Tribute Given to Professor Robin Eady on His 60th Birthday

Professor Robin Eady, MD, was honored by the Royal Society of Medicine on the occasion of his 60th birthday in November 2000.

Robin started out as my patient back in 1963 when he needed me most. Years later, Robin and his wife, Ann, became dear friends who provided endless support when I needed it most. They took us into their home as members of their family during our long and repeated visits to Moorfields Eye Hospital. In that era, Moorfields was the only place in the world that fitted scleral contact lenses for patients like me with transplanted corneas.

Robin Eady holds the world record—37 years and counting—as the longest survivor on renal replacement therapy. Sad to say, that record may not be broken any time soon because renal-failure patients worldwide who began dialysis after the late 1960s received an inadequate dose of dialysis and remained hypertensive. Only now, at the turn of the century, is this situation beginning to be corrected.

One day early in 1963, I received a call from Professor Charles Odegaard, President of the University of Washington. I can assure you that as a young Assistant Professor, I was not expecting such a call.

The British Embassy in Washington had contacted Professor Odegaard on behalf of a medical student who was dying of uremia. They asked whether we could save his life. The process had been initiated by Robin's father, who had the necessary connections in London, and who had already lost his daughter, Robin's sister, in the crash of the Comet, the first commercial jet. Robin, then a 21-year-old medical student at Guy's Hospital in London, became a patient of our group in Seattle because he was fortunate to have a father who knew how to get things done in the world.

Our dialysis group was prohibited from taking any new long-term dialysis patients because of the famous Seattle "life and death committee." We therefore put our heads together and plotted to get around the committee. We arranged with my colleague, Lionel MacLeod, who was about to open the first dialysis center in Canada, to accept Robin as a patient and as a technician (if he survived that long). By the time all had been worked out, Robin was in advanced uremia with a dangerously high potassium level and severe hypertension. Chance then intervened.

Pan American Airlines had just started to fly over the North Pole nonstop from London to Seattle using a new Boeing 707 jet built in Seattle. When Robin arrived at the Seattle—Tacoma airport, I was there to meet the plane. Having gotten permission from U.S. Customs to board the plane, I carried him off to a waiting ambulance. His response to dialysis and ultrafil-

tration was dramatic, and a few months later, he and his parents were off to Edmonton.

Robin responded well to chronic dialysis. After 18 months, he returned to London and began home hemodialysis under the care of Dr. Stanley Shaldon. At the same time, Robin returned to medical school.

Initially, Robin dialyzed twice weekly using parallel-plate Kiil or Gambro dialyzers for 12-14 hours. He then switched to dialysis three times weekly for 5-6 hours using hollow-fiber dialyzers. With a low-sodium diet and gentle ultrafiltration, Robin never allowed his blood pressure to rise above 140/90. He finally received a kidney transplant after 25 years of hemodialysis.

Robin says, "I could control the ultrafiltration over several hours. I would not have tolerated the necessary fluid removal over a shorter period." He continues, "The worst ex-

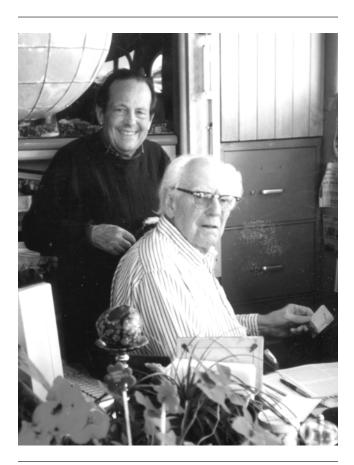


FIGURE 1 Robin Eady (left) and Belding H. Scribner in Dr. Scribner's Seattle houseboat.

perience I had on dialysis was chronic shoulder pain, possibly related to amyloid deposition. This melted away after transplant, probably because I took prednisone."

Dr. Eady specialized in dermatology, including one year of specialization in Seattle in 1973. He has had a brilliant academic career and is now Professor and Consultant Dermatologist in the St John's Institute of Dermatology, Guy's, King's and St Thomas' School of Medicine, King's College London. He is also the Dean of St John's Institute of Dermatology. This position is equivalent to being a chairman of a department in an American medical school.

What is remarkable to me, as Robin's physician and friend (Fig. 1), is the way that this outstanding man, despite the enormous burden of his renal disease, managed to take advantage of the opportunities that opened to him.

Some examples: First, Robin managed to benefit intellectually during his 18 months in Edmonton as a dialysis technician. Dr. MacLeod gave him the opportunity to study medical subjects and to take part in a research project, and Robin made the most of it. Second, after returning to medical school in London, and while struggling with the considerable

problems of maintaining his health as a dialysis patient, Robin did so well in his medical training that he was eagerly accepted as a research fellow in dermatology at the University of Washington. Third, Robin, as a dermatologist with a world-wide reputation, managed to arrange for dialysis for himself so that he could travel the world to visit his colleagues. And he did this before most dialysis centers were set up to accept visitors. Fourth, following his successful cadaveric transplant at Oxford, Robin so impressed the transplant team of Sir Peter Morris, MD, that they created the Eady Cup in his honor to be contested at the annual cricket match.

In sum, not only has Robin managed to live his second life fully, he has also made his mark in dermatology. Seldom has a person made more out of a second chance at life than Professor Robin Eady.

Belding H. Scribner, MD Professor of Medicine Emeritus University of Washington Seattle, WA, USA email: scrib@u.washington.edu