

Forty Years On : Something of South Sea Surgery and Surgeons

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Dunedin

THIS is not a history of the Royal Australasian College of Surgeons. That is yet to be written. It simply provides a background to the launching of the College in 1927, hints at the ferments at work in the preceding decade, and keeps green the memory of some of our more notable founders, otherwise apt to be lost in the mists of Mount Cargill, the Dandenongs, the Blue Mountains and Mount Lofty. This explains the "Birthdays" heading. The story of the "Benefaction" follows later.

Birthdays are not uncommonly associated with benefactions of a personal and family nature, and ordained by custom. What I have in mind is something apparently different, yet as will presently appear, with a strong family flavour.

BIRTHDAYS

This birthday concerns an institution, the Royal Australasian College of Surgeons, and its coming of age, or twenty-first birthday. As it did not come into the world born in the purple and already bearing the prefix Royal, I think we may follow the common rule of the twenty-first and not the Royal eighteenth.

The College of Surgeons of Australasia, which before long became the Royal Australasian College of Surgeons, came into existence in February, 1927, in Dunedin. It was therefore fitting that it should celebrate its majority in its natal place. But it might not have been a college built on the pattern of Edinburgh, London or Dublin, but an institution called a Guild of Australian and New Zealand Surgeons or the South Pacific Association of Surgeons. These terms, indicative of a banding together of "down under" surgeons to improve self and surgery, were considered and rejected. In some ways, particularly the delicate problem of the selection of the original "Ins", or foundation members, matters would have been

easier had there been no registrable diploma, but the promoters of the enterprise properly turned away from lesser courses and held to the purpose of creating a new college as more likely to adorn surgery by promoting surgical education.

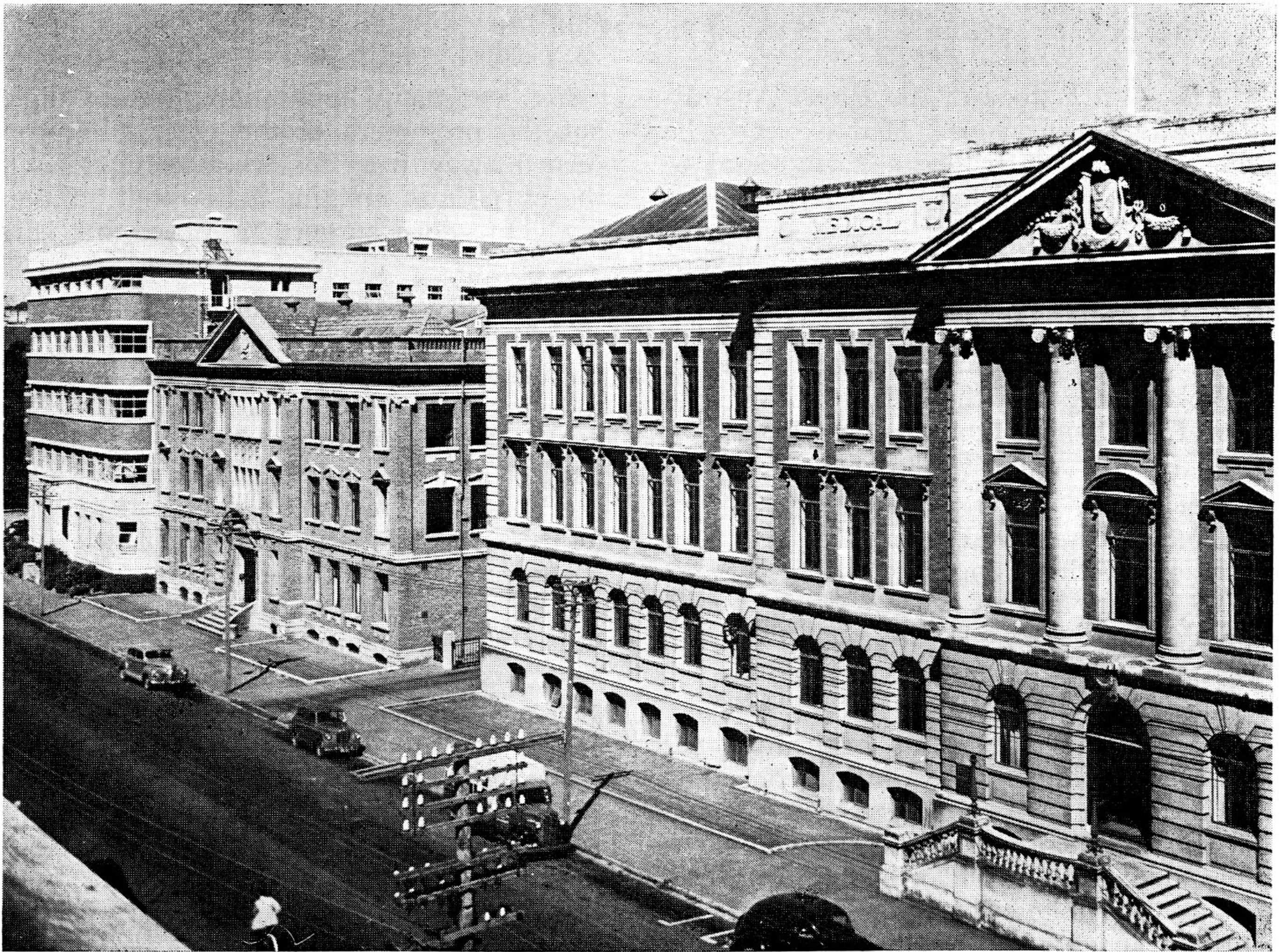
We may here interpolate to say that when the College diploma came up for consideration the planners had several models from which to work. They at first worshipped exclusively at the shrine in Lincoln's Inn Fields; later they realized that the older Edinburgh College had the merit of greater flexibility in a world of more and more specialism in surgery. So, after waverings, they adopted the principle of recognizing specialism in the diploma structure, thus creating a more realistic appeal to surgical aspirants. How long the idea of forming a representative body of surgeons in the South Pacific had been incubating is uncertain. It certainly existed before World War I, was submerged by it, and quickened in the post-war years.

Here in the twenties another factor came into play. The young American College of Surgeons, seeking to expand its sphere of influence, saw two flourishing Anglo-Saxon communities, certainly closely linked with Britain by ties of blood, but out on a limb in geographical position, and relatively closer to the United States. This situation was worth exploring. Whatever the reason or reasons, the American College made an exploratory visit to Australia and New Zealand, a visit which probably was inspired by the "goodwill", generous outlook of the North Americans. In the world of surgery New Zealand surgeons, and to a lesser extent Australian, were finding themselves drawn to the great figures dominating surgery and the warm welcome and excellent opportunities for postgraduate work in the United States of America.

The American College chose its emissaries well and sent, in 1924, the leading officials of the time in the persons of Dr Will Mayo and Dr Franklin Martin. They came bearing gifts, a number of honorary fellowships of their College, which were awarded to leading figures in Australasian surgery. In virtue of their own

tainly left a legacy of added goodwill and extended our access to the great opportunities for postgraduate study so freely and generously offered by our American colleagues.

We now turn to the small group of men who supported the proposal, worked behind the scenes and met to launch the College in 1927.



Otago University Medical School. The entrance in the lower right corner of the photograph is that of the Lindo Ferguson block, housing the Departments of Anatomy and Physiology. The first professional business conducted in this building was the meeting of the founders of the College of Surgeons of Australasia to establish the initial blueprint for the College. Inside the main entrance is a handsome bust of Lister, and a bust of Pasteur stands in the entrance to the adjacent building.

careers in their own rapidly developing country, and of the obvious needs in the U.S.A. to improve surgical education in its widest sense, there existed a bond of sympathy and understanding between the giant on the one hand and the small youthful communities on the other, which was often imperfectly manifested in a reserved Great Britain. If this overture did not result in affiliating the Australasian surgeons with the American College, it cer-

In New Zealand we like to believe that the originator of the idea and its most active protagonist in its earlier critical days was Louis Edward Barnett of Dunedin, but as often happens, the need for some new development strikes several people about the same time. At any rate, Barnett had no difficulty in forming a committee of ways and means among the leading figures in most Australian States, men like Syme and Devine in Melbourne, Newland in

Adelaide, Wade, MacCormick and Craig in Sydney, just to mention some.

It so happened that the Australasian Triennial Medical Congress met in New Zealand in 1927, and as the venue was Dunedin the first happy circumstance came into play. Our New Zealand champion was on his home ground. Furthermore, these momentous meetings, establishing the initial form of the College, and the personnel of New Zealand and Australian State committees, were held in the newly completed second building of the Otago Medical School, a building to be devoted to anatomy and physiology, then the twin pillars on which the primary education of a surgeon was based.

We offer now a brief sketch of Louis Barnett. Dunedin born, a Jew with all the insight, patience and persistence of that race, his career was a part of the history of Dunedin and its medical school. Entering as a medical student in the eighties, as the partial course was merging into the full curriculum, he took his degree in Edinburgh and then embarked on a planned programme to prepare for a surgical career. That was his ambition and he set out to achieve it with undeviating resolution. He was attracted to the Middlesex Hospital in London, took the English Fellowship diploma from there, and so became the first New Zealander to obtain that distinction. His interest in colleges of surgeons was enlisted and stimulated, and this, and his thirty years of experience in practice and teaching in Dunedin, which crowned his ambition and established him as a figure and force in his country, all went to create and confirm a conviction that the time had come to establish an authoritative body to regularize, to formulate and to direct the progress of surgery in Australasia.

He had made himself a surgeon, had come up the hard way through general practice, had achieved distinction and now had the interests of his cherished profession deeply at heart. His devotion to the betterment of surgery was disinterested, practical and informed. He was wise and deliberate, and both patient and persistent. He commanded the confidence of his surgical compeers in other centres in New Zealand. In short, he was almost the ideal protagonist for the new venture. It would have been a matter of general congratulation and an

additional happy circumstance had Sir Louis lived to preside over the coming of age of a favourite child, but the years had overtaken him during the war. I had for "Old Louis" an almost filial regard. He died in his eighties, the darling of his nurses for his gentle considerateness.

The staging of the College's twenty-first annual meeting in Dunedin and the attendance of representative Australian surgeons was Australia's graceful tribute to the man who had played so notable a part in creating the College. We saw to it that another favourite child figured in the professional programme—hydatid disease. The College had, under Barnett's enthusiasm, established the hydatid registry, and a review of lung hydatid disease was presented, a collective College research.

The Meeting

The meeting followed the customary pattern of three full days and two evenings devoted to professional subjects, covering a wide range. Official proceedings were opened the preceding evening with the inaugural public meeting held in the concert chamber of the town hall. This gave us the opportunity to make known to a representative group of invited guests the College ritual and ceremonial in full dress. This was the first occasion on which this aspect of the College had been presented to a section of the New Zealand public, and the exposition met with approval, the Law, in particular, expressing its pleasure. A number of new Fellows who had fulfilled the regulations governing admission were formally admitted into the College and welcomed by the president.

Thereafter the first Sims Professor delivered the Syme Memorial Oration on "The Progress of Surgery with Special Reference to Intracranial Surgery". By happy circumstance the Sims family were able to attend to see their creation go into action and fire the first shot in this unique campaign for the betterment of surgery. Arthur Sims and his Nancy must have been happy to see it take place in their own country. The proceedings went well, marred only by one note of sadness. Sir Lindo Ferguson, a doughty champion of medical education in all its branches, and a foundation fellow of the College, died in Dunedin on the eve of the meeting, just a few weeks short of the age of ninety.

The Social Side

Austerity had come to rule the College annual meetings in Australia. Its birthday nature and the smaller size of the Dunedin meeting led us to relax this austerity rule, so immediately before the inaugural meeting came the president's dinner to the Australian members of the College council, Balcombe Quick and Victor Hurley, the Secretary, H. G. Wheeler, the members of the New Zealand committee, and our guests of honour, Arthur Sims and Hugh Cairns. The timetable was tight, but there was time to listen to the donor's simple and sincere reply to his toast.

As the proceedings of the last day ended at 4.30, there was just time for an impromptu parting 5 o'clock gathering to end a memorable occasion which was also a happy event in my life. I did my best to oust alien austerity.

BENEFACTIONS

The Benefaction, the Sims Commonwealth Travelling Professorship, struck a most unusual note. This was due to several factors, which were its unique purpose, its size, and the vision which inspired and activated the donor and his family. It is true that the benefaction had been offered and accepted and conditions partly worked out in 1947, but it did not come into operation till January, 1948, when the young College, now dignified with Royal Charter, held its annual meeting in Dunedin.

The First Sims Commonwealth Professor

The choice of Sir Hugh Cairns to open the new venture was a tribute to the good judgement and right feeling of the selectors. Here was an Antipodean, bred and born, who seemed to combine all the talents and gifts at the bestowal of the kind fairies. He was a Rhodes Scholar, early translated to Oxford. Attracted to the growing cult of neurosurgery and a favourite disciple of its great exponent, Harvey Cushing, he finally returned to Oxford as Nuffield Professor of Surgery.

Before malignant fate cut short this meteoric career in mid-flight, we were fortunate to renew his acquaintance or to meet him for the first time in his maturity as the case might be. He did not come from Oxford bearing a graciously worded letter of felicitation from that ancient repository of knowledge and learn-

ing for the better encouragement of a newly fledged institution across the seas, but the more imaginative of us could sense it.

I think Hugh Cairns remained an Australian at heart. If his presentation of this addition to professional learning had a robust and direct national flavour, it was all the more acceptable. Combining the offices of travelling Professor and Syme Orator at the inaugural meeting, he opened his educational campaign by a review of neurosurgery. The keystone of surgical education is the master-apprentice principle in broad application, and many of us that night must have reflected that here was the principle in full swing.

Cairns had received his specialist training with the master surgeon and pioneer, Harvey Cushing in Boston. In turn he had assumed the mantle of master, and his pupil in Oxford, Murray Falconer, our neurosurgeon, was in the audience. In each case the master had reason for pride and pleasure in the pupil. So the torch is passed on.

The Donor and His Family

I first heard of the Commonwealth Travelling Professorship in a letter from Alan Newton in 1947. He was the immediate Past President, Hugh Poate was President, and it was possible that I might follow. Newton gave me the gist of the conditions and purposes, was stirred to enthusiasm and ended "You should be pleased and proud that this man of vision and generosity is your countryman." Though we were coevals, he was often slightly avuncular to me, an attitude fully justified by his greater height and greater qualities.

I was both pleased and proud. I had never met Arthur Sims, yet he was a boyhood friend, almost a hero. How come? This way. In those remote days I was a cricket fanatic, and it is perhaps not generally known that Sims had financed the visit of a good Australian team to New Zealand and that he and Trumper had put up a mammoth score. This alone should endear him to Australian hearts. With this background, though I retained all my boyhood awe of a great cricket figure, I could not but take Arthur Sims in his latest role to my heart.

In the October, 1947 issue of the College journal there appeared an editorial by Alfred

Webb-Johnson, President of the Royal College of Surgeons of England, outlining the conditions of the benefaction, extolling its purposes and declaring it a powerful agent in promoting imperial unity. The gift provided an annual income of £2,000. Webb-Johnson revealed that the initial offer had been made in 1939, and that when it was reported to the Prime Minister, Neville Chamberlain, he had warmly commended it. The Second World War then intervened, and the proposal was temporarily shelved. However, balked of his immediate project, Arthur Sims found scope for his vision, generosity and patriotism in equipping

The success story of Arthur Sims and his rise to fortune is indeed a modern "Canterbury Tale"¹ of vision, courage and enterprise. What concerns this tale, however, is the use he made of his growing wealth and the motives which prompted him. To get these clear in my own mind I recently wrote to Sir Arthur. As might be expected in a man of his quality, his motives and reasons were solidly based and carefully considered.

He began by saying that he remembered his mother saying more than once that you get out of life what you put into it. Second, he had met in his travels in the Far East doctors who



Sir Arthur and Lady Sims and their daughter Mrs L. B. Black.

the New Zealand Mobile Surgical Unit in the Middle East. This was presented to Freyberg's Division, and proved an invaluable mobile unit for forward surgery until March, 1942, when its equipment and personnel were absorbed into the newly formed 1 N.Z. Casualty Clearing Station.

In 1946 this proposed professorship was again mooted and brought to the notice of the new prime minister, Mr Clement Attlee. He described the endowment as munificent and farsighted, showing an appreciation of the needs of medicine and science and of the Commonwealth. In the following months the necessary exchanges and consultations ensued between London and Melbourne and culminated in Webb-Johnson's statement in the College journal.

had made real and altruistic sacrifices to put medicine on a decent footing in those parts. He had been much impressed. Third, he stressed the ambassadorial and goodwill functions which could be exercised by travelling professors who diffused knowledge, broke down the barriers of nationalism and created friendship by seeing something of the people and the way of life in the countries visited on professional duties. For these the professor (and his wife) required sufficient leisure. These are the articles of faith behind the Commonwealth travelling professorships, whatever the subject concerned, a constitution partly written, partly interpreted by individual professors.

¹ Sims was born in Canterbury, New Zealand, and went to Canterbury College.

When I met Arthur Sims for the first time just before the "birthday" meeting, he seemed to me to embody those qualities which had dictated this munificent and practical benefaction — solidity, sensibility, simplicity and sincerity. The Sims family, Sir Arthur and Lady Sims and their daughter Mrs Black, work as a team, and other channels of family munificence fall outside my scope as a surgeon, however much they command my admiration.

The original endowment is now in sight of its own majority. Much good has been achieved. The professors concerned have accumulated a large collective experience, and from this and the observations of those at the receiving end, sufficient wisdom should be distilled to determine an optimum programme for the professor.

I suggest that the principles are simple. Some have been worked out already and only require emphasis. In this context the younger minds are the more receptive. The registrar class and the young surgeon recently embarked on practice are likely to benefit most. Registrars in particular should be liberated and encouraged by hospital boards to attend the Professor's programme.

In a changing world one of the few stable forces that appears to grow and strengthen is the brotherhood of medicine, and the Sims endowment adds to its strength within and beyond the Commonwealth. This is of cardinal importance and imposes a corresponding responsibility on the selectors of the Sims Professor, who are the presidents of the Royal Colleges of Surgeons and Physicians of England and Australia.

The Sims benefactions touch Medicine, directly and indirectly, at many points. The travelling professorships have been increased in amount and scope, and the Sims-Black Professorship in Obstetrics and Gynæcology (gifted by Lady Sims and Margaret Black), with great propriety, completes the three great clinical divisions. The original gift was designed to yield an income of £2,000 a year, but considerable capital additions have been made. A. Mitchell in his Sims biography "84 Not Out", gives the present annual income as £9,000.

This story of the Sims benefaction must end on a note of sadness. Since 1948 we have had

the highlight of seeing Sir Arthur and Lady Sims on their annual visits to New Zealand, but their visit last year was destined not to be repeated. Sir Arthur died in April, at his home in Sussex, in his 92nd year.

The College has just concluded its 43rd year with steadily rising and justly won prestige and importance, in both our countries and beyond, and the College diploma ranks with older Fellowships. I had the privilege of taking part in the first full-dress examination in Melbourne in 1947 and have observed its progress to stability and efficiency. The College headquarters has been greatly enlarged and increased in efficiency and beauty. The Council now numbers 16 in place of 12, and New Zealand now has two councillors. The increased numbers may well be considered to bring added wisdom and wider interests. In the 43 years New Zealand has had three presidents, all Dunedin surgeons. It is time for a change.

PERSONALITIES

Though the "big guns" met in February, 1927, in Dunedin to draw up the final blueprint of the College of Surgeons, small newly come fry like me saw little of them. I identified them and renewed acquaintance with H. S. Newland of Brandhoek days. For George Syme, to be our first President, I had a fancy, because an older Syme, James of that ilk, was still very much a memory in Edinburgh. George was of similar, smallish stature, but he appeared a rather remote and austere figure, lacking the fire that sparkled from portraits of old James.

The corresponding Sydney giant, another uncompromising Scot, was for some reason not of that company, but another Sydney Scot, Wade by name, represented New South Wales. And I did make the acquaintance of Gordon Craig, another imaginative and generous Scot, who was soon to become a great benefactor of our young institution. Some day, *Deo volente*, I shall produce an eloquent evaluation of what Australasian Medicine owes to the Scot.

I now write of just some of those surgeons whom I knew and saw, both at long and at short range, at Council meetings, at surgical sessions, in operating theatres and, in rare and revealing instances, in domestic surroundings.

This article opens with a statement that it is not a history of the College, which is yet to be written. Yet it is a fragment of our history and soon all my lot will get a last posting. Not only will our great mass of accumulated clinical wisdom be finally wiped out, but our useful (and often interesting) bits of knowledge of the College and its personalities will go too. I do like to show a mild erudition and now remark "*C'est le premier pas qui coûte*", and never better illustrated than in our history and our personalities, first or second generation.

A medical school is made by its teachers and students, and so is a College. It is the spirit of the place that counts. Consequently, I venture to offer vignettes of some of the makers as I knew them—their strengths, their weaknesses (very few), their foibles, and in short, their endearing human qualities.

I have always heard that round about 1910 there occurred a vintage medical year in Melbourne. The galaxy of talent was topped by three who all attained surgical distinction and titular honours. Two, Newton and Hurley, I can claim as friends. Sir William Upjohn, to my loss, I have never known, but, like me, he must be tough or lucky. This remarkable trio and its period have interested me for years, for I think we four were of near age, if not coeval.

At the same time, far away in the north, there was another vintage year which later established relation with the Melbourne year. To this belonged a Queenslander, Robert Marshall Allan, who later became Melbourne's first whole-time professor of obstetrics and gynaecology.

The first personality of whom I write at length is Hibbert Alan Stephen Newton. What a man! Outstanding is the only partly adequate single-word description, and that by virtue of a distinguished presence, the gift of translating his thoughts into fluent, precise and admirable English, delivered with a so pleasing and perfect diction. To see him in action in the College always made me think of the "effortless superiority" said to characterize the Balliol man since Jowett's day. We sometimes speak of exceptional men as men of parts. Alan Newton had all the gifts for other fine parts had the dice fallen otherwise. Without doubt he would have made a barrister of Birkenhead brilliance, a notable headmaster or a business baron, and

his gifts in this direction found an outlet in the College building, projects and finance, in a private professional building and in highly important but unspectacular war service on the home front.

I cannot offer judgement on his stature as a surgeon, but hazard that it did not depend on that flashy emanation sometimes called brilliance or from original contribution, but on the perfectionist atmosphere he radiated to influence his students and the level of surgery at the Melbourne Hospital. Long ago I read and appreciated an address of his called "The Spirit of the Place". He and I shared a great admiration for Hamilton Russell and I think Alan absorbed, shared or adopted that exceptional man's principles and example.

When he had filled with distinction all College offices he became the perfect exemplar of the surgical elder statesman. The Executive paid him the signal honour of asking him to sit in at their meetings in an advisory capacity, an honour rarely extended. The gesture must have pleased him.

Now a word about those human qualities which go with the superlative and let us live happily with exceptional men with occasional dissensions. I think he enjoyed a little teasing. On one occasion he sent me some official correspondence from his seaside retreat, Phoenix Cottage. The name seemed to hold possibilities, and in my reply I asked if the choice of name had any esoteric or symbolic significance. Was it possible that he saw the vision of a surgical eagle arising from the ashes of a dead past? He sparked up and tried to bring my flight of fancy to earth, but I won that round!

In 1945, after a tough Tasman flight and a night in the train, he met me and took me to his house. He said I looked jaded, sat me down by a fire and ordered sleep. I woke to find Newton and tea. After that, knowing full well the bother of hospitality in war-time austerity and wishing to save his charming and decorative wife trouble, I remarked that I had better get back to my hotel. He exploded "Dammit, Bell! You're staying to dinner if it's only hash!"

In the context of the senior's duty to encourage younger talent he once asked, "What about that chap of yours?", mentioning a well-known New Zealand surgeon, "Is he decent and helpful to the juniors?" I replied that on

no count was this so. Newton gave an expressive grunt of distaste and dropped the matter. The young had a real, if formidable, friend in him. At the Sydney 1932 meeting he was accompanied by a G.S.O.I who, to my discerning eye, seemed future presidential stuff. I was right. This was the young Julian Smith (jr), now "Orm".

But even the best are human, praise be! An occasional authoritarian harsh note, and an impatience with lesser men, declared themselves, and he had an Irish tendency to trail his coat. His judgement of men was not infallible.

I have written at some length because in my opinion Alan Newton is the greatest figure who has so far adorned our College, though others are in the field. And I am convinced that he is chiefly responsible for the "Spirit of the Place". That epitaph would satisfy him.

Victor Hurley was a man cast in another mould. Massively stocky, he personified a quality of calm monolithic stability. Physically he was more like our New Zealand type, barring the moustache which may have been an Air Force appendage. Another man of business, which talents he devoted to British Medical Association and College, he must have been a tower of good sense on the Executive which played such an important part in shaping our young College. And he served his country well as an air vice-marshal. When his knighthood was announced in our press he appeared as Sir Victory Hurley, so I wrote saying it was a famous victory. So it was, a victorious topping off of a life of distinguished service to medicine and country.

Balcombe Quick, a truant from Dunedin and our senior in years, was another perfectionist, a man of many gifts and encyclopædic knowledge.

Albert Coates, that legendary figure of the Burma line, bearing colonic scars from his ordeal, was a most likable and human person of fine judgement (he married a New Zealand wife). Surely no other College knighthood, tardy as it was, was greeted with such pleasure and acclamation.

W. A. Hailes was a man after my own heart. I believe he came up the hard way, and we shared an enthusiasm for cricket. I farewelled him as he took off on his long flight across the

Indian Ocean on military business, and he won my heart by saying he had just come from saying "good-bye" to his mother. Him, too, the gods loved.

Last I mention Hugh Devine, impressive and attractive, the leading figure at St Vincent's Hospital. He represented another big sphere of influence, and he and Newton, in their respective spheres, made a deep impact on the important public by their professional eminence and a worthy cause so ably presented. He was a surgeon of stature, as witness his book on abdominal surgery and his reputation in goitre surgery.

Of course, there were many others of fleeting acquaintance, such as Henry Searby, general and special. In fact, Melbourne always seemed to bulge at the seams with teeming talent.

I never had such wide acquaintance in that fascinating city of Sydney as I had in Melbourne. Though I had many kindnesses from many surgeons, such as Aspinall and Fisher, for brevity's sake I must confine my comments to a few, among whom I must not forget Benjamin Edye, who bore the legendary MacCormick's torch, and that Sydney familiar Victor Coppleson.

Hugh Poate was three years my senior. At first we remained on formal terms till one day in another city we stood together watching a well-known surgeon doing a radical mastectomy. At the end we turned away, and he mildly remarked "I don't do it that way". I said that I too had been brought up in the anatomical school. This seemed to break the ice. Interested readers may remember Poate's subsequent contribution to the Journal where perhaps the artist defines planes with a little extra clarity, perhaps again to underline the principle.

Poate won my heart the next time I alighted at Rose Bay, in the "good old days" of the Sunderlands. He met me with spacious Australian hospitality, and took me off to his home with presently a family dinner, where I saw his remarkable wife in a simple domestic setting and where I met some members of their interesting family, including a beautiful girl called Antonia, and where Poate was so clearly the happy and proud head of the house.

Several years later, late one Sunday afternoon, my telephone rang, and I was astonished

to hear "Hugh Poate here". It turned out that he was touring New Zealand by car with his family. We had a long sitting on this and that, and had a shared interest in horticulture, though I wasn't in his class, and I think he enjoyed it. He had the credit for introducing the valuable principle, based on the bishop visiting a far-flung diocese, of showing the presidential flag in a great continent by visiting centres in turn and giving short and practical addresses.

Harold Dew was one with whom I never got on terms. We talked testicular tumours with general agreement, and his classic monograph on hydatid disease was my bible, for I too had a wide experience. I recognized in him great qualities, but his colourful language rather daunted me.

George Bell had commanded my regard since the crossroads of Brandhoek, and we had a common up-country origin. With large stature often goes a happy and genial disposition, and George had endearing gifts as a raconteur. His story of a house surgeon, the young Harry Harris, calling his chief, the formidable Fiaschi, down to Sydney Hospital on Good Friday to see a case of postoperative distension was sheer delight. It was a great pleasure to hand over the presidential robe to him in Brisbane. He filled it so much better! Moreover, it kept the presidency in the family, so to say.

"Paddy" Moran was another Sydneysider held in high regard by us, as "Wallaby" captain, surgeon, pioneer radiotherapist and author. His career was cut all too short. In 1950 I had the privilege of giving his memorial address in Christchurch.

E. D. (Ted) Ahern, the Queensland councillor, I held in special regard. If he thought that the solitary New Zealand representative was being hard pressed, his generous Irish heart rushed to the rescue.

In ending this imperfect procession of vignettes, I return to Melbourne, where E. T. C. Milligan was another surgeon to cross my path. He did much to put wound excision on a firm basis. I met him in London after the war, and he said he and his wife had elected to stay in London on the prospect of a crust. I fancy from his contributions to St Mark's technique that he probably had "a little bit of butter to his bread".

There in 1947 I first made two rewarding acquaintances, both future presidents. One was the young Kenneth W. Starr of Sydney, and I had the pleasure of introducing him as he presented an original paper, clearly destined for meteoric rise. The other was Leonard Lindon of Adelaide, who was taking part in the initial final diploma examination. Since then he has been a long-range friend.

Similarly, at the Brisbane meeting of 1949, Professor Neville Sutton, my Australian opposite number, a part-time professor of surgery, gave an anatomical demonstration relating to pancreatectomy. As in Poate's case, I seemed to detect in another Sydney man gone north an appreciation of applied anatomy, making him highly sympathetic to me.

Again I strike a lighter note. Though a digression, it is wholly relevant, for it deals with surgery and surgeons, introduces several future presidents, hints at the antenatal stage of the College, and also touches on Australian unity.

The story opens just 64 years ago, in February, 1905, when a rustic and verdant 17-year-old youth crossed the Tasman to join an Orient liner en route to Edinburgh and the great world of surgery. At this time there were many Australian and New Zealand students in Edinburgh, and an Australasian Club run by them, situated with singular propriety in Melbourne Place. The less lettered Victorians naturally took this as a compliment to their fabulous city! The Antipodeans, though of generally different type, lived in peaceful coexistence both in work and play.

Though I visited Australia in 1912, I saw more of anatomists than surgeons, and then came 1914-18 and much Australian and New Zealand coming and going and battles of long ago. In July, 1917 came the medical preparations for Passchendaele and the establishment of a forward casualty clearing station to deal with abdominal and chest wounds at a spot on the Ypres Road which became notorious, the cross-roads at Brandhoek. Surgeons of greater or lesser eminence gathered, and the British contingent included such figures as Ernest Miles, Rock Carling and C. H. Fagge. By a curious chance three future presidents of our College worked together under that tented roof, Newland and the two Bells. H. S. Newland was the handsome and commanding figure he

has always been with an additional cachet, that of seniority, for had he not attended as a young F.R.C.S. the centenary dinner in 1900 in London? The two Bells had outwardly only a name in common. George was Big Bell and I was Little Bell.

Not far away there was other potential presidential stuff, Alan Newton, Hugh Poate and Victor Hurley. A future honorary fellow who became an Antipodean institution was nearby, plain Gordon Taylor. Future presidents were two a penny!

In June, 1918, the German breakthrough on the Aisne was petering out. My casualty clearing station had been overrun, and we took the high road in the Paris direction on the very hard *pavé* for two days. Then we met officialdom, and being both footloose and footsore, I was ordered to supervise the evacuation of British wounded from a temporary French hospital. No sooner had I arrived to find considerable chaos when Australia entered to add to the old Empire flavour! A lone British ambulance drove up and a long, lean, lanky figure got out and sauntered over to us. He casually introduced himself as a Sydneysider, Fiaschi (I forget whether Carlo or Pietro), and said that things were dull at his Australian base hospital so he had commandeered an ambulance and driver, thrown in some instruments and taken off for the Aisne front where there seemed to be a promise of some excitement. He soon left to seek something worthy of his steel.

Travelogue

In the good old days you really worked your passage to Council meetings. The routine was day train to Lyttleton, night interisland ferry to Wellington with most of the day there, which was useful to the New Zealand Committee of the College as giving a last-minute revisal of our business for the Council, then a late afternoon departure for Auckland by main trunk railway, much of it a rickety all-night trip, no sleepers, cold (early winter), scrappy refreshment at stations, an arrival in Auckland about 11 a.m., roughly two days from Dunedin, the rest of that day and night in Auckland, a scrappy early breakfast and a short bus trip to Mechanics Bay, the Sunderland base. On one trip we took off for Rose Bay on V.E. Day. I found comfort that our craft had a

double function, for occasionally it looked as if we were going to take to sea. It was hardly credible that 1300 miles could turn on a so quickly changing scene.

In lighter vein I recall two College occasions with mingled feelings. The first was the Syme Oration in the Sydney Town Hall. I had polished that oration till it positively coruscated, and the fine phrases and *bons mots* stood out like Belisha beacons. After more than 30 years' detachment I think it not half bad but dear me, it was far too long. I can still hear the gale force sigh of relief that swept the great hall, with its excellent acoustics, as I showed signs of perorating. For audience and orator it was a tough assignment.

The second occasion was my first Council meeting in Melbourne. This carried a distinctly Dickensian flavour, I cast as Oliver and my simple plea meeting a similar shocked displeasure. I admit that the comic side did not strike me till that day-long Sunday meeting had ended happily. I still think that my cause was aided by celestial intervention, for during the morning a longish drought broke, the skies streamed and Victoria rejoiced.

Let me set the scene. The Council then numbered 12, and in several respects I was twelfth man. The war was nearly over, and the moving spirits in the College were already pondering ways of progress. Extensions of any kind cost money, money was tight, and the financial guardian rightly watched expenditure with a jealous eye. The New Zealand section accepted this, but we also wanted to improve the College's efficiency in New Zealand, and for this we felt we had a reasonable claim for a modest allowance. In short, my plea was for more money and more autonomy in spending it. Furthermore, we contributed a relatively high number to the total College roll.

After an initial coldness, Australian reason and generosity prevailed, and a satisfactory arrangement was defined. Then another issue cropped up. In those days councillors paid their own travelling expenses to conserve College funds. It was recognized that this bore relatively heavily on the New Zealand councillor, and some concession was suggested. Now was the opportunity for New Zealand to make a gesture and I insisted on paying my own. Don't get me wrong—this really has no self-righteous

flavour. Had I not some years before been paid a fee of £40 for the Syme Oration? It was merely a restitution to the College treasury with a bit added as a personal contribution. This problem had other modifications later.

REFLECTIONS

Now allow me some parting reflections and even prophecies. Contemporary old hands view the remarkable progress of this courageous, even visionary, infant from swaddling clothes to a vigorous maturity with undiluted pride. It began with all the risk, all the fascination of a well-conceived and well-planned big business enterprise. Its high purpose, the education of the Antipodean surgeon, has never faltered, and even if there were lean and difficult early days it is now paying big dividends, and we are firmly established as the driving force in the education of the surgeons of this hemisphere.

We owe an immense debt to the founding fathers and to the successors they in part chose and fostered. High talent and high purpose have never lacked. It is a sad fact that our links with Great Britain have inevitably weakened, while our relationship with the United States has strengthened and inevitably will strengthen more and more. But in the case of the College I hope we will remember our origins and the help graciously and generously given by the then Mother Country.

Australians and New Zealanders are one people, separated by what is now just a ditch, with a similar ancestry but each with its own genius, one complementing the other, in which Australian dash is balanced by the caution of the New Zealander. We know each other's worth from past shared great feats of arms. I see our future, both as countries and surgeons, as partners in a great family enterprise and adventure with all those rich, differing qualities that promising families embrace.

In the College realm our relations have been strengthened, but from the very nature of things, in our partnership Australia will remain the big brother by virtue of size, resources, numbers and consequent greater wealth of

talent. Our purpose should be to foster and to increase our combined practical working efficiency within the family.

In the days when I could speak with authority and was consulted by youthful surgical aspirants, I always pointed out the great clinical resources, the professional talent and expertise just a few short hours away. This advice is still being followed, but the traffic must be two-way, to maintain vigorous health. Surely we have high priests of sufficient stature to attract Australian acolytes. We have plenty of excellent clinical surgeons, and a system of interchange at registrar level could be arranged. The now numerous professorial units could give thought to establishing the principle. If we are to sustain, advance and protect this South Pacific bastion of Anglo-Saxondom, the sooner we set about establishing and fostering a practical brotherhood the better. That includes surgery.

Now a last return to our College and the 30 short years which will bring in the new century. The spade work has been soundly done, and the obvious lines of routine development lie plainly ahead in the general directions of improving our educational programme and adjusting it to changing conditions, and the same applies to working conditions in hospitals. Our future strength and stature are going to lie in the contribution we make as a College to knowledge. For this we need money, money and more money, and we need men of the quality of Newton and Devine to put our case to the great corporations. We need to enlist the vision of another second-generation Casey, and get another Walter and Eliza Hall Institute under way under the College ægis. Now we must catch up on that, particularly in Australia where immense potential resources await us, and as far as we can in New Zealand in contributing directions. In the year 2000 these pontifications and prophecies may be brought up to date.

Though we of New Zealand cannot hope to catch you up, we can try to emulate you, and between us we can forever, I hope, keep alive this heritage from England.