

particularly exemplified in the range of subjects which he taught. This ranged from genetics and human biology to behavioural sciences and the social and emotional aspects of medical and surgical conditions and their management. He taught medical students, doctors, and then trainee and qualified psychiatric social workers.

Soon after registration, Bob became convinced that clinical psychiatry was the career for him and many patients, trainees and colleagues have good reason to be grateful for that decision. His rare combination of scientific rigour, compassion and understanding, was inspiring, and meant that his reputation frequently went before him.

He led by example and had a gift of being able to put himself in the position of those without power and influence. It is not clear what impact his personal experiences as a patient had on his medical practice, but undoubtedly his own courage in the face of adversity inspired many. He was unfailingly courteous to patients, trainees and colleagues alike. He was erudite and cultured, fair-minded and firm, and above all, fun.

As Bob became more senior and influential so he was increasingly asked to undertake very difficult jobs. He never said 'no'. He would help colleagues who had got into most complex, difficult and even inappropriate situations which he did with total discretion and enormous care. He was indeed the psychiatrist's psychiatrist.

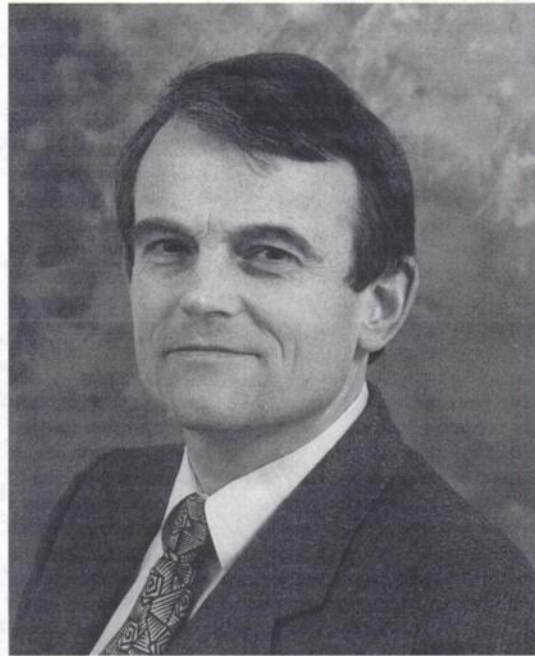
He was always open-minded and stood against dogma wherever it showed itself as, for instance in the polarisation between neuroscience and psychoanalysis, or inter-professional rigidity within the multi-disciplinary team.

The concept of the 'unsung hero' comes to mind. So often Bob chose to make his contribution, whatever its nature, behind the scenes, seeking neither acclaim nor recognition. He could not, however, hide his many qualities from those who knew him.

Closest of all was his wife Anne, with whom he shared so much joy and devotion.

FIONA CALDICOTT

Bruce Ricketts, who died at the end of February 1999, is remembered by many as a lively, astute psychiatrist and physician also as a man with diverse interests and talents. He bore his last cruel five-year illness with characteristic vigour. Those of us who knew him had a feeling of helplessness, but also marvel as we saw the determination, strength and love he and his family massed to set about dealing with the situation. At his memorial service, his long-standing friend, the Reverend Canon John Sharpe, spoke of the frustration and anger we felt, expressing it in William Blake's words "a robin redbreast in a cage puts all Heaven in a rage".



Bruce Ricketts, formerly Consultant Psychiatrist, Department of Psychiatry, Royal South Hants Hospital, Southampton

His formative years were spent in the Malvern Hills, Worcestershire, an area which always held a deep affection for him and played a part in his musical development. Another strong influence on him was the Quaker school he attended there. Anyone who knew Bruce can vouch for his strong sense of right and wrong and the importance of each individual. His work for organisations, such as St Dismas in Southampton and the Samaritans was invaluable. A man respected by so many, could do much for such worthy, charitable organisations who work with those often just on the edge of psychiatric services.

This sense of community was very evident within his day hospital work in Southampton at the Royal South Hants Hospital. There he led a multi-disciplinary team, steering that precipitous path with energy, skill and humour. In the 1970s he had moved from The Maudsley and St Mary's, Paddington, having obtained his MRCP and MRCPsych. Bruce was the first consultant I met in the Department of Psychiatry. I was a senior registrar new to the area. At our first encounter he lightly pointed out the advantages and shortcomings of the new hospital building – originally designed as wards for medical patients. He impishly moved his bookcase to show me where oxygen could still be piped in

should patients in the therapeutic milieu of the day service so require. Twelve years later he chose to work in the first multi-disciplinary locality mental health team, pioneering community work in the Southampton. The way he approached the difficulties he found there was a hint of his later response to much more shattering events in his life.

The esteem in which he was held by colleagues was particularly notable. As a clinician he was clear and decisive. His patients received the very best treatment from him and some showed their appreciation by attending his memorial service. Tributes to him referred to the 'gold standard' of care he provided. He became a Fellow of both the Royal College of Psychiatrists and the Royal College of Physicians, and in the mid-80s he was appointed Clinical Director at the Southampton Department of Psychiatry, a job which he carried out with zeal and efficiency. He was appointed Regional Adviser for the Royal College

of Psychiatrists, another indication of his standing with his colleagues.

The other aspects of Bruce were crucial to his professional life. He shared with his wife, Fi, and the whole family a great love of music. He attended King's College and his experiences there fostered this interest and left a lasting impression. He played the oboe. When hydrocephalus due to a brain tumour barred him from the pleasure of his wind instrument, he pursued singing and joined a choir.

The onset of his illness was insidious, yet he kept a grip on his clinical work. He wrote an article in which he described his experience as a patient on a neurosurgical unit. This explained something of what it must be like for countless patients – another gently told, humorous lesson from Bruce for those of us who are at risk of forgetting.

CARRY SELLEY

New in the Books Beyond Words series



Getting on with Epilepsy

Sheila Hollins, Jane Bernal and Alice Thacker
Illustrated by Lisa Kopper



This book is aimed at adults with learning disabilities and their families, but the book itself and pictures from it will also be of use to professionals working with other client groups. People do not need to be able to read in order to understand the story. It can be used to facilitate discussion as well as to convey information.

Getting on with Epilepsy illustrates experiences that can be worrying for people with epilepsy such as having a seizure in public, going to the doctor, having a brain scan, an EEG, a blood test, and taking daily medication.

The book also stimulates discussion about the balance between personal autonomy and the need for safety. Many specific safety issues, such as cycling, cooking, safe drinking and swimming are addressed, demonstrating that it is possible to enjoy an active and independent life with epilepsy. The authors prepared this book with the help of an advisory panel of people with learning disabilities

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