

49 Mathoura Road

Geoffrey Kaye's Letters to Paul M. Wood, 1939–1955

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ABSTRACT

From 1930 to 1955, Geoffrey Kaye, M.B.B.S., was one of the most influential anesthetists in Australia. In 1951, he opened a center of excellence for Australian anesthesia at 49 Mathoura Road, Toorak, Melbourne, which Kaye affectionately called "The Anaesthetists' Castle" and "49." "49" was designed to foster the educational, research, and administrative activities that would allow Australian anesthesia to reach the level of practice and professionalism found in Europe and America. Kaye wholly financed the venture and lived on the second floor of the building.

During his world-wide travels, Kaye had developed a friendship with Paul M. Wood, M.D., the originator of the American Library-Museum now known eponymously as the Wood Library-Museum of Anesthesiology. Through the letters Kaye sent to Wood, the authors see Kaye's perception of the events surrounding the rise and fall of "49." Kaye's early letters were optimistic as he discussed the procurements and provisions he made for "49." His later letters exhibit frustration at the lack of participation by members of the Australian Society of Anaesthetists. Kaye was truly a visionary for his time. He believed that the diffusion center which "49" was to become was not only realistic and achievable but also necessary if Australian anesthesia was to gain international prominence comparable to anesthesia in Europe and North America. In the end, the failure of "49" left Kaye estranged from Australian anesthesia for many years. How this estrangement affected Australian anesthesia is unknown. (*ANESTHESIOLOGY* 2014; 121:1150-7)

GEORGEY Kaye, M.B.B.S. (1903–1986), was "arguably the most influential anesthetist in Australia"¹ although he was at times difficult to understand.² Before 1955, Kaye was a preeminent academic and political anesthetist. He helped start the Australian Society of Anaesthetists in 1934 and was instrumental in founding the Faculty of Anaesthetists of the Royal Australasian College of Surgeons in 1952. Kaye, a "man of many parts,"¹ published articles on mortality rates in Australian anesthetics³ and World War II military medicine,⁴ coauthored an anesthesia textbook,⁵ and developed various forms of equipment, including an anesthesia machine.

One of his longtime goals was to build a great "diffusion center" of information for the Australian Society of Anaesthetists. This center would house a library, museum, meeting spaces, apparatus, a journal of the highest caliber, and machinery and laboratory facilities.^{1,6} In 1951, when the plans for the Faculty of Anaesthetists were approved, Kaye established the Society's "center of excellence" at 49 Mathoura Road, Toorak, Melbourne (fig. 1). Kaye referred to the center as "49."

By 1955, the promise of "49" had failed. Some scholars have attributed this failure to Kaye's inability to understand "the

situation of the ordinary anesthetist."¹ Practicing physicians—in difficult economic times—were "trying to make their way in a new environment, with young families to support."¹ To be sure, Kaye was unmarried, and he had the ability to teach, do research and engage in politics without significant familial and financial pressures. Kaye, however, did have some comprehension of the practical needs of the practicing anesthetist.⁶

Gwenifer Wilson, M.D., M.B.B.S. (Honorary Anaesthetist, Sidney Hospital and St. George Hospital, Sydney, New South Wales, Australia) (1916–1998), makes a more personal assessment of the failure of "49" in her book, *One Grand Chain*,² the authoritative history of Australian anesthesia. Contrary to Kaye's opinion, Wilson, Federal Secretary of the Australian Society at that time,⁷ felt that the Society tried to maintain "49" and was "blameless" except for permitting Kaye to control renewal of the Society's lease.* Kaye defined the agreement as a 5-yr lease to the Society giving the Society the entire ground floor and access to the ground and machine-shop for an annual fee of one shilling.⁶ Wilson attributed the failure to Kaye's personality and the situation. For example, she suggested that members avoided "49" because when they

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* Her opinions cited are from Volume 2 of *One Grand Chain*. Wilson died before Volume 2 was published. Her manuscript for Volume 2 was edited posthumously.

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Fig. 1. Exterior of 49 Mathoura Road, Toorak, Melbourne. This image depicts the Australian Society of Anaesthetists Headquarters from 1950 to 1955. The lower bay window on the right was that of the Lecture Room, whereas the windows to the left of the front door were those of the Library. The upper story was Dr. Geoffrey Kaye's private residence. Image courtesy of the Australian and New Zealand College of Anaesthetists Archives.

used it, Kaye would descend from his upstairs living quarters to “either interrupt to talk, or demand assistance with some project of his own.”² In a letter⁷ to Kaye in 1981, as she was researching her book, Wilson suggests that the project failed because it was too big for the Society.

Kaye took the failure hard. Wilson lamented that “the inveterate correspondence of this lonely man had led him to tell anesthetists round the world of his great project, and even more unfortunate that when the time of break-up of the headquarters came he again wrote to his world-wide circle, informing them of the deficiencies of the Society and Faculty which had led to this debacle.”²

Previous historical writing on Kaye and “49” has relied on secondary accounts of the situation surrounding “49.”¹ This article describes Kaye's contemporaneous views of the rise and fall of “49” based on correspondence to Paul M. Wood, M.D. (1894–1963, Librarian–Curator, Wood Library–Museum, New York City, New York). Wood, an American anesthesiologist, donated his personal collection of anesthesia-related books and apparatus to the New York State Society of Anesthetists in 1933.^{8,9} Under his leadership as librarian–curator, this collection evolved into the eponymous Wood Library–Museum of Anesthesiology in 1950.^{8,9}

We suspect that Kaye and Wood knew each other by 1930. It is likely their shared interests in libraries and museums fueled their relationship. Kaye's letters to Wood from 1939 to 1955 likely represent some of the “inveterate correspondence” to the international anesthesia community to which Wilson referred. Kaye's letters offer an important counterpoint to Wilson's characterizations of Kaye as well as her assessment of the factors that ultimately led to the fall of “49.”

Letters

This article is based on 11 letters^{10–20} Kaye sent to Wood between May 7, 1939, and April 19, 1955. The original 11 letters are located in the Paul M. Wood Collection at the Wood Library–Museum of Anesthesiology, and copies

are located in the Archives of the Australian and New Zealand College of Anaesthetists. We were able to locate one of Wood's letters to Kaye in the Australian collection, and it is our impression that there were additional letters, particularly during the gap between the three letters in 1939 and the eight letters from 1952 to 1955. Wood's letter²¹ to Kaye, written on April 4, 1954, makes reference to the incorporation of the Wood Library–Museum but does not discuss “49.”

Additional sources include correspondence between Wilson and Kaye from 1981^{7,22} to 1983²³ and contemporaneous documents, most notably a 1955 letter⁶ from Kaye to the President of the Australian Society of Anaesthetists. This letter echoes most of Kaye's letters to Wood.

Kaye's Early Experiences in Australia and Abroad

Kaye had a privileged upbringing. He was educated in the classics and enjoyed luxurious activities such as flying and collecting. His lifestyle was provided in part by his father, a successful businessman, who provided Kaye with “an independent private income.”¹ He received his medical degree from the University of Melbourne in 1926. He became interested in anesthesia when he was assigned to be a resident anesthetist as punishment for inappropriately assessing a patient for surgery.^{1,24} Kaye enjoyed the experience, however, and pursued further studies in anesthesia. His experience reflected the overall status of anesthesia in 1920s Australia, which Kaye described as “suitable only for the physically unfit or unambitious.”¹

Kaye's vision for Australian anesthesia developed during his 1929 through 1931 world tour of European and American anesthesia leaders.^{1,24} He was moved by the state-of-the-art practices, including physician–anesthetists trained in the basic sciences, medical record-keeping, and continuous monitoring. Kaye maintained relationships with many of these leaders (fig. 2).

Francis Hoffer McMechan, M.D., F.I.C.A. (1879–1939), was one of these leaders. McMechan was one of the essential

forces in the development of the profession of anesthesiology in the United States and was the founding editor of the longest continually published journal in anesthesia, *Current Researches in Anesthesia and Analgesia*, which became *Anesthesia and Analgesia*. In 1929 in Sidney, Kaye met McMechan, then Secretary-General of the Associated Anesthetists of the United States and Canada. In 1955, Kaye wrote that McMechan “virtually established organized anaesthetics” in Australia.⁶ In a paragraph titled Genesis in a 1954 letter, Kaye credited a death-bed meeting with McMechan with the origin of “49.” “Knowing himself to be dying, he [McMechan] gave me certain ‘orders’ in regard to the service of anesthetics in Australia. These orders I have tried to obey: they were, in a sense, the spiritual origin of “49.”⁶ Kaye later recounted the story in a 1981 letter to Wilson, characterizing the event as “I was summoned to the bedside.”²²

Geoffrey Kaye–Paul Wood Letters, 1939–1954

The first letter, dated May 7, 1939,¹⁰ discussed early thoughts about a museum, using the museum that Paul Wood curated

as a prototype. Kaye states, “Our Society, like your Society, proposes to have a museum to illustrate the evolution of anesthetic appliances.”¹⁰ Importantly, the extent to which Kaye spoke on behalf of the Society at this point is uncertain.⁶

Kaye discussed his equipment collection and sought help identifying a drip-feed ether inhaler and an inhaler fitted with a shank. He suggested that the American and the Australian Societies exchange equipment to improve their collections. Kaye offered Wood some of University of Melbourne’s donated Edward H. Embley’s, M.D., M.B.B.S. (1861–1924, Honorary Anaesthetist to the Melbourne Hospital, Melbourne, Victoria, Australia), laboratory glassware “which had been gathering dust and cobwebs since 1902.”¹⁰ Embley was an Australian anesthetist and glassblower who conducted early experiments on chloroform induction.²⁵ According to Kaye, while the glass left much to be desired, it was “the only worthwhile work in anesthesia that has come out of this country.”¹⁰ Those remarks about Australian anesthesia highlight his general sentiment, but his opinions are likely exaggerated. For example, one early Australian pioneer was Hubert Ingham Clements (1886–1969, Mechanical Engineer, Strathfield, New South Wales, Australia), a



Fig. 2. Anesthetists’ Travel Club, Rochester, Minnesota, October 12–13, 1938. Front row, from left to right: H. S. Ruth, W. E. Brown, E. B. Tuhoy, J. S. Lundy, R. M. Waters, C. H. Robson, J. A. Blezard, C. F. McCusky, and R. C. Adams. Middle row, from left to right: R. M. Tovell, A. M. Caine, H. J. Shields, P. M. Wood, P. D. Woodbridge, T. D. Buchanan, and J. G. Dunlop. Back row, from left to right: Geoffrey Kaye, B. C. Leech, T. J. Collier, D. C. Aikenhead, S. C. Wiggan, R. T. Knight, and W. W. Hutchinson. Image courtesy of the Geoffrey Kaye Museum of Anaesthetic History.

mechanical engineer who designed anesthesia apparatus, most notably an ether vaporizer in 1917 as well as portable suctioning machines with novel pumps and lubrication systems that were in use in Australia for more than 30 yr.²⁶

Kaye's substantial investment of his time and resources, and his decision to stay in Australia in spite of numerous opportunities to practice abroad,^{1,24} suggest that he truly believed that Australian anesthesia could one day rival its European and American counterparts. This promise of progress fueled Kaye's enthusiasm.

We are, however but young in our search for museum material and it is likely that we have not nearly exhausted the sources of supply in Australia. In any case, it is extremely good fun hunting out the material, sorting and classifying it, and trying to get it suitably displayed with notes historical and critical. I shall be interested to hear what the American Society is doing about its museum...¹⁰

Kaye's Involvement in the War

Kaye's letters dated July 14, 1939,¹¹ and October 11, 1939,¹² focus primarily on equipment, such as early gas apparatus, ether and chloroform devices, and various models of inhalers.^{11,12} On October 11, 1939, Kaye wrote about his commission to support the war effort.

I have been told to apply for a commission, which probably means a spot of work "in aid of the war" in the near future, and hence a diminution of such congenial peacetime activities as the Museum, for instance. I cannot imagine that it means active service—yet. Personally, I shall be very glad were it to be so, in a sense that we might be able to deal with Germany and go home to our sensible civilian lives. With the onset of winter in Europe, however, I take it that military operations will go into recess and that there will be little doing until the spring. It may be a long war. The personal implications are still quite indefinite, however, and it is impossible to forecast the future at all. I shall let you know anything which emerges when I know myself.¹²

Although a military commission meant Kaye could devote less time to writing, research, teaching, and collecting, he remained active in historical preservation. In fact, participation in the war meant more opportunities to collect anesthetic equipment and devices. After being commissioned, Kaye served in the Middle East and New Guinea campaigns. He taught, published about military medicine, and developed technology for the military. Even after his return to Melbourne in 1943, he continued to work with the military.¹

Views on American and Australian Anesthesia

The Wood Library-Museum of Anesthesiology was formally incorporated in 1950.⁹ Kaye admired the American

Society for being able to incorporate the museum during Wood's lifetime. Kaye's letter dated March 15, 1952,¹³ demonstrated his enthusiasm for the Wood Library-Museum, optimism for a similar Australian project, and frustration about the inadequate Australian research program. Kaye felt that America "having both a Journal (of the highest quality) and a newsletter (of purely domestic interest)"¹³ served the needs of the society well. Kaye then shifted toward the needs of Australia.

We fall between stools and must therefore aim at a newsletter, which is scientific rather than personal in its material. One day, we may have funds enough for a Journal. But we are in no hurry to begin with one: for it to be of any value, Australia must begin to produce original research in anaesthetics. Thus far, we are reasonably competent (?) exponents of the ideas of others and a Journal of our own would be too silly for words.¹³

Kaye sought to establish a Faculty of Anaesthetists to formalize postgraduate training in anesthesia and to enable the education, research, and technological developments necessary for the growth of Australian anesthesia. In 1950, the Royal Australasian College of Surgeons approved plans to establish a Faculty of Anaesthetists. Kaye simultaneously started "49"—he immediately purchased a large mansion with private funds and began renovations for a meeting room, library, laboratory, museum, darkroom, and a living space for himself on the upper floor.⁶ "49" officially opened in March 1951. He financed "49" through his inheritance from his father in 1949. The cost was Kaye's "entire fluid capital."²²

Member Interest in "49"

In the March 15, 1952,¹³ letter, Kaye reported that he was "heavily engaged in an examination" for the Diploma in Anaesthetics, and that he had earned the title of "ophidologist" for his work anesthetizing snakes for research. As for "49," Kaye stated, "I have no great news. "49" provides an infinity of work in the museum, library, writing-room, workshop, and garden—it would be a whole-time job if there were nothing else to do."¹³

The letter dated January 31, 1953,¹⁴ did not discuss "49." In the February 2, 1953,¹⁵ letter, we start to see Kaye's frustration regarding the status of Australian anesthesia and his enthusiasm and prospects for "49."

How does one get members of a Society to WORK? We have given 'em every amenity, but all they want is a monthly meeting—if someone else gets it up for them! The older men are tired, tied and over-taxed: the younger men are cynical and their attitude is summed up by the naval adage, "Blast you, Jack; I'm on the raft!" Till they work for their Society, they won't really value it—and how does one induce 'em to begin working?¹⁵

Kaye’s February 28, 1953,¹⁶ letter discussed his laboratory work and his attempts to arrange a work position in the United States for a young member of the Australian Society. It did not mention “49.”

Kaye’s frustration was palpable in his January 28, 1954,¹⁷ letter. He began to express lack of appreciation for his work. Kaye had been the sole financier of “49.”

This “Castle” stands me, to date, in total of £A11,300, for the house, garden, and alterations, with such basic equipment as a hot-water service, W.C., &C, for the Society. In addition, I have thrown into the pool machine-tools and laboratory equipment to the value of at least £A3,000. And our Society serves a total of some 200 members. Having regard to the different standard of prices in the U.S.A., and the fact that you must cater for 4,300 members,† I do not think your objective of \$200,000 an excessive one.‡ I hope that you attain it: I think you will, because your country has, not only the material resources, but also the willingness to put them at the back of genuine scientific endeavour. (By the way, the above figures upon the cost of our “Castle” are for your private eye alone: I should not care to have them publicized! But you will understand from them that I am feeling rather “broke” at the moment, and not inclined to take on further commitments!).¹⁷

Kaye’s awareness of the differences between American and Australian resources did not ameliorate his frustration about the lack of Australian enthusiasm for “49.” In the same letter, Kaye corrected Wood’s complimentary appraisal of the Australian Society.

It was very kind, and very flattering, of you to speak of a proposed standard of equipment “to at least approach the facilities of the Australian set-up.” You do us rather more than justice. The Australian Society reminds me very much of what I saw at Petra, viz., a stupendous facade with nothing very much behind it.¹⁷

Members showed “49” to visitors, but did not use it. Members attended regular meetings at the facility, but only if others managed the logistics. Members were not interested in “making use of the darkroom or workshop, or assisting in the duplication and distribution of the newsletter, or keeping the grounds in order, nothing could be further from their thoughts.”¹⁷

† The number of Society members per citizen in the census population was closer at 0.0026% for the American Society and 0.0022% for the Australian Society.

‡ Kaye estimated a total investment of about A£14,300 on “49.” The average adjusted value of Kaye’s investment in 2011 is approximately A\$433,000. Wood’s request for \$200,000 USD would be worth approximately \$1,670,000 USD in 2011. These values are fixed over time and based on the historic standard of living, which measures the purchasing power of wealth. The price of the U.S. dollar in 1954 was 0.4470 Australian pound. The price of the U.S. dollar in 2011 was between 1.0330 and 0.9678 Australian dollar. The Australian monetary system changed from the Australian pound (A£) to the Australian dollar (A\$) in 1966.

Scholars have blamed Kaye’s inability to garner support for “49” to a lack of understanding of his Australian peers.¹ Kaye was unencumbered by financial or familial pressures and therefore “didn’t comprehend the real needs of the new breed of specialists of the time.”¹ But Kaye did articulate an understanding of the anesthetist’s plight and pondered a political solution.

The whole show [“49”] is thrown back upon individuals, and mighty few of them at that. For this lamentable state of things, I do not blame entirely apathy in our members: it is all part of what one might call “the tyranny of the Private Case.” Our fellows live by private practice, and they dare not miss a case, lest they forfeit their surgeon’s goodwill and patronage for the future. Hence, the most sacred obligations are at the mercy of the surgeon’s telephone-calls. One can see the hopes of better times only in some form of national medical service, which by relieving anaesthetists from economic insecurity, might set them free to follow their own bent on occasions. Such a service could easily be brought in, in this country, by a turn of the political wheel.¹⁷

Nonetheless, Kaye did not think these arrangements excused inactivity in advancing the historical, cultural, and scientific aspects of the specialty. Kaye sought small contributions from many young anesthetists, not large contributions from a few.

Kaye felt that the president of the Australian Society often excused members from Kaye’s requests. Members viewed “49” as Kaye’s hobby, which offended Kaye given his sizeable financial and personal investment in the center. Kaye wrote on May 11, 1954¹⁸:

I find that my president’s view of the case is widely shared by our members. It is a convenient one for them, as excusing them in their own eyes from any part of the 1001 chores which arise in the “anaesthetists’ castle.” If I like to cut the lawns, or paint the fences, or fold the newsletters into envelopes, that’s OK: it’s my “hobby,” but they have no obligation to help in it! In consequence, I have had to point out to my Committee that “49” is not serving the purpose for which I designed and equipped it.¹⁸

Kaye appeared resigned that “49” would fail.

“I was amusingly naïve to suppose that, if one gave chaps facilities, they’d want to make use of them. My American friends warned me of what might happen, but I wouldn’t listen. They can chant in unison, like so many black crows, those blessed words, “We told you so!” The joke is on me.”¹⁸

Kaye also bemoaned the personal costs of “49.” “I have deprived myself of all fluid capital and all freedom of movement for 4 yr. I would be a fool to continue doing so.”¹⁸ In

this same “ill-tempered letter,”¹⁸ Kaye wrote that he had given the Society a deadline of August 1955 to make “49” work.

His letter dated November 16, 1954,¹⁹ discussed the events that led to the termination of his experiment. At the August meeting, the Victorian State Section of Anaesthetists committed to improving the facilities at “49.” By November, no action had been taken.²⁷ Kaye described the “straw which broke the camel’s back.”¹⁹

A member asked what it would cost to hire technicians to do the testing. I replied, more than our Society could afford; but that we ourselves could do it in the laboratory at “49” if certain members would devote an evening or Saturday afternoon, once in every month or two, to the task. The member then said that he “thought it understood that members would not be called-upon for any form of personal service” ... and the meeting let him get away with it! Comment would, I think, be superfluous.¹⁹

In this letter, Kaye directly acknowledged the future. He described what will happen to the house and furniture, and then turned to himself.

“What I shall then do, I do not know: frankly, I feel at the moment rather like a deflated gas-bag. However, I shall doubtless end up with a job of work of one kind or another; and whilst one can work, one is never unhappy.”¹⁹

During the fall of 1954 and spring of 1955, Kaye received letters of support and appreciation from notables in anesthesia such as John S. Lundy, M.D. (1894–1973, Professor of Anesthesia, The Mayo Foundation for Medical Education and Research, Rochester, Minnesota),²⁸ Virginia Apgar, M.D., M.P.H. (1909–1974, Professor of Anesthesia, College of Physicians and Surgeons of Columbia University, New York, New York),²⁹ and John Gillies, C.V.O., M.C., M.B., Ch.B. (1895–1976, Reader in Anaesthetics, Department of Anaesthetics, Royal Infirmary, Edinburgh, Scotland).³⁰ Christopher Langton Hewer, M.B.B.S., M.R.C.O., F.F.A.R.C.S., M.R.C.P. (1896–1986, Consulting Anaesthetist to St. Bartholomew’s Hospital, London, England) best summed up the collective sentiment: “I simply cannot understand both the ineptitude and stupidity of the ASA.”³¹

The Dissolution of “49”

The April 19, 1955,²⁰ letter began abruptly:

Events have moved fast hereabouts. The ASA being unable or unwilling to use “49” as intended, I sold it as a going concern to the Australian Dental Association, the analogue of the B.M.A. That association, seeking a postgraduate Centre, jumped at the chance of getting one ready-made. We agreed to accept the price set by a sworn valuer. He proved his perspicacity by setting a price which just equaled my expenditure upon house & grounds... The scientific equipment is all mine, so that its disposal offers no problem.²⁰

The letter suggested that Kaye derived satisfaction from the ultimate purchase of the center by the Australian Dental Association. He wrote that the experiment might not have been a total failure as it “did stimulate the A.D.A. to want a Centre, and may even have stimulated in part the expansion of your own show.”²⁰

Despite Kaye’s apparent acceptance over the ultimate fate of his experiment, he still felt that the Society needed the center and should have been able to establish one given his great sacrifice. Kaye may have viewed his own leadership as inadequate.

And it could have succeeded, given different human material, or (“it could be” as they say in the States) a different curator. Even if it merely, in the manner of its failure, gave a small lesson to the A.S.A. in the value of drive & teamwork, the fact may prove useful in any future endeavor of the Society.²⁰

Kaye planned for the contents of the center to be shipped to London or New York, but the Society insisted that they be stored with the Australian College of Surgeons. This displeased Kaye, given his overarching purpose of establishing an independent discipline of anesthesia in Australia. But Kaye understood the need for a historical and cultural legacy in Australian anesthesia, and the Society left him with few options. Kaye ultimately took the path of unity rather than division, as “it seemed ungenerous to insist upon division, so I allowed the Society to take my collections as well.”²⁰

Kaye’s disappointment with his colleagues cannot be overstated. He feared too few Australian anesthetists would be able and willing to advance the profession of anesthesia. Kaye commented on the members that “descended in shifts upon “49” and packed the museum for transfer to the College. ...It was an ironical thought that expenditure of a tithe of that energy, over the past 5 yr, would have rendered the closure of “49” unnecessary!”²⁰

As for himself, Kaye was clear: “I fear that my interest in anaesthetics in this country is practically defunct.”²³ He joined the Department of Electrical Engineering at Melbourne University and “was seen no more at meetings of anesthetists for many years.”^{1,2} In 1983, Kaye helps explain his deliberate decision to get out of anesthesia practice in 1955: “I’d fired the one shot in my locker, and, when it missed, there was nothing more for me to do in Medicine [sic]... and so I went off to try to be an engineer.”²³

Kaye ended the discussion of “49” wistfully.

“Well, that is the end of “49.” However, it could have succeeded, and I am confident that someone else, better fitted for the task and perhaps in more favourable surroundings, will in fact make a success of a similar scheme. Good luck to him!”²⁰

Conclusions

Kaye’s undoing may be attributed to number of factors, namely his grand vision for “49” as a center beyond merely

a library and museum, especially during economically trying times.^{7,22,23} Kaye was overly confident that if he built it they would use it, and he did not pay attention to perhaps wiser heads who counseled restraint. Although Kaye did not identify those “wiser heads” by name, he did however confess, “My American friends warned me of what might happen, but I wouldn’t listen.”¹⁸ Later, in 1981, Kaye noted that Macintosh, at the opening ceremony for “49,” predicted its failure to Kaye’s sister because the anesthetists were not behind it.²² In the same letter, Kaye in part blames his anesthetist colleagues, declaring, “Certainly, those who entered the specialty at the end of the war were a pedestrian lot, looking for an easier life than in other forms of medical practice...”²²

Although Kaye did express some level of understanding about the plight of the practicing anesthetist, we do not know if that translated into actions consistent with that understanding. Further, even if Kaye was wholly sympathetic with their troubles, the perception that he was not sympathetic contributed to the failure of “49.”

Wilson believed that people avoided “49” because of the presence of Kaye. Assuming this was true, whether Kaye did not have the insight to realize this or was too ashamed to acknowledge it is unknown, but he is not forthright about this interpersonal friction in his letters. When talking about “49” and his colleagues, Kaye sounded baffled; he was on surer ground when discussing more factual matters.

Kaye’s faults can in part be attributed to his deep and blinding love of what “49” could have meant to the Australian anesthesia community. Kaye felt that he was “gambling in ‘anaesthesia futures’ for heavy stakes.”⁶ Kaye took the failure as a personal one, and he withdrew from the anesthesia community.²²

In fact, Kaye carried the anger for many years. In correspondence⁷ in 1981, Wilson suggested that Kaye took it too personally. Kaye objected “By thunder it was, and not without reason.”²²

In the same 1981 letter, Kaye recounts decades-old slights. “I was the subject of wounding remarks in those years. One was an accusation of ‘election-rigging’.”²² “Another accusation that hurt was that I was trying to ‘make myself the director of the ASA’.”²² Indeed, Kaye recounts the comment from the Society’s president that “49” was “‘my hobby, as his was gardening’.”²² Kaye also noted, “The nub lies in your remark about personalization, if we may use a noun so barbaric. Had the ASA of 1950–1955 been made-up of Dalys or McCauls, the scheme would have worked.”²²

Although Kaye did not achieve his immediate goals, his goals for Australian anesthesia were fulfilled in the end. The Australian and New Zealand College of Anaesthetists, responsible for defining and awarding specialist qualifications, has more than 5,000 Fellows. In 1972, the Australian Society of Anaesthetists started publishing the well-respected academic journal *Anaesthesia and Intensive Care*. Fittingly, the Australian and New Zealand College of Anaesthetists, paralleling the eponymous Wood Library-Museum

of Anesthesiology, in 1958 officially named their museum the Geoffrey Kaye Museum and then in 1987, the Geoffrey Kaye Museum of Anaesthetic History.

We do not know if the idea of “49” had an effect on the subsequent success of Australian anesthesia. Wilson seems to think so, writing in a letter to Kaye that “...the failure of the project had an effect of cementing the society.”⁷ Or perhaps its most enduring legacy is the estrangement of Kaye. We can only speculate how that may have helped or hindered the development of anesthesia in Australia.

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Competing Interests

The authors declare no competing interests.

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