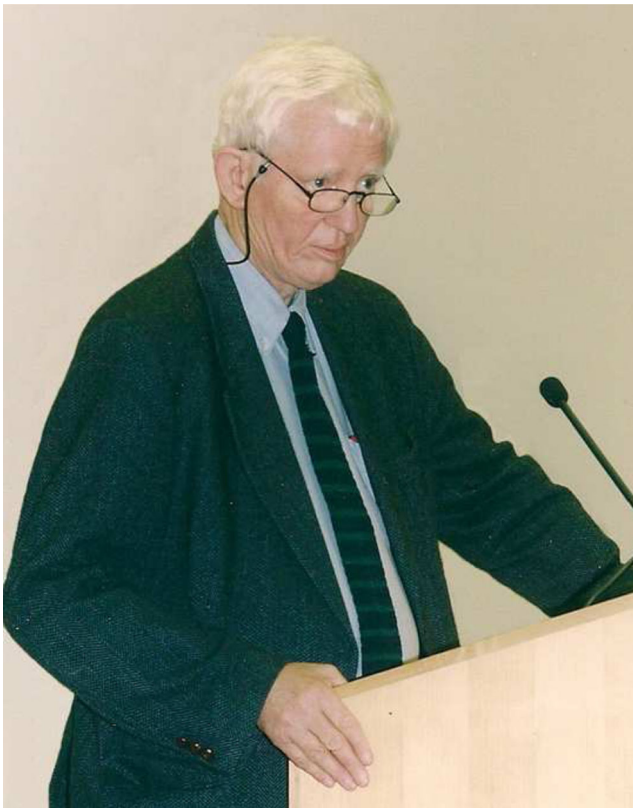


Professor Martin Barratt 1936–2014

Michael J. Dillon · Cyril Chantler

Received: 4 March 2014 / Revised: 4 March 2014 / Accepted: 4 March 2014 / Published online: 30 March 2014
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The passing of Martin Barratt, who died on the 17th of January 2014, aged 77, is a sad loss to the pediatric

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nephrology community worldwide. He was at the forefront of the development of the specialty in Britain and the first pediatrician in the country to devote his professional life entirely to the care of children with renal disease. As professor of pediatric nephrology at the Institute of Child Health, London, and consultant nephrologist at Great Ormond Street Hospital for Children, he made immense contributions to the understanding and treatment of childhood renal disorders, trained and encouraged innumerable pediatric nephrologists in the UK and abroad, and established a model of interdisciplinary care of children with renal disease adopted by many other centers throughout the world.

Thomas Martin Barratt was born in London on February 13, 1936, the youngest of three children. Educated at Clifton College in Bristol, he went up to Trinity Hall, Cambridge, to read natural sciences, and thence to St. Thomas' Hospital Medical School in London to complete his undergraduate training. He won entrance scholarships to all three, gained a first class degree at Cambridge, and was a prize-winning student at St. Thomas's, qualifying in 1960. After initial house appointments, including pediatrics at St. Thomas' Hospital, he came under the influence of Professor (later Dame) Barbara Clayton when registrar in the department of Chemical Pathology, Great Ormond Street Hospital for Children, where the first seeds of his research interests were sown. Further pediatric training at St. Thomas' Hospital followed, and then a research fellowship in the Department of Pharmacology and Experimental Therapeutics, Johns Hopkins Hospital Medical School, Baltimore, studying fluid physiology with Dr. MacKenzie Walser. In 1967 the far-sighted appointment of Martin as lecturer in pediatric nephrology in the Department of Immunology in the Institute of Child Health, London, by Professor John Soothill, was a master move launching Martin's nephrological career. In 1971 he was promoted to senior lecturer in the Institute of Child Health and consultant pediatric nephrologist at Great Ormond Street Hospital for Children

and subsequently, in 1978, he was awarded a personal chair in pediatric nephrology.

In the years leading up to Martin's appointment at Great Ormond Street Hospital for Children, pediatric nephrology in Britain was, with certain exceptions, comparatively rudimentary. The pioneering work of Gavin Arneil had resulted in the establishment of a regional referral center for children with renal disease in Glasgow in the 1950s and subsequently, in the 1960s and 70s, in addition to Great Ormond Street, other centers were also beginning to take shape in Birmingham, Manchester, and Guy's Hospital in London under the influences of Richard White, Ian Houston, and Stewart Cameron with Cyril Chantler, respectively. The uniqueness of Martin's role in the evolution of the specialty was that he held the first post that was fully committed clinically and academically to childhood renal disease in the country and was able to direct all his energy into this without commitments to other aspects of pediatrics.

He initially worked as a single-handed consultant but, in 1975, was joined by Michael Dillon and together they developed the renal services at Great Ormond Street Hospital for Children and the research programme at the Institute of Child Health creating, eventually with other colleagues, including Richard Trompeter and Lesley Rees, what has become the major international clinical and academic department of pediatric nephrology that exists today.

Martin was a superb clinician. His keen intellect, his analytical mind, his extensive knowledge of renal physiology and pathology all contributed to his ability in sorting out the most complex of nephrological problems, and he was, not surprisingly, always in great demand. He recognized the need for collaboration in managing children with renal disease and early on forged strong links with urologists, including David Innes Williams and Philip Ransley, and radiologists such as Isky Gordon in developing an interdisciplinary care model that others have also embraced. He also recognized the need for regionally organized services for children with renal failure and was involved, with others, in planning the appropriate sites of such provisions.

As with all good clinical academics, his clinical experience motivated his research which, in general, was directed at understanding the pathophysiology of disease and identifying rational treatment. Needless to say, his research interests were quite broad and included the methodology of accurate GFR measurement, urolithiasis, renal function after cardiopulmonary bypass, renal manifestations of diabetes mellitus, renal cystic disease, genetic studies in inherited kidney disorders and the management and outcome of urological disorders in children. However, it is for his work in relation to childhood nephrotic syndrome and the hemolytic uremic syndromes that he is best known. He was particularly fascinated by the mechanisms involved in relapsing nephrotic syndrome and published widely on this topic including studies on the roles of

atopy, membrane charge, T-lymphocyte activation, and cytokine release. He also initiated a number of important treatment trials on nephrotic patients aimed at identifying the most appropriate and effective therapeutic measures in inducing and maintaining remission in affected children. He undertook, with John Soothill, in 1970, a seminal trial of cyclophosphamide treatment in steroid-sensitive relapsing nephrotic syndrome demonstrating its beneficial effects. He subsequently undertook studies that established the ideal duration of such therapy as well as evaluating the roles of other agents including azathioprine, levamisole, and cyclosporine A. His interest in the hemolytic uremic syndromes led to studies of the pathogenetic mechanisms involved, with Michael Levin and others, including the role of prostacyclin inhibition, platelet growth factors, intravascular platelet activation, neutrophil-mediated endothelial injury as well as a number of important analyses of clinical material identifying prognostic features, long-term outcomes, and the manifestations of the atypical forms of the syndrome.

Martin was an outstanding teacher and was frequently sought after as a lecturer both at home and abroad. He instituted the highly successful annual postgraduate courses in pediatric nephrology at the Institute of Child Health that continue to this day, attracting attendees from many parts of the world. He was an editor of the first four editions of the textbook "Pediatric Nephrology", two of them as one of the co-editors with Malcolm Holliday, and then as editor-in-chief of the 4th edition in 1999. The book continues to be the standard reference work on the subject and is now in its 7th edition.

He was, in addition, a very able administrator, and in 1989 he took on the role of Director of Clinical Services at Great Ormond Street Hospital for Children. During his tenure, the hospital went through the difficult transition to the new market driven, competitive National Health Service, was substantially rebuilt with charitable funds raised by the Wishing Well Appeal emerging as an NHS trust in 1994. He also worked closely with parent support groups and charities such as the Kidney Research Aid Fund to publicize the need for research and improve services for children with renal disease.

He was the foundation secretary of the British Association for Paediatric Nephrology from 1972 to 1976 and was president from 1994 to 1997. He played a leading role in the association as well as in the European Society for Paediatric Nephrology and the International Pediatric Nephrology Association. He was awarded honorary membership of all three for his service to pediatric nephrology. Following his retirement in 1997, he was co-president, with Cyril Chantler, of the very successful 11th Congress of the International Pediatric Nephrology Association in London in 1998.

He was appointed Commander of the Order of the British Empire in 1997 in recognition of his services to medicine and

in 2002 was awarded the James Spence Medal by the Royal College of Paediatrics and Child Health, its highest award, for outstanding contributions to the advancement or clarification of pediatric knowledge.

In 1966 Martin married Gill Owen, a social worker and subsequently a group analyst and psychotherapist, who was the greatest of support for him throughout his career. Martin was a devoted family man and Gill and Martin a delightful couple. They were always generous with their time and extremely welcoming to innumerable friends, visitors, trainees, and colleagues from home and abroad who all have very fond memories of their kind hospitality.

Martin's progressive facioscapulohumeral muscular dystrophy led him to retire early from clinical practice. In retirement he kept in touch with his many friends and colleagues and kept up with the latest advances in pediatric nephrology. He also pursued other interests including cookery and art in the form of mosaic creation and watercolor painting. As his condition deteriorated, causing him eventually to be wheelchair bound, he remained remarkably cheerful and uncomplaining during the final period of his life taking great pleasure in the company of his family and friends.

He is survived by Gill, his children Thomas, Emily, and Josy, and four grandchildren.