

OBITUARIES

DONALD ROSE PATERSON

LARYNGOLOGISTS in many parts of the world will learn with sincere regret of the death of Dr. Donald Rose Paterson on May 23rd, 1939. He had a slight stroke about a year previously from which, thanks to a fine constitution and a devoted wife, he made an excellent recovery. At the beginning of May he attended the meetings of the Laryngological and Otological Sections of the Royal Society of Medicine in London, and apparently was in his usual good health, but a few days later, after presiding at two meetings in Cardiff, he had a second and more serious attack from which he never rallied.

Paterson was born in 1863 at Inverness. To his birthplace he probably owed his beautiful enunciation when addressing a meeting. He began his medical studies in 1877 in the University of Edinburgh, graduated M.B., C.M., with Honours in 1883, and M.D. with Commendation in 1887. His thesis was entitled, "The ætiology of tetanus". During his academic career he was medallist in six classes and prizeman in three.

In addition to hospital posts already held, in 1894 he was appointed Lecturer in *Materia Medica* and Pharmacy in the University College of South Wales and Monmouthshire; and in the same year to the Hamadryad Seamen's Hospital, where later he became Consulting Surgeon for his speciality.

In these early years he accomplished a considerable amount of literary work. While on the staff of the *Practitioner* he supplied contributions on the progress of medicine and reviews of medical works. He was also in request for leading articles by various medical publications, including the *British Medical Journal*.

He was assigned the duties of Secretary on several important occasions, e.g. to the Pharmacological Section of the International Medical Congress in Rome in 1894, to the Laryngological Section of the British Medical Association at the Nottingham meeting in 1892, and to the Cardiff Medical Society for several years.

After serving for three years as house surgeon in the Cardiff Infirmary—then called The Glamorgan and Monmouthshire Dispensary—he proceeded to Vienna and Berlin in order to study clinical medicine. In 1889 he was admitted a member of the Royal College of Physicians, London, and, in 1926, was made a Fellow of this College.

From 1891 he was a member of the honorary medical staff of the Cardiff Infirmary, filling the offices of pathologist and assistant

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physician. He was thus following out his original intention of being a physician, and if one may judge from the training he underwent, and the papers he wrote at this early period of his career, he had acquired an extensive knowledge of medicine and possessed a wide, scientific outlook which boded well for his future. However, the new and rapidly developing speciality of diseases of the throat, nose and ear strongly appealed to him, and on his initiative, a department for these diseases was established to which in due course he was invited as first honorary surgeon. Shortly afterwards he resigned his medical appointment in the hospital, gave up consulting practice as a physician, and devoted himself entirely to oto-rhino-laryngology.

The lack of practical teaching of these subjects in Britain at that time, compelled him, as it did others, to go to Austria and Germany where systematic instruction was obtainable. He studied in several continental clinics, but that of Professor Killian in Freiburg was his favourite. Here Killian devised and developed the various operations, which were then gaining him distinction and are still known by his name. Mutual esteem led to Paterson's undertaking the translation of Killian's book on the *Accessory Sinuses of the Nose*.

Following a subsequent stay in Freiburg when he was initiated into the methods of oesophagoscopy, bronchoscopy, and other endoscopic procedures, he returned to Cardiff to be the first man in Great Britain, so far as the writer is aware, to employ these methods. His earliest reports on cases thus treated were published in 1906.

D. R. Paterson was a gentleman in the best sense. Of a retiring, unassuming disposition he never put himself forward but was desirous rather of being helpful and kind to others. He was much esteemed by his contemporaries. Those who knew him well and had opportunities of recognizing his exceptional culture could not but highly value his friendship.

Apart from his professional activities he took a lively interest in museum matters. For many years he was an honorary curator of the Cardiff Municipal Museum; he was also associated with the National Museum of Wales. Everything Celtic appealed to him. He was the author of several monographs on archaeological subjects, and a Fellow of the Society of Antiquaries. His favourite sport was fishing, in order to obtain which he occasionally travelled to the north of Norway and Sweden, where he also passed his time in endeavouring to trace place names in the West Highlands of Scotland to their Scandinavian origin.

His outstanding position as a leading laryngologist brought him from time to time well-merited distinctions. He was elected President of the Laryngological Section of the Royal Society of Medicine, London, for the Session 1913-14. He was made a

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Corresponding Member of the American Laryngological Association, and of the Société des Laryngologistes des Hôpitaux de Paris. Also an Honorary Member of the Scottish Otological and Laryngological Society and of the Berliner Gesellschaft Deutscher Hals Nasen u. Ohrenärzte.

He married in 1897 Constance Mary, elder daughter of Richard Baker-Gabb of Abergavenny, by whom he had four children, three sons and one daughter. His oldest son was killed in Belgium in 1917 while serving as an officer in the Queen's Own Cameron Highlanders. Mrs. Paterson is well known to most of the older members of the Section of Laryngology who would wish to express their sincere sympathy with her in this sad bereavement and their own feeling of personal loss.

LIST OF ORIGINAL PAPERS

1. Danger attending the administration of Chloroform by Gas-light. *Practitioner*, 1889.
2. Chloralamide—a New Hypnotic. *Lancet*, 1889.
3. Cystic Liver and Kidneys. *Brit. Med. Jour.*, 1890.
4. Recurring Ocular Palsy. *Lancet*, 1890.
5. Peripheral Neuritis. *Bristol Med. Chir. Jour.*, 1890.
6. The Untoward Effects of Antipyrin, Acetanilide, and Phenacetin. *Practitioner*, 1893.
7. The Use and Administration of Cresote. *The Hospital*, 1893.
8. The Treatment of Pneumonia. *The Hospital*, 1893.
9. Hydrastinine and Calcium Chloride. *Ibid.*, 1893.
10. Pneumonia after External Violence. *Lancet*, 1894.
11. Acute Nephritis from Sewer Gas Poisoning. *Ibid.*, 1894.
(In conjunction with Dr. C. T. Vachell.)
12. Graves' Disease. *Ibid.*, 1894.
13. Gastric and Intestinal Antisepsis. *Practitioner*, 1896.
14. The Changes in Shape and Position of the Heart during the Cardiac Cycle. *Jour. Physiol.*, 1896.
15. The Time of Contraction of the Papillary Muscles. *Jour. Physiol.*, 1896.
16. The Use of Posture in Percussion of the Heart. *Brit. Med. Jour.*, 1898.
17. Supratonsillar Fossa, etc. *Laryngoscope*, 1898.
18. Supratonsillar Fossa and its Affections. *Laryngol., Rhinol., Otol.*, 1898.
19. Article on Consumption. *W. Mail*, 1899.
20. The Influence of the Auricles on the Percussion of the Heart. *Bristol Med. Chir. Jour.*, 1903.
21. Laryngeal Papillomata in Children. *Lancet*, 1906.

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22. The Direct Examination of the Œsophagus and Upper Air Passages. *Brit. Med. Jour.*, 1906.
23. Congenital Laryngeal Stridor. *Ibid.*, 1906.
24. The Removal of Foreign Bodies from the Air and Food Passages. *Ibid.*, 1908.
25. The Intra-Nasal Treatment of Lachrymal Disease. *Jour. Laryngol., Rhinol., Otol.*, 1914.
26. A Clinical Type of Dysphagia. *Ibid.*, 1919.
27. Obstruction at the Upper End of the Œsophagus. *Ibid.*, 1931.
28. Upper Dysphagia. *Ibid.*, 1937.

A.B.K.

G. J. JENKINS

GEORGE JENKINS was so well known to us all that, writing for his colleagues, it is hardly necessary to pay tribute to the personality of a man so devoted to his work and so entirely free from jealousy or self-seeking, so modest about his own achievements and so generous in his recognition of the achievements of others.

How great these achievements were has not, perhaps, been as widely recognized as it should be. This is partly due to his great and well-earned reputation as a clinician and an operator, which rather overshadowed his scientific work, and, partly, certainly, to his detestation of anything which could seem like advertisement, and his horror of presenting incomplete or doubtful results.

On the surgical side of the speciality he did most valuable work. The general principles which he put forward on the treatment of meningitis are still the best exposition of the subject, although his method of treatment by trans-thecal lavage has not stood the test of experience and has been largely superseded. His work on fractures of the base from the point of view of the aural surgeon has been most useful to his successors, and he must be given the credit for the first clear description, in this country, of hæmorrhagic otitis externa. He also made valuable contributions to the surgery of the mastoid, such as the use of the periosteal flap and the method of removing the necrotic incus through the aditus without resection of the attic wall. Nor should we forget his work on septicæmic conditions in mastoiditis. Another, and most important, contribution to our knowledge was a short paper on cystic serous meningitis, complete with a cinematograph demonstration of the forced movements. It was characteristic of Jenkins's modesty that he was most unwilling to produce this paper as he had only two cases to show.

Probably his most permanent work was that done on otosclerosis. In 1913 he published his results after fenestration of the labyrinth. This pioneer work has been fully and generously recognized by Professor Gunnar Holmgren and Dr. Sourdille, who have since then

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followed it up and amplified it, with what success it would still be premature to judge. But the important point, which is often overlooked, is that Jenkins believed that the condition was due to a change in the labyrinthine fluids, not to obstruction of the windows, which he regarded as a secondary effect. In later papers he dealt with the relations between otosclerosis and osteitis deformans, and between otosclerosis and osteogenesis imperfecta. These researches may fairly be described as vital additions to our knowledge of the subject, and on them he based his view that otosclerosis is a change affecting the whole capsule of the labyrinth. In his studies on otosclerosis he added considerably to our understanding of paracusis and of bone conduction.

By his death we have lost a most admirable and lovable man and one of the foremost otologists of our time.

F. W. W-T.