

Mikhail Izrailevich Perelman

Thoracic surgeon and specialist in pulmonary tuberculosis who operated on Soviet leaders and criticised WHO's TB programme

Mikhail Izrailevich Perelman, thoracic surgeon (b 1924; q Yaroslavl State Medical Institute 1945), died from a pulmonary thromboembolism on 29 March 2013.

Mikhail Izrailevich Perelman was a pioneer of cardiac and thoracic surgery in the former Soviet Union. He was born in Minsk and graduated from Yaroslavl Medical Institute in 1945, after which he worked at the institute as an assistant professor of anatomy and surgery until 1951. In Yaroslavl he defended his *kandidatskaya* (PhD) dissertation, and performed one of the first successful cardiac operations in the former Soviet Union—ligation of a patent arterial duct.

From 1951 to 1954 he was a chief surgeon in Stcherbakov (now Rybinsk) and medical director of a municipal hospital. He was widely respected even by local criminals as described in his book of memoirs, *Grazhdanin Doctor* [A Citizen Doctor] (Moscow, 2009).

In 1954 Perelman moved to Moscow and began his career as an assistant professor of operative surgery and topographic anatomy at the First Moscow State Medical Institute (now the I M Sechenov First Moscow State Medical University). He continued as an associate professor at a course for lung surgery of the Central Postgraduate Medical Institute (now the Russian Postgraduate Medical Academy) from 1955 to 1958. Between 1958 and 1962 he headed the department of pulmonary circulation at the Research Institute for Experimental Biology in Novosibirsk before returning to Moscow, where he spent the rest of his career. His *doctorskaya* dissertation (professorial thesis), defended in 1962, was on the subject of lung resection in tuberculosis.



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In 1963 Boris Petrovsky (obituary at *BMJ* 2004;328:1381) proposed Perelman as the head of the chest surgery department at the newly organised Research Institute for Clinical and Experimental Surgery (now the Russian Scientific Centre of Surgery B V Petrovsky). Perelman held this position for 18 years. He became a professor of surgery in 1964 and a corresponding member of Academy of Medical Sciences of the Soviet Union in 1980, obtaining full membership in 1986. He achieved international recognition for his work in the surgery of trachea and bronchi, lung, and mediastinal tumours, and experimental lung autotransplantation. The results were published in international surgical periodicals, and some of his books and book chapters were translated into English. Perelman invented a lateral intercostal, less traumatic, approach to lung lesions that became known as the “Russian thoracotomy.” A method he developed to achieve precise removal of lung tumours became known as the “Perelman operation.” New methods, techniques, and equipment—including ultrasound and cryogenic devices, laser surgery, and microsurgery—found their way into thoracic surgery. Perelman became a secretary general of the All-Union Society of Surgeons and an honorary member of many national and international surgical societies.

In 1964 Petrovsky introduced Perelman into the elite fourth main administration at the Soviet health ministry. His patients included Soviet leaders, writers, actors, and conductors. In 1971 he operated on a first deputy of Yuri Andropov, head of the KGB. Afterwards Andropov asked him if he needed anything. Instead of an apartment or a car, Perelman requested a visit to the US (at the time, travelling abroad was extremely restricted, especially for a Jewish doctor).

In 1982 Perelman took the chair of phthisiopulmonology at the I M Sechenov First Moscow

State Medical Institute. In 1998 he was appointed director of the Research Institute for Phthisiopulmonology and chief phthisiologist of the Russian Ministry of Health, and in the following year he became editor in chief of

Tuberkulyoz i bolezni legkikh [Tuberculosis and Lung Diseases], a leading Russian specialist journal. It was a time when WHO actively promoted the directly observed treatment, short course (DOTS) programme in Russia, which was based on outpatient, standard, short course treatment of patients with open lung tuberculosis. If the results of bacteriological examination of sputum were negative patients were considered healthy. Perelman called this

WHO programme absurd, insisting that TB should be treated surgically. He was named “a saviour of Russian phthisiology” because he managed to preserve the existing system of TB dispensaries.

Perelman performed more than 3500 surgical procedures and deliberately stopped operating after he was 75. He was a work fanatic. “A man survives if he knows how to work,” was one of his favourite sayings. He said he was resting during his business trips, having visited 45 countries where he delivered talks, consulted patients, and undertook surgery.

Predeceased by one of his twin sons from his first marriage and divorced from his first wife, he leaves his second wife, two sons, two grandsons, and his sister. His first wife, Tatiana Boguslavskaya, was a surgeon and anatomist, and his second wife, Inna Makarova, was a well known film actor. At the age of 63, Perelman fathered a third son, Alexei, with his scrub nurse. His ashes are buried at Novodevichy cemetery, near the graves of some of his famous patients and his mentor, Boris Petrovsky.

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N Balakumar

Former general practitioner Huddersfield (b 1939; q Colombo University, Sri Lanka, 1967), d 9 December 2012.

After obtaining his medical degree, N Balakumar ("Bala") worked in several posts in Sri Lanka before moving to the UK, initially with the aim of further training and returning to Sri Lanka. However, the ensuing civil unrest in his native country forced him to change his mind. After preliminary posts in orthopaedics, he became a general practitioner, working in Salendine Nook, Huddersfield. Bala was a devout Hindu, and his dream of setting up a temple in the north of England became reality in 1990. He leaves Sakunthala, his wife of 43 years; two daughters; a son; and two grandchildren.

Mahen Muthiah

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John Barnes



Specialist in public health and tropical diseases (b 1928; q St Bartholomew's Hospital, London, 1951; MRCS Eng, DPH Lond, MSc Lond, DTM&H Eng, DIH, MFCM RCO (UK)), d 5 February 2013.

John Barnes joined the army, for national service and subsequent officer training. In the Royal Army Medical Corps he specialised in public health and tropical diseases and went on many overseas postings. He left the army and became a civil servant, working in public health at the then Department of Health and Social Security in London. He took early retirement in the mid 1980s after a crash left him permanently disabled. He undertook his final trip to hospital with an acceptance that all might not end well. Predeceased by his second wife, John leaves his first wife, three children, two stepchildren, eight grandchildren, and five step grandchildren.

John Barnes, Susan Barnes

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Brian Cameron Campbell



Consultant in general medicine (b 1947; q Glasgow 1971; MD, FRCP Glas, FRCP Ed), died from pulmonary embolus and septicaemia on 10 September 2012.

Brian Cameron Campbell specialised in cardiovascular disease and clinical pharmacology, publishing widely on the therapeutics of hypertension and haem metabolism. Brian left Glasgow in 1985 and was employed in a series of locum consultant positions for several years. In 1998 he became a consultant in general medicine at the Royal Infirmary of Edinburgh before moving to the city's Western General Hospital. He loved fine food, fine wine, cars, and overseas travel. He had a strong faith and was also keenly interested in politics and applied to be a prospective parliamentary candidate for his local constituency. His application was declined because Brian was felt to be "too conservative for the Conservative Party." He leaves a wife, Anne.

Anne E Campbell, Mark WJ Strachan

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Michael Dean



Interventional radiologist (b 1937; q Jesus College, Cambridge, and Westminster Medical School 1961; DMRD Eng, FRCR, FFRCSI), died from complications of heart disease on 28 February 2013.

Michael Dean was appointed consultant radiologist at the Royal Shrewsbury Hospital in 1967 and worked there until his final retirement in 2011. He developed an early interest in the newly emerging subspecialty of interventional radiology, with particular expertise in

the difficult area of salvage angioplasty for severe peripheral vascular disease.

An effective committee man and negotiator, he was involved with the Royal College of Radiologists and produced several textbooks. A keen advocate of the professional partnership between doctors and patients and of transparency, he played a major part in implementing the Data Protection Act 1998, the Health and Social Care Act, and the Freedom of Information Act 2001, ensuring that x ray reporting was regarded as part of diagnostic evidence. He leaves his wife, Vera, and their children.

John Reidy

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Donald John Carr Horwood

Former general practitioner and surgeon (b 1924; q London 1951; MRCS), d 1 April 2013.

Donald John Carr Horwood ("Don") and his young dentist wife, Ruth, moved to Uganda in 1955. The family moved to New Zealand in 1963 and returned there in 1971, after further spells in Africa and Canada. Don took a full time position as Opotiki's then only general practitioner in 1974. He is remembered as a doctor who freely gave of his time and energy; who helped families deal with poverty and disability; who saw a limping child in the street and stopped, made her take him to her mother, explained the slipped epiphysis, and arranged surgery to repair the damage; who supported families with budgeting advice; and who set up a scholarship that still helps Maori women in tertiary education. He leaves Ruth and two sons.

Jo Scott-Jones

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Pradeep Natarajan

Anaesthetist (b 1973; q St Mary's Hospital Medical School, London, 1998; MRCS), died in a road traffic accident on 8 July 2012.

Pradeep Natarajan ("Prad") initially completed a surgical SHO rotation and was subsequently appointed to the anaesthetics SHO rotation between Barts, the Royal London, and Homerton hospitals. In late 2011 Prad took time out to work with the charity Médecins Sans Frontières as an anaesthetist



in South Sudan. His proudest, most nerve-racking memory there was the night he relied on his previous surgical training to perform an emergency caesarean section, where he acted as both anaesthetist and surgeon, dealing simultaneously with a major haemorrhage and a failed spinal block (mother and baby both did well). He died while riding a motorcycle to work a night shift at Queen Charlotte's Hospital, London. He leaves his parents; a brother; a sister; two nephews; and his fiancée.

Pavithra Natarajan

Cite this as: BMJ 2013;346:f2763

John Andrew Pickering



Former general practitioner (b 1938; q Sheffield 1961; OAM, Grad DipHA, FRACGP, FRACMA), d 27 August 2012.

John Andrew Pickering went to Australia to work as a resident medical officer and then general practitioner in 1964. Moving to Dimboola in 1979, he ran the general practice and hospital with the assistance of many general practice registrars. He received several awards for his work in rural and regional areas. John retired from full time practice in 2010 after developing a rare form of bladder cancer, although he continued to do short term locums around Australia. Dimboola created the Pickering Gardens in honour of the dedication of John and his wife, Annette, to the town and named the medical clinic the John Pickering Medical Centre in his memory. He leaves Annette as well as two children and three grandchildren from a previous marriage.

Alan Wolff

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