On 31 December 2008 Jacques Servier received France’s highest distinction, the Legion of Honour’s grand cross. Nicolas Sarkozy, president at the time, described Servier as “an entrepreneur the likes of which few are to be found in France.” In the 1950s Servier, a publicity shy billionaire, founded a pharmaceutical company that grew to become the second largest in France and among the top 30 in the world.

Less than a year after receiving the honour, Servier and his company, Laboratoires Servier, would become embroiled in one of France’s biggest medical scandals. The consequences would hang over Servier until his death, which was announced in a short statement by his company.

“The Servier Research Group and all its collaborators have learnt with great sadness [of] the death of their president-founder, Dr Jacques Servier, who died at home today in his ninety-third year,” the statement said. “The spirit, the motivation and the mission of this exceptional personality, whose whole life revolved around the research of innovative medicines, will continue to exist in the priorities given to scientific research and human values in the enterprise he created exactly 60 years ago.”

Servier’s troubles began in 2009, when his company pulled benfluorex, one of its top selling drugs, from the French market. Sold in France under the trade name Mediator, the drug was developed as a treatment for overweight patients with diabetes. The drug makes cells more sensitive to insulin and increases production of glyco- gen, reducing appetite. Benfluorex was widely prescribed off label to people without diabetes who wanted to lose weight.

Evidence that benfluorex had potentially dangerous side effects—notably cardiac valve damage and pulmonary hypertension—had been accumulating for years. 3 Introduced to the French market in 1976, the drug had been prescribed to an estimated 5 million people, with 300,000 prescriptions still active in 2009. Health officials estimated that at least 500 people died from benfluorex side effects, although some estimates are as high as 2000. Thousands are thought to have experienced complications linked to the drug.

In December 2009, after benfluorex was withdrawn in France, the European Medicines Agency recommended “the withdrawal of all medicines containing benfluorex in the European Union, because their risks, particularly the risk of heart valve disease, are greater than their benefits.” 4

Dozens of patients claiming benfluorex side effects filed law suits, and in January 2011 Servier was subpoenaed by lawyers on behalf of six patients who experienced serious cardiovascular side effects.

In the same month, the French social affairs inspectorate issued a report based on its investigation. 5 The report stated that the Servier group had misled health authorities and concealed the true pharmacological nature of the drug and that, although the Servier group had developed the drug as an appetite suppressant, the company’s “doctrine” was to market it as an antidiabetes drug.

The report noted that Afssaps, the French medicines agency, had missed several opportunities to withdraw benfluorex from the market. In 1997 the US Food and Drug Administration (FDA) withdrew diet drugs fenfluramine and dexfenfluramine from the US market. 6 Other nations around the world followed the FDA’s lead, and Wyeth set aside more than $21bn (£12.5bn; €15.5bn) to resolve personal injury claims. But benfluorex, a derivative of fenfluramine, which also was developed by the Servier group, continued to be sold in France until 2009.

In 2012 Servier and six companies in the Servier group were charged with manslaughter and injury. In 2013 Servier appeared in court for trial in Nanterre, but the trial was postponed until the completion of a separate investigation.

Details of Servier’s personal life are sketchy. His net worth is estimated at $7.6bn, and he was ranked by Forbes Magazine as the 173rd wealthiest person in the world. Servier was born in 1922 in Vatan, France. The New York Times described his father as a pharmacist and his mother a school teacher. 7 According to the website of Collège International de Recherche Servier—a foundation founded by Servier—he received his medical degree in 1947 and pharmacy diploma in 1950, both from Paris University. 8 These were followed in 1957 by a doctorate in pharmacy from Lille University.

Contacted by The BMJ, the Servier company press office said that Servier practised medicine “for a short period before founding the laboratory.” The laboratory was a small pharmaceutical production firm in Orléans that Servier bought in 1954. The next year the company launched its first two products—an antihypertensive drug and an antidiabetes drug.

The Servier group now has 21 000 employees in 140 countries. In 2013 its revenue totalled €6.2bn. The company reinvests 27% of its annual turnover into research and development, well above the pharmaceutical average in France of around 16%. Servier’s main research areas are cardiovascular disease, type 2 diabetes, the neurosciences, cancer, and osteoporosis-osteoarthritis.

In one of his rare public interviews, Servier said in 2009: “It’s important to be a useful industry that contributes to human development. We prefer to make money and be a constructive industry rather than a phoney one. In the words of Dostoyevsky, ’Money is an essential tool.’ This is why we spend a lot on R&D and pay our staff generously.”

As the company grew Servier closely guarded its independence, opting not to go public. Eventually he changed the ownership structure to that of a foundation—making takeover bids virtually impossible—and retained control until his death.

In the wake of Servier’s 2009 withdrawal of benfluorex, France and the European Union enacted new pharmacovigilance legislation. 9 10 The Afssaps medicines agency was disbanded and reorganised as the National Agency for the Safety of Medicines and Health Products (MSNA).

According to the New York Times, Servier leaves his second wife and three daughters.

Ned Stafford, Hamburg
ns@europen.de

References are in the version on bmj.com.

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Roointon Faridoon Boomla

Former general practitioner (b 1917; q St Bartholomew’s Medical School 1941), d 31 January 2014.

Roointon Faridoon Boomla (“Rooin”) had planned to return to India after qualifying to join the fight for Indian independence, but the premature death of his father changed his life plans. He ran the family practice in Plumstead and after the NHS was founded, he built up his practice with his younger brother. In the 1950s and 60s, general practice was under-resourced, and income was falling, so Rooin became a clinical assistant in rheumatology at St Nicholas’s Hospital, Plumstead, learning osteopathy and physical medicine. This interest led on to his professional career as team doctor at Millwall Football Club. He continued to work as a GP in Plumstead until he retired in his late 60s. Predeceased by his wife, Rooshanak, he leaves a son and two daughters.

Kambiz Boomla, Soraya Boomla
Cite this as: BMJ 2014;348:g3469

Thomas Hargreaves

Former consultant chemical pathologist Exeter Health Authority (b 1929; q King’s College Hospital Medical School 1955; MD, PhD, FRCPath), d 20 February 2014.

Thomas Hargreaves (“Tom”) had a long and distinguished career in chemical pathology; his main interests were diseases of the liver and bile metabolism, on which he published a well received book, accompanied by many scientific articles and presentations. He held senior academic appointments—in Leeds; at St George’s Hospital, London; and at Stanford University, California—before settling in Exeter, Devon, and setting up a countywide clinical chemistry service. Tom served as member, secretary, and chairman on the committees of many university, NHS, and professional bodies, and was consultant adviser in chemical pathology to the Department of Health and Social Security. He loved travel, music, good food and wine, and entertaining appreciative friends. He leaves his wife of 55 years, a daughter, and two grandchildren.

Peter Anthony
Cite this as: BMJ 2014;348:g3375

Michael Langman

Former William Withering professor of medicine and dean of the Faculty of Medicine and Dentistry, University of Birmingham (b 1935; q Guy’s Hospital 1959; MD, FRCP, FMedSci), d from complications of prostatic cancer on 10 April 2014.

In 1968 Michael Langman became senior lecturer in medicine at the University of Nottingham and, in 1974, professor of therapeutics in Nottingham. In 1986 he was appointed to the William Withering chair of medicine and headship of the Department of Medicine at Birmingham University. His research interests included the pathogenesis and epidemiology of colorectal cancer, drug induced gastrointestinal adverse reactions, and the benefits and risks of non-steroidal anti-inflammatory drugs. In addition to his academic and clinical duties, Michael served on several important Department of Health committees. After retiring he was chairman of the South Warwickshire Ambulance NHS Trust. He leaves a wife, Rosemary, and four children.

Alasdair Geddes
Cite this as: BMJ 2014;348:g3477

Stephen Rostron Lord

Former general practitioner Euxton, Chorley (b 1949; q University College London 1976), d from metastatic lung cancer on 10 December 2013.

Stephen Rostron Lord (“Steve”) spent several years in the early 1980s working in psychiatry before embarking on his career in general practice. In 1986 he cofounded Euxton medical centre on the outskirts of Chorley in Lancashire, where he worked with great dedication for 25 years. His humility, kindness, and compassion, combined with his talent for never letting unnecessary bureaucracy get in the way of patient care, made him a popular family doctor. He will be remembered for his love of unreliable cars, photography, dog walking, cowboy boots, and the music of Bob Dylan. After retiring in 2011 he moved to Arnside, where he enjoyed his last years, in his own words “like a pig in mud.” He leaves his wife, four children, three stepchildren, and a grandson.

Rob Letch
Cite this as: BMJ 2014;348:g3377

Geoffrey Peter McMullin

Consultant paediatrician, lecturer in paediatrics, author (b 1927, q Edinburgh 1960; PhD FRCP), d from complications after a mitral valve replacement on 18 April 2014.

Geoffrey Peter McMullin (“Peter”) decided to become a doctor during his convalescence from a perforated peptic ulcer in his mid-20s. With the exception of two years in Tehran, from 1977 to 1979, he worked in Cheshire and lectured at Liverpool University until he retired in 1997. His special interests were childhood diabetes and epilepsy; he published a book on the latter in 1981. Peter retired to East Sussex, gained a PhD in German Literature, and wrote two works on Thomas Mann. He lived just long enough to see the publication of his first novel. His first degree was in German, and he was a member of the Anglo German Medical Society until his death. Peter leaves his wife, Theresa; five children; and eight grandchildren.

Tony Watson
Cite this as: BMJ 2014;348:g3473

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