



OBSERVATIONS

BMJ CONFIDENTIAL

Jane Maher: Late-onset rock chick



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What was your earliest ambition?

To be an actor—although any hopes of treading the boards were dashed by my stint at the National Youth Theatre (I didn't look the part and was definitely not good enough).

Who has been your biggest inspiration?

Hugh Thomlinson: a physician, explorer, wood carver, and scientist, and the author of a seminal paper on radiation therapy, whose radiobiology courses provoked a generation of trainee oncologists to question everything that they read.

What was the worst mistake in your career?

Like many, I emerged after house jobs feeling battered and insecure, thinking that I was a hopeless doctor. I retreated to a pathology SHO rotation until I regained the confidence to return to clinic. I hope that it's different now, but, listening to junior doctors, I'm still not sure that we manage the transition from student to accountable physician perfectly.

What was your best career move?

Going to Harvard for a year (but not staying when a permanent position was offered). I lived with Australian MIT [Massachusetts Institute of Technology] linguistics scholars who taught me the importance of "naming things" and the power of stories in making change happen. This learning really informs my work at Macmillan.

Bevan or Lansley? Who has been the best and the worst health secretary in your lifetime?

In the words of Zhou Enlai, it's too early to say. The first I met was Clarke, who memorably smoked a cigar throughout the meeting. I have a soft spot for Dobson, who presented our team with a Nye Bevan award. Lansley? His reforms are the most profound that I can remember in a career that spans 30 years of reorganisations.

Who is the person you would most like to thank, and why?

The late Dr Merriweather, of the Scottish Livingstone Hospital in Molepolole, Botswana. He taught me how a futile medical intervention in the treatment of terminally ill people has the potential not only to harm patients and families but also to damage the wider community, as it can reinforce the myth that medical treatment doesn't work and so it's not worth presenting early. Some lessons for modern cancer treatment arise here: we need to make sure that people are fully informed about the treatment they're offered so that they can make an informed decision as to whether it will give them better quality of life.

Biography

Jane Maher is a clinical oncologist, focusing on breast and advanced prostate cancer at the Mount Vernon Cancer Centre in Greater London and serving as joint chief medical officer of Macmillan Cancer Support. She is particularly interested in what happens to patients after their cancer treatment and has advised national NHS bodies on aftercare and survivorship, as well as establishing support and information units across the UK and Australia. Mourning the death of her husband, Peter, she was surprised to find consolation in rock music and became a devotee of the Rolling Stones—a rock chick at 60. She is also a keen tweeter: @Maherjane.

To whom would you most like to apologise?

Every member of every team I've ever worked with, for allowing me to take up their time by talking at them!

If you were given £1m what would you spend it on?

I hope that I'd give it away: at Macmillan I've learnt how even small amounts of money can make a real difference to cancer patients. For myself? I'd like to buy a pen and ink drawing of Lizzie Siddal by Dante Gabriel Rossetti.

Where are or were you happiest?

It's a kaleidoscope, this one; but the first moment I saw my daughter, Alex, in a white Babygro, sleeping in her plastic cot, has to be up there.

What single unheralded change has made the most difference in your field in your lifetime?

The usual things—imaging, IT, genetics—but my most powerful memory is first using cisplatin for metastatic teratoma, seeing lungs full of metastasis clear, and dying young men being cured.

Do you support doctor assisted suicide?

It's a very personal decision. But so much more can be done to improve palliative care that, at present, I can't support it.

What book should every doctor read?

Two very different books: When Breath Becomes Air by Paul Kalanithi, a moving and insightful memoir; and Talking Sense by Richard Asher, who said, "If you can't explain a complex technicality to your landlady's daughter, you don't understand it yourself."

What poem, song, or passage of prose would you like mourners at your funeral to hear?

I'd like my brother in law to sing Handel's "Where'er you walk," which is sung at all family funerals, and the "Battle Hymn of the Republic," to send people off to the wake.

What is your guiltiest pleasure?

Drinking Prosecco in a very hot bath, reading crime novels.

What television programmes do you like?

I have a weakness for the *Inspector Morse* stable because my husband, an editor, cut quite a few. And Sergeant Lewis once tried to teach me to jive at an after party.

What is your most treasured possession?

A Bert Hardy photograph of Francoise Sagan, given to me by my husband. He (misguidedly) thought that it looked like me.

What, if anything, are you doing to reduce your carbon footprint?

Walking more, driving less, and promoting supported, self managed follow-up for cancer patients so that they have fewer hospital visits.

What personal ambition do you still have?

To meet Keith Richards.

Summarise your personality in three words

I suggested "late-onset rock chick," but my PA went for "the Scarlet Pimpernel."

Where does alcohol fit into your life?

I drink champagne only on two occasions: when I am in love, and when I am not (Coco Chanel).

What is your pet hate?

NHS IT—necessary but not exactly user friendly.

What would be on the menu for your last supper?

A menu chosen and cooked by Michael Powell, a neurosurgeon and chef.

Do you have any regrets about becoming a doctor/academic/commentator/health expert/patient advocate (please pick the one that best describes your job)?

I found it hard to choose which of these I am, as I've enjoyed them all. And, as Keith Richards remarked, I'd really be a sourpuss to have regrets.

If you weren't in your present position what would you be doing instead?

No idea, but it's hard to believe that it could be any more interesting than it has been.