Memorial to David Osoba
from
Neil Aaronson, PhD and Ivan Barofsky, PhD

Tribute to David Osoba by Neil Aaronson, PhD

Dr. David Osoba, a long-term member of ISOQOL and a key player internationally in incorporating health-related quality of life considerations into clinical research and clinical practice in oncology, passed away on December 13, 2020 from complications of Parkinson’s disease. Born and raised in Alberta, Canada, David first had a very successful clinical and research career as an immunologist. After a sabbatical year in Kenya and Tanzania, working with the World Health Organization and pursuing his lifelong avocation of birdwatching, he returned to Canada to pursue a fulltime career in clinical oncology, first in Toronto and later in Vancouver, British Columbia, where he was Professor of Medicine at the University of British Columbia and Head of the Communities Oncology program at the British Columbia Cancer Agency.

David was an active member of the National Cancer Institute of Canada’s (NCIC) Clinical Trials Group where, in the late 1980’s, he served as the inaugural chair of its Quality of Life Committee. At that time, the science of health-related quality of life (HRQoL) research within oncology was in its infancy. While major strides were being made in developing valid and reliable HRQoL measures, there were enormous challenges in convincing the clinical trials community about the value of such patient-reported outcomes in evaluating new cancer therapies. David, as a respected clinician and clinical researcher, was passionate about the role of the patient’s voice in clinical research and care. He was a true pioneer and opinion leader at a time when it was so critically important to convince clinicians of the value of incorporating HRQoL factors into the clinical trials process and, just as importantly, to demonstrate the feasibility of doing so.

It was also in the late 1980’s that David joined the European Organisation for Treatment of Cancer (EORTC) Quality of Life Group, serving as a liaison between that group and the NCIC. Perhaps his greatest contribution around that time was demonstrating, together with his Canadian clinical trials colleagues, that HRQoL measures could be successfully integrated into phase III clinical trials and that they had clear added value in evaluating emerging cancer treatments. Another key contribution was his seminal paper, published in the Journal of Clinical Oncology in 1998, which has been cited more than 2,500 times in the journal literature, that provided guidelines for defining and interpreting clinically relevant change scores for the EORTC QLQ-C30 quality of life questionnaire. David was the author of more than 150 publications in the scientific journal literature, edited one of the first books on quality of life in cancer, and was a frequent invited speaker at professional meetings and conferences.

David served on the board of directors of ISOQOL from 1995 to 2003, and was President of the organization in 2001-2. He brought a sharp and critical eye, a clinician’s perspective, and a sense of mission to the deliberations at the executive level of ISOQOL, and to lively discussions during plenary and proffered paper sessions at the annual meetings. David also served for 10 years as an associate editor of ISOQOL’s journal, Quality of Life Research. In 2006, he received ISOQOL’s prestigious “President’s Award” in recognition of his outstanding contributions to the Society and to the field.
Those of us who were lucky enough to know David beyond his professional role were rewarded with loyalty and friendship. He had an active, if a bit corny sense of humor, and he loved nothing more than to trade jokes during meals and over a glass of wine, with a twinkle in his eye. He was a world traveler and, over the years, accumulated a wealth of memories, stories and anecdotes about his adventures in Africa, the Himalayas, the Galapagos Islands, etc. that he happily shared with his friends and colleagues. His was a long-term practitioner of meditation, a fervent birder, an avid baseball fan, a choir singer, a sailor, a golfer, and he even pursued square dancing for a time.

David made a significant and sustained contribution to the field of quality of life research and clinical medicine. His legacy is his body of work, his vision of a more comprehensive approach to clinical research and practice that encompasses the whole person, and his sense of commitment to colleagues, family and friends. Our thoughts and best wishes go out to Leslie, his loving and lovely wife, his children and his extended family and circle of friends.

David Osoba: A Personal Reflection from Ivan Barofsky

I first met David as a regular member of ISOQOL, but it wasn’t until the year 2000 when I became President, and he became “President-in-waiting” of ISOQOL, that I got to know him. At that time, Neil Aaronson was directing the ISOQOL meeting, and the three of us made up a formidable leadership.

By that time I had learned about his work with Canadian nurses, and how they could effectively complete a QOL study- this demonstration was critical to overcoming the resistance of American nurses doing QOL studies. Thus, David’s demonstration study was critical for the general acceptance of QOL research.

What was clear from my Presidency, was that while David thought the ISOQOL Board meeting was meant to be serious I was more relaxed and wanted it to be more fun. David’s seriousness, and my being more relaxed made up a tension that we learned to bear from each other - I got more serious and helpful as our relationship aged. I was lucky to spend some time with him and Leslie when they were still going to Arizona, and there being able to laugh at life was helpful – especially as his physical condition became complicated.

One of the interesting things about David is how he became interested in QOL research, especially after a successful career in immunology. The answer I gave myself was that it goes back to his upbringing as a student in the western wheat fields of Canada -he had an intellect that grew out of the ground and consistent with this was his interest in baking bread. Doing QOL research was like going home- it was as natural for him as breathing, especially since he focused on the quality of individual patient care. Hopefully, we will remember him as a person, but also as an outstanding researcher.

Ivan