Allan Rosenfield
A global advocate for women’s health and human rights

Allan Rosenfield devoted his life to improving public health care for women around the world. In simple terms, he thought that pregnant women and mothers in the poorest nations of the world deserved the same focus from public health care as their children. And he believed that women should be treated as equals to men. “More than almost anyone I have ever known, Allan had a burning sense of mission,” said Deborah Maine, an editorial assistant to Rosenfield in the late 1970s at Columbia University in New York and later a colleague.

That sense of mission, as an advocate for women, meant involvement in many public health organisations, directing various programmes as dean of Columbia’s Mailman school of public health, and “travelling like crazy” around the world, said Dr Maine, now a professor of international health at Boston University’s school of public health.

“He would fly to Thailand for a half day meeting and fly back home,” she says. “He was involved in hundreds of things, and he had hundreds of people around the world always emailing him asking for his advice and he would answer them. He had so much mental energy. I could not keep up with him.”

Rosenfield was born in Brookline, Massachusetts, in 1933, the son of a successful Boston obstetrician-gynaecologist. He earned a bachelor’s degree in biochemistry in 1955 from Harvard and his medical degree in 1959 from Columbia.

After completing his residency in obstetrics and gynaecology in the 1960s, he worked in Nigeria and then Thailand, advising the Thai Ministry of Public Health, an assignment that became a turning point in his life. Partly because of a shortage of doctors to prescribe contraceptives, families on average had seven children and the nation a 3.3% rate of annual population growth. He helped convince Thai officials to allow midwives to dispense contraceptives. By 2000 the average number of children in each family dropped to 1.6 and the growth rate to 0.8%.

In a 2006 interview with the New York Times, Rosenfield lamented that women around the world often were still burdened by the same problem that he had seen four decades before: “The great tragedy, the great challenge, is the same one I saw in Nigeria and Thailand in the ’60s—that in the developing world, girls and women don’t have the power to say no” (www.nytimes.com, 12 June 2006, “Frail and ill, but still focused on global health”). In 1975 Rosenfield joined Columbia as professor of public health and obstetrics-gynaecology and as head of the new Center for Population and Family Health. While strengthening the centre’s global programmes he also implemented family planning and reproductive health programmes in upper Manhattan. And he continued to travel the world, seeing that although programmes for children were improving, the wellbeing of mothers was often ignored, leading to the deaths of millions of women during pregnancy and childbirth. “He used to talk about how upset this made him,” said Dr Maine. “One day we were standing in the hall outside Allan’s office talking about it, and we decided to write an article.”

The paper was published in the Lancet in 1985 as a call to action (1985;i:83-5). Referring to the field of maternal and child health (MCH), the paper’s title was “Maternal mortality—a neglected tragedy: where is the M in MCH?” The paper had a huge impact, encouraging public health officials around the world to divert more resources for maternal health care.

In 1986 Rosenfield was made dean of the school of public health. He transformed what had been a small department into one of the top public health schools in the United States. In the late 1990s Rosenfield saw that women were being overlooked by HIV programmes to prevent mother to child transmission (pMTCT). In 2000 he once again spurred the international community to action with a paper presented at the world AIDS conference in South Africa titled “Where is the M in pMTCT?”

In late 2005 Rosenfield was diagnosed as having amyotrophic lateral sclerosis. He also had myasthenia gravis. A robust man, who loved skiing and tennis, he was soon confined to a wheelchair. He told the New York Times in 2006, “Just getting up in the morning is a chore, and I need help showering.”

Josh Ruxin, now an assistant clinical professor at Mailman School of Public Health and director of the centre for global health and economic development said, “The key lesson I took from Allan’s professional history was that one person working with a committed government could dramatically alter a nation’s health. Allan did that in Thailand, and it provided impetus for me to move to Rwanda.” Many others around the world were influenced by Rosenfield, he said, adding, “Allan took glee in making introductions and watching the results of his unusual alchemy. He helped with letters of recommendation, scholarships, funding, and connections.”

Rosenfield officially retired in June, but Dr Ruxin said, “I saw him on one of his last days at the office in September. He was struggling but still able to smile.”

He leaves a wife, Clare, a son, and a daughter.

Ned Stafford
Allan Rosenfield, obstetrician-gynaecologist (b 1933, q 1959 Columbia), died on 12 October 2008. Cite this as: BMJ 2009;338:b106
OBITUARIES

John Victor Clark

Former consultant histopathologist Northampton General Hospital (b 1939; q University College, London, 1963; FRCS, DOBstRCoG, MRCPath), died from metastatic pancreatic cancer on 8 September 2008. John Victor Clark trained in histopathology and haematology at St George’s and in Nottingham, Winnipeg, and Edinburgh before being appointed to his substantive consultant post at Northampton in 1972. His arrival was the start of a new era for histopathology, and, being a perfectionist, he brought a more rigorous approach to the subject. He set up a large cervical cytology service and, unusually for a histopathologist, founded and ran a colposcopy clinic. He was also secretary of the Northampton division of the BMA. He faced his final illness with unflinching courage. He leaves a wife, Lorna; four children; and five grandchildren.

Robin Sheppard, Emma Clark

Cite this as: BMJ 2009;338:b54

Desmond Peel Greaves

Former consultant ophthalmic surgeon University College and Moorfields Eye Hospitals, London (b 1920; q Sheffield 1944; BSc (Hons), FRCS, FRCOphth), d 11 March 2008. Desmond Peel Greaves was Edgar Allen Scholar at Sheffield. After qualification and service in the Royal Air Force, he worked at Moorfields Eye Hospital from 1948. He was consultant from 1952 at University College Hospital and from 1960 at Moorfields until his retirement in 1985. Active in the Ophthalmological Society and European Ophthalmological Society, he was also the vice dean of the Institute of Ophthalmology. He could operate using either hand, and advocated this skill in his juniors. He was an accomplished pianist since his student days, continuing, with his wife, to have lessons into his 80s. Predeceased by his wife, Barbara, in 2006, he leaves two children and four grandchildren.

Francis Greaves

Ellis Shenken

Cite this as: BMJ 2009;338:a3062

John Anthony Morgan

Consultant thoracic surgeon Bristol Royal Infirmary (b 1946; q Cambridge/Guy’s Hospital, London, 1971; FRCS), died from sudden cardiac death on 16 September 2008. John Anthony Morgan (“Tony”) was Duckworth Exhibitioner of Jesus College, Cambridge. After graduation, he trained in general and cardiothoracic surgery in London but moved to Groote Schuur Hospital in Cape Town in 1976. He was consultant in thoracic surgery for six years, and in 1987 moved to Germany, eventually becoming head of the department of thoracic and vascular surgery in Frankfurt/Oder. In the late 1990s Tony joined the department of thoracic surgery in Bristol, his two main areas of expertise being endobronchial stenting and surgery for peptic deformities. His passions included organ and classical music and fast cars. He leaves a wife, Ann, and three children.

Tim Batchelor

Mark Yeatman

Martin Hetzel

Cite this as: BMJ 2009;338:b54

Rosemary Pettersson (née Atkinson)

Former consultant geriatrician Law District General Hospital, Lanarkshire (b 1939; q Royal Free 1964), died on 26 November 2008, six months after an incapacitating stroke. After qualifying, Rosemary Pettersson (née Atkinson) (“Rosie”) moved to central Scotland. With Forth Valley Health Board she performed postnatal clinics and school medicals. In 1973 she was appointed associate specialist in care of the elderly at Stirling Royal Infirmary, where, in collaboration with senior social workers, she organised and ran a respite scheme for carers of dependent elderly people living at home. As consultant in Law in 1986, she substantially developed the department, particularly organising a geriatric orthopaedic recovery unit, probably the main reason for her merit award. She leaves a husband, Mike; two daughters; and four grandchildren.

Mike Pettersson

Cite this as: BMJ 2009;338:b55

John Alexander Tulloch

Former consultant physician Stracathro Hospital, Angus (b 1921; q Edinburgh 1943; MC, MD, FRCP), d 11 October 2008. John Alexander Tulloch graduated six months early to become a medical officer with a commando unit. One of the Originals, he was awarded the Military Cross at Brachterbeek. After the second world war he did pioneering anticoagulation research at Cornell University, New York, before becoming senior registrar in medicine at Edinburgh Royal Infirmary in 1952. He was senior lecturer at University College, West Indies, from 1955 until he became professor of medicine at Makerere University College, Uganda. Returning to Scotland in 1966, he was instrumental in bringing undergraduate clinical teaching to Stracathro. He wrote over 100 medical papers and books. He leaves a wife, Sheena, and five children.

David Dorward, Morag Dorward

Cite this as: BMJ 2009;338:b60

Arthur Mayow Wadsworth

Former general practitioner Kidderminster (b 1915; q Birmingham 1938), d 13 June 2008. Arthur Mayow Wadsworth (“Sam”) joined the Royal Army Medical Corps in 1939. In Germany he served in a mobile field unit in Montgomery’s army and was mentioned in dispatches. After the second world war he worked briefly at the Women’s Hospital, Birmingham, before joining an old army colleague in practice in Kidderminster. He became senior partner in the late 1950s and retired in 1980. Sam was a founder member of the Royal College of General Practitioners, a Balint group member, and clinician to the Maternity Hospital in Kidderminster for some 25 years. He served as a magistrate for 15 years. Predeceased by his wife, Lilian, in 1991, he leaves three children and four grandchildren.

Timothy Wadsworth

Cite this as: BMJ 2008;337:a3053

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