

Doctoring in Antarctica: then and now

Dr John Birss recently returned from Davis Station, where he attended to the medical needs of wintering expeditioners – 26 years after his first Antarctic experience at Mawson.

My first trip to Antarctica was to Mawson Station in 1978 – back in the dog days. It was very different back then – very basic. We lived in converted freezer boxes that were heated inside. It was mostly all-male crews, although a female doctor had been appointed at Macquarie Island in 1976. But I was stationed with 28 men for 12 months.

When I applied for the job in 1978, the big question was whether I was capable of opening a belly. Could I do an appendix if I had to? Had I been managing general practice and casualty work? We didn't have as extensive a training programme as we have now and certainly no dental skills. If someone had a sore tooth, we'd put the pliers on it and take it out. Now we spend two weeks at the dental hospital in Melbourne learning how to do root canals, fillings, scaling and polishing. It's one of the more interesting aspects of the job for me now.

Communication was the difficult thing back in '78. We used to use telex or a single satellite phone that you had to book time on. If the weather was bad we couldn't communicate with Australia. Communications were out on the day I was faced with a case of acute appendicitis. Normally we'd get a surgeon to check whether we really needed to go ahead with an operation, but I had to tell them 36 hours after the event.

I remember the sweat was pouring off me. Even in those days, if you tried to do what we did in Antarctica, in Australia, you'd be hauled before the medical board for doing the wrong thing. You must never do both the anaesthetic and the operation on the same patient. But there's no-one else in Antarctica to help you. I had to anaesthetise the patient and then hand him over to people who had trained as anaesthesia assistants, but had never

Dr John Birss (second from left) and nursing and anaesthetic assistants (Peter Murphy, Mark Watson, David van Duyl and Matthew MacDonnell) simulate abdominal surgery on a volunteer at Davis Station, during training.



Happy customers – the real patient, Davis Station Leader Bob Jones, is flanked by sympathisers, Steve Morrow (left) and David van Duyl.

worked with a real patient. Then I had to scrub and make sure that the chef, who was assisting me, was also scrubbing and dressing properly. Then I had to show him which instruments to give me because he didn't know their names.

I had an excellent book which had step-by-step photographs of an appendectomy. So I had my assistant across the table turning the pages for me while I did the operation. It helped me work out the alignment of muscles so that I made the correct incision.

Our medical assistants have much better training now and communications have really improved. Last year I was faced with a nasty fracture dislocation. I'd never seen one before, but I was able to speak to a number of orthopaedic surgeons in Australia and send them X-rays of the injury for advice.

As a result of my experience at Mawson I decided to refresh my surgical skills for the 2004 trip. I worked with two surgeons intermittently and assisted them in operations. I ended up proficient at doing appendix, hernias, open abdominals, laparoscopic gall bladders, caesarean sections and a fair bit of general surgery. It was good to have had that experience at Mawson because I had a better idea of the skills I might need second time round.

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