
Obituaries

In memoriam

Philip Ralston Boyd, (18 April 1922–6 May 1993), *formerly Consultant Psychiatrist, Middlesex Hospital, London W1*

My thoughts on Philip Boyd are based on memories of the man whom I knew for 20 years. He came into my life when I was very young and newly arrived in this country. I had by mistake applied for a senior post at the Adolescent Unit at the Middlesex Hospital where he was in charge of the care and treatment of disturbed adolescents with drug problems. On a cold rainy autumn evening I turned up for an appointment in a part of London about which I knew nothing and which appeared to me to be at the end of the world. I became aware immediately that I was in the presence of a highly charismatic man who both intimidated me and made me feel at ease. He was half amused and puzzled that such a young person had the audacity to apply for a senior post in a traditional English teaching hospital. His sense of humour was of course unique and consisted of an appealing mixture of youth, sophistication, and sharpness. At that meeting he told me that I had no hope of obtaining the post in question, but that in a few months another post, more appropriate to my experience, would be vacant for which he thought I would be suitable. His capacity to convey from the beginning an intense belief in one's potential was one of the gifts that allowed him to treat successfully some of the many difficult youngsters under his care. I eventually applied and succeeded in getting the post and spent seven years working with him.

He had a special gift for remaining in touch with the inner and external world of adolescents of both sexes and this helped him enormously in his therapeutic work. Although having undergone a personal analysis, he had no formal psychoanalytic training as such and he always saw himself as an eclectic psychiatrist. Nevertheless, he encouraged psychoanalytic interest in others. He saw himself very much as a medical doctor and, although sympathetic to lay people in his profession, I have the feeling that he always felt them to be a little intrusive. This was not an

obstacle: his capacity to transmit his enormous energy, dedication and enthusiasm influenced everybody who came in contact with him. It is no coincidence – and it is very much a sign of the human quality that he brought to Simmons House – that many of the boys and girls we treated remain in contact and remember their days and experiences there as the only good thing that had happened to them in their lives.

He was not always an easy man to work with. He channelled all his energies into the running of the unit and he found it difficult to understand when others would not share his total and complete commitment to Simmons House. He had lost himself in his work and expected the same from us. At the same time, perhaps because he was such an intelligent and sensitive man, he had an admirable and unexpected capacity to adapt to others. Working with him made one feel part of a world which was both envied, admired and disliked at the same time. He was not arrogant, but he was convinced of his value and of the purpose of his mission in life: he successfully conveyed this profound conviction to his patients and colleagues. He loved everything young and he remained to the end very much a youngster at heart. When asked why he had dedicated his life to the care of the young, he often spoke about this capacity to remain young, and about his conviction that he had a gift for this special group of people. To those of us who worked with this very difficult but rewarding group of patients, and who are familiar with the work of people like Alcorn and other pioneers both in adolescent psychiatry and psycho-analysis with adolescents, there was no way we could doubt that this gift was an important part of his therapeutic equipment. He was very interested in the physical and intellectual development of those under his care, in both his patients and the young doctors in whose training he actively took part. For all these wonderful professional and humane qualities, the world of all those who came into contact with him, will be forever smaller and poorer without him.

He was a religious man and in this area, like in many other areas in his life, he was often in conflict. The son of an English father and a Belgian mother, he was brought up in both English and French, which gave him the flexibility to move across the boundaries of culture, race and age. At the same time it made him into a bit of a misfit. I was always aware of his determination to fit into the English model while at the same time his rebellion against it accounted for a Latin/continental flavour to his personality.

I would like to quote a poem by the Spanish poet Jaime Gil de Biedma which Philip would have liked.

No volveré a ser joven

Que la vida iba en serio
uno lo empieza a comprender más tarde:
como todos los jóvenes, yo vine
a llevarme la vida por delante.

Dejar huella quería
y marcharme entre aplausos
-envejecer, morir, eran tan sólo
las dimensiones del teatro.

Pero ha pasado el tiempo
y la verdad desagradable asoma:
envejecer, morir,
es el único argumento de la obra.

I Will Never be Young Again

That life was serious
one becomes aware later:
like all youth, I came
to take life by storm

To leave a mark I wanted
and depart at the moment of applause
to grow old, to die – were only
the dimensions of the theatre.

But time has passed
and the ugly truth
raised its head:
to grow old, to die
(is) and are the only plot of the play.

(My translation).

LUIS RODRÍGUEZ DE LA SIERRA

Barbara Shorvon, formerly Consultant Psychiatrist, South London Hospital for Women and Children

Barbara Shorvon, nee Bensusan-Butt, was born in Colchester on 24 July 1914 and died in London on 20 July 1994. Her mother was the first woman GP to practise in Essex.

Barbara studied medicine at the Royal Free Hospital and graduated MB BS (London) in 1939. She decided to specialise in psychiatry early on in her career and gained the DPM in 1942. In 1971 she was elected MRCPsych. Apart from her consultant appointment at the South London Hospital for Women and Children she practised as psychotherapist to HM Prisons Wormwood Scrubs and Holloway in addition to Sutton Neurosis Centre and Dartford Prisoner of War Neurosis Centre.

As a consultant psychiatrist, Barbara was a skilled diagnostician whose patients respected her way of working. She was a friend to her colleagues at the South London Hospital for Women and to many of her patients.

Long before 'mentoring' was fashionable she 'mentored' me. We were colleagues at the South London Hospital for Women. When she nursed her husband Dr Joe Shorvon, himself a distinguished psychiatrist, through 18 months of terminal illness I took her place as psychiatrist at Holloway Prison. I found that Barbara was respected by both prison officers and prisoners: she employed an ex-prisoner in her home for many years.

In 1978, I had pneumonia, and the day I left hospital Barbara's secretary phoned to say that 'my boss' was taking me to her home for the weekend. She asked no 'psychiatric' questions, fed and watered me well and said I was not to return to work for six weeks. After her first stroke I was pleased to be able to accompany her to Singapore where we stayed with Barbara's friends. She then went on to visit her son in New Zealand and I travelled to Australia.

Sadly her last years were clouded by her stroke. Gladly I drove her round Richmond Park rather than have a 'bereavement session' after her twin brother died in March 1994. In retirement I miss Barbara. She was a unique woman who leaves not only consultant doctor sons but many friends and patients who are truly bereaved.

JOSEPHINE LOMAX-SIMPSON