

THE EARLY DAYS OF PLASTIC SURGERY

IN HOBART

By A.L. Stephenson

Towards the end of World War II there was a plastic surgery unit in Sydney at the Concord Army Hospital, and also one at Heideberg in Melbourne with B.K. Rank. When B.K. Rank left the army and set up in practice as a plastic surgeon, he and the surgical fraternity in Melbourne had grave doubts as to whether plastic surgery would provide a living.

I graduated MB BS in September 1941 from Sydney University. I had nine months as Junior RMO at Balmain Hospital and then joined A.I.F. as N.X. 77376 in July 1942, going as reinforcement to ^{2/9} Aust General Hospital in early December 1942. It was 17 miles from Port Moresby at the foot of the Owen Stanley Ranges where the casualties from Kokoda were arriving out.

On arrival O.C. Medical took me to a patch where a bulldozer was flattening an area. "That will be your ward", he said. E.P.I.P. tents were going up that afternoon and I had 70 patients that night. In two days I had 200 patients – 140 on beds and 60 on stretchers beneath. They were largely suffering from dysentery and malaria, but also scrub typhus which was truly lethal. Patients were evacuated to Queensland as fast as possible but within a month the hospital numbers had risen from 600 to 2000.

About May 1943 I was transferred to HQ RAE 1 Corps Troops and I functioned as a Regimental Medical Officer looking after Sappers in about six companies under our administration. In September or October 1943 we were moved over the mountains to Buna to be ready to move up to Lae as it fell. Transport was very short in Lae so I used to walk about ten miles a day along tracks and through the jungle and Kunai grass visiting companies of our engineers. In addition I would call on any small unit which might need a sick parade. In late January 1944 the unit embarked for Queensland after 14 months in New Guinea.

Following leave we formed up on the Atherton Tableland at Lake Eacham. It was expected that we would be going overseas again to join in the attack on some of the islands on the way to Japan. A.A. Abbie, the Anatomist from Sydney University, gave a

course of 28 lectures on Anatomy in Atherton. They were excellent. I worked very hard over this period of four weeks and proceeded to study on for Part 1 Master of Surgery. Against all predictions we were still on the Tablelands in November 1944 when I was sent off by train on a trip to Sydney, with, of course, delays along the way. I passed the exams in Anatomy but had to repeat Physiology & Biochemistry after the war.

In late March 1945 our unit boarded a troopship to Morotai in the Halmaheras. This was a relay point as the next move in the campaign was planned. The Senior Medical Officer on Morotai called me in and said he was going to hold me there to be on his staff. I was very upset and went back to my boss at my unit – the C.R.E. (Commander Royal Engineers) – and asked him to try and keep me with the Engineers. I had already been with them two years and felt I should stay with them on the landing. He said the C.E. – General Steele – was visiting and he could fix it. I heard no more about staying on Morotai.

We embarked for destination unknown in convoy with naval units. Our landing on the island of Tarakan was made at H + 3 on 1st May, 1945. About an hour later a single engine survey aircraft crashed on the esplanade and the pilot was badly hurt. I looked after him and escorted him on to the L.S.T. (Landing Ship Tank) which provided an operating theatre in the sidewalls. My C.O. gave me freedom to stay as long as I could help. I was on board for about 20 hours, giving anaesthetics and generally helping in the theatre. The coffee machines worked overtime. I returned to the island where the battle was very serious. The plan had been that this would be a one brigade show with a view to obtaining an aerodrome within 6 days to cover the other two Borneo campaigns of Labuan and Balikpapan. The sad fact was that intelligence information came from Royal Dutch Shell and Tarakan being important purely because it was covered in oil wells. It was six weeks before Tarakan was taken and the aerodrome was covered in bomb craters. Thus Tarakan with over 1000 casualties – more than the sum of the other Borneo campaigns – really served no purpose.

In August I was walking across the central area when I heard a radio talking of a bomb! It was the atomic bomb dropped on Hiroshima and was the signal of the end of the war. I had got word a week or so earlier that I was to be transferred to ²/₂ A.G.H. (Australian General Hospital) at Balikpapan in Borneo. Now it all changed. I was flown out to Lae in New Guinea. They wanted to hold me but I demanded to go on to ²/₂ A.G.H. which had not yet left Victoria. The trip home to Brisbane and then on to Melbourne was flown in a Liberty bomber. I arrived at Bacchus Marsh and they promptly sent me on leave to Sydney. I came back 24 days later and applied for transfer to Sydney and was sent to 106 Australian General Hospital at Kogarah. I had September 1945 to April 1946 at 106 A.G.H. I had some good training in surgery and studied the Biochemistry and Physiology for Master of Surgery Part 1 which I passed in February 1946. Then I sought an approved hospital appointment for M.S. or F.R.A.C.S. The Coast Hospital said that December 1946 was the earliest. I went to see Harold Dew – Professor of Surgery and he said, “Have you ever heard of Hobart. The Royal Hobart Hospital would be an approved hospital for the F.R.A.C.S., and J.B.G. Muir is a great surgeon – Gold Medallist M.S. London, ex Shanghai and via Darwin”.

I applied to Royal Hobart Hospital and was appointed Junior R.M.O. The other juniors were excellent men – all had been juniors for a year in Sydney or Melbourne. The Surgical Registrar Acting Superintendent was Peter Braithwaite with a good war record. In November 1947 I was asked to be Acting Surgical Registrar, so that Peter Braithwaite could go to Melbourne to train for his Part 1 F.R.A.C.S, which I already had.

Opportunities were wonderful at R.H.H. for any who wanted to work. J.B. Muir was a brilliant surgeon with a very wide field.

B.K. Rank’s wife Barbara was a Hobart girl. At the end of 1945, just as he was leaving the army, he arranged that he would come down to Hobart to see plastic cases and operate at R.H.H. over a period of a week. This was repeated in 1946 and then became twice a year for a week each time and it continued this way for about 12 years.

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In June 1948 Peter Braithwaite and I qualified for F.R.A.C.S. in Melbourne, which of course, was in General Surgery in those days.

In late 1948 B.K. Rank asked Peter Braithwaite if he would like to deal with the excess Plastic Surgical cases. He refused as he said he wanted to do thoracic surgery. I was then asked and accepted happily.

I went to Melbourne for a month to follow B.K. Rank, Alan Wakefield and George Gunter around their public and private patients. They were all most helpful. John Hueston was plastic Registrar at Royal Melbourne and joined the other three when he completed his training.

I had already been appointed an honorary out patient General Surgeon and now I was allotted an operating session one morning a week to cope with the plastic surgery cases. I received these cases in my outpatient clinic. There was no means test at the R.H.H. and all my work was unpaid.

B.K. Rank continued to have a visit of one week twice a year over many years and I always spent the time with him on those visits. I was extremely fortunate to have a mentor of such calibre available so readily.

What did plastic surgery consist of for me in Hobart in 1948 and the next few years?

Very many of our problems were associated with skin loss and skin grafting was a frequently used solution.

The skin grafting knife was a simple blade with no guard. If this were razor sharp I could cut a reasonable graft very soon. If the knife was not sharp an even graft was quite impossible. I quickly learnt to check the blade by shaving my wrist before allowing it to be put in for sterilising. Disposable blades were a later development.

The Paget Dermatome was used occasionally for thicker skin from an awkward area but it could only cut one drum at a sitting because the glue had to dry first.

Scar contractions associated with old burns or trauma or previous surgery was common. Z rearrangements and flaps of various designs solved some of these but others also needed the use of split skin or small areas of full thickness skin.

For many years X-ray therapy had been the treatment of choice of most basal and squamous carcinomata of the skin. A proportion of these had recurred and these provided some difficult problems. I have chased basal cell recurrences along tissue planes into the depth of the neck or behind the orbit. I saw a case of that type in a war veteran 20 years ago but apart from him I would have to go back to prior to 1960.

Hypospadias

Hypospadias was a real problem. Mostly the baby was produced early and a decision made about what sex it was. In general the teaching was that if it was impossible to decide then it was safer to call it male. It was still not possible to check the genes.

Sometimes the child might be 5 years old before seen and then paediatricians felt that if the wrong decision had been made it was too late to rectify it.

Mostly the hypospadias cases were great little boys and I would correct the contracture at 3 years of age or as soon after as the little fellow would trust me. The urethra was completed a year later.

Syndactily

This was quite common and they turned up regularly in our lists.

Cleft Lip and Palate

It was this type of surgery that originally brought B.K. Rank to Hobart. He dealt with almost all of this until the mid fifties. I was quite fascinated by it and performed steadily more of it. Ultimately I operated on most of the clefts in Tasmania and we had a very good supporting team of ear nose and throat surgeons, speech therapists and orthodontists.

Prominent Ears

Correction of this made many children very much happier

Palmar fasciectomy for Dupuytren's contracture interested me, as the Melbourne team was keen. The orthopaedic surgeon was not very happy at my interest but we agreed to differ, and I operated on many of these cases.

Staged Flap Transfer

Staged flap transfer or alternatively tubed pedicle transfer. These were both very useful. The open flap was simpler and was often used as a cross leg flap. Similarly a forearm flap would enable repair of forehead or face.

Burns were very important to me. I ran the burns unit for 7 years. Old burns of course had been around forever. The really severe ones with chin stuck to sternum or jaw down toward clavicle provided very interesting problems to the plastic surgeon.

We had a few first and second arch syndrome with their severe problems. Scars of all sorts needed excision and management or replacement with flaps or grafts.

Plastic surgery was basically reconstructive. We worked to have things look good but it was not cosmetic surgery.

In 1954 a vacancy occurred on the Honorary Inpatient Staff and I was appointed to it. I was thus doing a lot of major general surgery at the R.H.H. but also covering the plastic surgery. My private practice slowly grew and I found some plastic surgery wanted to be operated on at the private hospitals.

Shortly after this period the Section of Plastic Surgery was formed in the Royal Australasian College of Surgeons. When I was invited to join there were a total of 26 fellows in the section in both Australia and New Zealand.

From 1960 on I used to regularly visit plastic surgeons in Sydney particularly Max O'Mara, Rod Chandler, Jim Poate and Tony Pelly. Later I developed a very useful

liaison with David David from Adelaide and he would come across and see our cranio facial problems.

At the end of World War II surgeons by and large covered the whole field. Plastic Surgery developed rapidly from 1946 onwards.

Specialised Plastic Surgery clinics and training facilities were very limited. The common feature of all these units was the great generosity with which they welcomed the eager junior who wanted to learn.

When I embarked on a surgical career in Hobart I used to say, "The big centres are only a bus ride away. If you want information you must go and get it".

Originally I was thinking of Melbourne and Sydney, but as time went on I included Europe and America.

There were opportunities to meet plastic surgeons at meetings and there were many of these. After the Washington Meeting of the I.C.P.S. I went up to New York. I had heard talk among the Americans of a great exponent of Rhinoplasty, and how impossible it was to attend a session of his. I looked him up in the phone book and rang to ask permission to come. I was welcomed and had a fascinating day. That night, as was my custom when I met a leading surgeon, I made notes of his comments and all details of his procedure. Those and similar notes stayed with me throughout my career.

I visited East Grinstead on several occasions and always came away with a new thought.

A.B. Wallace was one of the pioneers of plastic surgery with a very fine clinic in Edinburgh. This was very impressive and I saw a lot. It was, however, separated from the General Hospital and I felt this was not good. Cross fertilisation between specialities is very important and in particular plastic surgery has a lot to offer. In later years it was suggested that the plastic unit at R.H.H. should be moved to a separate building about 2 kilometres away. I opposed this strongly and the unit stayed in the main hospital.

One year I planned to drive around Scandinavia in a hired car so I wrote to centres in Copenhagen, Stockholm, Uppsala, Helsinki and Oslo telling them I would call in some time wishing in particular to see what they were doing with their cleft lip and palate cases. I was received warmly at all these places and was able to watch them operate and go on their ward rounds. I remember knocking on the door of the hospital where the clefts were done in Helsinki. When admitted I said, "My name is Stephenson from Hobart in Australia". The surgeon said, "Of course you are, where have you been. Is that your wife in the car outside?" When I said it was he told me to bring her inside. Ruth was looked after while I was taken round the wards. We had a fascinating few days in Helsinki.

There was a camaraderie in those days among plastic surgeons. We all learned from everyone and we learnt to copy the best bits from any technique.

During the first decade of my surgical practice practically all of the plastic surgery was dealt with at R.H.H. where there was no means test and I was completely unpaid – it being an honorary system. I was the only plastic surgeon in Tasmania.

Meanwhile I had a young family and a growing private surgical practice. We have three private hospitals in Hobart and I operated in all of them. I did a lot of colon and rectal surgery and was particularly keen on anterior resection of the rectum. Gastrectomy was common in those days. Hydatids have now been almost eliminated but I dealt with them in lungs, liver and elsewhere. Initially I had only one set of surgical instruments, which I took with me to each private hospital as needed. Thirty years later I eventually had a full kit at each hospital – in addition I had a special box which I carried with me for cleft cases.

After that first decade plastic surgery appeared in private with increasing frequency. Breast reduction was in demand and I used various techniques, finally settling on a modification of Dufoymontal about which I lectured in Singapore in 1973. I also saw a lot of malignant breasts and on occasion after doing a radical mastectomy I have raised a latissimus dorsi flap to create a new breast at the same time.

In early 1974 I at last succeeded in my quest to persuade another plastic surgeon to set up in Hobart. John Carney came and when he finally decided to stay I split off from my general surgical unit at the R.H.H. and formed the Plastic Surgery Unit. This was a very happy and functional unit.

I reached 65 years in September 1982 and retired from the R.H.H. Two years later I ceased private practice when I was 67 years old.

Family Details

Arthur Lavender Stephenson – Born 24/9/17 at Simla, India

Parents: Percival William Stephenson of Malmesbury, Victoria, and
Grace Ermytrude Stephenson (nee Lavender) of Bendigo, Victoria

Married – Nell Hazel Ruth Alderton 27/6/42

Children: Pamela Anne 22/8/43
Janet Mary 6/7/48
Linda Ruth 30/1/52
John Arthur 10/5/54

My wife died on 14/10/74

I married again – Leila June Parry (nee Burgess) 20/8/75

Education : St. John's College School – Winnipeg, Canada – 1924-28
Caulfield Grammar School – Melbourne – 1928-34
Trinity Grammar – Sydney – 1935
Sydney University – 1936-41

Recreation

I had no natural aptitude for sport and could not judge the flight of a ball but I always enjoyed actual physical exertion. As a schoolboy I would push a bicycle around a lot of Victoria. I would ride up to visit my grandparents at Bridgewater on Loddon 30 miles out from Bendigo.

My only holiday I could afford when at the university was to take the train to Katoomba – a return ticket was under 8 shillings. Myself and a friend or two would drop down into

the Cox River Valley for 7 or 10 days – maybe up the Kowmung River to Kanangra Walls and then up at Wentworth Falls. A couple of times we dropped down on the northern side into the Grose Valley and followed it through to Richmond.

At school I used to run the mile but not really fast enough. At Sydney University I ran the two-mile badly but then joined the walking club and later tried track walking. This was my forte and I competed from 1 mile to 10 000 metres and seven miles. My one-mile times were particularly good and I was awarded my Blue on several occasions – in 1940 it was for a world class walk of 6 minutes 27 seconds for the one-mile. This would have been the year of the Olympic Games but for the war.

“Stephenson was the man of note at this time, walking the mile in 6.30.1, a figure which was to stand for a long time. He did even better on Festival Day with a time of 6.25.2, truly world class.” (*From time to time 1878-1978 – A History Of The Sydney University Athletic Club* by David Branagan, 1978, Chapter 15, 1940-41, p.62)

“The major losers of the period were our top athletes, particularly Brian Dunn, Paul Magee, Arthur Stephenson, and a few others not far behind.

They must have surely have gone close to Olympic selection in 1940 and Dunn and Stephenson again in 1944.” (*From time to time 1878-1978 – A History Of The Sydney University Athletic Club* by David Branagan, 1978, Chapter 16, 1945-46, p.68)

I played most forms of football but poorly. In Rugby Union I was in the forwards and enjoyed it and was effective in tackling. This was useful in the army if they were short of a player for the team.

A careless tackle by me left me with a “bent” nose. Norm Scott Young, who was in my year and was in 2nd row with me, asked if it was always crooked. Then he said “Stand still”. I heard it moving back into shape. He then moved me into the front row of the scrum. I never had any other treatment.

On the Atherton Tablelands in 1944 and early '45 there was a great deal of effort to keep everyone active. I found I was to play soccer, which I did not really understand. The company commander from the other team and I collided over the ball and his ankle broke and the foot slipped off the end of his tibia and lay at right angles. It seemed to me that

the sooner this was put back in place the better. I put a heel behind his knee and pulled on his foot and it slipped back very easily. The padre held him still by lying over his chest. He had very little pain from the manoeuvre but he had to go to hospital for further care.

In early 1945 a corps sports was organized. There was a ½ mile walk on the track so I got training. There were some very good walkers whom I did not know from elsewhere in Australia. I won on the day and was awarded a leather wallet by I think Lt. General Herring.

Later I learnt that some of the lads in our Engineering H.Q. had put a bet on Bowen for the ¼ mile. I discovered that these lads had also put a bit of money on myself for the ½ mile walk, and the engineering tug of war team. These three engineering representatives all won so the lads did pretty well.

At the 55th Anniversary Graduation Dinner in 1996, I was chatting to Jock Allingham who graduated with me. He remembered this sporting day and recalled that his Artillery unit with whom he was R.M.O. had also backed me with success.

Post war the desire to stay fit remained with me. I tried to train for athletics but could not find enough regular time. Then in 1951 I bought a block of land near a beach and set out to build a cottage. This was a great challenge and kept me fit. It was burnt down in the fires of 1967.

In 1957 I was introduced to squash and began playing twice a week all year round after that. I was not good but would find competitors of my standard so it kept me reasonably fit. In the past five years or so I have had some difficulty in getting a second game in but I always have one game a week and it is a hard one.

On my 60th birthday I was urged by John Sherry – an E.N.T. friend – to get some good woodworking machinery and to make some good furniture. This was in 1977 when the Australian dollar was good and I collected some beautiful machinery of German origin. I had very little time but I made sure that I understood each machine and built a stand for it. One day the supplier spoke to my wife and said, “Tell me Mrs. Stephenson, does your husband ever use these machines or does he only dust them!” At that stage I did some turning and made a couple of small tables.

Since retirement I have had enormous joy from my workshop. My wife June and I design our own furniture and after it is made and sanded she proceeds to do the finishing. Slowly I have gained in experience and have now made most forms of furniture, E.G. dining tables and chairs, chests of drawers, drop leaf tables, book cases with and without doors, and various other pieces. We are so fortunate to have Tasmanian blackwood and myrtle to work with.

Now it is 2000 and I am 82 and still using my woodworking gear and I hope to become more proficient at carving. We swim a lot and make it a yearly ritual to drive to North Queensland in June for ten weeks of swimming and sight-seeing.