Obituaries

Louis Lasagna

Pioneer in clinical pharmacology, investigator of the placebo response, and medical school dean

Louis Lasagna revolutionised the evaluation and regulation of drugs throughout the world. "Lou Lasagna created clinical pharmacology. He put academic rigour into the study of new drugs in humans," said Dr Kenneth Kaitin, who succeeded Lasagna as director of the Center for the Study of Drug Development at Tufts University.

Lasagna's testimony in US Congressional hearings led the Food and Drug Administration to demand proof of efficacy as well as safety of new drugs, Dr Kaitin told the *BMJ*. "He promoted randomised controlled clinical trials as the gold standard."

In his more than 50 years in medicine, Dr Lasagna was a consultant to the Food and Drug Administration and many other organisations in the United States and abroad, founded the Center for the Study of Drug Development, and served as dean of the Sackler School of Graduate Biomedical Sciences at Tufts University in Boston for nearly 20 years. He also wrote or cowrote 655 papers and two popular books (*The Doctors' Dilemma* in 1962 and *Life, Death and the Doctor* in 1968).

He was born in modest circumstances in New York City in 1923, the only child of immigrants from northern Italy. He did well in school and went on to Columbia University College of Physicians and Surgeons, where he was fascinated by a course in clinical pharmacology. He wanted to know how to use drugs better.

Lasagna became an assistant professor at Johns Hopkins University in Baltimore. There, at a time when new drugs were bursting on to the scene, he set up the country's first division of clinical pharmacology to bring good science to drug appraisal.

During two years at Harvard studying anaesthesia and analgesia, Lasagna cowrote a remarkable paper, "A study of the placebo response" (*American Journal of Medicine* 1954;16:770-9). "When surgical patients suffering from steady, severe wound pain are injected subcutaneously with 1 ml of saline, three or four of every ten such patients report satisfactory relief of pain," the paper said. In meticulous detail it explained that some patients responded

better to placebos than others, that they might respond at some times and not at others, and that considering the placebo response was essential in clinical trials. In 1997 *Lancet* editor Richard Horton cited Lasagna's paper as one of the 27 most notable achievements in a list beginning with Hippocrates.

In the postwar period, the pharmaceutical industry was free-wheeling and little regulated. When a company created a new drug, it gave samples to a few doctors and asked them to try it. Nobody titrated doses, Lasagna said in an article in *Tufts Medicine*, a university publication. Doctors gave patients large doses of penicillin, believing that an excess couldn't hurt. Drug company advertising made outrageous claims and drug prices were high. There were abuses in marketing, in price fixing, and in hiding drug toxicity.

In 1962 Dr Lasagna testified in Congressional hearings held by Senator Estes Kefauver on drug pricing. Towards the end of the hearings, the thalidomide disaster was beginning to emerge. Although the United States was largely spared, the scandal led to stricter standards for drug approval and promotion. "The United States was the first country to have an efficacy standard in law," said Dr William Wardell, a New Zealander trained at Oxford, who brought an international perspective to Lasagna's team.

"Lou had one goal: to get well studied drugs with a known safety profile into the

people who needed them," said Dr Michael Weintraub, who knew Lasagna for 34 years and is a former head of an FDA office of drug evaluation. Lasagna called for tighter regulation, but also demanded that the United States correct the "drug lag," the slow approval of drugs available overseas.

After 16 years at Johns Hopkins, Lasagna moved to the University of Rochester, New York, where he chaired the department of pharmacology and toxicology and founded the Center for the Study of Drug Development. In 1976 he moved the centre to Tufts. He also wrote an alternative Hippocratic oath, now recited by Tufts and other graduates.

Science was only one side of Lasagna's life. In *The Doctors' Dilemma*, he wrote, "It would seem important to devote more of the energies of man toward improving the quality of life, so that it may be joyous, or noble, or creative. Otherwise, existence is nothing but the bored molecular unwinding of a dismal biological clock."

Both Lasagna and his wife, Helen, a gifted dancer and cello player, loved music. "He was president of the orchestra in Rochester. Orchestras are always in financial trouble, but he got them through it, while being chairman, writing papers, and supporting a dance group," said Dr Weintraub. He put on plays with his staff and fellows, delighting that he could dress in funny costumes and sing patter songs.

The Lasagnas had seven children and their last son, Christopher, was born with Down's syndrome. Lasagna became president of a school for children with disabilities and supported their cause. A similar school in Natanya, Israel, is named after him.

He leaves Helen, four sons, three daughters, and eight grandchildren. [JANICE HOPKINS TANNE]

Louis Lasagna, dean emeritus Sackler School of Graduate Biomedical Sciences and founder Center for the Study of Drug Development, Tufts University, Boston, USA (b New York City 1923; q Columbia University College of Physicians and Surgeons 1947), died from lymphoma on 6 August 2003.

Roderick Macrae Campbell

Senior administrative medical officer Northern Regional Hospital Board 1962-73 (b 1908; q Aberdeen 1933; MA, OBE), d 11 June 2003. After a period as a postgraduate in the department of public health at Aberdeen, Roderick Macrae Campbell was employed at Hammersmith Hospital. He served in the Royal Army Medical Corps in the United Kingdom and India from 1943 to 1946 and was twice mentioned in dispatches. In 1950 he became assistant medical officer at the Northern Regional Hospital Board, becoming senior administrative medical officer in 1962. He was closely involved in expansion of the hospital services and was a founder fellow of the Faculty of Community Medicine. Predeceased by his wife, Olive, and his elder son, he leaves a son and a daughter. [ALEX R MORRISON]

David John Chapman

Radiologist Henderson General Hospital and Chedoke Hospital, Hamilton, Ontario, Canada, 1952-84 (b Wallington, Surrey, 1922; q Guy's Hospital, London, 1945; DMRD, FRCPC), died from pulmonary fibrosis on 8 August 2003. He served in the Royal Naval Volunteer Reserve as a surgeon lieutenant from 1946 to 1948. [CAROL HAYWOOD]

Harold Logan Courtenay

Former general practitioner South Shields (b 1927; q Queen's University, Belfast, 1950; DRCOG), died from prostate cancer on 14 September 2002. Harold came to South Shields as a principal in 1958 and, in 1964, was one of the founding partners of the medical group that was to become Marsden Road Health Centre. He fully embraced modern medicine with its desktop computers, evidence based practice, and internet research, and he combined his general practice career with a clinical assistantship in genitourinary medicine. He leaves a wife, Sandra; three children; and six grandchildren. [COLIN BRADSHAW]

Cecil Herbert Cousins

Former general practitioner South Ockendon, Essex (b Burma 1913; q Calcutta 1938), died from bladder cancer on 28 June 2003. He was a military medical student trained to look after the British military hospitals and the British army soldiers in India. After qualifying he was posted to various British military hospitals in India, spent three years in Iraq and Iran, and finished his service in the Punjab. Demobbed from the army in 1945, he travelled to Liverpool as a ship's surgeon, and did posts in London and Huntingdon before joining a former colleague from medical college in general practice in South Ockendon, Essex. He retired from general practice in 1973 but did locum work well into his 70s. He leaves a wife, Miriam, and a son. [HAROLD JAMES BROWN]

John Alexander Forbes

Former professor of primary medical care Southampton University (b Aberdeen 1922; q Aberdeen 1951; MA, MD, FRCGP), died from lung cancer on 22 June 2003. After active service in north Africa, Italy, and Palestine, John Forbes returned to Aberdeen in 1946, determined to read medicine. He was a general practitioner for 16 years in Bicester, researching and writing his MD in his spare time. In 1969 John was appointed senior lecturer at the newly forming Southampton Medical School—which took its first students in 1971—becoming professor of primary medical care in 1972. Determined to produce doctors who understood the social context of illness, he developed new ways of teaching medicine. One of these was the early medical contact scheme, in which general practitioners took first year students into patients' homes. He leaves a wife, June; four children; and five grandchildren. [LINDSAY FORBES]

Richard Lindley Norris

Former general practitioner South Molton, Devon (b London 1916; q King's College Hospital 1941), d 21 June 2003. Richard (Dick) Norris served in the Royal Navy as a ship's surgeon during the second world war before joining a general practice in South Molton in 1948. He was active in local politics and was twice mayor of South Molton. He was chairman of the North Devon BMA division. His wife Gwen died four days after him. He leaves two sons, four grandchildren, and two step grandchildren. [MICHAEL HAWKINS]

Osmond Nicholas Roussel

Former consultant anaesthetist Epsom District Hospital, Surrey (b 1912; q Cambridge/St Thomas's Hospital, London, 1936; FFARCS), d 7 December 2002. He worked in the Emergency Medical Service for the first three years of the second world war, and then in the Royal Army Medical Corps, where he saw service in Europe and the Far East. On demobilisation he was appointed consultant anaesthetist at Epsom Hospital, a position he held until his retirement 30 years later. He was chairman of the hospital medical committee and the medical representative on the district management team. His wife, Beryl, died 15 weeks after he did. He leaves two children and two grandchildren. [PHILIP ROUSSEL]

Terence Willifer Young

Consultant surgeon Stamford and Peterborough Hospitals 1969-93 (b India 1931; q Cambridge/The London Hospital 1957; MA, FRCS), d 22 May 2003. Terry did house jobs at The London Hospital and then went into the Royal Army Medical Corps for three years. He volunteered for parachute training and on leaving the army continued this interest as medical officer to the 10th Territorial Battalion. On becoming a consultant he realised there was a need for specialisation among general surgeons and took up peripheral vascular surgery. He had a passion for mountaineering, climbing to a good standard into his 70s. He completed the London marathon six times and was training for the 2003 event when struck by an aggressive mesothelioma. He leaves a wife, Elizabeth; two daughters; and a granddaughter. [JOHN BARRETT, JAMES MILLEDGE]