

# Kenneth Arthur Newton



Former consultant in clinical oncology
Westminster Hospital, London
(b 1922; q London 1945; MRCP,
MRCR, DMRT, FFR, FRCP, FRCR),
d 5 October 2010.
Kenneth Arthur ("Ken") Newton
was a cancer specialist at
Westminster Hospital, London.
Appointed a consultant in 1956

Appointed a consultant in 1956, he was among the first to recognise the importance of combined chemotherapy and radiotherapy in cancer management. Ken was appointed honorary civilian consultant to the army and to the RAF. He retired in 1985. He was an innovative radiotherapist, exploring new technologies and new techniques from 1950 and publishing on a range of cancers. His skills as an administrator and mentor and in dealing with patients won him loyalty and affection. He leaves his wife, Joy; three daughters; and four grandchildren. **R H Phillips, Bob Phillips** 

Cite this as: BMJ 2011;343:d6190

**Charlie Westbury** 

# John Popert

Consultant rheumatologist Droitwich Centre for Rheumatic Disease, Royal National Orthopaedic Hospital Woodlands, Worcester Royal Infirmary (b 1924; q St Bartholomew's Hospital 1948; MD, FRCP), d 19 June 2010. John Popert completed his early training and MD thesis in west London before moving to Manchester as a lecturer in 1958. In 1964, appointed to the Droitwich Centre for Rheumatic Diseases, he developed aggressive combination protocols to induce remission in patients with rheumatoid arthritis. His unshakeable belief in intensive combination therapy remains a legacy, now accepted by the National Institute for Health and Clinical Excellence (NICE) and the wider rheumatological community. A highly respected clinician, he was also an accomplished amateur archaeologist, geologist, forester, and gardener. Dedicated to his wife, who survives him, he leaves five children and 17 grandchildren. **Rick Popert** 

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# David Ian Hewitt Simpson

Former head of Department of Microbiology and Immunology, Queen's University Belfast (b 1935; q 1959), d 4 September 2010. David Ian Hewitt Simpson qualified in 1959 and went on to develop a special interest in tropical virology. He spent the 1960s and 1970s in a multitude of posts, working on a wide variety of projects in the United Kingdom and Africa, for which he received many awards. In 1983 he was appointed professor of microbiology and head of the department of microbiology and immunobiology in the School of Medicine at Queen's, where he staved until he retired. A prolonged battle with multiple sclerosis led to his premature retirement in 1997. David Simpson leaves his wife, Cintra; four children; and two grandchildren. Andrew J H Simpson

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