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**Front:** Lithograph of founder of the Melbourne Medical School, Anthony Colling Brownless, by TH Maguire, 1850.

**Erratum:** The back cover of *Chiron*, 2010 erroneously attributed the Chiron drawing to Maggie Mackie. This heraldic image was commissioned by founding editor Peter Jones, for use on commemorative items. Maggie then traced the essential elements of the image into the strong design we have now incorporated onto the commemorative ties and scarves being produced for the 150th anniversary of the Melbourne Medical School.

Chiron is published by the Melbourne Medical School. Contributions from staff, students and alumni are welcome. Enquiries and correspondence should be sent to the editor, Liz A Brentnall, Advancement and Communications Unit, Faculty of Medicine, Dentistry and Health Sciences, 4th Floor, 766 Elizabeth Street, The University of Melbourne, 3010, Australia.

The editor would like to thank Darren Rath for designing this issue and John Bedovian for his production assistance.

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Designed by Darren Rath®

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Looking back to find the Future

On the threshold of our 150th anniversary it is timely to reflect on the proud history of our Medical School. The determination and foresight of our founders were remarkable, particularly considering our very humble beginnings, with inaugural lectures given to our first three students by a secondary school chemistry teacher in his own laboratory. This first lecturer, John Macadam, was a medical graduate (MD) of the University of Glasgow and is described by Greg de Moore in this issue as a wonderful polymath. It is noteworthy that in 1857, Macadam was admitted to the degree of MD (ad eundum gradum) at the University of Melbourne – five years before he taught our first students and only eight years before his untimely death at 38. Another University of Glasgow medical graduate, James Jamieson, is also remembered in this edition, on the 100th anniversary of the prize in clinical medicine named in his memory. The commencement of honorary admission of doctors to our medical degree is not what we celebrate next year, however, but the origin of medical education in Australia itself, encapsulated in our byline: ‘Making doctors since 1862’.

Our anniversary is also an opportunity to reflect on the many great and small consequences arising out of the lives lived by our graduates. Mary Lane and her colleagues from the class of 1915 inspire us through their lives, well lived in the service of others, anchored to the present by their personal generosities, just as Kim Yeoh and Jenny Hayes illustrate the meaning so many of our students and alumni discover while working the world over in places that lack our resources.

Mindful that this anniversary is but a milestone on a continuing journey, our current students, the embodiment of our future, will participate very actively in the events of 2012, as described by Melissa Lee, who leads our Med50 student ambassadors. Sitting alongside this initiative will be the inclusion of the stalwart tradition, Med Medleys, in our 150th Anniversary program. Plans for a special performance of this irreverent revue, are described by Yiannis Efstathiadis, who starred this year’s Medleys performance, and was among the 310 students welcomed this year into the first cohort of our new MD.

As described by driving force behind the new MD curriculum, alumnus Geoff McColl, the course began with an auspicious launch as our students were introduced to the human challenges we face as clinicians and welcomed as junior colleagues in medicine. All students register with the Medical Board of Australia (chaired by alumna Joanna Flynn), are vaccinated, and undergo police and working-with-children checks – early reminders of their significant professional responsibilities. Final year medical student Tamara Vu, an entrant in the 2011 Peter Jones Elective Essay Prize competition, has written an insightful comment on learning about the responsibilities inherent in medical practice and how to deal with its complexity and uncertainty.

The acknowledgement of our 150th anniversary by the Friends of the Baillieu, through their purchase of Mattioli’s Discorsi, is symbolic of our heritage in the study of medicine and underscores our celebration’s resonance throughout the University.

From humble beginnings, the University has moved to its current international rank of 14 in Clinical, Pre-Clinical and Health, as rated by the Times Higher Education Supplement. While not wanting to put too much emphasis on these university league tables, it is worth reflecting on the University’s motto, Postera Crescam Laude, translated as ‘I will grow in the esteem of future generations’, and considering how this has been achieved. Without doubt, our medical graduates’ achievements, in Australia and internationally, have been prodigious, as have the teaching and research of our academic staff. Our relationships with teaching hospitals and affiliated research institutes are also of utmost importance to our reputation and performance.

We continue to strengthen and expand these partnerships and the opening at Sunshine Hospital of a shared teaching and research facility with Western Health and Victoria University is one of many joint projects with our partners. This esteemed reputation, built through the deeds of our academic staff, our partners and our alumni, enables us to recruit outstanding people from Australia and across the world, some of whom, as usual, are highlighted in these pages.

I trust you will enjoy reading this edition of Chiron, named after the oldest and wisest of the centaurs, a great teacher and mentor to Asclepius. It was Peter Jones who commissioned the image of Chiron that we are using increasingly as the symbol for the University of Melbourne Medical Alumni Society. My best wishes to all our alumni at year’s end, I hope it affords everyone some time to relax in the company of family and friends. I also hope you will join us next year to celebrate this major milestone in the history of your Medical School.

James D Best, MBBS 1972, MD 1989
Head, Melbourne Medical School
EXHIBITIONS

A Med Student’s Life

Memories, ephemera and photographs of student days collected from Melbourne medical graduates from the 1860s to today.

Medical History Museum, 2nd floor, Brownless Biomedical Library, The University of Melbourne
Thursday 8 March–Friday 24 August 2012

A Body of Knowledge

Two exhibitions across three venues exploring the differing perceptions of the human body through art and through the various approaches to teaching students the functions, intricacies and wonders of medicine and dentistry.

The Art of Teaching: Models and Methods

Incorporating models, moulages, notebooks, photographs and illustrations from the extensive collections of the Harry Brookes Allen Museum of Anatomy and Pathology, the Henry Forman Atkinson Dental Museum, the Medical History Museum, and other University collections, this exhibition will highlight the fascinating objects and materials used in 150 years of biomedical teaching at the University of Melbourne.

Leigh Scott Gallery, 1st floor, Baillieu Library and the Medical History Museum, 2nd floor, Brownless Biomedical Library, The University of Melbourne
Thursday 13 September 2012–Sunday 20 January 2013

The Anatomy Lesson

Artists and anatomists share a long history of imagining the body, using their knowledge of what can be ‘seen’ to reveal and understand what is ‘unseen’—the life that lies beneath the surface.

The Anatomy Lesson includes images found in the many departments and collections associated with the University. With a thigh from the River God Po, the foot of an Etruscan statue and a head by contemporary artist Vivian Shark LeWitt, this exhibition pulls together a diverse array of body parts to create a wondrous whole.

The Ian Potter Museum of Art, The University of Melbourne
Thursday 13 September 2012–Sunday 20 January 2013

SPECIAL LECTURES

Dean's Lecture Series
Featuring medical school staff and alumni: Professors James Bishop (Cancer Medicine), Stephen Davis (Translational Neuroscience), Patrick Kwan (Neurology), Fernando Martin-Sanchez (Health Informatics), Terry O’Brien (Medicine, RMH), Christos Pantelis (Psychiatry) and Paul Waring (Pathology)

Miegunyah Lecture
Professor Stephen Holgate from the University of Southampton School of Medicine
November 2012

Halford Oration
Sir Peter Morris (MBBS 1957), Nuffield Professor of Surgery Emeritus, Oxford
Melba Hall Thursday 5 July

MED 150 AMBASSADORS

The year’s events will be made possible by the integral involvement of 150 Medical Student Ambassadors. Medical alumni will be welcomed, guided, assisted and informed by current students of the Medical School at all our events during the year.
150th Anniversary Program

150th GALA DINNER

Royal Exhibition Building, Carlton Gardens
Saturday 15 September 2012, 6:30pm for 7pm

“No birthday is complete without a party.”

Join your fellow graduates, teachers and colleagues to celebrate 150 years of Melbourne Medicine.

This postcard reproduces a photograph taken by JW Lindt, a photographer who worked in Melbourne between 1876 and 1881.

Designed by Joseph Reed, who also designed the Melbourne Town Hall and the State Library of Victoria, the Royal Exhibition Building and its many temporary annexes, were built specifically for the Melbourne International Exhibition, which opened on 1 October 1880.

By 1880 the Melbourne Medical School had been granted faculty status (1876) and 46 of its students had graduated in medicine. In that year the Medical Students Society was formed, at a mid-year meeting called by two students, Felix Henry Meyer and Thomas Rupert Henry Willis, who both graduated later that year. Lecturer James Jamieson was elected first President of the society later that year.

In 1880 the University of Melbourne also saw the first entry of women students, to the Arts Faculty, the Medical Faculty would follow suit in 1887.

Perhaps chief of the many important civic functions of the Royal Exhibition Building was the opening of the first Commonwealth Parliament of Australia, although it soon moved to the Victorian State Parliament House, supplanting the Victorian Parliament, which moved into the Exhibition Building.

The use of this gracious, historic landmark for the Gala Dinner, in celebration of 150 years of medicine at Melbourne, is intended to dispel memories of exams and move us towards a future at least as grand as this beautiful building.

HOW TO BOOK

Registration for all events will be open in early 2012.

Individual invitations and further information will be sent out regularly during the year and available online.

FOR FURTHER INFORMATION

Contact our staff at the Melbourne Medicine 150th Anniversary Office:

c/- Advancement and Communications
Faculty of Medicine, Dentistry and Health Sciences
The University of Melbourne
4th floor, 766 Elizabeth Street
Victoria 3010 Australia
T: +61 3 9035 3861
E: medicine-150@unimelb.edu.au

See the full program being distributed to all medical alumni early in 2012.

Check the Melbourne Medical School 150th Anniversary website:
medicine150.mdhs.unimelb.edu.au
An Australian Legend: Tom Wills and a tale of two doctors

By Greg de Moore

This portrait, C1857, was taken soon after Tom Wills arrived in Melbourne from England, a short time before he called for a foot-ball club to be formed.

Tom Wills

Tom Wills was a man consumed by sport.

He was born in New South Wales in the year 1835, on a bleak landscape called Captains Flat near Canberra; the game of Australian Rules football was created by a New South Welshman. Never let a Melburnian tell you otherwise.

As a child he lived for a time in a tent with his mother and father in the Grampians, western Victoria, and befriended the local Djab wurrung Aborigines. Tom was a lone white boy growing up in the midst of black children.

When 14 years old Tom was despatched to Rugby School, England where, amongst the elms and soft fields of Rugby, he learned three things: how to play the school’s unique football, the craft of cricket and how to drink beer.

Returning to Melbourne at the end of 1856, Tom was a handsome man. When he paraded on the field, women admired and men envied his figure. Independent and a wanderer, he was soon playing cricket for clubs throughout the colony.

In 1858 he famously wrote to a newspaper proclaiming that these colonies should have a foot-ball club. The following year he sat in a pub and, with three other men, penned the first-known rules of Australian Rules football.

This is a story about Tom Wills. Tom Wills created the game of Australian Rules football, and was our first great cricketer. His life, also, was a bridge between indigenous and non-indigenous Australians. He died by suicide.

This is also a story about two doctors. Two doctors who, in very different ways, influenced the life of Tom Wills.

The first is John Macadam, the man who delivered the first-ever lecture at the Melbourne University Medical School; the second is Patrick Moloney, a medical student in that very first lecture.

Aborigines. Tom was a lone white boy growing up in the midst of black children.

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John Macadam gave the first lecture of the new Melbourne University medical course in 1862. He also co-umpired the first publicly recorded Australian Rules football match.

Tom Wills (striped shirt and blue cap) with Victorian cricketers c1859.

Wills was not content with an empty declaration and set out the key elements needed to start this game. His cousin later recalled:

But when T.W. Wills arrived from England, fresh from Rugby school, full of enthusiasm for all kinds of sport, he suggested that we should make a start with it. He very sensibly advised us... to work out a game of our own.

And so he did.

Dr Macadam

Most readers will, I dare say, claim no knowledge of Dr John Macadam. But everyone has heard of macadamia nuts. Yes, the nut is named after this very Dr Macadam.

A wonderful polymath in an era before specialisation robbed careers of variety, John Macadam was chemist, medical doctor and politician. He was born near Glasgow and arrived in Melbourne in 1855. A string of accomplishments decorate his CV: member of the Victorian Parliament, honorary secretary of the Royal Society of Victoria, secretary of the Exploration Committee of the Burke and Wills expedition.

But it is for football that we now recall him. The first publicly recorded Australian football match took place between Scotch College and Melbourne Grammar on the rolling paddocks next to the Melbourne Cricket Ground in 1858.

Tom Wills was one umpire, John Macadam the other. What qualifications Macadam had for the post, other than being a chemistry master at Scotch College, we don’t know.

The game was chaotic:

The ball was frequently in the northwest corner of the park, and was at one time taken by a Grammar School player behind his own goal and right round the other side of the cricket-ground fence. This seemed, however, carrying the thing too far, and, on being appealed to, Mr Thomas Wills, who acted as umpire decided that the ball was out of bounds, and it was accordingly brought back.

Fours years later, in 1862, the Melbourne University Medical School opened. Dr Macadam dispensed with his football attire and delivered the first lecture (chemistry) in the new medical school. Sitting in this first ever medical lecture was Patrick Moloney.

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Death in Queensland

While Dr Macadam delivered his first lecture to the new medical students, Tom Wills found himself living in the Queensland outback. A handful of months earlier his father had been slaughtered in Queensland, by Aborigines, one of 19 white settlers killed, leaving an indelible stain upon Tom for whom nightmares thereafter dogged his sleep.

Despite his father’s murder, in late 1866, Tom Wills undertook to create an Aboriginal cricket team in western Victoria. He brought them to Melbourne playing on the MCG on Boxing Day 1866. Up to 10,000 people lined the streets and ground to watch them play. This team, minus Tom, later toured England as the first Australian cricket team.

Tom’s act in creating this team is one of the great moments of healing in Australian history but is sadly unknown by the majority of Australians.

Tom Wills, now drinking heavily, was always desperate for money. He lamented:

‘My boots are nearly off my feet & I should feel much obliged if you could forward me 2.’

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‘My boots are nearly off my feet & I should feel much obliged if you could forward me 2.’
The Melbourne Hospital and Dr Moloney

In the last decade of his life, his name no longer on centre stage, Tom Wills’ life, descended into disarray and alcohol abuse. In early 1880, by now an alcoholic, Tom stopped drinking suddenly, and developing Delirium Tremens (DTs), was admitted under Patrick Moloney to the Melbourne Hospital.

The Melbourne Hospital, the city’s oldest, stood like a medieval landmark on Lonsdale Street. Constructed of heavy stone, it was a tall, dark building, brooding over the daily life of Melbourne. Each of its three floors, lined by tall oblong windows like heavy eye sockets, peered out from the stone building onto the street below. It arose, grim, like an asylum.

The poor feared the Melbourne Hospital as a place where one went to die or be subjected to experiments for unproven medical treatments. Wards were a spartan affair: wooden floors, a simple bedside table with a porcelain bowl and jug for the day’s ablutions. Vases of flowers – dim embers of hope – were dotted about to dispel the smell of incipient death.

Inside, the business of medicine was practised. In the centre of an operating theatre lay a table for a patient. The table was draped with a white sheet and on it rested a pillow at one end for the patient’s head. Perched over the table, was a set of semi-circular benches ascending like a terrace to the back of the room: rows of medical students were spectators to the craft of 19th century surgery.

James Barrett, still a medical student in 1880, recalled that wounds were largely treated without any regard for antisepsis:

Whilst a student I do not recollect a single abdominal perforating injury or operation wound which did not end fatally … Surgeons kept operating coats of which they were proud, as they were a mass of blood stains. Gloves were unknown, and the instruments were often held in the mouth.

Patrick Moloney was Tom Wills’ doctor, one of the three students who commenced the inaugural medical course in 1862. As a student, Moloney found the operating theatre a repulsive place, physically overcome by the gruesome procedures, sometimes having to be taken there forcibly.

Moloney was probably the most interesting among his friends. Many years afterwards, medical students of the day recalled him as ‘tall, handsome … with a naughty twinkle in his eye’.

Tom Wills, was admitted to Ward 21 under Moloney, and recorded as: ‘Patient admitted semi Delirium Tremens state tremulous movements of hands – was rather obstinate – refused to remain in hospital’.

The medical records detail, precisely, the treatment Wills received. Potassium Bromide to induce sleep, digitalis to soothe a violent heart and iron salts to improve nutrition. Moloney was noted as liberal in providing ‘medical comforts’ such as brandy, wine, whisky and champagne for ailing patients. Tom did not receive such ‘comforts’.

Death was not uncommon in DTs: exhaustion and dehydration could drain the mightiest of physiques.

When Tom was admitted his tremulous hands were the most conspicuous sign of the growing potency of his DTs. Quick to startle and quick to misjudge, dishevelled and wide-eyed, it would not be long until he started to mistake shadows as assassins.

Within hours of admission, Wills absconded from hospital. The following day, tormented by delusions and hallucinations, he took his life.
Patrick Moloney was a well-known poet and friend of the Melbourne artistic establishment. He was also a Melbourne Hospital physician and doctor to Tom Wills.

The medical notes detailing Tom Wills’ brief admission to the Melbourne Hospital on the day before his death.

Tom Wills' gravesite in Heidelberg lay untouched for 100 years: a patch of dirt, a raised mound with nothing to indicate the man beneath. In 1980, the Melbourne Cricket Club returned and upon this anonymous rise of soil righted the neglect of a century by erecting a headstone to its most famous son.

Greg de Moore, MBBS 1982, BSc (Med) 1979, PhD, is a consultant psychiatrist at Westmead Hospital, Sydney. He discovered the medical notes of Tom Wills at Royal Melbourne Hospital. The resultant biography Tom Wills was shortlisted for the National Biography Award. Greg spoke at last year’s Sydney Writers’ Festival.

The medical notes detailing Tom Wills’ brief admission to the Melbourne Hospital on the day before his death.
Mary’s Christmas Album

By Liz Brentnall

Fifth Year Medical Students in 1914. Pictured are: JV Guest, ER Kerr, FF McMahon, H Halloran, ER Welch, ST Appleton, RG Woods, K McK Dog, AS Anderson, M Sorokiewich, FC Colahan, FC Fitzpatrick, JC Harper, JE Shelley, J Hughston, K Moore, WHH Bilrell, G Sleeman, MR Hughes, HB Graham, GC Scantlebury, R Burnie, VB Alexander, JEM Wigley, AN Dickson, AEW Hartkopf, PN Whitehead, LL McMahon, HW James, Miss G Wisewould, Miss M Lane, NL Pichard, WS Newton, TA Wright, RW Hogg, Miss EN Balaam, Miss AL Bennett, Miss EJ Davies, W Rogerson, GC Bury, W O’Shanassay, E Glassford, J Shanosay.

Names under individual portraits: DC Pigden, HP Brownell, WL Henderson, C McAdam, FL Trinca, KA McLean, AW Bretherton, TG Fetherstonhaugh.

Photo courtesy Medical History Museum
Tucked away in a box on a shelf in the University of Melbourne Archives is a small photo album of black card and paper, labelled ‘Christmas 1913’. According to captions inscribed on the pages, the photographs in the album were taken around the ‘Old’ and ‘New’ Melbourne Hospitals. The album was left to the Archives by 1915 alumnus, Mary Lane, along with a collection of subject notebooks from her medical studies.

Between 1912-16, the Melbourne Hospital was rebuilt in phases on its Lonsdale street site. New wards were officially opened in July 1913 then, after a period for public inspection, occupied by patients in the first week of August. The August 1913 issue of Speculum, noted caustically that mention of the opening had been in the daily press, but ‘that no notice or news of the ceremony reached the M.S.S. Courtesy of this order may be taken as an index of the general attitude of the M.H. authorities towards the students as a body.’ Much of the Speculum commentary over this period is openly critical of the Melbourne Hospital management.

By December that year, however, Speculum noted that Melbourne Hospital students would soon be occupying their new quarters and that ‘some of the furnishings for the women students’ rooms has arrived, and to all appearances is really first class, and much better than was expected.’ These photos were taken, perhaps, as mementos, celebrating the students’ move into their new quarters.

The first photograph from Mary Lane’s ‘Christmas 1913’ album features: Annie Bennett, Mary Lane, Gwen Wisewould and Jean Davies. A skeleton is suspended from the centre of the wooden structure behind Mary and white coats hang from a row of hooks on the wall behind them. University of Melbourne Archives.

The caption to this last picture in the album, reads ‘On New Melbourne Hospital’. Mary Lane is on the left and Jean Davies in the middle. The legend accompanying the album names Annie Bennett on the left although, scrutinised closely against the first photo, she is Gwen Wisewould. University of Melbourne Archives.

The first features four women, noted in an accompanying legend as: Annie Bennett, Mary Lane, Gwen Wisewould and Jean Davies – all medical students at the University of Melbourne in 1913. The following pictures each depict three of the women, wearing increasingly more relaxed, even playful demeanours.

What did the future hold for these women entering medicine at the beginning of the First World War? Many men left Australia and civilian practice to join the war effort, opening up positions for women, but maintaining an upward career trajectory thereafter could be difficult. As women’s issues journalist, Rosalie Warne, noted in the Argus in 1954: ‘The need for them was so great that for a few brief years they were even paid full male rates. The post-war return to sanity soon put an end to that, however, and they were cut down to 75%.’ These women all remained single and spent their lives in medical practice.

Annie Bennett is reported in the Argus, in 1916, as treating two motorcyclists at the Melbourne Hospital who had been injured in a collision, then later, as practising at Mooroopna, and finally dying in 1940 ‘due to heart trouble’.

Gwen Wisewould established a private practice in the city, St Kilda and Elsternwick, working in ENT and general surgery at the Queen Victoria Hospital, and teaching anaesthesia to medical students at the Alfred. She left Melbourne, however, in 1938 to take over the practice at Trerthern. Gwen served the Victorian country town and its surrounding community devotedly until her death in 1972, four years prior to which she donated $20,000 to the University of Melbourne, establishing the Truganini Scholarships for Aboriginal students.

Jean Davies spent 26 years in South Korea, working as a medical missionary with the Presbyterian Women’s Missionary Union (PWMU) at the Paton Memorial Hospital at Chinju. Evacuated from Korea in 1942, she returned to Australia where she was a popular speaker at meetings of the PWMU. Jean then moved to Ernabella Mission Station in South Australia where, it was reported, she intended researching eye disease in the local Indigenous community.

Mary Lane and her sister, Ethel, an Arts’ student, were non-resident students of Queen’s College while at university. The Queen’s College archives also hold a few items which belonged to Mary: souvenirs of a trip to London, British Medical Association (BMA) meetings and concert programs, echoing the album’s sense of holding on to the memories of small but significant events.

After graduation, Mary built her career in Melbourne and was in a senior enough role to be listed by the Argus among a group of Melbourne medicos attending the 1934 BMA Congress in Hobart. By 1940, she was travelling to Western Australia in her role as Medical Inspector of Schools to meet, and inspect, children evacuated from Britain. By 1954, she was Chief Medical Inspector of Schools.

A sense of history prompted Mary to collect and keep mementos of meaningful times in her life, and to ensure their preservation for the future. Perhaps her appreciation of the historic value of small acts also played a part in her decision to bequeath her residuary estate to the University ‘for research within the Department of Psychiatry into the aetiology and treatment of mental illness’.

We are indebted to Mary for six photographs recording the companionable delight of four women medical students entering their clinical training, just as we are for her thoughtful gift to advance research in psychiatry.

Research for this article was conducted using the online issues of Speculum (UOM), The Argus and the Australian Dictionary of Biography (NLA). The author is grateful for the interest and assistance of archivists at the University of Melbourne, the Royal Melbourne Hospital and Queen’s College.
150th Program Launch

In July 2011 the Melbourne Medical School 150th Anniversary Program was previewed by a group of alumni who had responded to our survey of medical school alumni in the 2010 issue of *Chiron*. The opinions of alumni have been used to design the 150th program and this night was an opportunity to thank them for their interest and their valuable suggestions.

Hosts James Angus, Dean of the Faculty of Medicine, Dentistry and Health Sciences, and James Best, Head of the Melbourne Medical School, spoke briefly about the anniversary plans and Chancellor Elizabeth Alexander welcomed guests back to the University. Guests included three former Deans of the Faculty: Professors Emeritus David Penington, Graeme Ryan and Gordon Clunie and a group of medical students eager to talk with alumni.

A farsighted initiative for Melbourne's western suburbs was realised this year with the opening of the Western Centre for Health Research and Education.

The product of a close partnership between Melbourne University, Western Health and Victoria University, this centre will house 300 clinicians, researchers, educators and students from medical, nursing, allied health and many other health professions, and is the new home for our Western Clinical School. The centre's exceptional clinical training facilities are attracting students and professionals to Melbourne's fastest growing region.

The many benefits of co-locating and integrating clinical teaching and research add value to the centre placing it in the vanguard of clinical teaching, research and research translation.

Medical students commenced at the new facility this September. Built at the Sunshine Hospital, the centre is equipped with simulation and clinical training wards for studying medical, surgical, obstetric, emergency, paediatric and aged-care practice. Students also spend one day a week in a primary-care community base.

Following the move of Susie Shears to the position of manager of the University's cultural collections, the Medical History Museum has appointed Jacqueline Healy as curator.

With extensive experience in the arts and museum sectors, Jackie comes to the University from Bundoora Homestead Art Centre, where she was the inaugural Director from 2002 to 2011.

Jackie is enthusiastic about the extensive program of events planned to celebrate the 150th Anniversary, in particular the exhibitions, which will bring together material from collections across the University to focus on the history of medicine and medical teaching. The Medical History Museum is planning to further develop its links with the teaching program, the academic community and general public. Plans for the future include...
relocating the museum and the redevelopment of the website to increase accessibility to the collections and exhibitions by alumni, students and the general public.

Wilma Beswick (MBBS 1972) recently retired from the Clinical Deanship at St Vincent’s Hospital.

Since commencing in the role in 1989 she has been stalwart in her leadership of medical education for the hospital, the Medical School and the University of Melbourne. Her commitment to teaching is reflected in the excellent academic results of St Vincent’s students and their continued success as doctors in their chosen fields of practice.

Fortunately, Wilma continues her association with St Vincent’s Hospital remaining actively engaged in several roles.

AMA Collection and Clock

This beautiful timepiece is also a presentation piece. A large fob-style clock, too large to carry about, is cradled inside a silver case, which bears the inscription describing its first presentation: ‘To Dr A.E. Rowden White from two grateful patients M.E. and S.S. Wakley 1911’. A small card and short note tucked inside the case, under the clock offer clues to other presentations in its history.

On the first, a newspaper death notice for Victoria Wakley, daughter of James and Elizabeth Wakley, is stuck, accompanied by a note recording that she donated the clock to the Museum of the MSV (Medical Society of Victoria) and dated 1974.

The second is a thank you note, addressed to Dr Dickson, who was Medical Secretary of the MSV from 1935-65, and is dated 21 December 1962, from whom, like the signature, is unclear. The author thanks Dr Dickson:

‘for your kindness and assistance at the Stawell Oration and the dinner on Saturday. I have appreciated the invitations and the consideration shown me and the tributes paid to uncle.’

The author then offers Dr Dickson some trinkets which may be ‘of interest to your museum. ‘There is a beautiful old watch, silver watch box and ... all of which belonged to a son of James Walkley of the *Lancet*’

The clock, in its silver case, was most recently presented by Harry Hemley, President of the AMA to James Best, Head of the Melbourne Medical School, in May this year, at a celebration to mark the donation of the AMA collection of historical documents, objects and photographs, which had been on loan to the Medical History Museum since 1994.

**Moving from his position as Chief Medical Officer of the Australian Government in May this year, James Bishop, AO has taken up the newly created Chair of Cancer Medicine.**

A Melbourne medical alumnus from the year of 1972, James will also be inaugural head of the Victorian Comprehensive Cancer Centre. His expertise in the areas of cancer services, education and research will be invaluable in guiding the creation of what will be the largest clinical and research cancer centre in Australia.

The University is joined by the Peter MacCallum Cancer Centre, Melbourne Health, the Ludwig Institute for Cancer Research, the Walter and Eliza Hall Institute of Medical Research and the Royal Women’s and Royal Children’s Hospitals in this project.

**Leading clinical academic, Stephen Davis, has taken up the inaugural Chair of Translational Neuroscience.**

Also a 1972 medical graduate, Stephen has a well-deserved reputation as a leader in clinical care and research, developing innovative models of caring for patients with neurological disorders.

This role, based in the newly established Melbourne Brain Centre, will enable Stephen to enhance collaboration between the neuroscience programs operating throughout the University and its teaching hospitals.

Stephen Davis will deliver a Dean’s Lecture in 2012 ‘Saving brain in acute stroke: Opening the artery and stopping the bleeding’

**In February this year, Fernando Martin-Sanchez took up his appointment as Professor and Chair of Health Informatics.**

With wide ranging research interests related to eHealth, modelling and simulation, and the role of informatics in the development of personalised medicine – including genomic and nano technologies, Fernando’s expertise
in these cutting edge areas will be invaluable in navigating convergences between medical science and technology.

**Fernando Sanchez** will deliver a Dean’s Lecture entitled ‘Information processing in medicine: from particle to population’ in 2012.

**Stephen Trumble’s leadership role in the development of the new MD at the University of Melbourne should ensure a seamless move into his new role as Chair of Clinical Education and Training Development.**

With a background in general practice, at Monash University and the RACGP, Stephen moved to the Department of General Practice at Melbourne University in 2006. More recently, he has been closely involved in establishing new clinical schools at the Western and Northern hospitals as part of the development of the new MD – all while continuing in general clinical practice.

In this new role Stephen will be responsible for ensuring that we continue to offer our medical students a liberal choice of challenging and diverse clinical placements.

**Leann Tilley is the new Chair of Biochemistry and Molecular Biology at the Bio21 Molecular Science and Biotechnology Institute.**

Moving her team from La Trobe University in the middle of 2011, Leann brought her well-recognised expertise in the area of cell biology and drug development related to the malaria parasite Plasmodium falciparum to the Institute.

A particular focus for her team is on the unusual protein trafficking pathways the malaria parasite uses to display virulence proteins at the erythrocyte surface and in understanding the remarkable transformation that allows the malaria parasite to be transmitted from a human host to a mosquito vector.

She believes that a convergence of the life and physical sciences will be needed to answer the major medical and biotechnology questions of the 21st century.

**Moving across Royal Parade from the Walter and Eliza Hall Institute of Medical Research, Jose Villadangos recently took up the new Joint Chair in Biochemistry and Molecular Biology and Microbiology and Immunology.**

The dual nature of this appointment acknowledges the overlapping qualities between these two disciplines and the advances and benefits arising from their respective researchers joining forces. Jose will continue his own research, which straddles biochemistry, cell biology and immunology, while working to foster collaborations between the departments.

**Sue Walker’s appointment as the Sheila Handbury Chair of Maternal Fetal Medicine, represents a successful collaboration between Mercy Health and the Mercy Health Foundation, the Faculty of Medicine, Dentistry and Health Sciences and the generosity and vision of Mr Geoff Handbury, AO.**

The chair is named for Sheila Handbury, Geoff’s mother, in appreciation of the excellent care she received at the hands of the Sisters of Mercy during the 1930s.

Sue, a 1989 MBBS Melbourne graduate, has been Director of Perinatal Medicine at the Mercy since 2005 and will continue to provide exemplary leadership in teaching, research and clinical practice, focusing on the health and wellbeing of mothers and their babies during pregnancy.

In April this year, Sue gave a Dean’s Lecture entitled ‘The fetus as a patient’ in which she addressed critical elements of managing some of Victoria’s most vulnerable and complicated pregnancies.

A recording of this lecture is available as a podcast from: [www.mdhs.unimelb.edu.au/event/fetus-patient](http://www.mdhs.unimelb.edu.au/event/fetus-patient)

**The Apex Foundation Chair of Developmental Medicine, based in the Department of Paediatrics at the Royal Children’s Hospital was taken up this year by Katrina Williams.**

With an extensive background in community child health and disabilities, Katrina is bringing her expertise to bear on the many issues surrounding the diagnosis and management of autism and the level of support offered to families of children with disabilities.

Of her vision for an increased collaborative effort to establish best practice in the diagnosis, treatment and care of those with autism, Katrina says: ‘It’s better to bring together the best brains in all sorts of areas so that we can gain some collaborative momentum. There is no one person or one group in a lab that will have all the answers.’

Launch of the new Melbourne MD

By Geoff McColl

Week one of the new Melbourne MD took our first 330 students by surprise. With hardly a lecture in sight, they were challenged to consider the ideal characteristics for a doctor in the twenty-first century. They began by watching a video clip from the popular medical drama *House*, which demonstrated the vagaries of Dr House’s clinical reasoning as well as some moral and ethical dilemmas. This stimulated a week-long discussion matched by a variety of activities designed to prompt each student into considering their future role as a doctor. In one activity, students heard firsthand patients’ stories about their diagnosis, treatment and relationships with their medical practitioners. These stories, many of them powerfully emotional, provided a unique perspective of the patient journey in the health care system.

In another activity, students were transformed into patients and their carers and taken through a series of role-plays in the Hospital@Ormond (played out within Ormond College). Confronted with a busy triage desk complete with an obstreperous drunk man and surly triage nurse, they were interviewed in a foreign language, consented to a procedure they didn’t need, followed lines on the floor that went nowhere and met the now infamous Miss Pain (who proceeded to tear strips off a young resident who had the audacity to ring her). These rather confronting set of role-plays were followed by a debriefing session in which students were able to discuss their feelings about the chaos they had encountered in the Hospital@Ormond.

Providing a balance to these activities, students were inspired by words of wisdom from Michael Kidd (Melbourne MBBS 1983 and Executive Dean of the Faculty of Health Sciences at Flinders University) and Hugh Taylor (Harold Mitchell Professor of Indigenous Eye Health at the University of Melbourne) as well as local senior clinicians who acted as mentors for each of the groups.

From week two our students’ view moved from the horizon of graduation and their future medical career to the more proximal endeavour of acquiring the requisite biomedical and clinical skills for the first year of the medical program. In a mixed educational model using case supported learning (a derivation of problem based learning) and associated lectures and practical sessions, students took their first steps building the scaffold of their future medical learning. Clinical colloquia, which bring all of the students together in their groups with senior clinicians and educators to extend their learning with related new cases and relevant bioscience are an innovative feature of this integrated form of learning. The use of hand held response devices (clickers) engaged each group in the discussion and problem solving of these sessions. Running alongside these colloquia are tutorials on the principles of clinical practice, in which students begin to build the core clinical skills of communication, the physical examination and clinical reasoning.

These sessions are aligned with teaching on the systems of the bioscience, so that in a single week students will consider, for example, the physiological causes of shortness of breath, practice how to interview a patient with shortness of breath and learn how to examine the respiratory system. Integrating the acquisition of this knowledge with relevant skills will serve the students well in their future clinical years.

Another highlight of the first year of the MD has been the inaugural student conference. This new subject aims to use the setting of a conference to address broader issues relevant to medical practice. The first conference covered topics of leadership, research, medical history, ethics, communications, indigenous health and inter-professional practice. The student conference will grow over the ensuing years with the addition of each new MD cohort until all four years of medical students attend the student conference in 2014 and thenceforth. It is envisaged that the students themselves will drive much of the student conference program in future.

The first year of the Melbourne MD has been well launched with an ongoing enthusiasm for innovation and student focus as generated in its development. Challenges lie ahead but the foundation of the MD program is solid.
Foundation Week

The new MD students attended two dinners during Foundation Week. The first was a ‘Global Health’ dinner, the brainchild of Ormond’s Master Rufus Black. For this dinner each student picked a number out of a hat and was allocated to a table representing either a third-world, middle class or affluent country.

According to student Brigid Wolf, the meals represented: ‘what may be eaten in each of those countries, for instance people allocated to third-world countries, found their dinner on a rug on the floor, with rice and basic curries and a small quantity of food. People in the middle class countries were on tables, with more food and perhaps juice, whilst the affluent group had a dining experience complete with alcohol, and, I think, steak.’

The dinners, said Brigid, highlighted inequalities between people of different countries, and the random allocation symbolised ‘the lottery of life: ‘any of us could have been born into poverty or affluence; it was simply a matter of chance.’

The colloquium preceding the dinner focused on health disparities around the world, with questions about the burden of disease in third world countries, government spending on health etc. ‘Interestingly’, Brigid noted, ‘when we were asked: “who from the affluent table, chose to give some of their food to the poorer table?” whilst heaps of food was left on the rich tables, only some students had given it to their poorer colleagues. The dinner was definitely a highlight of the week.’

Foundation Week ended with the inaugural Melbourne Medical School Dinner, which introduced the students to the philosophy and ethos of the medical school. At a preceding colloquium students were challenged to define the characteristics of ‘The Good Doctor’, having spent the week looking at different aspects of the doctor’s role and were encouraged to set their sights on achieving that ideal over the next four years.

After drinks in the courtyard with music from Apollo, the students and mentors reconvened to enjoy their meal punctuated by an address from Harold Mitchell Chair of Indigenous Eye Health, Hugh Taylor.

No Borders, No Boundaries

By Kim Yeoh

Specialists Without Borders, an Australian-based not-for-profit organisation, takes volunteer health-care professionals to developing countries to meet local healthcare needs through medical education. In September 2010, medical student Kim Yeoh was invited to join a conference in Kigali, Rwanda, run by Australian consultant surgeons for Rwandan doctors. Her experience of working in intensive care as a physiotherapist in Melbourne and London allowed her to see intensive care in Rwanda in a meaningful context.

Standing in front of Chantal, a three-year-old girl with a severe head injury in intensive care in Rwanda, I realised she did not have a chance.

Kigali University Teaching Hospital is a 400-bed public hospital in the capital of Rwanda. The intensive care unit has nine beds and the barest of resources. Disposable gloves and oxygen facemasks are reused, the arterial blood gas analyser does not work and cannot be fixed and the portable ECG is out of paper. Only five of the nine ventilators worked, though all were being used. A paediatric patient who came in overnight was hand-bagged 24-hours-a-day in the emergency department.

Human resources are equally tight. The ratio of nurses to patients is 1:4 and only one anaesthetist is ever on duty in the hospital – responsible for overseeing the ICU, seven theatres and fifteen neonatal special care beds. One of the anaesthetists is Jean-Bosco, a self-effacing gentleman who kindly took me around the intensive care unit. It is hard not to feel that when critically ill patients in Rwanda survive and go home, it is nothing short of a miracle. It is also not difficult to conclude that many patients simply do not have a chance.

Chantal had been hit by a car and sustained a severe head injury four weeks prior to my visit to the intensive care unit. She remained unresponsive with a dense hemiplegia. Her family could not afford to pay the yearly wage
of US$200 to transport her to the only CT scanner in the country to determine the extent of her head injury and whether she required surgery. She had not received any neurorehabilitation and the window of opportunity for neuroplasticity was slipping away. A chest infection had developed and her tracheostomy blocked twice. I stood there, thinking that the most basic skills and knowledge I had learnt as a medical student, and as a physiotherapist working in intensive care, could have made a big difference to Chantal. At the very moment I was thinking this, Jean-Bosco, in the most humble manner said, ‘if you can come back next year and teach in the ICU, we would be extremely grateful’.

Immediately, I felt this was something I wanted to do: to give something back for the privilege and opportunity of studying medicine and for being so lucky to be born in a developed country. But I wanted to bring an intensivist with me.

It was not hard to convince Antony Tobin, from the intensive care unit at St Vincent’s Hospital, to teach in Rwanda. I simply spoke about the patients I had seen in Rwanda and invited him to come.

In September 2011 we taught critical care topics in the Specialists Without Borders medical and surgical conference in Rwanda and ran bedside teaching sessions in the Kigali Hospital intensive care unit. We liaised closely with Jean-Bosco, the physiotherapists and the nurses in the unit to coordinate teaching sessions to meet their local needs.

In 2012 we would like to realise a greater vision to coordinate a more comprehensive program involving a larger interdisciplinary team teaching in intensive care. Antony and I are each at different stages of our medical careers but are working towards achieving the same goal. There are no boundaries: it is simply teaching where it is needed the most.

Kim Yeoh is a Melbourne University graduate medical student at the St Vincent’s Hospital Clinical School and will be in her final year in 2012. She is also a graduate of The University of Melbourne Bachelor of Physiotherapy and is the SWB Australian Medical Student Representative.

Antony Tobin, a 1989 MBBS Melbourne graduate, is Deputy Director of Intensive Care at St Vincent’s Hospital in Melbourne.

For more information about Specialists Without Borders go to: www.specialistswithoutborders.org

Med150 Ambassadors
By Melissa Lee

The year 2012 marks 150 years of medical education at the Melbourne Medical School (MMS), the oldest medical teaching program in Australia. To recognise our humble beginnings, extensive tradition and the accomplishment of training some of Australia’s most eminent medical professionals, a program of events in 2012 will celebrate this historic milestone. Whilst designed to bring together alumni from home and abroad, the celebration of the 150th anniversary of the MMS would not be complete without the involvement of its current students. Students will be engaged in a multi-faceted ambassador program for this celebration.

The Med150 Ambassador Program will bring together and support a large team of student volunteers to act as ambassadors for this anniversary. Alumni will have the opportunity to engage with these future young doctors in mentoring and professional development roles.
It’s a pyrrhic victory. This battle is won, the cord released, but we know the war is already lost.

Peter G Jones Elective Essay

Each year, students in their final year of the medical course are invited to submit essays describing their elective experience for the Peter G Jones Elective Essay Prize supported by the University of Melbourne Medical Alumni Society and named in memory of Peter G Jones, inaugural editor of Chiron.

In the Valley

By Tamara Vu

I’ve been on neurosurgery three weeks when Mrs W presents to the emergency department, unable to walk, with a fist-sized lump in her thoracic spine. A pinched-faced, impossibly elderly Chinese woman, her progressive weakness has never been assessed. We prod the lump. Infection? Surely it’s a tumour.

That night, in the emergency theatre, her operation. The registrar makes a confident vertical incision. Immediately, thick, yellow, foul-smelling fluid gushes from the incision and the lump abruptly deflates.

There’s some bleeding,’ he calls to the anaesthetist. We reposition the retractors. There is a long vertical furrow in the rubbery tumour, filling with blood: no mere capillary ooze. The anaesthetic machine is beeping; the anaesthetist keeps his eye on the screen.

‘Ease up, she hasn’t got much to spare!’ The registrar looks worried. The pool continues to well up.

‘We might need some help.’ The on-call consultant is requested.

‘What’s going on?’ He’s quite young; he was on his way to the beach with his kids.

‘It’s all tumour. Big cystic cavity, drained that, just drying to dissect down to the cord, but there’s a bit of bleeding.’ The anaesthetist weighs in.

‘Her BP’s dropping’. The consultant scrubs and returns to assess the expanse of grey tumour, a ditch down the middle, oozing.

‘How old is she, mate?’ he asks.

‘Seventy-nine,’ the anaesthetist snorts, ‘and about 40kg.’

‘Not sure I would have opened up this one, mate’ says the consultant. The registrar nods silently.

‘There’s some bleeding,’ he tells me, eyes on the incision, as he coagulates. This isn’t normal tissue. There are thousands of small, friable vessels. He grabs the suction; I weakly press with a pack.

‘There’s some bleeding’ he calls to the anaesthetist. We reposition the retractors. There is a long vertical furrow in the rubbery tumour, filling with blood: no mere capillary ooze. The anaesthetic machine is beeping; the anaesthetist keeps his eye on the screen. The ditch widens, deepens, the blood still welling up, dutifully suctioned.

‘Wait, look, that’s the spinous process.’ I can’t see much. An alarm is hovering at 78. The machine alarms. The machine alarms. The anaesthetist pokes his head back over the green drape: the blood pressure is dropping.

‘How much is in the suction?’ A nurse checks. A litre and a half.

‘I haven’t used much wash,’ says the registrar, peering worriedly into the wound. There is no talk of children and holidays, no jokes now.

They move faster with the monopolar, the suction, but the blood is gushing now, filling the ditch, blocking our view of the diathermy tip.

‘Suction, suction,’ barks the consultant.

‘She’s at 80 systolic,’ the anaesthetist, warningly.

He calls for emergency O negative. The registrar is pale. The consultant grimly tosses the monopolar aside for a keratin punch, snipping aside mutant, twisted fragments of bone, the tumour-ridden remnants of the vertebral arch.

The suction slurps; it has reached two litres. A ridiculously small bag of blood is hung. The anaesthetist scans the monitoring, eyes narrow. The alarms continue to ring.

‘Can you turn that off?’ snaps the consultant.

The suction blocks and blood surges up in the deepening cavity. The consultant snaps off the metal endpiece and stuffs the plastic cord deep into the wound.

‘I really wouldn’t have opened her up’ he says, grim-faced, eyes on the field.

The suction splutters as the pool empties. The anaesthetist hangs a bag of saline. The systolic is hovering at 78. The registrar jabs down with the now-unblocked sucker.

‘Easy, that’s the cord!’

‘I know, I know.’ Burn, spit, suction, burn again. Smoke hangs in the air.

I think, with a jolt, of Mrs W’s ancient, silent husband, and her son, waiting outside. My eyes sting. The blood pressure is perilously low. The waveling capnograph trace rises. Then, they stop.

‘We’re done, mate’, ramming the diathermy into a quiver.

I gasp. No, the monitor beeps, she’s still alive. The suction sputters and hisses quietly. I peer into the field.

A valley, four fingers’ width, impossibly deep, in the middle of Mrs W’s back. At the bottom, the pale thecal sac, a dull strip of beige tape, starkly exposed. The rased-off pedicles of five vertebrae flanking it. And the walls of the valley, both sides, solid, sickly tumour, its creamy bulk singed and gritty, oozing blood.

It’s a pyrrhic victory. This battle is won, the cord released, but we know the war is already lost. Again, my eyes sting. This woman is going to die.

Not here in this theatre, in a deluge of bleeding too rapid to stem. No, her blood pressure will rise, hesitantly, but surely, as the registrar sutures together the walls of the valley, tumour to tumour, with thick purple nylon. Her pulse will settle. She’ll wake.

No, she will die later this month. After a silent infarct on the ward. After a resigned transfer down to palliative care. After days of confusion and pain. She’ll die disoriented, afraid, unable to walk, red and yellow fluid still oozing from her wound.

We silently close, a neat row of horizontally locked sutures through skin that barely bridges the residual tumour. She’s wheeled, fragile, tiny, to recovery, and we bid each other a bleak goodnight.
Alumni interested in being involved in the 150th Anniversary Med Revue should contact:

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Med ‘Medleys’ Revue – an invitation to alumni
By Yiannis Efstathiadis

“I came here to this country with nothing; now, I have everything I ever wanted”. So my grandfather would proclaim as he regaled us with his tales of character-building episodes from his migration from Greece to Australia, and how he built a life around such hardships. I’m sure if the Med Revue could speak it would tell a similar saga: possibly with less of an ethnic accent.

Approximately ninety years ago the Med Revue began as the Med Medleys, a humble half-time show, exclusively for medical students at the University of Melbourne Medical Ball. Over the ensuing years (a few lost, possibly to the Second World War) with the help of some very funny people and dedicated students, the show has evolved to become its own entity, doing what it does best: making people laugh.

The Revue is run by medical students and students in courses related to medicine (biomedicine and science). The audition process is arduous. Great character and much spiritual and mental resolve is required: hopeful performers must show up at the first few rehearsals. Over the years this lack of audition has attracted the meek and mild, who through plenty of rehearsal, bloom when it comes time to perform. We are regularly blessed with actors and stage crew who not only want to have fun, but are genuinely dedicated to the show.

Every year we perform three nights of non-stop side-splitting, comedy routines that are sure to keep you giggling at the memory until next year’s show, and often beyond.

We sell out annually to a full house via word-of-mouth. In other words, we beg our friends and family unyieldingly to come and to bring as many people as possible.

Over the years our collaborative minds have brought out such shows as ‘The Derryn Hinchi Code’, ‘Mortal Wombat’ and last year’s show, ‘The Dalai wears Llama’.

This year was no exception, with ‘Lock, stock and two smoking squirrels’ (no squirrels, locks or stock portfolios were harmed in the making of this title).

Next year, as most of you would know, is the Melbourne medical school’s 150th anniversary: a momentous occasion to be celebrated. And guess what? We’ve been asked to be a part of it! So next year, the Med Revue will be a part of the celebrations, part of the big party. Are you excited? Because we are! Our enthusiasm is increased by the prospect of performing not only for our regular audience, but also for the medical school alumni.

This is where I will ask for your input: we are looking for alumni to aid in the show next year. We realise that you all have jobs and are very busy but hope you will match our enthusiasm to be part of this once-in-a-lifetime occasion.

What we are looking for is:

Mentorship: it would be an amazing experience for current students to learn from the comedic giants of the past – in both acting techniques as well as comedic materials. The plan is to run some workshop style sessions or for alumni to help us write sketches.

Performance involvement: This is still under review, but we may have the capacity to expand our cast to include alumni.

Financial assistance: Yes, yes I know, nobody likes talking about money. However, when it comes down to it, the Med Revue is a non-profit organisation. We bring our audience laughter and all our proceeds go to a charity that we nominate early each year.

That is us, in a nutshell: past, present and future. We look forward to meeting many alumni during our 150th anniversary year and hope that many of you can make it to the Med Revue.

Yiannis Efstathiadis is in the first cohort of students in the new MD course.
Alumni Stories

PICTURES WORTH A THOUSAND WORDS

Photographs are a way of tracing the past, of accessing the stories – the plans, the possibilities, the promises – of days gone by. Just as every home has its collection of photos – in albums, in frames and nowadayas, on computers – we want to expand our collection of photos which tell stories about our alumni.

If you have photos from your student days that you think would interest other alumni or contribute to a visual archive of the Melbourne Medical School please contact Andi Jansz Gallent of the MMS 150th Anniversary Team at:

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Tennis Anyone? This picture, sent in by Lorraine Baker (MBBS 1979), is of the MBBS class of 1979, taken in late March 1978, on the last day of their Obstetrics and Gynaecology rotation at the Mercy Hospital.

Scholars Return

Kate Robson and Ye Chen, recently returned to Melbourne from Oxford, reflect on their time as Rhodes Scholars. Ye Chen is pictured right with fellow Australian Rhodes Scholars and ex-President of the Australian Senate Paul Calvert at The Eagle and Child in St Giles’, Oxford.

For Ye, the Rhodes Scholarship was an opportunity to undertake a DPhil in Transplantation Immunology with Professor Herman Waldmann, well-known for his pioneering work on the CAMPATH-1 antibody and for discovering seminal concepts in transplantation tolerance such as ‘infectious tolerance’. His exploration of the in vitro and in vivo characteristics of a specialised group of tolerance-inducing T cells was published in the Journal of Experimental Medicine. Other advantages included the richly stimulating environment at Oxford (giving recitals at the Holywell Music Room and playing Australian Rules Football for Oxford against Cambridge).

‘The experience has been deeply enriching and I am keen to apply the knowledge and skills in my chosen field of Ophthalmology’ says Ye.

Kate’s Scholarship enabled her to spend two stimulating years researching a MPhil in History of Medicine, based at the Wellcome Unit for History of Medicine.

Her thesis on the history of chronic illness in medical institutions explored the nineteenth-century concept of the ‘incurable’ patient, tracing the development of prejudices that persist in clinical practice today. Kate says she found the most rewarding realisation ‘that many aspects of our work we consider as entrenched traditions are, in fact, products of relatively recent change. There is great potential for ongoing reappraisal of how we ‘care’ for or ‘cure’ the growing burden of chronic illness.’

‘This experience has reinforced my appreciation of how the historical origins of the medical profession can shed light on contemporary questions, such as the future evolution of our professional identity, or the shifting foundations of our healthcare system. This is a thriving sphere of debate from which clinicians are at risk of becoming increasingly isolated as the technical demands of our specialties increase.’

Excited about celebrating our rich local history with the 150th anniversary of our medical school, Kate encourages medical practitioners and students to delve into our history and grapple with the big-picture questions that shape our profession.
A family trip with a difference
By Jenny Hayes

It’s a long time since I was in clinical practice!

Since graduating as part of the University of Melbourne MBBS class in 1982 I have spent most of my career lecturing in Anatomy. So it was with significant trepidation that I located my stethoscope in January of this year and boarded the flight to Arusha, Tanzania, en route to the School of St Jude.

St Jude’s was founded in 2002 by Gemma Sisia, also a University of Melbourne graduate. It is a charity funded school offering a free quality education to over 1500 of the poorest children of Arusha and boarding for over 900 of those. The students from prep to grade two arrive on buses each day, the older children board at the school. In addition, the school employs 340 locals and purchases essential goods from the local community.

Each child receives an annual health check, provided by a team of volunteer health professionals, usually responding to requests for help disseminated via the monthly newsletter and word-of-mouth. Thus it was that my son Nigel (a second year Monash Law/Performing Arts student) and I joined the 2011 team of four doctors, two nurses and five assistants. Our aim as a team was not only to examine each of the 1500 children, but also to establish a database and equipment kit for future visiting teams. Kind family, friends and colleagues donated stadiometers and eye charts so that in the future measurements can be taken using the same, good quality equipment.

Over two weeks in February the excited children arrived, class by class, for their checks. Really, Nigel’s job was the hardest of all, as the assistants had to weigh, measure and check the visual acuity of each child before lining them up to wait ‘quietly’ for the doctor. It was wonderful to watch my 6’2” son high-fiving the tiny preppies when measuring was complete, and the all important reward sticker had been placed on the backs of their hands.

With very little time available for individual examinations and an inability to undress the children, each doctor took a brief medical history, examined hair and skin, conjunctivae, ears, teeth, throat and chest, and recorded all examination findings for the database. Any abnormalities were reported to the school nurse who communicates directly with the parents of the child. It was made clear to us that we were not there to treat the children.

The children were on the whole remarkably healthy, especially those in the senior classes, who had been recipients of daily healthy meals over several years. Previous health checks had reported a prevalence of systolic murmurs and anaemia but the addition of mchicha, a green leafy vegetable, to the daily menu and establishment of a rigorous worming schedule seemed to have reduced the incidence. There were many cases of fluorosis and poor dental hygiene, the usual skin rashes, earwax and reasonably well-controlled asthma. Some of the children are HIV positive.

It was a privilege to be part of daily life at St Jude. We lived in the visitors’ accommodation, ate lunch with the students, sat in on junior and senior assembly and boarded the brightly painted school bus trip home with the junior students, before debriefing over staff drinks at the tin shed watering hole by the front gate after school. It was such a wonderful experience for Nigel and me; we can’t wait to go back!

Jenny Hayes is a Senior Lecturer in the Department of Anatomy and Cell Biology, University of Melbourne.
John Macadam – A Busy Man
By Liz Brentnall

They say that if you want something done, ask a busy person to do it.

In John Macadam’s short, busy life his ten years spent in Melbourne had a considerable impact upon the city and its medical community.

Arriving in 1855 to take up a position teaching chemistry at Scotch College, Macadam also became the Melbourne Medical School’s first lecturer, in chemistry, in 1862. His professional activities, however, reached well beyond these roles: twice member for Castlemaine in the Victorian Parliament; Postmaster General for a short time; Government Analytical Chemist and Health Officer for the City of Melbourne; Honorary Secretary to the Royal Society; and Secretary to the Victorian Exhibition of 1861, held by the Royal Society to prepare for inclusion in the London International Exhibition of 1862.

A busy man indeed, and likely to attract a little public controversy.

The cartoon, ‘DR MACADAM’S FINEST BUBBLE,—JUST “BLOWN”’ appeared in the Melbourne Punch of 7 August 1862. Why mock this doctor, so active in the city’s public and professional life?

In July 1862 an inquest was held into the death of Mary McGee, wife of an engineer at Emerald Hill, who had died in an explosion. After an adjournment for Macadam to test the kerosene available throughout the city, he gave detailed evidence to the inquest that led to a verdict that Mary McGee ‘died from some burns caused by the explosion of inferior kerosene, said to have been purchased from Messrs. McEwan and Co., of Melbourne’.

The jury added that: ‘there was not the ordinary precautions, observed in not applying the usual simple test that the vendor was aware of’.

This verdict prompted a kind of moral panic among the populace of Melbourne. Letters appeared in the press from people signing themselves ‘Safety-Lamp’ or ‘Fireman’ asking for or proffering advice about the safety of kerosene.

Later that month Macadam tabled an additional report to the city council, published in The Argus, which set out in detail the results of his analysis of samples taken from kerosene dealers around Melbourne, under two headings: ‘Safe Samples’ and ‘Dangerous Samples’ and including the names and addresses of dealers, the results, and his conclusions.

The moral panic became a kind of media storm as kerosene merchants sought to defend themselves, and competing and dissenting expert opinions were sought. The debate persisted, with counter claims and justifications in the press over many months.

In a furious debate between local businesses with profit margins to protect, and a comprehensive body of independently compiled expert evidence, Melbourne Punch knew which side its bread was buttered, and sided with business. The Punch cartoon was accompanied by a satirical play, a ‘farce’, in which Macadam, as ‘McHaggis’, confuses kerosene with brandy and ends up in court, with a black eye, to hear the magistrate pronounce the following verdict on his conduct:

Dr Barnum Blepheger Du Barry McHaggis, the Bench consider you fairly convicted of a vast deal of humbug, tomfoolery and mischief-making in scheming for your own personal advantage under pretence of protecting the public. As, however, we are of
the opinion that the official body by whom you were engaged ought to have known better than to give you the chance, and are much to blame for so doing, and as you have been already roughly handled by an irate populace, the Bench have concluded to set you at liberty. You will, however, be required to give security for your future more sensible behaviour by resigning the situation of guardian of the salus populi, which you at present hold and enjoy.

In the play, the injured publicans and kerosene dealers then ‘adjourn to the nearest hostelry for cheerful conversation and fermented refreshment’.

The accusation of scheming for his own personal advantage arose perhaps out of a letter from Richard Eades, MB, Chairman of the Committee of Health, which The Argus published on 15 July. The letter attempts to quell the panic amongst the people of Melbourne by alerting them to a discovery, made by Macadam after presenting his initial report, for rendering the kerosene ‘quite safe’.

John Macadam’s formidable reputation must also have extended at least as far as New Zealand as it was during passage to Dunedin, to appear as an expert witness in a criminal case in 1865, that he died.

According to John Drummond Kirkland, a medical student who was assisting Macadam on the voyage, he had been taken unwell soon after setting out. At one point he called for the Captain, to whom he gave his watch, his diamond ring and described some other property he had on board. He was found dead in his bed the next morning. The verdict returned by the jury in Otago was that Macadam: ‘died by the visitation of God, in a natural way—to wit, of excessive debility and general exhaustion.’

With gratitude to Greg de Moore for alerting me to the existence of this cartoon and the story surrounding it.

James Jamieson – A Clinical Legacy
By Liz Brentnall

A century ago this year, the first Jamieson Prize was awarded, to Francis Esmond Keane, a final year medical student at the University of Melbourne. As now, the prize went to the graduating student judged as having the best clinical skills of their year.

James Jamieson (1840-1916) was born in Scotland and educated in medicine, under the influence of Joseph Lister, at the University of Glasgow. He migrated to Australia in 1868, working in general practice, in public health and at the local hospital in Warrnambool before moving to Melbourne in 1877.

His career encompassed appointments at the Royal Melbourne and Alfred Hospitals, a period as health officer for the City of Melbourne, as editor of the AMJ (1883-87), and lecturing to Melbourne medical students—in obstetrics and diseases of women and children (1879-87) and in the theory and practice of medicine (1887-1908).

The Prize was endowed upon Jamieson’s retirement from teaching, partly by a contribution from his family but also, notably, by subscriptions from his students. On 21 June 1910, among a number of proposals due for consideration by the University Senate, was the following:

Regulation for the “Jamieson Prize” in clinical medicine. The fund for the establishment of this prize has been subscribed by some of those who attended the lectures of Dr. James Jamieson during the period of thirty years, in order to provide a memorial of the services of Dr. Jamieson as lecturer in medicine. This prize will be awarded annually, at the final honour examination, to the candidate who obtains the highest marks in the subject of clinical medicine.

James died in 1916, survived by a son and two daughters. His daughter Margaret graduated in medicine, in 1906, as did her daughters, Mildred and Jean, in 1934 and 1937 respectively. Jamieson’s granddaughters topped up their grandfather’s prize with a gift of £300 in 1960.

There are wealthier prizes available to Melbourne medical students but the Jamieson Prize in Clinical Medicine is distinguished by the personal contributions made by Jamieson’s students and grandchildren. These individuals, recognising the influence Jamieson had on the development of critical practical skills and the resultant quality of their practice, saw fit to honour those skills and this teacher for generations to come.
Obituaries
Recorded with regret, the passing of...

Margaret Archer (MBBS 1948)
Rex Bennett (MBBS 1961)
Norris Bennett (MBBS 1963)
Simon Bernard (MD 2009, MBBS 1990)
Peter Bird (MBBS 1941)
Peter Blaubaum (MBBS 1944)
Mary Bremner (GDip– Ophth 1955, MBBS 1949)
Ida Bell Broderick (Matthews) (BSc (Hons) 1940, MBBS 1944, GDipArts (Crim) 1982, BA 1991)
Ian Chau (MBBS 1975)
Dorothy Cole (MBBS 1952)
Noel Colin-Thome (PGDip Periop Crit Care Echo 2006, MBBS 1985)
Ian Collins (MBBS 1949)
Colin Copland (MBBS 1944)
Robert Currie (MBBS 1953)
Francis De Crespigny (MBBS 1941)
George E Doery (MBBS 1949)
William Doig (MBBS 1946)
Gerald Duff (MBBS 1957)
Ronald Eisner (MBBS 1968)
Alex Elder (Gale) (BSc 1941, MBBS 1941, DipO&G 1947)
Bryan Galbally (MBBS 1949)
John Galent (MBBS 1948)
James Gardiner (MD 1948, MBBS 1943)
Oronsay Goodwash (MBBS 1964)
George Hale (MD 1959, MBBS 1953)
Allan Hall (MBBS 1944)
Eric Henry (MBBS 1950)
Kevin Hinrichson (MBBS 1946)
Brian Hoare (MBBS 1953)
Kathleen Hockey-McComb (MBBS 1947)
Bernard Hodgkinson (MBBS 1959)
Dorothy Hurley (MBBS 1945)

Beryl Jack (MBBS 1951)
John Kelly (MD 1953, MBBS 1949)
Frantisek Kopecek (MBBS 1959)
Keith Lipshat (MBBS 1943)
David Lowenstein (Grad Dip Psyc 1987, MBBS 1979)
Peter Lowenthal (MBBS 1953)
Peter MacCallum (MBBS 1954)
Pulteney Malcolm (MBBS 1962)
Leslie Markman (MBBS 1968)
Alex Marshall (MBBS 1953)
Robert Marshall (MD 2006, MS 1954, MBBS 1948)
Lesley Mitchell (MBBS 1981)
Vin Nursey (MBBS 1953)
John O’Brien (MBBS 1955)
Audrey Officer (MBBS 1949)
David O’Sullivan (MBBS 1953)
Ronald Peeke (MBBS 1951)
Emil Popovic (MBBS 1986)
Francis Robinson (MBBS 1949)
Graeme Salter (MBBS 1939)
Arthur Schwieger (MD 1948, MBBS 1942)
Robert Sellwood (MBBS 1943)
Wolfgang Siegel (MBBS 1959)
Angela Spiers (Marks) (MBBS 1970)
William Spring (G/Dip– Diag Radiol 1956, MBBS 1943)
Cecily Statham (MBBS 1946, BA 1943)
John Stephens (LLB 1991, MBBS 1966)
John Sullivan (MD 1979, MBBS 1967)
Peter Tiddall (MBBS 1953)
Murray Verso (MBBS 1949)
Saul Wiener (MD 1960, PhD1953, MBBS 1947)
Edwin Carlyle Wood (MBBS 1953)

Contributions
We are interested to receive and publish obituaries of Melbourne medical alumni, in Chiron and on our website.

Please contact or send obituaries to: Liz Brentnall, Editor, Chiron, 4th Floor, 766 Elizabeth Street, The University of Melbourne, Parkville 3010. T: (+61 3) 8344 5125 E: eabren@unimelb.edu.au
Rex Bennett was born in Melbourne in 1937. After a childhood spent in various Victorian towns, he attended University High School where he was a Herald-Sun Youth Traveller to UK in 1952, graduating with a Daffyd Lewis Scholarship.

From our first meeting, in the old Anatomy School in 1958, Rex and I remained close friends. I soon learnt he was a very competent drummer – he was an annual feature on the stage in the ‘Med Medleys’ band. He had a great flare for photography – still and movie – with his own photographic laboratory at home, and loved cars being a proud owner of a ‘Morgan’. We spent many an enjoyable Saturday or Sunday watching the hill-climb competitions in the Dandenong Ranges.

Suffering a slipped epiphysis at the age of twelve, Rex was only the second patient to receive a hip replacement at the ‘old’ Children’s Hospital in Carlton. Sixty-one years later the replacement was still intact, probably making it one of the longest surviving hip replacements on record. The replacement did not impede his active life until a couple of years ago, when he became wheelchair bound.

After graduation Rex spent a year at the Footscray and District Hospital before accepting a position in ICU and cardiovascular surgery at the Hamilton Hospital, Ontario, Canada. This was the stimulus for Rex to take on a career in anaesthesia and resuscitation. He headed to the UK taking a post in anaesthesia at Harold Wood Hospital, Essex, then another at St Mary’s Hospital, London.

Returning to Australia, Rex took on the position of Anaesthetist and Resuscitation Officer at the Gippsland Base Hospital in Sale. He was instrumental in setting up the hospital’s ICU and was civilian consultant to the nearby RAAF base. His life took a dramatic turn in 1968 when he was flown to attend to casualties on an Esso gas drilling rig in Bass Strait where a helicopter had crashed, seriously injuring a number of pressmen gathered on the platform. A ‘universal donor’, he arranged for a direct blood transfusion from himself to one of the more critically injured victims.

In 1969 Rex married Judy, a theatre sister he had met at St Mary’s. They moved to Murrwillumbah in northern NSW, then back to Victoria, to the Mornington Peninsula. Here he was a civilian consultant to RAN Cerberus and earned the respect, acclaim and gratitude of his peers – surgeons and GPs alike.

Rex and Judy’s decision to return to the UK in 1976 was a great disappointment to his patients, friends and colleagues on the Peninsula. Their return was short-lived however as they soon returned to Australia, settling in Horsham where Rex was Director of Anaesthesia at the Wimmera Base Hospital until his retirement in 1996. Again, he was responsible for setting up an ICU/pain clinic in the hospital – he truly believed no-one should endure pain.

In Horsham, Rex indulged his deep passion for teaching as clinical supervisor for fourth year students on rotation from RMH, and training junior doctors. He is fondly remembered by many for his enthusiasm and excellence as a teacher.

One student, now Professor Kate Leslie, remembers:

I remember my internship at Horsham Base Hospital with great fondness. It was my first rotation (in 1986) and the day I arrived was very hot and dry. We drove into town not knowing where the hospital was, but soon worked out it was the only multi-story building in town. As soon as we got down to work with Rex and Eddie Brownstein everything turned out okay. Rex was a very gifted teacher and an expert and calm anaesthetist, and I know that Eddie and the other surgeons trusted him implicitly. I owe a great debt of gratitude to Rex for inspiring me to take up anaesthesia, as I have found it a very fulfilling career.

In 1996 Rex and Judy retired to the UK to be closer to their daughter. He kept up his interest in photography and fostered another interest in steam and model railways. Following a brief acute illness Rex passed away in January 2011. He will be remembered for Rex for inspiring me to take up anaesthesia, as I have found it a very fulfilling career.

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continue his residency. Simon met Julie, an engineering graduate from Ann Arbour in Michigan, who had moved to Australia to undertake an MBA at Melbourne University.

This wonderful period in his life was interrupted when he was diagnosed with Hodgkin’s lymphoma. Simon’s medical career was put on hold while he underwent chemotherapy and radiotherapy. A tribute to Simon’s amazing personality and the support of Julie is that, aside from some hair and weight loss, many of his friends noted little change in his positive outlook and sense of humour.

Simon and Julie were married in San Diego at the end of 1995. On returning to Melbourne, Simon was selected for advanced training in plastic and reconstructive surgery. Their first child, Madeline, born in 1996, was followed in subsequent years by Max and Hugo. Despite the demands of working long hours and continuous study, Simon still found the time and energy to be with Julie and play an important role in raising their children.

On completing surgical training, Simon established his practice in plastic and reconstructive surgery, with public hospital appointments at the Royal Melbourne and the Northern hospitals. His relaxed and self-effacing manner disguised a dedication to both his patients and colleagues. Somehow he found time to complete a Doctorate of Medicine under the guidance of Professor Ian Taylor.

Established in practice and free of the restrictions that ten years of medical training had imposed, Simon indulged his greatest passion – time with Julie and the children. With Julie’s family in the USA and Simon’s auntie Alice and cousin Netta in Israel, as well as friends scattered over most continents, few opportunities to travel were missed and skiing, a pastime Simon had enjoyed since student days, became a favourite with the family.

Simon is survived by Julie, Madeline, Max and Hugo, by his mother Pat, and his brother Andrew and sister Lisa.

This account was put together by a number of Simon’s friends and colleagues.

Ida Bell Broderick

Ida Bell Broderick (Matthews) OAM

1919—2011

After finishing her secondary schooling at PLC, Bell Broderick wanted to become a veterinarian. With no degree course available then in Melbourne, and her father unwilling to have her travelling to Sydney alone, she commenced a science course at Melbourne University. During these years Bell met fellow science student Rodney Matthews, whom she eventually married in 1948. Rodney having spent three-and-a-half years as a Japanese prisoner of war in Changi. The only man she ever loved, Bell was attracted by his voice and sought his assistance with her studies, pretending to need help, so they could spend time alone.

After completing a science honours degree, Bell entered medicine, like her brother Warren.

After graduating in 1944, Bell focused her career first on paediatrics and later women’s and public health with residencies at St Vincent’s, the Queen Victoria and the Royal Children’s Hospitals.

After their marriage in 1948, Bell and Rodney purchased a family home in East Kew and began their married life. Bell adored the new house and life with Rodney and wanted to make it a family home. To her great regret, however, she was unable to have children. So the young female doctor and the agricultural-horticultural journalist adopted four.

Bell’s life revolved around family and work. In order to continue working while the children were young, they employed live-in mothercraft nurses, most of whom remained family friends.

In 1951, Bell joined the Melbourne City Council as a medical officer in communicable diseases.

Subsequently, as medical officer for maternal and child welfare, she was instrumental in developing infant welfare centres in inner Melbourne.

Eventually Bell was appointed Chief Medical Officer for the City of Melbourne. In the hundred or so years the position existed, she was the final incumbent, and the only woman to ever hold it.

In addition to family and medicine, Bell was a passionate scholar. In addition to her science honours and medicine degrees from Melbourne University, Bell also completed a Diploma in Child Health in London, a Bachelor of Arts and a Diploma in Criminology at Melbourne University, and, at 70 years of age a Master of Psychological Medicine.

Bell’s interest in preventive medicine, particularly as it applied to women and children, led to scholarships and overseas travel to further her knowledge in that field and in maternal and child health.

She served on a plethora of boards and committees during her career including a time as President of the Victorian Medical Women’s Society. Her special interest in women in prison, particularly those mothering children, saw her serve as a member of the Victorian Women’s Prison Council, working closely with Dame Phyllis Frost, a PLC colleague, to improve the lot of women inside. She advocated successfully for women’s rights to keep their babies when entering prison and helped develop parenting programs for them, at a time when most people were shocked at the thought of babies in prison.

In her later years, Bell worked four days a week counselling women suffering post-natal depression at the Grey Sisters in Canterbury, retiring from the role aged 83 in December 2002. In addition, for some time Bell also held a part-time position in the post-natal disorders clinic at the Mercy Hospital for Women.

Bell had a special ability to not worry about things that she could not change. She was a master at organising the world around her and created her own universe and reality and censored it as required. This could be maddening – when Bell snapped her fingers everyone came running – but when she thanked them with that lovely smile they never seemed to mind.

Bell also mastered the art of illusion: she could turn night into day. She could find the best in everyone and never held grudges. She didn’t care about appearances: clothes and make-up or how someone spoke counted for nothing. She filtered information and usually only ever accepted the good: the serious criminal may have had a difficult childhood; the slack, under-performing child was good at something else and of course the Royal Family could do no wrong.

On the dreadful day Bell’s health collapsed and she was hospitalised, two days before her death, the
Alexe Elder (Gale)

Alexandria Helen Elder (Gale)

1914—2010

Alexe was the oldest of four children, raised in a loving Presbyterian family whose parents worked hard in their grocery store to ensure their children's good education. After matriculating from Presbyterian Ladies College, Alexe commenced at the University of Melbourne where, with her passion and love of all things living, it was natural she study science with an interest in biology. Although Alexe intended becoming a teacher, upon joining the McCoy Society she met Freddy Wood-Jones the Professor of Anatomy, who encouraged her to pursue a career in medicine. Among the many lifelong friends she made at University was her future husband, Nairne Elder. They met towards the end of third year medicine, completed their clinical studies at the Alfred Hospital and, after graduating in 1941, were married while undertaking their short internship there. Married residents were new for hospitals: Alexe was meant to live in the nurses’ home and Nairne in residents’ quarters. Their married life thus began with some minor obstacles although bigger ones were just around the corner. After an internship of eight months, Nairne joined the army and was away for the remainder of the Second World War: three difficult years.

With the war over, a normal life recommenced in Ivanhoe and, with a growing family Alexe’s career took a different direction. Some enlightened hospital administrators came up with the idea of shared obstetric care in the middle of last century and Alexe provided antenatal and postnatal care in clinics attached to maternal and child health centres. She also was the Victorian State Venerologist and Medical Officer at Fairley Women's Prison in Fairfield.

Perhaps something about the combination of caring for women in this variety of settings directed Alexe’s later career decisions. During the 1960s she completed requirements of the Diploma of Psychiatric Medicine, except the twelve month residential component – a big ask for a woman with six children. Alexe was a medical officer at various state psychiatric clinics over many years, developed a great interest in marriage counselling and was involved with the Marriage Guidance Council of Victoria for many decades.

About the time that Alexe turned 60, when most of us are thinking of winding down, she started a private practice. Conducted from her study at home, she continued seeing patients into her early 80s. This practice was highly regarded. She was a consummate clinician when it came to psychological medicine and one of the few medical practitioners in Melbourne who provided specialised marriage counselling and sexual therapy for couples in the 1970s and 80s.

Alexe was never shy of exploring the human condition. She read incredibly widely in the areas of medicine, psychology, psychiatry, philosophy and religion in an attempt to better understand people and the way they reacted to their lives. The list of therapies she studied to help her patients was long and included elements of Freudian psychoanalysis, Jungian analysis, transactional analysis, psycho-drama, primal scream therapy, Gestalt therapy, rational emotive therapy, art therapy and hypnosis.

Some of this led to rather amusing left-field theories not the least of which was her twelve-foot-long stethoscope: for listening to people’s bowel sounds while she interviewed them. Clearly the hypothesis was that there would be some giveaway change in the nature of their abdominal rumblings. No-one was ever too clear how long this line of thought lasted.

Alexe was an active member of the Medical Women's Society and the National Council of Women for many years, providing mentorship to younger female medical graduates.

In ‘retirement’ Alexe travelled, taught at the University of the Third Age and was involved in the philosophy circle. positive aging and writing groups at the Lyceum Club. She is survived by five of her six children (her second daughter, Cathy, died in 1969), 15 grandchildren and ten great-grandchildren.

James Elder, MBBS 1931

Kevin Hinrichsen

1924—2011

Kevin William Hinrichsen was born on 7 December 1924, the eldest child of William Henry Hinrichsen, a Church of Christ minister and general practitioner at Thornbury, and Florence (nee Hall), a schoolteacher. His later schooling was at Scotch College where he was an outstanding under age athlete and footballer. His usual method of training was running against the cable trams and, for stamina, trying to race one from Clifton Hill up Ruckers Hill to Thornbury!

After matriculating in year eleven, Kevin commenced his medical course in 1941, the course shortened to five years at the expense of holidays as the war was in progress. He spent the latter part of his course in residence at Ormond College and was the youngest ever to graduate in medicine at the University of Melbourne, aged 21 years and 3 months on the day of his graduation. His two brothers Ian and Gordon, and his sister Gladys, were all later graduates of Melbourne.

Following his graduation, Kevin became a resident at the Royal Perth Hospital, a registrar the following year and in 1949 was made Assistant Medical Superintendent. He decided on a surgical career and travelled to London where he passed the examinations for his FRCS.
Following this he held registrar positions in England, the last with the Surgeon to the Royal Family, gaining much experience; ‘practicing on the Poms’ as it was always called.

Kevin returned to Melbourne in 1955 and soon passed examinations for his FRACS. Following this he became an honorary assistant surgeon at the Alfred Hospital working with Alwynne Rowlands and Graeme Grove, with whom he had a long association. He also became an honorary surgeon at the Austin Hospital, and later chaired the Department of Surgery. As these appointments were strictly honorary (until 1974) and his private practice was expanding, Kevin resigned from the Austin Hospital, maintaining his association with the Alfred, where he was appointed as Honorary Surgeon to Outpatients in 1958, and to Inpatients in 1972.

Kevin was always punctual and rarely wasted time. He was an excellent technician, regarded highly by theatre staff – the ultimate judges. It’s probably as a teacher that he is best remembered. He held regular tutorial sessions with students and enjoyed teaching his residents and registrars the basics of surgery, especially surgical techniques.

Kevin married Jill Smith in November 1962, and had a long and successful partnership for almost forty-nine years. Together they had two children, Peter and Lisa, and five grandchildren. As well as a career in medicine, Kevin developed interests in farming, yachting, and out-back travel. Jill was of great support in all these endeavours and family holidays almost always involved time spent on these activities.

In 1975 the early signs of Dupuytren’s Contracture appeared in Kevin’s right hand and he decided to retire from surgery and enter the business world. He went back to basics and attended several courses, but it wasn’t long before some of those in his group were wondering who should be giving the lectures.

In addition to other business and farming activities at Hallam, Kevin developed a car and medical equipment leasing business, which he used to help his colleagues who had ‘seen better days’, as well as the Aboriginal community. In his school boy days, Kevin developed a long standing friendship with Doug Nicholls (later Sir Douglas Nicholls, Governor of South Australia), then a League footballer and grounds man at Fitzroy, having first met at church in Northcote. In later life, Doug became very active in the welfare of his own people, and Kevin made several trips with Doug to the Gibson Desert area, west of Alice Springs. These trips together led to a Senate sub-committee hearing and the development of some remote medical clinics.

Outside his professional pursuits, Kevin had a passion for the Collingwood Football Club and yacht racing. Kevin was originally the medical officer and later the consulting surgeon at Collingwood. It is a tragedy that his findings and teaching on head injuries did not carry on after his retirement. He was later elected to the committee for some ten years and was active on the finance committee. He was instrumental in correcting the architect’s drawings of the new outer stand, as the stairs did not lead directly to bar! At Collingwood he developed some great friendships and it was here he first learnt the basics of finance. He was elected a life member on his retirement from the committee.

Kevin was taken yachting by one of his patients, and soon developed a love for the sea. For some years he crewed, but then bought a thirty-foot yacht, Trilby II. He was a member first at the Royal Melbourne Yacht Squadron, and then the Royal Victoria Yacht Club. Kevin and Trilby II were successful in inter-club competitions, Bass Straight racing, and competed in the 1971 Sydney to Hobart, when Trilby II was the smallest ever entrant at the time. In later years, Kevin chaired the Protest Committee for both the RMYS and RYCV, and was also in charge at two world championship regattas. Although capable of making hard decisions, he always felt he had failed if the matter could not be settled with a handshake.

Over Kevin’s long illness Jill was able to care for him at home. Because of his love for sailing and happy memories of family holidays at sea, Kevin asked that his ashes be scattered at sea off the coast at Flinders, where they will be at the mercy of the ‘wind and the waves’.

Nick Hamilton, MBBS 1946

Frank Kopocek
1924—2011

Born in 1924, Frank Kopocek’s youth was spent in Oslavny, not far from Brno, in Czechoslovakia. He was educated locally and, being good at maths, nearly became a mining engineer, especially as he worked for 15 months in coal mines from the age of 18. However, when he was 15, the humanity and knowledge of the local doctor attending his grandmother for a stroke impressed him and from then on his fate was sealed.

The Nazi invasion of his country resulted in the closure of the Czech university. The Gestapo were busy and Frank saw their work first-hand, in his own high school and in the dreadful atrocity of Lidice. He was allowed to study medicine, taught in German, however – some work was done in Brno, some in Vienna – and he finished his course in 1948. By then the Nazis had been replaced by the Communists and Frank, facing persecution for his Christian beliefs, was excluded from university.

He decided to disappear, using false papers in the name of Schneider, travelling first to the Russian Zone of Vienna and thence to the French, where he worked for the French occupying authority. A subject of interest to the French Secret Service, British MI5, and the American CIA, he must have been considered okay.

His emigration to Australia involved several days in a DC3 followed by a week in Bonegilla, then a job on the roads using pick and shovel. Later he worked as a wardsman at Gresswell and Hamilton hospitals. To be accepted into the Melbourne medical course he had to sit an examination in English, which he had improved while in Hamilton, and another language (he chose French). His Czech medical degree counted for one year of training. To earn enough to pay his fees he worked at the cafeteria in University House – a friend from his childhood offered him the job. He graduated in 1959 – a ‘Fabulous Fifty-Niner’.

Frank married while still a student, and spent most of his professional life as a GP in Box Hill where he was also active in the Box Hill Hospital. There were two daughters and a son, the latter unfortunately killed in a road accident in 1968. Failing vision due to macular degeneration led Frank to retire to Monash Gardens, where he died on 30 May 2011. His funeral, conducted partly in Czech, partly in English, was concluded by a violin solo played by a long-time friend – the well-known ‘Goin’ Home’ tune from the slow movement of Dvořák’s New World Symphony.

John Mathew, MBBS 1959
Ann Marks led a life of remarkable achievement and sacrifice.

After a happy childhood and wonderful education at Presbyterian Ladies College, where she was dux of the school, Ann was one of just eleven women in a year of 220 to enrol in medicine at the University of Melbourne in 1943. Whilst at medical school, Ann met Brian Marks, her future husband. Brian topped the class in their final year, with Ann coming third, obtaining the exhibition in obstetrics and gynaecology.

After graduation, on 18 October 1950, Ann and Brian were married, becoming the first married couple to take up residency at Royal Melbourne Hospital in December that year. The constitution of the hospital had to be changed to permit this to occur and their room became known as the ‘honeymoon suite’. These were very happy years for Ann who considered practicing medicine a great privilege. She trained with or under leaders in their fields: Weary Dunlop, Sir Clive Fitts, Sir Albert Coates, Dame Kate Campbell, Sir Benjamin Rank and Sir Victor and Leslie Hurley.

Ann ceased practicing medicine in 1953 when the first of her children was born. She contemplated returning to practice but fate intervened and she never did. On 11 August 1967, Brian was killed in a car accident, at just 40 years of age, and Ann’s life was dealt a devastating blow. She was left with six children aged between five and 14 years old. With tenacity and support from her extended family she continued to care for her children as a single parent, including providing wonderful educational opportunities for them all. Her children became an engineer, a lawyer, a social worker, a haematologist, a paediatrician and an anaesthetist. Raising six children alone was Ann’s greatest achievement.

Ann’s interests included breeding cats and gardening. She became an expert camellia grower and judge and wrote a book entitled Successful Camellia Growing. She loved art, classical music, good food and wine, reading, sport, Apple computers and travel.

In 2009 Ann had a secondary brain tumour removed, with the primary in her lung. Able to live an independent and fulfilling life for many months, Ann retained her full mental capacities till the very end, even as her physical health deteriorated. She was able to choose how she died and did so with great dignity, surrounded by her family.

Ann is survived by her brother, her six children and nine living grandchildren.

Michael Marks, MBBS 1984

Audrey (Claude) Belle Officer (Adams)

1926—2011

Audrey, and her future husband, John Cairns Suetonious Officer, graduated from Melbourne University in 1949. They spent their residency year at the Launceston General Hospital, then were married at the beginning of 1951, having moved to Hobart where John was a ward doctor at the Repatriation General Hospital. He remained at the hospital, eventually as superintendent, until his death in 1983.

During a brief period at home with three small children, Audrey made local calls around Fern Tree, the mountainside suburb of Hobart, where they lived. She always enjoyed working with children and, at one stage, thought about specialising in paediatrics. This being out of the question – it would have required training in England – she began work with the School Medical Service, staying there for 37 years, with a brief time off while their fourth and youngest child was born.

Audrey enjoyed her work immensely and, upset at her forced retirement when she turned 65, moved into a private practice, with Athol Corney, looking after the families and employees of the Electrolytic Zinc Company.

Audrey did enjoy her eventual retirement: she spent it travelling, surfing (a life-long love) and bushwalking. She also enjoyed socialising with her many different groups of friends and somehow found time for volunteering.

Having four children, 15 grandchildren and six great grandchildren, Audrey’s life was busy and fulfilled. She enjoyed it with grace, love, enormous generosity and fun until her last couple of years.

Liz Dombrovskis (Audrey and John’s daughter)

David O’Sullivan

David More O’Sullivan

1926—2011

David O’Sullivan, who died in Ballarat on 5 April 2011, will be remembered for his commitment to the community of that city through his work as a physician and his role in the development of its working gold museum, Sovereign Hill.

The youngest of three boys born to Mitchell Henry O’Sullivan, a Casterton general practitioner, and his wife Margaret, David began his education at Casterton Primary School and later boarded at Brighton Grammar in Melbourne, where he excelled in his studies and played both football and cricket. Following his father’s profession, David undertook medical training
Murray Linton Verso
1916—2010

Murray Linton Verso, a retired haematologist and respected medical historian, died at St Georges Hospital, Kew, two weeks short of his 94th birthday, one of the last surviving graduates, if not the last, from the MBBS class of 1940.

Born in 1916, in South Grafton, northern New South Wales, Murray was educated in Grafton and Wagga Wagga before entering the University of Melbourne. After graduation, he spent a year as a resident at the Marrickville Hospital and then a pupil nurse on rotation at the Royal Melbourne and Infectious Diseases Hospital. He met his future wife, Frances Read, while convalescing at the Fairfield Hospital, David worked at the Royal Melbourne and Royal Children’s Hospitals. In 1959 he obtained his FRCP from Edinburgh. Back in Australia, he was followed by appointments at London’s Hammersmith Hospital, the National Hospital for Neurology and Neurosciences Queen Square, and at Edinburgh’s Royal Infirmary. In 1959 he obtained his FRCP (Edinburgh). Back in Australia, David practised as a physician in Ballarat from 1960 until 1992, initially in paediatrics, and later in adult medicine.

With his friends, Bryan Gandevia and Frank Forster, David was pivotal in re-forming the Medical History Section of the British Medical Association’s Victorian Branch. During his 20 years as honorary curator of the AMA’s Library and Museum, he travelled every week from Ballarat to Melbourne to fulfil this role, with his distant cousin, Ann Tovell, providing paid assistance. What remains of the former AMA museum collection is now housed at the University of Melbourne’s Brownless Biomedical Library.

Active in the Ballarat community, David was a member of the local National Trust and served as its president. He was one of a group of Ballarat residents who, in 1969, laid the plans for a gold museum called ‘Sovereign Hill’. He subsequently served as a Sovereign Hill board member for more than 35 years, his wide-ranging support of this working museum recognised in two ways: Sovereign Hill’s reference library bears his name and in 1991 he was awarded an OAM for his commitment to community history.

After retirement David ran his ‘beloved’ Mafeking Farm, nestled in the shadow of the Grampians in Western Victoria, raising sheep and pursuing his interests in history and collecting. He was enormously generous with medical colleagues and historians of health history and a gracious host. Enthusiastic about useful technology, he was one of the first people in Australia to use a CPAP machine for sleep apnoea after suffering a series of strokes. In later years, with his movement restricted by peripheral vascular disease, David traversed Mafeking Farm on a quad bike.

In a fitting tribute to this man of history, David O’Sullivan was carried to his final resting place in Ballarat by Sovereign Hill’s magnificent nineteenth century hearse, its horses adorned with feather plumes. It was a transport plan that David thought might be ‘a bit of fun’. David is survived by his wife Fran and their four children.

Obituaries

Murray Linton Verso, a retired haematologist and respected medical historian, died at St Georges Hospital, Kew, two weeks short of his 94th birthday, one of the last surviving graduates, if not the last, from the MBBS class of 1940.

Born in 1916, in South Grafton, northern New South Wales, Murray was educated in Grafton and Wagga Wagga before entering the University of Melbourne. After graduation, he spent a year as a resident at the Marrickville Hospital in NSW where he met staff nurse, Jean Perry, whom he married in 1942.

In 1941, Murray joined the Australian Army as a commissioned officer serving in various regimental and field ambulance units in Australia and New Guinea. From 1944-46, he served with the Australian New Guinea Administrative Unit, describing his role, responsible for the health and hygiene of the local village people and native hospitals in Madang, Lae and Wewak, as one of the most interesting in his career.

His experiences in the tropics awakened him to the importance the laboratory played in medical diagnosis and Murray decided to specialise in pathology. After training and some years with the Commonwealth Health Department, Murray ran a private one-man pathology practice in Preston, before joining the Red Cross in 1955 as Assistant (later Deputy) Director of the Blood Bank, for 27 years.


In 1956, Murray became one of the 26 founding members of the Royal College of Pathologists of Australasia. He later became an Honorary Fellow of the College. Throughout his career, he maintained an interest in the important issue of quality control in blood transfusion and served on the relevant subcommittee of the RCPA. He was an examiner for the fellowship of the Australian Institute of Medical Laboratory Scientists.

Murray also became an early member of the Royal College of Pathologists soon after it was founded in the UK in 1961. He was made an Honorary FRCP in 1977. He was also a Fellow of the Royal Society of Tropical Medicine and Hygiene, a Fellow of the International Society of Haematology and a Member of the International Society of Blood Transfusion.

From his university days, Murray maintained a keen interest in history, medical history in particular. His first medico-historical paper was published in Speculum, the medical students’ magazine. An active member of the Victorian AMA’s Section of Medical History, serving as secretary and
as president before it became the Medical History Society of Victoria, Murray was made a life member. For more than 30 years he was an active member of the Royal Historical Society of Victoria. He was made a fellow in 1973 and served as president from 1974 to 1978. He stressed that to get a proper perspective on history, an historical society should blend the expertise of professional historians with the enthusiasm and special knowledge, in various fields, of intelligent amateurs.

One of Murray’s earliest papers was ‘A Medical Account of a Voyage on a Convict Vessel’ published in the Medical Journal of Australia in 1950. ‘The Literary Doctor’, ‘Blood Transfusion in the Early Nineteenth Century’ and ‘Doctors and Daguerreotypes’, an account of the contributions medical men made to the development of photography, were some of his other papers.

On several occasions, Murray reviewed medico-historical books for The Age newspaper including the late Ken Russell’s history of The Melbourne Medical School, published in 1977. For many years, he worked on the draft of a book on medical novelists but was unable to find a publisher.

In retirement, Murray developed macular degeneration and became legally blind. This limited his ability to write and to travel. Nevertheless, when in his eighties he spent nearly ten years laboriously researching and writing Legends and larrkkins, his personal reminiscences of various branches of his family and their origins in Australia. It is an entertaining and informative resource for lovers of family history in general, and especially for those families to whom he was related.

Throughout his long life, Murray loved learning; he attended weekly French and Italian classes until a few weeks before his death and retained his exceptional memory for names, dates and places and his good humour until the end.

Murray is survived by his two sons and daughter, his seven grandchildren and by several great grandchildren. His wife, Jean, died in 1993.

Murray Warren Verso, MBBS 1972

SAUL WIENER

1923—2010

On 15 September 2010, the Melbourne Medical School lost one of its most remarkable graduates. Ten years ago I wrote of the passing of the doyen of Australian toxinology, Struan Sutherland. Amazingly, the man on whose shoulders Struan metaphorically stood, Saul Wiener, died almost ten years later, aged 87. This gentle, relentlessly curious physician-scientist was the quintessential ‘quiet achiever’ who, regrettably, was known to very few of the many thousands of Australians whose lives he enriched.

Like many other high achieving Jewish refugees, Saul was born in Germany to parents of Polish origin. After experiencing Kristallnacht in Frankfurt, his family migrated to Melbourne in late 1938.

Despite his initially poor English, Saul graduated from University High School in 1942 – he recalled completing his chemistry matriculation exam on the day Pearl Harbor was bombed – and completed medicine in 1947, winning the forensic medicine prize. After working as an RMO in Hobart, Saul eventually enrolled as a PhD student and studied the etiology of rheumatic fever in the Department of Microbiology under Rubbo. His degree, conferred in 1953, made him equal second as an Australian medical graduate to achieve an Australian PhD.

Thereafter followed Saul’s period of most enduring achievements, whilst employed as a research officer in the Commonwealth Serum Laboratories (1952–58). Most famously, ‘in his spare time’, after administrative tasks such as the Salk Poliomyelitis vaccine trial participation, he developed the Redback spider antivenom and the world’s first marine antivenom, against Stonefish. Many years later, during an interview marking his receipt of the AM, Saul remarked that he did this work to repay the Australian Government for giving his family refuge from Germany. If it were not for this kindness, Saul and his family would have been among the six million Jews who perished at the hands of the Nazis. He also researched the funnel web spider and pioneered the study of Chironex fleckeri box jellyfish venom. Moreover, Saul’s demonstration of the toxicity of freshly extracted cone snail venom eventually led to the current global boom in conotoxin-related drug discovery.

In the late 1950s he also explored the concept of active human immunisation with snake venom as a type of snakebite vaccine. His 1960 MD thesis was probably the first higher degree in toxinology in Australia and included perhaps the first Australian toxinology publication in the prestigious journal Nature.

After leaving CSL in 1958, Saul’s interest in allergy and immunology led to a year as a Fulbright Scholar at Columbia University, New York where he developed new skills in chromosome analysis. Returning to Melbourne he commenced as a staff specialist (allergist) at the Royal Melbourne Hospital, and was elected FRACP in 1970. His research moved into cytogenetics, and produced a string of reports in the Lancet – including some of the earliest work on Familial X-linked mental retardation (‘Fragile X’ syndrome), ably assisted and then led by the now famous geneticist Grant Sutherland.

Saul was also a strong contributor to the Jewish community – he established ‘Kosher Meals on Wheels’ in Melbourne, was the Inaugural President, Council of Orthodox Synagogues, and actively involved in several synagogue committees. He became an AMA Life Member, a Member of the Order of Australia (for services to science, medical research and alleroLOGY. His wife, Fay, two daughters, Rebecca and Vivienne, his son, Rabbi Yonason Wiener, and a sister, Paula, survive him.

Ken Winkel, Director, Australian Venom Research Unit, Department of Pharmacology
MBBS 1949

The 1949 medical graduates celebrated their 61st year since graduation at the Racquet Club, Kooyong Lawn Tennis Club with a luncheon on Wednesday 20 October 2010. Graduates attending numbered 16, and there were 20 apologies (two from London and several from interstate.) Inability to attend was due mainly to personal or family illness or inability to travel, but one regular attendee came from Queensland and another from South Australia. The Geelong region was particularly well represented, and six of the sixteen were surgeons: the reasons for these geographical and career variations are elusive!

Attendees were: Mary-Grace Asche (Whyte), Noel Cass, Brian Fleming, Kendall Francis, Joe Freidin, David Gunter, Norm Johnston, Barry Loughnan, Don Maclean, David McCredie, Terry McLaren, Ken Millar, John Pawsey, Pat Scrivenor (Long), Gordon Way and Ian Wood.

Of the 122 who graduated in 1949 there have been 72 deaths; 35 were in attendance or apologies; and 11 were not contactable, accounting for 116 in all.

It was an informal occasion, with ample time to recall events from so long ago. A summary of apologies and some highlights were circulated. Two who were present are still doing medical work of some sort, while others have retired into gardening, farming, conservation, sporting and artistic pursuits of various kinds. The Mornington and Bellarine Peninsulas with their less-crowded and leisurely lifestyles are popular. Although many apologies were based on health problems, the gathering looked pretty fit despite the years and it was proposed that we lunch again in 2011.

As might be expected, there were reflections on the content of the course we endured. Despite the volume of rote learning, the approach was logical – a year of medical chemistry and physics (which have become increasingly relevant with advances in drug availability and physiological measurement), then three years of normal and pathological anatomy and physiology, microbiology and then two clinical years. One member noted that the course done by his father who graduated in 1921 was almost identical! No longer: a grandchild of one member was required to write a summary of hyperthyroidism during their first year.

Apologies were received from Audrey Adams (Officer) and Peter Gill (Tasmania), Selwyn Baker and Margaret Sickelmore (O’Brien) from London. Peter Barker, Olga Bolitho, George Doery, Kevin Fischer, Jack Goldberg, Alison Fullard, John Kelly, Max Robinson, Len Rouch, Bob Taranto, Pam Triplett, Mary Bremner and Rae Williams (Lee) from WA.

The death of Ian Collins was noted with sadness, especially by several friends, who had known him since schooldays.

In reviewing accumulated funds from past reunions the conveners concluded that we could donate $500 to the University while retaining funds to cover the costs of organising our 62nd anniversary.

Noel Cass, for the conveners

MBBS 1955

The 1955 Melbourne medical graduates held a very enjoyable and successful reunion luncheon, buffet style, at the newly restructured Kooyong Lawn Tennis Club on 14 October 2010. Forty graduates attended with 16 apologies. Seven travelled from outside the state, most notably Henry Tung from
KL for his first reunion and Max Kirwan, accompanied by his daughter, from Busselton in WA. Henry Tung gave a short and interesting talk on medicine in Malaysia while John Henderson with his ubiquitous camera was recording all the ageing faces for posterity.

The Alumni Association gave us the following figures: 129 graduated in December 1955; 73 had known addresses; 23 unknown and 43 had died. The discrepancy in numbers has not been explained. By a show of hands it was decided that the next reunion should be held no later than three years hence, that the same venue and the format would be most acceptable and that wives/partners would be optional.

The group was reminded that one should notify the University of Melbourne Medical Alumni Society to keep in touch.

Graham Syme

MBBS 1981

On the night of Saturday 27 August 2011 the graduates of 1981 (and also the students who started the journey with us in 1976) descended upon the RACV club. As with most groups they came from far and wide, but Kevin Leslie again made the longest journey, from Canada. The speeches were kept to a minimum and apart from a backing four-piece string quartet the night was self-entertained. The hair dye isn’t as effective, the wrinkles now creep across faces and the boys who used be in the back of the lecture theatres are now checking everyone out to see who is maturing gracefully and who is showing signs of age.

The jobs we are doing, the jobs we did, seem less important as we mature (some would say, finally) and the deep affection and camaraderie are more and more apparent. With the passing of years posturing, position and letters after your name are less important than cementing long-term friendships.

The prize-winners of first to pay, most names offered for where are they now, most helpful in organising, and most notorious, again got their bottles of champers.

Where did the five years go? Where did the night go? No sooner had we turned up than the staff were ushering us out – with or without the coats we came in.

Thanks to Margie, Anne, Dave, Ross T, Mick, Spider, James E & of course Julian S amongst others for a great night and I hope all of us and more are there again in five short years time.

Tony Sellars

MBBS 1980

On 9 October 2010, 150-odd graduates and partners gathered in the Australian Club to celebrate 30 years since graduation. The high ceilings, parquetry floor and ornate surroundings added gravitas to the gathering that contrasted with the informal enjoyment of the attendees.

The formal part of the evening consisted of speeches – including an entertaining presentation from guest speaker, and part-time descendent of Sigmund Freud, Nathan Serry – welcomes from the organising committee and a marvellous video-collage of old photographs.

The prize-winners for first to pay, most names offered for where are they now, most helpful in organising, and most notorious, again got their bottles of champers.

Stories were re-told (some even embellished), friendships re-established and plans were made to meet up at the next reunion or even earlier.

Rod Sitlington and Louise Seward
Class of 1997 – 15 year reunion

When: 7pm, 17 March 2012
Where: University House, University of Melbourne
Contacts: lynmaylim@gmail.com, fuphyllis@gmail.com
Facebook: 2012 Class of ’97 Melbourne Uni 15-year Med Reunion

Class of 1982 – 30 year reunion

When: 24 March 2012
Where: to be advised
Contact: Jeremy Ryan, ryamurk@hotkey.net.au or (+61 3) 9591 0466

Class of 1972 – 40 year reunion

When: 8 September 2012
Our 40 year reunion will begin a week of celebrations of the 150th anniversary of the Melbourne Medical School. We expect that graduates will come from overseas and interstate and hope to have more attendees and their partners than ever before.

We plan to follow the format of previous reunions – a short morning scientific session for graduates followed by an evening dinner with partners.

The committee is Elizabeth Donnan (chair), Geoffrey Donnan (scientific meeting chair), James Best, Chris Buckley, Jim Butler, Lachlan de Crespigny, Jim Tatoulis, Doris Young

Graduates of 1972 please email us with: your contact details, contact details for any other graduates of 1972 (email preferred) and any ideas for our reunion.

Contact: medmelb40years@gmail.com

Class of 1962 – 50 year reunion

When: 13 & 14 October 2012
Where: Saturday dinner for graduates at the RACV Club followed by a function for graduates and partners on Sunday, venue to be advised.

Contact: Ian Rechtman, rechtman@connexus.net.au or (+16 3) 9523 7333

Class of 1952 – 60 year reunion

When: 10 November 2012
Where: Royal South Yarra Lawn Tennis Club
Contact: Hugh Hadley, (+61 3) 9822 7326

University of Melbourne Medical Alumni Society Contact Details

Andi Jansz-Gallent
4th floor, 766 Elizabeth Street
University of Melbourne 3010
E: andreajg@unimelb.edu.au
T: (+61 3) 9035 3861
W: www.medicine150.mdhs.unimelb.edu.au
In Brief

Congratulations to Alumni, Friends, Staff and Students

Paul V Alexander (MBBS (Hons) 1978)—AO
For distinguished service to Defence in the field of health and, in particular, as the inaugural Commander Joint Health Command.

Rodney P Barkman (MBBS 1961)—OAM for service to the community of Corowa as a general practitioner.

Christopher W Brook (MBBS (Hons) 1977)—PSM for outstanding public service in leading improvements in the Victorian and broader Australian health systems in areas including quality and safety of patient outcomes, national blood supply, public health, and rural and regional health services.

David I Copolov (GDipPsych 1979, MBBS (Hons) 1974)—OAM for service to medical research, to professional organisations, and to higher education.

Anne F D’Arcy (MBBS 1961)—OAM for service to emergency medicine, and to professional organisations.

Anthony J d’Apice (MD 1973)—AM for service to medical research, particularly in the fields of nephrology and immunology, through leadership roles in the development of organ transplantation science, and as an academic and author.

Joanna M Flynn (MBBS 1973)—AM for service to medical administration and to the community, particularly in the areas of practice standards, regulation, professional education and as a general practitioner.

George Jerums (MD 1970, MBBS (Hons) 1962)—AM for service to medicine in the field of endocrinology, particularly the clinical management of patients with diabetes, and through a range of professional organisations.

Alastair H MacLennan (Former Staff)—AO for distinguished service to medicine as a leading researcher and practitioner in the areas of obstetrics and gynaecology and the causes of cerebral palsy, to medical education, and to professional development.

Anne L Moulden (MBBS 1982)—OAM for service to medicine as a paediatrician, and to medical administration.

Ian N Olver (MD 1990, MBBS (Hons) 1976)—AM for service to medical oncology as a clinician, researcher, administrator and mentor, and to the community through leadership roles with cancer control organisations.

Michael Patkin (MBBS (Hons) 1957)—AM for service to medicine as a surgeon, and to the study and practice of ergonomics and instrumental design.

Jeffrey V Rosenfeld (MS 1991, MBBS 1976)—AM for service to medicine through clinical leadership and academic roles, particularly in the field of neurosurgery as a researcher and author, and to professional associations.

John P Royle (MBBS 1957)—OAM for service to medicine as a vascular surgeon, to professional associations, and to medical education, particularly relating to safety in the operating theatre.

Laurence Simpson (MBBS (Hons) 1954)—OAM for service to medicine as a clinician and educator.

Gregory I Snell (MBBS (Hons) 1981)—OAM for service to medicine in the field of respiratory science, to education, and to professional organisations.

Andrew M Tonkin (DMedSc 1975, MBBS 1967)—OAM for service to medical research in the field of epidemiology and preventative medicine.

2010 Dean’s Honours List – Semester 12
Sandeep Arunothayaraj
Clare Bajraszewski
Leah Brown
Miguel Cabalag
Andres Del Rio
Daniel Forster
Jonathan Galtieri
Harry Georgiou
Brendan Jones
Jane Li
Shueh Lim
Andrew Mant
Jo-Lyn McKenzie
Heather Pascoe
Pek Tan
Henry Yao
San Xu

Past Prize Winners
A list of past medical student prize winners is being compiled on the Melbourne Medical School 150th Anniversary Website.
We welcome additions and corrections to the list from alumni at:
www.medicine150.mdhs.unimelb.edu.au
2010 Medical Student Prizes and Awards

Australian Medical Association Prize—Heather Pascoe
Donevan Johnston Memorial Scholarship Fund—Lachlan Brennan, Winnie Chen, Amy Fitzgerald, Katherine Flood, Caroline Lum, Zaal Meher-Honjji, Pandit Pandher, Dani Pickett, Sally Smith, Senthil Thillainadesan
Dwight’s Prizes—Helen Chan
ESJ King Prize—Kate Matthews
Geoffrey Royal Prize in Clinical Surgery—Niles Elizabeth Nelson
Geriatric Medicine Prize—Omega Leong
GlaxoSmithKline Semester 5 Prize—Ouli Xie
Hedley F Summons Prize (for Otolaryngology)—Andres Del Rio
Herbert Bower Memorial Prize—Miguel Cahalag
Herman Lawrence Prize in Clinical Dermatology—Alexander Gin
Howard E Williams Prize—Zi Yang
Ian Johnston Prize in Reproductive Medicine/Biology—Heather Pascoe
John Adey Prize in Psychiatry—Andrew Mant
Karl David Yeomans Prize—Eva Sudbury
Katharine Woodruff Memorial Prize — Palliative Medicine—Clare Bajraszewski
Peter G Jones Elective Essay Prize—Louise Perry; Ranjit Singh; Agnes Yuen; Jesse Zanker
Prize in Clinical Gynaecology—Melissa Lee
RL Simpson Memorial Fund—Helen Chan, Katarzyna Michalak, Jasmine Pillai, Kathryn Shepherd, George Thomas
RACGP Victoria Faculty Prize—Jo-Lyn McKenzie
RANZCOG Women’s Health Award—Charmaine Tay
Robert Yee Prize in Medicine—Gary Xia Vern Tan
Royal Children’s Hospital Paediatric Handbook Award—Clare Bajraszewski
Sir Albert Coates Prize in Infectious Diseases—Kate Matthews
Smith & Nephew Prize—Brendan Jones
The Clara Myers Prize—Henry Yao
The David Danks Essay Prize for Human Genetics—Sara Davven
The Dr Kate Campbell Prize—Clare Bajraszewski
The Edgar and Mabel Coles Prize—Clare Bajraszewski
The Fulton Prize—Melissa Lee
The Harold Attwood Prize—Helen Chan
The Ilana Rischin Award for Outstanding Achievement by an International Student in the Entry to Practice Medical Degree—Jennifer Crawford
The Jamieson Prize—Emily Jane See
The Keith Levi Prize—Emily Jane See
The Max Kohane Prize—San San Xu
The Neil Johnson Prize—Aaron Wong
The Robert Garly Healy Prize in Medicine—Emily Jane See
The Robert Garly Healy Prize in Obstetrics—Katrina Hannan
The Robert Garly Healy Prize in Surgery—Helen Chan
The Royal Australian and New Zealand College of Ophthalmologists’ Prize—Nicole Liaou
The Therapeutic Guidelines Award—Miguel Cahalag
The Vernon Collins Prize in Paediatrics—Clare Bajraszewski
Victorian Metropolitan Alliance Prize in General Practice—Clare Bajraszewski
Walter & Eliza Hall Exhibition—Kate Matthews

New Witness seminar online

Developing dental education and research in Victoria

Insights into the behind-the-scenes politics of the step-wise fluoridation of Victoria’s water supply and efforts to limit junk food in school tuckshops are two of many themes explored in the latest Witness seminar to go online.

The seminar, hosted by the Melbourne Dental School and convened by Ann Westmore, is one of a series recording the history of Australian medicine through peer-reviewed oral history.

Twenty-one participants, including former University of Melbourne dental academic staff members and students from the late 1940s to the early 2000s, reflected on the promotion of dental health in Victoria, the management of dental and oral disease, key contributions to dental research and practice, and the many challenges remaining.

This seminar now joins others (listed below) available online at:
www.jnmhugateways.unimelb.edu.au/witness/contents.html

A chapter in the evolution of paediatrics in Australia: The University of Melbourne Department of Paediatrics at the Royal Children’s Hospital 1959-2003, From ‘soft’ to ‘hard’ science: The development of microvascular surgery in Australia Venomous Country: Struan Sutherland, Medical Science and Australian Animal Toxins. All seminars are, searchable by theme, phrase or name, making them invaluable research tools. Further information about the Witness seminar program is available from Dr Ann Westmore at afwest@unimelb.edu.au
Books

**Kickstart**
Recharging your life with a pacemaker/defibrillator.
By John England
Verand Press/ Pan MacMillan, rrp. $24.95

Pacemakers have become so good at saving and prolonging life that they are now posing medical practitioners with the reverse problem, when to end life.

Cardiologist John England (MBBS 1969), himself a pacemaker recipient, has written, *Kickstart* demystifying these tiny, life-saving electronic devices, for the benefit of patients and the wider public.

Among the many issues addressed by Dr England is the need for guidelines on when to switch pacemakers off.

‘Deactivating a pacemaker may be ethical and appropriate when a patient is in the last stages of terminal illness and when the device is likely to increase pain and interfere with a peaceful and natural death.’

*Kickstart* explains pacemakers, from their historical development to their future direction, through the personal narratives of some of his patients.

Topics covered include:

- When and why do you need a pacemaker?
- Can you hear it or feel it ticking inside?
- Will my pacemaker set off the airport metal detector?
- Making love with a pacemaker
- What’s the difference between a pacemaker and a defibrillator?
- How long does the battery last?

**Setting it Straight**
A History of the Orthopaedic Department at St Vincent’s Hospital Melbourne.
By Josephine Dunin
Utber and Patullo Publishing. Available for $65.00 from the Department of Orthopaedics at St Vincent’s Hospital. Contact Josephine Skelton on (+61 3) 9288 3980 or email: josephine.skelton@svhm.org.au

In November 1893 St Vincent’s, under the care of the Sisters of Charity, opened in a group of terraced houses in Fitzroy and began providing both medical and surgical care to the poor of Fitzroy, Collingwood and surrounding areas.

Forty years later the hospital’s orthopaedic unit was established, arguably the first in any of the city’s public hospitals. In those early years most specialist surgery, ENT, Ophthalmology, and O&G aside, was carried out by general surgeons.

Today the Orthopaedic Department employs some thirteen orthopaedic surgeons as visiting medical officers as well as two fellows from overseas and, at any one time, three registrars who are usually on the formal orthopaedic training program.

Written by professional historian Josephine Dunin, the book traces the story of the establishment and subsequent progress of this specialist surgical unit at St Vincent’s Hospital and was published in 2011 as the department celebrated its 75th anniversary.

The book describes in some detail the surgeons who worked in the orthopaedic department as well as important contributions from others, for example the sisters of charity, the nursing staff, and the anaesthetic department.

An important and unique contribution to orthopaedics in Melbourne, this book should appeal to many surgeons throughout the country interested to learn the story of the development of the specialty over a relatively short period of time.

**So you want to be a doctor?**
A guide for prospective medical students in Australia.
By Kerry J Breen
ACER. $24.95 + postage. Available on order through ACER at: E: sales@acer.edu.au; W: http://shop.acer.edu.au
T: (+61 3) 9277 5447; Toll Free: 1800 338 402

Written specifically for young people who are considering embarking on a medical degree, as well as those already enrolled, this book describes the attributes that the Australian community desires in its doctors, the prerequisites for admission into medical school and the expectations placed upon medical students.

It includes advice about study methods, financial support, and balancing study with part-time work and a social life, as well as information relevant to specific groups such as Aboriginal and Torres Strait Islander students, international students and students with a disability.
Rare Book Purchased in Celebration of Medicine’s 150 Years

In commemoration of 150 years of medicine at the University of Melbourne, the Friends of the Baillieu have secured the purchase of a rare and distinctive publication to add to the much-prized collection of rare medical books in the University’s special collections. The first large-figure illustrated Italian edition of Pietro Andrea Mattioli’s Discorsi was produced in two folio (34.5 cm) volumes of early pasteboard with spines covered with vellum in the mid-sixteenth century. The manuscript title is noted on paper labels and inside there are some manuscript entry notes (partly cancelled by pen), with an Italian ex libris ‘Ricasoli’, a noble Florentine family. This acquisition is particularly special for the inclusion of more than 1000 beautiful full-page woodcut illustrations of the botanical specimens described. Pam Pryde writes here about the history and significance of this very special acquisition.

Pietro Mattioli

Pietro Andrea Gregorio Mattioli was born in 1501 in the Tuscan city of Siena, Italy. Following in his father’s footsteps, he graduated in medicine from the University of Padua in 1523. Mattioli practised in Perugia and Rome before becoming personal physician to Cardinal Bernardo Clesio, the prince-bishop of Trento, in 1527. After the Cardinal’s death in 1539, Mattioli moved to Gorizia, where he was appointed town physician before being summoned to the court of the Holy Roman Emperor in Prague in 1534. He was personal physician to Ferdinand II, Archduke of Bohemia (1529-95) in Prague, then to Ferdinand’s brother, Maximilian II (1527-76), the Holy Roman Emperor in Vienna. He returned to Trento in 1570 and died of plague in 1577. Throughout his life Mattioli studied botany for medicinal purposes, compiling his observations and discoveries in his many editions of Discorsi (Commentaries on the Materia Medica of Dioscorides).

Dioscorides’ Materia Medica

Pedanius Dioscorides (ca 40-90AD), a Greek physician, pharmacologist and botanist, was the author of De Materia Medica (Regarding Medical Materials), a five-volume work on herbal medicine. His position as surgeon in Nero’s army gave Dioscorides the opportunity to source medicinal plants and minerals from across the Greek and Roman worlds. De Materia Medica, reproduced many times in manuscript form over the 1000 years after its publication, is still considered the primary historical source of information about Greek and Roman medicines and records around 600 plants – although many are difficult to identify from their descriptions.

During the Renaissance it became common practice for botanists to write commentaries on Dioscorides and to attempt to accurately identify the plants described in his herbal. By the mid-sixteenth century plant collections were established at Pisa and Padua, primarily for the education of physicians, and by the end of the century similar gardens had sprung up throughout Europe. The study of botany broadened from a primary concern with medicine to include enjoyment of plants in their own right, and gardeners introduced plants from distant lands into their own gardens.

Mattioli’s Discorsi

Mattioli worked from a Latin translation of De Materia Medica, published in Paris in 1556, translating the text into Italian and identifying the plants originally described by Dioscorides. He added a further hundred plants from his own observations during his travels in the northern part of Italy and neighbouring regions. The first edition of
his commentary appeared in 1544, in Italian, without any illustrations and was followed quickly by three more editions in 1548, 1550 and 1552. The growing interest in plants and their identification made accurate illustrations a desirable addition to the text of an herbal but it was not until the first Latin edition, printed in 1554 and published by Venetian printer Vincenzo Valgrisi, that we find the work illustrated with 500 small woodcuts by Giorgio Liberale of Udine, an artist who had been working in the imperial court in Prague at the same time as Mattioli.

A second series of woodcut illustrations, known as the large series, followed. Numbering around 600 woodcuts by Liberale and Wolfgang Meyerpeck, this series was first published in the 1562 Czech edition of Discorsi, printed in Prague. The large blocks were again used in a 1563 edition, translated into German and again printed in Prague, before the whole series of over 900 plants and almost 100 animals were incorporated into Valgrisi’s 1565 Latin edition, printed in Venice. The artists are named in this edition, but the engraver, ‘G.S.’ remains unidentified.

At least six further Venetian editions of Mattioli, published in Latin or Italian, used these large woodblock illustrations, of which the edition acquired by the Friends of the Baillieu Library is the first.

Mattioli’s Discorsi became the standard reference work on medical botany during the second half of the sixteenth century, with more than 30,000 copies sold.

The blocks were all cut from pear wood, along the grain, the average size of a large block being 222 x 159 mm. The blocks vary in thickness and imprints on the underside of the blocks suggest that underlays of pieces of metal type were used to raise the blocks type-high for printing. It is possible that the artists may have drawn the images directly onto the wood – there are two pieces of evidence for this, the first being that the artist, on occasion, made allowances for blemishes in the wood by working around the blemish; the second being the survival of a fragment of a drawing on paper attached to the underside of one of the surviving blocks which suggests that in some cases at least the cutting may have been done using a drawing pasted to the surface of the block. Most of the blocks still in existence have the Latin name of the illustrated plant cut into the wood on the underside of the block, as well as various other cuts, which appear to be trial cuts, where tools have been tested for sharpness, or where the engraver has practised a technique. The Mattioli woodblocks represent the pinnacle of botanical woodcut illustration in the sixteenth century, being so large, yet complex, while remaining botanically accurate.

During the seventeenth century woodcut botanical illustration was gradually replaced by copperplate engraving. The Mattioli blocks were bought by French botanist, Henri Louis Duhamel du Monceau (1700-82), who subsequently used 154 of them to illustrate his two-volume Traité des Arbres et Arbustes in 1755. Duhamel added labels to the underside of the blocks with the then-current name of the plant, many of which are still attached to the blocks today. Unfortunately the blocks used in his Traité des Arbres et Arbustes were lost, but the remaining blocks stayed in the family until the mid-1950s when some were dispersed – as far away, even, as Australia, where one block of a Limonium (Statice) is held by the State Library of Victoria and another, of a Cyanus maior (Cornflower), by the State Library of Queensland.

Pam Pryde, Curator of Special Collections, Baillieu Library

References

Cartoon from Melbourne Punch, 7 August 1862 lampooning the Melbourne Medical School’s first lecturer, John Macadam. See story on page 20.