

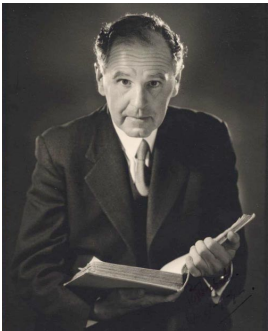
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Rodeck CH. Geoffrey William Theobald (1896–1977)

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William Theobald died on the 11 March 1977 at the age of 80. He was a clinical obstetrician and gynaecologist who worked in the UK National Health Service for the last third of his professional life. He had an enquiring and inventive mind, and he questioned many dogmas and had the drive to investigate them. He performed pioneering research in a number of fields, producing findings of such significance that he can justifiably be regarded as one of the most influential individuals in British obstetrics in the 20th century.

Theobald was born on 2 July 1896, and qualified in medicine at Cambridge University and St. Bartholomew's Hospital Medical School in 1920. His career progressed in a remarkable and varied way. Early appointments were as Assistant Master at the Rotunda Hospital in Dublin, and then as Obstetric Tutor at the University of Leeds. In 1926, he went to Bangkok for several years, as Visiting Professor in Chulalongkorn University. He was head of a department there that was larger than the combined size of all of the other obstetric units in Siam (now Thailand).

In 1929, Theobald was elected a Foundation Fellow of the College of Obstetricians and Gynaecologists. On returning to London from Bangkok, he was appointed Consultant Obstetrician and Gynaecologist to St. Mary Abbott's and Hammersmith Hospitals, First Assistant in the Department of Obstetrics and Gynaecology at the Postgraduate Medical School (later Royal Postgraduate Medical School) and Research Fellow in the Department of Physiology, Pharmacology and Biochemistry in University College London. It was during this era that he designed and conducted the controlled trial included in *The James Lind Library*.

In 1936, Theobald returned to the tropics, this time to Colombo, Ceylon (now Sri Lanka). He remained there until after the end of the Second World War, when he took up a NHS consultant post at St. Luke's Hospital, Bradford, where he remained until his retirement from the NHS in 1962, at the age of 65.

Retirement gave him the freedom to return to University College London to continue his research, this time in the Obstetric Unit, directed by Professor William Nixon, with whom he had worked in the 1930s at St. Mary Abbott's Hospital. He joined a remarkable group of people brought together by Nixon, including Norman Smyth (fetal monitoring and biomedical engineering), Gerald Swyer (endocrinology) and Peter Hughesdon (pathology).

Theo (as he was called) had research interests that ranged widely. His earliest papers were on the sterilisation of gloves and on why "washing hands before an operation is illogical and unnecessary", since it was more important to sterilise the gloves than the hands. He published "*Normal midwifery for midwives and nurses*" in 1927, wrote an impassioned "plea for drastic reform in the teaching and practice of midwifery", and developed a new hypothesis for referred pain, with specific reference to the uterus, dysmenorrhoea and labour.

Theobald will be most remembered for his work on pre-eclampsia (toxaemia), and on oxytocin and the induction of labour. His vast experience of obstetrics abroad convinced him that pre-eclampsia was not caused by a placental toxin, then the fashionable theory (reflected in the term 'toxaemia'), but rather that environmental and particularly dietary factors were likely to be important. A toxin seemed unlikely to explain the striking geographic variation in the prevalence of 'toxaemia' whereas the dietary factors might. His randomised trial (with blinded outcome assessment) assessed the effect of supplementation in pregnancy with calcium and vitamins A and D on

the incidence of 'toxaemia', was reported in the Lancet in 1937 [[Theobald 1937](#)]. It was methodologically pioneering, having been published more than a decade before the celebrated Medical Research Council randomized trial of streptomycin for pulmonary tuberculosis [[MRC 1948 a](#)]. One hundred women drew beads from a box (blue for the vitamins, white for control), and, as far as possible, those assessing outcomes were kept unaware of the groups to which women had assigned themselves at random. Theobald reports that Egon Pearson, of the Department of Statistics, University College London, advised him on the analysis of his data. The results suggested a beneficial effect of supplementation, and remain relevant today.

After his move to Bradford after the Second World War, Theobald summarised his ideas on pre-eclampsia in a book entitled "*The pregnancy toxaemias or the encymonic atelositeses*", published in 1955. It was also during this era, when maternity hospital beds were few and the mortality rate from eclampsia in the deprived population in Bradford was high, that he was forced to take revolutionary action. Instead of routinely 'confining' women in hospital for ten days after delivery, Theobald introduced the 48-hour discharge scheme, thus freeing maternity beds for antenatal care. It was a clinical and political masterstroke, which was followed by a dramatic fall in the number of deaths from eclampsia. The 1959 *BMJ* publication "Home on the second day: the Bradford Experiment" was highly influential, and had far-reaching consequences for the NHS.

Apart from pre-eclampsia, Theobald's other major research interest was the physiological and clinical control of labour. The basis of his thinking was that the hypothalamus had centres controlling menstruation, ovulation, pregnancy and parturition. In the 1930s, he worked with Dr Verney at University College London on the physiology of the posterior pituitary, water metabolism and diuresis, and the neural and endocrine influences on the myometrium, the dog providing their main experimental model. Many publications appeared in the *Journal of Physiology*, and one appeared in *Nature*.

In 1934, Theobald identified the dose of pituitary extract (oxytocin) needed to inhibit diuresis in dogs, in men and in pregnant women, and this enabled him to estimate the physiological concentrations of oxytocin required to stimulate the uterus. His demonstration that the myometrium became increasingly sensitive to oxytocin towards term led to a prolonged but gentlemanly controversy with Roberto Caldeyro-Barcia of Montevideo. In 1948, writing from St. Luke's Hospital, he published another ground-breaking paper in the *BMJ* on the first use of infusions of oxytocin in physiological doses for the induction of labour. One practical effect of this was that women with pre-eclampsia could be delivered before they developed the life-threatening complication of eclampsia. This can hardly be bettered as an example of superbly effective 'translational research'.

Theobald's research activity in the Obstetric Unit at University College Hospital Medical School barely diminished in his final years, despite ill health. Although Nixon died in 1963, his successor as head of department, Denis Fairweather, continued to provide support for Theobald, who published two more books in 1973 - "*The endocrine control of uterine innervation*" and "*The electrical induction of labour*".

As a medical student, I had both the privilege of seeing Theo apply his 'Pulse Generator Belt' for inducing labour, and the dubious pleasure of looking after women receiving slow oxytocin infusions through many a long night. The belt did not become a clinically useful method of inducing labour; but the latter certainly did. I am fortunate to have succeeded Nixon and Fairweather as head of the Department of Obstetrics and Gynaecology at University College Hospital. Our seminar room is named in honour of Geoffrey William Theobald and adorned with a [photograph](#) of the great man himself.

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