



Chris Silagy

Melissa Sweet

BMJ 2002;324:53-
doi:10.1136/bmj.324.7328.53

Updated information and services can be found at:
<http://bmj.com/cgi/content/full/324/7328/53>

These include:

Rapid responses

One rapid response has been posted to this article, which you can access for free at:
<http://bmj.com/cgi/content/full/324/7328/53#responses>

You can respond to this article at:
<http://bmj.com/cgi/eletter-submit/324/7328/53>

Email alerting service

Receive free email alerts when new articles cite this article - sign up in the box at the top right corner of the article

Notes

To order reprints of this article go to:
<http://www.bmjournals.com/cgi/reprintform>

To subscribe to *BMJ* go to:
<http://bmj.bmjournals.com/subscriptions/subscribe.shtml>

Obituaries

Chris Silagy

One of the leading lights of evidence based medicine dies aged 41

The night before his final admission to hospital, Professor Chris Silagy hosted a Christmas dinner at his home for more than 30 of his staff. That day, he had made a presentation to them about his vision for the future of the Monash Institute of Health Services Research in Melbourne, Australia, which he headed.

It was typical of Silagy, one of the leading lights of the Cochrane Collaboration, that he continued working until the last possible moment, despite feeling terribly unwell. Silagy, 41, died on 13 December. He had been diagnosed with non-Hodgkin's lymphoma more than four years ago.

His communication skills, affability, enthusiasm, energy, vision, courage, and hard work are widely lauded as having been crucial for the progress of evidence based medicine.

Silagy became involved in evidence based medicine as the Sir Robert Menzies scholar in medicine at Oxford University's department of public health in the early 1990s, where he met Iain Chalmers, who was then setting up the first Cochrane Centre.

Silagy's systematic review of nicotine replacement therapy was published by the centre as a guide to other reviewers, and he attended the 1993 meeting that formalised the international Cochrane Collaboration, and joined its steering group.

After returning to Australia in 1993, to take up the foundation chair of general practice at Flinders University, he established the Australasian Cochrane Centre, and from 1996 to 1998 chaired the international collaboration's steering group.

Silagy was open about his illness and the personal perspective it brought to his work. He said he felt a strange sense of familiarity with the hero he never met, Archie Cochrane, who also had a life threatening condition, porphyria, and found it a profound influence on his thinking.

Not long after his diagnosis, Silagy spoke publicly of his frustration at discovering how little reliable evidence was available to guide his treatment decisions, and of the need for research relevant to patients' needs rather than researchers' "intellectual interests."



He felt "increasingly irate" at some of the debate about the merits of evidence based medicine: "When I am faced with a life threatening decision, I want the best evidence about whether it will increase my chances, what the side effects are."

He also spoke about how being a doctor could be a disadvantage, when carers wrongly assumed he would know what to do about side effects, and about simple practical things, like how to take off his drip without ripping his hairy arm.

Silagy showed a remarkable determination to work on through his illness and the debilitating side effects of treatment. But it would be wrong to assume that an awareness of mortality was the key factor— from all accounts, he was always driven.

Michael Kidd, professor of general practice at the University of Sydney, knew Silagy since medical school. "We were both general practice registrars at Monash at the same time, and I just found it exhausting trying to keep up with him, and eventually gave up," Kidd once said.

Hilda Bastian, convenor of Cochrane's consumer network, says the network's

development owes much to Silagy's support and care. She says Silagy was remarkable, not just for what he achieved, but how he did it. She recalls when Silagy once addressed a workshop for consumers, they were stunned to discover late in the day that he was a doctor.

"It was the personal impact he had on people," she says. "He changed things and he changed other people; he always challenged people."

When Silagy and the Australasian Cochrane Centre moved to Monash University in 1999, the dean of medicine, Professor Nick Saunders, predicted it would be fantastic for the university: "A month of Chris Silagy is probably worth a lifetime of some people."

In 2000, Silagy was appointed to chair the board of the new National Institute of Clinical Studies. Apart from his many professional commitments, he was actively involved in scouting for almost 20 years, including time as branch commissioner for Scouts in Victoria and National Commissioner for Youth Program.

Although Silagy always spoke to colleagues as if he would be part of their future, towards the end he began to acknowledge the inevitable, and prepared his own obituary. He leaves a wife, Jane, and four sons.

At Silagy's request, the Cochrane Collaboration's steering group will discuss with Jane Silagy and staff of the Australasian Centre the establishment of a commemorative scholarship fund. Further details will become available at the websites of the Cochrane Collaboration (www.cochrane.de/cochrane/silagy.htm) and Monash Institute of Health Services Research (<http://203.94.147.62/memorial/memorial.html>).

[MELISSA SWEET]


Chris Silagy, professor of public health and foundation director of the Monash Institute of Health Services Research Melbourne; b Melbourne 1960; q Melbourne 1983; AO, PhD, FRACGP, FAFPHM; died from non-Hodgkin's lymphoma on 13 December 2001.

bmj.com/cgi/content/full/323/7326/DC1



Longer versions of all these obituaries are available on bmj.com


Leslie Ballon

Former general practitioner Huddersfield (b 29 November 1914; q Manchester 1938; MRCP), died on 28 September after major heart surgery. He practised as a singlehanded general practitioner in Huddersfield for more than 33 years, retiring in 1975, when he became a salaried partner in a group practice in Congleton, Cheshire. In 1981 he joined his son's partnership in Manchester, and worked there until 1991 when, under government legislation, he was forced to retire on account of age. For 10 years until he left Huddersfield, he was medical officer to Huddersfield Town football club. In January 1989, he had a severe myocardial infarction on his first day on holiday in the Middle East, but within three months he was back at work. Predeceased by his wife, Florence, he leaves two children and four grandchildren. [SELF WRITTEN] 

John Griffith




Former general practitioner Caernarfon (b Dolgellau 1914; q Liverpool 1939), died on 30 October 2001 following a stroke.

As a captain in the Royal Army Medical Corps, he was posted to India in 1942. His regiment, the Royal Scots Dragoon Guards, was engaged in fierce fighting on the Imphal plain and had to capture Nunshigum, a ridge fortified by 250 Japanese soldiers 1000 feet above. Seven of the officers in the eight tanks were killed. Non-commissioned officers took their places and succeeded in clearing the ridge. John was mentioned in dispatches. The regiment then fought the enemy and tropical forest diseases throughout the monsoon in Burma down to Rangoon. Following the crossing of the Irrawaddy, John was mentioned in dispatches for the second time. After demobilisation he began in general practice in Caernarfon and retired in 1980. He leaves a wife, Nora. [J F HUMPHREYS JONES] 

John William Langley Kemp

Former general practitioner Wokverhampton and Perth (Western Australia), and consultant anaesthetist Grantham Hospital (b Wellington, New Zealand, 1915; q Barts 1938; MC, DA, FFARACS), d 14 July 2001.


With the outbreak of the second world war he joined the Royal Army Medical Corps. He was one of the last to be rescued from Dunkirk, and then served in North Africa and

Italy. A private and humble man, he never disclosed the acts of bravery for which he was awarded the Military Cross at Coriano, Italy. Predeceased by his first wife, Joyce, and his second wife, Ruth, he leaves three children. [JANE BOWEN, JOHN MEYRICK THOMAS] 

Hugh Courtney Maingay



Former general practitioner near Norwich 1933-70 (b Scarborough 1906; q Edinburgh 1930), died from septicaemia on 10 September 2001.

His love of athletics developed at university, where he was Scottish half mile champion. As an Olympic triathlete he trained with Eric Liddell of *Chariots of Fire* fame and ran in a Paris international match. After house jobs, he combined general practice with part time anaesthetics before joining the navy. He saw service in the West Indies on merchant cruisers. Discharged in 1944 because of a shortage of Norfolk doctors, he obtained the rank of colonel in the Home Guard. He leaves a wife, Hope; four children; and 11 grandchildren. [PHILIP SUTTON, CHRIS MAINGAY] 

Patricia Ann Maxwell (née Harding)



Former general practitioner Abridge, Essex (b 1952; q Leeds 1976), died at home from breast cancer on 1 October 2001.


After house posts in Huddersfield, Pat worked in the anaesthesia department at St James's Hospital, Leeds. She then undertook general practice training at Sherburn in Elmet, Yorkshire, before returning to Loughton, Essex, where she was born and had spent her childhood. She worked initially as a GP locum and became a partner at Abridge, nearby. Pat took early retirement in 1999 because of the disabling effects of metastases and iatrogenic heart failure. She

loved walking, especially in the Yorkshire Dales, and also dancing. She leaves a husband, David. [JOHN MODLE]

Pim Rajjayabun




Consultant geriatrician Halifax General Hospital (b Nonthaburi, Thailand, 1936; q St Andrews 1964; FRCP), died from metastatic lung cancer on 31 March 2001.

His career as a consultant spanned 25 years. With an interest in community based care, he was responsible for establishing a local rapid response team that provided a key interface between home and hospital for elderly patients. He leaves a wife June; two children; and two grandchildren. [PAUL H RAJJAYABUN] 

George Stephen Clive Sowry

Former consultant physician Edgware General Hospital (b 1917; q St Mary's Hospital, London, 1940; FRCP, FRCP Ed), died peacefully on 4 September 2001.

Clive joined the Royal Naval Volunteer Reserve in 1941 and saw active service in the North Atlantic. In 1953 he was appointed consultant physician at Edgware General Hospital, where he established a diabetic clinic. In 1957 he became medical administrator there. He was influential in the educational activities of the Royal College of Physicians, playing a major part in modernising the MRCP examination. Clive laid the basis of a strong educational tradition at Edgware Hospital, which led to the endowment of university hospital status. He leaves a wife, Jeanne, and two children. [GERALD BEVAN] 

Jean Lorraine Watson

Former general practitioner Edinburgh (b Ayr 1914; q Edinburgh 1938), died from a cerebral glioblastoma on 28 June 2001.

After war work (public health in the Western Isles and paediatrics in the Borders), she spent several years raising her two children, which she combined with marriage guidance counselling and locum work. From 1970 she became more involved in general practice at an Edinburgh health centre, where her main interest was the development of a baby clinic. [SUSAN MURRAY] 