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Mary Baines: community palliative care pioneer

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| Mary Baines and a patient at St Christopher's Hospice

One day in the mid-1960s Mary Baines heard a radio appeal for a hospice by Cicely Saunders, whom she had met in the Christian Union at St Thomas' Hospital, London, in 1954. Baines sent her old friend a cheque for £3, even though she thought Saunders's proposal "very odd."

In 2014, Baines recalled, "Doctors, at this time, had no interest in people who were dying. They were only interested in people who could be cured. If you'd asked me whether I thought anything would have come of it, I would have said no. If you think of it, it is incredible. Can you think of any woman, or any man for that matter, who founded not only a hospice, but a branch of medicine around the world?"

St Christopher's Hospice

Seeing that Baines worked near Saunders's proposed hospice in Sydenham, south London, Saunders asked her to join the fledgling St Christopher's team. It is easy to see why. Baines's many qualities included two rarely found in any one person. She was empathetic and had a formidable analytical brain—one of the few women in the 1950s to obtain a first in natural sciences at Cambridge.

Initially Baines rejected Saunders's invitation. A GP for 10 years, she was on an established career ladder, and medical friends advised that going to St Christopher's would be committing professional suicide.

But driven by her Christian ideals, Baines eventually relented ("very fearfully") and went on to develop

the first UK community palliative care service. Nigel Sykes, former medical director at St Christopher's, said, "This approach has become the cornerstone of hospice practice in Britain and internationally."

Baines was part of a visionary small elite who built up from virtually nothing a robust scientific evidence base to persuade a sceptical profession about the benefits of the hospice philosophy.

She explained, "I found myself entering a branch of medicine with no books or conferences. Symptom control was contained in a single sheet entitled 'Drugs most commonly used at St Christopher's Hospice,' which was given to all staff."

Yet this sheet contains the single most important advance in end-of-life care that has ever been made. It comes, of course, from Cicely Saunders herself. To understand its importance, we have to go back to medical practice in the 1950s and 1960s, when it was generally believed that strong opioids were only effective when given by injection and that tolerance and addiction would inevitably occur if they were given regularly. So, in practice, patients were given injections of morphine, but only when their pain became unbearable.

Shortly after Baines joined St Christopher's in 1968, a woman with advanced breast cancer asked to go home, only to be readmitted to the hospice 10 days later. Fearing addiction, her GP had stopped her morphine. Saunders responded, "We must start hospice care at home now."

Palliative care

Pain control was, in effect, medicine's black hole, but progress was evolutionary not revolutionary. Palliative care was not recognised as a full specialty until the 1980s. Today almost every hospital has a palliative care team, and about 225 000 people a year receive hospice care, according to Hospice UK. But pain control remains a big challenge.

Baines was as much a scientific researcher as a compassionate physician. She developed the now universally used regime (analgesics, anti-emetics, and anti-spasmodics) to treat nausea and vomiting associated with intestinal obstruction.

Her uncompromising, scientific approach even extended to the way doctors should speak with patients. Taught by Saunders that patients preferred doctors to sit on the bed, rather than to stand or tower over them, she was relieved when research confirmed this. Sitting on a chair by a bed has the same desired effect. Sykes recalls ward rounds at St Christopher's where junior doctors carried their chairs from bed to bed to be on the same level as patients.

Baines was an outstanding teacher and mentor, who trained at least 30 of the first generation of UK palliative medicine specialists. She also inspired pioneers in hospice work across Africa, the Americas, Asia, and Europe. An adviser to the World Health Organization, she received a European Women of Achievement Award in 2006, by which time she was the world's longest serving hospice doctor.

In addition, she was a diplomat who recognised the importance of winning over other disciplines to make palliative care work at a time when it lacked scientific credibility. For example, with Baines's encouragement, Thelma Bates, a former consultant radiotherapist at St Thomas' Hospital, London, set up the UK's first hospital palliative care unit. In turn Bates attended ward rounds at St Christopher's, pointing out cases where radiotherapy might be of symptomatic benefit.

Born in Wallington, Surrey, to John Silver, a teacher, and Marjorie (née Tripe), Baines was evacuated to Wadhurst, East Sussex, in the second world war. On returning home aged 13, she flourished as a science pupil at Croydon High School, her gateway to Newnham College, Cambridge. In 1958 she married Ted Baines, an Anglican clergyman, who died in 2017. They leave their three children: Tim; Rachel, a consultant psychiatrist; and Stephen, whom she raised while working as a part time GP in Upper Norwood, south London.

A keen fruit and vegetable gardener, Baines retired from St. Christopher's in 1991 and became part time medical director at the ellenor hospice, Gravesend, Kent.

She returned regularly to Sydenham to tour the hospice with professional visitors and outline its history. She also died there, expertly cared for in the way she knew so well, but not before—at the age of 86—she addressed the South America Palliative Care Conference in Buenos Aires.

Mary Baines (b 1932; q St Thomas', London; OBE, FRCP), died from complications of Parkinson's disease on 21 August 2020