

Wilfrid Treasure

Doctor and musician who was motivated by his belief in continuity of care

Wilfrid Treasure, general practitioner Whalsay, Shetland (b 1955; q 1983), died in his sleep on 3 November 2013.

Wilfrid Treasure died at the age of 58 while on leave from his post as the sole doctor on the island of Whalsay in Shetland. In his two years on Whalsay he had established regular video conferences to connect geographically isolated GPs both with each other and with the district hospital in Lerwick. He also wrote a series of monthly articles for the *British Journal of General Practice*. Pithy and inspiring, this series explored how doctors might best respond to the needs of their patients.

His decision in 2011 to leave the Muirhouse Medical Group, where he had enjoyed being a member of a committed and successful team, was not the first unexpected turn in his career. In fact, medicine had not been Treasure's first choice. As an all rounder at school, he faced difficult decisions. When it came to applying to university he was already an accomplished musician and played with the National Youth Orchestra. He was reluctant to have music relegated to the status of a hobby, and to see his practical skills decline. And he certainly didn't want to take on medicine as a "day job" while his true enthusiasm lay elsewhere. Against more worldly advice, therefore, he chose music and was accepted at Clare College, Cambridge. Here he sang in the chapel choir, played in various ensembles, and was in demand as an accompanist. Developing his interest in renaissance music, he joined the Cambridge University Consort of Viols, adding one more instrument to a growing list.

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Switch to medicine

His decision on graduating in 1977 to switch to medicine may have been partly motivated by the realisation that his eclectic musical interests didn't point to any particular career. He was also, however, moved by a desire to be of practical service, and he had been inspired by the example of fellow students who successfully combined music with medicine.

During a transitional year in London, Treasure acquired two more A levels to bring his total to

six, supporting himself with jobs that included refuse collection for Southwark Council and a nightshift in a bakery. At this time he moved into a house in Camberwell with fellow Cambridge graduates, two of whom were studying at the Royal Academy of Music and on their way to instrumental careers. Neighbours were given an early indication of the kind of rowdy behaviour they could expect when they were disturbed at 1 o'clock in the morning by an impromptu performance of William Byrd's Three Part Mass.

Treasure qualified in 1983 at Guy's Hospital, the third of four siblings to do so. After house jobs he trained in Glasgow, and then in Edinburgh where he was a specialist registrar in gastroenterology from 1987 to 1989. He then changed direction and prepared himself for general practice with junior posts in obstetrics and paediatrics. He joined the Muirhouse Medical Group as partner in 1991.

The move into general practice

For Treasure, the possibilities of primary care had a strong appeal. It suited him to work in an area of social deprivation. As seventh in a family of nine, of modest means, he was keenly aware of the many benefits he had enjoyed from the state. This included not only free healthcare, but many years of free university education. He also appreciated the scholarship that had allowed him to go to Cheltenham College at the age of 13, but he knew that such benefits were available only to a lucky few. He was conscious that most of his patients had fewer social and educational advantages, and that many of them struggled to articulate—and sometimes even identify—what had brought them into the consulting room.

He worked conscientiously to sharpen his diagnostic skills and to minimise investigation and medication. In the preface to his book *Diagnosis and Risk Management in Primary Care: words that count, numbers that speak*, he spoke of being introduced in GP training "to a gentler touch, a quieter way of observing, more intelligent listening."

The determination to stay up to date with the best current knowledge on primary care came naturally to Treasure. The more demanding discipline, for him, was to live with the ambiguities

and uncertainties inherent in the role. As he wrote in his preface, "I think my job as a GP is to give patients the chance to live longer, healthier lives. To do this, I need to combine evidence based medicine with patient centred consulting . . .

there is a tension between the two, it's like the tension in a watch spring that makes the hands turn around."

An original thinker, inclined to challenge conformity and find fresh angles from which to approach familiar issues, Treasure was also given to acting on his convictions. The move from the Muirhouse practice to Shetland was partly motivated by a desire to live out more completely his belief in continuity of care, partly by an

inclination to challenge himself in extreme ways, and partly by a love of wild places. His concern for the environment—like his commitment to public health—was expressed in his daily life. He walked and cycled long distances, and drove a car reluctantly when he had to. His personal lifestyle tended towards the spartan.

In 2008 Treasure married Ann Robertson, a research fellow at the University of Edinburgh's Centre for Population Health Sciences.

Throughout these years he continued to make music. To his list of instruments, he added the trombone, the piano accordion and, in recent years, the bagpipes, which he had been known to play while hill walking in Scotland and the Lake District. As an adopted Scot, he also took to wearing the kilt on formal occasions. He remained an active member of a book club and a philosophical discussion group during leave spent in Edinburgh.

He leaves his wife, and a daughter.

Joe Treasure

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Helen Bawtree

Clinical medical officer (b 1922; q 1946; DRCOG), died from bronchial pneumonia on 31 October 2013.

Helen Bawtree (née Samson) went to Cheltenham Ladies College before reading medicine at Leeds University. She subsequently took a post at the Brompton Hospital, where she worked until starting a family in 1949. In the 1960s Helen decided to resume practice and found it difficult to gain readmission to the profession, but she persevered, taking locum positions until full time employment presented itself in paediatrics. She continued to practise in Surrey until retirement, but that was not the end of her career as she was subsequently recalled three times to serve in her old post. With her husband, Harold, she then sailed and cruised around the world well into their 80s. Predeceased by a son in 2001 and by Harold in 2006, she leaves two children and five grandchildren.

John Bawtree

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David Watkin Davies



General practitioner High Wycombe (b 1933; q Westminster Hospital 1957; DCH, DOBst RCOG), died from cholangiocarcinoma on 2 September 2013.

David Watkin Davies spent 30 years as a GP in his Wycombe practice (now Tower House Surgery) and brought in several innovations, including child health and clinics for patients older than 65. He had a hospital appointment in asthma and supported the Department of Mental Health for the Elderly as GP physician. He enjoyed being a family doctor and all that it entailed, including home midwifery and weekends on call. After retiring in 1996 he continued to do some work for a further three years. Throughout his career he maintained an interest in medical politics, with local BMA involvement. His outside interests

included singing with the Wycombe Choral Society, walking, golf, music, the Welsh rugby team, and various local charitable causes. He leaves his wife, four children, and eight grandchildren.

Martyn Davies

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George Izatt Hendry



Former general practitioner Limekilns and Charlestown, Fife (b 1927; q Edinburgh 1952), died from carcinoma of stomach and oesophagus on 14 February 2013.

After qualifying and house jobs, George Izatt Hendry became a trainee general practitioner. Initially appointed assistant, he took over the dispensing practice singlehanded in 1958, was joined by his wife in 1964, and continued until retirement in 1991. The couple built a new surgery in 1969. George held many appointments and served on committees including the local medical committee and local branch of the BMA. When asked to become involved with the training of young doctors he became associate adviser for Fife. A generous and entertaining host, he loved his books, cricket, golf, hockey, and curling. His latter years were dogged by increasing immobility of his lower limbs, and his wife, Mary, became his carer. He leaves Mary and one daughter.

Mary W Hendry

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Elizabeth Mary Pope

General practitioner Stourbridge, Shropshire (b 1975; q Leicester 1999; DRCOG, MRCGP), died after a road crash on 27 November 2013.

Elizabeth Mary Pope ("Liz") became a GP partner in the Three Villages Medical Practice about seven years ago. She was also a member of the clinical commissioning group for that area, and sat on groups and committees dedicated to improving



proficient offshore sailor, gaining his skipper qualifications and taking his family sailing in the Mediterranean. Christopher Raper leaves five children and seven grandchildren.

Rachael Austen

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Alick Mitchell Reid



Consultant anaesthetist Glasgow Royal Infirmary (b 1925; q University of Glasgow, 1949; DOBst RCOG, FFARCS), died from pneumonia on 25 September 2013.

Alick Mitchell Reid's main research interest was in the pharmacology of new neuromuscular blocking drugs and their antagonists in animals and in clinical practice. In 1967 he coauthored the first published work in patients on the neuromuscular blocking properties of a steroid compound, pancuronium bromide, a drug that is still employed in clinical practice today. He served on various committees at hospital, area, and regional level and was president of the Glasgow and West of Scotland Society of Anaesthetists and later of the Scottish Society of Anaesthetists. Outside work his interest was music—he was an accomplished pianist—and golf. He leaves a daughter and two sons by his late first wife. He leaves his second wife and their son.

W L M Baird, David A W Reid

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health provision there and in the wider country. She worked long days but also found time for gardening, sewing and craft activities, good food and lovely clothes, and singing, as well as hockey, riding, and triathlons. In 2012 she worked in the Olympic Village GP group and helped many athletes and others with the medical issues they had over the course of the games. Despite various health setbacks of her own she lived a full life and never stopped doing the things she enjoyed. She leaves her husband, Trevor; her family; her colleagues and patients; and her friends.

David Chantrey

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Christopher Grainger Livingston Raper



Consultant haematologist (b 1941; q Bristol 1964; MRCP, MRCPath), d 13 September 2013.

Christopher Grainger Livingston Raper was appointed consultant haematologist at Kingston General Hospital in Hull in 1974, where he remained until he retired in 2006. He then continued to work part time, taking up various locum haematology consultancy posts. As importantly, however, he took up a range of extreme sports, to compensate for the time he had been unable to spend on such active pastimes during his working life. These included, in addition to his life-long love of walking, obtaining a pilot's licence in New Zealand, scuba diving in the Red Sea, and Alpine skiing from his house in the French Alps. From a standing start, he also became a

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