# Obituaries

## **Robert Coleman Atkins**

Cardiologist and author of the bestselling diet book in history

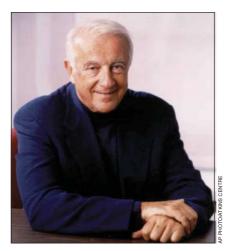
Robert Atkins, cardiologist and author of the bestselling diet book *Dr Atkins' New Diet Revolution*, was dismissed as a faddist or worse by most mainstream experts. He promoted carbohydrate restriction and a high protein, high fat diet, urging patients to "eat the hamburger and throw away the bun." His theories triggered a bitter dispute between those who would limit fats and those who would limit carbohydrates.

Atkins' followers saw him as a courageous David standing up to the establishment Goliath with its wrong-headed ideas and vested interests. Rejected by the medical community, Atkins appealed directly to the public. Popular support for the Atkins diet grew at an astonishing rate. His book *Dr Atkins'Diet Revolution*, first published in 1972 and reissued 20 years later as *Dr Atkins'New Diet Revolution*, sold 12 million copies, making it the bestselling diet book in history.

Although millions of people battling the bulge swear by Atkins, the US National Institutes of Health (NIH) has never undertaken studies of popular diets—until recently. The stakes are high: 325 000 deaths in the United States each year are attributed to complications of obesity. Direct healthcare costs are pegged at \$39bn to \$52bn annually. Spending on the weight loss and diet industry is estimated at \$50bn a year.

Both Atkins, in the carbohydraterestriction camp, and his detractors, in the fat-restriction camp, espouse theories about the "glycaemic index" or they track surrogate markers such as cholesterol levels and urinary excretion of calcium in support of their diets. Yet there are few long term data about actual clinical endpoints such as death, heart attack, or cancer rates using intention-to-treat analyses of weight loss diets.

Bonnie Liebman, director for nutrition at the Center for Science in the Public Interest, says most studies by the NIH focused on varying dietary compositions while keeping calories constant. "That kind of study fails to mimic the real world because it doesn't measure the impact of fat, protein, or carbohydrate on your appetite. Feeding participants in a study three meals a day is very different than telling them to go out and choose a diet of



foods that are high in fat or protein or carbohydrate. Given the fact that millions of people were already following Atkins' diet, it was irresponsible for the government not to test its safety, much less its efficacy."

Throughout most of his career Atkins resisted scientific scrutiny, saying he was a clinician, not a researcher. He also displayed a distaste or lack of appreciation for the scientific method. Dr Eric Westman, associate professor of medicine at Duke University, said that when he approached Atkins for funding to study the Atkins diet, Atkins replied, "Why should I support a study? It's all in my book." Westman said, "I've read your book and it's all anecdotal." Atkins retorted, "But I know what a study will show."

Atkins said that mainstream medicine's demand for proof simply functioned to "maintain it at its current level of ineptitude." Defenders of Atkins argue that these are merely the words of a man who distrusted the biases of mainstream medicine rather than a blanket rejection of science.

In the end, Atkins finally agreed that clinical studies might be a good idea. He founded the Atkins Foundation with his wife, Veronica, and endowed it with over \$3m to study "controlled carbohydrate nutritional protocols." Grants from the foundation have been awarded to Duke (for Westman's study), Harvard, Albert Einstein College of Medicine, and Ball State University.

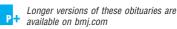
To the surprise of many, results of the Duke randomised controlled trial comparing a low carbohydrate diet to a low fat diet, presented at the American Heart Association Annual Meeting in Chicago in November 2002, showed that patients on a high fat diet not only lost weight, but they also lowered their lipid levels. These results were widely trumpeted in the media as the long awaited "vindication" of Atkins and his diet.

But even researchers funded by the Atkins Foundation are more circumspect. George Blackburn, director of the Center for Study of Nutrition in Medicine at Beth Israel in Boston, says, "Anyone who would say Atkins is vindicated is misdirected." Westman is equally cautious, saying, "We have a long way to go before we say this is a good thing to do."

Sceptics are concerned in part because of the absence of long term studies needed to answer questions raised about the safety of the Atkins diet including whether it will promote osteoporosis, colon cancer, heart disease, kidney damage, and gout, as critics charge.

Atkins, described by his supporters as "driven," devoted nearly all of his time to his work. In the end, Atkins made his mark because in bucking established medical dogma, and by creating a multimillion dollar company, he created so much heat that he finally could not be ignored. [JEANNE LENZER]

Robert Coleman Atkins, founder and director of the Atkins Center for Complementary Medicine, New York city, United States (b Columbus, Ohio, 1930; q Cornell University Medical School, New York city, New York, 1955), died from complications following a head injury on 17 April 2003 after falling on a New York sidewalk.



### Patrick Alan Adam

Former general practitioner Plymstock, Plymouth (b Folkestone 1918; q Edinburgh 1942; DPM), died 30 March 2003.

Shortly after qualifying Pat joined the Royal Naval Volunteer Reserve and served as a medical officer on the Russian convoys bound for Murmansk. After the second world war he trained in psychiatry, working for a time at St Andrew's Hospital, Northampton. In 1954 he started in general practice in Plymstock, where he stayed until retirement in 1983. Humorous and urbane he would host, with his wife, Isobel, the most magnificent dinner parties. Pat was a prizewinning gardener and an accomplished sailor, skier, and golfer. He leaves Isobel, three children, and seven grandchildren. [JUSTIN ROBBINS]

#### Frederick James Brunton



#### Former consultant radiologist Southampton (b 1926; q St Mary's Hospital, London, 1950; FRCP, FRCR), d 24 February 2003.

Freddie was appointed to work at Southampton General Hospital in 1963 and helped transform the department into a national centre of excellence. He was a major force in initiating the training programme in radiology and ensured its swift development when the medical school opened in 1970. Freddie served as a medical officer with the SAS in the 1950s. He was parachuted behind terrorist lines in the Malayan jungle and was mentioned in dispatches. After national service he continued training at the Central Middlesex Hospital, and then worked at the Brompton Hospital before returning to St Mary's to begin his training in radiology. He was a keen ornithologist and a first class fly fisherman. He leaves a wife, Gillian, and three children. [KEITH DEWBURY, PETER COOK] P-I

#### John Amsden Elliott

General practitioner Crowborough, Sussex, 1946-82 (b Surrey 1915; q Cambridge/ St Thomas's Hospital, London, 1940; MA, MRCGP), d 15 February 2003.

While serving with the Royal Air Force at West Malling in 1942, he was awarded the George Medal for the attempted rescue of the crew of a burning aircraft fully laden with aviation fuel and bombs. He finished his service as a squadron leader and then joined a practice in Crowborough. He was closely associated with the Christian Centre for Healthcare and Ministry at Burrswood (www.burrswood.org.uk) from its foundation until shortly before his death. Predeceased by his wife in 1988, he leaves three children and eight grandchildren. [COLIN RUCK]

#### Peter Moorhead

Former general practitioner Chatham, Ontario, and later Roswell, New Mexico (b Bradford, England, 1929; q Westminster Hospital, London, 1952), died from pneumonia on 15 September 2002.

Peter spent his childhood in London and after qualification was appointed house surgeon to the royal surgeon Sir Clement Price-Thomas. Following a job at Hillingdon, he married a Westminster nurse and they emigrated to Chatham, Ontario, where he was a colourful general practitioner and part time anaesthetist at the local hospital. After many years in Ontario he migrated south to Roswell, New Mexico, where he practised until his death. He leaves a wife, Nancy; four children by his first marriage; and his grandchildren. [RICHARD DREAPER]

#### Christopher Jonathan Pearce



Consultant clinical biochemist Ipswich Hospital (b Leeds 1948; q Oxford/Middlesex Hospital Medical School, London, 1972; FRCP; FRCPath), d 30 December 2002.

After clinical registrar and senior registrar appointments at Westminster Hospital, Chris Pearce worked in the endocrine research group at the clinical research centre at Northwick Park Hospital. In 1985 he became senior registrar in clinical chemistry at the Royal Liverpool Hospital and in 1990 he was appointed clinical biochemist at Ipswich Hospital, a post that allowed scope for his clinical and biochemical skills. He wrote many papers, particularly on thyroid diseases and thyroid function tests. He leaves a wife, Christine. [RICHARD BAYLISS]

#### John Kenneth Wright

Consultant orthopaedic surgeon Fylde 1956-78 (b Haslingden 1918; q Manchester 1942), d 19 March 2003.



Ken completed his house jobs at Manchester Royal Infirmary, before joining the Royal Air Force early in 1943. For a time he was a medical officer in a squadron that was part of the famous "Dam Busters." In late 1943 he was posted to India and Burma, returning home in 1946. He became a lecturer in orthopaedics before being appointed to the Fylde. A great raconteur and wit with an impish sense of humour, he enjoyed many varied hobbies, including shooting, fishing, and patenting engineering inventions. He leaves a wife, Vicky; two children; and seven grandchildren. [BARRY PEACH]

#### Correction

*Obituary of David Horrobin* As many visitors to our website will have seen, Caroline Richmond's obituary of David Horrobin (19 April, p 885) sparked a vigorous response from some of our readers about its content. The text contained some factual errors, for which we apologise.

The article said that Efalith was withdrawn and that it contained evening primrose oil; neither of these assertions is correct. Further, GLA is gamma linolenic [not linoleic] acid.

The word "many" can be misleading—we might have said that "some" [not "many"] of Horrobin's 800 or so published papers were published in his own journals.

We were wrong to say that Horrobin set up Laxdale Ltd in the Isle of Lewis. The company was set up in Stirling and has never had a plant in Lewis.

There was some confusion about Horrobin's family. We wrongly suggested that David Horrobin wrote the book *The Complete Catalogue of British Cars 1895-1975*; it was in fact written by his brother, Peter, and by David Culshaw. We misspelt the name of Horrobin's first wife, Nafisa, and wrongly stated that she took the photographs for her husband's guide book about East Africa; it was in fact Horrobin's father, Frederick, who took the photographs.

Finally, our electronic technology let us down. In the opening sentence of the obituary, the web link to the article about Goran Jamal did not work (although the reference details were correct—*BMJ* 2003;326:730). We have now corrected the web link.