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**Dr Stephenson Hall (1904-1995) in interview with Max Blythe
Boarstall, 5 July 1991**

MB Dr Hall, your family was a medical family?

SH Yes.

MB And tell me about your father.

SH Well, my father was a Scotsman, Lowland Scots, up from Aberdeenshire. And he went to Marischal College in Aberdeen, and qualified as a, he qualified as a doctor... And he had a little, he used to have a little picture of his friends, half a dozen of them, and they were all standing there, but one man was standing sideways. And I enquired from my father why this was so. 'Oh well, he'd been drunk last night after qualifying, and he got a black eye somehow.' And so he stood sideways!

MB They stood him half way on, yes!

SH Yes!

MB And did he have impact on you? Was he close to you? Did he have impact on the start, from your early days?

SH Oh well, yes. But he was a Scot, rather dour, you know. Took a lot, took quite a lot of... getting on with ... at least inside the family he did. He seemed to get along with other people in practice very well. He was a very successful and good general practitioner.

MB And where was his practice?

SH Well, when he qualified, he took a job as assistant to a doctor, alongside the River Trent, the north part of the River Trent. And this doctor had the practice on the eastern side of the river, and my mother's family lived on the western side of the river. And the only way of getting across was by ferry boat - there was a chap there all the time waiting to take his boat across - and ... well they, he ... paid his attentions to my mother at Long Arnock(?) across, the ferry boat across the river.

MB This is the early part of the 20th century?

SH Yes.

MB In Lincolnshire, I take it?

SH Oh yes. This was... Yes, this was 1895 ... yes, yes.

MB Right. Did you go on rounds with your father, in your early days? Did this have a...?

SH Oh yes.

MB And was this influential do you think?

SH Very, I think, very. In fact, when I qualified, after various(?) celebrations and things, I went home...

MB No black eyes at the qualification!

SH No! I went home and ... my father by some mischance fell ill, and he went to bed, and I was in charge of the practice straightaway. It was very alarming. But I got advice from him.

MB You were pitched in.

SH Yes, I was pitched into it.

MB What were, what year was that, Stephenson? I should...

SH Oh well, that would be 19 ... 1929, I think.

MB Right. And you'd just come down from [St] George's?

SH Yes. Exactly. Yes.

MB From George's.

SH Yes.

MB But there was a lot happening before then, so I want to go a bit further back. And we'll talk about school, I think, because you had an interesting...

SH Oh yes.

MB ...period away at school.

SH Yes. Yes. I went away to school when I was 11 years old, in 1915, during the early years of the Great War. And I did go away because my father went off to the war, and my mother had been ill with ... I don't know, I think it was probably TB, although diagnosis wasn't quite so good in those days. And so I was sent off to school. I went to school at Bishop's Stortford in Hertfordshire, where all my mother's ... brothers had gone. She had nine brothers, and they all went to that school.

MB Nine brothers?

SH Mmm. Nine brothers. Mmm.

MB Almost Bishop's Stortford School was a kind of family arrangement!

SH Yes, yes, it was! Yes.

MB While we're talking about mother, perhaps we could say a little bit more about her and her interests, because we have the courting arrangements with father and mother, but we might bring her in a little more. What were her interests and what do you remember of her?

SH Well, she was a beautiful woman, and I have very loving memories of her. She was outward going, and outward looking(?), and she was lovely in all, in all ways. And I had a great admiration ... perhaps ... perhaps it was too much, I don't know. It certainly was very strong.

MB So father was a bit distant and she was rather nice and close?

SH Yes. Which is unfair I think to my father, whom I came to appreciate much more later on. But ... oh ... I remember one occasion my mother came down to see me at school, 1917 I think this was, and she'd asked that I should be allowed to sleep out. And I didn't know what this ... but in fact she had, she had a very special secret to reveal to me, you see! So I slept in the same big bed with her, and she revealed that ... that she was expecting a child. And in due course my sister arrived in 1917. Mmm.

MB Right. Big occasion.

SH Well, it was. It was, because I remember so well, we were then living in, on Trentside, we had a house there, and...

MB Whereabouts was that, Stephenson?

SH Where?

MB Yes. Where exactly was the house?

SH Well, it was in a village called Althorpe, near where the railway crosses the river, and it's right up in the north end of the, of the Trent. And I was going back to school by train on that 17th September, and the baby daughter was ... sister, was born just in time for us to hold her, and we rushed off to catch the train!

MB So, a great moment.

SH It was charming, yes. Yes. Yes.

MB Stephenson, whilst at Bishop's Stortford College there must have come the days when you thought more and more about a medical career, because that was surely dawning, wasn't it?

SH Oh yes. But my time at Stortford was largely concerned with games, because I had a natural talent for ball games. And ... well ... I didn't bother much about

exams or anything, until it came to, you know, within sight of leaving ... within a year of leaving. And then I ... well, I thought I would do doctoring. And ... and I took the Preliminary Exams at the end of that year. It was alright; once I settled to doing something, I learned quite quickly.

MB This was kind of Higher School Certificate kind of arrangement, was it?

SH Yes, that's right. Yes.

MB And so you did a science, you had a science bias there?

SH Yes. Oh yes.

MB Yes. What was the science like at that time? Was it quite good at Bishop's Stortford?

SH I thought so!

MB Did you have a good biologist, a good...?

SH Good labs, good labs, and nearly everything was good at school, because I thought I ... I just thought, you know, I... The masters were good, and taught... not taught, but enthused one to think.

MB Do you remember doing early dissections there?

SH Oh, frogs, yes! Oh yes. Yes, not... yes, we did. I didn't really like doing that for some reason.

MB You didn't, you weren't a natural surgeon in the making at that stage?

SH No! No! Pithing frogs! Oh dear, dear! It's not a very agreeable pastime, no!

MB That's right. I'm just trying to work back if I can, just to this decision to go into medicine. I'm just trying to put that on the, on the record. It's something that, you're not aware of any moment that you made the decision? It just incubated, is that right?

SH Well, that is ... that is right, too. I was accustomed to it really! I was accustomed to the idea of doctoring in the household, you know, and that sort of thing, and I liked it.

MB In some ways it reflects a kind of respect for father as well, doesn't it?

SH I think it does. I think it does. Yes. Yes, I did have a great respect for him.

MB And he was delighted that you made the choice?

SH Oh yes, he was. There were only one or two occasions my father, his reserve broke down. One of them was when ... oh I, when I finished exams at Cambridge, he

... I left an, I left an arrangement with a friend to send me a telegram, you see, when they got the results. And the telegram arrived while my father and I were washing the car, and it read 'Congratulations! Passed entire exams' you see. Very satisfactory. But my father ... well, he broke down! He was so pleased! Well, he'd never been pleased with anything I did before ... at least, I didn't think so. But this pleased him tremendously.

MB It was a very special threshold you'd crossed.

SH Yes, yes, yes. Yes.

MB Stephenson, the journey from Cambridge, well, the journey...

SH I'd gone...

MB ...from school to Cambridge we'll just go back to. When you went up to Cambridge, you went to which college? And what was it like?

SH I went, I had an exhibition to St Catharine's College, and ... oh well, I didn't regret it. At the beginning, at the beginning it wasn't so good because there were more undergraduates than there were places in college, and their policy then was that ... in your first year you are out of college, and I was, I had very unpleasant digs for my first term.

MB Not good?

SH No, not good. Not at all good. However, I ... I rearranged, they were much better the second term. And I was right in the middle then and...

MB And you took to sport at Catharine's...

SH Yes I did.

MB ...while you were there?

SH Oh, I did. The first year I played ... yes, I got a blue for swimming, and ... and I played rugger for the college and all that. I was particularly interested in rugby football. I thought ... I thought, I was quite good and I thought ... I was on the ... it was possible I might get a blue at rugger, you see.

MB It didn't quite happen, though.

SH No, it didn't happen because... I had one of the banana slip-ups that occurred several times in my life! At school we had a society which leased a farm out in ... out in Norfolk. It wasn't the farm so much as the farm buildings that we were interested in. And I was going around at the end of the first year at Cambridge, and trying to do, go round all the buildings without touching the ground. And I fell off.

MB How far did you make it before the fall though?

SH Oh, I think I was doing well! I was doing alright, getting across gates, you know, walking across the top. And then I fell off this gable, and sustained a fracture of my right femur.

MB And as far as rugger went that was fatal.

SH Yes well ... it was. Yes well, it didn't mend well, and in fact there's been a ... oh, it's been a bad show ever since. It didn't mend properly, and I've always been a bit lame on it. But of course it meant the end of my rugby football aspirations. Especially galling it was to see my name on the list of seniors' trial when I was...

MB That must have been terrible. What terrible luck.

SH Yes. Well, yes.

MB But you continued to swim all right? I mean ... the leg worked well?

SH I could, but not so well. Not so well. Yes, I could, yes.

MB Stephenson, what do you remember of Cambridge, the academic side? You finished up after two or three years, after three years there, with a, with a BA in natural sciences?

SH Yes. Yes, that's right. And with the ... the various exams for the early part of the medical course. I got all those at Cambridge.

MB Can you explain to me how that started because it's ... a bit different now. So I'm trying to work out how that worked. You phased in towards medicine, did you? You...

SH Oh yes. I was ... I was ... I didn't doubt I was going to be a doctor. And at the end of a couple of years at Cambridge I'd got through all the exams which were necessary for the beginning of the hospital medical career.

MB And with a Second MB equivalent? That's what you were covering?

SH Yes. Yes, that's right, yes, that's right. Yes. And ...so I did a lot of other things at Cambridge. I was on the editorial board of *The Granta*, you know, met a lot of interesting people there.

MB And did you spend time on the river?

SH Oh, a lot of time on the river, yes.

MB Very beautiful.

SH Yes. I learnt how to punt a canoe, you know, standing up, and I enjoyed doing that very much. Yes. At Cambridge we had a plan to ... to have a short term, six weeks or so, during the long vacation. And I used to do that. And that was, that was lovely. It really was. Oh, swimming in the river, you know, and the boating and...

- MB Stephenson, this was a great time for growing up.
- SH Yes.
- MB This was early twenties, I take it? The war...
- SH 1923 to '26.
- MB Yes. So the war was out of the way. These were the nice...
- SH Yes.
- MB ...comfortable years of the twenties as far as Cambridge was concerned.
- SH Yes. Yes.
- MB And you would have May Week balls.
- SH Yes.
- MB Beautiful women.
- SH Yes.
- MB Beautiful Cambridge.
- SH Beautiful Cambridge, yes.
- MB Yes. What a time to grow up in Cambridge!
- SH Yes. In the middle of it was the, was the national strike, you know.
- MB Did that, did that touch Cambridge very hard?
- SH Oh yes.
- MB Did people talk a lot about this?
- SH Oh yes. Yes, they did. Yes.
- MB I mean, that was a revolutionary event, and...
- SH Yes. I was very anti, you know, in those days. I was on the side of the strikers!
- MB Right. So you had a powerful political conscience with you at Cambridge.
- SH Yes, I had. Yes.

MB You had for a long time, I suspect.

SH Well, it was for a long time. It lasted right through until the ... until the election after the Second World War, mmm.

MB Stephenson, the move eventually came to go, to go to London to do clinical work.

SH Yes. Yes.

MB And you chose to go to Hyde Park Corner, to St George's.

SH Yes. When I went there ... yes, yes, I got an exhibition to St George's. I think it was a bit difficult not to get one! But I did get one!

MB Can you explain that?

SH Oh well, there were a number of exhibitions on offer, you see, and ... the medical school was small, and so that if you put in for an exhibition you're likely to get one if you got through.

MB Right. And your father was pleased about you going to London?

SH Oh yes.

MB Because he had a Scottish background, and might have wanted you to go to a Scottish medical school.

SH Well, yes. Oh no, it never...

MB Never came into it. Right.

SH ...it never came into it, no. All the people I knew went to ... went to London.

MB To London.

SH Yes.

MB What did you make of George's when you got there? Was it, was it a good place? Did you arrive at a good place?

SH Well, yes ... yes, well ... everybody said it was the gentleman's hospital, you see. You were supposed to dress properly and ... wearing spats and that sort of thing, decently dressed, when you went to the hospital to work. And I remember being told to go home again one Saturday morning when I was rather, dressed in rather a relaxed way!

MB So it was a fairly ... fairly high regime of discipline there.

SH Oh yes. Oh yes, indeed. Oh yes.

MB Different days from now! Consultants all-powerful?

SH Yes, well they were, yes. And ... oh, it's very peculiar how undergraduates look at their consultants, you know. We ... we would imitate their way of talking and all that. They are Godlike, they were Godlike. And they had ... they had... I remember, we used to hear about ... St Thomas' Hospital which was much bigger, and of course medical school... And there's a story of how they, the new intake of new doctors, or new students, would be seen by the consultant in charge of them, you know, and he would say 'Now, I look round at all your happy faces, and I think that by the time you come to qualification two of you will be dead, carried off by some Staphylococcus, two of you will have got tuberculosis...' And they went on like that! So ... this was quite true. The students had a hell of a time in those days, because ... you know, pre-streptomycin, pre-penicillin days, many of the, many of the illnesses were due to infection with virulent staphylococci and that sort of thing, and people would die. I remember being told do a dressing of a person who had an abscess, and my surgeon, Ivor Back his name was, said 'Now, don't you prick your finger or anything, because if you do it'll be goodbye. Goodbye. Nothing we can do for you.'

MB So you were facing a barrage of horrendous germs on a daily basis.

SH Yes. Yes, that's right.

MB Yes,

SH And I remember one of my colleagues, with the same initials as mine, being desperate for quite a time with a Staphylococcus which he got just like that. Mmm.

MB Right. So it was quite a challenging career to move into.

SH Oh yes.

MB What did you think of patients? Because very early on I know you were taking note of, note of patients and their causes and cases.

SH Yes.

MB They had a profound effect on you? I mean...

SH Oh yes.

MB From a caring point of view.

SH Yes, indeed I... Yes ... yes. I think ... I felt, quite strongly, the caring side of ... of patients. And ... oh yes, I ... yes, it was a very strong feeling.

MB Can you remember any of the early cases that moved you?

SH Oh yes. Well yes, I do remember a black man coming into the ward, and we couldn't make ... he was obviously very ill and we couldn't make out what was the

matter. And we ought to have done; it's awful to think how backward we were in those days, 1924 or something like that then it was. No x-ray. There was an x-ray apparatus of sorts in the hospital but it was used rather more to, for developing the machine, to make it work properly ... not to do with the patients. And this poor chap never had an x-ray. He had the consultant of chest diseases to come and see him who couldn't diagnose it. And he eventually died. He would have been a perfectly simple case at present. But he died, and was found to have an abscess on the lung, down here, what we called an empyema.

MB Which today is...?

SH Which today would be...

MB A minor problem.

SH Yes. No problem, a houseman would, a houseman would make the diagnosis. And then the consultant came round and everything would have been done. But it is ... an extraordinary feeling I get every now and then about the difference between then when I was a student and now.

MB What were the, what were the techniques and the general standards of practice that were in force at that time? Because it must have been quite limited, the number of drugs you could prescribe must have been relatively limited.

SH Oh yes.

MB I mean I suppose you kept people's bowels open, and you made sure they slept well, and you did very simple operations.

SH Yes, that's right. But ... yes. You say short of drugs ... well of course we hadn't got drugs which worked! Insulin had just been discovered at that time, and digitalis worked. But not very many other drugs really worked. And, but nevertheless we prescribed them all ... bromides and things. And I remember ... one of my chiefs prescribing ... not potassium(?) bromide, which would be the ordinary thing to prescribe, but he'd prescribe strontium bromide. Well, this gave me quite a turn! What on earth...? Oh, and I said, and so I raised the matter with him, why he'd prescribed strontium bromide, and he said 'Oh, it's less irritating. Less irritating.' Well, how he knew that I don't know! But...

MB You can't imagine that he'd done controlled trials, can you!

SH No, no!

MB But it was a lot ... 'In my clinical opinion' was the kind of word very often, was it?

SH Oh yes.

MB And that was it.

SH Well yes, it was. And it was ... oh yes, it really was for me too, for a long time. And I remember being asked to see somebody with a gland in the neck, you see, and it was quite clearly a cancer of some sort. But I, in my capacity of being consulted, you see, I remember my words 'I have an idea that that this would be sensitive to deep x-rays,' I said. And this opinion was put down and he was sent for deep x-rays, and it disappeared. Wonderful! And ... and for no good reason, it just ... a hunch...

MB Just a feel? Just a feel?

SH A hunch ... a hunch we'd had.

MB And that hunch we should flag label as still quite important?

SH Yes.

MB Despite all the ... we still feel that's...

SH Yes.

MB ...I know that you...

SH Yes, I do.

MB ...you do. There's an internal mechanism...

SH It really bears it up, it bears it up somehow. And I can remember ... a few days later bursting into the ... the tea room, where all the housemen and doctors collect, you see, and hearing somebody say, 'And he said, 'I have an idea that this will be sensitive to deep x-ray" he was saying to his friend. And then I appeared, and ... silence! But that sort of thing ... well, they're still doing it, years after people had said 'Well what does the x-ray show?' as they do now, and then they interpret the x-ray.

MB Stephenson, while you were at St George's, there must have been some special memories about .. you said it was much smaller than Thomas', and was it really very small? You got a lot of privilege because there were less students, was that true?

SH Oh yes, it was... The ... there was another chap and I, Frank Holdsworth, who were the two students on the firm. Well, we had plenty of patients. We really learned terribly fast.

MB Much better access to conversation with consultants as well?

SH Yes, yes, access to ... to your own men. Oh yes. Yes. He had ... he had a, he did very well. He was a Yorkshireman, and he went back to Yorkshire, and in due course he got a knighthood. I never quite knew quite why! I'm sure he was worth it, but he did!

MB So those were George, the St George's days, which we've touched on very briefly I know, but we've got more things to touch on and we can space our time although we're selling George's short. You came to the end of your training there without any great problems. As you say, a telegram eventually arrived, you'd qualified, and it was, it was all about to happen.

SH Yes. Yes.

MB What were the decisions about the future you'd been making?

SH Well, every ... nearly every doctor at some stage wants to be a ... in his student and post-student time, wants to be a children's doctor. They're very rewarding, or were in those days, and ... I wanted to be, thought I'd be a children's doctor, and I went and did a locum ... not a locum, I went and did a job as a houseman at Tite Street Children's Hospital. I learnt a great deal there. A great deal.

MB So that was an influential period.

SH Oh yes, it was.

MB And you had, what, a year there?

SH I had a year there, yes. Yes.

MB But you can still remember and...

SH Oh yes, I ... I ...

MB ...the needs of children and...

SH Yes. Yes. Yes, it was, it was very good and ... as I say, I learned a lot. Then at the end of that time I had another one of these banana slip-ups! I thought I would take ... what's called the Membership examination of the Royal College of Physicians, which is a very ... difficult examination, and you can't do any consultant work without it. You must have your Membership, become a Member of the Royal College of Physicians, and subsequently a Fellow. So I went ... went off and took this exam, and in ... and in some miraculous way, I got through! I got it, and people didn't believe it. 'Not Hall, not Hall, no, no!' And ... and the idea then...

MB This was in very quick time, because...

SH Oh yes.

MB ...you hadn't been qualified that long.

SH No. It was two years after qualification.

MB Which is ... that's pretty good, that's a pretty good...

SH Well, it was very quick, yes. And I remember one of the senior members of staff, a pathologist, said 'Ah, Hall, it'll spoil your life!'

MB Did it?

SH Well, it altered it. I don't know what it would have been like if ... if I hadn't got it.

MB Stephenson, you'll now I hope take me through and begin to introduce me to how it was altered, this life of yours, by that event.

SH Yes, well, to do consultant work was now possible, because I had the necessary...

MB MRCP.

SH Yes, that's right. And I did have such ... such ideas. And I tried for various jobs. I was still fascinated by children, and I remember I applied for a registrarship at ... at Great Ormond Street. And I called on all the staff, you know, and only one man spoke the truth to me, or put me off. But he said 'It's not the slightest use of your putting in to this, for this job. It's already fixed up.' That was the pathologist who said that to me. And, well, he shouldn't have. But, nevertheless, it solved the problem; I ceased to go round to the various ... chiefs ... calling on them and paying my respects. That, doing that was quite a thing, you know, you had to be terribly smartly dressed and...

MB And this was the fashion, was it?

SH Yes.

MB I mean, this was the style of things?

SH Yes.

MB People went and called on heads of department?

SH Yes. Yes, that's right. Yes. Yes. And I went and got a job at, as a senior resident at the chest hospital, the Royal Chest Hospital in the City Road, and this really ... was very ... very ... very formative years. Well, I learned an awful lot there, and it really changed my life.

MB This was in the City Road, the hospital?

SH Yes.

MB And it was exclusively chest medicine?

SH Yes, yes.

MB And about how many beds? 150?

SH Oh, about a hundred beds, it was quite small.

MB So, a compact place, with high specialisation.

SH Yes, that's right. And that was good. They, we were now having plenty of x-rays and plenty of ECGs and ... and I learned, the staff ... I mean, Sir Peter Kerley, who was a great radiologist, stem(?) cells, he used to go there, and I used to sit in with him while he was ... he was reporting on all the films that he had. Learnt a lot from him.

MB I mean x-rays must have been quite a challenge, because ... I mean, interpreting what an x-ray was all about...

SH Oh yes.

MB ...the lesions, I mean, that was an art still to be perfected.

SH Oh yes. And we ... there were the new contrast mediums which we'd inject into the ...into the trachea and so on. And I got very adept at doing that sort of thing, and produced some beautiful pictures, which I continued...

MB Really?

SH ..to do for some time, yes.

MB They were quite works of art?

SH Oh yes, yes!

MB That must have been very satisfying...

SH Oh, it was.

MB ...with that new technology.

SH Yes, it was. It was very ... very interesting. And I also got to know, very well, very well, a doctor, Nora Schuster, who was the ... who was the pathologist there, and I learnt a great deal from her. She was an absolute pioneer in examining the phlegm of patients with cancer of the lung, and detecting tiny fragments of the growth...

MB Really? Yes.

SH ...the cells and so on, which she would recognise. And she was an absolute pioneer there. And...

MB Of course the time you're talking about really was the beginning of an explosion in lung cancer, wasn't it, because it had been a relatively rare disease in the early part of the century?

SH Yes, yes. We had...

MB So you were beginning to see a...

SH I wrote a little thesis on it, and I... I had got ten cases, and wrote them up. They weren't all that common, you know, then. It was after then that...

MB Did you keep a copy of that write-up, Stephenson?

SH No, I haven't. No, I haven't.

MB But that was an early piece of research?

SH Yes. It wasn't sort of research, it was ... just writing up...

MB Good medical practice in detail.

SH Yes, yes. But one began to realise what enormous strides one was living through, and I've been accustomed to saying now ... you see, when I started in hospital insulin perhaps became ... was known then, you see, and that made a great difference. People would die of diabetes, certainly, before. And I came to the conclusion that I have in recent years, that during my medical career, there have been more medical advances than in the whole of time before. I mean this literally. That when I started, as I say, there were no x-rays, biochemistry there was very little, examination of the heart was just being ... well, like that Scotsman whose name escapes me for the moment, had been doing his ... his electrical(?) examinations¹. And ... well, it is just staggering, and it's very hard to keep up with the advances.

MB Looking back over those many years - and they don't show, Stephenson, you don't look as though you came through such a long history of it all - but looking back over that panorama of medicine, what was the really outstanding...? You saw insulin arrive...

SH Yes.

MB What was the really outstanding thing of them all?

SH Oh!

MB What revolution in medicine... ?

SH Oh well, of course it's penicillin, isn't it? That's the really great change. I remember the president of the Royal College of Physicians calling it 'The rout of the acute infections.' That's the phrase he used. And it was so. Penicillin came along, and all these awful risks that we'd run as students of being ... catching these awful staphylococci and things, all that disappeared.

¹ Dr Stephenson Hall might be referring to Sir James Mackenzie (1853-1925) here.

MB All the septic wards went?

SH Yes. Yes.

MB Unbelievable! I mean, you know...

SH Yes, it really was.

MB ... the history of care ... gone!

SH Yes, it was so. And it was reflected in the national statistics and all that sort of thing. And we recognised also that if, that if there was an antibiotic such as penicillin which would deal with your staphylococci and streptococci and that sort of thing, there was likely to be a similar one which would deal with TB. And I remember trying to persuade the ... I was working for the Middlesex County Council at the time, and trying to persuade the council to set up a ... a research institute to seek for, to search for such an antibiotic. They eventually decided, you know, it wasn't the job of the county council, and I think they were probably right. But it was very disappointing at the time.

MB But your ... your enthusiasm was right.

SH Yes. Well, that's it

MB Because it was going to, that kind of enthusiasm was going to lead to the breakthrough.

SH Yes, to somebody else doing it, you see. And then eventually ... eventually ... in New York the ... the... Research is a funny thing, you know. When you want to set up a ... you've got a research team, they're looking for a job! And what they do is they look through the literature and see if there's anything that suggests that a certain drug, a certain substance, will ... will work. And these two Americans, New York people, Feldman and Hinshaw² ... I think it was they, who looked up and found there was a thing, a long list of things, and then there was streptomycin which seemed to have an inhibitive effect on the tubercle bacilli, you see. Well, so they set to work with their rats and mice, and all that, and ... and there the job's done, you see. They were able to cure them. And eventually they tried, there's one form of tuberculosis which was uniformly fatal, always fatal, and that was tuberculous meningitis, and everybody who'd got that died in about six weeks.

MB Horrific.

SH Yes. And ... well, they found the drug and they cured somebody, some young woman with TB meningitis, they cured her. And that convinced us, who were working in that field, that the cure had arrived.

² William H Feldman and Horton ConwinHinshaw, working at the Mayo Clinic, discovered that streptomycin was effective against pulmonary tuberculosis in humans. They published their preliminary findings in *Proceedings of the Staff Meetings of the Mayo Clinic*, 20 (1945), 313-17.

MB Not only a period of great revolutions in medicine, but it's been a great privilege to actually be there to witness it.

SH Oh yes. Well, it was thrilling. It really was, at the time when ... one was dealing with tuberculosis all the time, and...

MB You saw desperate patients liberated into normal life.

SH Yes. Yes, that's what happened. But one had all sorts of techniques, you see, and ... for dealing with tuberculosis, and of course all of a sudden it was all out of date.

MB Stephenson, before we, before we throw those techniques away though I'm going to take you through the story of your career in chest medicine a little further. Because we'll take that tuberculosis caring part of your career into focus now, if we may. We'll go back ... we've looked at the revolution in medicine of that period. If we can go back ... I'll take you back to the City Road if I may, because at the end of that attachment to the Chest Hospital there, what was the decision? Where did, you were stuck with chest medicine, you liked it?

SH Yes, indeed. And ... well, yes. At that time there was, if you wanted to set up as a consultant, tremendous pressure to get on the staff of various hospitals and have a plate up in Harley Street and that sort of thing, you see. And I did think about that for a while, but I soon came to the conclusion that, you know, that was not for me. And I ... took a job looking after tuberculous patients with the Middlesex County Council. Now, the Middlesex County Council at the, at that time were a very exciting county council to work for, very...

MB And the date at that time, Stephenson?

SH Oh well, this was ... where are we?

MB 1928? '29?

SH Oh no, much later. No, middle thirties.

MB Middle thirties?

SH Yes ... that's right. And they were pouring money into public health, and I knew people ... the doctors, one of whom became a great friend, at their county offices. And there was a woman, Mrs Baker(?), I remember her, and I'd like to think that her name is remembered, because she was chairman of the public health committee, a sort of good ... a good Disraelian ... caring, you know, splendid person. And ... well, she was splendid, pushing ahead with all sorts of ideas, you know.

MB So these were pioneering carers that you really could respect?

SH Yes. Yes. And I did, you see. Also the doctor there, Dr ... Dr Garland, Dr Tom Garland, who ... oh, was tremendously active. And he was, he was, it's a shame he was a bit too politically minded, but he was very political, so was I at that time, but

not so rabid as he was! But he was very good, and we built a new sanatorium, a famous hospital now, because it's where all the ... all the ... transplants are done now, at Harefield.

MB Harefield, mmm.

SH Mmm. Mmm. And that hospital was ... it was lovely to see it going up. It was built on a curved(?) feature so that ... so that it seemed to be a beautiful building as well as ... as well as serving the great purpose of looking after people with tuberculosis.

MB Harefield was built in your time there?

SH Oh yes.

MB You were a viewer of that...

SH Yes. Yes, yes, yes.

MB ...programme.

SH Yes.

MB And at that time, if I can just ask Stephenson, at that time there must have been vibrations of some importance towards, towards a National Health Service...

SH Yes.

MB ...that middle thirties. You must have been, as a political person, you must have been feeling that and supporting it.

SH Well, I was, yes. But I was blinded by the excellence of the Middlesex County Council, and Mrs Baker, and Tom Garland. I felt that, you know, people with those ideas somehow or other found themselves able to express themselves within the orbit of a county council, you see. And I did for a while think that perhaps a National Health Service would go along those lines. But of course one county council is not like another. Some of them ... very trying. And I soon forgot that. But I was in favour, very strongly in favour, of a National Health Service. And when I, when I came down to Buckinghamshire, 1947 I think it was, I was ... not many doctors were in favour, you know, and I came into a certain amount of disregard on account of it. And I didn't mind a bit. I didn't mind a bit. And I lived to become very proud of the National Health Service. And when I fall ill myself, I ... I generally go as an ordinary patient.

MB Stephenson, those years in Middlesex, I'm just trying to tie down the actual appointment you held, because we moved on with the thrust of what was happening in Middlesex, but you were appointed as...?

SH As a ... as a ... well, the office was called tuberculosis officer.

MB Right.

SH You know, we...

MB You were a tuberculosis officer?

SH Yes, for a while.

MB For the county?

SH Yes, that's right. And ... you see, there were a lot of older people who were doing those jobs who they didn't really like having x-rays and things, you see. They said 'It only shows us what we know is already there.' But of course that wasn't true. But that's what... what they said. And one had, one had ... oh well, great fun, really, because, you know, the forces of reaction were giving way before us, you see. We were appointed to do a job, and supported in all we wanted to do. And ... and ... well, that was fine. That was fine.

MB Stephenson, tuberculosis was really the core focus of your medical practice.

SH Oh yes.

MB I don't think I'm in any doubt about that, and anybody who reads your life story in due course will be in no doubt about that.

SH It was...

MB What do you remember of tuberculosis that made it that focus? There was something special about that disease for you?

SH Yes. Yes. Well, in a way ... you cover the whole field of medicine, when you come to deal with tuberculosis, because it affects the bones, the lung, the meninges, and glands. So it does the lot, you see. And so you had a terrific range of ... of patients to see, and ... oh well... And of course there was also, which I enjoyed very much, the looking after, trying to look after them at home, you see, trying to make sure that the disease didn't spread from one child to another, and all that. And I enjoyed that side of the work very much. In fact tuberculosis covered the whole field of medicine, and I...

MB You felt its social dimensions were pretty compelling?

SH Yes.

MB But you also must have felt that you were fighting a very subtle microbe. I mean, there must have been something quite technically exciting about the challenge.

SH Yes, indeed. Yes, yes.

MB What kind of techniques did you use? I mean...

SH Well...

MB Did you have to open chests at all?

SH No, I didn't.

MB Did you get into some minor surgery of some kind?

SH Yes, I did... Pneumothorax and pneumoperitoneum were the sort of things which one did at my particular level. And ... the...

MB What was the process of pneumothorax? Can I ask, because I wasn't, I mean was it a simple, I mean...?

SH Well, it was a simple procedure, but it had, it had hazards. Your idea was to put the lung to rest, you see, so that it wasn't used, just resting. And the idea was to put air between the two layers of pleura, and ... so that the lung was collapsed, and didn't have to work. And after a year or two you would blow(?) it up, take the air off, and perhaps the lung wouldn't ... the rest had enabled the lung to deal with the tuberculosis in it. And ... we went to, we went to awful lengths I think at the time, doing thoracoplasties and all that, to collapse the lung; cutting it, you know, removing great areas of, lengths of rib so that the lung was compressed.

MB So you would be involved in taking ... I mean, the surgical side would be involved in removing...

SH Yes, but that wasn't mine so much.

MB ...parts of the rib cage.

SH Yes. But...

MB Did it work, effectively? Were you impressed by...

SH Oh yes, it did work.

MB ...the measures for that time?

SH It did work. But at awful cost and so on, you know. But you were dealing with a lethal disease, and patients have paid the price, some of them ... just because you were, it was really a serious matter always...

MB I mean tuberculosis was always, from my own reading of it and not being around at the time, but from my own reading of tuberculosis it's always been a disease that seemed to be distasteful from the point of view of lingering uncertainties that it produced.

SH Yes.

MB Is that right? It seemed to me ... the mentions of forestry, you know, people were put away or in garden sheds, and lived outside. There was a whole period of putting people into outside accommodation. That's right, isn't it?

SH Yes, absolutely so. When I came out to Buckinghamshire I was given, physically, a hand because they had a new county medical officer, county medical officer, Dr George Townsend, who ... knew something about this and wanted to set up a team which would deal with the tuberculosis problem. And I was put in charge of that particular team. And ... oh yes, you said, talked about ... putting patients in sheds in the garden. Oh well, we did that because we were short of, we were short of beds, you see. And if a patient could be made to rest in a ... in a shed as you put it, in the garden, it was almost as good as going straight off to a sanatorium. And, oh yes, we designed a particular shed, and I had a lot of them made, and ... yes.

MB Revolving ones. Were these revolving ones? Because...

SH Yes, yes.

MB ...at one time there was a breed of revolving sheds that I read about.

SH Yes, yes, yes. And we had all sorts of theories; they'd be there, the patients would be in them through the winter. I heard people say, I mean distinguished people, say 'The cold does something, you know. The cold does something.' Oh dear! One accepted it, from the lips of the great...

MB I suppose it also kept concentrations of likely microbes down in the home, and had that secondary advantage.

SH Yes. Yes. Oh yes.

MB It was a quarantining effect.

SH Yes, that's right. Yes, it did. It did.

MB Stephenson, we've talked about you coming to Buckinghamshire, have we taken enough time with the Middlesex story?

SH Well... I don't know that you have. I felt... it was during that time that I was the secretary of the Tuberculosis Association.

MB The British Tuberculosis Association. We must give it its full title!

SH The British Tuberculosis Association.

MB We must talk about that. That happened while you were at the Middlesex?

MB Right. Can we talk about ... because you had a long association, a very influential association with that body.

SH Yes. Yes, yes.

MB How did that start?

SH Oh well, I got this job, and joined this association, you see. And I thought it was a very sleepy association! And...

MB Why was that? Too many oldies?

SH Well, the old hands, the old hands were around still, you see, and they were accustomed to a certain quiet way of going on, you see. And I got more and more impatient until one day at a meeting, the meeting broke off, and then people went off and had tea and took a long time over it, and then the chairman, president, drifted back, and took a place. And I thought well, the time has come. I must... So I got up and proposed that he ... that we pass a vote of no confidence in him, you see! That at a time when there was so much to do (?) ... he was spending a lot of time over tea! Well, this speech of mine, which was another one of these bananas, had really quite a big effect because a lot of younger people felt much the same, that here we are in the beginning of this last war, you know ... with tuberculosis on the ... ready to expand and all that sort of thing, and we were doing very little about it. Anyhow, I put my resolution, and of course it wasn't passed! But ... but it had a tremendous effect, especially on me, because of course I was viewed as somebody with strong views and active, and I was put on the committee, and in no time I was secretary. And I was secretary for a number of years during the war, and afterwards, and the Earl of ... the president and I, thought ... Dr Fred Heaf ... Professor Frederick Heaf³, oh, we had a lot of influence on the, on the association.

MB It really became quite an influential association...

SH Oh yes. Oh yes.

MB ... in tuberculosis medicine, and had international...

SH We were on committees, government committees, and all that.

MB Do you think you won useful concessions for the kind of care area that you represented?

SH Yes, I do.

MB Do you think it changed care prospects?

SH Oh yes. I think ... I think we had a ... we had a good effect. Great effect, really.

³ President of the British Tuberculosis Association 1947-1951. Invented the Heaf test for tuberculosis.

MB I'm seeing this as a continuation, an extension of your political bit. Because it did roll on a bit, didn't it, in that period?

SH Oh yes. Yes, it did, yes. And I was the ... I was left-wing then, as I actually ... I actually ... thought to stand for parliament for ... for Mr Livingstone's parish!

MB Right. You nearly did?

SH Yes. I was interviewed and all that, but not chosen.

MB But that would have...

SH (?)

MB ...would have gone down quite, you would have enjoyed that just as well?

SH Well, I don't ... I don't know how I would have supported my wife and family, if I had succeeded! However...

MB Stephenson, at that particular point, before we actually take you to Buckinghamshire and a new role - well not a new role but a very new job - and the beginning of a Health Service that you'd been pressing for, we've come to the end of our first session of interviewing.

SH Oh.

MB And we'll start with the Health Service and Buckinghamshire, and your career there, when we start our next...

SH Oh, the next one.

MB ...phase of the interview.

SH Mmm.