

OBITUARIES

Olivia Guly

Consultant forensic psychiatrist (b 1959; q London 1981; MRCPsych), died of breast cancer on 23 November 2025

Olivia was born in Hampshire. She attended the Convent of the Sacred Heart, Woldingham, and it was there, aged 16, that she wrote her first publication, a personal view in *The BMJ* on her observations of her fellow boarders, who hid their anorexia nervosa from staff and other pupils. This did not make her popular with the headmistress.

She qualified from St Mary's in 1981, and did house officer posts in Windsor and Ascot, followed by a senior house officer post in Taunton. She then trained in psychiatry in Bristol and West Yorkshire, specialising in forensic psychiatry, where her research was on child homicide.

She was appointed as a consultant at the Langdale Secure Unit in 1991. In addition, she undertook prison sessions, where she met her husband, Phil, a prison officer. She was a pioneer in setting up forensic psychiatric services in Lancashire.

In 1999 she moved to Guild Lodge where she was joined by other consultant colleagues. She set up the forensic outreach service and developed long term medium secure provision. She moved to Norfolk in 2001 but in 2007 she returned to Lancashire and Guild Lodge, where she worked predominantly in the women's service. She retired in 2014 and enjoyed gardening, cooking, making jam, holidays in the Scilly Isles, and walking her rescue dogs. She leaves Phil; five stepchildren; step grandchildren; and great grandchildren, as well as three siblings.

Ursula Mackintosh

Cite this as: *BMJ* 2026;392:s401



Michael Woods Haslett

GP (b 1933; q Cambridge 1957; BChir, DRCOG), died of frailty of old age on 20 May 2025

Michael was born at St Mary's Hospital, Paddington, and spent his early years in London. He was evacuated to Montreal in 1940, returning to the UK in 1944. He won a scholarship to Winchester College and studied medicine at King's College Cambridge. He did his clinical years at the Middlesex Hospital, qualifying in 1957.

He did house jobs at the Middlesex and Ipswich hospitals and obstetrics and gynaecology at Manchester Royal Infirmary before starting in general practice in Poulton-le-Fylde in 1959. He met Isobel in 1953 while on holiday in Italy, and they married in 1959.

He thoroughly enjoyed his 35 years at Lockwood Avenue Surgery, remaining there until his retirement in 1994.

He and Isobel shared a love of the mountains, spending time at the family cottage in the Lake District and completing the Wainwrights and Wainwright's outlying fells, accompanied by a succession of labradors. Michael also climbed in the Swiss Alps and Dolomites. He had learnt to ski in Canada and skied into his early 70s.

Isobel died in 2007, and Michael married Sonia in 2012, spending time between Lytham St Annes and Beckenham. Michael and Isobel had three children: Peter, a GP, who died in 2022; Roger, an ophthalmologist; and Elizabeth, an obstetrician and gynaecologist. He is survived by Sonia, Roger, and Elizabeth; six grandchildren; and three great grandchildren.

Elizabeth Walton

Cite this as: *BMJ* 2026;392:s395



Claude Seng

Consultant in communicable diseases (b 1957; q Leeds 1982), died following a short illness on 29 September 2025

Claude Seng was born in Mauritius in 1957. He was raised in his family's corner shop and developed a strong work ethic that, combined with his academic talent, led him to win the national scholarship awarded to the country's top students. This allowed him to study anywhere in the world, and he chose to study medicine at Leeds, where he graduated in 1982. He began training in anaesthetics, with posts in Leeds, Swansea, and London. With a growing family, he chose to pursue public health as his speciality. After completing a masters degree in control of infectious diseases at the London School of Hygiene and Tropical Medicine he qualified as a consultant in communicable disease.

He joined the newly formed Health Protection Agency and rose to become clinical director for north west London, where he played a key role in the city's response to emerging viral threats, including severe acute respiratory syndrome, avian influenza, and swine flu. He also contributed to the training and development of many future public health consultants. His colleagues appreciated his approachability, hard work, and competitive flair in lunchtime games of Bananagrams.

Outside medicine he was a devoted family man, a lifelong Manchester United supporter, and a keen traveller, and he delighted in the company of his grandchildren. He leaves his devoted wife of 40 years, three children, and six grandchildren.

Steven Leong

Cite this as: *BMJ* 2026;392:s418



William Stuart Adams Smellie

Consultant chemical pathologist (b 1960; q Cambridge/Oxford 1985; DM, FRCP, FRCPath), died unexpectedly on 20 July 2025

Stuart was born and brought up in Glasgow and gained scholarships to Glenalmond College in Perthshire and St John's College, Cambridge. He completed his clinical training at Oxford and subsequently did a senior house officer rotation that included six months in Brussels.

In the late 1980s he returned to Glasgow as a registrar in pathological biochemistry, based at Glasgow Royal Infirmary. He had a formidable intellect and enjoyed grappling with unexplained clinical problems.

In 1994 Stuart took up a post as consultant chemical pathologist at Bishop Auckland General Hospital where he brought a practical approach: when a freezer broke he bought a replacement and installed it the same day. He became director of clinical practice at the Association for Clinical Biochemistry, spearheading a series of articles for GPs and was awarded the president's medal in 2008.

Stuart worked at the Department of Health where he also led on the *National Handbook for Laboratory Medicine*. He served as vice president of the Association of Clinical Pathologists and helped develop diabetes guidelines for the National Institute for Health and Care Excellence.

He was a passionate fisherman and with his wife, Gillian, toured the rivers and lochs of the Highlands, bringing along their children and their many dogs. Stuart was kind and generous, and he will be sorely missed. He leaves Gillian and their three daughters, Eloise, Bea, and Susie.

Gillian Smellie

Cite this as: *BMJ* 2026;392:s397



Michael Frederick Sudlow

Consultant in respiratory medicine (b 1939; q London 1964; FRCPE, FRCP), died of complications following a pelvic fracture and Alzheimer's disease on 21 July 2025

Michael was educated at Blackpool Grammar School and studied medicine at St Thomas' Hospital, London. While there he persuaded a fellow student, Liz Lytle, to marry him. After house jobs in London, Stoke on Trent, and Birmingham Michael was appointed medical registrar at St Thomas' in 1967. This was a time of considerable change in scientific respiratory medicine, particularly in the investigation of lung function and deposition of particles. This fascinated him and in 1968 he obtained a post at the Royal Brompton Hospital as a research fellow at the physiological flow studies unit of Imperial College London.

By 1972 Michael had obtained a post of lecturer in the department of medicine in Edinburgh and in 1977 he was promoted to consultant in respiratory medicine and honorary senior lecturer. He introduced fiberoptic bronchoscopy to Edinburgh, advised colleagues in India on the management of respiratory complications following the Bhopal gas leak disaster in 1984, and was associate postgraduate dean.

In retirement he became regional adviser on the UK government's coal miners' respiratory compensation scheme. He and Liz, who worked in medical gynaecology, were keen hill walkers, trekking across Europe, Turkey, and the Himalayas. Music and fishing were Michael's other passions. He leaves Liz, three children, and four grandchildren.

Cathie Sudlow; Anthony Seaton

Cite this as: *BMJ* 2026;392:s400



William Stewart Taor

Orthopaedic consultant (b 1938; q London 1962; FRCS, LLB), died of disseminated carcinoma of the colon on 23 June 2025

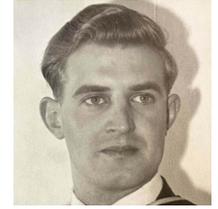
William Taor was born in Chesterfield, Derbyshire. The family moved to south London and he went to Sutton Grammar School for Boys before completing a bachelor of science at Charing Cross Hospital Medical School, then qualifying. He was a keen sportsman, captaining the medical school football team and playing for United Hospitals. He married his fellow student, Pam Moss, in 1962.

William joined the orthopaedic rotation at Charing Cross Hospital and became a consultant at the Central Middlesex Hospital in 1974. With his senior registrar, William described small patella syndrome and reported that the patients who fared the best were those who avoided surgery. He saw many patients with tuberculosis of the spine who had fled Idi Amin's regime in Uganda and had settled in Harlesden and Willesden. The distinctive changing pattern of this infection was reported to the annual meeting of the British Orthopaedic Association in 1980.

He looked after the England cricket team when they played at the Oval. He also helped develop the International Badminton Federation's anti-doping regulation and control system. William left the NHS to concentrate on his medicolegal practice. He completed a law degree in 2000 and continued preparing medicolegal reports into his early 80s. He and Pam, a GP in Harrow, travelled widely and were great Francophiles. He leaves Pam, five children, and 13 grandchildren.

James Scott

Cite this as: *BMJ* 2026;392:s419



Frances Olwen Wilson

GP (b 1931; q Birmingham 1954), died of bronchopneumonia on 16 November 2025

Olwen was born in Birmingham where she went to King Edward's High School for Girls before going to Birmingham Medical School.

She did junior medical posts in Birmingham and Stoke before moving to Hale, Manchester, and marrying Tony Wilson, a consultant physician in Hope and Salford Royal hospitals.

Olwen and Tony brought up three children in Worsley and during the early stages of family life Olwen worked in general practice as a locum GP. She subsequently became a partner of Windward General Practice in 1970, working closely with Brian Sides.

She developed a keen clinical interest in palliative care and took up a one day per week voluntary post as medical director at St Ann's Hospice, Little Hulton. She continued in this role until 1986, at which time she retired from her GP role, and became the first full time medical director at the hospice, a role she held for the last five years of her career. Olwen was a warm, compassionate, empathetic doctor who was adored by her patients. She delighted in continued medical development, specifically her training in palliative care.

She was passionate about photography and travel, exploring Africa, Asia, Europe, and North America as part of the Pentax Club. Olwen is survived by her son, Ian, and daughter, Joy; Anne, her eldest daughter, died in 2024. Olwen was blessed to have nine grandchildren and eight great grandchildren, all of whom she cherished.

Ian Wilson

Cite this as: *BMJ* 2026;392:s396



Alexander Graeme Yule

GP (b 1964; q Cardiff 1988), died of myocardial infarction on 8 June 2025

Graeme was born in Aberdeen and as a child moved to Cardiff. He studied at the University of Wales College of Medicine, qualifying in 1988. In later years he would serve Welsh rugby as team doctor for both Crosskeys RFC and Newport Gwent Dragons. However, his loyalty and support would remain with Scotland.

Graeme trained as a GP in Risca, Sirhowy Valley, at a time when South Wales was reeling from the miners' strike and deindustrialisation. Throughout his GP career Graeme was an advocate for disadvantaged groups. He ran a substance misuse clinic and represented general practice on countless mental health networks. More recently this work developed to encompass health inclusion services, which helped the growing number of asylum seekers in South Wales.

Through his roles on Aneurin Bevan Health Board, he campaigned for the integration of community based health and social care. Graeme helped introduce regular meetings between GP teams, other primary care providers, and third sector organisations. His mantra was that the pressures on hospitals would only be relieved by investing in community interventions

He was adored by his patients at St Julian's Medical Centre, Newport, where he worked for over 30 years. He died while cycling, one of his many sporting passions. He leaves his wife, Helen, a consultant radiographer, and two children Alex, and Mairghread; and a grandson, Isaac.

Rhodri Evans

Cite this as: *BMJ* 2026;392:s414



Tessa Richards

BMJ editor who championed patients

Tessa Jane Louise Richards (b 1950; q Leeds 1973; MRCP, MRCGP), died from adrenal cancer on 10 February 2026

In her time as a *BMJ* editor Tessa Richards brought patients from the outside to the heart of the journal. She achieved this through indomitability and finding a way even when there seemed to be none. The transformation she led is slowly being adopted by other journals.

When she arrived at *The BMJ* in 1983 patients were an afterthought. Photographs—often published without consent—might show them naked with a black band across their eyes, a device that was later understood to be wholly ineffective in disguising their identity. By the time Richards left in 2023 the journal had a patient editor, a patient advisory board, and over 1000 patient and public reviewers. Patients are now involved in all parts of the editorial process. Richards led a strategy to incorporate patients into the journal and, crucially, ensured that it was implemented.

Equal partners

She created a formidable body of articles arguing for patients being equal partners with health professionals. Evidence showed that this partnership improves outcomes, safety, efficiency, and the satisfaction of patients and staff. She was frustrated that something so obvious was so slow to happen, but she kept pushing in every way she could.

In 1990 Richards wrote, “Even the briefest spell on the other side of the desk or in a hospital bed gives blinding insight into patients’ vulnerability and of their need to be listened to, treated with respect, and given full, unhurried, jargon free explanations. Simple gestures of kindness and encouragement go a long way—as does the occasional admission of fallibility.”

In 1999 she wrote, “A revolution is under way in healthcare. After decades of patriarchal provision of services, governments are now accepting that patients should have a say in what is provided. The medical mindset needs radical readjustment to accept that patients are partners and that their input into medical education, service provision, research, and policy making is essential.”

In 2003 Richards’s passion for patient partnership was turbocharged when she developed adrenal cancer. One doctor handed her a case series of patients with adrenal cancer, all of whom had died within a year; but she was hugely grateful to the surgeons who were kind and professional and performed lengthy and heroic surgery on her chest and abdomen that was complicated by massive bleeding.

She described her experience in *The BMJ* in 2013, and not all of it was good. “During these difficult days the intensive care nurses were my prop. They worked seemingly incessantly on long shifts. I learnt their life stories and they mine. Communication with the doctors, by contrast, was minimal. I was ‘presented’ to the intensive care consultant on ward rounds by a baffling number of different junior doctors. I do not recall any of them introducing themselves, examining me, or clearly explaining the state of play.” Over the years she went through many more cycles of treatment and didn’t expect to live as long as she did.

In 2011 she led the development of a strategy to increase patient partnership at *The BMJ*. She recognised the importance of “walking the talk,” a constant focus on implementation, and evaluation. She and others reported each year on progress and how changing processes changed mindset. One *BMJ* colleague said, “The patient partnership is ingrained in us all now thanks to Tessa. It took time to gain traction in the early days and we needed Tessa’s fierce leadership.”

Although championing patients was Richards’s biggest passion and achievement, she also wrote about global health, health maintenance organisations, assisted dying, climate, and the importance of Europe. She had to cajole other editors to take an interest in Europe, and she also led *The BMJ*’s series on overdiagnosis, devising an original and effective format.

Richards was born in Tunbridge Wells. Her parents, Kenneth and Pamela, separated when she was in her late teens. Her father was a farmer and film maker, and her mother went on to become head of English at Benenden School, no doubt helping her daughter develop her fine writing style. After Bruton School for Girls, Leeds University, and Guy’s, Richards did various medical



Patients need to be “listened to, treated with respect, and given full, unhurried explanations”

jobs, rising to being a senior registrar in rheumatology and general medicine.

Chaos and kindness

She was much loved by staff at *The BMJ*, and one defined her as “a mixture of chaos and kindness. With any article Tessa was involved in with the weekly print journal we all knew we were in for a wild ride with changes, then changes to the changes, and then further changes to those changes which would continue right up to the wire, all in the interest of making the finished article as good as possible, and all would be forgiven with a box of chocolates and heartfelt thanks.” Another wrote, “Tessa was a consummate colleague and friend. She was an all round good person. She simply cared about people and gave of herself to them.”

Managing her was not straightforward. As her husband, Charles, said, her philosophy was “I will not follow. I want to be in charge. I will not be led.” She was an intrepid traveller, both for herself and for *The BMJ*, and loved swimming. She was hard on herself and a perfectionist, hence the constant changes in her copy. A favourite quote of hers came from EB White: “I arise in the morning torn between a desire to improve (or save) the world and a desire to enjoy (or savour) the world. This makes it hard to plan the day.”

Richards is survived by Charles; children, Nick, Christo, and Poppy; and granddaughter, Iniya.

Richard Smith, London
richardswsmith@yahoo.co.uk

Cite this as: *BMJ* 2026;392:s361