



Queen Square Alumnus Association

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Contents

Editorial 02

A call for contributions



News 03

A round-up of the latest news from Queen Square



News – New Initiatives 05

An update on grants and projects awarded at Queen Square

Alumni News 06

News, views and recollections from your fellow alumni

Upcoming Events 07

A sample of events on offer over the next few months

Queen Square Interview 08

The Editor interviews Professor Mary Reilly on her career at Queen Square

Alumni Interview 11

Professor David Landon talks about his time at Queen Square

Obituaries 15

Professor Andrew Lees talks about his memories of Dr Christopher Earl



Focus on Sri Lanka 16

An Institute of Neurology, from the people for the people
Deshamanya Dr J B Peiris, MD,FRCP

Out of the Archives 19

An update on the discovery of a document written by Dr Huglings Jackson

Photos from our Archives 20

A look at some of our photos from our archives

Front Cover Explained 21

A look at the front cover and a request for help!



EDITORIAL

A call for contributions!

We've made it to the 3rd edition of the newsletter and as with the previous two editions I have been fortunate to find people willing to contribute articles and to be interviewed. I would really like to have views, comments and memories of Queen Square from all of you, along with suggestions for improvements in how we can make both the newsletter and the Association stronger. One of the most amazing things about being at Queen Square is the amount of different people who have passed through here, and this association is truly international. I think it would be interesting for us all to get views from across the world and updates on developments with education and medicine wherever you are in the world. So please get in touch!

I am very grateful to Professor Mary Reilly who agreed to be interviewed for this edition and who provided interesting and informative answers to the questions posed. Our alumni interview is with Professor David Landon, who shares his recollections as former Dean of the Institute of Neurology. I am delighted to have contributions to this newsletter from one of our alumni, Dr JB Peiris, who has written a piece on the formation of a Neurological centre in Sri Lanka. We also revisit edition 2 of the newsletter with an update on the discovery involving Hughlings Jackson in our "Out of the Archives" section, and look at a picture held in the Library of the Queen Square Social Club.

I would like to thank the following people, without whom this edition of the newsletter would not have been possible; Professor Andrew Lees, Professor Simon Shorvon and Ms Louise Shepherd for their continued support and enthusiasm, Professor Mary Reilly and Professor David Landon for agreeing to be interviewed and sharing so many memories with us all, Dr JB Peiris for his article, Miss Jean Reynolds for proof reading, Medical Illustration and the Queen Square Library for several photographs used in this edition.

I hope you enjoy this edition of the Queen Square Alumnus Association Newsletter, and please get in touch.

David Blundred

Prime Minister Visits UCL Institute of Neurology

UK Prime Minister David Cameron visited the Dementia Research Centre at UCL as part of the government announcement that dementia research funding will be doubled to £66 million by 2015.

The Prime Minister visited the Centre, as well as the National Hospital for Neurology and Neurosurgery (NHNN). He spoke to clinicians and academics about their work, as well as patients involved in UCL research.

Referring to dementia as “one of the greatest challenges of our time”, Mr Cameron said: “We’ve got to treat this like the national crisis it is. We need an all-out fightback against this disease, one that cuts across society. This is a personal priority of mine, and it’s got an ambition to match. That ambition – nothing less than for Britain to be a world leader in dementia research and care.”

Professor Michael Hanna, Director of the UCL Institute of Neurology, who met the Prime Minister, said: “Neuroscience research at UCL is already of world-leading quality – but faced with the enormous challenge of dementia, excellent neuroscience needs to translate into new therapies. There are world class research teams at the UCL Institute of Neurology who are developing new experimental treatments for dementia and this critical mass of expertise is set to increase in coming years. We share the Prime Minister’s ambition to place the UK at the very forefront of medical research in this area, helping to find treatments for patients. Any initiative that will help in achieving this goal is to be applauded.”

Professor Martin Rossor, UCL Institute of Neurology, said: “We were pleased to welcome David Cameron to the Dementia Research Centre to tell him more about our research. In particular, we discussed the challenge of early and accurate diagnosis of the causes of dementia and this access to prompt, accurate diagnosis is something the prime minister emphasised in his speech. It is excellent news that the government has pledged more money for this area of research, which is so desperately needed.”

UCL scientists are at the forefront of dementia research, working closely with clinicians at partner hospital the NHNN, part of University College London NHS Foundation Trust. This partnership brings together clinical and scientific excellence in the search for effective diagnosis and treatment for devastating neurological diseases.

UCL is Europe’s research powerhouse in neuroscience – ranked second in the world, and first in Europe, in neuroscience and behaviour by Thomson ISI Essential Science Indicators, and with more than twice as many publications and citations as any other European institution.

Neuroscience is a strategic priority for UCL, spearheaded by the new Faculty of Brain Sciences. UCL recently received a £20million grant from the Wolfson Foundation to establish The Leonard Wolfson Experimental Neurology Centre at Queen Square, which will be dedicated to the understanding and treatment of neurodegenerative diseases. This is the largest single award ever made by the Foundation and one of the largest philanthropic donations in the university’s history.

The Centre will accelerate the development of treatments and identify future therapeutic targets for neurodegenerative diseases, with the aim of earlier intervention for patients.



Professor Simon Shorvon appointed Harveian librarian at the Royal College of Physicians

Congratulations to Simon Shorvon, professor of clinical neurology at the UCL Institute of Neurology (Department of Clinical and Experimental Epilepsy), who has been appointed Harveian librarian at the Royal College of Physicians

Professor Shorvon has a long-standing interest in historical aspects of medicine and in bibliographic studies, as well as wider publishing and editing experience. Simon takes up office in late July and will be responsible for preserving the 494 year old organisation's history as well as developing modern, historical and archive collections.

Commenting on his appointment, Professor Simon Shorvon said:

'It truly is an honour to be appointed Harveian librarian, the RCP has a magnificent library, and fascinating history and archives. I look forward to developing the collections and helping many more people enjoy the treasures held within the RCP's collections.'

Professor Shorvon is the 16th Harveian librarian, a role that dates back to 1654.

Prestigious European Science Foundation networking grant awarded to Institute of Neurology professor

Congratulations to Professor Xavier Golay (Department of Brain Repair & Rehabilitation), who has been awarded a networking grant from the European Science Foundation COST office, the first grant of this kind awarded to UCL. The prestigious award will be used to support the Arterial Spin Labelling (ASL) Initiative in Dementia (AID) Action network, which aims to coordinate research in this area and optimise the use of facilities already existing in Europe. The network, which runs for four years, held its first networking event with the official Kick-Off Meeting in Brussels in December 2011.

International project to determine vascular contribution to neurodegeneration begins

Congratulations to UCL Institute of Neurology scientists, Dr David Werring and Professor Nick Fox, who are part of an international team of scientists that has recently been awarded funding from the Centres of Excellence in Neurodegeneration (CoEN) to study how vascular disease contributes to neurodegenerative disease. The project, titled *Standards for Determining the Vascular Contribution to Neurodegeneration*, aims to create a common, albeit expert set of definitions and terminology to describe neuroimaging findings related to diseases affecting brain small vessels. These diseases, including hypertensive arteriopathy and cerebral amyloid angiopathy, are among the commonest to affect the brain and are key causes of stroke and dementia.

Dr Werring commented: "Vascular pathology – especially processes affecting cerebral small vessels - is now emerging as a key contributor to cognitive impairment in later life, yet has until recently been largely neglected in the field of dementia research. This impressive international effort will bring a much-needed boost to research into links between cerebral small vessel disease and neurodegeneration, which could potentially create new strategies for treatment and prevention of this major healthcare challenge."

Parliamentary Group Visit the Institute

Members of the All-party Parliamentary Group on Parkinson's Disease visited the UCL Institute of Neurology on the 25th May 2012 to see at first hand the research being done at UCL to understand the causes of Parkinson's and to develop novel treatments for the disease.

Research into Parkinson's Disease at the Institute spans fundamental research into the genetic origins of the disease, cellular studies of neuronal death and clinical interventions aiming to improve quality of life. The visit, co-organised with the charity Parkinson's UK, brought together parliamentarians, patients and researchers.

Baroness Gale, chair of the group, said: "This was a fascinating opportunity for members of the Parliamentary Group to see some of the research that's being done into the causes and treatments for Parkinson's. This gave me an insight into how much progress has been made, but also what still needs to be discovered".

Professor John Hardy, Head of the Department of Molecular Neuroscience at the UCL Institute of Neurology and a leading researcher into the genetics of Parkinson's, welcomed the visit: "Parkinson's disease affects 127,000 people in the UK directly as well, of course, as affecting their families and friends. It was gratifying to have the all party group come to the Institute and to see the enthusiasm and commitment of the young researchers and clinicians we have working on the disease. It is also very good for us as researchers to meet and talk to people personally affected by the disease".

Professor Nick Wood, Galton Chair of Genetics and Consultant Neurologist at NHNN, said: "Parkinson's is a common neurodegenerative disease and there is a pressing need for research to understand the causes and develop therapies. It is therefore vital that policy makers have insights into the progress being made and the potential for therapeutic intervention to help modify and ultimately cure this devastating disease."

The UCL Institute of Neurology is the lead partner of the UK Parkinson's Disease consortium, funded by a £5.9 million award from the Wellcome Trust and the Medical Research Council as part of their neurodegenerative diseases initiative.

Alumni News, Views and Recollections

I first came to Queen Square in 1971 as a house officer with the William Gooddy, Ralph Ross Russell and John Morgan Hughes firms, also assisting Roger Bannister and Joseph Blau in the outpatients. Dr Ross Russell also selected me to run Professor McDonald Critchley's Dyslexia clinic and to do his clinic when he was on leave. I remember Dr Gooddy's stimulating discussions on cortical neurology and RRR's Friday ward rounds which culminated in the Queen's bar. I recall how Dr Morgan Hughes asked me to see an Arab patient who could not speak English. He was in a private hospital at the far end of Queen Square just beyond the Homeopathic hospital, he complained of headaches after minor head trauma, and I asked for a carotid angiogram to exclude a SDH on the strength of a unilateral extensor plantar. I was rewarded by Dr Morgan Hughes with the princely sum of UKP 40/- for a 'brilliant' diagnosis! On the social side, my wife and I were invited for a Sunday lunch by Ralph and Flora, while Dr Gooddy invited us to his West London apartment for cocktails. Sir Roger was due to be the chief guest when I was the President of the 125 year old Sri Lanka Medical Association, but decided to cancel his trip when President Premadasa was blown to smithereens by 'Tigers' at a May Day rally.

My second stint was as a Nuffield Research Fellow with Dr Ross Russell in 1978-79. During this time I rummaged the QS archives to produce the article on giant aneurysms of the carotid system presenting as visual field defects.

Giant aneurysms of the carotid system presenting as a visual field defect

Peiris JB and Ross Russell RW

J Neurology, Neurosurgery and \Psychiatry, 1980,43,12,1053-1064

I did meet Joseph Blau in the QS dining room when I accompanied the then President Chandrika Bandaranaike to QS after she survived a suicide bomber in 1999/2000. I have also given two presentations for the Queen Square Clinical forum on Strokes in the young and Distal spinal muscular atrophy. In a different vein, I am also proud to have organized the first Neurology unit in the Royal Hospital, Muscat, Oman.

Kind regards,

Dr JB Peiris

Please send Alumni news items, recollections and comments to the Editor, Mr David Blundred d.blundred@ucl.ac.uk

UPCOMING EVENTS

Third International Workshop on Functional Neurosurgery: Movement Disorders, Pain, Psychiatric Illness, Ethics

Thursday 11th October and Friday 12th October 2012 (two days)

Approved by 12 CPD credits by Royal College of Physicians of London

Workshop organised by Professor Marwan Hariz, Unit of Functional Neurosurgery

Lectures held
Basement Lecture Theatre, 33 Queen Square

To view the programme please visit our website at
<http://www.ucl.ac.uk/ion/articles/events/functional-neurosurgery-third-international-workshop>

For further details, contact: Linda Taib (l.taib@ucl.ac.uk).

Interview with Professor Mary Reilly



Professor Mary Reilly trained as a doctor in Dublin before coming to Queen Square in 1991 firstly as a researcher and then as a clinical registrar with Professor Anita Harding. Professor Reilly is a consultant neurologist at the National Hospital for Neurology and Neurosurgery and conducts research on Peripheral Nerve Diseases and Neuromuscular Diseases. She has published 239 articles.

What were your first impressions of Queen Square?

I first came to Queen Square to be interviewed by the late Professor Anita Harding for a research post in neurogenetics. My very first impressions were how beautiful the actual square was and what a lovely place for a hospital to be situated. I took up a research project in July 1991 and I was impressed by the unique environment where basic science and clinical research, together with excellent clinical care, co-existed. I was particularly impressed by individuals

such as Anita Harding, David Marsden, P K Thomas and Ian McDonald all of whom exemplified the classical clinical scientist with established expertise in both basic and clinical research and who were exceptional clinicians.

What have you enjoyed the most whilst working here?

I never forget that working at Queen Square is an honour and always feel lucky to have had the opportunity to do so. Without doubt the main attraction is the integrated atmosphere of being able to undertake research and develop a specialised clinical service at the same time. Very few environments actually allow one to do this and Queen Square is unique in this respect. It is also a very enjoyable place to work because of the collegiate atmosphere. It is small enough for almost everyone to know each other and there is a collective sense of loyalty which I very much enjoy being part of.

Is there anyone who inspired you throughout your career?

I have been lucky enough to work with many inspirational people throughout my career. Firstly, during my training in Dublin, I worked with Professor Michael Hutchison, an inspiring clinician, who nourished my enthusiasm for neurology. When I moved to Queen Square in 1991, I worked with Professor Anita Harding but also had the opportunity to train clinically with Professor P K Thomas which was crucial to my learning clinical neurophysiological and pathological investigations of peripheral neuropathies. In the final years of my training I worked with Professor Richard Hughes whose expertise in inflammatory neuropathies has been invaluable to me.

If I had to pick one person who has most influenced my career, it would be Professor Anita Harding. Her untimely death in 1995 at the age of 43 not only left a hole in Queen Square but also for me personally. I worked with her in the area of Familial Amyloid Polyneuropathy between 1991 and 1993 and after that had the opportunity to be her clinical registrar. She was a role model for me both as a clinician and as a woman in medicine. She was also an excellent clinical neurologist who was very intuitive in her clinical opinions.

What she truly excelled in was taking questions from the clinic back into the laboratory. She would try to address these questions, particularly for the genetic neuropathies, and it was from her that I developed my research interest in inherited neuropathies. As a woman she achieved new heights in Queen Square that had not been done previously and at no stage did she allow being female to limit anything she did. That attitude has stood me well. Finally she was great fun and her attitude to life was also how she approached her work; this clear enjoyment of her clinical and research work was something I admired and taught me how productive you can be if you enjoy your work.

What do you think of as your greatest achievement as a clinician/researcher?

My achievements are modest and I do not claim to have made any major ones that stand out. My main aim was to increase the profile and contribute to the understanding of peripheral nerve diseases and of neuromuscular diseases, not only at Queen Square and in the UK, but also internationally.

When I started my clinics these were very much based on the speciality clinic model. I have now introduced translational clinics where every patient seen is asked to participate in a research study. This model of translational clinics was based on my experience of previously working with Professor Anita Harding. I have been able to increase gradually the number of people working on peripheral nerve in Queen Square and, together with Professor Mike Hanna, established a Centre for Neuromuscular Diseases in 2009 and was successfully awarded a five year Centre Grant from the Medical Research Council to establish the Centre for translational research for neuromuscular diseases between Queen Square, ICH and the University of Newcastle. This has allowed us to increase the portfolio of neuromuscular diseases not only in Queen Square but nationally and take a leadership role in the area of neuromuscular diseases. The creation of the Centre has allowed us to become more visible on the international scene and we have formed some very important and productive international collaborations. Genetic neuromuscular diseases are individually rare, but cumulatively they are a major burden of disease in the population and I recognised quite early that the only way of taking research into these diseases further, in terms of developing treatments, was to have national and international collaborations which is something that we have achieved in our Centre.

What are you currently working on?

I am currently working on a large group of projects but they can be summarised into translational research into inherited neuropathies. This research is done as part of the MRC Centre for

Neuromuscular Diseases in Queen Square but also I am a co-director of a large National Institute of Health funded consortium in the United States to research inherited neuropathies, not only in the US but in Italy, Australia and the UK. This includes basic science research looking for new genes in inherited neuropathies, particularly Charcot-Marie-Tooth Disease, and together with collaborators working out how these genes cause these diseases. The second part of this research is studying the diseases, in detail, in humans to work out the various features in individual diseases and most importantly to try to learn about the natural history of diseases so that as therapies come on board we have the tools to study whether these therapies work. This is extremely challenging in very slowly progressive diseases and it has involved us developing a range of novel projects including developing MRI as an outcome measure in neuromuscular diseases. Finally I have been engaged since 2007 in doing interventional trials in genetic neuropathies. The advantage of working at Queen Square is that it allows someone like me to do this range of research from basic laboratory work through to clinical trials in patients.

What advice would you give to a young researcher/clinician embarking on their career?

I regularly speak to young researchers and my main advice is not to worry about whether there is a job available or not available, but to try to work out what they enjoy doing most and then to concentrate on that aspect of the work for the future. In order to have a satisfying and productive career, it is crucial to be able to work on something that you enjoy whether it is mainly clinical or laboratory based work. I also try to impart to young researchers/clinicians how enjoyable it is working in neurology. There is a risk that young researchers and clinicians always hear about how tough things are, both in the Health Service and research, and how difficult it is to get grants and papers published, but I think we really need to impart to them the true enjoyment we get from doing this work.

What does working at Queen Square mean to you?

Working at Queen Square is extremely important for me. I am forever grateful to Professor Michael Hutchison who originally introduced me to Professor Anita Harding who gave me the opportunity to train and ultimately to work here. There is nowhere else in the world that I would prefer to work having seen many other Institutions in many other countries. The attraction of working in Queen Square is primarily the opportunity to work in an institution which encourages both basic science and clinically based research, and which has expertise in every area of neurology and neurosciences available. It is truly an academic environment and I love that it allows me to constantly learn new things. I, like many of my colleagues, have developed a very strong loyalty to Queen Square having trained and worked here and I cannot overestimate how much working here means to me as a neurologist.



"The Interview" with the Editor



Professor David Landon trained in Medicine at Guy's Hospital Medical School from 1954 to 1959. Following preregistration House Officer posts at Guy's, and SHO casualty appointments, he accepted an offer of a lectureship in Anatomy in the Anatomy Department at Guy's in 1961, having previously taken an honours intercalated BSc in Anatomy while a medical student, the first from Guy's to do so. The head of department, Professor Roger Warwick, who had recently acquired the first electron microscope to be installed in a London medical school, encouraged his interest in electron microscopy, enabling him to take a part-time postgraduate course in Biophysics in Sir John Randall's laboratory at Kings College, the start of a life-long interest in the ultrastructure of Nerve and Muscle. In 1964 he was invited to join a new MRC Research Group in Applied Neurobiology to be set up in Queen Square in association with the Institute of Neurology under the direction of Dr J B Cavanagh,

the staff having honorary appointments in the Institute. In 1974 he was appointed Senior Lecturer and Honorary Consultant in Morbid Anatomy to the National Hospital, in 1977 to University Reader in Neurocytology, and in 1991 was awarded a conferred Chair in Neurocytology, now Emeritus. He served as Dean of the Institute for 8 years from 1987 to 1995.

What are your memories of your time at Queen Square?

The new MRC Group was housed in some rather cramped leased space on the top floor of 8 - 11 Queen Square which at that time was still the Examination Hall of the Royal College of Surgeons; maintenance of the building was looked after by the parents of Barry Sheen, the motorcycle ace, the machines being tuned up in a shed in the back yard by his father, while his mother cooked lunches in the basement for the examiners, tempting aromas from which would drift up to us through the lift shaft. I also had a small room in the basement of the Queen Mary wing for EM preparation and was given access to an EM provided by the Muscular Dystrophy Association for the use of Dr W Mair, hospital consultant pathologist. This arrangement necessitated a certain amount of daily vertical and lateral movement that provided some exercise. The MRC later provided our own EM, and the Hospital a larger space, in which I was able to construct a self-contained unit for our Group. In 1968 I was asked to design a multi-user EM unit for the new Queen Square House to be shared with the Institute of Child Health, but by the time that the building was ready for occupation in 1978 changes in funding and personnel required its reorganization into an unified central Service Unit of which I became the Director until my retirement; housing 5 EM's and common preparation areas, thereafter it provided a central ultrastructural service to ION, NHNN, ICH and GOSH.

My scientific collaborations were initially within the Research Group, but with time other lasting collaborative links and friendships developed elsewhere in the Institute and Hospital, most notably with Ian McDonald and John Morgan-Hughes, but also with Tom Sears and

many others during subsequent years, including Pat Harris, Institute Registrar from 1973 to 1989, a friend and confidant of generations of students and staff, and a prime mover in the genesis and development of the Alumnus Association. I also had loyal and expert support from my technical staff, most particularly from Brian Young and Kerrie Venner who between them were with me for a total of 42 years. The MRC Group was originally set up on the basis of an understanding with the University that it would be taken over after 5 years to become a department of ION, however when that time came there was no university funding to be found, despite several earlier assurances, and the MRC agreed to provide a 5 year extension, and subsequently a further 3 years. The Group was then closed and I transferred as a clinical Reader to the Department of Clinical Neurology under Professor Roger Gilliatt who was always very friendly and supportive, despite his fearsome reputation among the junior clinical staff. Along the way, as is the habit in Academia, I found myself with additional responsibilities; firstly in respect of laboratory safety, and from 1978 – 87 as Curator of the laboratory animal facilities, in which I was ably supported by the chief technician John Frogley in commissioning and running the Queen Square and Wakefield street units.

How has Queen Square changed since you first came here?



A lot! When I first came here there was no Queen Square House, the pathology department and the library were in Alexandra House and people were scattered all over the place. Since then “Queen Square Inc.” has grown steadily, particularly in the last 15 years, with more academic and clinical researchers, more consultant staff and more new and better buildings and laboratories; all reflective of the excellence of our two institutions and

the increasing diversity and reputation of their research and clinical activities and external grant support.

What was your main area of research? Was there anyone who inspired you?

My first main area of research was in histological and ultrastructural studies of the nodes of Ranvier of peripheral nerves with P L Williams at Guy’s, taking this further after joining the MRC Group with O K Langley to explore the physico-chemical of the node and the relationship of this to the process of nerve conduction. From the mid sixties I concentrated on ultrastructural studies of the mammalian muscle spindle, its innervation and its embryological development, the last leading me into studies of the structure and normal development of skeletal muscle fibres, resulting in a number of original observations. Concurrently I had begun to collaborate with Ian McDonald in his experimental studies related to his research into Multiple Sclerosis, and with John Morgan-Hughes on the ultrastructural pathology of patient muscle biopsies, with particular reference to the mitochondrial myopathies, collaborations that continued for many years. There were many other fruitful collaborations with colleagues, both within Queen Square and outside, most recently with Clare Fowler on the innervation and motor and sensory mechanisms of the human urinary bladder.

As to inspiration, I certainly greatly admired a few individuals such as Sir Andrew Huxley and Sandford Palay for their contributions to the understanding of biological ultrastructure and their technical mastery, but my drive, such as it has been, has come from an early and enduring fascination with the natural world, and biology in particular, and it has been my good fortune to come into my area of study at an early stage of its development and to have had the freedom and opportunity to pursue it for so many years.

Tell me about your time as Dean

I was approached as to whether I would take on the office of Dean in succession to Professor John Marshall in early 1986 and eventually agreed, but with considerable reluctance. Electronmicroscopists are crepuscular creatures lurking in the shadows of their laboratories and like most academics I had had no training in finance or administration, other than managing the animal laboratories. I was sent on a one week industrial psychology course organized by the University for new heads of departments that left me with a rather unflattering view of my personality but otherwise none the wiser. However once in office I received much support and useful advice from the Chairman of the Committee of Management, Sir John Read, who became a great friend and whom I still see. He readily agreed with me that the then practice of appointing the Dean annually on a vote by the Academic Board, given the responsibilities involved and the need for continuity, was unsustainable, and this was changed to a 5 year term, renewable once. I was also able to persuade the Management Committee to reinstate the post of Clinical Sub Dean to be responsible for the clinical teaching of the House Officers and Diploma students, in which I was greatly helped firstly by Dr John Scadding, and subsequently by Professor Andrew Lees and Dr Niall Quinn. Throughout the majority of my time as Dean I was loyally and competently supported by Robert Walker who I had appointed as Institute Secretary in 1990, and by his administrative team, support that was essential to the smooth running of the Institute in all of its activities..

I took up office in September 1987 at a moment of major change in the Institute following the retirement of Professor Roger Gilliatt as head of the Department of Clinical Neurology, which he had to large degree built up around his own research interests, and the arrival of his successor Professor David Marsden from the Maudsley, with his own research groups and different interests. There were some minor problems; that these were handled without difficulty owed much to David Marsden's managerial ability and good sense.

During my tenure of office the Institute was awarded a number of major grants, and two that stand out in my memory are the grant from the National Society of Epilepsy that enabled the link with Chalfont Centre for Epilepsy, and the establishment of 2 full time and one half time posts with Consultant status; a whole new area of important activity that brought Drs Simon Shorvon, John Duncan and David Fish to Queen Square. The other was the major Wellcome Trust grant that provided for the building and establishment of the Functional Imaging Laboratory as a national facility.

Some of the recurrent nightmares for all Deans concern money, as were, and doubtless still are, are the periodic Research Assessment Exercises, with their implications for central funding. The assessment in 1986 under my predecessor John Marshall graded the ION as one of the top 4 medical institutions in the UK, and in 1988/89 UFC Research Assessment it was awarded a grade 5 rating, the highest possible and the only one in the BPMF of which the Institute was then a member. We slipped to a grade 4 in the following assessment, but regained the then top rating of 6 in the next; not a bad record for such a relatively small and

very modestly funded institution. The Brain Research Trust has provided an invaluable source of local research and capital funding for the Institute since it was established in 1974, and I was particularly pleased to have been able to persuade the Trustees to set aside a proportion of its income to fund a programme of annually awarded Research Studentships, an initiative that has been a great and continuing success and valuable resource for the Institute. One unpleasant financial moment came when I awoke one Sunday morning to hear on the radio that Barings Bank had gone bust, knowing that it was banker for both the Institute and the BRT. Fortunately it turned out that our funds were protected!

The position of Dean of necessity brings with it a number of external responsibilities, firstly to NHNN, on the Board of Governors and as a non-executive Director of the SHA. I could not have had a better colleague to work with for our mutual advantage than the then General Manager, Anthony Wheatley; we spent many hours together attempting to face down the political forces of darkness manifest in various official reports, Tomlinson and the Queen Square Locality study among others, attacking our independence and sustainability, and he was in every possible way supportive of the Institute's research activities, and the interdependence of our two organizations. The Tomlinson enquiry's recommendation that the three local postgraduate institutes should merge with UCL also involved much discussion and negotiation with both College and Institutes in order to obtain the best terms for the merger, and which were, I believe, achieved. I was also involved in the governance of the BPMF through its academic committees; served on the Management Committees of the Institutes of Dental Surgery and Child Health, the latter kindly awarding me an Honorary Fellowship, and was an Appointed Member of the General Medical Council representing the University of London from 1988 to 1994. On leaving the office of Dean I transferred to the Department of Neuropathology under Professor Francesco Scaravilli, for a final enjoyable 6 years in my laboratory, while retaining links with the University of London as chairman of the subject area committee in Anatomy, and membership of the Medical Advisory Committee, Senate and Council.

What have you been doing since you retired?

For the first five years I did some part-time EM, continuing some unfinished work with Clare Fowler. Other than that I have had some interesting and enjoyable training in silver smithing, tried wood carving, less successfully, and have returned more full-time to our garden and trees, and nature photography. I am also a Liveryman of the Worshipful Company of Pewterers. We like to travel as much as we can afford, on the Continent and in countries around the Mediterranean littoral in pursuit of my, very amateur, interest in ancient history, and to Australia and New Zealand to visit our two sons and their families.

What are your fondest memories of your time here?

The recollection of associating for most of my working life with intelligent and congenial colleagues, many of whom became great friends, and being part of a compact community with a unity of scientific and clinical purpose. When I came to the Square I never intended to stay for more than the first five years of the MRC Group's life, at the most, and ended up staying for 'life'.



Dr. Christopher Earl

Former President and Medalist of the ABN Christopher Earl died on the 4th March 2012 at the age of 86. Born in Ashbourne, Derbyshire and educated at Cotton School in Staffordshire he won an 'Arts Scholarship' to Guys Hospital Medical School where after a brilliant undergraduate career he graduated with distinction in 1948. Before taking up his house jobs at Guys he served in the RAF and later became neurological advisor to the Air force. At Guys he came under the influence of Charles Symonds who would later become his patron and neurological maestro. Sean McArdle also influenced his approach to neurology and the clinical biochemist Robert Thompson convinced him that neurochemistry would in time revolutionise understanding of the brain.

These important early influences led to him spending a *wanderjahre* working on the biochemistry of copper metabolism under Denny-Brown. During his time in Boston he also honed his neurological skills attending staff rounds with Maurice Victor. On his return from America in 1961 he was appointed to the London Hospital, Whitechapel as Lord Brain's successor and stayed there until 1970. At the London his consummated clinical skills were soon recognized but he was an inspirational undergraduate teacher. He then obtained an appointment at the National Hospital Queen Square having lost out the same day to his great friend Michael Yealland for the Cambridge post. In 1970 possibly in order to be closer to Queen Square he moved on what seemed like a free transfer to replace Michael Kremer at the National Hospital where he continued to work until the amalgamation of the Middlesex and UCLH and his retirement soon after.



He had a prodigious memory for past cases and this combined with his firm grasp of the literature made him everyone's favourite second opinion, As a consequence he was frequently asked by eminent colleagues to see patients all over the United Kingdom. During ward rounds he would frequently grab the case notes and read what had been recorded. This was not just for medico-legal protection (he advised the Medical Defence Union for many years) but because he felt that scrupulous attention to detail could shape and form his final conclusion about a case. For those of us fortunate to train under him he imprinted many unforgettable aphorisms and clinical tips that made the difficult business of neurology a little easier. He was a neurologist's neurologist but also one who recognized the rising importance of neuroradiology He advised his juniors to keep notes of all the cases they saw as he in turn had been instructed to do by Symonds and to spend a stage overseas if the opportunity arose.

After his retirement he continued to attend ABN meetings but was finally able to devote more time to his beloved family celebrating his diamond jubilee a year before his death. He is survived by his wife Alma, 5 children and many grandchildren some of whom remember him for his skill in pushing them in a wheelbarrow.

Professor Andrew Lees, The National Hospital for Neurology and Neurosurgery, Queen Square London

FOCUS ON SRI LANKA

AN INSTITUTE OF NEUROLOGY, FROM THE PEOPLE FOR THE PEOPLE

Deshamanya Dr J B Peiris, MD,FRCP.

Neurology in Sri Lanka has progressed by leaps and bounds over the past 4 decades. When I became only the second neurologist in Sri Lanka (then Ceylon) in 1972, I was the only neurologist for a population of about 12 million, and I remained the only neurologist for the next 10 years. However, the care of the neurology patient was relatively good in the hands of the General Physicians. All medical students of the 135 year old Colombo Medical School did a 2 week compulsory appointment in Neurology, while the trainee general physicians did a mandatory 3 month appointment. At that time, the general physician too had their postgraduate training and qualifications from the UK. Postgraduate training continued in the UK, till the Postgraduate Institute of Medicine (PGIM) of the University of Colombo was set up in 1980. From that time, PG training and examinations have been conducted by the PGIM, with a stint of training overseas, commonly in the UK.

Medical Neurology was a neglected field in Sri Lanka, as indeed it was in many other countries. The WHO included neurosciences under mental health!



Thus it was not surprising that neurology and I received step motherly treatment from the Ministry of Health. The male patients were accommodated in 1/3 of a medical ward, with some of the patients accommodated in an air raid shelter! The female patients were in 3 separate general medical wards. There was no intensive care unit and patients requiring ventilator assistance were managed in 'an iron lung'. (poliomyelitis was prevalent at that time as was Guillain Barre ' syndrome) . There was no dedicated ICU, EEG, EMG and physiotherapy and the medical neurology 'unit' was dependent on a quota from the neurosurgical Unit (NSU) for angiography, myelography, air encephalography and ventriculography. (There was no CT, MRI for many more years to come). The

NSU was in a custom made plush new building with its own dedicated neuro-radiologist and pathologist, who fortunately were very helpful to the medical neurology unit. The favourite investigation for neurotrauma was a direct puncture angiography.

It is not surprising that the young neurologist fresh from his Queen Square experience was disillusioned with the work environment but unlike some of his colleagues he did not consider migration an option. Instead he decided to build an all inclusive Institute which would be a pleasure to work in. This was no easy task.

Immediate requirements for such a gigantic venture were land within the hospital premises, funds, an architect and a cooperative builder who would take on a 'turn key job' – build and adjust according to funds available, on a minimal profit basis. Friendly architects and engineers helped with plans and supervision of construction entirely free of charge. Finding a dedicated team was a challenge as the colleagues and even assistants (except a dynamic physiotherapist) did not give even an encouraging word. Finally it was a non medical, hospital welfare services committee of the All Ceylon Buddhist Congress which came to the rescue to collect funds. Sri Lanka being a predominant Buddhist country is amenable to donations especially for health and education. (Sri Lanka accounts for more than 90% of cornea donated worldwide).

Even so, obtaining donations (finally totalling about 1 million UK pounds in the early 1980s) was no easy task. Fortunately, there was a gracious lady who gave the funds required for the ground floor. This was in memory of her departed husband whose photograph adorns the ground floor of the Institute together with that of the neurologist responsible.

The technique adopted was to obtain donations dedicated for a specific purpose. We encouraged donors by specifying amounts which would entitle us to buy individual items like beds and lockers, as well as larger amounts which would entitle the donor to have a unit of 4-6 beds, a ward, a floor. Donations to the 'Neuro hospital fund' were acknowledged in the daily press. Larger donations for units and wards carried the benefactor's name. Even so, funds were hard to come by initially but later it became almost a prestige to give a donation. Philanthropists, politicians, public figures, patients and relatives, all chipped with donations – big and small. Many were the donations in kind like tiling a floor or providing beds and equipment. A generous donor even gave us a 25 acre coconut estate which we gave the public trustee to auction. With difficulty we convinced the Lotteries Board to allow us to hold a Neuro hospital lottery – we ended with a profit only because some of the prize winners did not collect their winnings!

- The fund raising committee had weekly meeting on Sundays for 3 years and the technical committee also met once a week. The neurologist headed both committees.
- The 4 floor INSTITUTE OF NEUROLOGY was built in 3 years entirely from public donations. It was an enjoyable struggle and well worth it. I made several good friends and also a few enemies, who did not like the project or a change in their slumberous life.
- It was a dream come true and perhaps I can proudly say 'I did it my way'.

While waiting for my grandiose idea to materialize, I did not go into limbo but tried to improve the available set up. I was able to establish a small neurology intensive care unit of 4 beds with 2 simple Blease ventilators – indeed the priority need of the day.

The institute of Neurology, complete with medical, surgical, paediatric wards, intensive care unit with ventilators and piped oxygen, lecture rooms, outpatient clinics with its own pharmacy, physiotherapy, electrophysiology, operating theatre and a private wing, encouraged postgraduates to take up neurology as a career. From the single neurologist for the whole country we now have an Association of Srilankan Neurologists (ASN) with over 30 neurologists including paediatric neurologists and electrophysiologists. The Founder Patron of the ASN is certain that the Institute of Neurology and dedicated teaching helped in no small manner to popularize neurology as a specialty. It is a rare success story in the public sector harnessing the support from a grateful public.



Out of the Archives

A manuscript at Queen Square in Hughlings Jackson's hand (an update from the 2nd Edition of the Queen Square Alumnus Association Newsletter)

A draft manuscript prepared by Dr Hughlings Jackson and dated November 1902 was discovered in the Queen Square Archive during recent modernisation and refurbishment of the Library. Another scientific manuscript in Jackson's hand is in the medical library at the London Hospital (Swash and Evans 2008). The latter consists of instructions and advice to his House Physician regarding the investigation of a patient with a complex eye movement disorder. This newly discovered manuscript at Queen Square consists of 13 pages of text, written double-spaced in black ink on small sheets of blue-lined writing paper, apparently at some speed. There are multiple crossings out, and inserted additional material in blue ink, and pencil, scrawled throughout the document. The *verso* of several sheets contains addition insertions. Jackson's penmanship was, to his contemporaries, known to be very difficult to decipher, and to a modern reader it is exceptionally difficult, especially given his unfamiliar Victorian grammatical constructions, and use of the older form of the doubles, as in "less" (le|s). The combination of text and corrections leaves open a number of interpretations.

The manuscript is signed and dated November 1902 with the notation, in Jackson's hand: "MS of cerebro cerebellar paper Nov 1902". On the front sheet he has signed the paper as "Dr Jackson 3 Manchester Square W". The cerebro-cerebellar paper was published in *Brain* (1899 xxii 621-630) as "On certain relations of the cerebrum and cerebellum (on rigidity of hemiplegia and on paralysis agitans)". This paper provided an opportunity for Jackson to reprise two papers previously published in 1877 and 1878, and to consider his ideas on rigidity in relation to then recently published papers by Strumpell (on pseudobulbar palsy with bilateral hemiplegia), by his colleague at Queen Square, Charlton Bastian (on rigidity following cord transection). He discusses other recent observations derived from the then relatively new practice of ether anaesthesia, and considers the physiology of dystonia, athetosis, hemiplegic rigidity after stroke and the rigidity of paralysis agitans. He refers to Sherrington's 1898 paper on experimental cord transection in the monkey, and suggests that there is an antipathy or "cooperation of antagonism" between cerebral and cerebellar input to the spinal cord and thence to muscles. The cerebellar component involves output from Deiter's nucleus. The paper seeks to homologate Jackson's earlier ideas with the newly available information from the developing science of neurophysiology; Jackson was alert and active still.

I am grateful to Professor Andrew Lees for drawing this manuscript to my attention, and to Martin Woodward, the Archivist, for allowing me to study it.

Professor Michael Swash (Queen Mary School of Medicine; Barts and the London)

Librarian's note: The full text of this paper will feature as Archive of the Month in August (see <http://www.queenssquare.org.uk/archives/collection/1/item>)

To view the 45 unpublished papers by Hughlings Jackson, were found in the Library in 2003 (see <http://www.queenssquare.org.uk/archives/collection/6>) .

Photos from our Archives

Diploma course March 1985



Back Row (left to right): Dr D. Guiroy, Dr V.G. Dostrow, Dr Al-Hareth Hamdan, Dr A.I.A. Hamed, Dr S.E.M. Abdul Magid, Dr N.V. Satya, Dr K.S. Reddy, Dr M.A.S. Dabbuba, Dr A.A.H. Al-Eryani, Dr W. de Goes Horta, Dr R.A. Yopez Lasso, Dr H. Maharajh

Front Row (left to right): Dr H.A.H. Adlan, Dr A. Abdullah, Dr T.Z. Shawesh, Dr Kim Hock Sng, Dr H. Prasad, Miss P.L. Harris, Professor John Marshall (Dean), Dr F. Mahmood, Dr M. Anana, Dr M. Ghaem Maghami, Dr T.H.M. El Debas

Have you spotted yourself in this photo from the Archives? Please get in touch with your recollections.

FRONT COVER EXPLAINED

This picture is on display in the Queen Square Library and had previously been on display in the Pharmacy at 8-11 Queen Square. The picture is of the Queen Square Social Club from the early 1980's. Can you identify anyone from the picture below. Please contact us if you can, using the tracing beneath the photo to indicate who is who.

