

BMJ **Belding Scribner**

Jeanne Lenzer

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Obituaries

Belding Scribner

The inventor of shunt dialysis

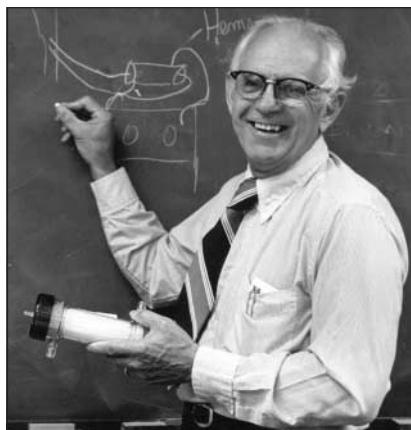
Belding H Scribner invented a device credited with saving the lives of over one million patients with kidney failure worldwide. Although his work was laughed at initially, it was his invention's extraordinary success that sparked an ethical dilemma of epic proportion.

Scribner came upon his idea in 1960 after he saw a young man recover briefly following dialysis, only to die a few weeks later. At the time, haemodialysis could only be performed for a few cycles. In a painful procedure, glass tubes were inserted into a patient's blood vessels, permanently destroying them for further access.

The patient weighed on Scribner's mind until one night when he suddenly awoke with an idea of how to save patients with end stage kidney disease. He would fashion a loop between an artery and vein, allowing the device—rather than the patient's own vessels—to be opened and closed with each cycle of dialysis.

He enlisted instrument designer Wayne Quinton to work on his idea. They fashioned the U shaped device made of Teflon that would become known as the "Scribner shunt." Teflon proved to have a special advantage over glass: its non-stick surface did not trigger blood clotting.

The idea worked so well that Scribner's first patient, Clyde Shields, said in a 1971 interview that his first dialysis cycle "took so much of that waste I'd stored up out of me



that it was just like turning on the light from the darkness."

In 2002, Scribner won the Lasker award—widely considered to be the most prestigious award for medical achievement after the Nobel prize—along with Dr Willem Kolff at the University of Utah. Kolff developed the coil-type dialyser, while Scribner developed the shunt and parallel plate dialyser. Lasker jury chairman Joseph L Goldstein compared the way in which Scribner and Kolff built on each other's work to the symbiosis between Matisse and Picasso.

But an ethical firestorm ensued when it became clear that the Scribner shunt could save lives. Since more patients needed dialysis than could be helped, who would be saved?

Robert A Crittenden, associate professor of family medicine at the University of Washington, says that although life and death decisions were not new to medicine, doctors had a "paternalistic approach" at the time, often making decisions themselves, with "little input from patients or their families."

Scribner would change that. He wanted to ensure that decisions were made by the community. He turned to the King County Medical Society, which appointed a committee dubbed "The Life and Death Committee." The NBC documentary *Who Shall Live?* examined the troubling questions underlying decisions by the committee. Should patients with children get priority? Those who went to church? Those who had the most productive jobs?

Bioethicist Albert Jonsen says it was Scribner's invention and the formation of the committee that gave birth to the modern field of bioethics. But, says Professor Jonsen, "Dr Scribner accepted the selection committee approach reluctantly. It was the best of a bad solution."

Scribner was not about to let the best of a bad solution stand for long. He threw his efforts into ensuring that *all* patients needing dialysis could receive it. He was the driving force behind legislation enacted in 1973 providing Medicare reimbursement for dialysis.

A less known aspect of Scribner's worldview was his abhorrence for the contaminating effects of the profit motive on medical care. He felt strongly that a physician's commitment to a patient should not be tainted by profits. "He was disturbed that what had been a 'noble experiment' was degenerating into a rush for profits," says Dr Christopher Blagg, professor emeritus of medicine at the University of Washington. "In 1960 it wasn't usual for academic physicians to patent inventions. They sort of gave them away. He joked that if he'd patented the shunt he could have bought an island," said Dr Blagg. "He was upset that academia was becoming more and more involved with commercial entities."

Concern about such broad health disparities occupied much of Scribner's later years when he increasingly talked and wrote of the need for a single payer health system in the United States.

Sharon Pahlka, who met Scribner when she was first diagnosed with kidney failure 30 years ago, says, "He was very unassuming. He wore the same grey suit every day it seemed. He lived in a simple houseboat. Everyone thinks of him in his red hat and canoe. But what stood out was his humility."

He leaves a wife, Ethel; four children; and three stepsons. [JEANNE LENZER]

Belding Hibbard Scribner, professor emeritus of medicine University of Washington School of Medicine (b Chicago 1921; q Stanford University School of Medicine, Stanford, California, 1948), was found dead, his body floating in Portage Bay. Bent by osteoporosis and using canes, it is presumed that he lost his balance and fell off his houseboat and drowned on 19 June 2003.

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David Douglas French



General practitioner Kidsgrove, Staffordshire (b Newcastle upon Tyne 1936; q Guy's Hospital, London, 1962; DOBst RCOG), d 1 February 2003.

He was a principal in general practice in Westbury, Wiltshire, from 1965 to 1970 and in Regina, Saskatchewan, Canada, from 1970 to 1979. In Canada he trained as a pilot. He returned to England in 1979 and joined his father's practice in Kidsgrove. David was a man of many interests—a great lover of books, photography, music, the theatre, and astronomy. He had a humorous sense of the absurd that never diminished despite severe arthritis. He leaves a wife, Josephine; four children; and two grandchildren. [REBECCA FRENCH]

David Jenkins

Former general practitioner London (b Bedlinog, Wales, 1923; q Middlesex Hospital, London, 1950), d 30 March 2003.

After national service in the Royal Air Force, he entered general practice in Bow, east London, in 1954. In 1955 he was appointed divisional surgeon to the Metropolitan Police and for 42 years had professional links to New Scotland Yard. He became an active member of the Association of Police Surgeons and was elected president in 1986. He was on the committee of the medical section of the British Academy of Forensic Science and a clinical assistant in the forensic department of the London Hospital. He retired from general practice in 1997. He leaves a wife, Lucette; two sons; and three grandchildren. [JACK CANTOR]

John Keith Merritt



Former general practitioner Caterham, Surrey (b 1936; q Leeds 1961; DRCOG, MRCGP),

died on 24 May 2003 from complications following aortic aneurysm repair.

Having qualified at Leeds, meeting his wife Ann in the university climbing club, John came down to earth in Surrey, building up a practice from two doctors with 2000 patients to six doctors and more than 12 500 patients. He was care of the elderly hospital practitioner at Caterham Dene and at East Surrey Hospitals. His spare time was devoted to sailing, walking, gardening, and skiing. He leaves Ann, two children, and three grandchildren. [JOHN V HOWARD]

Peter Royston Rawle



Chairman department of anaesthetics, Frimley Park Hospital, Surrey (b 1954; q Westminster Hospital Medical School 1977; FRCA), died from cholangiocarcinoma on 23 January 2003.

Peter was a senior registrar at St George's Hospital, London, before being appointed as a consultant at Frimley Park Hospital. He enjoyed rugby, golf, and cycling. When he became ill, he had been planning a trip to France to cycle part of the Tour de France route. Colleagues have started an annual golf tournament for the Peter Rawle Memorial Trophy to raise money for children's charities. Peter leaves his second wife, Annette, and two children by his first marriage. [MICHAEL RAWLE]

Michael Taylor Stather-Dunn



Former consultant psychiatrist St David's Hospital, Carmarthen, Dyfed, south Wales (b London 1923; q St Bartholomew's Hospital, London, 1953; DPM), died from chronic obstructive airways disease and cardiac failure on 27 October 2002.

Michael left his training as a quantity surveyor to join the Royal Air Force as a

Spitfire pilot in the second world war. He saw action in the Far East, taking his matriculation exams in a tent in the jungle. He then took advantage of a scheme supporting former servicemen to train in needed disciplines and studied medicine. After qualification and training in psychiatry, he was appointed consultant psychiatrist in Carmarthen. In 1977 he retired early following a coronary artery bypass graft. He leaves a wife, Brenda; three daughters; and five grandchildren. [LOIS STATHER-DUNN]

John Horatio Swan

Former general practitioner Ealing (b 1915; q Middlesex Hospital, London, 1939), died on 1 March 2003 following a stroke.

After military service John joined an established practice in Ealing, where he remained in partnership for more than 40 years. He undertook additional duties at the King Edward Memorial Hospital and Wormwood Scrubs prison. As a young Royal Army Medical Corps officer, John had served in the liberated concentration camps and had a strong sense of compassion and justice. He had a passion for opera and a tremendous knowledge and experience of the artists and repertoire. Predeceased by his wife, Diana, he leaves three children. [ABIGAIL SARGENT, RAY OLIVER]

John Woodall



General practitioner St Paul's Cray, Kent 1952-91 (b 1924; q Guy's Hospital, London, 1946; FRCGP), d 14 April 2003.

A month into his second house job he followed his Quaker roots and went to work among people with leprosy in China, having refused, on grounds of conscience, to do military service. After helping to set up a new centre for malaria he returned to the United Kingdom and joined a progressive practice. He worked in television and wrote for newspapers, but his finest achievement was undoubtedly the development of the regional trainers course, which was unique and far ahead of its time. Predeceased by his wife, Jenny, he leaves two children. [ROGER MAY]

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