

# Obituaries

## Dr David Corbett Reid Pitcher



**Formerly Consultant Psychiatrist and Senior Lecturer, Royal Free Hospital, London**

David Pitcher was aged 29 when he enrolled for his medical studies, having previously trained and worked as a quantity surveyor. This late start was partly due to serious ill health as a child and as a teenager so disrupting his education. He was

born in Harrow, London, in 1929. He was brought up mainly by his grandmother as his mother was the sole earner during his early years. He had secured a place at the local grammar school but had to give it up when he developed several episodes of rheumatic fever. Disruption of his studies was compounded by having a bout of tuberculosis when aged 18–20.

David eventually studied medicine at the Westminster Hospital Medical School, his aim from the start to become a psychiatrist. He qualified in 1965, aged 36. After house appointments in medicine and neurosurgery he spent 1 year at Horton Hospital, Epsom, where he worked under Dr Henry Rollin.

He was appointed senior house officer at the Maudsley in 1967. His consultant-teachers commended him for his pleasant manner and his mature approach to his patients. At the Maudsley he obtained the MPhil in Psychiatry in 1971 with a thesis concerning persons with XYY sex chromosome constitution and their families. His modest assessment was that he had not broken new ground, but an interesting finding was that his subjects were of normal intelligence. He passed the MRCPsych in 1972. He continued with some research into genetic and chromosomal disorders but gradually turned to clinical problems in general and forensic psychiatry. He was elected FRCPsych in 1979.

After the Maudsley, David was appointed lecturer nominally at the Royal Free Hospital. In effect, he started at Friern Hospital which was initially the clinical base of the former's newly formed Academic Department of Psychiatry. This was in 1971, just a few years after the publication of *Sans Everything*<sup>1</sup> by AEGIS. The staff at Friern felt they had been targeted by the book's revelations of degrading and harsh treatment of elderly patients in a number of hospitals, not confined to mental hospitals. There was a fall in morale but the book was also the impetus for beneficial reforms, with improved recruitment and training of staff. David was undaunted by this recent history of the hospital and the lingering stigma. He played a major role in developing the department's ambitious undergraduate and postgraduate teaching programmes. By 1974 his promotion to senior lecturer was a just reward.

David excelled in medical administration aided by his talent for writing clear position papers in which he presented

his argument with powerful persuasion. He used this gift generously. For example, he wrote to Mr Podgorny, Chairman of the Praesidium of the Supreme Soviet of the USSR, and Academician Snezhnevsky of the Moscow Institute of Psychiatry, expressing distress at the detention of named Russian dissidents and professional colleagues on the grounds of suspect psychiatric disorders. In this correspondence he included a letter of sympathy and support to the wife of one of the dissidents. On a lighter level, he was a regular contributor to the correspondence columns of *The Times*, for example on the evils of inheritance tax. He also corresponded with Mrs Margaret Thatcher, both before and after her election as Prime Minister and in her capacity as MP for Finchley in whose constituency Friern Hospital was sited. Indeed, she had sent him a fulsome letter in which she expressed her great admiration for the work done by him and all the staff at Friern, sometimes in the face of considerable adversity.

David's psychiatrist colleagues recognised his tenacity when they asked him to act on their behalf in a libel case against one of the national broadsheets. In a careless report a journalist had written that patients at Friern could be 'locked up' without the essential legal proceedings. The newspaper had gratuitously added that this was not surprising as the psychiatric staff were also deranged. David's hard work over the course of 6 years paid off. The result was a welcome printed apology and a modest settlement to be shared among many. The sums involved were small because it was not possible to demonstrate that the psychiatrists' professional reputation had suffered.

David's administrative skills were also recognised formally through his appointment as chairman of the Medical Committee at Friern Hospital (1976) and chairman of the Psychiatric Advisory Committee of the North-East Thames Regional Health Authority (1984).

He retired from the National Health Service in 1989 but continued in private practice from Harley Street, eventually developing a thriving medico-legal practice. He was asked to advise on the nature and severity of personal injuries sustained by the disaster passengers of the *Marchioness* when it collided with and was sunk by the *Bowbelle* in the Thames on the night of 20 August 1989. David's analysis of the recognition of post-traumatic stress disorder was fully appreciated by legal colleagues with whom he cooperated successfully. His analysis was clearer than in most psychiatric texts. He argued that it was important to distinguish between subjective symptoms and objective evidence, such as the inability to work. Of special interest was the grief reaction in some of the passengers who had lost friends in the accident, and this was considered to be more likely to resolve quickly than the post-traumatic stress disorder.

David gave up professional work in 2002 when a glossopharyngeal lesion was recognised to be malignant. He was offered the stark choice of a laryngectomy or deep-radiotherapy. On medical advice at the Royal Marsden he elected for the latter. In the long run this was a good choice as he had a 7-year survival without the vocal disability. Nevertheless, his reaction to the radiotherapy was severe with loss of appetite

and loss of weight. He responded courageously, with fighting spirit. Over the course of 1 year, and with the help of his family, he gradually regained his physical energy. He appeared to make a remarkable recovery and appreciated in particular his rounds of golf with former Royal Free colleagues. For a long time the radiotherapy had impaired his appreciation of the taste of food and wine, but even that improved, and he was able to resume holidays. But the tumour eventually spread. During his final illness he was admitted to Barnet General Hospital where he still requested antibiotics and nasogastric

feeding. Eventually he had to give up the struggle and died in hospital on 30 May 2009.

David's former wife, Sylvia, predeceased him. He is survived by their daughter, Sarah, and their son, Andrew.

**Gerald Russell**

1 Robb B (on behalf of AEGIS). *Sans Everything: A Case to Answer*. Nelson, 1967.

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## Professor Walter Muir



**Formerly Professor of Developmental Psychiatry at the University of Edinburgh and Honorary Consultant Psychiatrist (Learning Disability), NHS Lothian**

Walter was born on 13 February 1958 in Edinburgh, the city where he spent his working career. He qualified MBChB from the University of Edinburgh in 1983 after completing an intercalated

degree in pharmacology, graduating with first-class honours in 1980. This undergraduate laboratory-based experience was the start of a lifelong interest in neuroscience and the biological basis of behaviour. After house officer posts in the Royal Infirmary, he joined the Royal Edinburgh Hospital rotational training scheme in psychiatry in 1984 and took the opportunity offered by the Wellcome Trust research registrar scheme to combine clinical training with academic research. This was a time when molecular genetic approaches to complex disorders, including schizophrenia and bipolar disorder, were becoming attractive because of advances in DNA technology and the increasing availability of polymorphic DNA markers for mapping genes. Walter became involved in family genetic studies and, aware of the limitations in psychiatry of purely symptom-based diagnoses, he investigated the role of electrophysiological biomarkers. Families volunteering for genetic studies were often asked to take part in recordings of brain waves and eye movements, and Walter published several key papers describing disordered P300 auditory event-related potentials and eye movements in schizophrenia and bipolar disorder. He had a natural gift for designing and setting up electrophysiological studies which were also an opportunity for him to continue a long-standing interest in physics and electronics. Indeed, he had been awarded an amateur radio licence at the early age of 19 and always remained an active 'radio ham' whenever time permitted.

After qualifying MRCPsych in 1987, Walter continued genetic research as a member of the MRC Brain Metabolism Unit based at the Royal Edinburgh Hospital and was awarded a prestigious MRC Clinician Scientist Fellowship, which he held

for 6 years before becoming a consultant. He recognised the potential value of naturally occurring chromosomal abnormalities as significant signposts to the location of illness-related genes in psychiatry. To further this approach, encouraged by the late Professor John Evans at the MRC Human Genetics Unit in Edinburgh, he worked with a large database of chromosomal abnormalities previously established in the MRC Unit, and from this he identified several key families where chromosomal abnormalities were the most likely cause of psychiatric illness. This was an immensely productive time for research, and his combination of clinical and laboratory skills, particularly a training in cytogenetics, underpinned the work that eventually led to the discovery of several genes contributing to risk of schizophrenia and bipolar disorder, including the gene *DISC1*, to date one of the most studied candidate genes for neuropsychiatric illness. Other important genes identified by Walter and his colleagues using a cytogenetic approach include *GRIK4*, *NPAS3*, *PDE4B* and *ABCA13*, implicating a variety of pathways in the pathology of psychoses. He authored over 160 published papers on gene-mapping studies and wrote several book chapters and reviews on the effects of psychiatric illness in individuals with intellectual disabilities.

It was natural when Walter was appointed senior lecturer at Edinburgh University's Department of Psychiatry and honorary consultant psychiatrist with NHS Lothian in 1995 that he chose to specialise in the psychiatry of learning disability, as he had a particular interest in the very disabled group of patients with intellectual disability and comorbid schizophrenia or bipolar disorder. He established a group of researchers within the specialty and made an important contribution to international multicentre collaborations, carrying out genome-wide association studies in schizophrenia, bipolar disorder and depression by including a group of patients with intellectual disabilities in these large-scale studies. He regularly reviewed research grants and papers for journals and was a member of the Biomedical and Therapeutic Research Committee of the Chief Scientist Office of the Scottish Government and specialty advisor on the psychiatry of learning disability to the Chief Medical Officer in Scotland.

However, genetic research was not his only interest and he worked long hours seeing patients, their families and carers. As training programme director he oversaw a doubling of specialty registrar posts in learning disability in the region and