

in the establishment of three Tresillian Homes and Carpenter Mothercraft House by the Royal Society for the Welfare of Mothers and Babies. As director of this Society, she adapted and modified the principles of Sir Truby King's teaching to make these Homes some-



FIGURE XI.
Dr. Margaret Harper.

thing entirely her own. As an aid to young mothers and, she hoped, to young fathers, she wrote "The Parents' Book", which has proved its value by recently reaching its nineteenth edition. In this book she expresses a sound practical approach to breast-feeding, and to artificial feeding when required. Many young mothers have been heard to refer to it as their Bible.

Dr. Harper has attained an international reputation not only in her teaching of the care of the premature and new-born, but also as one of the two clinicians who first recognized and described the differences between coeliac disease and cystic fibrosis of the pancreas. In recognition of this priority, Professor Charles D. May of the University of Iowa dedicated his recent monograph on the subject of cystic fibrosis of the pancreas as follows: "To the practitioners—Margaret Harper of Sydney, Australia, and Arthur H. Parmelee of Chicago, who recognized the salient clinical features of patients found to have cystic fibrosis of the pancreas, published the first papers indicating the frequency and importance of the disease, and clearly set it apart from coeliac disease against the prevalent practice." As pointed out by Professor Lorimer Dods, it is interesting to note that Dr. Harper's successful management of infants suffering from coeliac disease was based on a diet which excluded cereals, bread, and other forms of wheat starch—a diet which has many features in common with the gluten-free diet now the accepted form of treatment for this condition.

As early as 1925, Dr. Harper was recognizing the importance of hæmolytic disease of the new-born at a time when few pædiatricians were aware of the significance of this disease, and she was one of the first in Australia to use blood transfusions in the treatment of anæmia in early infancy.

Dr. Harper was a Foundation Fellow of the Royal Australasian College of Physicians, and one of the founders of the Rachel Forster Hospital, where she is credited with the honour of having treated the first patient to attend that hospital. The Margaret Harper Diet Kitchen in the Royal Alexandra Hospital for Children stands as a permanent memorial in recognition of her outstanding contributions in the field of infant nutrition.

With the doors of the medical schools open to them, and equal chances of resident appointments in teaching hospitals assured, it was to be expected that opportunities for medical work abroad would before long be sought by some of Sydney's most gifted women graduates. One of the first to respond to such a call was Elsie Jean Dalyell. Dr. Dalyell graduated with first class honours in 1909—one of a group of women whose academic successes have not yet been equalled at the University of Sydney, since of the seven who graduated together, three gained first class honours and one second class honours. Dr. Dalyell, with the late Dr. Mary Burfitt-Williams, was appointed to Royal Prince Alfred Hospital as a resident medical officer; they were the first women to follow Dr. Aspinall.

At the end of her year's residence, she accepted the invitation of the late Professor Welsh to join his staff in the Department of Pathology, thus becoming the first woman to be appointed to the teaching staff of the medical school. She proved to be a lecturer and demonstrator of unusual gifts, and to-day those who were her students still speak of her as one of the outstanding memories of their medical course. Her presentation of scientific material, both spoken and written, was flawless. Those who were present still

remember the address she delivered to the British Medical Association on the results of researches into rickets and other deficiency diseases, carried out in London and Vienna by the team of which she was a member. She spoke on that occasion for nearly two hours without notes, and received an ovation from the crowded audience who had listened spellbound to her fascinating story. Her keen sense of humour and clever prose recitations made her the centre of any gathering, and memories of lively times spent in her company are precious to her friends. After one such evening, when a group of Sydney graduates

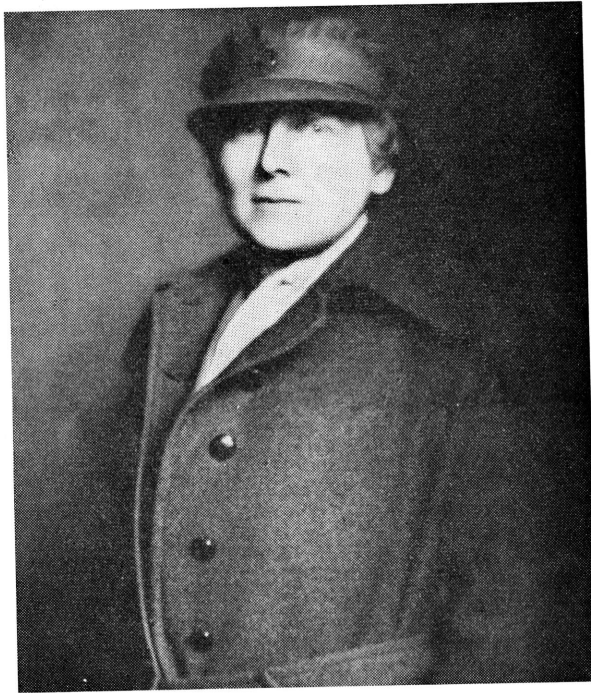


FIGURE XII.
Dr. Elsie Dalyell.

had entertained at dinner a party of medical women from Melbourne, one of the visitors was heard to remark: "Well, I must confess I do not often find much in Sydney that is better than Melbourne, but we Melbourne medical women always wish that Dr. Dalyell belonged to us."

In 1913 Dr. Dalyell gained a Beit Travelling Fellowship—the first Australian woman to be so honoured—and went to the Lister Institute in London to carry out investigations into the bacteriology of infantile intestinal infections. Here she fell under the spell of the late Sir Charles Martin, and received from this great scientist the welcome always awaiting Australian laboratory workers. With the

outbreak of war in 1914, Dr. Dalyell offered her services to the War Office, but at that stage the idea of using medical women in their organization was never considered. Hence many women desirous of serving their country joined one of the private hospital units which were going abroad to care, not for our own men, but for the sick and wounded of our allies. Dr. Dalyell served with such a unit in Serbia, where a severe epidemic of typhus was encountered, and in France with the Scottish Women's Hospital at Royaumont. Here, in a wonderful but quite unsuitable old monastery, this unit, staffed entirely by women, cared for sick and wounded from the French Army, and here Dr. Dalyell successfully tackled that most difficult bacteriological problem of the war on French soil—the problem of the anaerobes, causal organisms of such infections as tetanus and gas gangrene.

In 1916 the War Office was persuaded that medical women could be used in base hospitals to relieve men for duties further forward, and launched an appeal inviting medical women to serve with the Royal Army Medical Corps. However, even with such an appeal certain limitations in regard to status were defined. Medical women did not hold the King's commission but were described as being "attached to the R.A.M.C.". They wore the R.A.M.C. badges, but no badges of rank; in fact, it was only after a struggle that women carrying out the duties of specialists, as Dr. Dalyell did when in charge of a laboratory, were allotted the extra allowance paid to specialists. It is interesting to record in passing that even as late as 1938 the Director of Medical Services in Britain, when approached by the Medical Women's Federation, declared himself unable to see what possible use medical women could be to His Majesty's Forces. The Munich crisis, however, changed this opinion, and once again medical women were invited to volunteer for general regimental and hospital duties with the services. Equality of pay was at once conceded, although an attempt was made to grant women smaller allowances than men on the ground that the calorific requirements of women are less than those of the opposite sex. The Medical Women's Federation, however, quickly drew attention to the fact that hotel and restaurant charges are never based on this scientific observation.

Dr. Dalyell responded to the War Office appeal of 1916, and was sent first to Malta and later to Salonika. In Malta her duties were partly clinical and partly pathological, but in Salonika she was in charge of the laboratory in a large tented hospital on the hills above the town. Here she organized a pathological service which won the admiration of all who saw it; she even managed to devise equipment for the giving of blood transfusions from the scanty apparatus available. For her services here she was awarded an O.B.E. and mentioned twice in dispatches. After the armistice, Dr. Dalyell served in Constantinople for a time and then returned to England, intending to take up her interrupted work at the Lister Institute. However, she accepted instead an invitation to join, as senior clinician, a small unit of scientific women selected by the Medical Research Council and

the Lister Institute to study post-war nutritional diseases in Vienna, under the leadership of Dame Harriette Chick.

Much experimental work had been carried out at the Lister Institute on rickets and other deficiency diseases, but the crucial test on human beings could only be applied to a population already suffering from these conditions. Unfortunately, such conditions were all too prevalent in Central Europe at the end of the First World War. The unit worked in Vienna from 1919 to 1922, and their results contributed greatly to our knowledge of many deficiency diseases. Working in Vienna under immediate post-war conditions was anything but a pleasant adventure. This band of five women realized that, in addition to the language problem, there were many difficulties to be faced, but with the exercise of tact and sympathy and numerous acts of kindness, a situation, described by Harriette Chick as "the establishment of emotional relationships", was developed. The British team was allotted sixty cots with complete nursing and domestic services in the University Kinder-klinik, the director of which was the late Professor von Pirquet, who held the opinion that rickets was an infection, comparable to some extent with tuberculosis, and who admitted that he welcomed the possibility of using the children treated by the British team as controls to his own investigations. At the end of the three years of intensive study, however, it was the children under the care of von Pirquet who were found to have served as controls to the children treated by the British workers. In a preface to the Medical Research Council's report in which the results of the British workers were published, Professor von Pirquet generously admitted that the clinical investigations of the British team confirmed their experimental work on animals, thus proving the fallacy of his own theory.

Those who were associated with Dr. Dalyell in the scientific field in London were convinced that a brilliant future lay before her there, but she returned to Sydney for family reasons, and in 1924 was appointed Assistant Microbiologist in the New South Wales Public Health Department. She was invited to develop the clinic for the treatment of venereal diseases at the Rachel Forster Hospital, and for six years she and the late Dr. Maisie Hamilton devoted much effort and enthusiasm towards making this clinic a model of its kind.

Medical women of the University of Sydney are justly proud of Dr. Dalyell, for, in addition to the many services she rendered to them individually and collectively, she succeeded in placing the name of one pioneer medical woman of her University in the scientific annals of England. Her colleagues in England have commemorated her by a gift in her name to the National Trust Fund of Scotland—a fitting memorial to one proud of her Scottish ancestry.

The group of women of whom we have been thinking to-night were well aware of the responsibilities they accepted as pioneers in the demanding profession of medicine. Personal success was associated in their minds with recognition of what such successes might mean, not only to themselves, but to those who were to follow them. That they

did not fail has placed all medical women of New South Wales in their debt—a debt which can best be repaid through the years by the maintenance of the standard they set.

A glance such as this into the past seems to lead naturally to visions of the future, and these visions suggest that among the medical women who have graduated since the period covered there are certain to be some who, in years to come, will be regarded as pioneers by future observers. But although the field of medicine has unlimited boundaries, conditions favouring the appearance of pioneers do not occur every day. Medical women must therefore continue to keep the pioneer spirit alive, and be mindful of the words of Pasteur, that "chance favours only those who are prepared". In commemorating some pioneer medical women of the University of Sydney to-night, we are not forgetting the many whose names have not been mentioned, but are acknowledging the part all have played in advancing the art and science of medicine in New South Wales.

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