

Editorial

Obituary: Russell Hopkins OBE

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Russell Hopkins was a force to be reckoned with in surgery, and in medical politics. Born in Sunderland on 30 April 1932, he attended school during World War II. The family struggled after his father's death but he was offered places in medical and dental school. He chose dentistry in Newcastle but knew this was a mistake and tried unsuccessfully to transfer to a combined course.

Periods in dental practise included Salisbury, Southern Rhodesia, developing a growing interest in general anaesthesia. He returned to the UK to an SHO post at Nottingham General Hospital in oral surgery and maxillofacial injuries. There he worked for Tom Battersby, the first important influence on his career. The unit treated a catchment population of 2 million including all facial trauma. Battersby's 1966 paper on fixation of mandibular fractures with plates was years ahead of its time. Russell worked hard, had natural surgical talent and gave anaesthetics for two GA lists weekly in A&E.

A Registrar post followed in Chertsey coming under the influence of Norman Rowe, who did his major surgery then on Russell's patch. After medicine at the Royal Free, he did surgical jobs in the Bolinbrook Hospital and medical posts in Croydon. His Resident Surgical Officer with whom he developed a friendship was Bill Heald, later CBE and Vice-President of the RCSE. In his holidays he worked as a ship's doctor on the Union Castle Line to South Africa often wearing Mr Heald's uniform. After a senior registrarship in Newcastle he obtained a consultant post in Cardiff.

In the dental hospital in Cardiff consultants were held in low esteem and the relationships with the academics took some years to settle. Later asked to apply for the Chair in Oral Surgery, he declined. He still celebrated when his daughter Claire herself was appointed to a Chair (in Rhinology at Guys).

Russell's early days in Cardiff were spent establishing himself (with his then senior registrar, Khursheed Moos, now also OBE) often doing procedures from written papers. He was not allowed to teach students but they queued voluntarily to join his clinics and operating lists to learn. He took over facial trauma management in Cardiff becoming chair of dental staff and then medical staff. His waiting list demonstrated the breadth of his clinical practise. He established joint surgical clinics in orthodontics with Derek Seel, and in maxillofacial prosthetics with John Bates and then significantly with Derek Stafford well before they became the norm

elsewhere. And in 1970 he married Jill whom he met on the golf course and they had three children, Richard, Claire and Robert.

Russell was unafraid to criticise poor methods and to ask searching questions at major meetings. He wrote, including his book on Pre-Prosthetic Surgery, lectured impressively, and developed close relationships with colleagues in the USA, Europe and Lucknow in India. He was proud of giving trainees quality surgical training and of their subsequent distinction in consultant posts.

Active in the BMA, he sat on CCHMS, the NSC and JCC. In 1985, he became general manager of the University Hospital of Wales, one of the first clinicians to hold a senior role in management. He rectified some deplorable conditions of the estate and took on vested interests who sometimes short changed the NHS. With good vision, he authorised funds for Brian Rees (now OBE) to start endoscopic cholecystectomies. He spoke truth unto power holding that general manager's post for 6 years and awarded an OBE in 1989.

In 1993 he became President of BAOMS hosting our national conference in Cardiff. He went on to chair health trusts. He could be tough, extremely provocative and even

outrageous but he could also be a delight to work with. He wrote in his autobiography, "Some clinical managers forgot they were clinicians and that ethical and quality care of patients was their number one priority. Because of this an increasing number of NHS disasters filled the headlines". He had no idea that he would become one of its victims.

He was not able to fully enjoy retirement after complications following routine surgery which he typically shared in the BMJ and the media. His last 16 months were spent mostly at home thanks to the fantastic efforts of regular visits from Robert and Claire, with Jill on the day shift and Richard at night.

Russell Hopkins was larger than life but his medical problems eventually caught up with him and he died peacefully in his sleep on 2nd February 2020.

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