

Vicky Clement-Jones

At the age of 33, Dr Vicky Clement-Jones was embarking on a brilliant career in research medicine. Out of the blue she was diagnosed with ovarian cancer and given only months to live. The initial appalling shock was swiftly followed by a sense of outrage, that familiar 'why me?' syndrome experienced by so many cancer patients.

Vicky refused to be beaten. She vowed to fight the disease with all the personal resources at her command: her medical knowledge, her formidable determination, her enduring optimism, and last, but by no means least, the support and love of her husband, her large family and her many friends.

This is the extraordinary human story behind Cancerbackup which, since its launch in 1985, has helped many hundreds of thousands of cancer patients and their friends and families. Thrilling and heartwarming, it is a moving account of one woman's unflinching dedication to realise her 'rather grand dream.'

'Vicky Clement-Jones is one of Nature's great human beings,' said the actress Janet Suzman. As all who knew her can vouch, Vicky had a wonderful capacity to 'find good in everything,' even the tragedy of her own life, cut short by cancer. Through the foundation of Cancerbackup she has made a lasting and very special gift of her visionary and charismatic personality.

Warnings

In August 1982 Dr Vicky Clement-Jones was thirty-three. A string of academic successes marked her progress and a glittering future in the medical world lay before her. She was a senior registrar and held a clinical research fellowship in the department of endocrinology at St Bartholomew's Hospital in the City of London. There was also the private excitement of preparing for the children that she and her husband Tim were now eager to have after nine years of marriage.

Vicky was glad all the same that this particular summer was fading and coming to an end. It had been the most fraught time of her life that she could ever remember. She had suffered two serious illnesses: the first, in early 1981, a severe bout of rheumatic fever which was followed some six months later by a perforated appendix resulting in peritonitis and the discovery of a pelvic abscess. Both had entailed dramatic dashes to hospital followed by periods of long, tedious convalescence which, for one normally so healthy and always super energetic, had been hard to bear.

After a family reunion in Honolulu Vicky returned to England feeling shattered and drained. At once she started to have tests at St Bartholomew's Hospital, (Barts as everyone calls it). An ultra sound was followed by a CT scan which revealed a mass in her abdomen. The surgeon decided to perform a laparotomy (abdominal operation) to investigate what he believed to be a return of the pelvic abscess.

Bad news

She awoke later that evening feeling very groggy from the anaesthetic to find the houseman standing by her bed. *'Was it an abscess?'* she asked him immediately. *'No,'* he stuttered. *'It wasn't an abscess. They've taken a biopsy and the professor will come and see you tomorrow.'*

Oh, my goodness, thought Vicky to herself. Something's up. It must be serious if they are taking a biopsy, but why aren't they telling me? Still in a haze she consoled herself with the thought that maybe she was having a bad dream and that if she went back to sleep it would go away.

But when she woke up in the morning the bad dream had not vanished. The senior registrar was the first to visit her. He shuffled uncomfortably, pulling the curtains round her bed to give her some privacy. His expression was gloomy. Avoiding the mention of words like 'tumour' or 'malignancy' he too could tell her no more than that the surgeon had discovered a mass in her pelvis and had decided to take a biopsy.

No word for cancer

Cancer, Vicky noticed, was a word everyone had difficulty saying, yet the doctors were trying hard to be honest with her. She was, after all, a colleague. The consultant told her that they thought it was in the ovaries but he was unwilling to commit himself to a definite opinion about the precise nature and stage of the disease until the pathologist had analysed the biopsied tissue. It was clear, though, to everyone that it was an advanced cancer since other organs in the pelvic cavity as well as her ovaries had been infiltrated. She became keenly aware of their pessimism; people were looking away from her, trying not to meet the questions in her eyes. The buzz had gone round the hospital grapevine. Everyone knew that Vicky, the brilliant young doctor, was gravely ill with cancer.

There followed the dreadful suspense of waiting for the biopsy results to come through. She described that terrible time poignantly in an article she later wrote for the British Medical Journal as *'Four days of devastation, fear, anger, and the question "why me?" . . . The sadness and numbness of the diagnosis shattered my world and the horizons and expectations that my husband and I had known . . . I was left with the thought that no treatment was available.'* The doctors said it was inoperable and they gave her three months to live. That meant she would be dead by Christmas. Vicky was determined to prove them wrong.

Honesty the only policy

One of the ways of reducing her sense of helplessness was to talk about what was going on. Her husband, Tim, sprang into action and telephoned around the world to both families and all their friends. It was deliberately done, all part of the plan he and Vicky had already made that they intended to be totally frank about her illness. They wanted neither to keep secrets nor hear whispers.

Vicky was often to say how grateful she had been to Tim for taking this burden of explanation from her. It meant that everyone knew where they were with her and could talk openly to her about what was going on. Tim gave them the facts, all that he and Vicky knew at that stage, and warned them that they would be depending on their support and love in the coming months. Close friends and family visited her and were amazed by her resilience. Her family travelled from near and far to be at her side to face this sudden news and stood behind her and Tim all the way. She told them not to worry about her. She intended to think positively and prepare herself for whatever treatment might be proposed.

Battered and bruised she may have been but she was not yet defeated. Vicky felt wonderfully supported and cherished by those she loved most in the world. She could not guess what was waiting for her out there on that stormy sea but whatever the fates brought her, she was determined she would fight hard to survive.

To understand how she became such a fighter, we must go back to her early years.

Growing up

As the third child in a family of five, Vicky felt she had her time cut out to attract parental attention away from her two brothers and two sisters. *'I'm the sandwich-squeeze child,'* she would often say of

herself. Born in Hong Kong on 23rd December 1948 of Chinese and Eurasian parents, Teddy and Susie Yip (nee Ho), it was in this city she spent her early childhood, apart from a few years in Rangoon. In 1957 it was decided that they would settle in East Grinstead and that Susie would bring the older children to England first, to get them settled into school. She was also accompanied by the youngest child Ronnie, while Betty remained behind to keep Teddy company.

By now Vicky was carving out her own special niche in the family. What she really wanted above all else was to win the love and appreciation of her family. She decided there was only one way to achieve the recognition she craved. She would be good, the best at everything she attempted: schoolwork, games, playing the piano, which she started learning at the age of eight, and anything else that appealed to her. Her behaviour too would be exemplary and indeed, everyone who knew her as a child remembers her as obedient and unselfish.

It was quite easy for Vicky to be well behaved. She had little difficulty in doing as she was told, getting on with her homework, keeping her things tidy; to her this kind of behaviour made sense. Quite apart from winning her the approval she was always seeking, it also fitted in very well with a philosophy of life that she was beginning to develop, albeit subconsciously; namely, that there were important things to be done and the only way you could achieve them was by cutting down on the trivial and the time-wasting. She was later to write that she could not honestly say that as children they were ever taught about right and wrong in a moral sense although the practice of their Roman Catholic religion, inherited from their father, featured quite prominently in their upbringing.

Sibling rivalry

Vicky decided to make a virtue of being the useful member of the family. She enjoyed looking after the younger ones, Betty and Ronnie; she was adept at devising games to keep them amused but she always thought of them as charges in her care for whom she was responsible rather than as equals. It was Tina and George, her older sister and brother, with whom she wanted to play; it was their approval and acceptance that she sought. After her father, George was then the most important person in Vicky's life, and so he was to remain throughout her childhood and into early adulthood. He meant many different things to her at many times, and all of them had a profound effect on her own character and development. Older than her by a scant year, he was the one she found it natural to look up to and emulate.

George was cool, reliable and reasonable. He might get angry or upset but he would not demean himself by allowing others to see how much he cared. George was very clever and everyone was pleased with him for that because he was a boy and it would help him in his future career. Vicky admired his intelligence because she too was intelligent but no one commended her for that. Girls were not expected to be clever. Good, pretty and docile: yes, that was important because these were attributes that would help them make an advantageous marriage in due course. As it happened, Vicky was all of those things but what she prized above all else was doing well at her lessons. She loved learning and she particularly enjoyed learning from George. He was the one who introduced her to books and ideas and interesting information about the world outside their closed family circle. She looked to George as her fount of wisdom. *'I wanted his wisdom to flow to me and reinforce what I felt was an inadequate personality,'* she wrote as a nineteen-year-old.

George was her model and her rival and she wanted to be as like him as possible. He was a boy so she would be boyish too. A natural tomboy, Vicky was never happier than when wearing boys' clothes and devising some game where almost invariably she would be the leader taking her valiant band into battle. She might die, but she would die with honour defending a just cause. Many years later Vicky wrote with endearing candour of her youthful self that she had found that *'being a martyr was one of the best ways of drawing attention to myself modestly'*. Although she enjoyed

playing boys' games and strove hard to identify with the opposite sex because she felt obscurely that this would put her in a more favourable light with her parents, she also remembered feeling resentful that they didn't somehow resist this tendency in her. *'Innately I felt it was all wrong.'* Here again is the *'sandwich-squeeze child'* voicing her sense of dissatisfaction with her allotted role in the family hierarchy.

Finding her vocation

Vicky was to say in later years that the only thing she could remember as belonging entirely to her when she was a very small child was a teddy bear which went everywhere with her. All the other toys and games came out of the communal chest. This enforced sharing of possessions as a child in a large family made her value all the more the many beautiful objects she acquired later, with her husband, to furnish their home. The early deprivation made her generous to her friends and their children. It became a particular pleasure for her to choose and give presents.

Vicky may not have been given dolls but she was given something else when she was seven years old which was to make a lasting impression on her. Her mother gave her a doctor's set which Vicky loved from the first moment of unwrapping her birthday parcel. She knew exactly what to do with it: don the white coat; fix the stethoscope on Betty or Ronnie; ask them what their symptoms were and prescribe them a medicine. She soon decided that it could do with some improvement. Asking people how they felt was not good enough; they were too vague in their answers or they forgot things. She resolved that one day she would invent a machine which would read off symptoms precisely and completely, enabling her to have all the information she needed to make an accurate diagnosis and prescribe the appropriate treatment.

In her adult years Vicky often spoke of the doctor's set and the influence it had on her life. From an early age she was thirsting for information, as much of it as she could absorb. As she grew older she realised that knowledge opens doors and is the key to creating change and improvement in the human condition. Through her illness she learnt something more about the value of knowledge - its capacity to banish the fear and helplessness which comes from ignorance. The future clinician, the scientist, the dedicated researcher, and ultimately the founder of Cancerbackup are all implicit in that seven-year-old's determination to discover more than just the facts about people; she wanted to understand them and help them by doing something worthwhile with her knowledge.

A bright light

The school photograph of 1964 with its massed ranks of boys on one side and girls on the other, shows Vicky standing amidst her friends with head held high, straight-backed and smiling confidently into the camera, every inch an English schoolgirl. She wore her thick black hair shoulder length and although everyone admired her and liked her, she was well known for not being a flirt. Susie was very strict with her two older daughters. They were not allowed to go to coffee bars, parties or have boyfriends. The teenage Vicky was outwardly an eager, enthusiastic joiner, a keen Guide, a girl with *'a great giggle'* and someone who was always willing to take her part in the team; inside there was a private Vicky who shrank from revealing too much of herself. She was vulnerable and shy.

Her headmistress recalls her as *'a bright light.'* Vicky shone at everything. She was a scholar who regularly scored marks in the nineties. She was a talented musician, playing the guitar (which she taught herself) and the violin as well as the piano in which she attained Grade VIII level. As an athlete she was exceptional, winning several sprint records and playing hockey for the county.

'She was so good at everything and so nice with it. She did it so effortlessly and with such talent that we never felt jealous of her.'

This verdict from one of her school friends sums up what everyone who knew Vicky in those days, teachers included, has said about her

Meeting the challenge

Throughout her years of growing up Vicky was possessed by a deep seated sense of inferiority. Was she clever? Was she good? Was she lovable? How could she know since no one seemed willing to tell her she was? At first she felt this complex keenly in relation to her brothers and sisters; later on it would be towards her school mates and then her fellow undergraduates.

Vicky was determined to excel because she saw this as the best way to attract and hold the attention for which she longed. Success would please her parents and make her feel good. It told the world that she was as good as her siblings. Everyone would applaud her and recognise her worth. Her self-confidence only started to blossom towards the end of her university career when prizes and recognition were heaped upon her.

Vicky thrived on challenge. She used it to defy her intense fear of failure, a fear which haunted her, as she didn't mind admitting, right to the end of her life; yet in her short span she was to achieve more than most people manage in a life twice as long. Like so many high achievers, she almost craved that fear to spur her on to ever greater heights. Each subsequent victory in her life would taste the sweeter just because it signified that once again she had banished the shadow of defeat.

Her way

Vicky appeared to do everything so easily; in reality all her achievements were backed by sustained effort and applied thinking. *'Quiet, methodical and studious'* is how she is remembered by one classmate. These were characteristics which she had developed from early school days and they were to stand her in good stead as she worked her way through school, university and medical school.

Lawn mowing was usually Vicky's responsibility and after Tina left home Vicky also took over her role helping out with shopping and cleaning - without grumbling and without letting the extra burden affect her studies. One friend still uses her as a point of reference. *'When someone says to me, 'you can't do everything,' I have to say, 'but I know someone who could and did.'*

Her only real setback in those years was to be turned down on her first application for a place at Cambridge. This was a terrible blow. Vicky, so unused to failure, was devastated by the perceived humiliation. True to character she knew she must rise to the challenge so she insisted on trying again. Encouraged by her good A- level results and the support of just one teacher, she stayed on for a further term in the VI form. To her great joy she was accepted for Girton. A new life awaited her.

Golden Trail

Vicky's years at Cambridge were even more dazzling. She achieved a double first and won all the prizes she entered for. She worked hard and she played hard. She had brains, money and an exotic image. She embarked on her new social life with great gusto. She met her best friend, Alison, on the day she went up for her entrance interview and Tim, her husband-to-be, in her first week as a Fresher. From then on they were inseparable and two years after coming down from Cambridge, while she was still studying for her medical qualifications and Tim was doing his legal articles, they married.

Her star quality earned her the pick of the London house officer jobs, enabling her to follow the so-called 'golden trail' which culminated in October 1976 with the offer of a coveted post as rotating

registrar in Medicine at Barts. The consultants for whom she worked during that period were impressed by her abilities. She gained a reputation for extraordinary thoroughness in taking notes and finding out all she could about her patients. She loved the close involvement with people and the feeling that she was helping them. Now she had passed her membership exams for the Royal College of Physicians she was all set to start her career proper in medicine.

Research – a consuming passion

Before the end of her year on the training programme, Vicky was offered a research fellowship. It was an offer too good to refuse and it was in an area of medicine that Vicky found very interesting. The department was just then at the beginning of researching into naturally occurring opioid peptides in the brain tissue - endorphins and enkephalins - which it was believed could be harnessed to act as pain relievers. They had recently developed an assay (measurement test) for one of them and now needed to do the same for another one called met-enkephalin. Her boss, Professor Besser, suggested that Vicky should have a go.

Without further ado she settled into the laboratory and, under the guidance of senior colleagues, worked phenomenally hard to produce an assay. Before the year was out her efforts had met with success; she devised the world's first specific assay for this compound. She then proceeded to study its mechanism as a pain reliever. Her research led her into contact and later collaboration with a Hong Kong neurologist called Dr Wen who had been investigating the effects of acupuncture on heroin addicts.

Three years after she had joined the department she was awarded a fellowship from the Medical Research Council and appointed an honorary lecturer with senior registrar status. In 1980 papers appeared in both *The Lancet* and *Nature* in which, as lead author, she described the research which led her to establish, among other things, that there was a physiological link between acupuncture and pain relief. A flurry of other papers written by her, together with other members of the department, and relating to various aspects of her work, appeared in a number of scientific journals at around the same time. They were followed up by invitations from various learned societies to give papers at several international congresses.

Such a brief summary of Vicky's achievements in those six action-packed years at Barts hardly does justice to the sheer volume of work that she put in, neither does it reflect the extraordinary energy and enthusiasm with which she addressed herself to every task. Her colleagues remember her with a mixture of awe and delight.

A rare experience

Vicky would arrive for work on her Honda two-stroke motor bike, a slight figure in an orange motor cycle jacket, rain-proof trousers and a white-peaked helmet which, when doffed, revealed a pretty young 'girl' - she was then in her late twenties - who looked so different from the conventional medical stereotype no one at first could quite fathom who she was. She was always on the go, darting from laboratories to offices to wards in the sprawling Barts complex.

Professor Besser expected his registrars to combine their research with clinical medicine so that they could accrue the necessary accreditations to become consultants. In Vicky's case this meant that on top of a more than full-time research schedule which made very rigorous intellectual demands on her, she was also looking after patients, giving to them all the empathetic attention and care she had given them in her previous posts. Being Vicky, she put 100 per cent plus into everything she did. Persevering and painstakingly thorough to the point of obsession, she set herself extremely high standards of performance. Quite naturally, therefore, as it seemed to her, she expected the same

pitch of perfection from her colleagues and others who worked for her. Her energy was inexhaustible.

Despite this daunting profile of excellence, Vicky was saved from being an insufferable prig by her sense of humour and her genuine caring concern for others, particularly patients. Her uninhibited enthusiasm was also very infectious. One of her colleagues recalls: *'She would get very excited about the latest result and come and bang on my door and say, 'you must come and see this'. You couldn't resist her.'*

Another describes her as *'one of those rare experiences you have in life. She was exactly the sort of person you need to keep you on your mettle.'* Vicky had found a cause: she had an opportunity to push forward the frontiers of science just a fraction and she wanted to share her excitement and her discoveries with anyone who was interested.

The future beckoned to her with glittering promises. And then it was all taken from her. Her life span had been reduced to three months...if she was lucky.

'I've been to hell and back.'

Vicky wrote these heartfelt words in the course of a long letter to her friend Alison, enclosing with it a photocopy of the diary notes she had made throughout this gruelling period because she wanted her friend to *'be there'* with her - *'share in my despair and come up with me with my optimism'*.

It was three months after her diagnosis. Nearly Christmas and she was alive! Weak and wobbly certainly, after enduring a punishing regimen of chemotherapy which had caused her to lose all her hair - an experience she found almost harder to bear than the drugs - but the wonderful news was that the tumour had shrunk sufficiently for an operation to be possible. It would mean having a hysterectomy as well which put paid to all hope of having children, but at least her doctors were now expressing a cautious optimism. There was some less palatable news too: they strongly advised her to undertake a follow-up course of chemotherapy to remove any microscopic residue of disease that might escape the surgeon's knife.

Vicky never refused any treatment, however radical, which was offered to her. She would take anything going which promised to keep her alive. Nonetheless, she had discovered that despite her medical training and former clinical experience of treating cancer patients, she was as vulnerable as anyone else when it came to dealing with her own illness. The pain and the sickness were hard enough to bear; the psychological trauma she felt was probably worse. She too, like other cancer patients, had been prey to irrational feelings and terrifying mood swings; hopes, fears, anger, despair; above all, a sense of desperation that her life was running out of control.

'Cancer changes you'

During these early months of her illness Vicky thought and wrote a lot about the effect the disease was having on her. Cancer patients reading this story will probably understand exactly what Vicky means when she writes in her diary: *'Who would have thought I could ever have said I was happy to have cancer?'* in the middle of a passage describing her fear of the future. She realised that she was a changed person; no longer the competitive, ambitious young woman she had been before diagnosis.

Starting from a state of fear, confusion, anger, and sometimes denial, she had gradually grown to accept the reality of her situation. In the process she had become more relaxed, less inhibited. She could laugh at herself; she could also cry. The cancer had not changed her completely but it had

brought out previously latent qualities in her. The cold breath of mortality had touched her and she knew she could never again recover the carefree confidence of her former life.

'I'm more emotional,' she wrote in another letter to Alison. 'I cry on an open ward with no qualms now and I think I must have hardened, but I can only see things as right or wrong towards what I feel is just and right, even if I am misguided. There is little else I can do from my sickbed except to influence others' lives for the good and I am not ashamed that I do it to my utmost.' At the time she was only thinking of her immediate family and friends. However, these words have a prophetic ring for the future.

Being there

Vicky learnt that it is possible to share experiences and feelings about your illness which are quite different from the facts you know intellectually. Cancer patients, she realised, had 'been there'; they had been to a place unimaginable to those who have not made the journey. Patients understood things and could talk to each other and acquire information that the doctors and nurses were not even aware existed. She was to use this understanding as a guiding principle when she founded Cancerbackup.

Making friends with other patients on the ward had shown her that sharing a common experience in adversity created a bond and provided immense solace. She loved the idea that patients could help each other in practical ways, like the woman who showed her how to use old tights as a night time hairnet to stop falling hair covering her pillows and sheets, a handy tip which Vicky passed on in due course to others. For her part she was delighted if she could help them with the medical information, explaining what the doctor meant or suggesting further questions to ask. She realised that other patients were no different from her in that they, and often their relatives too, wanted to know what was going on, and why, if only to retain some measure of control over their lives.

Crossing the divide

As one who was both doctor and patient she threw herself across the divide that separates the two sides, offering herself as a bridge of communication, something she was to develop to a quite remarkable degree when Cancerbackup was in its stride. But at this early stage she only knew that she *'needed to hear information repeatedly before it would sink in'*.

However, her medical training did at least enable her to know what questions to ask and, almost as important, how to ask them. It made her realise how much more difficult it must be for people with no medical background to understand the often complicated reasons for a particular procedure, especially when delivered in a language so abstruse as almost to be a foreign tongue.

In time to come Vicky would speak extremely frankly about her cancer and what her illness had meant to her, often to strangers or to large groups of people - to the world indeed through her many media interviews and her own writing. There was, nonetheless, an innermost core of herself that very few people were allowed to know.

In this, as in so many other ways, Vicky was a fascinating paradox. She was reticent about her own feelings; she was, in particular, very concerned not to let people know about the extent of her physical pain and suffering. In view of all she endured later in her illness, her fortitude was quite extraordinary. Only those closest to her, the nurses and doctors who tended her and her very dear and near ones, knew the full depths she plumbed, the anguish and despair she suffered in her many dark nights of the soul.

Desert of depression

It was to be a full two years before Vicky felt truly fit and ready to try her hand at something new. This is not surprising in view of the debilitating effects of further chemotherapy and surgery, and for a while she suffered severe depression. She was appalled that after all her struggles to keep alive she could find no joy in the prospect. She found herself staring into space and being tempted by the thought that it would be so *'nice and easy just to be dead'*. Why was it so difficult, she asked herself, to make the transition from being ill to well?

She answered her own question: *'it's really easy being ill - people don't expect anything of you - no pressures - a cop-out - you just make people happy by being easy, not complaining and being understanding. Once you are a bit better and start doing things e.g. work-writing and having less time, people can't understand why you no longer have all the time in the world to speak to them and concentrate on their worries!'*

Immediately she reproached herself for having such ungrateful thoughts. After all, it was not just she, Vicky, who had struggled. Her nearest and dearest had fought the battle with her and had suffered for her. She could not let them down now: *'it's just not enough to have been brave in illness, I should be brave in recovery and show people what I can do.'* In typical Vicky fashion she immediately wrote down what she should be doing in her work and, to round it off, she counted her blessings. She was loved, she had money and two lovely homes. Above all, she was ALIVE. *'Now show them the fight for life has been worthwhile and enjoy life while you can.'*

All the same, no matter what her husband and friends said to reassure her, she found it hard to imagine she had a future waiting for her. She was tormented by self-doubt and uncertainty. She felt inadequate and the appetite for research had left her. She was no longer excited by the prospect of making new discoveries and pipping others to the winning post.

Humane medicine

The depression lifted at last and she began to think of alternative careers in medicine: oncologist, endocrinologist, GP. It was this last option which attracted her the most.

'Patients . . . I am good with patients . . . I have got something special to give patients . . . I can be sympathetic . . . I get on with them, they get on with me . . . I feel you can psyche patients to be better . . . I can't have family now - I want to look after families.' This urgent sense of wanting to work in close contact with patients is a recurring theme in her deliberations. She rejected the idea of being a hospital consultant because she felt that this was not the best way of establishing a doctor-patient relationship. She was convinced that as a doctor who had experienced a life-threatening illness she had something special to share with patients; this she could make more accessible to them in a GP's surgery than in a hospital consulting room.

'Being a good GP is a skill I would love to acquire.' Vicky felt it would aid her to practice what she called *'humane medicine,'* by which she meant caring for patients in a compassionate, sensitive way. She did wonder though whether she might not find such a close, committed patient-doctor relationship emotionally draining. Her medical friends warned her that she would miss the intellectual challenges she had enjoyed so much in her research work. Vicky, however, saw in general practice an opportunity to *'free her mind'*. Anyway, she would use the GP base to follow up other things that were catching her attention: hospice work, cancer support groups, the effects of a positive attitude, the benefits or otherwise of counselling and complementary therapies; above all she wanted evidence for her belief that patients did better when they were told the truth. She was thrilled by the new horizons opening up before her.

After consulting many people she finally made up her mind. She would become a GP. As soon as possible in the New Year she would seek out a practice where she could be taken on as a trainee. On 23rd December 1983, her thirty-fifth birthday, her diary entrance reads: *'Tearful on waking - still alive after one year!'*

A shifting horizon

May 1984 and Vicky was all set to go. She had been accepted by a GP practice and informed Professor Besser at Barts that she was giving up research. She worked harder than ever before, even by her standards, to clear her desk and prepare for the new job. Then, suddenly, she was back in hospital, on a drip, feeling tired and awful. It wasn't thought to be a recurrence of the cancer but her doctors and her husband warned her that she was doing too much, pushing herself too hard.

There were several familiar faces on the ward: patients who belonged to the same support group as herself. Getting to know them better, listening to their stories, sharing their emotions, marvelling at their courage, all served to reinforce her conviction that patients often offer each other the best therapy:- comfort, support, above all, sympathetic understanding.

Ten days later and Vicky was home again and in the grip of a powerful new idea. She knew now where her future lay. She intended to set up a national association for informing and supporting cancer patients. How it would work, who would run it, what it would offer: all these important questions were yet to be answered but, feeling fit and energetic once more, Vicky had no qualms about her ability to resolve them, and in short order. From the day of diagnosis Vicky had vowed to ring every ounce of positivity she could from her cancer. She wanted to help not just herself but other people too. At first, she had seen it as an opportunity to put right the problems of her friends and family. Now she had moved on: she realised that it was cancer patients who really needed the help, all 200,000 of them who are diagnosed with the disease every year in Britain. She was determined to establish exactly what they needed and find a way of offering it effectively.

'Kicking cancer out of the closet'

When Vicky's cancer friends told her about some of the unfeeling remarks and lack of understanding they had met from medical staff as well as acquaintances after their diagnosis, she had been shocked but not altogether surprised. She knew from her own experience that the cancer taboo persisted still, due largely to fear and ignorance. A few of her own friends had melted out of her life once they knew what was wrong with her. She understood too what it meant to be frightened of losing your job because of the nature of your illness, or being covertly made to feel guilty because it is assumed you must have either a 'cancer personality' or have committed some wrongdoing to have the disease.

She spoke and wrote scornfully about the myths surrounding cancer. In particular, she rejected the fatalism of believing that cancer invariably kills, a view she was pained to discover among some health professionals as well. Inevitably, this negative attitude has a detrimental effect on their relationship with their patients. Perhaps what disturbed her most was the conspiracy of silence surrounding cancer, as much within medical circles as without. Her many conversations with patients, on equal terms as just another patient, convinced her that it was a great mistake for doctors to assume that people with cancer coped better if they did not know too much about their disease and its prognosis. She knew she was not alone in her consuming need for good, clear and complete information. Her patient friends were just as needy, constantly begging her to explain the little they had been told by their doctors. Vicky found their desperation both heartrending and unacceptable.

Something must be done. She was determined, as she put it, to *'kick cancer out of the closet.'* She began talking to friends about her idea of setting up a British Cancer Support Society. She found a sympathetic ear in Dr Robert Buckman who, having himself survived a life-threatening illness (not cancer) had recently found reason to reconsider his own view of the doctor patient relationship.

From dream to reality

In early June 1984 Vicky was discussing her *'rather grand dream'* with Dr Maurice Slevin, her oncologist who had become a good friend. He told her that it sounded like a great idea, but if it were that good why hadn't someone else come up with it? Or perhaps they had? Nothing daunted she took up his challenge to discover exactly what was available. Six days later she was back in his office reporting progress and even Maurice, who by this time knew Vicky as well as anyone, had to confess he was amazed by what she had achieved so far.

She had had another talk with Robert Buckman, written to fifteen cancer organisations, made appointments with several of them and spoken to many more people about her idea. By the end of June, only three weeks after she first broached the subject with Maurice, she had met and enthused many of the people who were to give her so much support and assistance in the following months and years. Cancer survivors, journalists, business people: few who met her could resist her spell. Her enthusiasm and absolute confidence that she could achieve her goals was disarming and infectious.

In July the pace hotted up. Maurice had given her the names of some eminent medical oncologists. Each introduction led to several more and she never missed an opportunity to make a useful contact. By the middle of July she had decided on a name for her organisation - BACUP standing for British Association of Cancer United Patients and their families and friends; she also wrote a punchy paper describing the aims of her projected organisation. Briefly, it would *'offer practical help, advice and information to patients and relatives. It would have charitable status; be located in central London and be run by professionals, both medical and non-medical.'* For a full description see original mission statement. On Wednesday, 18th July a teacher gave Vicky her first donation for BACUP in pennies. Now she knew for certain that her dream was real.

Making it happen

'I recognised that she was one of these unusual beings who is highly motivated, clear-minded, decisive and absolutely able to do what she wanted to achieve. She had suffered through to her own personal conclusion and what she now had was a vision.'

These are the words of Andrew Phillips, a solicitor, who was approached by Vicky for legal advice. Having satisfied himself that she had done her homework and that her proposal did offer something genuinely new in the already crowded field of cancer charities, he told her that if she was serious about getting it up and running, then there could be no half measures. She could not expect to make a success of it by looking on it as something to do on the side with another person at the helm, while she continued her career. She would have to take full control and become the chairman and chief executive.

Vicky was taken aback by his suggestion. She was due to take up her GP traineeship in a few weeks time and anyway, what did she know about running an organisation? She had no managerial experience. All the same, and only after considerable thought and discussion, was she persuaded that she should lead the organisation. Her husband Tim promised her his full support, as ever, and slowly she won round her close friends to her point of view; their abiding concern was that it would take too much out of her. She gave up the idea of becoming a GP.

So it was that on 31st October 1984 the first BACUP Working Party Meeting was held in the Guild Room at St Bartholomew's Hospital. Present on this momentous occasion were twenty-nine people, handpicked by Vicky for their individual skills, experience and commitment to her aims. They included representatives from all the major cancer organisations, senior cancer doctors, city tycoons, journalists, and a few cancer survivors.

No one watching her perform that evening would have believed that it was the first time in her life that she had chaired such an event. She ran the meeting like a veteran: self-possessed and completely in control. Immediate and long-term objectives were agreed; the structure of the organisation as drawn up by Andrew Phillips was approved; Vicky was voted Chairman and Chief Executive; Maurice Slevin became Deputy Chairman and other leading doctors were elected heads of committees and trustees. Vicky had done brilliantly in persuading these eminent men to throw their hats into her ring. She needed their quality to be seen supporting her if she was to achieve the medical credibility she knew to be essential for BACUP's success.

The meeting ended on a high note. It was formally minuted that no more than a year from that day, BACUP was to be officially launched with its major services on line. The little woman sitting at the top of the table, *'sparking away'* as Andrew Phillips said, *'with many more volts than the size of her battery indicated'* positively crackled with her determination to deliver.

Triumph and tragedy

Only a few people at that meeting knew the true significance of Vicky's undertaking. Just ten days before this inaugural BACUP meeting took place she had left hospital after another major operation. The tumour had grown again and spread to other organs. She was left with a permanent colostomy.

Vicky and Tim were shocked and devastated by this unforeseen disaster. Even her doctors had not expected it so there had been no pre-operative counselling with a stoma nurse. There followed what she described in a letter to a friend as 'a stormy post-operative period'. Not only did she have to try to come to terms with what had happened but she had to cope with serious complications and pain so severe that she had to be given morphine. Her anger and her grief subsided faster than did Tim's who felt appalled and helpless on her behalf. But they comforted each other and, in her typical fashion, Vicky quickly pulled herself together and set about learning practical tips for coping with her new situation.

When Vicky first knew that her cancer had come back she considered very seriously whether she should go ahead with her BACUP project. She feared that all the enthusiasm she had generated and the offers of support that had come pouring in might melt away if it were known that she had suffered a recurrence of her cancer. Yet, she could see no wisdom in concealing her condition. The truth would come out in the end anyway.

A chance encounter with an American, Jay Weinberg, who had also set up a cancer charity and had survived not one but two primary cancers separated by thirty years, convinced her that she could carry on with her plans. When he had a recurrence of the second cancer he had been in a quandary similar to Vicky's, as he was about to launch a major fundraising campaign. However, after discussing the matter from every angle with his friends and fellow campaigners, they had come to the conclusion that honesty was the best policy. Mr Weinberg urged Vicky to follow his example -- to be herself, to be honest about her cancer and to carry on with her project. Heartened by his courageous story, Vicky knew from that moment that she had something more to work for than just her health. She had BACUP to create and nurture and lead.

No time to waste

A hazardous journey lay ahead of her. It was desperately hard for Vicky to admit that once more she was facing an uncertain future. She had defied death more than once since the first diagnosis but now, for the first time she reluctantly accepted that she must adjust her long range sights. She wrote: 'I work on a six month to one year plan rather than thinking about things that I will do in two to three years...I think of positive things which will come out of my current illness.'

Before the end of 1984 many of the action targets had already been achieved. She had appointed key members of staff including Yvonne Terry, a cancer nurse, as Project Co-ordinator for the Cancer Information Service. The Special Trustees of Barts had promised to provide office accommodation near the hospital at a very low rental for a ten-year term. She was now able to state confidently that the Cancer Information Service would be launched in the autumn of 1985 with four trained cancer nurses on the switchboard who would be backed up leading medical and nursing specialists in oncology. After the New Year there was the prospect of more shattering chemotherapy, but once that was over she would start preparing the publicity campaign for the launch of the charity in October. Vicky may have started her organisation as a novice in this field but no one could have been a more rapid and able learner. She hit the ground running and never stopped for a moment until her final illness.

A star is born

Vicky, as many people fondly remarked of her, had no false modesty. She loved the limelight and being the centre of attention. Put her under the television lights or facing a microphone and she seemed to absorb energy like an opening flower. She was far and away the best spokesperson for her cause. Bright, articulate, vibrating with enthusiasm, she made an indelible impression on those who watched her and listened to her. Invariably wearing her trademark trilby hat, her spotted bow tie and her smart shirts and jackets, no one would have guessed from her jaunty appearance just how ill she was. She might have been writhing with pain minutes before the interview but once in front of the cameras her concentration on her subject was total.

Probably her most memorable interview was 'In the Psychiatrist's Chair' with Professor Anthony Clare. It had been pre-recorded and she listened to it going out on air when she was in the middle of a hazardous bone marrow transplant - one of her many narrow escapes from death. She had agonised over accepting the invitation because she was worried that she might reveal details about herself that could cause pain to her intimate family and friends. It was only later when the letters came flooding in, some of which brought tears to her eyes, that her friends' reassurances that she had indeed done well induced her to relax her state of high tension.

As well as her dedication to promoting BACUP Vicky was passionately concerned to pass on her message to the next generation of medical students. She wanted these young people to be made aware right from the start of their careers that it was as important to respect the emotional and psychological needs of their patients as to care for their physical condition. There is a moving moment in one of the two videos she made with Professor Anthony Clare where she urges the students to be willing to cry with their patients. The professor, as if uncertain that he has really heard her words, asks her to repeat them which Vicky does with even more emphasis.

'What would you have said a few years ago before your illness if somebody had said that to you?' he asks. 'That it was very unprofessional,' she replied, smiling.

She was a star - no doubt of it - but she also had the precious gift of making stars out of other people. She loved bringing friends and proteges 'out' in whatever way made best use of their talents. She was a wonderful life-enhancer, one of those people who can light up even the dreariest and

saddest corners of life. There are many people who can remember Vicky, even at the very end of her days, when she had every excuse for being miserable, still bubbling with enthusiasm and gaiety.

Mind over matter

The official launch of BACUP in October 1985, a year to the day since Vicky had announced her intention to the first meeting, was a huge success. In the two years that remained to Vicky after this occasion, she worked unceasingly to keep the organisation in the public eye, meanwhile working behind the scenes in the cramped offices as unpaid chief executive. Inevitably there were times of crisis and high tension. It was hard for the staff to function in the presence of someone known to be dying. Everybody was living on the edge; the nurses especially found their work on the helpline very draining. No one had anticipated the depth and degree of emotional anguish that would be uncovered.

The months went on and Vicky became increasingly frail, surviving, no one knew how, ever more arduous treatments. She was endowed with a quite remarkable degree of 'fighting spirit', a quality which cancer doctors recognise with awe. It can enable those patients who possess it to achieve extraordinary goals and successes at a time when everyone around them has more or less given up hope.

'*Positive denial*' can be equally powerful: the patient has, at one level of consciousness, accepted the reality of their cancer and, then quite deliberately, pushes it away from the centre of their mind so that they can get on with the present, the job of living each day as it comes, to the full. Vicky achieved this superbly well. Of course, she knew she had incurable cancer and that, eventually, there would be no escape, she would die from it.

She had never flinched from recognising this fact and she had discussed the prospect of death many times at an early stage with her closest friends. Now that death had come so much closer and she had hung over the brink so often, she saw no reason to waste any of her precious time talking about its inevitability. All the same, being Vicky, she intended to do it as well as possible. 'Death,' said Dr Maurice Slevin '*became another project for her.*'

However, while there was breath in her body she was determined to make the most of her life. Ever rational, she decided that the only sensible way of dealing with her increasing frailty was to trim her expectations to match her abilities. There was no point in railing against the unkind fates; instead, by concentrating on what she could achieve she derived the greatest joy from the simplest pleasures like walking round her garden or going out to dinner with friends. '*Just give me a tiny inch and I will get pleasure out of it and it will pull me up,*' she said to a friend just six weeks before she died.

At the end of her life the honours came thick and fast. She loved the attention and the acclaim but the one she valued the most was her election as Fellow of her own college, the Royal College of Physicians, in recognition of her work with BACUP.

Teacher, pioneer, pilgrim

This description of Vicky's outstanding character and career comes from the address given by the Reverend Doug Hiza at her memorial service in St Paul's Cathedral on 3rd November 1987. The whole occasion was a triumphant celebration of her life and work but the most touching, and human, epitaph came from her friend and great supporter, the late Professor Tim McElwain. He told a favourite story.

'*One day when she was walking across the meat market on the way to BACUP she was hailed by a porter.*' '*Saw you on the box last night,*' he said. '*Good, wasn't I?*' she replied. Well, she was, wasn't

she? She was good and clever and funny and creative and constant and brave and inspirational; and out of all that pain and suffering and uncertainty she brought forth BACUP and that is her memorial.'