Kenneth Till

Pioneer of neurosurgery in children

As the first fulltime paediatric neurosurgeon in the United Kingdom, Kenneth Till quickly established himself in the forefront of his field, and has left an enduring legacy at Great Ormond Street and a select group of former trainees.

Kenneth Till was born in Stoke on Trent and grew up in Poole. The only son of an impecunious pottery designer, he did not attend school until he was 7. After winning a place at the local grammar school, he then proceeded to Downing College, Cambridge, with an open scholarship. He qualified in 1944 after clinical training at St George's Hospital and served as a medical officer in the Royal Air Force, where his interest in neurosurgery was aroused.

He recounted how as a very junior doctor he ventured into the operating theatre at Atkinson Morley's Hospital, Wimbledon, where Wyllie McKissock, the doyen neurosurgeon of his day, was so amazed to see anyone interested in neurosurgery that he offered him a house surgeon post. Among his duties he was responsible for the children's ward at Atkinson Morley's Hospital, then separate from the main St George's Hospital site.

There he was made vividly aware of the childhood prevalence of tumours of the central nervous system and of hydrocephalus, for which there was no effective treatment. Then, as now, head injuries were also unacceptably common in young patients.

After completing general surgical training and obtaining the FRCS in 1953, Kenneth was appointed Wyllie's first assistant at Great Ormond Street. This coincided with the opening of a properly equipped neurosurgery unit, the first such department in a children's hospital in the UK. A sabbatical year in Chicago Memorial Children's Hospital in 1956 was followed by his appointment as consultant at Great Ormond Street in 1959. There he worked singlehandedly until joined by Norman Grant in 1970. These demanding conditions meant that he was perpetually on call except when on holiday away from London, and was required to routinely indicate his whereabouts to the box office in theatre or concert hall.

Encouraged by Roald Dahl, whose infant son had hydrocephalus after a road traffic accident abroad, and in collaboration with Stanley Wade, a hydraulic engineer, he developed a low pressure valve, which became known as the Dahl-Wade-Till valve. At that time cerebrospinal fluid was shunted into the heart (“ventriculo-atrial” shunt), and the new valve was used to prevent reflux of blood into shunt tubing, being particularly effective in hydrocephalus in young infants, and a considerable advance on the unrefined shunt valves of the late 1950s. As reported by Kenneth in the Lancet in 1964 under “New Inventions,” the special characteristics of the new valve were “low resistance, ease of sterilisation, no reflux, robust construction and negligible risk of blockage.”

He was a deft and speedy operator and also had the advantage of being ambidextrous. According to one of his trainees, he was “the fastest stereotactic surgeon in Europe.” His anaesthetist recalled that the quickest removal of a medulloblastoma she ever witnessed him perform lasted 45 minutes from ward departure to return.

With a growing international reputation, he was a founder member of the International Society of Paediatric Neurosurgeons in 1972. He hosted the second annual meeting in London in 1974 and was the first president of the society to wear the new robe of office, an Argentinian poncho. This was given in memory of Raul Carrea by Anthony Raimondi, another distinguished paediatric neurosurgeon.

Kenneth’s textbook on paediatric neurosurgery, written for paediatricians and neurosurgeons, was published in 1975. It was a major contribution and for several trainees provided the incentive to specialise in paediatric neurosurgery.

For Kenneth and for those of us practising before non-invasive brain imaging, the development of brain computed tomography followed closely by magnetic resonance imaging transformed clinical practice. Kenneth was active in obtaining funds for a CT scanner at Great Ormond Street, thus securing priority access for his patients, a facility that others with less pressing indications were willing to concede. Furthered by this development, he was part of the team which advanced craniofacial surgery in the UK, collaborating with Paul Tessier (obituary, BMJ 2008;337:a693).

He was admired and respected in equal measure, known for his kindness and humanity and skill in communicating with his patients and their families. These were important assets in sharing with parents the awfulness of so many of the conditions which his position in a centre of excellence attracted.

After his retirement from Great Ormond Street in 1980, he remained active in medical publishing and was on the staff of several journals, including the Journal of Neurology, Neurosurgery, and Psychiatry. He was an honoured guest and speaker at the annual meeting of the International Society of Paediatric Neurosurgeons in Birmingham in 1994.

He shared a happy retirement in rural Somerset with Morwenna, his wife of more than 60 years and a distinguished plantswoman who was formerly engaged in leukaemia research at the Institute of Child Health. He also leaves four children and grandchildren.

Kenneth Till, paediatric neurosurgeon, Hospital for Sick Children, Great Ormond Street, London (b 1920; q Cambridge/St George’s Hospital, London, 1944; FRCS), died from complications of Waldenstrom macroglobulinemia on 8 July 2008.

John Wilson, Anthony D Hockley

Cite this as: BMJ 2008;337:a2193
David Drummond Hart

Former consultant anaesthetist
Aberdeen Royal Infirmary (b 1931; q Glasgow 1952; TD, FFARCS), d 26 February 2008.

David Drummond Hart (“Drummond”) was the youngest to qualify in Scotland in 1952. He completed his national service in the Royal Army Medical Corps, then as a volunteer reserve with the Territorial Army, latterly as lieutenant colonel in field hospitals. He was consultant anaesthetist in Aberdeen for 30 years until retirement in 1991. With a keen interest in neurosurgery, he helped found and look after the intensive care unit. Being a tenor of near-professional standard, his presidential address to the North East Society of Anaesthetists was based on experiments on himself showing the physiological changes of singing. He leaves a wife, Ann; four daughters; and six grandchildren.

Aileen D Woodger

Cite this as: BMJ 2008;337:a2046

Joan Davies (née Evans)

Former consultant rheumatologist
Royal National Hospital for Rheumatic Diseases, Bath (b 1936; q Welsh National School of Medicine, Cardiff 1961; MB Bch, DPH Ed), died of metastatic breast cancer 25 February 2008.

Although Joan Davies intended to be a general practitioner, she took up a research appointment in rheumatology and later a clinical appointment with a special interest in bone disease. In 1975, she helped set up the Bath Institute for Rheumatic Diseases, which she supported until her death. She maintained her interest in metabolic bone disease, including Paget’s disease and osteoporosis. She was an adviser to the National Osteoporosis Society. Joan was an enthusiastic teacher and supervisor, and she saw every patient herself. She leaves a husband, Cyril; two children; and two grandchildren.

Cyril Davies, Delyth Howard

Cite this as: BMJ 2008;337:a2232

Harold Francis Hope-Stone

Former consultant radiotherapist and oncologist, the Royal London Hospital, London (b 1926; q London Hospital 1951; MB BS, MRCS, FRCR), died from myocardial infarction 2 September 2008.

Harold Francis Hope-Stone was sent to Montreal during the blitz and was about to study medicine at McGill University when he had to return to the UK. After qualifying he did his national service in Malaya as resident medical officer to the SAS and in Kenya during the Mau Mau uprising. Harold returned to the London Hospital to specialise in radiotherapy and was appointed consultant in 1963. He published extensively on cancers of the testis, bladder, and prostate. Tireless, enthusiastic, and scornful of lifts, Harold led his ward rounds at the double—up and down stairs. He leaves a wife, Shelagh; two sons; and a daughter.

John Blandy

Cite this as: BMJ 2008;337:a2238

John Warburton Lewis

Former general practitioner
Nailsworth, Gloucestershire (b 1931; q University of London 1956; DRCOG), died of myocardial infarction 2 September 2008.

John Warburton Lewis did his national service in the Royal Army Medical Corps and then looked after his father’s practice in Newbury until 1949. In 1951 he moved to Nailsworth to run his own practice. He married Margaret in 1953, and she helped him as practice secretary until his retirement in 1983. He was totally involved in the Nailsworth community, being a founder member of the old people’s welfare committee and a strong supporter of the general and maternity hospitals in nearby Stroud. Predeceased by his first wife, Margaret, in 1984, he leaves his second wife, Zena; two daughters; and three grandchildren.

Mike Whitfield

Cite this as: BMJ 2008;337:a2255

Philip Warner Robertson

Former Wing Commander RAF (consultant physician), and retired consultant radiologist East Birmingham Hospital (b 1923; q University of Liverpool 1945; MD, FRCP, DM, DMRD), d 27 September 2008.

Philip (“Pip”) Warner Robertson was initially a consultant physician in the Royal Air Force, where he developed an interest in hypertension. He helped discover a renin secreting kidney tumour (haemangiopericytoma)—reported in the American Journal of Medicine in 1967. After 20 years, Pip joined the former East Birmingham Hospital. He passed the Diploma in Medical Radiodiagnosis and was appointed consultant radiologist. Pip played a major role in the development of the radiography service, becoming director of radiology, and of the hospital as a whole, as chairman of the Medical Staff Committee. He leaves his second wife, June; three children; and three grandchildren.

Alasdair Geddes

Cite this as: BMJ 2008;337:a2251

Kathryn Robinson

Cite this as: BMJ 2008;337:a2237

Heather Sims Williams

Former general practitioner Bristol (b 1947; q Bristol 1970; MB ChB), d 1 October 2008.

Heather Sims Williams trained in general practice and then undertook a three year research appointment in the department of rheumatology at Bristol. Heather’s life centred on her husband and three children, but at the family practice she showed her extensive clinical knowledge and levels of care that were legendary.

Alasdair Geddes

Cite this as: BMJ 2008;337:a2251