# Alexander Gatherer

Public health doctor who later focused on global prison health

Alexander Gatherer (b 1929; q University of Aberdeen 1951; DPH Manch, DH Eng, FFCM, MD), died after a short illness on 6 August 2013.

Alex Gatherer's retirement in 1994 as director of public health and district medical officer in Oxford didn't last long. The next year, when he turned 66, he was recruited by the World Health Organization to join its new prisons and health programme.

His job title was temporary adviser, as WHO can offer permanent positions only to people younger than 62. Gatherer quickly became a valuable member of the prison health team. Each year WHO offered him a fresh contract extension, and Gatherer, who loved the work, gladly accepted. Over the years he made important contributions through research and work for prison health reform in Europe and beyond.

Earlier this year, at the age of 84, he wrote an editorial on the health of prisoners that was published in the *BMJ*, stating: "Prison healthcare is not only a test of our civilisation but also a real test of our medical professionalism." He signed the piece: Alex Gatherer, temporary adviser to WHO Health in Prisons programme.<sup>1</sup>

Gatherer never retired from WHO and over the years was known to playfully quip that he was actually "permanent temporary adviser."

"I will not find anyone who can replace him," said Lars Møller, who in 2002 became programme manager for prison and health and is based in WHO's regional office in Copenhagen. "He had a very good ability for networking and writing papers and publications, and in his presentation skills. He was always empowering other people, and as an expert he was the best consultant I ever worked with." And, perhaps most importantly for his role in prison healthcare, Gatherer had a special interest in vulnerable populations," Møller said.

Walter Holland, visiting professor of public health at the London School of Economics, says he was not surprised to learn that in 1995 Gatherer had cancelled his retirement to help improve healthcare for prisoners. Holland says that, during a long career in public health, Gatherer "was always trying to improve services for the most vulnerable."

Alexander Gatherer was born on 5 March 1929 in rural Scotland, in the village of Huntly, Aberdeenshire. He was the youngest of eight children; his father was a butcher and his mother a housewife. As a boy, known by the nickname Sandy, he spoke of wanting to be a doctor and was encouraged by his mother towards this



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goal. He was dux of the Gordon Schools in Huntly and went on to study medicine at the University of Aberdeen, qualifying in 1951.

After serving in the Royal Air Force Medical Services he decided to pursue a career in public health, taking a position working alongside the medical officer of Warrington in Cheshire, England. At the same time he studied at Manchester University, earning diplomas in public health and industrial health. He completed his thesis in 1960, earning an MD from Aberdeen University.

In 1965 he was appointed medical officer of health for the county borough of Reading, Berkshire, remaining until his appointment in 1975 as director of public health and district medical officer in Oxford. In Oxford he quickly became a focal point as leader of his clinical colleagues and was known as an innovator, always seeking to identify how public health could contribute to the improvement of services.

"Many doctors in difficulty came, or were sent, to him for advice and wise counsel, and the trainees were always confident of his support and open door," says Muir Gray, former director of research and development for Anglia and Oxford Regional Health Authority. "He always spoke with respect of other professions and was a unifying influence in the tribalism of healthcare." Gray, whose current posts include chief knowledge officer to the National Health Service, adds, "He also had the common touch; he was simpatico."

Jenny Mindell, clinical senior lecturer at University College London, who worked under Gatherer in the early 1990s, says Gatherer was among the first to experiment with unpaid media coverage to promote public health. To launch a project to try to make Oxfordshire (cigarette) smoke free, he employed a town crier in full regalia to travel the county, making public proclamations, which generated extensive news coverage.

"Alex had the self-confidence to organise or encourage innovative and potentially risky, that is unconventional, activities if he thought it would help improve the public's health," she says.

In 1993 his wife, Kathleen, died from cancer, ending their plans for retirement together. The loss contributed to his desire to continue working after retirement, says his daughter, Amanda Gatherer. "He sought more work opportunities to keep his focus in life," she says, but adds that, had her mother lived, "he would have kept work in his life in some shape or form."

In addition to his post-retirement work with WHO, Gatherer also held honorary academic positions at both Green and Wolfson colleges, and helped develop public health strategy in Japan. In 2006 he received the Alwyn Smith Prize of the Faculty of Public Health, Royal College of Physicians, and in 2009 the Presidential Citation from the American Public Health Association.

Gatherer leaves his second wife, Myra; two sons and his daughter from his first marriage; a sister; and three grandchildren.

**Ned Stafford Hamburg** 

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References are in the version on bmj.com.

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### bmj.com

 Read Stephen Ginn's series on healthcare in prisons at http://bit.ly/GZfWww

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#### **Leon Gerlis**



Consultant pathologist (b 1919; q London 1943; FRCPath), died from motor neurone disease on 23 August 2013.

Apart from his general pathology duties at Grimsby General Hospital, Leon Gerlis specialised in congenital heart diseases. He was coauthor of an atlas of congenital heart disease and published numerous papers on the subject. Subsequently he was appointed cardiac pathologist at the Killingbeck Cardiac Centre in Leeds and in 1987 honorary senior lecturer at the cardiothoracic institute at London's Royal Brompton Hospital. In 1997 he was made visiting professor in cardiac pathology at Imperial College, London, and developed further his international reputation. In 2003 the Brompton Hospital opened the Leon Gerlis Museum of Cardiac Morphology, acclaimed as a unique facility for teaching and study by visitors internationally. He leaves Daphne, his wife of 60 years; two sons; and four grandchildren.

Laurence Gerlis, Alex Gerlis, Stephen Hirst

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#### **Margaret Haire**



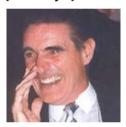
Immunologist Royal Victoria Hospital and Belfast City Hospital (b 1921; q Queen's University, Belfast, 1943; MD, FRCPath), d 27 February 2013.

After house jobs during the second world war, Margaret Haire spent a varied career in laboratory medicine. This included teaching microbiology benchwork to a generation of

undergraduates; undertaking polio vaccine research (with George Dick and David Dane); and working as routine immunology, serology, virology, and transfusion medicine became established in Belfast. Although employed as a laboratory doctor, she will be remembered for taking every chance to visit the wards and talk to clinical colleagues. During her working life and after retirement in 1986, Margaret was active in the Presbyterian Church in Ireland, playing golf, and travelling to visit relatives. Predeceased by her husband, she leaves five children, 12 grandchildren; and nine great grandchildren.

Michael Hunter, Angela Harrison, Libby Hughes, Fiona Hunter Cite this as: *BMI* 2013:347:f5880

#### **John Lloyd Jenkins**



General practitioner Welwyn Garden City (b 1928; q Birmingham 1951), died from myelomatosis on 21 July 2013.

After qualifying and junior hospital posts in Birmingham, John Lloyd Jenkins took a short service commission in the Royal Air Force, serving in Sri Lanka. After military service he accepted an opportunity to work as a singlehanded family doctor in rural Canada, before returning to England in 1958. He joined a family practice in Welwyn Garden City, where he worked for the next 40 years. He was instrumental in guiding his partners through this period of great change in general practice while, in a broader context, his diplomacy and negotiating skills were valued by the many local and national medical committees on which he sat. His last years were clouded by malignancy, but he remained a devoted family man and will be missed by friends and colleagues.

Peter Constable

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## **Hugh Michael Norman**



Former general practitioner (b 1929; q Trinity College, Dublin, 1954; DObst RCOG) died from metastatic transitional cell carcinoma on 25 January 2013.

Hugh Michael Norman ("Mike") found his training interrupted after his first year, when he caught polio while walking in the Pyrenees. He took a year to recover and was able to return to his studies on crutches initially and then a stick that stayed with him for the rest of his life. Initially interested in orthopaedics, he later moved into general practice in south Bristol. With 5000 patients, two reception staff, alternate days on call, and a large practice area, he still had time to go home for an afternoon cup of tea and play with his children. By his retirement in 1990 there were nine partners, across two sites with 28 staff. In retirement he enjoyed gardening, village life, and the Telegraph newspaper. His wife, Claudia, died four months after Mike, leaving three children and six grandchildren.

William Norman

Cite this as: BMJ 2013;347:f5464

## **Henry Robert Shepherd**



General practitioner Enfield, Middlesex (b 1919; q University of Liverpool 1942), d 29 April 2013.

Henry Robert Shepherd ("Bobs"), a Kitchener scholar at Liverpool University and avid Alpine climber, returned from Zermatt during the summer vacation to volunteer at the outbreak of war in September 1939. He was called back to finish his medical studies, and after house jobs was commissioned surgeon lieutenant and was decorated with the distinguished service cross for services in the eastern Mediterranean. Demobbed from HMS Nelson in 1946 he entered general practice in Enfield, where he stayed until he retired in 1987. He served as chairman of the local medical committee and local division of the BMA, of which he was elected a fellow. He leaves his wife, Mimika; two sons; six grandchildren; and four great granddaughters.

John H Shepherd, Emily S Shepherd Cite this as: *BMJ* 2013;347:f5383

## **Dorothy Trump**



Professor of human molecular genetics University of Manchester School of Biomedicine (b 1964; q Cambridge/London 1988; MD, FRCP), d 26 March 2013.

Dorothy Trump ("Dot") started her career in genetics at the Royal Postgraduate Medical School (Hammersmith Hospital), where she spent three years in pursuit of the gene defect for X-linked hypophosphataemic rickets and worked with others on mapping the first draft of the human genome. Returning to Cambridge in 1995, she combined higher specialist training in clinical genetics with an intense period of research on a rare X-linked form of inherited blindness. In 2003 she moved with her family to Manchester, where she continued her research into ocular genetics, diversified into genetic deafness, and helped set up a new clinical service for patients and families with hearing disorders. Dot died two months after her 49th birthday and almost six years to the day after she found a malignant breast lump. An unrelated soft tissue sarcoma was diagnosed a few months later. Her breast cancer was cured, but she knew the sarcoma would be harder to manage and more dangerous. Dot retired at the end of 2010, to spend time preparing her family for life without her. She leaves a husband and two sons.

Alison Tonks

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