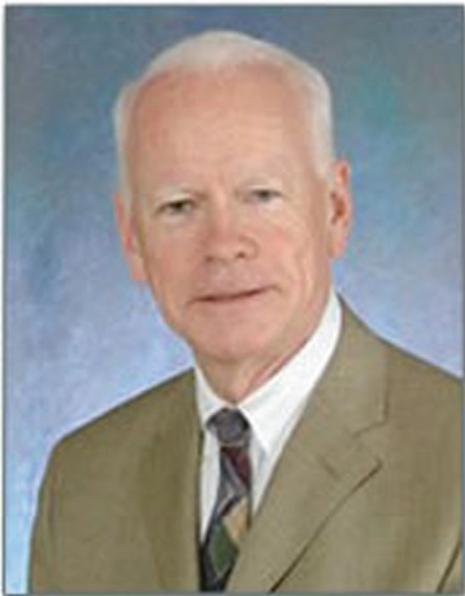




IN MEMORIAM

Frederick K. Goodwin

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I have known Fred Goodwin as a fellow member of the American College of Neuropsychopharmacology since the late 1960s, and early 1970s. His informed talks at the annual meeting were not to be missed. His passion for his work, and the rigor of his critical thinking, were clearly influenced by his Jesuit education. His laboratory at NIMH was stellar in the quality of its science; and, in the excellence of the young scientists that benefited from Fred's mentorship and guidance.

Our friendship began after I moved to Washington in 1993, as VP and Executive Dean at the George Washington University College of Medicine. In that capacity, it was my privilege to appoint Fred Professor of Psychiatry, as he was retiring from government. As Jeffrey Akman has commented, Fred's role as an educator was informed by his exceptional clinical experience, and his encyclopedic knowledge of the psychiatric literature.

Sometime in late 1996, I asked Fred and some other colleagues to join with me in starting a small company dedicated to the improvement of clinical trials related to psychiatry and neurology. Fred and I were joined by four other outstanding individuals. The company grew until, in our 70s, we chose to close up shop. While Fred made many contributions to our work, one particular study stands out. As one of the nation's leading experts on bipolar

disorder, Fred had long been concerned about the relatively high suicide rate among afflicted individuals. Based on his clinical experience, he believed that, unlike other available treatments, lithium had protective effects against suicide. To test the hypothesis, one would need a large sample in order to compare the suicide rates among patients who had been treated with lithium vs other medications. In spite of lithium being out of patent, Fred managed to convince one of the companies to support an epidemiologic study of patients with bipolar disorder; and he was able to engage Kaiser Permanente in Northern California to serve as the source of retrospective patient information. It was a complicated negotiation, and a complex study; but, Fred's clinical judgment was validated in a sample of more than 20,000 individuals.

In the years between 2000 and 2017, Fred and I managed to have lunch at least once a month. Those lunches (later joined by our friend Bob DuPont) taught me lessons about Fred's humanity, and his deep caring for his wife Rosemary and each of his children and grandchildren. When any health issue emerged, Fred threw himself into finding the best doctor and the best treatment system. (Indeed, in the case of his son, he chose to leave a distinguished medical center in this area, for care at the Mayo Clinic.)

Fred believed strongly in disease prevention and early identification. It was in this context that he and Rosemary learned that she had a brain tumor. Fred's caring for Rosemary was a measure of what a loving spouse should do; or, as Fred put it: "In all of the ways that she has been there for me, it is the least that I can do." When Rosemary died in 2013, Fred was grief stricken. The Goodwin family stood together, as they always would, in times of crisis, as in times of joy. It was testimony to the strong family that Fred and Rosemary built together.

Sometime over the next couple of years, Fred was diagnosed with Parkinson Disease. He was determined to maintain his lifestyle and autonomy. When he met Sheila Jacobs, he told Bob DuPont and me that he had found a really fine woman. My wife and I were delighted to attend their beautiful wedding. Throughout the progression of his illness, Sheila has stood by him with extraordinary support and love.

It is impossible to "sum up" the life of my friend Fred Goodwin. Blessed with a good family at birth, a fine mind and education, and an extraordinary career in research and clinical practice, Fred was fortunate to find Rosemary as a loving partner and to raise a wonderful family with her. Facing the end of life with a cruel disease, he found love with Sheila and his family, to sustain him through a very challenging time.

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