

Sir Gordon Gordon-Taylor: master surgeon in peace and war

As a young surgeon in the 1950s I, among the rest of my contemporaries, revered Sir Gordon Gordon-Taylor ('G-squared-T') as a brilliant technical surgeon, teacher and father figure. When I was a senior registrar in Oxford, one of his former registrars at the Middlesex Hospital, Mr Tim Till, invited him to visit. Gordon-Taylor said that he wanted to see the 'young men' operate, and I was delegated to do a resection of a rectal cancer in front of the great man. He was full of charm and kindness as he watched us, having taken off his jacket and put a gown over his waistcoat, wing collar and bow tie! This year marks the 50th anniversary of his death.

Gordon-Taylor was born in London in 1878. His father was a wine merchant and his mother an Aberdonian. He was educated in Aberdeen, read classics at its University, and graduated in 1898. (His lectures and writings were later to be peppered with classical quotations.) In the same year he became a medical student at the Middlesex Hospital, and qualified in 1903 with the gold medal in anatomy.

Gordon-Taylor first worked in the pathology department at his medical school. Hearing that the University of London was to create a BSc in Anatomy, he studied for the examination with his friend Victor Bonney (later to be a distinguished gynaecologist), spending 3 nights a week in the dissecting room, fortified by cups of coffee made over the Bunsen burner. They both passed with first class honours. Working as a junior surgeon at the Middlesex, Gordon-Taylor obtained both his Fellowship of the Royal College of Surgeons and Master of Surgery in 1906, and joined the staff as assistant surgeon at the age of 29 years, with a reputation as a skilful operator.

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Soon after the outbreak of the First World War in 1914, Gordon-Taylor joined the Royal Army Medical Corps and within months was in charge of a Casualty Clearing Station on the Western Front, receiving convoys of severely wounded men. He soon established a reputation as a brilliant and rapid war surgeon, with a particular interest in penetrating abdominal wounds – up to that time almost invariably lethal.

With other young surgeons, he established that with early resection and anastomosis of shattered small intestine and exteriorization of colonic injuries, it was possible to save a good 50% of these cases. He was soon promoted to Major and for some time was acting consultant surgeon to the 4th Army, operating and teaching

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along the length of the Western front. He was awarded the Order of the British Empire for his services.

After the war, he returned to the Middlesex and was appointed full surgeon in 1920. He brought back from the War many new ideas, including the value of blood transfusion, and operated three afternoons a week at the Middlesex, one of them the Saturday. His range of surgery was immense. His special interests were cancer surgery (particularly breast, tongue and bowel), the parathyroid, carotid body tumours and duodenal ulcer haemorrhage. Later he included aneurysms of the innominate artery and hind-quarter amputation – performing his hundredth at the age of 80 years. These were usually for slow-growing tumours such as chondrosarcoma, of good prognosis if completely removed.

At the outbreak of the second World War in 1939, Gordon-Taylor immediately applied to rejoin the Royal Army Medical

Corps. To his utter amazement and disgust, he was turned down on account of his age. He presented himself to the Admiralty and was at once accepted into the medical branch of the Royal Navy with the rank of Surgeon Rear-Admiral. He was assigned the south-east of England as his responsibility and, at the height of the air raids, he was hard at work operating, writing, advising and lecturing on the management of mass casualties. His little monograph, extensively illustrated, entitled 'Abdominal Injuries in Warfare' was a classic and is well worth reading today. Gordon-Taylor was also sent abroad, to the USA and Canada, and also as part of an advisory group of British surgeons, to the USSR. The lessons so dearly learned in World War I on the management of missile injuries had to be re-learned by young surgeons, and who better to teach them but the old master?

After the war, now retired from the surgical staff at the Middlesex Hospital, Gordon-Taylor remained active. At the Royal College of Surgeons, where he had served on

Council and as a Vice-President, he acted as advisor to overseas students. He lectured all over the world and continued as an examiner – rather unfairly, he expected us to know the details of the ossification of the sphenoid, which I therefore had to learn but which I never found of use to me in my own surgical practice.

Gordon-Taylor never drank or smoked. He kept fit by walking everywhere (without a coat, even in the worst of weather) and by ballroom dancing. He loved watching cricket. Perhaps appropriately, his end came, 50 years ago, on 2 September 1960 when, walking back from Lord's cricket ground, he was knocked down by a taxi. He recovered consciousness but then lapsed back into coma. An extradural haematoma was evacuated, but he died the next day without regaining consciousness. A truly memorable surgeon. **BJHM**

Conflict of interest: none.