OBITUARIES

lan Gregg

General practitioner who developed measurement of peak expiratory flow rate for asthma management

Accurate diagnosis and successful management of asthma for millions of people worldwide was made possible for the first time through the dogged research and determined campaigning of Dr Ian Gregg, who died on 27 April 2009, aged 84, in Oxford.

One of the first clinicians in modern times who spanned the divide between general practice and hospital medicine, sometimes in the face of disapproval from both sides, Gregg devoted most of his working life to improving the treatment of asthma. His pioneering research from the 1960s onwards championed the measurement of peak expiratory flow rate (PEFR) in primary care. "The work he did to establish normal flows and to develop peak flow meters that were useable in the community in everyday settings was hugely important in understanding the disease and allowing higher standards of care," said Mike Thomas, chief medical adviser to Asthma UK.

In a landmark paper in 1964, Gregg laid out a compelling case for GPs routinely to measure PEFR as an indicator of bronchial airway obstruction with the simple and cheap Wright meter, which was then almost solely employed in hospitals (J Coll Gen Pract 1964;7(2):199-214). Gregg encouraged PEFR testing by general practitioners and patients and, with Nunn, went on to establish norms for peak expiratory flow rates, enabling asthma to be objectively assessed and managed for the first time in primary care settings (see BMJ 1973;3:282-4). Family and friends remember having their PEFR measured as an obligatory part of any visit to the Gregg household at the time. The Gregg-Nunn scale quickly became universal and is still used in modified form today. The scale effectively placed peak flow meters in every general practice.

Gregg was born in London on 4 January 1925 into a Quaker family. Neither of his parents had connections with medicine.

Tested beliefs

After five years at Westminster School, from 1938 to 1943, Gregg's own medical ambitions had to be put on hold, and his Quaker beliefs were sorely tested when he signed up for military service at the age of 18. That same year his older brother, Derek, aged 27, was killed in the ill fated Allied attempt at a mass glider landing during the invasion of Sicily. Nonetheless, Gregg served four years in military service as a lieutenant in the Royal Garhwal Rifles of the then British Indian Army. A talented linguist, he became fluent in Hindi and Urdu, subsequently adding French and Russian to his repertoire. But the loss of his brother, combined with his own experiences of war, cemented his Quaker-born pacifism, and he later became an active supporter of nuclear disarmament.

Returning to Britain in 1947, Gregg read medicine at Wadham College, Oxford, where he joined other former servicemen in a hybrid class that included school leavers four years his junior. It was during clinical training at Westminster Hospital, London, that he met his future wife, Mary Dale Chanter, who had just qualified in nursing. They married in April 1953.

After qualifying the next year, Gregg embarked on a conventional career path in hospital medicine, but convention being alien to his nature he soon

diverged from traditional expectations. Industrious and energetic with a lively and inquiring mind, described as "serendipitous" by one colleague, Gregg became a principal in general practice at Roehampton in 1958 while securing a post as a registrar at the Westminster Hospital chest clinic.

The dual commitment, then almost unprecedented, enabled Gregg to act on his conviction that research into many common conditions could only successfully be carried out in a primary care setting. At a time when general practice research was a sluggish backwater, he showed the way for many primary care researchers to follow.

Dual approach

Managing a growing workload, Gregg was appointed director of the department of clinical epidemiology in general practice at the Cardiothoracic Institute in London in 1972, and four years later became honorary consultant physician at the Brompton Hospital, combining both with full time general practice in Roehampton and later Kingston upon Thames. As general practice research became better appreciated, he was appointed senior lecturer in the department of primary medical care at the University of Southampton in

1982, moving his general practice to the same area.

Recognised as an international expert on asthma, Gregg gave lectures worldwide, published more than 80 papers, and contributed to many textbooks, receiving many prizes for his work, including the BMA's Sir Charles Hastings prize on three occasions. His love of travel and humanitarian outlook took him to Eritrea in 1989 to advise on primary care. But his work was always rooted in his experience as a general practitioner. One friend recalls Gregg joining a ward round in an esteemed medical

academic department, where juniors vied to ask obscure technical questions. It was left to Gregg to inquire whose job it was to ask how the patient felt.

After retiring in 1987 Gregg remained busy as a visiting lecturer to Leiden University and an honorary research fellow at the centre for medical history at Exeter University. Pulmonary fibrosis increasingly curtailed his love of walking and eventually his life. He leaves his wife Mary, four sons, and a daughter.

Wendy Moore

lan Gregg, general practitioner (b 1925; q 1954 London) died 27 April 2009 from pulmonary fibrosis. Cite this as: *BMJ* 2009;339:b2811



"The work he did to establish normal flows and to develop peak flow meters that were useable in the community in everyday settings was hugely important in understanding the disease and allowing higher standards of care"

Roger Benjamin Bowes Bishton

Former general practitioner Tywyn, Gwynedd (b 1932; q Cambridge/ Middlesex Hospital 1959), died from cryptogenic fibrosing alveolitis on 1 May 2009.

Commissioned in the Royal Artillery for national service on leaving school, Roger Benjamin Bowes Bishton later obtained a half blue in athletics. After junior posts he was medical officer on a rubber plantation in Liberia, member of a general surgical team in Plymouth, and general practitioner in Lagos, Nigeria, before joining P&O as ship's surgeon. In 1970 he joined an expedition to Fiji to count turtles, which led to working in Australia as a flying doctor and in the outback. In 1973 he returned to the UK, soon joining the practice in Tywyn and practising surgery at the local hospital. He leaves a wife, Dianne.

Michael Inman Cite this as: BMJ 2009;339:b2754

Stanislaw Ganczakowski



Former consultant anaesthetist Bedford General Hospital (b 1916; q Edinburgh 1944), d 13 January 2009. Born in Lwow, Poland, Stanislaw Ganczakowski ("Staszek") decided to study medicine after a bobsleigh accident at the age of 14. His medical studies at Lwow were interrupted in 1940, when his family were deported to Siberia. In 1942, after a tortuous journey, he arrived at the new Polish Medical School at Edinburgh University, where he qualified. His first post was medical officer to the Polish general headquarters in London. In 1954 he became consultant in Bedford, where he worked full time until he was 70. As head of the anaesthetics department, he did much to develop the service in

Bedford. He leaves a wife, Betty; five children; and 12 grandchildren. **Mary Ganczakowski** Cite this as: *BM*/2009;339:b2850

Thomas Garrett



Former general practitioner Kevnsham (b 1942, q Cambridge/The London 1969; MA, FRCGP, MEd PGCert), died from myeloma on 29 May 2009. Thomas Garrett ("Tom") worked in Nigeria with the Church Missionary Society, being hospital medical superintendent in 1971-5. From 1975 he was principal GP in Keynsham until retirement in 2002. Tom was very active in GP training from 1982 and worked as a teacher in general practice from 1977 at Bristol University, helping to initiate teacher training for GPs. He also voluntarily developed medical education in poorer countries. After retirement, Tom continued to work as a GP appraiser, for a Christian charity, and as a consultant in Kosovo in conjunction with the royal college, which awarded him its commendation certificate. He leaves a wife, Penny; three children; and two grandchildren. **Huw Morgan**

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Robin Trevor Andrew Ross

Former general practitioner Pitlochry, Perthshire (b 1935; q Edinburgh 1959), d 4 March 2009. After graduating, Robin Trevor Andrew Ross ("Trevor") served as a surgeon in the Royal Air Force in Britain and Germany for five years, becoming squadron leader. He then trained in general practice in Edinburgh before practising in Pitlochry from 1969 to 1995. Instrumental in planning, designing, and lobbying for a medical centre, he also helped to develop the accident and emergency unit at Irvine Memorial Hospital in Pitlochry and community hospitals in Scotland. He was a founding member of BASICS—the British Association for Immediate Care—and served on all the recognised medical committees at all levels in Tayside and beyond. Predeceased by his wife, Margo, two years previously, he leaves three children.

D A Cruikshank, C W Grant Cite this as: *BMJ* 2009;339:b2847

Philip Henry Sutton



Former chest physician United Norwich Hospitals (b 1916; q King's College, London/Westminster Hospital, London 1940; BSc, MD, FRCP), d 24 May 2009.

After qualification, Philip Henry Sutton entered the Royal Air Force Volunteer Reserve, and after the second world war was registrar at the Brompton and National Heart Hospitals. Appointed assistant physician in Norwich in 1947, he built up outpatient and inpatient services at the West Norwich Hospital. Innovative, and an able administrator, he looked into waste in hospitals and championed improvement of clinical services as a member of the district management team. He was never afraid of plain speaking, including with the secretary of state. A good golfer, he was also active in Rotary and Probus clubs. Predeceased by his wife. Catherine. he leaves three children and two grandchildren. N Alan Green, Geoffrey Sutton Cite this as: BMJ 2009;339:b2852

Henry Maxwell White

Former general practitioner Bromsgrove and founder member of the Royal College of General Practitioners, d 28 June 2008. Henry Maxwell White ("Max") was an active member of the BMA Worcestershire Division, having been divisional secretary and chairman,

and chairman of the local organising committee for the BMA's 150th anniversary meeting in Worcester in 1982. Centrally he served on the Board of Science for 12 years and was an adjudicator of the BMA's film competition for 28 years. Max was a dedicated, forward thinking family doctor and a loyal partner much respected by colleagues. He also gave his time unstintingly to his many community and other interests. Having been attached to the 4th Hussars (Churchill's Regiment) in Malaya, he regularly attended its annual dinner. He leaves a wife, Mary, and two children. **David Brownridge, Rob Spires**

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Philip Henry Nicholls Wood



Former director Arthritis Research Campaign Epidemiology Unit (b 1928; q St Bartholomew's Hospital, London, 1955; FFCM, FRCP, FFPHM), died from an abdominal aneurysm on 16 June 2008.

A pioneering epidemiologist, Philip Henry Nicholls Wood changed the way of thinking about disease and its consequences. As director of the Arthritis Research Campaign's epidemiology unit from 1968 to 1988 he helped to improve the situation of disabled people. A deep and creative thinker, he was also consultant to the World Health Organization. His outstanding achievement was the now standard reference the International Classification of Impairments, Disabilities, and Handicaps (ICIDH) (published by WHO in 1980), through which he revised the classification of disease, originating a new concept of disablement. He leaves a wife, Cherry; four daughters; and eight grandchildren. Allan St J Dixon, Beatrix Milburn, Julia K Wood

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