

# WITS UNIVERSITY MEDICAL SCHOOL GRADUATING CLASS OF 1960



## Newsletter #5 – Clinical Training

Compiled by Chaim Rosenberg, Chicago

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### Our Hospitals and Teachers

In this Newsletter we look at some of the hospitals where our clinical training took place and pay tribute to some of our most inspiring teachers.



**The Second Johannesburg General Hospital, 1937-1979 – as it was in our time.**

### Medical ‘Firms’

For the last three years of our medical training we were divided into groups referred to as ‘firms’. In fourth and fifth year we had up to nine individuals whereas in final year it was four to six. The

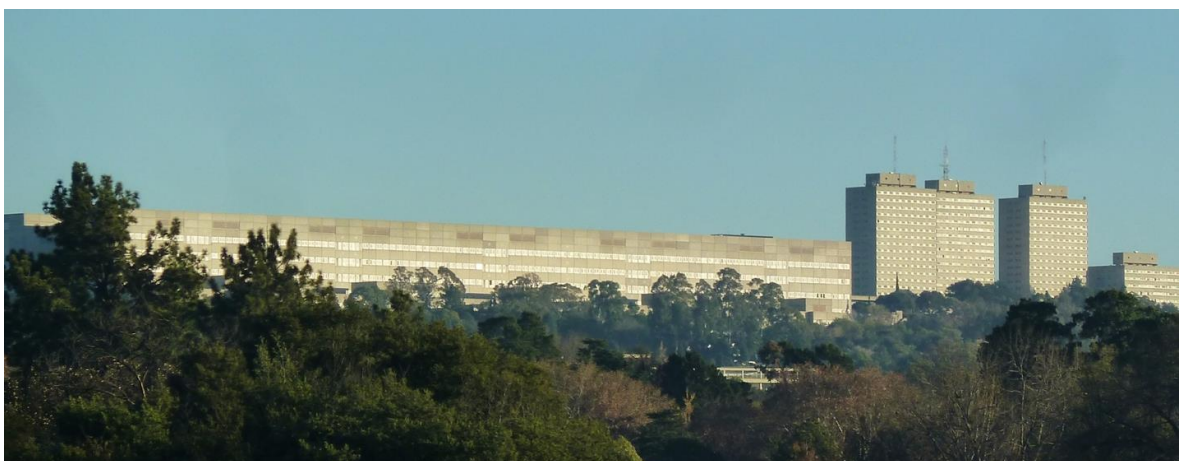
'firm' would be assigned to heads of departments in designated hospitals for our clinical training in surgery, medicine, obstetrics and gynaecology, paediatrics, and other specialties. We would attend ward rounds in the mornings with the chief, his registrars and house officers. The registrars, who were studying to be specialists, did the bulk of the teaching. In the afternoons, we helped with clerking the new patients. In-between, we attended lectures and demonstrations at the Medical School, located on Hospital Hill. These experiences shaped our interests and guided us in the choice of our medical careers.

## The hospitals for our rotations and house jobs

At the time we did our clinical training 1958-60 the hospitals were as follows:

- **Johannesburg General Hospital:** The city was only founded in 1886 soon after the discovery of gold. Its first hospital was a brick and thatch structure in Commissioner Street, that doubled as a jail. Within ten years the City of Gold had a population of 100,000, mostly black labourers. The first permanent hospital, built on Hospital Hill, opened in 1890 with 130 beds and an operating theatre. In 1897, the Barnato wing was added (the year Barney Barnato disappeared overboard in mysterious circumstances). The Nurses' Home on Klein Street opened in 1909. The physicians were largely British-born and educated but with increasing numbers of South African born doctors, who travelled abroad to complete their medical training. In 1919, the medical school opened its doors. By 1937 the old hospital was demolished to make room for a larger Johannesburg General Hospital, designed by Gordon Leith – the one we knew (pictured on page 1). You can see a pictorial history of the Medical buildings on Hospital Hill, lovingly collated and annotated by Marc Latilla, here <https://johannesburg1912.wordpress.com/2016/01/02/hospital-hill-old-suburb-between-braamfontein-hillbrow/>

During the 1970s this was superseded by a brand new, huge hospital complex on Parktown Ridge. It was built on the site of *Hohenheim*, the first Parktown Randlord mansion, home first of Herman Eckstein of the corner house. Sir Percy Fitzpatrick, author of 'Jock of the Bushveld' lived there and later Sir Lionel and Lady Florence Phillips. The mansion was demolished to build the new hospital complex seen below.



- **Non-European Hospital** In our day so called 'non-European' inpatients were largely dealt with at Coronation, Bridgman and Baragwanath Hospitals but there was still an Outpatient Department of the non-European Hospital on Hospital Hill, facing Esselen Street, under the control of the Johannesburg General.
- **Transvaal Memorial Hospital for Children (TMH)** This was built as a memorial to those killed in the First World War and opened in 1923. From 1950 to 1968, the part- and full-time staff were appointed by the Transvaal Provincial Administration in consultation with Wits, which recognised TMH as a school of paediatrics only in 1968.
- **Queen Victoria Maternity Hospital** across the road from TMH was associated with the Johannesburg General
- **Coronation Hospital** in Coronationville near the mixed area of Sophiatown, opened in 1944 serving a large Coloured, Indian and Black population.
- **Bridgeman Memorial Hospital** Brixton, Johannesburg, was started by missionaries. It was the largest hospital in the southern hemisphere before the 1960s, designed specifically for African women. It was forcibly closed in 1965 when the apartheid authorities objected to Black patients being treated in a White area.
- **Baragwanath Hospital, Soweto** the vast hospital complex in south west Johannesburg that opened in 1942 as a convalescent hospital for British and Commonwealth troops was destined, after the war, to serve the Black population of Soweto.
- **Alexandra Health Centre** situated in Alexandra, a crowded Black township that had grown up on what was then the edge of the white suburbs of Johannesburg and was now surrounded by them. Covering just a square mile, in our time it was home to 20,000 or more impoverished Black families. The clinic started as a missionary charity and is still run by charities. It has had a long symbiotic relationship with Wits Medical School.
- **JG Strijdom Hospital** (was not in existence when we were students). This large new general hospital in Auckland Park, opened in 1967, providing advanced care and teaching. Several of our class members were appointed to senior positions there.

## Hospital names

The hospital names followed the politics. Our class had its medical training during the last years of colonial rule. 'Queen Victoria', 'Coronation', 'Alexandra' and 'Baragwanath' were given while South Africa was part of the British Empire. On May 31, 1961, the Republic of South Africa was established. The 'new' hospital opened in Auckland Park in 1967 was given the name **JG Strijdom** for the second Afrikaner Nationalist Prime Minister. After 1994, when the African National Congress gained power in South Africa's first democratic elections – all our training hospitals received new names. Baragwanath Hospital became the **Chris Hani Baragwanath** in 1997. Coronation was renamed **Rahima Moosa Mother and Child Hospital** in 2008. The

Johannesburg General Hospital is now called **Charlotte Maxeke Johannesburg Academic Hospital. Hospital** and the JG Strijdom Hospital became the **Helen Joseph Hospital** In 1997.

## **The Johannesburg General Hospital**

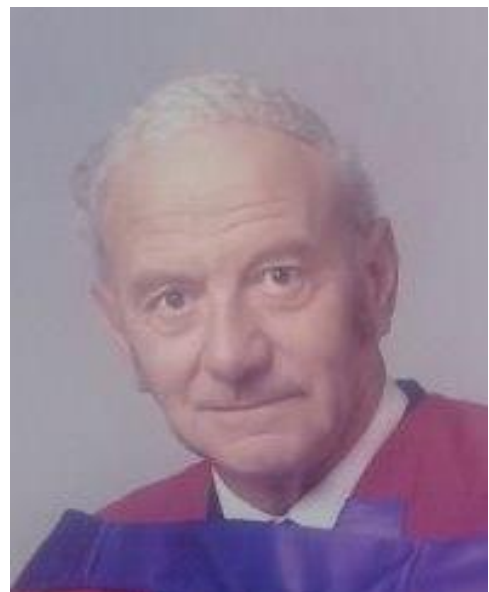
After World War II, there had been a major reorganisation of academic medical services. previously, the academic heads and other physicians, were all part timers in private practice. In 1946 full time physicians and surgeons were put in place at the Johannesburg General Hospital, who also became professors and teachers for the Wits Medical school.

In our day, our student clinical years and house jobs, 1958 – 62. the Johannesburg General Hospital (pictured on page 1) had grown to have 1070 beds; 328 beds for medicine, 218 for surgery, 82 for gynaecology, 92 for orthopaedics as well as beds allocated for urology, plastic surgery, psychiatry, radiotherapy, neurology and neurosurgery. As students we all did a rotation there at some stage, and the ablest students would be offered house jobs at 'The Gen'. **Ronnie Auerbach** pointed out the that the white semicircles on the façade were escape chutes where in case of fire or other emergency, patients could be evacuated by being slid down these wrapped in their mattresses!

### **Professor of Medicine: Guy Abercrombie Elliott**

In 1946, Guy Elliott became the first full time Professor of Medicine at Wits and the Chief Physician of the Johannesburg General Hospital. His remit extended to the staffing of Coronation and Baragwanath Hospitals, which were also significant in our training. He was quickly recognized as an inspiring teacher, skilled physician and excellent manager of the varied activities, including research.

**Andre van As** wrote: 'I first met Professor Elliott in 3<sup>rd</sup> year when I was a patient of his. He cared about solving the issue and was thorough and attentive. My next encounter with him was in 1964 when I worked in his ward as a registrar. At that time, an Intensive Care Unit (ICU) was just being formed. Together with my fellow registrars, **Derek Stables**, **Arthur Rubenstein** and **Sean Lynch** we provided a centralized service for critically ill patients. I continued working with Professor Elliott in developing intensive care until eventually it expanded to 12 beds run by the Pulmonary Unit. This paved the way for my specialising in Pulmonology.'





Culinary prowess was also one of Professor Elliott's many attributes. He was not only a good cook but a gracious host and enjoyed entertaining. Andre remembers when an adventurous firm of students that included John Gear (son of the famous vaccine expert James Gear, and the son of professor Fassler (of Architecture) reciprocated and invited Professor Elliot and his registrars and house officers to dinner at the Fassler's house. The evening was to feature a slide show by Professor Elliott of his overland trip from London to Johannesburg.

The dinner party was the night after a busy intake with no sleep for Andre remembers a cosy



fire, a tasty roast provided by the students, with plenty of good Cape wine. The last thing he remembered was Tutankhamen's tomb in Egypt. (see picture). He awoke to the Fassler's dog barking at his heavy snoring – and the journey was already at an end. He thought he would be in the dog box but said that Prof took it in his stride.

Andre says: 'The training of our students and graduates improved as the teaching staff expanded, and as new specialities, methods, devices and therapies became available.

Elliott became Dean of the Faculty of Medicine from 1959 to 1963. He retired in 1967 to return to the Cape where he grew up. Wits conferred and hon doctorate on him. He died in 1975, ironically of an illness requiring ventilation in an ICU – the use of which he had pioneered.

### **Arthur Rubenstein added a few thoughts on being Elliott's Medical House Officer**

In 1960, I was invited to join Professor Elliott's ward as an 'intern' for the first 6 months after graduation. I was honored and excited to be chosen to be his house officer. And so, I very much looked forward to my orientation by his registrars. Imagine my surprise when 90% of the time of the orientation was spent on instruction devoted to how to manage the "teatime" period that preceded rounds and was obviously of great importance. I learned how to brew tea to perfection, which crockery to use, how and when to serve, and in what order and when it was permissible to talk. The "tea period" was certainly rigorously organized, planned and executed. After imbibing all of this, I asked about patient care, ward rounds, presentations, etc., etc., and was told not to worry as the Sister would organize everything and instruct me how to proceed.

Related to this were wonderful, but very long (and rather boring) dinners at Professor Elliott's beautiful apartment. Jack, his longstanding servant would (maybe together with Professor Elliott) prepare gourmet dinners. The problem was that I invariably fell asleep at some time during these long evenings. I remember well Professor Elliott saying on one of these occasions in his very

gentle voice “Arthur, I do think you should go to the washroom and splash cold water on your face” in the hopes that this would wake me up.

Despite all of this, I learned a great deal, mainly from the amazing registrars as well as Professor Elliott, who was always a strong supporter of my career.

Read a fuller profile and appreciation by Andre with a note from Arthur by clicking this link [Elliott, Professor Guy Abercrombie](#)

## Professor of Surgery DJ ‘Sonny’ du Plessis

As we started our clinical years, in 1958 a new Professor of Surgery was appointed at Wits. He was also appointed chief of surgery at the Johannesburg General Hospital. This was **Daniel Jacob (Sonny) du Plessis**.



He, like Professor Elliott, was a UCT graduate. Also after distinguished service in the Second World War as captain in the South African Field Ambulance and with the British 8<sup>th</sup> Army in North Africa, he did post-graduate surgical training. This was at the universities of Cape Town and Witwatersrand, working for a time at Baragwanath Hospital. In 1951, he travelled to England on a Nuffield Scholarship spending time at Oxford University and, in

London, at St. Mary and St. Thomas hospitals and gained his FRCS. He had served as lecturer in surgery at the University of Cape Town and staff surgeon at Groote Schuur Hospital before taking up the Chair at Wits.



## **Professor du Plessis' Surgical Unit, January to April 1959**

Back Row: Mike Plit, Naomi Livni, Dr V Sorour (SHO) Arthur Rubenstein, Sister Welsh, Mister Allan, Professor du Plessis, Mr Muskat, Sister Bowles, Mr C Toker, Dr R Roussel (SHO), Mr L. Stein  
Front Row Irving Lisssoos, Rodwin Jackson, Avroy Fanaroff, Allan Gottlieb, D Levin, Dr B Krengel.  
(Missing Miss Gloria Davis)

Du Plessis was a hard taskmaster, expecting unswerving dedication from his staff, but he always led from the front. **Avroy Fanaroff**, third from the left crouching in the front of this picture above during his student rotation with Prof du Plessis from January to April 1959, remembers:

'We had to arrive at work at 6.00am because we had to do the haemoglobin, blood count and urinalysis on all our patients before rounds – you were forbidden to use the lab.

'When your patients went to surgery, you accompanied them. Your 10-minute surgical scrub was supervised by the operating room nurse, who invariably found some fault and started you over again, so by the time you entered the theatre they were completing the case and you saw nothing or else they tucked you away from the action holding a retractor for the duration of the procedure.'

Avroy recalls when he and **Rodwin Jackson** were interns. 'For the first time in months we went to the movies. Suddenly Rodwin realized he did not have a gall bladder series which he needed for the next morning's rounds. He left the movies, called a radiographer friend who met him at the General Hospital and had the X Rays done. So, the next morning, when Prof asked for the X rays, they were available.'

Later in his career, du Plessis served as Vice-Chancellor of the University of the Witwatersrand (1979-1983) which awarded him the degree of Doctor of Laws, *honoris causa*. He died in 1999, aged 81 years

## **Other Teachers we Remember at 'The Gen'**

### **Dr Abraham Agranot**

**Arthur Rubenstein** was also on Dr Agranot's firm and sent us this picture which includes seven of the nine members of our class in his 'firm'.

**Avroy** says: This picture must have been taken in 1958 when we were in fourth year, because there are final year students in the picture including Glick and Friedman. Harold Waldbaum who became an ENT specialist was one of the housemen. I have no recollection of anything about Agranot, but his registrar Hyam Isaacs, sitting in the front row on the extreme right, influenced us a lot. He was a great clinician and teacher who had developed an expertise in muscle disorders

and was able to show us a variety of these patients. Our firm maintained a relationship with him and went to him for tutorials.



**Dr Agranat's firm 1958:** Back row left to right:

**Allan Gottlieb, Mike Plit, Avroy Fanaroff, Gloria Davis,** Dr A Pienaar, Dr E Toker, Dr Spitz, Dr B Politzer, Dr Shaffer, **Arthur Rubenstein, Rodwin Jackson,** Miss R Katz, M Friedman, I Glick, S Patterson, J Liebenberg, **Irving Lissoos.**

Front Row: Dr H Waldman, Dr R Gollch, Dr Levin, Dr Freid, Dr A Agranat, Dr D Ovedoff, Dr Horwitz, Dr Hyam Isaacs.

**Rodwin Jackson** adds: All the members of our firm were excellent students and colleagues which made our three clinical student years so memorable and enjoyable. Friendships have been maintained to this day. All have done well in their careers. We had good clinical teaching from all the Consultants but, for me, the most inspiring teacher was Hyam Isaacs who was a registrar. He was an excellent diagnostician and had a special interest in congenital myopathies about which he was writing an MD thesis.

**Len Kahn** remembers when he was a newly-appointed houseman in Agranat's firm he greeted the chief with: 'Good morning, Dr Agranat', only to receive an angry 'What?' in response. The charge-nurse whispered the correct greeting in his ear: 'Good morning, Sir,' whereupon the haughty physician began the ward round.



## Dr Mosie Suzman

**Avroy Fanaroff** remembers much more from working with Mosie Suzman. He and **Chris Bosman** had the privilege and pleasure of being housemen with him. They recall Dr Suzman as a remarkable teacher and mentor. He gave his students, interns and patients as much time as needed before leaving for his consulting rooms.



What set Moses Myer Suzman apart, was his refusal to accept conventional wisdom. Voracious reading and an encyclopaedic memory combined to make him a formidable destroyer of pet medical theories. At our weekly conferences attended by many specialists, he would delight in taking a contrary view. Needless to say, he would often be proved correct.

Avroy wrote: 'He was very gentle with me when I presented the ECGs of three patients who had all died after being admitted the previous night with massive myocardial infarctions. He said that based on their presentations in shock and their ECGs they had no chance of surviving. He was not gentle however when I had to consult a chart during a conference because the patient had so many admissions, and I could not remember all the details. That only happened once.

Mosie was a pioneer, decades ahead of his time, in the use of anticoagulants such as Warfarin for MI patients. Avroy and **Andre van As**, both attest to the difficulties of running the weekly clinic where they had to adjust the dose of anticoagulants for the cardiac patients. It was a massive undertaking as there were often 200 to 300 patients attending the clinic. And they were dealing with a very inexact science in those days, with the risk of starting major bleeds or causing repeated clotting. Andre notes that it is interesting that currently anticoagulation is back in vogue for the long-term management of MI.

Generations of Wits medical students found Mosie Suzman inspiring, awesome and warm.

His wife Helen Suzman, one of South Africa's most famous MPs, said: 'Whenever I travelled overseas on political business, some doctor would come up to me and say: 'I learnt all my medicine from Mosie on Ward 11 of Johannesburg General Hospital.'

You can read a fuller profile and appreciation of Mosie, and a picture of his family, compiled by Avroy with added notes from Andre by clicking here [Suzman, Moses Myer](#)

## Transvaal Memorial Hospital for Children (TMH)

**Notable pediatricians: Solly Levin, Sam Javett, Seymour Heymann and Hessel Utian**

In his biographical sketch on our website, classmate **Jack Kussel** writes that his love for clinical paediatrics was born, inspired by **Sam Javett, Seymour Heymann and Hessel Utian**.

Heymann, born in Pretoria in 1902 was paediatrician-in-chief and trained generations of paediatricians. He was in private paediatric practice together with Sam Javett and Hessel Utian.

At 66, Heymann emigrated to the USA to work at the Children's Hospital Medical Center of



Northern California, Oakland, where he continued to train paediatric residents. Heymann died in California in 1997, aged 95 years. Hessel Utian, was born in 1932. He was thirty years younger than his mentor. After graduating MB BCh from Wits

medical school in 1954, Utian worked at the Hospital for Sick Children, London and obtained a Diploma in Child Health and MRCP (Edin). Utian maintained a teaching and clinical position with Wits medical school for many years. He died in 2012, aged 80 years.

**Avroy Fanaroff** remembers: When we were students and house officers there were six chiefs, Doctors. **Heymann, Javett, Theron, Parnell, Kessell** and **Levin**. Until about 1965 there were only two medical and two surgical senior house officers (SHO's) and one registrar, Dr **Hessel Utian**. The SHO's were on call alternate nights and rotated the Sunday so we could be on call from 8.00am on Sunday till 5.00pm on Tuesday!

Furthermore at least once a week the SHO was responsible for the Casualty from 10.00pm.

The teaching was magnificent and the variety of cases remarkable because we were getting referrals from all over the Transvaal Province and also Portuguese East Africa. Sick, malformed and premature babies from the Queen Vic Maternity Hospital were also sent to TMH. The students did six-week rotations.

**Sam Javett** was the most outstanding teacher. He used algorithms before we were even familiar with the term and was often consulted by the internists when they had complicated patients. The Paediatric Department got its first University chair Boet De V Heese in 1968.

### **Professor Solly Levin – Pediatric Cardiologist**

Another pediatrician who made a great impact on our class was Professor Solomon E Levin.

**Avroy Fanaroff** and **Aubrey Milunsky** were both very sad to hear that their revered teacher and mentor, Solly Levin had died of Covid-19 in July 2020, just a few days after his beloved wife Cynthia had also succumbed. They say: He was the epitome of the Academic Pediatrician. He was a marvellous clinician, excellent teacher and investigator. Solly was extremely knowledgeable, inquisitive, a great listener, wonderful mentor, and kept meticulous records including photographs. He did not have a mean bone in his body. They both felt certain that Solly's interest in them and role model had contributed to their own passion for paediatrics. They have written a fuller sketch of their feelings about Solly Levin here [Levin, Solomon](#)

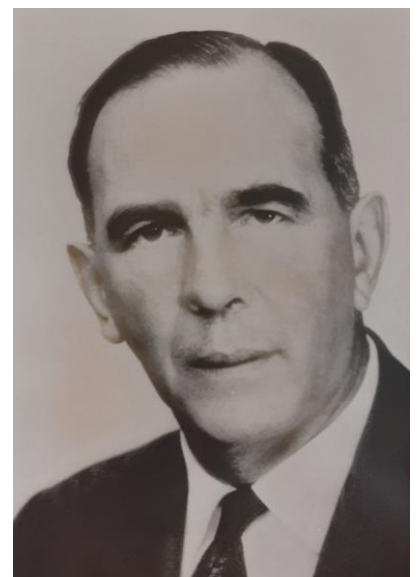
### **Queen Victoria Maternity Hospital**

In 1943 the Queen Victoria Maternity Hospital moved to a new building (shown left as it was in 1960)



across the road from the Transvaal Memorial Hospital for Children.

In the shake-up of medical provision in 1946, **OS Heyns** was appointed first **Professor of Obstetrics and Gynaecology** at Wits Medical School and chief of OBGYN at the Johannesburg General.



His authority also covered the Queen Victoria Maternity and Coronation Hospitals.

## **OS Heyns' Abdominal Decompression**

In 1959, Heyns published a paper on *Abdominal Decompression during the First State of Labour*. Heyns had developed the 'birth-suit' made of plastic with a fibre-glass dome over the abdomen. It had a pressure gauge and a vacuum pump as used in an ordinary household vacuum cleaner. He claimed that his device brought obstetrics 'into the age of technology'.

Experimenting on pregnant women at the Queen Victoria and Coronation Hospitals, Heyns advised that they wear the suit for a half hour during the last ten weeks of pregnancy and right through the first stage of labour. He said that with decompression, the abdominal muscles were lifted off the uterus, enabling the uterus contractions to speed the expulsion of the child into the world. Not only was the delivery shorter and less painful, but the women produced he said 'a harvest of exceptionally bright children [with] IQs ranging from 110 to 173'. Professor OS Heyns was lauded as 'one of the unsung heroes of modern obstetric care.' His co-authored book *Decompression: A New Medical Breakthrough* promised easier and safer pregnancies, shorter labour, and healthier and brighter children. OS Heyns retired in 1967.

Unfortunately, the success of Heyns' birth-suit was largely built on hype and the subjective claims of mothers that their children were exceptionally bright. In 1990, J Justus Hofmeyr, professor of Obstetrics and Gynaecology at Wits University reported in a carefully controlled study that "the manifestly unrealistic claims" by mothers of their children's abilities was simply "not the case". Hofmeyr suggested that the birth-suit and foetal decompression be relegated to the history books.

Ockert Stephanus Heyns was also Dean of Medicine in our time, from 1957 to 1958.

## **Coronation Hospital**



The large and busy 147 bed Coronation Hospital, in the suburb of Coronationville, near Sophiatown opened in 1946. It would serve the Coloured and Indian populations of Newclare,



Noordgesig, and Coronationville. In our time it also took Black patients from Primville, Orlando and [Sophiatown](#).

The surgical Chief at Coronation in our time was **Boris Lewin**, who was later appointed Associate Professor of Surgery at Wits in 1969. The Chief Physician at Coronation was **Sydney Grieve** who was later appointed Professor and Head of the Department of Medicine at Wits Medical School.

**Ronnie Auerbach** remembers his surgical house job there with **Mike Jaffe, Gerald Shulman** and **Kleintje van Veen**. Intake nights were very busy, often stretching into the morning session as there were so many admissions for the registrars and house staff to deal with. Mostly it was trauma: fights, stabbing, head injuries, motor or bike accidents as well as acute illnesses like appendicitis. **Jerry Jersky**, the superb surgical registrar took it in his stride, even repairing stabbed hearts (of course with no heart-lung machines).

The influx of visitors had to be managed. When visiting time started and the wards filled up



rapidly, the porters closed the doors and only let more in when others had left. When they once did a survey on the visitors they found that 10% of visitors had no specific patient to visit – but had come as a social activity – either for themselves or for patients who had no company.

On Sundays, the Salvation Army Band would come and play in the courtyard between the ward blocks (seen in the picture above) for the benefit of the patients' souls – but to the annoyance of the staff! (The white bit in the picture seems to be a new addition.)

## Baragwanath Hospital

Working at Baragwanath Hospital was an invaluable learning experience because of the number of patients and the wide range of pathology encountered.

**Andre van As** tells us that **Asher Dubb** physician at Baragwanath Hospital and subsequently principal physician and professor of medicine was 'a classic example of the interactive teacher who made the process an adventure'. Born in 1928 in Somerset East, Dubb graduated from Wits medical school in 1950. Dubb did his house jobs at Baragwanath Hospital and served as

medical registrar at Coronation Hospital. Dubb was a mentor and role model to generations of medical students, interns and registrars, with his inspiring bedside rounds, his courteous approach to patients, his almost obsessive attention to detail, his encyclopaedic knowledge of medicine and his dazzling deductive powers.’ Asher Dubb died 2005, aged 77 years.

In [Newsletter #2 – Baragwanath](#) **Avroy Fanaroff** and **Jeffrey Maisels**, who both became neonatologists, describe their experiences working in the premature baby and children’s wards at Baragwanath Hospital. (Click the link to read the Newsletter).

**Jeff Maisels** says: ‘As Av and I have said, Bara is and remains a unique institution representing at various times both the best and the worst of South Africa although, even at the height of apartheid, provided a remarkably high quality of care and was staffed by a truly dedicated group of physicians who were superb clinicians and teachers.

**Jeff** thought you might like to play this dance video, filmed at Baragwanath Hospital, (see below) with participation by Baragwanath Hospital staff – and possibly patients too. He says: ‘The hospital facility was truly third world, and much of it is still that way, but the dance performance does display the remarkable spirit that still pervades that institution.’

**Avroy** says: ‘**The "Jerusalema" dance challenge** is taking social media by storm. People around the world are sharing videos of themselves dancing to the hit song ‘Jerusalema’ by South African musician Master KG, featuring the voice of South African songstress Nomcebo. Master KG told local news that the viral trend started with a candid video clip of friends doing the choreography. Dancers have also put a twist on it by coming up with their own moves. Social media users say the challenge is bringing the world some much-needed positivity’.

**Baragwanath hospital is a village. This musical video with images of the hospital** depicts the teamwork and joy of dancing in an incredibly well coordinated manner. The choreography is spectacular with many many participants and the African beat and singing makes for a most enjoyable experience. **Click here for the Joyful dance video, filmed at Baragwanath** <https://youtu.be/a6BnqDxmJvg>.

## **Alexandra Health Care Centre Memories of on-call**

In our final year at Medical school we had a six-week stint at the Alexandra Health Care Centre. This was situated in Alexandra Township (see below). It was a crowded Black township that had grown up on what was then the edge of white suburban Johannesburg – and was now surrounded by it. Covering just a square mile, in our time it was home to 20,000 or more impoverished Black families. There were attempts by the Apartheid Government to eradicate it altogether, but they failed. You can read about this here:

<http://www.theheritageportal.co.za/article/why-alexandra-survived-apartheid>



The Health Centre had been set up in the 1920s by the American Board Mission (ABM). In 1939 when the ABM charity withdrew its funds, to focus on other projects, a new charity took over. At this time, **a symbiotic relationship was formed between the University of Wits and the clinic.** This became a valuable training facility for students, under a full-time Medical Director – and provided free medical services for the clinic.

The students were required to sleep there when we were on call. This was the one rotation where we had the sole responsibility for the management of patients after hours. After 4.00pm the students were the only medical staff present.

Colleagues may remember that when they were on call, each night the porter would come to the students' quarters, knock on the window and hold up a number of fingers, indicating how many possibly critically ill, or trauma patients had arrived to be seen.

He usually held up one or two fingers at a time. But **Ronnie Auerbach** recalls one night when he held up a whole hand. Arriving quickly in the treatment room, the students on call were faced with five unconscious patients, a mother, grandmother and three children. There was no sign of injury. They had never come across this before and they had no idea what to do. It took ages for them to find and pore over all the available textbooks. They were beginning to despair when they noticed that all the patients had started to come round. They had apparently been overcome by carbon monoxide poisoning (which was quite common in their cramped and ill ventilated



homes). Having spent an hour or more in the fresh air, they returned to health and were duly sent home.

Students were meant to make home visits on bicycles, but because of the rabid dogs, they tended to travel by car, carrying with them medication samples donated by various drug companies. **Andre Van As** remembers a nurse giving him a list names and addresses of patients that needed to be visited for follow up. He entered the homes that had no windows, were pitch dark and had the seriously ill patients that should have been in hospital lying in their beds unattended. One patient that stands out in his memory was an elderly man with severe heart failure and his medication had to be adjusted without the help of the usual tests that guided the dosage of digitalis and diuretics.

## Other leading teachers in our time

### Maurice Arnold – Anatomy Teacher

We remember Maurice 'Toby' Arnolds skilful teaching, and amazing drawing on the black-board – with in both hands simultaneously. Always wearing white gloves, he would start with a meticulous drawing of the bony underlay of a region. He would add to this the ligaments and tendons, then the muscles, nerves, blood vessels and viscera. This teaching method was the basis of his second book, published in 1968, ***Reconstructive Anatomy***. For nearly half a century,

Toby Arnold taught Anatomy, for over 50 years, first at Wits Medical School and then in Australia. Professor of Anatomy, Philip Tobias described him as displaying 'single-minded enthusiasm, encyclopedic knowledge, integrity and accessibility.'





Avroy and Ronnie remember the collection of anthropological, life and death face masks lining the anatomy halls. They were made by Professor Raymond Dart and his students on field trips around Africa, showing the different features of the varied peoples of Africa. Faces of former Wits students who had engaged in facial casting workshops are also included. Avroy says that amongst these, Toby Arnold's own face mask was very prominent.. You can read a fuller biographical sketch and see a link to more details about the masks here [Arnold, Maurice \(Toby\)](#)

### **Harold (Harry) Cecil Seftel** – Chief Physician Baragwanath Hospital

Harry Seftel was appointed Wits **Professor of African Diseases** and chief physician at the Non-European Hospital. There he set up the Wits Carbohydrate and Lipid Metabolism Research Centre, focusing on obesity, diabetes, hyperlipidemia and coronary heart disease, leading to many scientific papers. Harry had qualified MB BCh in 1952, a mere eight years before our class. Both his parents died of smoking-related illnesses. Harry built his career promoting a healthy lifestyle; no smoking, exercise and a fish and fibre diet. In 1976 he formed the National Council against Smoking. Harry Seftel was able to discuss health matters in laymen's terms. Starting in the 1990s, Harry Seftel took his message to the airwaves with his "A word on medical matters" show on Talk Radio 702. Wits conferred an hon Doctorate on him.

### **Leo Schamroth** – Professor of Medicine and chief physician Baragwanath

Leo Schamroth graduated from Wits medical school in 1948 and joined the staff at Baragwanath in 1956. He wrote *An Introduction to Electrocardiography* (1957) followed by *The Disorders of Cardiac Rhythm* and *The Electro-cardiology of Coronary Heart Disease*. Wits awarded him MD in 1965 and DSc in 1970. In 1972 he was appointed Professor of Medicine and Chief Physician at Baragwanath, where he remained until his retirement, owing to ill health, in 1987. He died in 1988 ages 64 years.

These highly skilled physicians often subjected medical students and house-officers to a lot of good-natured abuse. If a student made a mistake reading an electrocardiogram, Dr Schamroth was prone to announce: 'A shame and a disgrace. He went to college and wasted his father's money.' If a young doctor made an error, Harry Seftel would criticize him in front of his peers: 'Gentlemen, we are standing in the presence of a monumental error.'

### **Professor Watt** – Pharmacology

You can see the photograph Gary Katz has found of our pharmacology class in 1957 here with Professor Watt in his final year at Wits.

[https://wits\\_medical\\_alumni\\_1960.mailchimpsites.com/photographs](https://wits_medical_alumni_1960.mailchimpsites.com/photographs)

## In conclusion

Medical care in racially segregated Johannesburg of the 1950s was of a very high standard, across the board. Wits graduates travelled abroad to study and specialise in the most advanced centres of the world. Many returned to serve the South African population as clinicians and teachers. In the White areas the services strove to be equal to anywhere in the developed world.

Even in the overwhelming circumstances of looking after a huge and impoverished Black communities at Baragwanath, at Alex or at the Non-European or Coronation Hospitals, we encountered the same skilled, innovative and dedicated medical staff, and gifted teachers eager to do the very best for the health of the people they cared for. As our colleague Geoff Boner said: 'We can all be extremely proud of the achievements of members of the class in a wide variety of fields of medicine. It is truly an expression of the training which we received at Wits Medical School.'

If you have further memories of hospitals or teachers you would like to share, please do send them to me and we can add them. [chaimrosenberg@aol.com](mailto:chaimrosenberg@aol.com)

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## Our Contributions to the Phillip Tobias Bursary Fund

I want to stress again that this exercise, in remembering the class of 60, is not about self-congratulations – although much if that is due. It is rather about us coming together to help a new generation of young men and women become doctors and go out into the world to make a difference today.

If each one of us will make a reasonable contribution we will easily reach our target of R400,000 Rand. Already, with only nine donors (sadly too few) we have already achieved over R120,000. So please go to this button and give your share to a young Wits medical student through the Phillip Tobias Bursary Fund today. It's easy to donate, in any currency here:

[https://wits\\_medical\\_alumni\\_1960.mailchimpsites.com/donate](https://wits_medical_alumni_1960.mailchimpsites.com/donate)

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**Next time ... in our Newsletter #6** we plan to write about our colleagues who served the population of South Africa in numerous ways in big cities or smaller centres. And we look at the changing face of medicine in South Africa over the last 60 years.

Please send me your contributions as soon as possible so that they can be included.

[chaimrosenberg@aol.com](mailto:chaimrosenberg@aol.com)

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## Thanks to helpers and supporters

Our thanks to all who have contributed to this Newsletter #5. Special thanks to **Avroy Fanaroff** who has sent us so many memories and pictures of student and early clinical days. Thanks also to **Andre Van As** who has provided a wonderful portrait on Professor Elliott, which you can see on the website together with Avroy's profile of **Mosie Suzman**, my profile of **Toby Arnold** and Avroy and **Aubrey Milunsky's** profile of **Solly Levin**. See them listed with links in a box at the bottom of the Who's Who page, [https://wits\\_medical\\_alumni\\_1960.mailchimpsites.com/whos-who--the-class-of-1960](https://wits_medical_alumni_1960.mailchimpsites.com/whos-who--the-class-of-1960)

We are very grateful to have as our editor **Geraldine Auerbach MBE** in London who creates from our contributions the elegant and easy to read narratives that appear in our Newsletters and biographies. In this, she is greatly helped by wise counsel, proofreading and supplementary research from her husband, our classmate, **Ronnie Auerbach**.

We are all very fortunate to have the warm support of the **Wits Alumni Office** and its American Representative **Nooshin Erfani-Ghadimi** who has created and manages the Class of 60 Website so beautifully and efficiently. The website home page has been upgraded and you can see yourself in our final year photograph by clicking here.

[https://wits\\_medical\\_alumni\\_1960.mailchimpsites.com/](https://wits_medical_alumni_1960.mailchimpsites.com/) .

Keep your comments and stories flowing

Yours very warmly

Mike (Chaim M Rosenberg) [chaimrosenberg@aol.com](mailto:chaimrosenberg@aol.com)

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## Newsletter #5 – Clinical Training

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