



# St Vincent's Hospital Medical Alumni Association

## Welcome to the Winter 2017 e-newsletter of your association

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## Your help is needed

We have over a thousand alumni on our membership list for who we need email addresses. Some of these people are likely to be your friends and colleagues. Please do us a big favour by taking a few minutes to pass this newsletter on to friends or alternatively please alert friends to the opportunity to register with the Association on our web site at <http://stvincentsmedicalalumni.org.au/> Membership of the Association is free!

## Annual Cocktail Party and Historical Talk

Members of the Association are asked to note that the topic for the 2017 History Talk is "One Hundred Years of Medical Imaging at St Vincent's". The talk will be given by Associate Professor Stephen Schlicht, the head of Medical Imaging at the hospital. The date for the talk and cocktail party is Sunday, July 30th 2017, from 4.30 pm.

The venue for 2017 will be the Medical Education and Simulation Centre, 3rd Floor, Healy Wing. Short tours of the Education Centre will be part of this event. For more information and to register please contact Sue Mabilia ([Susan.MABILIA@svha.org.au](mailto:Susan.MABILIA@svha.org.au) or tel. 9231 2304).

## Medical Alumni Association Annual Golf Day, 2017

The 2017 annual golf day was held at Greenacres Golf Club in Kew on Friday March 31. Once again the weather was kind to us and the course was in very good condition. Thirty eight Association members participated. They enjoyed a great day with ample time to socialise with old friends both over lunch and at the dinner after golf.

The winner of the event and holder of Doyle-O'Sullivan silver cup for the next twelve months was Dr Michael Westmore with 44 stableford points. For his great round he also won a golf bag. Runner-up prize winner with 42 points was Dr Ray Lanteri.



*Winner for 2017, Michael Westmore, receiving the Doyle-O'Sullivan Cup from 2016 winner, Jill Spargo*

The prize for the group of four with the best total score went to Dr Nim Nadaraja, Dr Michael Yii, Dr Yee Chan and Dr Alex Poon. The nearest the pin prizes went to Dr David Olive (11th hole) and Dr Nim Nadaraja (17th hole) while the straightest drive prize went to Dr Alex Poon.

We thank our sponsors this year, Doquile Perrett Meade Financial Services (major sponsor) and St. Vincent's Pathology (major sponsor) and Zouki Catering (minor sponsor) for their very generous support.

We also thank the staff at Greenacres who looked after our group extremely well, Association secretary Sue Mabilia who handled the advertising and registrations, and our golf day convenor, Dr David Olive, who organised the day superbly.

### Queen's Birthday Honours

We congratulate the following St Vincent's Hospital Medical Alumni who were awarded Australian honours on the Queen's Birthday, 2017:

Helen Edith Herrman AO, for distinguished service to medicine, and to mental health, as a leading clinician, researcher and scientist, to national and international professional organisations, and through programs to support youth and women.

Nicolas John Radford AM, for significant service to medicine as a nephrologist, to the management of medical complications during pregnancy, and to professional standards.  
Raymond David Snyder AM, for significant service to medicine, particularly as an oncologist, to cancer research, and to professional and service delivery organisations

### Advance notice: Reunion for graduates of 1967

For St Vincent's Clinical School graduates of 1967, a 50<sup>th</sup> year reunion dinner is to be held on Friday 1 December 2017 at 7.00 pm. Invitations will be posted in October. In the meanwhile more information can be obtained from Dr Ray Lanteri (email : [raylanteri@hotmail.net.au](mailto:raylanteri@hotmail.net.au) or phone: 0418 393 561).

### Book reviews

**“Saved to Remember: Raoul Wallenberg, Budapest 1944 and After” by Frank Vajda.**

*Published by Monash University Publishing, 2016. Paperback \$34.99. ISBN 9781925377088;  
Reviewed by Dr Peter McNeill*

Professor Frank Vajda AM is a prolific writer. He has hundreds of scientific publications to his name but “Saved to Remember”, a memoir, is the first time he has written about himself.

Professor Vajda is a St Vincent's Hospital graduate. Others in his graduation class of 1960 included Professor Jack Martin, Mr Allan McCleod, Dr John Breheny, Dr Bruce Tomlinson, Dr Dennis O'Day, Dr Russell Meares and Ms Anne Shannahan. It is an extensive list of luminaries amongst whom Professor Vajda stands tall.

After an intern year at St Vincent's, Frank spent a year at the Royal Children's Hospital before going to the Repatriation General Hospital where he fell under the influence of Dr Arthur Schweiger and developed his interest in neurology. Frank pursued a career in clinical neuropharmacology returning to the Austin Hospital in 1974 where he joined forces with Peter Bladin, another St Vincent's Hospital graduate. They were a formidable team, Frank's expertise in clinical neuropharmacology complementing Bladin's intense interest in epilepsy.

Professor Vajda returned to work for a time at St Vincent's Hospital in 1994 and in 1997 established the Raoul Wallenberg Centre for Clinical Neuropharmacology, combining his two passions.

Raoul Wallenberg is a major character in Frank Vajda's book "Saved to Remember: Raoul Wallenberg, Budapest 1944 and After". Vajda writes: *"This story is an untidy mixture of events, people, anecdotes and a rather simple philosophy. Though my observations have been tempered by a defensive attitude forged in a disfigured childhood, I hope they are representative and not just trivial."* There is nothing trivial about the events which he describes nor the effects these have had on him. He bears the scars of a survivor's guilt as he says *"this narrative is secondary to my prime motive of expressing feelings of sorrow and shame and, as much as any single person can, trying to prevent the recurrence of circumstances that culminate in racial mass murder."*

A very influential event described in the introduction provides the motivation to remember. Vajda, aged 14, and his mother visited the Mathausen Concentration Camp where the young Frank's father was murdered in 1945. He describes seeing a stone memorial to the dead: *"quietly, sadly and with clenched teeth I said to myself: I shall not forget"*. He has not.

The book is in two parts. The first part is the story of his family and his own survival of the holocaust in Budapest. It is a mixture of the personal and the historical. Individuals and family are recounted in loving detail. The historical accounts are succinct and direct. They bear Vajda's inimitable style, describing Admiral Horthy, head of the State of Hungary as *"a feeble, aging, spineless toady of Hitler whose effective rule was virtually abrogated after being confronted by the Germans."*

It is not a linear account and is, as he described himself, *"a mixture of events, people, anecdotes."* He describes a selection of near misses where in any one of which he could have been killed. The story of his extended family and his own survival during and after the war and ultimately his and his mother's emigration to Australia, his schooling and medical career, are recalled with verve.

The second part of the book is devoted to his campaign to recognize the contribution of Raoul Wallenberg, a Swedish diplomat, in saving tens of thousands of Hungarian Jews from the Holocaust. It is any intriguing story wherein he realises how his own deliverance was almost certainly orchestrated through Wallenberg and his efforts to uncover Wallenberg's fate after he disappeared into the Soviet Union and to obtain due recognition for his work.

It, too, is a moving story of Professor Vajda's sense of obligation and ongoing commitment. The two stories are quite distinct but book-end a remarkable life journey.

Saved to Remember is easy to read in its conversational style though the subject matter is inevitably harrowing. It is clear that the single mindedness of his mother has been passed on in Professor Vajda's character. It is a reminder of the extraordinary back stories that can be behind people who do not live their lives with fanfare. There are probably many similar stories but we are fortunate that Professor Vajda has remembered and shared his with us.

*Peter McNeill is a neurosurgeon at St Vincent's Hospital. He has been a friend of Frank Vajda since first meeting him when McNeill was an intern at the Austin Hospital in 1977.*

### **“Good Medical Practice: Professionalism, Ethics and Law, 4<sup>th</sup> edn” by Kerry Breen, Stephen Cordner and Colin Thomson**

*Published by the Australian Medical Council, 2016. Paperback \$150.00. ISBN 9781938182679  
Reviewed by Dr Heather Wellington*

Although the basic tenets of professionalism and ethics of medical practice don't change, the practice and challenges of medicine have changed enormously since *Law and ethics in medicine for doctors in Victoria* was first published in 1994.

This new edition, authored by three highly respected leaders in medicine and law, builds on that first and two intervening editions to present a unique compendium of clear and concise technical information combined with wise and practical advice.

The authors' description of the hallmarks of a 'good doctor' – one who engages in good medical practice, upholds the ethical standards of medicine, is committed to all the roles expected of doctors, is professional in their approach to clinical practice, can balance the 'art' and 'science' of medicine, and at the same time maintains an appropriate balance between the professional and social spheres of daily living – clearly establishes the framework for this major work. Their description of the changing environment in which medicine is practised confirms the need for a fourth edition.

Chapter one defines good medical practice and analyses the environmental changes influencing the practice of medicine. Chapters two to four describe medical professionalism and ethics, and contextualise them in the study and practice of medicine. Every medical student and doctor should read these chapters, which collectively underpin the entire work but also stand alone as an exposition of the defining characteristics of good medical practice and the reasons most doctors choose medicine as their profession.

Good communication and its relationship with good medicine is given appropriate early emphasis in this work, which includes practical advice on how to create strong therapeutic relationships founded in mutual respect, together with advice on managing specific communication challenges.

The remainder of this book is extraordinarily comprehensive, well-researched and well-structured and clearly has high practical utility. In total, over twenty-nine chapters and more than 600 pages, it provides the information and analysis necessary to understand the

regulation of medicine in Australia, the structure of the health care system and the numerous professional, ethical and legal issues doctors encounter on a regular basis. I challenged myself to identify any issue I have dealt with in my busy practice in the interface between law and medicine over almost two decades that is not addressed in this work. I found none. Although the complexity of Australia's federal system and the consequent differences in regulation, common law and health care delivery systems in Australia's states and territories mean that some topics can only be dealt with at a high level, in all cases the reader gains a rapid understanding of key issues and a pathway to more comprehensive information if required.

*Good Medical Practice: Professionalism, Ethics and Law* (4th edition) combines the role of reference book and practical guide and will be an extremely useful resource for students and doctors working in the Australian health care system, and for those who work in related areas including as members of regulatory boards and in health care governance.

*Dr Heather Wellington is an alumnus of St Vincent's Hospital. Holding degrees in medicine and law, she has worked in many roles in health care management including Director of Medical Services at Geelong Hospital and Chair of the Board of the Peter MacCallum Cancer Centre.*

## From the Archives

### Medical treatments seventy years ago

When confronted with a 1949 document\* that describes in detail the care of patients with conditions including coronary occlusion, cardiac failure, peptic ulcer, gastrointestinal haemorrhage and the like, it is difficult to avoid an initial reaction of "did they really do that?". If this is your own reaction, you might want to take a step back and wonder what a medical historian seventy years from now might think of some of the treatments we use in 2017. To help start your reflection, try to imagine what might be said about operations for obesity used in the last thirty years which have included jaw wiring, jejunio-ileal bypass and now various procedures to reduce gastric capacity. With that caveat, here is an outline of some of what medical students were taught nearly seventy years ago.

Patients with coronary occlusion were to be put to strict bed rest for the first two weeks '*for this is the period when cardiac rupture is most liable to occur*'. They were not permitted to feed themselves and were to be given a light diet. An enema or a gentle laxative on day three or four could be given if needed. Ancillary treatment included oxygen, morphine and vasodilators (aminophylline or atropine). After one month of bed rest, gradual mobilisation was permitted.

For patients in cardiac failure, in addition to bed rest and oxygen, the mainstays of treatment were digitalis and diuretics (mercurial diuretics or xanthines). Students were taught that side effects of mercurial diuretics were rare other than '*the occasional toxic cardiac arrest, if given intravenously*'.

For patients with a peptic ulcer, the aims of treatment were to heal the ulcer and keep it healed. The first line of treatment listed was psychotherapy. This was followed by the directive of complete bed rest for three to four weeks. For the first two weeks the patient was to receive a *'number one ulcer diet'* which consisted of feeds of a 50/50 mixture of cream and milk given two hourly between 8.00 am and 8.00 pm. Antacids were listed next and finally bismuth carbonate. Interestingly bismuth in another form was much later shown to have ulcer healing properties.

For patients with ulcerative colitis the situation was gloomy as treatment consisted of psychotherapy, bed rest, diet, bowel *'sedatives'* and absorbents. The outlook for rheumatoid arthritis was equally negative as students were informed that *'unfortunately there is no specific therapy'* and that the course of the illness was *'usually chronic and prolonged'*. The first treatment recommended was a diet high in calories and vitamins. Next was the administration of salicylates 3 grains (200 milligrams), three to four times per day. Gold injections were mentioned but toxicity was said to include dermatitis, stomatitis, gastroenteritis, aplastic anaemia, agranulocytosis, nephritis and hepatitis. Physical therapy of heat and massage was stated to be of *'great value'*.

*\*The 1949 document consists of a set of lecture notes on therapeutics provided to final year medical students. These were found recently at the hospital among a collection of research work books and other items belonging to Professor Carl de Gruchy who was Professor of Medicine at St Vincent's from 1962 to 1970.*

## News from St Vincent's Hospital

In past editions, we have arbitrarily extracted some news items from the St Vincent's Hospital monthly newsletter known as *The Font* and the St Vincent's Foundation newsletter, known as *The Pulse*. These two newsletters have now merged. To give the reader complete access to this news source, the hospital has provided the following link:

<http://www.svhm.org.au/aboutus/newspublications/pages/theFont.aspx>.

Just click on the link and you will be taken to recent issues of *The Font*.