Friends of Millbank

Brigadier Ian Robert Haywood FRCS, FRCSEd, QHS

A short biography, by his daughters

'To be a good doctor one must care for patients. To be a good teacher, one must care for students.

Ian was both.'

Early Life and Education

Ian was born on 13th October 1941 to Eileen and Robert Haywood in Buckland Monachorum, Devon, England. He was an only child.

He was educated first at Grosvenor School, Edwalton, Notts and then at Bedford School, Bedford. He left Bedford School in 1959, having achieved positions as School Monitor, Head of House and House Captain of Boats. He was awarded the Lord Kitchener Memorial Medical Scholarship. *(Footnote1*)

Medical School

Ian received his undergraduate medical training at St Thomas's Hospital Medical School (October 1959-1964), the first in his family to go to University and certainly the first to study medicine. He undertook clinical studies at St Thomas's Hospital Group.

He qualified in May 1964, as a Licentiate Royal College of Physicians of London (LRCP), a Member of Royal College of Surgeons of England (MRCS) and with a Bachelor of Medicine, Bachelor of Surgery from the University of London (MBBS).

During his medical training he was awarded the Dressers Prize by the Surgical Unit (St Thomas's Hospital, 1962), The Cheselden Gold Medal for Surgery (1964) and The First Beaney Prize.

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[1] Medical Service Scholarships were first awarded by the Lord Kitchener National Memorial Fund in 1935. These are awarded by the committee of the fund, in conjunction with representatives of the medical branches of the Services, to candidates who undertake, on completing their course, to apply for commissions in the medical branch of one or other of the Services. (BMJ, 25 May 1935, p.1102)

Postgraduate Surgical Training

His first house surgeon job was in the Professorial Surgical Unit at St Thomas's Hospital (June 1964 -January 1965) and then as House Physician at Addenbrooke's Hospital, Cambridge (March - September 1965). It was whilst working in Cambridge that he met his future wife, Margo.

As a medical student Ian held a combatant commission in a Territorial Infantry Battalion, 1st Bn the Bedfordshire and Herefordshire Regiment where he was a Platoon Commander. This Territorial commission was converted to a regular army commission as a Captain of the Royal Army Medical Corps on 29th November 1965. He attended the Postgraduate Medical Officers Course at Ash Vale and the Royal Army Medical College, London (December 1965 - March 1966). He was awarded the Marshall-Webb Medal for Medical Administration and the Montefiore Medal for Surgery.

He was then appointed as the Regimental Medical Officer, 1st Battalion Royal Welsh Fusiliers. He served on operational duty with the Battalion as part of the United Nations Force in Cyprus (March - November 1966) and later in General Medical Duties, British Army of the Rhine (BAOR) (November 1966 - December 1967). Ian loved Germany. He had spent time there as a child when his father was posted to Hannover. He taught himself German and formed life-long friendships during all his tours in Germany. Later in his career he became an active member of the Anglo-German Medical Society.

He completed senior house office (SHO) rotations in Orthopaedics, British Military Hospital (BMH) Rinteln (December 1967 - June 1968) and in Casualty, BMH Hannover (June - December 1968). Following his time with BAOR he returned to London and worked as a specialist in the General and Neoplastic Surgical unit Queen Alexandra Military Hospital, Millbank London (January 1969 - January 1970) and then at the Army Neurosurgical Unit Royal Herbert Hospital, Woolwich, concomitant with an honorary clinical assistantship in the South East Metropolitan Neurosurgical Unit at Brooke General Hospital, Woolwich (January - July 1970). He moved into general surgery, working at the Royal Herbert Hospital, concomitant with an honorary clinical assistantship in general surgery at the Brooke General Hospital, Woolwich (July 1970 - October 1971).

Surgical and Academic Career

He became a Fellow of the Royal College of Surgeons of England, June 1971 and moved to BMH Hannover with his young family, where he worked as a Senior Specialist (October 1971 - June 1973). His first daughter, Jennifer, was born in September 1971.

He then went to Belfast, as Officer Commanding 56 Field Surgical Team at Military Wing, Musgrave Park Hospital (June - October 1973). His second daughter, Suzy, was born in June 1973.

His higher surgical training was completed at the Army Orthopaedic Unit at the Royal Herbert Hospital, Woolwich (October 1973 - October 1974), followed by a year at the General Surgical Unit at the Eastern General Hospital, Edinburgh (October 1974 - September 1975) and then at the Army Neoplastic Unit at the Queen Alexandra Military Hospital (QAMH), Millbank, London (October 1975 - June 1976).
He then pursued a couple of academic appointments at Bart's and the Westminster Hospital, appointed Lecturer at the Professorial Surgical Unit Westminster Hospital, London (June - October 1976), then as a senior specialist at the Cambridge Military Hospital, Aldershot (October 1976 - September 1977). This was followed by a Lectureship at the Professorial Surgical Unit, St Bartholomew's Hospital, London (September 1977 - September 1978).

He was appointed Consultant in Surgery by *Director General Army Medical Services (DGAMS)* in July 1978 and granted Certificate of Accreditation in General Surgery from the Royal College of Surgeons of England, October 1978. His first Consultant position was at the Military Wing, Musgrave Park Hospital, Belfast

(October 1978 - March 1979), followed by appointments at Princess Alexandra Hospital, Royal Air Force Wroughton (April 1979 - August 1980) and then at BMH Munster (August 1980 - August 1983).

His interests in medicine were across multiple disciplines, both in teaching and practice, including vascular surgery,[1,2,3] and oncology,[4] having worked in units specialising in these areas at QAMH, Millbank and BMH Munster. During this period, he collaborated with several colleagues in military and civilian hospitals on several research projects. [5,6]

Pre-Hospital Care and Trauma Management

As a military surgeon he naturally had an interest in trauma and military surgery. In his early career his chief interest was in missile and blast injuries [7,8,9] and in developing methodologies and training programmes to effect better care in both military and civilian settings.[10] From the 1980s onwards he developed a deepening interest in improving standards in immediate care in civilian as well as military settings having seen the weakness in trauma management in the UK.[11] Ian's simple philosophy was that any doctor, irrespective of their speciality, should be able to sustain the seriously injured for that first golden hour with which we are now all so familiar.[10]

By 1983, when he became Consultant Surgeon and Consultant in Charge of the Accident and Emergency Unit, Cambridge Military Hospital, Aldershot, he was already aware of the gaps in pre-hospital care. He started to evaluate pre-hospital stabilisation routines and produced guidelines for first-on-scene personnel. He became the Army Observer to the British Association of Immediate Care (BASICS) and both in this and in his own capacity he played an active role on a number of committees, including the Research and Development Committee and the Editorial Board. He was an active member of the British and European Resuscitation Councils.

He became a member of the Stoke Group, which advised the government on the professional and medical aspects of disaster management. He also became a Fellow of the Association of Surgeons of Great Britain and Ireland.

In 1985 he was appointed Joint Professor of Military Surgery at both Royal Army Medical College and Royal College of Surgeons England. He had already delivered the first British Army Trauma Life Support training, subsequently renamed Battlefield Advanced Trauma Life Support (BATLS).[12,13]Along with colleagues he developed and implemented BATLS which has remained a key part of military medical training.[1415,16.17] (See also Footnote [2]).

In 1987 Ian became the first Ben Eiseman Visiting Professor, Uniformed Services University of Health Sciences, at Bethesda, Maryland and was awarded the Mitchiner Medal of the Royal College of Surgeons.

In the late 1980s, the Royal College of Surgeons reported that as many as one in three deaths occurring in hospital were preventable.[18] Having developed BATLS Ian was instrumental in bringing the principles of Advanced Trauma Life Support (ATLS) across from the US to address gaps in pre-hospital and trauma treatment,[19] and in establishing ATLS courses in the UK.[14] This system of managing the severely injured has now become best practice. It offers clear protocols for managing major trauma and is now part of a common international language for care of the injured.[20,21] The programme has expanded over the years and although the UK has one of the largest ATLS programmes in the world outside the USA demand for courses still

[2] **BATLS** codified trauma care and repeatedly demonstrated its value in Operation GRANBY – the name given to British military operations in the 1991 Gulf War – and during mass casualty situations in the Balkan conflicts. BATLS provided a framework for thinking about trauma care from battlefield to field hospital, retaining its use even as various aspects evolved due to a changing approach to haemorrhage control. (refs 15,16)

exceeds availability. Similar courses, such as Pre-Hospital Trauma Life Support (PHTLS), Pre-Hospital Emergency Care (PHEC) and the Advanced Trauma Nursing Course (ATNC), have developed alongside ATLS in addition to BATLS for managing military casualties.[22]

He 1988 Ian became an Officer Brother of the Order of St John of Jerusalem. He also became involved in the Council of the Royal College of Surgeons in Edinburgh and their Board in Accident and Emergency Surgery. There he helped develop the Diploma of Immediate Care and was also an examiner for the Diploma. He was elected to the Fellowship of the Royal College of Surgeons of Edinburgh in 1989. He was one of the three founder members of the Faculty of Emergency Medicine of the six Royal Colleges (physicians and surgeons).[23]He taught on courses for the final FRCS and held tutorials both for this and other postgraduate examinations.

In 1990 he became Consultant Surgeon, 33 General Surgical Hospital Al Jubayl, British Forces Middle East. He was promoted to Brigadier in 1991 and returned to the UK to become Commanding Officer at the Queen Elizabeth Military Hospital (QEMH), Woolwich where, alongside his other interests, he worked to improve the resources made available to support the diagnosis and treatment of service personnel with Post Traumatic Stress Disorder (PTSD).

In 1992 Ian was elected to The Worshipful Society of Apothecaries of London.

In April 1993 he was appointed Director of Army Surgery at The Ministry of Defence, appointed Honorary Surgeon to the Queen and Consultant Surgeon to the Royal Hospital, Chelsea.

His pioneering contributions to the field of pre-hospital and immediate care did not go unnoticed. He was awarded the Blewett Prize by the RAMC in 1993. This award is given to the person or unit who has done most to enhance the Army Medical Services (AMS) in the field of operational medical support. This was in recognition of the work that Ian had done with respect to BATLS training. His work was also acknowledged by the award of the Asmund Laerdal Medal of the British Association for Immediate Care in 1993.[11]

In 1994 he was awarded the Michael DeBakey International Military Surgeons' Award for Excellence from the US Forces, for his role in the introduction of ATLS to the UK both in Military and Civilian Aspects.[23,24] He was particularly pleased with this award as he so admired DeBakey's work. DeBakey helped develop the Mobile Army Surgical Hospital (MASH) units and later helped establish the Veteran's Administration Medical Center Research System. This prestigious accolade, awarded by the US Uniformed Services University of the Health Sciences (USUHS), is presented annually to a non-US military surgeon who has made 'significant contributions' to international military surgery.[25] (See also Footnote [3]).

Ian was interested by every aspect of medicine, from its history, through practical application to research and education. He was a passionate teacher and found medical teaching at both under and postgraduate level very satisfying. 'To be a good doctor one must care for patients. To be a good teacher, one must care for students. Ian was both.'[23]

He lectured widely around the world on the principles of trauma surgery and was passionate about training medical personnel on all aspects of the initial management of trauma in both war and peace, to improve the chances of all trauma casualties reaching surgical centres alive. 'He, more than anyone else, introduced the drill still used for the aggressive early management of battlefield casualties so that those first on the scene

[3] **UK recipients of the DeBakey award:** In 1986 Major General Robert Scott (Director Army Surgery) became the first British military surgeon to receive the award. Brigadier Ian Haywood became the second recipient of the accolade, in 1994. Thereafter, Colonel Peter Roberts (Professor Military Surgery) received it in 2000; Colonel James M Ryan (Professor Military Surgery) in 2004; and Lieutenant Colonel Nigel Tai (Trauma Surgeon) in 2010. (ref 25)

could ensure that the casualty had a functional airway, that an intravenous drip was put up and that chest drainage was in place for those with damaged lungs and ribs, so that the casualty did not die of any easily corrected symptom.' [26]

Throughout his career he maintained an unusual breadth of medical knowledge for a specialist, and he particularly appreciated the unique role of the Royal Society of Medicine (especially the Clinical Section) in providing a cross-disciplinary forum for exchanging knowledge. He was energised by the opportunity for International collaboration and the exchange of ideas with medical colleagues from all over the world as well as in the UK. He strongly believed in life-long learning and it was particularly fitting that a group of colleagues have subsequently founded the Haywood Club.[27,28] (See Footnote [4]).

Ian's knowledge of and enthusiasm for medicine was not limited to current practice. He both enjoyed and appreciated the significance of the history of surgery, especially battlefield developments. He contributed to an ITV series on The Brutal Craft: Pioneers of Surgery (1988), in which he detailed how ancient surgeons were manual labourers of questionable intelligence who gained experience working on battlefield injuries, detailing some 16th century procedures. He had a particular fascination for Larrey (Dominic Jean Larrey (1766-1842), father of emergency medicine and Napoleon's Surgeon General) and wrote a paper on triage that highlighted the Napoleonic origins of the word and of Larrey's contribution to modern surgical techniques. [7] He was delighted to attend Larrey's re-interment at Les Invalides in 1992 reported in the French publication Histoire des Sciences Médicales.[29]

Unfortunately, despite being a non-smoker he developed lung cancer in 1994 and died later the same year, 3rd September. He was very frustrated that terminal illness cut short his career when he felt he had so much more to do. In his final months he was still campaigning for the future of Defence Medical Service and lecturing, even with a syringe driver in his arm to control the pain of his condition.[17] He carried on working as much as he could right up to the end, working on a treatise on Larrey and peer-reviewing journal articles, working from his hospital bed in the week before he died.

He is remembered by his friends, colleagues and family with great affection and admiration for his many gifts and as a pioneer in the advancement of pre-hospital and trauma care both in civilian and military settings.[30,31,32,33] In 1994, BASICS further recognised Ian's contribution to pre-hospital care and trauma life support training in the United Kingdom through The Haywood Memorial Lecture and Medal.[10]

Ian possessed exceptional foresight and drive, which when combined with his knowledge of surgery and flair for organisation made him a formidable figure.[32] Ian was very witty and entertaining but his jokes were often at his own expense. He always thought every issue through for himself, examining every side of the argument. He was always prepared to help his colleagues and modest enough to know when to ask others for help. Mike Payne recalls the story how, not long before he became ill, Ian went to help a colleague who had run into difficulties in an operation on a Friday afternoon: 'The young surgeon had had to perform major surgery on a consultant colleague, and post operatively things began to go wrong. It was a high-profile case. Ian did not confine himself to telephone enquiries of progress. When the situation became desperate, he

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[4] **Haywood Club.** The 26th April 1996 saw the foundation of the Haywood Club, named in memory of the late Brigadier Ian Haywood, the former Professor of Military Surgery. The club, in its current incarnation, is open to all officers in the Defence Medical Services (DMS) be they doctors, nurses, medical support officers (MSOs) or allied health professionals (AHPs). The aim of the Haywood Club Tri-Service Medical Society is to provide an educational programme of interest to all members of the Defence Medical Services. The club aims to be multidisciplinary in all of its activities and provide a forum for pan-specialty, pan-professional and tri-service military medical education. It also aims to provide a concurrent social focus to foster closer working between all healthcare providers in this arena. It fundamentally aims to support, complement and enhance the existing work of all existing providers of military medical education.

went to be with the patient and the young consultant. He spent the late evening going through the case with that analytical mind of his and sympathising with the young surgeon, who was himself now desperate. His analysis complete, he accepted his own limitations. He pronounced "I can't help you – but I know a man who can!". A very eminent surgeon turned out of this home late at night at Ian's request and operated into the early hours, assisted by the young surgeon and by Ian. Ian's intellect saved the patient and his compassion the surgeon, and his humility ensured the right man did the job. Typically, he stayed to see it through.' (He then went home, washed and spent all day teaching on a St John's course, no fuss, there was a job to be done). [24] He practiced what he taught. His daughter, Jennifer, remembers vividly the advice that he gave her as a medical student, that it was critically important not to only turn to people of the same level of experience for help, but to be brave enough to ask your seniors for help, and not be worried about looking stupid. Looking stupid is irrelevant when people's wellbeing is at stake. "He was the best teacher I ever had."

'Ian was quiet and unassuming. He had a ready wit and was an erudite formal speaker and born raconteur with a passion for history.'[31] He was gifted with great organisation and teaching skills, boundless energy and dedication.[23] As a colleague and friend his intellect, honesty, sincerity and caring were much appreciated, he was always more interested in you. He was honest, straightforward and loyal: 'he always liked to give everybody a chance, a true gentleman and a delightful companion.'[23] With his death the Army Medical Services, BASICS and the pre-hospital care world lost a friend and dedicated professional colleague.[10] There are also many victims of trauma who can be grateful that they were treated by individuals who benefited from the teaching of Brigadier Ian Haywood.[26,30]

His interest in trauma medicine and our memory of him live on through The Friends of Millbank Haywood Memorial Lecture inaugurated in 2021.

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