Carleton Gajdusek
Discoverer of prions and Nobel prize winner

After painstaking research in New Guinea, the US paediatrician and neuroscientist Carleton Gajdusek, a great maverick of science, was awarded a Nobel prize in 1976 for “discovering a completely new infectious agent.” This was the discovery of what he called slow viruses, now called prions. He was also a convicted paedophile. He was a polymath and genius, charming, wily and energetic. He was interested in clinical and laboratory medicine and in ethnography. He was recalcitrant and unpredictable, and he kept prolific diaries which were to prove his undoing.

When kuru, scrapie, and Creutzfeldt-Jakob disease were first noted it was assumed, wrongly, that all infectious agents were living things. It took a long time to convince the scientific world that they could be self replicating but not alive.

Gajdusek was born in Yonkers, New York, the son of east European immigrants. His father was a butcher. His favourite childhood books were biographies of Pasteur and the Curies, and The Microbe Hunters by Paul de Kruif, a romantic account of the pioneers of bacteriology and virology.

He studied biophysics at Rochester University, graduating in 1943, and medicine at Harvard, qualifying in 1946. He then did research at Caltech under Linus Pauling and Max Delbruch, and research at Harvard under John Enders. All three became Nobel laureates.

As an army doctor in the early 1950s Gajdusek helped show that the haemorrhagic fever killing US soldiers in South Korea was spread by migrating birds. In 1954 the US Centers for Disease Control (CDC) sent him to a camp in Bolivia for native American Okinawans transported there by the US navy after the second world war. There were so many deaths that it was rumoured to be an extermination camp; he showed that the deaths were by natural causes and fighting. The CDC were impressed and offered him a job. “You’re a screwball,” said his boss, “but you’re my kind of screwball.” Gajdusek declined the offer and went to work with another Nobel laureate to be, the immunologist Macfarlane Burnet in Melbourne.

In 1957 Gajdusek went to Port Moresby, New Guinea, to set up part of a multinational study on child development, behaviour, and disease. A Dr R F R Scragg, head of the Papua New Guinea Health department, gave him a file in which he read of a mystery illness called kuru in the Fore tribe of the eastern highlands. Burnet had known about the disease, but not told him. Peeved, Gajdusek flew, illegally, to kuru country on the Papua side of the border. Burnet felt double crossed.

Gajdusek took dozens of blood samples for analysis, moving fast from village to village. By April 1957 he had 28 cases and 13 deaths, mostly among children. By June he had recorded 200 deaths; 14 out of every 15 were women. He sent brains to Australia and the US National Institutes of Health for analysis.

People with kuru stumbled and twitched and were belligerent, prone to mirth, grinning, and shrieking. Gajdusek investigated what they ate, drank, or touched. He sent a patient to Australia for investigation. He tried ad hoc treatments—vitamins, steroids, antibiotics. Nothing worked.

Meanwhile, the Americans noted that the brains were similar to those of patients with Creutzfeldt-Jakob disease. Burnet proposed sending out a multidisciplinary team. Gajdusek replied that he was that team. After nine months Gajdusek returned to the National Institutes of Health in 1958. A US scientist, William Hadlow, saw an exhibition on kuru and wrote to Gajdusek, saying how similar the brains looked to brains of sheep infected with scrapie. Gajdusek inoculated primates with extracts of Fore brains, knowing that it would be a long time incubating. He visited other tribes, and in 1963 brought to the US a 12 year old boy, who landed barefoot at Dulles airport with a bone through his nose. Fifty five other Polynesian and Micronesian boys were to follow. He put them all through high school, and many through university or medical school.

In 1965 the chimp that Gajdusek had inoculated started to become ill. He brought in a UK expert on sheep scrapie, who confirmed that they had died of the same disease that killed the Fore. It was proof that the disease was caused by an infectious agent. By 1976 when Gajdusek received his Nobel prize he had published 150 papers and was in frequent touch with a thousand clinicians and scientists around the world. He went on to publish a further 450 papers on slow virus disease.

In the 1990s a dissatisfied member of Gajdusek’s laboratory tipped off the Federal Bureau of Investigation that something odd was going on. The bureau found one of Gajdusek’s adopted sons who was willing to testify. Gajdusek admitted mutual masturbation. None of the other boys said that Gajdusek had touched them, and several were willing to give evidence in his favour. Many distinguished scientists pleaded for clemency for him.

Gajdusek was 74 when he left prison, after serving six months of a 19 month sentence. He had put on weight, and his health deteriorated. He retired to Amsterdam, spending his winters in Tromso, where he died.

Caroline Richmond
Carleton Gajdusek, discoverer of prions (b 1923; q Harvard 1946; MD, Nobel prize for physiology or medicine 1976), died on 12 December 2008.
James Wylie Beattie

Former consultant geriatrician United Norwich Hospitals (b 1918; q Queen’s University, Belfast, 1941; MD, FRCP), d 21 November 2008. James Wylie Beattie (“Wylie”) entered medical school on a scholarship. After house jobs in Belfast and academic training in Sheffield and Cardiff, he entered the then unpopular specialty of geriatrics. He was appointed the first geriatrician in Norwich, indeed all of East Anglia, in 1955. Taking over former workhouse infirmary facilities at the West Norwich Hospital, he slowly improved them into an active unit by encouraging physiotherapy and occupational therapy. His pioneer enthusiasm, against much opposition, spread to his inpatient responsibilities at Great Yarmouth also. Retiring in 1983, he laid the foundations for the current services. His wife, Mary, predeceased him in 1997; they had no children.

Brian Payne, N Alan Green
Cite this as: BMJ 2009;338:b117

Simon Andrew William Samuel Biggart

Consultant cardiologist Salisbury Hospital (b 1963; q Charing Cross and Westminster, London, 1989; BSc, MRCP), died from liver failure on 4 March 2008. Simon Andrew William Samuel Biggart (“SAWS”) trained in cardiology in Brighton and at St Thomas’ Hospital, London. He served as treasurer of the Junior Cardiac Club and was the trainees’ representative on the South-East Cardiology Specialist Training Committee. At St Thomas’ his clinical research included the use of coronary artery pressure wires to guide coronary artery angioplasty/stent procedures. In 2002 he was appointed to Salisbury Hospital, where, frustrated by the lack of local facilities, he raised funds for the cardiac catheter laboratory. This opened in 2004, allowing him to develop local invasive cardiac services prior to his untimely death. He leaves his parents and a sister.

Clive Lawson
Cite this as: BMJ 2009;338:b58

Ruth Abigail Mary Bridgewater

General practitioner WallSEND and senior tutor University of Newcastle (b 1965; q Newcastle 1989; MA, MRCGP), died from metastatic melanoma on 29 July 2008. While still an undergraduate, Ruth Abigail Mary Bridgewater completed pioneering research that highlighted the unrecognised scale of alcohol consumption in elderly people, published in the BMJ. Her skills in social science and their application to medicine came to the fore in working with Sue Roberts, the national NHS czar for diabetes, in the UK’s first diabetes resource centre; in advancing the then unfashionable merits of qualitative inquiry to GP research networks at home and abroad; and then as a teacher of communication and sociology in medicine. Ruth’s modest reserve often hid her accomplishments more befitting an 18th century gentlewoman, and a modern sense of humour. She leaves a husband, Nick, and three children.

Joe Kai
Cite this as: BMJ 2009;338:b142

Sam Citron

Former consultant anaesthestist Chase Farm Hospital, Enfield (b 1915; q Glasgow 1939; DA), d 8 June 2008. The youngest of six children born into extreme poverty in the Gorbals, Sam Citron served as an anaesthetist in the British Army in India and Burma during the second world war and was mentioned in dispatches. After the war he joined his brothers in South Africa and developed an anaesthetic practice in Cape Town, but the family left in 1962 because of the political situation. Back in Britain he was appointed consultant to the Enfield group of hospitals, where he remained until retirement. In retirement he cared devotedly for his increasingly disabled wife, who predeceased him. He leaves two sons and five grandchildren.

Neil Citron
Cite this as: BMJ 2009;338:b143

John Johnson

Former consultant in psychiatry University Hospital of South Manchester (b 1930; q Manchester 1953; MD, FRCPsych, FRCPEd), died from intracranial haemorrhage on 22 November 2008. After house jobs in Manchester and Stockport, John Johnson (“JJ”) developed an interest in neurology and psychiatry during national service in the Royal Army Medical Corps. He was senior registrar at the Maudsley Hospital (1958-61) with Sir Denis Hill. After his first consultant appointment in Oldham he became senior lecturer in psychiatry at the University of Manchester. In 1971 he moved to the psychiatry department at Withington Hospital. He continued interests in undergraduate clinical teaching, publishing papers on neuropsychiatric aspects of boxing, and organic psychiatry. He also led and helped to develop the electroencephalography department. Predeceased by his wife, Margaret, in 1997, he leaves four children and nine grandchildren.

Graham Johnson
Cite this as: BMJ 2009;338:b135

Marcus Alexander Sleightholm

Consultant physician Seacroft Hospital, Leeds (b 1955; q Liverpool 1979; MD, FRCP), died from a malignant glioblastoma on 2 November 2008. After qualifying and house jobs at the Royal Liverpool Hospital, Marcus Alexander Sleightholm worked at the Hammersmith Hospital in London and Addenbrooke’s Hospital in Cambridge before moving to Leeds. He had many interests outside medicine, in particular amateur radio and sailing. He was an accomplished photographer, much of his work having been published, and he was a splendid jazz guitarist, which was his greatest love. Marcus lived alone but leaves his father and two sisters and many friends.

Rhys Davies, Mike Smith
Cite this as: BMJ 2009;338:b144

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