Obituary

Dr John G P Williams, born 15 September 1932, died 18 July 1995

A pioneer of British sports medicine and soft tissue injury

Sports medicine and rehabilitation medicine have lost one of their true pioneers with the untimely death of John Williams from cancer. Typically he kept very quiet about his terminal illness, not wanting it publicised, and bravely working right until the end.

John had had an operation for cancer in March 1993, but already had metastases. Chemotherapy and uncertainty followed but he bravely battled on with a heavy load of consultations, operations, lectures and publications, operating until a month before he died and seeing patients as late as a week before at Bon Secours Hospital in Buckinghamshire. Mercifully when the end came, it was fairly quick. His colleagues receiving letters and referrals from him had no idea how ill he was.

He gave a lecture in February at the National Sports Medicine Institute which he began by asking the audience in slightly combative style what was the major problem affecting the Achilles tendon. ‘It’s the people who treat it,’ he said, and went on to explain that although it was a major interest of his, he did not claim to know how to treat all its problems, whereas many ‘experts’ – through ignorance – did.

John was a rather private individual. Son of a Royal Navy Surgeon Commander, he won a scholarship to Caius Cambridge from Beaumont College, Windsor, and qualified from St Mary’s, Paddington in 1956. After this he gained a diploma in obstetrics and gynaecology and in 1967 a diploma in physical medicine which led him on to his life’s work, rehabilitation and sports medicine. He started an athletes’ clinic at the Middlesex Hospital in the 1960s, became a consultant in rehabilitation medicine at Mount Vernon Hospital in 1965, and shortly after was made medical director of Farnham Park Rehabilitation Centre which won an international reputation for excellence. He treated athletes there for more than 25 years and then moved the work to the Bon Secours Hospital when Farnham Park was closed.

A keen sportsman himself, he won junior single sculls events on the Serpentine during the Festival of Britain (1951) and was a Leander Club member. He also played real tennis and was a member of Queen’s Club.

His recreations included naval history, on which he had a large library of books, and modelling – making many scale models of famous sailing vessels and men o’ war. He also had a large model railway and in his late 50s followed his sons in learning to fly.

He was very practical and his rehabilitation unit had Victorian treadle driven lathes on which his patients could be distracted from the tedium of leg rehabilitation exercises by turning objects on the lathes.

His career was anything but conventional. Despite working in rehabilitation and physical medicine, he gained his FRCS and became a physician who operated, a very unusual and perhaps lonely situation. He pioneered several surgical procedures for soft tissue...
injuries and more recently was used a great deal for medicolegal and compensation advice.

He became FRCS, FRCP, and gained an MSc in spinal mechanics from Brunel University and an MD in 1984 in overuse injuries. Throughout his career he was intent on establishing and maintaining academic standards and felt very strongly that sports medicine should be run by doctors with unassailable academic credentials. For years he was the sports medicine authority in Britain and a great proponent of British sports medicine and BASM. Sadly he was the forerunner of a trend to follow, that BASM appears to distance itself from and alienate some of those who have served it most fervently.

He was extremely supportive of the establishment of the London Sports Medicine Institute where he gave several lectures and tutorials to the groups of general practitioners anxious to learn from a real expert. Apart from lectures on the Achilles tendon he had a superb collection of slides and x rays on which he could base constantly changing tutorials on ‘Things aren’t always what they seem’ or ‘How to expect the unexpected’. This seminar was often introduced with a magnificent slide of a rhino trying to mate with an elephant. The rhino is of course the symbol of the Apothecaries of which John was a keen member. He was also very open about his masonic involvement, which he defended as a mainly charitable activity.

His sports medicine philosophy, for which he perhaps has not been given enough credit, was that many athletes are really not very fit and that a time of injury may be a golden opportunity to reach and strengthen the parts that the usual training of the specialist coach did not develop. Residential treatment at Farnham Park therefore involved a spartan regime and apart from exercises and treatment for the specific injury, included whole body conditioning with circuit training and other general fitness training several times per day.

Perhaps from shyness, perhaps from genuinely feeling irritated by those who did not realise what he was trying to achieve in bringing high academic standards to sports medicine, and perhaps from having to battle with physicians who mistrusted a physician who operated and orthopaedic surgeons who could not accept a physician pioneer in soft tissue injuries who operated in what they regarded as their territory, John had the reputation for a certain degree of arrogance and ‘not suffering fools gladly’. In his defence, John was having to contend with the majority of sports medicine practitioners who dabbled in the subject and had no real expertise, and with BASM which at the time was principally a club for ex sporting doctors, many of whom saw no need for greater recognition of sports medicine.

Dave Bedford, Britain’s world record holder at 10,000 metres, recalls eight weeks spent at Farnham Park under John’s care for his recurrent hamstring tear being cut short by peremptory discharge home. After several warnings for breaking the 10:00 pm curfew and lights out, Dave was caught after the allotted hour, on the fire escape returning with company from the local pub. He had to go elsewhere for further treatment.

John was Secretary of BASM from 1962 to 1973 and from 1970 to 1980 he was Secretary General of FIMS, the International Federation of Sports Medicine. Almost alone he was responsible for bringing the World Congress of Sports Medicine to Oxford in 1972 (the only time it has come to England) and when it came to the crunch and sponsorship was short, he made a substantial personal financial contribution which made the whole thing possible.

Like many pioneers John had strong views and after many controversies, particularly with the new secretary of BASM, Peter Sperryn, his close colleague and associate both at Farnham Park and as joint editor of the second edition of what became the standard British text ‘Sports Medicine’, he largely withdrew from active involvement with BASM and at one stage was even contemplating resigning from membership.

It was unfortunately during these years that sports medicine and BASM in particular gained a reputation for attracting contentious doctors. John and Peter had very different views on the future of BASM. John felt strongly that academic respectability for sports medicine could only come with a strongly doctor dominated organisation and was keen for BASM to have different categories of membership. Peter Sperryn supported the physiotherapists and others in a multidisciplinary organisation.

This battle was not unique to Britain, and different models coexist in countries such as the USA, but the passions involved were indicative of the fact that the two concerned were not amateurs who dabbled in sports medicine but were both highly motivated doctors who had committed their careers to an unrecognised branch of medicine, hoping that its importance would eventually be recognised.

John Williams was also heavily involved at the beginning in the Institute of Sports Medicine (ISM), which was primarily set up by a BASM initiative as an academic arm before it was largely taken over by Peter Sebastian (a lawyer) and dissociated itself from BASM. The ISM was used for years as an excuse by the Sports Council for not recognising BASM as the representative sports medicine organisation in Britain, a situation that only changed in the late eighties.

Lack of any official recognition for sports medicine, despite his strenuous efforts to establish its academic respectability, was a source of frustration to John and undoubtedly he was a pioneer before his time who failed through no fault of his own to carry sufficient of the medical establishment with him. The battle still continues.

After serving as Secretary General of FIMS for 10 years he held no further major office in sports medicine but continued to be very active clinically, in lecturing and publishing, acting as medical advisor to the Squash Rackets Association and as chairman of various technical committees of the British Standards Institute relating to sports equipment and shoes.

He was delighted that the Society of Apothecaries set up the first open diploma examination in sports medicine in the United Kingdom, shortly after the initiation of courses for general practitioners at the London Sports Medicine Institute, and was disappointed...
not to be nominated as an examiner as he had proposed such a diploma some years before.

He tried with the British Postgraduate Medical Federation to set up some sports medicine courses, similar to those initiated by BASM, but with the cachet of the BPMF and London University, to cater for the educational needs of future diplomates, but a limited market (even now the economic value of a Dip SM is debatable) and the competition from BASM, whose education officer was paid with a grant from the Sports Council, meant that the numbers recruited for the BPMF courses were not sufficient to make the courses economically viable.

Another great disappointment for him was the closure of his hospital, Farnham Park, where he had pioneered so many of his techniques. He obtained strong financial backing for a bid to buy the hospital and set it up to continue, selling its services to the NHS for rehabilitation and sports medicine as well as for privately funded patients. Success was denied him at the last moment, from what he was convinced was political interference in what he was certain was a viable economic scheme.

John made a huge contribution to sports medicine in Britain and will be greatly missed by his colleagues. Suggestions that he should be made the next President of BASM unfortunately came too late.

His books included:
- *Sports medicine* (1962), Edward Arnold
- *Medical aspects of sport and physical fitness* (1965), Pergamon
- *Colour atlas of injury in sport* (1980), Wolfe Medical
- *Diagnostic picture tests in injury in sport* (1988), Wolfe Medical (also published in USA by Year Book Medical Publishers)

Where shall we find such another man?

DSTP