

THORAX

Introduction

P Hasleton

Donald Heath can truly be called one of the characters of British pathology.

He was born in Henley on Thames, saw the war years and its privations, and worked through the state system to study medicine at Sheffield University. The early tuition of his schoolmaster in English was to be with him for his academic life in that his writing was clear and precise. Not for him was the loose phrase or the ill-defined concept.

At Sheffield Professor Sir Charles Stuart-Harris, Professor of Medicine, was pushing back frontiers in the relations between viruses and lung disease, as well as noting the large numbers of cases of chronic bronchitis and emphysema and their relation with atmospheric pollution. After qualifying Donald teamed up with James Brown and Willie Whitaker (see page S2) in events that were to fashion his life. He once asked, as a youthful SHO: "Is there enough material in the pulmonary circulation to provide the material for an MD thesis?" He made certain there was, and utilised every possibility to push his work forward. A sojourn with Jesse Edwards at the Mayo Clinic helped to consolidate what was to be a life's work on the pulmonary vasculature. On his return from Rochester he went to Birmingham as a lecturer in pathology. This post could not have been more appropriate since Melville Arnott was assembling a team to carry out haemodynamic studies in chronic lung disease and it was natural to have a pulmonary pathologist as part of the group. At Birmingham he teamed up with Peter Harris for what was to become a lifetime's

fruitful collaboration between the structure and function of the pulmonary circulation.

Life was never quiet in the lungs, however, and several trips to the Andes – as well as the introduction of immunoperoxidase methods – led to an interest in neuroendocrine cells in the lung as well as the carotid body. Many an MRCPath candidate has gone to Liverpool in fear of having to demonstrate this structure.

Concurrently diet was shown to play a part in the development of pulmonary hypertension (see pages S33–8) and this led to a wealth of papers and much nail biting for a time by the pharmaceutical industry.

Life was not all research, however. Donald cared for his students and would wander through the museum and give minitutorials to interested parties. He had an abiding interest in people and had the knack of remembering their pet hobbies, wife's interests, etc. This gave rise to innumerable stories of the characters in the cardiopulmonary world.

Donald was not a man of compromise and lived uneasily in the new world of block contracts, contracts for research, and the provider-purchaser concept. He saw this as eating away at academic freedom and research time, things to be cherished. He was supportive of many juniors who wished to pursue an academic career, as evidenced by the numerous high quality publications stemming from his department. He has given much to cardiothoracic medicine and pathology, and we all wish him a long and happy retirement.

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