



obituaries

John Lewis Crammer

Formerly Reader of Biological Psychiatry, Institute of Psychiatry and Consultant Psychiatrist, The Maudsley Hospital

John Crammer died on 4 July 2002, aged 81, at his home in Steeple Aston, Oxfordshire.

It is appropriate to place John Crammer's academic and research career in the setting of his manifold job experiences. Using his own words, he began as a research biochemist and went on to become a medical student, a popular science journalist, a medical correspondent for the *Guardian* and RAF medical officer, and spent a period as an 'idler on the French Riviera' when he decided to 'retire' while young enough to enjoy it and to work later. It was after a spell on the editorial staff of the *BMJ* that he obtained a senior house officer post at the Maudsley in 1954 at the age of 33, where he stayed for only 1 year.

His peripatetic career continued with a stint as an asylum medical officer (his term for a mental hospital consultant) and it was not until 1971 that he returned to the Maudsley as senior lecturer and consultant psychiatrist. Not content with this he stood for election to the Editorship of the *British Journal of Psychiatry*, a position he held from 1977 to 1983. He admitted that after his retirement in 1985 he had difficulty in settling down and worked as a visiting consultant psychiatrist and teacher in Ontario and Hong Kong. Fortunately, his energy was sustained and he entered what was arguably the most productive period of his life, culminating in important contributions to the history of psychiatry.

In one way the obituarist's task is made simpler by John's ambition to write a detailed autobiography. Sadly, he only succeeded in describing his life until the age of 18. Nevertheless, he wrote numerous pieces as rehearsals for the autobiography, providing little gems of reminiscence and perspectives on psychiatry, mental hospitals and the NHS. But the obituarist should tread warily. When John wrote about himself he adopted a self-mocking style and modestly underrated his achievements and personal qualities. In order to identify the various threads in John's professional life, it may be useful to attempt a separation into three main themes: his work as a biological psychiatrist, his Editorship of the *British Journal of Psychiatry* and his place as a medical historian.

John was born in Manchester on the 7 August 1920. He wrote that at the age of 12 he suddenly became interested



in science in spite of being brought up in a family whose orientation was towards the arts. On acquiring a chemistry set and a microscope he decided to study biochemistry. At an early age he took his own temperature every 2 hours throughout the 24 hours with a clinical thermometer to see if it was true that 98.4° F was 'normal'. He won an open scholarship at Christ's College, Cambridge, with an eye on a medical career, but soon found he disliked anatomy and decided to embark on a PhD in physiology and biochemistry. He progressed well until his supervisor left for another post and took the research grant with him. He then obtained a Goldsmith scholarship and began his medical studies at University College Hospital Medical School, London. He combined his clinical studies with popular science journalism in order to support himself financially. After qualifying in medicine he became a house physician at the Whittington Hospital, London, soon to be followed by a period of National Service as a medical officer in the RAF. Thereafter he worked as assistant editor to the *BMJ* and wrote for other journals and newspapers before deciding to return to clinical medicine. It was then that he chose psychiatry and arrived for his initial stint at the Maudsley. John described well his ambivalence about the Maudsley. He said that it stood for some good things, including the methods of full, balanced information-gathering on each patient, and the distinction between observation and interpretation. Yet in 1985 he wrote that he disliked the Maudsley's intensive competition, over-work and elitism.

After his brief stay at the Maudsley he was appointed registrar at Cane Hill Hospital. He had always been intrigued by mental hospitals since being shown round a local asylum by a social worker friend of his mother. 'It was like visiting an interesting foreign country.' He thought

he could apply his knowledge of biochemistry to test the work of Gjessing in periodic catatonia and other psychoses. Thus began a productive phase of research. According to rumour he kept a weighing machine in the boot of his car and conveyed it across the vast grounds of Cane Hill Hospital from one ward to another. The results were two influential papers on the periodicity of mood change correlating with alterations in body weight, body water and sodium. Later on John was to undertake further laboratory research at the university department of experimental psychiatry in Birmingham under the guidance of W. Mayer-Gross. His first consultant psychiatrist appointment was in Birmingham, but he soon moved to St John's Hospital, Stone.

In 1971 he was appointed senior lecturer at the Institute of Psychiatry and the Maudsley, in charge of the metabolic unit. He had already studied the antidepressant effects of imipramine. John turned his attention to testing the noradrenalin depletion hypothesis of depression. The value of this research was recognised in 1981 by his appointment to the Readership in Biological Psychiatry at the University of London.

The second theme of John's professional life was his fondness for the written word and his willingness to comment on the passing social scene, qualities nurtured by his early experience as a medical and scientific journalist. He served as Assistant Editor of the *British Journal of Psychiatry* 1968–1973 and was elected to the Editorship in 1977. During this period and later he commented freely on the *BJP*. He saw the *BJP* evolving in the context of the current social and political background of psychiatry, and had much to say about the need for psychiatry to keep abreast of the vast social changes that impinged on clinical practice. He thought the *BJP* should be a bastion against 'anti-psychiatry'. He applauded the psychiatrist's increased concern with the family of the patient and the whole community. Already in 1988 he remarked that community care had worked badly. He regretted the patient's loss of choice of his/her psychiatrist, who was selected simply by the patient's home address.

Another journalistic legacy was John's style of writing, which was original, lively, simple and at times pugnacious. He was liberal in his advice to prospective authors of scientific papers should they fall victim to 'a fit of authorship'. He would express views that many of us might share but would be too inhibited to commit to paper. Thus, John's fondness for a *bon mot* might lead him to describe our masters as simple-minded and community care as the Emperor's new clothes. He



was conscientious in his hand-written correspondence, but at times could be blunt to the point of ruffling other people's feathers. These were momentary outbursts for which he soon made amends. In his capacity as Editor, John wrote with colleagues a valuable book on the *Use of Drugs in Psychiatry* and guided it into a second edition.

The third theme of John's professional life is that of a medical historian. He belonged to a small band of psychiatrists who had obtained extensive clinical experience in mental hospitals as well as a teaching hospital (the Maudsley). He brought to bear the academic skills of data gathering and interpretation on the study of a specific mental hospital, resulting in a book published in 1990 – *Asylum History. Buckinghamshire County Pauper Lunatic Asylum – St John's*. In his hands the history of St John's from 1853 until its closure in the early 1990s illustrates well the successes and failures of the asylum system. At first the mid-Victorian asylum functioned like a large family with a superintendent as father. The asylums were initially designed on a small domestic scale, but the patient population grew steadily during the late 19th century, leading to a period of 50 inglorious years.

Improvements began slowly, first with the Mental Treatment Act of 1930 and then more dramatically with the inception of the NHS in 1948. John concluded that the history of an asylum is a history of whether those in power viewed those with mental illness with understanding and compassion. He had little doubt, however, that the good outweighed the bad. Thus, John took issue with the views contained in Andrew Scull's book, *Museums of Madness*. To expand his differing views, John later wrote an article with the title 'English asylums and English doctors; where Scull is wrong'. He extended his criticisms to other non-medical sociologists and social historians in his characteristically lively style. He surely succeeded in presenting 'a little known piece of social history in a readable form'.

John combined his knowledge of clinical nutrition, biochemistry and psychiatry to provide us with an intriguing historical analysis of extraordinary deaths of asylum in-patients during the 1914–1918 war. He identified the underlying cause as a lapse of those in authority, when their previous responsibilities for the welfare of those with mental illness were thrown to the wind in misguided patriotic zeal. They allowed drastic cuts in the ration of bread in 1916 in order to effect economies and seriously neglected well-known public health measures for the prevention of tuberculosis. He estimated that some 17 000 patients therefore became fortuitous casualties of war.

John's last few years were marred by illness. His curiosity in abnormal psychological phenomena drove him to describe objectively and courageously his experience during a confusional state he suffered in 1999 as a result of renal failure. He recalled four brief episodes of partial arousal when he misinterpreted events in the course of his hospital treatment. While being moved between different wards and hospitals he thought he had been flown first to India and then to Australia before finally returning home in a plane that was due to crash. His psychological recovery was rapid when haemodialysis corrected the biochemical disturbance. He suggested that his illness demonstrated a plasticity of the mind with a biochemical disturbance distorting the partial awareness of human contacts and medical procedures.

John's last 3 months were also saddened by the life-threatening illness of his wife, Joy, who required a long admission to hospital. He visited her frequently in between his own hospital sessions for renal dialysis. He died in his sleep shortly before his wife's return home.

No account of John's life and personal qualities would be complete without mentioning his personal kindness not only to patients but also nursing staff and other colleagues. He was a modest man. He seldom spoke of his professional achievements and claimed only that he might have contributed a few crumbs to human knowledge. He is survived by his wife Joy and daughter Julia.

CRAMMER, J. L. (1959) Water and sodium in two psychotics. *Lancet*, **1**, 1122–1126.

— (1990) *Asylum History. Buckinghamshire County Pauper Lunatic Asylum – St John's*. London: Gaskell.

— (1992) Extraordinary deaths of asylum inpatients during the 1914–18 war. *Medical History*, **36**, 430–441.

— (1994) English asylums and English doctors: where Scull is wrong. *History of Psychiatry*, **5**, 103–115.

— (2002) Subjective experience of a confusional state. *British Journal of Psychiatry*, **180**, 71–75.

Gerald Russell

Charles Michael Bromiley Pare

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Michael Pare, as he was invariably known, died on 3 July 2002. Clinical psychiatry and research are both greatly the less for his passing.

Born October 1925 in Bolton, he lived in Oswaldtwistle in Lancashire where his father practised as a GP. After education at Marlborough College he read medicine at Cambridge, transferring to the

Middlesex Hospital for clinical training. He qualified in 1948 and had intended to become a GP, like his father, but, after 3 years of general medical training, during which he completed his MRCP, and 2 years of National Service, he joined the Maudsley Hospital in 1954. Successfully combining clinical training and research he completed an MD in 1956 and the University of London DPM in 1957. But after 2 further years at the Maudsley he decided that his future should be with the NHS rather than in full time research. Professor Sir Aubrey Lewis tried hard to persuade young psychiatrists who were interested in research to stay at the Maudsley and badly wanted Michael to do so as a research worker with an honorary clinical position; he believed that a move from the Institute to an undergraduate teaching hospital was not conducive to further productive research work. Michael, on the other hand, rightly believed that a consultant post would provide him with enormous opportunities, not only to do good clinical work but also to continue his research; a belief that his 50+ papers (80% published after his move to St Bartholomew's) show to have been justified. Stories abound of Sir Aubrey's strongly persuasive methods to keep people at the Maudsley. One is that he berated Michael for 'having no ambition' when told he wanted to apply for a consultant post at St Bartholomew's. However, this clearly did not prevent him from strongly supporting Michael's application, and when Sir Aubrey heard that Michael had been appointed to St Bartholomew's, he said 'now we shall always see you wearing pin-striped trousers', the supposed sartorial style of St Bartholomew's consultants, especially of those who also did part-time private practice. (Private practice was another of Sir Aubrey's *bêtes noires* from which Michael successfully broke free.) After a spell as a US Public Health Service Traveling Fellow he arrived at St Bartholomew's in 1959.

