Peter Diggory

Helped reform UK legislation to allow safe and legal abortions

At a time of conservative, male dominated medical politics Peter Diggory believed in a woman’s right to control her own fertility. As medical adviser to David (later Lord) Steel he helped draft the 1967 Abortion Act. He also pioneered the first day case surgery unit for abortions and gynaecological surgery in the NHS.

The Offences Against the Person Act 1861 made abortion a criminal offence. Before 1967 a common law defence of “necessity” existed for a doctor facing a charge of procuring a miscarriage. In 1939 a jury at the Old Bailey had accepted this defence from a surgeon who had performed an abortion on a 1 4 year old girl on the grounds that continuing the pregnancy would leave her a “mental wreck.” Justice Macnaughten ruled that if continuing with the pregnancy was likely to make the woman a wreck then performing an abortion could be said to have been performed to save her life. However, before 1967 few gynaecologists would perform therapeutic abortions and generally only if a psychiatrist was prepared to say that serious mental health problems would result from continued pregnancy. Abortion for fetal abnormality was illegal.

Backstreet operations
Illegal abortions were the only recourse for most women. Complications from backstreet operations were common, leaving many women infertile and others dead. Diggory believed that there will always be abortions because there will always be unwanted pregnancies, and it is better if they were done by qualified doctors in safe conditions. The only way forward, in his mind, was for the law to change.

The medical establishment, represented, among others, by the Royal College of Obstetricians and Gynaecologists, opposed a change in the law. By contrast Diggory became a founder member of the Abortion Law Reform Association. Malcolm Potts, coauthor of many publications, wrote in the Guardian’s obituary, “I still remember his stunning speech at the 1966 family planning association conference on abortion in Britain. It was the first time an experienced gynaecologist had talked openly about abortion. He compared the rich women getting safe private operations with poor women admitted to an NHS hospital, whose neighbours had injected soap, whisky, or even toothpaste into the uterus.”

He published a personal series of 1000 abortions, many performed before the passage of the 1967 act (Lancet 1969;1:873-5). It needed courage to risk prosecution by openly performing abortions, let alone writing about them. He was one of the first to recognise that women rarely suffered from severe guilt after a termination.

By the 1960s times were changing. The home secretary, Roy Jenkins, passed a liberalising agenda. Earlier efforts to liberalise the abortion laws had failed despite evidence that the public supported the idea. In 1966 the young Liberal MP David Steel introduced a private member’s bill that became the Abortion Act 1967. Diggory acted as medical adviser to Steel throughout its passage. He supported social clauses in the act and opposed limiting those allowed to perform abortions to consultants. This had been proposed by opponents of reform as a thinly disguised wrecking measure. Two generations of women have reason to be thankful for his efforts.

Diggory obtained a scholarship to Royal College Royal Grammar School. His first degree was in mathematics, obtained at age 18, from University College London, then he was evacuated to Bangor because of the war.

Student politics
After graduation Diggory was conscripted to work on the development of radar by the scientist and novelist C P Snow. After the war, Snow tried to persuade Diggory to continue research. But Diggory had always wanted to be a doctor. Snow relented and helped him gain a place at University College Hospital Medical School. As a student he became involved in student politics, attending, as president of the British Medical Students’ Association, the 1950 congress of international students in Stalinist Prague.

After qualification and six years of surgical training, he specialised in obstetrics and gynaecology, working for Dame Josephine Barnes at Queen Charlotte’s Hospital, London. He was a registrar and a senior registrar at Westminster.

One of his great passions was the theatre. In his last years, Diggory had vascular dementia, and he died of heart failure. His wife of almost 50 years, Patricia, died in 2002. He leaves a son and a daughter.

Paul Diggory
Peter Lionel Carr Diggory, gynaecologist (b 1924; q University College London, 1950), died 22 November 2009 from heart failure.

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Stephen Anthony Cullen

Former consultant pathologist Royal Air Force Medical Branch (b 1939; q Liverpool 1962; FRCPath, MD, FRAes RAF), died from nodular sclerosing Hodgkin’s disease on 6 October 2009. Air Commodore Stephen Anthony Cullen (“Tony”) was an aviation pathologist of international repute. Commissioned in 1964, he was constantly involved with military and civil aircraft accident investigation from 1971 till his retirement in 2004, except during tours of duty. In Iraq he was the oldest and longest serving officer on active duty. Tony also created a detailed accident database of over 1400 fatal accidents dating back to 1950. He achieved his doctorate in 2002, and in retirement lectured widely in universities, as well as contributing to the rapid reaction force for disasters overseas. He leaves a wife, Kate; two sons; and two grandchildren.

Tony Batchelor

John L Christie

Cite this as: BMJ 2010;340:c996

Gordon Blair Drummond

Former general practitioner Hull (b 1906; q Edinburgh 1936), d 19 December 2009. Gordon Blair Drummond qualified as a pharmacist in 1929, two years later funding his medical studies. After assistant posts in general practice and as surgical resident and house physician, he became a junior partner in a working class area of west Hull, working there throughout the second world war, when Hull was heavily bombed. A great supporter of the NHS, he was an active member of the local BMA, holding several offices. His wife, Doreen, died in 1968, the year of his retirement, but he remained active and fiercely independent till the end, including travelling to Riga for his 101st birthday and to France on his own in his last year. He leaves three sons and four grandchildren.

Gordon Drummond (junior)

Cite this as: BMJ 2010;340:c1008

Peter Ferry Jones

Surgeon, author, and teacher Aberdeen (b 1920; q Cambridge/St Bartholomew’s Hospital, London, 1943; MChir, FRCS, FRCSEd), died from a stroke on 17 October 2009. Peter Jones was a much respected surgeon who gave a generation of trainees in Aberdeen a first class training. His willingness to take the assistant’s position at the operating table any time, day or night, was a defining characteristic. He was appointed consultant surgeon in 1958, which entailed both general and paediatric surgery. Many surgeons from around the world testify that his writings, particularly his textbook on emergency abdominal surgery, have remained a source of inspiration and wisdom. Peter became surgeon to the Queen in 1977 and was granted a personal chair in surgery in 1983. He leaves a wife, Margaret, and four children.

George Youngson, Alasdair Munro

Tim Jones

Cite this as: BMJ 2010;340:c1011

John Michael Talbot

General practitioner Bicester, Oxfordshire (b 1944; q Oxford 1968; MA, FRCPGP), died from prostate cancer on 25 September 2009.

John Michael Talbot was awarded a scholarship to study medicine at Pembroke College, Oxford. After house officer and senior house officer posts at the Radcliffe Infirmary, Oxford, he spent a year as a paediatric registrar in South Africa. On returning to the United Kingdom he entered general practice in Bicester in 1972. He was a trainer for 15 years and an examiner for the MRCGP for 11 years, in 1997 being made FRCPGP for his contributions to general practice. John was a keen sportsman: he rowed and played rugby for his college, and later enjoyed shooting and sailing. He leaves a wife, Lyn; six children; and 10 grandchildren.

Charles Talbot

Theo Schofield

Cite this as: BMJ 2010;340:c1044

William Bruce Thomson

Former consultant physician Wycombe and Amersham Hospitals, Buckinghamshire (b 1927; q St Mary’s Hospital, London, 1951; BSc, MD, FRCP), d 22 August 2009. Qualifying with honours in pathology, William Bruce Thomson (“Bruce”) obtained his MD a year later. After national service, he pioneered peritoneal dialysis for renal and severe cardiac failure at St Mary’s. Consultant in South Buckinghamshire during 1963-89, he was soon also the first district clinical tutor and active regionally and nationally in instigating postgraduate education. Later he was chairman of the Oxford Regional Medical Advisory Committee, regional adviser for the Royal College of Physicians, president of the Chiltern Medical Society, and vice chairman of Wycombe District Health Authority. In retirement, he was treasurer of the Friends of the Stanley Spencer Gallery. He leaves a wife, Wendy, and three children.

John Kelleher

Cite this as: BMJ 2010;340:c1043

Eric Wilkes

Emeritus professor of community care and general practice Sheffield University (b 1920; q Cambridge/St Thomas’s Hospital, London, 1952; MBE (Mil), OBE, FRCP, FRCPG, FRCPsych), d 2 November 2009. After a glittering acting career at Cambridge and decorated service in the second world war, Eric Wilkes returned to Cambridge to study medicine. He was a rural general practitioner in Derbyshire for 18 years until his appointment at Sheffield. Author of the 1980 Wilkes report on terminal care, he founded the first modern hospice outside London, as well as the first day hospice. Co-chairman of Help the Hospices, he instigated the National Council of Hospice and Palliative Care Services, and helped set up palliative care services overseas. A master of words, he never forgot a doctor’s social responsibilities. He leaves a wife, Jess; three children; and six grandchildren.

Ruth Ostrovskis-Wilkes

Cite this as: BMJ 2010;340:c991

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