Obituaries

Should be witty and interesting

EDITOR,—For many years now, the first section of the *BMJ* that I read has been the obituary column. I justify this by making the old and rather feeble joke that, in view of my great age, it is important to make sure that I am not in it myself, so that I can continue to take part in my usual daily activities.

This, of course, is only partially true. The main reason for perusing it so eagerly is that it is one's only source of information about the survival or otherwise of medical colleagues. As Liz Crossan and Richard Smith rightly point out,¹ most of the obituaries, even of celebrated doctors, are extraordinarily dull. Even if one has known the person the obituary seems somehow to make him or her almost unrecognisable. I have no explanation for this but would point out how absorbing the obituaries in the *Times* can be, even about the most obscure people. Perhaps what the *BMJ* needs is some witty and interesting obituary writers.

I think that the suggestion of publishing death notices of all medically qualified people who have died is excellent. The difficulty from the point of view of space would be how much information to give. Date of birth and death, medical school, and a brief list of appointments seem to me to be essential. Only in the cases of special fame would more information be indicated.

Above all, I ask the *BMJ* not to adopt the solution of the *Lancet*. I realise now that it is not only my inability to understand the titles of the articles, let alone their subject, in that journal (which makes it so irritating) but the absence of obituaries that renders it so mind bendingly boring.

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1 Crossan L, Smith R. Growing pressure on *BMJ*'s obituaries. *BMJ* 1995;310:5-6. (7 January.)

Commissioned obituaries should be abandoned

EDITOR,—Those of us hoping to write our own obituary have a particular interest in the *BMJ*'s problem concerning the pressure on the obituaries pages.¹ It is we who scan the items for names we recognise and who choose to read other contributions when style or content commends.

Obituaries in the broadsheets are currently enjoying a wider readership owing to a greater emphasis on anecdote, a refreshing frankness, and sometimes a note of acerbity. What is published in life is not determined solely by who you are but by editorial selection based on the quality of the writing and the expected interest of readers. The same criteria should obtain after death.

I suggest that the *BMJ* should allow an announcement of death, hedged by the usual caveat regarding time; it should be restricted to, say, 50 words and presented in a format similar to the italicised paragraph in obituaries published now. Prose contributions of, say, 200 words should be invited. Three hundred words should be allowed for the self written and self revealing items to encourage them. The obituaries editor should decide which to publish; this element of competition might stimulate attention to style, humour, and honesty. Only photographs that have a date

Advice to authors

We prefer short letters that relate to a recently published article and we are unlikely to publish letters longer than 400 words and containing over five references. Letters may be shortened. Your letters should be typed with double spacing and include a word count. All authors need to sign the letter and provide one current appointment and address. We encourage you to declare any conflict of interest. Please enclose a stamped addressed envelope if you require an acknowledgment.

attached should be allowed. Commissioned contributions, which are commonly the blandest, most sycophantic, and longest, should be abandoned. Inclusion of the cause of death should be insisted on: let death be a true leveller.

Such a policy should speed up the recording of deaths, encourage self written items, and reward interesting and well written cameos.

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1 Crossan L, Smith R. Growing pressure on *BMJ*'s obituaries. *BMJ* 1995;310:5-6. (7 January.)

More pages should be given to obituaries

EDITOR,—The BMA is an association of doctors, and the *BMJ* therefore carries a responsibility to publish the obituaries of its members. This is not the case for the *Lancet*, which is merely a journal. A list of deaths would be insufficient, for it is the details of the lives and achievements that members wish to read. Equally importantly, the publication of the obituary is an important element of the mourning process for the relatives of many of the people who have died.

Liz Crossan and Richard Smith express concern regarding pressure of space,¹ but in each of the issues of 7, 14, and 24 January only two pages were dedicated to obituaries; I would press for the allocation to be doubled. If, for instance, two pages will allow six obituaries (300 a year) then four pages will allow 12 (at least 600 a year), which is well within foreseeable death rates. Nor would four pages represent a disproportionate proportion of the journal.

Crossan and Smith mention an alternative of printing obituaries in a separate, and indeed more expensive, section, but this is to be deplored. It may be likened to the difference between a crematorium and a church. A crematorium is associated solely with funerals and, despite flowers, stained glass, etc, carries a perpetual atmosphere of cheerlessness. Contrast it with a church, which serves for daily worship, Christmas, Easter, baptisms, weddings, etc, and in which funerals have a natural and normal place. In other words, the honouring of the dead should be in the midst of the living, and this, I submit, applies to the *BMJ*.

Finally, Crossan and Smith state that there is a time limit of three months for the submission of an obituary and mention how unpleasant it is to make

rejections. But what a shocking practice to have to admit to. They are saying that when a doctor dies after a lifetime's membership of the BMA relatives cannot publish his or her obituary merely because three months have elapsed since the death. After the death of a spouse three months is no time at all in which to pull yourself and everyone else together, let alone to think about an obituary, find a writer, and have it composed. As doctors we should know better than to treat the bereaved in this manner, and, whatever else the *BMJ* does, this deadline must be scrapped. Forty five obituaries a year are rejected for lateness, so under one a week would have to be absorbed; this could easily be done if the space allocated to obituaries was doubled.

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1 Crossan L, Smith R. Growing pressure on *BMJ*'s obituaries. *BMJ* 1995;310:5-6. (7 January.)

Are important historical records

EDITOR,—When the first of the BBC's foreign correspondents outraged his "director of the spoken word" he was relegated to the "BBC equivalent of the salt-mines." What was that? It was the preparation of obituaries.¹ I have sympathy with the *BMJ*'s dilemma over what to do about obituaries,² but they are vital historical records. True, the medical profession has the compulsory *Medical Register* and the voluntary *Medical Directory*. But the obituary is needed as a record of changes in the professional and extraprofessional activities of doctors.

With the support of a grant from the Wellcome Trust I am compiling a database of posthumous references and obituaries of medical practitioners 1750-1850. I will have found obituaries or something similar for around 10 000 practitioners, using contemporary medical journals (over 200 titles) and other sources, principally the *Gentleman's Magazine*. The obituaries before 1850 followed their own, different conventions. Endless practitioners were extolled for their charity to the poor and their Christian lives, or, conversely, they were regarded with awe for the amount of money they managed to leave (which was often detailed to the last pound) or commiseration was offered for the destitution of their dependants. We don't seem to mention money now. Why not? Because we live in a society driven by money?

If the *BMJ* decides to publish death notices I hope that photographs will be included, as well as family and social details. People are unlikely to be able to find them anywhere else.

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1 Miall L. Kenneth Matthews [obituary]. *Independent* 1995 Jan 13:14.

2 Crossan L, Smith R. Growing pressure on *BMJ*'s obituaries. *BMJ* 1995;310:5-6. (7 January.)

Death notices are often dull catalogues of success

EDITOR,—The quality of medical practice is threatened by Liz Crossan and Richard Smith's thoughts on obituaries¹ and diminished by the