

Interviewee: James Syme
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ME: Today is the 4th of November 1997, and we have Dr James Syme here. He was the Secretary of the College from 1971 to '75, a member of council from 1976 to 1980, and 1981 to 1989. He was Vice President of the College from 1985 to 1989, and also convenor of the Conference Centre project.

ME: Where were you born?

JS: I was born in a small town in Fife, called Lochgelly. My father was headmaster of a local school there.

ME: And how long did you live in Lochgelly?

JS: A fair bit, because this was during the war. In fact, it was before the Second World War started. I would have otherwise gone away to school, but I went to the local primary, which is very good, and the local high school was about five miles away, which was even better and I was very fortunate. It's a good school...

ME: Which school was that?

JS: It was called Beath High.

JS: Somebody who was there about four years ahead of me was Jim Black the Nobel Prize winner.

ME: So it has a distinguished...

JS: ... It had a good track record and some very good teaching.

ME: When you were at school, what subjects did you take? Did you have an intention of going into medicine, or... ?

JS: I did from the age of about 15/16 thereabouts. I did the old Scottish Highers: I did the usual sort of English, maths, physics, chemistry, French, and then did a Sixth Year Highers, which were mainly maths actually, plus physics.

ME: Were there people who taught you who were particularly influential on you?

JS: Well, the rector of the school was very influential. He was a very small, very dynamic man who would sort of summon you at intervals and say "I think you should do so-and-so, I will make the arrangement", but nonetheless it was what I wanted to do.

ME: And did you play sport at school? Were you interested at all in that?

JS: It's fairly limited because, again, wartime. I mean, our playing ground was taken over for some other purpose – I can't remember what now, our playing fields weren't in use. I played a tremendous amount of golf.

ME: Do you still play golf? Are you interested in golfing?

JS: Very intermittently. I don't play all that much now.

ME: But do you have a naturalness in golf through playing from a young age?

JS: I wasn't bad at it. I got down to a handicap of 12.

ME: That's very good.

JS: That was after I injured my wrist, which improved my handicap considerably.

ME: [Laughs] Right. And what was Fife like during the war? Was it very dominated by the navy? Or did you have any awareness of what was happening say, at Rosyth or... ?

JS: Oh very much, yes, very much. Because of course there were very frequent alerts when the German reconnaissance planes came over from Norway. And Rosyth of course was a very busy naval base indeed. And, another major sort of forces' occupation there was Donibristle which at that time was [inaudible] and it was a very busy airfield actually. But, of course, the main industry in West Fife was mining.

ME: And were there kids in your class, were they mostly miners' sons who you were with or... ?

JS: A fair proportion, yes.

ME: Because there's a fair amount of agriculture as well, isn't there, in Fife?

JS: That's further east in Fife, in the so-called Howe of Fife, and that's good farming country. But around us, there were some farms, but there were an awful lot of mines, all of them now closed, without exception, all gone.

ME: Yes. It's devastated isn't it that part.

JS: Oh yes, absolutely.

ME: And were there people who you knew at school who you still have contact with? I mean, did you make lasting friendships?

JS: Yes. There's two or three that have survived all these years. I had a visit from one who's a sort-of leading textile designer actually about a week ago. He moved down to Yorkshire to stay with us. But I've kept up some quite good friendships from school and from university.

ME: And having decided that you would go to university and do medicine, was your choice in any way influenced by where you went? Or was it that Edinburgh was close by, or... ?

JS: Well, Edinburgh was the first choice for many of us. It's the only one I applied for to be honest. And considered myself very fortunate to be accepted. We were the first of the Sixth Year curriculum, and it was the first year of the National Health Service, so it was a bit of a time of change as it were, in the hospital service.

ME: Were you aware of the impact of the National Health Service, it was likely to have on medicine, or did you just take it in your stride as being just part of evolving life after the war?

JS: A bit of both. I was very aware of the change and I think everybody was at that time, from the old panel system and general practice to the National Health Service. It also had its impact in hospital medicine, where, as you know, consultants and teaching hospitals essentially made their living from private practice, and now were salaried consultants. They still made a lot of their living in private practice, mind you.

ME: Yes. And then you came to Edinburgh. And, did you live at home or did you come and live in Edinburgh?

JS: I came and lived in Edinburgh. My father had been a student here and he was adamant that on no account must I live at home – maybe he wanted to get rid of me, I don't know. But, anyhow, I lived in Edinburgh.

ME: What was your mother's views on this? Did she work, or was she a traditional mum?

JS: A traditional mum.

ME: And did she have a big influence on you?

JS: Quite a bit. She had been a secretary to a local lawyer, a law secretary, and had a very clear analytical mind as it were— they both had. My father was one of these people – he was a very good mathematician, and a good teacher. He was also red-green colour blind, and one of the clumsiest men you'd ever known, which still puzzles me to this day why he was selected for air crew training at the end of the First World War [Laughs]. I think he did more harm to our side than to the other side. But they were both very supportive and very helpful.

ME: Was your father, did he... I mean, you have a great interest in literature, don't you? Was your father... ?

JS: Oh, very much.

ME: And did he guide you? Or did your mum guide you in reading, or did they... ?

JS: Well, he'd fairly eclectic taste, some of which lingers. For example, I think I'd read the complete works of Bernard Shaw and Rudyard Kipling from a fairly early age. But he read widely and I read widely.

ME: Did you have that copy of Bernard Shaw's plays which said "These should be read as a young man, a middle-aged man, and an elderly man, because you read different things into it." I mean, its enormous arrogance on the man's part.

JS: Oh yes. He was a very arrogant man.

ME: But the three stages of life...

JS: I don't remember that. I remember the collected works that my father had that was beautifully bounded in blue leather. Few of them have survived.

ME: And Kipling was the other one, was it?

JS: Yes.

ME: And do you still have an affection for Kipling...?

JS: Oh, I do. I think there was a sort of "anti-Kipling" at the end of the First World War particularly because he was regarded to be jingoist, although a lot of what he wrote wasn't, and a lot of it was misunderstood.

ME: Yes. I mean, he was very much a child of the times, wasn't he, in certain respects. But, as a white man in India, he looked at it as a white Indian, didn't he?

JS: Mmm. I think *Kim* was the work of his that I prefer, and his description of the red llama and of the great trunk road and so on is obviously done with great affection – considerable literary skill, too. But, there was one Indian journalist who said that Kipling understood India very well – didn't really understand Indians.

ME: [Laughs]

JS: I don't know how true that is.

ME: And you came to Edinburgh. Did you go to a hall, did you...?

JS: No. There were very few halls at that time - this was long before the Pollock Halls and I stayed in sort of traditional digs in Marchmont.

ME: Did you? And were you there for the whole six years in digs?

JS: Most of it, yes.

ME: And did you stay in the same digs?

JS: Moved once. Twice. Twice.

ME: And did you manage to find good landladies?

JS: Oh yes, very good. No problems there at all.

ME: And you started medicine when?

JS: 1948.

ME: And that would be a very mixed year, wasn't it?

JS: Well, it was the last year in which ex-service people predominated. I mean, the schoolboys like myself were in the minority. So, a lot of people with a great variation in age and experience.

ME: What was that like?

JS: I think it was rather good. It was a very happy year and in fact, when we hold our reunions every five years, we have probably the largest turnout because people got on very well.

ME: What were the ex-servicemen like? I mean, did they... some of them struggled, didn't they? After...

JS: Yeah. I mean, away from school and academic life for some years. There was such a variety, I mean, there was one who had been skipper of a submarine, another one who had been a corporal in a clothing depo, and all sorts of things. But they were very varied, and I think it was a good idea to mix the "bairns" like myself with people like that.

ME: So you went into first year and did botany, zoology....

JS: Oh yes. 8:30am lectures down in the Botanic Gardens.

ME: And did you used to have to go on a Saturday morning?

JS: No, that was voluntary. You could if you wanted to. There was Jake [James] Slater, who was an eminent neurologist in the Royal Infirmary who was known as "The Suave [Savile] of the Saturday Morning Sessions" and he used to conduct lectures and tutorials on Saturday mornings. Now, incidentally, his son Jock, - Sir Jock - who's I think First Sea Lord now.

ME: And you'd go down by tram to botany?

JS: Oh yes.

ME: And who taught you in botany?

JS: The professor was called Wright. That's the chap... I can't remember his first name.

ME: Selwyn... No, that was the Reverend, wasn't it?

JS: No, it wasn't [Selby] either. This one was definitely not a Reverend.

ME: But did you also get taught by... what was his name... Not Hudson, the man who wrote the textbook... Who taught you zoology?

JS: You ask me to remember things so far back! Hold on, I've almost got it. This was up at King's Buildings we did zoology.

ME: But do you remember them as shapes and people? Or was it a waste of a year? Was it a "settling in" year?

JS: Oh no, it was a good "settling in" year. Of course, again you see, the Scottish Highers were, I don't think, the standard of the A-Levels now, and I think we needed more time with the basic sciences.

ME: Right. And chemistry at King's Buildings, and...?

JS: Chemistry in the New Quad actually. And geology, botany, physics, down in the old Royal Infirmary, in High School Yard, that direction.

ME: That was good, wasn't it?

JS: It was good, yes – I enjoyed that.

ME: And then... having got through this sort of "getting together" year – were there losses there? Were there people who just didn't - ex-servicemen - who didn't cope with that?

JS: A few, but nothing like as many as stumbled over the second progression exam, which was the one in anatomy, physiology, biochemistry, embryology, and so on.

ME: That was the anxiety [inaudible].

JS: That was the great hurdle, that was when [inaudible] broke, you know – that's where things came unstuck. And of course in these days, you were allowed two attempts, unless you'd been in the services before. You were allowed two attempts, and if you failed your resit, in any exam, it was straight into the forces. At least, the males were. There were relatively few females in our year.

ME: But that would've made a bigger impact on you, presumably, whilst you got into the real pre-clinical era, wasn't it? I mean, you would be taught by Jimmy?

JS: Oh yes. He was retired officially, but hadn't taken retirement as it were. But he was always hovering around the place with his black skull-cap and so on.

ME: Do you have any recollections of him as a person or...?

JS: I think in one word – austere, would be the best way to put it. The professor was J.C. [James Couper] Brash, who was a very good writer – not a particularly good teacher.

ME: Who gave the formal lectures though? Was it Brash who...?

JS: Brash and his reader, who was called [Robert Gaskin] Inkster.

ME: Now, he was a very nice gentleman, wasn't he?

JS: Very nice indeed.

ME: Because he always seemed to be in the shadow of the professor, and he had a kindness and a warmth, that...

JS: He was a better teacher, to undergraduates, yes.

ME: Yes, and when he came round the dissecting room, there was something very special about him wasn't there?

JS: Oh yes.

ME: And did they have the big fire in the middle of anatomy or was there central heating in those days?

JS: There was, actually. I don't remember an open fire.

ME: Who taught you biochemistry? Was [David] Whitteridge there then?

JS: He was the Professor of Physiology at the time. It was Guy Marrian who was the Professor of Biochemistry. G.F. Marrian, and his sidekick - I don't know if he was senior lecturer reader – a chap called Ramsay. Ramsay was a good teacher, but Marrian was a superb teacher.

ME: Was he?

JS: Oh, first-rate.

ME: Because he, it was said, would've got a Nobel Prize if they had divided them.

JS: He isolated estradiol, one of the first of the female sex hormones to be isolated. His daughter was in the year behind me, who's a fellow paediatrician up in Perth now.

ME: Quite pretty, wasn't she?

JS: [Laughs] Very. Not bad even now.

ME: [Laughs] No, she's still a very handsome-looking person, isn't she.

JS: Oh yes.

ME: So, you got through that awful hurdle of [second...]. Do you have any recollections of that period? I mean, did you find it difficult? Or did you find it...?

JS: I found it frustrating. I wanted to get into clinical medicine, and it was very frustrating, it was very divorced from it. And five terms of anatomy, and umpteen hours a week of anatomy, much of which you sort of forgot the following week or so, you know, and to this day trying vaguely to remember the relationship of the [inaudible] and lateral [inaudible] muscles and so on is a bit of a stretch. I really started... I performed better, and started to enjoy things, once these years were over, and I moved into clinical medicine and pathology, microbiology, pharmacology, therapeutics and so on.

ME: Because up until then it was an extension of school, wasn't it?

JS: Very much.

ME: It became a little bit more detailed, and... but it had that same sort of feeling that “here we go again”, and it had little difference from what one had been at school with.

JS: And of course, that was two years and two terms of that. It was a long haul.

ME: A long haul. And then you got into clinical. And, did you have the transition term in those days?

JS: Yes. The third term of third year was transition.

ME: Because that was a holiday – in my recollection – or did you?...

JS: I quite enjoyed it. It wasn't completely satisfactory.

ME: Which ward did you go to?

JS: In the medical ward. It was ward 32, I remember it vividly because the chief was T.R.R. Todd. To say he's a martinet is putting it very mildly indeed.

ME: Were you part of the group that had their hands inspected as you stood at the door?

JS: That's right. In case there was a nicotine stain. And if your shoes squeaked when you walked up the ward you were sent off to change them. He's an extraordinary man, actually.

ME: [Laughs] Do you have any recollections of him?

JS: Oh, quite a bit, because when I started becoming involved with the College he was a very regular attender. He's a stern, austere sort of man, but once you get him talking socially, he'd had a very interesting life.

ME: Had he? The only recollection that I had of him is that he used to come to the Royal Infirmary – he lived with his mother – and he came to the Royal Infirmary by tram, and then when his mother died, he married the ward sister and bought a large car.

JS: That's right, yes. But he'd been a Sergeant Major in the Cavalry in the First World War and was very proud of that. A very regimental character.

ME: Had he? Goodness. Lucky to survive.

JS: Lucky to survive, yes.

ME: And then you started in... who taught you in pathology?

JS: Good old [Alexander] Murray Drennan was the professor then. [Laughs] On day one, lecture one that he gave, he said “Whatever you do, you must attend all my lectures, and you must not use [William] Boyd's *Textbook of Pathology*”. And, his lectures weren't all that great, and I must admit I wasn't very regular attender, and I worked solely from Boyd's *Textbook of Pathology*, and got the pathology medal. So, there's a moral in that somewhere [Laughs]. And [Thomas Jones] Mackie was the Professor of Microbiology and Bacteriology then.

ME: Yes. What was he like? Because he had been there from before the war, wasn't he?

JS: That's right. He was a very good teacher. Again, I know I keep using the word, but fairly austere – a sort of lowland Scot, you know, who had a fairly firm approach to things, but a very good, very thorough teacher. I was very fortunate there, and you know of course, with Pharmacology - Gaddam was the professor there, who was an international figure, and again a good teacher. So we were really lucky, actually.

ME: They were brilliant, weren't they? I was reading in the *Annual Review of Pharmacology* recently about some eminent American coming to work with Gaddam, and he found him slightly remote figure but clearly someone very special, and he got on extremely well with Marthe Vogt.

JS: Oh I remember Marthe Vogt very well. She had that incredibly thick teutonic accent. I'll always remember, I was in the lab one day and she was telling me something and I was trying to decipher her, because she had a very strong accent, and there was an Egyptian postgraduate who came up and interrupted her, and she sort of chased him off and turned, "I cannot really stand foreigners". [Laughs]

ME: [Laughs] Yes. Someone in the third professional was being examined by Derrick Dunlop and Marthe Vogt and she was leaning forward, rattling this candidate and Derrick was leaning back in his chair mouthing the answers and making sort of signs... [ME and JS both laugh].

ME: So, in fourth year, do you remember the teaching then? Which was really the start of clinical [inaudible].

JS: Well, fourth year was the pathology and, etcetera, and the staff on the wards, as it were, and I did two terms with another formidable figure, Rae Gilchrist, past President, now dead. That was well taught, and the young chap, Michael Oliver was there, and Bobby Marquis would do the juniors, and they were good teachers. Rae Gilchrist was a formidable character, a bit carnivorous in outlook in many ways, but he taught you well. So, I did two terms there, and a term of clinical surgery in 11 and 12 in the Royal.

ME: That was...?

JS: R.L. Stewart. Lesley Stewart.

ME: That's a good start, isn't it. Did you get exposed to "the Guilk" standing at the end of the bed with the whole clinic there? And the ward sister inviting people out to observe the patients?

JS: Oh yes, very much so.

ME: I mean, that must have been one of the most frightening experiences of ones' life, wasn't it? To go out and "what do you see?"

JS: Didn't suffer fools gladly, put it that way.

ME: No. Yet, curiously, one still remembers the node of inspection and... And then, when did you first start doing paediatrics?

JS: Oh, that's very much later. Long after I graduated.

ME: Oh right. I mean, was there not a term...?

JS: Well of course, I did do paediatrics as an undergraduate, but I mean with no real intention of it as a career. Well, I enjoyed it, and did reasonably well in it. Richard Ellis was the professor then. He was a good teacher – the most gentle of men. Extremely courteous to everybody – children, parents, students, staff. You know, if he was going to be five minutes late in arriving for a ward round, he would phone up.

ME: Who did you get in final year then? Who were your teachers then?

JS: Well in fifth year in these days, you did your clinical medicine outside the Royal Infirmary, and I was down at the Eastern General with Ted French, who again was a good teacher.

ME: Were you? But he was not of the same style, was he, as say "The Guilk"?

JS: No. In many ways, he was possibly an equally observant clinician. Very much so.

ME: But his style of teaching was...?

JS: Less terrifying. He had quite a promising registrar in our Lord Kilpatrick, ex-chairman of the GMC [General Medical Council]

ME: What do you remember about Ted French's teaching?

JS: I think the thing I remember most is sheer ability to illicit and interpret physical science. He was extremely good at that, and was extremely good at teaching it, too. And then in final year I was with Derrick Dunlop, which is memorable of course.

ME: Now, why do you think he had the edge on the others? What do you think it was about Derrick that was so... was it intellect? Was it...?

JS: Intellect, yes – he was a very gifted, knowledgeable man. He had a gift of flamboyance in a pleasant sort of way. Very good approach to patients, especially women, who adored him. When the professor appeared, the make-up came out when they knew it was the prof's ward round. And he liked teaching.

ME: It's interesting, he makes a lasting impression on people, doesn't he? I was curling recently, and I met this man who said that he had met Derrick in ward 19. He was newly out of the army, just been out of the marines, and had asthma, and he was dying. He'd been in the ward for three or four months, and terrible things were happening – suddenly, Derrick appeared, and Derrick said "I am going to cure you. Are you prepared to be cured?" and "I will cure you in three days". And this was one of the first to have steroids, and this man was able to get up, go down the ward, go down the corridor to go to the toilet, from ward 19. It was interesting to hear of Derrick from the other side.

JS: Yes, Derrick had the gift of inspiring confidence in patients. I remember, when I was house physician there, we'd admitted a nice old lady who was obviously myxoedematous. She'd just come in a few hours before, waiting when Derrick was doing his round. Derrick is sitting beside this rather

distressed old lady, taking her hand into both of his and saying “my dear, I’m going to give you some tablets that will make you a young girl again”. [Laughs]. She started improving from that moment onwards.

ME: [Laughs] You couldn’t fail with that, could you? And who did you do your surgery with in the...?

JS: Well, the last two terms, Keith Paterson-Brown - that was in fifth year. And then, in final year, the prof – Sir James Learmouth.

ME: Right. What was Keith Paterson-Brown like?

JS: Well, he’s a very good thyroid surgeon and a tremendous track record in the days when thyroidectomy was not as straightforward as it is now. He’d done about 400 without losing a patient – which was a world record, I think. And, he was a good teacher. And then again Learmouth was a fairly tough character, you know, Sir James. Who again, didn’t suffer fools gladly. But enjoyed teaching, did it very well.

ME: Did you have to spend a lot of time in theatre with him?

JS: Yes – with all of them in fact, you were expected to sit in the gallery and watch, which was in many ways an awful waste of time. You couldn’t see a damn thing most of the time, actually.

ME: And of course, they would mumble, wouldn’t they? And then you wouldn’t hear or see what was happening. The theatres there were very odd, weren’t they? Sitting up there in the balcony, way away from anything.

JS: I know, it was very strange. I think the oddest, there was one theatre in the Edinburgh Royal which had the anaesthetic room, and then a long, long corridor - about two thirds the length of this new library - before you reached the theatre, and I remember thinking “what? why?” and I was told this was during the brief vogue for acetylene as a general anaesthetic, as an inhaled anaesthetic. It was such a great fire risk, and explosion risk, that they decided to have their explosions at a reasonable distance before they brought them in.

ME: Were there people who you made lasting friendships with in your clinical years?

JS: Fellow students?

ME: Yes.

JS: Oh yes. Quite a few.

ME: Do you still have contact with them?

JS: Oh yes. Oh indeed, yes.

ME: What sort of people? Are there people that we would know?

JS: Possibly not, no. Few of them ever have much to do with the College. You’d remember in these days, a majority of medical graduates in Britain left the country and emigrated.

ME: Did most of your year leave?

JS: Yes. Over 50 per cent left, but come together every five years.

ME: And where did they mostly go to?

JS: All over the place: United States, Canada, Australia, New Zealand, some more far-flung places – one established a very thriving practice in Singapore, and I met him there about five years ago. But they dispersed fairly widely.

ME: And at what stage did they disperse? I mean, was there a feeling of inevitableness about this, or did people have the thought that they would practice in Britain and then suddenly thought “It’s not going right”?

JS: That is hard to say. I think that a lot of it was the jobs in Britain – you’ve got remember that the average age of our year was relatively high, being that so many served. A lot of them were married and had a family to support, and the salaries for junior hospital staff were really pretty niggardly. And of course the salary, if they decided “Well, we’ll do General Practice”, they may be taken on as an assistant, with a view to partnership in ten or twelve years time, and they weren’t paid very generously then, either. And I think a lot of people went where the grass was greener, and some have done very well.

ME: And then you graduated... presumably, were you the Eccles Scholar?

JS: I was, yes.

ME: That’s a nice thing to be, isn’t it?

JS: Well, yes. [Laughs]

ME: And who did you do your house jobs with?

JS: I did my first surgical house job with Lesley Stewart, who was then Senior Surgeon in the Royal.

ME: What was his particular expertise?

JS: Neurology. And his sub-chief was T.I. Wilson, who I think is one of the best general surgeons that I have ever come across.

ME: Wonderful man, wasn’t he?

JS: A tremendous chap.

ME: I think one of the real treats of being a resident was being allowed to assist him, if you could choose the word – because he didn’t need an assistant, did he?

JS: Oh no.

ME: And he had that silver or stainless-steel rectangle that he’d hang the [ligature or the threads over] whatever you call them... and everything was beautifully laid out.

JS: He was a very good surgeon. Very good pair of hands, and a nice approach to patients. I remember once when my wife was ill – it was not long after we married – and [inaudible] came to see her in her domiciliary and Pam who was a stranger to Edinburgh, strange place and a bit worried, and this kindly person appeared and sat down and said “well my lassie” and immediately, you could just see her relax. [inaudible] eventually decided that there was nothing much wrong with her, nothing that wouldn’t cure itself, but kept phoning up and dropping in. Very kind man.

ME: And one of his great tricks was to speak either Hindi or Gaelic in the appropriate situation with the patients. I don’t know how much he knew, but it was enough to impress them.

JS: Well, he had a fairly impressive record of service in India during the Second World War. As many of the senior people in Edinburgh, and elsewhere, had.

ME: Right. And you did your house physician job with... ?

JS: With Derrick Dunlop.

ME: And who were his acolytes?

JS: His immediate sub-chief was [Lindsay Lowe], again the kindest of men, and Alistair McGregor, who went on to become Professor of Therapeutics, I think, in Aberdeen. He died relatively young from congenital heart disease, actually. But it was a very busy time of course – there were two wards, each of 36 beds, plus ward 21: the metabolic unit, subsequently renal unit, and there were two housemen. And you did ward-rounds seven days a week – Sunday morning ward-rounds were obligatory. It was a busy time.

ME: Who was the ward sisters?

JS: Oh, there was the famous Kate Anderson. Can you remember her?

ME: I remember Kate Anderson, yes. Tell us about Kate Anderson.

JS: I liked Kate. She was formidable, ran a very tight ship indeed. Basically, I think rather a kind person, but these were the days of course when a lot of the ward sisters in Edinburgh lived on the ward, and she did. And, there was Helen Matthews, who was the sister upstairs in [ward] 24, and she was a quieter, more gentle person, but Kate Anderson was very formidable and devoted to the professor – and with the housemen, she was very much like the prof. Derrick would either take to you or not, and within a few weeks, you were either “a sound fella” or “a dull chap” and there was nothing in-between. Luckily, I earned the former accolade, and Kate was very much the same. I remember my fellow house physician and myself were sitting in the doctors’ room trying to recover at about 5am on a very busy waiting day. And Kate, who lived across the corridor of course in these days, thought there was something going on that she ought to know about and appeared in a dressing gown with her hair in curlers, and I had my back to her and didn’t see her, and my fellow houseman said “God Almighty, it’s Lady Macbeth”, to which Kate started sniggering quietly and sort of waved her hand and disappeared, and thereafter was a lot more relaxed.

ME: And then where did you go after that?

JS: To Her Majesty's Forces. You had one year pre-reg jobs and then you were off.

ME: Which regiment were... what was your National Service like? Where did you go? First of all, which branch were you in?

JS: Army. RAMC [Royal Army Medical Corps] yes. Again, it's one of these bagatelle-like bits of movement. We were asked where we would like to go, not that they would necessarily send you there, and I wanted to travel as far as possible, and there was still a British military hospital in [inaudible] in Japan, and you did so long there and so long in Korea. I thought "I'd like to try this" and was told "Fine. That's it, you can go there". And then, the next day, I was summoned by the commandant in the RAMC College in Millbank. "Sir, I see you're Eccles scholar, and you've got medals for this and that, and we've somebody to do a locum medical specialist job in the military hospital in West Africa, in Nigeria. What do you think about that?" and I was rather taken aback, and I said "May I think about it for a little?" and he looked at me blank and he said "certainly not – you're going". And that was it. So I went out and was handed a list of instructions for olive green khaki drill etcetera, and that was it. And the locum was supposed to last for two, three months – it lasted the whole of my National Service.

ME: Gosh. Did Pam come with you?

JS: No, no. I met her there.

ME: Oh right, I wondered... yes. So, how did you go? Did you go out by a ship, or...?

JS: No, we flew out by charter flight. Took about two days in these days, you know. Just an engine thing.

ME: And where were you based?

JS: In Lagos in Nigeria.

ME: And what was that like?

JS: Oh, in what sense?

ME: Well, first of all, what was the country like? I mean, it must have been quite different.

JS: Well, it was still a colony, although it wasn't very colonial, because it had been agreed when it was established that nobody other than the Africans could actually own land or own property there. So, it wasn't like "the white settlers", as it were, in Kenya: they were more peripatetic people, you know, who were up there as civil servants, administrators, doctors, business people, and so on. It was of course a very unhealthy part of the world – still is. It was well known as "The white man's grave", and was still quite a place as you can imagine. It was – and this is just an impression – a lot safer then than it is now, as I was back there a few years ago as an external examiner, and it's a much more lawless place. And there was a lot of anti-colonial feeling, but it was very much verbal, and you would read newspapers describing "there's a jackbooted fascist hyena" etcetera, then be greeted by everybody in the street as you went out, you know, it was a very safe place to live in.

ME: And did you live in an army camp?

JS: Well, initially I lived in the officers' mess in the hospital, and the hospital was on the very outskirts – Lagos proper is an island, but had long before spilled over into the mainland opposite, and we were right up at the very edge of the mainland, next to the bush as it were, surrounded by perimeter wire, not really to stop insurrection - to stop theft. But, it is quite a colourful place.

ME: Was it in an advanced state to say, Lochgelly? Or had it yet to catch up to Lochgelly in its sophistication?

JS: It depends what you mean... I think it was more sophisticated than Lochgelly in parts. It wouldn't be difficult [Both ME and JS laugh]. After I'd been there a few months, they appointed a new deputy head to the army school which was for British forces' children, and the school was in the hospital compound, and that's where I met my wife. We were married there in the garrison church.

ME: Oh, how nice. And did you get out much into the locality or was it very much a camp-based life?

JS: Oh no, we got out a lot – went into town with great frequency into Lagos and Lagos Island, and excellent beaches nearby.

ME: What did it have to offer?

JS: Well, that was one thing it did offer – lovely stretches of coastline. As a town, not much – I mean it was very, very busy, and a nightmarish traffic problem, which is even worse now, as I recall. But we managed to get up country a bit, and spent our honeymoon in French West Africa actually in Dahomey.

ME: And was the medicine very challenging? I mean, did you...

JS: It was very challenging. I used to say, very tongue in cheek, that for the first few months that I was there I walked around with my left arm up like that with a copy of Manson-Barr's *Textbook of Tropical Diseases* under it. Very little training, it was pretty challenging. We had one bit of good luck: the Medical Research Council had established a research unit – West African Council for Medical Research – which was only about a mile and a half away, and their director, who was ex-Indian Medical Service, was very, very good. He was a superb physician, and he used to do a ward round within the hospital about once a week or once a fortnight, ostensibly just to keep in touch but in fact to keep an eye on us, and he was very good indeed.

ME: And was he kind with his... or... I mean, he wasn't like "the Guilk", I would say that.

JS: Oh no, oh no – very kind, courteous man. Very amusing. But, he had, a lot of research was virology, and I remember when I came back to work in Edinburgh Royal, I found that the facilities offered in Edinburgh for virus investigation weren't as good as those I'd had in Lagos.

ME: Did you have to do a lot of microscopy?

JS: Yes, a lot.

ME: And had you had training commensurate with that need or did you have to...?

JS: Picked it up. We had a laboratory and a lab-tech sergeant who was pretty good. But we had to do a lot – we examined a lot of the slides ourselves, stained them up. In fact, the last bit of tropical microscopy I did was the year I left the Western General just a few years ago when I picked up a child with bilharzia.

ME: Really? That must have sent a panic through the junior ranks that they didn't get that.

JS: Well...

ME: Then you came out of the Army and came back...

JS: Came back to Edinburgh, yes.

ME: And was there a job waiting for you, or...?

JS: Yes - Derrick Dunlop had fixed me up with an SHO [Senior House Officer] post with Sir James Cameron, another past President of the College. So I did that, got my membership – in adult medicine, it was the Edinburgh membership in these days - I did gastroenterology, Martin.

ME: Did you? Do you remember who examined you there?

JS: Oh, don't I just. Wilfred Card and Donald Batty.

ME: Heck.

JS: Heck, indeed. [inaudible]

ME: [inaudible]. I mean, they were about 11 foot tall, weren't they.

JS: And, in general medicine, Rae Gilchrist, I recall.

ME: So you really won your membership.

JS: I think so, yes. Then I came on a registrar with JDS.

ME: How did find being examined by Batty Do you remember that? Was he difficult, or... ? Cause he had a reputation...

JS: Oh a considerable, well-earned reputation. His manner gave the impression that he was a very, very stern examiner, and in fact his marking was more generous than you would imagine.

ME: Yes. I would imagine that Card would have given one of the more exacting...

JS: Oh yes – Wilfred Card was... well, as you'll remember very well, was a man of tremendous intellect, very penetrating in his questions.

ME: So then you were with, Derrick?

JS: No, I was with J.D.S. Cameron.

ME: How long were you with him for?

JS: About two and a bit years, as SHO and then as registrar. And the sub-chief was Donald Batty and in fact it was a very demanding job, you know: there was the two consultants, myself, and a couple of housemen, and that was it. And I realised I was getting nothing written, and I thought "I ought to make a move", and James Murdoch had just taken over in the ID Unit in the city then, and I knew him quite well and he said "come and work with me" and certainly it was a very productive time in terms of paper-writing, and this was really how I got involved in paediatrics.

ME: What did you go and do with James Murdoch?

JS: Well, apart from the sort of clinical work of the wards, we did an awful lot of clinical trials of antibiotics and antibacterials of one kind or another.

ME: Because this was the beginning of the great era of clinical trials, wasn't it?

JS: It was, yes.

ME: Had John Crofton come with the tuberculosis trials?

JS: He taught me when I was an undergraduate.

ME: Did he? He must have been quite exciting to have been...

JS: Oh, he's a first-rate teacher. Absolutely first-rate. Well, he was a first-rate physician in all respects.

ME: How did you find J.D.S. Cameron? He was a trifle pedantic, wasn't he?

JS: Yes, with a [mimics] strong Montrose accent.

ME: Was he not the man who said "Classification of renal tumours is... tumours of the upper lobed, middle lobed, and lower lobed, and sub-divided into large and small". Was he not?

JS: That sounds like him, yes. He used to... [mimics] "The various points in the diagnosis, firstly, secondly, thirdly, and lastly..." [ME laughs]. A good clinician, and by that time was very much involved in medical politics. It's said that he done more trips to London than anybody except one engine driver.

ME: [Laughs]. And what about Batty? What was he like?

JS: Didn't see much of him. He was the physician in the Deaconess, which I'd drop in from time to time.

ME: Yes, I'd forgotten that. Then you began to get into studying babies?

JS: Well, I got interested in paediatrics through working in the city because about two-thirds of the admissions were children, and I found this more and more interesting.

ME: Why? What was it that you found particular about it?

JS: I don't know, I just found that I formed a rapport with them – that was it. My childlike mind or something, but I found that I got on very well with them. So often, there is such a lot you can do, and

my move into paediatrics was a very strange one because, hard to believe it when I think back on it now, but I'd done quite a useful paper on one of the aminoglycosides and was giving it at an international conference in Stockholm, and Gavin Arneil and James Hutchison, professor and his successor in Glasgow, were at the meeting and we were sitting chatting afterwards and Gavin said to me "We could do with you as a senior registrar". And I said "Gavin, I haven't done a house job in paediatrics". "Doesn't matter, you know your stuff. Are you interested?" and I said "well yes, very much". So he said, "well, you'll be hearing from me" and a week later I thought "well, it must have been the schnapps that was talking", but he was on the phone saying "come through, bring your CV, meet the professor". Because he was titular professor at that time and the formidable Sir James Holmes Hutchison was professor. And duly went through and "Hutch", who was not a man to be gainsaid, said 'well, I think you're the chap we want, but you've got to go through formal appointments committee, this is just an advisory committee, so I can't offer you the job – when can you start?'. [Both JS and ME laugh]. And that was it.

ME: So you went to Glasgow?

JS: I went to Glasgow, yes.

ME: And you moved house to do that?

JS: Oh yes.

ME: And how long were you a senior registrar for?

JS: Only about two and a half years.

ME: That must have been very short in that era, wasn't it?

JS: It was. I was very lucky, it was very fortunate. I did a very short spell - they wanted someone to cover the paediatrics for Lanarkshire. One paediatrician for the whole of Lanarkshire.

ME: Goodness.

JS: Which I did for three or four months, about I ran myself into the ground, really. And then the job came up in the Western General.

ME: Now the senior registrar job, which hospital was that in?

JS: It was mainly in Stobhill, to the north of Glasgow with some links to Yorkhill.

ME: And how did that.... it must have been very difficult medicine that wasn't it... I mean, was there a lot of poverty?

JS: Oh yes.

ME: And were a lot of the problems you faced directly attributable to poverty, rather than to... ?

JS: Well, yes. One example, - I can think of a number - but one example was at that time, around 50 per cent of births were home births, and hospitals couldn't have coped with any more than they

were doing, and housing was often very poor, and we used to see severe and often fatal cold injuries in these babies: neonatal hypothermia.

ME: And did you see a lot of... was rickets a problem?

JS: Yes, we used to see a bit of that at that time – not so much now.

ME: No. [inaudible]

JS: At that time, yes, I saw a bit of rickets, and of course one still saw tuberculosis and rheumatic heart disease in children, and so on.

ME: And then you came to Edinburgh, to the Western.

JS: Yes, the Western, with Alec Kane.

ME: That must have been a wonderful experience.

JS: It was a great experience.

ME: I mean, you couldn't have been blessed by a more wonderful colleague and...

JS: We worked together for 19 years.

ME: Did you? Yes. What was it... now he... I don't know if I'm getting this right... who... ?

JS: John Forfar was the senior consultant there. Alec, the junior. John went to the Chair in Edinburgh.

ME: So, you replaced Forfar?

JS: I moved in, yes.

ME: So, you came into what was already a very impressive...

JS: It was a very good unit, yes. Of course, it was again a very busy unit because we had the ward in the Western, plus the new-born unit there, plus the new-born unit in the Eastern, plus the ward in Leith, plus the paediatrics for West Fife...

ME: You went over to Fife as well?

JS: Oh yes, very frequently, yes.

ME: Right. So, how did you organise your week?

JS: Well, to be honest it was largely fitting in as much as you could, doing ward rounds and outpatient clinics, travelling across the Forth.

ME: That was before the bridge?

JS: It was just after the bridge opened – about a year after it opened. [Three cheers].

ME: [Laughs]. And, so, you must have had to learn a lot of paediatrics almost as a consultant...

JS: Oh I did yes - I learned an awful lot from Alec Kane.

ME: Yes. And was the neonatal stuff - which you became so renowned for - was that learnt on the hoof or had you learnt that...

JS: Well, I learnt a lot of that in Glasgow, because of course Hutchison was a very leading figure in the development of new-born intensive care. And, in some ways, I sort of brought some techniques with me when I came to the Western.

ME: Did you find the... I mean, one of the sort of side issues was... and I can't remember if you were involved... was the stuff that was happening from the MRC unit. [William Michael] Court Brown stuff... chromosomes... were you affected by that?

JS: Oh, quite a bit. Alec Kane, [inaudible] and I did a fairly major survey on chromosome screenings in new-borns.

ME: And what was your trawling on that? You found quite a lot of abnormalities, didn't you?

JS: Yes – well, at about that time, you remember Pat Jacobs, who used to be there?

ME: Yes.

JS: And she'd described these XYYs out in Carstairs High Security Prison, which I went past on the train today, and luckily it didn't stop. And the impression was that if it was XYY, they were all going to be tall and homicidal. And so we found, in fact, that it was not all that uncommon, and following them up, the majority of them were really normal. So, the moral being, if you select your patients from Carstairs, you're not going to find many normals.

ME: The only thing that is consistent with that is that they're in Carstairs.

JS: Well, exactly. [Both JS and ME laugh]. But it was a good time, then we got a third consultant, and it was a busy time, and Alec was a very good colleague, and he's one of the people who visits me in the Dales.

ME: Is he?

JS: And the last, but one visitor we had from my student days, was one of my teachers – namely, Sir John Crofton, who's well into his 80s now.

ME: Yes, he was in this room the other night.

JS: Oh, I know, I was speaking to him at some length. Still motor-caravanning.

ME: Right. One of the other things that you were very involved in was allowing parents to come into the ward, wasn't it... ?

JS: Well, I think Alec and I both shared the same views about that, really. I had actually done a bit of this in Glasgow, because a rich industrialist presented the unit where I worked with a very large sum of money and we built a mother and child unit, so mothers could come in with the children, and we

did as much of this as we could in the Western, which has never had a purpose-built mother and child unit, nor a sick kids, if it comes to that. But, the principle, we encouraged, yes.

ME: And, you also had very fine nurses, didn't you?

JS: They were very good. They were very high quality both in the Western and Leith. Leith was the only good children's unit.

ME: Leith must have been much more like parts of Glasgow, wasn't it? I mean, with some of the...

JS: It was in the first few years, and there were some very, very poor parts of Leith. They were condemned and occupied by squatters, you know, and there was a lot of very poor child health. But, these were sort of bulldozed and the people moved out to Wester Hailes, mostly.

ME: [Laughs] Fantastic kids' area.

JS: [Laughs] Fantastic, kids' territory, yes. But it was quite a poor area.

ME: What effect on your practice did the bringing of people from the Pleasance into Muirhouse and Pilton have on you? Did they become posh or did they come with all sorts of problems?

JS: I'm sorry, I didn't quite follow that. You mean it was...

ME: Well, you remember that when they built Pilton and Muirhouse, there was an exodus of people from the Pleasance. And do you...

JS: Well, they didn't become posh. The lifestyle didn't change all that much.

ME: But, did that raise all sorts of interesting clinical problems, or was there anything new in their arrival?

JS: I think that one of the problems which we used to see in the days when we had the two units, before Leith closed, was the effect of breaking up the family units. I mean, Leith was, and to some extent still is, pretty tribal. You know, we've had anthropologists talking about the effects of detribalisation in Africa and so on, and Leith was certainly pretty tribal. There were loads of sisters and aunts and grannies and things to give a hand if the baby was crying all the time. But you move people from the Pleasance or wherever into high rise flats in Muirhouse and Pennywell, where they had much less support, and I used to see a lot more child abuse in the Western than I did in Leith. In Leith there was still the extended family support.

ME: And was child abuse much of a problem, or was it...

JS: Well, it has been for many years – possibly increasing, nobody really knows.

ME: And then, there was that awful period for you when the glorious reforms in the Health Service began to affect paediatrics, wasn't it?

JS: Which ones?

ME: [Both JS & ME laugh]. The most recent.

JS: Oh, the most recent. Oh those. I seem to have lived through so many, actually. Tripartite Health Service and all the rest of it, and then the more recent ones.

ME: So you finished up in sick kids.

JS: Yes. Still doing the new-borns in the Eastern. We'd given up West Fife years before – three consultants there, for East and West Fife.

ME: Where did you go to in Fife when you went? I mean, did you go... ?

JS: Two places - one was Dunfermline and West Fife Hospital, who did general paediatric outpatient clinics, and the other was Dunfermline Maternity, doing neo-nates there.

ME: And you did acute work there, did you?

JS: Well, on the new-borns, yes. But for West Fife, practically any child that required admission to hospital came to Leith. That link had been built up years before.

ME: It would have been easier to have gone across on a boat than to have gone by the road, wouldn't it?

JS: Probably, yes.

ME: Well, we should stop for tea now, and then we can do the College.

JS: That's fine, yes.

[Break in Filming]

ME: How did you get involved in the College?

JS: Well, indirectly through Alec Kane, who was Secretary of the College, and John Halliday Croom was then President, and he, as you'll remember very well, had been very much instrumental in various changes in the College – including the setting up of collegiate membership and collegiate members committees and so on – and at that time, they were forming the joint committee in higher medical training. And John Croom decided what he would like to do was set up a series of sub-groups in each of the medical specialities and get them to produce reports about their views on training, and I think Alec suggested that I might be Secretary in that lot, which I did, and got on very well with John Croom whom I greatly admired as a person as well as a President. He was a very forward thinking man. And then when Alec decided that he had done his four years - or, he'd done three years, he'd only do one more – he suggested that I be, and John Croom suggested, I think, actually, that I should succeed him. So, I did a year as Alec's understudy, proleptic secretary, and then four years as Secretary.

ME: Can you remember much about John Croom? How did he strike you?

JS: Oh, quite a lot – he was an old-fashioned [inaudible] a complete gentleman. Very much so. Courteous and kindly, and he always gave the impression of a rather bluff cavalry officer or something, whereas in fact he was a very astute man indeed. A very good President.

ME: I think he was one of the greatest of the Presidents, wasn't he.

JS: I think he was.

ME: And deceptive in that, he had his moustache, he had his handkerchief out - the very embodiment of conventionalism, but he wasn't at all, was he.

JS: No – his passion for the turf, and so on.

ME: Did you actually work with him?

JS: Oh yes.

ME: What was his working style like? I mean, say before meetings, how did he approach those?

JS: Very much he liked to have us session with the Secretary before the meeting and things were planned quite carefully. The meetings were of course very frequent then – as you'll remember, Council meetings were about once a fortnight – it was quite a job getting minutes and agendas out between meetings. But, they were a good deal shorter than they later became.

ME: Why were they so frequent? I mean, what was the big business at that time?

JS: A lot of it was to do with the obvious day-to-day or week-to-week affairs of the College. Two things that were very different: one was there was a very big move towards working with other colleges.

ME: And that was starting from scratch, was it?

JS: Pretty much, yes. And also, working with, in terms of the joint committee of higher medical training – that was a pretty time consuming one. It was also a busy time for medical politics, as it were, with various changes in the Health Service coming thick and fast. Another difference of course was, just about that time there was still the old Edinburgh membership, which was held four times a year with enormous numbers: three or four hundred each sit, you know, sometimes more, with no part one or part two. There were written papers, and then general medicine, clinical, selected subject clinicals, and that took a lot of time and discussion. Took a lot of time for the registrar, too.

ME: And the registrar at that time would be...

JS: It was Willie, actually – Willie Macleod. Both registrar and treasurer. And, we had one examination secretary, and one general administrative secretary, and a cashier. And, apart from the library staff, that was the secretarial staff.

ME: How did you manage? Did it mean that you worked at home long hours?

JS: Oh, I did a lot at home, yes.

ME: And did it mean that you, for example, that was - forgive me - before dictaphones, or had you a dictaphone?

JS: Oh, I had a dictaphone, yes.

ME: But how did you... I mean, very busy clinical practice, how did you... ?

JS: It eroded the family life quite a bit. It took a lot of time, I tend to be one of those people that works best early in the morning, and I would sort of get up at the crack of dawn, get an hours work in, before the others were stirring as it were.

ME: And so you'd come in here and hand in the tapes and get them done.

JS: That's right, yes. That was it.

ME: What were the contacts with Glasgow and London like? I mean, they were evolving...

JS: They were evolving, yes. There was the standing committee of the Scottish royal colleges, with the Glasgow and Edinburgh Surgeons and ourselves, and that had been going for a bit, and was working pretty well. Contacts with the London college weren't quite so strong at that time, but became very much stronger later. And of course, once there was a common membership exam, that really firmed everything up.

ME: And were you involved in that coming together of the membership exams? From whom did the first overtures come?

JS: Now, I'm relying on memory here, but I think they came from Edinburgh.

ME: From Edinburgh?

JS: From Edinburgh, yes.

ME: And who was the... ?

JS: Well, Christopher Clayson was quite keen on the concept, and John Halliday Croom followed it up.

ME: John Halliday Croom followed Christopher Clayson?

JS: Yes.

ME: Because my recollection was that there was the Croom committee for the future of the College, wasn't there, which was really the big revolutionary...

JS: That's when he was Vice-President.

ME: Yes.

JS: To Chris Clayson, President.

ME: Were you on that?

JS: No. Before my time in the College.

ME: Because I was on that.

JS: I know you were. Because you were the first Chairman of Collegiate Members Committee, weren't you? Yes, I remember that very well.

ME: But I don't remember a common membership being... I mean... perhaps I wasn't interested.

JS: That came along later.

ME: Yes. And were you there at the early meetings? I mean, what were they like? When they discussed a common membership, I mean...

JS: I was at one or two of them, as Secretary to John Croom. They were... Lord Rosenheim was the London president at the time, and they were not entirely happy meetings. There was a lot of debate and disagreement, and eventually things got hammered up.

ME: And what were the areas of conflict in there? Was it money, or was it type of exam?

JS: Money to some extent, yes, and ideally there should be a central examination office – “it must be in London”. Practically, everything else must be in London, if it came to that. And also, John Croom was quite keen on the idea – I think Alec and I had worked on him – that people should be able to opt to do a membership in part two in paediatrics, and the London people were not at all keen on this, and eventually I think Max Rosenheim got so fed up of being nagged at by John Croom that he said “Okay, have it then”. That was it. I was at that meeting, actually.

ME: And what was Rosenheim like? Because I was led to believe that he was quite favourably inclined to the Scottish colleges, or was that not apparent to you?

JS: It wasn't all that apparent, but of course a lot of the power in the London college, even now, allies with office bearers rather than with the president. Well, the president obviously has the final word, but people like the registrar in the London college in these days... who was... heavens, it'll come back to me... was a Scot actually... But he was very anti the Scottish colleges, and of course, [David Pike] who succeeded him was pretty anti-Scottish colleges.

ME: Yes. He had a great deal of antipathy to us, didn't he?

JS: Quite a bit.

ME: You know, one feels the sort of snide remarks that would slip in about us.

JS: Oh yes. I remember when I became chairman of the part two board, an ex officio I remember of the census board of the London college, and I went to the very first meeting and [David Pike] suddenly shot up bolt upright and said “Oh, I'd forgotten James Syme was coming, I have to stop being rude about Scottish colleges and about paediatricians” and I said, “Well, it hasn't stopped you up to now, I don't see why you should now” [ME laughs] and then he suddenly said “you're a fellow of the Edinburgh College.” “Yes.” “Glasgow college.” “Yes.” “But not here”. And there was a bit of consternation, and so they hastily elected me to fellowship. But there was tension – it still exists to a slight extent, but much less.

ME: Yes, because the first meetings were very... I mean, historic is a silly word, but they were very novel, weren't they? And...

JS: Yes. I mean, really, the common membership has been by far the greatest factor in bringing the colleges together. It's the thing they have most in common.

ME: What else was developing in the College? How did you see the College when you first came into it? I mean, it very isolated was it, or were the overseas elements important?

JS: Oh, there was a fair overseas element, a lot of that. A lot of overseas visitors – not nearly so many overseas visits by the College.

ME: Halliday Croom never travelled, did he?

JS: Once or twice, yes. Not a lot, though. Whereas John Crofton, who succeeded him, travelled very extensively, but of course, he'd been doing that anyway, and all his successors have.

ME: And Halliday Croom, was he a good speaker at dinners?

JS: Oh yes, very good speaker indeed.

ME: I mean, the great thing I remember about him was the way that he loved his wife and always used to speak about Valerie, who was an actress, and the utter dismay that an actress should come into the family, wasn't there. He was always...

JS: She was very amusing. She would frequently preface some anecdote, saying "when I trod the boards..." and giving some scurrilous gossip about the Redgrave family and then John would say "Valerie, we're supposed to go into dinner now" and... "Just let me alter my face - let's go, I'm President's wife now".

ME: [Laughs]. So, how long were you the secretary during his... ?

JS: Three years with him, and a year with John Crofton.

ME: Now, there was a totally different style of presence.

JS: Completely different.

ME: And what was the big change, would you say?

JS: The big change was outward looking, national and international. John Crofton was very much less of a "little Edinburgh" and more of a national and European and international outlook on things.

ME: Of course, he was feeding off the work that John Croom had done in the establishment, or rather Christopher Clayson and John Croom, hadn't he?

JS: That's right. John Crofton was much less interested in what you might call "the domestic aspect" of the College.

ME: I'm presuming he never set foot in the kitchens, or... ?

JS: No, I shouldn't imagine so.

ME: [Laughs].

JS: He spent a lot of time travelling and did a great deal of good – established some excellent links, but of course they were there already from his international fame as a chest, tuberculosis, physician.

ME: So what would you say were the big developments that came out of the Croom-Crofton period? I mean, if you say when Christopher Clayson was elected, which was after [Ian George Wilson] Hill, wasn't it?

JS: That's right, after I.G.W. Hill, yes.

ME: Right, and through to the time when you... what had happened to the College? Do you think that it was... ?

JS: Well, it had become a lot busier, it was producing a lot more reports which embodied the views and subjects of national and international interest, a very big change of course was the setting up of the Overseas Committee, in which I played a fair part. But, as I say, the thing that brought the UK colleges of physicians together really was the membership. And, well, they had to collaborate and they had to see each other's point of view.

ME: And were you involved in the setting up of the joint exam?

JS: I wasn't, no – only indirectly as Secretary and member of the Council, I wasn't involved in the work of it. Once the presidents –or the top brass of the three colleges had thrashed things out, the mechanics of it weren't too difficult.

ME: Right. So the style was certainly established, and then the details?

JS: Exactly, yes.

ME: And then when you ceased to be Secretary, then you were on the Council for a fair amount of time. Now, which presidents did you see?

JS: Well, John Crofton... in these days, the done thing when you ceased to be Secretary was that you took "a year out", as it were, and then would seek to be elected to Council. And so I came back when John Crofton was still there, and then with Ronnie Robertson, who succeeded him, and then with practically everybody else.

ME: You then became involved in the Conference Centre.

JS: Yes, I chaired the project group for that.

ME: Tell us about that. I mean, because that was possibly the biggest thing that's happened to the College, and if anything...

JS: Yes, probably the most expensive too.

ME: Sure, but I mean, good things don't come cheap.

JS: Oh, I know.

ME: But I mean, that was your great contribution, do you not think, to this College?

JS: Yes, I think a lot of it was, a lot of good luck – we had very good contractors - [Barr & Birkett] were the architects – from Glasgow, they really were excellent, very good indeed. And the service side of it – electricians and so on – they were the only slightly weak members of the team. But the rest – surveyors, structural engineers, and so on – were extremely good.

ME: When did you start? Were you there when the concept was developed? Because there was a lot of debate in the Croom Committee about what would happen to these dumps at the back of the College.

JS: Well, there was a concept really before my time – there had been a College appeal, and there was a little money left over from it. They were talking about building a sort of small, rectangular lecture theatre, and it was decided that it wasn't really worth it and it was dropped. And then the concept came up again, "can we get something better and bigger?" and the first thing that we started doing with John Strong when he was President was to look at the possibility of acquiring the decaying warehouse behind number 12, and, once we had that...

ME: Who owned that?

JS: Edinburgh Corporation Transport. And it hadn't been used for years, except for the model railway club and even by them not for years. So, we already had space behind number nine and behind number 11, and we acquired the space behind number 12. [inaudible] very small site. It's still a small site, but we managed to shoehorn in 301 seats.

ME: No, that's what I'd like to know about. I mean, when you knew that you had that many square metres or millimetres – whatever they do it in nowadays – was that the point that you became involved?

JS: Yes, that was when I started chairing the project group.

ME: And had you had interest in architecture or building before that?

JS: To a limited extent, yes – I knew which ones I liked and which ones I didn't like.

ME: How did you know that?

JS: I think the various ones I'd visited. I thought, for example, that the then theatre in the London college was not as good as it could've been, and not as good as the new one, and the same goes for Glasgow – the [Morris Bloch] theatre there. I went to visit the Edmund Burke Theatre in Trinity College in Dublin, which I thought was superb, and that was amphitheatre style. I discussed this with the architects – they felt this was probably the best solution, because we said "the things we want are: a really good lecture theatre with enough space for people to move around if they wanted – people don't have to stand up to let people go past, so should be plenty of legroom, we wanted about 300..."

ME: And how did you decide 300? Was that... just seemed a nice number?

JS: It seemed a reasonable number, given by the maximum numbers attending symposia and so on. But we also wanted a circulation area, which would be able to take all 300, as long as they didn't all

lie down at the same time or something, when they broke for coffee or whatever. And we worked round these - these were the primary requirements, as it were. Some of my time was chairing the project group and, same goes for other members of the project group, were beating off some of the more unacceptable suggestions – there were some senior fellows who were very much against it and regarded it as a terrible waste of money. But, of course, John Crofton did a superb job of raising the funds.

ME: He had ceased to be President?

JS: He had ceased to be President – it was John Strong and then Ronnie Girdwood. [inaudible]

ME: Now, when you were thinking about the building, for example the tilt of the seating – if that's the correct word, but anyhow – the angulation. Do you think that there was something very fortuitous in your choice of 300 seats, because it's an extraordinarily sympathetic angle, isn't it? I mean, almost as if it had chosen an ideal angle, and what is it, nearly 45 degrees or 40 degrees?

JS: It's about that, but of course, to some extent it was fortuitous because of the rake from Thistle Street Lane down to Queen Street is about 45 degrees. It's quite a steep rake, inherent in the lie of the land. It's not quite as steep as that, but by jacking up the back rows, you could have the seating and the overhang of the present carpark, and that sort of determined the rake of the lecture theatre to a large extent.

ME: Was there a lot of digging out to do?

JS: Oh, quite a bit, and they kept finding odd things. They discovered two wells that nobody knew about, and then they discovered an enormous cast iron pipe, which sort of went down and did a sharp turn and disappeared, and eventually they had to lower one of these television cameras down and discovered it was a blind a cul-de-sac, so we just filled it in with concrete.

ME: [Laughs] Asking anybody locally “do you have any problems with your [with your drainage]?”

JS: [Laughs] But there were no very major problems [inaudible]

ME: But, conceptually, it's a very beautiful building isn't it?

JS: Oh, it is. But we had to fight off some views. There were one or two people who wanted a rather more – should we say – ornate structure. One wanted something that must have looked like the Taj Mahal. Others, I remember in particular, there was one very senior fellow who was adamant that the seating should be solid wood – none of this comfortable seating, otherwise people would just go to sleep. And I remembered the miserable days sitting in the Anatomy Lecture Theatre.

ME: Oh yes, and how did views like that get house space? I mean, did people write in and say that is how they would like it to be? Or were they on Council, without naming them? Or both?

JS: One or two members of Council wanted... harking back a bit. The seating – for some reason it took ages to get people to agree on that. But I think it's been a great success, the seating.

ME: Yes, wonderful, comfortable seats, isn't it? I mean, it's one of the few lecture theatres one feels comfortable and awake in.

JS: Oh yes.

ME: But the other thing that is so extraordinary about it is, coming back to the rake, the shape at the front, we have a feeling of space that not a lot of places... and part of that is, if I remember rightly, the ceiling is flat.

JS: That's right.

ME: Was that deliberate, or... ?

JS: That was deliberate, in fact. I remember it being discussed with the architects and the idea... it did give a much greater feeling of space towards the front – towards the lecturer end, as it were. It also enabled us to have a much bigger area for projection.

ME: And was this like the one in Dublin? I mean, or did you... ?

JS: It's quite like the Edmund Burke Theatre. The Edmund Burke Theatre had something which I envied, and that was the rake was parabolic, which is very pleasing to the eye actually. I remember talking about this to the architect actually, in Dublin, and he said "well, actually, it's not allowed in Britain", because the idea is that if the lights all go out, you want the stair, the risers for the steps, to be the same in each step. If people are blundering about in the dark if there's a fire or something, and the steps are of a different height, it could be a danger. And I said to him "Don't you have that regulation in Dublin?" and he said, "Oh we do, but we just ignore it". [Laughs]

ME: [Laughs]. And what about sound? Because, again, the acoustics in it are very nice.

JS: Well, the architect said that the acoustics are about 40 per cent planning and about 60 per cent luck, and I think that was about right.

ME: Because certainly you can be heard wonderfully well on minimal volume of voice, can't you? Why would the... I mean, when you say the electrical sides was less good, do you mean the actual wiring or the... ?

JS: No no, the actual... once it got done. They were the people who were always delayed and holding others up – "I can't do this until they've finished it" etcetera.

ME: Are the sides [baffled] in any way to improve, enhance, acoustic quality?

JS: They're not, no.

ME: It's just concreted in?

JS: That's right.

ME: And what about the... were there any special features about the circulating area underneath? I mean, the sort of social area?

JS: Well, we wanted to use as much as we possibly could. We had the concept that it could be used in parts - you could have a small group meeting around one corner, another group around another...

and it seems to have worked out that way. But it will take just about, as far as I can see, 300 people milling about: drinking coffee, chatting, going to the loos and so on.

ME: An interesting little aside is that when you come into it, what is also pleasing in some respects is the entrance, by that, I mean the entrance when you come to the public area, as opposed to the seating area.

JS: Yes. The circulation area.

ME: The circulation area. As you go down the right hand side, there is this glass area rather than going straight into the back of the... I never know the number, is it eight?... Why was that so? I mean, you've got that glass window, and then a space, and then you go "why was that done in that particular way?"

JS: You know, I can't honestly remember now. I'm sorry. Can't really recall.

ME: Right. It wasn't part of some master plan... ?

JS: I'm sorry, you're talking about into eight, did you say?

ME: No, I don't... when you come into the circulator, when you work your way towards...

JS: Oh, is it the window to number 11? That's the one?

ME: Yes.

JS: Oh yes, well that as light and access, as of course there's direct access from 11, as well as going in through number nine and going down the stairs. Oh yes, that's it. Sorry – when you mentioned eight, [inaudible].

ME: Yes. I'm sorry, as I said my numbers in this place aren't one of my great... strengths.

JS: Oh well, never mind.

ME: Perhaps the only weakness of the place is the access for disabled people, isn't it?

JS: Absolutely, and I spent ages sort of beefing on about getting a Stannah Lift fitted, but at that time we were overspending and there was a sort of general panic. But that is a weakness, I quite agree.

ME: Because I think that all the other things – the eating area, where coats are placed, the lavatories, everything else is wonderfully well.

JS: Mmm. It's worked.

ME: What input did you have, or did you have meetings where the architects who would come and say... ?

JS: Oh yes, they attended every meeting of the project group – the architects and the other professionals, as it were, would attend all of these meetings.

ME: And did they call the tune or did you call the tune?

JS: They came up with ideas and we had to say what we thought about them. But the architects were excellent, very good indeed. And they were recommended to us because they had done – I'm sure you must know the place – the lecture theatre in the Postgraduate Centre in the Southern General in Glasgow, which was very successful.

ME: Yes, that's a lovely theatre, isn't it?

JS: Yes. They were recommended to us by a lawyer in Glasgow actually – well, a financier as well as a lawyer – who'd given a donation to the College and he mentioned this firm and strongly recommended them and they're very good indeed.

ME: Because one of the curious things about the theatre is that when you stand actually in the lecture theatre it seems to go up further than you have any concept of when you're standing in the circulating area, and part of it is optical illusion and part of it is reality, isn't it?

JS: That's true. But, of course you're not seeing, in the circulating area, you're not seeing the floor, the whole floor, of the theatre, because it goes on up and up and up and then on top of the car park. You'd get a better idea if you'd come in from the car park and just see quite how far down you've got to go.

ME: Were there things that you wanted in the Conference Centre that didn't happen?

JS: I think we would have liked a better air exchange system, possibly air conditioning, but that was beyond our purse at the time.

ME: Had you a more than good idea of how much money was going to be available or did you decide what you wanted and the appeal fitted... ?

JS: The second of these. We'd decided what we'd hoped for as it were, and went ahead with it fingers firmly crossed.

ME: And this involved the famous sale of the [Richard] Dadd?

JS: The Dadd. That was it, yes.

ME: Were you involved in that?

JS: I wasn't involved in the sale, but I was around, and on the Council and so on at the time when it was discovered up there.

ME: Yes. But you were peripheral to the battle that took place, because that was very traumatic one, wasn't it? And very painful for people who were involved in it.

JS: Yes - there were a lot of strong feelings that the College should hang onto it and so on, but I don't know - I mean, we managed to live without even knowing it was here for generations, so I don't see why they were so bothered.

ME: And then the whole affair was opened by the Queen Mum, wasn't it?

JS: The Queen Mum, yes. That was during Michael Oliver's presidency.

ME: And what sort of an occasion was that?

JS: Oh, a splendid occasion – she was flying up from London to Dyce, and went to Balmoral and she agreed, with a bit of persuasion, to stop off at [town house] and come in and spend an hour here, and two hours after our arrival she was still zooming around chatting to everybody asking “what’s this?” “what do you do?” etcetera. Lady in Waiting and her equerry, who was from the Brigade, was sort of sitting with their head in their hands and the pilot kept phoning up saying “is she never coming?”. She was very good value, did the night gracefully. So, then the foundation stone was laid of course by Sir Alec, Lord Home of the Hirsell no less.

ME: Right. Because I remember the occasion that he came – that was a very wonderful College occasion, wasn’t it? Because he turned out to be a much more different person to how he was presented.

JS: He’s one of these people whose television image was so untrue to what he was like in real life.

ME: Yes – very magnetic, charismatic man, wasn’t he?

JS: Oh, very much so.

ME: And, when he was here, it was an extraordinary occasion.

JS: Oh yes.

ME: What about at the front of the hall, there is a beautiful wooden bench and chairs. Where did they come from?

JS: In front of which hall?

ME: Sorry, in the Conference Centre.

JS: Oh, these were from... we bought these at the time of the planning of the building of the Conference Centre from [Whittark and Reid]. You know the ones down near the Water of Leith, that direction. They submitted a number of designs and we selected those.

ME: And they built them, did they?

JS: They made them to order, yes.

ME: Do you know where the wood came from?

JS: Nope, afraid not.

ME: It’s very beautiful wood, isn’t it?

JS: It is, isn’t it.

ME: And the flooring – was that made in a wood that was sympathetic to it, or... ?

JS: I'm sorry, my memory's failing Martin. But it is oak actually, and in fact practically all the timber, the flooring in the lecture area and the lectern and so on is oak because of course, the College oak. It suddenly came back to me there.

ME: [Laughs] It's very interesting to, say, look at the London college, which has a very beautiful frontage and [inaudible] but ours is equally splendid, isn't it? I mean, even better.

JS: Oh yes, I'd like to think so.

ME: Then what? Once that was finished, what then did you do in the College?

JS: Well, apart from becoming Vice-President...

ME: And what were the biggest events in the time that you were Vice-President?

JS: Well, the big events started a bit before that when Ronnie Girdwood was President, and some of us were getting a bit fed up because the other two colleges were holding a lot of overseas meetings and we didn't seem to be doing much about it. And, I produced a memo, I suggested for a start, we set up an overseas committee and produced a panel of overseas representatives, and the then Council said, "what a good idea – you better chair it". So, we got going with that. The other thing was, for years we've had a lot of fellows in Hong Kong, and for years they'd been saying "could we not hold the membership, the whole membership, part two as well as part one, in Hong Kong?" And this was bitterly opposed – it was supported by the Scottish colleges, bitterly opposed by London, who quite suddenly said "Yes - I think it's a good idea - it will of course be administered through London". And I happened to be in the London college at the time, just after a meeting with the part two board, and I said "Well, I think people should be allowed to apply to the college of their choice, rather than just send photocopies to the Central Exam Office". And the result was about 65 per cent applied to Edinburgh. [Laughs] But, [Clive Saulie] & I went out in 1984 to Hong Kong.

ME: And this was your first trip to Hong Kong?

JS: First trip, yes – first of many, to look at the feasibility of setting up the exam, and we were there about ten days. It was a memorable time because we visited about every hospital in Hong Kong, just about. We were deciding where it could be held, decided who the examiners should be initially, that those that hadn't examined in membership must come to UK – as examiners or as observers or both – and drew up a timetable, and we sort of produced it. Clive & I sat up until about four o'clock one morning producing a [grade] report with all the recommendations, and we arranged to meet the following evening with the likely examiners - ones who were most likely to be involved – and they completely agreed with it, so we then went and caught a plane home overnight.

ME: You must have felt like death warmed up when you got home.

JS: Oh yes, dreadful actually. And we then took it to the three colleges – all of whom accepted it – and in fact, with minor changes, that's how the exam goes now.

ME: Right. And which hospitals did you decide to examine in, in Hong Kong?

JS: In Hong Kong, we used, and still largely use - I doubt if they've got the same names since China took over - but there's the Queen Mary, which is University of Hong Kong - that's in Hong Kong Island, and then, there is the Prince of Wales, which is in Sha Tin, in the new territories. And these are the two [inaudible].

ME: Two very different areas, aren't they? A bit like Glasgow and posh Edinburgh really, isn't it?

JS: Well, to some extent, yes. The Prince of Wales got a lot going for it. The last one or two exams have made use of other hospitals as well, particularly the Princess Margaret and the Queen Elizabeth in Kowloon side.

ME: Did you go out when the exams were actually being run?

JS: Oh yes - Clive and I went out the following year which was when the first exam was held.

ME: How was that? I mean, the Chinese are so clever, aren't they?

JS: Oh, the pass rate is staggeringly high, they're very good.

ME: And appropriately so.

JS: Oh yes. I remember our first visit there - people kept saying, there were a lot of these young doctors who were potential candidates, and "could you give them a bit of a talk about the membership?". Clive and I would visit the hospital, look at facilities, and then we would give a sort of short chat about the exam itself, and then we were always asked if we could present cases. So, we ended up running a sort of mock exam, and of course the word got round - there were ten people there - the word got round this was happening - and by the time we finished, there were about 30 people there attending. And they were all terribly grateful and insisted on taking us out to lunch and out to dinner, and after about nine days of this we were beginning to think longingly of baked beans and toast, you know what these Chinese dinners are like. And I examined there, I think, about five times, and then did the same and I've also examined in the [EMed] in Singapore, and in the finals there.

ME: You also, am I right in saying, started the development of paediatric exams?

JS: Well, to some extent, when I chaired the part two board, there already was a paediatric option in the membership, but it needed a lot of change. And of course, at that time, there was a common part one, and that could be difficult for the paediatric candidates, and we managed to get a paediatric part one up and running. Although there was a lot of common ground, a lot of overlap. And we produced quite a few changes during my time chairing the part two board, quite a few things we managed to change. One we got away from slides, for a start, we got onto high quality photographic material, because a lot of the problems of holding the written part two abroad was power cuts and such like, or the projector blowing up and all sorts of problems. And quite a number of other changes. With membership, there's a bit of a crisis now - at least, a period of change - now, with this new Royal College of Paediatrics and Child Health, who will inevitably have their own exam.

ME: But, in a way, they are taking over into paediatrician's care that which to some extent was to some extent established, wasn't it?

JS: Oh, absolutely.

ME: And, you and Alec Kane made significant steps to facilitate that, didn't you?

JS: Yes, well we sort of fought the corner for paediatrics for quite a time.

ME: When you started to fight the corner for paediatrics, did you see at the end of the day that there would be a separate college or did you always see... ?

JS: Well, it's difficult to give a simple answer to that because it depends geographically where you're looking from, because the paediatricians have over the years have been very much involved with the Scottish colleges, whereas in London, they were very much second-class citizens. And, the further south you went, the greater the pressure for a paediatric college, and the greater the resentment of the London college. And, I feel if London had moved a bit faster and not been quite so intransigent, it might not have come about, but it probably would've done eventually. I remember there was one London president who I used to meet fairly frequently, part two board and things like that, and a phrase – [I said to him one of those] phrases by which I shall always remember you – was "bloody paediatricians! Sorry, James". And yeah, there was this sort of groundswell of feeling.

ME: Just an uncomfortable group who had realistic aspirations, isn't it?

JS: Well, I think so, yes.

ME: I mean the sad thing of all that is that this College ceases to have a strong paediatric affiliations, in the next 30 years...

JS: Well, they're bound to diminish. I mean, once the paediatric exam leaves the College then that's a fairly major link gone.

ME: Yes, and it means that it moves out of Scotland or the emphasis, doesn't it? And that's another...

JS: Well, it does, yes.

ME: ... Loss.

JS: I think the new College is going to find a difficult running the exam, just as everyone is finding it difficult, whether it be adult medicine or paediatrics. Just the sheer pressure on people's time, beds, facilities for the membership... it's getting to the point of saying, "well, first come first served – we might not be able to accommodate you this time."

ME: Do you see the exam moving into a different sort of format? I mean, not virtual reality but a visual.

JS: I think something like that's almost bound to come. I think, much as we like the idea of a clinical, it's becoming increasingly difficult to arrange. And, it's also more difficult to recruit examiners.

ME: It's interesting to see the difference say, between a PhD – which I appreciate is a different concept, but that's all written – and say, obstetrics and gynaecology where you have to present your

casebook; and say, the membership where it's a bit like Ypres – you go over the top, and if you happen to get your way through the bullets nicely, you come out the other end.

JS: Yeah, but you've got to think it's a different purpose, isn't it. I mean, the membership is an entry exam to specialist training, it's at an earlier stage than some of the things you're talking about.

ME: Yes. Were there other things that you were involved in the College with? I mean, you enjoyed the social side always very well... ?

JS: Oh, I enjoyed it, but purely as a visitor, as it were. I was not involved at all in the sort of social organisation. I was involved for some years with the Laws Committee – both Alec and myself were.

ME: And were there significant changes there?

JS: Well, yes – when we moved to a common membership, for example, there had to be some fairly major changes in the laws, and then there was the move to expanding the Council...you know, there was constant change. And I can't think of a year that has gone past without some fairly major change in the laws.

ME: Did you enjoy the sort of phraseology of the laws?

JS: Oh yes, I quite enjoyed it. Alec was particularly good – Alec has got a very perceptively clear mind about that sort of thing. And then I was on the Library Committee for years, as you may recall. And various other ones, the Examination Committee, where I was the Chair on that part two board.

ME: Who were the librarians? I mean, you were there when Chalmers...

JS: Chalmers-Davidson, yes.

ME: Howard Davis, was he?

JS: No he wasn't – he was on the committee, [Brian Nash] succeeded Chalmers-Davison.

ME: Chalmers-Davidson was one of the great librarians, wasn't he?

JS: Oh he was, yes. Very much so. Of course, his predecessor was Sandy Alexander.

ME: He was the kindest of men, wasn't he?

JS: Oh, a gentle man, yes.

ME: I remember when he used to live in just about Dean Park Terrace, or somewhere like that, and he used to sit out in the sun on a chair, and chatting away to people going past, not blethering, just chatting, and...

JS: I knew him quite well, actually. His daughter Isabel and I were in the same year and we got on very well. But the library staff absolutely adored him, and as you may remember, for years and years after he retired he would have them up every summer for some "strawberry tea", and Sandy, who was a tremendous chain smoker...

ME: Was he?

JS: Oh yes. Latterly, his emphysema was so bad he could hardly get up the stairs. But, he would still turn up for his “strawberry tea”.

ME: [Laughs].

JS: So, that’s about the end of my College experiences.

ME: Yes. We haven’t missed anything, have we?

JS: Don’t think so. I think the activities the Overseas Committee has given me – so I chaired from its formation until a few years ago – has given me more pleasure than many things. Getting these little groups to go out to different countries and bringing people here – I think it’s strengthened the College quite a lot.

ME: Yes. That, you see, as your great achievement in the College, is it?

JS: Probably that and the Conference Centre, yes.

ME: Yes, I was going to say, the Conference Centre, yes.

ME: Well, thank you very much, that’s terrific. Thank you.

JS: My pleasure.