


In Memoriam: Patrick G. Johnston (1958–2017)

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Attending a conference in Tokyo, the annual CHAAO meeting in July of 2017, my thoughts automatically turned to a close friend who would not be there that day. At the beginning of that meeting, I spoke briefly about the career and the accomplishments of Prof. Patrick Johnston.

Paddy died unexpectedly on June 4, 2017. I remember getting the news, and like the passing of another Irishman, John F. Kennedy, it was just unbelievable to me that such a vital, healthy, and vigorous person would so suddenly pass.

Paddy was born in the Republic of Ireland, near the border with Belfast in Derry, on September 14, 1958. His father was a school headmaster and his mother was a civil servant. He was an exceptionally precocious student and graduated from the University College of Dublin Medical School, completing his residency and medical oncology training there and receiving his final degree in 1988. He was interested in focusing his career on translational research and came to the National Cancer Institute (NCI) as a fellow, actually arriving in 1987, the year before he was officially granted his last degree. He worked with Carmen Allegra, one of my close associates there, and completed outstanding work on thymidylate synthase as a biomarker for colon cancer response to 5-fluorouracil. This work was based on specimens from a large adjuvant therapy trial from the National Surgical Adjuvant Breast and Bowel Project (NSABP). One of the participants was Dr. Bernard Fisher's brother, Eddie Fisher, who was the head pathologist of that trial. I remember that association particularly well because we had many interactions with the cooperative groups trying to define response to drugs and to chemotherapy, and this was one of the most satisfying.

He had, in our estimation, "all the tickets", an expression used in sports for a person who has all the features and the talents necessary to be a success on their chosen playing field. He was an outstanding clinician. He was a devoted and thoughtful researcher, who imagined important questions that could be solved by collaboration with cooperative groups and with our own faculty at NCI. He was a translational researcher, working with tissues, plasma, and biopsy specimens at a time when this kind of research was uncommon. Many of the studies in which he was

engaged required close collaboration between laboratory and clinic, a relationship that he understood and was adept at building. He was an effective organizer of these studies, and always a generous colleague. I particularly appreciated that he would come to me when he was embarking on a new study. I was not his mentor, but he would ask me, "What do you think of this idea?" He would talk to me about the project, give his rationale, and then I would give him my own slant. Maybe it wouldn't change his plan, but it certainly influenced my opinion that he was a person who devoted much effort to communication with his colleagues.

Eventually, he returned to Ireland. He left a tenured position in the United States to become the leader of the Cancer Center at Queen's University in Belfast. We thought, at the time, what a challenge that would be. How could he leave the U.S.? Belfast had just gone through a period of incredible political turmoil between the Catholic and the Protestant populations. With the history of violence and destruction, it seemed a risky place to start an academic career. The Queens University had focused on training physicians for community practice with limited emphasis on clinical or translational research. There was no organized cancer center at the time, and finding the funds to build one in that depressed area of the United Kingdom seemed very unlikely. The balance of the population in Belfast was Protestant and Paddy was Catholic. We thought this was really not a formula for success; however, we underestimated him. Even in the face of such obstacles, he succeeded.

Undaunted, Paddy spearheaded a remarkable transformation in Belfast. He found support from the Belfast government, from UK charities, and from grants. As the community recognized his energy and brilliance, cancer research became a rallying cry for the new Belfast. He identified a number of motivated, intelligent young people, formed research alliances with the basic science faculty and built a distinguished cancer center that stood tall with Cambridge, the Royal Marsden, Edinburgh, and the other leading research institutions in the United Kingdom. He established a genomics company in Belfast, with offices internationally. Queen's University became the nucleus for germinating biotechnology in the



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local business community. The UK Cancer Research Campaign generously supported him and made him a prominent advisor. He was even able to raise significant funds in the U.S. through his affiliation with the Irish-American leadership. I actually attended some of those meetings, felt a real brotherhood with Paddy and his supporters from the business and scientific communities in New York, Boston, and across the country.

Recognizing his talent, Queen's University gave him additional responsibilities. He became dean of the School of Medicine, Dentistry and Biomedical Sciences in 2007 and went on in 2014 to become its 12th president and vice-chancellor. A number of us have had the pleasure of entertaining fellows from Ireland in our laboratories and the clinics in Boston. We always were impressed with their commitment to research and their talent.

Paddy had an electric affect in Belfast in the 20 years that he was a leader there. As, he rose to prominence within the university, he had a great impact on the medical and scientific faculty, setting new standards for academic progress and goals for the faculty. I watched this process of honing the faculty as an adviser in the yearly process of evaluating academic progress. He was a leading spokesman for a bill of rights for patients in Europe, an effort to

guarantee all patients access to the latest therapies. He was also a leader in his own field of gastrointestinal oncology. For eight years, he was an advisor to the CHugai Academy for Advancement of Oncology (CHAAO) in Japan, and helped frame the annual meeting agenda.

Paddy's last days were typical of his daily routine. He returned from a trip to China in late May of 2017 and, according to his wife, returned feeling fatigued as one might expect. He went to sleep the next evening, got up, and decided to take a bike ride through the countryside. Climbing a steep hill, he was observed to fall suddenly from his bicycle, and when medical emergency services arrived, had no pulse or blood pressure and, unfortunately, could not be revived, the victim of a sudden coronary occlusion.

He leaves behind his wife, Iseult, a lovely, strong woman, who has a distinguished career of her own in physical medicine, as well as four sons and two grandchildren, I attended a Memorial Service for him in Belfast in the following spring and, like others there, felt that no one had recovered from the shock of his passing. He was obviously too young for this to happen, too talented for us to lose, and too admired and loved by the people who worked with him. There is no justice in death, only a staggering loss and many wonderful memories. We miss him to this day.