IN MEMORIAM

THOMAS KING

1899–1973

Thomas King died suddenly on August 20, 1973. Born on January 17, 1899, he entered Melbourne University in 1918 and graduated M.B.B.S. in 1923 from St Vincent’s Hospital Clinical School, with which he maintained a life-long association. He was in general practice from 1925 until he left for England and Europe, where his postgraduate training included a visit to Lorenz Böhler whose concepts were to have a profound influence on his later practice. His training in the United Kingdom finished with his gaining the diploma of F.R.C.S. in 1932 and later that year the M.D.(Melbourne) degree and in 1933 the comparatively new F.R.A.C.S. diploma. His enthusiasm and drive were rewarded when he was appointed the first Honorary Orthopaedic and Fracture Surgeon at St Vincent’s Hospital in 1934. This was the first orthopaedic appointment in Melbourne and was held by him until his retirement in 1961. In 1938 he became a member of the newly founded Australian Orthopaedic Association, and in 1955 and 1956 he was elected president of the Association, which honoured him by life membership in 1970. He was a member of the British Editorial Board of the Journal of Bone and Joint Surgery from 1951 to 1953. In 1955 he was elected an Honorary Fellow of the British Orthopaedic Association and in 1957 an Honorary Member of the American Academy of Orthopaedic Surgeons. He became a Corresponding Member of the American Orthopaedic Association in 1960.

He had the satisfaction of seeing his younger son Kevin established in orthopaedic practice with him. The elder son, Tom, returned to London as Consultant Neurosurgeon to the London Hospital.

It should be easy for one who had enjoyed Tom King’s friendship since school days to write an appreciation of his career. Not so, for Tom was not a gregarious character, and had few outside interests other than his family, whom he adored, and his own particular personal hobbies. As the first “pure” orthopaedist in Victoria, appointed in 1934 to the newly formed orthopaedic clinic at St Vincent’s Hospital, Melbourne, he had to face immense difficulties in his lone effort to establish orthopaedics as a separate surgical discipline. At a time when persuasion and tact seemed to offer the best prospects of overcoming the traditional prejudices of established surgical practice, he adopted an uncompromising attitude of “stand and deliver” which did not always endear him to his immediate colleagues. It was not long, however, before the real merit of his work, coupled with his complete integrity of purpose, won universal acclaim. In subsequent years his fame spread until he gained recognition and a reputation in world orthopaedics that was the envy of most.

How was it that this powerful personality, who never suffered fools gladly, nor for that matter made any attempt to conceal the fact, finally achieved so much in so short a time? It might well be claimed that anyone with a less forceful character might have failed in his purpose.
and that Tom King was, indeed, the right man at the right time. His technical achievements were considerable. He had a positive genius for elaborating or inventing instruments and appliances to simplify and improve his operating techniques. Forty years ago he pioneered fixation of fractures of the upper end (neck) of the femur in Australia, and the instruments and tools that he made and used have not been bettered. Internal fixation after McMurray’s osteotomy, in an endeavour to avoid the otherwise inevitable plaster spica, has recently become fashionable. Tom King, using his own modified nail and plate, employed the method for over thirty years and, in my view, no simpler or more efficient apparatus has yet been devised. Charnley’s clamps for immobilising excised knee joints did not entirely meet with his approval, so he invented an “improved” model. Following up the apparent success of compression arthrodesis, he attempted to treat ununited fractures of long bones by this method, using specially devised clamps as the occasion demanded. He read a paper on this subject to the American Academy of Orthopaedic Surgeons in 1957. His espousal of medial epicondylectomy in the treatment of certain forms of delayed ulnar nerve palsy is less well known, as is the fact that he performed a large number of spinal fusions for low back pain long before this procedure became current surgical practice. Tom was a capable operator and his “invisible line” across the theatre floor, over which no one ventured uninvited except at their peril, was an early attempt to enforce a theatre discipline which is generally accepted today. His handling of tissues was both gentle and firm, in keeping with a man whose hobby was the modelling of Spanish galleons and ancient men-of-war, and who, in his later years, produced some quite presentable water colour landscapes and made beautiful pen and ink drawings which he sometimes used to illustrate his own scientific articles. He was also a competent amateur conjurer, greatly in demand at the hospital Christmas parties.

The Australian Orthopaedic Association is still in its comparative infancy, and as time passes many of its pioneers will be forgotten—but not Tom King. For the man who was a legend during his lifetime will surely grow in stature with the passing years, while stories and anecdotes now clearly identified with this lively yet lovable character will become part and parcel of the Association itself. For years he was a staunch and loyal supporter of all the Association’s activities and was its president during 1955–56. He was elected to Honorary Membership in 1967—the second Australian to be so honoured. Few who attended the meetings during his presidency will forget the spirited discussions that inevitably occurred, or the verbal jousts with his counterpart from Sydney, Dennis Glissan. It was his oft-repeated dictum that every paper read at a meeting of the Australian Orthopaedic Association had to have a message. He made no attempt to hide his displeasure when forced to listen to erudite contributions which never seemed able to come to the point. To this day few people deliver a paper at an Australian Orthopaedic Association meeting without being haunted by muted background mutterings which seem to be saying “What’s the message? You’ve got to have a message.”

To his friends and colleagues Tom was more than just a generous host. Receptions and dinner parties at his beautiful home were fabulous events, as many an overseas visitor will no doubt recall with pleasure. It is only proper, too, to remember how at these memorable parties his gracious and lovely daughter Lettie played so notable a part. He was intensely proud of his family. His wife, Nina, died during the war years, leaving him to cope with a young daughter and two younger sons. “Young” Tom is now a neurosurgeon on the staff of the London Hospital, while Kevin is in consultant orthopaedic practice in Melbourne.

All of us who knew him well, and even those who had not that privilege, would wish to join with his family, not only in grief at his passing, but also in pride for his living. B. K.-C.