

Professor P.S. Byrne 1913-1980

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I first met 'Pat' Byrne, senior partner of the Byrne, Holmes and Berry general practice in Milnthorpe, on 'St Danckwerts' night, 24th March 1952, at the home of Dr W. Berry in Warton. Subsequently my single-handed practice in Carnforth would merge with the Byrne partnership in 1954, until 1964.

General practitioners were trying to come to terms with the demands of the 'new' NHS; this award by Lord Justice Danckwerts completely vindicating BMA demands for proper remuneration for GPs temporarily assuaged one difficulty. General practice was, however, reeling from other deficiencies also, as described in Dr Collings' grim analysis, toned down somewhat by Hadfield's commissioned enquiry, though the findings were still disquieting.

The College of General Practitioners was founded (it has to be said, in the face of opposition from the other medical colleges) specifically to make constructive plans to improve the performance and status of general practice. This perceived need in fact had a long history going back to the nineteenth century but the foundation of the college was perhaps the most determined attempt.

Pat was a founder member and immediately entered into the college enterprises with the infectious enthusiasm, energy and elan which were characteristic of him. Until then his career had been typical for a general practitioner of the time.

Patrick Sarsfield Byrne was born at 11.45 p.m. on 17th April 1913 in Birkenhead, the son of a third generation Irish Catholic butcher and the eldest of eight children. It was a very religious household, the church was the main focus of family life; but music, literature, amateur dramatics and sport (unfortunately Pat was a bad loser, which is accounted a heinous crime in English culture) were ingredients of a lively family life.

This background, together with historically-based tensions, animosities and resentments experienced by Irish Catholics round the Mersey, did not leave Pat untouched. Amongst other effects this background would in due time cause distress as Pat attempted the 'ancient and serious diligence of Hippocrates' in the face of 'liberal' legislation and medical practice.

After schooling at St. Joseph's Primary School and St.

Edward's College on a town scholarship, where he shone (distinctions in physics and pure mathematics in Higher School Certificate), Pat gained a state scholarship to Liverpool University Medical School in 1930 at the age of 17; he qualified in 1936 with the silver medal for forensic medicine and gold medal for surgery, having taken a full part in social activities including debating and cricket (at which he was a fast bowler – what else would he be?), and becoming vice president of the Men's Diocesan Catholic Association.

By his own admission the most important thing was that he met and lost his heart to Kathleen Pearson who would become his wife and partner.

He became assistant to Dr. Caldwell in Milnthorpe in 1936; a brilliant and progressive general practitioner who was a pioneer in radiology, paying the price later from its side effects. Pat and Kathleen built up the Carnforth end of the practice. After brief service (1940-41) in the wartime RAF

Balloon Command as MO, he was relieved of duty so as to take over the main burden in Milnthorpe because of Caldwell's coronary disease. Pat bought him out in 1946 when Caldwell was forced to retire. He then took Philip Holmes, Bill Berry and his wife 'Brownie' into partnership; Neil Hargreaves would join in 1951.

Equivocal about the National Health Service (85% of doctors voted against it as I suspect Pat did, though no-one knows for sure), he was deeply apprehensive about political state control of medicine, deploring the chasms produced between general practice, hospital medicine and community medicine. His philosophy, however, was that once the NHS was in place it was his duty and that of his colleagues to try to the uttermost to make it work for the sake of the patients.



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Becoming active in medico-politics he conceived a profound suspicion of politicians and their baleful influence which never left him. But from 1952 and the founding of the college his energies were displaced from the overtly political BMA avenues into the more congenial vocational and academic groves of the college. He came to be a stout defender of the NHS, particularly as he penetrated ever further into the establishment.

During the 1950s and early 1960s Pat was the inspirational senior partner of our large rural group practice.

It was a happy, enormously stimulating enterprise; in addition to the many social get-togethers and support for continuing education through the BMA and Lancaster Medical Book Club programmes (he became president in 1967), the practice organised its own seminars often using the tapes produced by Drs John and Valerie Graves of the College of GPs, and took part in the National Morbidity Survey.

It was through his initiative that attempts were made to forge closer links with the new local consultants, individually hosted for social and discussion evenings. Pat had been a member of the North Lancs and South Westmorland HMC when the 'new breed' of consultants like Drs Barrett, Brown, Hay and Seville arrived. These new hospital-trained specialists, unlike Drs Cliff, Dawson, Kay and Wilkie, had not been in general practice and Pat feared a potential gulf in understanding. Probably his fear was groundless because we were lucky in the appointments made.

Pat was involved with the group who presented a case for the establishment of a medical school at Lancaster University which came to nothing. Excited by the idea of postgraduate medical centres (brainchild of the Nuffield Provincial Hospital Trust meeting at Christchurch, Oxford in 1961), Pat and Ronnie Dawson were the key GP figures on the steering committee led by Derek Purser which in 1965 set up the Lancaster postgraduate centre on Ashton Road. No doubt the whole profession in these environs would agree that it has been probably the single most important step in developing vocational training and continuing medical education for our GPs. Certainly this venue figured large in Pat's work over the years. It is entirely appropriate that this journal should record his influence.

But perhaps the most significant happening was the visit by Sir Robert Platt (Professor of Medicine at Manchester University) to observe Pat at work in Milnthorpe in 1963. Sir Robert was preparing for his Ernest Rock Carling Fellowship Report. Amongst other things he wrote "I would like to go a little way towards helping him (the Minister of Health, Enoch Powell) to deploy some resources towards general practice. Secondly I would like to help universities to understand general practice" and "General practice has been the only branch of medicine which has not been taught during the undergraduate years, yet it is the branch of medicine which will eventually claim 50% of the students."

Sir Robert's invitation to Pat (perhaps with the support of ex-Vice Chancellor Stopford, then living in Arnside and a patient of Pat's) to apply for a lectureship in general practice in Sir Robert's department followed; first lecturing one day a week from October 1965, then three days a week a year later. After this apprenticeship Pat was appointed to the steering committee to set up a proper department of general practice at Manchester University Medical School, incorporating Derbyshire House where he was appointed director. His task was to make 'academic general practice' acceptable and respectable in the face of intractable scepticism from other departments, and to reform the teaching of general practice to do Sir Robert's bidding: "The general practitioner should become the new general physician; see that he is trained accordingly."¹

It was the height of irony that Pat, who had jumped into the deep end of general practice after a few months in a casualty house surgeon job and had had no training as a teacher, should have been picked for the post and that he himself should decide to accept. That he should be prepared at the age of 52 to give up his very remunerative practice which gave him such fulfillment and leave behind the

patients whose lives had become part of his, swapping lovely Westmorland for grimy Manchester, is surprising enough. That he did this to take on such a formidable task as the setting up of a university department of general practice required high courage and breathtaking self-confidence. These are the aspects which make his life so interesting.

Through his efforts in the inner councils of the College of GPs, especially on the Education Committee where amongst other things he was involved in developing the college examination, becoming chief examiner, and in the Research Committee Pat and his colleagues were constructing a job definition for GPs: training for this could then be planned rationally. No longer would success "depend on 5% knowledge and 95% low cunning aided by a clean shirt, clean hands, polished shoes and a thrombosed external pile (providing an air of concentration and otherworldliness) who by saying 'Hmm' in a Glasgow accent at the bottom of the bed would fulfil all that was required."

Training programmes could be constructed, leading ultimately to mandatory vocational training, and this was put in hand. But this still left the problem of efficient teaching, and by common consent medical teaching was amateurish and inefficient. Since Pat was going to make extensive use of GP teachers in the teaching programme the difficulties would be compounded because none of these had been taught to teach either.

Pat's answer was to seek the help of professional educationalists and immerse himself and his team in educational theory and experiment, though he found the jargon as understandable as "classical Outer Mongolian". As part of this process he took up a travelling fellowship in medical education in North America – the 65th fellowship and the first award to a GP. Some may feel that he went overboard, excited by the new, but in his defence it has to be recognised that he did his best to set up academically rigorous scientific research projects to validate what was being done: if training could be shown to produce a better GP than the old "sitting with Nellie" methods it should be backed – and if not, scrapped. He was awarded the OBE for his efforts in 1966.

Not only did Pat beaver away in his teaching department and the college; he also lobbied within the health establishment and went all over the place evangelising through publications and lectures. He was a brilliant lecturer and gave innumerable witty after-dinner speeches. Not only did he give the first William Pickles lecture in 1968, 'The Passing of the Eight Train', he also gave many others at Swansea and Stoke, Vermont and Virginia, Belgium and Boliva. He gave the Victor Johnson Oration in Toronto and other prestigious eponymous orations.

Sponsored by the Auckland Savings Bank in New Zealand in a visiting professorship Pat also made entry into a field which would develop over the years – advising on medical care systems in other countries. He was invited to advise in developed countries and was sought after to advise on the setting up of medical care services in underdeveloped countries in Central and South America where the priorities were quite different.

There is more than a suspicion that over the years this was a growing interest for him; he wished to promote internationalism in medicine. He was well aware that higher dividends in reduced morbidity and mortality would accrue from money spent on sanitation, food and water, quoting Jorge de Almunada the Chilean economist, "the investment

of a dollar in medical care in Latin America costs a hundred lives". Certainly it was quite inappropriate for vast resources to be devoted to high-tech medicine in the first instance. He was stunned that "there were more neuro-surgeons in Bogota than in the UK; that it had one of the best ophthalmology units in the world". Nor were all the so-called underdeveloped countries the same; for example, in the case of oil-rich Saudi Arabia, another country where he advised, it was a question of how to spend the wealth.

Pat was elected to the Chair of General Practice at Manchester in February 1972 – the first in England. He was elected President of the Royal College of General Practitioners in November 1973 and in 1975 was awarded the CBE.

Reluctantly Pat retired from his post in September 1978 and confined his medical/educational activity to Chairmanship of the Advisory Committee of the MSD Foundation. He died suddenly in February 1980.

Undoubtedly Pat, with as many human faults as the next person, enjoyed the high profile existence of being translated into an international academic figure and the power which came with it. Kissinger has said "Power is the great aphrodisiac"; some have thought that it was the pheromones of power – limelight, privilege and honours – that 'turned him on'. But I believe there is a different and truer explanation. Pat's motivation was vocational in the true meaning of the word; he was fundamentally a religious man and felt that he had been called to serve and had done so to the best of his ability, 'power' merely the means to an end – and that was as much as could be expected of anyone.

REFERENCES

1 Byrne PS Obituary of Lord Platt JR Coll Gen. Pract. 1978; 28:637.



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