John Bunker

The man behind the surgery bible

John Philip Bunker, professor of anaesthesia (b 1920; q 1945, Harvard Medical School), died on 4 May 2012 from multiorgan failure.

At a time when surgeons enjoyed a god-like status, John Bunker dared to question his role. Bunker was a professor of anaesthesia at Stanford University School of Medicine and, in 1977, with co-editors Benjamin Barnes and Frederick Mosteller, he published *Costs, Risks, and Benefits of Surgery*, a book that became known as Bunker's bible.¹ The book was one of the first to evaluate surgical techniques, and in 2006 a paper in the *Journal of Health Services Research and Policy*² included it in a list of the 26 most influential books on healthcare policy in 150 years.

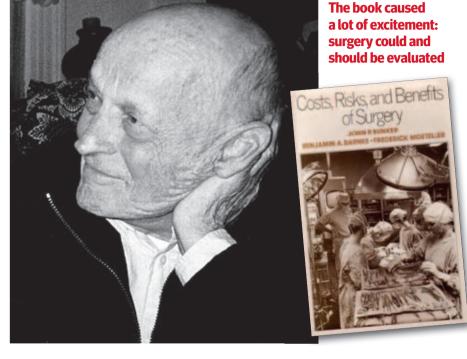
Generating debate

Bunker's book considered the general principles of evaluation; had accounts of specific surgical innovations and their evaluation; tried to assess the costs, risks, and benefits of established procedures; and assessed new procedures. It generated debate about "unnecessary surgery," with both the *New York Times* and the *San Francisco Chronicle* running stories. According to a 2007 paper assessing the book's legacy,³ Bunker had received a phone call from an "outraged pathologist" to complain about a chapter on breast cancer that said that radical mastectomy, then the dominant treatment in the United States, could not be supported by the evidence.

The book caused a lot of excitement: surgery could and should be evaluated. Alain Enthoven, professor of public and private management at Stanford University Graduate School of Business and a coauthor of papers with Bunker, said that Bunker was at a point in his career, a tenured professor, where he could handle some controversy.

Bunker was born in 1920 and graduated from Harvard Medical School in 1945. He trained as an anaesthetist at George Washington School of Medicine and Massachusetts General Hospital, Boston. He was appointed assistant clinical professor of anaesthesia at Harvard in 1955, and in 1960 he took up a professorship at Stanford University, where he remained until he retired in 1989.

His seminal ideas on evaluating surgery were contained in a paper in the *New England Journal of Medicine* in 1970,⁴ in which he compared the number of operations and surgeons in the United States with those in England and Wales. He found that the number of operations and surgeons in the US was far higher per head



of population than in England and Wales. "Fee for service may tend to increase the number of operations in cases in which indications are borderline," he wrote.

Another paper he coauthored, published in the *New England Journal of Medicine* in 1979,⁵ looked at whether there was a relation between the number of operations a hospital carried out and patient mortality. It was one of the first on such a large scale, studying 12 surgical procedures in 1498 hospitals. The researchers found that hospitals that annually carried out 200 or more of the complex procedures—such as open heart surgery, vascular surgery, and coronary bypass surgery—had mortality rates 25-41% lower than hospitals with lower volumes. For less complex procedures the "mortality curve flattened," they said.

Dr Harold Luft, director of the research institute at the Palo Alto Medical Foundation, said that, although he (Luft) was given the lead author credit on the paper, the research was Bunker's inspiration after he read a newspaper article about differing hospital mortality rates. The paper caused some contention but "in a sense the politics worked because the big teaching hospitals looked good," said Luft. He believes that Bunker's strength lay in collaboration: "Even though he didn't really have the training to look at the numbers, he was good at bringing in people."

London love story

After his retirement from Stanford, Bunker moved to the United Kingdom, and Michael Baum, then professor of surgery at University College London, offered him a visiting professorship. "His enthusiasm to work with me in London was because of a love story," he said. Bunker, whose first marriage had ended, had moved to London to live with Lavinia Loughridge, a physician and academic vice president of the Royal College of Physicians from 1993 to 1995, whom he had known as a young doctor. Both their marriages had ended, and they met up again and rekindled their love.

While in London, he also worked in Professor Michael Marmot's department of epidemiology and public health. Bunker's views on medicine were not ideological, says Marmot: "His ethos was to look at the evidence and take a scientific approach." Marmot rejects the idea that Bunker was ahead of his time because, he says, that is the job of the researcher. "He was important along with others in contributing to a culture of being self critical, and he was very early in the piece," he says.

Bunker leaves his second wife, Lavinia; four children; and two stepchildren. Anne Gulland freelance journalist, London

annecgulland@yahoo.co.uk References are in the version on bmj.com. Cite this as: *BMJ* 2012;345:e4883

OBITUARIES

George Alan Christie Binnie



Former general practitioner Norham-on-Tweed (b 1929; q Edinburgh 1952; DObst RCOG, MRCGP), died from urinary sepsis on 24 May 2012.

George Alan Christie Binnie was called up for national service in 1954 in the Royal Army Medical Corps and served one year each in Malaya and Darjeeling. On his return, he had an obstetrics job in Bangour, followed by general practitioner training in Aberfeldy, Perthshire. He worked as a GP in Clay Cross, Derbyshire, for seven years and then moved to a singlehanded, dispensing, rural general practice on the English-Scottish Borders. He had responsibilities in the local GP community hospital as part of a rota for accident and emergency medicine, was an assistant to the consultant ophthalmologist, and was a GP trainer for Newcastle University for 17 years. He leaves Brenda, his wife of 55 years; three daughters; and seven grandchildren. Sue Childs

Cite this as: BMJ 2012;345:e5216

Olivia Susan Crosthwaite



Former general practitioner West Kirby, Wirral (b 1914; q Liverpool 1939), died from heart failure after hip fracture on 17 May 2012.

After qualifying, Olivia Susan Crosthwaite (née Turner) worked in Liverpool's Myrtle Street Children's Hospital, and during the war she worked at the Liverpool Hospital for Consumption and Diseases of the Chest in Mount Pleasant. She later did school clinics and immunisation sessions in Upton and Birkenhead and was an examiner for the St John Ambulance Brigade. After completing her family and having done many GP locums over the years, in 1976 she became a part time GP partner at the West Kirby Concourse practice, where she remained until her retirement in 1983. After retirement, she volunteered at the stroke club and helped deliver meals on wheels. Olivia leaves five daughters, eight grandchildren, and 12 great grandchildren. Richard Azurdia

Cite this as: BMJ 2012;345:e5224

Arthur Holmes Pickering



Former medical director Chevron Oil (Eastern Hemisphere) (b 1935; q St Mary's 1960; FFOM RCP), d 6 May 2012.

After hospital appointments in the UK, Arthur Holmes Pickering became a medical officer for Unilever in Africa and joined Gulf Oil in 1968. He was appointed medical director (Eastern Hemisphere) of Gulf Oil and subsequently Chevron Oil. He was based in London and supervised the medical care of expatriates, referring many patients to colleagues in London. On retirement he continued to be occupational health adviser to several organisations and hospitals and was a keen supporter and benefactor of the Royal Society of Medicine, the Medical Society of London, the St Mary's Hospital Association, and Mill Hill School. He leaves his wife, Margaret; a daughter; and two sons. P E A Savage

Cite this as: BMJ 2012;345:e5222

Calmen Rosen

Former general practitioner Hull, East Yorkshire (b 1921; q Manchester 1946), d 22 April 2012.

Calmen Rosen ("Carl") studied in Manchester throughout the second world war and did his house officer jobs at the busy Jewish Hospital, in the centre of Manchester. Between 1947 and 1949, he served in the Royal Army Medical Corps in occupied West Germany. After a period as medical registrar at the Western General Hospital in Hull he entered general practice in 1951. From 1968, he began sessional work in haematology, developing particular practical skills in transfusion work and subsequently plasmapheresis. For many years he was on the list of specialists for certification of patients under the Mental Health Act. He retired at the age of 70 and moved to Jerusalem in 2006. He leaves three sons, grandchildren, and great grandchildren. Stuart Rosen

Cite this as: BMJ 2012;345:e5221

Henry Savage



Former consultant geriatrician and general physician Macclesfield Hospital, Cheshire (b 1928; q Liverpool 1954; FRCP), died from septicaemia on 23 April 2012. Henry ("Harry") Savage served in the Royal Air Force and then, choosing between the church or medicine as a career, decided on the latter. After appointments in general practice, clinical pathology, and general medicine, he spent several years in geriatric medicine in Hillingdon and Clatterbridge Hospitals. In 1967 he was appointed consultant and geriatrician in Macclesfield General Hospital, where he served for more than 30 years developing the geriatric service as well as the postgraduate training centre and the stroke unit. In later life he developed severe trigeminal neuralgia, which persisted after surgical ablation and led to his early retirement. He leaves his wife, Pamela, and two children. Paul Brocklehurst

Cite this as: *BMJ* 2012;345:e5220

John Struthers

Former general practitioner Southampton (b 1929; q Sidney Sussex, Cambridge/ St Bartholomew's Hospital 1955), d 7 February 2012.



After a brief period of general practice in Lambourn, John Struthers dedicated his working life to inner city general practice in Southampton and was a clinical assistant in geriatrics at Moorgreen Hospital, Southampton. He adored teaching and was involved with the set up and delivery of general practice training at Southampton University. He retired from general practice in 1989, continued with medical tribunals, worked as a magistrate, and became a medical officer for the forces. He leaves his wife, Valerie; four children; and eight grandchildren. Simon Struthers

Cite this as: BM/ 2012;345:e5215

Michael Henry West

Former consultant physician Sault Ste Marie, Ontario, Canada (b 1919; q Middlesex Hospital Medical School 1942; MD (London), MRCP, FRCPC), d 10 June 2012.

Michael Henry West joined the 56th Reconnaissance Regiment six months after qualifying and served throughout North Africa, Sicily, and Austria. After postgraduate work in medicine, he was recruited to Queen's University in Kingston, Ontario, Canada. He soon went north to Sault Ste Marie, where he was the second consultant physician in the city. For more than 50 years he provided a dedicated service to the community. Predeceased by his wife, Kathleen, he leaves five daughters and 12 grandchildren. A Elizabeth Watson

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