

# John Goldman

Haematologist who developed innovative treatment approaches for leukaemia

**John Michael Goldman, professor of haematology (b 1938; q Oxford University 1963), died from cancer of the bile duct on 24 December 2013.**

John Goldman became interested in chronic myeloid leukaemia (CML) at a key moment in the understanding of the disease. At the beginning of his career CML was fatal, with average life expectancy after diagnosis being around five years. The only treatment available was chemotherapy—which controlled the symptoms but did not prolong life. Goldman joined the haematology department at Hammersmith Hospital just as the genetic basis for the disease was being discovered.

Edward Donnall Thomas, a physician in the United States who eventually won a Nobel prize for his work, had started to publish papers showing the promising results of bone marrow transplantation on patients with leukaemia. Goldman became interested in this, and in the late 1970s he became the first UK doctor to perform a transplant from a matched sibling donor. This patient recently celebrated the 35th anniversary of that procedure.

Because 70% of patients did not have a matched relative donor, Goldman, amid much professional scepticism, began to consider casting the net wider and using bone marrow from unrelated donors. The increased risk of transplant related complications when using cells from unrelated donors prompted Goldman and colleagues at the Hammersmith to pursue the use of monoclonal antibodies to remove “dangerous” immunologically active cells from the donated stem cells before the procedure. They soon realised, however, that these cells performed an important role in the ongoing eradication of the disease and that without them the primary disease was more likely to recur.

Jane Apperley, who went on to succeed Goldman at the Hammersmith, was a junior doctor in the department at the time. She says of Goldman, “What was very impressive to me was his incredible honesty. We had done something in good faith which unfortunately had a detrimental effect. He published it and talked about it at conferences.” This honesty paved the way for a solution and was an important step in improving the outcome of transplantation, she adds.

Realising that leukaemia cells remained in patients’ bodies even after high dose chemo-



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radiotherapy and that the imminent relapse needed to be detected quickly, Goldman encouraged investigators in his laboratory to develop a polymerase chain reaction assay to detect minute levels of residual leukaemia. This was a real breakthrough and led to much improved management of patients after transplantation.

His work with unrelated donors led to his lifelong association with the Anthony Nolan Trust, which had been set up in the 1970s by Shirley Nolan, who was looking for a bone marrow donor for her son. Goldman was appointed medical director of the trust in 1988—a post he held until 2010 when he joined the board of trustees—and he was pivotal in turning the trust from a small operation to the major organisation that it is today. He was also instrumental in setting up the World Marrow Donor Association in 1990, an international network of registries that now comprises more than 20 million donors around the world.

Goldman was born in London in 1938, the son of German Jews who had fled Berlin when the Nazis came to power. His parents became complete Anglophiles, and his father served in the British army during the second world war. He also ran a successful private practice, treating stars including Elizabeth Taylor, and hoped his son would eventually join him. Goldman junior intended to study Classics at Magdalen College, Oxford, but was poached by the medical fraternity and went on to read physiology and psychology. He completed his training at St Bartholomew’s Hospital in

London and, after stints in Massachusetts and at the University of Miami, returned to the UK to take up a post at Hammersmith Hospital.

After retiring he still worked at the Hammersmith and the Anthony Nolan Trust. He also travelled widely, advising doctors in developing countries about CML. He was a cultured and cerebral man, with a huge knowledge of literature and art, peppering his conversation with quotes from Shakespeare.

He was also a great campaigner—nowhere more so than in his drive to persuade the drug company Novartis to manufacture imatinib (also known as Glivec/Gleevec). US scientist Brian Druker presented a paper at a conference in 1996, showing the drug’s early promise in treating CML. In 1997 Goldman confirmed its preclinical efficacy and was determined to see it brought into clinical practice. Goldman and Druker persuaded an initially sceptical Novartis to manufacture the drug, which accounted for nearly \$4.7bn of sales in the United States alone in 2013. Goldman also helped persuade the National Institute for Health and Clinical Excellence to recommend its use for patients.

Goldman’s career is remarkable in that he was pivotal in seeing a disease go from being fatal within a few years to one where the majority of patients could, with the aid of a single daily pill, go on to enjoy a normal life expectancy.

Goldman leaves two daughters and a son.

Anne Gulland, London  
 annecgulland@yahoo.co.uk

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**Richard Lisle Bennett**



**General practitioner and senior report writing doctor at Freedom from Torture (b 1957; q Sheffield 1986; MRCGP), d 30 December 2013.**

Richard Lisle Bennett worked for 15 years as a GP, initially in Sheffield and later at Haven Health in Felixstowe from 1996 to 2006. In 2007 he started volunteering as a doctor with Freedom from Torture in London. Initially he assessed the health needs of torture survivors, including those in detention. A year later he developed his work, documenting physical and psychological evidence of torture for the preparation of medicolegal reports. He was also a trainer and mentor, and organised educational programmes for colleagues and students. Outside work Richard was a keen runner and a frustrated rock star, with an eclectic taste in music; he enjoyed playing the guitar. He leaves his wife, Annabel, and two daughters.

**Angela Burnett,  
Karol Silovsky**

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**Bimal Kumar Chaliha**



**General practitioner (b 1936; q Assam Medical College 1957; FRCOG), d 5 May 2013.**

After qualifying Bimal Kumar Chaliha started training in obstetrics and gynaecology. During this time he achieved academic excellence in social and preventive medicine, conducted field work in the local villages, and organised scientific exhibitions for non-medical visitors

to the college. In 1965 he came to the UK with his wife, Gayatri, whom he had met at medical college. He settled into a long and happy career in general practice in Corby, Northamptonshire—a popular doctor, who put patients at ease with his gentle wisdom and sense of humour. After retiring he moved to London and worked part time as a GP. A keen reader and gardener, he loved cricket and motor car racing, and above all he was a devoted family man. He leaves his wife, two daughters, and a granddaughter.

**Charlotte Chaliha,  
Sonia Chaliha**

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**Andrew Gilbert Graham**

**Former consultant urologist (b 1929; q Glasgow 1952; FRCS Ed), d 10 May 2013.**

Andrew Gilbert Graham (“Andy”) served as regimental medical officer with the 1st Battalion East Surrey Regiment in Tel el Kebir, Egypt, in 1953-54. On his return, he became a paediatric surgeon at the Royal Hospital for Sick Children before taking up post of consultant urologist at the Western Infirmary, Glasgow, although he continued sessions at Yorkhill. As well as developing the urology department he was an enthusiastic teacher of medical students and junior medical staff. He retired early in 1986 after a coronary, which enabled him to follow his passion for golf on a full time basis. Predeceased in 2011 by Helen, his wife of 53 years, he leaves a daughter, a son, two grandchildren, and a great grandson.

**Margaret A Graham**

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**Sheila Lewis**

**Former consultant paediatrician North Middlesex Hospital (b 1932; q King’s College Hospital Medical School 1956; PhD, DCH Eng, FRCP), d 29 December 2013**

Soon after graduating Sheila Lewis became committed to paediatrics, with early posts at various hospitals in London. She went on to do research in neonatal respiration at the London Hospital medical

school with Kenneth Cross, whom she married in 1970. Her clinical service dovetailed with the start of her lengthy charity work. During her years of voluntary service at ChildLine, she counselled more than 1000 distressed children and young people, and wrote several articles. She loved the arts and thrived on art courses, something she even managed to continue when she developed macular degeneration. In January 2010 she became a frontline volunteer with the Royal National Institute for the Blind. Sheila related to people of all ages, always keen to listen, to learn from others and to share her knowledge and experience. Her mantra was always “be generous,” and that is how she lived.

**Paula Midgley**

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**A B Milligan**



**General practitioner, Worcester (b 1911; q Edinburgh University Medical School 1935; DCH, MRCGP), d 10 June 2013.**

A B Milligan (“Bruce”) joined the Royal Army Medical Corps in 1939 and was stationed in North Africa and Italy throughout the war. Demobbed in 1945, he became a GP in 1947 in a well established Worcester practice, where he worked until he retired in 1979. He was much liked and respected by his patients. A founder member of the Royal College of General Practitioners, he held many diverse appointments in his working life, including factory medical officer, police surgeon, doctor to Stanbrook Abbey, and doctor to Worcester Amateur Boxing Club. A kind generous man, he leaves a son and daughter, four grandchildren, and two great grandchildren.

**David Allen,**

**Allan J Laidlaw**

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**Leslie Sohn**



**Psychiatrist (b 1919; q University of Cape Town 1944; DPM Eng, FRCPsych), d 18 March 2013.**

Leslie Sohn came to England for postgraduate training in psychiatry. Appointed senior house physician at the Maudsley Hospital, he developed an interest in psychoanalysis. He qualified as a psychoanalyst in 1952 and subsequently began to develop his private practice, while remaining consultant psychiatrist at the Maudsley until 1995. He then went to Broadmoor high security hospital, where he worked until 2010. His attachment to Bethlem Royal Hospital revolutionised the way of thinking and understanding violent behaviour in mentally disordered offenders and, in particular, those with psychotic illnesses. He developed a highly sophisticated form of reflective practice which was adapted into Department of Health guidance at all forensic psychiatry settings. He worked in private practice and provided supervision until his death. His monthly forensic psychoanalysis seminar at the Institute of Psychoanalysis will continue as the Sohn seminar. Predeceased by his wife, Myra, Leslie Sohn leaves four children and several grandchildren and great grandchildren.

**Carine Minne**

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