Personal tributes

Douglas as editor

RICHARD DOBBS

Douglas Gairdner joined me as editor of the *Archives of Disease in Childhood* after Ian Cathie resigned in 1964. I nominated Douglas not only because of his medical, paediatric, and literary abilities but also because of his attitude to sailing. Both require an ability to make quick decisions and to take actions which in every sense of the word may have vital consequences. This appreciation of Douglas, at that time one of my crew, and in recent years substantiated when I became one of his crew, arose through his capacity, when faced with an important decision, to ask for opinions, to which he gave careful thought, and then to take decisive action. This, to one who is essentially an impulse sailor, augured well for the important discussions and decisions that need to be taken by the editor of a journal receiving a constant flow of contributions which arrive, like the waves on the sea, out of the blue and which, however light or weighty, need to be carefully assessed.

A newly created journal needs to grow up, and for some years remains a financial burden to its parent organisation. Since its conception in 1926, the *Archives* has been the property of the British Medical Association who financed its birth, infancy, and childhood. During our joint editorship the *Archives* passed through its adolescence, and began to pay its own way. In 1970 discussions began as to whether the British Paediatric Association, which since 1945 had nominated the editors and editorial committee, and to which many of the contributors to the *Archives* belong, should benefit from the profits of the journal. Douglas Gairdner representing the editors of the *Archives*, and I, no longer editor, representing the BPA as its president, remained convinced, paediatrics being not a specialty, but general medicine for a special age group, that the *Archives* and its editorial staff should remain in close association with its elder brother, the BMJ, and the editorial staff continue to benefit from friendly contact with colleagues of all the numerous medical journals housed on the same floor in the same building; and so the journal remained the property of the British Medical Association and

the BPA began receiving an annual grant from the profits. During the ensuing years under the editorship of Douglas Gairdner and Roger Robinson the *Archives* has prospered and grown, is now published monthly, and receives increasing contributions from countries outside the British Isles. In 1977, after further discussions between the BPA and the BMA, in which Douglas took a major part, an agreement was signed whereby the two organisations were joint partners in the journal.

An editor of a medical journal not only accepts or rejects papers but himself adds editorial comments, and Douglas has made many notable contributions. Soon after the war he wrote his classical paper on anaphylactoid purpura, which many of us still think of as Gairdner's version of the Henoch and Schönlein condition; and perhaps a more important impact on medical practice, he was one of the first to point out that circumcision is the major one of 3—now 4 or even 5—medically unnecessary operations; this was followed by its gradual elimination, at least as a regular initiation heralding the emergence of the neonate into infancy. Then recently he recounted in the *Archives* an interesting fable regarding a child who survived a 'near fatal' condition, with serious chronic complications, and, who, over six decades later, Douglas assures us is still alive and sufficiently kicking, to be taken on as a sailing crew.

Douglas Gairdner 'retired' from the NHS in 1974 but hasn't noticeably slowed down. In addition to a variety of activities in Cambridge, advising in the local Citizens' Advice Bureau, and playing the tuba in the Royston Brass Band, he has added to his weekly visit to the *Archives* office an outpatient teaching session at the Queen Elizabeth Hospital for Children in the east end. Here, as a senior member of the medical staff commented, the students from the London and St Bartholomew's Hospitals enjoy his shrewd and perceptive medicine, and no one really believes, either from his physical appearance or his teaching style, that he has yet reached retiring age. His colleagues in the editorial

office have lively memories of his scarlet-lined waistcoats, his curly blond hair under a yachting cap, and his endearing but maddening habit of leaving his scarf, gloves, brief-case, etc., on trains

between Cambridge and London. It is abundantly clear that both he and his wife, Nancy, an enthusiastic physiotherapist, will remain fully involved in life's activities for many years to come.