



A VIRTUAL MUSEUM OF MEDICAL AND SURGICAL ARTEFACTS

**Including items donated by members of the
Australian Medical Association (SA) and the public, and presented by the AMA(SA)
Historical Committee, with associated commentary and resources**

AKNOWLEDGEMENTS

Our Virtual Museum is a continuously evolving project. Most images have been taken by Dr Tom Turner. Others are credited by hyperlink, accessed by right clicking [text rendered in blue](#) and selecting 'Open Hyperlink' from the drop-down menu. The same applies to material gathered from the web.

The original supporting text, meant to add interest to the presentation, was created by Dr Turner and edited, supplemented and corrected by the Committee. We bear the editorial responsibility but to any reader who can add accuracy to our product, we issue a welcome to let us know how to make it better.

With grateful thanks we recognise the major contribution from Tom. His initiatives have added life and meaning to the project, his enthusiasm and dedication has driven us. His computer skills have created what you see while his cheeky sense of humour has kept us on track.

We do not know the name and usage of many of the old instruments and would be grateful for details of anything recognised. This presentation also includes objects, art and advertisements that are not part of the AMA(SA)'s collection, but are included for interest and context.

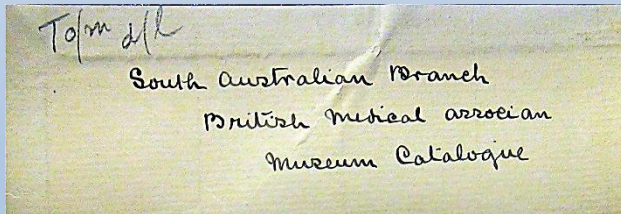
OUR COLLECTION BEGAN WITH THE VERCO INVENTORY

Although many items have found their way into our collection the first written inventory of items in our possession was made by Sir Joseph Cooke Verco, President of the Branch 1886-1887 and 1915-1920.

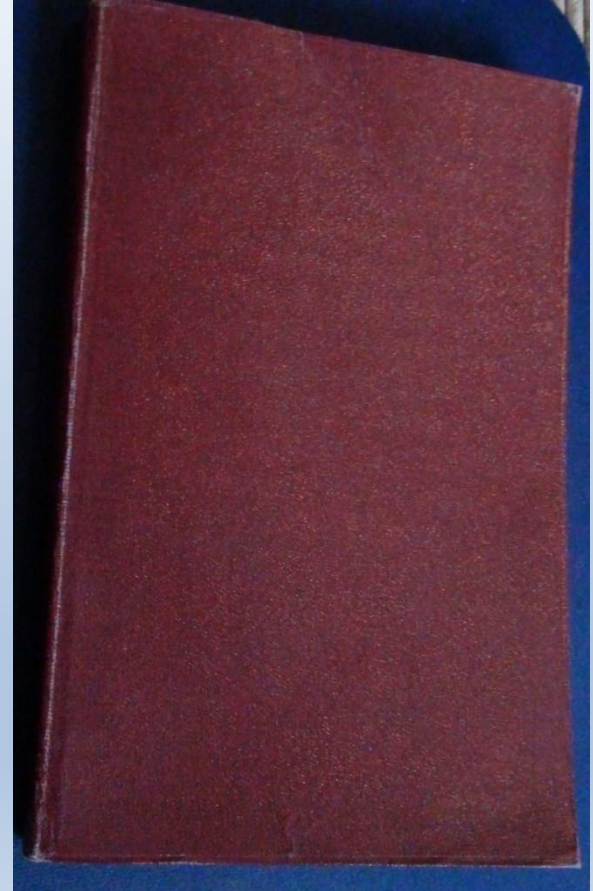
Some of his comments are pithy, but always to the point.

The individual pages have been digitised and some hyperlinks have been inserted, but the pages need to be edited.

Entries 27 30 and 40 contain no description.



[Open to view](#)
[The digitised product](#)



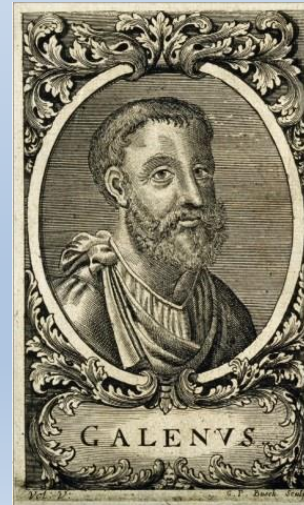
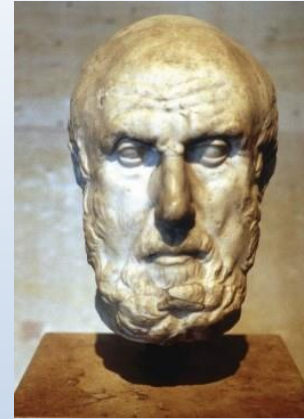
FROM ANTIQUITY TO EARLY SOUTH AUSTRALIAN EXPERIENCES

The first 'doctors' in South Australia had widely varying qualifications. An Anglican cleric, Archdeacon Morse at Yankalilla, took instructions from Dr Edward Stirling (President 1924-25) to care medically for his flock. Many, like Dr Allan Campbell of Adelaide Children's Hospital fame, were doubly qualified as homeopaths and medical doctors. Some purchased their degrees! Others self-improved by degrees.

<http://www.medicalpioneers.com/sources.htm>

The South Australian Branch of the British Medical Association was founded in 1879 by Joseph Verco and others. It morphed into the Australian Medical Association (SA Branch) in 1962 and has always vigorously opposed licensing of non-medically qualified practitioners. We follow the traditions of many before us. A list of worthy local persons can be found at

<http://samhs.org.au/VirtualMuseum/Notable-individuals/Notableindividuals.htm>



DOCTORS WHO SERVED THE EARLY COLONISTS

The first woman graduate from the University of Adelaide was Laura Margaret Hope, née Fowler, in 1891.

The first woman in general practice in Adelaide was Dr Violet Plummer (1900).



Thomas Cotter

The first Colonial Surgeon, Thomas Young Cotter, was appointed in England in 1835 but started work in the colony in 1837.

The first doctor to die in the colony was Dr. John Slater, who became lost in the bush on Kangaroo Island.

Women, unsurprisingly due to the time, were not considered for the post of Colonial Surgeon.

Records of private practitioners are difficult to find, but [Dr Edward Wright](#) and his son Charles made their mark.

Laura Hope, née Fowler



Violet Plummer



SA REGISTER Sept. 1st 1837.

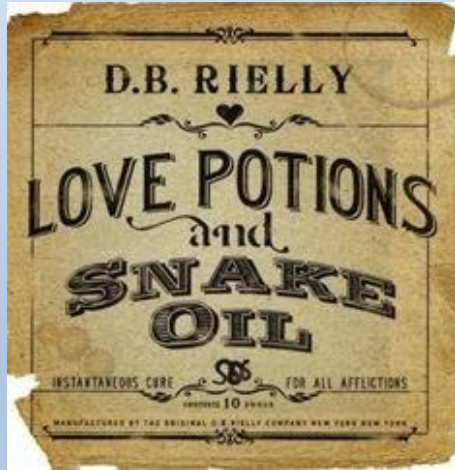
A letter was published by Robert Fisher (a printer, 21 yrs), commenting that "Captain Duff had no right whatever, to us to land" [to land the passengers the way he did], "much less to have treated us with the cool inhumanity he did after our safe arrival. Nor ought Mr Robert Gouger urge such a mad-headed project then be the first to decline going" [to be carried on sailor's shoulders to the beach]. It seems that Mr Gouger actively encouraged E W Osborne (another young printer, aged 19) and Doctor John Slater, to embark on this escapade. The writer had no scruples in declaring that by participating in Mr Gouger's ill advised scheme, both Osborne and Slater died soon after arrival.

*Images of Cotter (B1166) and Plummer (B25677)
courtesy of the State Library of South Australia.*

*Image of Laura Fowler
courtesy of the University of Adelaide Archives.*

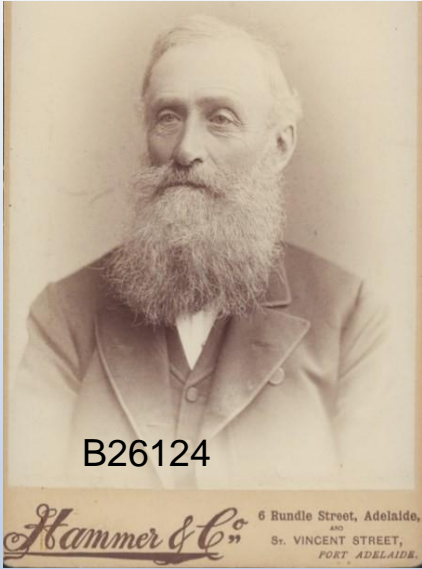
OUR QUESTIONABLE PAST

Ignaz Philipp Semmelweis and [Joseph Lister](#) stood on the shoulders of Louis Pasteur, who along with [Lovisa Åhrberg](#) and many others, were accused of quackery, only to leave the medical establishment embarrassed. This collection shows many remnants of earlier times with long-banished or outmoded instruments and devices. We should not look back on our earlier colleagues with only derision or disdain. Which of our remedies and techniques will be derided in 50 or 100 years? [William Osler](#) said 'The greater the ignorance the greater the dogmatism.'



Painting by William Hogarth, (London 1697-1764). 'The Visit to the [Quack Doctor](#).' aka 'The interview' Item three of [Marriage à-la-mode](#)' Public domain via [Wikimedia Commons](#)

ONE OF THE PEOPLE WHO PRACTISED AS DOCTORS



Edgar Smith Wigg, stationer, later homeopathic chemist, was well regarded by the early establishment of South Australia. The man was much more important than his products.

On the right is an image of his first shop at 4 Rundle St, near the famous Beehive Corner.

Wigg later moved to the shop around the corner, previously a homeopathic pharmacy run by the Campbell brothers.



Pencil sharpener, a box of nibs and some household seals, a small part of Wigg's wares.

VARIOUS TYPES OF ELECTROTHERAPY EXCLUDING RADIOTHERAPY

It was reported in 63 AD by Scribonius Largus, court physician to the Roman emperor Claudius, that pain was relieved by standing on an electrical fish at the seashore. Later healers built on his observation and from the 16th to 18th centuries various (electrical) devices evolved which were used to treat everything from headaches to impotence and even cancer.

<https://en.wikipedia.org/wiki/Electrotherapy>

Acceptable modern treatments include EMS, NEMS Neuromuscular Electrical Stimulation

https://en.wikipedia.org/wiki/Electrical_muscle_stimulation

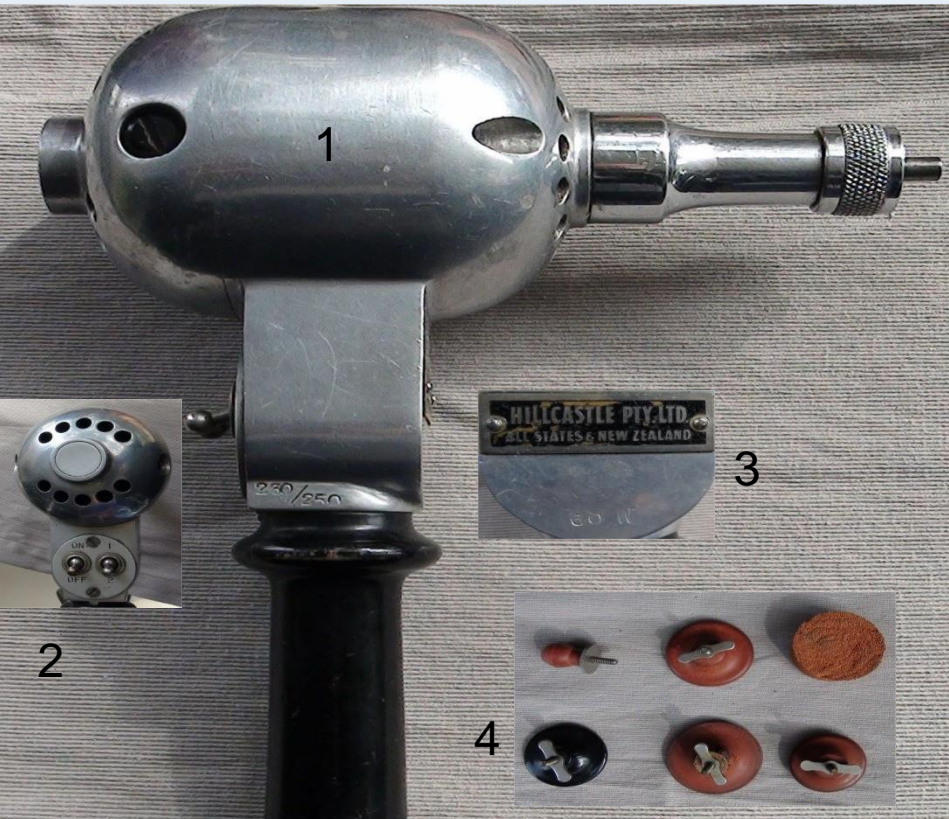
TNS, TENS

https://en.wikipedia.org/wiki/Transcutaneous_electrical_nerve_stimulation

and Interferential therapy

<http://www.thephysiocompany.com/blog/electrotherapy-in-physiotherapy-treatments>

A DEVICE USED BY PHYSIOTHERAPISTS



Now obsolete, this electrically powered machine worked by gentle massage.

1 Drill-like power unit

2 Power Control

3 Manufacturer

4 Accessories to attach to the driving spindle

There are over 23,000,000 hits on Google for 'Massage machines'

Kindly donated by John Barron Eastwood Physiotherapy



Philips unit donated by the practice of Drs Levy, Boyd, Roffe and Heading.

Wires were connected to the terminals and the heat controlled by the dials. The gun like device to the right acted as an on/off control

ELECTROCAUTERY

Electrocautery, also known as thermal cautery, refers to a process in which a direct or alternating current is passed through a resistant metal wire electrode, generating heat. The heated electrode is then applied to living tissue to achieve hemostasis or varying degrees of tissue destruction.

Cautery was historically believed to prevent infection, but current research shows that cautery actually increases the risk of infection by causing more tissue damage and providing a more hospitable environment for bacterial growth.

The main forms of cauterisation used today in the first world are electrocautery and chemical cautery—both are, for example, prevalent in the removal of unsightly warts. The temptation was to remove tissue without the now mandatory histological examination.



Modified from Wikipedia

THE BOTH ELECTROCARDIOGRAPH

Edward Thomas Both (1908–1987) was an Australian inventor credited with the development of a number of medical, military and general-purpose inventions. These included a low-cost iron lung, a humidicrib, the first portable electrocardiograph (with brother David) and the Visitel – a forerunner to the modern fax machine. His inventions gained him an OBE in 1940, and his work led to Both being given the moniker of the *Edison of Australia.*' Quoted directly from https://en.wikipedia.org/wiki/Edward_Both



See more information about history and earlier models at <http://www.ecglibrary.com/ecghist.html>



SOME EARLIER DEVICES AND MODALITIES OF UNCERTAIN VALUE

ELECTROMIOPATHY

Also called Electro-Homeopathy, Elettromiopatìa, Elettromoeopatìa, Electro Homeopathy.

The method has nothing to do with homeopathy or with electricity.

The founders of prepared mixtures of herbs with secret formulae believed they trigger a 'shock' within the body.

There are about 30 liquid products, prepared and sold by his descendants, which are claimed to heal 'all' diseases. The words panacea and caution come to mind.

REFERENCES TO 'ELECTRICAL TREATMENTS'

Electroconvulsive Therapy ([ECT](#)) was used to treat psychiatric conditions as early as 1744.

For a more detailed list of diseases claimed to be cured by [electromiopathy](#) and [homeopathy](#) see also this presentation: The 'Uvral Machine' and 'The Improved Electromagnetic machine'

HOMEOPATHY

Dr Samuel Christian Hahnemann (1775-1843) founded [classical homeopathy](#) and homeopathic medicine resting on the [Law of Similars](#) previously described by Hippocrates and Paracelsus and found in many cultures, including the Mayans, Chinese, Greeks, Native American Indians, and Asian Indians.

It was Hahnemann who codified the law into a systematic medical science.

THE UVRAL MACHINE

A [violet ray machine](#) is an antique medical appliance used during the early 20th century but is now obsolete. Their construction usually features a combination of a disruptive discharge coil with an interrupter to apply a high voltage, high frequency, and low current to the human body for therapeutic purposes. Their basic construction was invented prior to 1900 by Nikola Tesla, who introduced their first prototypes at the World's Columbian Exposition in 1893.

<https://en.wikipedia.org/wiki/Electrotherapy>

THIS MACHINE WAS PURCHASED.
BY MY LATE GRANDFATHER +
GRANDMOTHER (SEE ATTACHMENTS
~~2~~) IN THE 1950'S.
PARTICULARLY GRANDFATHER —
SUFFERED BADLY WITH "ARTHRITIS"
AND WOULD DO ALMOST ANY
THING TO RELIEVE HIS PAIN.
IT CAME FROM ENGLAND.
UVRAL MACHINES CAN BE FOUND
ON GOOGLE E-BAY. SELLING FOR A
£79.99 BID

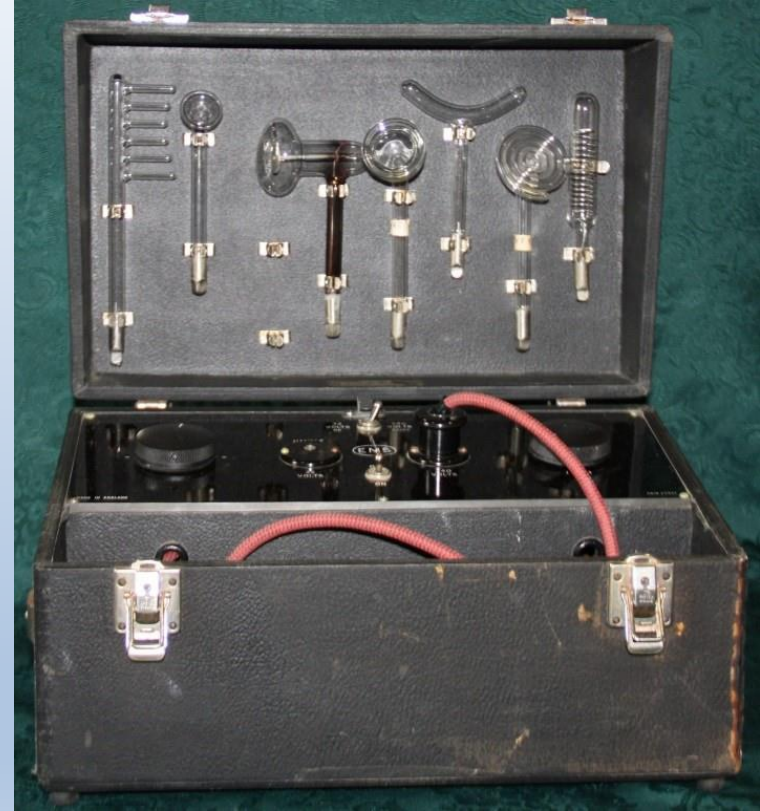
This machine has been donated
to the AMA S.A Branch of Medical
History Society.

after being left to the
Wardle + Edwards family.
It was given to Graham
Edwards by his late
grandfather ALFRED STANLEY WARDLE
for safe keeping.

In the interest of Medical
History Graham decided
to donate to AMA.

Graham + Margaret Edwards.
Susan Bridge

The provenance of the machine



Twenty-seven electrodes were available and designed to treat inner and outer body parts.

LEFT TO RIGHT

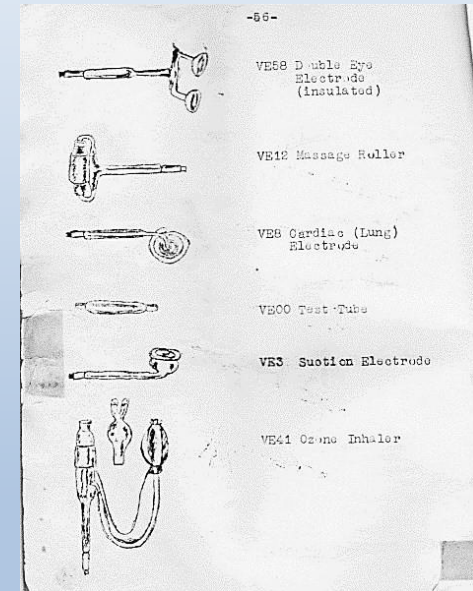
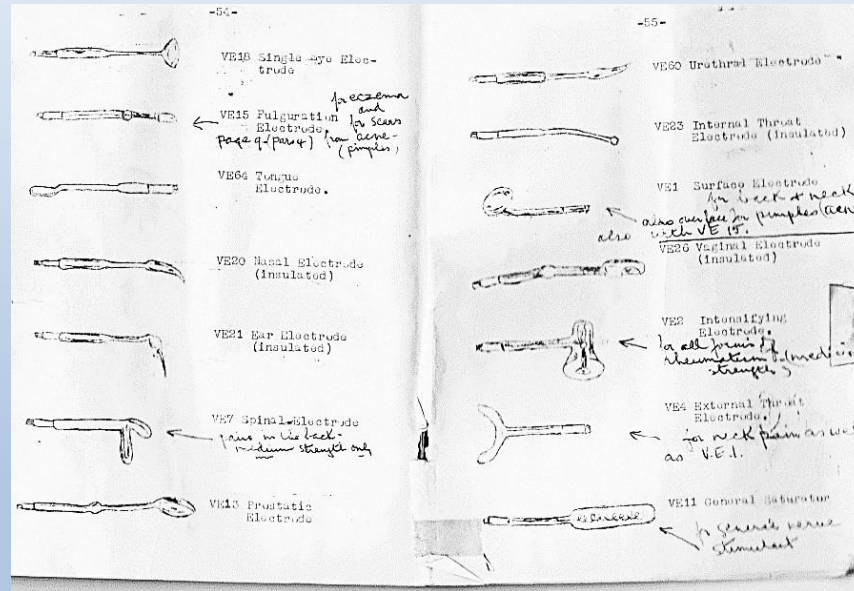
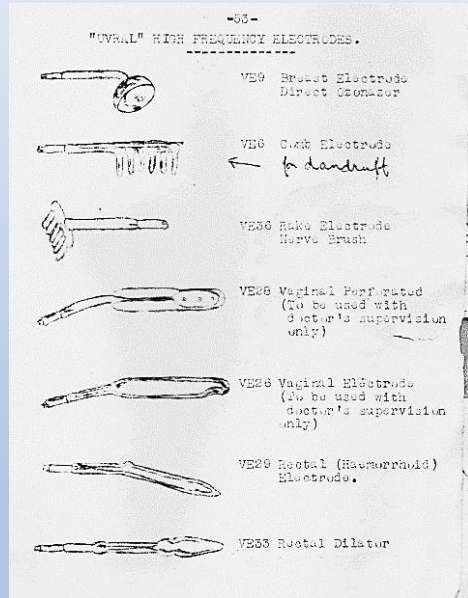
- 1 VE6 Comb Electrode for dandruff
- 2 VE9 Breast Electrode
- 3 Missing
- 4 VE1 Surface Electrode, for back, neck and acne with VE15
- 5 VE3 Intensifying Electrode, medium strength for all forms of rheumatism
- 6 VE4 External Throat Electrode, for neck pain as well as VE1
- 7 VE8 Cardiac (Lung) Electrode
- 8 VE11 General Saturator, for general nerve stimulant (sic)

THE UVRAL ELECTRODES



THE AVAILABLE ELECTRODES IN DIAGRAMMATIC FORMAT

What enormous ingenuity went into the design and manufacture of these devices!
Quite properly, those for the intimate cavities 'to be used with doctor's supervision only.'

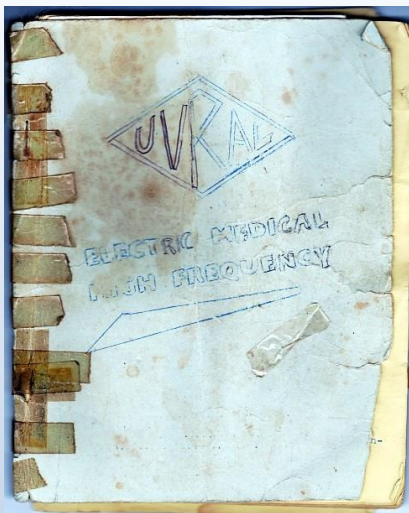


MORE ABOUT THE UVRAL

Pages extracted from the Users' Manual.

Of course, the proponents wisely avoided the word "cure." One can imagine that the mild heat produced would be as comforting as a wheat bag is today. There was not the present awareness of the dangers of UV light and devices are still available today, often used without regard to safety.

Other more powerful sources of UVA are legitimately used in dermatology for [skin diseases](#) like psoriasis and mycosis fungoides.



H. H. DEK. Page

What the Violet Ray (High Frequency) Does..... 1
 Currents..... 1
 What Violet Rays do..... 1
 On Using and Storing the Apparatus..... 1
 General Remarks on High Frequency..... 1
 Introduction..... 1
 Introductory Remarks on High Frequency..... 1
 Treatment..... 1
 Direct and Indirect..... 1
 Treatment..... 1
 1. Treatment by contact..... 7
 2. Discharge of Electrodes..... 6
 3. Indirect Treatment..... 9
 4. Purgation..... 9
 5. Indirect Self-Application..... 10
 6. Gas Inhalation..... 11
 Diseases and their Treatment..... 12
 1. Diseases of the organs of movement..... 12
 2. Diseases of the brain and nerves..... 16
 3. Diseases of the digestive organs..... 12
 4. Diseases of the breathing organs..... 20
 5. Diseases of the heart and blood vessels..... 33
 6. Arteries and Chloremia..... 34
 7. Affections of the Urinary Organs..... 35
 8. Skin and Hair Affections..... 36
 9. Eyes and Ear Affections..... 37
 High Frequency as an Aid to Beauty Culture..... 40
 Electrodes and the care of them..... 44
 Appendix..... 45
 Register..... 57

CHART OF INSTRUCTIONS
for the application of
HIGH FREQUENCY CURRENT

The following instructions, if properly followed, will have proved to give very beneficial results.

ADVICE. Use Surface Electrode and apply to skin for 5 minutes, using a medium current, and repeat the electric treatment with the English electrode to prevent redness of skin.

AGE. VULNERABLE (especially the Surface Electrode, in contact with the skin, should be applied to the forehead).

ALCOHOL AND DRUG HABITS. For Alcoholics, Moderate use of Wine may be used over face only for the night. For Opium users a mild current applied to neck, hip and side of feet, will do it redress.

ALZHEIMER. Apply daily. A weak current, not to be increased to a medium strength, but with daily repetition. The treatment should be continued for about 4 minutes every day. The same treatment for headache due to neuritis and eye that are often produced by a local electrode.

ANEMIA. General application to the naked surface of the body. Treatments to be applied to the neck, abdomen, back and chest. About 10 minutes per day. The treatment should be continued for 10 days. The treatment should be continued to greater extent by the High Frequency current. The treatment should be continued for 10 days.

ASTHENIA. Weak and Pained Body. Use Surface Electrode on upper arm and neck with current, also apply to neck with the English electrode.

ASTHMA. Apply to neck with Surface Electrode with about 10 minutes per day. The same treatment for headache due to neuritis and eye that are often produced by a local electrode.

ARTERIA. Apply as strong a current and touch on the patient on abdomen to give most beneficial effects, and touch on face. Make treatment on the patient himself.

BARBER'S ITCH. Treat the affected area daily with Surface Electrode on chest and neck. Repeat every day. The treatment should be continued for 10 days.

BLEPHARITIS. Apply to the affected area with Surface Electrode for 5 to 10 minutes. Treatments through a barrier film is advisable. Repeat treatments for 10 days.

BREAST FEEDING. Use Surface Electrode on the breast and neck for 5 to 10 minutes. Treatments through a barrier film is advisable. Repeat treatments for 10 days.

BREAST DEVELOPMENT. Use Special Breast Electrode. Apply medium current for 10 minutes daily. The treatment should be continued for 10 days.

BURNS. Surface Electrode over area affected. Treatment 10 to 15 minutes.

BURNS. Use Surface Electrode. Apply treatment to the part affected.

CALLUS. Apply to the affected area with Surface Electrode for 5 to 10 minutes.

CALLUSES AND CORNS. Use Surface of Purgation Electrode, repeat treatments for 10 days.

CATARACTS OF EYES. Use Surface Electrode on the eye for 5 to 10 minutes.

CATARACTS OF WOMB. Use Vaginal Electrode for 5 to 10 minutes daily.

PROBABLE. Application with an suitable electrode on skin on the forehead or neck. Will work in medium current, help greatly in treating a local condition as far as the skin is concerned. The treatment should be continued for 10 days.

REUMATISM. Repeat treatments 10 to 15 minutes in a case of Rheumatism. The treatment should be continued for 10 days.

SCALP TREATMENT. Treat the affected area with Surface Electrode on the head and neck. Repeat every day. The treatment should be continued for 10 days.

SCARS. Use Surface Electrode, applying strong spark 1 inch from the skin for 10 minutes application to a scar.

SEPTIC. In all cases of the great value of the High Frequency current in the treatment of septic conditions. The treatment should be continued for 10 days.

SKIN DISEASE. In all cases of the great value of the High Frequency current in the treatment of skin diseases. The treatment should be continued for 10 days.

SORE FEET AND STINK BRUSHES. Use Surface Electrode on the feet and neck. Repeat every day. The treatment should be continued for 10 days.

SORE THROAT AND THROAT DISEASE. Use Surface Electrode on the throat and neck. Repeat every day. The treatment should be continued for 10 days.

STIFF NECK AND JOINTS. Apply treatment on the neck and joints. Repeat every day. The treatment should be continued for 10 days.

TONICITY. Use Surface Electrode on the neck and joints. Repeat every day. The treatment should be continued for 10 days.

TONICITY. Use Surface Electrode on the neck and joints. Repeat every day. The treatment should be continued for 10 days.

TONICITY. Use Surface Electrode on the neck and joints. Repeat every day. The treatment should be continued for 10 days.

UVRAL
ELECTRIC MEDICAL HIGH FREQUENCY

British Made - Produced by British Scientists, recognised leaders in the world of Science and Physics.

Recommended and approved by leading British Medical authorities.

Over 22,000 UVRAL machines in use, solely on recommendation.

WHAT IT IS.

High Frequency Treatment is a simple method of stimulating the blood circulation by the local application of an electric current of low impedance and high frequency. The apparatus charges the frequency (or oscillations) of electrical current from the normal 50 oscillations per second of public supply to 200,000 oscillations per second, at the same time the intensity of the current is reduced to 20 milliamperes. An electric current in this form can be applied sensibly without risk of shock to the nervous system.

HOW IT IS APPLIED.

The UVRAL apparatus provides a safe and robust method of applying High Frequency Electrical Treatment by simply plugging it in to the lighting circuit of the electric supply. The intensity of the output current can be controlled by the turn of a knob to suit individual requirements. The treatment can be applied direct up to the skin when no electrical effect whatsoever is felt, or through clothing producing a mild spasm causing

'THE IMPROVED MAGNETO-ELECTRIC MACHINE'

The original "Magneto-Electric" machine was manufactured by [William Skidmore](#), a surgical instrument maker of Cemetery Road, Sheffield, England.

It was designed to administer mild electric shocks of varying strengths in order to assist with the cure of not only nervous diseases but also toothache and neuralgia.

The machine in our keeping was made by [S. Maw](#) & Thompson.



ELECTROMIOPATHY

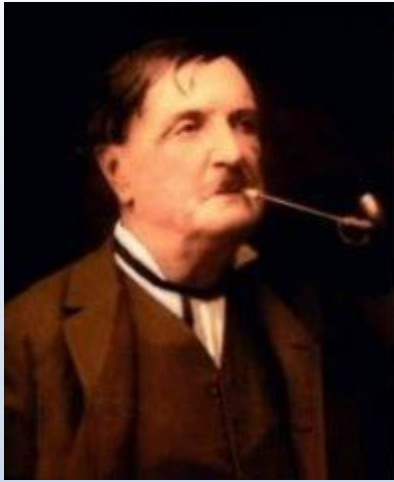
Electromiopathy is the name given to a system of medicine developed by Count Cesare Mattei in the later 1800s.

This electromiopathy practitioner's box was made in his factory in Italy.

The donor was Sir Joseph Cooke Verco who probably bought it from Wigg and Sons, Rundle St. Adelaide between 1860-1880.

[\(Item 5 in Verco's inventory\)](#)

Count Mattei was born 1809 in Bologna, Italy and belonged to one of the noblest families of the renowned University town of Bologna.



The Count



*Castle Rocchetti
outside Bologna*



MORE ABOUT THE BOX

We are indebted to Vice President Ing. Alessandro Rapparini for information about the organisation.

The boxes contained “remedies”, pills, potions and lotions hence the boxes were named ‘Remedy Boxes’. They were made in Italy from 1860 to 1960.

The Rochetti castle/factory is located in Vergato, just 38 km from Bologna on the border of Tuscany. The castle is now a museum managed by a trust.

<http://www.cesaremattei.com>



JUST WHAT IS IN THIS STUFF?

Calomel (Mercurous Chloride Hg_2Cl_2)

Pink disease (infantile acrodynia) was especially prevalent in the first half of the 20th century. [Selter](#) first described the condition in 1903. [Warkany and Hubbard](#) attributed it to exposure to mercury commonly found in teething powders.

The condition developed in approximately 1 in 500 exposed children. Interest in the disease was revived by our president Harry Swift (1899-1900) in 1914.

Calomel was named after the Greek kalos = *beautiful* and melos = black, because it turns black when it comes into contact with ammonia. This reaction, which was known to the alchemists centuries ago, is used as a test for mercury.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3173747/>



James's Powder, or more properly Dr. James's Fever Powder, was one of the most ubiquitous patented medicines from the mid-eighteenth century to the early twentieth century. Patients included George III, Oliver Goldsmith and Horace Walpole, who claimed the powders 'can cure most complaints that are not mortal, or 'chronical'.

Patented in 1746, the remedy was the subject of numerous attempts to establish its formula. A private analysis established that the powder consisted of antimony* and calcium phosphate, but it was Pearson's formula that was adopted by the first British Pharmacopoeia in 1864.

[https://en.wikipedia.org/wiki/Robert_James_\(physician\)](https://en.wikipedia.org/wiki/Robert_James_(physician))

**Severe poisoning resembles arsenic poisoning*

GREY POWDER (MERCURIUS SOLUBILIS)

Mercury has fascinated humans for millennia.

Mercury is toxic but was used as early as 1500 BC to treat many disorders, notably syphilis.

Symptoms of mercury poisoning are said to include chest pains, heart and lung problems, coughing, tremors, violent muscle spasms, psychotic reactions, delirium, hallucinations, suicidal tendencies, and Pink disease.



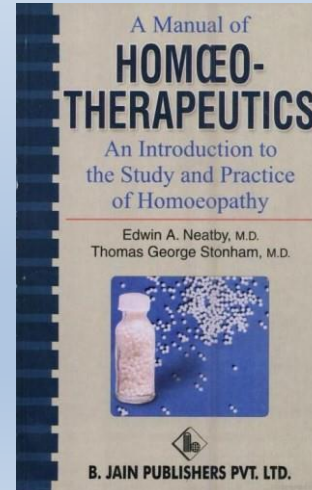
An ancient purgative containing elemental mercury and chalk.

MERCURIUS.

Mercurius solubilis. $[2(\text{NH}_2\text{Hg}_2)\text{NO}_2\text{H}_2\text{O}]$. Solution.
Mercurius vivus. (Hg.) Trituration.

MERCURIUS SOLUBILIS was a preparation made by Hahnemann in order to be able to administer mercury in a milder form than the corrosive salts of mercury in use in his day. It is prepared by precipitating mercury from its solution in nitric acid by means of caustic ammonia and is not pure mercury.

Mercurius vivus is a trituration of pure mercury with sugar of milk. Both are in common use and their actions are indistinguishable.



'...to administer mercury in a milder form than the corrosive salts of mercury in use...'

*From Edwin Awdas Neatby 1858 – 1933
'A Manual of Homoeopathic Therapeutics'*

SCARIFICATION IN 19th CENTURY MEDICAL PRACTICE

Scarification has been performed for many reasons: decoration, spiritual or medical protection and treatment.

Bloodletting as Hippocrates and Galen advised was to let out the evil humours in blood.

The process was performed by applying the armed scarifier to the skin of the back, pressing hard and swiping to produce the cuts. Cupping was a similar process.

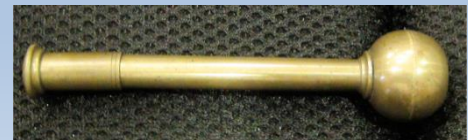
<https://en.wikipedia.org/wiki/Scarification>

https://en.wikipedia.org/wiki/Body_piercing

The brass and iron scarifier depicted here was donated by Mr. Simon Taylor, manager of Simax Engineering, Parkside. He found it in the effects of his grandfather Reginald Mervyn Tucker, a prominent lawyer of Strathalbyn, South Australia. It was a patent design of G. Tiemann, a New York surgical instrument maker from 1826 and marketed by S. Maw & Son & Thompson, 7-12 Aldersgate St., London E.C. Shown here in its original box'.



London, England, 1860-1875, S Maw & Son, Science Museum, Making the Modern World Gallery, 1860-1875. Object No. A86336 Pt1 CC BY-NC-ND 2.0



SOME EXAMPLES

Both scarification and bloodletting as sound medical practices ceased in the late 19th Century; the process is continued by body piercers, tattooists and DIY.

Tribal marks are understandable and made with good reason in the thinking of some cultures.

<http://www.sacred-texts.com/afr/yl/yl04.htm>



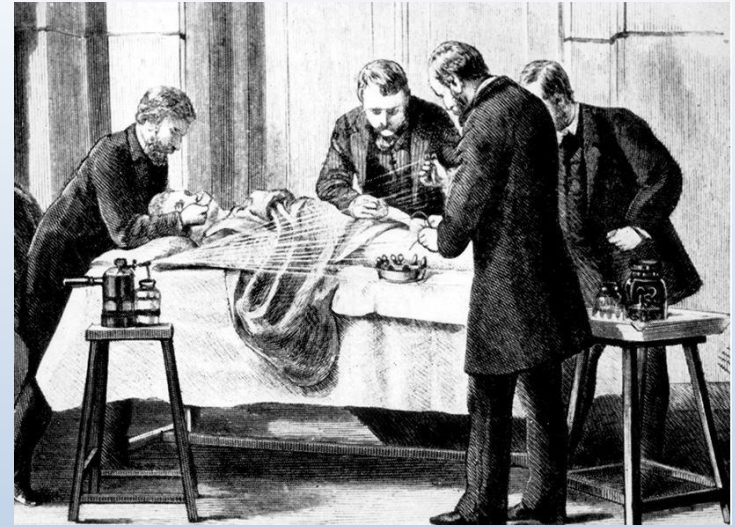
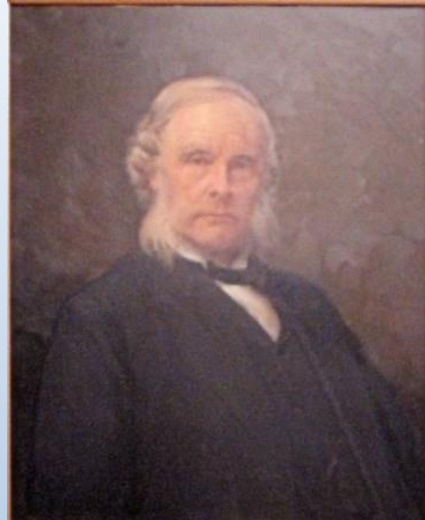
Simple tattoos, once the sole province of the sailor, are now common.

Why has this man done this? Is it pathological? The psychological background is complex. There are many [scholarly articles](#) to read on the web.

LISTER'S CARBOLIC SPRAY

[Sir Joseph Lister](#), 1st Baron Lister, Bt., OM, FRS, PC, later Lord Lister. Between 1883 and 1897 Lister was a British surgeon and a pioneer of antiseptic surgery.

By applying Louis Pasteur's advances in microbiology, he promoted the idea of 'sterile portable ports.' While working at the Glasgow Royal Infirmary, between 1865 -1869, Lister successfully introduced carbolic acid (now known as phenol) to sterilise surgical instruments and to clean wounds which led to a reduction in post-operative infection rates and made surgery safer for patients.



Lister's Carbolic Spray in action during operation



Two examples of Lister's Spray made by S. Maw (left) and [Arnold and Sons](#) (right)

HOW THE SOUTH AUSTRALIAN MEDICAL PROFESSION PAYS TRIBUTE TO LISTER

From 1914 a series of orations were arranged by the BMA in South Australia with the help of The University of Adelaide to honour Lord Lister. The Listerian Orators are listed on the next slide.

The first was delivered by Sir Harry Allen. From 1921 to 1941 they occurred yearly but after a lapse they were resumed by Sir Hugh Cairns in 1948 and sporadically until 1979. He has been similarly recognised throughout the world.

The items on the right are dies used to produce the South Australian medal presented to the orator.

<https://www.adelaide.edu.au/legalandrisk/trusts-bequests/prizes/UTR1.17.pdf>



LIST OF LISTERIAN ORATORS

1914	Sir Harry Allen	1951	Sir Charles George McDonald
1915	Dr. Hall	1952	
1916	Clifford Craig	1953	
1917-1920	Not Held	1954	
1921	Frederic Dougan Bird	1955	Sir Alexander Paterson Murphy
1922	G Rothwell Adam	1956	
1923	C. Bickerton Blackburn	1957	
1924	F A Hadley	1958	Professor Frank Fenner
1925	W J Penfold	1959	Professor C R B Blackburn
1926	Professor Frederick Wood Jones	1960	Professor Lance Townsend
1927	Robert Marshall Allen	1961	Clive H Fitts
1928	Professor H. H. Woolard	1962	Kenneth W Starr
1929	F P Sandes	1963	Sir John Eccles
1930	Fay McClure	1964	Professor R P Jepson
1931	Sir Charles James Martin	1965	Professor E G Saint
1932	S A Smith	1966	Dr. Alexander John Maum Sinclair
1933	F A Maguire	1967	Mr. E S R Hughes
1934	Sir Henry Newland	1968	Professor R. R. Andrew
1935	Professor W A Osborne	1969	Professor John Lowenthal
1936	Sir Stanton Hicks	1970	Professor G J V Nossal
1937	S V Sewell	1971	Professor John Ludbrook
1938	Sir Hibbert Alan Stephen Newton	1979	Zelman Cowen
1939	Robert Fowler		
1940	Robert Holmes à Court		
1941	James G Edwards (Radiologist)		
1942 – 1947	Not held		



SOUTH AUSTRALIA

***Would anyone who can provide the names of the missing orators
please contact the AMA (SA)?***

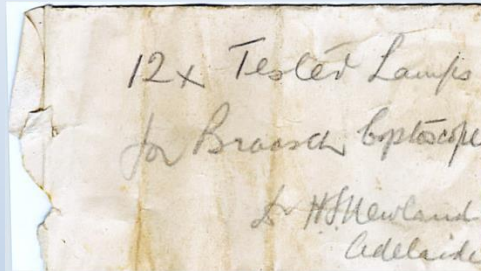
Phone: 08 8361 0100

admin@amasa.org.au

SIR HENRY NEWLAND'S BRAASCH CYSTOSCOPY KIT



The Electro Surgical Instrument Co. was one of his favourite suppliers
<http://www.electrosurgicalinstrument.com//>



11 held, very corroded



Bust of Sir Henry commissioned on conclusion of his chairmanship of AMPCo, of artist John Dowie

More about Sir Henry from the South Australian Medical Heritage Society Inc.

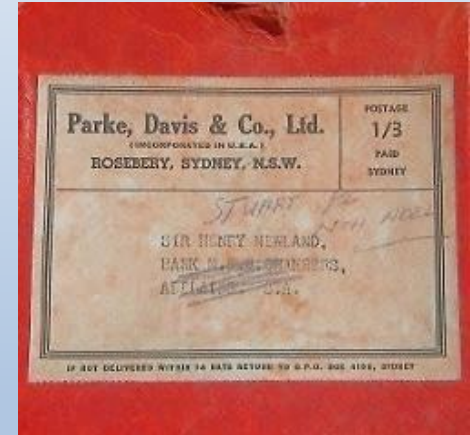
<http://samhs.org.au//>

And Henry Simpson Newland : a biography by J. Estcourt Hughes.

<http://trove.nla.gov.au/work/21582141>

William Frederick Braasch 1878-1975 was a noted American Urologist. [Braasch](#) and [Braasch 2](#)

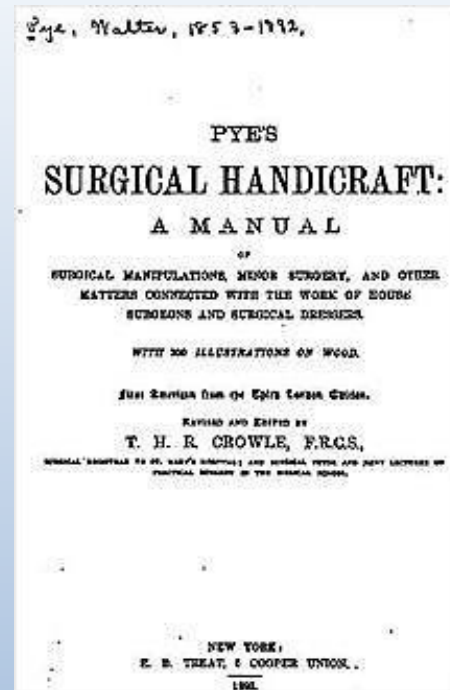
FINGER SPLINTS AS RECEIVED IN A REDBOX (Donated by Sir Henry Newland)



METAL FINGER SPLINTS RESTORED



Splinting damaged fingers with these devices is no longer advised. The description 'The evil straight wooden splint' is attributed to Dr. [Marc Iselin](#) and is also referenced in [Pyes Surgical Handicraft](#) in as early as 1891*.



Page 197

the palm, so that the thumb lies well forward in the opposed position (Fig. 266). "It is essential to forbid the use of the evil straight wooden splint, which tends to cause a series of ankyloses in extension." (Iselin.) (Fig. 267.)

*Bett, W. R. (1953). Walter Pye, F.R.C.S. (1853-92). *Annals of The Royal College of Surgeons of England*, 13(4), 269–271.

Kindly restored gratis by Mr Simon Taylor, Manager of Simax Engineering, Parkside SA

CHILD'S ORTHOTIC SHOE IN A BOX

Made for a patient of Sir Henry Simpson Newland by an unknown technician. Below for comparison is a modern [orthotic shoe](#).



Blue box originally for a Kit-bag sphygmomanometer in which Sir Henry kept the orthotic shoe.

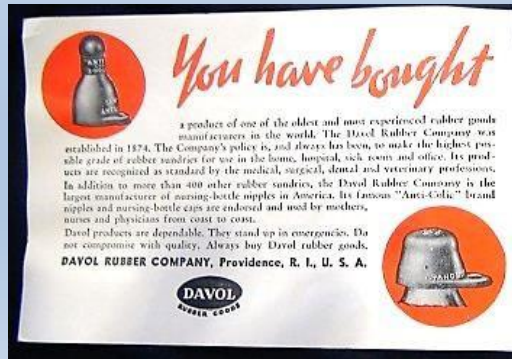


'DAVOL'™ STOMACH TUBE WITH FUNNEL - SMALL SIZE

The first record of a feeding tube inserted down the oesophagus was in 1598.

Dr [John Hunter](#) published reports on the use of a stomach tube in 1793. It was made from the skin of a small eel.

Davol was founded in Providence, Rhode Island in 1874, supplying the medical community with hot water bottles and catheters. For the past 40 years, Davol has stood out as the market leader in providing solutions in soft tissue reconstruction including products for hernia repair, specialized surgical procedures, fixation and biologic implants.



Likely to be the property of Sir Henry.

'Bought August 1935'

CIRCUMCISION KIT: FORCEPS, DOUBLE-BLADED KNIFE

The convex shape of the knife is traditional, but such instruments were usually used to open abscesses. Often called bistouries (singular bistoury) they came in many shapes and sizes. Sir Joseph Verco's thoughts on the item are recorded on the back of his card and in his inventory at item [103](#).

Circumcision Forceps
with parallel action blades.
one lined with tortoiseshell.
Very interesting. but not of
much use.

Dr. Jos. C. Verco
Mill...



LANCET, LEATHER CASE AND GLASSES OF DR JOHN DAVIES, SWANSEA, WALES

The great uncle of Dr J. Davies-Thomas, President of SA Branch BMA 1887-88



LANCET CASE FOR VEST
POCKET USED BY DR.
JOHN DAVIES, OF SWANSEA,
WALES

The great uncle of Dr. J.
Davies Thomas of Adelaide.

Donated By Mrs R. B. Cornish.

Transliteration

Stangate House
Adgate. S. Australia
June 25. /50

To the Secretary
B.M.A. South Australian Branch.

Dear Sir.

I have received a letter
from your President acknowledging the gift of a silver
lancet Case, & an old type of spectacles - Sent from me
at Sir Henry Newland's suggestion.

I thought it might help you if you had the enclosed cards
giving more details of their former owners -

Please do not trouble to acknowledge
this note.

Yours Faithfully

Gwenyth Cornish.

(Mrs. R. B. Cornish.)

Stangate House,
Adgate, S. Australia
June 25. '50

The Secretary
B.M.A. South Australian Branch.

Dear Sir.

I have received a letter from your
President acknowledging the gift of a silver
lancet Case, & an old type of spectacles -
sent from me at Sir Henry Newland's
suggestion.

I thought it might help you if you had
the enclosed cards giving more details
of their former owners -

Please do not trouble to acknowledge
this note.

Yours faithfully

Gwenyth Cornish.
(Mrs. R. B. Cornish.)

MAGNIFYING GLASSES

These spectacles were designed specifically for those with a narrow inter-pupillary distance. They were given to Dr. Tom Turner and used in his dermatological practice until retirement in 1999. Modern binocular loupes can be adjusted.



*Images courtesy of
Dr Warren Weightman*



UNIDENTIFIED BRASS AND PORCELAIN INSTRUMENT

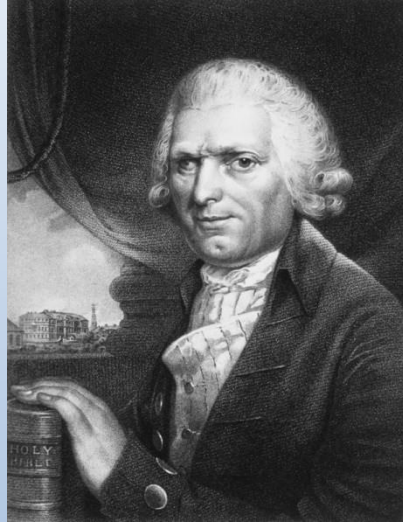
On a stand holding an open-ended porcelain tube and an adjustable concave mirror.

Made by L. Casella London

Mr Paul Freund of [Grace's Guide](#) is helping us to find the nature of this item.
Donor unknown. All suggestions welcome.



THE HEY SKULL SAW

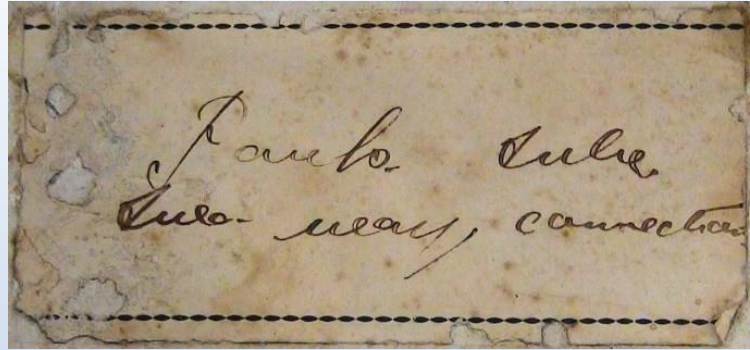


[William Hey](#) (23 August 1736 – 23 March 1819) was an English surgeon, born in Pudsey, West Yorkshire, the son of Richard Hey and his wife Mary Simpson; John Hey and Richard Hey were his brothers. He was a surgeon at Leeds General Infirmary from its opening in a temporary building in 1776 and senior surgeon from 1773 to 1812.

*Image of Dr Hey by W. Holl (<http://ihm.nlm.nih.gov/images/B14689>) (public domain),
via Wikimedia Commons*

PAUL'S TUBES

Glass tubes with a projecting rim used to drain the bowel after it has been brought to the surface of the abdomen and opened.



Label on outside of original box transliterated:

Paul's tube

Two way connection

Named after *F. T. Paul*
(1851–1941) British surgeon

From [A Dictionary of Nursing 2008](#)



'SPIRIT' SPHYGMOMANOMETER AND STETHOSCOPES

Stethoscopes, by Spirit Medical Company Taiwan. 'Spirit' – Deluxe

- a) Old stethoscope, ear-pieces and gauge in 'Spirit' Deluxe box
- b) Un-boxed Original 'Spirit'
- c) Stethoscope with red tubing
- d) A type commonly used from 1950 on, donated by Dr. T.G. Pickering President 1977-78. Note lever to change from bell to diaphragm



APPARATUS TO INDUCE ARTIFICIAL PNEUMOTHORAX



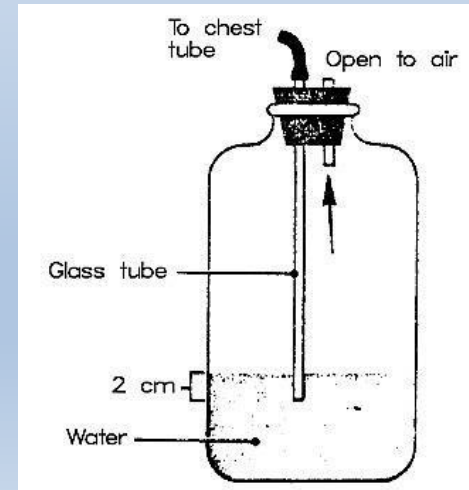
In Paris in 1774 Bourru, a French physician, noticed that patients with tuberculosis who developed spontaneous pneumothoraces improved.

By the late 19th century, Carlo Forlanini (1847–1918) had developed a technique to induce pneumothorax, forcing nitrogen into the chest through a needle, thus collapsing the lung in an attempt to close tuberculous cavities.

Not used by the late 1970s.

Contrast this with traumatic or spontaneous pneumothorax where first aid is provided by a simple underwater seal drain.

This allows the pressure to equalise on both sides of the chest cavity.



A VELVET CASE CONTAINING THREE LARYNGEAL MIRRORS

Donated: Dr O.W. Bowering

Present owner: Dr Richard Bowering

Usage: To view larynx and post-nasal space.

Components: Stainless steel mirrors and containing box. The viewing angle can be adjusted by using the trigger.

In the past, ENT surgeons used indirect laryngoscopy. This involved insertion of the mirror into the back of the mouth; gagging was avoided by spraying with local anaesthetic.

Current fibro-optic instruments provide a direct view of the area and can be coupled to a television monitor, thus providing a hard copy record.



POCKET LARYNGOSCOPE: AURORASCOPE™

A battery-operated diagnostic instrument set for ear nose and throat, plated metal, from U.S.A. 1920-1950. Made by Sancy Light in the USA, a firm no longer to be found online.



In earlier times it was a juggling task to line up the light and the head-mirror.

ILLUMINATED MAGNIFYING GLASS (BATTERY OPERATED)

This may be item [113](#) in the Verco inventory



THE DERMATOSCOPE AND EPILUMINESCENCE MICROSCOPY

Skin surface microscopy has a history starting with Johan Christophorus Kolhaus in 1663.

The more modern models (after Ernst Abbe, 1887) used a thin coating of oil to increase magnification as does an oil immersion lens in standard microscopy.

A built-in light was added by Johann Saphier (1920). The most recent versions use polarised light without oil, and allow image capture and storage for comparison.

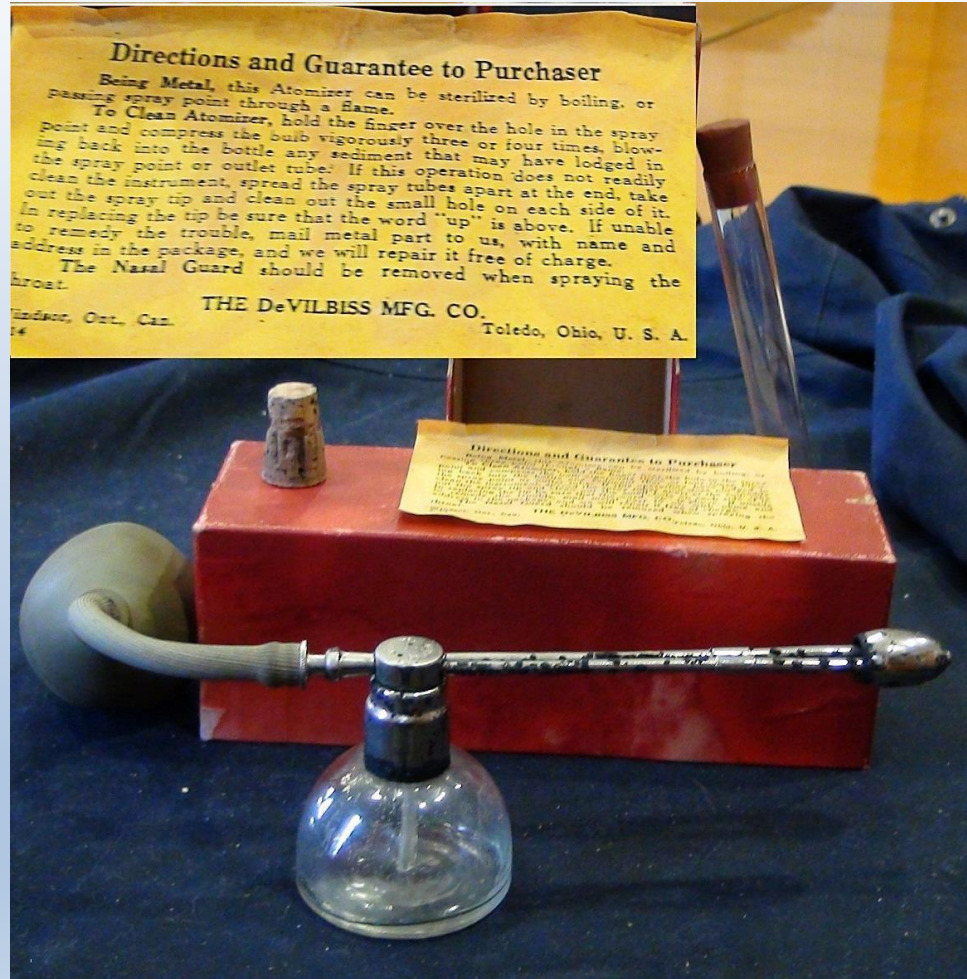


DEVILBISS

NASAL/LARYNGEAL SPRAY

With oils or aqueous solutions in faded red cardboard box.

This American company now makes continuous positive airway pressure (CPAP) apparatuses.

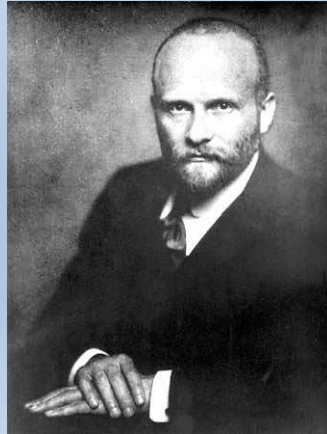


THE BÁRÁNY BOX

The Bárány Box is a clockwork (wind-up) noise generator that is used in audiological testing with tuning forks and speech testing. It is named after [Robert Bárány](#) (aka Bárányi).

Born April 22, 1876 in Vienna, he died April 8, 1936 in Uppsala. He was one of the founders of otiatrics. Bárány graduated from the medical school of the University of Vienna in 1900 and worked as an assistant in Politzer's Ear Clinic from 1905 to 1911. From 1917 he was chairman of the Ear, Nose and Throat Clinic of the University of Uppsala.

Bárány's main works dealt with the physiology and pathology of the vestibular apparatus. He proposed methods of examining it with the aid of the Bárány chair. He also constructed instruments for examining functions of the ear, including the Bárány rattle. Bárány won the Nobel Prize in 1914 for his work on the physiology and pathology of the vestibular apparatus.



Modern chair

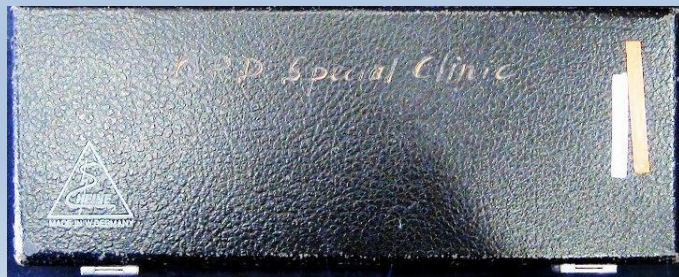
MORE OPHTHALMOSCOPE/AURISCOPE KITS

Ophthalmoscopes from other makers

- a) Welch Allyn
- b) Attachment for 'May' ophthalmoscope devised by Charles H. May M.D. notable American ophthalmologist 1861-1943
- c) Centenary model Keeler with black box



For latest models:
[Gowlands.](#)
[Keeler.](#)
[Heine.](#)
[Welch Allyn](#)



AURISCOPE OPHTHALMOSCOPE SET DONATED BY DRS WIGG, HORNABROOK AND DOUGLAS (MINUS HANDLE)

The well known Gilberton general practice of Wigg Hornabrook and Douglas was frequently mentioned in the Births section of the daily papers:

'Thanking Drs. Wigg, Hornabrook and Douglas.'

No doubt all three were not in attendance at every delivery.

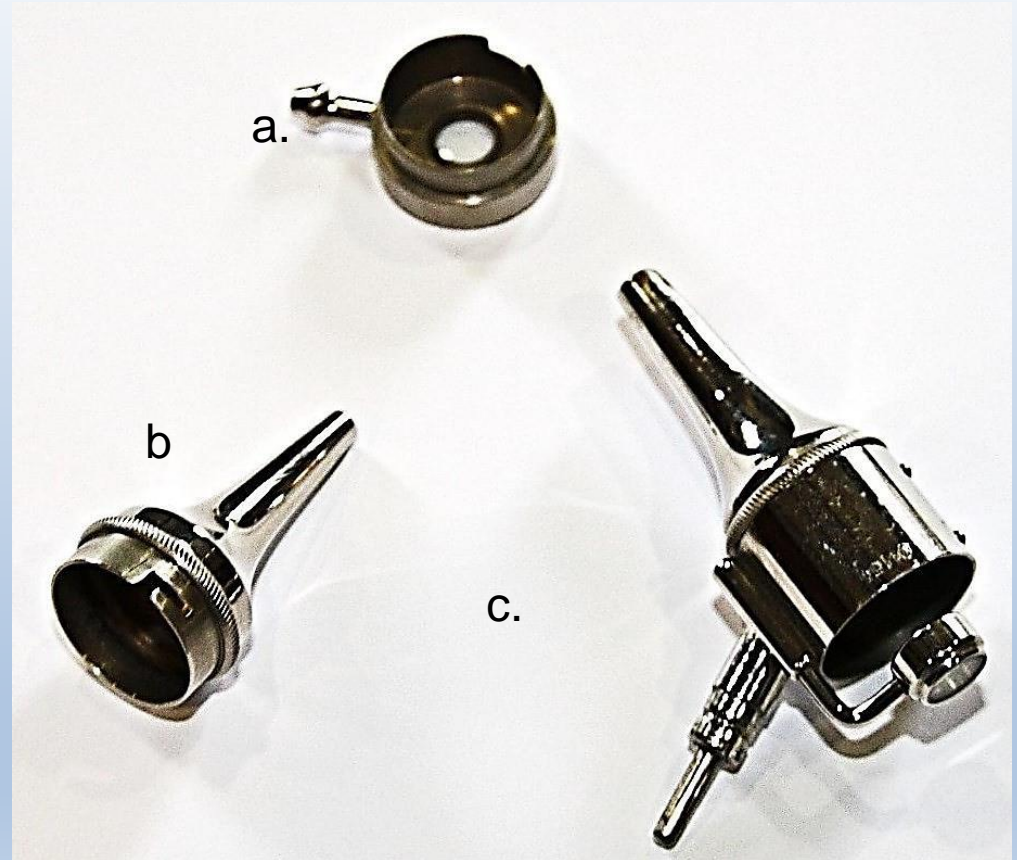
Dr Sholto John Douglas was president of our Branch from 1953 to 1954.



AURISCOPE ATTACHMENTS

- a) Cover to allow air insufflation via a rubber bulb to test movement of tympanic membrane, which will not move if perforated, very stiff or splinted by middle ear fluid.
- b) Aural speculum.
- c) Auriscope head with moveable magnification to allow working down the opening while looking, e.g. for performing myringotomies or removing foreign bodies or wax.

Description courtesy of Dr David Close



REPLACED TO A LARGE EXTENT BY WALL MOUNTED DEVICES

These examples kindly provided by the doctors at the Hazelwood Clinic, SA. Note the disposable specula. They are neatly designed but the real advance is LED bulbs which produce an even light at low temperature.



IT LOOKS OLD FASHIONED BUT IS IT?

The time honoured workhorse of any GP surgery.

One of Tom Turner's late partners told a story about a lad who presented his right ear for pressurised squirting and hopeful removal of a bead. When it didn't come out the doctor inquired "Is this the ear?" "No, it's in the other side" the boy piped up. "Why did you show me this one?" "I thought you were going to blow it through."

A true story. Best practice is to look before syringing.

Ear syringing is carried out in general practice and should not be discouraged. If all patients were referred to ENT specialists for suction toilet - which requires an operating microscope - the cost to Medicare would be quite excessive and specialists would spend much of their time unnecessarily .

Contraindications to syringing: Perforation (past or present) of the ear drum, ear infection, presence of a grommet, history of ear surgery, and young children who are uncooperative or confused about which side is in trouble.

Complications of syringing: Perforation of the ear drum, otitis externa, damage to the external canal, pain, deafness, vertigo, and tinnitus.

(Thanks to Dr David Close.)



Image courtesy of Hazelwood Clinic.

ETHER BOTTLE, ETHYL CHLORIDE, AND TWO MASKS: “THE RAG AND BOTTLE” DAYS

“It is not an ideal anaesthetic, though it's safer than chloroform and more effective than nitrous oxide.”

<http://www.histansoc.org.uk/timeline.html>

www.general-anaesthesia.com/people/ether.html

Photograph by WW1 photographer [Captain James Francis Hurley](#)



Ether being used on an unidentified stretcher case at an advanced dressing station of the 3rd Australian Field Ambulance, near the Menin Road at Ypres.



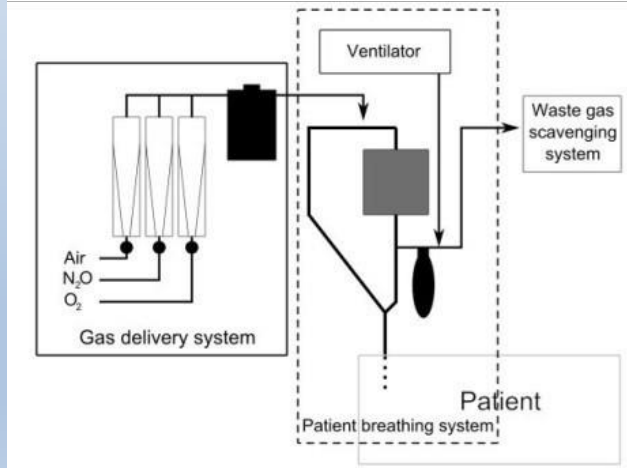
“Many a kitchen table in the 50s and 60s supported a frightened child. The G.P administered the ethyl chloride and ether and the dentist grabbed the teeth while the going was good. Poor kids - they were soooo sick after! Good riddance to this crude torture!”

- A reminiscence of Tom Turner

ANAESTHETIC (NITROUS OXIDE) APPARATUS

Frequently used in dental anaesthesia, replacing ethyl chloride/ether.

This belonged to Dr Frederick Spencer Howe Doman. Kindly donated by Mrs Elspeth Mary Doman. Below is a schematic key.

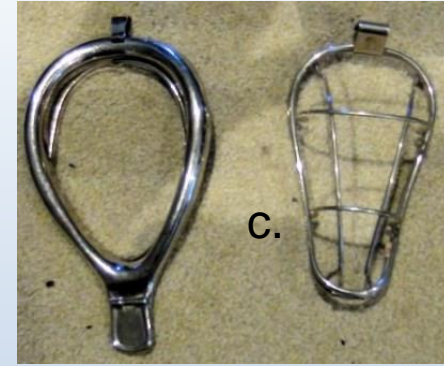
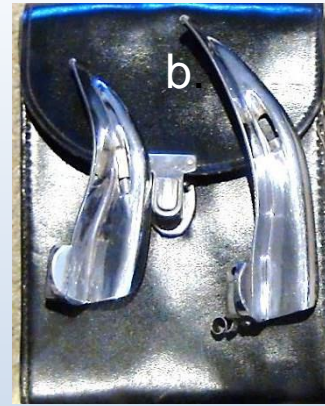


High density delivery tube



THE REST OF THE KIT

- a) Oxygen valve.
- b) Black leather case with tongue depressors from laryngoscope
- c) Frames of mask used in Ether, Chloroform and Ethyl Chloride anaesthesia
- d) Sir Thomas Smith type gag (rusty) and tongue or tonsil grabbing forceps.
- e) Rehabilitated gag, restored by Simon Taylor, Simax Engineering, Parkside
- f) All in a big Bakelite® box 41cm x 22 cm x 37 cm. Marked 'D. W. Cameron Pty. Ltd.'



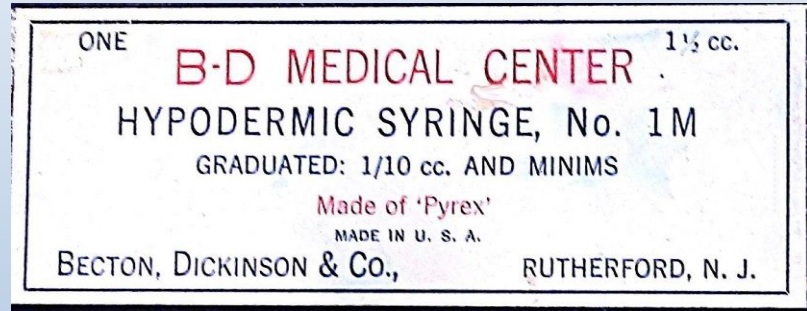
Listed at Item [33](#)
Verco Inventory

A company registered SA in 1947 and deregistered in 1962.

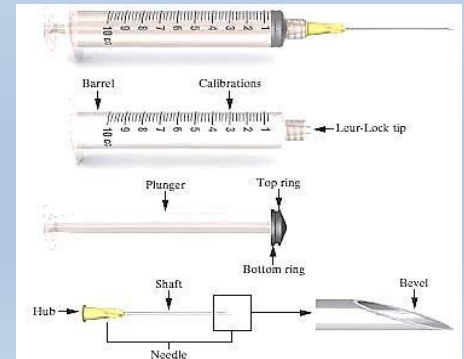
SYRINGES AND NEEDLES

The first piston syringes were used in Roman times. During the 1st century AD. Aulus Cornelius Celsus mentions the use of them to treat medical complications in his [De Medicina](#). [Dr Alexander Wood](#) perfected earlier designs and as a by-product increased opiate addiction. The first plastic syringe was developed by the Austro-Australian [Charles Rothauser](#).

Hypodermic syringe No. 1 M in black-lidded white-based cardboard box made by Becton, Dickinson and Company . At first, English language items were marked in the traditional now defunct English Apothecaries' System in which a minim was the smallest unit of liquid measure, $\approx 1/60$ (0.0167) of a fluid dram, roughly equivalent to one drop. The minim symbol was ℥ , or ℥ . In the United Kingdom ≈ 0.059 ml And in the United States ≈ 0.062 ml



The [Luer-Lok](#) type replaced the [Luer-Slip](#) and earlier types as it minimised accidental separation of syringe and needle.



RECORD TYPE GLASS INSULIN SYRINGE 1CC ≈ 40 MINIMS

The [Rekordspritze](#) (Record Syringe) was developed in Germany in 1906.

EVA or PVB syringes are made with laminated glass which minimises breakage.

A layer of (typically) PVB (polyvinyl butyral) or (EVA) ethylene-vinyl acetate is inserted between the two layers.



Made in Italy by Elvan. There are many European companies by the name of Elvan offering a range of products and services. It is hard to know which one made this syringe.

There are now many [devices](#) available to make insulin and other injectables easier to administer and with more accurate dosage. One of many is an [insulin pump](#).

PORTABLE METAL CASE FOR SYRINGE AND NEEDLES

The bactericide used in the container was methylated spirit which cannot be relied upon to completely eliminate all bacteria. It only helps to reduce the number of organisms.

It is not active against spores, viruses and mycobacteria and may lose its efficiency in the presence of contaminated organic matter.

The needles were used repeatedly for intramuscular, subcutaneous and intravenous injections and occasionally to remove a foreign body.

They should have been boiled after use, but that did not always happen.



BURROUGHS WELLCOME ALL-GLASS ASEPTIC HYPODERMIC SYRINGE IN ALLOY POCKET CASE

Sat aft February 1965. Ruglen
Pyenna Avenue
Launceston

Dear Diana. I cannot tell
you much about that old hypo.
Case - I remember seeing it in use
at St Margarets. just over 50 years
ago.
I am going to see Dr. Dudley's

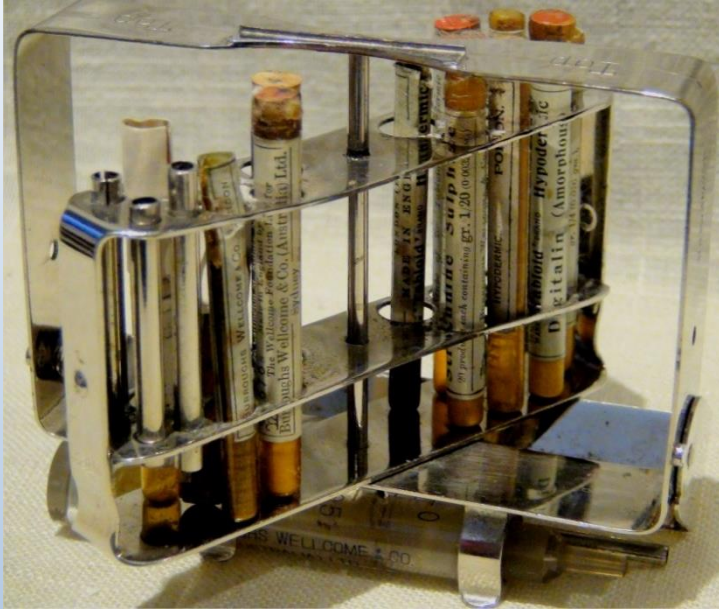
'Diana' was working at the Queen Elizabeth Hospital, Woodville SA but it is unclear in what capacity. Lady Ramsay wrote the note above. Diana is the likely donor of this artefact.

It is likely this case belonged to [Sir John Ramsay](#), eminent Tasmanian surgeon. He died on February 6, 1944 aged 71 at his residence, Ruglen, Pyenna Avenue, Launceston. Such boxes were frequently carried by doctors on their daily rounds of visits.

His wife was [Ella Elizabeth Ramsay](#) nee Dudley.



INSIDE THE CASE

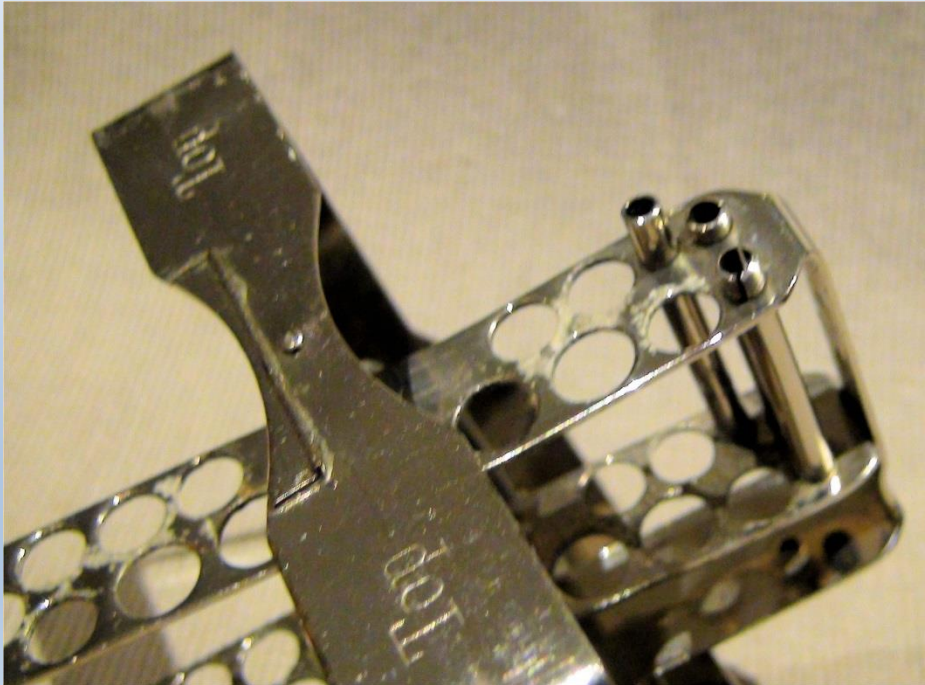


More contents are listed on the next slide.

Cases like this are still sold on the net for about \$A11.

CONTENTS CONTINUED

The syringe is unusual in that the piston is all glass.
The fixed stainless steel tubes probably held needles.

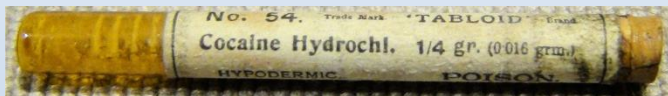


THE DRUG CHEST

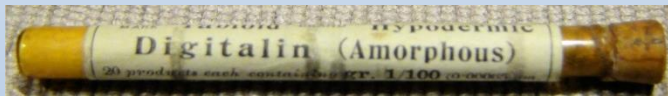
a



b



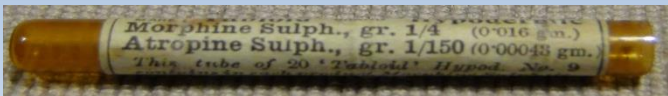
c



d

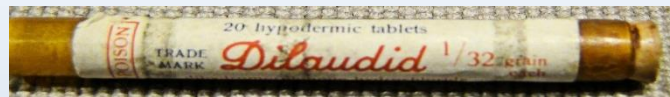


e



f

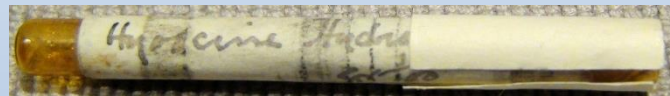
g



h



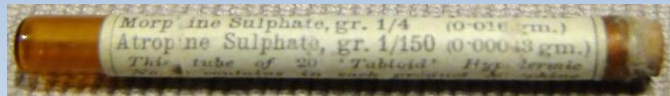
i



i



k



SUNDRY PORTABLE FORMS OF SYRINGES AND NEEDLES

In early general practice there were many house calls over big distances. With poor sterilisation facilities all doctors had to be self contained.

This array includes:

1. Fixed dental type
2. Spring loaded polypropylene
3. The remainder are of Record type.



The Rekordspritze (Record Syringe) was introduced by the Berlin instrument maker, Dewitt & Herz, in 1906.

OTHER EXAMPLES

(2) The glass syringe in a metal tube was for giving injections in the home — before disposable needles & syringes. The tube was filled with methylated spirits as an antiseptic. The syringe was washed & flushed in boiled water before use (c. 1957)

Written note by Dr Randal StJ Michael Butler (President 1975-76).

Transliteration:

The glass syringe in a metal tube was for giving injections in the home before disposable needles & syringes. The tube was filled with methylated spirits as an antiseptic. The syringe was washed & flushed in boiled water before use (c. 1957)

The Bakelite® variety emerged later, with the health hazards of imperfect sterilisation as yet unrealised.

This item belonged to Dr J. M. Wadham (as engraved).



BLOODLETTING

Bloodletting killed more patients than it cured. It is said to have been the most common medical practice performed by surgeons from antiquity until the late 19th century; a span of almost 2,000 years.

Now apart from treating haemochromatosis, we 'let' blood to test it. It remains part of Unani, Ayurveda, and traditional Chinese Medicine.

A lancet or any sharp object can be used to assault the patient. These two lancets are of sufficient size to almost suggest they could have been for veterinary use.



Armed



Discharged

Or use nature's blood-letters: Since the modality was still in use in the early S.A. colonial days, one of our Colonial Surgeons wanted to cultivate leeches in the River Torrens. Now used occasionally in the reattachment of digits and skin grafting.

<http://www.ncbi.nlm.nih.gov/pubmed/20452147>

'One French doctor bloodlet so much that some jokingly estimated that he spilled more blood in his medical practice than was spilled throughout the entire Napoleonic Wars'.

*Homeopathy a Gift. Mahovsky Rose. P11:4
ISBN 9781304664112 Published by lulu.com*



BLOOD TESTING

Some time ago these devices paved the way by counting cells and measuring haemoglobin.

1. [Hellige](#). A German company of this name was established in Freiburg im Breisgau in 1895. In 1950 they embarked on the manufacture of medical equipment.

2. [Spencer Optical Lens Company](#)

(Buffalo New York. U.S.A.)

Manual methods for determining blood haemoglobin include the **Haden-Hausse** and **Sahli-Hellige** methods. In both methods, blood is mixed with dilute hydrochloric acid. This process haemolyses the red cells by disrupting the integrity of the red cell membrane and causing the release of haemoglobin. This in turn is converted to a brownish colored solution of acid haematin. The acid haematin solution is then compared with a colour standard.

<https://en.wikipedia.org/wiki/Hemocytometer>

Now automated machines carry out these functions



The Spencer item donated in 2007 by 'Chris Turner'. No other details are available.

SOLOID BACTERIOLOGICAL CASE

The trade mark was registered in England by [Burroughs Wellcome](#) and Co. but this case was made In Berlin, Germany.

The trade mark for “Soloid” was registered in 1898, although confusingly the word “Soloids” was in use as early as 1892 but not registered. The trademark was repeatedly renewed, the last renewal was in 1974, but it expired in 1995. The case measures $5 \times 3 \frac{1}{4} \times 1$ inches. It contains a surprisingly large number of items.

*Information courtesy of Peter Judge,
[The Wellcome Library](#)
The Wellcome Trust*

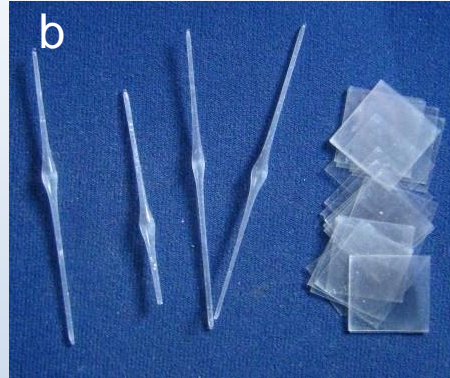
Donor unknown possible Item [44](#) in Verco Inventory



INSIDE THE BOX

Clockwise from left below

- a) Open box
- b) Mini pipettes and glass slides
- c) Fine needles and brush
- d) Spirit lamp showing wick
- e) Spirit lamp with screw top
- f) Chrome on brass container
- g) Pouch for filter papers
- h) Glass slides, dropper



(For pipettes)



THE SAHLI HAEMOGLOBINOMETER

This haemoglobinometer kit was made by [Hawksley](#) and branded 'Crista.'

Designed by Hermann Sahli \approx 1930, it is in a partitioned case containing a graduated test tube, solution tube, pipette, stand, filtering bottle, and lancet bottle.



[Hermann Sahli](#)
(1856-1933).
Sahli was a Swiss internist (physician). In 1878 he earned his doctorate from his alma mater, the University of Bern.

TRACHEOSTOMY TUBES, GLASS SYRINGES AND MISCELLANEOUS INSTRUMENTS

'Until the beginning of the 1920s in the United States and in many parts of the world, [diphtheria](#) had been a leading cause of death in children.'

The condition was endemic in South Australia from the 1840s with many epidemics. The condition was named 'diphtherite', 'bladder in the windpipe/throat', 'bull neck', and 'The strangling angel of children.' A grey membrane forms over their throat and causes suffocation.

*Extracted and extensively modified from Elizabeth Roberts, MA, CPC May 12, 2011
Br Med J. 1880 Apr 10; 1(1006): 554-555.*



*The parts are named
in the above link*

*Tracheostomy patient 1913. Courtesy of Margaret Barbalet & The Adelaide Children's Hospital.
The Adelaide Children's Hospital : 1876-1976 :
A History by Margaret Barbalet. [North Adelaide: Adelaide Children's Hospital], p.177*



Dilating forceps



DIPHThERIA IN SOUTH AUSTRALIA

In [South Australia](#) in 1890 there were 220 deaths from diphtheria (peaking after 10 years of about 180 pa.) To allow a patient to breathe, tracheotomies were common.

This procedure failed to relieve the obstruction in nearly a quarter of all cases, so was gradually replaced with endotracheal intubation.

Patients were treated in Lindsay and Duncan wards of the Adelaide Children's Hospital.

*Image courtesy of
State Library of South Australia B25678/41*



Duncan Ward, part of the [Allan Campbell Building](#) at the ACH, was named after J. J. Duncan, pastoralist. It was opened October 16, 1897 by Lady Victoria Buxton to deal with the large number of cases.

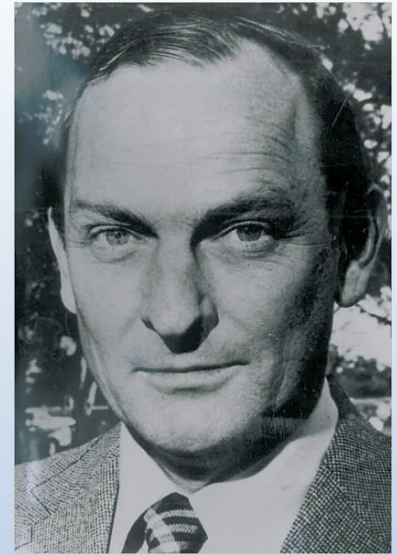
Image courtesy of State Library of SA. B25678/53

RIGID SIGMOIDOSCOPE

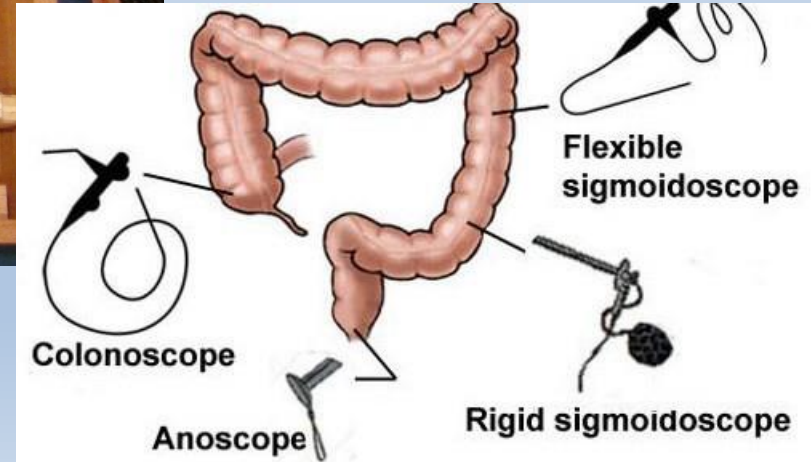
Donated by Randal St J M Butler, President of the SA Branch of the AMA 1975-76.



The light source is missing



Now used to [insert things into](#) the bowel, such as faecal transplants as well as to remove polyps and take biopsies .



OTHER INSTRUMENTS DONATED BY DR BUTLER



(1) This is a Menghini Liver Biopsy Needle (c. 1960)

(2) The two little "doovers" in plastic tubes are for diabetes self injecting

Transliteration:

- 1) This is a Menghini Liver Biopsy Needle (c.1960)
- 2) The two little "doovers" in plastic tubes are for diabetes self injecting.

2 urine hydrometers,

Randal Butler
I

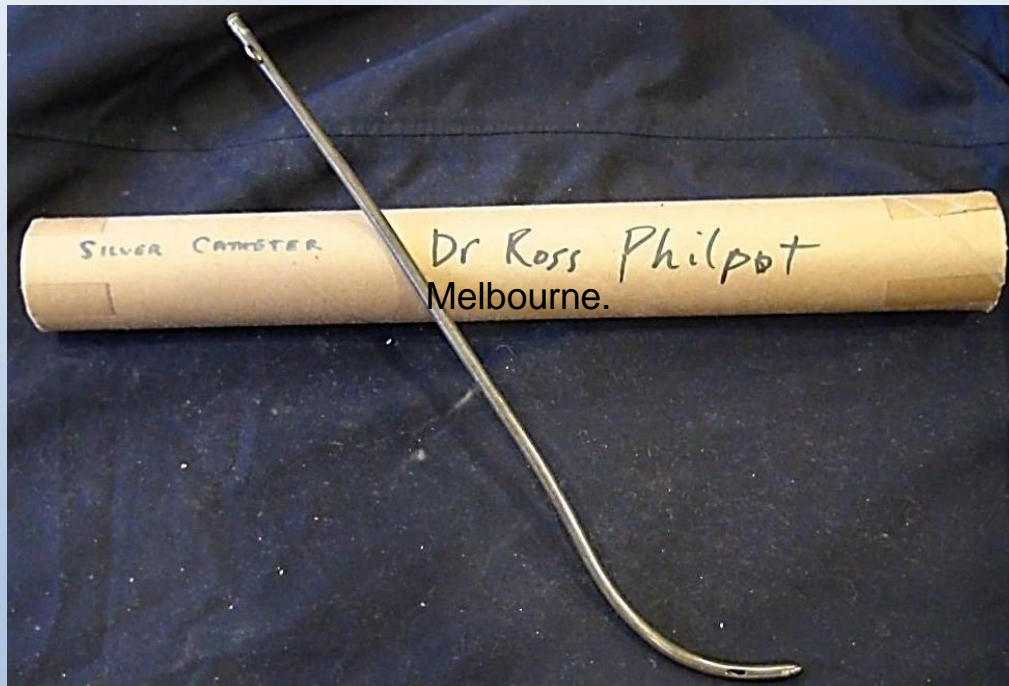
Transliteration:

2 urine hydrometers,
Randal Butler.

CARDBOARD CYLINDER AND SILVER URETHRAL CATHETER



*Silver urethral catheter London 8 gauge (English system).
Given to Dr M. Lindon when he was in general practice, by [Dr. Robin Burston](#)'s grandfather, 'Ginger' Burston*, who was a GP gynaecologist in Melbourne*

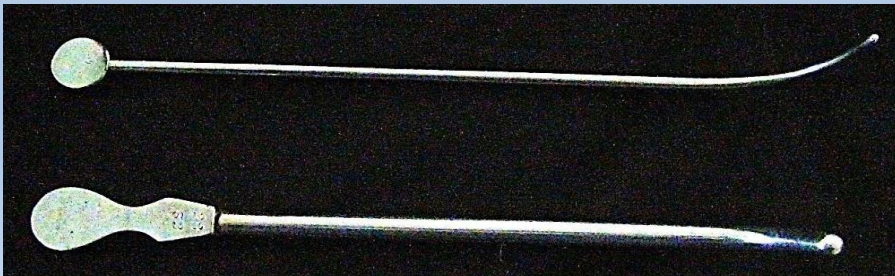


**Major General [Sir Samuel Roy Burston](#) aka 'Ginger' KBE, CB, DSO, KStJ, VD, FRCP, FRCPE, FRACP (21 March 1888 – 21 August 1960)*

MORE URETHRAL CATHETERS AND SOUNDS

The four sounds below were donated by Professor Philpot.

They were manufactured by [Mayer and Meltzer](#), London. This firm of medical instrument makers was active from 1869-1920s. They are listed on line in The Medical Trade Catalogue in Britain, 1870–1914



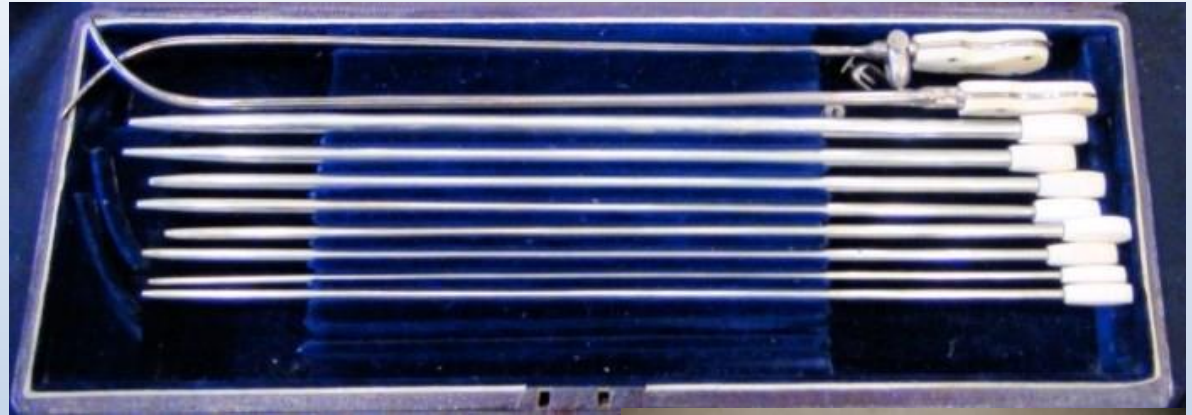
*A/Prof Christopher Ross Philpot
acquired these from the
[Blue Light Clinic in N.S.W.](#)*

DR BAYER'S BOX OF SOUNDS

Inscribed box ('Dr. Bayer') with blue velvet lining containing female urethral sounds with bone handles.

[Frederic Bayer](#) was an eminent medical practitioner who served the Mt. Barker area well.

<http://nla.gov.au/nla.news-article129171427>



Inscribed inset on outside of box

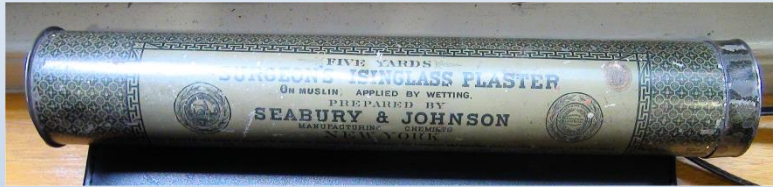
Dr Frederic Charles Bayer.

Courtesy of the
State Library of South Australia B2366



DRESSINGS: ISINGLASS AND OILED SILK

These containers are now used to store paper documents, but they remind us of a time when they were useful adjuncts to medical and surgical practice.



Isinglass is a pure form of gelatin derived from swim bladders of fish. Most web references to medical uses of both oiled silk and isinglass are can be found in

['Google Books'](#)

Oiled silk has been used for everything from condoms to raincoats and umbrellas. In medicine it was used as a waterproof dressing, with many ardent advocates like Dr Leigh.

Letter: Dr. Leigh on the use of oiled silk. P 868.
London Medical Gazette:
Or, Journal of Practical Medicine, Volume 27 1841
in Google books <https://books.google.com.au>
Search term : oiled silk medical uses



MERSON'S NYLON SUTURES IN CARDBOARD CYLINDER

In 1915, Mr. George Merson, a highly respected Scottish pharmacist, opened a facility in Edinburgh for the manufacturing, packaging and sterilising of catgut, silk and nylon sutures.

Johnson & Johnson acquired Mr. Merson's company in 1947, and this was renamed ETHICON. As a reflection of ETHICON's heritage, Merson's name lives on today in some product brands, such as MERSILK® Braided Silk Sutures.

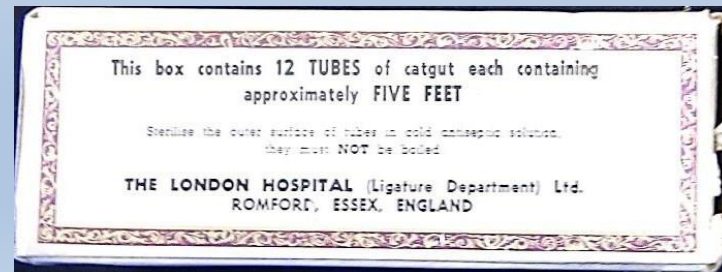


LONDON HOSPITAL CATGUT

During the First World War catgut was in short supply due to transport problems. At the London Hospital, H. P. Morley (1880-1956), a theatre assistant, developed a process for its manufacture. The Ligature Department was established in 1919 and a formed into limited company known as The London Hospital (Ligature Department) Ltd. in 1922.

H. P. Morley ran the department for many years, and the sale of London Hospital catgut (which was actually lamb's gut) provided considerable revenue for the hospital. In later years, the company was based at Harold Hill, Essex. It was sold in 1963, and went into liquidation in 1970.

www.thegarret.org.uk/collectionsurgical.htm



BLUE CARDBOARD BOX CONTAINING A 10 ML VIAL OF 1:1000 ADRENALIN (BURROUGHS WELLCOME)



Multidose containers were in general use until it was realised that they presented real risks of cross infection.

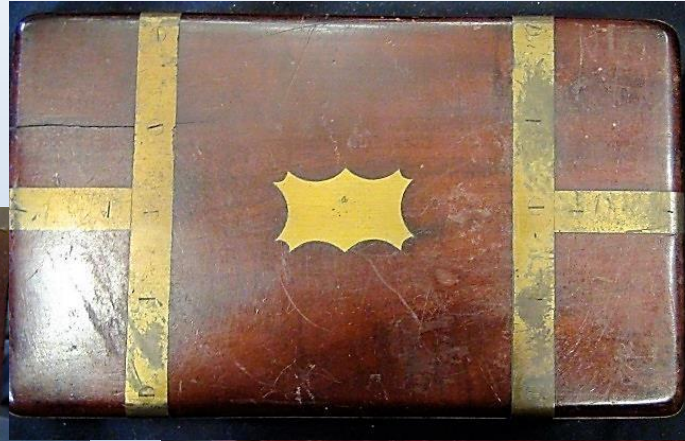


When Silas Burroughs invited Henry Wellcome to join him in business in London in 1879, modern drug production was an undeveloped field ...

<http://www.wellcome.ac.uk/>

TWO CLOSELY MATCHING WOODEN BOXES OF UNKNOWN PROVENANCE

The instruments within were possibly for trephining and other surgical procedures.



The decorative brass inserts on the lids usually bore the owner's name or initials. Similar boxes have been seen on 'Antiques Roadshow' a BBC TV programme.



BOX OF ORTHOPAEDIC INSTRUMENTS

Property of Dr. Octavius Weld MD of Mt. Barker

Dr. [Octavius Weld](#) and his wife Anne lived at Nairne in the second half of the 19th Century. He then moved to Mt Barker to live in the old Crown Hotel (now the RSL rooms). Weld Park is named after him. His daughter Eleanor was one of the first female doctors in SA. Dr. Weld died on 28th October 1901 at Mt Barker at the age of 68. He is buried at St. James' churchyard Blakiston, South Australia, where an old fashioned pink tea rose which bears his name is planted on his grave.

Courtesy of Julie Stokes.



Tea rose
'[Octavius Weld](#)'



GIFT-BOXED BOTTLE OF KRONDORF SHIRAZ-CABERNET WINE (1976) COMMEMORATING CENTENARY OF SA BRANCH OF BMA/AMA



William Frederic
Heddle (Bill)
President 2003-2005.

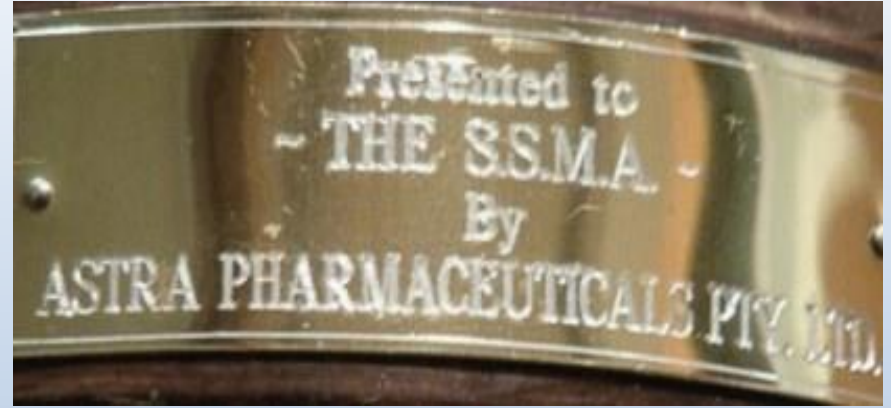
*Presented to Dr Bill Heddle
President of the
Australian Medical Association
(South Australia) Inc.
in its 125th year,
by
Dr Bill Lawson,
President in its Centenary year, 1979
To mark the Anniversary of
the Branch's foundation
on 19th June 1879
19th June 2004*



William Scott Lawson (Bill)
President 1978-1979.

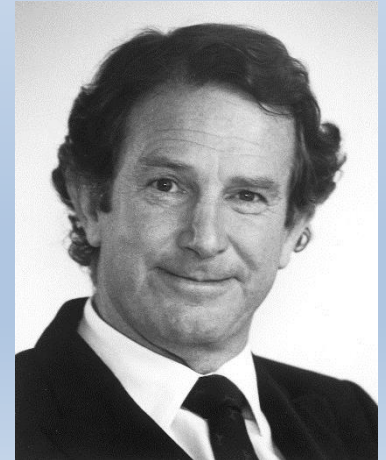


GAVEL OF THE S.S.M.A (SOUTHERN SUBURBS' MEDICAL ASSOCIATION)



During 1979 there was a move by the Labor government to trial Pre-Paid Health Plans in Australia, a threat to nationalise medicine. Christies Beach was selected as a suitable district in which to introduce a pilot scheme.

This stimulated Dr David McMillan King, President 1982-83, to form the Fleurieu Medical Practitioners Association of which he was the inaugural president. The gavel was presented to the association by Astra Pharmaceuticals Pty. Ltd.



MORE ABOUT THE SOUTHERN SUBURBS' MEDICAL ASSOCIATION

*Past S.S.M.A. members are invited to contribute historic data to this page.
Contact the AMA(SA) admin admin@amasa.org.au*

Dr Jonathon (aka Jon) Sporne 1956 - 2011 was the last president of the S.S.M.A. and a past Vice-president of the AMA (SA). Dr Helen Ingham, his widow donated the gavel.



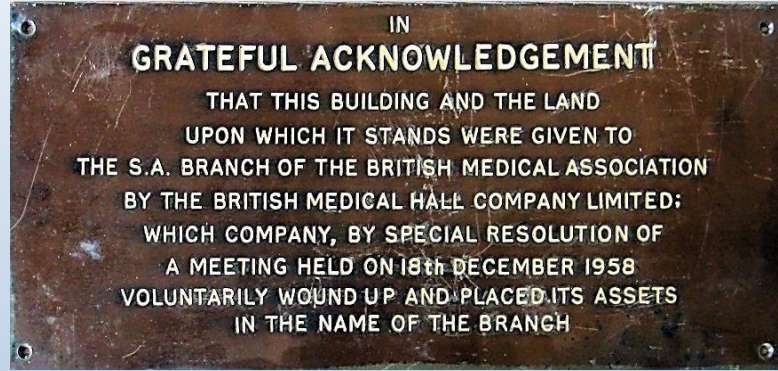
**PRESENTATION GAVEL IN BURGUNDY CASE
IN MEMORY OF MR. FRANK CAMPBELL WILLIAMSON DOBBIE
9 May 1912 - 20 March 1976**



Served the Branch from 1932 to 1976

NEWLAND HOUSE

A series of plaques rescued from the demolition of the old AMA Memorial Hall



Above some members of the S.A. Branch of the B.M.A. who gave their lives in the two wars.

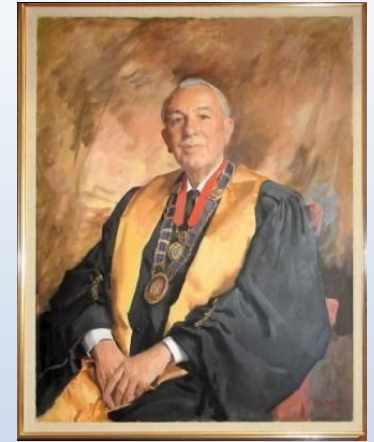
[More on this topic.](#)

There was a time when all our records fitted in one box.

PORTRAITS OF HONOURED TEACHERS AND SOME PAST PRESIDENTS



**Joseph Cooke
Verco**



**Clarence Oscar
Ferrero Rieger**



**William Thornborough
Haywood**



**Archibald
Alexander Hamilton**



**Henry Simpson
Newland**



**Frederic
Wood - Jones**



**Jeanette Thrush
Brentnall Linn**

**Do you have any interesting old items that should be preserved?
If so, contact the AMA at Newland House
80 Brougham Place North Adelaide
(08) 8361 0101 or admin@amasa.org.au**

The Historical Committee

Chair

Dr Trevor Pickering

Members:

Dr Thea Limmer

Dr Jenny Linn

Dr Tom Turner

Dr Peter Kreminski

