

# Dr Robert Humphrey Marten

1921-2010

Bob Marten came from a distinguished family, which first came to note in the reign of James I when Sir Henry Marten sat on the commission to decide the interesting question whether the Archbishop of Canterbury should be deprived of his see for involuntary homicide, having accidentally shot a keeper at a deer hunt. His son, also Sir Henry, was a fierce Parliamentarian in the Civil War and one of the 'Regicides' who signed Charles I's death-warrant. Another ancestor helped to found the Missions to Seamen. More recently his grandfather was a physician in Adelaide and an uncle was President of the Australian College of Surgeons. Both his grandfather and father were also called Robert Humphrey Marten, which gave Bob the unusual experience of reading his own obituary in the BMJ when his father died.

Bob was born in Cairo in 1921. He went to Stowe where he excelled at all games and went on to Trinity College Oxford during the war, where he won Blues in squash and cricket, was captain of squash and a 'Penguin' in tennis. His skill at cricket was revealed forty years later on the Dowling Club visit to India where he was almost too successful against the host team.

Bob completed his training at the Middlesex and was sent to India at the end of the war, and then to Kenya where he worked and trained local doctors. He came home and started in general practice in Oxfordshire but needed a more demanding career. His sister was a patient of Renwick Vickers and introduced him to him, and he started as registrar in dermatology in Sheffield. There he studied a cohort of 77 patients with lupus erythematosus over five years, finding that although many patients with discoid LE had minor blood abnormalities, they seldom progressed to systemic disease. He went on to King's College Hospital as senior registrar with D I Williams, and was appointed consultant there in 1957.

There they treated the first cases of ringworm to receive griseofulvin, the

results being published in the Lancet in 1958. Griseofulvin rapidly became the treatment of choice for fungus infections, especially of the scalp, and in a few years endemic *Microsporum audouinii* became extinct in this country. This was a great advance in public health as previously many children had completely missed their schooling because of ringworm. The only treatment was depilation with radiotherapy or thallium: even now we see patients with skin cancers of the scalp resulting from radiotherapy in childhood.

In 1958 Bob published with Charles Calnan a series of cases of contact dermatitis due to nylon hair-nets. This produced a rather characteristic pattern of eczema around the margins of the scalp. They concluded that it was due to sensitivity to the dye of the nets, and many patients reacted to azo-dyes and Paraphenylene diamine on patch-testing. This condition has disappeared as hair-nets have gone out of fashion.

In the 1960s and 1970s dermatologists at King's had the privilege of seeing a great number of Black patients who had come from the West Indies and settled in South London. Many of the older dermatologists, who distinguished skin diseases partly by their colour, salmon-pink, beef-red or violaceous, found this disconcerting, and even Dr Dowling found it hard. Apart from these colour changes, many diseases looked different, and there was much debate whether Afro-Caribbean children with micropapular atopic eczema actually had lichen nitidus. Among the many cases seen, Bob and his colleagues identified a group of Black children with a distinct itchy papular eruption of the face, frequently involving the ears and eyelids, and unresponsive to treatment for acne, rosacea or eczema. This was published in the BJD in 1974 as 'an unusual papular and acneiform eruption in the Negro child' (Figure 1) and subsequently written up again from King's as the FACE syndrome. Bob also published the first case of what was subsequently called lichen aureus in the St John's journal where his name was misspelled 'Martin'.



Bob will be remembered by all who knew him as an unusually kind and courteous man, a real gentleman. He was a most astute diagnostician and had a formulary of interesting treatments, and his registrars have learned a great deal from him. Thirty years later I still find myself remembering his teaching. Apart from his NHS work at King's, the Royal Northern and Orpington, he had a large private practice in Harley Street and at his home in Chislehurst which he continued long after his NHS retirement in 1981. He kept up his early interest in sport: he was a keen golfer and in his declining years enjoyed watching Sky Sport. He was looked after devotedly by his second wife Angela through his long illness. He leaves two children and three granddaughters.

Andrew Pembroke

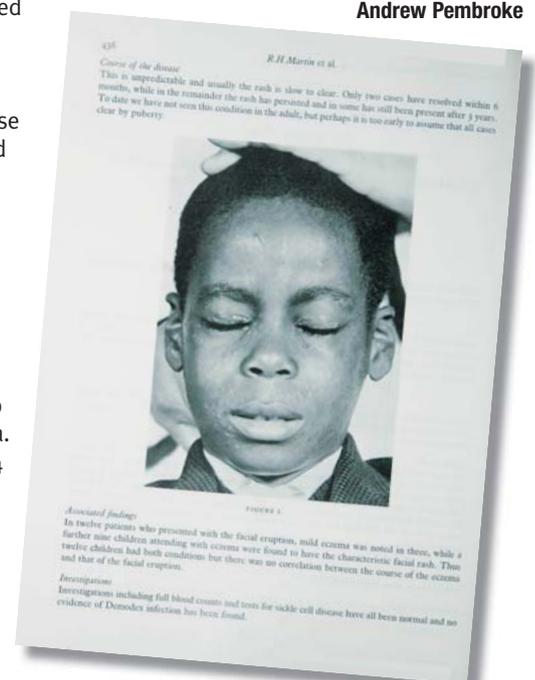


Figure 1: R. H. Marten, D. G. C. Presbury, J. E. Adamson and B. S. Cardell. An unusual papular and acneiform facial eruption in the negro child. Brit J Dermatol 1974; 91:436