

Gerald “Charlie” Westbury

Developed new reconstructive procedures in cancer surgery

Emeritus professor of surgery (b 1927; q Westminster Medical School 1949; OBE, FRCP Lond, FRCS Eng, Hon FRCS Ed), d 12 June 2014.

In the 20th century, Westminster Hospital in London became a centre for tertiary referrals for cancer, pioneering the multidisciplinary management of malignant disease. This approach was embodied by its Wednesday afternoon clinics, where it was not unusual for visiting clinicians and international experts to outnumber the patients whose interests were being discussed.¹

The multidisciplinary ethos was led by Stanford Cade. Cade had a firm belief in exploring and using all treatment modalities, including the therapeutic use of radium and x rays. In 1924 Cade obtained the UK's first supply of radium from the Radium Institute in Paris.

Gerald “Charlie” Westbury, who has died aged 86, was Cade's registrar and senior registrar in the 1950s. Their association was to influence Westbury's entire career, which went on to include the development of new constructive procedures for cancers of the head and neck, and sarcomas, as well as continued advocacy of multidisciplinary working to deliver better results for patients.

Westbury had worked as a resident surgical officer at the Brompton Hospital before arriving at Westminster. Cade valued Westbury's intellect and his broad knowledge of medicine as well as surgery, and was often heard to say “Westbury will know” when asked a question to which he did not know the answer. In 1960 Westbury succeeded Cade as consultant surgeon, having completed a fellowship at Harvard Medical School, where he studied the latest techniques in vascular surgery.

An early objective was to start a vascular surgery service. Westbury undertook the hospital's first aortic graft, using a sterilised terylene shirt tail shaped into a tube and pre-clotted with the patient's spilt blood.

His attention inevitably turned to cancer treatment, and he used his experience in vascular surgery to develop more complex procedures. Westbury challenged the orthodoxy that the more tissue that could be removed around a tumour the better, arguing that surgery should focus not only on curing, but also preserving physical function.

New reconstructive procedures were pioneered for cancers of the head and neck, including the “commando procedure” (Combined MANDibulectomy and Neck Dissection Operation) for first degree malignancy of the tongue.

Working with a plastic surgeon colleague, Westbury developed remote skin flaps based on



“Charlie Westbury had great respect for individuals and for patients. He wanted subconsciously for them to have the best experience, and that involved his communication as well as his decision making”

an artery to reconstruct the tissues, allowing surgery on the head, neck, and scalp to be undertaken with subsequent facial reconstruction.

In 1982 he became professor of surgery at the Royal Marsden Hospital and was dean of the Institute of Cancer Research (ICR) from 1982 to 1989. Westbury's daughter Charlotte, also an oncologist, said her father's firm belief in multidisciplinary working was matched by an appreciation of the importance of collaboration between science and medicine.

She said: ““My father was not himself a scientist, and I wonder if he sometimes regretted this, but he was ahead of his time in understanding translational medicine and communication between the two disciplines.

“At the time that chromosomal translocations were being discovered in haematological malignancies, he realised that there may be similar changes in solid tumours, and rather than wasting the tumour ‘in the bucket,’ he initiated a project by suggesting to an ICR scientist that they look at the tissue, and they published one of the first articles on chromosomal translocations in sarcomas.”

Her father, she said, was also ahead of his time in adopting a “humanistic” approach to patient communication, at a time when surgeons were stereotyped for delivering blunt messages to patients about a proposed course of action.

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▶ Listen to Charlotte Westbury talk about her father at bmj.com/content/349/bmj.g6405

Charlotte Westbury recounts how her father once advised a colleague to tell a patient, “I have a little bit of concern,” instead of “I'm really worried about this.” She added: “He just turned it round because he knew how best to give the patient the information without worrying them.”

Her father had a humble start in life. His parents were of East European Jewish origin and ran a tailor's shop just off the Edgware Road in London. As a child he turned down a scholarship place at Christ's Hospital in Sussex, ostensibly because he didn't fancy the school's uniform of a belted long blue coat, knee breeches, and yellow socks.

Instead he went to St Marylebone Grammar, before he and his younger brother were evacuated to Redruth, Cornwall.

In June 1944 he was back in London, sitting exams as part of his early studies. During one practical exam in physics, a German VI “flying bomb” exploded outside the nearby National History Museum. The students dived under the laboratory benches and were promised lenient marking because of the interruption. Westbury maintained he would never have passed the exam otherwise.

He won the surgery prize at Westminster and gained honours in the London MB exam in 1949. He also established the “18 club” for his undergraduate cohort, which met annually for 65 years until 2013. His dry wit and sense of humour—he insisted on listening to BBC radio comedy *The Goon Show* between surgical cases—earned him the lifelong sobriquet “Charlie.”

Other achievements included a Hunterian professorship in 1963; the Honeyman Gillespie lecture in Edinburgh in 1965; the Gordon-Taylor, Semon, and Hadow lectures at the Royal Society of Medicine; and the Walker prize of the Royal College of Surgeons in 1990.

He was honorary consultant in surgery to the army from 1980 to 1992; president of the British Association of Surgical Oncology from 1989 to 1992; and examiner at the universities of London, Cambridge, Edinburgh, and Hong Kong. He was appointed OBE in 1990.

In retirement Westbury was active in several charities. He was widely read, had an encyclopaedic knowledge of classical music and traditional jazz, and loved walking and birdwatching.

Predeceased by his wife, Hazel, in 2013, Westbury leaves three daughters.

David Payne, London dpayne@bmj.com

References are in the version on thebmj.com.

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Mary Kelland Armstrong (Bruford)



General practitioner and clinical assistant (b 1953; q 1977; MRCS), died from a brain tumour on 23 June 2014.

Mary Kelland Armstrong (Bruford) was awarded a place to study medicine at the medical college of St Bartholomew's Hospital, London. She won the anatomy prize and completed an intercalated BSc course in pharmacology, but still found time to ski, help out with Gilbert and Sullivan productions, sew, and attend a Christian study group. She undertook GP training in Putney before moving to Weyhill in 1984, where she worked in child health and family planning. Her main clinical focus for the next 22 years was rheumatology, and she worked as a clinical assistant at Andover and Winchester hospitals and, at one point, as a locum consultant. She ceased medical practice in 2006 but played an active part in the life of her community. She leaves her husband, Alex, and two sons.

David Major

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William Alan Harries



Former general practitioner (b 1920; q 1942; MRCS), d 18 August 2014.

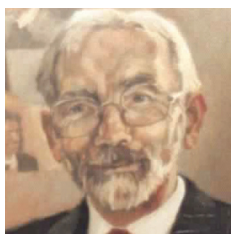
William Alan Harries was a general practitioner on the Gower Peninsula for 36 years. After qualifying from Charing Cross Hospital Medical School, he immediately joined the Royal Army Medical Corps. After demobilisation, he did hospital

jobs, with a view to following his brother into clinical medicine, but he soon decided on general practice as a career. Despite this heavy workload, Alan retained his early interest in neurology, and was a fine diagnostician. He enjoyed teaching generations of medical students who came annually from Charing Cross for three weeks to sample general practice. He was my practice partner for 13 years, and my friend for 44 years. I admired him as an exemplary family doctor, a clinician of considerable skill, but most of all a very fine man. Predeceased by his wife, Betty, he leaves two children.

Mark Vernon-Roberts

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David Nichol Sharp Kerr



Former dean of the Royal Postgraduate Medical School Hammersmith Hospital, London; professor of medicine, University of Newcastle upon Tyne (b 1927; q Edinburgh 1951; CBE, MSc, FRCP), died with Alzheimer's disease on 20 April 2014.

David Nichol Sharp Kerr moved to Newcastle in 1959, with the task of developing the then new speciality of nephrology. He was promoted to senior lecturer in medicine and consultant physician at the Royal Victoria Infirmary in 1963, awarded a personal chair in medicine in 1968, and appointed professor of medicine in 1971. He remained in post until 1983, when he was appointed dean at the Royal Postgraduate Medical School. He made Newcastle's renal unit one of the leaders in the provision of long term dialysis and transplantation in the UK and made many contributions to our understanding of renal disease, as well as to national academic life. He leaves his wife, Eleanor, and their three children.

Charles Pusey, Robert Wilkinson

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John Hardy Price



Former general practitioner (b 1930; q Manchester 1953; FRCGP), died from heart failure on 1 October 2014.

After house jobs in Manchester Royal Infirmary, John Hardy Price did national service in Jordan. On returning to the UK he went into general practice in Birmingham. He supported the GP revolution in the 1960s, which started modern day practice, with an emphasis on infrastructure, teaching, and research. Subsequently he also taught as an honorary senior lecturer. He pursued research and published a paper entitled "Toxoplasma infection in an urban community" in *The BMJ* in 1969 (<http://www.bmj.com/content/4/5676/141>), which led to identifying the oocyst that transmits toxoplasmosis from felines to humans. He voluntarily took the MRCP examination in 1980, chaired the local division of the BMA, and was provost of the Royal College of General Practitioners. He and his wife retired to a Gloucestershire village in 1986. He leaves his wife, two sons, and two grandchildren.

T Calland, J Sherlaw

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Tom Rosser



Former consultant cardiothoracic surgeon (b 1918; q Cardiff University 1944; FRCS), died from ischaemic heart disease on 14 August 2014.

Tom Rosser pursued his career when cardiac surgery was an emerging specialty. He started his surgical training at Morrision Hospital, moved

to the Brompton Hospital, and returned to a consultant post at Newport and Sully hospitals, where he practised and developed cardiac surgery, conducting research into cardiac surgical techniques. He was also responsible for the surgical treatment of patients with tuberculosis, many of whom spent up to two years as inpatients. He moved to the University Hospital of Wales as the senior consultant cardiac surgeon in 1971. Tom was a member of Pete's club, a cohort of international cardiac surgeons who met twice a year to share clinical advances and challenges in an open and honest way, an innovative approach for the time. Predeceased by his son in 1986, he leaves his wife, Barbara; and a daughter.

Sally Rosser

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Peter Wallis



Anglican priest and former general practitioner (b 1942; q 1965 KCH), d 5 August 2014.

Peter Wallis was born in London, the son of an orthodontist at King's. He left Monkton Combe School, Bath, and became a medical student at King's College and King's College Hospital. After junior posts, he worked as a general practitioner in West Norwood for 10 years. He then moved to Barnham in West Sussex and became a GP principal in 1976. He became vice chairman of the health authority and was much involved with the local medical committee. His strong Christian faith came to the forefront in his 50s, when he started training in Salisbury, to be ordained priest in 2002. He became curate of Clymping in West Sussex, where he remained as honorary curate until shortly before his death. Peter coped bravely with the difficulties of Parkinson's disease. He leaves his wife, Davina; two children; and grandchildren.

Colin Tourle

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