

Forty Years of Anaesthesia in Malta

RICHARD LOUIS CASOLANI (1902 - 1981)

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The death of Dr. R.L. Casolani on April 8, 1981 marked the end of an era in the evolution of anaesthesia in Malta.

I often had occasion, during the seventies, to listen to him describing local developments during the formative years of his speciality in our island. At my request he kindly supplied me with notes, written in an *impromptu* fashion, about his experiences. They form the basis of this paper.

The son of a Police Officer, Dr. R.L. Casolani was born in 1902. He was educated at the Lyceum and at the University of Malta from where he graduated M.D. in 1925. Being fourth in order of merit in his course he was, in accordance with the procedure prevailing at the time, appointed Junior Resident Medical Officer at the Central Civil Hospital, now the building housing the Police Headquarters, at Floriana.

Until the end of the first World War, anaesthesia was administered at the Central Civil Hospital by one or other of the four Resident Medical Officers. With the cessation of hostilities, the post of Anaesthetist was created on the recommendation of the eminent surgeon Col. Sir Charles Ballance and other British consultant surgeons who were in Malta during the war years.

The first to fill the post was Dr. Emmanuel Vella (1885-1925) who was appointed on June 20, 1919 and who was previously anaesthetist to Sir Charles Ballance. On May 22, 1922, Dr. Vella was succeeded by Dr. George Busuttill who, like his predecessor, had gained considerable experience as anaesthetist during the war with his attachment to the Royal Army Medical Corps of the British Army¹. It was through Dr. Busuttill that Dr. Casolani was introduced to the practice of anaesthesia.

Recollecting the conditions prevailing in the Operating Theatre at the Central Hospital in the late twenties. Dr. Casolani described them in these

words:- "There were no Surgeons Dressing Rooms or Washing rooms. No Anaesthetic Room. Patients were put under on the Operating Table in full view of all the theatre paraphernalia including (the sight) of the surgeon washing up" together with his assistants at a number of white porcelain sinks fixed to the wall in one corner of the theatre. The surgeon used "to take off his outer clothes behind the screen in the same theatre... Operating gloves were sterilised by boiling for as long as I can remember as were all the instruments". Anaesthesia was administered by the "Rag and Bottle" method with chloroform and ether mixture dropped on a Schimmelbusch mask. "Patients were held down forcibly (on the operating table) by one or more nurses during induction... and many a struggle developed with the hardier country type of patient".

Casolani's service at the Central Hospital was disrupted when he contracted Undulant Fever (Brucellosis) through an accidental prick in his hand from the needle of a syringe containing blood that had been drawn from a patient suffering from the disease and which threw Casolani out of action for four months.

In 1926, after a competitive examination, he was appointed Clinical Assistant to the Professor of Surgery, Dr. Peter Paul Debono, who modernised surgical methods at the hospital and enforced a strict aseptic technique during operations.

In July 1929 the post of Anaesthetist at the Central Hospital became vacant on the retirement of Dr. George Busuttill. Casolani applied and was selected for the post. In August of the same year he went to London with the support of a letter of introduction to the Dean of St. Bartholomew's Hospital from the anaesthetist of the Royal Naval Hospital at Bighi, Surgeon Commander M. Brown, who was himself a Barth's man. Casolani was

accepted at this hospital as a trainee under one of the then junior anaesthetists, Dr. F.T. Evans. There were then no Diploma or Fellowship in Anaesthesia; these came years later when the same Dr. F.T. Evans became first President of the Faculty of Anaesthetists of the Royal College of Surgeons.

From Evans, Casolani learned all about the Boyle's machine and how to intube patients under chloroform. Mr. Boyle was then the Senior Anaesthetist at St. Barth's though he was by then an elderly man and reaching the end of his professional career. Casolani met him once or twice. Another renowned anaesthetist that Casolani came across was Sir Francis Shipway, the inventor of the Shipway apparatus, at Guy's Hospital.

On his return to Malta, Casolani set himself to apply at the Central Hospital what he had learned in London and to bring anaesthesia up to date in our island by promoting the use of Boyle's gas and oxygen apparatus and introducing intranasal anaesthesia. This was started by using a stiff gum elastic catheter which he had to make himself by cutting lengths of rubber tubing as Boyle's intranasal catheters had not yet come on the market.

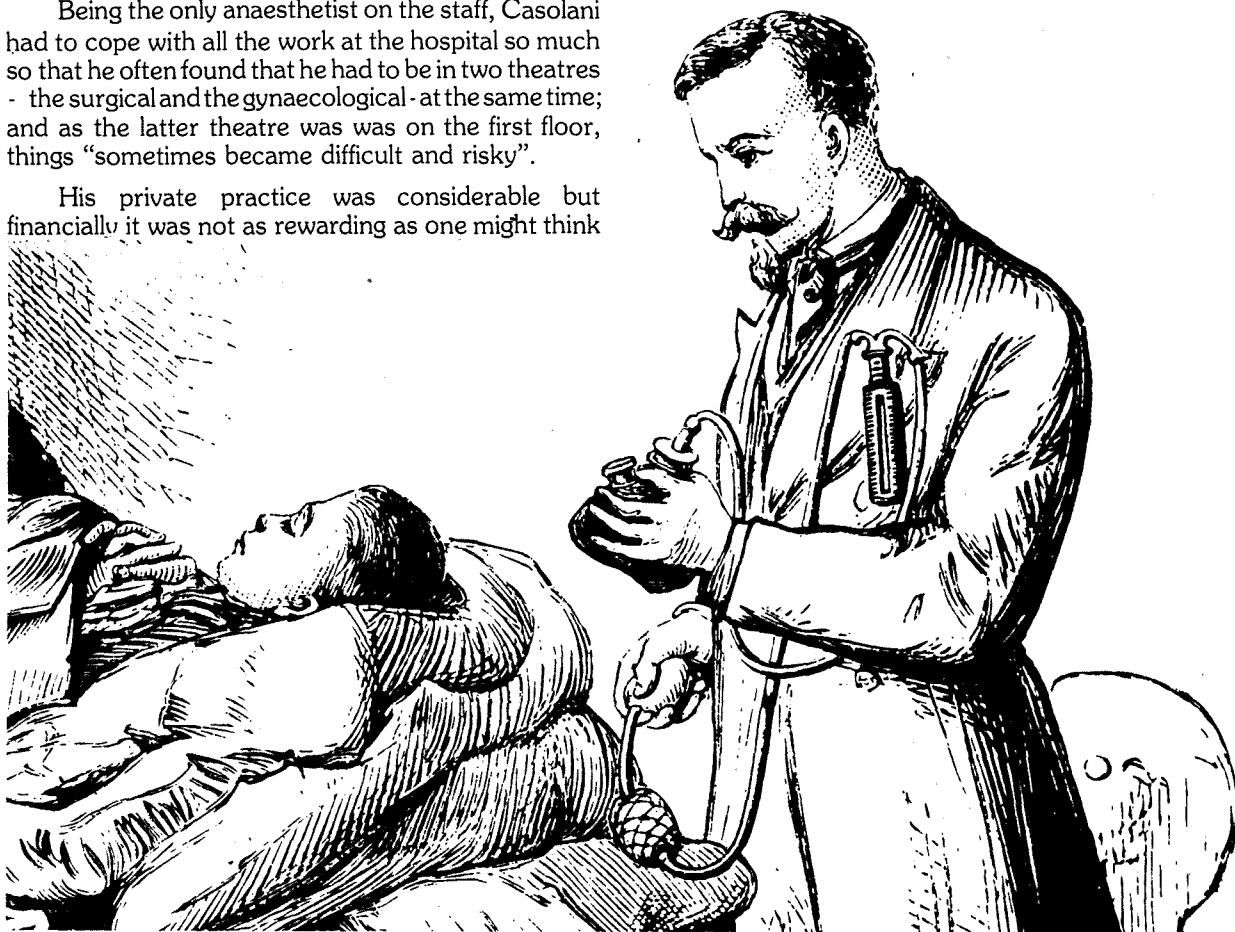
Being the only anaesthetist on the staff, Casolani had to cope with all the work at the hospital so much so that he often found that he had to be in two theatres - the surgical and the gynaecological - at the same time; and as the latter theatre was was on the first floor, things "sometimes became difficult and risky".

His private practice was considerable but financially it was not as rewarding as one might think

because in those days the fees from private patients were collected by the surgeons and the anaesthetist had to share them with the family doctor and the surgeon's assistant.

In April 1932 the post of Surgeon Lieutenant in the Royal Malta Artillery became vacant. He applied for the post although this meant giving up his intention to specialise in anaesthesia. He was selected from among fifty applicants². He once told me, in his usual tendency to belittle his own merits, that three factors may have tipped the scales in his favour:- (a) he was the grandson of a former officer of the Royal Malta Fencible Artillery - Richard Casolani - Captain and Adjutant of that regiment; (b) he was a trained anaesthetist and the army in Malta needed such a specialist; and (c) his connections with St. Barth's Hospital stood him in good stead as the Deputy Director of Medical Services, who was on the interviewing panel, was a Barth's man himself.

In January 1983 he applied to follow the Junior Officers Course in England as all new commissioned RAMC officers and Medical Officers of the Indian Medical Corps usually did. He was accepted and spent the next six months at the Royal Army Medical



College, Millbank, for lectures in Tropical Medicine and Hygiene, Military Surgery, etc. and at the RAMC depot in Hampshire to undergo a purely military training in such activities as marching and horse riding.

On his return to Malta on completion of this course, he was assigned to Lascaris Barracks, below the Upper Barrakka, the site now occupied by the Ministry of Education. He had to carry out a daily sick parade but in those days few Maltese gunners reported sick because of the prejudice against hospitalisation so that it was only when they were really ill that they went to see him. He observed that a gunner through almost illiterate, could "grasp things quickly and with enthusiasm" and "was, generally speaking, a man of upright character, loyal to his superiors, obedient to the last word" and a very accurate marksman.

Casolani's military commitments were not so time consuming as to allow the practice of anaesthesia to pass out of his hands as he had feared when he joined the RMA. In fact he was on the staff, as anaesthetist, of King George V Hospital, now Boffa Hospital but then a private hospital patronised mainly by British seamen and citizens resident in Malta. He also occupied a similar position at the War Memorial Hospital for Children at the Zammit Clapp Hospital, St. Julian's. These appointments kept him in the running with the principal surgeon of the island - Professor P.P. Debono - and thus he had the opportunity of doing some private work though the lion's share of the practice passed into the hands of his successor, as anaesthetist, at the Central Hospital - the late Dr. Edward Critien who was introduced to St. Barth's Hospital for a course in anaesthesia by Casolani.

When the RAMC became aware of Casolani's skill in anaesthesia, he was called upon to exercise this speciality at the Military Families Hospital, which was a combined women, maternity and children's wing of the main military hospital at Mtarfa.

On June 12, 1940 Malta became directly involved in the hostilities of the Second World War. Casolani was attached to Mtarfa Military Hospital where he remained for the next two-and-a-half years, at the end of which he was posted to another British military hospital - the 39th General - at Mellieha Bay. By this time he had been officially graded as a Specialist by RAMC standards. At the Mellieha Hospital he had to cope with over seven hundred pro-allies Yugoslav Tito partisans who were evacuated to Malta from Bari following the Allied invasion of Sicily and Southern Italy. Most of them - men and women - had compound fractures that had been immobilized in makeshift plaster of Paris "with pus pouring out from everywhere". It took months to get them well but with few exceptions they all eventually returned to their

country.

At the age of fifty-five years he retired from the RMA in 1957 with the rank of Surgeon Major. However, as the RAMC was short of anaesthetists, he was taken on by that corps as a full-time Civilian Specialist in anaesthesia. In this capacity apart from doing most of the work, he trained a number of British doctors who were interested in the speciality. When the RAMC left Malta in 1962, he passed on to the Royal Navy in the same grade of civilian specialist, his duties being divided between the Naval Hospital at Bighi and the naval Maternity Wing at Mtarfa. He retired completely from professional activities in 1969 at the age of sixty-seven years.

In his medical career of forty years, Casolani saw anaesthesia grow from the "Rag and bottle" era, when he took over from his predecessor Dr.G. Busuttill in 1929, to what it is to day with such developments as the use of spinal anaesthesia, the introduction of the rapid acting barbiturates, the advent of curare and, later on, the safer muscle relaxants, the use of intratracheal intubation and the sophisticated means for resuscitation now available as routine equipment. During all this period he had only two cases of cardiac arrest - at Mtarfa - both of which ended happily.

Although Casolani was unequipped with the diploma and the fellowship of his speciality - which came on the scene late in his career - he enjoyed, and justified, the full trust of his patients and of his colleagues and of the highest authorities of the British military and naval forces then stationed in Malta. In fact during his career he had the honour - and the onus - of having entrusted to his care as anaesthetist a number of distinguished personages in our island, both among the Maltese and British communities, without any mishaps.

An unobtrusive and forthright man, Dr. R.L. Casolani made his way to a high place in the chosen branch of the medical profession by the sheer force of hard work, meticulous competency and the shouldering of responsibility without flinching under circumstances of extreme difficulties in his speciality³.

References.

1. **Cassar P.** Medical History of Malta, London, 1965, p.551.
2. **Sammut-Tagliaferro A.** History of the Royal Malta Artillery, *The Armed Forces of Malta Journal*, 1975, April/July, p. 402.
3. I have not succeeded, so far, in tracing any papers from him on anaesthesia. The only two publications I know of have no link with his speciality. They are (a) *L-ewwel għajnunà lil min ikorri*, being the fourth edition in Maltese of the St. John Ambulance Association booklet *First Aid to the Injured*, published in 1943; and (b) a pamphlet *Off the Beaten Track in Malta* consisting of very short description of a number of excursions for visitors to Malta. It was written jointly with Major H.T. Laycock (late RAMC).