



6TH BIENNIAL

COWLISHAW SYMPOSIUM

Saturday 28 October 2006

Royal Australasian College of Surgeons
Melbourne, Victoria

PROGRAMME



ACKNOWLEDGEMENTS

Thanks are due to the many people who have contributed to the planning and presentation of this Symposium.

Speakers:

A. Wyn Beasley - *the Kenneth Russell Memorial Lecturer*

Nick Doslov

Gabriel Kune

Craig McBride

Sam Mellick

John Royle

Philip Sharp

Donald Simpson

George Somjen

The President of the College, Mr Russell Stitz

Members of the staff of the College, in particular

Binh Nguyen

Kymerley Walta

Alan J. Thurston

Convener

INTRODUCTION

This year sees the 6th biennial Cowlshaw Symposium; a meeting that has become one of the principal events on the history of medicine calendar. The College is fortunate to own the collection of historical medical texts that was amassed by Leslie Cowlshaw during the period from the early 1900s, probably until his death in 1943. By 1906 he had already undertaken two world tours and after his graduation he undertook yet another tour during which he acquired a large number of significant works. By 1914 he had obtained many of the printed works in the Collection through his connections with dealers in London and Europe. The Collection includes a number of volumes published in the 15th century including an Avicenna Canon of 1497 from Padua and the 1483 Nuremberg *De proprietatibus rerum* of Bartholomeus Angelicus. In his will, Cowlshaw gave the Royal Australasian College of Physicians the first right of refusal on the Collection, which, for unknown reasons, was declined. Within a month of his death and after some hurried negotiations between John Laidley (the Honorary Secretary of the NSW State Committee of the College) and Ken Russell both acting for the College, and the trustees of Cowlshaw's estate, the College had secured the complete collection at a price of £2750. In total there were some 2500 items making it notable by world standards and considered to be the best private collection in existence at the time.

In 1996, Wyn Beasley, then Reader to the Gordon Craig Library, initiated the Symposium to make the College's Cowlshaw Collection better known, both to Fellows of the College and to the wider bibliophile community. With the endorsement of the President and Council, he invited a group of speakers, all renowned for their interest in historical books and the history of medicine to participate. Embedded in this Symposium was the eponymous lecture named in the memory of the man who helped to secure the collection for the College and who then set about cataloguing it: Kenneth Fitzpatrick Russell. Thus, the format for the Symposium was set and its popularity has been proved in growing numbers and support over the first decade. The speakers are invited to select one or more items from the Collection on which to base a paper. Over the years this has provided many outstanding papers on medical history and *materia medica*. The inclusion of the Kenneth Russell Memorial Lecture in the Symposium is entirely appropriate putting it in the context of medical history, a subject dear to his heart, and a meeting centred on the Collection that he took to heart.

The programme for this 6th Symposium looks as though it will satisfy a wide range of tastes ranging from varicose veins to artificial limbs. The research and preparation for each of the papers takes some considerable time and thought and this commitment of the speakers must be acknowledged. The hard work of the staff of the College in organizing this Symposium is also acknowledged.

PROGRAMME

Saturday 28th October, 2006

0930 Registration

1000 Opening by Mr Russell Stitz, President RACS

SESSION 1

Chair: Mr Russell Stitz

1005 *The 8th Kenneth F. Russell Memorial Lecture*
Mr Wyn Beasley (Wellington, New Zealand)
AN APPROACH TO THE NATURAL
(Hippocratis Coi medicorum omnium longe principis.
Ex ædibus Francisci Minitii - 1525)

1045 **Professor Alan Thurston** (Wellington, New Zealand)
PARÉ AND PROSTHETICS: A HISTORY OF ARTIFICIAL LIMBS
(The workes of that famous chirurgion Ambroise Parey. A. PARÉ,
translated by T. Johnston, 1634)

1120 **Coffee/Tea Break**

SESSION 2

Chair: Professor Alan Thurston

1150 **DR NICHOLAAS TULP OF AMSTERDAM, 1593 - 1674**
ANATOMIST, DOCTOR OF MEDICINE AND BURGOMASTER
(Observationes medicæ. J du Vivie, 1716)

Honorary Professor Sam Mellick (Brisbane, Queensland)
DR NICOLAAS TULP OF AMSTERDAM

Professor Donald Simpson (Adelaide, South Australia)
NICOLAAS TULP AND THE GOLDEN AGE OF THE DUTCH
REPUBLIC

1240 **Mr Nick Doslov** (Melbourne, Victoria)
RESTORATION OF 'DE CHIRURGIE ENDE ALLE DE OPERA
OFTE WERCKEN VAN MR AMBROISE PARÉ
(C van Breugel & H Laurentz, 1636)

1300 **Lunch**

PROGRAMME

Saturday 28th October, 2006

SESSION 3

Chair: Honorary Professor Sam Mellick

- 1400 **Professor Emeritus Gabriel Kune** (Melbourne, Victoria)
**WORLD LEADERS SURVIVING SERIOUS ILLNESS:
FRANKLIN D. ROSSEVELT AND POPE JOHN PAUL II**
(The medical Knowledge of Shakespeare - Dr John Charles Bucknill,
Longman & Co, 1860)
- 1435 **Professor John Royle & Mr George Somjen** (Melbourne, Victoria)
VARICOSE VEINS: HIPPOCRATES TO JERRY MOORE
(Jerry Moore and some of his contemporaries - BK Rank, The
Hawthorn Press, 1975 and Severall chirurgicall treatises - R Wiseman,
R. Norton and J. Macock, for R. Royston, 1676)
- 1515 **Coffee/Tea Break**

SESSION 4

Chair: Mr Wyn Beasley

- 1545 **Dr Craig McBride** (Melbourne, Victoria)
BELIEVING IS SEEING - THE HERNIAE OF MORGAGNI
(De sedibus et causis morborum. A Miller & T Cadwell,
Translated by B Alexander M.D., 1769)
- 1620 **Mr Philip Sharp** (Sydney, New South Wales)
DISSECTION: TABOOS AND CULTURAL CHANGES
(De venarum ostiolis, Hieronymus FABRICIUS ab Aquapendente
1603 SPRINGFIELD: Charles C. Thomas, 1933. (facsimile edition)
and Exercitatio anatomica de motu cordis et sanguinis, William
HARVEY Frankfurt, 1628)
- 1700 Closing Remarks
- 1715-1830 **Cocktail Function**

ABSTRACTS AND BIOGRAPHICAL NOTES

Mr Wyn Beasley

AN APPROACH TO THE NATURAL

The 8th Kenneth F. Russell Memorial Lecture

(Hippocratis Coi medicorum omnium longe principis. HIPPOCRATES. Ex ædibus Francisci Minitii - 1525)

Hippocrates, whose works are to be found in a 1525 folio in the Cowlshaw Collection, wrote on acute and recurrent dislocations of the shoulder. Adherence to the principles he laid down offers a good outcome in both categories, and this paper considers the application of these principles in the manipulative reduction of acute dislocations, and in the operative repair of recurrent dislocations. It examines the case history of one of the more celebrated sufferers from recurrent dislocation, Sir Winston Churchill.

Wyn Beasley is a former orthopædic surgeon with a special interest in the care of amputees, and a past vice president of the RACS. His history of the College, *The Mantle of Surgery*, was published in 2002 to coincide with the College's 75th jubilee celebrations. He is a former Colonel Commandant of the Royal New Zealand Army Medical Corps and a past chairman of the College Section of Surgical History; and over recent years he has delivered the Hamilton Russell, Herbert Moran, Kenneth Russell and Rupert Downes lectures. He was a Hunterian professor for 2002. As Reader to the Gordon Craig Library he was the originator and convenor of these Cowlshaw symposia.

Professor Alan Thurston

PARÉ AND PROSTHETICS: A HISTORY OF ARTIFICIAL LIMBS.

(The workes of that famous chirurgion Ambroise Parey. A. PARÉ, translated by T. Johnston. London, TH Cotes & R Young, 1634)

There is evidence of the use of prostheses from the times of the ancient Egyptians. Prostheses were developed for function, cosmetic appearance and a psycho-spiritual sense of wholeness. Amputation was often feared more than death in some cultures. It was believed that it not only affected the amputee on earth, but also in the afterlife. The ablated limbs were buried then disinterred and reburied at the time of the amputee's death so the amputee could be whole for eternal life. One of the earliest example comes from the the 18th dynasty of ancient Egypt in the reign of Amenhotep II in the 15th century BC. A mummy in the Cairo Museum has clearly had the great toe of the right foot amputated and replaced with a prosthesis manufactured from leather and wood.

The first true rehabilitation aids that could be recognised as prostheses were made during the civilizations of Greece and Rome. During the Dark Ages prostheses for battle injuries and hiding deformity were heavy, crude devices made of available materials – wood, metal and leather.

Such were the materials available to Ambroise Paré who invented both upper and lower limb prostheses. His "Le Petit Lorrain", a mechanical hand operated by catches and springs was worn by a French Army captain in battle.

Subsequent refinements in medicine, surgery, and prosthetic science greatly improved amputation surgery and the function of prostheses. What began as a modified crutch with a wooden or leather cup and progressed through many metamorphoses has now developed into a highly sophisticated prosthetic limb made of space-age materials.

Alan Thurston was born in 1947 and educated in Feilding, New Zealand. Was awarded the Manawatu Co-operative Society Scholarship and entered the University of Otago, 1966. Graduated MB, ChB in 1972 with distinction in anatomy and the David White Prize in Clinical Surgery. Undertook compulsory military training as a medical student and was commissioned as a medical officer in 1971. Trained in orthopædic surgery with an interest in hand surgery in Wellington and was admitted FRACS in 1980 and FNZOA in 1982.

Graduated MSc (Oxon, bioengineering) in 1982 and then returned to New Zealand to take up a post as Senior Lecturer in Orthopædic Surgery at the Wellington School of Medicine and Health Sciences and Consultant Orthopædic and Hand Surgeon at Wellington Hospital. Awarded the Broadfoot Memorial Essay Prize, 1985, the A.B.C. Travelling Fellowship in 1986 and the Douglas Iverach Postgraduate Fellowship in Medicine in 1991. Promoted to Associate Professor (Hand Surgery) 1996

Was the Commanding Officer of the 2nd NZ Field Hospital from 1986-90 and was awarded the Efficiency Decoration (honour awarded by the Governor General under authority delegated by Her Majesty, The Queen in recognition of service to the Territorial Force of the New Zealand Army) in 1987. Is presently the Assistant Director of Medical Services, Army General Staff, New Zealand Army in the rank of colonel and Honorary Surgeon to His Excellency the Governor General of New Zealand.

Honorary Professor Sam Mellick

DR NICOLAAS TULP OF AMSTERDAM, 1593 - 1674

(Observationes medicæ. N. TULP. Lugduni Batavorum. J du Vivie, 1716)

In the Cowlshaw Collection in the Royal Australasian College of Surgeons there is a small volume bearing the bookplate of Leslie Cowlshaw M.B., C.h.M; the book is "Observationes medicæ" Nicolai Tulpæ, CIO, IO, CCXVI (1716), written in Latin because Tulp did not want the public to read it and treat their own illnesses. The author is widely known as the Demonstrator, immaculate of dress, in Rembrandt's famous painting "The Anatomy Lesson of Dr Tulp" which hangs in the Mauritshuis Museum in The Hague. As a surgeon and anatomist, Tulp was required by the Surgeon's Guild to apprentice surgeons and "deliver" public dissections.

It is not however so widely known that Tulp was the first to dissect and clearly illustrate, the ileo-caecal valve, and, in this same book, he accurately described a case of beri beri, one of the earliest such records of that disease.

During the plague epidemic of 1635, Tulp promoted quarantine to help control of the spread of the disease as did another surgeon, Guy de Chauliac, three centuries earlier in Avignon; and his very public interest in drug therapy, helped significantly in the publication of the first Dutch Pharmacopoeia. His civic interests saw him become Mayor of Amsterdam no less than four times, in which capacity he defended the city against the French in 1672; and he also served as a judge and was City Treasurer for 27 years. His life of 81 years was certainly well filled.

Sam Mellick was born in North Queensland and qualified MB BS with First Class Honours at the University of Queensland in 1948. He gained his English Fellowship in 1953, returning to the new Princess Alexandra Hospital in Brisbane, whose department of vascular surgery he founded in 1961 and headed until 1985. He became FRACS in 1960, and has since been chairman of the Board of Examiners, Censor-in-Chief and senior vice president. His FACS dates from 1967, and he served two terms as a Governor of the American College. He became Hon FRCSI in 1989 and was the first Australian to be president of the International Society for Cardiovascular Surgery. He was made CBE in 1987.

Professor Donald Simpson

NICOLAAS TULP AND THE GOLDEN AGE OF THE DUTCH REPUBLIC

(Observationes medicæ. N. TULP. Lugduni Batavorum. J du Vivie, 1716)

In the Seventeenth Century, Holland and the allied provinces of the northern Netherlands won final independence from their Spanish overlords, and formed a world-wide economic empire. Dutch ships dominated the seas from the Caribbean to Japan, and reconnoitred the coasts of Australia and New Zealand. Dutch society was cosmopolitan, and supported great painters, philosophers and scientists.

In these astonishing years, the physician Nicolaas Tulp [1593 - 1674] practised in Amsterdam, and in 1641 published a book of medical observations. This book ran into many editions; the Cowlshaw Collection contains one of the last, dated 1716. Tulp is best known as the chief figure in a famous painting by Rembrandt, but his book has been studied by medical historians as a source of early descriptions of spina bifida, vesical calculi, cranial surgery and beri beri. The book is also a mirror to Dutch society in a great period of European history.

Donald Simpson graduated in medicine in 1949. He specialized in neurosurgery, and underwent postgraduate training in the Radcliffe Infirmary, Oxford, under J B Pennybacker, and later under T A R Dinning in the Royal Adelaide Hospital. He is now Emeritus Neurosurgeon in that hospital and in the Women's and Children's Hospital, and titular Clinical Professor in the University of Adelaide.

He has written articles on the history of neurosurgery and on other historical topics. He is the curator of the museum of the Neurosurgical Society of Australasia. For many years, he lectured on neuroanatomy to trainee psychiatrists.

Professor Emeritus Gabriel Kune

WORLD LEADERS SURVIVING SERIOUS ILLNESS: FRANKLIN D. ROOSEVELT & POPE JOHN PAUL II

(The Medical Knowledge of Shakespeare - JC BUCKNILL, London:Longman & Co, 1860)

The global consequences of decisions made by world leaders whilst seriously ill is now coming under increasing scrutiny by historians. Less well studied has been the quality of medical care and the degree of transparency communicated to the world about the state of their health.

Franklin Roosevelt (FDR) and Pope John Paul II were chosen as examples for this presentation, since they are perhaps at the two ends of the spectrum regarding secrecy about the state of their health, their medical and surgical consultants, and the quality of medical care when they were seriously ill, as well as the outcomes for the world following some of the major decisions they made during this time.

FDR in his last years was secretive about his health, and with one exception was given indifferent medical advice, arguably hung on to the Presidency for too long, which at least for Europe, contributed to some negative outcomes.

In contrast, John Paul II when quite ill, was open and communicative about his illness, had the services of high quality medical and surgical consultants, and together with his spirited will to survive, greatly contributed to favourable political outcomes and to European and world stability.

Some of the issues around leaders becoming seriously ill, as illustrated here, remain with us. An examination of the past may be at least a small beginning towards history not repeating itself.

An ethnic Hungarian, born in 1933 in what is now Slovakia, Gabriel Kune and family settled in Australia in 1948. He graduated MB BS in 1957 from the University of Melbourne, and received surgical training at the Royal Melbourne Hospital, St Mary's Hospital and Guy's Hospital in London, and at the Lahey Clinic in Boston, obtaining his FRACS in 1962, FRCS in 1963 and FACS in 1966. He was surgeon at the Royal Melbourne Hospital 1967-77, Professor of Surgery in the University of Melbourne 1977-88, and Emeritus Professor since 1989. He was Arris and Gale Lecturer at the Royal College of Surgeons of England in 1970 and Hunterian Professor in 1976. He received his MD from the University of Melbourne in 1988.

He is author of seven books: two on biliary surgery (one of them translated into Italian and Japanese), four on the causes, prevention and early detection of cancer (one translated into Chinese), and the other a biography of the prominent Australian, John Saunders with a foreword by the Prime Minister, Mr John Howard MP. He has contributed chapters to 24 books and has over 220 other scientific publications

Professor John Royle & Mr George Somjen

VARICOSE VEINS: HIPPOCRATES TO JERRY MOORE

(Jerry Moore and some of his contemporaries - BK RANK, Melbourne, Vic: The Hawthorn Press, 1975 and Severall chirurgicall treatises - R WISEMAN, London: Printed by R. Norton and J. Macock, for R. Royston, 1676)

Varicose veins are such an obvious malady, it is not surprising that treatments were advised from ancient times. If one looked in any of the old books in the Cowlshaw Collection, one could find some reference to them. We will confine our observations to a few.

Hippocrates in the 4th Century BC advised compression bandages. Galen in the 2nd Century AD advocated excision of the veins with a blunt hook. He believed that noxious humors were the cause of the ulcers and used starving, purging and bleeding to eradicate them.

Ambroise Pare in the 16th Century still believed in Galen's concepts and thought that curing an ulcer may prevent the escape of the noxious humors which would then travel to other parts of the body. Nevertheless he used compression on the ulcer of his captor to secure his release as a prisoner of war.

Guy de Chauliac in the 14th Century described the precursor of the Unna boot and Wiseman in the 17th Century used a laced leather stocking to achieve adequate compression. Both Guy and Wiseman were subjects of papers by Kenneth Russell. In the 17th Century William Harvey described the circulation of the blood and so dispelled the noxious humor theory.

In 1868 John Gay described ligation of the veins around venous ulcers but his operations were at times complicated by infection.

The pathophysiology of varicose veins and the theory of venous reflux were described in detail during the 19th century. The relationship between venous hypertension and stasis ulcers of the legs also become well known.

Surgical concepts of how to eliminate reflux were developed at the same time, although, testing the recommended surgical interventions became possible only after the advent of aseptic surgery and the introduction of safe anaesthesia.

In 1896 only two years after Trendelenburg's publication on great saphenous vein ligation, William "Jerry" Moore, a Melbourne surgeon responded by suggesting modifications of the procedure.

Moore was an eminent surgeon of his time and also a colourful personality. He tested his technique of great saphenous vein ligation on 22 patients, most of them presenting with advanced leg ulceration. Moore reported excellent outcomes with rapid ulcer healing in all instances.

Most of his recommendations are still valid in the 21st century. We perform high ligation of the great saphenous vein from a transverse incision in the groin, exactly as he described it. Our patients also go home soon after surgery and resume their normal activities.

Jerry Moore's pioneering work should be remembered as a major contribution to the advancement of venous surgery.

John Royle was a vascular surgeon in Melbourne until he retired in 2003. He held many positions in vascular societies and in the College as well as serving on local hospital committees and state and federal government committees. He was a visiting professor overseas on several occasions. He wrote over one hundred scientific papers.

He produced two scientific surgical films both of which won prizes locally and in the United Kingdom. Inspired by John Cleese, he developed the idea of a video drama to portray some of the problems associated with HIV, with particular reference to 'safe' surgery in the operating theatre. This idea was approved by College Council and then financed by the Commonwealth Government. He produced 'Old Dogs and New Tricks' which proved to be an outstanding success, providing the catalyst for significant changes in operating theatre attitudes and techniques.

John has had an interest in art all his life. While in the United Kingdom in the 1960s he and his wife developed a keen interest in antique silver, English oak furniture and porcelain. As a frequent visitor to the College for his many commitments, he became very interested in the College treasures: the portraits, the antique silver and other memorabilia that have been given to the College.

A qualified MD Budapest, MS Melbourne, FRCS Edinburgh and FRACS, Mr George Somjen is currently the Senior Vascular Surgeon, Peninsula Health Services, Frankston Hospital, Melbourne, Victoria.

Dr Craig McBride

BELIEVING IS SEEING - THE HERNIAE OF MORGAGNI

(De sedibus et causis morborum. G B MORGAGNI. London. A Millar & T Cadwell, Translated by B Alexander M.D., 1769)

In 1719, at the age of 79 Morgagni published what is widely recognised as his greatest work *De sedibus, et causis morborum per anatomen indagatis*, (Seats and causes of disease investigated by means of anatomy). In this work he correlates the clinical symptoms and signs of patients with their postmortem pathology. By insisting on an understanding of anatomical pathology as the basis for diagnosis, prognosis and treatment Morgagni was moving further away from both Galenic anatomy and humoral pathology. This work stands as one of the cornerstones of medicine.

In Morgagni's own words "For those who have dissected or inspected many, have at least learn'd to doubt when the others, who are ignorant of anatomy, and do not take the trouble to attend to it, are in no doubt at all." In an era where anatomy teaching of medical students is decreasing this is increasingly apposite. Anatomy is not immutable, and history still has lessons to teach.

Clinical experience has led us to question our understanding of the anatomy of central diaphragmatic hernia. This hernia is first described in *De sedibus*, and is thus commonly known as Morgagni's hernia. This hernia is commonly described as occurring through a parasternal defect, in a relatively poorly muscled area of the diaphragmatic rim. There are however photographs, descriptions and radiological images of Morgagni's hernia that clearly show central herniation. There are not one, but two types of Morgagni hernia. The first is retrosternal, central, and congenital. The second is the more commonly accepted parasternal defect, and is probably an acquired hernia. An examination of 'De sedibus' shows that both herniae were described by Morgagni, although he does not make a clear distinction between the two. Central herniation has not often been recognised in print subsequently, and these herniae are usually described as lateral or bilateral. Has an expectation of what we expect to see caused us to dismiss the evidence of what we actually see rather than seeing is believing, with Morgagni's herniae it's more a case of believing is seeing.

Craig McBride attended medical school when anatomy and anatomical dissection were large parts of the second and third year curriculum. By the end of medical school he thought he knew enough anatomy to be a doctor. By the time he'd passed the Part I examination of this college he thought he understood anatomy enough to be a surgeon. A deceptively simple anatomy question from one of his mentors has led back through journals, into medical history, and finally to an original description by an octogenarian anatomist in the early 18th century. The answer to the question is contained in this original work, but over time has evolved into an inaccurate understanding. So then, what exactly are Morgagni's herniae?

Mr Philip Sharp

DISSECTION: TABOOS AND CULTURAL CHANGES

(De venarum ostiolis, Hieronymus FABRICIUS ab Aquapendente 1603 SPRINGFIELD: Charles C. Thomas, 1933. (Facsimile edition) and Exercitatio anatomica de motu cordis et sanguinis, William HARVEY Frankfurt, 1628)

Dissection is one means whereby man can truly study man. Very early in his evolution, man compared death with a 'long sleep'. Terror and flight were among his first reactions to death followed by the idea that the dead live on as spirits and ghosts. Contact with the departed, in any way, was dreaded.

During the period from 5000 BCE to about 300 BCE, little anatomical knowledge prevailed. A corpse was preserved, burnt or entombed to prevent any insult to it which might embitter its ghost. Any attempt at dissection or mutilation constituted a sacrilege of the greatest magnitude.

The first human dissections were by Herophilus and Erasistratus in about 300 BCE. Although Galen was one of the greatest medical men of all time, he made few contributions to our anatomical knowledge.

All branches of knowledge began to deteriorate following the devastating incursions of the Goths.

It was during the Renaissance, that some came to grips with the superstitions that prevailed. The birth of the science of dissection was to transform people's understanding of their sense of identity, their relationship of their minds to their bodies, and even their feeling of location in human society and the natural world. It was not possible 'to know our bodies, to know oneself' (Nosce te Ipsum) unless taboos were overcome.

Girolamo Fabrici d'Acquapendente (1537-1619), an Italian surgeon and anatomist, succeeded Gabriel Fallopius at the University of Padua. The first clear description of the valves of the veins, in his *De venarum ostiolis* (1603), provided his pupil William Harvey (1578-1657) with a crucial point in his argument for blood circulation. His *De formato foetu* (1600) contained the first detailed description of the placenta and opened the field of comparative embryology.

Understanding the body, through the study of anatomy, was the key to a new philosophy. Rational analysis and description replaced traditional remedies. From the older metaphysical teachings, filled with metaphors, a new science emerged, with plain unadorned language. Despite this, taboos remain today.

Philip Sharp is a general surgeon in Sydney. He graduated in medicine from the University of Sydney in 1972, and obtained his Fellowship in 1980. He has recently been awarded a Fellowship of the Australian College of Biomedical Scientists.

He is secretary of the RACS Section of Surgical History, and has enjoyed presenting several surgical history papers at Annual Scientific Congresses. His paper on surgical footballers was especially well received.

He is on the committee of the NSW Society of the History of Medicine. But his real interests, he insists, are rugby, rowing, jazz and red wine!

KENNETH RUSSELL MEMORIAL LECTURERS



1991	Prof Harold Attwood
1994	Dr R Andrew Cuthbertson
1996	Prof John H Pearn
1998	Prof A Wyn Beasley
2000	Prof Donald A Simpson
2002	Prof Alan J. Thurston
2004	Hon Prof Sam Mellick