Olive Scott 25th June, 1924–4th March, 2007



LIVE SCOTT WAS ONE OF THE PIONEERING paediatric cardiologists in the United Kingdom and Europe. She gained most of her early clinical experience in the 1950s, whilst working in paediatrics and adult cardiology in Liverpool. This was where she met her husband, the equally pioneering immunologist James Scott, who was appointed Professor of Obstetrics & Gynaecology at the University of Leeds in 1961. James sadly pre-deceased her on September 17th, 2006. Olive nursed him devotedly and single-handedly throughout the months of his terminal illness.

After working briefly at the Leeds General Infirmary, Olive Scott was appointed in 1966 as their first paediatric cardiologist, and she began her lifelong work at the regional Cardiothoracic Centre for Leeds, then housed at Killingbeck Hospital. Prior to this period, there had been virtually nothing available to help the child born with cyanotic congenital heart disease, with most infants at the time cared for by adult cardiologists in terms of investigative procedures, and by general paediatricians for their general care. Her appointment, therefore, provided the opportunity to develop a new unit that organised and implemented specifically the facilities for the newborn and younger child. At about that time, Bill Rashkind had developed the technique of atrial septostomy, and Olive was determined to apply this technique without delay, so she wrote directly to Rashkind. One of her keep-sakes for many years was the envelope sent by Rashkind, containing one his balloons, for its simple address: "Dr Olive Scott, Leeds, Great Britain". She had already made her mark internationally.

Olive had been trained in the years when the skill of clinical expertise was mandatory, and in this she excelled. In those developmental years of the 1960's and early 1970's, the non-invasive diagnostic techniques had not been developed, and detailed diagnosis was dependent upon invasive studies. The decision, often in the night, in respect of whether or not a newborn should be subjected to this investigation relied heavily on clinical skill and judgement with, at best, only a chest x-ray and electrocardiogram to help. In assessing this evidence, and in making these decisions, there was no one to better Olive Scott.

Olive was quick to recognise potential, and so she did with Fergus Macartney, who after working at Killingbeck as a Senior House Officer, was identified by Olive to fill the post of second consultant paediatric cardiologist there. She accepted his youth and, being determined to appoint him, negotiated a proleptic appointment for him following his fellowship at the Mayo Clinic.

Fergus was prolific in his clinical research at Killingbeck, and after only four years was appointed the first Professor of Paediatric Cardiology in the United Kingdom, based at Great Ormond Street.

Olive Scott trained many foreign doctors in her time, and many of them were especially grateful for her extraordinarily well enunciated received pronunciation. For years, she continued to undertake a full on-call commitment of every other night and every alternate weekend, in addition to being a totally supportive wife and mother. Being on call in those days frequently required invasive studies to be undertaken during the night. Olive was adept at cardiac catheterisation at a time when the convention was for newborns and children to undergo these procedures under sedation and local anaesthesia only, rather than under the general anaesthesia of today.

Despite this expertise, Olive also had clear insight into the advantages of cardiac ultrasound. Thus, with her colleagues, she put forward an ambitious plan to construct and develop the first dedicated Non-Invasive Cardiac Diagnostic Unit in the United Kingdom. Supported by the Yorkshire branch of the Variety Club of Great Britain, the Unit was opened at Killingbeck in 1976. The relationship with the Variety Club enabled continued expansion, and the application of the latest diagnostic technology for the following 20 years

On a more human level, Olive Scott, ever a committed, compassionate clinician, was a natural with children of all ages and also had a particularly good manner when communicating with anxious parents. Technical jargon was dispensed with, and the functions of the heart and problems associated with it were reduced to simple analogies with domestic plumbing.

She fought hard for many years to change the very unappealing name of Killingbeck – she loved the hospital but simply hated its name, knowing how intimidating it was for children and parents alike. To her regret, she never succeeded in this Obituary

Olive Scott was also an innovator in bringing nursery and primary school teachers onto her ward to amuse, and also to educate longer-term young patients. As a mother herself, she had a great awareness of the importance of the bond between parents and their children. She was a pioneer in arranging accommodation in the hospital that enabled parents to be with their sick child round the clock, rather than simply visit. On an international level, she was a very enthusiastic early member of the Association for European Paediatric Cardiology.

Away from the hospital, she was a devoted mother, and successfully managed a career and family juggling act that was highly unusual at its time. Her retirement was every bit as active as her professional career. She was a keen and very competent cook, and both she and James enjoyed entertaining on a regular basis. They also travelled widely, with the certificate of her pilgrimage to Santiago del Compostella being the only one of many awards that she ever bothered to frame.

> Gordon Williams Consultant Cardiologist Leeds General Infirmary Leeds, LS1 3EX, United Kingdom E-mail: dr.gordonjwilliams@btopenworld.com