



IN MEMORIAM

Ian Saxton (02/01/1939 - 17/11/2009)

We met Ian in 1975 when I started my internship at Frere Hospital, where he had been in the Department of Orthopaedics for nearly 10 years. Our close family friendship with Ian continued and strengthened over 35 years.



As the son of a medical missionary, Ian spent much of his youth in Angola and later in the then Bechuanaland. He qualified at Witwatersrand University. He completed his internship at Frere Hospital, East London, where he spent his entire working life up to his retirement – in the Department of Orthopaedics for 25 years and in the Casualty Department for another 10 years. With the increasing stresses of his latter working years at Frere, he took early retirement in 1998.

Ian often stated that he did not go to work in a mission hospital as Frere was his mission, where he regularly distributed Bibles. He showed by example and hard work just what the Lord meant to him in his work and life. Even in his last days, when still able to speak, he told others about the love of God. He was much loved.

Early retirement for Ian did not mean sitting in an armchair and watching the world pass by. On the contrary, he had a wonderful time working in and exploring Australia for a total of 18 months. His first stint in Ireland was in 2002, when Ian and his wife, Yvonne, stayed for a year, and then returned annually. His last visit to Ireland was in 2009, returning only to go straight into the ICU. We had the privilege of visiting with Ian and Yvonne many times in Ireland.

An aspect of Ian's personality that I shall never forget was his ability to make friends – and he had friends all over the world. He maintained these friendships through regular letter writing and, where possible, visiting. He will be missed by many people. Their children and grandchildren were the pride of his life, and he told everyone he could about them.

No-one will remember him without thinking of Holden motor cars. He and Yvonne and their two children travelled over most of South Africa and the then Rhodesia with the same cars and caravan they have now. Old cars were his passion, and he would spend much of his spare time exploring old scrapyards, taking photos of various cars of interest to him and collecting parts for his son to use in his own restoration programme back home. His luggage on return from overseas

invariably had spare parts that he could not obtain in South Africa.

Our last months in Ireland were stressful, watching Ian's health and strength slowly ebb away. He did not have the reserves to fight the last major infection. We shall miss him – I shall miss him. We rejoice in our assurance is that he is now totally healed, alive with his Saviour with no illness or frailty, and encourage his family to hold onto the very special memories they have of him at this difficult time.

Alf Kettles

Barry Mervyn Stacey (1923 - 2009)

Dr Barry Stacey died on 21 October after a long illness. Born in Durban on 14 September 1923, he was a true Durbanite. Supported by his elder brother he was educated at Michael House but left after Standard 9 to help with his father's farm in Lidgetton. He had always wanted to be a doctor and was encouraged to do so by my surgical mentor LV Pearson, who owned an adjacent farm. This was interrupted by the outbreak of World War II. At first too young to enlist, Barry joined the navy as soon as he was 17. His father had sailed before the mast and a great-great grandfather had served under Lord Nelson at the battle of Copenhagen. As a schoolboy he was inspired by the destruction of the Graf Spee in Montevideo Bay and the rescue of naval officers from the infamous Altmark in a Norwegian fjord. His memoirs of his distinguished war career, written for his children and grandchildren, are now lodged in the National Maritime Museum in Greenwich and reflect the horrors and realities of war as experienced by a teenage volunteer.

He saw action in the Mediterranean and the Far East when Japan entered the wa, earning his Burma Star. He was subjected to repeated bombing and strafing at sea and on land as a naval marine. While helping in the evacuation of British troops from southern Greece he was severely wounded, losing a large part of his left thigh. This necessitated an arduous evacuation to Egypt, prolonged hospitalisation there and in South Africa and numerous operations. Returning to service, he entered an officers' training course in the UK, was promoted to sub-lieutenant, and spent the rest of the war on anti-submarine patrols around our southern coast.

Barry was modest and unless directly asked never spoke about his role in the war. Having lost 5 years of civilian life





he had to complete his matriculation before being accepted at medical school in Cape Town, completing his studies with assistance from the Governor Generals' War Fund. Whilst at medical school he married Moireen Raw. They were blessed with three children, Val, David and Tricia. After his internship at Addington Hospital he became an assistant to Dr Leslie Lello in general practice and eventually formed a partnership with Drs Mike Blanckenberg and Willie Mukheiber. He was a popular doctor and built up a very successful practice, delivering over 300 babies. He was adored by his patients for his services, warm nature and wonderful sense of humour.

Barry was a strong character who loved life, his family and fair play. A devout Christian, his strongest virtues were loyalty to his family friends and patients, and his fortitude in war and in his long illness when progressive amputations of his good leg forced him to give up tennis, golf and bowls. For such an active person it was a cruel blow to be consigned to a wheelchair and contend with a painful phantom limb and severe depression. Despite this he retained his sense of

humour and managed a smile even when terminally ill. In his retirement he gave his services to a charitable clinic for the poor and needy. He had strong convictions, especially in matters of religion and politics and exhibited a degree of stubbornness and non-compliance which made him difficult to treat.

We had a wonderful relationship since first meeting in 1953, both as a patient and a friend sharing holidays and other activities. He will be sadly missed by his wife Moireen, who bore the brunt and tribulations of his long illness, his children, grandchildren, sons-in-law Nigel and Chris to whom he was a surrogate father, friends and patients and by the dwindling band of veterans of the Naval Officers Association and at the Michael House Remembrance Day Service. Had he lived a little longer he would have celebrated his diamond wedding anniversary. It was fitting that he passed away on Trafalgar Day, commemorating the greatest naval victory in the annals of the Royal Navy and the death of his hero Horatio Nelson.

Roy O Wise

BOOK REVIEW

Generalized Anxiety Disorder across the Lifespan: An Integrative Approach

By Janine Juanita Benson-Martin, DPhil, LISW. Foreword by John HG Riskind. Pp. xvi + 182. \$79.95. Springer. 2009. ISBN 978-0-387-89242-9.

General anxiety disorder, or GAD, has in the past been the neglected child of the anxiety disorders partly as a result of the 'waste-basket diagnosis' approach taken by DSM-III. However, there has been enormous growth in the understanding of anxiety disorders, including GAD, over the last decade or two. In this book, Michael E Portman, a clinical social worker who has specialised in the treatment of mood and anxiety disorders takes the reader on a journey 'across the lifespan', to present current views of GAD in a rational and informed manner.

The book is divided into sections that include an historical overview and epidemiology, diagnosis and

assessment, conceptual models, psychosocial treatments and pharmacotherapy. Further chapters explore assessment and treatment of children, adolescents and the elderly, prevention strategies, cultural considerations, and approaches to treatment-resistant GAD. The volume concludes with a section on future directions and recommendations. A lot of time is dedicated to evidence-based research outcomes, which the author skilfully summarises at the end of each subsection, adding at times, and aptly so, views on the clinical experience he has acquired with time.

As a newly qualified consultant in psychiatry, I found the publication to be exceptionally helpful, in that it gathers a range of empirical evidence and lays it out in a concise, cogent and readable manner. The appendices describing the assessment tools for adults, older adults, children and adolescents are especially useful. This book would appeal to psychiatrists, psychologists, and trainees in the field, as well as to general practitioners and family physicians who would benefit from up-to-date knowledge of this disabling, and sometimes difficult-to-treat condition.

Janine Juanita Benson-Martin