FRANCIS GLEN ALLAN
1900–1975

Francis Glen Allan, a pioneer of orthopaedic surgery, died on February 15, 1975, at the age of seventy-four.

Francis Allan started his career in 1923 as house surgeon to Rowley Bristow at St Thomas's Hospital, London, and in 1928 became assistant to Naughton Dunn at the Royal Cripples Hospital, Birmingham, and at the Warwickshire Orthopaedic Hospital, Coleshill. That same year he began to accompany Naughton Dunn on his visits to the Shropshire Orthopaedic Hospital, Oswestry, which later became the Robert Jones and Agnes Hunt Orthopaedic Hospital. Allan's main work was done in Birmingham at the Royal Orthopaedic Hospital, formerly the Royal Cripples Hospital, at the Children's Hospital and at Coleshill. When Naughton Dunn died in 1939 Allan became assistant to A. O. Parker at Oswestry and in due course succeeded him as senior consultant surgeon and chief of the Hereford team of surgeons, maintaining that position up to his retirement in 1966. Thereafter he continued to work for various hospital committees up to the time of his death. Throughout the 1939–45 war, in addition to his local commitments, Allan had patients under his care in Oswestry, Hereford and mid-Wales, Stratford and elsewhere in the Midlands, thus building up an extensive clinical experience rarely equalled.

Francis Allan was a man of quiet charm, ready humour and evident shyness. His reserved nature completely hid his quite extraordinary surgical courage, inventiveness and determination, which led him to tackle problems from which most of his contemporaries shrank. His experience of leg lengthening was unique. In 1961 he read a paper giving details of 125 tibial, ninety-six femoral and thirty combined femoral and tibial lengthenings, using apparatus of his own design. His interest in scoliosis similarly displayed his ingenuity in the development of the Allan jack, an internal metal appliance used to correct the deformity in situ by mechanical distraction. The technique met with only partial success but his work laid a foundation for the modern effective techniques of internal instrumentation of the scoliotic spine now in use throughout the world. Congenital high scapula, Sprengel's deformity, was another difficult childhood problem which he tackled and of which he built up an extensive personal series.

Allan was a Master Surgeon, but his operative courage was only one facet of his ability. He loved and lived for his work and his interest lasted until the day he died. In his seventy-fourth year he was not only seeing patients and operating, but was a regular attender at regional and national gatherings and at postgraduate meetings of the Royal Orthopaedic Hospital, where his presence was greatly appreciated and his opinions always sought and respected.

His colleagues in the Midlands mourn his passing and are deeply grateful for his friendship and ready help.

He is survived by his wife, three daughters and a son.

M. H. M. H.
G. C. S.

CORNELIUS HUGH CULLEN
1912–1975

Cornelius Hugh Cullen, consultant surgeon to the North Manchester Area Authority, died on January 25, 1975, at the age of sixty-two. His early days were spent in Belfast. Having graduated from the Queen's University in 1935, he spent some time both in the hospital world and at the University demonstrating in anatomy. After an early leaning towards gynaecology he decided to make orthopaedics his career. His basic orthopaedic training was at Crumpsall Hospital, Manchester, and then at Winnick Hospital. He obtained the Fellowship diplomas of both the English and the Irish Colleges.

His first consultant appointment after the war was to the Wigan and Leigh group of hospitals, but in 1953 he was appointed senior orthopaedic consultant to the North Manchester group and to Booth Hall Children's Hospital. His interest in the speciality was wide, with particular interests in the orthopaedic surgery of childhood, of which he had great experience, and in the surgery of traumatic paraplegia. Indeed he was one of the first in Great Britain to advocate internal fixation for fracture-dislocation of the spine with paraplegia. He wrote several papers, one of which was a treatise on causalgia with his colleagues Doupe and Chance.

Corney, as he was known to his friends, was a most popular man. He was a bon vivant and an excellent after-dinner raconteur. He took a great interest in the
careers of the registrars who trained under him, and many young surgeons owe their expertise to his guidance. For many years he was also responsible for examining orthopaedic nurses and occupational therapists. A good committee man, he took a considerable interest in hospital administration, and his ability to take a broad view of any situation made him an able planner. Corney Cullen had many interests outside medicine, in particular trout fishing. For many years he was a member of a Shakespeare study group. During the last few years of his life he was well aware that he was suffering from a progressive disease that would prove fatal, but he accepted the situation with tremendous courage and continued working until the end.

He is survived by his wife—herself a doctor—and seven children, one of whom is a medical student. To them all we extend our deepest sympathy.  A. G.

JOHN BOYD COLQUHOUN
1899–1974

In 1928 I was a member of the M.Ch.(Orth.) class in Liverpool, and one winter day was invited by Sir Robert Jones to accompany him on a visit to the Shropshire Orthopaedic Hospital, where we were met by Dame Agnes Hunt and other members of the staff. At the communal lunch which was, and probably still is, a feature of the hospital, I sat beside John Colquhoun, a stalwart Scot whose cheery personality and maturity so impressed me that I was at some pains to discover his background. I found that on leaving Fort William High School, he had served in the British Expeditionary Force in France and Belgium before starting his medical course at Edinburgh University, where in his final year he had been President of the Union. Later he served as house surgeon at the Royal Infirmary, Edinburgh, and from there a McCosh Travelling Bursary took him to an internship at the Massachusetts General Hospital and the orthopaedic division of the Children’s Hospital, Boston. At this time he formed an abiding friendship with Eddie Cave, and it was a happy coincidence that the two were to meet again when they were in command of neighbouring military hospitals in Queensland during the war.

When in 1929 it was decided to establish an orthopaedic division of the Children’s Hospital, Melbourne, the post of medical superintendent was advertised worldwide and John Colquhoun was appointed. He had no easy task as at that time the late Tom King was the only surgeon in the city whose practice was confined to orthopaedics, but his personality was such that the unit at Frankston became something of a show place. John served the Children’s and Austin Hospitals with distinction until his retirement on reaching the age of sixty.

Before the war John had senior rank in the Commonwealth Military Forces, and on the outbreak immediately volunteered for overseas service. He went away with the 2nd Australian General Hospital which established itself on the canal at El Kantara. After the Greek campaign the writer joined him to form the 1st Australian Orthopaedic Unit, which later functioned as a separate hospital in its own right. Towards the latter part of the war John, as a full Colonel, was in charge of the 6th Australian General Hospital. Although he was a firm disciplinarian, he had the respect and the affection of his staff and patients.

Colquhoun joined the Australian Orthopaedic Association in 1938, became President in 1958, and as our representative attended the Combined Meeting in Washington and presented a token to the American Orthopaedic Association. John had many friends in North America and did much to foster the happy spirit of camaraderie which has existed between the two associations over the years. A keen golfer, he presented a quaich to the Association as a trophy for competition at each Annual Meeting.

And what of John as a man? He was of sturdy build, had flashing dark eyes and a somewhat Wellingtonian nose, and would have looked his best in a kilt. Of kindly disposition, he had the complete trust of his patients, but he was firm in his beliefs and with his ready wit was a formidable opponent in debate. Few medical men in Melbourne can have had such a wide circle of friends outside medicine. Thus in 1961–2 he was President of the venerable Melbourne Club, a position of honour reserved for very few.

John Colquhoun contributed much to his profession. He will be missed by many and particularly by his wife, daughter and twin sons, of whom he was a devoted husband and father and stimulating companion. Our sympathy goes out to them.  W. L. M.