Tim Lusty

Leader of Oxfam's health unit

Timothy (Tim) David Lusty (b 1938; q St Peter's College, Oxford, 1965), died from prostate cancer on 30 January 2015.

Tim Lusty was always happiest in the field—whether that was a field hospital in Africa or one on his family farm in Berkshire. As leader of Oxfam's health unit during the 1970s and 1980s, he inspired his team to develop and produce lifesaving innovations for disaster and emergency situations, many of which are still in use today. These included water distribution kits, emergency feeding kits, and high energy biscuits for use in famine relief situations, which were widely used in the Ethiopian famine of 1984. In each case, Lusty listened to local people to understand the issues, then found people with the knowledge to develop a workable solution.

"He saw a problem, and for Tim it was a challenge, something that can be sorted. He was a great believer in sharing problems and introducing academic rigour," said Pat Diskett, his friend and former colleague at Oxfam. He ensured that the team's innovations were shared and disseminated, creating an evidence base for disaster and famine relief through field handbooks and guides, as well as publications in disaster journals, health policy journals, and books. He lectured in disaster management at the London School of Hygiene and Tropical Medicine, and the Liverpool School of Tropical Medicine.

Oxford and Oxfam

Lusty started his medical career in 1965 at the Radcliffe Infirmary in Oxford, where he worked in paediatrics and general surgery. He had his first taste of humanitarian disaster relief in 1970, when he volunteered with Oxfam to set up a supplementary feeding programme in Nigeria, after the country's civil war. He then worked on disaster relief in Peru, India, and Malawi before becoming chairman of Oxfam's medical panel in 1974, a career move that would take him to more than 60 countries around the globe.

His curriculum vitae reads like a list of the humanitarian disasters of the modern era, taking in smallpox in India; the Ethiopian famine; earth-quakes in Peru, Turkey, and Pakistan; Cambodia in the aftermath of the Pol Pot regime; Rwanda after the genocide; and Croatia and Bosnia after the Bosnian war, along with many other, lesser known, emergencies. He also worked to plan, review, and evaluate health services in many low income countries in Africa and India. But it was perhaps his foresight in recognising the impact that HIV/



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Diskett says that they had both seen unusual outbreaks of infectious disease while working in Africa in the mid-1980s and had asked whether they were witnessing the effects of immunocompromise. "We had to overcome a lot of opposition. There was complete denial of HIV and AIDS. You weren't welcome, asking those questions at that time." Lusty convened a meeting of non-governmental organisations (NGOs) in London, resulting in the establishment of the UK NGOs AIDS Consortium—which still exists today, renamed UK Consortium on AIDS and International Development—to coordinate the UK's response to the disease.

Sense of social justice

Diskett says that Lusty's humanitarian work was driven by a strong sense of social justice. "He was a very moral person and had high moral standards. When he travelled, he saw a lot of injustice, and he wanted to make a difference."

She said his dual interests started early. Born into a farming family, he first studied agriculture at Oxford, graduating in that subject before taking his second degree in medicine. Diskett credited Lusty's wife, Jackie, a nurse, with having inspired his interest in medicine as a young man. But his farm, with its herd of Angus cattle, remained important to him throughout his life. His colleagues remember him turning up at Oxfam meetings "with straw in his hair."

"One of the reasons he was so effective was he was both a farmer and a doctor," said Diskett.

"That combination was very helpful. He wasn't afraid of getting his hands dirty."

After leaving Oxfam in 1987, Lusty worked as an adviser and consultant for the Overseas Development Agency (now the Department for International Development), various UN agencies, and NGOs.

Music

Music was a passion he shared with his partner of the past nine years, Leonora Pitt, who runs an annual "come and sing" fundraising concert, the Oxford Orpheus. Lusty had become interested in the Palestinian situation, and the 2013 concert raised money to fund musical education in Ramallah. Lusty travelled to Palestine in the last year to learn more about the medical situation, despite being in poor health himself. "He visited the music school and they played for him," said Pitt. "He had a great passion for music. It was something very dear to his heart."

Since being diagnosed as having prostate cancer 10 years ago, Lusty had spent more time at his farm cottage in Berkshire, but remained active in humanitarian causes to the end. He was working to organise a festival of Palestinian life and culture, Palestine Unlocked, which will take place in Oxford this June.

Tim Lusty leaves his wife, Jackie, from whom he was separated; their four children; and his partner of the past nine years, Leonora Pitt.

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Anne Appleton



Pharmaceutical physician (b 1966; q Liverpool 1989; PhD, MFPM), died from metastatic pelvic leiomyosarcoma on 7 April 2015.

Anne Appleton (née McCarthy) spent her early career in academic and NHS histopathology in Newcastle, alongside a five year period as a volunteer police surgeon. In 1999 she returned to clinical practice as an associate specialist breast physician at the RVI. After a move to Switzerland, she established a consultant level breast clinic near Geneva in 2003, Back in the UK the family settled in Weybridge, Surrey, where Anne established Weybridge Breast Clinic in 2007. In 2008 she joined the pharmaceutical industry, where she thrived. She set up a limited company in 2011 and worked for several blue chip pharma clients. She told few people of her diagnosis of retroperitoneal sarcoma in 2013 and was still working until a couple of months before her death. She leaves a husband and two daughters.

Anne Appleton

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Jean Elizabeth Clark



Senior clinical medical officer Central and South Birmingham health districts (b 1924; q Westminster Hospital, London, 1955; DObst RCOG, FRCPCH), died from metastatic carcinoma on 20 November 2014.

Jean Elizabeth Clark had her school days severely curtailed when she required treatment for abdominal tuberculosis, and she left school

without qualifications. During the second world war she trained as a nurse at Guy's Hospital, where she contracted pulmonary tuberculosis and required further hospitalisation. After the war, she finally started her medical training. An accident during her hospital training left her with severe back problems. She pursued a career in community based child health clinics in central and south Birmingham and in 1972 was invited to set up a child development centre at Birmingham Children's Hospital. She retired in 1988 and moved to Gloucestershire. She leaves a brother and sister, and their families.

Christine Smalley and Jillian Mann Cite this as: BMJ 2015;350:h2453

Faiza Rizwan Khan



Genitourinary physician and family planning doctor Stockport and Trafford primary care trusts (b 1961; q University of the Punjab, Pakistan, 1987; Dip GUM Liverp, Dip RH Liverp, DFFP), died from complications of leiomyosarcoma on 19 March 2015.

Faiza Rizwan Khan joined her husband in the UK in 1994. She took a career break to raise her three children and later joined the University of Liverpool for postgraduate studies. Faiza started active clinical work at Manchester Centre for Sexual Health, Manchester Royal Infirmary, where she remained for four years. She later moved to Brook Advisory as an associate specialist, providing a full range of clinical services to young people. As a faculty registered instructor she was actively involved in training nurses and doctors. To explore other interests she reduced her work to sessional commitments as a family planning doctor. She leaves her husband, Rizwan, and three children. R U Khan

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Alan William McIntosh **Smith**



Consultant physician Kirkcaldy (b 1923; q Edinburgh 1950), d 5 November 2014.

My father, Alan William McIntosh Smith, was a fine physician, who loved his work and was much loved by his patients and colleagues. He fought and was wounded in the Normandy campaign in 1944 and subsequently learnt medicine from Derrick Dunlop in Edinburgh before moving to Kirkcaldy as a consultant in 1960. There he established the upper gastrointestinal endoscopy service and the diabetes unit, which became his real passion. He enjoyed teaching, contributed extensively to the Edinburgh College of Physicians, and served on the Fife Health Board. He was fiercely proud of the Victoria Hospital, to which he had given so much. In retirement he played golf, swam, took up painting, and enjoyed his family. He was a gentleman.

David Smith

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Paul Mapleston Smith



Consultant in medicine, gastroenterology, and hepatology Llandough Hospital and University Hospital of Wales (b 1936; q St Thomas' Hospital Medical School 1959; MD, FRCP Lond), died from pneumonia on 12 December 2014.

Paul Mapleston Smith's rotation took him to Southampton in 1965, where he established several studies on iron clearance. In 1966 he moved to the new liver unit at King's College

Hospital and completed his MD on aspects of haemochromatosis. In 1972 he moved to Llandough Hospital in Cardiff as senior lecturer in medicine at the University of Wales College of Medicine. In 1978 he became an NHS consultant at Llandough Hospital and the University Hospital of Wales, where he remained until he retired in 2001. During his career he established first class hepatology, endoscopy, and gastrointestinal services for the region. Paul leaves his wife, Ragnheidur, and two children. Jill Swift, Malcolm Wheeler,

Roger Williams

Cite this as: BM/ 2015;350:h2428

Debbie Watkinson



Consultant palliative medicine National Cancer Centre, Singapore General Hospital (b 1963; q University College Hospital London 1988; DRCOG, MRCGP, DTM & H Liverp, Dip Palliat Med), died from metastatic breast cancer on 22 January 2015.

Debbie Watkinson originally trained in general practice but later became a consultant in palliative medicine at Stoke Mandeville Hospital. With her husband, Neil, she travelled widely and started visiting a hospice in Bangalore, India, before expanding to palliative care training for the Emmanuel Hospital Association, with the support of the National Cancer Centre Singapore, where Debbie worked as a consultant from 2008 to 2014. Despite her diagnosis with breast cancer when she was only 31, she continued working for the next 19 years. She was planning to train palliative healthcare workers in India when she was diagnosed with a recurrence of cancer in 2014 while still in Singapore. She leaves Neil; her sister; and her parents.

Jonathan Knight

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