

## Obituaries



### **Dr Dominic Beer DM, FRCPsych**

**Formerly Consultant Psychiatrist, Oxleas NHS Foundation Trust**

Dominic Beer was one of the pioneers in the reform of psychiatric intensive care units. In the mid-1990s he and his colleagues Carol Paton and myself realised that the quality of care in the locked wards that

remained after the opening up of the mental hospitals in the 1950s was extremely variable and sometimes lamentably poor. We carried out a nationwide survey of existing psychiatric intensive care units. This revealed that many units did not have policies relating to admission and discharge; it was often unclear where responsibility for care lay.

We founded the National Association of Intensive Care Psychiatric Units (NAICPU) and in 1996 this held its first national conference. Dominic was elected the first chair of the Association and served from 1997 to 2001. He subsequently served as Treasurer of the Association from 2001 until 2005. The establishment of the Association and the advocacy provided by this group led to considerable improvement in the quality of care delivered to severely disturbed psychiatric patients.

Dominic published over 70 papers, book chapters and books, mainly on psychiatric intensive care but also on a range of other subjects including the history of psychiatry, the psychological impact of abortion and the role of electro-convulsive therapy in treating patients with profound depression. In 2000 he was co-editor of the only international textbook on psychiatric intensive care. A second edition was published in 2008. He was assistant editor of *History of Psychiatry* and refereed papers for a number of other scientific journals.

Dominic was born on 4 November 1956 and educated at Leighton Park School, Reading, where he excelled both academically and in sport. He continued to play cricket well into his adult life and was a member of the Marylebone Cricket Club. In 1975 he went to Wadham College, Oxford, to read modern history and modern languages but changed to read medicine after his second year. He received his psychiatric training at Guy's Hospital, during which time he took his MD in the history of psychiatry, supported by the Wellcome Foundation. He was appointed to a consultant psychiatrist post at Oxleas NHS Foundation Trust in 1994 where he had responsibility for a 15-bed, low-secure unit at Bexley Hospital.

While he was at Oxford he became a Christian and his faith played a most important part in his life. He was an active member of the Christian Medical Foundation. Although he had a gentle, reflective personality, his immense energy allowed him to carry out his clinical duties most effectively, while at the same time play a most active part in NAICPU, undertake considerable teaching duties and lecture both nationally and internationally on the topic of psychiatric intensive care.

He was a great ambassador for British psychiatry abroad. He was Head of Research and Development for Oxleas as well as being Head of Clinical Audit. He also led a very full family and social life. He married Naomi Salter, a general practitioner in east London, and they had four children.

Dominic died peacefully aged 57 years on 19 April 2013 and is survived by his wife and their children.

**Stephen Pereira**

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### **Dr Vaithianathan Satkunanayagam MBBS (Cey), DPM (Lond), FRCPsych (UK) Formerly Consultant Psychiatrist in Learning Disabilities, Manor and St Ebba's hospitals, Surrey Heartlands NHS Trust**



Dr Satkunanayagam, who died recently at the age of 87, was a psychiatrist who spanned two worlds in his professional life. He had many professional interests and areas of expertise, particularly with regard to alcohol and substance misuse. He was involved in postgraduate training both in Sri Lanka and the UK, and was an examiner for the MD Psychiatry (Sri Lanka) and MRCPsych (UK). However, his

most significant contribution to mental health and well-being were his efforts to bring reconciliation and unity between divided ethnic groups.

Satkunam, as he was known among friends and colleagues in Sri Lanka, worked at a time when the pressures arising from ethnic tensions and then the civil war in Sri Lanka caused tension, bitterness and personal upheavals among many. He was one who tried unceasingly to create reconciliation, was never bitter and worked actively in this regard, while also working to help people within the Tamil community in the UK. In addition to being an active member of the Standing Committee of Tamil Speaking People (SCOT) and the Medical Institute of Tamils (MIOT) UK, along with myself and other mental health professionals - Sinhalese, Tamil and native British - he was a founder member of the UK Sri Lanka Trauma Group. The last conversation I had with him was about forming an association of Sinhalese and Tamils.

He was concerned that most Sri Lankan organisations in the UK were polarised with regard to ethnicity. His own life course was changed by the ethnic tensions which led him to

leave his position as a senior psychiatrist in Colombo, Sri Lanka, and emigrate to the UK in 1981. He worked at Manor and St Ebba's hospitals as a consultant psychiatrist in learning disabilities from 1981 until 1995.

Satkunam was born in May 1926 and educated in Jaffna, Northern Sri Lanka, and qualified in medicine in Colombo. He obtained his MRCPsych in 1963, completing postgraduate study at the Institute of Psychiatry, University of London, and returned to Sri Lanka to work in Colombo at the two major mental hospitals there, at Angoda and Mulleriyawa.

In his last few years he was partially disabled due to a stroke he suffered several years before. Nevertheless, he remained active both professionally and within charitable organisations. He went thrice to Lourdes on pilgrimages for people with special needs, the last only a month before his death from pneumonia.

Satkunam was a gentle man of great personal integrity and honesty. He loved people and their company and could surprise with his quiet but at times wicked sense of humour. He will be greatly missed by family, friends and colleagues in both countries.

I first met Satkunam when I returned to Sri Lanka to work as a child psychiatrist at the University of Colombo in 1978. He was a senior colleague who helped me a great deal to adjust to work and life in Sri Lanka.

Satkunam, who died on 6 October 2013, leaves his widow Rasu, his son Kuhan, daughter-in-law Christine and grandson Theo.

**Anula Nikapota**

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## Dr Jim Birley

### Formerly Consultant Psychiatrist at the Maudsley Hospital and President of the Royal College of Psychiatrists (1987–1990)



Jim and Julia Birley at one of the meetings of the Network of Reformers in Psychiatry, Czech Republic, 1995.

Forty years ago a group of psychiatrists training at the Maudsley Hospital were discussing the attributes of a good psychiatrist. They came to some sort of soggy consensus, but then decided to personalise it by asking each member to note down which psychiatrist they would choose to be referred to if they became mentally ill.

There were over 50 to choose from but 77% of them voted for the same person, Jim Birley. So, even this relatively junior group

recognised there was something particularly special about this unassuming man who shone forth more brightly than his many more flamboyant glitterati at the Bethlem and Maudsley hospitals. In the ensuing years, both authors of this obituary experienced ample reinforcement of the reasons why Jim was particularly special.

He came from a distinguished family, with his father, also Dr James Birley, famed for his original work on fatigue in pilots in the First World War, as a model to follow. Jim moved effortlessly from Winchester, where he was head boy, to University College, Oxford, before entering psychiatry, where he passed through the memorable, if occasionally disturbing, hands of William Sargant at St Thomas' Hospital before going on to the Maudsley Hospital in 1960, where he stayed for the rest of his working life. But at the Maudsley he took a different course from many of his contemporaries. He was training to be a social psychiatrist, and good social psychiatrists needed to know their patients, so he became drawn towards the many problems of the patients in Camberwell.

Our impression at the time, perhaps influenced too heavily by juvenile cynicism, was that most of Jim's colleagues regarded Camberwell folk as fodder for their personal advancement at the foremost psychiatric centre of excellence, and the trials and troubles of local residents were not of nearly as much interest as their psychopathology. But Jim never thought of personal advancement in this way. As a budding social psychiatrist he needed to understand all their problems in context, and he was the first consultant at the Maudsley Hospital to argue the case for a catchment area for the hospital, founding the Southwark Association for Mental Health, and putting great energy into developing a day centre and a housing association to provide the full range of social care.

What was amazing is that he managed to combine this coalface psychiatry, an enterprise supported with generous enthusiasm by his wife Julia, with both academic and administrative responsibilities. In 1965 he became a member of the Medical Research Council Social Psychiatry Unit at the Institute of Psychiatry, joining George Brown to work on social influences on psychotic illness. Their paper<sup>1</sup> was one of the first to show the link between life events and schizophrenia. Jim then became Dean of the Institute of Psychiatry between 1971 and 1982. This was a time when the Institute was expanding greatly, not without conflict, and during this time Jim had to deal with an aggressive campaign attempting to close it down. In responding to this threat he developed an unequivocal manic episode, no doubt a personal confirmatory evidence of the association between life events and psychosis. Characteristically, and with an openness that was very unusual at the time, he did not mind talking to others about this episode, and indeed commented amusingly, 'It was very pleasant, and I would have liked it if it gone on for a little longer'. This event did not prevent him becoming Dean of the Royal College of Psychiatrists between 1982 and 1987, and subsequently President of the College in 1987, and later President of the British Medical Association for 1993–1994. He was awarded the CBE in 1990.

Despite this accession to the highest offices of psychiatry in the land, Jim never lost his enthusiasm for what is now called, rather clumsily, person-centred psychiatry. It is an aspiration of many but achieved genuinely by very few. He had