Richard Pomfret Jepson was born in Accrington, a cotton and market town some 50 km from Manchester. His father, William Neville Jepson was a travelling representative for General Electric (UK) and initially the family resided with the grandparents. The grandfather was a noted train driver on the Flying Scotsman and sometimes took Richard on trips to France. He may have been an early role model.

Even at an early age he was bright, taller than average and well coordinated. These qualities enabled him to excel academically and at sports. After primary school he was awarded scholarships to the Clitheroe Grammar School and later to the Manchester University. He was a fine cricketer and a member of the Lancashire junior cricket team. He studied Medicine at the Manchester University and graduated in 1941. Here he won colours for cricket and golf.

After graduation, his first appointment was as house surgeon to Sir Geoffrey Jefferson at the Manchester Royal Infirmary. Two years after the outbreak of WWII he became a member of the No. 5 Neurosurgical Unit headed by Hugh Cairns. Their initial training was in Oxford. There were two surgeons, a neurologist, an anaesthetist, two nurses as well as six servicemen. In December 1942 they sailed from Liverpool for Algiers and a small hospital at Sousse, in Tunisia on the Mediterranean coast, some 140 km from Tunis. Cairns stayed in England. George Lord, one of the orderlies, describes the spartan accommodation and the primitive working conditions. He also wrote highly about RPJ’s neurosurgical skills and cordial relations with the staff.

The casualty rate was considerable and the incidence of infections was high. It was at Sousse where the team was visited by Cairns, Florey and his technician. They brought their first consignment of Penicillin. It was only a small quantity made in Oxford. Cairns and Florey supervised the intravenous doses. It was probably the first time Penicillin was used to treat combat casualties. The results were miraculous. As the war progressed the unit followed the campaigns through Italy finally ending in Florence. By the end of the war he learned sufficient Italian which was later used in Adelaide to settle a dispute between Italian workers and the management of The Queen Elizabeth Hospital.

After the war he returned to Manchester to Professor Boyd’s surgical department, first as a tutor in 1947, a year later as a lecturer and a reader in 1951. He became noted for his surgical expertise and his research on Raynaud’s syndrome, the effects
of vibrating tools and other physical or chemical stimuli on the peripheral circulation. Several of his early publications were in *Lancet*.

While lecturing in Manchester he met a young medical student, Mary Oliver, daughter of Thomas Herbert Oliver, the Professor of Medicine. They married in 1951.

His honours included a Hunterian Professorship and a Harkness Fellowship with Professor F.A. Simeone at the Western Reserve University in Cleveland. This unit was noted for its vascular surgery and was also involved in early organ transplantation. His wife Mary was able to continue with her medical career while with him in the USA.

The post war period was an exciting era in surgery. Antibiotics and new anaesthetic agents reduced operative mortality. Vascular surgery, heart lung machines, renal dialysis and transplantation left the specialised centres and became established throughout the country. R.P. Jepson and his wife met many of these pioneers whilst in the USA.

On return to England he was an early member of the Surgical Research Society of Great Britain and in 1954 he was appointed full-time Professor and Head of the Department of Surgery in Sheffield. By 1957 he published 44 papers, followed in later years by many more.

In 1958 he accepted the appointment as the Foundation Professor in Surgery at the University of Adelaide in South Australia.

The family arrived in Adelaide the same year with four children – all girls. His Cleveland and Sheffield experience was most valuable and it could be said that he brought vascular surgery to Adelaide. The newly built Queen Elizabeth Hospital (TQEH) was his first base. The reason for choosing that hospital was the presence of modern equipment, young staff and a well equipped animal house. Here he assembled an enthusiastic team of surgeons and researchers. The facilities of TQEH Animal House were ideal for teaching vascular surgery and performing renal transplantation on dogs. This research resulted in the first Australian renal transplant from a living donor.

The renal transplantation team was supervised by the Transplant Committee consisting of the Medical Superintendent, the Hospital Administrator and himself. Professor Jepson was also involved in the donor selection and later he co-authored a paper with W.D Crammond, Professor of Psychiatry, on the emotional effects of renal transplantation. He also initiated tissue typing for renal transplantation and was involved in the formation of the International Society of Angiology.

The first Australian renal transplant was performed at the TQEH in 1963 by Mr Peter Knight and Mr Bill Proudman.

As in Britain he participated in the formation of the Australian Surgical Research Society. The first meeting of the Society was held in Dunedin, hosted by Professor Gus Fraenkel and organised by his First Assistant, John Ludbrook. The founding members were Professors of Surgery from Brisbane, Sydney, Melbourne and Adelaide. R.P. Jepson was the Society’s first President.
It is quite likely that, as in England, Jepson insisted the Society hold yearly meetings and the local departments be responsible for the arrangements. He also proposed that there be no subscription fees and that members of the customary management committee retire at the age of forty. He was a strong believer that youth needs support and opportunity.

Professor Jepson was not the only British academic who translocated to Adelaide. Professors Whelan (Physiology) and Robson (Medicine) arrived at about the same time and were later followed by Professors Rowley (Microbiology), Cox (Obstetrics) and Cramond (Psychiatry.) They introduced many recent changes in teaching, research and academic attitudes in their disciplines.

In 1965 Professor Jepson changed his base and moved the Department of Surgery to the Royal Adelaide Hospital. Here he was respected for his diagnostic acumen and surgical expertise. This resulted in referrals of many complicated and interesting cases. He continued to train surgeons in vascular surgery and supported many others in their aims. His support resulted in the appointments of Bernard Catchpole, who was with him in Manchester and Sheffield and who followed him to Adelaide, to the Chair in Perth, and Richard Bennett, Senior Lecturer in his Department, to the Chair at the St Vincent Hospital in Melbourne.

He was a man’s man with a spontaneous wit and there are many private recollections of it quoted even today. He disliked and occasionally gently mocked pretensions. He developed a first rate surgical department, respected locally and overseas, and was responsible for many positive changes in surgical and academic administration.

He was a model surgeon and a superb technician. His early neurosurgical exposure resulted in meticulous haemostasis, gentle dissection and a calm operating theatre. It is difficult to do justice to this man. Anything he undertook was done well and with the minimum of fuss. As with the Surgical Research Society, he was a strong believer in the opportunities for young talent and resigned his academic post early, but continued to head the Department of Vascular Surgery as a visiting surgeon.

He was also a family man and took his family camping to sites as far from Adelaide as Port Lincoln and Broken Hill. His wife was a North Adelaide general practitioner and held her surgery on Wednesday evenings. RPJ cooked the family dinner followed by sweets. The food was unusual and the family called it spaghetti allsorts! By contrast, on operating afternoons a neighbour, who loved to cook, brought special memory meals.

His farm at Macclesfield was a convenient haven to rest, go for walks and even perform some basic veterinary surgery.

It is now 30 years since his untimely death but he is still mentioned in conversations. A medical library and the R.P. Jepson Chair of Surgery are reminders of his erstwhile popularity.
Dr Mary Jepson has kindly allowed us to copy some of the photographs of Professor Jepson’s early and later years. She has also provided and typed some of her recollections.

PHOTOGRAPH FROM PROFESSOR JEPSON’S OBITUARY IN THE MEDICAL JOURNAL OF AUSTRALIA

AS A BABY IN CLITHEROE
RECEIVING THE VICTOR LUDORUM PRIZE AT THE CLITHEROE GRAMMAR SCHOOL

AS A CAPTAIN OF THE JUNIOR LANCASHIRE CRICKET TEAM
CAMPING WITH WIFE MARY AND CHILDREN

PHOTOGRAPH OF THE JEPSON FAMILY ON ARRIVAL IN ADELAIDE. PUBLISHED IN THE LOCAL NEWSPAPER
PROFESSOR JEPSON ON WARD ROUND
WITH STUDENTS (1965)

PHOTOGRAPH TAKEN ON THE BALCONY OF THE ROYAL PERTH HOSPITAL.
FROM LEFT TO RIGHT: R.P JEPSON, CEDRIC NAYLOR, CECIL LEWIS,
LESLIE LE SOEUFF AND WAYNE BROCKS
AN EXCERPT FROM THE LETTER BY GEORGE LORD, A MEMBER OF THE 5TH NEURO-SURGICAL UNIT, WRITTEN TO DR MARY JEPSON DESCRIBING THE CONDITIONS AS THE UNIT FOLLOWED THE CAMPAIGN FROM AFRICA TO ITALY

AN OIL PAINTING OF MAJOR JEPSON DURING WW II. PHOTOGRAPHED IN DR MARY JEPSON’S HOUSE IN NORTH ADELAIDE. ARTIST UNKNOWN.
A CARTOON BY HUGO SHAW OF PROFESSOR JEPSON AS A PRESIDENT OF THE ADELAIDE MEDICAL STUDENTS SOCIETY

PROFESSOR JEPSON AT MOUNT LOFTY GOLF COURSE DURING A GOLF MATCH WITH MEDICAL STUDENTS (1960). SEE COMMENT BY J.D. HARRIS ON HIS OTHER GOLF DAY AT THE ROYAL ADELAIDE GOLF CLUB.

R.P. JEPSON WITH THE ADELAIDE MEDICAL STUDENTS' SOCIETY (1960)
The No.5 Mobile Neurosurgical Unit:

Hugh Cairns set up a training unit for head injuries in 1941. Ken Tutton and Dick were sent from Manchester and Cecil Gray from Liverpool. The No. 5 Mobile Neurosurgical Unit members were gathered in Oxford in 1942. Members were Joe Schorstein, C.O., Ken Tutton and Dick Jepson, surgeons. Willie Whitty, neurologist, Cecil Gray, anesthetist, six ordinary ranks and two Q.A. nursing sisters. The unit had its own transport, tents, electricity, superb surgical instruments etc. and they sailed from Liverpool in December 1942. It arrived in Algiers for Christmas. The boat carrying some of the equipment was torpedoed. The two sisters did not catch up with the unit until they were in Italy.

Head injuries and spinal injuries were dealt with in tents or sometimes in buildings as the front advanced. Sterilization was by boiling, using primus stoves. Work loads were erratic; following battles they were 18 hours on and 6 hours off. Mortality rates were high and it was a matter of learning on the job. When possible the casualties were sent back to the nearest hospital. This was also run by the neurosurgical team. It was to the little hospital at Sousse that Hugh Cairns and Howard Florey came with penicillin, personally supervising the dosage and administration. There were dramatic post-operative recoveries and improvements and euphoria. This apparently was the first use on the battle field of penicillin, although it had been used in England.

With the 8th Army the unit traced its steps to Tunis and onto Phillipville. From there the unit went to Sicily and onto Naples.

Cassino followed in 1944. The work loads were enormous: 18 hours on and 6 hours off. Two tables were used with the orderly assisting. Instruments were sterilized on four primus stoves. There were no X-rays or lab work available. The work load prevented the unit going to Anzio, but later they were sent to Rome.

A story of penicillin:

In 1896 Hugh Cairns was born in Port Pirie to a Scottish carpenter. He went to Adelaide High School and then to the University to do medicine. He received a Rhodes Scholarship to Oxford, as did Howard Florey. When WWI started he served in the army and was at Gallipoli. He became very interested in head injuries and their treatment and was responsible for the insistence on the use of helmets for dispatch riders. He was appointed as a Professor of Neurosurgery at Oxford.

When WWII broke out he offered to train surgeons. My husband, as a young surgeon, was sent by the Army to Oxford where the No. 5 Head Injury Unit was being formed. A team of 20 physicians, anaesthetists, surgeons, nursing staff, orderlies and technicians were brought together and then sent out by sea to North Africa and Algiers. Work was carried out on head and spinal injuries in tents and sometimes in buildings.
The results were poor because of infection. With the 8th Army they moved toward Sousse. It was here that Howard Florey and Hugh Cairns together with a technician came to the unit. They brought a white powder made in the Oxford Lab. Apparently it was magical when given intravenously. They returned to Oxford and applied to the War Office for further trial. This, however, was questioned as the Office preferred to use this magical substance on syphilis and gonorrhoea, as the troops would be in action within a week. Hugh Cairns and his friend Florey won and penicillin was used in the head injuries unit whilst the dose and treatment was standardised. The Americans improved the manufacture and supply. The No. 5 Unit became a part of the 8th Army and remained a close unit after the war, although working in different areas, and I listened to their stories.

**Other “bits”**

Between the wars, Manchester University was quite dynamic place. The Physics School, where Rutherford was working in the physics field, was particularly prominent. He was lecturing to the medical students while my mother was there.

RPJ met many in the Physics School and had many friends. John Charnley was developing the new femoral head for the femur and the use of insulin for the treatment of diabetes was being refined. There was a laboratory in a bedroom for this purpose.

After staying on in Italy the Unit went to Austria and Germany and was involved in opening up of the concentration camps. It was after this experience that he developed horror of anything German, although it modified over the years.

We went to New York by boat seeing icebergs and stormy seas. Rationing was still in force in the UK and Dick ate for two. I was not a good sailor. We came into NY on a sunny morning passing the Statue of Liberty – unforgettable. We were met, given tickets for accommodation and put in a taxi. At this time you could not take money out of England. The next day we were put on a train to Cleveland, along the Hudson. My memories of NY were tall buildings, wind, dust in my eyes and food vending machines.

In Cleveland, Dick worked in the dog lab grafting veins to replace arteries, whilst I joined the medical course. Part of the condition of the funding was that we should travel. This we did in an old car visiting many medical centres across America (Mayo Clinic, etc.).
Recollections by Mr J. D. Harris

Mr Jim Harris was a Senior Lecturer in Professor Jepson’s Department of Surgery at TQEH in 1961. They both retired in 1968 from their academic posts and became partners in private surgical practice in North Adelaide. However they continued as visiting vascular surgeons at the RAH and TQEH.

I saw a good deal of Dick during the last 20 years of his life. I was lucky to be appointed a Senior Lecturer in Surgery at TQEH in 1961. Later we both retired from the University at the same time (1968) and we became partners in private practice in North Adelaide. We had a good rapport and there were never any problems, which are sometimes encountered in medical partnerships.

Dick always said that one performed one’s best in academic work by the age of forty and he felt that after ten years in an academic post it was time to move aside for a younger person.

I have learned a great deal from Mary Jepson’s contribution which was new to me. He was a very modest person and spoke little about his achievements.

I knew that he was a good golfer and I believe that there was a professional golfer who lived near by who taught Dick during his holidays. I was surprised that a golfer of his calibre could give the game away as he did when he came to Australia.

Many of us, however, remember the annual AMA tournament. He arrived at the first tee at the Royal Adelaide Golf Club with a set of old wooden golf clubs in his shoulder bag. Having secured a handsome handicap, he proceeded to tear the field apart and left his partner, John Maddern, also a good golfer, in a state of shock.

Dick and Mary liked to spend as much time as possible at their farm at Macclesfield. They both worked very hard there. I felt that this took the place of golf for Dick.

Working for RPJ in the Department of Surgery was an energetic experience. He carefully guided his team in clinical and laboratory work and kept a helpful eye on each person’s progress.

Dick also organised a schedule of lectures to be given to the medical students and somehow we never gave the same lecture twice.

It was a custom that before the annual College and Surgical Research Society meetings that the Departmental staff would present their papers to other members of the Department. This was novel for Adelaide and was useful to junior members since criticism was freely given.

His experiences in Africa and Italy amazed me. From memory I am unable to recall that he ever discussed the war, such was his modesty. I remember that he said he would never buy a German car. When I asked him about Japanese cars he said that they were OK!

He played a large part in the development of vascular surgery in Adelaide and indeed vascular surgeons were on a steep learning curve in the early days.
Unlike many vascular surgeons, Dick continued to perform general surgery. I used to enjoy assisting him with thyroid surgery. His technique was impeccable and blood loss was always minimal. Like many British surgeons who had large exposure to operative surgery, Dick was a superb technician.

Dick Jepson’s academic brilliance and superb surgical technique must be a rare combination. South Australia was indeed fortunate to have RPJ as their Foundation Professor of Surgery at the University of Adelaide. Without doubt he put Adelaide on the surgical map.