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Interview with Basil Hetzel recorded by Rob Linn on 25th October 2006.

DISK 1

This is an interview for the University of Adelaide with Dr Basil Hetzel and the interview is on 25th October 2006, interviewer Rob Linn, this is session one.

Dr Hetzel, you were born in June 1922. Can you tell me a little about your father and mother, please, to begin with?

Certainly. My father was a country boy, raised on the family farm which was just out of Tanunda, Hallett Valley. This farm was established by my great-grandfather and was then run by my grandfather, who was the youngest son in a group of four sons and four daughters that my great-grandparents had. He was given the farm and it was mainly a dairy farm, but I think also had vines. The homestead is still there, just out of Tanunda, and it's now actually – the house and the adjoining building's been converted into a sort of biscuit factory and regularly has products coming to the city: Barossa Biscuit. So he grew up there.

What was his Christian name, Dr Hetzel?

Kenneth Stuart[?]. My grandmother was English background. My father had a strong German background. His father had come out from Silesia in 1848. The information about him is rather fragmentary; but my older son, Richard, and his wife, Wendy, did do quite a bit of research and there is a small booklet available about the history of the family. They met on the boat and were subsequently married by Pastor Kavel, leader of the Lutheran migration, and they had a large family of which eight survived into adult life. So there's quite a large tribe on both sides, four girls and four boys.

My father had two older brothers and a younger sister, Sylvia. A very decisive event in his life was a move to Gawler which occurred, I think, in 1903. My grandfather wanted to move north to take up more land, as his brothers had done – and a couple went to the West Coast as well, so there's a nest of Hetzels over on the West Coast. My grandmother said no, these boys had to have an education, and so they moved to Gawler. My grandfather invested his savings in property. But this meant that my father was able to go to Gawler High School, where he met the

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Headmaster of the time, who was Mr Jim Bills, James Bills, who saw that he was a bright lad and said, 'You should go to university.' So he sat for a scholarship at Prince Alfred College and won it, and had three years there before going on to university and doing Medicine. He graduated in 1920 top of his year and then had a resident year at the Royal Adelaide [Hospital], and then went to London to seek his fortune.

He was subsidised by my mother's uncle, the proverbial 'rich uncle', who had retail interests in stores in Melbourne and – – –.

So had they married by this time?

Yes, they married early, '22.

What was your mother's maiden name?

Watt, W-A-T-T.

And Christian name, Dr Hetzel?

Her Christian name, she was known as 'Nell': Eleanor[?] Gertrude Watt was her name. And they met, my father was boarding in Rose Park when he was a student and they met in Rose Park, where my mother lived. She was looking after my maternal grandfather, who had lost her mother quite early from tuberculosis. I think she was only fourteen. So she was looking after my grandfather, who was a watchmaker, and they met somehow in Rose Park.

So he went to London, and Australians often do well in London. They show up with drive and independence, initiative. So he started off as a junior anaesthetist and then was on the research unit – it was the beginning of clinical research, really, had very distinguished figures there – and he did in fact win a Beit Scholarship, which was a special scholarship for promising young people.

Sorry, I missed the name of it.

B-E-I-T, it's quite a well-known name in South Africa. The money came from South Africa. And so he was set for a wonderful career, you could say; but he had suddenly and had TB¹, pulmonary TB, and had a period in a sanatorium in

¹ TB – tuberculosis.

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Switzerland and then came back for a bit of sunshine in Australia with, by this time, two – my brother and myself; and was still not well – he would have come back beginning of 1925 – and was strongly advised by Dr Parhone[?] amongst others that really he wasn't fit enough to continue in London, working hard and so on. He was a country boy, got in of course the big city (laughs) pulmonary TB around in those days, and so he decided to stay here and went into general practice in St Peters. Then he already had his English membership, so he in due course became a physician, first at the Children's and then at the Royal Adelaide.

Honouraries in each place, was he?

Yes. He was very early on tutoring in Medicine and really had almost fifty years' teaching in the Medical School. He was in charge of, really, the teaching of Medicine as opposed to Surgery during the War. He tried to enlist, but because he'd had the TB was not accepted. So he carried on during the War. However, I neglected to mention that in 1933 he was in the United States on a Rockefeller Fellowship – this information, Rob, you can get from the book, it's available there –

I understand.

– and had a year in China, teaching in medical schools, under UNRRA – that's the United Nations Relief and Rehabilitation Association – which was a forerunner, actually, of UNICEF.² He had a full year moving from the south, from Chungking, or Chongqing as it is now, right up north to Beijing, then known as Peking, he was teaching all the way through and had the opportunity of visiting the communist army as an international figure, visited Yenam where – this is '46, '47 – they were in the caves in Yenam under Mao Tse-Tung's leadership and he saw the program of training they had, was very impressed with rapid, short education for doctors going into the army, and was given a medal for his visit there, and then came back and resumed practice in Adelaide.

Then he's very much involved in the teaching and he, in the '50s, became Dean of the Faculty for seven years and this would be '53–59, and this was the time when with additional finance for universities – the Murray Committee you know about –

² UNICEF – United Nations Children's Fund.

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money was available to establish clinical chairs in Medicine, Surgery, Paediatrics, in due course Psychiatry, and of course Obstetrics. So he presided at that time, which was of course a very remarkable period of expansion, and then was on the University Council for a number of years – I would have the precise years in the book – and was very passionate in his interest in teaching and also research, but he had very little opportunity of course at that time. The only chair of medicine in Australia in the '30s was in Sydney, the University of Sydney, where Professor Lambie was a Glaswegian appointed there. He was an applicant but of course by this time he'd had a considerable period in general practice; he was not really in an academic position to compete successfully, or even unsuccessfully. Anyway, (laughs) that's what he would love to have done. But he really, I think, remarkably, was involved.

Ray Hone[?] was another very significant figure and they really were passionate about the Medical School and got things moving. Ray Hone was more involved with postgraduate education; Dad was involved with undergraduate education. They agreed on that subdivision. So Professor Robson came in '53 and was the first Professor of Medicine.

I came back from overseas in '56 and by that time the Michel Research Scholarship had been established and I was able to hold that scholarship for three years before I went to the Queen Elizabeth.

Now, can I take you back –

Yes, certainly.

– back to your earliest memories of the University: did you ever go in with your father to the Medical School at all?

I think I must have just been in and out. What I remember best is waiting in the car while he made hospital visits. (laughter)

I've got the same memory of *my* father!

Exactly. I think I was not specially – as before I entered the University, certainly there was no difficulty in me coming to the idea of doing Medicine, and of course, he was very keen, both of us [were]. But I was very happy with the idea; there was never any other serious thought in my mind.

And when you say 'both of us', do you mean your brother?

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Yes.

Your brother Peter?

Right.

And you'd both been educated at St Peter's College, is that right?

We were most of our time at King's College.

That's right, yes.

That was because the chap at Gawler High School, Jim Bills, was subsequently head of King's and Dad was in general practice in Norwood and we went to King's. He did medical examination on the boys, which was pretty innovative in those days. A lot of them remember. I was very happy at King's. I've still got good friends from that time.

Of course, it was a small school, not nearly as big as – it would have only had a hundred, hundred and ten students; PAC³ and Saints were much bigger. My father was at PAC, as I said, but he decided that Saints would be better for us. I think I would have been happier to be at PAC, but there was an unstated reason why we didn't go to PAC. He himself was there, as I said, and he had contact with J.F. Ward, and perhaps the rest of it doesn't need elaboration. He was known as 'Boxer', wasn't he, 'Boxer' Ward. He could not stand Boxer Ward. He probably had the end of his tongue at some point or other, and there of course he was head of PAC at this time. I think he was head of the school in Perth – Wesley, Perth; came back to PAC having been a junior master at PAC. He never admitted that, but that was the reason why we didn't go to PAC. Jack Ward was there, well-established, and he just didn't want to have anything to do with him. (laughter)

That was that.

That was that. So it's an Anglican school, of course; we were really Congregational brought up and very happy at King's. We were boarders when they were overseas in '31–32, and I was not unhappy in the boarding house. It wasn't so easy for Peter. I

³ PAC – Prince Alfred College.

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was only nine; Peter was seven, he was a bit young, so he suffered a bit. Anyway, that's the school situation.

So you come into the Medical School from Saints, as such, that's where you matriculated.

That's right.

Now, what's your early memories of the Medical School at Adelaide Uni?

I was very happy as a student, enjoyed it very much. As you know, Rob, at that time you started off with, they called it Zoology, full year; Botany, just one term; and Physics and Chemistry, which was a repetition of Leaving Honours and I'd had an extra year in Leaving Honours. My father was pretty keen that I should get a scholarship like he did, which I did, and had two years in Leaving Honours. So really first year was very light. I had time for clubs. The SCM⁴ was great – active body at that time and I became a member of the SCM, which is quite a significant segment of my life.

Would you like to enlarge on that at this point, because it's a fascinating time –

Yes.

– for SCM at Adelaide Uni, when it was flourishing, from all accounts.

Yes. It really built up in the '30s in Australia. Although the Australian Student Christian Movement had been founded, I think, in 1896 at a meeting. John R. Mott was here, who was the great global figure, American, came out of the student YMCA⁵ in the States. My father was in the SCM. Probably your father was, too.

Indeed.

Yes. And it was through the '30s it really developed very well with a substantial number of members and interest of staff and ministers. I think Howard was – we both went to the conference in January '41, which was at Geelong Grammar, and was quite an important experience. So you realise, of course, war broke out in '39, so the University was very small in number and most Arts–Law students more or less

⁴ SCM – Student Christian Movement.

⁵ YMCA – Young Men's Christian Association.

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disappeared. We were called ‘technical’ students in Science and Medicine, so that the SCM was made up of Science and Medical students, with a somewhat different view from say the Arts students would have about theology and concern about relevance of theology and not too much theory, more practice, and so on. And we had Ken Newman – now, does that name ring a bell with you?

It does, yes, it does.

Kenneth Newman was a graduate in both Economics and Philosophy, prominent Methodist layman, and was a lecturer in Ethics for a year when deputising for the appointed lecturer, Morris Finniss[?], and was interested in talking about religion, values, Christian values, and had a strong interest in this remarkable philosopher, Alfred North Whitehead, who was a brilliant mathematician and also a philosopher of education but finished up he was invited to take a chair at Harvard. And Ken was a keen student of Whitehead and encouraged some of us to read Whitehead, which we did. His most apt pupil was Charles Birch – do you know his name?

Yes, I do.

Well, Charles really did – he was a Biology student, did his doctorate at the Waite and then went to Chicago in ’48 where he had process philosophers as well as outstanding biologists interested in these ideas, and he had a very creative period in Chicago, ’48–49, including meeting Whitehead’s outstanding pupil, a fellow named George Hartshaw[?], with whom he remained friends for his whole life. But he really, as a population biologist, his field was entomology and he was at the Waite for I think possibly five years under Professor Davidson and then went to Chicago and then got a senior lectureship in Zoology in Sydney, became Reader and eventually Professor, and he was in that chair for just on twenty-five years.

Who were some of the other people in SCM who you got to know very well at that period? There were young women in it as well as men, weren’t there?

That’s quite true, oh yes. Well, one person of course was Helen, who became my wife. It was regarded as something of a matrimonial bureau. (laughter) Young people together, it’s not surprising that attachments occurred. Helen was a year behind me, a student in Biology, Science student with a major in Microbiology, which she loved, and then graduated and was in the Army for a couple of years.

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Now, what was her maiden name?

Eyles, E-Y-L-E-S. And she was one of three daughters and had a brother who did Medicine, Phil Eyes, Philip Eyles, and we fell in love. Of course, the classic situation, I suppose, your father married a nurse – it was the classic situation; but I was already fully-committed before I got to the hospital, so to speak, (laughs) and there it was.

One thing I'd like to know about SCM, Dr Hetzel, that I've never found out is how often did you have the meetings and what form did the meetings take?

Well, there were study circles meeting weekly during the term, and I was in one in my first year and then it went on from there. There would have been a sort of service probably once a week first thing in the morning over some of that period. But the study circle was the main thing. And there were some sort of degree of cross-currents. The left-wing situation, the communist philosophy, was in evidence. I was asked to join a group looking really at socialist–communist philosophy at which I didn't last very long but was – the conference experience was pretty important in crystallising one's thinking and leading to a commitment, Christian commitment. I was a sort of men's president then with, first of all, Rosemary Halls, Rosemary Magarey, who died just the beginning of last year, dear friend for life with the Magarey family. You probably know David, did you know – – –.

I knew David very well and I know all the boys well and have a lot to do with Peter.

Oh, do you?

Yes, worked with Peter on a number of projects.

Oh, yes? Up at Loxton?

Yes.

Oh, did you?

And I am now, right now.

I see. Working as a part of the agriculture thing?

I'm actually doing a history of the Loxton community in which Peter is heavily involved.

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Oh, yes.

And he led to me doing it.

I see, yes. Well, they're a very fine family. Rosemary's a very close, dear friend. And David died only the other day, as you probably know.

Yes, I do.

And Rosemary was in the SCM. Yes, what did we do? And we had sort of a conference in the vacation, the May vacation, up at Holiday[?] House. That place, it's still there. It's the sort of now associated with, just near Mount Lofty Station. It doesn't ring a bell with you?

I've never heard of Holiday House near Mount Lofty Station.

Well, what's it called now? It was taken up as a sort of youth centre. Sunset Rock.

Oh, Sunset Rock.

Yes.

Oh, okay.

You know that place?

Yes, I do, I've been there.

What do they call it these days?

Sunset Rock, yes.

And I think the Presbyterian Church took it up for a while, but probably the Methodists ---.

Uniting Church own it now.

Uniting Church own it. Yes, that's right. That's the place.

Oh, okay.

And happy memories of conferences there, just sort of over a long weekend and with a vacation, May vacation. It's where I first met Helen, really, in '41. And of course, as you know, the War was on; we were sort of in a very protected environment. I think probably Howard as I did, we sort of enlisted. I was in the Air Force, due to go into the Air Force on graduation, and of course never did because of TB. But quite a

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few of my contemporaries at both King's and Saints, of course, did not return, and does lead to a more serious attitude, in a way. I determined the only way I could make sense of all this was to try to do something to make the world a better place, so to speak.

How did the War actually affect life at university for you?

Well, it did, of course, lead to a great reduction in the numbers. But it went on, things went on. The Union went on, I was Secretary at the Union for a short period. One person that was quite prominent on the campus was Elliott Johnston, you know his name?

Yes, I do. The later QC.

That's right, and a judge. He was, always has been, well left of centre. He would have been, I think, a – I don't know whether the word 'card-carrying' is appropriate, but he was a profound believer in communist philosophy and he was active on the campus, I'd say a very good speaker, Elliott, was President of the Union, and he ran this seminar that I did attend for a couple of sessions with his wife, subsequently, Elizabeth Teesdale-Smith, who was his wife. They were both very serious and committed communists. She came from a privileged background, an Adelaide Establishment family I think you'd say, the Teesdale-Smiths.

Oh, yes.

And so that was one cross-current. There were theological students, a few theological students, around, tend to be more Anglican than anybody else, any that I recall. So that really it's interesting to recall. You see, we were only on the campus till the end of second term, third year, and I continued as President for a second year, that is I became President '42, that's right, and through '42, '43, and I guess I did become President in '41.

This is of the Union or SCM?

SCM. I was Secretary at the Union, as I say, for a short time. Men's Union, as they called it. You would know that: Men's and Women's Union.

Those parts of the buildings were quite separated, weren't they?

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Oh, yes. That's right. We had the Lady Symon Theatre, as you know, and George Murray. Is that still there, are they still preserved, those places?

I can't tell you that, Dr Hetzel. They were when I was there.

Yes.

But I don't know any more. I haven't been back to that part of it for twenty years.

I suppose they've preserved those.

I would have thought so.

Yes, I think they would have done.

They were off the cloisters.

That's right, each end. Very much a red-brick university, as you know. Those buildings, they talk about rehabilitation as you also know, but enormous cost it would be and I don't think it's really ever been done.

No, not in my knowledge. Of course, the southern side of the Union was done, but that was in the early 1970s. That was much later.

Yes.

So a lot of your focus with SCM was on that Cloisters area, in effect.

You're quite right, you're quite right.

Just diverging a minute, what about the Medical School itself? Where was that located at the time?

Well, you see, you had the Anatomy Department. The dissecting room was where now the – became the Staff Club in A.P. Rowe's time, as you probably know, and then sort of vanished, it was absorbed into the redevelopment with the Barr Smith just on that side.

On the Plaza area would that be?

Yes, on the Plaza area. And then of course the Staff Club was developed. Under Rowe's encouragement, it has to be said. Rowe is a subject I'd be happy to talk about some time, but –

I look forward to that in a minute.

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– very controversial figure. So that's how of course the present Staff Club was established.

So the Anatomy dissecting area was where you spent a lot of time?

Oh, yes. For five terms we were really geographically based there. We did Physiology for a year, you see, starting in the – I think that's right – the third term of second year and into first and second terms of third year. Biochemistry, that's right, was in the first two terms of second year and Anatomy, of course, extended right through for five terms. So that's right, we were very much geographically based.

Now, the teaching of Anatomy in my time was Frank Goldby[?] was the Professor, who went back as usually happened with the professors to England. But he was a very good teacher, he was very good at drawing on the blackboard, and the nervous system was the special interest, of course, the most interesting part of it. There was a German refugee senior lecturer, a fellow named Posener, P-O-S-E-N-E-R. He's in all the photographs of the students from that time. He was a chain smoker and a sort of older man who'd been through Europe, refugee from Europe – German, I think, but almost certainly Jewish. He was there and was the sort of day-to-day supervisor of the students and the dissecting. It was a similar fellow, Franz Lippe[?], who was a senior lecturer in Physiology from Vienna. Stanton Hicks[?] was the Professor of Physiology, who was a very colourful character.

Tell me about him, Dr Hetzel.

Well, he was a New Zealander originally who I think did Pharmacy and then, somehow or other, got to Cambridge and did Medicine, completed a medical course at Cambridge. He was a very good talker, a very good teacher, really, colourful sort of fellow.

Do you mean flamboyant colourful?

Oh, yes, yes. Full of stories and a fairly strong ego. But became Director of Catering in the Army in the War.

Yes, he did.

And I think he learnt up his nutrition so therefore was a nutritionist, and carried that job pretty well, I would have thought, with his personality and of course a research orientation. (clock chimes) So he was away a good part of the time and we had

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Franz Lippe, you see, as the sort of backstop and which was in fairly contrast to this colourful and very eloquent, talkative professor. He was a bit of a rascal, really. The terrible story that I know very well is Don Cheek[?] – does that ring a bell with you?

Yes, it does.

Don Cheek was a graduate the year behind us, and he's a sort of guy interested in ideas and with hunches and what not, and he was here at the Children's and got interested in this condition, Pink Disease. These kids developed a rash, their skin peeling, but also very upset, miserable kids, lost weight, dehydrated, totally miserable. Originally described by Dr Swift and known as Swift's Disease.

Yes, I know of Dr Swift, too.

Brian Swift's father, that's right. About 1914. And Don got interested in these kids and was interested in electrolytes and pointed out that a big loss of sodium got going with dehydration. But of course he was just a boy in short pants, really, as a resident medical officer and sought advice from Stanton Hicks, and Stanton really got terribly excited about this problem and was interested in concepts of stress associated with the name of Selye, Hans Selye, S-E-L-Y-E, a famous populariser of the ideas of stress who had written a number of books. And he was very interested in what stress exhaustion, that the body glands could be exhausted by stress, particularly the adrenal gland. And he has to be given credit for recognising the adrenal cortex, which is cortisone component. But he was terribly interested in this, they corresponded with him and Don had observed there was a low sodium in the blood and the story then was that the gland was, you see, deficient because of course failed to retain sodium as it normally should be doing. And Don Cheek and Hicks wrote up this condition in the *MJA* of 1950, 'Pink disease: its cause, prevention and cure', and it all was totally predicated on adrenal exhaustion, which was Selye's idea.

Well, I was then just starting out in research and I was doing studies on adrenal cortex and hypertension, and we had the assay going so I said we could do assays to see how much hormone, cortisone, was being produced. Well, to cut a long story short, the levels were normal. So that was published. But Don never recovered from this in this community, and Hicks was totally irresponsible. Totally irresponsible. And Don, however, a lot of interest in this, he had a lot of publicity. He got a Rotary Scholarship to go to Yale where he became very much of course part of the scene in

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electrolyte metabolism under a fellow named Darrow[?] and remained in the States for several years, came back to Melbourne and then went back to the US at the time when research funds were really flowing in the '60s, and has several books. Really came in in the early days of DNA, body composition, and the effects of various endocrine conditions. Very well-established with prizes in the US. So he sort of survived. But that was a very bad episode.

You don't know, Dr Hetzel, how Stanton Hicks ever got involved in some of the soil science work out at Keith, do you, while it was called the Ninety-Mile Desert? Because he had his name appended to that as some type of specialist advice.

Oh, yes. Well, he could have been easily, that could easily have been the case, but of course he wasn't in charge of the science. CSIRO⁶ group headed by Marston, whose name you know. Marston, you see, we had lunch in the cafeteria there. Well, the staff had a table right at the end where –

This is at the University?

– yes, at the refectory. Most of them came. Many of them came and had their lunch every day there, sitting at the table, while we went to the cafeteria and sat in the other tables. But they were most of them there, Marston was usually there and a number of them were there, and I don't know how often Stanton Hicks came. But why did I think of that? So that I mean that division was on the campus, as you realise, at Kintore Avenue, where I was subsequently, and he did get himself, his name, into it. But that was really, of course, solid science, as opposed to his sort of fantasy.

Do you mind me asking, Dr Hetzel –

No.

– was there interaction between the academic staff and students in the lunch room, so to speak?

Not much, no, not much.

I hadn't known that that had followed the English tradition of the high table and all that.

⁶ CSIRO – Commonwealth Scientific and Industrial Research Organisation.

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Yes. Well, that's what it was, really, but of course it was demysticised. (laughs)
That's right, that was the situation. Yes, we managed in those buildings at a much earlier stage of development than now. But Stanton Hicks, as I say, was not really a scientist. He was a good salesman in promoting things and so on, you understand, where he was fine; but I know he had to leave Cambridge, I was told by one of the senior professors there in 1955 that he had been irresponsible in Cambridge as a junior staff member. But he still got the Chair of Physiology here. Those sort of things have happened, as you know.

What about other staff members, then? That was around the Anatomy and Physiology side.

Well, Mark Mitchell was the Professor of Biochemistry and he gave virtually all the lectures in Biochemistry. He'd done a master's at Cambridge. Of course, he's the son of Willy Mitchell – you'd know that.

Yes. I've never before heard him referred to as 'Willy Mitchell', (laughter) though; always 'Sir William'.

Well, he was the Vice-Chancellor in those days.

He was.

Undisputed autocrat of the University. Well who was he? He was a Scottish schoolmaster, as you know, from Aberdeen, wasn't it?

Yes, I believe so.

And did his philosophy and wrote this book, was it, *The structure of the mind*?

Yes. And didn't he marry in the right circles?

He sure did. He married into the Barr Smith family.

Barr Smith family, yes.

He was a poor Scottish schoolmaster boy and he did well. And there have been plenty of others have done well out here. But he was a benign figure. Through the SCM we had a bit of contact with him, sort of encouraging student activities, but he was of course an august figure residing in the Mitchell Building.

Was Mark a different character?

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Oh, yes. He was not nearly so outgoing. Mark was rather reticent and he never married, and I think was probably homosexual. But he took a great interest in underprivileged boys, as you may know, had a place on Kangaroo Island, and one person who benefited from his patronage was Bob Porter, who was a Rhodes Scholar, subsequently a professor at Monash, Professor of Physiology.

So they're some interesting figures. Are there any others in the school at that time that you can think of?

Well, Burt Cleland, Burton Cleland, was the Professor of Pathology. He was getting on by the time of the War, he was pretty old. But he was a classical morbid anatomist, if you understand what we mean by that – interested in the organic changes in disease – and ran the post-mortem service at the Royal Adelaide and had analysed his sort of first thousand, second thousand PMs and I think five thousand PMs he got to. But rather colourless character, but very genuine and had been in pathology. He was part of the Cleland family, of course. I suppose there was the great hospital row, wasn't there –

Yes.

– the Royal Adelaide Hospital row. What year was that again?

Oh, gosh, now you're testing me.

Just before the War, First World War.

Yes, just before the First World War – 1910, was it?

Could be.

This was with Napier and Way and all that?

Yes. And I just wonder whether Burt Cleland was part of that group that went, finished in Sydney. I think he might have been. And some, of course, did not return. The details of that I don't really recall, but the history of the Royal Adelaide would tell you. You know Ian Forbes probably, don't you?

Yes.

Yes, he's around doing history of the hospitals. And the details of that are in there. So we had Pathology; Bacteriology we had Nancy Atkinson, who was not professor

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but a very capable microbiologist, who was a bit authoritarian with the students, didn't like the students, and needless to say we misbehaved. (laughter)

So that was the sort of – apart from the clinicians in Medicine and Surgery – Royal Adelaide.

Well, could we move to the clinicians just at this time?

Yes.

Now, what was the connection in those years between the Medical School and the Royal Adelaide?

Well, it was the teaching hospital, you see, and of course the Medical School was set up really on the English pattern and more particularly the London pattern, [in] which hospitals were really hospital medical schools. They were set up around the hospital and then they added on the pre-clinical training. What was your question, Rob?

The relationship between the Royal Adelaide and the Medical School and how that worked for students in particular.

It seemed to work perfectly well. You see, you realise that all the teachers at this time were honorary, honorary with their work and their teaching, so that they had to be public-spirited to take it on. But that was the tradition, that people went away, got their senior degree, came back and in due course got onto the hospital, started off as a clinical assistant and then get on the full staff as assistant honorary status or full honorary status. There's been a very good tradition of clinical teaching at Adelaide.

Could you explain why clinical is so important, please?

Well, that's really the practical business of looking after patients: making a diagnosis of disease. In the '40s, of course, the laboratory was certainly working but nothing like the scale it later became. So there were the microbiology lab, the biochemistry lab, the histology lab and haematology, those four main areas: this is laboratory medicine, which is now of course developed enormously. But the emphasis was on the diagnosis, which would rest mainly on the history and examination, supported by laboratory evidence. So that was the task of the clinicians and groups of students. We had three full terms of Medicine, three full terms of Surgery; we had our term in Obstetrics and then specialties as well. It was all well-organised, with a view to people going into general practice, so that they had a

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degree of general competence. And they'd do a year's residency – that wasn't essential before they were registered, actually; we were registered, I think, before we did that year; subsequently it was made compulsory, you had to complete the year – that's as a resident medical officer.

Now, was that your registration coming early, though, due to the impact of the War?

Yes, we had a shortened course, Rob. We had to do six years in five. It was shortened after we got to the hospital, so there was no shortening of the first three years.

So your year, what, was '40 when you began, or '39?

Yes, '40; '40–44, so just five years; previously it was six, that's right.

So it was a training for general practice.

Right.

Now, what's interesting me with your era, were most graduates from the Adelaide Medical School probably expected to practise here, in South Australia?

Oh, yes, I think so. The odd one went off somewhere else. And then of course if you wanted to become a surgeon or a physician you really needed to go to London and get the membership or the fellowship. The alternative was Edinburgh, which was a bit easier than London.

Is that right?

Yes. It was a sort of consolation you could get, regarded back here as not quite as good as London.

So if you were to be a physician you'd go to London and maybe put up at Guy's or wherever, is that correct, and you'd do your training there?

You would do most of it through lectures and demonstrations. Their courses were running, you see, for both Surgery and Medicine. Of course, in Surgery, part 1 was Anatomy and Physiology, and then you'd have to go off somewhere and get a job because you've got to learn to cut, so to speak; and that was classically, you see, in the provinces where the big cities in the Midlands was where people really – there are a lot of patients and that's where the surgeons cut their teeth, so to speak.

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So we're talking, what, Manchester and ---?

Oh, yes. Those cities. Chap like Mervyn Smith did that and became very good with his hands. Of course, the academics were special people. If you had a Rhodes Scholarship, of course, it was slightly different, you went to Oxford; but you'd go on to London usually, like Cairns[?] did, to a London hospital after being at Oxford. But the hospital training was indeed the pattern for here, the London hospital training.

The Edinburgh school developed more on the Continental pattern, it was influenced by the Dutch and Europe, so it was rather more theoretical, regarded as more theoretical than the London [which] was very practical, which developed in a sense as an apprenticeship, which was not the case in Edinburgh. And that was the pattern, of course, apprenticeship was the pattern here.

END OF DISK 1: DISK 2

This is the second session of an interview with Dr Basil Hetzel on 25th October 2006, interviewer Rob Linn. Dr Hetzel, we were talking about the clinical training at the Royal Adelaide Hospital and why that was important. Who were some of the clinicians who were teaching you as Adelaide Medical School students?

The physicians included Dr Ray Hone, my father, Dr Teddy Bear; the surgeons included the names of J....., Linden[?], Messant. During the War there was a shortage of people and the two famous knights came back to teach: Sir Henry Newland and Sir Trent de Crespigny actually were teaching in the school, giving lectures – certainly Sir Trent gave lectures. So that it was not that easy to keep things going. There was of course a number of doctors were in the Army and the other services, and these retired people were brought back.

Was it hierarchical in the sense that you had the Newlands and the de Crespignys and then the honoraries and then work your way down, if you like?

Yes. Well, they'd already retired, you see, so they were filling, so to speak, gaps; they were not engaged in major administration, but they were there to teach the students as clinicians.

Was that great experience for the students?

I think so. I recall quite clearly Sir Trent de Crespigny lecturing and it rounded out a diet that was a little bit short of people, so that was a useful addition. The aim was

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this basic clinical training, for which I think the school was noted, and a tradition of care and teaching at the Royal Adelaide.

Dr Hetzel, would you say that the University of Adelaide's Medical School had a strong interaction with the wider community in that sense?

Well, no doubt the links were there with the doctors who were, after all, only part-time. They would do two sessions a week, maybe more, and of course the surgeons would do a bit more than that, two plus their operation time; and the board of the Royal Adelaide had community representatives and the honorary staff had their own society and made inputs to the hospital board as they thought appropriate. There's a fine tradition of service at the Royal Adelaide. But it was a big hospital, and it was also, by the time, a bit later on it really became seriously run-down, in Tom Playford's time. Tom Playford was interested in industrial development of the State. His own experience of education was somewhat limited, and health and education were on the back burner, so to speak. But there was a crisis which, with publicity about the state of the Royal Adelaide – that there were rats running around and so on – and Tom Playford was upset to hear that and said, 'You should have come to me sooner.' Well, it wasn't as easy as all that to get to Tom Playford. But the leadership there fell to the new academics like Professor Robson. I think there's a fairly conservative attitude among the senior staff – it would be reluctant to make a noise about a situation that would reflect badly on the hospital and so on – but the moment did come when that was – Stewart Cockburn played a part in that – and that led to the new East Wing and a gradual rebuilding of the Royal Adelaide.

Strange to think of that as new now, isn't it?

It is.

That would have been 1960-something.

That's right. Now they're contemplating – the buildings are, of course, out of date – they're rebuilding quite a segment that was resident quarters, nurses' quarters, and of course that has modest use but obviously it should be – I understand it's going to be knocked down and a building more appropriate to the needs of the hospital today put up.

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Dr Hetzel, even though, if you like, the Royal Adelaide Campus was removed from the University proper, did you as students still feel very much a part of the University as well?

I think we did; but inevitably the ties with the University – well, we weren't spending time in the University any longer, we spent all our time at the hospital – we had lectures, of course, but they were given in the IMVS⁷ lecture theatre, which is on the campus – so that in a way the links were obviously from the past, but more from the past than the present, even though of course professors of pathology were there who were University professors; but it was all done on the other side of Frome Road, if you see what I mean.

Yes, I do. Yes, I understand that. The next thing I'd like to ask may be a difficult question to answer, I'm not sure of this, but you said that the Medical School was very much towards training in general practice, that was the whole purpose –

Yes.

– and that was of course quite understandable.

Yes.

Were any of you encouraged to go further in research-type medical work?

I think that some were more interested in research than others, of course, in the teachers. Certainly my father was very interested in research, and I was fortunate to have an opportunity to do a little bit of work before I went to New York. But it was very much an extra, I would say, in the clinical environment. But just beginning there was an interest in clinical research, but my father and I think Ray Hone also, possibly confined to them. The clinical pathologist, Eugene McLoughlin[?] was somewhat interested in research, and of course the special labs would be slowly developing research interests – that is, the diagnostic laboratories – so that it really didn't get going.

The IMVS, you see, Institute of Medical and Veterinary Science, that was seen as a place where research could be initiated, but the clinical side didn't develop very much. I had a clinical research appointment at the IMVS before I went to New York, which was rather fortunate –

⁷ IMVS – Institute of Medical and Veterinary Science.

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About 1950, would it have been?

– that was '49–51. I went to New York in '51, mid-'51, and was there for three years till '54. Most people were oriented to practice, most general practice and some specialist practice. In those days, we're talking about the '40s, so that clinical research, even in London, was very modest at that stage compared with what it became.

Now, with that in mind, and your comment that your father and Ray Hone were very much pointed towards the research, would you mind talking a little bit about the scholarship which you were later awarded that came through the Michel family and that your father was integral in accessing?

Yes, certainly. The endowment was from Gwendoline Michel Hastings – Hastings was her married name, and you know the Michel family. She was a patient of my father's, had high blood pressure, over a number of years and he did encourage her to think about – she was single, wealthy woman – think about the possibility of endowment of a medical research fund at the University of Adelaide, and she finally made that initial bequest, I think of 750 thousand – you could verify that – in the early '50s, probably about '53.

That's a huge amount for that period.

Well, it was. It certainly was. And (clock chimes) it was supplemented later I have seen those figures. The University has listed the medical research bequests it's received and I've seen that, and I could dig it out, and they could tell you. So that was enough to found a scholarship. And it was seen as clinical research with an interest in the sort of holistic view, and it was exceedingly fortunate to me that it was available by 1955, when I was an applicant; and I don't know how many other applicants there were but I was appointed and took it up when I got back at the beginning of '56 and had three years at the Royal Adelaide before I went to the Queen Elizabeth as Reader and head of the Department of Medicine at the Queen Elizabeth.

Was that still an extension of the University, down there?

Oh, yes. It was a teaching hospital at the University. See, they were short of beds for teaching with the numbers of students increasing, very short of beds, and there was a shortage of services in that whole area which was more lower socio-economic

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grouping and older people, so that that hospital – – –. And there's a history of the QEH, as you would know, done by Ian Forbes.

Yes.

So that it was very much set up with University units in it from the beginning, you see, full-time University units, both in Medicine and Surgery, and Obstetrics was also based there.

That's right, of course it was.

And, see, Lloyd Cox was the first Professor of Obstetrics, Dick Jepson was the first Professor of Surgery – started down there, had two years there before he came to the Adelaide and then the Reader in Surgery went down there, Bernard Catchpole – and I was Reader in Medicine, in charge of the Medical unit, from '59, started in '59. My beds were the first to receive patients down there.

Dr Hetzel, this is a bit of a tangential question and I'm interrupting, but were Flinders and later Modbury Hospitals a bit of an offshoot of what was going on at the Royal Adelaide and Queen Liz?

Well, it was much later, you see. We're talking now – well, it wasn't that much later, I suppose.

It's after you'd gone to Melbourne, I think, isn't it?

Yes. The Flinders University had started I think in –

'Sixty-six, '65?

– that's what I would have said, yes – and the Medical School came, I suppose, quite soon. I went to Melbourne in '68, so they were making appointments I guess by '68.

I didn't mean to divert you from talking about the Queen Liz here. But at the QEH, how were you looked after by the University? What was the relationship like?

Well, you see, we were full-time University staff and the departments were, in other words, University departments, so that we were full-time academics just like up here and we had nice, new laboratories, I had very nice laboratories down there. For '59 it was sort of state-of-the-art. And we got going, you see: I had staff, I had a senior lecturer, which was filled for a while with temporary appointments and then finally Ian Forbes joined me, and he was a very good research man in immunology. I was

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interested in endocrinology, the thyroid and the adrenal, and had graduate students. So that I was just under ten years at the QE. It was very demanding, but it was a wonderful period because the young staff, who had got their chance, were not having to wait for retirements at the Royal Adelaide and there was a sort of challenge of really outdoing the Royal Adelaide. And indeed the teaching was much more oriented to the students and student participation. Students got to do more things with their hands and residents, of course, too. The hospital was an old hospital, pretty authoritarian, and this was a younger staff who were not authoritarian, another generation. So we really, right at the beginning, the climate was established down there where it was good for students and good for residents. It's interesting how that was a very definite phenomenon.

I, of course, had been in the States so that there were others who'd been more recently; no question it was always England or Scotland for my father's generation, but for us it was these other possibilities, and increasingly so, of course, with time. I was probably unusual in going to the States in my grouping, but Don Cheek went to the States, as I explained, but more research orientation. But the QE, in that first ten years things really ticked.

What happened was then that Flinders was established with a hospital and medical school so there was much more competition for funds. Royal Adelaide, Flinders, QE, and the QE had to battle to get funding and really, politically, with a Liberal Government, was sort of allowed to run down. It was a safe Labor seat; the Liberals were not interested. And things had got to really quite a serious loss of morale, which has been alleviated since the Wran Labor Government, and they've got quite an active research institute now and they're pulling in about fifteen million a year.

Really? Serious research?

Yes. Of course, you're probably well aware the Reproductive Health Unit is based there and that unit is now going to move up here.

To the Royal Adelaide, is it?

Or [it would] be Women and Children's, I think. They have a private practice facility, don't they, on Dequetteville Terrace, and so the research is moving from the QE to the Women and Children's.

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Dr Hetzel, you mentioned some time ago A.P. Rowe.

Yes.

Was it in your time at the QEH you came to know him or earlier than that?

Bit earlier. He was here '48–58, ten years, and there's many stories that can be told.

Go right ahead. (laughter)

You've heard a bit about him. Actually, the doctors got on fairly well with him. Let us start at the beginning. He was an administrator, not well-known here. I believe he had a BSc London – of course he was demonised by great and small in this community – but the story is made up of accident, chance; but it's not generally known he served with considerable distinction in the War. You know this?

No.

He ran a research facility which really was engaged in developing radar, TRE⁸ it was called, and he had a group of scientists, independent of discipline, bright, academic research-oriented people there under him. And they perfected radar and he – I have a lecture given by C.P. Snow at Harvard 1960 in which Rowe is mentioned twice in the footnotes as serving with considerable distinction. But his work was secret and therefore was not known. But he appeared here, as you may know, in transit to Woomera, he was a defence adviser to the Commonwealth Government and was associated with the development of Woomera, and appeared in the Adelaide Club. And the boys were talking, you see, and the University – we're talking now about '47, '48 – was in a parlous state, as all of them were in Australia during the War and after, and they wanted a Vice-Chancellor and somebody obviously got the idea that this rather experienced and obviously well-respected administrator could be Vice-Chancellor of the University of Adelaide. Well, he's offered the job and was appointed in '48.

Well, he had had nothing to do with universities, really. But he had a very abrasive personality and didn't hesitate to make statements, very (laughs) sort of down-to-earth, critical statements, about various aspects of the University, and he made statements like the professorial board is 'a collection of mediocrity' – I mean a

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public statement. And it wasn't long before he aroused the not just ordinary but fairly substantial hatred, particularly in the professorial staff. On the other hand, he had some good ideas. He established the first Staff Club, which was on the base [of] the old Anatomy School, and he had a flat there, he lived there, in one part of that with his wife. He did introduce sabbatical leave. He was involved in the pushing Menzies over the Murray Committee, '57, and had a number of good ideas; but he never seemed to be able to get anybody to work with him because of this personality, very abrasive personality. But the clinicians, strangely enough, including my father, he had respect for of course: they were honest men working in the community, as opposed to the academics who were a collection of parasites, *et cetera, et cetera, et cetera*, you see. So this was an explosive situation.

He went on study leave himself in '58, and it was agreed that he would not return to take up the position. But the professors were linked up in what could only be called a conspiracy to make sure he didn't come back as Vice-Chancellor, and they over-reacted, really. And he, when he came back, was very upset that this had happened and resigned. I was at his farewell, which was '58, exclusively sub-professorial staff. No professors were there, except for one, Professor of Chemical Engineering, a man named Spooner, who was quite a rugged individual. I was only talking about him the other day with people that have succeeded him in Chemical Engineering. He was regarded as his informer. But it is an incredible phenomenon that the farewell was held, there was no professor there.

Was this at the Staff Club?

Yes. Russell Matthews was chairing it, he was Reader in Commerce or –

Something like that.

– *et cetera* – so he did quite a certain amount really for the University. It was in a shocking state. The Murray Committee, of course, was a very critical step that opened up everything from 1958. Menzies accepted the findings without reservation about new establishment, *et cetera*, and that's how the Medical School got a real lift

⁸ TRE – Telecommunications Research Establishment.

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and I was lucky to be around at the time, you see, so that units could be staffed at the Queen Elizabeth and so on. I was very fortunate to be there.

And he never forgave Adelaide, so to speak. It was made clear that people who visited him from must never mention the word 'Adelaide'. He finished up teaching, I believe teaching Maths at Malvern College, one of the public schools in England, and in a sense tragic. There was a fellow who he was involved in appointing called – Reader in Medicine and the Humanities, I'll think of it in a second – Reggie Harris, does that ring a bell with you?

No, that's one I don't know.

Reggie was quite a colourful character, had a PhD from Oxford in Philosophy. But they advertised this job, I don't think it was financed by the Michel money, I think it was part of the – Reader in Medicine and the Humanities, to civilise the Medical students, you see. And Reggie Harris was appointed. Who was Reggie Harris? Reggie Harris, I guess he was known to Rowe, met him in the Athenaeum and so on, and said to Rowe, 'Do you think I might apply?' And Rowe said, 'Yes, you might apply.' And he did apply. Well, he was an Oxford graduate, had I believe done a doctorate, but in fact was engaged in running the Argentinian Railway.

Is this true?

Yes. Before the War. And, as he said, 'We ate the Argentinian Railway during the war' – of course, this meat going back to Britain. And I don't know what else he did that would be available to you, but he was appointed. And he came out with a magnificent library of books which were in the Anatomy School, he had a great wall of books made available to students. And I was engaged in sort of rear-guard actions – of course, this is well after my time; we're talking now about the '50s – because it was controversial this should be done. I'm just trying to think whether Rowe in fact was the agent in setting it up, but you could check that. I'm not quite sure how it got the priority it did, because it wouldn't have got through the faculty. I mean, that's a controversial area, as you would understand. But the idea that the students needed better education of course could not really be faulted and he did a noble job for a number of years and then retired back to England. Reggie Harris.

I've never heard of him or have memory of him.

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C.R.A.S. Harris.

‘Crash’.

Crash. (laughter)

Fantastic.

Yes, he’d be there somewhere. Anyway, how did I get on to that? Well, Rowe was associated with that. Whether he initiated it I don’t know. But can I just stop with one final observation on Rowe?

Not everybody realises that, since Rowe, every Vice-Chancellorial appointment until McWha, the present, are from within the University.

Baston?

He’d been there, you see, earlier. He was Rowe’s assistant for a number of years. He had, as you probably know, an Oxford degree. He was running Singapore, the port of Singapore, and then retired here, nice place, in Adelaide, and I understand the following is true. He was putting in a bit of time working a petrol pump for something to do and ran into Peter Carmel. Peter Carmel told me this story. It transpired that he’s an Oxford graduate and here he was pulling (laughs) a petrol pump. And Peter said, ‘Oh, you could do better than this. You could help with the administration of the University.’ So he did. He came in as Rowe’s assistant, troubleshooter, in times where there was plenty of trouble, and then, as you know, succeeded Rowe. A person of considerable stature who was Chairman of the Universities Commission, *et cetera*: Henry Baston. Well, he was already there, is my point.

The only partial exception is Don Stranks, who was Professor, went to Melbourne and then came back. You know that. Not until McWha, which is after all two years ago. Mary O’Kane, of course, was already DVC Research brought in by Robyn Brown, and Brown was DVC Research before with, I guess, Marjoribanks, and so on. You will see.

That’s pretty remarkable. What about Vic Edgeloe, did you know him very well?

Yes.

Baston always said he worked for him.

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(laughs) Who said he worked for him?

Henry Baston said he worked for Vic Edgeloe.

Well, Edgeloe, you see, he was a new boy in the administration when I put my MD thesis in in 1948. He was, of course, there forever, and was the storehouse with the memory of the University and was a very powerful figure. Vice-Chancellors come and go but the Registrar goes on forever, sort of thing, and he was associated with Lincoln College later and was Chairman there for a while. I was on the council on and off for some years, before and after I went to Melbourne. But Vic, he was a junior chap in '48 and became senior and so on. Eardley was the earlier one who was a rather odd sort of eccentric sort of fellow; but Vic I would have no – he was there and became a sort of factotum, a better memory than anybody else. He did lead the fight to redevelop the Elder Hall as the project, million-dollar project, for the centenary of the University – and it was in danger of being knocked down, *et cetera* – so Vic, certainly a significant figure.

The way you've been talking this morning, Dr Hetzel, it seems that through the years that you knew the University it really wasn't until the late '50s that it began to dramatically change. Would that be fair?

Yes, I think that's right. The Murray Committee was a critical step forward for the universities in Australia. I mean, this one I think was possibly more short of resources than some of the others, I think Melbourne and Sydney probably had a bit better resources, but they'd had no real recognition, you might say. They were run on a shoestring, they had just a few professors in the Medical School and the clinicians were teaching for honorary teaching, so the amount of money would be just very limited. No, the Murray Committee was a very critical moment. And Clunies Ross was on that committee, I can't remember who else was on it.

That's Ian Clunies Ross, was it?

Yes. I remember when they came to visit us. You see, we were in the old IMVS Building, this is '57, and the old building that had been there, I don't know, I suppose it had been the laboratory, clinical laboratory – haematology, biochemistry, *et cetera* were in that building, which of course was demolished, and the Department of Medicine started in it and I started in it in '49. So it's hard to believe what a shoestring it was run on.

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Finally – sorry about all this, but finally – what led you to actually go to Melbourne to take up the chair at Monash? The Inaugural Chair, wasn't it?

Correct. I was here and I was Professor of Medicine in '64. There are several factors. One was that in '64, October, I went to New Guinea to look into the problem of goitre and cretinism in New Guinea. I'd been asked to review some work that had been done and submitted for publication to the journal and the editor of the journal asked me to look at the papers. It was very interesting. It used a long-acting iodine-containing injection to correct what was presumed to be iodine deficiency in New Guinea. Well, I won't go into that in great detail, but I was confronted with a developing country and the public health service of a developing country which was really a very impressive structure, services extending for village level and on up and so on. Public health was regarded as a sort of rather light option in medicine, it was a Cinderella, not given much recognition during the course; it was really primary for people anyhow to do clinical work. Ray Southwood was a physician and city medical officer. But this sort of brought home to me a developing country and the public health service, and the work we did there, as you may know, was quite critical and we showed for the first time, we proved, that the iodine deficiency, severe deficiency, associated with the brain damage could be totally prevented with injection before pregnancy. Point one.

Point two, I had been interested in psychosocial aspects, an holistic view, so to speak – you understand – from the beginning and to some extent had a Christian sort of commitment, origin.

And the third thing was I was associated with an Australian Council of Churches initiative called Australian Frontier, which was devised as a means for developing work in the community independent of the parish church, directed study and action on community problems with community consultations on – this is the '60s, Australia was very rapidly, big migrant input, postwar population explosion, new cities, new suburbs and so on: rapid development of the communities but they needed more than housing, so to speak. Elizabeth was the place, classical example. So I went on to this group as a member of the national committee, chairman of the state committee and then I became vice-chairman to Sir James Darling in '72, after I went to Melbourne. But this opened my eyes to the social aspects of health.

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And it was really the combination of those experiences that led me to go to Melbourne, apply for the job. It was new, as you say, Social and Preventive Medicine. It wasn't the first chair, they had one going back some years in Brisbane, the University of Queensland, a newer medical school than Adelaide, that my friend Douglas Gordon held mainly in reference to occupational health. But this was a sort of starting from the beginning and I knew some of the people at Monash and in a word applied and they had quite a field but I'd already been an applicant for the Chair of Medicine there a year or so before – some years before; '63 – and my good friend Brian Hudson, who was a Melbourne boy, was appointed, which was the right thing. And this was a new thing, as you could understand, and attracted me partly for that reason. It meant that I let clinical medicine go, but one had the opportunity of sort of stating the field and defining it and so on. And the thing that happened very quickly was the media took it up.

We started on suicidal behaviour, it was one of the projects, and that aroused a lot of interest and developed from there. And then of course we had a new teaching program. But the thing that was different about the job was that it was the media were interested and that led to me giving the Boyer Lectures in 1971 and then that Penguin book of mine in '74.

Now, would it be true to say that that book was – I hesitate to use the word – but seminal in the sense that it really was the first of its type?

That is so, Rob. That is so. It sold, went through to three editions, it sold forty thousand copies. You could say it educated a generation of students in the health field – not only medical students but all the others – and also to some extent teachers. The Boyer Lectures are of course distributed throughout the country to all schools and so on. No, it's one of the more gratifying things one has been able to do. I run into people: 'Oh, yes, I know you, your book', sort of thing, which is rather nice, rather nice.

It's still on all our shelves, you see. (laughter) Well, Dr Hetzel, did you have any future relationship with the University of Adelaide or was that pretty much it?

That was about it. I was somewhat disappointed, Rob. You see, after just on eight years at Monash I came back to this job here, which was on the campus and so on, and I knew people on the campus from before and since. I thought that I would be

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able to establish quite a definite link with the University of Adelaide, but what is the background? The background is that previous chiefs of the CSIRO Division, including Hedley Marston, the famous figure, were basically anti-University. That applied particularly to Marston, who was a leader in the persecution of A.P. Rowe, and then the fellow who followed him was even worse. And there we were, right alongside Chemistry and so on: there's a gulf. And I wasn't really able to bridge that gulf, in spite of having been a professor at the University of Adelaide; but it was a period of low ebb in the Medical School I think it's fair to say. The leadership was not really very – the Dean was not interested and nothing happened. Don Stranks at one point in time told me we would have to leave the University campus altogether because they had to renovate the buildings and they'd use our place to hold staff, we'd vacate a building and then go there, while the building was rebuilt. (laughs) That happened to me towards the end of my time.

Things improved at the end with Marjoribanks finally, with my successor, because we had a review, you see, at the end of my time, which was pretty favourable but pointed out there was no real relationship to the University, which was true, and I did go and see Don Stranks finally, just before he died, and then with a view to improving the situation. But that was a disappointment, Rob, to me. I gave virtually no – did no teaching. I could have given a few lectures and so on. But it wasn't on the horizon, it needed somebody to take it up from the University's side, but there wasn't anybody wanting to do that.

This is, we're talking about '76, and I did have actually, in spite of that, I had a wonderful ten years at CSIRO and it led on to – gave me a base from which to develop the international work subsequently, which I was ---. Had the first few years with CSIRO, they helped with the administration, then I came here to the Women and Children's Hospital in the Way Building, the old nurses' home, and have been there since '92. But CSIRO, we were an anomaly there, you see. It was a battle, there was a political battle, as to whether this ---. First of all, you see the Division had been there fifty years and could be said to be run down. They'd had big success, but what you do afterwards comes up. And it was Frank Fenner who was asked to look at the show and recommend – one person – what ought to be done. He said, 'It ought to be switched from sheep to humans, human nutrition', and that was '74-75. The job was advertised and they weren't quite sure

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what they wanted. They had a group of candidates, I was referee for a couple, I was asked to comment, but they hadn't really been able to make a decision. And applications closed, and then I had a friend, Ivan Jarrett[?], here, whom you may know –

Yes.

– a very old friend, who came over and said, 'Well, they still haven't made an appointment.' He didn't say, 'You ought to apply for it.' He'd rang me up, he was over for a meeting on the La Trobe campus and just told me this. And I suddenly thought, 'Well, if they haven't got a suitable candidate maybe I can be interested.' I realised I needed to move from Monash. It was rough, pioneering work there.

I was going to say you were there in *the* period.

Oh, my word. My word. And so I rang them in Canberra. They said, 'Get something in', which I did, and in due course I was appointed. Now, it was a run-down show, but it had resources and of course they promised much more, which never really materialised. But it was ageing, I had twenty retirements in four or five years, so I could re-staff. So there was the general public health aspect – – –. (break in recording)

So it was very run-down and you were promised much of which little came.

That's right. But there was enthusiasm about it – in Canberra, particularly – and I found the atmosphere refreshing, you see. And it was in a sense free of a lot of the politics and I could concentrate on research. I didn't have to worry about teaching – I like teaching but I was happy, given the opportunity I was prepared to take a full-time research position –and that story unfolded.

But apart from the general public health aspects of nutrition – coronary heart disease, cancer and alcohol and so on – which was the main preoccupation, I wanted to develop a model in sheep for the iodine deficiency problem, we could really tie up the effect on the brain, which we did. People were still there from the old days, the trace element deficiency work, and not only that but I was able to establish a monkey, marmoset colony; we could work in the primate, you see, close to man. So over ten years we had a very productive time. And at the end of that time I'd been involved in research in New Guinea and research here, it was apparent the problem

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was very significant in numbers – two billion at risk of iodine deficiency, according to WHO,⁹ in a hundred and thirty countries, the most common preventable cause of brain damage by this time, having been ignored for many years. So that's when I, with the help of CSIRO, I had a ready made, constituted from a soil, research organisation that was quite appropriate, worked out perfectly well for this iodine one, and we got the support from WHO and UNICEF and then I was appointed executive director. We had scientists around the world who'd already engaged in research wanting to see something happen, so I set up this NGO,¹⁰ with support from Australia and UNICEF initially, and that led on to everything else. I finished at CSIRO the end of '85, so from '86 till this, twenty years, I've been really travelling a lot and able to devote myself full-time to this problem. That's the story in a nutshell.

And I retired in April, as I was executive director ten years, chairman for six, emeritus chairman for five, and I'm now a research adviser, a senior adviser role – that's the final exalted status. (laughter) So I'm doing odd things, of course.

Well, I'd just like to thank you very much, Dr Hetzel. Your memories of the University I'm sure will be much appreciated. Thank you.

END OF INTERVIEW.

⁹ WHO – World Health Organisation.

¹⁰ NGO – non-governmental organisation.