

Jack Tinker

Founded modern intensive care medicine in Europe

In the 1970s and 1980s Jack Tinker directed the Middlesex Hospital's intensive therapy unit, where he is widely credited with setting the standards of modern intensive care in Europe. Before Tinker's appointment in 1974 intensive care was a rudimentary clinical discipline: patients were managed on side wards with little or no continuity of care. It was left to anaesthetists (often at registrar level) to adjust the ventilator and manage fluids, while ad hoc single organ doctors provided advice about their own particular area of expertise.

Tinker changed all that, becoming one of the first full time intensive care consultants in the United Kingdom to run a dedicated unit. He was an expert on ventilation, bringing with him the first of a new breed of computer driven ventilators. Tinker staffed his unit with a team of dedicated doctors and nurses, whom he personally trained in the evolving discipline. "Jack was a great leader: he could bring people together, identify a common goal, inspire them, delegate, and make them do stuff. He brought the best out in all his staff," remembers David Bihari, one of his senior registrars.

Robert Banks, his first senior registrar, said, "He was the most approachable and relaxed consultant I had ever met. I had never previously come across a doctor who'd heard of Stockport County Football Club, let alone seen them play, until I met Jack."

Intensive care

Through his authorship of three leading textbooks and the coordination of multiple training courses, Tinker had a far reaching influence on today's generation of intensive care physicians and nurses. In 1971 he helped to set up the UK Intensive Care Society and did much to establish intensive care as a physician led medical specialty in its own right.

Research highlights of Tinker's time include introducing the Swan-Ganz catheter to measure pulmonary artery pressure and the cardiac output of critically ill patients. In a key paper published in the *New England Journal of Medicine* in 1987 Tinker and colleagues described how disturbances in microcirculatory blood flow led to organ failure and death in some intensive care patients (1987;317:397-403).

Tinker grew up in Lancashire, attending Eccles Grammar School. His will to succeed academically was driven by a desire to please his mother, Jessie, a school teacher who had serious heart problems



A turning point came in 1966, when he caught hepatitis B from a patient receiving dialysis. The now notorious Manchester outbreak killed nine people

as a result of rheumatic fever. Qualifying in 1960, Tinker worked first as a cardiothoracic surgeon at Manchester Royal Infirmary, but on discovering a slight hand tremor switched to cardiology and general medicine. The distinction of achieving fellowship of the Royal College of Physicians and the Royal College of Surgeons, made him equally at home with both physicians and surgeons. "His work ethic was such that as a junior doctor in Manchester he took real pleasure in working a one in one [on call all the time] and always said I had it particularly easy when I complained about one in threes," remembers his son Andrew, now professor of molecular medicine at University College London.

A turning point came in 1966, when he caught hepatitis B from a patient receiving dialysis. The now notorious Manchester outbreak killed nine people and contributed to the recognition that dialysis needed to be undertaken in dedicated units. Tinker was in a coma for 48 hours, his life saved when the liver specialist Shelia Sherlock visited from London to advise on treatment. Battling depression, Tinker switched to research, working between 1967 and 1969 with James Black at ICI Pharmaceuticals on the development of β blockers. The move to London came in 1969 when he was appointed as a lecturer at the Royal Postgraduate Medical School at Hammersmith.

Tinker bowed out of intensive care shortly after his 50th birthday, becoming dean of postgraduate medicine at the North East Thames Regional Health Authority. Here he was among the first to institute proper training programmes for house officers and junior medical staff, introducing the

concept of accredited training posts and proper study leave.

In "retirement" Tinker continued to work at the Royal Society of Medicine and was dean between 1998 and 2002. Under his leadership the academic conference programme increased from 11 large meetings in 1995 to more than 150 conferences and courses in 2002.

Founding editor

Tinker had a lifelong interest in medical publishing. In 1975 he was founding editor of the *European Journal of Intensive Care Medicine*, and from 1984 until his death he edited the *British Journal of Hospital Medicine*. "Jack's great skills were that not only did he possess an almost encyclopedic knowledge of medicine, but also he had quite extraordinary prowess as an enabler and networker. He seemed to know everyone," remembers Mark Allen, publisher.

Additional part time posts included being a medical consultant for Sun Life of Canada and Rio Tinto and a medical adviser to the independent London Clinic, where he planned the intensive care unit. Hobbies included marathon running and watching cricket and football—he was a member of the MCC (Marylebone Cricket Club, Lords) and held a season ticket for Chelsea Football Club.

He leaves his wife of almost 50 years, Maureen, and two sons.

Janet Fricker

Jack Tinker, intensive care physician (b 1936; q 1960 Manchester, FRCP, FRCS Glasgow), died on 14 April 2010 from prostate cancer.

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William Harry Ruxton Auld



Former consultant medical biochemist Crosshouse Hospital, Ayrshire and Arran Health Board (b 1921; q Aberdeen 1944; MD (Hons), FRCPath, FRCP), d 9 February 2010.

After house jobs, William Harry Ruxton Auld (“Harry”) was appointed lecturer in clinical chemistry and pathology in Aberdeen. He was consultant chemical pathologist to the Chelsea and Kensington group of hospitals in 1956, returning to Scotland in 1961 as consultant in medical biochemistry until his retirement in 1986. His special interests were in metabolic and endocrine medicine, and he published papers until he retired. His particular strength was providing a clinical service to consultant colleagues across all specialties. A calm but effective chairman of committees, he was regarded as a wise counsel. He leaves a wife, Nan; two children; and six grandchildren.

Charles D Auld

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Ian Keith Campbell



Former general practitioner Heacham, Norfolk (b 1945; q St George’s Hospital, London, 1969; LVO, BSc, DObstRCOG, FRCGP), died from mesothelioma on 24 December 2009.

After an intercalated BSc in pharmacology and qualification, Ian Keith Campbell practised for two years in Vancouver, Canada. Returning to the UK, he soon became GP principal at Heacham Group Practice, where he remained until retirement in 2005.

Ian was a leader, being a trainer, course organiser, and chairman of the regional audit group. He established three purpose built surgeries and schemes to help patients, leading GP fundholding and computerisation. He also published five academic papers. During 1991-2007 he was apothecary to the Royal Household at Sandringham, and he became a liveryman of the Worshipful Company of Apothecaries in 2003. He leaves a wife, Averil, and three children.

Jes Russell

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Alexander Macdonald Clark

Former family practitioner Pubnico, Nova Scotia, and staff member Yarmouth Regional Hospital, Nova Scotia, Canada (b 1922; q Birmingham 1947; SBStJ), d 4 December 2009. After qualification and service in the armed forces, Alexander Macdonald Clark (“Sandy”) was a general practitioner in Kendal until emigrating to Canada in 1966. He practised in Pubnico, Nova Scotia, and was on the staff at Yarmouth Regional Hospital until retirement in 1994. He was active in the St John Ambulance Brigade for 40 years, becoming serving brother, and was awarded the Queen’s Golden Jubilee Medal in 2002 for his service to the community. A founding member of the local Lions Club, he also volunteered at Nova Scotia Museum. His passion was collecting Nova Scotia postal history, mourning covers, and disinfected mail. He leaves three children and eight grandchildren.

A J Clark

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Neil Harrison Cox



Consultant dermatologist Cumberland Infirmary, Carlisle (b 1956; q Liverpool 1980; BSc Hons (First Class)), d 8 December 2009.

Appointed consultant in Cumbria in 1991, Neil Harrison Cox became an important figure in British dermatology. As a clinical dermatologist, he had few contemporary rivals. He published nearly 200 peer reviewed papers, and edited or wrote atlases, textbooks, and journals. His clinical research twice won the British Association of Dermatologists’ Wycombe prize, and he influenced UK practice through his leading role in clinical guideline development. Neil’s achievements were despite chronic renal failure and continuing ill health after transplantation, combined with his struggle to safeguard the secondary care base of dermatology in Cumbria. Neil was also a dedicated fisherman and an aficionado of both rock and roll and fine wine. He leaves a wife, Fiona, and two children.

Colin Munro

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David Martyn Lewsey

Former general practitioner Tetbury, Gloucestershire (b 1937; q Guy’s Hospital, London, 1963), died from advanced cerebrovascular disease and pneumonia on 12 March 2010. After qualification, David Martyn Lewsey worked in Manchester as an anatomy demonstrator and developed his love of general practice doing locums. After time abroad he firstly worked as a general practitioner in Denbigh and finally came to Tetbury in 1970. He was involved in local community hospitals, working as a GP anaesthetist for some years, but his first love was general practice. He was an innovator and leader of his team, and will be missed by his community. He leaves a wife, Barbara; three children; and six grandchildren.

Tony Walsh

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Cyril John Elmes Monk

Former consultant orthopaedic surgeon Liverpool University Hospitals (b 1929; q Witwatersrand, Johannesburg 1956; MChOrth, FRCS), d 7 January 2010. Cyril John Elmes Monk (“John”) came to Britain to start an acting career but soon found his vocation in medicine.

After qualification in Johannesburg, he returned to the UK to specialise in orthopaedics. In 1964 he moved to Liverpool, where he spent the rest of his career, becoming an important figure in surgical circles. He published two popular handbooks and contributed to a *Textbook of Nursing* and numerous articles and reviews. He promoted the Monk bipolar prosthesis in hip replacement surgery, a new approach adopted worldwide, and established for children a renowned orthopaedic clinic and research unit for hip problems, particularly Perthes’ disease. He leaves a wife, Anne; three children; and one grandchild.

Robert Owen

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Philip Samuel Weston Wilkins



Former consultant geriatrician Portsmouth Hospitals (b 1925; q Birmingham 1949; DCH, FRCP), died on 15 February 2010 from effects of old polio, collapsed spinal vertebrae, and myeloma.

Philip Samuel Weston Wilkins developed polio as a child, with resulting difficulty in walking, but as a Quaker he was stoical and made light of it. After house jobs, he trained in paediatrics and then changed to general medicine and geriatrics. Appointed consultant in 1962, he helped to develop a first class geriatric service and was instrumental in developing a palliative care ward in the department. He also became president of Abbeyfield Society in Portsmouth, and was chairman of the BMA’s Portsmouth division. Predeceased by his first wife, Barbara, and two children, he leaves his second wife, Rosemary; two children from his first marriage; and four grandsons.

John Owen

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