EDITORIAL

Adam Linton—The Man

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If group confession is therapeutic, we wish to afford ourselves that balm and readily confess that we are unable to clearly describe Adam Linton, the man. While we are willing to accept part of the responsibility for our shortcoming, we also contend that part relates to his complex nature.

Adam’s career, like that of most highly successful men, was steadily evolving and changing. Born in 1932 in Selkirk, Scotland, he received a medical degree from the University of Edinburgh in 1955 and completed his postgraduate training in internal medicine and renal disease at the University of Glasgow. As a newly appointed consultant he was singularly responsible for the creation of a dialysis unit at the Glasgow Western Infirmary. Adam’s concern about the implicit rationing of the British health care system prompted his emigration to North America. In 1970 he accepted a position as professor of medicine at the University of Western Ontario in London, Ontario, Canada. Within 2 years, he had been promoted to head the Victoria Hospital Department of Medicine and began to rebuild a department which had been depleted by the opening of the University Hospital. Adam was chief of the Department of Medicine from 1972 to 1984 and during this period of time he successfully rebuilt the department by attracting a coterie of recent trainees. He arranged for their further research training in the United States and the United Kingdom prior to their return to the Department of Medicine at Victoria Hospital.

Throughout his career Adam was involved in research and produced over 100 peer-reviewed publications which initially covered the whole spectrum of renal disease and latterly dealt with health care issues and economics. He also served as editor of Renal Failure and was a member of the Editorial Board of the American Journal of Kidney Disease.

Although Adam had been involved in medical politics since arriving in London (and prior to that in Glasgow), he became more actively involved after stepping down as chief of medicine in 1984. He was elected to the Ontario Medical Association (OMA) Board of Directors in 1986 as a university representative and was appointed to the Executive Committee the same year. He was elected to be the president of the OMA in 1991. He made numerous contributions to this organization, serving as chairman of the Provincial Advisory Committee on Nursing Education, the Tariff Committee of the Dialysis and Transplantation Section, and the Special Committee on Medical Manpower and the Hospitals Committee. Adam was also a founding member of the OMA Section of Clinical
Teachers, a conjoint OMA—government task force on the use and provision of medical services in the province of Ontario, and later the OMA/Ministry of Health Joint Management Committee.

At the national level Adam was a member of the Canadian Medical Association’s Board of Directors and chaired the Committee on Quality of Care. He was very interested in issues regarding quality assurance and was concerned that physicians must be involved in the process of discerning patient outcomes. He was also a member of the CMA’s National Health Care Issues Agenda Committee and a corresponding member of the Committee on Physician Resources. Adam also served as a member of the Premier’s Council on Health, Well-Being and Social Injustice. Thus Adam chaired many major committees that dealt with health care in Canada’s largest province.

As an educator Adam was direct and accessible. He encouraged and challenged others to participate in the process of understanding medical and health care delivery-related issues. He had the superb ability to get trainees to ask the questions “Why?” and “What if?” and to help them research the problem identified. He would then insist that results were well presented both orally and in writing. Review of his curriculum vitae will show publications coauthored by many (ourselves included) whose careers were positively influenced by him. He was always a popular undergraduate and postgraduate teacher, and was admired for his openness coupled with his legendary sense of humor. As an administrator Adam developed the renal unit at Victoria Hospital and its Department of Medicine. He was largely responsible for nurturing a progressive, interactive philosophy between the OMA and the Ontario government to meet the challenges and changes required in the health care system. He felt strongly that physicians should not only ask important questions about economics and other health care issues but also work with the other interested parties to solve the practical problems.

Adam’s family life was rich; he had a strong and loving relationship with his wife Margot and their three children. It was a pleasure to spend social time with the Linton family because they were happy and were fun to be with. Adam’s charm, enthusiasm, wit, and story telling enhanced any occasion. We would be remiss not to mention Adam’s love of good food and travel. Although he enjoyed many varied and exotic locations, it was the battlefields of World War I which held a particular fascination for him. Adam’s favorite sport, after politics, was that of the honored Scottish game of golf. His eternal optimism was readily demonstrated when he totally rebuilt his golf swing (a Scottish slash) at the age of 50—the “after” was a marked improvement on the “before.”

Adam’s courage in the face of his final illness and his desire to contribute to his profession until the last week of his life typifies his character. He was an individual whom all of us respected and enjoyed as a human being; we are diminished by his death.