## **OBITUARY**





## David Richard Bevan, MA, MB, BChir (Cantab) with Distinction, MRCP (London), FRCA, RCPSC, FRCPC

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**Figure** Dr. David Richard Bevan. Photograph courtesy of Dr. David Richard Bevan's family.

The Canadian anesthesiology community recently lost one of its most ardent advocates. Dr. David Richard Bevan died on 9 May 2024, after a distinguished career as a leader of the specialty (Figure). This tribute highlights David's remarkable professional journey and offers a sampling of his many contributions to academic anesthesia. Most importantly, we describe the endearing characteristics that made David such an influential leader and valued colleague.

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Born in Wales in 1941, David was welcomed into a medical family, as both of his parents were physicians. He graduated from the University of Cambridge in 1959 and earned his medical degree from Guy's Hospital medical school in 1965. After a short-term commission in the Royal Army Medical Corps, he completed his specialty training in anesthesia (FRCA) and medicine (MRCP) and then served as a Senior Anaesthetic Registrar at Hammersmith Hospital in London.

In 1978, David emigrated to Canada, settling in Montreal, QC, where he joined the Royal Victoria Hospital as a staff anesthesiologist, and McGill University as an Associate Professor. By 1984, David had been named Chief of the Department of Anaesthesia at the hospital, and the next year he was appointed Chair of the Department of Anaesthesia at McGill University.

During his time in Montreal, David recognized the unique role of McGill University in the world of clinical and academic anesthesiology. For example, in 1942, Dr. Harold Griffith had made the landmark introduction of curare into anesthesia practice when he administered it as Intocostrin (E. R. Squibb & Sons, New York, NY, USA) to a patient having an appendectomy at the Homeopathic Hospital in Montreal. During the 1940s to 1960s, endotracheal intubation and controlled mechanical ventilation were becoming widely adopted, providing better operating conditions for surgeons and patients. Anesthesiology was becoming a specialty; residency training programs were being instituted and anesthesia societies flourished. The widespread use of curare and its synthetic derivatives for surgical relaxation and pulmonary ventilation in intensive care units was becoming well established.

By the 1970s, clinical care was changing from hospitalbased admissions to outpatient daycare practice. Drugs used during anesthesia needed to be shorter acting, with limited side-effects to meet these new demands. David embarked on research into the new synthetic agents, atracurium (Burroughs Wellcome, Research Triangle Park,



NC, USA) and vecuronium (Organon Laboratories Ltd., Newhouse, North Lanarkshire, UK), their reversal agents, and succinylcholine. He built a close-knit research team, linking McGill University and the University of Montreal. His publications, which began in the 1970s and continued into the 2000s, produced a substantial and unparalleled body of work that described the use of these drugs in adult and pediatric patients as well as those with a variety of neurologic disorders.

David became the inaugural Wesley Bourne Endowed Chair at McGill and established the Harold Griffith Memorial Research Chair to support research at McGill University.

In 1978, David and his wife, Joan (who was also an accomplished anesthesiologist), moved to Vancouver where he had been recruited to serve as Chief of Anesthesia at Vancouver General Hospital and Chair of the Department of Anesthesiology, Pharmacology & Therapeutics at The University of British Columbia. During that time, he also served as the Editor-In-Chief of the *Canadian Journal of Anesthesia* (1988–2000) when he led many important innovations, not least of which was guiding the creation and development of an online platform for the publication.

With the encouragement of leaders at the University of Toronto, David and his family moved to Toronto, where he became the Anesthetist-in-Chief at the University Health Network (UHN) in 2000. David was based at UHN's Toronto General Hospital site where he continued to build on the institution's history of excellence and innovation. The department flourished both clinically and academically, and UHN was recently ranked as third best hospital in the world, according to *Newsweek*.

Subsequently, in 2003, David was selected as the seventh Chair of the Department of Anesthesia, University of Toronto. During his tenure as Chair, he oversaw a period of critical shortages of anesthesiologists and under his leadership, novel partnership models with anesthesia assistants developed and the notion of anesthesia care teams grew. These models have continued to expand, and anesthesia assistants are now essential members of the Canadian anesthesia landscape. The university department, now named the Department of Anesthesiology & Pain Medicine, has continued to build on David's legacy and is now ranked second in the world in terms of academic productivity, according to Scopus (Elsevier, Amsterdam, Netherlands).

David's professional and international contributions expanded further. He served as Chair of the Scientific Programme Committee for the 12th World Congress of Anaesthesiologists, which was held in Montreal in 2000. He also served as Vice President of the World Federation of Societies of Anaesthesiologists and as Chair of the

Board of Trustees of the International Anesthesia Research Society in 2003.

David contributed in many ways to the growth of academic excellence within the Canadian Anesthesiologists' Society (CAS). For over 30 years, he served in various leadership roles, including Chair of the Scientific Affairs Committee, the Research Advisory Committee, the Board of Directors, as well as Chair of the Board of Trustees of the Canadian Anesthesia Research Foundation. In 2002, the CAS awarded David its highest honour, the Gold Medal, in recognition of his contributions to anesthesiology in Canada and the international community. The referees for the Gold Medal commented that David's exceptional research productivity and leadership abilities were complemented by his talent as a shrewd politician. One referee noted the following:

"[F]ew anesthesiologists in Canada would be able to match this record of achievement or leadership. On a more personal/Ontario note, Dr. Bevan was instrumental, through his membership in the Ontario Anesthesia Committee in putting anesthesiology on the radar of the Ontario Government though his public advocacy, illustrating the severe shortage of anesthesiologists in 2004. As a result, anesthesiology in Ontario is recognized by the Government as being a response, productive and mature specialty and has allowed us to continue with excellent relationships with the Ministry of Health of the Government of Ontario."

One of David's most enduring traits was his willingness to take on new challenges. Even as he neared retirement, David continued to seek new adventures. In his senior professional years, he left Toronto to practise anesthesiology in the small rural town of Huntsville, ON. There, he did what came naturally: providing excellent clinical care to patients. A family friend of one of the authors of this tribute recounted a story of needing emergency surgery in Huntsville. She distinctly remembered being treated by a friendly, kind, and highly competent Welsh anesthesiologist who provided both needed reassurance and excellent care.

One of David's most remarkable achievements was the ability to let those who had the honour of working with him, know that his primary goal was to see *them* succeed. He took great pride in the accomplishments of his colleagues and trainees. The authors of this tribute, like many others in David's large circle of friends and colleagues, regularly enjoyed supportive e-mails and phone calls, even during the last months of his life. With his characteristic Welsh accent, enthusiasm, and charm, he encouraged colleagues from around the world to support academic anesthesia, excel academically (with integrity and clear purpose), and offer excellent patient care.



David had a remarkable career as a clinician, scholar, and academic. He represented the best of Canadian anesthesiology to the world. He was able to succeed at this international level largely because of the unwavering support of his wife and their children. We offer our condolences to Joan and the family, as well as our thanks for their support of David, our friend, colleague, and mentor.

Disclosures None.

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