## GOING BACK TO OUR ROOTS: ESTABLISHING AN OTORHINOLARYNGOLOGICAL HISTORICAL SOCIETY IN AUSTRALIA.

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## Abstract:

Following on from the example of many of the world's Otolaryngology, Head and Neck Societies, the Australian Society (ASOHNS) has recently established a Historical Section. The Historical Section's primary aim is to facilitate and encourage an interest in and knowledge of the history of Otolaryngology. Specifically, it will aim to: (1) maintain a strong Australian focus, including Indigenous and post-settlement otolaryngological history; (2) consider the history of otolaryngology in the broader context of the history of medicine and society; (3) foster an early interest amongst junior doctors and Otolaryngology trainees; (4) develop connections with similar national and international historical societies. This report describes the development of the Historical Section from conception to realisation.

The council of the Australian Society for Otolaryngology Head and Neck Surgery (ASOHNS) recently approved the establishment of a new historical section on the 24th October 2015. The inspiration for this initiative came from an appreciation of the remarkable figures in history that have helped the development of our specialty and its landmark breakthroughs.

The primary aim of the section is to promote a wider understanding and appreciation of the rich history of otolaryngology. The education of the history of medicine is important. Some suggest it isn't a worthwhile use of limited teaching time to focus on history, when it could be spent on the technical or scientific aspects of our craft (1). It is certainly not justifiable though, to ignore history altogether simply because of seeming constant lack of time. It is crucial for us to all know where we have come from, in order to have perspective on the future. At the very least, we should avoid going backwards and repeating the missteps or neglecting the lessons of the past (2).

The founders of the historical section of ASOHNS wish to keep the scope broad when considering the history of otolaryngology. Otolaryngology is a relatively new specialty and was once considered under the same rubric as ophthalmology. Furthermore, prior to its inception, otolaryngology conditi-

ons were treated by general surgeons, as all surgeons were generalists. Therefore the history of otolaryngology should be considered in the same broad terms rather than narrowly defining what may constitute otolaryngological history as the specialty is in the present day. The increasingly siloed nature of medicine and surgery has the potential to blind us from our common past. Keeping the scope broad ensures that the historical education provided by the section's activities is as inclusive as possible.

Another aspect of the history of otolaryngology that was deemed a priority when the section was established was to include representation of the medical practices of Indigenous Australians. There is a rich culture of medicine and health care using Australian "bush" remedies for the spectrum of human ailments (3), yet, to-date, no one has compiled an accessible reference for this in otolaryngology. It is a valuable repository of knowledge which can improve appreciation of our Indigenous heritage as well as potentially improve our delivery of healthcare to both Indigenous and non-Indigenous Australians. It is the practice of Indigenous Australians to pass on information through stories (Dreamtime) and word of mouth. Much of their rich history is only known to the older generation as there is no written record. This behooves us to ensure a record is made so this is not lost for future generations.

Involving surgeons in training and young fellows of ASOHNS in the historical section as much as possible is essential in maintaining its relevance and longevity. To aid in this, ASOHNS has established an an-

Nicholas Jufas Kolling Deafness Research Centre University of Sydney Royal North Shore Hospital St Leonards, NSW, 2065 Australia drnicholasjufas@gmail.com nual prize for the best historical presentation from a trainee at the annual ASOHNS meetings. This strategy has been employed by other historical sections around the world and will hopefully prove successful in Australia <sup>(4)</sup>.

The historical section was launched at the annual scientific meeting of ASOHNS 2015 in Sydney, with the kind support of the ASOHNS council and the meeting's organising committee. This involved a plenary presentation as well as a concurrent session of presentations dedicated to the history of otolaryngology. It was a resounding success and very well received.

The plenary and concurrent sessions provided the opportunity for a large audience to enjoy a number of excellent presentations from an exciting panel of speakers from diverse professional backgrounds, including invited international guests. It was also fortunate that there were intergenerational local surgeons who contributed which was exactly what was hoped for by the founders of the section and very encouraging to achieve at the outset.

There was an eclectic mix of presentation topics, including biographies on Australian and international surgeons, detailing the lives and achievements of Bruce Benjamin and Henry Heimlich respectively. Historical reviews were also presented, covering the contributions of a wide variety of surgeons and scientists in the history of head and neck surgery, endoscopy and ossiculoplasty and in this way exploring disciplines, tools and techniques. History spanning millions of years was even reviewed in a presentation detailing the evolution of the ear.

On an organizational level, the section will offer membership to all ASOHNS members and Australian trainees. ASOHNS itself will generously support the costs of sessions at the annual meetings and also the trainee prize. The committee of the historical section will co-ordinate annual meetings, select presentations from submitted abstracts and award prizes. Currently the authors constitute the committee of the historical section, however we will be encouraging other interested ASOHNS members to join. This committee is a sub-committee of ASOHNS and falls under its overall gover-

nance.

The intention is to continue to hold annual historical sessions at future ASOHNS annual meetings. Secondly, there are future plans to create an education program including webinars in order to increase the exposure to and the availability of historical content. Thirdly, there is also a plan to build on a previous issue of the former Australian Journal of Otolaryngology in 2000, where a number of articles focused specifically on Australian otolaryngology history<sup>(5)</sup>. Finally we aim to engage in collaboration with other international historical sections of otolaryngology. This will hopefully result in a mutually beneficial exchange of ideas and information for all involved.

We hope this newly established historical section will thrive and be successful in promoting the history of otolaryngology in Australia. It is our hope that this will enrich the education of otolaryngologists and their appreciation of how their profession developed over time. The overall aim being not to lose sight of where it has been and therefore to look to the future with the wisdom from the past.

## References

- 1. Gooday G, Lynch JM, Wilson KG, Barsky CK. Does Science Education Need the History of Science? *Isis*. 2008 Jun;99(2):322–30.
- 2. Thornton JL. The importance of the study of the history of medicine. *Health Libraries Review*. 1987 Sep;4(3):139–40.
- 3. Steptoe D, Passananti J. Bush medicine: Aboriginal remedies for common ills. *Australian Geographic* [Internet]. 2012 May 3.

Available from: http://www.australiangeographic.com.au/topics/history-culture/2012/05/bush-medicine-aboriginal-remedies-for-common-ills/

4. Weir N. British Society for the History of ENT [Internet]. *British Society for the History of ENT.* 2011 [cited 2015 Nov 20].

Available from:

 ${\tt http://www.historyofent.com/societyhistory/societyhistory.html}$ 

5. Beaumont GD. Past, present and future. Australian Journal of Otolaryngology. *Australian Journal of Oto-Laryngology*; 2000; 3 (5):389.