Visiting Professorship which I held. It was a very pleasant occasion, and particularly delightful to see that a great industrialist can still take such a personal interest in medical affairs, and even in the doings of every individual Fellow supported by his Trust. I had met many ex-Fellows in the course of my tour and there is no doubt of the value which the Trust is giving, through them, to Canadian surgery in general. I hope that in the future more of them will elect, in their year as McLaughlin Fellows, to visit my unit in Glasgow, where they can be assured of a warm welcome as well as, I believe, a profitable experience in clinical work or research.

RÉSUMÉ

Le Dr. C. W. Illingworth est le premier récipiendaire de la bourse McLaughlin-Gallie. Cette nouvelle fondation se propose de permettre l'organisation de visites au Canada de professeurs étrangers éminents. Le Professeur Charles Illingworth est professeur de Chirurgie à l'Université de Glasgow.

Après avoir renoncé les organisateurs du voyage, le Dr. Illingworth donne ses impressions sur la chirurgie au Canada. Il souligne que, d'une façon générale, les hôpitaux de Glasgow, plus anciens que les hôpitaux canadiens, se trouvent être moins confortables; le malade canadien est certainement habitué à plus de modernisme et se fait plus volontiers traiter en privé. Ces différences sont sans doute en augmentant; ceci risque évidemment d'avoir des répercussions sur les possibilités d'enseignement, de par la diminution progressive des cas publics. Il y a par contre peu de différences entre les médecins canadiens et anglais, en ce qui concerne l'attitude du médecin vis-à-vis du malade et l'organisation des traitements. C'est là, on utilise de la même façon les techniques de laboratoire.

Les problèmes scientifiques qui intéressent le plus les chirurgiens des deux pays sont les mêmes. Dans la lutte contre le cancer, tout le monde travaille actuellement sur les drogues antimitotiques. Il est curieux de noter une incidence de la fréquence beaucoup plus forte de cancers chroniques sur le continent américain.

En ce qui concerne l'enseignement, gradé on venu plus de l'Angleterre en Angleterre, il y a plus de cours ex cathedra, plus de notes à prendre et plus d'examens. L'enseignement post-gradué est plus développé ici.

ROSE AND CARLESS MANUAL OF SURGERY.

For over 60 years undergraduate students as well as graduates studying for their Fellowship have made use of this book in their studies. It has generally been considered to contain more information than any comparable textbook in surgery.

It is a particularly comprehensive book as it has been in the past. It is different from most general surgical textbooks in that it includes sections on ophthalmology, otolaryngology, gynecology and tropical surgery.

The present edition has been published in one volume and this has many obvious advantages. The deletion of the chapter on anesthesia will not detract from it, inasmuch as there are now many textbooks in anesthesia which may be consulted. Another pleasing feature has been the incorporation of a brief biography of the two original authors. This will meet with the approval of those who have an interest in the history of surgery.

The first chapter deals with the general principles related to infection, shock, electrolyte disturbances, wounds, burns, chemotherapy, blood transfusions and similar topics. It has been brought completely up to date with the latest information concerning advances in the care of the surgical patient.

Subsequent chapters are devoted to the surgery of the different organs and systems. Each subject is dealt with in an orderly fashion, first outlining the pathology or altered anatomy, signs and symptoms, diagnosis and treatment. Detailed discussion of the techniques of operations is not provided but the general principles are outlined.

It is a great tribute to any book that it is still in use 60 years after publication of the first edition. With this new edition, Rose and Carless will be assured of a permanent place in all medical libraries and reading rooms. It is one of the most up to date and complete works in surgery. It will be particularly helpful to medical students, practising surgeons and any who wish to consult an excellent surgical textbook.

SIR GORDON GORDON-TAYLOR

The above is a photograph of a recent portrait by JAMES GUNN, R.A., commissioned by the Australian College of Surgeons and now hung in the home of the College in Australia.

I wish to acknowledge my deep appreciation to the artist for granting permission to publish it in the Canadian Journal of Surgery.

J.L. McD.
have given a sketch of the early life, academic achievements and the many honours that have been conferred on this brilliant man. I shall attempt to review these but briefly, and to give more time to the man, as viewed through the eyes of a Canadian.

Sir Gordon was born in Aberdeen, Scotland, on March 18, 1878. He was educated at Gordon's College and Aberdeen University where he studied Classics and obtained his M.A. degree with honours in 1898. He was fortunate in having the privilege of obtaining his early training in the University of Aberdeen, one of the greatest centres of learning in the English-speaking world. His later life proved that he must have been one of the most brilliant graduates of that institution.

With the loss of his father early in life, he accompanied his widowed mother and other members of his family to London, where he became a student in medicine at the Middlesex Hospital, from which institution he obtained his M.B., in 1903. From the beginning of his medical career he showed a keen interest in anatomy, winning the medal in anatomy at the time of taking his intermediate examinations. With a fellow student and personal friend, Victor Bonney, he then determined to further his knowledge of anatomy by working for the degree of B.Sc. This demanded many hours of labour, well into the night, and both men succeeded in obtaining their B.Sc. in Anatomy with honours. In 1906 he obtained his M.S. from the University of London, and in the same year he became a Fellow of the Royal College of Surgeons of England.

Sir Gordon was appointed to the surgical staff of Middlesex Hospital on the service of Sir John Bland-Sutton in 1908. In 1921 he succeeded Sir John as head of the service and about that time he became Chief Surgeon to the Middlesex Hospital.

During the First World War he served as a surgeon with the R.A.M.C., during which period he made many valuable contributions to the field of military surgery, performing many operations in field ambulances and casualty clearing stations, saving the lives of many severely wounded young men. Sir Gordon's greatest contributions, I believe, during that period, were in the treatment of gunshot wounds of the abdomen. While serving close to the Canadian lines, he met the late Dr. Bruce Robertson who successfully carried out blood transfusions to combat shock and loss of blood in the severely wounded. In many of the medical histories written about the First World War, it has been stated that blood transfusions were introduced in the treatment of severely wounded in warfare by the Americans. Sir Gordon was one who stated that blood transfusions were being performed in France in the winter of 1915-1916 by the late Bruce Robertson, long before the Americans had entered the war. Sir Gordon retired from war service with the rank of Major, and was awarded the Order of the British Empire.

Soon after his appointment as Chief of the Service at the Middlesex Hospital, it became the most sought-after service for the surgical training of the undergraduate students, and for the house officers competing for training in surgery. It was my good fortune to be appointed as a house surgeon to G.T. in the winter of 1921-22. This, I believe, was only possible because the most brilliant Middlesex graduate, Dr. Bedford, chose to become a physician, and later became the most outstanding cardiologist of Great Britain. The fact that my father was born in Scotland, within 60 miles of the birthplace of Sir Gordon, also may have proved helpful.

Many pages could be written about the cherished memories I retain of the period spent with G.T., which was one of the most pleasant experiences of my life. During that period, he established his own operating theatre in close proximity to his surgical wards. This made it possible for him to arrange his operating lists as and when he wished. He had regular operating days on Monday and Friday afternoons, using Wednesday afternoon for what he called "clean-up" work.

The nurse in charge of his service, and also the supervisor of his operating room, was Sister Waterman, who was a truly remarkable character. She had served as a Nursing Sister throughout the First World War, and was a plump, jolly soul, with a rare sense of humour, and I can still recall her hearty laughter. She was devoted to G.T. and seemed to carry out her heavy responsibilities of keeping the operating room as well as the Wards, with apparent ease. The operating lists of Monday and Friday were long, and included many of the most major operations in surgery of that day, including thyroidectomies, radical operations on the mouth and neck for cancer, radical mastectomies, partial gastrectomies, and so on, with several attempts at excision of the esophagus for malignancy. These operations went smoothly, without apparent confusion, and at an appropriate hour in the afternoon we would retire to Miss Waterman's office for tea, to which any visiting surgeons of that day were invited.

Sir Gordon firmly believed in the value of the apprenticeship method of learning surgery, and it was his custom to have his house surgeon perform all the standard operations in surgery under his supervision. He would perform one or more of the various operative procedures with his house surgeon assisting, and as time went on he would reverse the procedure, assisting his house surgeon in similar operations. I feel sure that none of us will ever forget the wonderful training we obtained from G.T. nor the many things we learned about surgery during the tea hour, and at other periods when not actually working in the operating room.

It was the custom of Sir Gordon, whenever his operating list carried one beyond the normal hour of dinner for the house staff—which occurred about once a week—to say as we left the operating room, "I would like you to hurry, change your clothes and meet me at —", his favourite restaurant. On arrival, a dry Martini would be waiting, and seated at the table would be Lady Gordon-Taylor, a most charming person, with her two sisters. Following dinner, we would move off to G.T.'s favourite place for dancing, where we would enjoy an evening of ballroom dancing, until about 11:30 p.m. Ballroom dancing, I believe, was G.T.'s favourite form of relaxation, and he was a beautiful dancer.

G.T. never owned nor drove a motor car. However, during his active surgical career he always had a Daimler car, with the same chauffeur, on lease from the Daimler Company. He was very fond of walking, and preferred to walk from his home or consulting rooms to and from the Middlesex. He did, however, use the Daimler when travelling to the various nursing homes in London, when performing operations on his private patients. On these occasions he was always accompanied by his house surgeon, who assisted him with the operation, and who always received an envelope with a generous fee enclosed, at the completion of the operation.

Sir Gordon was an examiner in surgery at the University of Leeds, and was a great admirer of Sir Berkeley Mynihan, later Lord Mynihan. During G.T.'s absence from London, while examining students in Leeds, attending meetings, and performing other duties, he left the care of his patients both at the Middlesex and in the various nursing homes, to his house surgeon. I well remember what a thrill it was to be picked up by the Daimler, with the favourite driver, and to make the rounds of the various nursing homes in London, which were at that time supported in large measure by G.T. and his patients.

It was Sir Gordon's usual custom to invite his house surgeon, during his period of service, to accompany him as his guest on a visit to Sir Berkeley Mynihan, Surgeon-in-Chief of Leeds Royal Infirmary. There, an operative program would have been arranged previously by Sir Berkeley, and it was a great thrill for me to see that master surgeon in action, and to visit the pathological laboratory closely adjacent to the operating suite, to hear a learned discourse on the pathological material that had just been removed from the previous patient. Such was the modesty of G.T. that, I well remember, on that visit to Leeds, I was introduced to Sir Berkeley as a former house surgeon of Dr. H. A. Bruce, and not as his (G.T.'s) house surgeon.

I recall with pleasure another custom then observed at the Middlesex regarding the relationship of the house surgeon to his chief. It was an unwritten law that the house surgeon meet his chief at the entrance to the hospital. There one would observe G.T. approaching, wearing his...
favourite tweed suit with a pink carnation in the buttonhole, walking briskly with his hat at a jaunty angle, complete with cane and gloves. Even in cold weather, he rarely donned a topcoat, and on those occasions, he would carefully move the pink carnation from his topcoat to his double-breasted jacket. After I had donned his hat, cane and gloves in the cloakroom close by, we would then proceed to the wards or the operating room. After completion of his duties in the hospital we would return to the entrance where I would return to him his hat, cane and gloves. To me there was a rare charm and dignity associated with this ritual, and I believe we would do well to emulate, in this country, some of the formalities prevailing in the hospitals of London. It would do much to add to the respect and dignity of the medical profession.

Early in his surgical career, Sir Gordon became an examiner in anatomy in the Primary Fellowship Examination of the Royal College of Surgeons, and he continued in this capacity throughout the remainder of his life, in his later years serving as an alternate examiner when for any reason the examiner appointed was unable to be present. I recall G.T. examining me in anatomy in the summer of 1920. I do not believe one can truthfully say that he looks back with pleasure on any examination, but I well remember G.T.’s courtesy to the students, and the charming way with which he succeeded in putting them at ease.

In 1924 the late Dr. W. E. Gallie gave the Humberian Lecture at the Royal College of Surgeons of London. He was accompanied on his trip to England by his old friend, the late Dr. D. E. Robertson. Some time before they left Canada I had written G.T. with the request that he put on an operative program at the Middlesex during Dr. Gallie’s stay in London. This was the first occasion on which these two outstanding surgeons met, and it was the beginning of a friendship which lasted throughout the remainder of their lives. It was followed by a closer relationship between Middlesex and Toronto, eventually leading to an exchange of professors between these two great medical centres. The present arrangement was worked out between Dean Sir Brian Windeyer of Middlesex, and our Dean, Dr. J. A. MacFarlane of Toronto. This exchange of professors commenced in 1956, and I do hope that it will continue indefinitely.

In 1939 Sir Gordon made his first visit to Toronto to give the Lister Oration to our students of medicine on April 5, the birthday of Lord Lister. This so-called Balfour Lecture was donated several years previously, by Dr. Donald Balfour of the Mayo Clinic, as a gift to his alma mater.

On the occasion of G.T.’s visit to Toronto where we had the pleasure of his company for a period of about one week, he lived as a guest at the York Club, and such was the nature of the man that on each subsequent Christmas, the York Club received a card from Sir Gordon.

It so happened that his visit coincided with the meeting of the Canadian Association of Clinical Surgeons, and part of the programme consisted of a series of operations performed by the Toronto surgeons on the operating floor of the Toronto General Hospital. While driving from the York Club to the Toronto General on the morning of this meeting, G.T. turned to me and said—‘Tell me, who is the best surgeon in Toronto?’ After some hesitation I stated that we had many good surgeons, and that I thought it would be difficult for me to answer his question directly. However, I said, if you would like me to give you the name of the surgeon that I would like to have operate on me, I would choose Dr. Norman Shenstone. He said ‘Why?’ I replied that in my opinion Norman Shenstone was not only a good surgeon but a man of wide experience and sound judgment and I felt that I would be reasonably safe in his hands. G.T. remarked that he would like to see Dr. Shenstone at work. It was fortunate that among the operations booked for that morning was a total pneumonectomy to be performed by Dr. Shenstone on a patient. I believe, suffered from a cancer of the lung. Dr. H. J. Shields was giving the anaesthetic. The operation had proceeded to the point where the chest was opened and the stage was set for the removal of the lung. Before continuing further, Dr. Shenstone noted that the blood from the incision was a little blue. He turned to the anaesthetist and said—‘Harry, are you in trouble?’ Dr. Shields stated that he did not like the condition of the patient. Dr. Shenstone then turned to Sir Gordon and said: ‘I am very sorry, sir, that it will be necessary for me to complete this operation on another day,’ and with that he proceeded to close the chest. As we left the operating room, G.T., with the usual twinkle in his eye, and a slight twitch of the left side of his forehead, turned to me and said—’You know, John, I believe I would like to have that man operate on me.’

Sir Gordon was then Vice-President of the Royal College of Surgeons of England, and within a few months an invitation was extended to Dr. Shenstone, from the Royal College, to accept the degree of Honorary Fellow of the Royal College of Surgeons of England. No one more justly deserved that honour than that modest man, Dr. Norman Shenstone, who has done so much pioneer work in the surgery of the chest, and his many friends were delighted that he should be so honoured by the Royal College of England.

On the occasion of Sir Gordon’s visit to Toronto he stated that during his travels throughout the Commonwealth, it gave him a great deal of pleasure to have one of his former house surgeons perform an operation in his presence. Following this request I arranged to perform a lumbar sympathectomy at the Hospital for Sick Children, on a little child, a victim of infantile paralysis with some shortening of the legs associated with coldness of the extremity on the affected side. Fortunately this operation went well, and as is usual under the circumstances, it appeared to be a very simple surgical procedure. I apologized to G.T. for not being able to perform an operation that might be of greater interest to him. However, as was so characteristic of the man who always considered it his duty to encourage his younger colleagues, his reply was: ‘But, my dear fellow, I am interested in all branches of surgery. The operation was performed by you in a superb manner,’ and then he proceeded to tell me about the unfortunate experience of another surgeon whom he had watched doing a similar operation.

During the second World War, Sir Gordon, though then a man well past 60 years of age, again came to the service of his country, and after being turned down by the R.A.M.C. because of his age, was very soon accepted in the senior service, serving as Surgeon Rear-Admiral in the Royal Navy throughout the remainder of the war. While serving with the Royal Navy he travelled extensively throughout Great Britain and made many trips to the United States, Canada, and to other countries of the Commonwealth. In 1943 he travelled to Russia for the British Council, and during that visit, on behalf of the Royal College of Surgeons of England, he conferred the Honorary Fellowship of the College on the famous Russian surgeons, Judin and Burdenko. In recognition of his distinguished services during World War II, he was rewarded by his sovereign, the late King George VI, by being made a Companion of the Most Honourable Order of the Bath and receiving a Knighthood in the Most Excellent Order of the British Empire. He was also named a Commander of the United States Legion of Merit.

Following the war, Sir Gordon continued to hold an active interest in surgery, devoting much of his time to consulting practice and writing. He was appointed Official Adviser to Overseas Students from the Commonwealth by the Royal College of Surgeons. In that capacity he spent several hours, two mornings each week, at the home of the Royal College on Lincoln’s Inn Fields Road. There he would meet postgraduate students from all parts of the Commonwealth, discuss with them their plans for further training, and greatly assist them in obtaining suitable appointments for such training, in all parts of Great Britain. Frequently following these interviews he would invite them to have lunch with him at the Ritz Hotel on Piccadilly, where, in the dining-room, his favourite table, overlooking Green Park, would be waiting for him. Many of the staff of the Ritz, and even their fathers before them, had been former patients of Sir Gordon. He always received the loving
attention and devoted service which he so justly deserved.

As a result of his extensive travels throughout the Commonwealth and his meeting with so many young men and women at the Royal College, he became by far the best known and most highly regarded British surgeon of all time throughout the British Commonwealth. He followed with keen interest the progress of his younger colleagues, and he appeared to be as pleased with their attainments as would be a father with his son.

Sir Gordon had a remarkable memory for names, and his numerous friends and colleagues throughout the Commonwealth were always remembered with a card from him at Christmas. These cards were always addressed in his own hand, together with a suitable personal note, and were ready for mailing about August. I believe it was his custom to send about 1000 Christmas cards each year. Some 800 cards were already addressed and ready for mailing before G.T.’s death last year. It was with a feeling of sadness that one received his card some time after his death, sent by his faithful secretary, Miss Johnson.

Sir Gordon gave many lectures and addresses on surgery and other subjects throughout Great Britain, the various countries of the Commonwealth, the United States and many other countries. These were all most carefully prepared, written and rewritten until they had reached the perfection in composition and language that he would accent, and then so carefully memorized that they were delivered by him without a note.

Sir Gordon was the recipient of numerous honours from various centres of learning in Great Britain, the various countries of the Commonwealth, the United States and other nations. These have already been recorded elsewhere and I will not, at this time, make any attempt to review the lengthy list of brilliant addresses and the honours bestowed upon him.

Sir Gordon was devoted to his mother, a Gordon, and a member of that famous Scottish clan who played such a prominent part in the early history of Scotland and who later distinguished themselves in the service of Great Britain and the Commonwealth over a period of more than 200 years. G.T. was proud to be a member of the Gordon clan, as one can assume from the name he chose. He was a brilliant example of the true Scot, generous, kindly and possessing an unusual capacity for making friends and giving something of himself to them.

Sir Gordon’s interest in cricket started when he was a boy at school and he retained a keen interest in the game throughout his life. He was a member of Lord’s Cricket Ground, and especially during his latter years he frequently would be found at Lord’s watching a test match. It was while crossing the road near the entrance to Lord’s Cricket Ground that he was struck by a motor car, sustaining serious injuries which led to his death a few hours later, on September 3, 1960, in his 83rd year.

With the death of Sir Gordon Gordon-Taylor the world of medicine lost its greatest classical scholar and most distinguished surgeon, and the British Commonwealth of Nations lost their greatest ambassador of good will. We, his former students and house surgeons throughout the Commonwealth, have lost an old friend whom we loved and admired, and who will remain always a guiding light in our lives.

Our sympathy goes out to his only living sister, and to Miss Johnson, his devoted and faithful secretary for so many years.

RÉSUMÉ

Sir Gordon Gordon-Taylor est né à Aberdeen, en Écosse, en 1878. Il fit ses études au Gordon’s College puis à l’Université d’Aberdeen, où il obtint avec distinction son diplôme de M.A.

Alors qu’il était encore jeune homme, son père mourut et, de ce fait toute sa famille dut se déplacer et habiter Londres. Il s’inscrivit comme étudiant en médecine au "Middlesex Hospital". Cette institution lui décerna en 1903 le grade de bachelier en médecine. Durant ces études il montra un intérêt tout particulier pour l’anatomie et ayant gagné une médaille pour ses connaissances dans cette discipline, il décida d’approfondir cette science et commença son baccalauréat es sciences. Il obtint en 1906 son M.S., et en même temps devint "Fellow" du Collège Royal de Chirurgie d’Angleterre.


Pendant la première guerre mondiale, il servit dans le corps expéditionnaire britannique comme chirurgien. Il contribua grandement au progrès de la chirurgie de guerre, opérant souvent dans les ambulances avancées, sauvant la vie de nombreux soldats; sans aucun doute, l’un de ses plus grands mérites fut l’amélioration du traitement des blessures de l’abdomen par balles. Il eut l’occasion de faire connaître la compétence de Bruce Robertson, un chirurgien canadien grandement intéressant dans les questions de transfusion sanguine; Sir Gordon coopéra avec lui et adopta ses idées: de sorte que, contrairement à ce que l’on croit généralement, ce sont ces deux hommes qui ont répandu l’usage de la transfusion d’urgence.


Sir Gordon entretint des relations scientifiques très étroites avec Sir Berkeley Moonhian qui devint plus tard Lord Moylanan, pour lequel il avait une très grande admiration.

En 1939, Sir Gordon fit un voyage au Canada et y donna une série de conférences. Lorsque la deuxième guerre mondiale éclata, bien qu’il eût atteint la soixantaine, Sir Gordon tint à rejoindre l’armée; il occupa l’emploi de Vice-Amiral Chirurgien dans la marine; ce fut pour lui l’occasion de nombreux voyages à travers l’Angleterre, le Canada, les États-Unis et les pays du "Commonwealth". Sa Majesté le Roi Georges VI le fit Compagnon de l’Ordre du Bain et Chevalier de l’Ordre de l’Empire Britannique. Il fut aussi nommé Commandeur de la Légion du Mérite des États-Unis.

Il consacra la fin de sa vie à l’enseignement, à la lecture et à la publication de divers ouvrages. Il mourut, d’accident, à l’âge de 83 ans.

Le monde médical a perdu un de ses plus grands chirurgiens, et l’un des plus distingués.

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