
Obituaries



Sidney Levine, formerly Consultant Psychiatrist, Royal Oldham Hospital.

Few people are really irreplaceable, but someone who surely deserved that label in British psychiatry was Sidney Levine, who died recently. Though physically diminutive, his personality and humour made him a centre of attraction at any gathering; his witticisms and *aperçus* became the stuff of legend.

Sidney was born in 1932 and brought up in Glasgow, of immigrant stock, and this showed in the colourful Yiddish expressions with which his conversation could be spiked. He qualified in Glasgow in 1955 and did his pre-registration jobs at the Royal Infirmary and Southern General Hospital. This was followed by two years' National Service in the Royal Army Medical Corps and then by his early psychiatric training at the Glasgow University Department of Psychiatry. He had a spell as assistant resident medical officer at Salford Royal Hospital, where we first met, and obtained the Edinburgh Membership in Medicine. He was a registrar at Gartnavel Royal Hospital, and then became one of the group of promising young psychiatrists whom Erwin Stengel gathered together on taking up the chair at Sheffield. For that childless man, they were perhaps something of a substitute family.

Sidney was senior registrar and clinical tutor in Sheffield for three years, and in 1967 was appointed consultant psychiatrist at what had been originally Boundary Park Institution and evolved into the Royal Oldham Hospital. He remained there up to his early retirement from the National Health Service due to ill health, during which time the Oldham service developed very positively in several directions; he was also in charge of the Electroencephalogram Department at Oldham General Hospital for many years. Both locally and at the regional level, Sidney played an active part in medical administration and specialist training. He became Chairman of the Psychiatric Sub-Committee of the Regional Medical Committee, was a member of Awards Committee, President of the Section of Psychiatry of the Manchester Medical Society, and Deputy Regional Adviser in Psychiatry. As a chairman, he was firm and effective.

Probably his greatest contribution, though, was to the College. He served on Council as both member and fellow, on the Public Policy, Research, and Nursing Committees, and on the General Psychiatry Executive. He was a member of the Central Panel for Approval Assessments of training posts and convenor of the North-West Panel. His most active involvement was in the Special Committee on Political Abuse in Psychiatry, which linked with his concern for Refuseniks in the former Soviet Union. He told me that having gone as a member of a small delegation to the Russian Embassy, he felt as the front door closed behind them that he had been instantly transported to the depths of the Soviet Union – not a comfortable thought. These issues strongly involved the compassionate side of his nature.

Scientifically, his main interests were in psychopharmacology and the measurement of symptoms. He was active in the British Association for Psychopharmacology, including membership of Council and chairmanship of its Membership Committee, and was a regular speaker there and at meetings of the *Collegium Internationale NeuroPsychopharmacologium*. However serious the subject, his talks always included their share of humour. A great international traveller, he lectured at universities all over the world; his publications were mainly on the clinical assessment of drugs, in which he had much practical experience.

Sidney had an astonishing range of friendships and contacts throughout the world, including many of the best-known international names in

psychiatry. As an after-dinner speaker he was incomparable and rarely failed to reduce his audience to helpless laughter. he must have replied for 'The Guests' on innumerable occasions. Though sometimes running the risk of being type-cast as the court jester of British psychiatry, he had essentially a very serious attitude to life; any discussion with him revealed deep scientific knowledge and clinical wisdom. He had a warm sense of compassion, which many colleagues and friends experienced. Above all, he hated pomposity and self-importance, and could readily prick the bubble of those characteristics when he encountered them.

Everyone who knew Sidney has a favourite story. My own comes from a regional College meeting where the speaker described the link between psychiatric disorder and bad social conditions, illustrated by slides of the latter. As a particularly gruesome tenement block flashed on to the screen, the familiar Glasgow voice from the back of the darkened room could be heard saying, "och, yer making me homesick". Our last meeting was at the World Congress in Madrid. As we sat on the steps of the conference hall in the sunshine, eating our box lunches, he talked of serious issues of life and relationships, interspersed with outrageous items of professional gossip, of which he had an unrivalled stock.

The affection and respect that Sidney inspired were shown in the 500 people who attended his funeral and the more than 600 letters received at his home within a short time of his death. He was totally dedicated to his family, and is survived by his wife, Leila, who was his inseparable companion, three children and three grandchildren.

HUGH FREEMAN

Awni Saad, formerly consultant psychiatrist, Jordan

Dr Awni Saad was an exceptional man, whose impact on Middle Eastern psychiatry went beyond clinical work: he was able to bring people together by his personal approach and he was instrumental in setting professional standards in Jordan and the Middle East.

Dr Saad was born in Jordan in 1941. He was trained in Glasgow, where he took his Bachelors' degree in July 1968 and returned to Amman as a medical officer in the army. He returned to the UK to train in psychiatry at the Maudsley, obtaining the DPM in 1973.

Dr Saad returned to the Army Military Hospital in Jordan in 1973, where he served till he retired with the rank of Lieutenant Colonel. He started a flourishing private practice where he gained the respect and friendship of many Jordanian and Middle-Eastern families who regarded him as not only a doctor, but a reliable friend. Dr Saad founded, in 1981, the Jordan Association of Psychiatrists and was elected president for two consecutive terms. In 1987 he was the first Jordanian to be elected FRCPsych.

In the past 10 years Dr Saad had travelled extensively and maintained contact with the College and the American Psychiatric Association. He would attend meetings and present his points of view strongly, but always in his pleasant and friendly manner.

Dr Saad died tragically when he was mysteriously shot in his consulting room in Amman, Jordan, on 8 April 1998. The country and professionals were in shock for he was a man of honour and integrity who had no known enemies.

Dr Saad is survived by his wife, Hiltrud, and his three daughters.

NASSER LOZA