# **DUNCAN A. GORDON, 1930–2012**

#### LEADERSHIP IN RHEUMATOLOGY

Earl D. Silverman, Editor-in-chief

In the summer of 2011, Duncan Gordon first announced his plans to retire as *The Journal*'s Editor-in-Chief, a position he had held since 1979. The news was received with mixed emotions: We all knew he needed more free time to enjoy other aspects of life, but it was also clear that the new editor was going to have very large shoes to fill.

When I was asked to consider becoming editor-in-chief and when the position was ultimately offered to me, an important part of my decision to accept was based on Duncan's ready availability as a mentor. Sadly for Duncan, as well as for all of us, he soon developed acute myelogenous leukemia. To watch such a great, 'young,' passionate man become ill and succumb to this terrible illness was truly sad.

Despite the shortened mentorship and guidance time, I am grateful to have had the opportunity to observe how to balance the many aspects required to run a leading rheumatology journal. Those who know me, however, will be the first to confirm that subtlety, mediation, and conciliation are not my *forte*. Nevertheless, such characteristics are required of a journal editor, and certainly they were Duncan's strong points. I hope that my short time as co-editor-in-chief with Duncan, as well as more than 20 years on the editorial committee, will have allowed me, if only by osmosis, to acquire some of Duncan's virtues, both as a person and as a journal editor.

Duncan showed true leadership in rheumatology, including disseminating new knowledge in the field, as he successfully guided *The Journal* from infancy and childhood to adulthood; he was also an outstanding human being. I am sure that all those whose lives he touched will remember him as fondly and for as long as he will be remembered by myself and the rest of his "family" at *The Journal*. The tributes that follow here are dedicated in loving memory and in honor of Duncan and his accomplishments.



#### A LIFE RETOLD

From Duncan's Obituary, published by his Family, December 5, 2012

After a 12-month fight with acute myelogenous leukemia, Duncan Alexander Gordon, passed away December 2, 2012, in his 83rd year. Duncan spent the last year of his life in his own home, treated with successful outpatient therapy until the last few days of his life.

Duncan was born in the original Queen Victoria Memorial Hospital in North Bay, Ontario, June 15, 1930 and remained strongly connected to North Bay and Northern Ontario, throughout his personal life and patient referrals. He was a graduate of Upper Canada College, and the University of Toronto, Faculty of Medicine. He studied Internal Medicine at the University of Toronto and Montreal's McGill University, and Rheumatology and Immunology with Dr. John Vaughan at Strong Memorial Hospital at the University of Rochester, Rochester, New York. The Canadian Rheumatology community has held Duncan in great affection as a key figure in the evolution of the specialty. He was a proponent for recognition of Canadian achievement in the international arena.

Duncan was a consultant in the Rheumatic Disease Unit at the Wellesley Hospital, Toronto, from 1964 to 1974, and the Director of Rheumatology at McMaster University, Hamilton, from 1974 to 1976. He was a Professor of Medicine and Director of the Division of Rheumatology at the Toronto Western Hospital from 1976 until 1991, and remained on staff as a Senior Rheumatologist and Professor Emeritus until his retirement in 2012. Duncan was known internationally as the Editor-in-Chief of *The Journal* since 1979, Past President of the Pan-American League of Associations for Rheumatology and Vice President of the International League of Associations for Rheumatology from 1990 to 1994. He was a Master of the American College of Rheumatology, received the Award of Merit of The Arthritis Society in Canada, and was named to the Distinguished Rheumatologist Award of the Canadian Rheumatology Association in 1992.

Duncan will be fondly remembered by many young clinicians, whom he encouraged to "write up your research," as both teacher and mentor. A contributor of historical vignettes and articles on the early days of Rheumatology, his love of learning, life and sense of humor will be sadly missed by all who knew him, including Rheumatic Disease Unit staff, students, interns, residents, fellows, and colleagues; and his "other family" at *The Journal*.

### REFLECTIONS

Robert D. Inman, Associate Editor

On May 23, 2012, a gathering at the University of Toronto was held to celebrate Duncan's career. It was a warm spring afternoon that day in May, and there was a great sense of joy as all paid tribute to Duncan with gratitude.

Now, as then, we celebrate this life of accomplishment, and of service. But now, unlike then, we no longer have the privilege of expressing our affection for Duncan directly to him. We are grateful that we did do so in May. He deeply appreciated that day of celebration. And we are grateful that we had another 6 months with Duncan.

Although Duncan was diagnosed with an incurable form of leukemia, and although the chemotherapy was increasingly less effective in controlling the disease, the loss of Duncan still comes as a shock for many of us. There is no denying his age, and the fact that he had lived a remarkably full life. But in Duncan there was a vitality which seemed to deny his years. Age did not weary him, nor the years condemn.

There was something intrinsically youthful about Duncan. "Appearing younger than his stated age" is the phrase that physicians often use in working up a patient like this. That youthful approach to life was evident in so many ways. His love of golf and of travel. His exuberance as he effortlessly negotiated deep powder at Snowmass. His sense of pride in sharing the latest pictures of his family. His sense of humor gracing weekly rounds with such timeless pearls as: "When in doubt, think of gout." "A chance to cut is a chance to cure." "Columbus got the credit for discovering America because he wrote it up."

But perhaps the fact that he was a student all his life was a key to his youthfulness. It was as

a 23-year-old undergraduate that his first paper — "Roaming in Europe" — was published in *The North Bay Daily Nugget*. Of course he was a student of clinical medicine and of Rheumatology, and he attended the annual Canadian and American Rheumatology meetings for 6 decades with an undiminished sense of expectation each year. He was a student of medical research, forever on a quest for important new research advances. This made him a remarkably effective Editor of *The Journal*, in which capacity he served from 1979–2012. But he was also a student of politics and social change, and read the daily news with as much attention and interest as the medical literature. He was also a student of history, and he related, in his final week, how much he enjoyed the Ulysses S. Grant biography, and how much he was looking forward to reading the new Winston Churchill biography.

It was this passion for learning — whether in spiritual or historical or medical matters — that was sustained throughout his life. That sense of curiosity — the essence of scholarship — kept him buoyant and tremendously fun to be around.

Academic medicine by its nature can tend to be acquisitive, territorial, egocentric, recognition-dependent. In this sense Duncan was a counter-culture nonconformist, who operated by different principles: generosity, cheerfulness, kindness, fairness.

And the world of medical publishing, which has a tendency to bring out competitiveness, brought out in Duncan the best in him. As Editor of *The Journal* he was repeatedly dealing with disappointment and frustration from his pool of submitting authors around the world. But he dealt with all this with grace, and fairness. And it showed in his global circle of friends. To see Duncan at a major international meeting of Rheumatologists was to recognize that the special relationship enjoyed by his University of Toronto family was shared with Rheumatology colleagues around the world, who were linked by a common affection for Duncan. He was an extraordinary ambassador for Canadian Rheumatology, and for many physicians from around the globe, Duncan came to embody the distinct characteristics of a Canadian: a sense of fairness and justice, a global perspective and a historical awareness, combined with caring and sharing.

This generosity of spirit was reflected in his professional legacy in Toronto. Duncan played a central a role in growing the largest, most productive, and most collegial division of Rheumatology in the country. Like an experienced gardener, he learned how to grow things: by giving them enough light and enough space. Many Rheumatology faculty members are the direct beneficiaries of Duncan's personal style of horticulture.

Sir William Osler, in his valedictory address at the University of Pennsylvania on May 1, 1889, stated that the hallmark of the excellent physician was equanimity (*æquanimitas* — having an even mind), which he defined as a composure or equilibrium, especially under tension or stress. Osler would have greatly admired Duncan's equanimity.

Duncan in fact was a blend of opposites that made him interested in everyone around him and made him interesting to everyone around him: A patriotic Canadian, who avidly read the *New York Times* every day. An astute observer of the political landscape, who never missed a PGA major golf tournament on Sunday afternoon. A gentle personality, who liked to attack the back bowls at Lake Louise. An encyclopedic source of knowledge of medicine and of Who's Who on the Toronto scene. A consummate academician, who liked best of all to show off pictures of his grandson.

This blend of complementary elements was very evident in the final weeks of his illness. He took an objective, pragmatic approach to his gait disturbance, at the same time a reflective, even peaceful, approach to monitoring the progression of his disease. His personal faith allowed him to see the objective particulars of the moment in the context of the transcendent. Such opposites can set the stage for surprises. As Duncan was sitting with his sister in the oncology waiting room in his final weeks, he wanted to discuss which hymns should be sung at his funeral, and proceeded to sing the chosen hymns right then and there in the waiting room.

Duncan was a person-oriented person, who dealt with the common encounters of the clinic and the office with great humor, great compassion, and great joy. All this combined to make him a wonderful physician, who will be missed by his many patients; and a beloved colleague, who will be missed by all of us.

Of all the things so many of us valued — Duncan as a mentor, Duncan as a master clinician, Duncan as a clinical scholar — the one we valued most was Duncan as a friend.

#### WHY I BECAME A RHEUMATOLOGIST

Gunnar Kraag, Member of the Board of Directors

Duncan Gordon is the reason I am a Rheumatologist. I was committed to Cardiology, with little interest in Rheumatology. A lecture by Duncan changed that. The lecture was on extraarticular manifestations of rheumatoid arthritis, and afterwards I had a chance to chat with "Dunc." As with all who know him, within 5 minutes you feel you have been friends for years. He introduced me to the breadth of Rheumatic Disease. I was hooked!

"What do you think about this?" was Dunc's daily lead into some scientific, clinical, political, or artistic subject that was new, interesting, provocative, or all the above. When we were fellows, Barry Koehler observed that intelligent people could do many things at once. He was referring to Dunc. If Dunc did not invent multi-tasking then he surely perfected it. I still recall the sight of Duncan kneeling at a desk writing feverishly with the pen cap in his mouth talking both to the person behind the desk and to someone else over his shoulder.

In 1974, Duncan accepted the challenge of starting a program in Rheumatology at McMaster University. Fred Bianchi was the only fully active community clinician at that time, with no one at the University. When Duncan asked me to join him, it took about 18 seconds to say yes. The opportunity and challenge were irresistible. To establish a strong clinical program, develop and do all the undergraduate and postgraduate teaching, start a clinical research program, and meet all the administrative requirements, as well as deal with the inevitable politics, seemed daunting. But Duncan was unflappable: We even managed to start an approved Royal College training program, and Dunc quickly attracted several international and Canadian trainees. It was amazing how much he accomplished in a very short time with only 3 core Rheumatologists, including himself. Thanks to his knack for collaboration, Duncan quickly established strong alliances with Immunology, Orthopedics, Rehabilitation Medicine, and many other disciplines.

There was a tough side to Dunc. Resources are always in short supply no matter what the era, but Dunc knew what he needed and he fought hard to establish Rheumatology on a par with other subspecialties. Anyone attempting to marginalize Rheumatology was in for a rude awakening.

The same applied to recruitment. Bill Spaulding, one of the founding fathers of the medical school at McMaster, approached Duncan about a brilliant young Canadian physician who was interested in Rheumatology and was currently in the U.S.A. He implored Duncan to approach him and get him back to Canada and McMaster. That physician was Rob Inman, and although he didn't come to McMaster, Duncan never forgot and eventually got his man!

We continued to work hard, but coming to work was always fun and there was always the "What do you think about this?" His contacts in Rheumatology were endless, giving those who trained and worked with him fantastic opportunities to informally meet and pick the brains of the giants in Rheumatology.

Dunc was not just about T cells and swollen joints. He loved skiing and introduced many to the American College of Rheumatology winter meeting at Snowmass. The skiing was fabulous and the camaraderie just as good. The interactive small group sessions characteristic of this meeting in its early days showed Duncan at his best. Golf was another activity that Dunc enjoyed. As his ball entered the water or woods, he would turn with a forced smile and not surprisingly say, "What do you think about that?"

Duncan left Hamilton to return to his beloved Toronto in 1976. But by that time, I had already learned more and been given more responsibility at a young age, than in 10 years of a conventional career path. I still cannot believe the impact that Duncan had in just 2 years.

Duncan and I met sporadically during the ensuing years, but whether we had last talked 2 months before or 2 years before, it always seemed like yesterday as we picked up on the conversation that continued over 39 years.

Several years ago the Canadian Rheumatology Association purchased *The Journal* and I came to sit on the Board of Directors. I started to see Duncan again on a more regular basis. His passion for *The Journal* remained undiminished, as did his dedication to his work as Editor. In all things pertaining to Rheumatology, his curiosity and interests remained boundless. His enthusiasm to introduce colleagues to new ideas or great articles or books didn't let up. His humility never allowed him to think of himself as the iconic figure he had become. He was a great mentor and role model. But most of all, Duncan was a great friend.

# **OTHER MESSAGES**

Sent to The Journal from readers, authors, and friends

He was a very honorable and compassionate man.

Just to express my regret and deep admiration for Dr. Gordon.

He was one of the great figures in Canadian rheumatology, a world leader in our specialty and a top editor with unfailing compass to detect progress in our field.

Dr. Gordon was a giant who made giant contributions. He will be missed greatly, of course, but his important legacy is secure.

Duncan was a very important figure in international rheumatology.

He was a very special person who taught me so much.

He was a great skier.

A final comment expressed by many sums up Duncan Gordon best:

Duncan was a great guy.

# EARL D. SILVERMAN, MD, FRCPC,

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