

Peter Goodwin

Successfully campaigned to legalise physician assisted dying and used the Oregon Death and Dignity Act himself

Peter Goodwin, family doctor (b 1928; q 1951, University of Cape Town Medical School), died on 11 March 2012.

In the months before Peter Goodwin's death, he described chairing the committee that passed the first legislation in a US state to allow doctors to help patients to die, in 1994, as "the most gratifying work I have done in my entire life." The Oregon Death with Dignity Act permits physician assisted dying and encourages palliative and hospice care. Since 1997, 935 people have had prescriptions written under the act, and 596 patients have died from taking drugs prescribed under the act (<http://public.health.oregon.gov/ProviderPartnerResources/EvaluationResearch/DeathwithDignityAct/Documents/year14.pdf>). Washington and Montana have adopted similar legislation. "The people the law has helped; the peace of mind it has brought to patients and doctors—nothing has given me more gratification," said Goodwin.

Goodwin died on 11 March at his home in Portland, Oregon, aged 83, ending his life on his terms, with the help of a legal, lethal prescription of drugs and the best palliative care and surrounded by his family. However, his colleagues emphasise that Goodwin's life cannot be simplified. "He was foremost a fine physician," said Barbara Coombs Lee, president of Compassion & Choices, a charity that helps patients who are seeking assisted dying. "He only became an activist when he learnt about death and dying at the bedside." In 1989 Goodwin had joined the Hemlock Society, which became Compassion & Choices, and with which he was involved until he died.

Vegetative state

In 2006 Goodwin was diagnosed as having a rare, debilitating brain disorder, corticobasal ganglionic degeneration. "I've basically lost the function in my right hand, and I have a tremendous tremor in it as well. And my left hand is becoming more and more affected . . . My legs are . . . So I have difficulty walking, and more and more difficulty at times knowing where my right arm is, and it does all sorts of things unexpectedly and independently. I'm determined that I'm not going to die the way this disease would force me to die, which is in a vegetative state," he said.

Many obituaries about Goodwin describe the end of his life as "assisted suicide," but it was a term that Goodwin came to hate. The movement that matured after the passage of the Oregon Death with Dignity Act in 1994 extended palliative and hospice care, and it was based on compassion



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and patients' self determination. He considered the term assisted suicide "an affront, implying mental illness," said Ms Coombs Lee. "It's an outdated term and extremely disrespectful."

In 2002 the attorney general, John Ashcroft, tried unsuccessfully to use the Controlled Substances Act to suspend the licences of doctors who prescribe lethal drugs. The Oregon act was also challenged by the George Bush administration, but in 2006 it was upheld by the Supreme Court.

Opponents had predicted that huge numbers of Oregonians would rush to end their life; so far that has not happened. Nothing about the way Goodwin ended his life was impulsive. He worked closely with his doctors and adjusted his drugs so he could live comfortably for as long as possible. He used palliative care. He considered hospice care but already had access to all the services that that would provide at his sheltered housing. "Therefore, in typical Peter Goodwin fashion, he decided that the money could be better spent on a less fortunate client," said Eric Walsh, associate professor of family medicine at Oregon Health Sciences University.

Walsh trained under Goodwin and called him a "cornerstone faculty member, fantastic, enthusiastic, and a relentless teacher." Walsh added that Goodwin insisted on the primacy of the doctor-patient encounter "and not technology." Walsh considered that Goodwin's biggest achievement

was convincing the Oregon Medical Association not to take a position on the assisted dying legislation.

Feel for tissue

Nick Gideonse, assistant professor of family medicine, at the university's Richmond Family Health Center, first met Goodwin in the operating room in 1991, when Gideonse was training in general practice. He remained a friend to Goodwin for several years, lastly as his doctor near the end of his life. "I remember his very deft hands, and he clearly had a feel for tissue," said Gideonse, recalling him doing a lung procedure. "The progressive loss of his hands was very hard on him, and he never got used to it. He had some pretty bad days, but we were able to extend his life many times, by months."

Goodwin was born in London on 11 December 1928 and grew up in South Africa. He graduated from the University of Cape Town in 1951 and became a general practitioner in Queenstown, South Africa. There, he recalled, "Death was ever present." He and his wife Erica opposed apartheid and left. Goodwin took up surgery at Nuffield College and became a fellow of the Royal College of Surgeons of Edinburgh in 1959. He came to the United States in the 1960s, becoming a diplomate in family practice and faculty member at Oregon Health Sciences University.

Goodwin's wife Erica died in 2008; he leaves two daughters and two sons.

Laura Newman

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John Cleland



Former consultant cardiac surgeon, Royal Victoria Hospital, Belfast (b 1935; q Belfast 1958; FRCS(Edin), FRCS(Eng)) died from renal failure on 18 January 2012.

John Cleland (“Jack”) trained in general surgery in Belfast and in 1965 went to the Mayo Clinic, Rochester, Minnesota, for three years, specialising in cardiac surgery. He returned to Belfast in 1968 as senior registrar to the new cardiac surgical unit. He was appointed consultant in 1971 and from 1973 headed the ever expanding unit until his retirement in 1995. He undertook the full range of cardiac surgery but his special interest was in heart valve work. He is survived by his wife, Pat, and five children.

Richard Clarke

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Mary Ducrow



Former anaesthetist Birmingham Hospitals (b 1930; q 1965), d 1 August 2011.

Born in Birmingham, Mary Ducrow came to medicine as a mature student, after working in a library, training as a nurse, and eventually becoming ward sister of a metabolic ward. She spent two years studying for A levels and was accepted as a student at Birmingham Medical School in 1960. After qualifying she decided to specialise in anaesthesia. She took early retirement to nurse her father at the end of his life and later undertook charity work. Her main passion was music, although she did not play an instrument. She herself wrote in her own obituary, of which this is an edited version: “If there were

such a thing as an ‘end of life report’ mine would read: ‘About average, could have done better.’”

Mary Ducrow

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William Malcolm Ferguson



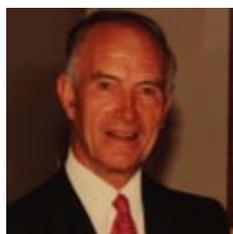
Former general practitioner, Cowdenbeath (b 1916; q Edinburgh 1939), d 6 October 2011.

William (“Willie”) Ferguson qualified as a doctor during the second world war and served in the Royal Naval Reserve in a variety of ships from minesweepers to liners. With the formation of the NHS, Willie took over a single handed practice in Cowdenbeath, Fife. He and his wife, Morag, raised three children, and in 1976 they retired to the village of Scotlandwell. Predeceased by Morag he is survived by two sons and seven grandchildren.

Iain Ferguson

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Peter J Gormley



Consultant ophthalmologist and otolaryngologist, Mater Hospital Belfast (b 1920; q Queen’s University Belfast 1944), d 8 June 2011.

Peter J Gormley pioneered day case cataract surgery in Northern Ireland in 1984 and was at the heart of initiatives that led to the creation of the Civil Rights Association. In 1948, after a year’s postgraduate training in London between Moorfields Eye Hospital and the Royal National Hospital, Peter was appointed at the age of 28 as consultant in ear, nose, and throat medicine and

ophthalmology in the Mater Hospital in Belfast. Retired from the NHS in 1987, he continued to see patients at his home, where he ran a private practice until age 83. Peter died after a fall at his home. Predeceased by his wife Doreen in 1997, he leaves nine children and 17 grandchildren.

James Gormley

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Robin Evelyn Lawrence



Former consultant radiologist St Mary’s Hospital (b 1918; q Leeds 1942), died of old age and the complications of diabetes on 3 January 2012.

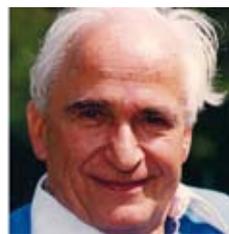
After qualifying Robin Evelyn Lawrence served with the Royal West African Frontier Force in West Africa, India, and Burma. After the war he trained in radiology in Manchester and Leeds. In Paddington he undertook a heavy workload but did not retire, continuing in locum duties until his 80th year. His interests were aviation (he held pilot licences), photography (clinical and general), and worldwide travel. Predeceased by Billie, his wife of 69 years, he is survived by two sons and two grandsons.

RS Lawrence

C Lawrence

Cite this as: BMJ 2012;344:e1418

Andrew Charles Skarbek



Consultant psychiatrist in psychotherapy Runwell, Rochford, and Basildon Hospitals (b Lwów 1925; q St Mary’s Hospital 1954; PhD), d 16 November 2011.

Andrew Charles Skarbek escaped from Poland and arrived in the UK in 1946.

After training at the Maudsley and Cane Hill Hospitals and at the Institute of Psychoanalysis, Andrew completed a PhD on the effects of drugs on speech at the psycholinguistics unit at University College London in 1967. In addition to his hospital post he also worked with children with language and communication problems and advised the National Association for Mental Health on residential establishments. He was one of a generation of psychiatrists who helped develop psychodynamic psychotherapy services in the NHS and belonged to the independent group of psychoanalysts in the British Psychoanalytic Society and a Freud-Jung study group. He is survived by his partner, Anna Teicher, and seven children.

Peter Shoenberg

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Cyril Geoffrey Arthur Thomas



Former consultant microbiologist, Norfolk and Norwich Hospitals (b 1924; q Oxford and St Thomas’s, London 1948; MA, FRCP, FRCPath), died from cardiovascular disease on 17 January 2012.

Cyril Geoffrey Arthur Thomas won many prizes at St Thomas’ Hospital. After National Service in the Royal Air Force he held lectureships at St Thomas’ and Guy’s and was a John Radcliffe fellow in New York. In 1961 Geoffrey was appointed consultant microbiologist at the Norfolk and Norwich Hospitals and developed effective methods for disinfection and sterilisation. His book, *Medical Microbiology*, published in 1964, ran to six editions. Geoffrey was elected chairman of the consultant staff committee and president of the Norwich Medico-Chirurgical Society. He was a railway enthusiast and keeper of pet tortoises. He leaves his wife, Barbara; three children; and four grandchildren.

Philip Roberts

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